

Trail Association for
Community Living

**OUTCOME
MANAGEMENT
REPORT**



2025



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1. INTRODUCTION

It is the goal of the Trail Association for Community Living to ensure this report represents our Outcome Management Systems and is a summary of our efforts to improve our services, to continuously meet the needs of the individuals we support.

2. MESSAGE FROM THE EXECUTIVE DIRECTOR

As we welcome the spring season, we reflect on both moments of sorrow and moments of celebration within our TACL community.

This year began with the heartbreaking loss of two long-term friends and residents of Fruitvale House, Brenda Thompson and Dan Lutz. Brenda and Dan touched the lives of so many people throughout the years and will be deeply missed by their families, friends, roommates, fellow residents, and staff. Their kindness, laughter, and presence will always remain in our hearts and memories.

Our Annual Mother's Day Tea was once again a tremendous success. Thank you to all of the programs, participants, volunteers, and staff who helped make this event so meaningful and memorable for everyone involved. TACL participants also handed out lots of great TACL swag and had a bubble machine this year at the Silver City Days Parade, helping spread awareness and community spirit throughout the event. Thank you to everyone who helped decorate, organize, and participate in this special celebration.

A special thank you also goes out to the many staff members who have stepped up to obtain their Class 4 driver's licenses. Their commitment helps improve accessibility and creates more opportunities for the individuals we support to participate fully in community activities and events.

We are all looking forward to our 3rd Annual Camp Tweedsmuir event, which continues to be a favourite experience for participants, staff, and families alike. It is always a wonderful opportunity to build friendships, invite fellow organizations, enjoy the outdoors and create lasting memories.

This spring also brings an exciting opportunity as we prepare to welcome the CARF surveyors on June 2 - 5. We look forward to showcasing our organization and highlighting the incredible work our staff, participants, families, and community partners do every day to promote inclusion, acceptance and meaningful community involvement.

On behalf of everyone at TACL, I hope you all have a safe and wonderful summer filled with fun, laughter, and sunshine. We look forward to many exciting events and opportunities in the months ahead.

Warm regards,

Nancy Gurr

Nancy Gurr
Executive Director

3. METHODOLOGY

This report is based on information gathered from January 2025 – December 2025. The Trail Association for Community living we used three different methods to collect information: Interviews; File Reviews and Surveys. Data was collected in accordance with The TAOL guidelines for confidentiality.

Interviews are offered as an alternative to the survey process for our Persons Served, providing an opportunity for the individual to verbally express their opinions.

File Reviews provide access to documentation that supports the measurement of the outcome or is an additional measurement to the survey question.

Surveys are circulated in a variety of ways that included the email, mail outs, direct handouts, telephone interviews and direct interviews using an Advocate approved by Persons Served.

The performance improvement process includes asking for feedback from our stakeholders; individuals we support; their families; support networks; staff; community partners and our funders. We take this input, review the data, set goals for improvement, and evaluate how we are meeting those goals.

As you read through our plan, you will see that for each program area, we measure goals based on:

1. **Effectiveness** - A measure that looks at the direct impact of our services on Person's Served.
2. **Efficiency** - A measure that looks at how well we do with the resources we are provided (funds, staffing, time, etc.)
3. **Service Access** - A measure that looks at barriers that exist in accessing our services or moving through our service system.
4. **Satisfaction** - A measure that reflects how satisfied people are with our services.

4. TACL VISION

A. Mission

“Our Mission is to remove barriers and create a community where everyone can thrive.”

B. Vision

“Our Vision is of an inclusive community where individuals of all abilities have equal opportunities to belong and succeed.”

C. Service Principle

- We will create services consistent with the needs of individuals.
- We will create opportunities for those in the individual’s personal network to assist the individuals in defining their support needs.
- We will create an environment where staff members see their role as supporting the needs and aspirations of the individual.
- We will empower staff teams to be cohesive, highly motivated, focused, trained and committed to the Mission of the Association.

5. ORGANIZATION

A. History

The Trail Association for Community Living (TACL) has been providing support and services to people with diverse needs for over 65 years. In the early 1950's many families from the Kootenay's had children with diverse needs living in Institutions throughout the province and the long distance made it very difficult for families to visit. There was a strong belief that these children could learn and live in their own community.

The Kootenay Society for Handicapped Children was founded by Dr. W. J. Endicott, a member of the Trail community as well as families and volunteers to run a school for children with disabilities. known as 'The Maple School'.

Over the years, The Maple School transitioned from the "classroom" to a "workshop" for adults. The classroom was eventually moved into the Sunningdale School and continued with Katie Shaw as a teacher. She was a pioneer for establishing equality of living for individuals with disabilities.

During the 1980's the workshop was relocated to the downtown area and was renamed Trail Contracting Services. We opened our first Residential Care Home - Portland House, to provide life skills training for individuals to live within their community. Over the coming years 4 more additional homes were opened to serve those in need.

TACL purchased property on Riverside Avenue, and it was named the Trail Association Activity Center (TAAC) providing a space for the Associations Day Program, Child and Youth programs and community support services.

In 2004 the Career Development Services came under our umbrella providing employment services including the Community Outreach, Employment Services, Social Enterprises, like "Thrifty Treasures" thrift store, the La Nina Cold Weather Shelter Rossland Avenue House Assisted Living, "Getting to Home" housing placement program and general assistance to our Persons Served as required.

Quick Facts about TACL

- The Trail Association for Community Living employees 144 employees. 47 Full-time; 42 Part-time and 55 Casual and Seasonal Employees.
- The number of persons served at TACL has more than doubled since 2003, from approximately 100 persons served to over 230.
- TACL is one of the oldest organizations in British Columbia having started in 1951; making us 74 in 2025.
- Union Employees – the longest serving staff years –38. Average years of employment service is 7 years
- The average age of our employee is 46 years in 2025.

6. PROGRAM DESCRIPTIONS

A. Residential Program

TACL currently operates four licensed residential homes and three cluster living homes. Each site provides 24-hour staff support.

We promote personal decision making, meaningful community involvement and employment or volunteer placements that assist the persons served to develop and maintain independence in their everyday lives.

The Person Life Plans (PLP) are developed for each individual. Persons Served may receive assistance with cooking, budgeting, hygiene, personal care, laundry, recreation, and grocery shopping. The program has been designed for our Persons Served to maximize their independence and participate fully in the community.

Persons Served are given choices of social and recreational activities offered by the community. This includes bowling, swimming, bingo, movies, theatre, concerts, and assistance with planning vacations. Capabilities, needs and interests of each person direct the selection of activities.

B. Support Services – Community Development Services

i. Employment

CDS is a contractor with Community Living BC to provide Supported / Customized employment services. CDS provides employment supports through a variety of different contracts that assist individuals with reaching their identified employment goals. CDS offers a range of services to individuals who meet the criteria for services through Community Living BC.

ii. Getting to Home Homeless Program

In 2012 CDS worked on a partnership with the Trail Skills Centre to develop a program called “Getting to Home: Addressing Homelessness in Greater Trail (GTH)” which allowed CDS to dedicate staff and resources to this specific issue. The initial funding received was through the Homeless Partnering Strategy this funding provided the development and inauguration of the program. Now in its 8th year, the GTH program continues to grow with funding from sources, such as the Homeless Partnering Strategy, local municipal governments, Teck, United Way, and the Columbia Basin Trust. CDS receives no ongoing core funding for this program and therefore CDS is looking at developing partnerships and sustainable funding opportunities to ensure the success of this program.

iii. La Nina Homeless Shelter

In 2023 TACL/CDS has negotiated a contract to operate the shelter providing supports to individuals that are homeless 24 hours a day, 7 days per week. Each morning the GTH housing facilitator meets with shelter guests to develop a housing needs plan and assist them to identify the supports they will require to be successful in reaching their housing goals. In 2024 the Shelter moved to its new location at 2039 Riverside Avenue Trail BC. The new Shelter was built and funded by BC Housing and accommodates 25 guests.

B. Support Services – Community Development Services cont.

iv. Outreach & Community Inclusion Individualized Support

Currently TACL is contracted with Community Living BC to provide 400 hours per week of 1:1 outreach/community inclusion services to individuals with complex needs who are living independently in the community. This includes individuals that have a medical diagnosis of FASD, Developmental Disability and/or Autism and experience deficits in their adaptive functioning skills may meet the criteria for support.

Individuals supported within this program often struggle with maintaining their housing as well as employment in the community. They require very unique and specific supports in order to complete daily living tasks and also to be safe in their community as they are at a high risk of being taken advantage of financially, physically and emotionally.

Within our outreach program CDS provides a variety of groups to assist individuals to build their skills while also having the opportunity to socialize with their peers.

v. Trail Youth Centre

TACL started the Trail Youth Centre in March 2018 and has been busy with this transition by connecting with the youth that utilize the centre. TACL will also be busy re-establishing networks with other youth support providers to ensure strong collaboration is taking place as the centre moves forward under TACL Management.

C. Day Program

Day Program assists our Persons Served to prepare for paid employment or volunteer work. This includes finding their employable skills and interests to help them with career planning. Job readiness training and coaching improve these skills. We also encourage an active lifestyle.

Employment Skills:

- Problem Solving
- Resolving Conflict
- Team Building
- Communication Skills
- Stress Management
- personal awareness
- Self-confidence
- Managing Money
- Grocery Shopping
- Competency-Based Learning
- Cooking and Food Nutrition

Active Lifestyle:

- Swimming,
- Bowling,
- Walking,
- Dancing
- Social Groups
- Day Trips - Local Lakes
- Sledding,
- Arts & Crafts
- Movie Days

7. 2025 GOALS

Through continuous dialogue with a variety of stakeholders including persons served, their families, our funders and employees, the Trail Association for Community Living makes constant efforts to change and improve service delivery. Shared knowledge helps us to revise our approach to persons served resulting in the development of best practices within the organization, such as:

- A. Improvement of our Day Program Services** to provide more focused and flexible service options for persons served, with an emphasis on the employment first initiative. Employment first initiative for persons served continues to have a positive impact on the quality of life for the individuals we support. Our vision for our Day Program is not limited to employment-based focus exclusively; we are also focusing on the development and support opportunities for persons served to experience continuous learning throughout their adult years. The learning objectives may include but are not limited to; Life skills, interpersonal skills and personal safety and community inclusion through a competency-based model. After speaking with persons served in our Residential sites, we have given these individuals the choice to attend our Day Program or run community inclusive activities and employment goals from their residential site. According to feedback from Surveys and Residential Council group all Residential sites are thriving using the Residential Based Community Inclusion Day program scheduled. It has been reported that the persons served from residential sites enjoy the less hectic day supports from their own home rather than Day Program. Residential serves do continue to participate in Fun Fridays and are able to visit with their peers from the other sites including Day Program.
- B. Promote values and competency-based training** for our employees, TACL wants to ensure that all our employees continue to experience professional growth and to have opportunities to revisit the values that we consider to be at the core of the work we do each day. Organization values provide a guide for employees in their approach and support to individuals served through an array of services. To date we have developed a power point presentation and additional 4-hour orientation for new employees. This 4-hour orientation will consist of reviewing several key Policies and Procedures, Incident Reporting, Objective Documentation, and review of the TACL programs and Mission, Vision, and Service Principles. TACL will recommend 6-8 more staff to take the next set of training sessions held by pivot point.
- C. Expanding our presence in the community**, the feedback we received through our Surveys and our Self Advocate/Residential and Parent Support Group has helped us to understand that we need to further explore and place an emphasis on getting the word out in the community who TACL is and what great things we do! TACL continues to work on putting the TACL footprint in our community, this past year we became the go to people at the farmer's market. TACL individuals could be found at each Market assisting community member with their purchases. Several Community Inclusive Fund-Raising activities e.g., Purdie's Chocolate sales, Baking Brookes and proceeds going to Breast Cancer, handing out Candies at Warfield Community Hall at Halloween, Theatre Production open to Community members, Meat Draw, Helping Hands at the Trail Farmers Market, and the continued success of the TACL website.

- D. **Work Collaboratively** with representatives of Community Living BC to provide greater access to services for persons served. The TACL Management teams meets semiannually and ongoing to discuss some of our harder to support persons served.
- E. **Assist Persons Served** to build their personal networks, TACL places a high value on the importance of relationships in the lives of the individuals we support. We believe that relationships are the foundation to a good quality of life and help to keep people safe. In the last year.

8. ENHANCING THE QUALITY OF OUR SERVICES

Key Steps:

1. Obtain and retain accreditation. TACL continues to work towards improving serves and is preparing for another three-year accreditation in 2026.
2. Fully integrate Personal Outcome Measures values and principles into how people are supported.
3. Ensure employees are appreciated for helping people work towards their desired outcomes.
4. Ensure compliance with all relevant legislation.
5. Ensure the availability of resources in a variety of formats that explains the legislation.
6. Provide training in the use of technology that improves services and creates efficiencies.
7. Ensure feedback from the TACL Community is sought, received, acted on and followed up: Includes people served /families we are already supporting, schools and other service providers.

9. CARF ACCREDITATION

In June of 2023, the Trail Association for Community Living attained a 3-year, accreditation from the Commission on Accreditation of Rehabilitation Facilities (CARF). CARF accreditation means that an organization has made a commitment to continually enhance the quality of its services and programs and its focus on the satisfaction of the persons served.

A. What is CARF?

CARF is an international, not-for-profit organization that accredits human services providers. Founded in 1966 as the Commission on Accreditation for Rehabilitation Facilities, the accrediting body is now known as CARF.

B. What is accreditation?

Accreditation is a process that demonstrates a provider has met standards for the quality of its services. CARF establishes these standards to guide providers in offering their services. CARF also uses the standards to evaluate how well a provider is serving people and how it can improve.

C. What is a CARF survey?

As a step toward accreditation, a provider invites CARF to send a team of professionals, called surveyors, to visit its site and evaluate its services for quality. The surveyors consult with staff members, interview people who use the provider's services and review policies and procedures. Based on the surveyors' review, the provider may be awarded

CARF accreditation for one or three years. In some cases, the provider may need to improve its services before it can become accredited.

10. PERSONS SERVED

A. Characteristics of the Persons Served

This section summarizes the results of the Trail Association for Community Living compilation of client demographic information in the programs seeking accreditation.

The person served characteristics that the agency has reviewed for this report includes age, gender, cultural background, and service areas.

B. Celebrating Diversity

TACL welcomes and values diversity. Some of the ways we do this are by including the perspectives of many people in our decision-making; having staff and volunteers who reflect the diversity of the community; training staff, caregivers, and volunteers in culturally competent service delivery; creating an organization that is free of discrimination and harassment; and ensuring equitable access to our services for all.

The following summaries are based on information collected on clients receiving service between January 1, 2025 – April 30, 2026.

Age of Person Served	# Of individuals	Percentage
Birth to Five	0	0%
Six to Seventeen	0	0%
Eighteen to Forty	128	55%
Forty-one to Sixty-Five	99	43%
Sixty-six to Eighty-Five	5	2%

Gender of Persons Served	# Of individuals	Percentage
Male	99	42.67%
Female	130	56.03%
No Gender Expressed	3	1.29%

C. Ethnic Background

This is the third year that the Trail Association for Community Living has collected demographic information for the entire organization. Therefore, a comparative analysis between years is somewhat difficult. However, certain trends and conclusions can still be drawn from analyzing the TACL data in relation to statistical information provided by the City of Trail.

Ethnicity	# Of individuals	Percentage
African American/Black	0	0%
Asian	1	0.43%
Caucasian/White	196	84.48%
First Nation	22	9.48%
Hispanic/Latino	6	2.59%
South Asian	7	3.02%
Other	0	0.00%

The City of Trail is situated on the Columbia River in the West Kootenay region of British Columbia where 8,250 people (City of Trail Webpage) call home. It is a special place with affordable real estate, outstanding recreational facilities and an abundance of outdoor activities. In addition, it has an active arts and culture community and a variety of service clubs and organizations.

D. Primary Language

This information is not sought, unless it is self-evident, and is relevant to the presenting issues. The Kootenay’s and surrounding area are primarily English speaking.

11. HUMAN RESOURCES PLANNING 2025

Goals:

1. Hiring, have sufficient staff to not have Overtime;
2. Performance, Improve staff performance with training and mentoring;
3. Staff turn-over reduction of 10%;
4. Hire Administrative Assistant to replace Cindy Cook moving to Payroll;
5. Hire additional Administrative Assistant;
6. Implement Ceridian Automated Schedule for payroll;

Hiring:

1. Full time ad to be at the Work BC and an ad is to be run on indeed for 1 week every month.
2. Promote staff to recruit via “word of mouth”;
3. Retention through leadership and being more responsive to staff suggestions;
4. Hired a new Office Administrator;
5. Payroll was transferred to Cindy Cook; and
6. ADP was unable to meet our requirements. Payroll went back to Ceridian.

Performance:

1. All staff must complete the 9 modules in Open Learning to be eligible for any position;
2. All staff must obtain their BCDL Class 4 unrestricted, within 500 hrs of hire to be eligible for positions that require this qualification; and
3. Annual Staff Assessment process updated and streamlined.

Staff Turn Over Reduction

1. Follow CSSEA pay guidelines;
2. Improve Staff Assessment to be timelier and less subjective; and
3. We struggled with turnover this year but this appears to be common in all employment sectors and we have not identified yet why this is so.

Key Positions

1. Executive Director, no plan to leave 2026;
2. Financial Manager, no plan to leave 2026;
3. CDS Program Manager, no plan to leave 2026; and
4. Payroll Administrator, no plan to leave 2026.

12. STAFF TRAINING 2025

Workforce Development, Training, and Competency Enhancement Plan

Purpose

The Training Association for Community Living (TACL) is committed to providing ongoing education, professional development, and competency-based training to ensure employees are equipped to deliver safe, ethical, person-centered, and high-quality services. This Training Plan supports continuous quality improvement and aligns with related staff competency, health and safety, person-centered practices, risk management, trauma-informed supports, and organizational excellence.

This plan applies to all TACL employees, including management, residential staff, employment staff, outreach workers, payroll staff, instructors, and support staff.

This plan is a living document and is reviewed semi-annually or as needed. Additions and updates are made in response to organizational needs, staff requests, and the availability of relevant training opportunities.

Guiding Principles

The following principles guide TACL's training practices:

- Person-centered and rights-based service delivery
- Respect, dignity, and inclusion for all persons served

- Trauma-informed and culturally responsive practices
- Safe and ethical service provision
- Continuous learning and professional growth
- Accountability and competency development
- Community inclusion and meaningful participation
- Health, wellness, and risk reduction

Training Objectives

The objectives of this Staff Training and Professional Development Plan are to:

1. Ensure all employees meet mandatory competency and regulatory requirements.
2. Support staff in delivering quality person-centered services.
3. Promote safe work practices and risk management.
4. Strengthen leadership development and succession planning.
5. Enhance communication, documentation, and behavioural support strategies.
6. Improve staff retention, engagement, and workplace wellness.
7. Ensure compliance with CARF standards, licensing requirements, and organizational policies.
8. Support continuous quality improvement throughout the organization.

Orientation and Foundational Training

All newly hired staff are required to complete orientation and foundational training during their probationary period and/or within the first 500 hours of employment.

Mandatory Open Future Modules

The following Open Future modules are completed within the first 500 hours of employment: 2025-2028 – On-going

1. Introduction to Your Role
2. Abuse Prevention — Long Version
3. Active Support
4. Boundaries
5. Challenging Behaviour
6. Do the Right Thing
7. Health and Safety
8. Sexuality and Relationships
9. Understanding and Promoting Rights

Modules to complete after the first 9 above

10. Autism and Sensory Processing
11. Breaking Bad News
12. Building Friendships
13. Dementia Explained
14. End of Care
15. Dementia Explained Strategies

Additional Orientation Topics 2025-2028 Ongoing

- Mission, Vision, and Service Principles
- Rights Statement Review
- Emergency Procedures and Safety Protocols
- Incident Reporting Responsibilities
- Medication Administration and Medication Errors
- Documentation Standards
- Scheduling Procedures
- Confidentiality and Professional Conduct
- Recognizing and Reporting Abuse
- Person-centered Service Provision
- Trauma-Informed Practices
- Workplace Health and Safety

Mandatory Annual Training Requirements

The following training is required annually or as identified through licensing, CARF standards, risk management, and organizational review:

Training	Frequency
First Aid and CPR Certification/Recertification	As Required
MANDT	As Required
Competency Based Winter Driving	Annual
Review of TAFL Policies and Procedures	Annual
Review of Mission, Vision, Service Principles, and Rights Statement	Annual
Abuse Prevention and Duty to Report	Annual
Health and Safety Review	Annual

Training	Frequency
Emergency Procedures and Incident Reporting	Annual
Documentation Standards	Annual
Boundaries and Ethical Conduct	Annual
Trauma-Informed Practices	Annual
Person-Centered Service Provision	Annual
Food Safety/ WHIMIS	As Required
Disabilities in the Workplace	As Required
CLBC Privacy Training	Annual
Competency-Based Incident Reporting	Annual
Competency-Based Medication Administration	Annual
Agency Wide Evacuation Training and Drill	Annual

Core Professional Development Training

The following professional development opportunities support competency development and service excellence:

Behavioural Supports and Crisis Prevention

- Pivot Point — Reinforcement and SR Strategies, NVCPI, Person-centered Service Provision, ABC's of Behaviour, and Developing New Behaviour – 2025-2026
- MANDT Training- 2025- Ongoing
- MANDT Instructor Training- 2019-Ongoing
- MANDT Train-the-Trainer Program- 2019-Ongoing
- Technical Skills Train-the-Trainer- 2023-Ongoing
- Positive Behaviour Interventions and Supports- 2025
- Healthy Communication – 2025- Ongoing
- Dementia Explained – 2025-Ongoing
- Dementia Strategies- 2025- Ongoing
- Healthy Conflict Resolution -2025 -Ongoing
- Healthy Relationships -2025 -Ongoing
- Epilepsy – 2024- Ongoing
- Liability and Legal Issues- 2025- Ongoing
- Medical Risk Factors- 2025- Ongoing
- Medication Admin Training – 2025 -Ongoing
- Trauma-Informed Services -2025-Ongoing
- Train-the-trainer PATH: Planning Alternative Tomorrows with Hope, Using PATH as an exemplary tool. 2026

- Challenging Behaviour2 – OFL- 2023-Ongoing
- Behaviour Planning in Community 2025- 2026
- Adults with Developmental Disabilities and Dementia 2025-2026
- Fostering Self-Determination for Adults with Developmental Disabilities 2025 -2026

Disability and Specialized Support Training

- FASD — Neurobehavioral: A Brain-Based Approach - 2025
- FASD Training Program — Online Training – 2025-2026
- End of Life Care – OFL 2024- Ongoing
- Understanding Dementia — offered through Interior Health – 2025- 2026
- Prevention, Screening, Diagnosis, and Support for Persons with Developmental Disabilities Who Develop Dementia - 2026
- Supporting Aging Adults – 2025
- Mental Health – OFL – 2025 Ongoing
- Profound and Complex Disabilities – 2025-Ongoing
- SMART Goal Training 2023- Ongoing
- Sexuality and Relationships OFL – 2024- Ongoing
- FASD - OFL – 2025 -Ongoing
- Creating Caring Communities: The Cultural Context of High-Risk Substance Use in Youth - 2026
- Spectrum: Lifespan Autism Resources & Training 2024- 2025
- Indigenous Cultural Awareness - 2025
- Intermediate Gender Diversity- 2025
- Understanding Autism, PDA, and ODD: Strategies to avoid struggles- 2025
- The Fatal Five (5 most common preventable fatalities in persons with disabilities)

Safety and Risk Management

- ANKORS — Sharps Safety Practices – 2025 Ongoing
- Canadian Red Cross Prevention in Motion — Abuse Prevention for Adults - 2025 - Ongoing
- Abuse Prevention – OFL – 2023- Ongoing
- Understanding and Promoting Rights – OFL 2023-Ongoing
- Personal and Intimate Care – OFL 2025- Ongoing
- Supporting and Understanding Communication- OFL 2024- Ongoing
- Managing Hostel Interactions- 2025-2026
- HSCL Occupational Therapist-performed Training Regarding Safe Lifts, Transfers, and Body Mechanics- Ongoing
- Risk Management Plan- 2025-2026
- HSCL staff training for all Transfer of functions / Ongoing annually

- Workplace Health and Safety/Committee – Ongoing
- Working Alone Procedures – Ongoing
- Health and Safety Training – OFL – ongoing
- Working Alone -OFL- ongoing
- Infection Control and Bloodborne Pathogens- OFL-ongoing

Employment and Community Inclusion Supports

- Non-Traditional Strategies to Facilitate Employment — Making It Work- 2025
- Indigenous culturally safe employment services -2025
- Marketing in Supported Employment
- The Art of Creating Opportunity: Tools for Achieving Employment Outcomes- 2025
- Self-Care and Boundary Setting on the Worksite -2025- 2026
- Supported Employment Fundamentals – 2025
- Customized Employment Training – 2025
- Supported Employment Marketing – 2025

Ethics, Leadership, and Organizational Excellence

- BC CEO Network — Semi-Annual Training for Executive Director and Financial Manager- 2025 -2026
- Ceridian and Municipal Pension Plan — Online Training for Payroll Staff – 2025-2026
- Succession Planning Training - 2026
- Leadership Development Opportunities – 2025-2026
- Management & Leadership Training: Conversations- 2025-2026
- Management & Leadership Training: Managing Emotions- 2025-2026
- Management & Leadership Training: Person-centered Supervision- 2025-2026
- Supervisory Skills Development- 2025- 2026
- Quality Improvement and Risk Management Training – 2025

Succession Planning and Leadership Development

TACL recognizes the importance of building organizational capacity and preparing future leaders within the organization. Succession planning activities support continuity of services, leadership stability, and employee growth opportunities.

Succession planning initiatives include:

- Leadership mentoring opportunities
- Cross-training between departments
- Supervisory skill development
- Participation in management meetings and planning processes
- Train-the-trainer opportunities

- Coaching and mentorship
- Professional development planning
- Delegation of leadership responsibilities
- Support for external leadership education and workshops

Employees demonstrating leadership potential may be identified through performance evaluations, professional development goals, and organizational needs assessments.

Training and Education Opportunities for Persons Served

TACL is committed to supporting lifelong learning, self-advocacy, personal growth, safety awareness, rights education, and community inclusion for persons served. Educational opportunities are offered on an ongoing basis and are designed to support

informed choice, independence, relationship building, employment readiness, health and wellness, and personal safety.

Training opportunities are provided through Open Future Learning, self-advocacy initiatives, community partnerships, guest speakers, and in-house educational sessions.

Open Future Learning – Side by Side Modules

The following Side by Side modules are available and offered on an ongoing basis to persons served:

- About Abuse - 2025- Ongoing
- About Autism - 2025- Ongoing
- About Being in Control - 2025- Ongoing
- About Friendships and Community – 2025-ongoing
- About Person-centered Planning – 2025 - ongoing
- Circle of Friends- - 2025- ongoing
- Employment Part 1: Thinking About Employment - 2025- ongoing
- Employment Part 2: Types of Employment – 2025- ongoing
- Employment Part 3: Finding and Keeping Employment – 2025- ongoing
- Finding and Building Community – 2025- ongoing
- Finding and Building Friendships - – 2025- ongoing
- Looking After My Mental Health Part 1 – 2025- ongoing
- Looking After My Mental Health Part 2 – 2025- ongoing
- Looking After My Mental Health Part 4 – 2025- ongoing
- My Rights – 2025- ongoing
- Our Great Working Relationship Part 1 – 2025- ongoing
- Our Great Working Relationship Part 2 – 2025- ongoing

- Our Great Working Relationship Part 3 – 2025- ongoing
- Preventing Abuse and Staying Safe – 2025- ongoing
- Relationships, Dating, and Intimacy Part 1 – 2025- ongoing
- Relationships, Dating, and Intimacy Part 2 – 2025- ongoing
- Relationships, Dating, and Intimacy Part 3 – 2025- ongoing
- Staying Connected to Social Media – 2025- ongoing
- Staying Safe on Social Media – 2025- ongoing
- Who Am I – 2025- ongoing

Additional Training and Educational Opportunities for Persons Served.

During 2025–2026, the Self-Advocate Group provided additional educational opportunities by inviting community guest speakers to monthly meetings.

Additional educational opportunities and community safety initiatives included:

- Securing an RDSP Savings Account
- Guest speaker presentations
- Staying Safe at Home and in the Community — RCMP Guest Speaker
- Self-Advocate Group training sessions
- Safer at the Beach
- Fire Safety
- Spotting Dangers:
- Crossing the Street Safely
- Water Safety
- Monthly fire drills are completed at each residential site. Persons served participate in drills and provide feedback.

Training Goals of Person Served: Education and Training

Educational opportunities for persons served are intended to:

- Promote self-advocacy and informed decision-making
- Support rights awareness and abuse prevention
- Increase community safety and independence
- Enhance relationship and social skills
- Promote employment readiness and inclusion
- Support mental health and wellness
- Encourage meaningful participation within the community
- Build confidence, self-esteem, and personal growth

TACL recognizes the importance of accessible learning opportunities and supports persons served in participating in education and training that reflects their goals, interests, strengths, and support needs.

Training Documentation and Tracking

TACL maintains documentation of all employee training and professional development activities. Documentation may include but not limited to:

- Attendance records
- Certificates of completion
- Competency checklists
- Training sign-off sheets
- Annual performance evaluations
- Professional development plans
- Medication competency records
- Bullying Harassment Competency-based
- Winter driving Competency-based
- Incident Training Competency-based
- FOIPA Competency-based Privacy
- First Aid and CPR certification records

Training records are reviewed regularly to ensure compliance with organizational requirements, licensing standards, and CARF expectations.

Competency Evaluation

Employee competency is evaluated through:

- Direct observation
- Skills demonstration
- Probationary reviews
- Annual performance evaluations
- Incident review and follow-up
- Coaching and supervision
- Staff feedback and reflective practice
- Training completion and comprehension reviews

Additional training or coaching may be assigned where competency gaps are identified.

Continuous Quality Improvement

TACL is committed to continuous quality improvement and regularly reviews training needs through:

- Staff, Persons served, Family and caregiver, stakeholder feedback
- Incident and risk reviews
- Residential Council and Self-Advocate meetings
- Staff Performance Review
- Licensing, CLBC and CARF Standards
- Changes in legislation or best practices
- Health and safety reviews
- Quality improvement initiatives
- Strategic Planning
- Program evaluation outcomes

Training priorities may be adjusted annually to respond to organizational needs and emerging trends within community living services.

Management Responsibilities

Management is responsible for:

- Ensuring staff have access to the required training
- Monitoring training compliance
- Supporting professional development opportunities
- Maintaining training records
- Evaluating organizational training needs
- Promoting a culture of learning and continuous improvement

Employee Responsibilities

Employees are responsible for:

- Participating in mandatory training
- Maintaining required certifications
- Applying learned skills in practice
- Seeking clarification and support when needed
- Participating in professional development opportunities
- Following TACL policies and procedures

Review Schedule

This Staff Training and Professional Development Plan will be reviewed annually and updated as needed to ensure alignment with:

- TACL Mission & Vision
- Survey responses
- CARF Standards
- Licensing requirements
- CLBC Service Deliverables
- Occupational Health and Safety requirements
- Organizational priorities
- Best practices in Community living Services
- Strategic Planning

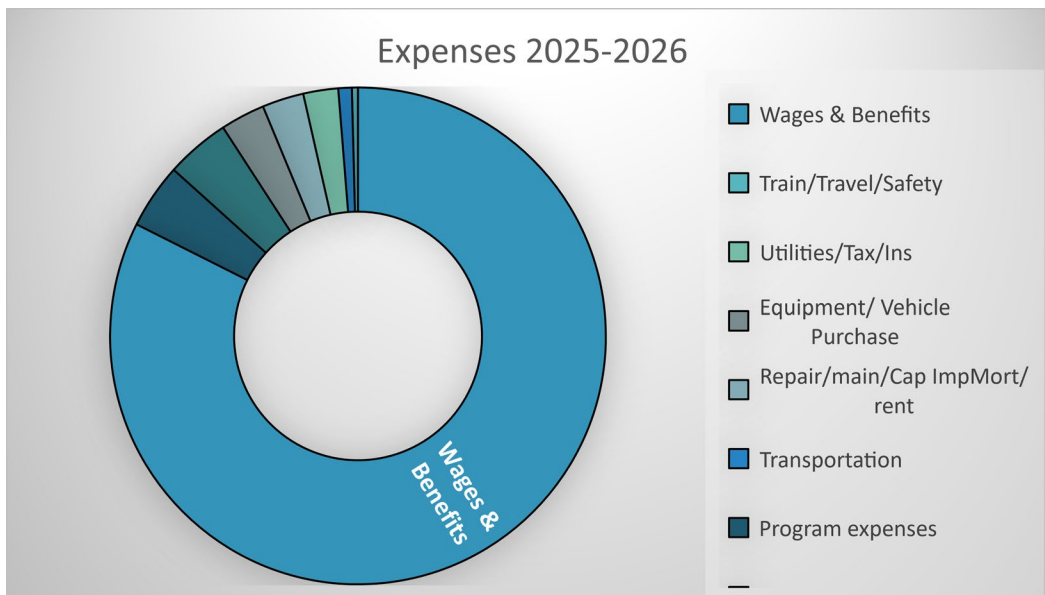
12. BUSINESS REPORT



EXPENSES 2025-2026

Wages & Benefits	\$7,949,597.49
Train/Travel/Safety	\$38,440.78
Utilities/Tax/Ins	\$219,842.94
Equipment/Vehicle Purchase	\$279,808.07
Repair/Maintenance/Capital Improvement/Mortgage/Rent	\$261,343.36
Transportation	\$84,803.64
Program expenses	\$409,623.95
Admin Expenses	\$403,462.66
TOTAL	\$9,646,922.89

Prior to Financial Audit



13. RISK MANAGEMENT

A. INTRODUCTION

The adoption of a Risk Management (“RM”) Plan will assist the Trail Association for Community Living (“TACL” or “Association”) to reduce exposure to risk and any potential legal liability. The risk management plan is simply a system that is intended to reduce risk in the Association.

The overall RM Plan can be modified or adopted to suit the affiliated members to help reduce risks within the organization.

The RM Plan will consist of four phases:

1. Risk Identification
2. Risk Assessment
3. Risk Evaluation
4. Risk Implementation and Monitoring

The Risk Management Plan is directly linked to the Business Plan and, as a result, the Strategic Plan.

B. BENEFITS OF MANAGING RISKS

The RM Plan will assist in increasing safety and reducing injuries and accidents as well as ensuring compliance with legal and financial obligations. While the plan will not necessarily prevent legal action, it can be used as part of a defense against any litigation as evidence that the Association has undertaken all reasonable steps to eliminate or reduce risks. The following are the primary benefits of implementing an RM Plan:

1. Assist in the management of the business, public events, development plans and activities.
2. Allow costs and budgets to be more accurate.
3. Create a greater awareness of the safety of Persons Served, administrators, volunteers, and staff.
4. Ensure compliance with government standards.
5. Improve communication internally and externally.
6. Assist in identifying weaknesses within the organization.
7. Health and Wellbeing initiative.
8. Assist in the development of policies and procedures; and
9. Greater ability to create contingency plans to deal with any situation to the best of the Association’s ability.

C. RESPONSIBILITY OF MANAGING RISKS

The Executive Director is required to ensure all risks are reduced within TACL. Management, staff and volunteers are to use their discretion when risks are encountered whether to continue or not.

The Executive Director must communicate with the Board of Directors regarding risk management and implementation. Overall, the ED is responsible for controlling the risks within the organization on an administrative basis, ensuring the risks are reduced to prevent any negative effects to the association.

D. HAZARD AND RISK REDUCTION INITIATIVES

The following actions to minimize hazards and risks have been implemented:

1. Risk assessments conducted on every Person Served.
2. Updated Violence Risk Assessment process.
3. Improved employee accident tracking and reporting.
4. Improved Incident Reporting process.
5. Updated Hazard Risk Assessment form.
6. New maintenance program.

E. OVERVIEW OF RISK MANAGEMENT WHAT IS RISK MANAGEMENT?

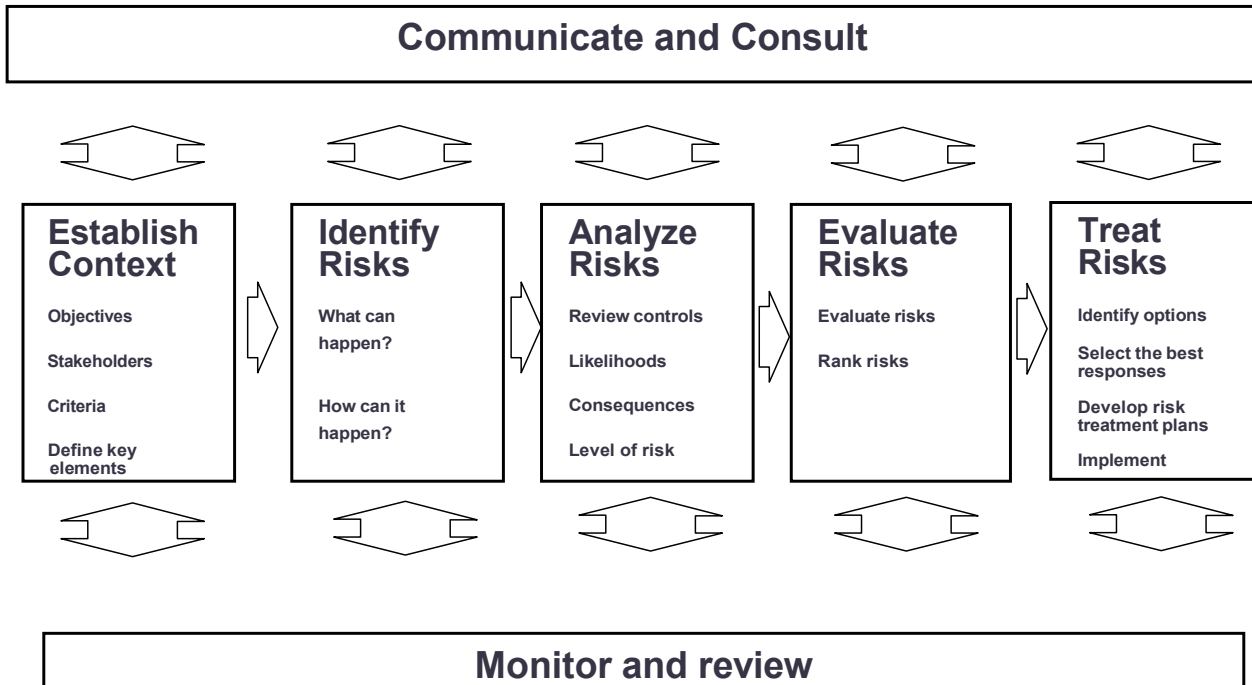
Risk management is the term applied to a logical and systematic method of:

1. Identifying
2. Analyzing
3. Assessing
4. Treating
5. Monitoring
6. Communicating risks associated with any activity, function or process in a way that will enable the Association to minimize losses and maximize opportunities.

Risk Management is an integral part of good management practice and is a positive reason to take the initiative to implement, among other things, safe practices.

Risk Management is an ongoing process that needs to be reviewed on a regular basis to minimize the impact of risks and create awareness of new risks that may affect the organization.

The risk management process is detailed below:



F. LEGAL RESPONSIBILITIES

TACL and its members should, to the extent possible, provide a safe environment, sound activity planning, adequate supervision, proper coaching and instruction, correct explanation of equipment, warning of any inherent dangers, a complete evaluation of Persons Served for injuries/ limitations, and relevant personal details as are required for the sport.

G. RISK IDENTIFICATION

The first phase of the RM Plan is risk identification. TACL is the provincial association for cycling racing. As a result of this, some of the risks identified are relevant to the affiliated organizations.

The purpose of risk identification is to identify and depict the possible events or outcomes that may influence TACL whether it is positive or negative.

There are three areas that need to be considered when identifying risks and they are as follows:

1. What are the possible sources of risks?
2. What is at risk? and
3. What are the effects or consequences?

The following table shows the starting point on how to identify the risk within TACL.

Diagram 2

What are the possible sources of risks?	What is at risk?	What will the effect or consequences be?
Relationships	People	Injury
Commercial	Persons Served	Death
Legal	Management	Damage
Financial	Public	Loss
Political	Volunteers	
Members		

Human Factors	Assets	
Health	Structure	
Human error	Equipment	
Negligence	Grounds	
Anti-social behaviour	Finances	
Criminal activities	Vehicles	

Natural Events	Intangibles	
Fire	Good will	
Adverse climatic changes	Reputation	
Earthquake		
Vermin/ Insects		

Equipment/ Technology		
Design fault		
Misuse		

The purpose of risk assessment is to depict how the risk will affect the organization, the likelihood of the event occurring and how to reduce the probability that the risk will happen.

In order to do so, risks need to be documented in order of priority and rating level. This can be easily displayed in TACL’s Action Plan (Annex A).

H. RISK ANALYSIS

The next phase of the RM Plan is risk analysis to evaluate the severity of each risk factor. There are three types of methods to analyze and evaluate risks. They are as follows:

I. QUALITATIVE

This method involves using knowledge, experience and anecdotal evidence that will assist in producing intuitive decisions about the probable level of risks which may affect the organization.

J. QUANTITATIVE

In this method, instead of applying a descriptive word, a numerical value is applied, this is dependent upon the evidence supplied to give the capability to analyze the frequency and exposure.

K. SEMI- QUANTITATIVE

This method uses a combined approach of both qualitative and quantitative. Instead of using a descriptive word a numerical value is placed in the priority box, this allows the indication of risk priority to be easier to understand.

TACL will be adopting the qualitative method, in most cases, because there is more description regarding the risk, and it will allow the reader to understand the risks associated with the organization on a higher level.

To assess and evaluate the risk you need to decide on the consequences/impact it will have on the organization and if the risk is acceptable or unacceptable. By rating the consequences in terms of impact, you can get a general overview on how extensive the risk is to the organization. The table below shows the impact the consequences would have upon TACL.

RATING	IMPACT
Catastrophic	The organization would default.
Major	Majority of the organization's structures would be threatened or put at severe risk.
Moderate	Some of the organization's structures would be threatened and the elements may be rectifiable with extensive work.
Minor	The organization would be threatened, but restorable with work.
Negligible	Nil or any threat to the organization, easily restorable with minor effort. Would not affect the structure of the organization.

The likelihood of the situation needs to be taken into consideration when assessing the risks that may affect the organization. Following the same format from the above table, this table shows how often the effect would occur.

RATING	LIKELIHOOD
Almost certain	The risk may or will occur on frequent basis numerous times in the year.
Likely	The risk may arise, likely to occur at least once per year.
Possible	There is a chance the risk may arise, not on frequent basis and unlikely it would occur once a year.
Rare	The chance of the risk is occurring is very unlikely but could occur in extreme circumstances.

Once both tables have been taken into consideration it can be formulated into a simple system to show qualitative analysis.

Severity	Catastrophic	Major	Moderate	Minor	Negligible
Likelihood					
Almost certain	Very high	Very high	High	Significant	Moderate
Likely	Very high	High	Significant	Moderate	Low
Possible	High	Significant	Moderate	Low	Low
Rare	Significant	Moderate	Low	Low	Low

L. RISK EVALUATION

By determining the priority of a risk, you can depict the significance it will have on the organization. Risk tables will allow TACL to determine whether the risk is acceptable or unacceptable. An example of an unacceptable risk is a preventable injury requiring hospitalization.

When deciding if a risk is acceptable or unacceptable you need to take the following factors into account:

1. The controls the organization has already implemented.
2. The financial effect the risk will have on the organization if it is left untreated or managed accordingly.
3. Opportunities and benefits the risk will present to TACL.
4. How the risk will affect the stakeholders.

The risk evaluation determines the priority; it is more in depth than the risk analysis because this phase allows TACL to place risks in order of priority and the requirements that are needed to control the risk. Risks are determined by a priority rating.

M. MANAGEMENT OF RISK

The risk treatment phase is a culmination of identifying and assessing risks that are acceptable or unacceptable to TACL.

The purpose of this phase is to respond to the risks that have been identified and assessed. It is mandatory to manage the risks or they will still remain present in TACL and the time taken to assess and identify will be considered a waste of time.

When managing risks, they need to be attended to in order of priority as designated in the analysis and evaluation phase. By identifying the risks using the assessment tables it will allow TACL to develop and implement a risk action plan. As a result of this, TACL will be able to foresee the most cost-efficient method to treat the risks identified within the organization.

The risk treatment is documented in a Risk Action Plan (see Annex B).

The main purpose of risk treatment is to outline the response for those risks that have been identified. You can evaluate the risks in various methods such as cost, benefits, feasibility and the effect it will have on the organization. When implementing the risk treatment, you need to take into consideration the most effective and practicable system that includes the objective of reducing risks within TACL to an acceptable level.

N. MONITOR AND REVIEW

The purpose of this phase is to monitor and review the risks associated with TACL. Supervising, checking, observing and recording the progress of risks identified in order to document change within the organization to achieve monitoring. Reviewing is achieved by making a conscientious effort to assess plans and policies in place to reduce the risk within the organization.

Risks need to be monitored and reviewed on a regular basis to manage existing risks and detect new risk. This is achieved by referring to the register of risks and cross-referencing to the Risk Action Plan.

To ensure the risks are managed regular risk audits need to be undertaken, as a result of this the Register of risks and Risk Action Plan will need to be updated. The Executive Director is responsible for conducting and maintaining the Risk Management within TACL.

O. REPORTING RISKS

The Executive Director is required to submit reports to the Board of Directors on a regular basis and an annual risk report will be presented to the affiliates at the directors' meeting.

TACL INSURANCE POLICIES

- Business Insurance
- Public and Property Liability Insurance
General Liability
- Board and Director Insurance
Accident Coverage
- Vehicle Insurance

P. STAKEHOLDERS

Stakeholders are people or organizations who may be affected by a risk or an activity where TACL is held responsible.

The stakeholders of TACL are as follows:

- Persons Served
- Community
- Staff
- Sponsors
- Suppliers
- Volunteers

Q. RISK MANAGEMENT POLICY

Risk Management Policy	
Policy	<p>TACL aims to use strong risk management practices to support and enhance our activities in all areas of our organization. TACL will ensure risk management is an integral part of all our decision-making processes.</p> <p>TACL will use a structured risk management program to minimize reasonably foreseeable harm to people, disruption to operations and damage to the environment and property. We will identify and take advantage of opportunities as well as minimizing adverse effects.</p> <p>TACL will train our staff and volunteers to implement risk management effectively. We will strive to continually improve our risk management practices.</p>
Responsibilities	<p>The Executive Director is accountable to the Board for the implementation of the risk management process and ultimately responsible for the management of risks in the business.</p> <p>All personnel are responsible for managing risks in their areas.</p>
Process	<p>A risk management systematic process has been established, based on the Canadian Standard CAN/CSA – Q850-97. Everyone involved with the application of risk management should use this process for guidance.</p>
Monitoring & Review	<p>The Executive Director will monitor and review the implementation of the risk management program.</p> <p>The Executive Director will facilitate the development of a common risk management approach across areas of our business by:</p> <ul style="list-style-type: none"> • Implementing the risk management program; • Sharing information with broad applicability across all areas; • Reporting on the progress of implementing the risk management program.

REGISTER OF RISKS

RISK AREAS	LIKELIHOOD	SEVERITY	RISK	MITIGATION	TRACKING / REPORTING
LEGAL					
self-dealing	Rare	Moderate	Low	Code of Ethics, P&P 3.28,5.2.1	On complaint
private benefit/inurement	Rare	Moderate	Low	Code of Ethics, P&P 3.28,5.2.1	On complaint
jeopardizing investment	Rare	Moderate	Low	Budget, Multiple signatures	1/4 Reports, Annual Audit
breach of fiduciary duty / conflict of interest	Rare	Moderate	Low	Code of Ethics, P&P 5.2.1, Board Training, Board Policy	Regular Board Meeting, Outcome Report
OPERATIONAL/FINANCIAL					
improper tax returns	Rare	Moderate	Low	Outsource to Experts	1/4 Reports, Annual Audit
loss of contract	Possible	Catastrophic	High	Regular meetings with funders, Audits, Surveys,	Meetings with Contract Manager, ED
fraud/theft (internal)	Possible	Moderate	Moderate	Monthly budget reports, Annual 3rd party audit.	Annual Audit, Monthly report to Board
physical disaster / act of terrorism	Rare	Catastrophic	Significant	Insurance	On activity
unauthorized payments	Rare	Moderate	Low	Monthly budget reports, Annual 3rd party audit.	Annual Audit, Monthly report to Board
environmental claims	Rare	Major	Low	P&P	Incident Report
financial statement misstatements	Rare	Moderate	Low	Monthly budget reports, Annual 3rd party audit.	Annual Audit, Monthly report to Board
document retention policy	Rare	Minor	Low	Being Developed	QA
credit card fraud	Rare	Moderate	Low	Credit card statements reviewed monthly	Financial Manager
use of credit card by other person	Rare	Moderate	Low	Credit card statements reviewed monthly, Card to single user	Financial Manager
pandemic	Rare	Major	Moderate	Pandemic Plan	ED
expense reimbursement (accountable plan)	Rare	Moderate	Low	Monthly budget reports, Annual 3rd party audit.	Financial Manager

RISK AREAS	LIKELIHOOD	SEVERITY	RISK	MITIGATION	TRACKING /REPORTING
altered checks	Rare	Moderate	Low	Monthly budget reports, Annual 3rd party audit.	Financial Manager
INVESTMENT					
fraud by insiders (loss/reputation)	Rare	Major	Moderate	Board requirement major investments, 2-person fund withdrawal	ED
market risk	Possible	Moderate	Moderate	Minimized holdings, Savings not operational	ED
loss on investment	Possible	Moderate	Moderate	Minimized holdings, Savings not operational	ED
fraud by outsiders	Rare	Major	Moderate	Board requirement major investments, 2-person fund withdrawal	ED
loss of key personnel	Possible	Moderate	Moderate	Review compensation	ED
loss of key data	Rare	Moderate	Low	Hard and Digital kept separate	ED
violation of ethics policy	Rare	Moderate	Low	Code of Ethical Conduct	ED
HUMAN RESOURCES					
benefits	Possible	Moderate	Moderate	Monthly budget reports, Annual 3rd party audit.	Financial Manager
leadership succession	Possible	Major	Moderate	P&P 4.21	Board/ED
PIPA (privacy)	Possible	Moderate	Moderate	PIPA Training	ED
defamation / libel	Rare	Major	Moderate	Legal Council	ED
unauthorized payroll changes	Rare	Major	Moderate	Payroll Audits	Payroll
TECHNOLOGY					
infiltration of system (virus/worms)	Possible	Moderate	Moderate	3rd party hosting	ED
system crash	Possible	Moderate	Moderate	3rd party hosting	ED
access to restricted data	Possible	Moderate	Moderate	3rd party hosting	ED
loss of privacy/information	Possible	Moderate	Moderate	3rd party hosting	ED
system down / system hacked	Possible	Moderate	Moderate	3rd party hosting	ED
unauthorized network access	Possible	Moderate	Moderate	3rd party hosting	ED
sharing of logins/passwords	Possible	Moderate	Moderate	P&P 1.16	ED

RISK AREAS	LIKELIHOOD	SEVERITY	RISK	MITIGATION	TRACKING / REPORTING
GRANT MATTERS					
conduct inconsistent with grant	Rare	Major	Moderate	Code of Ethics, Monthly meetings	ED, Contract Manager
grant v. admin expense	Rare	Moderate	Low	Monthly budget reports, Annual 3rd party audit.	Financial Manager
breach of grant agreement	Rare	Major	Moderate	Code of Ethics, Monthly meetings	ED, Contract Manager
misconduct by grantee	Rare	Major	Moderate	Code of Ethics, Monthly meetings	ED, Contract Manager
misuse of funds by grantee	Rare	Major	Moderate	Code of Ethics, Monthly meetings	ED, Contract Manager
tax reporting	Rare	Major	Moderate	Monthly budget reports, Annual 3rd party audit.	Financial Manager
REPUTATIONAL					
failure to abide by conflicts of interest policy	Possible	Major	Moderate	Code of Ethics, P&P 2.4	On complaint
controversial positions by association	Rare	Major	Moderate	Code of Ethics, P&P 2.4	On complaint
inaccurate press release	Possible	Major	Moderate	Code of Ethics, P&P 1.6	On complaint
use of foundation assets by individuals	Possible	Major	Moderate	Monthly budget reports, Annual 3rd party audit.	Financial Manager
conflicts of interest within policy parameters	Possible	Major	Moderate	Code of Ethics, P&P 1.11	On complaint
director outside affiliations	Rare	Major	Moderate	Code of Ethics, P&P 2.25	On complaint
misuse of social media	Possible	Major	Moderate	Code of Ethics, IT Policy	On complaint
REGULATORY					
limitation on activities	Possible	Moderate	Moderate	3rd Party Accounting	Financial Manager
new taxes	Possible	Moderate	Moderate	3rd Party Accounting	Financial Manager
new penalties	Possible	Moderate	Moderate	3rd Party Accounting	Financial Manager

OWNED PROPERTY					
RISK AREAS	LIKELIHOOD	SEVERITY	RISK	MITIGATION	TRACKING / REPORTING
fire/catastrophe	Rare	Catastrophic	Moderate	Fire Inspection, Extinguishers, Training	Drills, Maintenance
union strikes	Rare	Catastrophic	Moderate	CSSEA	Collective Agreement
building permits / code violations	Possible	Moderate	Low	Annual checks	ED
equipment failures (includes elevators)	Possible	Major	Moderate	Scheduled Maintenance	Maintenance, Work Orders
personal injury	Possible	Major	Moderate	Health and Safety Program,	ED

2026 – 2029 Strategic Plan Trail Association for Community Living



- “TACL’s Mission is to remove barriers and create a community where everyone can thrive.”
- “TACL’s Vision is of an inclusive community where individuals of all abilities have equal opportunities to belong and succeed.”

Information Gathering Process



Focus Groups



e-Surveys



Interviews



Review of Documentation

Objectives

1. Sustain existing growth and budget figures over the next fiscal year.
2. Advocate for the building of a permanent shelter.
3. Meet or exceed an 80% success rate for individual goals annually.
4. Purchase an online tracking system that will increase efficiency of reporting and tracking e.g. Sharevision.
5. Explore options for the existing Fruitvale property.
6. Host a yearly event to invite community in to share info and celebrate our success.
7. Increase the number of board members to 10.
8. Increase the staff and stakeholders survey response to 80%.
9. Maintain a job satisfaction rate of 80% annually for employees.
10. Increase the capacity for the program staff to accurately document incidents.
11. Lost time incidents decreased by 50% until 0.
12. Hire qualified staff to fill vacant and on call positions.
13. Increase the participation on the self-advocacy group by 5 individuals from the community-based programs.

14. Increase staff awareness and pride in working at TAFL.



1. Maintain all existing contracts and follow up with new ones as we have the capacity and it meets our mandates.
2. Continue working with BC Housing & the City of Trail to explore options.
3. Continue to provide training for existing and new staff for SMART goals and PLPs.
4. Gather information about options and request a quote from relevant systems e.g. Sharevision to present to the board and staff.
5. Identify the staff member that will meet with CLBC, BC Housing & KSCL to identify a plan.
6. Develop a community event committee that will follow up with the engagement plan.
7. Promote board participation at the community events as well as with other board members actively recruiting in the community.
8. Tie it to Performance Reviews or staff meetings and/or other incentives. Offer various methods of replying.
9. Provide more training opportunities as well as exploring the existing staff strengths & interest in the development of training options.
10. Add review of all incident reports follow ups to staff meeting agendas.
11. Focus on training for staff that are high risk on the various sites e.g. Mandt, Pivot Point training, ongoing reviewing of the positive support strategies.
12. Post on the Indeed site with ensuring the expectations of employment are clear. Network with the college and actively participate on the various advisory committees. Engage with other community colleges for graduates.
13. Develop a breakdown of which program is coming and what incentives could be developed to encourage others to come.
14. Staff from other programs are invited to attend staff meetings at other sites to increase awareness and team building.

16. 2025 PERFORMANCE MANAGEMENT REVIEW

Service Principles

1. We will create services consistent with the needs of individuals. We will create opportunities for those in the individual's personal network to assist the person to define their support needs.
2. We will create an environment where staff members see their role as supporting the needs and aspirations of the individual. We will empower staff teams to be cohesive, highly motivated, focused, trained and committed to the Mission of the Association.
3. We will integrate individuals into the larger community.

As the TAFL works toward achieving these goals, the organization is committed to the principles of continuous performance improvement in all programs, services, and operations. To this end, TAFL has developed this Performance Improvement Plan that incorporates the CARF Standards on Performance Measurement and Management and Performance Improvement.

The purpose of the Performance Improvement Plan is to establish a methodology for collecting and analyzing information for business improvement and service delivery improvement in the domains of effectiveness, efficiency, satisfaction, and accessibility. Data will be collected from a variety of sources including Person Served, staff, surveys, and other associations.

A performance analysis will be conducted on an annual basis to:

- Identify areas needing performance improvement.
- Develop an action plan to address the improvements needed to reach or revise established outcome measures and improve the quality of programs and services.
- Facilitate organizational decision-making regarding progress toward fulfilling the mission and achieving goals.
- Create a summary report that can be shared with Person Served, staff and other stakeholders in appropriate and meaningful ways.

Residential Programs

Residential Programs - Effectiveness Measures

Objective: To improve quality of life by meeting the Persons Served aspirations.

Definition: Goals are developed during the annual PLP process by the Person Served, Staff and Stakeholders.

Rationale: Inclusion happens by people having supports outside of their relationships with paid supports, care givers and family. Supports are friends, co-workers and acquaintances, with similar interests in the community.

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Target	Actual Results
Completion of Goals	All individuals in residential care	April 1, 2025 - March 31, 2026	PLP	Supervisors	80%	79%

Results: We did not meet our Target. Several Persons Served were hospitalized for significant periods of time which negatively impacted their ability to complete their goals. In discussing the results, the leadership team felt that a continued issue is the goals did not meet SMART criteria and that further training was needed.

Recommendations for the next year:

- Ensure that all staff take the SMART Goal training.
- Supervisors need to hold staff accountable to ensure staff are properly creating SMART Goals. Evaluations will be used as one way to hold staff accountable, as Guiding Principles are part of performance appraisals.

Note: *Sometimes goals are set but discontinued for various reasons – these goals were not counted.*

Objective: To reduce medication errors.

Definition: Medication either not given or given outside of the prescribed time.

Rationale: Medication errors are detrimental to the health of the Person Served.

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Target	Actual Results
Incident Report for Medication Error	All individuals receiving medication from TACL	April 1, 2025 - March 31, 2026	Incident Reports and	QA Coordinator	0	27

Results: The previous year there was 34 Medication Errors. A reduction of 7 errors is significant but still requires improvement.

Recommendations for the next year:

- Continue to work with staff on techniques for reducing Medication Errors
- Make ongoing Medication Distribution Training mandatory annually
- Annually include Medication Distribution at Staff Meetings

Residential Programs - Efficiency Measures

Objective: To recruit enough staff to effectively deliver services while regular staff is absent (backfill).

Definition: To reach this goal we are tracking the number of casual staff who work in residential programs and who aren't filling regular positions. This would be people who are on a casual staff list who are available to fill in for staff away on sick time, vacation, etc.

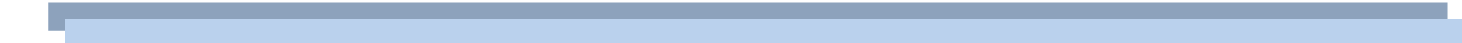
Rationale: One of the Association's biggest challenges is the recruitment and retention of staff. This leads to service delivery challenges if the Association does not have enough trained staff to effectively deliver the contracted hours. In addition, added workload is placed on existing staff which leads to burnout.

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Target	Actual Results
Build a substantial casual staff pool	Applied to residential programs, does not include casual staff who are in regular positions	April 1, 2025 – March 31, 2026	Personnel records	Admin Assistant	10	10

Result: Our recruitment has mostly kept up with staff turnover but the opening of two new group homes increased the number of regular staff positions that are required. Overall hiring was successful but with even more regular positions to fill we will need more casuals.

Recommendations for the next year:

- Continue to attend job fairs to recruit more employees
- Use Indeed more efficiently (filters)
- Continue to orientate staff in more programs
- Supervisors to continue to be more involved in orientations, this will provide consistency
- Increase Target to 12 casual employees



Objective: To retain staff in programs for a longer term

Definition: For this goal, we track regular staff that have stayed in a program for at least one year, we do not track casual staff, unless they were filling a regular position due to a recruitment lag.

Rationale: Staff that have been in a program for over a year provide a number of benefits to the Association, such as:

- Provide consistency for the individuals in the program
- Have built relationships with the individuals they support and actively assist them in reaching their goals and assist with person centered planning
- Provide assistance with program documentation
- Lessen the funds spent on orientation and training

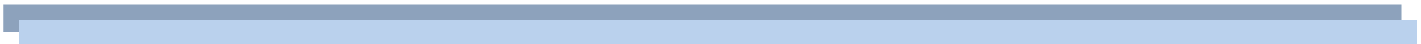
Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Target	Actual Results
% of staff who have been in the same program for at least one year	Applied to residential programs	April 1, 2025 – March 31, 2026	Personnel records	Admin Assistant	85%	78%

Result: Our goal was 85% and our result was 78%, which we believe while not meeting the objective was still respectable in our current employment climate. Most of the staff who left the Association were very short term staff who quickly decided that this work was not for them. Staff satisfaction from the surveys dramatically improved.

Previous Recommendations and Actions: We continue promote Team Charters and they are reinforced in each program and discussed at each staff meeting to maintain good morale in the programs. If values and ethics are consistent in the programs, staff will be more content as they realize the difference they are making in people’s lives. Reinforcing the Guiding Principles are a big part of that, therefore we continue to promote and use the Guiding Principles to ensure we are providing good services. We also promote Health and Wellness and have expanded the program to include more benefits for employees.

Recommendations:

- Continue to discuss incident reports at staff meetings so that the team can discuss techniques that may be successful
- Continue with Staff Wellness Program
- Continue with staff surveys to identify concerns the staff may have and work to improve those



concerns

Residential Programs - Access Measures

Objective: To assist individuals in communicating

Definition: This goal would apply to those individuals who have little or no verbal communication and the TAACL has taken steps to provide tools for them to improve their ability to communicate. The measure for this would be to consider whether someone uses this system to communicate to people outside of paid staff or family.

Rationale: The basis of our mission is to help individuals achieve full and meaningful lives in our community. Being able to communicate with others is key to building relationships with others in the community; to speak up for yourself and to live as independently as possible in the community.

Individuals need to have the tools to communicate their needs and wants. While non-verbal individuals find other ways to communicate, usually only the people closest to them are able to interpret which makes true inclusion very challenging. For building of support networks, having the ability to communicate with people you meet is extremely important and is often a basis for forming a relationship with someone. We would like to explore augmented communication devices and see if some of the people we support would welcome this kind of tool into their lives and hopefully as a result, open up doors to opportunities they did not have before.

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Target	Actual Results
# of non-verbal persons who have augmented communication systems	To all individuals in residential programs	April 1, 2025 – March 31, 2026	PLP's	Supervisors	3	0

Recommendations for the next year:

- Look for opportunities to train staff in technology that is available
If technology is used, ensure it's in the PLP with clear direction
- Ensure technology is discussed at staff meetings if it's used to allow the program to identify barriers and resolve issues as they arise

Objective: To assist individuals with mobility issues.

Definition: This goal would apply to those individuals who require additional mobility resources. The measure for this would be har.

Rationale: The basis of our mission is to help individuals achieve full and meaningful lives in our community. Being able to move about is key to building relationships with others in the community and to live as independently as possible in the community. Individuals need to have the tools to move about the community as they wish.

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Target	Actual Results
Mobility hardware obtained	To all individuals in programs	April 1, 2025 – March 31, 2026	PLP's	Supervisors	3	4

Recommendations for the next year:

- Look for opportunities to train staff in new technology that is available If technology is used, ensure it's in the PLP with clear direction.
- Ensure technology is discussed at staff meetings if it's used to allow the program to identify barriers and resolve issues as they arise.
- Source vendors that have a variety of mobility aids.

Life Skills and Community Inclusion Programs

Day Program and Community Support - Effectiveness Measures

Objective: To ensure that individuals are meeting their goals as stated in their PLPs.

Definition: Each person we support has goals which are stated in their Personal Life Plan and measured regularly.

Rationale: An individual’s PLP should be a true reflection of who they are, how they need to be supported and what they want to achieve. TACL is here to support individuals to reach their potential and therefore, empower and assist them to reach the goals they have set for themselves. This measure allows us to track how we are doing to assist people in achieving their goals.

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Target	Actual Results
% of goals achieved from Goal Log (PLP)	All individuals receiving support	April 1, 2025 to March 31, 2026	PLP	Supervisors	80%	85%

Results: This year 141 Persons Served set 423 goals and 359 were achieved – an 85% success rate, therefore, exceeding our target of 80%.

Our Association chose to track this goal as an indicator that we are supporting people to meet their individual goals. We wanted to ensure that all staff are aware of the goals for each individual they are supporting. If staff keep each person’s goals at the forefront of their program and activity planning, then each individual has a better chance at being successful at meeting or exceeding their goals.

Recommendations for the next year:

- Continue to work with staff on how to set SMART goals
- Continue to ensure that all staff are reading the PLP Guide prior to assisting with a PLP
- Ensure staff are aware of, and using the PLP notes page to keep the PLP up to date

Day Program and Community Support - Efficiency Measures

Objective: To recruit enough staff to effectively deliver services while regular staff is absent (backfill).

Definition: To reach this goal we are tracking the amount of casual staff that are not filling regular positions in the Day Program and Community Support programs due to a recruitment lag. This would be people who are on a casual staff list who are available to fill in for staff away on sick time, vacation, etc.

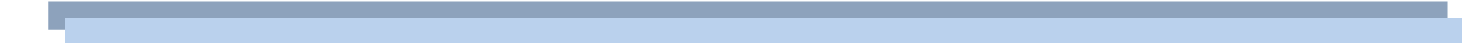
Rationale: One of the Association’s biggest challenges is the recruitment and retention of staff. This leads to service delivery challenges if you do not have enough trained staff to effectively deliver the contracted hours. In addition, added workload is placed on existing staff which leads to burnout.

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Target	Actual Results
Build a casual staff pool	Applied to community support programs	April 1, 2025 – March 31, 2026	Personnel records	Admin Assistant	3	3

Results: We achieved our target and additionally orientated a number of part time staff to better respond to illness and vacation coverage.

Recommendations for the next year:

- Continue to attend job fairs to recruit more employees
- The HR supervisor to check in with new staff to see how their orientations are going
- Ensure casual staff are being orientated in more than one program if they are not getting enough hours in the programs they are orientated in.
- Promote Recruit a Friend



Day Program and Community Support – Access Measures

Objective: To assist individuals in communicating

Definition: This goal would apply to those individuals who have little or no verbal communication and the TAACL has taken steps to provide tools for them to improve their ability to communicate.

Rationale: The basis of our mission is to help individuals achieve full and meaningful lives in our community. Being able to communicate with others is key to building relationships in the community; to speak up for yourself and to live as independently as possible in the community.

Individuals need to have the tools to communicate their needs and wants. While non-verbal individuals find other ways to communicate, usually only the people closest to them are able to interpret, which makes true inclusion very challenging. For building of support networks, having the ability to communicate with people you meet is extremely important and is often a basis for forming a relationship with someone. We would like to explore augmented communication devices and see if some of the people we support would welcome this kind of tool into their lives and hopefully as a result, open up doors to opportunities they did not have before.

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Target	Actual Results
# of non-verbal persons who have augmented communication systems	To all individuals requiring the devices	April 1, 2025 – March 31, 2026	PLP's and Goal Logs	Supervisors	3 people	0

Result: We were unsuccessful mostly due to COVID-19 restricting in person consultations.

Recommendations for the next year:

- Provide more training for staff in how to use augmented communication
- Ensure clear instructions in the PLP for staff on how to support people who have augmented communication

Supported Employment Program

Supported Employment - Effectiveness Measures

Objective: To measure how many people in the Supported Employment Program have achieved paid employment.

Definition: For this goal we would like to measure the number of people who have achieved employment during the year, from our waitlist, through our Supported Employment Program. If they are no longer working, we would still measure that they had employment. If one person received paid employment and then left that job and moved onto a different job, that would only be counted once.

Rationale: To measure the number of people who obtained paid employment during the year.

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Target	Actual Results
# of people who have paid employment	All individuals receiving support from the TACL and who want to work	January 1, 2026 to March 31, 2026	Employment Database	Supported Employment Supervisor	20 people	24 people

Result: We were successful in finding employment for everyone who wanted employment.

Recommendations for the next year:

- Continue to look for resources for employers
- Continue to ensure that all staff take on-line training through Open Future Learning on Employment
- Continue to ensure that employees that support individuals in employment take more in-depth training
- Offer Open Future Learning to Employers
- Continue promoting Supported Employment in the community

Objective: To track the number of people who are keeping paid employment for three months or longer.

Definition: We would be tracking the people who have paid employment and have kept their employment for three months or longer and are supported by the TACL. This would apply to all people who are working within this period. This includes self-employment as well.

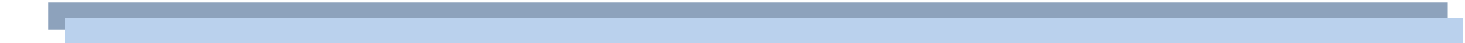
Rationale: To measure the number of people who are keeping employment long term. This allows our Association to identify what reasons or barriers are preventing people from retaining employment.

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal	Actual Results
% of people who have paid employment and have retained their employment for 3 months or longer	All individuals receiving services from the TACL and who want to work	January 1, 2026 to March 31, 2026	Employment Database	Supported Employment Supervisor & Special Projects Coordinator	100%	96%

Result: This year 23 out of 24 people that had jobs, held their job for over 3 months. Our hope is that through the proper process we can find employment that lasts long term and therefore true connections and inclusion happen.

Recommendations:

- Continue to look for resources for employers
- Continue to ensure that all staff take on-line training through Open Future Learning on Employment
- Continue to ensure that employees that support individuals in employment take more in-depth training
- Offer the Open Future Learning Modules to employers



Supported Employment Program - Efficiency Measures

Objective: To ensure that there is an adequate number of staff orientated to the Supported Employment Program to effectively deliver all contracted hours.

Definition: In addition to staff who are filling the permanent positions, we need to have adequate casual staff who are orientated to the positions so they can fill in when the permanent staff is away. Staff would need to be orientated to the position and be able to step in and deliver the required supports.

Rationale: Supported Employment is a priority of the TACL. We believe that employment is the key to true inclusion and all individuals who want to work, should be working. If we do not have adequate number of trained staff to deliver the services, we are unable to provide quality, consistent supports.

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Target	Actual Results
To have enough casual staff to effectively deliver supports while the regular job coaches are absent	The Supported Employment Program	April 1, 2025 – March 31, 2026	Personnel Records	QA Coordinator	1	0

Results: We changed our outlook and hired an additional part time staff to cover and provide better service than the casuals were.

Recommendations:

- Ensure that all staff take the Open Future Learning Employment Training

Supported Employment Program - Access Measures

Objective: To increase the number of businesses who are willing to hire someone with a disability.

Definition: This applies to all businesses in the Greater Trail area that have hired, or are willing to hire, someone with a disability. If they hire someone and the employment doesn't work out, this business is still counted. If the business hires more than one person, the business is still counted as one. If the business has more than one location but has different managers, each location would be counted.

Rationale: To increase the number of businesses in our area who are willing to hire someone with a disability. This goal allows us to measure how successful we are at advocating for the individuals we support. This was also a recommendation given to us during our last accreditation survey; to increase the types of businesses in which people are employed.

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Target	Actual Results
To increase the # of businesses who hire people with disabilities	All businesses in Greater Trail area	April 1, 2025 – March 31, 2026	Employer Contact Log	Job Coach	4	3

Results: We were mostly successful but again COVID-19 impacted some employers and their willingness to have individuals who may have struggled with COVID-19 safe work procedures such as wearing masks.

Recommendations:

- Plan to put employment success stories in different media
- Attend job fair at Pomeroy Hotel
- Work with Inclusion BC to create resources for employers
- Continue to promote the Supported Employment Program

Business Function Measures

Business Function Measures - Staff Use of Sick Time

Objective: To decrease staff absenteeism

Definition: “Staff absenteeism” will be defined as any hours in which an employee utilizes sick time as defined within the Collective Agreement. In this calculation we included only regular staff that get paid sick time.

Rationale: Staff absenteeism presents a tremendous financial cost to the Association both by requiring staff to cover the vacant shift and by utilizing resources to make sure that the shift is covered. Staff absenteeism also has a negative impact on staff teams and on service quality.

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Benchmark)	Actual Results
Percentage of Staff whose Sick time taken is the same or less than the Benchmark Rate – which is established at 37.5 hours/yr	All regular Staff	April 1, 2025 – March 31, 2026	Ceridian	Financial Manager	75%	86%

Result: The staff has done a fantastic job of being available for work in such trying times.

Note: People who took over 100 hours of sick time for extended illnesses, surgeries, or short term disability were not calculated into the result.

Recommendations for the next year:

- Explore a process to review sick time on a more regular basis and address attendance issues on a timely basis
- Supervisors to ensure on-call log is up to date and that all supervisors review the on call log weekly to identify any sick leave patterns

***Note: People who took over 100 hours of sick time for extended illnesses, surgeries, or short term disability were not calculated into the average hours of sick time taken.*

Business Function Measures - Staff Injuries on the job

Objective: To decrease the occurrences of staff injuring themselves while at work

Definition: This measure refers to all incidences of WCB claims which result in time away from work (does not include time away to seek first aid or see a physician)

Rationale: The Association works to provide a safe workplace. By measuring and identifying risk within the worksites, we are able to put safeguards in place to decrease the possibility of future injuries.

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Target	Actual Results
Decrease LTI to 0 by decreasing 50% per year	All Staff	April 1, 2025 – March 31, 2026	Health and Safety Report	QA Coordinator	0	3

Result: We had 3 LTI's. Our injury rate has historically been somewhat lower than that of other Community Living organizations.

Recommendations for the next year:

- Ensure that staff are orientated to the proper procedures in the residential programs. Supervisors will be more involved in orientations to ensure that proper procedures are learned.
- Ensure staff question when there are different ways in which things are being done. If staff are cutting corners and putting themselves or others at risk, they need to be corrected before an injury occurs.
- Continue H&S training and look for solution to prevent overexertion type injuries.

Business Function Measure –Staff Retention (Turn Over)

Objective: To decrease the amount of staff leaving the Association

Definition: This measure refers to all staff who have left the Association during the below noted fiscal year. If the employee was hired and began orientations and training, they would be included in this measure.

Rationale: One of the biggest struggles our Association deals with is recruiting and retaining enough staff to fulfill our contracted hours of service. In addition, staff turnover is a huge financial burden when you factor in the cost of training new staff, the time it takes to recruit and hire people, as well as the loss of knowledge the Association suffers when losing staff and the lack of consistency it creates for the individuals we support. By tracking and identifying areas where the Association can improve their retention of staff, every facet of the Association benefits.

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Benchmark)	Actual Results
Increase in the retention rate	All Staff	April 1, 2025 – March 31, 2026	Ceridian	Payroll	80%	77.5%

Result: Staff retention was slightly lower than our target. 32 staff left the Association with the majority being staff leaving having less than one year of experience.

Recommendations for the next year:

- Continue working on getting exit interviews from staff who are leaving the Association.
- Supervisors are now more involved in the orientation process, with the hope that it will provide more consistency in the training and make staff feel more competent to carry out their duties.
- Work to ensure that staff who aren't getting hours get trained in other programs.
- Work on holding staff accountable when there are performance issues to increase program morale.
- Remind people of Team Charter.
- At hiring ensure potential staff understand what the work entails and the challenges.

Business Function Measure – Volunteer Recruitment

Objective: To increase the number of volunteers we have in our Association

Definition: In the past we tracked all volunteers but we have changed our definition to refer to volunteers that volunteer at an event or help out with a program, not volunteers that spend time with an individual because that would be considered ‘friend’ or hopefully the development of a friendship.

Rationale: The TACL recognizes that our Association depends on volunteers to ensure the success of events and programs. Over the years, many volunteers have approached us and have wanted to volunteer their time with someone we support and give them the opportunity to access the community and make friendships. However, once a friendship develops, that person wouldn’t really be considered a “volunteer”, they would be considered a friend. Therefore, when someone first approaches the Association and wants to volunteer to spend time with someone we support, we will try to provide an effective match with someone we support in hopes that a friendship will develop. However, once a friendship develops, we would no longer count that person as a volunteer.

Indicator	Applied To (Target Group)	Time of Measure	Data Source	Obtained By	Goal (Target or Benchmark)	Actual Results
# of volunteers who volunteer with our Association	All volunteers within the TACL	April 1, 2025 – March 31, 2026	Personal File	Admin Assistant	8	11

Results: We have switched to an all volunteer workforce at Thrifty Treasures thrift store. This change has greatly increased the number of volunteers we require but we have been very successful in recruiting.

Recommendations for the next year:

- Use Facebook to recruit volunteers.
- Continue to develop guidelines for programs in what volunteers can do.

17. TECHNOLOGY AND SERVICES PLAN

Introduction

The enclosed is the 2026 Technology and System Plan for Trail Association for Community Living. This plan was developed through collection and review of:

1. Current technologies implemented at TACL;
2. The stated needs of the organization which is based upon feedback from staff members received through records of requests for technology assistance and informal discussions with staff members;
3. Contractual requirements for program compliance;
4. Best practices in Technology regarding:
 - a. Ease of use,
 - b. Efficiency,
 - c. Data security and protection of sensitive data,
 - d. Effective service delivery,
 - e. Effective support of business processes,
 - f. Accessibility of both software and hardware resources for users, and
 - g. Reliability, i.e. uptime vs downtime and speed;
5. Alignment with TACL's Strategic Plan;
6. Cost:
 - a. Initial, and
 - b. On-going;
7. Support requirement needs:
 - a. Hardware support,
 - b. Software support, and
 - c. Training support;

Below, please find:

1. An overview of the current status of the Technology systems;
2. The perceived quality of the current systems;
3. A listing of gaps and opportunities; and
4. A listing of current Technology projects, their respective priorities and current status of the project.

Current Status of TACL's Technology Systems

Hardware

Residential Services

Each off-site facility or house has a dedicated connection to the internet provided by TELUS Communications. On main site facilities are connected via cable to a central switch and router to then connect to the internet via a highspeed central connection. These connections both on and off site provide the speed and reliability necessary to meet the business needs of the staff members and Association.

The wireless networks are password protected to prevent unauthorized use or access. All facilities have at least one computer station for use by staff members. Due to the primarily centralized data management and storage provided, the workstations appear to meet the needs of the staff. Currently, workstations have memory storage and individual software packages to support downtime program and business operations when access to the internet is lost.

To access the computer, each staff member enters current house credentials to login to the computer. Additional individual credentials are needed to access business and programmatic systems.

Residential staff who have offices outside of the facilities, such as the Community Living Manager, have a computer in their offices. To access the computer, these staff members have individual login credentials to access the computer along with additional individual credentials to access business and program systems.

Outreach Workers

Outreach providers who work in client homes or other remote locations use their personal devices to access the internet to then access TACL Outreach business and programmatic systems via the internet. Most of the risk of allowing the use of personal devices to access TACL systems is mitigated by the fact that data is stored centrally on TACL servers, not on the personal device. Secondly, all personal devices require login credentials which limit access to the device by nonauthorized individuals.

The use of personal devices is a challenge to protecting sensitive data and an on-going review of practices is conducted to minimize risk.

Administrative and Centralized Services

TACL has 1 server that provides additional data storage for CDS. The server is located in the CDS offices.

Software

The primary software systems utilized at TACL include:

Microsoft Office 365

TACL uses the Microsoft Office 365 suite of services to support its intranet that gives access to staff for interoffice communication and collaboration on projects. The Microsoft suite includes, but is not limited to:

- Microsoft Outlook for email communications both within the TACL network and external to the network. Residential line staff have privileges to receive email from both internal and external sources but may only send outgoing email to addresses within the TACL network. This rule limits the risk of line staff sending communications from an TACL account that may be misconstrued as representing TACL's opinion. Because Outreach staff must communicate with so many parties in the community as well as internal to TACL to complete their job responsibilities, the rule concerning outbound emails external to the TACL network is not applied, but all Outreach staff members are educated on the appropriate use of TACL email accounts. The email system has been assessed as being adequate for the current needs of TACL.
- Microsoft Word, Excel, and PowerPoint this office productivity suite is provided through Microsoft Office 365 and allows all staff to read, create, and edit text documents as well as spreadsheets. The productivity suite has been assessed as being adequate for the current needs of TACL.

Financial Record Management System

TACL's financial record management system utilizes the purchased Sage software package with data gathering and storage support from Ceridian. The Finance department rates the payroll system as inadequate for TACL purposes as of October 2025.

Communication technologies

TACL's primary telephone communication system is a TELUS Communication Business Connect Voice-Over Internet Protocol (VoIP) system relying on the service to route calls and handle voice mail communication.

TACL utilizes an Internet-based digital facsimile system as its primary system for fax communications.

The current communication software system has been assessed as adequate for the current needs of TACL.

Services Purchased or Contracted

TACL utilizes TELUS Communications for Internet Access at various locations. These services have been assessed as adequate for current needs.

TACL utilizes TELUS Communications for mobile services. These services have been assessed as adequate for current needs.

TACL utilizes Cloud 9 Solutions for IT services, which include remote and on-site services. These services have been assessed as adequate for current needs.

TACL utilizes ProCreative Labs for automatic cloud-based backups and documentation. This service has been assessed as adequate for current TACL needs.

TACL contracts with Open Futures Learning for other on-line staff training services. This service has been found to be adequate for current TACL needs.

- TACL utilizes Ceridian payroll services. This service has been assessed as adequate for current TACL needs.

Technology Plan for 2026

Priority Legend 1= Critical; 2= Highly Important, 3= Important

Gap	Opportunity	Priority	Projected or Actual Start Date	Projected or Actual End Date	Projected Costs	Status at the Time of this Report
Difficult to get Office 2019 installed on to new computers from Microsoft VLSC	Look to find another Office program	2	Quarter 1, 2025	Quarter 31, 2025	\$6,000.00 annual	Switched to Microsoft 365 for Non-Profits
Online staff training is restricted to third party vendors	Explore other third-party vendors and explore if any internal training can be provided online.	2	Quarter 1, 2026	Quarter 4, 2027	Unknown	Preliminary
Access to TAFL IT resources is limited and challenging for staff members attempting to access assets off grounds. Additionally, current requires on-grounds terminals of higher cost and risk exposure due to data saving devices built into the terminal.	Continue developing remote access platform that will increase accessibility of assets off-grounds, reduce the need for “smart terminals” on-grounds, and increase data protection by limiting access to storing sensitive data remotely.	2	Quarter 1, 2026	Quarter 3, 2027	\$25,000	Due to time and fiscal constraints this project shall begin in 2027

Gap	Opportunity	Priority	Projected or Actual Start Date	Projected or Actual End Date	Projected Costs	Status at the Time of this Report
Data concerning effectiveness of IT resources from staff members and other stakeholders is currently inadequate and based upon complaints and informal data collection.	Add additional questions to staff survey to gain information concerning perceptions of effectiveness of IT services for use in IT Plan assessment and improvements.	2	Quarter 3, 2026	Quarter 4, 2026	Minimal	Planning Phase
	Add additional questions to stakeholder survey to gain information concerning perceptions of effectiveness of IT services for use in IT Plan assessment and improvements.	2	Quarter 3, 2026	Quarter 4, 2026	Minimal	Planning Phase
Current staff training for IT use, security, and process for requesting upgrades is not up to agency standards	Upgrade initial staff training for IT issues with an updated curriculum, training materials, specialty-based curriculum for specific staff needs, and competency-based testing.	3	Quarter 3, 2026	Quarter 4, 2026	Minimal	Development Phase

Gap	Opportunity	Priority	Projected or Actual Start Date	Projected or Actual End Date	Projected Costs	Status at the Time of this Report
	Upgrade on-going staff training for IT issues with updated curriculum, training materials, specialty-based curriculum for specific staff needs, and competency-based testing. Increase class frequency to two times a year.	3	Quarter 2, 2026	Quarter 4, 2026	Additional staff training time estimate of \$1500	Development Phase
Look to adopting Sharevision or similar product.	Improved reporting and accessibility of information.	1	Quarter 3, 2026	Quarter 3, 2027	\$60,000 annually	Sourcing

18. TACL ACCESSIBILITY PLAN

TACL, its Board of Directors, staff, volunteers, family members, consumers and other stakeholders identify and attempt to address accessibility barriers for people with developmental disabilities on a daily basis. As an organization, we are committed to the removal of barriers for people with developmental disabilities. This Accessibility Plan clearly identifies current/past barriers and our proposed solution to reduce or even eliminate those barriers. Our Accessibility Plan and Training Plan is intended to further enhance access to the organization's programs, services, and facilities, while also helping individuals receiving service to overcome the barriers that prevent them from fully participating in their community. The feedback we received through our surveys and our Self Advocate/Residential and Parent Support Group has helped us to understand that we need to further explore and place emphasis on expanding our presence in the Community. Getting the word out in the Community who is TACL and what great things do they do! Examples of the barriers that may exist include physical, attitudinal, financial and communication barriers.

TACL uses several approaches to gather information about what barriers exist including:

1. Ongoing strategic planning meetings that address organizational issues or barriers that affect the lives of individuals receiving service.
2. Program Coordinators, Supervisors, Stakeholders and Self Advocates fill out Satisfaction/Associability surveys that help address barriers identified by both individuals and staff at each TACL location.
3. Participant Satisfaction surveys that include a section on accessibility where people receiving service could indicate what barriers they face.
4. Finally, the Residential Council and Self Advocate meetings.

This Accessibility Plan shows the barriers and updates that were identified in the last plan.

Barriers in the Association

Identified Barrier	Recommendation	Priority	Cost	Person Responsible	Completion Date	Status
Concrete Sidewalk at Willow cracking and raising.	Repair	High	\$2,000	Contractor / Nancy	Jul-25	Completed
Make the basement of Duncan House wheelchair friendly.	Renovate	High	\$140,000	Nancy / Contractor	Jun-26	Ongoing
Improve accessibility around the Fruitvale House kitchen.	Reno kitchen to make accessible to all.	Med	\$60,000	Nancy / Contractor	Dec-26	Ongoing
CIC is not wheelchair accessible through main entrance for larger wheelchairs.	Create larger door next to current door where the window is.	Med	\$8,000	Nancy / Sheila	May-25	Completed
Instances where a wheelchair accessible van was not available.	Purchase an additional wheelchair accessible van.	High	\$140,000	Nancy	Apr-26	Awaiting delivery

Physical Barrier in the Community

Identified Barrier	Recommendation	Priority	Cost	Person Responsible	Completion Date	Status
Warfield Pool does not have wheelchair access	Lobby Warfield Council	Med	None	Nancy / Board	No date given / Ongoing.	Have lobbied 4 times. Council trying get a grant
Some Persons Served cannot get to church.	Speak with identified churches and if someone will volunteer to give participants a ride	High	None	House Supervisors	Ongoing.	Ongoing. Currently all Persons Served have the ability to attend.
TACL has no audio on the website for those who cannot read.	Add text to speech feature on the website.	High	\$15,000 to \$20,000	Nancy / Tracy	Ongoing.	Searching for the best technology

Financial Barriers

Identified Barrier	Recommendation	Priority	Cost	Person Responsible	Completion Date	Status
Stakeholder with control of a Person Served finances that does not always have Person Served best interests.	Request facilitator to advocate having TACL support an individual in control own finances. Discuss with everyone involved at PLP meeting.	Med	None	Nancy / Korrie / Program Supervisors / Finance Manager. Parent Advocate on the Board refer to Public Guardian Trustee	Ongoing	Completed and ongoing as new clients come into TACL services. Have referred clients to PGT and advocate services. Completed and ongoing.

Identified Barrier	Recommendation	Priority	Cost	Person Responsible	Completion Date	Status
Family members need to be asked for money for Person Served to attend community events.	Individuals will be given a monthly schedule and budget to reduce the number of times money is asked for.	Med	None	Appropriate Supervisor	Jan-16	Ongoing
Some of the individuals living in the Community struggle with budgeting enough money to attend community events.	assist individuals to set up a budget and arrange for setting aside funds needed for each month. Provide a money management group activity to the Community Support group meetings.	High	None	Delegated Staff	Ongoing	Ongoing
Some clients in the community are at risk of being take advantage of financially.	Provide information and support 1 on 1 and in group settings to learn to be assertive and stay safe. 5 side by side modules on Abuse Prevention are done by all persons served	High	None	Nancy / Sheila	Ongoing	Ongoing

Identified Barrier	Recommendation	Priority	Cost	Person Responsible	Completion Date	Status
At times individuals come to TACL seeking supports	Refer to CLBC facilitator to identify needs and ongoing support measures. Continue to attend community mental health meetings regarding at risk persons with complex mental needs and DD	High	None	Nancy / Sheila	Ongoing	Ongoing
Family member and support workers not complying with MEIA regulations for claiming earnings	Send letter to individuals and families regarding the legislation involved. Follow up with families and support network at annual PLP meeting. Staff offer to do with Person Served resulting in a teachable skill.	High	None	Sheila / Tammy	Ongoing	Ongoing

Communication Barriers

Identified Barrier	Recommendation	Priority	Cost	Person Responsible	Completion Date	Status
Communicating Information about TACL, its activities and things happening in the community.	Publish Handbooks in plain language, large print and recording it in an audio format. Put on website. Facebook, community events and local paper.	High		Nancy / Board / Admin Team	Revised 2020	Handbooks created and revised annually are on the website. Working on the audio versions.
	Develop a newsletter that is distributed to stakeholders including Persons Served and their families. Put on Website	Med	\$500 / year	Tracy / Nancy	Ongoing	Ongoing

19. TA CL CULTURAL COMPETENCY AND DIVERSITY PLAN

PURPOSE:

The Trail Association for Community Living (TACL) is committed to creating and maintaining an inclusive, equitable, culturally safe, and person-centered environment for all persons served, families, caregivers, personnel, volunteers, board members, and community partners.

TACL recognizes and values the diversity of the communities we serve and acknowledges that cultural identity and lived experience influence how individuals access and experience supports and services. TACL is committed to ensuring services are respectful, responsive, trauma-informed, culturally safe, and free from discrimination, harassment, and systemic barriers.

This plan aligns with current Canadian practices and applicable standards:

- Cultural competency and diversity
- Accessibility and inclusion
- Equity and anti-discrimination
- Workforce development
- Person-centered services
- Rights of persons served
- Community participation and belonging
- Continuous quality improvement

DEFINITIONS:

Cultural Competence refers to the ability to understand, communicate with, and interact effectively with people from diverse cultures, identities, backgrounds, and lived experiences.

Cultural Safety focuses on creating environments where individuals feel respected, emotionally safe, valued, and free from discrimination or bias.

Diversity includes culture, ethnicity, Indigenous identity, language, religion, gender identity, sexual orientation, age, family status, disability, socioeconomic background, and lived experience.

Equity means ensuring fair access to opportunities, resources, accommodations, and supports.

Inclusion means creating welcoming environments where all individuals feel respected, valued, heard, supported, and able to fully participate.

GUIDING PRINCIPLES:

TACL is committed to:

- Respecting the dignity, rights, individuality, and self-determination of all persons served.
- Providing culturally responsive and trauma-informed supports.

- Promoting diversity, equity, accessibility, and inclusion throughout the organization.
- Ensuring services are person-centered and reflective of individual preferences, beliefs, values, and communication needs.
- Supporting recruitment, retention, and development of a diverse and culturally competent workforce.
- Identifying and reducing systemic barriers and discrimination.
- Engaging persons served, families, personnel, self-advocates, Indigenous communities, and stakeholders in planning and evaluation processes.
- Supporting Truth and Reconciliation principles and ongoing learning related to Indigenous cultural safety in Canada.
- Promoting belonging, community participation, and equal access to opportunities.

WORKFORCE DEVELOPMENT AND TRAINING:

TACL recognizes that ongoing education is essential to maintaining culturally safe and responsive services. Training opportunities may include:

- Cultural competency and humility
- Indigenous cultural safety
- Trauma-informed practice
- Inclusive communication
- Accessibility and accommodation
- Diversity, equity, and inclusion
- Mental health awareness
- Person-centered practices
- Human rights and advocacy
- Anti-bullying and anti-harassment practices

Training may be delivered through orientation programs, workshops, webinars, professional development events, online learning platforms, team meetings, newsletters, and community partnerships.

RIGHTS AND ACCESSIBILITY:

TACL is committed to protecting and promoting the rights of persons served in accordance with:

- Canadian Charter of Rights and Freedoms
- British Columbia Human Rights Code
- Accessible British Columbia Act
- United Nations Convention on the Rights of Persons with Disabilities (CRPD)
- Community Care and Assisted Living Act
- CARF standards and ethical practices

TACL will:

- Promote awareness of rights and responsibilities
- Provide accessible complaint procedures

- Ensure accommodations are available when needed
- Support individuals in making informed choices
- Promote dignity, privacy, inclusion, and self-determination

QUALITY IMPROVEMENT AND REVIEW:

This plan is a living document and will be reviewed annually by leadership and the Board of Directors as part of TACL's continuous quality improvement process. Review activities may include:

- Feedback from persons served and stakeholders
- Personnel surveys
- Accessibility reviews
- Training participation tracking
- Complaint and incident trend analysis
- Review of demographic information

Updates will be made as needed to ensure alignment with current standards, Canadian legislation and best practices, community needs, and organizational priorities.

Overall Objective/Goal	The Desired Outcome	Applied To	Activities	Responsibility
<p>TACL will have a cultural competency and diversity plan that identifies how the organization will work to achieve and monitor effectiveness of the plan.</p> <p>(CARF standard 1.A.5 a-d)</p>	<p>TACL has an enhanced commitment to having cultural competency inclusive of culture, age, gender, sexual orientation, spiritual beliefs, socio-economic status, and language.</p>	<p>All-persons served, personnel and other stakeholders.</p>	<p>Applying CARF standard 1.A.5 (a-d) in all we do.</p> <p>Implementation of Cultural Competency and Diversity Plan.</p> <p>Diversity goals are tracked and monitored.</p>	<p>Executive Director & Board of Directors.</p>
<p>To create a safe and inclusive environment that fosters respect for, and acknowledgement of different needs and approaches.</p>	<p>To have TACL welcoming and accessible to all.</p> <p>TACL will create a safe and supportive space for the Board of Directors, staff and others to explore diversity issues.</p> <p>Increase the level of staff cultural competence.</p>	<p>All-persons served, personnel and other stakeholders.</p>	<p>Annual inspection of facilities to assess accessibility and cultural friendliness.</p> <p>Periodic changes in décor to reflect diversity and cultural friendliness.</p> <p>Provide regular communications about cultural competency.</p> <p>Provide (when possible) diversity training opportunities.</p>	<p>The Executive Director and Board of Directors / TACL plans on creating and developing a Cultural/Diversity Committee comprised of members of the Self advocacy group/TACL Staff /Parent Advocate and Management Rep October 2023</p>
<p>To adhere to the legal acts that guides all actions of TACL. Specifically, but not limited to the Canadian Charter of Human Rights and Freedom. (1982); the Canadian Multiculturalism Act (1970) and Provincial Acts including the Child and Family Services Act of BC and the Labour Relations Act; United Nations Children's Bill of Rights.</p>	<p>All persons served and all staff have a working knowledge of the legal guidance for all our work and actions.</p>	<p>All – Board and Personnel.</p>	<ol style="list-style-type: none"> 1. Posting of Canadian Charter of Human Rights. 2. Include information of Rights in publications for those served. 3. Establish and monitor client rights concerns and complaints. 4. Annual review of personnel management including the implementation of fair hiring practices, assessing the diversity of our staffing. Affirmative action and equal opportunity policies and procedures. 5. Develop a human resources strategy to retain and recruit staff who come from culturally diverse background and who are culturally competent and have a working knowledge about diversity. 	<p>Executive Director/ Quality Assurance Manager</p>

Overall Objective/Goal	The Desired Outcome	Applied To	Activities	Responsibility
<p>TACL will acknowledge the diverse perspectives of children, youth, and families and incorporates these into all programs and services.</p>	<p>Individual cultural differences will be recognized in individual service plans. A diversity lens will be used in our approach that focuses on individual specific needs.</p>	<p>All personnel.</p>	<p>TACL annually monitors the demographics of those served for demographic diversity.</p> <p>In our client feedback questions we will ask if those served felt safe, (comfortable). From this monitoring TACL will identify if there needs to be changes in staffing (to be culturally reflective of the population we serve.) or additional training/education required.</p> <p>All persons served plans/Intake forms addresses and documents cultural variables including culture, age, gender, sexual orientation, spiritual beliefs, socio-economic status and language to address diversity (oppression etc.). TACL seeks advice from community partners/ funders strategic planning/ Self advocate group / monthly planning meeting with Persons served /surveys when planning and implementing services.</p> <p>TACL will have written policies and procedures reviewed annually that address individual and systemic discrimination/harassment. TACL will (as need is identified) consult with someone with cultural competence expertise to create policies and procedures.</p>	<p>Executive Director and all Personnel.</p>

Overall Objective/Goal	The Desired Outcome	Applied To	Activities	Responsibility
To be aware of and understand different communication needs for all we serve.	Communication needs for all will be respected with unique needs addressed.	All Personnel	<p>In all publications and development of policies apply awareness of different communication needs. Promotional materials will be culturally appropriate, translated, user/child friendly, easily accessible and be in a variety of formats.</p> <p>Provide regular education on communication barriers and solutions to ensure effective communication.</p> <p>All forms – consent for service, release of information, rights will be translated into other languages as needed, or have access to interpreter services and/or development of visual communications.</p> <p>Key documents will be translated based on changing demographics.</p> <p>Each program will decide which documents need to be translated or modified to meet needs of persons served.</p>	Executive Director and all Personnel.
To provide access to interpreters as required.	A list of available interpreters and the languages they can communicate in.	TACL will further develop a protocol on access to use of translation services for key documents and for persons served.	Develop a protocol/ November 2026	Executive Director/QA Coordinator
To improve interpersonal communications within TACL and Community.	Improvements to our Website. Use Ceridian system to communicate with staff.	Staff, stakeholders and persons served	<p>Provide cultural competency training/education.</p> <p>Development of strategic processes to promote effective communications amongst staff.</p>	Executive Director
To align governance, administrative and program policies and procedures with culturally competent principles and practices.	Completed annual planning	Board and management team	<p>Annual review of governance, human resources and program policies and procedures.</p> <p>Review the strategic plan and revise as needed to reflect TACL's commitment to cultural competency and diversity.</p> <p>Re-enforce of understanding and following our written</p>	Executive Director and Board of Directors

Overall Objective/Goal	The Desired Outcome	Applied To	Activities	Responsibility
			<p>codes of conduct.</p> <p>In recruitment of board members, the board may choose to recruit members so membership on the Board of Directors reflects/represents the diversity of those served by TACL.</p>	
<p>To create opportunities for increasing personnel knowledge and competency on cultural safety, cultural awareness and diversity of our community.</p>	<p>Personnel that are knowledgeable and able to provide services that consider social, health and economic barriers that can affect one's well being.</p>	<p>For Board of Directors and all Personnel.</p>	<p>TACL will develop a cultural competency training plan using a strength-based approach to increase competencies.</p> <p>TACL will provide annual reinforcement of cultural competency and diversity training through a variety of means such as newsletters and access to publications.</p> <p>Provide during Employee orientation an overview of cultural competency and diversity.</p> <p>Employees will record cultural competency and diversity workshops attended or sought on performance evaluations.</p> <p>TACL will provide training about cultural competency and diversity at employees' request through professional development days/events/web - based resources /strategic planning</p> <p>Provide opportunities for staff to have knowledge of the social determinants of health and social disparities.</p> <p>Provide opportunities for staff to access professional literature that relates to cultural competency and diversity.</p>	<p>Executive Director and all Personnel</p>

20. HEALTH & SAFETY SUMMARY

Summary

This report provides information on the status of the TACL Health and Safety system, specifically on activities, priorities and performance for the year 2025.

It has been five years since we launched our updated Health and Safety program and we are seeing the benefits. Our 2025 Experience Rating (ER) surcharge was lower than 2024 if only slightly. Our discount for our ER was \$107,004.00. We are continuing to proactively improve the Health and Safety through audits, training and risk assessments.

We have done an excellent job managing WSBC costs and we have seen a significant decrease in actual injuries and WSBC related incidents. The two most common historic causes of injury are lifting/strains and violence towards staff by Persons Served. A focus on these issues has been initiated by management and the Joint Health and Safety Committee.

Recommendations

The Executive Director recommends that the Board receive this report for information.

Strategic Goal

The 2026 TACL 3 Year Strategic Plan had a Safety Goal to promote safe work practices for all staff and as a Strategy to support this Goal we will implement programs and procedures designed to achieve “zero” lost time injuries.

WSBC Statistics

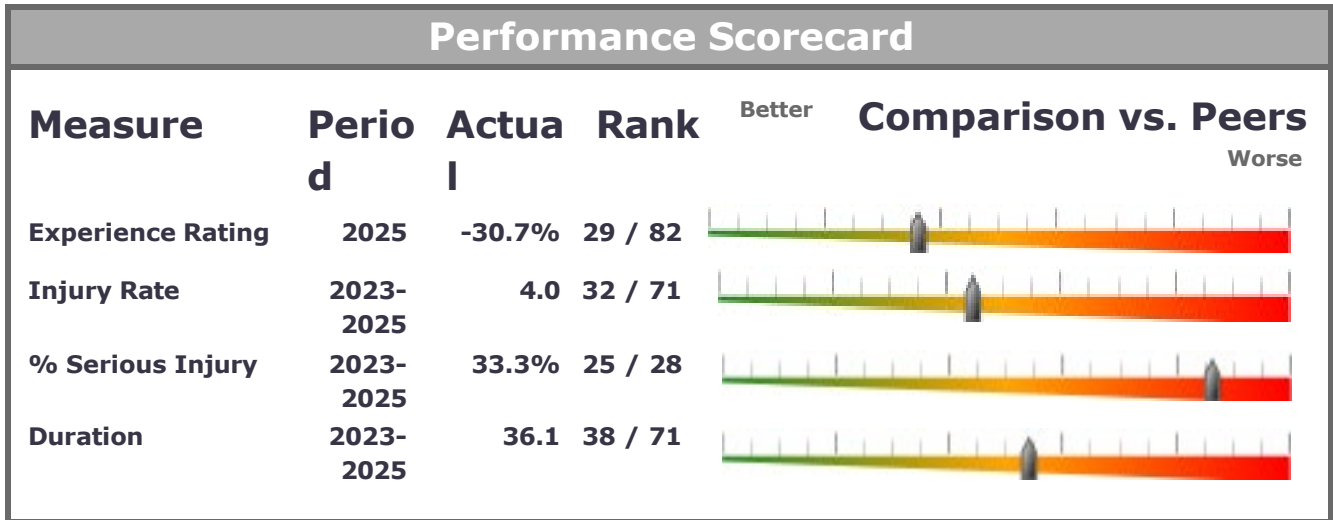
Information on reported 2025 WSBC incidents (work-related injuries/illnesses) with 2021-2024 for comparison. This information includes:

Overall, there was an 80% decrease in the Lost Time Injury (LTI), from 5 in 2024 to 3 in 2025. We had 3 LTI's which is inline with our historical rate. Our largest claim, still on the books, is an employee who tripped over a campsite fireplace which caused a significant knee injury.

WSBC Performance Score Card

This is a tool WSBC provides employers to enable workplaces to compare themselves to other employers. Our % Serious Injury is a concern as the majority of our LTI are for a significant period of time. Our costs (Experience Rating) has continued to improve as we have gone from 28.2% discount to 30.7% discount. See Figure 1.

Figure 1



Lost Time Injuries Statistics

The spreadsheet below indicates how well we prevent injuries occurring. The 2025 numbers that are missing will not be posted until July 2026. With the assistance of DMI we are still managing our claim costs well and seeking relief of costs with every LTI claim.

Figure 2

	2021	2022	2023	2024	2025
# Time-loss Claims	2	3	4	5	3
# Person Years	85	95	102	99	N/A
Injury Rate (Employer)	2.4	3.1	3.9	5.0	N/A
Injury Rate (CU)	6.4	7.1	5.5	5.6	N/A
# Excess Injuries	-3	-4	-2	-1	0
# Inspection Reports / # Other Contacts	1/0	6/1	2/0	0/0	0/0
# Orders	0	2	1	0	0
# Warning Letters Sent / # Net Citations Imposed / # Net Penalties Imposed	0/0/0	0/0/0	0/0/0	0/0/0	0/0/0

Claim Summary

With regards to the lost time claims 1 was for treatment only and 2 had a wage loss associated to them. A wage loss claim from 2024 received a 90% relief of cost due to a preexisting condition and the minor nature of the incident that caused the injury. This relief of cost was attributed in 2025 thus the negative lost work days and total claims costs paid for 2025.

Figure 3

	2021	2022	2023	2024	2025
# STD/LTD/Fatal Claims	5	3	2	5	1
# Work-Related Deaths	0	0	0	0	0
# First-Paid LTD Claims	0	0	1	0	0
Serious Injury Claims	0 / 0%	1 / 33%	1 / 25%	2 / 40 %	N/A
# Sprains and Strains	2	2	1	1	0
Long Recovery Sprains and Strains	1 / 50%	1 / 50%	0 / 0%	0 / 0%	0 / 0%
# Health Care-Only Claims	3	1	4	2	1
Total Work Days Lost	95	226	80	340	(124)
Work Days Lost for Injuries in This Year	52	5	39	110	54
Total Claim Costs Paid	\$45,048	\$40,535	\$272,120	\$66,953	(\$16,526)

Experience Rating Trend

The below graphs and spreadsheets are the positive results of our claim management. The Experience Rating (ER) is based on the previous 3 years costs but with 1-year lag.

Figure 4

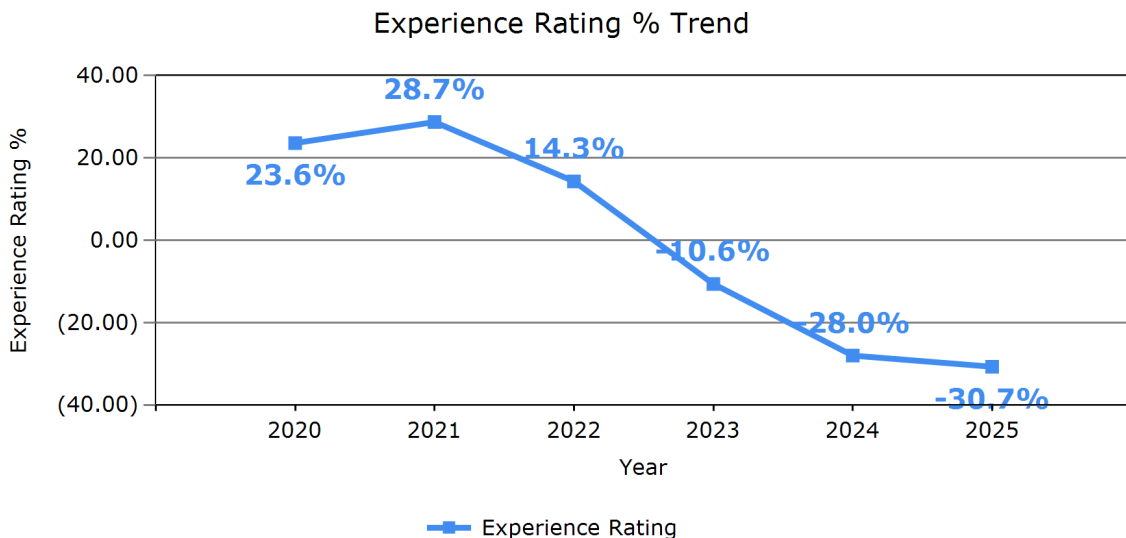


Figure 5	2021	2022	2023	2024	2025
CU Base Rate	\$2.74	\$3.29	\$3.95	\$4.75	\$5.70
ER%	28.7%	14.3%	-10.6%	-28.0%	-30.7%
Net Rate	\$3.53	\$3.76	\$3.53	\$3.42	\$3.95
Rate at Maximum Discount	\$1.37	\$1.65	\$1.98	\$2.38	\$2.85
Rate at Maximum Surcharge	\$5.48	\$6.58	\$7.90	\$9.50	\$11.40

Figure 6	2021	2022	2023	2024	2025
Assessable Payroll	\$4,581,108	\$5,220,131	\$6,049,170	\$6,136,594	\$6,114,507
Assessments at Base Rate	\$125,522	\$171,742	\$238,942	\$291,488	\$348,527
(Discount) Surcharge	\$36,191	\$24,535	(\$25,407)	(\$81,617)	(\$107,004)
Assessments Paid	\$161,713	\$196,277	\$213,536	\$209,872	\$241,523
Assessments at Maximum Discount	\$62,761	\$85,871	\$119,471	\$145,744	\$174,263
Maximum Potential Savings	\$98,952	\$110,406	\$94,065	\$64,128	\$67,260
Assessments at Maximum Surcharge	\$251,045	\$343,485	\$477,884	\$582,976	\$697,054
Maximum Potential Increases	\$89,332	\$147,208	\$264,348	\$373,104	\$455,531

Injury Type Summary

The injury type that is the most concerning the Acts of Violence/Force, of which 3 were a Person Served injuring a staff. Additional training has been given and will be ongoing to all staff to recognize when a Person Served may become violent and how to deflect/disengage safely. Our overexertion injuries were mostly from staff having preexisting conditions and exacerbating them during their regular duties.

STD/LTD/Fatal Claims and Costs by Accident Type

The following table shows the number of STD/LTD/Fatal claims, and costs paid to date for the top 10 accident types involved in an injury or an illness, based on count. Figures shown are totals for the previous five years (2018 to 2022).

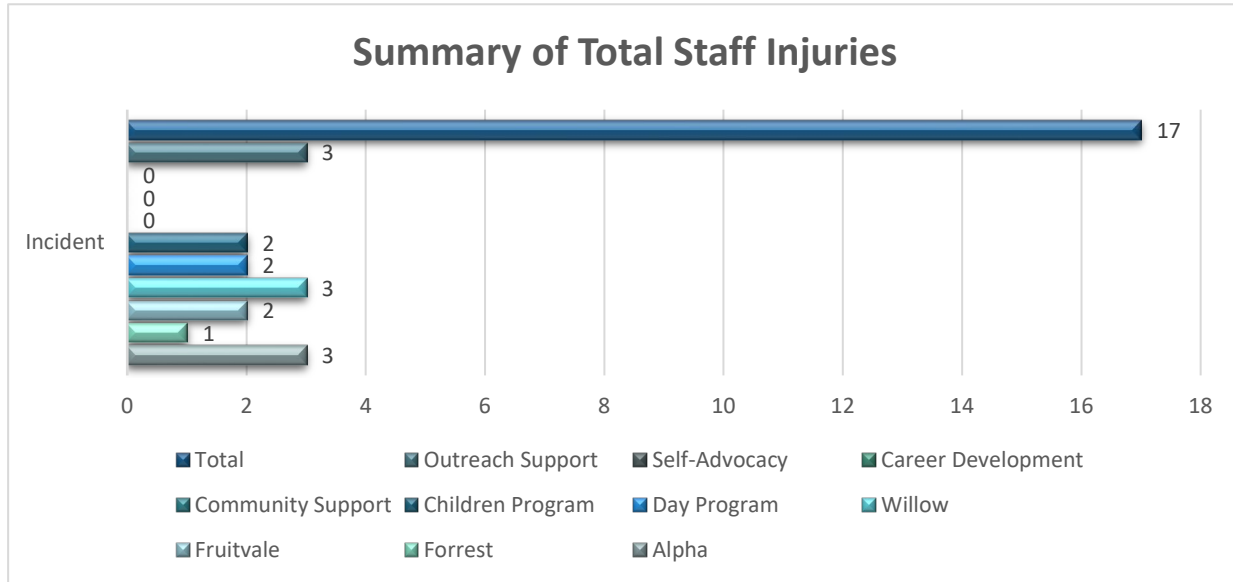
Figure 7

Accident Type	STD/LTD/Fatal Claims	% By Volume	Total Cost	% By Total Cost
Acts of Violence, Force	4	35%	\$44,251	39%
Overexertion	5	24%	\$19,753	18%
MVI	2	10%	\$679	1%
Struck By	2	10%	\$4,543	4%
Fall from Elevation	1	5%	\$10,796	10%
Fall on Same Level	1	5%	\$30,200	27%
Struck Against	1	5%	\$954	1%
Other Accidents	1	5%	\$67	0%
Total	20		\$112,137	

Staff First Aids and Medical Aids Summary

There was no change in the FA/MA this year. We have made an extra effort to educate staff on the importance of reporting all first aids.

Figure 8



Safety Program

In 2020 TACL rededicated itself to the WSBC standards with an updated Health and Safety Program. These standards set out the benchmark for health and safety program. The results of our updated safety program have been both a reduction in injuries and a substantial cost saving of more than \$100,000. We will continue to educate staff on safe work practices and manage our injury claims.

Key TACL Health & Safety Initiatives

Some key health and safety initiatives in 2025 included:

- Training in MANDT including train the trainer;
- Violence in the workplace risk assessments;
- New First Aid procedures developed;
- Completion of Food Safe Certificates;
- Straight to the Heart Naloxone training;
- Updating of TACL's Health and Safety Program;
- Challenging Health and Safety Claims not attributable injuries related to TACL activities;
- Applying for Relief of Costs from WSBC when illegible;
- Mental Health First Aid;
- Health and Safety Investigations; and
- Review and update of all Health and Safety Procedures.

21. 2025 INCIDENT SUMMARY AND REVIEW

General Information

The Annual incident Review and Mitigation report is provided as an outline on Critical, In-House & Near Miss Incidents throughout 2025 as compared to 2024.

Critical Incidents are followed up on until there is a satisfactory outcome. All incidents are reviewed on a quarterly basis to identify possible trends and to forward recommendations to the Executive Director.

Critical Incidents are events which require reporting to CLBC, Interior Health Licensing, BC Assisted Living Registrar or BC Housing. In-House Incidents and Behaviours are events that are of concern but do not meet the reporting threshold of a Critical Incident.

It should be noted that the goal is not 0 Incidents but to have 0 preventable incidents, as not all incidents are preventable.

Summary

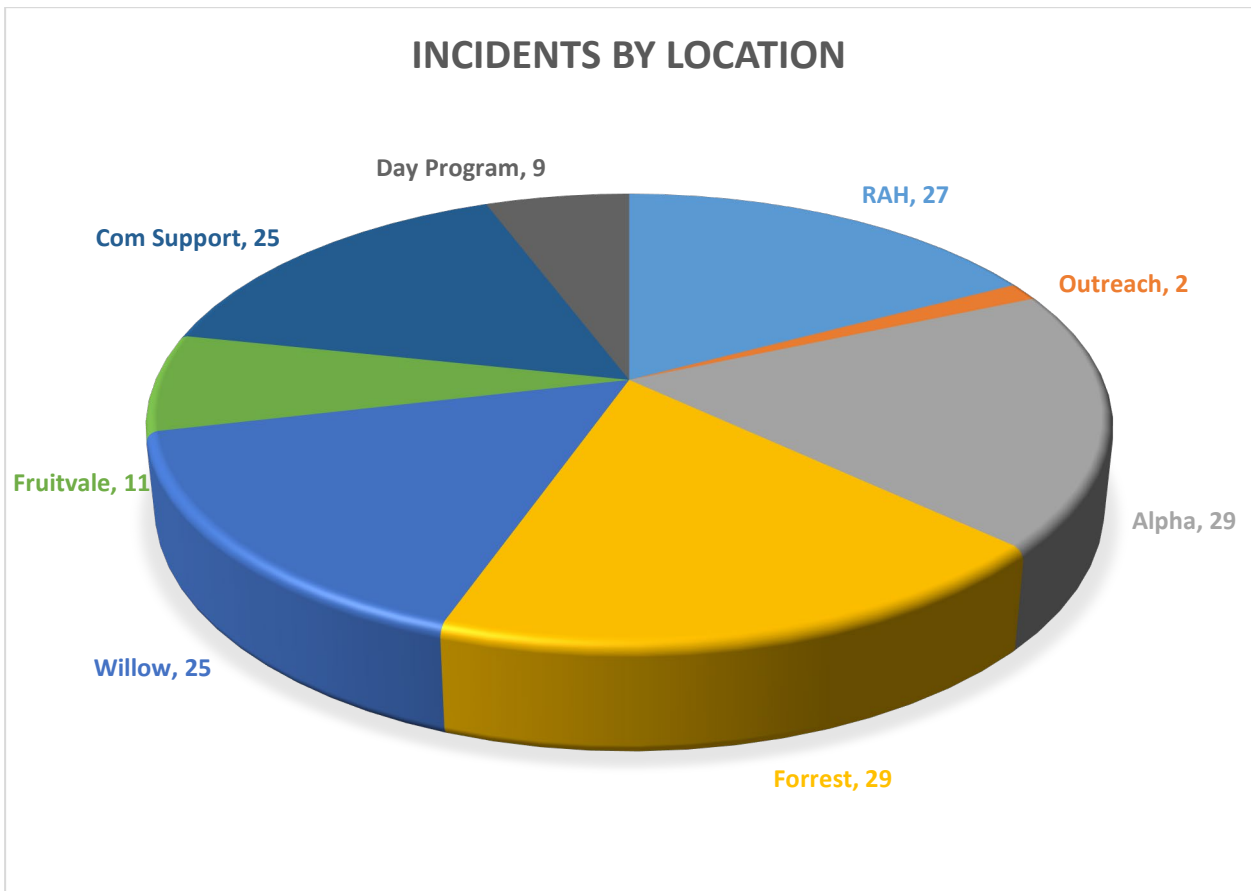
Overall there was a small increase of 9 Incidents in TACL programs. This increase is a number of small increases as opposed to a single or a few larger increases. The majority of Incidents occur within the Residential Program which is expected as the Persons Served typically have higher needs than individuals receiving supports, who are living in the community.

TACL Programs

The Table on the following page is summary of the following homes and programs:

1. Day Program;
2. CDS Outreach;
3. TACL Community Support;
4. Youth Action Network;
5. Alpha House;
6. Forrest Place;
7. Fruitvale House;
8. Rossland Avenue House; and
9. Willow Place.

Critical Incident	2025	2024	Difference
Aggressive/Unusual Behaviour	24	18	6
Attempted Suicide	0	0	0
Aggression between Residents	0	0	0
Death	0	0	0
Sentinel Event	0	0	0
Use/Possession of Weapon	0	0	0
Use/Possession of Illicit Drugs	0	2	-2
Disease/Parasite	0	0	0
Communicable Disease/Outbreak	0	0	0
Infection Control	0	0	0
Use of Seclusion	0	0	0
Exclusionary Time Out	0	0	0
Bio Hazard Accident	0	0	0
Restriction of Rights	0	0	0
Use of Restraint	0	1	-1
Emotional Abuse	1	0	1
Choking	4	0	4
Fall	7	3	4
Financial Abuse	0	0	0
Medication Error	9	2	7
Missing/Wandering	4	3	1
Motor Vehicle Injury	0	0	0
Neglect	1	0	1
Other Injury	17	8	9
Physical Abuse	0	0	0
Poisoning	0	0	0
Service Delivery Problems	0	1	-1
Sexual Abuse	0	0	0
Unexpected Illness	14	14	0
Sub Total	81	52	29
In-House Incident			
Medication Error	18	30	-12
Other Injury	20	21	-1
Missing/Wandering	2	0	2
Fall	12	13	-1
Illness	3	4	-1
Sub Total	55	68	-13
Behaviours			
Hitting	0	2	-2
Swearing	0	0	0
Perseverating	0	0	0
Self Harming	0	0	0
Property Destruction	0	1	-1
Refuse medication	0	0	0
Aggressive/Unusual Behaviour	21	25	-4
Sub Total	21	28	-7
Total	157	148	9



Areas Improved

1. Medication Errors was 32 in 2024 and 27 in 2025:
 - a. The Critical and In-House numbers were combined as the mechanism for an incident is identical. While there was improvement in Medication Errors the goal is zero errors. Training and reinforcement on Medication Procedures will need to continue.

Areas Which Can Be Improved

Critical Incident

1. Aggressive/Unusual Behaviour increased from 18 in 2024 to 24 in 2025
 - a. The increase in this can be directly attributed to a single Person Served at Willow Place. Training around positive support strategies and antecedent triggers has been and will continue to be conducted.

2. Other injury increased from 8 in 2024 to 17 in 2025
 - a. It is difficult to make a general statement about how we are going to improve other injury. From a Health and Safety perspective we have increased the number of Joint Health and Safety Committee inspections and improved the process for the inspections. We have also targeted Violent Risk Assessments as an area for improvement this year.

La Nina Homeless Shelter

Total Incidents 2024 was 185 and in 2025 was 187 this is statistically the same but three new incidents were added that had a total of 20 incidents.

Critical	Total 2025	Total 2024	Difference
Aggressive/Unusual Behaviour	14	22	-8
Abusive language	3	N/A	N/A
Attempted Suicide	2	2	0
Physical Altercation	3	9	-6
Aggression Between Guests	0	0	0
Death on site	0	0	0
Uttering Threats	4	0	4
Use/Possess weapon	2	2	0
Use of Illicit Drugs onsite	2	0	2
Alcohol Consumption on site	0	0	0
Communicable Disease	0	0	0
Drug Overdose- in Shelter	3	21	-18
Drug Overdose- outside/seacan	48	39	9
Emotional Abuse staff/guest	3	2	1
Fall	2	0	2
Fire - Inside	0	0	0
Fire - Outside	3	0	3
Abusive language	0	2	-2
Threats from Community	4	3	1
Missing guest	0	0	0
Medication Error	0	0	0
Criminal Activity on Site	0	0	0
Physical Attack on Staff	0	2	-2
Physical Injury - Guest	13	15	-2
Stolen Personal items	1	1	0
Set Off Smoke Alarm	8	3	5
Service Delivery Problems	0	0	0
Damage to shelter by guest	0	0	0
Accidental Panic FOB	0	0	0
Other	17	23	-6
Sexual Abuse	1	N/A	N/A
Wandering	2	0	2
Unexpected Illness	37	39	-2
Wellness Check	16	N/A	N/A
Total	188	185	3

Areas Improved

Critical Incident

1. Aggressive/Unusual Behaviour decreased by 36% (22 in 2024 to 14 in 2025)
 - a. It is felt there is more consistency in dealing with behaviours due to annual Mandt training which centers strongly on keeping interactions between people from becoming incidents, keeping incidents from becoming crisis and de-escalating crisis as quickly and safely as possible. Monthly there is a review of MANDT training at staff meetings. Staff are provided panic alarms that directly notify the RCMP.

2. Drug Overdose in Shelter decreased by 86% (21 in 2024 to 3 in 2025)
 - a. Staff are diligent in ensuring shelter guests do not have access to their drugs while in the shelter. Motion sensor installed in the bathroom to allow for interventions in a timelier manner. Bags are taken on arrival to the shelter. Cameras have been installed in the common areas.

3. Physical Altercation decreased by 66% (9 in 2024 to 3 in 2025)
 - a. Staff are in Mandt de-escalation techniques. Cameras in the common areas allow staff to intervene if needed and act as a deterrent. Staff are provided panic alarms that directly notify the RCMP.

4. Other Incident decreased 23% (23 in 2024 to 17 in 2025)
 - a. It is difficult to make a general statement about how we are going to improve Other Incidents. We have added 3 additional Incident types to more accurately track incidents.

Areas Which Can Be Improved

Critical Incident

1. Drug Overdose at Seacan increased by 23% (39 in 2024 to 48 in 2025)
 - a. The increase in the number of individuals overdosing with illicit drugs is partly due to the extremely toxic drug supply at times throughout the year.

Additional Recommendations for All Locations

Unexpected Illness

- Staff will review and understand all Protocols for Person Served to stay healthy, provide good nutrition and fluids for hydration.
- Continue to make phone appointments with Family Physician before illness worsens and have annual check-ups and medication reviews.
- Ongoing discussion with HSCL Nurse.
- Continue to access Nurses Hotline (811).

Aggressive/ Unusual Behaviour

- Review and update Positive Support Strategies annually or as needed.
- Ensure all staff have read and understand Positive Support Strategies and are consistent.
- Staff will follow Individuals Routines that are set out, reviewed and updated by the Site Supervisor.
- Review MANDT at monthly staff meetings staff will read and sign.
- Review Positive Support Strategies at Staff meetings.
- All staff to take / update Mandt Training.
- Request assistance from DDMH for positive support strategies.
- First Aid for Mental Health training for staff.
- Staff to enroll in Pivot Point Behavioural Training.
- Open Future Learning modules.
- Self – Care and personal Boundaries training for all staff.
- Installed cameras in La Nina Homeless Shelter common areas.

Falls

- Follow Fall protocols, continue to support Person Served with Sail Exercises and encourage Proper Foot wear at all times.
- Follow up appointments with OT/PT.
- Staff Training on proper transferring from OT.
- Annual Fall Assessment ongoing.

Death

- All staff encouraged to take Grief Counselling provided by TAFL and the Greater Trail Hospice Society when there is a death. Open Future Learning also has a module.

Attempted Suicide

The number has stayed the same over the past 2 years. We have staff training including Mental Health First Aid and training for Person Served through Anchors. DDMH is involved as well as Family Physician and Psychiatrists.

- Mental Health First Aid training for staff.
- Counselling for Person Served.
- Medication Review with Family Physician and Psychiatrist.
- Referral to Pivot Point.
- Group Meetings.
- Staff will follow Protocols set out from Professionals.
- On-going updates of Risk Assessments.

Medication Error

- Site Supervisor to orientate on Medication Dispensing and then shadow new employees.
- Competency based Medication Knowledge Review for all staff annually.
- Continue to have 2nd Staff sign off on the Medication Inventory Sheet once all medications are dispensed.
- Ensure HSCL/ Pharmacist reviews all meds and PRN's.
- Supervisor or senior staff on duty review and audit all MAR sheets and Blister packs immediately after receiving from pharmacy.
- Refusals of medication have increased. We have ongoing discussion with Family Physician and Pharmacists to write up Protocols to decrease these incidents.

Other Injury

- Continue to document when bruising or scratching.
- Removal of objects that can cause bruising or scratching.

Missing/Wandering

- Updating Missing Person Protocol Annually.
- Ask Person Served to Call if they will be late.
- On-going Risk Assessment reviews

Refusal of Medications

- Ongoing discussion with Family Physician and Pharmacists setting up protocols to prevent refusal of medications
- Medication review with Family Physician Quarterly.

Ongoing Recommendations

- Annual review of Code of Ethical Conduct, Policies and Procedures.
- Competency based Incident report training annually through in-house training or Open Future Learning.
- All staff to review Mission, Vision statement annually during Performance Review and at all staff meetings.
- All Staff to take Mandatory 9 Open Future Learning Modules (can expand once finished).

22. SURVEYS

FAMILY/ CAREGIVER SATISFACTION SURVEY RESULTS 2024							
Questions:	Total # of Respondents	YES		NO		?	
		TOTAL	%	TOTAL	%	TOTAL	%
Relationship to TACL/CDS	8						
Parent, Family, unknown							
1. Organization:							
The organization effectively addresses challenges as they arrive	8	7	88%		0%	1	13%
The organization effectively communicates through notices newsletters, phone email	8	8	100%		0%	0	0%
Is recognized in the community for supporting individuals with developmental disabilities	8	8	100%		0%	0	0%
Programs have clearly defined service goals	8	8	100%		0%	0	0%
3. ETHICS, ATTITUDES & RESPOSIBILITIES:							
The organization honours the beliefs, values and cultures of those supported	8	7	88%	1	13%		0%
The organization is making positive difference in lives of supported individuals	8	8	100%		0%		0%
4. LEVEL OF SERVICE & PROFESSIONALISM:							
TACL provides enough information about programs/service we provide	8	8	100%		0%		0%
The matter you communicated to TACL was handled in a timely manner and by appropriate person	8	8	100%		0%		0%
You have been kept up to date to your satisfaction	8	8	100%		0%		0%
Staff have been professional in their dealings with you	8	7	88%		0%	1	13%
TACL is providing adequate care and support to the individuals they serve	8	8	100%		0%	0	0%

5. OVERALL SATISFACTION:							
Is there anything else the organization can do to facilitate more direct positive involvement by the community, with those in our care	8	1	13%	6	75%	1	13%
Is there anything else TACL can do regarding involvement with the family/caregiver of individuals we serve	8	1	13%	6	75%	1	13%
Would you recommend our programs and services to others who may need it?	8	8	100%		0%		0%
Do you have any additional comments or suggestions that may improve the services we provide	8	0	0%	8	100%		0%

Employee Survey - 2025

Question	Total of Responses	Response					
		Yes		No		N/A or?	
		TOTAL	%	TOTAL	%	TOTAL	%
Section 1: TACL							
TACL responds to the needs of the persons served by the organization and TACL advocates for and empowers the rights of the individuals they serve.	76	73	96%	1	1%	2	3%
TACL provides staff with the necessary support and resources to do their work and supports the health and wellness of its employees.	76	71	93%	2	3%	3	4%
TACL's policies and procedures and programs have clearly defined tasks, activities, and outcomes to ensure effective, reliable and consistent services are provided.	76	68	89%	7	9%	1	1%
TACL maintains existing funding while developing other resources to expand programs and services offered (e.g. fundraising).	76	70	92%	4	5%	2	3%
TACL communicated with individuals receiving services, families, caregivers, staff and society members on community living issues.	76	70	92%	2	3%	4	5%
TACL provides opportunities for people served with common interests to connect for friendships.	76	71	93%	2	3%	3	4%
SUBTOTAL		423	93%	18	4%	15	3%
Section 2: Health and Safety							
Health and safety procedures are in place to protect employees, participant, and volunteers.	76	73	96%	1	1%	2	3%
I feel adequately trained to handle an emergency situation.	76	71	93%	3	4%	1	1%
Safety concerns are addressed in a timely manner.	76	68	89%	7	9%	1	1%

I feel safe when providing support to individuals in the community.	76	72	95%	0	0%	4	5%
SUBTOTAL		284	93%	11	4%	8	3%
Section 3: Ethics, Attitudes and Responsibilities							
TACL staff recognize the vulnerability of the people served and the professional obligation to protect them.	76	74	97%	2	3%		0%
TACL staff recognize and maintain their commitment to the TACL Code of Ethics. TACL honors the beliefs, values, and cultures of the people served and appreciate the uniqueness and potential of each individual.	76	73	96%	1	1%	2	3%
TACL staff recognize and respect the importance of confidentiality, maintain honesty, integrity and objectivity while meeting the highest level of standards for service delivery.	76	75	99%		0%	1	1%
	76	67	88%	7	9%	2	3%
SUBTOTAL		289	95%	10	3%	5	2%
Section 4: Communication							
Communication between management and staff is efficient and effective. Management responds promptly to my requests.	76	70	92%	5	7%	1	1%
There is effective communication between the TACL staff in my program and between all of the programs. Employees are encouraged to function as a team.	76	68	89%	6	8%	2	3%
Regular general staff meetings and program staff meetings are held.	76	62	82%	8	11%	6	8%
SUBTOTAL		67	88%	6	8%	3	
Section 5: Your Job							
The information I received during my orientation was valuable. I have a clear idea of my job responsibilities and I have been provided the necessary training to perform my job effectively.	76	68	89%	4	5%	4	5%
I am supported to take on new responsibilities and receive feedback through regular employee performance evaluations.	76	66	87%	6	8%	4	5%

I feel valued as an employee. I receive recognition for doing a good job.	76	61	80%	11	14%	4	5%
I feel that I am involved in decision-making within my program and the organization.	76	64	84%	7	9%	5	7%
SUBTOTAL		65	21%	7	2%	4	1%
OVERALL TOTAL			82%	52	4%	35	3%

Section 5: Your Job								
The information I received during my orientation was valuable. I have a clear idea of my job responsibilities and I have been provided the necessary training to perform my job effectively.	30	28	93%	2	7%		0%	need ongoing training
I am supported to take on new responsibilities and receive feedback through regular employee performance evaluations.	28	25	89%	3	11%		0%	not had
I feel valued as an employee. I receive recognition for doing a good job.	29	24	83%	5	17%		0%	
I feel that I am involved in decision-making within my program and the organization.	29	24	83%	3	10%	2	7%	at times
SUBTOTAL		101	87%	13	11%	2	2%	
OVERALL TOTAL		561	90%	39	6%	28	4%	

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