

# **BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.**



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**ANNUAL REPORT  
2019 - 2020**

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BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.

ANNUAL REPORTS

2019 - 2020

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**Brain Injury Community Re-entry (Niagara) Inc. (BICR)** is a not-for-profit organization that provides support services and rehabilitation to individuals living with the effects of an acquired brain injury. Our administrative office is located in Thorold and services are provided throughout the entire Niagara Region.

Our organization was founded in 1988 by a group of concerned parents and professionals who felt that specialized services were needed in the region. A volunteer Board of Directors consists of an organization founder, rehabilitation professionals and other community partners, which oversees our programs. Funding is provided by a variety of sources including the Hamilton Niagara Haldimand Brant Local Health Integration Network (HNHB LHIN) and the Ontario Ministry of Health and Long Term Care, third party payers, fundraising and private donations.

#### **MISSION STATEMENT**

Brain Injury Community Re-entry will provide support and leadership to individuals, their families and/or caregivers within the Niagara Region living with the effects of an acquired brain injury. We promote self-direction, facilitate opportunities for meaningful adaptation, and contribute to the development of the agency and its people. We participate in advancements in the field of rehabilitation, and participate in partnerships that foster ongoing dialogue with the individual and their support network.

#### **VISION STATEMENT**

To lead in the field of acquired brain injury rehabilitation, providing advocacy for successful re-entry into the community.

#### **STATEMENT OF PHILOSOPHY**

The provision of support services is based on the following beliefs:

- Each individual is a unique adult and is deserving of respect and dignity.
- Support should be flexible, individualized and reflective of choices, abilities and existing support networks.
- Choice often involves some elements of risk. Where possible, individuals will be permitted to experience the result of their choices to the extent that they are able.
- Independence is a dynamic process of accessing people and services as challenges and successes change.

We rigorously promote the rights of the individual and promote recognition of acquired brain injury and how it affects individuals and families through ongoing advocacy and public education.

**Disclaimer:** *Brain Injury Community Re-Entry (Niagara) Inc. acknowledges funding support for many of our programs and services from the Hamilton Niagara Haldimand Brant Local Health Integration Network (HNHB LHIN) and the government of Ontario.*

*The views expressed in this publication are the views of Brain Injury Community Re-Entry (Niagara) Inc. and do not necessarily reflect those of the Hamilton Niagara Haldimand Brant Local Health Integration Network (HNHB LHIN) or the government of Ontario.*

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.

PRESIDENT'S ANNUAL REPORT

2019 - 2020

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This is our 32<sup>nd</sup> Annual Report. As we all know, the Annual General Meeting was cancelled due to the COVID-19 pandemic. What a short year this has been for the Board of Directors. Our monthly meetings where we would all meet together are now by teleconference or Zoom meetings.

BICR business has carried on, but in a different way! I have been in touch with our CEO, Frank, and he has kept me informed of the state of the agency. I am very pleased to hear that no serious illness has been reported by staff or participants due to the Coronavirus. Due to the pandemic, Accreditation Canada has been postponed for a year.

There is not much more to report. Keep healthy, follow the social distancing rules of the pandemic and enjoy summer as much as possible.

**NICK OSTRYHON**

**PRESIDENT**

RAPPORT ANNUEL DU PRÉSIDENT

2019 - 2020

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Il s'agit de notre 32<sup>e</sup> rapport annuel. Comme nous le savons tous, l'Assemblée générale annuelle a été annulée à cause de la pandémie de la COVID-19. Que l'année a été courte pour les membres du conseil d'administration! Nos réunions mensuelles en face à face se font maintenant par téléconférence ou par ZOOM.

BICR a poursuivi ses activités, mais d'une manière différente! Frank, notre directeur général, me tient au courant de l'état actuel de l'organisme. Je suis heureux d'apprendre qu'il n'y a eu aucun cas de maladie grave attribuable au coronavirus chez un membre du personnel ou participant. La visite d'Agrément Canada a été reportée d'un an en raison de la COVID-19.

Il n'y a pas grand-chose d'autre à signaler. Restez en santé, respectez les règles de distanciation physique et profitez de l'été le plus possible.

**NICK OSTRYHON**

**PRÉSIDENT**

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.  
**CHIEF EXECUTIVE OFFICER'S ANNUAL REPORT**  
**2019 - 2020**

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I am writing this report in my office with very limited staff in the office. BICR was having an exceptional year and was gearing up for our Accreditation Canada visit in May. Then we experienced the COVID-19 outbreak and everything changed in a matter of minutes it seemed. Our services are forced in the community to be virtual, our residential sites are in lock down mode and a new reality has begun. The new normal is “ZOOM” meetings and a way of providing services in a virtual context.

The organization has had to cancel our Annual General Meeting, Staff Appreciation, the Accreditation Canada visit and golf tournament due to these trying times. I am so very proud of the hard work our staff and management team have accomplished in placing the needs of our participants as a priority. The participants continue to be our priority and I am so grateful for their resiliency and the support of their families. During these difficult times, I have been so excited and filled with pride at the ability that the staff have completed their duties each and every day. The excellent dedication and service delivery has been unmatched.

I hope soon, we can return to provide client services in the community and look forward to getting back to a sense of normal life.

I thank the Board of Directors for all their support, my colleagues across Ontario, and the Government of Ontario for their assistance and guidance.

**FRANK GRECO**  
**CHIEF EXECUTIVE OFFICER**

Je rédige ce rapport au bureau où il n'y a qu'un nombre limité d'employés sur place. Le Centre Réintégration communautaire des personnes ayant une lésion cérébrale (Niagara) connaissait une année exceptionnelle et nous nous préparions en vue de la visite d'Agrément Canada qui devait avoir lieu en mai. Puis la pandémie de la COVID-19 a frappé, et tout a rapidement changé. Nous sommes tous confrontés à une nouvelle réalité. Nous devons, par exemple, fournir nos services dans la communauté de manière virtuelle et avons dû mettre en place des mesures de confinement dans toutes nos résidences. Les réunions ZOOM sont devenues la nouvelle norme et constituent un moyen d'offrir des services dans un contexte virtuel.

Nous avons dû annuler notre Assemblée générale annuelle, l'activité de reconnaissance du personnel, la visite d'Agrément Canada et notre Tournoi de golf pendant cette période éprouvante. Je suis extrêmement fier de l'excellent travail accompli par les membres de notre personnel et de notre équipe de direction, qui ont toujours placé les besoins des participants au premier plan. Les participants demeurent notre priorité. Je les félicite pour leur résilience et je remercie les familles pour leur soutien. Pendant cette période difficile, la capacité des membres du personnel à accomplir leurs tâches jour après jour est pour moi une source de grande fierté. Leur dévouement et l'excellence des services fournis ont été inégalés.

J'espère que nous pourrons bientôt recommencer à offrir des services aux clients dans la communauté. Il me tarde d'avoir de nouveau le sentiment de retrouver une vie normale.

Je suis reconnaissant aux membres du conseil d'administration de leur soutien et je tiens à remercier mes collègues d'un bout à l'autre de l'Ontario et le gouvernement de l'Ontario de leur aide et de leurs précieux conseils.

**FRANK GRECO**

**DIRECTEUR GÉNÉRAL**

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.  
**31<sup>TH</sup> ANNUAL GENERAL MEETING MINUTES**  
**JUNE 12<sup>TH</sup>, 2019**

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**PRESENT:** Nick Ostryhon, Frank Greco, David Shapiro, Sharon Cochrane, Dr. Tricia Pailing,  
Luc Savoie, Jackie Lynch, Jayme Richardson (recorder)

**REGRETS:** Doug Kane, Christine Reeves, Brian Minard, Patricia McNabb

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**1. Meeting called to order at 5:15 p.m.**

Nick Ostryhon welcomed and thanked everyone for attending the 31<sup>st</sup> Annual General Meeting. Nick congratulated all the staff receiving awards this evening.

**2. Adoption of the Agenda**

Motion: To adopt the Agenda for the 31<sup>st</sup> Annual General Meeting as presented.

Moved: David Shapiro

Seconded: Jackie Lynch

Carried.

**3. Review and approval of the minutes from the Annual General Meeting held on June 13<sup>th</sup>, 2018.**

Motion: To approve the minutes of the 30<sup>th</sup> Annual General Meeting held on June 13<sup>th</sup>, 2018 with no errors or omissions.

Moved: David Shapiro

Seconded: Jackie Lynch

Carried.

**4. INDEPENDENT AUDITOR'S REPORT / FINANCIAL STATEMENTS**

Larry Iggulden provided general comments with regards to the agency's operating results for 2018-2019. Larry is an Independent Auditor, and Partridge Iggulden Chartered Accountants are not part of BICR. The auditor's responsibility is to express an opinion on the financial statements based on the audits. The audits are conducted in accordance with the Canadian generally accepted auditing standards. Those standards require that Partridge Iggulden comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

Larry proceeded to present BICR's Financial Statements for the year ending March 31<sup>st</sup>, 2019. He stated that the Iggulden Chartered Accountants Assistants were welcomed by the agency and were provided with the documentation necessary to conduct the audit. He mentioned that the audit was completed without any concerns and the agency provided all the accurate documentation for the audit.

Based on the audit the operating budget of approximately \$6,500,000 was appropriately managed. Of the \$6,500,000 budget, over \$4,750,000 was used towards wages. \$51,000 were used for renovations at Richardson Court. Reserve funds are fully funded and the agency is in a better financial position at the end of the year than the start of the year. There was an operating surplus of approximately \$192,000 with approximately \$130,000 returned to the Ministry of Health. The net operating surplus is approximately \$62,000.

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.  
**31<sup>TH</sup> ANNUAL GENERAL MEETING MINUTES**  
**JUNE 12<sup>TH</sup>, 2019**

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Larry mentioned that it is the auditor's opinion with the exception of the donation revenue which is not susceptible of satisfactory audit verification, that the agency's financial statements present fairly, and reflect a good financial position that was well managed and run.

Larry opened up to questions.

Nick thanked Larry and made a motion to accept the annual financial report as presented.

Motion: To approve the Independent Auditor's Report/Financial Statements ending March 31<sup>st</sup>, 2019 as presented.

Moved: Luc Savoie

Seconded: Jackie Lynch

Carried.

## **5. OTHER BUSINESS**

### **President's Report**

Nick Ostryhon presented the President's Report. He then thanked all of the Board of Directors and staff for their hard work and dedication.

### **Chief Executive Officer's Report**

Frank thanked the celebrating employees and the Board of Directors for their continued support, time, and commitment to the agency. He mentioned that the reason we are all here is first and foremost to support our participants, however tonight is to recognize our staff. Frank wanted to ensure that staff are aware that their efforts do not go unnoticed and he recognizes the great job that they do each and every day. Frank thanked Larry Iggulden for the chartered accounting services. Frank thanked and expressed his appreciation to the Management team for their daily dedication and support they provide to him and to staff.

### **Appointment of Auditor's**

Motion: To appoint the accounting firm of Partridge Iggulden for the operating year of 2019-2020

Moved: Luc Savoie

Seconded: Jackie Lynch

Carried.

### **Recognition of Directors**

Nick Ostryhon – President

Doug Kane – Treasurer

Dr. Tricia Pailing – Director

Patricia McNabb – Director

Luc Savoie – Vice President

David Shapiro – Director

Sharon Cochrane – Director

Christine Reeves – Secretary

Jackie Lynch – Director

Brian Minard – Director

## **6. The date of the next Annual General Meeting TBA.**

## **7. Meeting adjourned at 5:35 p.m.**

Motion: To adjourn the 31<sup>st</sup> Annual General Meeting.

Moved: David Shapiro

Seconded: Luc Savoie

Carried.

## **GENERAL OVERVIEW**

This fiscal year again was a busy year for referrals and requests for information. Throughout the year, the Intake Department received approximately 356 calls for information about programs and services. The total amount of referrals for the fiscal year was 210 individuals referred for BICR services. This includes self-referrals, family referrals and referrals from community agencies as well as family doctors in the community. The Intake Coordinator's primary responsibilities were to support applicants and their families in the application process by responding to all referrals and requests for information. Part of the intake processes included identifying service needs and assessing an applicant's current status and community supports. This position also involved the Intake Coordinator managing and reviewing waitlists for each program within the agency. Throughout the year, BICR continued to manage a waitlist for most programming at the intake level. The average wait-time for services ranged from 30 - 90 days.

## **HIGHLIGHTS**

The Intake Coordinator was involved in a number of internal committees during the fiscal year. The Intake Coordinator is responsible for coordinating and facilitating admissions meetings every month. The purpose of this meeting is to discuss every applicant that has applied for services and review eligibility criteria for every application. It also provides an opportunity to discuss updates in other areas of programming throughout the agency. The Intake Coordinator was also involved in the Participants Safety Steering Committee.

The Intake Coordinator continues to have an active role in the community. The Intake Coordinator attended several agency presentations and staff meetings to present on BICR's admission process and program services. The Intake Coordinator continues to have several requests to attend Long Term Care Facilities, Niagara Health System and Shaver Rehabilitation to provide education to staff regarding support services for individuals with a diagnosis of an ABI. An important part of this role was to continue to foster strong partnerships with community agencies in order to facilitate referrals. Strong partnerships with the Niagara Health System, Community Shelters (Southridge, Salvation Army), Hamilton Health Sciences and Hotel Dieu Shaver are examples of community agencies that provide a large number of referrals to BICR. The goal of strengthening these relationships is to ensure that there is a continual link of ABI services once someone is discharged from in-patient services and is in the community.

## **CONCUSSION INTAKE**

This position continues to assist with intakes specific to a concussion diagnosis. In some cases, applicants have experienced multiple concussions throughout their life, and are only now able to recognize that their brain injury is affecting their day-to-day functioning. In addition to a TBI, participants often experience concurrent issues including mental health challenges and addictions. The Intake Coordinator will meet with the perspective applicant to complete the application process including the acquisition of medical documentation to confirm the ABI diagnosis. An applicant's date of injury varies significantly from 3-6 months post injury to 10-15 years. The role of the Case Coordinator is to assist the participant with developing strategies to compensate for their deficits, advocate for additional community connects and identify functional goals. The total referrals for this support for the year was 28 referrals.

### **INTAKE STATISTICS**

#### Number of calls during the fiscal year 2019-2020

Referrals for Service: **356**

Requests for Information about Programs and Services: **210**

Total inappropriate referrals: **120**

#### Number of referrals based on gender

Male: **133**

Female: **77**

### **CHALLENGES AND TRENDS**

In the past year, there continues to have been an increase in the number of referrals for individuals with ABI, significant mental health concerns and addictions. Concussion referrals continue to increase as those affected have had trouble in finding suitable supports to recover from their concussions. Once the symptoms are treated, BICR can assist with providing supports to manage cognitive challenges and psychological and emotional concerns. Many of the concussion referrals received are 7 years or more post-concussion and individuals are often presenting with many social issues. Again, the goal of the Case Coordinator position is to assist some of these individuals to coordinate and refer to appropriate community supports that may be able to better assist with these issues.

In summary, 2019-2020 continues to see a steady increase in request for community supports, information and referrals. Again, with exploring further partnerships with addiction and mental health services, BICR continues to provide much needed services to all participants and caregivers within the community and continues to strengthen community partnerships to ensure applicants and families are afforded the highest level of support.

**TRACY MADDALENA**

**INTAKE COORDINATOR**

## HIGHLIGHTS

As the Modular Service Program Manager I oversee several programs. In this report, I will review some highlights from the programs I currently manage.

St. Paul Transitional Living is a residential home that partners with Canadian Mental Health (CMHA). There are currently 5 BICR supported beds and 2 CMHA beds. We are at full capacity with a total of 5 BICR participants and 1 CMHA participant.

From June to September of 2019, St. Paul assisted two participants who were ready for transition into semi-independent settings. These two short-term transitions came quickly, but staff made sure the transition went well. Both participants continue to do well in their new environment and receive BICR support through Modular Services. Although these were fairly quick discharges, both participants met their target goals.

St. Paul worked very closely with Hamilton Health Sciences and planned a coordinated participant return as well as a couple of new admissions. Regular hospital visits, team meetings with participants, as well as with staff, assured a seamless transfer to St. Paul for a participant who was hospitalized for approximately 4 months. St. Paul also worked very closely with Niagara Health System to implement a very detailed and coordinated plan to assist with the transition.

One CMHA participant was facing eviction and possible incarceration. St. Paul recognized what BICR could do with this participant and put a plan in place to have this participant transferred to St. Paul through BICR. By providing consistency and guidance to this participant they were actively involved with BICR/St. Paul services immediately. This participant moved into St. Paul in December of 2019 and continues to actively participate in the program.

St. Paul had a total of 3 admissions plus 1 readmission in less than a 2-month span. Staff worked diligently to make these transitions happen in a timely manner, without missing any minor details of the moves. Coordinated efforts by CMHA, Probation and Parole, and Hamilton Health Sciences/St Joe's Hospital were just some of the factors that made these moves challenging. Over all, the moves went well and it once again showed how building strong community relations are important.

The Recreation Coordinator consistently puts out quarterly recreational calendars and leisure guides with a wide range of activities for all participants. Programming consists of music, arts, food, sporting events and agency dances to name a few. Participants are often asked about interests and events they would like to see facilitated by the coordinator. Many of the activities organized over the past year were planned as a result of a recreation survey. Participant and family members continue to provide input in programming that will be offered. Participation numbers also reflect what will be offered.

The Coordinator of the program also oversees an individual caseload for participants while maintaining group facilitation activities. The Recreation Coordinator has made several changes to the department including new mail out calendars, events/groups, and scheduled staffing support to address the high group numbers.

The Recreation program continues to be a highly accessed program due to the variety of programming that it offers. This program also addresses people on the waitlist as it will provide some service while applicants are waiting for more comprehensive services.

Over the past year, Bowden Supported Independent Living program continued to provide a stable supportive environment for BICR participants. Bowden provides support to 7 participants. All participants continue to develop the skills needed to live independently. Bowden staff have encouraged participants to be actively involved in BICR activities.

Over the past reporting period, Bowden's involvement in groups/activities and outings have increased due to the encouragement of staff. They have been actively involved with more BICR supported events, have been employed through our Vocational Department and even coordinated with other programs and residences to host weekly picnics at Waverly Beach.

These events were highly attended with participants looking forward to seeing others for food, fun and games. These social gatherings provided a much needed social network for all the participants in attendance.

This past year the program was challenged with a Team Coordinator change. The move initially was difficult for some to handle, but over time when relationships started to build, participants continued to appreciate the changes and different outlook this new staff was able to bring to Bowden.

There was also an unexpected participant discharge, as a participant's health had declined and exceeded what Bowden could provide in terms of support. This person was discharged into the Niagara Health System and is awaiting Long Term Care. Bowden continues to provide some support to the family as they navigate through the long term care system. The apartment was filled fairly quickly with another BICR participant. This participant was welcomed by all and has taken full advantage of services being provided. Bowden continues to run in-house programming with participant's feedback.

The Erie Shoreline catchment area (Fort Erie to Port Colborne) is addressed by having a Rural Service Coordinator. This position has a caseload that addressed the needs of the outreach participants in this area. Over the years this Coordinator has definitely proved how important the position is, as it consistently has a waitlist that is addressed on a regular basis. The lack of resources in this area make it difficult for participants to navigate systems, but the Coordinator is there to provide support. Her ability to negotiate and build relations with community partners makes this position stand out.

Participants always seem to find solutions with the assistance of the Coordinator. The Coordinator's caseload continues to be maxed out, but the waitlist is constantly being addressed. This Coordinator approaches all situations with great enthusiasm and positive energy.

The Rural Coordinator gets very little rehab/outreach hours, and therefore the results are direct hours. She continues to find ways to provide some services to even those who are on the waitlist. She will invite them to groups, find community programs or negotiate services with other community partners to maximize support for her participants.

The Rural Coordinator also runs group activities with Brain Injury Association of Fort Erie (BIAFE). Group activities are scheduled two days out of the week. During this reporting period we were informed that one of our community partners (YMCA -Fort Erie) will no longer be available. At this point, contact has already been made with the new tenants of the building and we are in the process of working together so services can continue for the participants.

Vocational Services are consistently going through changes. They work independently and continue to build employment resources. They are constantly in the community building relations with businesses and other employment agencies. It's very encouraging to have the number of community partners and local businesses involved with BICR. In the past year we had a couple of local businesses search out our vocational department for assistance. This year our new partners include Niagara Peninsula Conservation Authority, Carousel Players, and Left Central Board Game Cafe.

This past reporting year the Vocational Department was able to employ residential participants that represented most BICR programs. There were a total of 4 residential and 1 semi-independent living program were represented within the Vocational Department this past reporting period. We continue to empower our participants through meaningful employment. The Vocational Department takes great pride in providing these particular participants with their "meaningful" day.

Although there were some challenges with this year's Salvation Army "Kettle Bells" program, the season went as well as expected. The overall employment numbers were down this year due to the increase in minimum wage increase. All programs, except for St. Catharines, could not afford the minimum wage cost of \$14 to pay the employees. All other cities asked for volunteers to supervise their Kettle Bells. Unfortunately, this Salvation Army Christmas fundraiser may be coming to an end as it struggles with the supervision of the bells.

In conclusion, the year has been busy and exciting. I continue to be challenged in my role as Modular Service Manager. This past year, my staff and I were selected to be part of Accreditation Canada Teams. This took up additional time, as there were responsibilities that needed to be addressed. Also, at the end of this reporting period the agency, province and country went into a state of emergency. BICR had enacted its own emergency response plan. Overall I feel the plan was well thought out and it was clear to the managers, staff and participants what was expected. All took to the responsibilities that were asked of them and worked through the challenges this country was faced with.

I look forward to what lies ahead in the next growing year for BICR.

**JOE TALARICO**  
**MODULAR SERVICES MANAGER**

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.  
**CASE MANAGEMENT PROGRAM ANNUAL REPORT**  
**2019 - 2020**

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**GENERAL OVERVIEW**

The Case Management program is a time limited service that provides initial service coordination to individuals on BICR’s waitlist. Core functions of Case Management include individual assessment, goal setting/service planning, assisting with the completion of applications (i.e. NRH, ODSP), finding appropriate housing, and making referrals to internal and external community resources. Case Managers maintain regular communication with the Intake Coordinator and regularly consult with the agency’s Psychologist and Social Worker.

**STATISTICS**

The following is an outline of current averages within the past year. It combines the numbers from both Case Managers currently working within the program.

TOTAL FILES ADMITTED	FILE CLOSURES / DISCHARGES	TRANSFERS TO OTHER BICR PROGRAMS
26	18	10

Closures / Discharges are files that are no longer open at BICR. Files are closed or discharged because support needs have been met or contact has been limited with lack of participation by the participant. Transfers are between Case Management and other BICR programs such as COSS and Buckley/Bowden SIL.

**HIGHLIGHTS**

This year a part-time Case Management position was added to address individuals who have concussion related challenges. Post concussive sequela can be unique due to different recovery times. This position can make necessary referrals internally and externally to assist with this recovery.

Case Managers continue to be involved in several committees within the agency such as Joint Health and Safety Committee, Behavioural Review Committee, and Emergency Response and Outbreak (EROC) Committee. A Case Manager also participates in the Accreditation Canada process. Additionally, a Case Manager facilitated Crisis Intervention Management training internally for all agency staff.

**CHALLENGES**

The following continues to be a challenge: helping participants with concurrent diagnoses, assisting participants with securing affordable housing, finding appropriate community resources for participants with concurrent diagnoses and establishing and maintaining contact with participants.

In mid-March the COVID-19 pandemic had a significant impact on how service is provided. Community meetings were cancelled and the Main Office was closed. Going forward, it is still unclear as to how our support will proceed.

**OPPORTUNITIES**

The Case Management team will continue to assess and survey present caseloads to better serve participants and to provide seamless service from the Intake level, waitlist and Case Management. The team will also persist with fostering partnerships with outside service providers.

**JONATHAN WILLIAMS**  
**CASE COORDINATOR**

**BRANDON PEARSON**  
**CASE COORDINATOR**

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.  
RECREATION SERVICES ANNUAL REPORT  
2019 - 2020

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**GENERAL OVERVIEW**

Brain Injury Community Re-entry (Niagara) Inc. (BICR) takes pride in offering a variety of recreational services to our participants, those who are on our waitlist, and many community partners throughout the Niagara Region. While the recreation program oversees the coordination of statistics for all groups offered by BICR, there are a number of staff who share their passion and skills with our participants. The statistics below encompass the collaboration and efforts of staff across all spectrums of BICR's programs including Personal Effectiveness Training Program, Community Outreach Support Services, Residential Services and Modular Services.

**STATISTICS**

CALENDAR EVENTS & GROUPS	NUMBER OF UNIT 10 EVENTS	TOTAL NUMBER ATTENDED (UNIT 10, GROUPS & EVENTS)	PARTICIPANTS SOLELY ACCESSING REC SERVICES	TOTAL ADMISSIONS
374	156	4722	14	21

**PROGRAM HIGHLIGHTS**

- The continuation of the weekly Dart League at Unit 10.
- Continued to maintain maximum numbers for all ongoing groups and activities.
- BICR Bowling group to run year round at Parkway Social.
- The Planning and selection stage for a Mexico Trip in 2020 or 2021.
- The successful coordination of two summer trips to Geneva Park in August 2019.
- Successful co-facilitation of Wacky Wednesday in coordination with the PET program.
- The continuation of the Wood Working group.
- The continued partnership with Heartland Forest.
- BICR continues to foster a successful partnership with the School of Horticulture for the WRAP program twice per week.
- The continuation of ongoing contact with residential recreation representatives, and each residential site facilitating one recreation event in a 3 month period.
- Continued success of seasonal recreation activities that include the Bowl-a-thon and canoeing.
- The reintroduction of the Card Sharks program on a biweekly basis.
- The continued facilitation of BICR's annual dance fundraisers.
- Continued input from clients and staff in regards to recreation programming.
- Van Coordinator for one agency vehicle housed at the Martindale office.
- Provide day-to-day support to co-op and SEED students in recreational services.
- The switching of the Men's Group program from weekly to biweekly to coincide with the Card Sharks program.
- Record Binder Designate for 14 participants.
- The co-facilitation of the Waverly Beach program in Fort Erie.

As the Recreation Coordinator I am an active member of the following BICR committees: Bowl-a-thon, Golf Tournament, Vacation planning, Modular Services, Transportation, COSS / Modular Services Christmas Party.

**DAVE HORTON**  
**RECREATION COORDINATOR**

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.  
**RURAL SERVICES COORDINATOR ANNUAL REPORT**  
**2019 - 2020**

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**GENERAL OVERVIEW:**

Rural Services are provided to individuals in the following cities around the Niagara Region: Fort Erie, Crystal Beach, Ridgeway, Port Colborne and Stevensville. There are currently 23 participants on the caseload with 4 on the waitlist. Each individual receives services weekly or biweekly based on their individual needs. This may include; help with medical appointments, ADL's, budgeting, court cases, etc. Rural Services focuses on the ability for the participants to continue living independently in the community as comfortable as possible. Rural Services promotes education for everyday living, as well as independence, by working towards and engaging in meaningful activities within the community while working with other individuals and agencies.

Rural Services is currently partnered two days a week with BIAFE (Brain Injury Association of Fort Erie). A day program is run for individuals who are looking for a social outlet in which BIAFE and BICR (Brain Injury Community Re-entry) can provide. In this program, individuals work together in order to complete tasks in which they are faced with on a regular basis such as: cooking, hygiene, social gatherings, promoting healthy eating and exercise. This year the BIAFE building required some renovations to address some unsafe areas. Currently, this program runs Mondays and Tuesdays, averaging 12-14 participants per day. Monday's group starts with promoting healthy eating and meal prep, followed by the YMCA and understanding of exercises.

Unfortunately, due to the YMCA closing in early February, the program has been moved to BIAFE for the full day on Mondays completing chair yoga and meditation. Tuesday's group starts with meal prep and healthy eating, followed by programming of different types. Programming may include activities such as: art, hygiene education, budgeting, and socializing within proper behaviors for different settings just to name a few. The day program has also added an extra day to the annual camping trip to the KOA in Niagara Falls making it a 3 day 2-night trip. Participants look forward to this trip each year.

Currently, Rural Services partners with different agencies around the Niagara Region. F.A.S.T (Fort Erie Accessible Transit) which was purchased by BTS, BIAFE (Brain Injury Association of Fort Erie), YMCA of Fort Erie until February, Niagara Housing, CCAC, St. Elizabeth, the Recreation Department at BICR, and Pet Therapy.

**CHALLENGES**

- Finding a new partnership in which the day program can go for exercise and fitness on Mondays.
- Caseload numbers compared to hours available for the supports needed with the individuals coming through for service. As well as the number of individuals on the caseload already with the amount of days to see them, with day program running two days a week.

**OBJECTIVES FOR THE UPCOMING YEAR**

Overall, Rural Services has had a great year. Numbers have stayed consistent within the day program capping both days at 14 participants and having to start a waitlist which currently has 2 participants. Some objectives for next year:

- Utilize the BIAFE facility after hours and days other than the day program to host and hold more events geared to participants using this more regularly
- Maintain the partnerships that have been put in place and continue to utilize them whenever possible. As well as making new partnerships.
- Continue to support participants and their families with the best support and dignity possible through Rural Services.

**CHELSIE YUNGBLUT**  
**RURAL SERVICES COORDINATOR**

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.  
**BOWDEN SUPPORTIVE INDEPENDENT LIVING PROGRAM ANNUAL REPORT**  
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The Bowden Supported Independent Living program is based in Fort Erie. The program provides participants with an opportunity to live in their own apartments while accessing staff support when needed. The program focuses on enhancing participant's quality of life, maintenance of health status, community involvement, achieving identified participant goals, personal independence and continual self-improvement. The goal is for participants to continue to develop skills and routines that enable them to establish meaningful productive daily routines.

Bowden operates 7 days a week from Monday to Friday 8:00 am – 8:00 pm and also Saturday and Sundays from 9:00 am – 7:00 pm. During the week there are two full-time staff working the daytime hours and one full-time staff working the afternoon into evening hours. A total of 3 relief staff augment these hours by primarily working weekend shifts.

The ongoing partnership between the Bowden Program and Niagara Regional Housing strengthens the program and gives opportunities for participants to access subsidized housing. All rental costs for participants continue to be geared to income.

#### **HIGHLIGHTS FOR 2019- 2020**

- The program is supporting seven participants who are living in one bedroom apartment units among other individuals that are also in apartments but are being supported through Canadian Mental Health.
- The team at Bowden continues to establish and foster strong partnerships within the community. Bowden community partners include: Niagara Regional Housing, Brain Injury Association of Fort Erie (B.I.A.F.E.), YMCA, Fort Erie Accessible Transit BST, Heartland Forest and the BICR Recreation Department.
- Prior to the Pandemic, several participants were participating in workouts at the Fort Erie YMCA, movie outings, hockey games and monthly luncheons. The Bowden van has significantly increased the amount of events and programs the participants now attend.
- Three participants had the opportunity to gain seasonal employment through Cemetery Gardening Angels which is a division of BICR. The three individuals worked 2 days per week at 3 hours per day from June to October 2019.
- The Waverly Beach BBQ's continue to be a popular outing throughout the summer months. Bowden, along with other programs, shared in hosting the BBQ outing. This outing has subsequently led to the participants developing friendships which have extended well beyond the Bowden participants.
- During this fiscal year, the program experienced a number of staffing changes including a change in the Team Coordinator.
- Our biggest challenges are the lack of accessible and affordable public transportation in the Fort Erie area and the recent closure of the Fort Erie YMCA. Both make it very difficult for the Bowden participants to establish new and ongoing community resources.

**TINA HORTON**  
**TEAM COORDINATOR BOWDEN-SIL**

## **GENERAL OVERVIEW**

Vocational Services offers individualized support to participants who have identified goals related to finding meaningful employment opportunities, volunteering in the community, and/or returning to school to further their education. The Vocational Department consists of one Vocational Coordinator and one Vocational Facilitator who work together to support participants in achieving their vocational goals.

The ongoing Vocational Programs of Cemetery Gardening Angels, Salvation Army Kettle Bell Campaign and the Niagara Region's Adopt-a-Road Program continue to offer participants supported work readiness training and are used as valuable assessment tools to help determine a participant's skillset prior to seeking competitive employment within the community.

In 2017, the agency identified Employment Opportunities for Participants as one of BICR's strategic directions for 2017 – 2020. The Vocational Department has collaborated with several community partners to begin working towards increasing employment opportunities for our participants.

## **VOCATIONAL SERVICES HIGHLIGHTS**

Vocational Services has continued to work steadily with March of Dimes Canada Employment Services and other Employment Ontario service providers including the YMCA Employment Services and Job Gym Fort Erie. These partnerships have allowed the vocational team to access additional employment supports for participants such as funding for participants to attend paid training placements and receive work start up benefits, additional on the job support through job assessments and coaching, and access to resources to support skills upgrading or returning to school.

The Vocational Team works alongside these partners to promote ABI awareness with community partners and employers, support the participant through the process of seeking and maintaining employment, provide on-the-job coaching for participants and any follow up support that may be required for those who have achieved their vocational goals.

The Vocational Department also established new relationships with the Niagara Peninsula Conservation Authority, Carousel Player's and Left of Central Board Game Café. All of these employers have provided valuable volunteer opportunities to BICR participants that have allowed participants of all skills levels and varying interests to participate, develop skills and help them to contribute their skills to something important.

## **CEMETERY GARDENING ANGELS HIGHLIGHTS**

Cemetery Gardening Angels (CGA) continued to grow while providing more supported employment opportunities to BICR residential participants. This year CGA was able to hire 10 participants living within five different residential sites with BICR (both fully supported and SIL sites). Participants would often express to staff how much they appreciated and enjoyed the opportunity to work with Cemetery Gardening Angels. Equally, it is such a pleasure for staff to see each participant grow, develop and thrive in their roles and responsibilities with CGA.

CGA also had the pleasure of having returning BICR and March of Dimes team members from last season, therefore benefitting from a more confident workforce with even stronger working relationships. The results

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of this was astounding as we witnessed seasoned team members begin to display leadership skills to new team members. As well, new team members really appreciated the support and direction provided by their seasoned counter-parts. The partnership with March of Dimes has allowed BICR participants to further develop their workplace communication skills and broaden their relationships with those in the community.

Once the labour force had been established for CGA, we were once again able to be a valuable assessment and training tool, not only for BICR participants, but for March of Dimes as well. Paying 100% of the wages, March of Dimes placed 2 more participants with our team for the purpose of determining their employability and developing their confidence in the workplace. March of Dimes has confirmed that these individuals have secured employment since being with CGA and that their time with CGA was incredibly valuable in accomplishing this goal.

#### **SALVATION ARMY KETTLE BELLS HIGHLIGHTS**

The Salvation Army Kettle Bells Campaign continued their partnership with the Vocational Department, however, with a much smaller participation level from past seasons (6 participants). This is due to St. Catharines being the only city in which Kettle Bell Workers are paid. All other cities in the Niagara Region are only recruiting volunteers due to minimum wage having increased to \$14 / hour. Although a small group, this partnership continues to benefit participants who are interested in trialing returning to employment as well as gaining volunteer experience with no long-term commitment necessary.

#### **STATISTICS**

<b>Total Admissions</b>	<b>5</b>
<b>Total Discharges from Agency</b>	<b>1</b>
<b>Total Closures in Program</b>	<b>5</b>
<b>Total Transfers</b>	<b>2</b>
<b>Caseload Range</b>	<b>28 – 32</b>
<b>Waitlist Range</b>	<b>3 - 11</b>
<b>Jobs Secured in Seasonal Employment</b>	<b>14</b>

#### **CHALLENGES**

Public transportation continues to be an obstacle to participants who are seeking competitive employment within the community. For those that rely on public transportation, employment options are limited to workplaces near bus routes and their availability for shifts is dependent on the bus schedule. The Vocational Department will continue to support participants in learning the bus system and finding employment opportunities within these geographical areas or alternately arranging transportation through various community supports.

Finding employers who are open to hiring persons living with an acquired brain injury continues to be a challenge. The Vocational Department has been actively working with community partners to identify suitable employers and to educate potential employers about the benefits of diversifying their workforce while providing an opportunity for our participants. The Vocational team will continue to strive for appropriate job matching based on skillset and assist employers and participants with implementing successful compensatory strategies within the workplace to ensure a successful job placement. The Vocational team has had success in overcoming this challenge by partnering with services that can provide funding to the employer, while our team provides job coaching directly to the participant, relieving the employer of any financial or manpower risk, while participants are learning the skills of their new jobs.

In summary, the Vocational Department has had a successful fiscal year as the team continues to work towards developing strategies to reach the agency's strategic direction of increasing employment opportunities for participants.

**ERICA DAVIDSON**  
**VOCATIONAL COORDINATOR**

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COSS provided rehabilitation and support services to approximately 156 individuals in 2019/20. Over the course of the fiscal year we admitted 18 people to COSS and discharged 13. People referred to COSS present with a variety of needs and wants that the COSS Team assess. Goal oriented plans are then developed to assist them in community re-integration after acquired brain injury. This report will outline and summarize the activities of COSS as we endeavor to continuously improve our program model and service quality.

#### **THE POPULATION WE SERVE**

COSS is funded to provide rehabilitation and support to individuals 18 years of age and over who present with a variety of physical, cognitive and emotional challenges, some resulting from their acquired brain injury, some exacerbated by it. They live in a variety of community settings including their homes, apartments, lodging homes and Long Term Care homes. They can reside with family, friends, or alone. The common theme our participants report is their sense of disconnection from life and living after ABI. This disconnect from life may look different for each individual. Therefore, it is our job to attempt to find ways and means to help them move toward connections, across the various domains of life. This requires a systematic process of getting to know each individual, their strengths, needs and wants as well as their history and interests in order to help them re-assemble the pieces of their lives.

In the past number of years, we have observed a growing trend with the people we serve. The complexity of the challenges that they are coming to us with has increased. Specifically, they are struggling with more mental health and addictions issues which can make it more difficult for our team to engage them and help them to move forward toward recovery. These complexities have caused our team to re-think how we provide services to effectively engage people with these issues that often present as barriers to the community re-entry goals we are trying to establish.

#### **COSS CONTINUOUS PROGRAM QUALITY IMPROVEMENT**

In an effort to better serve our participants, COSS has continued to refine the tools with which we learn about them, negotiate service plan goals, and evaluate the success of our interventions. To this end we have focused on two specific areas: assessment and documentation efficiencies.

In the fiscal year 2019/20 the COSS team reviewed a number of functional assessment tools and interview strategies that will allow us to improve how we gather information on our participants leading to better understanding of their needs and desires and more relevant service plan goals. This battery of assessment tools has been put into an assessment package for staff. In addition, an assessment checklist has been created in an effort to provide staff with a guideline and reminder of the tools that are available to them.

Balancing direct face-to-face time with participants with indirect case planning, travel and documentation is a constant challenge for COSS Case Facilitators (CF). Caseloads average between 10 to 12 individuals per CF and the contacts with each individual on a caseload can ebb and flow over time as their needs vary and inevitable crises occur. In an effort to become more efficient in our documentation, the COSS Team in the past year, has tried to make our service planning documentation process more efficient and less time consuming. We have done this by taking three separate documents, the Individual Support Plan, the Progress Report and the Goal Attainment Scale, and integrated them into one document, The Individual Support Plan. In this way, staff are able to tell a story of what happened in the previous reporting period and how these accomplishments are influencing our plans for the next reporting period. Having these documents integrated brings progress and planning for the future together, makes it easier to track documentation, and reduces signatory requirements that allow for more efficient review and processing of the document.

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Increasing our documentation efficiencies is an ongoing process of refinement. It is necessary because we must focus the majority of our time on our participants via direct contacts. Direct contact hours have been a focus of COSS for the past two years. Our goal has been to increase our contact hours and maintain them at a minimum average of 50% of the time we spend.

#### **COSS STAFFING AND PROGRAM CAPACITY**

During the past year, the COSS program has added another half-time Case Facilitator position. Increasing Case Facilitator resources allows us to address the ever increasing requests for COSS services. In addition to increasing service capacity by adding Case Facilitator resources, COSS has also continued to focus our efforts on serving the right people at the right time. Occasionally a person will be referred to COSS but will not be ready to engage in a rehabilitative process for whatever reason. We have, and will continue to, increase our efforts to identify those who are not ready for service earlier in the assessment process (within the first three months after a referral) so that we can move toward those on our waitlist who are ready for our service. In some cases this will mean making referrals to other community resources that have the resource and expertise to help those individuals.

A small percentage of the people we serve (approximately 13%) are primarily receiving COSS support in order to give their families and caregivers a few hours of respite per week.

#### **COSS LONG TERM CARE CASE FACILITATOR**

Another significant change in staff organization that occurred in the past year occurred with our Long Term Care Case Facilitator. Jennifer Kiers served in this capacity for approximately 8 years. After 8 years working in that system, it was time for a change. In the process of analyzing what was needed to provide service in the LTC system, it was decided that the LTC Case Facilitator position would become a shared position. To this end, we were pleased when Jennifer Fenton and Amanda Young agreed to share the approximately 13 cases that are currently being served by COSS in the various LTC's across the region.

Providing support to young adults with acquired brain injury who are inappropriately placed in Long Term Care facilities has been an important element of BICR's community support program since 2008/09. These resources were designed to provide short term education and consultation to the LTC staff on the needs of individuals with ABI in their care. In some cases, individuals have continued to be a part of BICR's recreational and PET services allowing them to socialize with people closer to their age. For these young adults in LTC, we have consistently received anecdotal evidence reporting how much their involvement with BICR has improved their quality of life and in some cases reduced behavioural challenges in the LTC facility.

In conclusion, the COSS program has continued to provide supports to people in the community focusing on improving health and re-integration. We are thankful for the support of all of BICR's administrative staff who help us to accomplish this task!

Respectfully submitted,

**SCOTT FARRAWAY**  
**COSS PROGRAM MANAGER**

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**LONG TERM CASE MANAGEMENT ANNUAL REPORT**  
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**GENERAL OVERVIEW**

The Long-term Case Facilitator provides support and follow-up to participants who are being gradually discharged from BICR services or who require minimal support on a long-term basis in an effort to maintain their independence in the community. Hours of support as well as support requirements are participant driven.

**STATISTICAL INFORMATION APRIL 2019 - MARCH 2020**

CASELOAD APRIL 2019	ADMISSION	DISCHARGES / FILE CLOSURES	TRANSFERS	CASELOAD MARCH 2020	WAITLIST MARCH 2020
27 participants	3 1 COSS, 1 Voc., 1 Intake	2	1	27	1

The above statistical information provides an overview of the Long-term Case Facilitators caseload from April 2019 to March 2020. This writer started the fiscal year with 27 participants and ended with 27 participants; there is one participant awaiting service.

**REFERRALS/ADMISSIONS**

The Long-term Case Facilitator received three referrals during this fiscal year. One referral came from Community Outreach Support Services, one from Vocational Services and one from Intake.

**AREAS OF SUPPORT**

The writer works collaboratively with the participant to address their immediate needs providing guidance and support, as needed. The majority of contacts are initiated by phone. The writer assesses the request and determines if the request can be addressed by phone or if direct contact is required. Because of the flexibility in this role the writer is able to support participants in times of higher need and then reduce their hours when appropriate. Participants request support to navigate various services such as the medical system, transportation services, housing services, Government Services (forms and applications), tax services, food banks, legal services, and comprehension of correspondence to name a few.

The Long-term CF provides education to the participant around falls prevention, infection prevention, coping strategies, conflict resolution, smoking cessation and self-care. The writer also supplements the support provided by other departments reinforcing the strategies already put in place and providing additional compensatory strategies as needed. The Long-term Case Facilitator provides emotional support and guidance to participants and their family members. In addition, support is provided to participants in crisis situations; a crisis is defined as any significant internal or external environmental change that overwhelms the participant and exceeds their ability to cope (21 crises were tracked during the aforementioned year).

**TRANSFERS**

There was one transfer to COSS during this fiscal year due to increased support needs.

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**DISCHARGES**

Two participants were discharged from April 2019 to March 2020. One individual was not accessing services and the other individual moved to a supportive living environment and no longer required support as the participant's needs were being met within the facility.

**SPECIAL PROJECTS**

- Participation in the Emergency Response Outbreak Committee (EROC) continued through the 2019-2020 fiscal year. The writer reviewed the annual mock scenario at one of the residential sites, results were documented and presented at the committee meeting.
- The Transition / Discharge Survey was completed with participants who were being transferred / discharged from Comprehensive and Modular Services. 35 surveys were completed by the end of the fiscal year, with another 23 pending. These transfers took place in March, just prior to the service suspension as a result of the COVID-19 State of Emergency. The aforementioned survey results will be included in the 2020-2021 Transition/Discharge Survey Report.

**DONNA RIX**

**LONG TERM CASE FACILITATOR**

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## **GENERAL OVERVIEW**

In partnership with Ontario March of Dimes (OMOD), BICR offers the Personal Effectiveness Training (PET) program which is a comprehensive day program, offered five days per week. The program serves individuals who require assistance with developing skills prior to returning to work, or becoming independently active in the community. The program is based on five components, including life skills, physical activity, community skill development, leisure skills, and supported volunteer opportunities. Our long-term goal is to foster development in these five key areas for PET participants, while our short-term objective is to offer leisure programming for the greater BICR participant population.

## **PRIMARY PET COMPONENTS**

The Life Skills program has been offered weekly throughout the year and focuses on discussion of theories with practical applications. Topics are chosen to reflect what participants are dealing with in their lives, and by observations by staff of what skills would be most useful for participants. Topics include but are not limited to showing respect for yourself and others, importance of humour and using appropriate humour, grief and loss, taking responsibility for yourself, and creating a positive mental attitude. Literacy, numeracy, and speech with alternative augmented communication has been offered on an individual basis as requested.

An important aspect of PET program is physical activity regardless of participants' physical abilities. Adapted physical activities are offered on a regular basis throughout the year. These programs include three 8-week blocks of Tai Chi which is funded by OMOD, swimming at Kiwanis Centre, walking, weights, and stationary bikes at YMCA. Tai Chi is open to all BICR participants and OMOD consumers. A nearby nature trail is used during the warmer months for walks. This year, Laughter Yoga was introduced, which is an adapted alternative style of seated yoga which focuses on breathing and gentle movement which is great for individuals with very limited range of motion.

Community engagement and skill development continues to be an integral part of the PET program. PET offers opportunities to practice social skills and communication with support, and real-world experiences to practice practical life skills like counting change, ordering and purchasing tickets or food. Opportunities to engage in the community include mall and movie days, bowling and brunch, as well as the Performing Arts Centre education series. Leisure development groups are an important and popular aspect of PET program. Programs are developed to suit the interests of all participants and include an array of options, including drumming, music therapy, pet therapy, karaoke, and knitting. Music with Phil & Friends is an interactive, live music program, which continues to be the most popular group. Stucco art is also very well attended and runs throughout the reporting period. New games for participants of all skill levels are being introduced regularly, which are used to teach important skills like emotion regulation or social skills through the games and debriefing sessions. Examples include Social Skills Trivial Pursuit, Emotions Uno, and Telestrations. The latter being very popular among both staff and participants.

Supported volunteer placements are offered weekly and monthly throughout the reporting period for PET participants. Opportunities include the Lincoln County Humane Society feline socializing program (weekly), as well as Community Care (monthly). PET offers this as an ongoing program, as well as a transition opportunity for participants to move into the Vocational Department for more independent volunteer opportunities.

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**HIGHLIGHTS & OPPORTUNITIES**

- Accredited Music Therapist and Registered Psychotherapist, Laura Cowal, joins us weekly for music therapy which focuses on building social skills and cognitive skills such as focus and sustained attention, and memory. As of this reporting period, Laura introduced a second music program called Musical Healing, which uses music as a medium for self-expression, processing grief, loss, and celebration.
- OMOD introduced Stacey Hancharyk from Indra's Soul Sound Energy Services to the PET program which focuses on the use of sound for holistic stress reduction. Stacy is a certified Reiki practitioner as well as certified for the use of crystal bowls. Through the use of crystal singing bowls, deep eye gong, and other sound instruments, Stacy facilitates a deep meditative experience with sounds that reach the depths of your soul. Participants loved the experience and have requested more sessions.
- This fiscal year PET also introduced Mary MacDonnell from Laughalot Yoga with ME. Mary is a certified Laughter Yoga Leader, who incorporates youthful joy and laughter in breathing and gentle stretching exercises. Laughter, whether real or forced, releases serotonin and dopamine, as well as endorphins, and decrease hormones such as cortisol and epinephrine. This neurochemical combination contributes to a feeling of happiness and connectedness, and helps to fight stress, anxiety, depression, and physical pain.
- PET holds fundraising events such as the Annual Craft Sale. All funds from this program go directly back into programming and help pay for activities such as Kiwanis Centre swim, drumming, and Laughter Yoga. The proceeds also supplement costs of outings such as brunch & bowling, or the Performing Arts Centre. The Recreation Department coordinates with PET again to run two fundraising dances for the participants, the Halloween Dance and the Spring Fling. The proceeds from both dances go directly back into programming for the participants in both departments.
- This coming fiscal year we are excited for new opportunities with a local rescue farm sanctuary, who have offered volunteer opportunities and farm visits with the animals. This will be a chance to learn about fair and ethical treatment of animals, as well as large animal care.
- Science with Katie and Kevin will be offered through the summer months where participants have the chance to experiment with aerodynamics, physics, and air pressure, while they create and launch their own pop-bottle rockets using a simple combination of water and controlled air pressure.

**KATIE HILL**

**PET COORDINATOR**

## **GENERAL OVERVIEW**

This report covers the period from April 1, 2019 to March 31, 2020. Residential Services is comprised of the Richardson Court, Promenade Richelieu and Parkdale residential sites inclusive of the Transitional Training Facility located in the basement of the Parkdale residence.

## **RESIDENTIAL SERVICES**

During this reporting period, the Residential department provided resources and supports for 15 full-time residential placements and one shared care participant. The shared care participant accesses the residential program from Sundays to Fridays each week and spends the weekend home with family. This arrangement allows additional individuals the opportunity for weekend respite stays typically offered from Friday evening to Sunday afternoon. During this fiscal year the respite program was able to provide support to 4 separate families. Participants accessing the respite program were provided with an average of 50 hours of weekly residential support to ensure the success of their stay. Respite continues to give caregivers an opportunity to have a well needed break and to give participants a chance to experience a new environment while having the opportunity to work on any specific goal areas.

Services for all the residential participants were achieved through the dedicated efforts of a supportive team comprised of 2 Program Managers, 2 Team Coordinators, 6 Case Facilitators, 51 Rehabilitation Counselors, and students from various local schools. Staff continue to collaborate with Dr. Linda Cudmore to discuss participants with more complex needs. The highly skilled team supports participants in all aspects of their life including activities of daily living, behavioural management, and establishing consistent routines to increase productive activities with frequent community involvement. The residential program continues to embrace participant changes relating to aspects of aging, changes in health status, and behavioural challenges. There continues to be coordination with the Local Health Integration Network – Home and Community Services for occupational and physical therapy, incontinence care, swallowing assessments, and for the facilitation of transitions and referrals to Long Term Care Facilities.

During this fiscal year Promenade experienced some flooding issues from one of the upstairs bathroom. After many consultations and minor fixes, the bathroom shower was finally completely removed and replaced with a new shower system. The bathroom looks great and more importantly there are no more leaks to report.

Parkdale continues to have some aesthetic updates to make the house look newer and more modern. In March the hallway and the trim were painted to match the decor in the living room. The house looks great and the staff and participants are happy with their updated home environment.

Richardson Court had the back portion of the fence replaced which has updated the overall look of the yard. The participants are looking forward to using the space to relax, garden, and play an outdoor game of horse shoes.

The residential team is committed to the agency's strategic directions with a focus on creating an overall culture of safety. The sites continue to use an electronic medication system (E-Mar) for recording the administrations of medications and to reduce medication errors. We thank Pharmasave for their ongoing partnership.

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Our teams continued to work tirelessly through the community pandemic and focus on measures to maximize the safety of participants. Staff worked through shifts wearing their PPE equipment creating a sense of hope and normalcy for the participants. We cannot thank the residential staff enough for their enthusiasm, dedication, and efforts in spite of all of the challenges. Participants are truly the center of our focus and much gratitude is extended to the residential staff for ensuring a high quality of care.

**CHRISTINE WILLIAMS**  
**PROGRAM MANAGER**

**MARGO VAN HONSBERGER**  
**PROGRAM MANAGER**

### **GENERAL OVERVIEW**

Buckley Towers is a supported independent living program based in Niagara Falls. The program provides participants with an opportunity to live in their own apartment while accessing staff support where needed. This program is designed to help participants become more independent by developing their skills and in establishing some meaningful, productive activity with frequent community involvement. The goal is for participants to transition out of the program with daily routines and skills in place.

Buckley operates 7 days a week from Monday to Friday 8:00 am – 9:00 pm, Saturdays 9:00 am – 9:00 pm, and on Sundays from 10:00 am – 6:00 pm. Three full time staff are working the daytime hours during the week and a total of one part-time staff and two relief staff augment these hours by primarily working evening and weekend shifts.

The ongoing partnership between the Buckley Towers program and Niagara Regional Housing strengthens the program and gives opportunities for participants to access subsidized housing. All rental costs for participants continue to be geared to income.

Several participants in the program are also accessing March of Dimes (who have staff onsite) for overnight wellness checks, medication administration, and completion of showering routines. We could not successfully run this program without this partnership.

### **HIGHLIGHTS FOR 2019 - 2020:**

- The program is supporting seven participants who are living in one bedroom apartment units on various floors throughout the building.
- We are supporting one participant who qualifies for additional DSO dollars (additional funding for individuals with a developmental disability). With this additional funding, the program utilizes one-to-one staffing for approximately 9 hours per week. The focus of the one-to-one shifts is to work together to increase community participation.
- During this fiscal year, the program experienced a number of staffing changes including a change in the Team Coordinator. A notable mention is that the Case Facilitator at Buckley is celebrating an incredible 30 year milestone with the agency this year!
- Prior to the Pandemic, several participants were participating in workouts at the YMCA-Niagara Falls Branch, and accessing a number of community activities (Outdoor walking track, movie nights, dinner at local restaurants, attending hockey games, and accessing the coffee shop). The support given to the participants during the pandemic has been much different with the focus on trying to engage participants in activities within their apartments.
- The Niagara Region typically offers a Wellness and Healthy Living Program for all tenants at Buckley including our participants. This Wellness program gives our participants an opportunity to participate in coffee hour, breakfast club, foot care, stretching classes, chair yoga sessions, holiday festivities, information sessions on a variety of health topics, and movie afternoons.

- Two participants within our program are followed by the Behavioural Review Committee because of restrictions within their programs. Staff store food in the office to support a participant who has a food addiction and is highly impulsive due to his ABI. It is also stored for another participant who has a history of consuming food items that have not been properly prepared and cooked. Monies are also kept in the staff office for these two participants.
- The Wednesday evening dinner event at Buckley continues to be a popular event, as the participants look forward to having a meal and the opportunity to socialize with one another. This dinner activity has subsequently led to the participants developing friendships which have extended well beyond the structure that was planned by staff. The group dinner activity has been temporarily suspended because of restrictions due to the Pandemic.
- One of our biggest challenges remains the difficulty in transitioning participants out of the program given the lack of affordable housing within the Niagara Region. Our participants go back on the general waitlist once they are accepted into Buckley. The current wait is on average 10 to 12 years for a one-bedroom unit in the Niagara Region.
- We are incredibly grateful for our partnerships with NRH and March of Dimes giving us the opportunity to offer a Supported Independent Living experience to our participants.

**TINA HORTON**

**TEAM COORDINATOR**

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.  
ST. PAUL TRANSITIONAL LIVING PROGRAM ANNUAL REPORT  
2019 - 2020

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### **GENERAL OVERVIEW**

St. Paul Transitional Living Program offers individuals throughout Ontario, living with the effects of an acquired brain injury and mental health diagnosis a shared living setting with 24-hour support. St. Paul consists of five beds; including one fully functioning apartment with house access, one separate outside apartment, two main floor accessible units and one upstairs bedroom with a private washroom. St. Paul works collaboratively with Canadian Mental Health Association and provides 24-hour support to two CMHA beds on the upper level.

The St. Paul staff work collaboratively with participants to build a personalized program while promoting independence and choices. They have access to a communal kitchen and are responsible for the preparation of their food, with support and assistance from staff as required. Staff at St. Paul provide a wide range of support including; assistance with ADL's, budgeting, meal planning, grocery shopping, cooking skills, public transportation, medication independence, and community involvement.

St. Paul provides individuals the opportunity to gain skills and strategies to live independently. Many of the St. Paul participants struggle with addictions to either illicit drugs or alcohol. Assistance in accessing supports within the community is provided in an individualized manner.

St. Paul continues to work closely with the Vocational Department by providing meaningful volunteer and paid work opportunities to our participants. Participants are provided the opportunity to gain work related skills while being provided with on the job staffing support, if required.

Dr. Seyone, Neuropsychiatrist, continues to be an invaluable member within the St. Paul program. Dr. Seyone has continued consulting 6 days per year and is accessible to the program via email in between his visits. Participants living at St. Paul have ongoing struggles with their acquired brain injury and mental health diagnosis. Effective medication management plays a vital role to their rehabilitation. Dr. Cudmore, Clinical Director and Psychologist, continues to be an important resource for the participants and staff within the program by providing ongoing counselling and guidance.

### **HIGHLIGHTS**

St. Paul has had a busy year with several new discharges and intakes.

In the past year, St. Paul has transitioned two individuals out of the program. One individual returned to an independent living environment and the other to supported independent living through BICR.

We have worked collaboratively with our partnering agency and have smoothly transitioned one participant from the CMHA program to the St. Paul program. We have also temporarily switched rooms with CMHA to better tailor staff support to participant needs. CMHA has acquired the outside apartment which has been positive for their participant in providing independence, subsequently allowing St. Paul to utilize one of the rooms within the home to provide more structured support.

Currently, St. Paul is supporting 6 individuals; 5 BICR and 1 CMHA. We have two new participants who moved in at the beginning of this year. St. Paul staff continue to work diligently with all participants working towards their personal goals with an emphasis on appropriate discharge environments.

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.  
ST. PAUL TRANSITIONAL LIVING PROGRAM ANNUAL REPORT  
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**CHALLENGES**

- One participant is ready to transition to a supported independent living environment, but finding available housing continues to be challenging.
- St. Paul works closely with outside agencies and continues to overcome challenges providing a positive discharge living environment.
- St. Paul provides support to many individuals from a variety of ages, backgrounds and independent skills. It can be challenging for participants to work collaboratively or side by side.
- St. Paul has been challenged to meet some of the needs of participants who experience severe mental health and/or substance abuse difficulties.

**OBJECTIVES**

- St. Paul strives to continue to provide a positive rehabilitation environment for participants.
- Continue to explore outside resources for participants within the Niagara Region and throughout other regions within Ontario
- Continue to encourage and promote community involvement
- Continue to build and maintain community partnerships
- Continue to encourage and develop participant/ family relationships

**JENNIFER GALL**

**TEAM COORDINATOR**

Psychology Services at Brain Injury Community Re-entry (BICR) has continued to offer clinical services through the 2019-2020 year, primarily including: treatment (e.g., counselling and psychotherapy), assessment (e.g., neuropsychological, psychological, behavioral) and consultation (to BICR and other external community-based rehabilitation providers). Services are provided by one full-time Psychologist, who also serves as BICR's Clinical Director. The Psychologist reports to the Chief Executive Officer and the Board of Directors. Referrals to Psychology Services may come from Intake/Case Management, COSS, Residential, and Modular Services. Referrals may also come from external sources (e.g., family physicians, hospitals). There were 25 new referrals for Psychology Services and 14 file closures this year. Average waiting time for initial service is approximately 21 weeks for individual counselling, and 85 weeks for those individuals referred for assessment. Lengthier wait times for assessment occur due to this being a more involved process from a scheduling, resource and documentation perspective.

Services provided to the large majority of individuals who are referred to Psychology are funded by the Ministry of Health. There are currently 5 individuals receiving fee-for-service assessment/ treatment intervention from the Psychologist. Over the past year, Psychology Services have been provided to 57 unique participants, with an average of 30 participants being seen each month. In mid-March 2020, due to the global pandemic, counselling support was transferred to telephone-based sessions. This transition was managed relatively well by most participants, who appreciated the opportunity to remain connected through this challenging time. Through the majority of the 2019-2020 year, Psychology Services provided to participants of BICR has totaled approximately 52 percent of the Psychologist's weekly hours, including both direct and indirect services to either individuals or family members / support persons of participants. The Psychologist continues to monitor the use of the Goal Attainment Scale (GAS) which is implemented by the agency to evaluate the impact of the intervention services that we provide. The GAS assists both participants and their support staff to set individual goals and to track progress toward goal accomplishment. A review of the GAS forms that were completed over the course of the year shows that on average, 71 percent of BICR participants met or exceeded their previously identified goal(s).

The Psychologist also spends time involved in administrative duties and training / educational opportunities for staff. Regular involvement with the Management team (e.g., meetings and management planning days), the Behavioral Review Committee, and the Admissions Committee has continued. The Psychologist participates in the St. Paul Transitional Program quarterly meetings to review applicants for admission to this program. Support and co-ordination of scheduling for neuropsychiatric consultations provided to the St. Paul Program and other participants in our agency by Dr. Seyone, is also currently managed by the Psychologist. In preparation for the upcoming Accreditation Canada audit process, the Psychologist has participated with the Acquired Brain Injury (ABI) Services group assigned to review the accreditation standards for our agency as related to the provision of ABI services. The Psychologist has assisted in revising some policies, procedures and processes, particularly related to participant incident and accident reporting, root cause analysis, and updating the agency's suicide policy.

Regular monthly meetings continue between the Psychologist and the agency Social Worker in order to ensure that clinical services are meeting the needs of participants that are referred across the agency, along with reviewing opportunities for providing support to BICR staff and general professional issues. The Psychologist, the Social Worker, and the PET Coordinator continued to offer a 7-week educational and skills-based group on "Living Your Life After Brain Injury", geared toward individuals just coming into service and with limited supports in place.

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.

PSYCHOLOGY SERVICES ANNUAL REPORT

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Psychology Services remains busy and evolving in terms of how support is provided, especially given changes that have been imposed as a result of the global pandemic. The Psychologist values the continued opportunity for varied and meaningful involvement in supporting participants and families, BICR staff, and community members who work in the field of acquired brain injury.

**LINDA CUDMORE, PH.D., C.PSYCH.**

**PSYCHOLOGIST AND CLINICAL DIRECTOR**

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.

SOCIAL WORKER ANNUAL REPORT

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Over the past year, the Social Work department has been very busy servicing an average of 52 participants and family members per month. The requests for service have been primarily for individual counseling and family education. Fourteen new participants were added to the caseload and sixteen participants were discharged. There is a current waiting list of 13 participants.

At this time, the Social Work program provides counseling for participants and their family members mostly at the main office and throughout the different communities in the Niagara Region. During the year there have been a variety of issues that have been predominant for the Social Work program including building and maintaining healthy relationships as well as couples counseling, mental health and addiction issues, acquired brain injury education, learning to cope with change, and anger management.

The Social Work department also provides collaborative opportunities for staff to discuss participant issues or concerns as required and continues to work closely with staff members in order to best serve the needs of our participants. The Social Worker sits on the Admissions Committee. The Social Worker and the Clinical Director collaborated with our PET program to create a Living Your Life After Brain Injury Group. Two groups were held; a pilot group in the Spring of 2019 and a second Group in early 2020. In total, 8 participants completed the groups.

Towards the end of 2019-2020 fiscal year, a major global Pandemic presented the agency with unique challenges. The Social Worker started providing counselling services over the phone in mid-March. It has been a great privilege to support our participants in these unprecedented and challenging times. Most participants adjusted incredibly well to this change in service provision and many feel that they would like to continue phone sessions in the future.

It is with excitement that I look forward to continued growth and development of the Social Work program over the next year.

**SNEZANA JEVTIC**  
**SOCIAL WORKER**

The reality of the Novel Coronavirus (COVID-19) in 2020 prompts this writer to begin with the end of the fiscal year instead of the usual chronological order of annual events. The agency's existing Outbreak and Pandemic Plan provided a sound foundation on which to build a response to this evolving emergency. When in January 2020, the Ministry of Health advised the public to take measures to reduce the risk of transmission of the flu and respiratory illness, BICR utilized its Emergency Response and Outbreak health and safety protocols for education, prevention, screening, personal protective equipment (PPE), social distancing, reporting and the support of staff, families and participants. Since then, BICR has received constant updates directly from the LHIN and adjusts its response accordingly to respond to current mandates.

By the end of this fiscal year, the office was closed and administration staff were set-up to work remotely from home with only minimal and pre-approved office access. (For example, to process mail and deliveries.) In addition, building maintenance was reduced to respond to urgent maintenance needs only. While adjusting to the new norm, staff still completed tasks such as purchasing, the creation or refinement of electronic timesheets, website updates, reporting statistics, maintaining records and technology. **The entire team has been magnificent in their support and help during this challenging time.**

As the outbreak of COVID-19 continued to evolve locally and globally, a key challenge identified across the health care sector has been the availability of, and access to, PPE. In March, in response to the Minister's Order on PPE data collection, Ontario Health developed a common survey for identifying the current status and demand of PPE across multiple sectors within the province. As per this mandate, BICR is required to report PPE inventory and usage on a daily basis. This writer coordinates and submits these statistics and has utilized the LHIN's urgent pandemic supply form to request much needed PPE from the provincial supply chain as normal supply channels were unsuccessful. Close monitoring and supply of PPE continues to be a challenge for the agency.

Although the agency was well positioned for front line staff to work remotely, access was designed to provide staff in community programs with regular but dispersed login access since they primarily supported participants directly with face to face interaction during the workday. With the suspension of all non-essential services, staff's use of remote login tripled in demand and coupled with the addition of support staff working from home, the overall increased usage placed a burden on systems. To strengthen this transition, the agency installed a second remote router to divide the access load and thus improve the experience for staff working from home while still maintaining a strong connection for staff working in essential services.

#### **RISK AUDIT**

Pat Fryer & Associates Inc., conducted a Risk Audit in July 2019. The purpose of this project was to review the present status of BICR's Client/Staff Safety, Quality and Risk Management Program including the extent of BICR risk exposures and the strength of the organization's risk management capabilities. Although no urgent issues were identified, recommendations were reviewed by managers and will be targeted for response in the coming year.

#### **ACCREDITATION CANADA**

BICR learned that the agency's next Accreditation Canada survey visit will be on May 25 – 27, 2020. (*The Accreditation Canada survey was subsequently cancelled due to COVID-19 and will be rescheduled in 2021.*) Substantial work continued throughout the year in all areas of accreditation preparation. Managers worked with staff teams to complete the self-assessment process and diligently update various Standards as needed.

As a manager representative on the Infection Prevention and Control AC task group, this writer worked with the IPAC team to review IPAC specific standards and respond to any gaps that were identified.

### **STRATEGIC INFORMATION SYSTEMS PLANNING (SISP)**

BICRtracker: The agency continued with the design and development of BICRtracker, a new database management system, however the software was not completed in 2019 as anticipated due to various delays. This large project continues to be a priority for the agency and progress continues.

INVENTORY: In its ongoing goal to replace antiquated systems, the agency continued to target replacement of computer systems (e.g.: e-notes server; systems in the 8-10 year old range; outdated printers, etc.) and upgrade software wherever possible (e.g.: installation of Windows 10).

### **PRIVACY AND PERSONAL HEALTH INFORMATION**

As Personal Information Officer, this writer was active in responding to privacy requests in accordance with PHIPA. As well, facilitating Documentation Orientation training to new staff and Refresher training to existing staff was completed throughout the year. An annual Record Binder audit was completed and the agency continued to destroy participant records as per the agency's retention schedule.

**Patients with the greatest health care needs make up 5% of Ontario's population but use services that account for approximately 65% of Ontario's health care dollars.** Niagara has the 3<sup>rd</sup> largest percentage of patients that are complex in Ontario. Health Links is a priority of the Ministry of Health and Long-Term Care to transform the system by increasing access to integrated, quality services for patients living with complex chronic conditions. BICR worked with the Health Links team to implement Coordinated Care Plans (CCP) and complete their Privacy, Risk, and Security Management requirements. If approved, BICR staff will be able access Health Links Gateway software to manage participant CCP's.

### **OTHER HIGHLIGHTS**

- The department welcomed Rick Pozzebbon to the team as a second part-time Maintenance worker.
- Support staff in the Finance, Human Resources and Administration departments held an off-site Breakaway Day. This immensely positive day included round table discussion, privacy training, a visiting speaker on the topic of "Managing your time and energy" and team building.
- Along with other managers, presented at the well-attended Agency Update Meeting held for staff.
- The Emergency Response Plan and Outbreak Committee (EROC) followed its annual checklist of tasks and these were completed including a test of the emergency response plan, an audit of emergency supplies, a review of the emergency, outbreak and pandemic plans and an audit of participant's level of vulnerability.
- As always, participant safety initiatives were a priority for the agency. The Participant Safety Steering Committee provided statistics and noted a number of trends in their quarterly report to the Board of Directors. Refinements to the Participant Incident/Accident Form and Root Cause Analysis Form were made throughout the year to provide a clearer overall reporting process for staff.
- Participated on the Transportation (Strategic Direction) task group. One highlight was the rollout of the new electronic mileage form as part of this year's transportation strategy.
- Participated on the French Language Services Committee (FLS) and completed the annual FLS assessment for the LHIN.
- Writer returned to the agency's On-Call management rotation.

**GOALS FOR THE UPCOMING YEAR:**

- Ongoing support to staff, participants, families and the community during the various stages of the agency's COVID-19 response initiatives. Contribute to the development of safety plans and prepare for the re-opening of the office and community services. Report PPE status daily to the LHIN.
- Continue preparations for Accreditation Canada survey, tentatively rescheduled for April 2021.
- Complete development and installation of the BICRtracker database system.
- Target replacement of computer systems in the 8-10 year old range.

**HEATHER OLSZEWSKI**

**PROJECT MANAGER**

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.  
**DIRECTOR OF HUMAN RESOURCES ANNUAL REPORT**  
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The Human Resources department believes that the agency’s human capital- it’s employees- is its most important asset to success. Using best practices in recruitment and selection has been key to attracting and retaining a skilled, diverse and motivated workforce that will enable BICR to fulfill its mission and strategic goals.

The recruitment function continues to be an active HR function, and this past fiscal year was no exception. The Agency continues to experience a regular amount of leaves and resignations which resulted in permanent and temporary opportunities within the agency. Many of the full-time opportunities have been filled internally, which has created other permanent opportunities and staffing changes within the Agency.

Additionally, BICR was fortunate to again receive funding for three (3) summer students through Canada Summer Student Jobs in the Recreation Department and Residential Services.

CHANGES	NUMBERS
New Hires (External) - 23	21 (relief status positions) 2 (full time status positions)
Departures - 26	26 Resignations
Internal Movement/Promotions - 27	4 (position promotions) 4 (permanent full time positions) 8 (permanent part time positions) 5 (full time temporary contracts) 6 (lateral transfers)

The HR department continues to actively highlight the importance of taking advantage of continuous education and training opportunities that are provided internally or made available externally, to ensure staff remain current with leading trends in ABI, and are motivated to meet professional goals which in turn, accomplish organizational objectives.

Training presented by external facilitators that the agency arranged for staff in house during the year included: Mental Health First Aid training (MHFA Canada), Suicide Prevention training (Distress Centre Niagara), Safe Food Handling (Public Health), and Addictions and Harm Reduction (Cason). Likewise, BICR was able to send several staff from across the agency to the annual ABI Conferences (in Niagara Falls and Hamilton) and to the OBIA courses offered at Brock University, which have provided staff with current information, techniques, strategies and interventions that will equip them to better support the participants.

To support staff wellness, HR continues to communicate to staff monthly through the Internal Digest on a variety of topics sourced from our EFAP provider Homewood Human Solutions. For example, these articles have focused on: Holiday Stress and Anxiety Prevention, Healthy Habits: Positive Influences on Mental Health and Addiction, Vacation: Relax, Reflect and Reconnect, and Employees as Caregivers: Caring for Aging Parents and Loved Ones.

Finally, the HR department was pleased to host/recognize different agency initiatives this past year for staff and volunteers, including the National Volunteer Week Appreciation, Take Your Kids to Work Day, National Day of Mourning, Bell Talks Day, Mental Health Week and Random Act of Kindness Day.

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Moving forward, the HR department is committed to focusing on the following initiatives:

- Employing best practices in recruitment and the on-boarding process to ensure optimal person-job fit within the organization
- Maintaining cohesive relationships with our HR and Volunteer partners in like agencies to ensure we are remaining knowledgeable and current in our HR and Volunteer Management practices

Furthermore, Brain Injury Community Re-Entry continues to maintain a strong base of dedicated volunteers who devote their time and energy assisting our participants and furthering the interests of the agency. In total approximately 50 outstanding individuals have volunteered approximately 4000 hours of their time to BICR over the past fiscal year.

BICR has supervised and mentored over twenty students from local college and university programs including: Social Service Worker (SSW), Educational Assistant-Special Needs Support (EASNS), Recreational Therapy and Human Resources. Recruitment continues to be aided by strong student volunteers who have demonstrated their skills and abilities through placements and moved on to paid employment with the Agency.

Moreover, friendly visiting volunteers continue to enhance the programs developed for our participants. By assisting with activities such as speech therapy sessions, art groups and physical fitness routines, they provide an additional means of support and encouragement for all of those involved.

Additionally, BICR has a dedicated group of volunteers in non-front line roles. Most of the volunteers involved with the Agency's monthly Bingo sessions and Annual Golf Tournament are long standing volunteers who have dedicated their time for a number of years.

Likewise, participants continue to take advantage of opportunities to volunteer for agency fundraising events such as the annual Golf Tournament. Providing this occasion to give back to BICR is not only beneficial for the volunteer participants but for the agency as a whole.

In the coming months the Volunteer function will concentrate on the following initiatives:

- Attracting volunteers in the more rural areas where services are offered (i.e. Fort Erie, Port Colborne) which has proven challenging to this point with the high number of student volunteers who do not have access to a vehicle
- Streamlining the on-boarding process for volunteers through on-line training
- Attracting volunteers who are interested in volunteering with the agency for a longer period of time
- Maintaining community partnerships with such groups as RAVA (Niagara's Regional Association of Volunteer Administrators) which will assist the agency in employing best practices in recruiting, educating and maintaining an effective volunteer base.

**ERICA LAPLANTE**  
**DIRECTOR OF HUMAN RESOURCES**

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.

DIRECTOR OF FINANCE ANNUAL REPORT

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From external Telecom and Risk Audits to internal activities such as Accreditation Canada preparation, the agency wide State of BICR forum, an Administrative Breakaway Planning Day as well as continued focus on Quality Improvement, the Transportation Strategic Direction and other changes made for another busy year. Of course, this was all before the abrupt work life change due to the COVID 19 pandemic.

**EXTERNAL**

For the first time, the agency contracted with Schooley Mitchell to perform a Telecom Audit to review contracts and the costs we incur by using telecom (phone, cell phone, internet lines, cable, etc.) and waste management services. By implementing their recommendations, future savings could be as much as \$6,000 per year. The company charges 50% of any savings we will realize for the first two years. After that time, 100% of the savings will be fully retained by BICR and redirected back to service delivery.

Again, the agency secured Pat Fryer and Associates to perform another Risk Audit. This audit coincides with the Accreditation Canada review so is performed every four years. From this end, the company reviewed our exposure related to agency wide activities compared to insurance coverage and other safeguard measures in place. In addition, BICR's process for developing and monitoring the Agency Balanced and Operational Scorecards (measuring Strategic and Operational goals respectively) as well as the Quality Improvement Plan and related Targets and Initiatives Worksheet.

**INTERNAL**

Once more, the agency hosted the kick off to start activities related to the Accreditation Canada review. As a member of the Leadership Team, we started reviewing standards on a bi-weekly basis for most of the year to evaluate our strengths and weaknesses and implemented changes where needed. Due to the current work environment in Ontario, the review will not take place as scheduled and may take up to another year before this can be completed.

The agency held its second State of BICR for all staff. This forum provided management with an opportunity to inform all staff where BICR has been, where we're currently at and where the agency is going. On a smaller scale, all support staff (Administration, Human Resources and Accounting) came together on another day to discuss internal processes and how we can further support one another. We also took advantage of some privacy training, attended an in-service on Managing Time & Energy provided by our EFAP provider and ended the day with a teambuilding exercise.

The Quality Committee continued meeting throughout the year to monitor and communicate the results of current initiatives. These have been mostly positive with the colourful quarterly reporting of the results receiving the greatest accolades. At the time of writing, The Quality Plan for 2020/2021 is being finalized. As always, the overall goal is to provide the highest quality of care regarding the participant and family experience.

The Transportation Committee also continued to move the Transportation Strategic Direction forward. We've realized much success since introducing the new Transportation Agreement with participants that outlines what types of transportation and frequency that will be provided by the agency. It is hoped that this more formalized process will communicate the basic transportation BICR will provide initially, depending on the resources that participants have at hand, and then, in meeting their independence goals, finding alternative forms of transportation over time.

## **OTHER**

### **FUNDRAISING, DONATIONS & CEMETERY GARDENING ANGELS**

Overall Fundraising (bingo, bowling, golf) efforts and Donations generated revenues of over \$73,000 this year. After all expenses and disbursements related to these efforts, amortization of vehicles and grants to participants, our net income was just under \$15,000. With these funds, both residential and outreach participants enjoyed a week at the YMCA's Geneva Park in Orillia. For individuals, grants provided for dental services, health care costs including medication, assistive devices, moving costs, and bus and para-transit tickets as well as some other therapeutic recreation activities. We were also able to set aside a large amount for a future trip to Mexico.

Cemetery Gardening Angels recognized revenues of just over \$72,000 and, after all expenses, showed a net profit of about \$10,000 at the end of the season. This program employed over 30 participants (in partnership with the YMCA Employment and Immigrant Services, March of Dimes Canada) and beautified more than 265 cemetery plots during the year.

### **FUNDING AGREEMENT**

While our funding agreement with the Hamilton, Niagara, Haldimand, Brant Local Health Integration Network (LHIN 4) was expected to move to Ontario Health, due to some unexpected delays, along with the COVID-19 pandemic, this has put any further actions on hold. While an amending agreement was signed in February that extended our Multi-sector Service Accountability Agreement (M-SAA) to June 2020. We've been notified that this will be further extended to March 2021.

### **LARGER EXPENDITURES**

As part of the ongoing Strategic Information Systems Plan (SISP), several computers and laptops were replaced and a new Exchange Server was purchased during the year. Work also continued on our new participant database – BICRTracker and we are anticipating that we will go live in the 2020/2021 fiscal year. In addition, new office furniture was purchased for some meeting rooms and the agency started providing a cell phone allowance to part-time Community Outreach Support Service staff to assist them with staying connected with the agency during work hours.

### **FUTURE PLANNING**

We were just starting to feel the full impact of the COVID-19 pandemic closer to the end of March with all non-essential services halted based on the direction from the province. The agency reacted quickly and provided support staff with the necessary resources such as laptops to enable them to work from home. In addition, more forms were made available electronically in the staff section of our website and on-line via the agency network. Now staff can complete these anywhere and forward to their manager for review and approval to reduce travel.

In reviewing home inspections, actions were planned for the Promenade Richelieu site in March that would have meant upgrading one bathroom on the main floor and replacing the flooring on the lower level. These renovations will now be part of the 2020/2021 plan.

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.

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In looking ahead to the next year, once the State of Emergency has been lifted and the agency moves towards regular operations, we curiously await the final move to the Health Ontario and Ontario Health Teams. We will continue reviewing best practices identified in the Accreditation Standards as well as the recommendations in the Risk Audit and making changes where appropriate. As always, we will continue investigating additional opportunities to improve economies, efficiencies and operational effectiveness. We will also further consider various initiatives to improve our Quality of Services, review outstanding items from the Transportation Committee and, as always, identify urgent needs and resources required for the upcoming period.

Much appreciation is extended to Jamie Bird and Toni Bessette for their ongoing commitment to BICR and the functions that they perform every day in supporting the needs of staff, participants and all other agency stakeholders.

**SANDRA HARDING, CPA / CGA**

**DIRECTOR OF FINANCE**

# Independent Auditor's Report

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To the Members of  
Brain Injury Community Re-Entry (Niagara) Inc.

## Qualified opinion

We have audited the financial statements of Brain Injury Community Re-Entry (Niagara) Inc. (the "Organization"), which comprise the statement of financial position as at March 31, 2020, and the statements of operations, changes in net assets, and cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies.

In our opinion, except for the possible effects of the matter described in the Basis for qualified opinion section of our report, these financial statements present fairly, in all material respects, the financial position of the Organization as at March 31, 2020, and its financial performance and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

## Basis for qualified opinion

As disclosed in Note 2 of the financial statements, purchases of property and equipment are recorded in the statement of operations as an expense in the year acquired. Purchases of land and building are recorded at cost and are amortized to the extent of principal repaid on the mortgage during the year. This constitutes a departure from Canadian accounting standards for not-for-profit organizations. The impact of this departure from Canadian accounting standards for not-for-profit organizations on these financial statements have not been determined and therefore we were not able to determine the adjustments necessary to expenditures, excess of revenues over expenditures and cash flows from operations for the year ended March 31, 2020, assets and liabilities at March 31, 2020 and net assets as at April 1, 2019 and March 31, 2020. The predecessor auditor's opinion on the financial statements for the year ended March 31, 2019 was modified accordingly because of the effects of this departure from Canadian accounting standards for not-for-profit organizations.

We conducted our audit in accordance with Canadian generally accepted auditing standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are independent of the Organization in accordance with the ethical requirements that are relevant to our audit of the financial statements in Canada, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our qualified opinion.

## Other matter - supplementary information

Our audit was conducted for the purposes of forming an opinion on the financial statements taken as a whole. Schedules 1-12 on pages 13 – 24 are presented for purposes of additional information and are not a required part of the financial statements. Such information has not been subjected to the auditing procedures applied in the audit of the financial statements, and, accordingly, we express no opinion on it.

# Independent Auditor's Report (continued)

## **Other matter - predecessor auditor**

The financial statements of Brain Injury Community Re-Entry (Niagara) Inc. for the year ended March 31, 2019 were audited by Partridge Iggulden LLP Chartered Professional Accountants who expressed a qualified opinion on those financial statements on May 31, 2019 for the reasons described above in the Basis for qualified opinion section. The partners and staff of Partridge Iggulden LLP joined Grant Thornton LLP on January 1, 2020.

## **Responsibilities of management and those charged with governance for the financial statements**

Management is responsible for the preparation and fair presentation of the financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is responsible for assessing the Organization's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless management either intends to liquidate the Organization or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Organization's financial reporting process.

## **Auditor's responsibilities for the audit of the financial statements**

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Canadian generally accepted auditing standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of these financial statements. As part of an audit in accordance with Canadian generally accepted auditing standards, we exercise professional judgment and maintain professional skepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Organization's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Organization's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Organization to cease to continue as a going concern.

# Independent Auditor's Report (continued)

- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

*Grant Thornton LLP*

St. Catharines, Canada  
July 31, 2020

Chartered Professional Accountants  
Licensed Public Accountants

## Brain Injury Community Re-Entry (Niagara) Inc. Statement of Financial Position

March 31 2020 2019

### Assets

#### Current

Cash	\$ 683,085	\$ 556,825
Short-term investments (Note 3)	970,671	847,851
Accounts receivable (Note 4)	80,104	75,094
Prepaid expenses	14,901	21,578
Funds held in trust for residents	<u>34,102</u>	<u>27,053</u>
	<b>1,782,863</b>	<b>1,528,401</b>

#### Long-term

Richardson Court Facility reserve funds on deposit	12,338	3,635
Property and equipment (Note 5)	912,897	974,404
Goodwill (Note 6)	<u>85,577</u>	<u>85,577</u>

**\$ 2,793,675** **\$ 2,592,017**

### Liabilities

#### Current

Accounts payable and accrued liabilities (Note 7)	\$ 363,395	\$ 367,860
Program funding payable	350,588	250,340
Deferred revenue	13,098	5,254
Liability for resident funds held in trust	34,102	27,053
Current portion of long-term debt (Note 8)	<u>420,223</u>	<u>28,038</u>
	<b>1,181,406</b>	<b>678,545</b>

#### Long-term

Long-term debt (Note 8)	-	420,223
	<u>1,181,406</u>	<u>1,098,768</u>

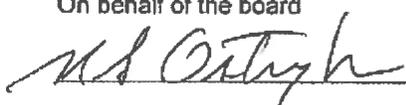
### Net assets

Unrestricted	379,724	379,724
Internally restricted - Reserve Fund	1,220,207	1,109,890
Externally restricted - Richardson Court Facility Reserve (Note 9)	<u>12,338</u>	<u>3,635</u>
	<b>1,612,269</b>	<b>1,493,249</b>

**\$ 2,793,675** **\$ 2,592,017**

Commitments (Note 12)

On behalf of the board

 Director
 
 Director

## Brain Injury Community Re-Entry (Niagara) Inc. Statement of Operations

Year ended March 31	2020	2019
<b>Revenue</b>		
Ministry of Health	\$ 5,841,871	\$ 5,864,492
Fee for service	463,714	417,793
Rental income	77,874	76,767
Resident fees and recoveries	113,369	110,320
S.E.E.D. grants	<u>11,662</u>	<u>13,351</u>
	<u>6,508,490</u>	<u>6,482,723</u>
<b>Expenditures</b>		
Building and grounds		
Amortization	28,039	27,087
Occupancy costs	176,765	172,533
Interest on long-term debt	15,968	16,918
Utilities	38,477	41,421
Maintenance	130,572	120,262
Contracted out	19,944	19,470
Employee benefits	667,457	685,490
Equipment	39,763	24,369
Insurance	67,779	57,543
Office	20,241	15,300
One time approved capital expenditures	-	12,780
Participant costs	130,231	119,866
Professional fees	27,875	21,245
Supplies	65,500	65,189
Telephone and general expenses	61,447	59,563
Training	42,521	44,429
Travel	124,267	132,020
Wages	<u>4,755,362</u>	<u>4,782,657</u>
	<u>6,412,208</u>	<u>6,418,142</u>
Excess of revenue over expenditures before other items	<u>96,282</u>	<u>64,581</u>
<b>Other items</b>		
Cemetery Gardening Angels revenue	72,609	72,494
Donation and fundraising revenue	40,673	40,595
Interest income	32,856	19,969
Cemetery Gardening Angels expenditures	(63,312)	(65,218)
Fundraising expenses	(23,446)	(14,520)
Vehicle amortization	<u>(33,468)</u>	<u>(26,211)</u>
	<u>25,912</u>	<u>27,109</u>
Excess of revenue over expenditures	<u>\$ 122,194</u>	<u>\$ 91,690</u>

BRAIN INJURY COMMUNITY RE-ENTRY (NIAGARA) INC.

DONATIONS AND SPONSORSHIP

2019 – 2020

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DONATIONS AND SPONSORSHIPS 2019 – 2020		DONATIONS IN MEMORY
Beatties Basics	Lancaster Brooks & Welch	Christine Bell
Bestway Bedding	Luc Savoie	David Ledwin
Canada's Pro Plumbing & Rooter Inc.	Marble Slab Creamery	Ed Rahn
Cat's Kitchen & Bar	Marlin Travel	Jason Schachtschneider
Complete Comfort Niagara Inc	Meridian Credit Union	
Corporate Facility Supply	Micro Tech Niagara Inc.	
David Shapiro Barrister & Solicitor	Minuteman Press	
David VanGelder	Mountainview Properties	
Designs by Santy Inc.	Niagara Ice Dogs	
Diana Marshall	Niagara Helicopter Ltd.	
Durward Jones & Barkwell & Co. LLP	Partridge Iggulden Inc.	
Emerald Janitorial Services	Patricia Fryer Associates Inc.	
Family First Pharmacy	Petal's Floral	
Fire Incorporated	Phil Garner	
Frank's Feather and Fin Ltd.	Royal LePage – Karl Regier	
Geoff Hunt	Schooley Mitchell	
Gordon Wilder	Thorold Foodland	
Guy Rizzo – Youngs Insurance	Vermeer's Garden Centre	
Harvey Moving & Storage Inc.	Walker Industries Holdings Limited	
Holiday Inn & Suites	Xerox	

We would also like to recognize the many individuals who have contributed to our agency during the 2019-2020 fiscal year.

A special thank you to all!!