

2025 OUTCOMES REPORT



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Each year, our Outcomes Report is a valuable document for reflection, learning, celebrating accomplishments and identifying challenges within BACi. It also greatly informs future planning for our organization.

BACi is always focused on quality improvement – trying to get better at what we do and how we do it. As always, our efforts are based on the expectations and goals of the people and families we support.

The Outcomes Report is one way to monitor our quality improvement in the areas of satisfaction of interested parties, service effectiveness, service efficiency, and service accessibility.

This year you'll notice that the look and framework of our Report is a little different, with the embedding of Impact Evaluation throughout all departments, as well as other required indicators. Impact Evaluation continues to be the source of our effectiveness measures and its growth continues to take hold, even in HR.

Please note: This report is not in plain language. It is our hope that people will get help from their families, friends or staff to read it.

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This report is available at www.gobaci.com



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Outcomes Report

BACi collects information in many ways, from Satisfaction Surveys, Quantitative Interviews and Service Evaluations, to Critical Incident Reports, Health and Safety Reports, and Human Resource Reports. Each of those sources provides data on at least one outcome in the following areas:

- **SERVICE EFFECTIVENESS:** the service is having its intended impact (i.e. supports personal growth, helps people get jobs and make friends, enhances social and emotional development, builds families’ skills and abilities, etc.).
- **SERVICE EFFICIENCY:** using resources (i.e. money, staff, equipment, etc.) in the best possible way.
- **ACCESS:** measuring the availability of a service based on enrollment and capacity.
- **SATISFACTION OF INTERESTED PARTIES:** people are happy with the services they receive.

Of course, formal feedback tools like Satisfaction Surveys cannot, and will not, replace the impact and importance of our daily conversations or the feedback we receive from families and other interested parties on an ongoing basis. Relationships are a key foundation of our Association. Building trust through daily interactions will only make BACi stronger.

The information collected is both qualitative and quantitative. Qualitative information includes written comments, opinions, and feedback that cannot be measured with a number or rating. Quantitative information uses numbers or percentages (%). This information is taken directly from surveys or reports.

As in previous years, the staff and leaders in all Direct Service departments were asked to consider looking at data and feedback through the lens of Reflection. BACi has been doing a lot of reflecting over the past few years. Our commitment to continuous improvement has led us to reflect on the impact of our efforts and, through developmental evaluation, learn how we may expand and deepen our impact on those we serve and the broader community.

BACi is committed to being a ‘learning organization’ – learning from our past efforts, understanding the impact we are having, and being confident enough to take the risks needed to innovate new and better ways of advancing the inclusion and belonging of the people we serve.



After reflecting on what we have tried – and learned – we ask ourselves: What are we going to do differently in our (re)design? How will we build a mechanism to know if doing something differently has the intended impact? Dashboards will share their highlights and/or learnings from 2025, along with Recommendations for 2026.

One thing that is important to note is that, inevitably, we (who create and author this report) have biases when we collect data and try to find out what it means. This could lead us to read information differently or make assumptions that are different from what the survey respondent intended to convey. Another thing to note is the possibility of human error impacting the report findings (i.e. incorrect input of data, etc.).

We do, however, make sincere efforts to be as accurate as possible when dealing with the data, and mindfully set aside known biases to draft a report that is based on the feedback and information trusted to us by interested parties.

Happy reading!



Introduction

As per BACI's contractual agreement with Community Living BC (CLBC), BACI is responsible to align the delivery of services to further the achievement of the following outcomes for individuals served:

OUTCOME	DESCRIPTION
Emotional Well-Being	Individuals feel safe in their home and community. They have a positive sense of self and trust the people in their lives.
Interpersonal Relations	Individuals have meaningful relationships with family and friends.
Material Well-Being	Individuals have the financial resources to do the things that are important to them.
Personal Development	Individuals pursue their interests, have opportunities for personal growth and skill development, and have access to necessary information and support.
Physical Well-Being	Individuals are physically healthy and active. They have access to the health care they require.
Self-Determination	Individuals make decisions in their lives about things which matter to them.
Social Inclusion	Individuals participate in community life in roles they and society value.
Rights	Individuals have autonomy and their decisions are respected.



COMMUNITY INCLUSION

Program Overview

One-to-one Services

BACI offers Community Inclusion services that support adults in small groups and on a one-to-one basis, to access and participate in a range of events and activities within their local communities. The activities offered are based on each person's strengths and abilities, focusing on recreation, personal growth and development, relationship building and volunteer activities through individualized programs.

Seniors' Services

BACI provides Community Inclusion Services to Seniors based out of our Seniors' Centre in Burnaby on Royal Oak Avenue. The support provides a variety of center- and community-based activities and opportunities in larger group settings.

Pod Services

BACI offers Pods to those looking for group activities. Pod Facilitators assist people supported in Pod Services plan, grow and learn together. Pod Facilitators spend time with each person, Pod and their networks discovering and planning things that are important to each person and the whole Pod. People and support networks are connected with one another, have strong communication and are a source of support to each other. Pod Facilitators have time in their schedules dedicated to research and community development. This allows them to plan, introduce and connect Pod Leaders to new people and places within their local communities, focusing on recreation, personal growth and development, and relationship building. The Pod Facilitators also support people who want to work to find paid or volunteer opportunities. The opportunities complement and enrich each person's strengths and abilities.

Outreach Services

In Outreach, individuals are supported to develop the skills that will help them to become more independent, lead more meaningful lives, and be able to more fully participate in their community. The hours of support per month are based on the needs and goals of each individual but typically would not exceed 16 hours per month. Outreach is made up of those who receive weekly support on an ongoing basis, as well as short-term referrals who typically stay with Outreach for 6-12 months to work toward specific goals. Outreach Services supported people in a range of living situations including many who live independently, or with Home Share Providers or those with aging families.

LIFE Services

LIFE Services at BACI is a flexible, person-centered service that supports adults to build meaningful lives based on their own goals, values, and priorities, guided by the core pillars of Learning, Inclusion, Friendship, and Employment. Through collaborative work with LIFE Service Coaches, participants identify what they want to change or experience in their lives and are supported to work toward those goals in realistic, individualized ways that emphasize purpose, motivation, and quality of life. Supports are tailored to each person's strengths, interests, pace, and evolving needs, and may include skill-building, relationship development, identity exploration, and pathways to employment or volunteering, all grounded in real-life experiences. LIFE Services values growth as a non-linear process, encourages reflection and healthy risk-taking, and focuses on strengthening informal support networks while recognizing that independence and success look different for each person and are defined by what is meaningful to them.

BEST Employment

BEST is a service designed by BACI to empower individuals to find paid jobs and make meaningful contributions to the communities in which they live. We assist people to find and maintain employment that matches their skills and interests. We collaborate with employers to help them meet their business needs and tap into a diverse workforce. Our effective and personalized support focuses on meeting employers' business needs through positive and innovative employment solutions.

Intended Impacts

Community Inclusion - People Served

People served through Community Inclusion are confident, believe in their own worth, love themselves and those who love them back.

Community Inclusion - Families

Families, both the natural and chosen ones of the people we serve in Community Inclusion Services feel supported in their role and hopeful about the future. They expect great things for and from their loved one and trust their decisions.

BEST Employment - Job Seekers

People served through BEST believe that they have something to offer. Their outlook on life changes and they are willing to take risks and explore options.

BEST Employment - Employers

Employers come to understand the benefits of a diverse workforce. Through the experience of working with BACI, BEST employers understand the value-added proposition that this engagement brings through ongoing support and connection. Employers' workplace experience is expanded. By connecting with BEST, creative new ideas are uncovered, and an understanding is developed that if accommodations are made for the BEST supported individuals that they will also benefit other employees. Employers become champions of workplace inclusion. As a result of the positive experience that employers experience working with BEST, they share with other employers the benefits of working with our agency.

Demographics

	Pods	Steveston	Seniors	One-to One	Outreach	LIFE	BEST
Number of People Served	49	7	20	74	126	22	76
Ages of Person Served	19–29: 26 30–39: 15 40–49: 9 50–59: 7 60–69: 11 70+: 6	19-29:4 30-39:3	50–59: 2 60–69: 12 70+: 6	21-65 Median age 37	19-24 = 28 25-34 = 36 35-44 = 34 45-54 = 12 55+ = 16	18-24: 13 25-34: 6 35-44: 2 45-54: 1	18 - 24: 31 25 - 34: 26 35 - 44: 12 45 - 54: 7 55+: 2
Gender identity	Male: 47 Female: 29	Male: 5 Female: 2	Male: 9 Female: 11	Male: 48 Female: 26	Male: 70 Female: 56	Male: 12 Female: 10	Male: 44 Female: 32



Evaluation Methodology

The aim of our evaluation was to see what kind and quality of impact Community Inclusion Services is having on the population we are serving. To understand this, we explored two broad evaluation questions:

1. What kind and quality of impact are we having on our participants? We asked this of both providers and family members.
2. What aspects of our program are causing this impact?

Over the course of the project, we: (a) Developed and refined our ideas of intended impact and indicators; (b) Designed and implemented a mixed methods outcome evaluation using both qualitative and quantitative means to collect and analyze data; (c) Identified themes and findings, and; (d) Considered the implications to those findings for program improvement and innovation.

This project began by identifying and clarifying the intended impact of Community Inclusion. Once the ideas of impact had been developed, we used the Heart Triangle™ model to identify qualitative and quantitative indicators of impact on the mental, behavioral, and emotional changes in our participants. We used these indicators to design a qualitative interview protocol and a quantitative questionnaire to evaluate progress toward achieving our intended impact.

Qualitative Data Collection and Analysis

For the qualitative portion of the evaluation, we designed in-depth interview protocols to gain data about the structural, qualitative changes resulting from our program. Our population size for this evaluation was all people served in CI and all family members served through CI. We used a purposeful stratified sampling technique to select a representative sample from each population. Our target sample size was 20% people supported and 20% family members. The sample included supported people and their family members, characterized by age, gender (or gender identity), location, and length of time with Community Inclusion. Some people we interviewed were included in the 2024 round of interviews and some were new. The breakdown below shows how many interviews were conducted with service users and family members. 56 people served were interviewed for a 19% sample overall in CI (not including BEST Employment).

Our interview team consisted of team members from all CI programs, Pod Facilitators, Outreach Workers, Employment specialists, Supervisors and Managers. We convened one-on-one interviews lasting from between 45 minutes and one hour in length and collected interview data by recording and transcribing the interviews.

Interviews Conducted

Program	Service User Interviews Conducted (% based on people served in program)	Family Interviews Conducted	Overall interviews Conducted
One to one	19 (26%)	15	34
CI Pods	10 (20%)	8	16
CI Seniors	5 (25%)	4	9
CI Steveston	2 (29%)	2	4
LIFE	3 (13%)	3	6 *Note that percentage is low as most people had not been in service long enough to interview
Outreach	17 (14%)	15	32

In BEST Employment, we interviewed both persons served (with equal representation from those seeking jobs and employed) and employers. In total, we interviewed 12 service users (a 16% representation) and 6 employers.

Each Employment Specialist interviewer analyzed the data from their interviews individually to identify initial themes. The team then met to share themes and developed common themes specific to employment.

Job Seeker interviews Conducted	Employed interviews Conducted	Employer interviews Conducted
6	6	6

Quantitative Data Collection and Analysis

For the quantitative portion of the evaluation, we designed a survey to collect data on our quantitative indicators of impact. We sent the survey to all people supported and had a response of 18%. The data was analyzed primarily using measures of central tendency. We identified key insights, patterns, and gaps within the data and incorporated these discoveries into the related findings.

Program	Surveys Received From Service Users	Surveys Received From Families
One to one	8 =10%	14
CI Pods/ Steveston	8 = 16%	11
CI Seniors	2 = 10%	5
LIFE	0	0
Outreach	34 = 27%	19
Total	18%	49

Limitations

Our quantitative response rate of 18% was significantly lower than desired. We identified opportunities to strengthen both the sampling approach, to ensure a broader and more representative range of participants, and the interview process itself. Some of the data collected was highlevel and appeared to be influenced by the skill and analytical capacity of individual interviewers. In addition, there were challenges in determining attribution, specifically in understanding whether the changes or impacts reported by participants could be directly attributed to the supports provided or whether other external factors may have influenced these outcomes.

Program Specific Findings – Persons Served

Employment Services – Target Group: Job Seekers

Finding 1: Awareness of and Engagement in the Employment Process Results in Increased Confidence.

Key Take Aways

Job Seekers reported an understanding of BEST’s approach to service and agreed that this knowledge increased their confidence in the job search.

Discussion

Is reported increase in confidence an indicator of progression toward impact? Maybe.

Employment Services - Target Group: Employed on Maintenance

Finding 1: Confidence

Key Take Aways

People who have maintained their jobs with minimal support from BEST report feeling confident.

Discussion

The current practice for supporting people ‘in maintenance’ is not well defined or consistently applied. It is therefore hard to attribute ‘confidence’ to BEST’s practices. It may just be the reality of keeping and succeeding at work. This is worth exploring as the learning may shape next practice.

Seniors’ Space - Target Group: People Served

Finding 1: Safety, Trust and Well-being

Key Take Aways

People shared that they feel safe at the Senior’s Space and during outings they enjoy, supported by staff. They have long established and valued relationships with each other. They’re happy.

Discussion

It’s great that people shared their trust in staff, feelings of safety, positive relationships and overall happiness with the Seniors’ Space however it’s too much of a reach to conclude that this means they ‘are confident, believe in their own self-worth, love themselves and those who love them back’. It’s challenging to go inside the triangle once a year during an interview. It might be an idea to consider ways to incorporate impact inquiry into day-to-day practice.

Life Services - Target Group: LS People

Finding 1: Self-Aware and Growing

Key Take Aways

People recognize their own struggles with managing their emotions and are open to new experiences that will propel them toward 'real world independence' – which means being able to navigate whatever the world throws at them. They believe this can happen.

Discussion

Becoming increasingly self-aware and committed to growth despite the struggle is an indication of belief in own self-worth and shows movement towards intended impact.

Finding 2: Contribution to Self and Networks Through Giving

Key Take Aways

People's self-worth is linked to and expressed through their belief in their growing capacity to contribute to and support the members of their Informal Networks.

Discussion

People love themselves and those who love them back.

One-to-One Services - Target Group: One-to-One People

Finding 1: Health, Pain and Resilience.

Key Take Aways

For some people, living with pain and fluctuating health is a reality that can affect their day-to-day pursuits and disposition and shape their thoughts of the future.

Discussion

Acknowledging people's pain and health, meeting them where they are at and designing flexible supports is key.

Finding 2: Trust in Staff is Essential

Key Take Aways

People rely on staff to support them in very personal and private aspects of their daily lives. Building a trusted bond between staff and people is essential and can lead to a relationship of empowerment and growth.

Discussion

The emphasis on building trusting relations between staff and people because of the intimate nature of the care and the level of vulnerability of the people, seems to have strengthened the relationships between staff and people in a more general way. However, while there is a lot of intimate information shared by persons served with staff, there is also intimate information shared about them between staff, not always with their knowledge. An important question to consider is: How do we give staff the information they need about risks, behaviours, etc., without creating stigma or fear, while honouring person first communication?

Finding 3: Inner Life

Key Take Aways

People shared their awareness related to bravery, resilience, personal growth, contribution, self-esteem and linked this awareness to increasing confidence...and might be evidence of 'belief in self-worth'.

Discussion

Increasing confidence and belief in self-worth is part of the impact we aim to make. Diving deeper into the practices that sparked and strengthened the self-awareness that lead to increasing confidence and belief in self-worth would be a good idea, as staff are not quite clear how and in what ways this is being accomplished.

Finding 4: Relationships

Key Take Aways

People put a lot of stock in relationships with peers that are defined by mutual respect and shared values. Relationships are a source of social connection and feelings of belonging. Trusted relationships with staff provide a strong foundation for the creation and strengthening of relationships with others.

Discussion

Our intended impact includes people being in reciprocal and loving relationships. This finding might support that we are moving in the right direction.

Finding 5: Safety

Key Take Aways

People shared that feeling safe can come from being loved, being in a trusting relationship, being aware of and feeling comfortable in your environment, as well as comfort and familiarity. People also said that feeling safe/safeguards allow you to take risks.

Discussion

The notion of safety coming from those who surround you echoes our intended impact statement. The link between safety and risk show deep insights that might be an indicator of confidence.

Finding 6: Autonomy

Key Take Aways

Autonomy, Agency and Independence are ways of being that people either want to pursue or are being supported to pursue.

Significance

This goes to confidence, self-worth and loving themselves and might be evidence of progress towards impact. People are wanting more independence from their parents. An important question emerges: Which comes first? Confidence or autonomy?

Outreach Services - Target Group: People Served – Long Term Contracts

Finding 1: Staff and Service User Relationship

Key Take Aways

Analysis of the interview data showed that people served have positive relationships with their Outreach Services staff. For some people served, the relationships create the trust and comfort they seek to pursue new goals, **while being directly supported by staff – but not independently or with informal supporters.**

Discussion

Practices that create service users' trust in staff is good; dependency not so much. Building and sustaining formal relationships of dependence, regardless of intent, will likely impede movement towards intended impact over time.

- **Sub Finding:** Confidence While Supported vs Confidence in One's Self

Key Take Aways

Analysis of the interview data showed that people served consider Outreach Staff to be their source of confidence and comfort when it comes to learning and trying new things or approaching challenging situations.

Discussion

The question has emerged... 'Have staff **become** a safety net, when they really intended to help the service user build their own safety net?'. This finding does not indicate movement toward intended impact.

- **Sub Finding:** Motivation From Staff vs Motivation From Within

Key Take Aways

Analysis of the interview data revealed that staff consider themselves the primary source of motivation when it comes to the people served pursuing goals.

Discussion

Reliance on staff as primary motivators may not be what staff have intended through their practice, yet relationships of reliance may exist. This finding does not indicate movement toward intended impact.

- **Sub Finding:** Formal and Informal Networks

Key Take Aways

Analysis of the interview data revealed that Outreach Services staff believe that people served view them as replacements for their informal supporters, like family or friends. For some people served it could be a temporary replacement while relationships are being sought and strengthened. For others, there may be expectations of permanency.

Discussion

Staff practices that replicate or replace informal relationships will not move toward intended impact over time.

- **Sub Finding:** Belonging, Isolation and Everything In Between.

Key Take Aways

Analysis of the interview data revealed that people interviewed shared varying levels of connection with others and within their community, and most sought a greater sense of belonging. The level of felt isolation is influenced by physical, mental and emotional health, the loss of loved ones, and previous trauma. People look to Outreach Services to ease their isolation, increase their sense of belonging, and acknowledge past trauma.

Discussion

This finding might confirm people's commitment to pursuing intended impact and their expectation that Outreach Services support them to do so.

Finding 2: Roles and Identity**Key Take Aways**

Analysis of the interview data revealed some people's awareness of and pride in the roles they play in their communities. Their identities have been shaped and influenced by their life circumstances and a sense of self-worth appears to be present.

Discussion

It is not evident that the sense of self-worth and valorisation of roles and identity can be attributed to involvement in Outreach Services beyond the establishment of trusting relationships – which the importance of should not be dismissed.

Pod/GEM Services -Target Group: Pod/GEM People**Finding 1: Self and Others****Key Take Aways**

Who people spend time with, where they spend time, and what activities they do, seem to be important to them. These three things might combine to contribute to people's confidence, sense of connection and belonging.

Discussion

How, where and with whom people spend their time matters to them, but we don't know if their confidence and self-worth grow as a result. We should find out.

Finding 2: Self Awareness**Key Take Aways**

People are aware of which activities they prefer, which they don't, and acknowledge that their preferences are honoured – but with limitations. People are also aware of activities that cause an emotional reaction, whether joy or nervousness, and share that their strategies to manage their emotions are honoured.

Discussion

Being aware of personal preferences is the foundation of self-determination and having those preferences honoured is a good thing. However, choosing a meal from the same menu night after night doesn't elevate your palate or deepen your list of preferences. Respecting the 'known' while exploring the 'new' might broaden horizons and increase the preference list.

Finding 3: Courage and Confidence

Key Take Aways

Courage to try new things seems to come from within, while trust in staff support is an important consideration when approaching risk, such as trying a new activity. The presence of staff is a key feature that drives confidence. People are much more confident when staff are present than when they aren't, and this confidence shows up in the ways people help others, contribute and take responsibility.

Discussion

Trusting relationships with staff build courage and confidence. Leveraging trust to spark and sustain growth vs maintaining trust by staying in the comfort zone is something to pay attention to.

Program Specific Findings – Families

Target Group: Seniors' Space Families

Finding 1: Decisions about Today and the Future.

Key Take Aways

Families hope for a future (and present, in some cases) where their loved one is surrounded by others who can make decisions with them and/or on their behalf. Some look to relatives to fill this role and all see BACI, its staff and contractors, as central providers of support and decision-making in the future (and present, in some cases).

Discussion

Families believe, to varying degrees, that their loved ones will need to be surrounded by others to make sound decisions, both now and in the future. Steps that have been taken in this regard include Committeeship, recruiting other relatives, and hoping that BACI will support decision making. As the Seniors and families age, this becomes more pressing.

Finding 2: Roles

Key Take Aways

Some family members (siblings) have assumed the role of a parent. Some are trying to maintain their roles as siblings while recognizing the increased responsibility of care. Some maintain a distant relationship and rely entirely on caregivers to make decisions related to their loved ones' life and services. Some have found themselves conflicted in their role as a sibling, as they also hold other roles at BACI that they believe impede their ability to advocate effectively for their sibling.

Discussion

Aging family members of aging loved ones is a dynamic quite unique to the Seniors Space in Community Inclusion Services and might require a unique set of strategies to address.

Finding 3: Learning

Key Take Aways

Some families reported that they are learning new things from and about their loved one all the time, including how support needs change with age.

Discussion

Needs do change and families are looking to BACI to help identify and meet changing needs as their loved ones' age. The impact families are looking for from the Seniors Space seems less related to the general CI Intended impact and more about safety, security, service responsiveness, comfort, joy and friendship throughout the next phases of life.

Finding 4: Communication - People over Platforms

Key Take Away

Families prefer seeking and sharing information about their loved one and their services directly with staff than over MyCompass.

Discussion

We have a lot of faith that MyCompass can be an effective tool for strengthening communication and partnerships with families. We might want to 'talk' with them about it.

Target Group: LIFE Services Families

Finding 1: Expectations for Them and Us and the Future

Key Take Aways

Parents are yearning for independence for and from their loved ones' and look to LIFE Services to help make that happen.

Discussion

Some parents expect great things from their loved one, trust their decisions and are impatiently waiting for a future defined more by collaboration with their loved one rather than a child-parent relationship. Some parents believe their loved one will always be challenged by limitations and are hopeful for a future (and present) where those limitations, their loved one's priorities for the future, and their anxiety about those priorities, are minimised. Parents look to LIFE Services to turn their hope for the future into the reality of today. This shows progress toward intended impact, but maybe not fast enough.

Target Group: One-to-One Families

Finding 1: Balancing Tensions

Key Take Aways

Families feel stretched between competing tensions, and their focus on balancing those tensions influences their day to day, as well as their hopes for the future. These are the tensions, and a desire to keep their loved one safe is ever present:

- Autonomy-Protection
- Opportunity-Safety
- Expectations-Reality

Discussion

These tensions show up in their relationships with their loved one, their hope for the future, their trust in BACI and their faith in community.

- Sub Finding:** The Future !?

Key Take Aways
Families are fearful about the future, yet look toward it with, what might be considered ‘conditional’ hope. Families shared the emotional weight associated with caregiving; a mixture of guilt, pride, loneliness and strength. The recognition of how profoundly their loved ones’ health impacts their quality of life is hard, but a reality not to be ignored. Their hope for the future is rooted in their trust in both formal and informal supports, the growing autonomy of their loved one and a continued dedication to self-advocacy.

Discussion
Families do have fear and hope for the future, and recognizing where their fear and hope comes from and how One to One services can both ease the fear and strengthen the hope will shape continued efforts to move toward intended impact.
- Sub Finding:** Belonging in Community

Key Take Aways
Families view community as a safe place for their loved one to offer their contributions and experience belonging while recognizing that stigma exists. Past negative and positive experiences in community influence family’s faith in the safety and security of the community.

Discussion
Families want their loved ones to belong, be valued and be safe.
- Sub Finding:** Growing/Shifting Roles and Relationships... Letting Go, Yet Staying Connected

Key Take Aways
Families are growing with their loved ones. Shifting from ‘managing’ to ‘partnering’, from ‘protector/cheerleader/controller’ to ‘a learner fueled by curiosity’.

Discussion
Families recognition and commitment to evolving roles and relationships, is evidence that they are actively and intentionally moving towards ‘expecting great things from their loved one and trusting their decisions’.

Finding 2: What Keeps Me Going

Key Take Aways

Family Resilience comes from the love and commitment they have toward their loved one and the trust they have in BACi and the staff. Trust is built through honest communication (supported by technology and the staff’s intuitive understanding of non-verbal communication) and shows up through the relationships that exist between their loved ones and the staff.

Discussion

Families are supported in their roles. This is evidence of progression towards intended impact and amplifies the role BACi plays in the lives of families.

Target Group: Outreach Services Families

Finding 1: Tensions... Safety, Risk, Acceptance

Key Take Aways

Analysis of the interview data revealed that Families are concerned about the safety of their loved one. The concern is fueled by loved one’s past negative experiences, their decisions that haven’t been or may not be wise or able to be supported by the family. Despite these concerns families interviewed talked of ‘stepping back’ and ‘accepting events as they come’.

Discussion

It's too much of a reach to conclude that families' decision to 'step back' and 'accept events as they come' is evidence of that they are hopeful for the future so not sure that movement towards intended impact is happening here.

Finding 2: Expectations of Service Today and in the Future – Passing the Baton

Key Take Aways

Analysis of the interview data revealed that for **today**, Outreach Services provides a valuable respite function for families. Further analysis revealed that families are relieved to finally 'pass the baton' on to Outreach Services; comforted by the thought that others were taking roles of accountability with their loved ones. When it comes to the **future**, analysis of the interview data revealed families believe that their loved ones will rely upon formal supports such as Outreach Services for all of their lives. They are hopeful that formal supports will always be available, and effective. They are fearful that in the future neither will be true.

Discussion

The Analysis of the interview data revealed families are not at the place where we can conclude we are making progress towards intended impact.

Target Group: POD/GEM Networks/Families

Finding 1: The Future – Worry and Hope

Key Take Away

The future is anticipated with both worry and hope. The worry is rooted in the fear that the external supports and resources currently available will not be sustained. Hope for the future rests for some, in their confidence that loved ones will become increasingly independent, but for most hope is fueled by the belief that family will continue to be present and that current system level support will be sustained.

Discussion

Hope and worry for the future rest primarily in the families' confidence in the sustainability of external supports and resources. The age-old question, 'Who will care for my loved one when I am gone?' persists. For most, the answer is predominantly 'BACi'. That level of trust is important to acknowledge, as is the risk of relying almost exclusively on external supports.

Neither worry nor hope about the future seem closely linked by many to 'expecting great things from their loved ones or trusting their decisions.'

Finding 2: Blind Acceptance

Key Take Aways

Some families are primarily interested in a service that provides respite for them, a predictable schedule of activity that results in their loved one being happy with a place to go every day. No, or low, expectations exist for their loved ones' growth or opportunities to build an unpaid support network. Rather, there is an acceptance/requirement that their loved ones need on-going paid support.

Discussion

We can provide service that performs a respite function for families, has a predictable schedule, results in happy people **and** promotes personal growth, evolves lifestyle expectations and strengthens self-determination. If families have low expectations for their loved ones and the services they receive, we should help raise them.

Finding 3: Shifting and Not so Shifting Relationships

Key Take Aways

Some families acknowledge that their family dynamics have shifted as their loved one has grown into adulthood. Some are continuing to learn new things about their loved one. Some are pursuing more reciprocal relationships. Some are seeing continued growth and contribution to the household. Other families have sustained the same parent role as when their loved ones were children; continuing to be the primary decision-makers for their loved one when it comes to relationships, etc.

When it comes to advocating for the needs of their loved ones, the needs may have changed over the years but the family's role as advocate – especially when it comes to service needs and expectations – has remained.

Discussion

We intend our services to result in families expecting great things for and from their loved one and trust their decisions, so we should pay attention to this.

Finding 4: Communication

Key Take Aways

Families want to talk to staff. When they have information to share, need information, or are wondering how the day went, they do not go to MyCompass; they talk to staff.

Discussion

We have a lot of faith that MyCompass can be an effective tool for strengthening communication and partnerships with families. We might want to 'talk' with them about this.

Program Specific Findings – Employers

Finding 1: There is Movement Towards Impact...But Why?

Key Take Aways

Employers value an inclusive workforce, a culture of diversity, and the specific employees who work for them. However, employers do not recall specific supports and services beyond initial Job Coaching that BEST has offered that helped shape their positive experiences. This is due in some part to the length of time people have been employed and turnover in leadership roles in the businesses.

Discussion

It is important for BEST to identify what their current practices are around intended impact related to Employers, and then see if they're working. Conversely, if intended impact is being reached, but not attributable to BEST, it shouldn't be dismissed as unimportant, rather further explored to inform adjustment to practice at BEST.

Community Inclusion Overall Findings

Target Group: People Served

Finding 1: Relationships with Co-Service Users

Key Take Aways

People shared that being with others they trust and enjoy spending time with fuels their level of confidence to experience new things and positively impacts their service experience.

Discussion

Paying attention to relationship preferences, and relationship building within the context of services is more than an operational imperative, it's an 'informal support network strengthening strategy' that might be central to moving toward intended impact.

Finding 2: Staff Relationships – From Safety Net to Anchor

Key Take Aways

While the development of deep, trusting relationships with staff serves as vital safe space for people to take risks and explore new possibilities, it can unintentionally evolve into a dependency that impedes goal pursuit independent of staff support.

Discussion

The successful, trusting bond built with staff inadvertently risks becoming a “substitute” for a person’s informal support network. The safety and reliability found in the formal staff relationship may eclipse the perceived necessity or value of cultivating informal support networks. This reliance undermines the long-term goal of sustainable support and full citizenship, as the service risks becoming people’s exclusive source of emotional, social, and practical aid, preventing access to the broad benefits a robust community network provides.

Finding 3: Growth: Self-directed vs. Externally Driven

Key Take Aways

Some people have the desire and motivation to grow into increasingly autonomous decision-makers and contributors to their families and networks. For others, desire to grow is questionable and motivation to grow comes almost exclusively from external sources, primarily service planning/staff presence.

Discussion

If some people are more self-directed and others are relying on external motivation, a one-size-fits-all approach to service planning will be ineffective. Furthermore, the externally motivated participant could be more susceptible to the dependency discussed in the theme “Staff Relationships – From Safety Net to Anchor” because their motivation is tethered to the external presence of staff.

Finding 4: Roles and Self Worth

Key Take Aways

People’s sense of self-worth seems related to the roles they play in their informal networks, but there is no conclusive data regarding the relationship between this self-worth and participation in services.

Discussion

While it is important to acknowledge and celebrate any increase in self-worth, the lack of conclusive data creates a critical accountability gap. Without understanding the relationship between service participation and the formation of self-worth, the department cannot confirm that its effort – such as honoring choices and supporting goals – are successfully translating into meaningful and sustainable identity formation outside of the service environment.

Target Group: Families

Finding 1: The Permanence of Formal Supports

Key Take Aways

Families utilize formal support services across a broad spectrum of needs, ranging from essential respite (to recharge or enable employment) to the expectation that services will fully replace traditional family functions in the roles of decision-maker, caregiver, and companion. This reliance is rooted in the conviction that formal support will always be a central and permanent feature of their loved one's life, positioning the service provider as the primary guarantor of well-being, growth, and safety within the community.

Discussion

The natural need for family respite, exacerbated by underdeveloped and trusted informal support networks, drives families to view formal services as a permanent solution and a functional substitute for their roles. This reliance moves pressure from the individual and family onto the service provider (BACi) and normalizes the dependency discussed in the above “Staff Relationships: From Safety Net to Anchor” theme.

Finding 2: Communication

Key Take Aways

Families prefer direct communication with staff, rather than using MyCompass. MyCompass allows families to see and read about the things their loved ones are doing during the day and assists in Personal Planning, but is not an immediate enough communication platform for issues that arise or concerns they may have.

Discussion

Much effort has been expended on MyCompass as a tool to both inform and strengthen informal support networks, but effort doesn't equal impact. Person-to-person live conversations are still preferred and may be a primary way to support families in their role.

Finding 3: Tension – Safety and Risk

Key Take Aways

Families want their loved ones to be safe. For some, being safe means being surrounded by formal and informal supporters who recognize the daily impact of pain and poor mental and physical health of their loved one and support them to live the lives they want. For some families, the desire for safety stems from past experiences where their loved ones' safety was in jeopardy. Sometimes the tension that exists between safety and risk is keeping their loved one safe from themselves; from decisions they make that put them at risk.

Discussion

Some families view managing the tension between safety and risk as an on-going part of their role while other's have stepped back from their relationship with their loved one as concerns for their safety and an inability influence their risky decisions seemed futile.

Finding 4: Shifting Roles and Relationships

Key Take Aways

Families recognize that their roles shift as their loved one grows up and ages. Some are comfortable with the shift they've made (from sibling to parent, or parent to partner) while others struggle with shifting roles, responsibilities and commitments which are sometimes in conflict. Others have surrendered their roles as parents and siblings and have either replaced themselves with formal supports and/or are crossing their fingers that all will turn out OK.

Discussion

Support for families is essential, especially during times of transition and significant life changes.

Finding 5: The Future

Key Take Aways

Families' hope for the future seems to be linked to three connected things:

- The growth, development and health of their loved one.
- The on-going availability of meaningful formal supports.
- A community where their loved one belongs.

Discussion

While different families may rank the order of importance of these three points differently at the level of service, understanding and leveraging the connections between them is key.

Cross Target Group Findings (People Served & Families)

Finding 1: Reliance vs Resilience

Key Take Aways

People served have come to rely on Community Inclusion Services for friendships, personal growth, motivation, guidance, safety and weekly activities. Families have come to rely on Community Inclusion Services for respite, peace of mind, and hope for the future. Both groups trust BACi perhaps more than they trust their own resilience to successfully navigate the present and plan for the future.

Discussion

This is the age old 'Safety Net vs Trampoline' situation. Are our services a safety net that keep people contained, neither falling down or rising higher? Are our services a trampoline, propelling people forward? Or like the old 'Outreach Services' intended impact statement use to say...something like *'We are not the safety net, we help people build their own safety net'*.

2025 Highlights, Reflections and Challenges

Pods

The Group Experience Model (GEM) continued to be successful in 2025. Participants reported high satisfaction with the flexibility and autonomy to choose how they spend their time, while staff valued the variety of working with different individuals and engaging in diverse activities.

Operationally, maintaining four catalogue planning cycles per year proved challenging. There is an opportunity to reconsider semester structures to ensure planning expectations are more realistic and sustainable. Increased planning and early involvement of Community Support Workers (CSWs) in planning one-off activities and larger events (e.g. Museums, Science World, holiday events) resulted in strong engagement and positive outcomes. This approach fostered a greater sense of ownership among CSWs and supported creativity, problem-solving, and innovation.

In 2025, planning approaches diverged between GEM and the original Pod Model. The Pod Model maintained a focus on shared group goals, while GEM shifted toward individualized goal setting. Despite this difference, progress toward goals in both models was supported through structured 1:1 Pod Facilitator (PF) time, allowing individuals dedicated weekly support. PF time was prioritized for individuals with active goals, with a focus on participation in volunteer placements, health, relationship and education events, and goals related to growth and learning.

One-to-One

Throughout 2025, One-to-One services continued to adapt responsively to individual needs. Supports were flexibly adjusted, including changes to staff hours to enable participation in events outside typical service times, overnight trips, and travel to Vancouver Island. These adaptations supported increased independence, community connection, and access to meaningful experiences.

Supervisor team changes occurred during the year, with caseloads adjusted to better meet program needs and a new supervisor onboarded in January 2026 to enhance leadership capacity within the One-to-One program. New strategies were implemented to reduce service cancellations by identifying individuals with existing natural relationships and pairing them together when staffing challenges arose. This approach improved continuity of service. Staffing stability also improved, with several new part-time and casual staff onboarded and minimal turnover compared to previous years.

A strong emphasis was placed on staff training and communication, including twelve monthly One-to-One team meetings and additional smaller team meetings. These supported consistency in practice, shared problem-solving, and team cohesion.

There was a notable reduction in Critical Incident Reports in 2025. Collaboration with CBI and DDMHS strengthened support for individuals with complex needs, including updated behaviour and safety plans and targeted training for Community Support Workers. These efforts resulted in fewer incidents and near misses, increased staff confidence, and improved retention.

Several individuals supported by One-to-One services experienced hospitalizations during the year. BACi staff continued to provide adapted, person-centred support during hospital stays, ensuring continuity, familiarity, and connection during vulnerable periods.

Seniors

The Seniors Program continued to strengthen staff capacity through ongoing aging-related training and conference participation. Learnings were consistently shared with the team through weekly staff meetings. The Supervisor maintained active collaboration with the Fraser Health Authority by participating in community networking meetings several times per year.

Partnerships with key community organizations were expanded and deepened throughout 2025. Engagements with YVR, Century House, and various cultural and spiritual places of worship included tours, shared activities, and celebrations such as Christmas events. Increased participation in places of worship supported cultural learning, discovery, and the sharing of personal traditions among seniors and staff.

Individuals in the Seniors Space took part in BACi's Self Advocacy Committee and Art Therapy programming, including weekly art therapy sessions and guest visits. Partnerships with Rabitat were strengthened, and continued connections were maintained with organizations such as L'Arche during participant transitions.

Person-centred planning remained central to Seniors Space programming. Activities were shaped through weekly discussions and reflections with participants and idea-generation tools. Individuals shared personal traditions, meals, celebrations, and spiritual practices, enriching the collective experience.

Support approaches adapted to respond to changing needs, including increased 1:1 support during illness or recovery, hospital and home visits to maintain connection, and adjustments to daily schedules to allow for additional rest and support. The team will continue to engage in ongoing and proactive future planning conversations, before support needs escalate, to help networks understand available resources and proactively support necessary transitions and aging in place.

Outreach

Outreach Services supported approximately 75 individuals across 30 families to access Farmers' Market Coupons valued at over \$20,000. The Food Bank Cupboard supported more than 50 families to access approximately \$25,000 in food and essential goods, and eight new individuals and families were supported to independently access the Greater Vancouver Food Bank. The Community Kitchen supported over 40 individuals, providing more than 400 healthy and cost-efficient meals. Outreach also supported the transition of approximately 20 individuals from the Stitched Services program to ongoing Outreach supports. In addition, Outreach facilitated the continued development of the community gardens, supporting eight garden plots and providing a volunteer opportunity for a supported individual to contribute to the ongoing development and oversight of the gardens. Two workshops were facilitated for Gatherings of Older Adults focused on advance care planning and financial security, with approximately 40 participants in attendance, and a voting rights workshop was produced and attended by approximately 20 individuals. Outreach further supported more than 10 individuals to apply for the Disability Tax Credit (DTC), access an existing DTC designation, and/or apply for the Canada Disability Benefit (CDB), and supported six individuals to receive approval for the CLBC Housing Benefit.

Outreach learned that many supported people were not aware of their DTC standing. We plan to continue to educate and support people to get access to the Canada Disability Benefit (CDB) if they have a DTC. Also to continue to support people to prepare for, and apply for, the DTC in order to have access to the CDB and RDSP.

As we continue to see affordable and safe housing being a barrier to many people we support, we aim to prepare and present housing Rights & Responsibilities workshops. Also to strengthen relationships with housing advocates groups. Finally, to partner with agencies to advocate for increased capacity for subsidized and supported housing opportunities.

The diversity of CLBC referrals to Outreach has broadened significantly in 2025. We aim to explore staff specializations and/or internal differentiation of contracts to be more flexible in our ability to best support increasingly diverse population. We are looking at the specific support needs for seniors living independently, people with complex mental health barriers, youth with substance use barriers, and people moving or looking to move into more independent housing,

Outreach saw a large increase in emergency referrals with complex mental health, substance use and housing vulnerabilities in 2025. We aim to have a more focused and intentional training program for staff. We intend to

explore professional development opportunities in trauma informed practice, harm reduction, mental health and shelter and housing programs.

BEST Employment

In 2025, our Employment Services strengthened integration and collaboration with LIFE Services, increasing crossprogram collaboration with respect to employment opportunities and practices. Employer engagement remained a priority, with continued networking across industry groups, training institutions, and local employers to support more diverse, sectorspecific job leads. Operational processes were reviewed and discussions begun about the reintroduction of clearer rhythms for tracking caseload activity, job leads and participant engagement and supporting more consistent service delivery.

Despite ongoing job placements, the proportion of clients in active employment and obtaining new employment remains an area of focus. Exploration was done with job seekers who had varying levels of readiness and support needs, which in some cases contributed to the inability to secure employment.

Priorities for 2026 include implementing a structured file review process to continue strengthening documentation quality, compliance, and clarity around employment strategies and outcomes. Consistent practice and expectations will be reestablished for documentation, employer outreach tracking, and followthrough on job development activities, supported by checkins and coaching from leadership.

Targeted training will be planned to strengthen employer outreach, business engagement, and effective marketing of job seekers' strengths. Clearer tracking mechanisms for employer relations and employment outcomes will be developed to support transparency and measurable performance, alongside consistent performance benchmarks aligned with CLBC contractual obligations and supported employment best practices. Strengthening earlystage Discovery will further support better job matching, long term career progression, and growth for job seekers.

LIFE

LIFE Services demonstrated measurable growth across employment, learning, and service delivery. Over the last year, 6 of 24 participants secured paid employment. Post-secondary engagement has also increased, with six participants pursuing post-secondary opportunities, highlighting progress within the Learning Pillar and deeper exploration of long-term aspirations, confidence, and learner identity during Discovery.

Innovation efforts included participation in The Difference Project, strengthening internal capacity to articulate and measure intended differences and refining how meaningful outcomes are defined with participants.

Operational capacity was strengthened through the hiring of two additional LIFE Service Coaches, improving caseload balance, follow-through on planning, and consistency in documentation. LIFE planning meetings were completed for all but one participant (a new referral).

Practice development continued to deepen, with coaches showing improved ability to support participants in identifying meaningful, SMART goals, and increased operational consistency through clearer internal rhythms and accountability structures.

Key challenges included navigating the tension between Discovery as an ongoing process and expectations for reduced direct service levels as goals are achieved. While goal articulation has improved, supporting participants to consistently define deeper, identity-level intended differences remains an area for ongoing development.

Priorities for 2026 include strengthening employment leadership and integration between LIFE and BEST, further embedding impact inquiry into everyday practice, and developing clearer guidance for navigating new goals and intended differences post-Discovery. Continued investment in staff capacity through reflective practices and peer learning is recommended, alongside monitoring access and efficiency as caseloads grow to ensure individualized support quality is maintained.

Steps Forward

What We're Adjusting

Adjustments include revising personal planning and intake approaches, adding Missions within MyCompass, and incorporating structured reflection into log notes. Staff training on impact inquiry and documentation should be designed and implemented to support consistency across teams.

For families and networks, we intend to develop a family impact strategy in partnership with BACI's Family Support, leveraging existing relationships with PLAN and FSI. We also intend to strengthen communication by sharing findings and service adjustments from this round of impact evaluation through virtual sessions, establishing a regular communication rhythm that includes impact inquiry, and following up after existing engagement opportunities such as AGM and other information sessions.

Across all services, Discovery and planning will be expanded to more intentionally explore how families and networks spend time with their loved ones outside of service, with this information incorporated directly into personal planning to strengthen relevance and alignment of goals and support strategies.

Why It Matters

These adjustments ensure Community Inclusion Services remain focused on meaningful, lifelevel impact, not just activities or outputs. By strengthening how impact is explored, documented, and communicated, people served are better supported to feel confident, develop selfworth, and experience belonging and reciprocal relationships.

For families and networks, clearer communication and intentional engagement support trust, hope for the future, and confidence in shared decisionmaking. Incorporating family life and relationships into planning ensures services complement and strengthen natural supports, increasing relevance, sustainability, and longterm positive outcomes.

Service Efficiency

Pods

- 3,509 Timeline posts were created on MyCompass, sharing photos and goal updates
- 204 goals were marked completed
- 12 monthly meetings were held for pods
- 49 individuals were funded for pod supports.

One to one

- 3,836 Timeline posts were created on MyCompass, sharing photos and goal updates
- 100% of safety plans reviewed
- 12/12 monthly team meetings
- 6 NCI training sessions were held that provided direct case studies of experiences within Community Inclusion.

Seniors

- 100% of drills and inspection checklists were completed in 2025
- Weekly team meetings held
- In 2025, the Seniors' space ran full capacity at 20 people served.

Outreach

- 110/126 (87%) had an annual planning meeting
- 305 goals completed by individuals based on MyCompass Plans
- 469 new goals created on MyCompass Plans
- 100% of Outreach services maintained at full occupancy.

BEST Employment

- 58% of clients employed at year end are making more than minimum wage
- 119 average days from intake to employment for job seekers
- 17% of job seekers have been employed for a year or longer

LIFE

- 100% of coaches with full caseloads - Resources are used at full capacity
- 87 stated differences, 21 achieved and 69 still in progress
- 8 individuals were supported to secure employment.

Service Access

Pods

- All 4 had services start within 8 weeks of the referrals being received.

Seniors

- 1 new referral - service started within 8 weeks of the referral being made.
- 1 individual transitioned from seniors to retirement.

Outreach

- 25/31 (81%) of new referrals started service within 3 weeks of preferred start date.
- 27 new referrals in 2025.

BEST Employment

- 90% of information meetings for new referrals occurred within two weeks of CLBC referral.
Note: Job seekers may choose to defer this timeline
- 22 new referrals in 2025.

LIFE

- In 2025 LIFE took on 10 new referrals from CLBC.
- LIFE supported internal transitions for 6 people from LIFE and 3 from Outreach.
- All referrals achieved our target of 8 weeks from CLBC referral to start of service.



Service Satisfaction

Table 1 – Satisfaction of People Served

Satisfaction Level	OnetoOne PS (8)	Pods PS (8)	Seniors PS (2)	LIFE PS	Outreach PS (34)
Completely Satisfied	6 (75%)	3 (38%)	0 (0%)	0 (0%)	22 (65%)
Mostly Satisfied	1 (12%)	5 (62%)	1 (50%)	1 (100%)	9 (26%)
Sometimes Satisfied	1 (12%)	0 (0%)	1 (50%)	0 (0%)	3 (9%)
Did Not Answer	0 (0%)	0 (0%)	0 (0%)	0 (0%)	0 (0%)

Table 2 – Satisfaction of Families

Satisfaction Level	OnetoOne Families (14)	Pods Families (12)	Seniors Families (6)	LIFE Families (1)	Outreach Families (19)
Completely Satisfied	9 (64%)	3 (25%)	0 (0%)	0 (0%)	10 (53%)
Mostly Satisfied	3 (21%)	8 (67%)	3 (50%)	1 (100%)	7 (37%)
Sometimes Satisfied	1 (7%)	1 (8%)	3 (50%)	0 (0%)	0 (0%)
Did Not Answer	0 (0%)	0 (0%)	0 (0%)	0 (0%)	2 (11%)

Appendices

CI Quantitative Indicators & Persons Served Survey

Quantitative Indicators (Outcomes)	Quantitative Survey (Yes, Sometimes, No)
<ol style="list-style-type: none"> 1. People are trying new things. 2. People are learning new things. 3. People spend time with others in community. 4. People can express what they're looking for in relationships. 5. People know it's important to take care of their emotional, physical and financial health and safety. 6. People's service expectations shape the service experience. 	<ol style="list-style-type: none"> 1. At your Personal Planning Meetings are goals and/or strategies created that focused on: <ul style="list-style-type: none"> • What you want out of your service? • Trying new things? • Learning new things? • Spending time with others in community? • Helping you express what you're looking for in relationships? • Helping you understand the importance of being safe, and healthy? • Increasing your financial security? 2. Whether there are goals/support strategies related to the things above or not, are you supported by staff to: <ul style="list-style-type: none"> • Say what you want out of your service? • Try new things? • Learn new things? • Spend time with others in community? • Express what you're looking for in relationships? • Understand the importance of being safe and healthy? • Increasing your financial security? 3. Are you involved in using MyCompass? <p>The Satisfaction Question:</p> <p>How Satisfied are you with the service you have received through the _____ service at BACI.</p> <ol style="list-style-type: none"> 1. Completely Satisfied 2. Mostly Satisfied 3. Sometimes Satisfied 4. Often not Satisfied 5. Never Satisfied

CI Qualitative Indicators & Protocol – Person Served

Qualitative Indicators	▲ Qualitative Protocol
<p>1. People are confidently taking a step outside of their comfort zone.</p>	<p>K-B Describe a risky situation you've been in? What got you through it?</p> <p>D-B Have you done anything for the first time this year that made you feel a bit nervous? What about the second time you did it, were you less nervous?</p> <p>F-L Do you try new things even though you feel nervous about them? Where does your courage come from?</p>
<p>2. People are having aha moments that shape their view of themselves, the world and the people around them.</p>	<p>K-B What have you found out about someone you're close to over the last year that really surprised you? How has it influenced the faith you have in that relationship?</p> <p>D-B What's the most important thing you've done this year? How do you see the yourself differently because of it?</p> <p>F-L Do you feel like you have something to give this world? What keeps you committed to giving, even when you're not sure it's making a difference?</p>
<p>3. People feel connected and have a strong sense of belonging in the community</p>	<p>K-B Are you anyone's best friend? What is it about you that makes you best?</p> <p>D-B Where is your favourite place to spend time with friends? What happens there? What role do you play?</p> <p>F-L Where, When, with who do you belong? When you're feeling lonely how does this comfort you?</p>
<p>4. People are building meaningful and resilient relationships</p>	<p>K-B Of all your friends, who is the one who 'gets you' the most? What is the most important thing to 'get' about you?</p> <p>D-B Over the last year have you ever had a fight with a friend and then made up? What did this tell you about the kind of friend you are?</p> <p>F-L Are you thankful for your friendships? If so, or not, how does this influence the way you connect with them?</p>
<p>5. People are invested in their physical, emotional and financial health, and safety</p>	<p>K-B Do you think money and how you make it is important – why, why not? How has this shaped the way you make and spend your money</p> <p>D-B What do you do to stay healthy? What keeps you motivated to be healthy when you're tempted by unhealthy things?</p> <p>F-L What does it feels like when you feel safe? What does it feel like when you feel unsafe? Do you trust these feelings, or not?</p>

<p>6. People’s expectations for service are sought out, heard and respected.</p>	<p>K-B What information do you have to help you decide what you’ll do each day? Where does that information come from? What gives you faith that your decisions will be honored, or not?</p> <p>D-B What part do you play in making the schedule for each day? How does your day go when you make the decisions about how you spend your time compared to when others make decisions for you?</p> <p>F-L Describe what it feel like your opinions are respected and when they aren’t? What keeps you offering your opinions, even when they’re are not respected?</p>
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Note: K-B = Know -> Believe; D-B = Do -> Become; F-L = Feel -> Love

CI Quantitative Indicators & Survey – Families

Quantitative Indicators (Outcomes)	Quantitative Survey (Yes, Sometimes, No)
<ol style="list-style-type: none"> 1. Families take part in annual Personal Planning Meetings. 2. Families input is sought around service delivery. 3. Families advocate for their loved one’s service expectations. 4. Families service expectations are sought out and respected. 5. Families encourage inclusive community participation. 6. Families support their loved one to grow. 7. Families support their loved one’s decisions. 8. Families use MyCompass 	<ol style="list-style-type: none"> 1. Do you take part in annual Personal Planning Meetings? 2. Do you advocate for your loved one’s service expectations? 3. Are your service expectations sought out and respected? 4. Do you advocate for your loved one’s service expectations? 5. Do you encourage your loved one to participate in inclusive community activity? 6. Do you support your loved one’s growth? 7. Do you support your loved one’s decisions? 8. Do you use MyCompass? <p>The Satisfaction Question:</p> <p>How Satisfied are you with the ways in which the Community Inclusion service has engaged with you?</p> <ol style="list-style-type: none"> 1. Completely Satisfied 2. Mostly Satisfied 3. Sometimes Satisfied 4. Often not Satisfied 5. Never Satisfied

CI Qualitative Indicators & Protocol – Families

Qualitative Indicators	Qualitative Protocol
<p>1. Families trust their loved one’s choices around relationships.</p>	<p>K-B Do you know what your loved one is looking for in a friend and/or romantic partner? Can you get behind this?</p> <p>D-B Do you play match maker – or somehow facilitate romantic or friendship encounters? How’s that for you? Have you embraced this role as part of parenting your loved one, or rejected it as ‘non of your business’?</p> <p>F-L Do you feel slightly nauseous when you think about your loved one going through the joys and heartbreaks of relationships. Does peptobismal help? What else keeps the nausea down and your spirits up?</p>
<p>1. Families’ service expectations are sought out and respected.</p>	<p>K-B Are you clear on the expectations you have for your loved one’s services? Are you confident you can get your expectations met?</p> <p>D-B How frequently do you connect with CI Services to discuss the service expectations you have for your loved one? In what ways have these interactions shaped your role in your loved one’s service?</p> <p>F-L Do you sometimes feel conflicted because your loved one has different expectations for their service than you do? How do you balance what they want with what you want for them?</p>
<p>1. Families have faith that their loved ones will make choices that lead them toward a wonderful future.</p>	<p>K-B Looking back over the last year, tell me about a time when you, along with the BACi team, supported your family member to take risks? How has this changed the way you move forward or approach times in the future where there may be some risk?</p> <p>D-B What have you done to secure a safe and good future for your loved one? What parts of your plan give you the most peace mind?</p> <p>F-L Would you feel relieved if you could wave a magic wand a guarantee a good and safe future for your loved one? Since you can’t, how do you keep going without relief?</p>
<p>1. Families advocate for their loved one’s service expectations.</p>	<p>K-B Do you know what your loved on expects from their services? Do you have faith in your capacity to help those expectations be met?</p> <p>D-B How do you help your loved one make their expectations for service known? How does this shape your role as an advocate?</p> <p>F-L In the last year when did you feel proud of your advocacy efforts related to your loved one? How did those times strengthen your commitment to advocate for your loved one?</p>

<p>5. Families believe that belonging in community increases the likelihood of a good and safe life.</p>	<p>K-B Do you know that some ‘experts’ say, in relation to people with disabilities.... <i>“The more people you have in your life who love you, are physically present, and are not paid to be there, the more fun you have, the more dynamic your life is and the safer you are over time”</i>. Do you buy it?</p> <p>D-B Do you ever look at ‘community’ through the eyes of your loved one? What do you/they see? How has this shaped the kind of parent you are...and describe what kind that is?</p> <p>F-L Are you afraid that your loved one won’t belong or be safe in community? In what way does that fear hold you back, and/or spurr you on?</p>
<p>6,7 Families connect with their loved ones in new ways.</p>	<p>K-B Do you think your loved one’s personality has changed much as they’ve grown up? Do you believe you connect with them in the same way you did when they were young? Or is it different?</p> <p>D-B In what ways do you interact differently with your loved one since they’ve grown up? How has your role changed...how would you describe it now compared to before?</p> <p>F-L. We’re using the term ‘loved one’ because we know you love your family member... but is it easy to love them? What keeps the love alive when the frustration mounts, the fatigue hits...?</p>
<p>6,7 Families are learning new things <i>from</i> their loved one.</p>	<p>K-B What is something you have learned from your loved one over the last year that surprised you? How does that change your expectations and outlook for the future?</p> <p>D-B Do you keep yourself open to learning new things from your loved one? In what ways does this openness to learning show up in other parts of your life?</p> <p>F-L Do you enjoy learning from your loved one? How does this joy buoy you up when things get rough?</p>
<p>6,7 Families are learning new things <i>about</i> their loved one.</p>	<p>K-B What’s something you thought you knew about your loved one, that turns out maybe isn’t quite accurate? In what ways has this sparked your curiosity to question other assumptions you’ve made?</p> <p>D-B What are your favourite things to do as a family? How do these things strengthen your commitment to each other?</p> <p>F-L Is the person your loved one is growing into causing you some anxiety? How do you keep supporting them to be themselves, when it means you can’t sleep at night sometimes?</p>

<p>6,7 Families are optimistic about their future.</p>	<p>K-B Do you have plans for what you're life will look like when you retire? How confident are your that your plans will come true?</p> <p>D-B Have you taken steps to evolve/adjust your relationship with your loved one as you (and they) age? How are you different as a parent of an adult, rather than a child?</p> <p>F-L Are you optomistic about your future? How do you keep seeing the glass as half full, when sometimes it seems pretty empty?</p>
<p>MyCompass enriches conversation at home.</p>	<p>K-B Do you know what your loved one is doing each day, who they are with and where they are going? In what ways does this knowledge make you hopeful for a bright future for your loved one?</p> <p>D-B Do you check out and contribute to MyCompass regularly? How has this contributed (or not) to you becoming part of their team...melding their formal and informal support networks.</p> <p>F-L Are you curious about whether your loved one thinks they are well served through CI? How does your curiosity spark up conversations with your loved one?</p>

CI Intended Impact Visual - Person Served



CI Intended Impact Visual - Families



Employment Intended Impact Visual - Job Seekers



HOME & COMMUNITY SERVICES

Program Overview

Home and Community Services (HCS) operates 19 staff-supported homes, each supporting between one and five individuals. In 2025, HCS provided services to 52 individuals, as well as 4 people receiving only community-based supports. Staffing is provided 24 hours a day, seven days a week, ensuring consistent support and wellbeing for all individuals served. Homes are located throughout the Lower Mainland and are primarily licensed under Community Care Facilities Licensing, in accordance with the *Residential Care Regulations* and the *Community Care and Assisted Living Act*.

At its core, a home is a place of comfort, refuge, and renewal, a place of belonging. It reflects the identities, preferences, and personal expressions of the people who live there. HCS is committed to supporting individuals to create genuine homes where their choices, routines, and individuality are respected and visible, and where they can experience fun, safety, connection, and a strong sense of belonging.

Intended Impacts

- People live a healthy and well-balanced life.
- People are their own historians.
- People build and maintain flourishing relationships.
- People embrace success, no matter how big or small.

Demographics

Age Range (Years)	Number of People
19–40	17
41–64	29
65–79	5
80+	1
Total	52

Evaluation Methodology

In 2025, the Home & Community Services team participated in a qualitative, relationship-based listening process designed to better understand the lived experiences of people supported by BACi, particularly those who do not use traditional spoken communication. The initiative was grounded in the belief that deep, intentional listening is an essential strategy for service improvement and quality of life.

External facilitators spent time visiting staffed homes, engaging directly with people served in settings where they felt most comfortable. Rather than relying on formal surveys or structured interviews, the process

emphasized adaptive and individualized approaches to listening, including conversation, observation, storytelling, art-based activities, gestures, non-verbal communication, and relational cues. Participation was voluntary, and individual preferences and readiness to engage were respected throughout.

To provide consistency and breadth, conversations were guided by the Charting the LifeCourse Life Domains, ensuring attention to the whole person across areas such as daily life, community living, health, safety, relationships, and advocacy. In addition to one-to-one interactions, the process included group gatherings, creative activities, and shared meals to foster connection and collective reflection.

The initiative also intentionally incorporated the perspectives of families, supporters, and staff. Family members and networks participated through sharing circles and conversations about what was working well and what could be strengthened. Staff contributed through reflective discussions and asset-mapping activities that explored their relational knowledge, skills, and experiences. Attention was paid to power dynamics, communication styles, and the importance of psychological safety in these spaces.

Qualitative data was gathered through notes, reflections, shared stories, visual artifacts, and observations. Findings emerged through reflection, identifying patterns, tensions, and strengths related to listening, communication, relationships, culture, and support practices. The emphasis throughout was on learning, celebration, and improvement, not evaluation or judgment.

This qualitative process reinforced that listening is not a one-time activity, but an ongoing, adaptive practice that evolves through relationship, curiosity, and reflection. The insights and themes presented in the final report reflect what was heard across individuals, families, staff, and shared experiences, and form the foundation for recommendations and organizational “stretches”.

Qualitative Data Collection and Analysis

The Listening Deeply project and report found that people supported by BACi generally experience their homes as safe, caring, and well-organized environments, with strong, trusting relationships at the centre of their quality of life. Relationships with staff, family, peers, and community emerged as the most consistent and influential factor shaping people’s sense of belonging, safety, and satisfaction. The findings also highlighted that satisfaction is complex and evolving, particularly for individuals who communicate in nontraditional ways, and that people often require intentional support and time to express preferences, aspirations, and dissatisfaction. Staff relational knowledge, adaptability, and presence were identified as key strengths, alongside a growing culture of listening within the organization.

At the same time, the report identified opportunities to deepen individualized, forwardlooking planning; create more space for group conversations and reflection; and strengthen everyday practices that support decisionmaking, communication, and meaningful contribution. The results showed that ongoing, relational, and adaptive listening is essential for enhancing quality of life and support.

Quantitative Data Collection and Analysis

For the quantitative portion of the evaluation, we designed a survey to collect data on our quantitative indicators of impact. We sent the survey to all people supported and a separate one to their families. We had a response of 30/52 (58.8%) for people and 14/52 (26%) for families. The data was analyzed primarily using measures of central tendency. We identified key insights, patterns, and gaps within the data and incorporated these discoveries into the related findings. The most significant insights from the quantitative data are included in the findings sections.

Limitations

The response rate to the quantitative family survey was low. We believe this may have been influenced by the timing of distribution, as the survey was circulated via email during the holiday period. Despite sending followup reminders and supervisors reaching out directly to families, participation remained limited. It also should be noted that many of the comments on the person served quantitative surveys were written about people. This leads us to believe that some families or staff may have filled the surveys out for people, and it is unclear if the persons responses were from the person or perspective of the person filling out the survey. While the Listening Deeply initiative generated rich qualitative insight, several factors limited the ability to gather a complete picture of all experiences. Not all individuals supported were able or willing to participate; some opted out, were having difficult days, or chose not to interrupt established routines, and these decisions were intentionally respected. The project relied heavily on relational and non-traditional forms of communication, which, while meaningful, can be interpretive and shaped by the depth of existing relationships and staff familiarity. Family participation was also limited to those who chose to attend group sessions, meaning the perspectives captured may not reflect the full diversity of family and network experiences. Additionally, power dynamics, group settings, and the presence of leadership in some activities may have influenced how openly people shared reflections.

Home & Community Services Findings – Persons served

People supported in staffed homes consistently conveyed that they experience their lives as safe, stable, and well cared for, with many expressing comfort in their homes and routines. A strong sense of belonging and security was closely tied to relationships particularly long-standing, trusting relationships with staff who know them well and understand their unique ways of communicating.

For many individuals, communication occurred through non-traditional means, including gestures, body language, repetition, art, silence, and emotional expression. These forms of communication were meaningful and intentional, highlighting that people are consistently expressing preferences, satisfaction, and discomfort even when not using spoken language. The findings reinforce that people often need time, trust, and relational safety to share what matters most to them.

People expressed satisfaction in varied and evolving ways, such as pride in their personal space, enjoyment of daily routines, pleasure in seeing family or participating in group activities, and interest in new possibilities. The report found that satisfaction is not static; as people are listened to more deeply, new desires and aspirations often emerge, including interest in work, social connection, community participation, or greater choice and autonomy.

Group conversations and shared experiences were particularly meaningful for many individuals. These settings supported storytelling, laughter, and connection, and in some cases allowed people to feel seen and heard in new ways. At the same time, the report noted that some individuals, particularly those with quieter communication styles, required more intentional support to ensure their voices were not overshadowed in group environments.

Overall, the findings from people interviewed underscored that quality of life is deeply relational. Feeling known, respected, and responded to mattered more than specific activities. The report reinforced that ongoing, adaptive listening and intentional support for decision-making are essential to ensuring people continue to shape their own lives in meaningful ways.

Home & Community Services Findings – Families

Families and networks who participated in the Listening Deeply initiative consistently expressed feeling seen, heard, and respected in their relationships with BACI. Many described a strong sense of partnership with the organization and confidence that concerns or issues, when raised, would be taken seriously and addressed. Families spoke positively about the care, stability, and relational continuity experienced by their loved ones, and frequently highlighted trust in staff and leadership as a key strength.

At the same time, families identified a desire for more opportunities to connect, share stories, and engage in dialogue with each other and with leadership. Group settings, such as the family sharing circle, were experienced as meaningful and affirming, and families expressed interest in having more spaces to gather, reflect, and build community. These conversations reinforced the value families place on relationship-based engagement rather than transactional communication.

The report also noted that the family perspectives captured were primarily positive, while acknowledging that these voices may not represent the full range of family experiences. This raised an important question for the organization about how to reach and hear from families who may feel less connected or less comfortable engaging, and how to ensure their voices are equally welcomed and valued.

Overall, the findings from families emphasized the importance of ongoing communication, relational trust, and shared learning. Families want to remain active partners in their loved one's life and supports, and they value transparency, opportunities for dialogue, and a clear sense that their insights contribute to continuous improvement and quality of life.

Conclusion

The findings from the Listening Deeply initiative and the quantitative surveys reinforce that quality of life for people supported by BACI is rooted in relationships, trust, good care and feeling genuinely known and respected. People described feeling safe, secure, and valued in their homes, with strong connections to staff playing a central role in their sense of belonging. Their varied and non-traditional ways of communicating highlight the importance of slowing down, building trust, and listening beyond words to understand evolving preferences, aspirations, and differences people want to feel. Similarly, families and networks emphasized the strength of trust with staff and leadership, valuing partnership, transparency, and opportunities for meaningful conversations. The findings point to the need for more inclusive spaces to ensure quieter voices and less-connected families are equally heard and engaged.

As a result of this learning, HCS will continue to prioritize relationship-based practice, intentional and adaptive listening, and consistency across the service. Steps will include strengthening staff capacity to recognize and respond to diverse communication styles, creating more opportunities for group and community connection for both supported people and families, and intentionally reaching out to those who may feel less connected.

Insights Into Impact

The findings suggest that the service is headed in the right direction to achieving several of its intended impacts, particularly people living a healthy and well-balanced life and people building and maintaining flourishing relationships. People consistently described feeling safe, stable, and cared for in their homes, with

strong, trusting relationships with staff contributing to a deep sense of belonging and emotional wellbeing. The emphasis on recognizing and responding to non-traditional communication shows meaningful progress toward people being their own historians, as individuals are supported to express preferences, satisfaction, and discomfort in ways that are authentic to them. Evidence of pride in personal space, enjoyment of routines, and interest in new opportunities reflects that people are already embracing success, both big and small, while also pointing to emerging aspirations for greater autonomy, connection, and participation. At the same time, the need for more intentional support for quieter voices in group settings indicates that this work is ongoing. Overall, the findings show strong momentum toward the intended impacts, with continued growth dependent on sustained relational practice, adaptive listening, and intentional inclusion.

2025 Highlights, Reflections and Challenges

Throughout the year the HCS team had the honour of participating in several conversations and events as part of the Listening Deeply initiative, a qualitative project that centered the voices and lived experiences of people supported, families, and staff. The project reinforced the importance of relational, adaptive listening and has informed ongoing reflection and service improvements within Home and Community Services.

Program enrichment continued through staff leadership and innovation. One Coordinator led the development of an inclusive and accessible Walking Club, which became a wellattended weekly activity. The club brings together individuals from multiple homes and promotes physical health, social connection, and community engagement. In addition, celebrations and social gatherings were held throughout the year, creating opportunities for joy, connection, and shared life within and across homes.

In response to an identified need for increased onsite leadership and direct oversight, supervisors were re-established in all staff-supported homes, and a Lead Department Manager role was introduced. These changes were implemented to strengthen quality, consistency, and safeguards that enhance and protect the lives of the people we support. Early in the year, the organization also experienced a change in senior management, which prompted reflection and renewed focus on leadership alignment and capacity building across the department.

Throughout 2025, the leadership team prioritized strengthening leadership skills and increasing staff capacity through training, coaching, and the re-establishment of tools that support effective practice.

Early steps were also taken toward implementing a new online maintenance tracking and request system to strengthen documentation and followup. Work is underway to address outstanding maintenance needs and ensure homes remain safe, functional, and welcoming environments.

We continued to support individuals through transitions to new homes when a different service model better aligned with their needs. These transitions were carefully planned and supported through collaboration and training, resulting in positive outcomes and continuity of care. In 2025, we also opened two new homes, further expanding our capacity to provide responsive, person-centred supports.

Reflecting on the year, we are proud of the progress made and the positive impact achieved through strong partnerships with residents, families and networks, staff teams, and professional collaborators. Together, we continue to strengthen environments where people feel safe, supported, and truly at home.

Steps Forward

Several key areas will remain a focus moving forward. We will continue strengthening onsite leadership and staff capacity, ensuring supervisors and leadership teams are well supported to provide consistent oversight, coaching, and quality assurance within homes. The learning from Listening Deeply highlights the importance of ongoing staff reflection, leadership modeling, and cultural growth.

We will also continue embedding the other recommendations from the project such as prioritizing relational, adaptive listening and creating space for reflection, group conversation, and meaningful engagement. This includes supporting staff to notice and respond to subtle communication, evolving preferences, and the lived experiences of the people we support. We will continue to prioritize relationship-based support, ensuring staff have the time, tools, and confidence to listen beyond words and respond to subtle communication, emotional cues, and evolving preferences.

Ongoing attention will be given to environmental and operational foundations, including improving maintenance tracking and followup to ensure homes remain safe, functional, and welcoming. We will also continue to support thoughtful transitions when individuals’ needs change, maintaining strong planning, collaboration, and continuity of care.

Finally, we will continue to nurture connection and community life through inclusive activities, celebrations, and shared experiences that promote belonging, joy, and relationships within and across homes.

Service Efficiency

100% Efficiency – maintained full occupancy in funded spaces in 2025

100% Access – Home & Community transitioned two new referrals in 2025

Service Satisfaction

Table 1 – Satisfaction of People Served

Question	2023	2024	2025	Change From Previous Year
1. I feel informed about initiatives, updates, and events at BACI.	93.55%	94.12%	96.77%	2.65%
2. I feel that communication between the services and my family is effective.	96.77%	94.12%	93.54%	-0.58%
3. I feel BACI is an advocate for my rights.	100.00%	91.12%	96.77%	5.65%
4. I feel satisfied with the services I receive from BACI.	93.55%	94.12%	96.77%	2.65%

Table 2 – Satisfaction of Families

I'm satisfied with the services my family member receives from BACI.



Opportunities for Future Evaluation

Evaluation should continue to expand and include adaptive and non-traditional communication strategies. The data shows that people are already expressing themselves meaningfully through gestures, art, emotion, and routine. Future evaluations could strengthen this by documenting communication strategies and efforts more consistently and building shared tools that help ensure quieter or non-traditional voices are not overshadowed, particularly in group settings where participation varies.

Evaluation efforts should be considered to ensure less connected individuals and families are included. While the findings are largely positive, future evaluations should test whose voices are missing and adapt engagement strategies. This will strengthen confidence that progress toward intended impacts is happening across the service, not just for those who participate and that learning continues to be shaped by the full range of experiences within the organization.

Appendices

- [Satisfaction Survey Results – Families](#)
- [Satisfaction Survey Results – Person Served](#)
- [Listening Deeply Report](#)
- [Listening Deeply Video](#)



LIFE SHARING

About Life Sharing

Life Sharing enables adults with disabilities to live in someone's home and receive support tailored to their goals and needs. Arrangements vary – some live with families, others with roommates, couples, or in a private suite within the home. This flexible approach involves commitment from the person with a disability, their family, BACI and the Provider, each bringing unique perspectives and roles. Although every Life Sharing relationship is different, they share common hopes for a life of purpose and respect.

Intended Impacts (Intended Outcomes)

People live in their desired living situations. People know and are able to articulate what they want and who they want to live with. People understand what their options are, and their living situation is defined by them.

People are growing in ways that are personally meaningful to them. Personal growth and development. People have opportunities to learn about things they are interested in. People are able to voice their concerns and opinions. They have more autonomy in their lives. People know who and where to go to get the support and services that they need. People have opportunities to grow their skills and gain more independence.

People are connected and have a strong sense of belonging in the community. People have access to vote, work, volunteer, contribute to economy and community. People are well known community members. They have places of belonging in the community. They are contributing citizens.

People have relationships that are meaningful. People are able to choose and set boundaries around their relationships. The people in their lives are not all paid. People are accepted for who they are. They have unpaid supportive networks.

People maintain their health and wellbeing. LSN Providers and others in their network understand their role and have proper training and resources they need to provide the best support for the people they care for. People are able to access these resources on their own initiative and are confident to utilize resources. The network knows when and who to ask for support and resources.

People who care for people are able to provide the best care they possibly can (contractors' outcome). People are able to independently access or are supported to access the health care they need. People receive the appropriate health care at the appropriate time, through all stages of their lives.

Demographics of Person Served:

Age Range (Years)	Number of People
0-5 yrs	0
6-18 yrs	0
19-40 yrs	75
41-64 yrs	68
65 yrs and older	21

Over the course of 2025, the Life Sharing team supported 175 people – 13 people joined our services and 10 left our services. At the end of 2025, the Life Sharing department was supporting 166 people.

Efficiency: 100% – Each LSN Manager managed a caseload of 25 people or the equivalent. (There are several hybrid arrangements and Life Sharing wrap-arounds that require much more of the managers' time, oversight and attention.)

Access: 81% – People seeking services moved into a Life Sharing arrangement within 3 months from time of referral.

Performance Goals:



Evaluation Methodology

The aim of our evaluation was to see what kind and quality of impact Life Sharing Services is having on the population we are serving. To understand this, we explored two broad evaluation questions with both Providers and family members:

1. What kind and quality of impact are we having on our participants?
2. What aspects of our program are causing this impact?

Over the course of the project, we: (a) Developed and refined our ideas of intended impact and indicators; (b) Designed and implemented a mixed methods outcome evaluation using both qualitative and quantitative means to collect and analyze data; (c) Identified themes and findings, and; (d) Considered the implications to those findings for program improvement and innovation.

This project began by identifying and clarifying the intended impact of the people living in Life Sharing, their family's perspective, as well as the Providers' experience. Once the ideas of impact had been developed, we used the Heart Triangle™ model to identify qualitative and quantitative indicators of impact on the mental, behavioral, and emotional changes in our participants. We used these indicators to design a qualitative interview protocol and a quantitative questionnaire to evaluate progress toward achieving our intended impact.

Qualitative Data Collection and Analysis for Person Served, Their Families and the Life Sharing Providers

For the qualitative portion of the evaluation, we designed in-depth interview protocols to gain data about the structural, qualitative changes resulting from our program. Our population size for this evaluation was 165

people served, 156 family members and 142 Life Sharing Providers. We used a purposeful stratified sampling technique to select a representative sample from each population. Our sample size was 30 people supported, 22 family members, and 10 Life Sharing Providers, drawn from the following strata of our population: 166 people supported, 156 families and 142 Life Sharing Providers.

Our interview team consisted of the 11 Life Sharing Managers and 1 staff. We convened one-on-one interviews lasting from between 45 minutes to one hour in length and collected interview data using handwritten notes.

We then analyzed the data inductively using a modified version of thematic analysis. Each interviewer analyzed the data from their interviews individually to identify initial themes. Together, we developed common themes from all the interviews and brought them forward as findings.

Quantitative Data Collection and Analysis

For the quantitative portion of the evaluation, we designed a questionnaire to collect data on our quantitative indicators of impact.

We administered this instrument to:

- People supported and had a response of 40 out of 165, a 24% response rate.
- Families and had a response of 31 out of 156, a 20% response rate.
- Life Sharing Providers and had a response of 55 out of 142, a 39% response rate.

The data was analyzed primarily using measures of central tendency. We identified key insights, patterns, and gaps within the data and incorporated these discoveries into the related findings. The most significant insights from the quantitative data are described in the following narrative.

Limitations

Interviewing was challenging as multiple services were conducting interviews, resulting in some participants repeating the process with different departments. The lack of computers or email among some individuals further limited online interviews. Additionally, interviewing people who do not communicate verbally remains difficult for collecting meaningful insights from their life experiences.

Life Sharing Findings (Themes) – Persons Supported

Finding 1: Belonging, Connection, and Community Inclusion

People experience their home share as family, feeling emotionally safe, respected, and understood. Deep bonds with Life Sharing Providers and roommates provide stability. People also find welcoming places in their broader community, fostering a sense of inclusion and belonging.

Interview Quotes

“My home share is like my family, and my roommate is like my brother.”

“I feel like I have family to come home to every day.”

“Happy life share, good sharing providers support my needs, good family home share... I am thankful for the independence”

Survey Support

96% (53 out of 55) agree that individuals are encouraged to maintain meaningful relationships.

Insight: Individuals describe their Life Sharing homes as places of safety, respect, and familial connection.

Finding 2: Independence, Growth, and Learning

People supported in Life Sharing develop new skills such as cooking, budgeting, and transportation, and gain confidence through encouragement and self-reliance. Opportunities for education, employment, and personal growth are valued, with many working toward new goals and aspirations. People served gain confidence and learn new skills.

Interview Quotes

“I discovered that when living with others I sometimes need a break, I can still spend time in my room if I want to.”

“I’m learning to be on time and watch the clock to make sure my boss has no issues with me.”

“I’m continuing to go to BCIT and learning graphic design.”

Survey Support

100% (55 out of 55) agree they support exploration of new experiences aligned with individual interests.

Finding 3. Health, Wellness, and Wellbeing

Physical and emotional wellness are supported through healthy routines, nutritious meals, regular medical care, and supportive relationships. People feel empowered to make decisions about their health and wellbeing. Individuals work on physical and mental well-being.

Interview Quotes

“I quit smoking because if I want to have my own family and kids, I don’t want to give them second-hand smoke.”

“We eat healthy at home. My provider cooks good meals.”

“I have confidence to make decisions about my health and wellbeing.”

“I feel supported to stay healthy and well.”

Survey Support

100% (55 out of 55) agree they actively assist in maintaining overall health and wellness.

Finding 4: Contribution, Responsibility, and Purpose

People actively participate in their homes and communities by choosing meaningful ways to help, support others, volunteer, and take responsibility for shared spaces and tasks.

This sense of purpose is reinforced by opportunities to help and give back.

Interview Quotes

“I take care of the compost and take out the garbage.”

“I helped my neighbour who’s 63 and lives 2 houses down.”

“I take care of the dogs and bring the newspaper to my grandpa every morning.”

Survey Support

No direct survey question, but Provider responses suggest active involvement and collaboration.

Finding 5: Routine, Structure, and Predictability

Having routines and structure like regular mealtimes, appointments, and shared commitment gives people the support they need to feel organized and confident in managing their day. These familiar rhythms help each person feel more at ease and empowered to participate in daily life, reducing stress and promoting a sense of accomplishment.

Predictable support from Providers promotes learning and stability.

Interview Quotes

“We have rules and a routine I try to follow.”

“Elizabeth reminds me to brush my teeth and stay clean so I can look good.”

Survey Support

Not directly measured, but inferred from Provider training and structured support.

Finding 6: Adventure, Enrichment, and New Experiences

Regular outings, vacations, and participation in events (e.g. Special Olympics, concerts, festivals) are highlights. The people we support value opportunities to explore new places, celebrate milestones, and engage in hobbies.

Interview Quotes

“We went together to Victoria, the beach, Richmond Market, and the PNE.”

“I like to see more places that I have not seen with my parents.”

“While being in Life Sharing, I have opportunities to participate in activities and try new things.”

Survey Support

100% (55 out of 55) agree they support exploration of meaningful experiences.

Finding 7: Reciprocal Relationships and Mutual Respect

Mutual respect and reciprocal care between the people we support in Life Sharing and the Providers are central. People value receiving care and also wish to contribute through acts of kindness, helping with tasks, and sharing meaningful time together.

Interview Quotes

“I enjoy that we live together under one roof, but I can have my own place and privacy.”

“I am cared for and give back through kindness, chores, and shared time.”

Survey Support

Providers report collaborative relationships with managers and individuals, supporting reciprocity.

Finding 8: Voice, Choice, and Empowerment

Having a say in daily activities, routines, and personal goals is highly valued. Feeling heard increases confidence and motivation, with most participants reporting strong control and choice in their lives.

Interview Quotes

“I make my own tea, I boil the water myself.”

“My roommate always asks what I want to do.”

“In Life Sharing, I have control and am able to make choices daily.”

“Having a say in daily activities, routines, and personal goals is highly valued.”

Survey Support

96% (54 out of 55) agree they understand the rights of persons served and feel equipped to apply them.

Satisfaction with Support

High satisfaction with Life Sharing Providers and Managers is a consistent theme. People feel supported, listened to, and thankful for the independence and opportunities provided.

- Very satisfied – 85%
- Somewhat satisfied – 13%
- Not satisfied – 2%

Interview Quotes

“I am satisfied with the support I receive from my Life Sharing Provider.”

“I am satisfied with the support I receive from my Life Sharing Manager.”

“Caregivers and their family satisfied with the support.”

Life Sharing Findings (Themes) - Providers

Finding 1: Caregiving as an Integrated Identity

Life Sharing Providers often describe their roles not as separate from their lives, but as deeply woven into their identities. This sense of integration highlights how caregiving evolves from a set of tasks into a way of being. This reflects long-term commitment and identity integration

Interview Quotes

“This is part of who I am; not separate, but integrated and meaningful.”

“You become part of each other’s lives.”

Survey Support

- 49% of Providers have been in the role for over 9 years.
- 91% had their Life Sharing contract reviewed with them.
- 93% felt fully informed about the person and their support needs before they moved in.

Finding 2: Human Connection at the Heart of Care

Relationships are central. Emotional connection, trust, and mutual respect create the foundation for meaningful support. Providers emphasized that deep relationships are both a means and an outcome of Life Sharing. Strong emphasis on relational care and emotional connection.

Interview Quotes

“This work is about human connection, not just care.”

“She needs friends... the same as any of us.”

Survey Support

- 100% agree the individual is encouraged to maintain meaningful relationships.
- 100% agree friends and family are welcomed into the home.

Finding 3: Growth Through Reflection and Challenge

Many Providers shared how their initial assumptions about caregiving and control were challenged, leading to growth. This theme reflects how personal transformation often arises from tension and learning. Providers are reflective and committed to continuous growth.

Interview Quotes

“I want to be more flexible and adjustable.”

“Once you start following your ethics... what is fair.”

Survey Support

98% agree they understand and align with BACI’s mission and values.

100% understand and can apply the Code of Ethics.

Finding 4: Sustainability Requires Boundaries and Self-Care

To maintain long-term commitment, Providers recognize the importance of self-care and clear boundaries. This balance helps prevent burnout and supports resilience over time. Support systems are in place to help providers maintain boundaries and well-being.

Interview Quotes

“I must care for myself to sustain others.”

“It’s okay to not do everything.”

Survey Support

- 93% agree they are provided with training and resources.
- 96% agree the manager responds to calls in a timely manner.

Finding 5. Mutual Growth and Reciprocity

Life Sharing is not one-sided; Providers describe their own development as intertwined with those they support. Providers and individuals grow together through shared experiences.

Interview Quotes

“Became someone who values growth, both in others and self.”

“We live together... it has become more of a partnership.”

Survey Support

- 100% agree they support health and wellness.
- 100% support exploration of meaningful experiences.
- 100% engage in community settings with a sense of belonging.

Finding 6: Mindset Shapes the Experience of Care

A Provider's outlook can shift challenges into opportunities and keep them grounded in gratitude. A positive and informed mindset enhances care quality.

Interview Quotes

"My outlook matters...gratitude and perspective help me through ups and downs."

Survey Support

- 100% understand confidentiality.
- 100% understand conflict of interest.
- 95% understand the complaint management process.
- 95% agree BACI respects and values diversity.

Finding 7: Listening, Patience, and Mindfulness as Daily Practices

Listening and mindful communication are essential tools for fostering trust and independence. Communication and mindfulness are central to Provider practice.

Interview Quotes

"Listening and mindful response are essential relationship tools."

"I've become a better listener, more curious about others' views."

Survey Support

- 94% agree the manager listens and collaborates.
- 100% understand confidentiality.

Finding 8: Purpose and Passion Reinforced Over Time

Providers find deep meaning and fulfillment in their work, which fuels lasting commitment. Providers find purpose in their roles and activities.

Interview Quotes

"You feel this is your gift — not everyone is able to do it."

"Seeing the effects of your support makes you want to do it more."

Survey Support

- 100% agree they support meaningful experiences and community engagement.

Finding 9: Advocacy and Navigating Systems

Providers often describe the need to advocate for those they support while navigating complex systems. Providers are equipped to advocate and navigate systems effectively.

Interview Quotes

“Navigating the healthcare and support systems... has been critical.”
 “Advocacy through lived experience; new identity.”

Survey Support

- 91% had contract reviews.
- 100% understand conflict management.
- 95% understand the complaint process.

Finding 10: Shared Humanity and Relational Needs

Across all experiences, Providers recognize that the people they support have the same relational and emotional needs as anyone. Emphasizes the relational and human aspects of caregiving.

Interview Quotes

“Recognition of shared humanity and relational needs.”
 “She needs friends... the same as any of us.”

Survey Support

- 100% agree relationships are encouraged and supported.

Provider Satisfaction

Providers express overall satisfaction with the support BACi provides in their role as a Life Sharing Provider.

- 93% agree
- 4% are unsure
- 4% disagree



Life Sharing Findings (Themes) - Families

Finding 1: Freedom Feels Like Home

When people feel trusted and supported, their living arrangement becomes more than a placement – it becomes home. Calm, organized environments that balance structure with autonomy allow people to thrive emotionally and functionally. Families feel their loved ones are trusted and have autonomy in their daily lives.

Survey Quotes

“Freedom is earned. Freedom is important to him.”

“He sits happily and waits... doesn’t matter who picks him up.”

“Company, quiet, clean and organized home...he feels appreciated.”

“He’s calmer when he comes home.”

Survey Support

- 55% responded “A lot” and 45% “Some” to their family member having control and making daily choices (Q1).

Finding 2: Growth Happens in Small Steps

Even modest accomplishments, like setting the table or skipping second helpings, become milestones when they happen in a context of gentle encouragement and meaningful support tailored to the individual. Predictable routines and calm support unlock pride and participation. Families observe steady progress in independence and skill development.

Quotes

“He sets the table for the right number of people.”

“He doesn’t ask for seconds anymore. He used to eat nonstop.”

“He puts the dishes away—it makes him proud.”

“We celebrate the small things. That’s how we grow.”

Survey Support

- 68% “Some” and 32% “A lot” said their family member developed new skills and became more independent (Q6).

Finding 3: Trust Builds the Bridge

Relationships built on consistency and deep understanding lead to emotional security, improved communication, and stronger outcomes. Long-standing bonds allow families and Providers to anticipate needs and encourage independence without fear. Trust is built through consistent, caring relationships.

Quotes

“They know him, so they understand him.”

“She’s been there a long time.”

“We talk every week and discuss his health.”

“He trusts them — and they trust him.”

Survey Support

- 97% were “Very satisfied” with Life Sharing Provider support (Q8).
- 94% were “Very satisfied” with Life Sharing Manager support (Q9).

Finding 4: Inclusion on My Terms

Engagement and community participation flourish when the people we support have a sense of control. Respecting personal boundaries while offering low-pressure opportunities allows for real, meaningful interaction. Individuals choose who they spend time with, fostering authentic inclusion.

Quotes

“He behaves differently with G, he exercises, swims, uses machines.”

“He is more patient and uses good manners in the community.”

“He ends up happier when he makes decisions about what we do.”

Survey Support

- 58% “Some” and 42% “A lot” said their family member can choose companions (Q4).

Finding 5: Connection Over Convention

For some, true belonging is found not in group activities, but in chosen comforts, pets, familiar routines, and close bonds. These attachments offer emotional safety and allow for a sense of control in an unpredictable world. Belonging is found in familiar, welcoming community spaces.

Quotes

“Her cat gives her unconditional love.”

“She’s loyal to the person closest to her... but only wants a few people in her life.”

“She values not having to get out of bed, not being told what to do.”

Survey Support

- 52% “Some” and 48% “A lot” said their family member found welcoming places in the community (Q3).

Finding 6: Supported, Not Pushed

True progress happens when people are guided, not pressured. Providers walk a fine line between encouragement and overstepping, those who honor personal pace see greater self-regulation, participation, and emotional balance. Families value guidance that respects the individual’s pace.

Quotes

“He knows when he’s full now.”

“In the old days he ate non-stop. Now he stops after one serving.”

“He has more confidence. He is more in control.”

Survey Support

- 94% “A lot” said their family member is supported to stay healthy (Q5).
- 58% “Some” and 32% “A lot” said their family member has confidence in making health decisions (Q7).

Finding 7: Family Re-imagined

Life Sharing blurs the line between caregiving and kinship. People feel accepted as part of extended families, while parents see trust grow between their family members and other supportive figures often for the first time.

Quotes

“He feels like he has two families.”

“Accepted by the Provider’s extended family.”

“Family appreciates they drive him to visit us—saves us from going there.”

“The caregivers have positively impacted her life over the years.”

Survey Support

Strong satisfaction scores (Q8 & Q9) and open-ended responses like “a loving relationship of trust and mutual respect” support this theme.

Family Satisfaction

- 97% of Families report feeling very satisfied with the support their family member receives from their Life Sharing Provider and 3% report feeling somewhat satisfied.
- 94% report feeling satisfied with the support they receive from their Life Sharing Manager and 6% feel somewhat satisfied.

Survey Quotes

“Thank you BACi for your support and knowledge”

“A loving relationship of trust and mutual respect between my family member and...”

“S’s transition to supported living has gone well.”

Conclusion

LSN had a high family satisfaction rate, successful transitions to supported living, and the fostering of trustful relationships between individuals and Providers.

Ongoing efforts are necessary to enhance autonomy, increase community inclusion, and strengthen relationships, and the team remains committed to improvement in these areas.

We prioritize training, community engagement, and evaluation to support those who assist others and ensure lasting, responsive impact for participants.

We are grateful to the families, individuals, Providers, and staff for their contributions, dedication, and partnership throughout the year.

Insights Into Impact

Based on the intended impacts outlined at the start of the report, our findings indicate that Life Sharing is making meaningful progress towards its goals. Many individuals are living in their preferred environments and have demonstrated an increased ability to articulate their desires regarding living arrangements. There is evidence of personal growth, as participants are engaging in activities that foster independence and skill development.

Community connection and a sense of belonging are strong, with people participating in local events, work, and volunteer opportunities. Relationships are becoming more diverse, with individuals building supportive networks that extend beyond paid care. Health and wellbeing are being prioritized, as both individuals and Providers are accessing necessary resources and training.

While there is still work to be done to ensure all those living in Life Sharing achieve their desired outcomes, the overall trajectory is positive. The findings suggest that Life Sharing is well on its way to fulfilling its intended impacts, with ongoing commitment required to deepen autonomy, expand community inclusion, and strengthen supportive relationships.

Highlights and Reflections from 2024 Recommendations

In 2025, we aimed to offer ongoing scheduled training for those we support, both in-person by region and virtually. We met this goal by delivering various trainings through Open Future Learning, hosting virtual sessions, and holding in-person workshops throughout the year.

The LSN Team ensures each new Life Share arrangement has a meaningful shared commitment, highlighting key topics and clarifying the priorities of both the supported person and the Life Share Provider. This process sets expectations and fosters understanding before the relationship begins.

The LSN Team truly embraced a spirit of celebration this year, sharing joyful moments and recognizing achievements. Whether it was highlighting milestones with uplifting photos, featuring success stories in our newsletter, or honoring years of dedicated service, we made sure to express our gratitude in thoughtful ways, often with heartfelt tokens of appreciation.

In 2025, the team held health care workshops for both supported individuals and Providers and conducted a comprehensive review with a consulting nurse to assess HSCL capacity issues. Courses included Advanced Care Planning, Basic Health Care, and Staying Safe and Healthy.

The Life Sharing Team produced quarterly newsletters highlighting key topics and including visual calendars of community activities and events for each region.

We facilitated efficient collaboration with LSN Providers by streamlining our annual and semi-annual reports, updating screening documents, and revising emergency plans. These initiatives eliminated redundant documentation and ensured that all requested information is relevant and substantive. Additionally, the team supplied each LSN Provider with an ISP binder for individuals they support.

To build a comprehensive profile for each potential LSN Provider and enhance the matching process, we revised our home study procedure. Now, two managers independently conduct the home studies for a candidate, resulting in two distinct home study documents. Once these documents are completed, the senior manager reviews and approves the home. Following approval, a summary profile is created and added to our Home Share Potentials Library. This updated process allows us to gain a deeper understanding of each Provider's strengths and suitability, thereby improving our ability to match Providers with those they can best support.

Steps Forward - Life Sharing Plan for 2026

Prioritize Voice and Choice

The Life Sharing Team is committed to ensuring that planning meetings for individuals are meaningful. Using person-centred planning tools, the team will work to uncover and support personal aspirations. Providers and individuals will be encouraged to actively track their progress and share successes, with special attention paid to honouring each person's voice in how they define achievement. In addition, the LSN Team recognizes the importance of cultural identity and values in shaping personal goals and experiences. Planning meetings will include opportunities for individuals to express and celebrate their cultural backgrounds, traditions, and preferences, ensuring that supports and activities are respectful and inclusive of diverse cultures within the community.

Promote Routine and Gentle Encouragement

Achievements will be celebrated by sharing stories through newsletters, social media, and community events, highlighting the diverse contributions within the BACi Life Sharing community. Providers are encouraged to share photos or short stories that showcase both major accomplishments and everyday successes with families and the LSN Manager.

Support Emotional Safety and Belonging

Living arrangements will be coordinated using a values-based approach that prioritizes shared interests and meaningful connections. This will include sharing relevant information collected in profiles, facilitating meetings, and creating opportunities for individuals to spend time together prior to move-in. For those most in need of mental health support, counselling will be provided through access to a psychiatrist. Optional tools such as mindfulness practices, sensory supports, and self-regulation strategies will be made available to strengthen emotional safety.

Enable Inclusive Engagement

The LSN Team will assist individuals in exploring community opportunities and collaborate with local organizations to adapt existing activities and ensure accessibility. Monthly calendars featuring inclusive activities will be shared, allowing people, families, and staff to choose options that best suit their interests and needs.

Build Trust Through Transparency

Trust and communication between families, Providers, and the organization will be strengthened through quarterly update check-ins with families regarding their loved one's progress. When service changes or reviews occur, the reasons will be explained clearly and proactively.

Short "How are we doing?" surveys will be implemented after major reviews or transitions to ensure families feel heard and their feedback is incorporated.

Invest in Ongoing Learning

The LSN Team will work to build skills, confidence, and alignment with values among Home Share Providers. Providers will be surveyed to determine which training topics would be most beneficial. A Training Calendar will be created, offering quarterly or biannual sessions on topics. (*i.e. trauma-informed care, program values, medication administration, documentation and reporting, advanced care planning, basic health care, and privacy*).

Quarterly newsletters will provide short videos and articles reinforcing Life Sharing values, and an online resource hub will be developed on the LSN website featuring curated videos, tools, templates, and best practices.

Support Emotional Labour and Sustainability

To prevent burnout and nurture the emotional wellbeing of Providers, the LSN Team will provide wellness resources and conduct regular wellness check-ins. Regular (*i.e. quarterly*) supportive supervision meetings will be scheduled, focusing on the Provider's wellbeing beyond compliance.

Life Sharing Managers will conduct Critical Incident Debriefs and offer optional supportive sessions after stressful events to help process emotional impacts.

Honour Caregiving as Identity

Providers will be acknowledged and celebrated as essential contributors to inclusive communities. The LSN Team will host annual appreciation gatherings and highlight Providers in newsletters and social media. Small, tangible gestures such as handwritten notes, milestone certificates, or gift cards will be used to express appreciation. Short stories of Home Share success will be featured to highlight the humanity and dedication of Providers.

Strengthen Advocacy and Navigation Skills

Families and LSN Providers will be empowered to advocate for and navigate systems alongside those they support. Resources will be provided on the LSN website, and workshops or online training will be hosted on topics including rights, boundaries, advanced care planning, and navigating complex systems. Concise bulletins will be sent when relevant policy or funding changes occur, clearly explaining the impact on Providers.

Invite Families Into Partnership

Families will be engaged as equal partners in care. With consent from the person supported, families will be included in planning meetings and invited to contribute input on what is working well or could be improved. Families will have access to plain-language summaries of their loved one's person-centred plan. Quarterly family calls and small social events such as potlucks or coffee meetups will be organized to celebrate relationships, not just service outcomes.

ADULT RESPITE

About Adult Respite

BACI's Respite Services offers wellness support to individuals and families.

At BACI, we believe that respite is a physical and emotional retreat, where relaxation and renewal can create strength and resilience. Every family's idea of respite is unique. BACI is dedicated to meeting those needs.

BACI's goal is to offer Respite Services that contribute to the entire family's well-being. We recognize the balance that must be achieved between meeting the support needs of the people we serve, the family's support needs, and BACI's capacity to respond.

At the end of 2024, the Respite program was supporting 19 people. In 2025, it supported a total of 21 people (18 ongoing, 3 short-term) – 2 people joined our services for short-term support, 4 people left our services. At the end of 2025, the program was supporting 17 people.

Intended Impacts (Intended Outcomes)

1. Families have an opportunity to rest and rejuvenate.
2. Respite is a family-centered service and meets each family's unique needs.
3. People's supports are personalized, and their needs are met.
4. People are safe and secure.
5. People are engaged and have opportunities to explore new experiences.

Demographics

- Number of people served: 21
- Gender Identity: 9 Females / 12 Males
- Ages of person served:

19-40 yrs	11
41-64	8
65 yrs and older	2
Unknown	0
TOTAL	21

Performance Goals



100% of contractors met qualification requirements in 2025.



57% or 12/21 Monitoring Tools were completed in 2025. (Monitoring Tools did not occur for 1 person as they transitioned to BACI Life Sharing (LSN), where the tool was completed in that program; for 5 people because their monitoring tools were completed in conjunction with BACI LSN; for 1 person because of short-term Respite Services, and; for 2 people Monitoring Tools were not completed).



In 2025, we renewed or arranged for 17 contracts to be signed. There are five people in Respite Services that have contracts with BACI LSN. (1 contract was not renewed in 2025 because the person transitioned to BACI Life Sharing).

**100%
Efficiency**

100% Efficiency – the Respite Manager oversaw a caseload of 21 people (There are five people in Respite Services connected to BACI Life Sharing and supported by a Life Sharing Manager).

**100%
Access**

100% Access – 100% of people seeking Respite Services were able to find a provider and receive the services they were looking for within 3 months from time of referral.

Evaluation Methodology

The aim of our evaluation was to see what kind and quality of impact Adult Respite Services is having on the population we are serving. To understand this, we explored two broad evaluation questions:

1. What kind and quality of impact are we having on our participants (we asked this of family members)?
2. What aspects of our program are causing this impact?

Over the course of the project, we:

- a) Developed and refined our ideas of intended impact and indicators.
- b) Designed and implemented a mixed methods outcome evaluation using both qualitative and quantitative means to collect and analyze data.
- c) Identified themes and findings.
- d) Considered the implications to those findings for program improvement and innovation.

This project began by identifying and clarifying the intended impact of the family members' perspective. Once the ideas of impact had been developed, we used the Heart Triangle™ model to identify qualitative and quantitative indicators of impact on the mental, behavioral, and emotional changes in our participants. We used these indicators to design a qualitative interview protocol and a quantitative questionnaire to evaluate progress toward achieving our intended impact.

Qualitative Data Collection and Analysis

For the qualitative portion of the evaluation, we designed in-depth interview protocols to gain data about the structural, qualitative changes resulting from our program. Our population size for this evaluation was 21 Family members. We used a purposeful stratified sampling technique to select a representative sample from each population. Our sample size was 3 family members, drawn from the following strata of our population:

Our interview team consisted of 1 staff member. They convened one-on-one interviews lasting from between 45 minutes and one hour in length and collected interview data using handwritten notes.

We then analyzed the data inductively using a modified version of thematic analysis. Each interviewer analyzed the data from their interviews individually to identify initial themes. Together, we developed common themes from all of the interviews and brought them forward as findings.

Quantitative Data Collection and Analysis

For the quantitative portion of the evaluation, we designed a questionnaire to collect data on our quantitative indicators of impact. We administered this instrument to 3 out of 21 family members and had a 14% response rate. The data was analyzed primarily using measures of central tendency. We identified key insights, patterns, and gaps within the data and incorporated these discoveries into the related findings. The most significant insights from the quantitative data are described in the following narrative.

Limitations

The ability to get all the information we would have liked through the quantitative evaluation process may have been affected by the small program size, not all family members chose to participate, and many participants are also connected to other services within BACi.

Findings – Family members

Finding 1: Emotional Safety and Trust in Relationships

Key Takeaways

Long-term relationships build trust and comfort.

Familiar providers create emotional security.

Families feel relief knowing their loved one is safe and cared for.

Interview Quotes

“I trust him and can comfortably relax knowing he is with his Respite provider.”

“That really made the difference...the trust is already inbuilt.”

“B felt safe with her and could talk her through the trauma.”

Adult Respite Survey - Families 2025

- 71% (5 out of 7) are confident their family member is safe when using BACi Services.

Finding 2: Aligned and Respectful Care

Key Takeaways

Providers understand individual needs and preferences.
Open communication fosters trust.
Continuity of care supports family priorities.

Interview Quotes

“We did sit and share lists of his favourite foods, activities, ways he likes things.”
“The more outside natural support he has the better it is...the richer his life is.”
“We didn’t really have to explain M...she knows his routine.”

Adult Respite Survey - Families 2025

- 100% (7 out of 7) agree that communication between the respite provider and family is effective.
- 71% (5 out of 7) agree the Respite Provider provides for the unique support needs of their family member.

Finding 3: Growth Through Positive Engagement

Key Takeaways

Enjoyable, meaningful activities improve mood and behaviour.
Supportive environments encourage social interaction and personal development.

Interview Quotes

“He just loves going...he is treated well and accommodated to do the things he wants to do.”
“He’s really, really chill...it’s helped him to be more independent because he’s not relying on us.”
“It gives me breaks so I can spend more time with my elderly dad...I’m not having to worry about E.”

Adult Respite Survey - Families 2025

- 71% (5 out of 7) agree that their family member is engaged and has opportunities to explore new experiences while receiving respite.

Finding 4: Independence and Life Skills Development

Key Takeaways

Daily living: Prepares own meals, manages personal care, does simpler chores.
Time and routine: Gets to work/activities on time, packs own lunch/bag, uses reminders.
Money and transport: Budgets for trips, handles banking basics, uses bus independently.
Work and social: Maintains job tasks, makes independent choices, solves small problems.

Interview Quotes

“He’s matured a lot...not depending as much on us.”
“He’s learning to cook basic food, pack his own lunch.”
“If it wasn’t for BACi when he was young, we had no resource...they helped us throughout the whole time until he became an adult.”

Adult Respite Survey - Families 2025

There is no direct survey question about independence and life skills development.

Family Satisfaction

- 57% (4 out of 7) of families satisfied with the services their family member receives from their respite provider, 29% (2 out of 7) it is ok, 14% (1 out of 7) unsure.

Survey Quotes:

“So thankful for the Respite help, it made such a difference”

“N has had a good relationship with his care aid”

Conclusion

In summary, the Respite Outcomes Report highlights the progress made towards intended impacts/outcomes, as well as opportunities for continued growth and development.

Highlights and Follow-up from Recommendations for 2025:

- In 2025, the new Respite Annual Report was created for providers to report on the highlights from the past year (*Quality Assurance Indicators: Relationship, communication, community, personal growth, health and wellness, as well as medications and medical appointments*).
- The Respite program continues to remain focused on exploring the best practices to strengthen the program, risk management and safety, while people are receiving Respite Services in ways that meet and address the needs of people, family, and CLBC’s service requirements.

Possible Actions

- Maintain continuity with familiar providers to preserve trust and relational safety.
- Leverage natural supports (family, coworkers, friends) alongside formal Respite Services to enrich social networks and resilience.
- Track independence outcomes explicitly through annual reporting (meal prep, commute, time management, money skills) in addition to mood/engagement.
- Capture caregiver well-being (exercise, social time) as an indirect outcome of participating in Respite Services.

CHILDREN'S SERVICES

Authors & Team Members:

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Program Overview

BACI owns and operates five child care centers in Burnaby: two 0-5yrs programs (Fair Haven & Little Eagles), one 3-5yrs program (Little Friends at George Derby – formerly Variety), and two Out of School Care 5-12yrs programs (Brentwood Park Plus & South Slope). The Association has provided inclusive child care and out of school care services for over 30 years. BACI believes in and implements the early childhood education philosophy and practice of play-based learning and curriculum at the centres. Through play, children learn to take appropriate risks and accept challenges, while interacting with their environment safely. Furthermore, through intentional and inclusive play-based activities and discoveries, children develop their social, emotional, cognitive, and physical skills.

BACI believes that all children have the right to develop to their fullest potential. Furthermore, we believe that inclusion is beneficial and essential for all children. BACI recognizes all children as distinct individuals with various strengths, needs, talents, and interests. Inclusion means creating opportunities for all children to collaborate, learn, and belong within a shared community. We support each child's natural curiosity and value diversity across cultures and backgrounds. The diversity of our staff helps foster an inclusive environment that enriches learning and supports positive outcomes for all children.

BACI believes in the importance of understanding, acceptance and empowering all children. In summary, the child care centres strive to inclusive programs where relationships and play are the foundations for a child's learning, growth, safety, and overall emotional well-being.

Intended Impacts

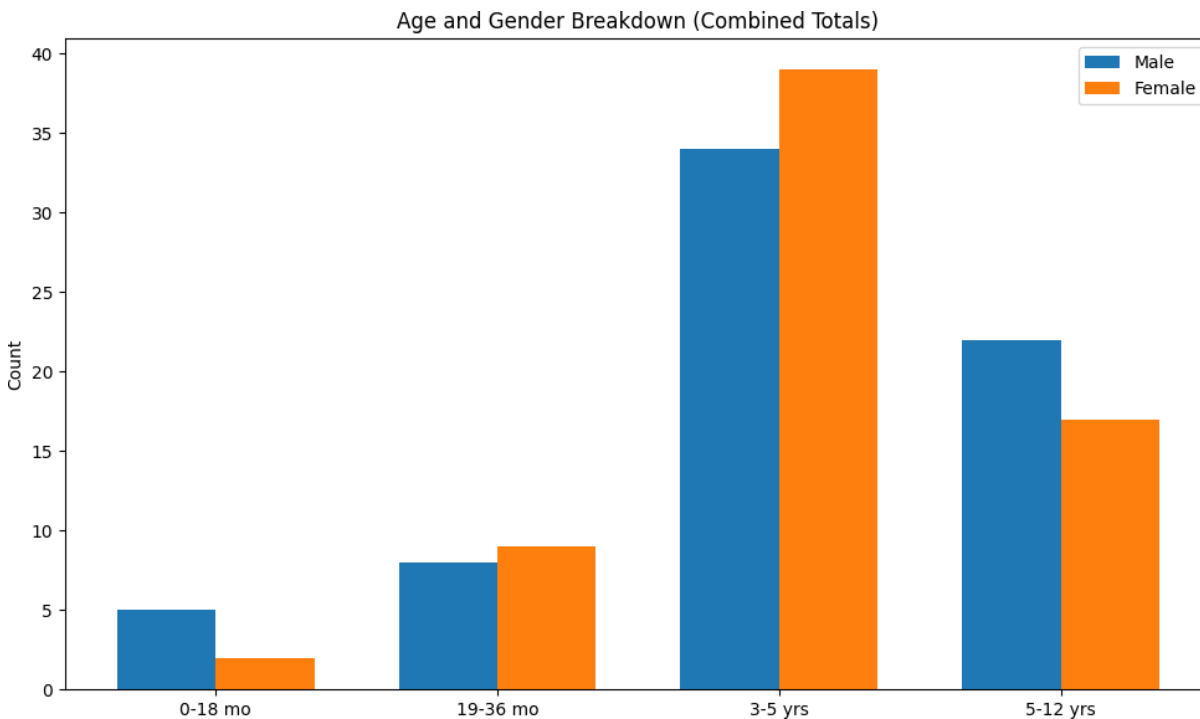
1. Children are caring and considerate.
2. Children become lifelong learners.
3. Children are independent and self-reliant.
4. Children are actively inclusive within the community.
5. Children will be explorers.

Demographics

Age Group	Male	Female
0-18 months	5	2
19-36 months	8	9
3-5 years	34	39
5-12 years (Kindergarten – 12)	22	17

Number of children served: 119

See the chart below for demographics at BACI's centres



Analysis

The above chart shows a combined gender and age breakdown for BACI's 5 child care – effective December 1, 2025.

The age range of 3–5 years has the highest count overall, with slightly more males than females. The highest number of child care spots are for 3–5 years. There's been a reduction in the total spots for infants due to the closure of Variety Cariboo. Little Friends at George Derby only provides child care for 3–5 years.

It's noted 5–12 years (Kindergarten) is balanced between the South Slope and Brentwood Park Plus Out of School Care Centres.

Evaluation Methodology

The aim of our evaluation was to see what kind and quality of impact child care is having for the children and families BACI serves in the centres. To understand this, we explored two broad evaluation questions with both providers and family members:

1. What kind and quality of impact are we having on our participants?
2. What aspects of our program are causing this impact?

Over the course of the project, we: (a) Developed and refined our ideas of intended impact and indicators; (b) Designed and implemented a mixed methods outcome evaluation using both qualitative and quantitative means to collect and analyze data; (c) Identified themes and findings, and; (d) Considered the implications to those findings for program improvement and innovation.

This project began by identifying and clarifying the intended impact of Children's Services (and child care). Once the ideas of impact had been developed, we used the Heart Triangle™ model to identify qualitative and quantitative indicators of impact on the mental, behavioural, and emotional changes in our participants. We used these indicators to design a qualitative interview protocol and a quantitative questionnaire to evaluate progress toward achieving our intended impact.

Qualitative Data Collection and Analysis

For the qualitative portion of the evaluation, we designed in-depth interview protocols to gain data about the structural, qualitative changes resulting from our program. Our population size for this evaluation was 113 family members. We used a purposeful stratified sampling technique to select a representative sample from each population. Our sample size was 16 families drawn from the following strata of our population:

Family Members:

- An equal number of families across the 5 child care centres, with a few families with children in more than one child care centre, were interviewed.

Our interview team consisted of the Children's Supervisors and a Senior Manager from Quality Assurance. We convened one-on-one interviews lasting from between 45 minutes and one hour in length and collected interview data using handwritten notes.

We then analyzed the data inductively using a modified version of thematic analysis. Each interviewer analyzed the data from their interviews individually to identify initial themes. Together, we developed common themes from all the interviews and brought them forward as findings.

Quantitative Data Collection and Analysis

For the quantitative portion of the evaluation, we designed a questionnaire to collect data on our quantitative indicators of impact. We administered this survey to 109 families and had a response of 52% response rate. The data was analyzed primarily using measures of central tendency. We identified key insights, patterns, and gaps within the data and incorporated these discoveries into the related findings. The most significant insights from the quantitative data are described in the following narrative.

Limitations

Unlike last year, each supervisor interviewed families from outside their centre. The theory was that families may respond differently when speaking with someone other than the supervisor they know (i.e. families could speak more freely). However, it was soon realized that the interviews are still most effective and meaningful when the supervisors conduct interviews with families from own their centres. The supervisors know the families, and that relationship is key to the conversation and information shared. Therefore, in 2026, the supervisors will return to this interview format.

Another consideration with the interview data is the busyness of families and the challenge of booking focused time with them. There were some distractions during interviews that likely impacted the quality and substance of the interviews – i.e. the rush and busyness didn't allow for more in-depth conversations. Interviews were most meaningful when specific time was booked and allocated with families (and with minimal distractions). BACi fully respects and understands how busy families with young children are and the constant time

constraints they face. In 2026, the supervisors will offer to meet families after hours or at coffee shops or other such times/places that work best for families' schedules and have minimal distractions.

The interview sample size proportionally grew compared to last year. There were 3 more interviews conducted – for a total of 16 – but less total families because Little Friends at George Derby now only serves 25 families (as opposed to 37 at Variety Cariboo). There were an equal number of interviews across the centres – 3 per centre. However, with the quantitative survey, there was a disproportionate representation. 81% of the surveys completed were from families with children at Fairhaven, Little Eagles, and Little Friends.

Findings – Families

Finding 1: “New Things I Know”

Key Takeaways

Language and Communication

Discussion

Children are developing strong language and communication skills at child care. They are expanding their vocabulary, learning to express their interests clearly, and improving their ability to follow instructions. Through songs, conversations, and daily routines, they practice speech, ask questions, and share what they've learned. These experiences help them communicate feelings, build friendships, and engage in meaningful conversations. Many children are now speaking in longer sentences, showing curiosity about new words, and confidently using language to connect with others. Families are noticing this progress too – 89% agree that there has been improvement in communication, reflecting the positive impact of these experiences.

Interview Quotes

“He is coming home and singing new songs, asking questions and sharing his day on what he learned.”

“Ability to communicate his feelings, ability to socialize with others.”

“She has learned lots of words and can speak in 4-5 word sentences.”

“Her curiosity has blossomed, and she often shares what she learns at school with great excitement at home.”

“Whenever they're learning something new they're taking the time to ask questions like why does this happen.”

Finding 2: “Big Hearts, Big Skills”

Key Takeaways

Social/Emotional Development

Independence and Confidence

Discussion

Children have shown significant growth in social and emotional development, becoming more confident, independent, and empathetic. They are building friendships, learning to share and take turns, and improving communication skills by expressing their ideas and emotions clearly. Many have demonstrated resilience, problem-solving abilities, and cooperation in group settings, while also adapting well to routines and exploring new activities with curiosity. Overall, these experiences have strengthened their social awareness, compassion, and ability to interact positively with peers of different ages. On average, 85% of families agree that they have seen an improvement in their child's sense of belonging, empathy and willingness to help others.

Interview Quotes

“She has grown more confident in expressing her ideas and emotions with others.”

“I have noticed maturity, greater understanding of not only self, but kind of how to behave around others.”

“When he has play dates with kids that are his age and then sometimes their younger siblings, the level of care and attention that he gives to younger kids. So we noticed that come up especially”.

“Attending [child care] has particularly helped with her patience and allowing her to be more thoughtful”

Finding 3: “Different is not so different”

Key Takeaways

Inclusion

Belonging

Diversity

Discussion

Inclusion goes beyond welcoming children with different needs — it’s about creating a space where everyone feels valued and respected. This means embracing diverse ideas, cultures, traditions, and even food choices. By celebrating what makes each child unique, we foster a sense of belonging and teach the importance of empathy, understanding, and acceptance. Inclusion is about ensuring every voice is heard, learning and playing together, and every child feels they truly belong. Like last year, inclusion is something happening...and not talked about. This is a good thing!

Interview Quotes

“The only way we can come to a better understanding of one another because we want to embrace differences and not to focus on them.”

“I certainly appreciate that she gets to have the opportunity to be with other kids and peers of several different ages and different abilities, and I think that that helps to make her into a well-rounded person.”

“She gets so much exposure to different activities, different ways of learning, different sensory play things, even social cues.”

Finding 4: “Feelings & Friendships”

Key Takeaways

Relationships

Strength

Belonging

Connections

Discussion

Children are building meaningful relationships with peers of all ages and abilities. They are learning how to share, take turns, and compromise during play, which helps them develop empathy and cooperation. These experiences also teach them to recognize and value their friends, fostering a sense of belonging and community. By interacting in inclusive ways, children strengthen social skills and learn the importance of respect and understanding in their friendships. We are finding that inclusion and diversity are no longer a focused area in teaching, but instead, naturally practiced in daily interactions. Families are noticing this too, with 77% reporting improvement in inclusion and diversity, reflecting how these values are embedded in our program.

Interview Quotes

“Ability to communicate his feelings, ability to socialize with others.”

“She has learned how to work and play kindly with her friends, showing care and understanding for others.”

“She’s going outside of her inner circle – learning how to socialize with other groups, not just the same group all time.”

Conclusion

Families describe meaningful growth in children’s communication, social-emotional development, independence, inclusion, and relationships. The findings demonstrate children are achieving the intended impacts of the child care programs:

- Caring and empathetic
- Curious and motivated learners
- Growing in independence and confidence
- Actively inclusive
- Eager explorers of ideas, relationships, and their surroundings.

The following summary demonstrates the links between the Impact Statements and findings through the Impact Evaluation process.

1. Children are caring and considerate

Across the findings, children are increasingly showing empathy, kindness, and emotional awareness.

- Families notice children communicating feelings more clearly, showing patience, caring for younger peers, and playing kindly with others.
- Relationship-building experiences, diverse peer interactions, and inclusive daily practice help children understand others’ perspectives and respond thoughtfully.

Connection

Findings 2 and 4 most strongly support this impact — children are practicing empathy, compassion, and care during social interactions and friendships.

2. Children become lifelong learners

Children are demonstrating curiosity, engagement, and a desire to understand the world around them.

- Families report children asking more questions, showing excitement about learning, and sharing new knowledge at home.
- Exposure to varied activities, sensory experiences, and diverse learning opportunities keeps children motivated and eager to explore.

Connection

Finding 1 shows communication growth rooted in curiosity, while Finding 3 highlights how exposure to diverse ideas and experiences motivates children to keep learning.

3. Children are independent and self-reliant

Children are becoming more confident in expressing themselves, navigating routines, solving problems, and exploring new challenges.

- Families see increased confidence, maturity, and ability to manage emotions and social situations.
- Children take initiative in friendships, conversations, and daily tasks, showing readiness to try new things on their own.

Connection

Finding 2 strongly reflects this impact, with evidence of confidence, independence, self-regulation, and resilience.

4. Children are actively inclusive within the community

Inclusion is a part of daily interactions.

- Children learn and play with peers of different ages, abilities, cultures, and learning styles.
- Families note that inclusion isn't treated as a "special topic" but a natural part of the environment.
- Children demonstrate acceptance, understanding, and appreciation of differences.

Connection

Findings 3 and 4 best demonstrate this impact—children are living inclusion through everyday relationships and shared experiences.

5. Children will be explorers

Children engage with their environment through hands-on experiences, curiosity-driven play, and diverse learning opportunities.

- Families see children exploring new activities, new ways of learning, sensory materials, and their environment with interest and excitement.
- Children feel more confident trying new things, asking questions, and following their curiosity.

Connection

Finding 1 shows curiosity in language and communication, while Finding 3 highlights exploration of diverse sensory, cultural, and learning experiences. Finding 2 reinforces exploration through confidence and independence.

Reflections on Adjustments from Previous Impact Evaluation

It's exciting to see – as similarly reported in 2024 – that children continue to grow, learn, and thrive in the various areas and stages of development while attending BACI's 5 child care centres.

Steps Forward

- Holding steady what works – continue with the play-based curriculum and developmental and age-focused strategies for children – **January 2027.**
- Refining evaluation quality – return to the interviews between the program supervisors and the families they know; find space with the families that allows for in-depth and focused conversations; also review and revise the interview protocols, especially the question regarding the ‘hope for the future’ as the data was not as strong or clear with this intended question – **January 2027.**
- Find ways to further engage and communication with families about the evaluation process and intended impacts – **January 2027.**
- Make adjustments based on the findings in service efficiencies and access as needed (see data below) – **January 2027.**

Service Efficiency

Service Efficiency – Enrolment 99% Target is 100%

Analysis

- Little Friends at George Derby Centre commenced operations on March 6th, initially experiencing lower enrolment due to several factors – i.e. families from Variety Cariboo securing alternative child care arrangements, uncertainty regarding the exact opening date leading to delayed registrations, and the mid-month launch. Nevertheless, enrolment increased steadily, reaching full capacity in May 2025.
- South Slope continues to function with a reduced capacity of 18, but is full.
- Little Eagles transitioned to a \$10aday ChildcareBC Centre as of April 1. The centre had full enrolment before it became a \$10aday centre and the demand only grew after April 1.
- To ensure financial sustainability and contract requirements, it is essential that the centres maintain full enrolment. The centres’ budgets are based on full capacity, so to ensure all program costs are covered (e.g. money, staff, equipment, etc.), the centres must be full.
- The considerable demand for child care services — particularly for \$10aday centres and outof-school care — most likely ensures full enrolment at BACI’s child care centres.

Service Access

Service Access – 2.7% Target is 8%

Although the number of families obtaining child care placements remain comparable to previous years, and has even slightly increased at Little Friends Centre because of the program change and number of families that left when the Variety Centre closed, the overall service access rate has declined. This decline is primarily attributable to a significant rise in waitlist numbers, with each centre now seeing more than twice as many families waiting for placement. Consequently, this increase in waitlisted families has reduced the proportion of families securing a child care spot.

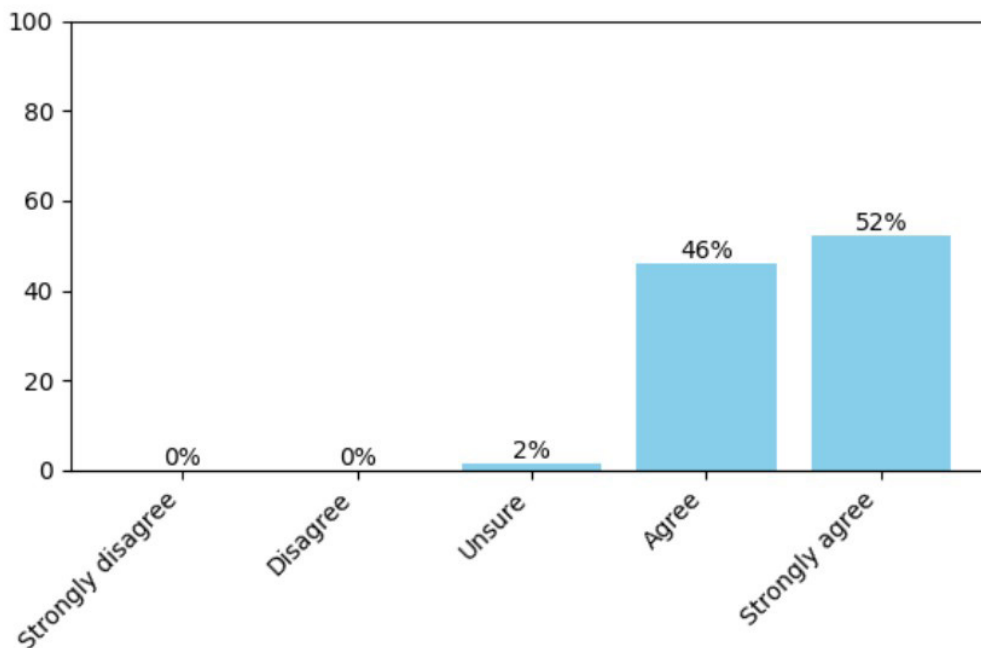
Effective April 1, BACI transitioned to managing its waitlists to the online platform Tuio, enabling families to

register themselves directly. In the past, families had to contact program supervisors, who would typically inform them of the low probability of obtaining a child care spot given high demand and BACI's enrolment priorities. As a result, many families opted not to join the waitlist.

The current system improves accessibility and convenience, but does not communicate the actual length of the waitlist to applicants. BACI may consider temporarily closing the waitlist on Tuio and then, and will reopen it again once waitlist numbers decrease. This may increase the likelihood of placement and ensure the service access rate reflects actual conditions more accurately.

Service Satisfaction

Satisfaction – 98% 2024 – 95%



Analysis

The families continue to be very satisfied with the service they receive at their child care centres. Although the comparison is only from the past year, the satisfaction rating has been consistently over 90% for many years.

Opportunities for Future Evaluation

Over the past two years, the data and learnings from the interviews have been very consistent, even repetitive. Although this is reassuring and affirming, it's important not to get stuck and safe in the same questions and review every year. BACI will continue to inquire about the current Intended Impacts for Children's Services in 2026. There's still work needed in this area– i.e. improving the interviews, refining our evaluation skills and capacity throughout the full evaluation process (developing protocols through to making the adjustments). However, BACI may explore using the Impact Evaluation process in other areas of child care, possibly including the work of educators, community partnerships, and other aligning strategic directions

Appendices

Qualitative Interview Protocols

Interview Questions – Children's

What has your child discovered about other people since being at Daycare? What have they learned about the feelings of others? → How has that made a difference in their sense of empathy toward others? *Know – Believe*

What have been the most significant lessons your child has learned about themselves since they started daycare? → How has this impacted what they think is possible for their future? *Know – Believe*

What has your child learned at daycare that has helped them be more independent at home? What do they still need to learn but haven't yet? → How has this changed their mindset about trying new things and taking risks? How has that affected the way they believe in themselves? *Know – Believe*

What has your child discovered about what they like to learn? What has your child learned about how to set goals for themselves? Where do they struggle to find themselves and their power (or plans?) for their future? → How has that learning changed their view of what they can do? *Know – Believe*

What has your child learned about social interactions since they started daycare? What do you see them doing differently in how they relate to others? What do they still struggle with? → How have you seen them grow and change as a result of what they have learned? *Do – Become*

What have you found to be the biggest challenge for your child at daycare? How have these challenges affected your child's well-being? What are some things that have been hard for your child at Daycare? How do you (and they) keep pushing through these challenges? *Do – Become*

What struggles does your child have about making friends and meeting new people? How has this changed since they started daycare? → How has this shown up for them outside of Daycare? *Do – Become*

What has your child learned in Daycare about things they like to do? What changes or curiosities have you noticed in your child? → How has this impacted their growth and development? *Do – Become*

Since being in daycare, what differences have you noticed in your child's feeling towards others? what does that look like, or how have you noticed that? → How has that made a difference in the sense of belonging they experience? How has that made a difference in their belief and confidence in themselves? *Feel – Love*

What seems to be the impact of daycare on the emotions of your child? → How has this made a difference in the ability of your child to be calm in the face of difficulties? How have you seen differences in their sense of wellbeing, either to the positive or negative? *Feel – Love*

What emotions does your child experience when learning new things? → How has that inspired them to keep learning and growing? *Feel – Love*

FINAL QUESTION: What is your biggest hope for your child? What is your biggest worry for your child?
- How do you navigate both?

Quantitative Questionnaire

Find a link to the Children's Services Parent Satisfaction Survey here: <https://bit.ly/4vQ7kBt>

CHILDREN'S RESPITE

Program Overview

The Children's Respite program at BACI believes that respite is a physical and emotional retreat, where relaxation and renewal can create strength and resilience. Every family's idea of respite is unique. The child/youth is referred by their Child and Youth Special Needs Social Worker to the program and we then work to find the best fit for the child and their family.

BACI also believes that real respite can only occur when every member of the family is comfortable and confident with the service. Families have told us that this occurs when the services are reliable, responsive and are provided by capable respite providers in safe and nurturing environments. It is with these important factors in mind that BACI has developed our Respite Services.

Intended Impacts

1. Families have an opportunity to rest and rejuvenate.
2. Respite is a family centered service and meets each family's unique needs.
3. People's supports are personalized and their needs are met.
4. People are safe and secure.
5. People are engaged and have opportunities to explore new experiences.

Demographics

Number of people served: 38

Ages of persons served:	Number of people served:
0-5 years	4
6-9 years	8
10-13 years	9
14-19 year	17

Gender Identity: Male 26; Female 12

Evaluation Methodology

The aim of our evaluation was to see what kind and quality of impact the Children's Respite program is having on the population we are serving. To understand this, we explored two broad evaluation questions:

- What kind and quality of impact are we having on our participants? (We asked this of both providers and family members)
- What aspects of our program are causing this impact?

Over the course of the project, we:

- a. Developed and refined our ideas of intended impact and indicators
- b. Designed and implemented a mixed methods outcome evaluation using both qualitative and quantitative means to collect and analyze data
- c. Identified themes and findings, and
- d. Considered the implications to those findings for program improvement and innovation.

This project began by identifying and clarifying the intended impact of respite. Once the ideas of impact had been developed, we used the Heart Triangle™ model to identify qualitative and quantitative indicators of impact on the mental, behavioral and emotional changes in our participants. We used these indicators to design a qualitative interview protocol and a quantitative questionnaire to evaluate progress toward achieving our intended impact.

Qualitative Data Collection and Analysis

For the qualitative portion of the evaluation, we designed in-depth interview protocols to gain data about the structural, qualitative changes resulting from our program. Our population size for this evaluation was 3 Family members. We used a purposeful stratified sampling technique to select a representative sample from each population. Our sample size was 3 family members, drawn from the following strata of our population.

People Supported:

- Children supported are aged from 4 to 19

Children have been part of the program for varying lengths of time, from 6 months to about 9 years. One-on-one interviews were held, lasting from between 45 minutes and one hour in length. Interview data was collected using handwritten notes.

We then analyzed the data inductively using a modified version of thematic analysis. Each interviewer analyzed the data from their interviews individually to identify initial themes. Together, we developed common themes from all the interviews and brought them forward as findings.

Quantitative Data Collection and Analysis

For the quantitative portion of the evaluation, we designed a questionnaire to collect data on our quantitative indicators of impact. We administered this instrument to 35 families and had a response from 8, a 23% response rate. The data was analyzed primarily using measures of central tendency. We identified key insights, patterns and gaps within the data and incorporated these discoveries into the related findings. The most significant insights from the quantitative data are described in the following narrative.

Limitations

Families are very busy and when invited for the interview, many felt that they did not have the time to participate. The Respite program gives families a very limited number of days of respite per month and families

did not feel that they had extra time available.

As the program has grown over the last year, so will the interviews for next year.

Findings

Finding 1: Trust is key

Key Take Aways

- Families move from hesitation to meaningful respite use when trust is intentionally built through paced introductions, parent-led training, consistent staffing and real-time communication during outings.

Discussion

Families consistently identified trust as both essential and the most challenging aspect of their experience — trust in caregivers, trust in the system, and trust in their ability to separate, even briefly, from their child. Developing this trust was foundational to meaningful community inclusion and much-needed caregiver relief. All families described being the sole caregivers for their child and emphasized that teaching someone else to provide care requires courage and a deep belief that another person will care for their child with the same commitment. As a result of building this trust, families shared that they were finally able to give attention to their other child or children — something that had previously been lacking — and observed improvements in feelings of inclusion and reductions in behaviours associated with feeling left out.

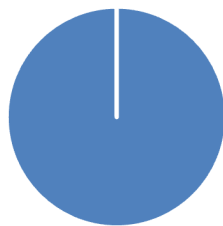
Interview Quotes

“Respite has given me a chance to have a real break. It took time to find the right caregiver but once we did I was able to trust his care was there and be away from him.”

“We never thought she would be able to go anywhere without one of us – now with the right supports she is thriving and enjoying time without her family. To trust someone else with her feeds and medications has been life changing.”

“We never thought she could go without us.”

The Respite Provider recruited by BACi is a good match for our family



■ I agree ■ It is ok ■ I disagree ■ I am unsure

Finding 2: There's a community

Key Take Aways

- Community inclusion and caregiver relief have been life altering
- Safety/protocols/needs being met

Discussion

Families have come to recognize that there is a broader community around them — caregivers who are capable of supporting their child, and families learning over time to trust others with their child's care. They are beginning to realize that there are truly remarkable people who care deeply about their child and are motivated to provide meaningful and enriching opportunities.

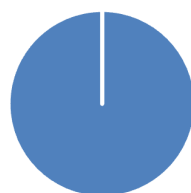
Caregivers support children to explore their communities and engage in new experiences each day, whether it's a visit to the library, time at the pool, or attending community events such as parades or hockey games.

One family shared that their child had a strong desire to play basketball with peers, and the caregiver located a drop-in team that welcomed him enthusiastically. Through this experience, the child began building relationships with peers and found a place where he truly felt a sense of belonging and inclusion.

Families are also learning that there is a community for them, which has brought significant relief from feelings of isolation. Two families shared that they had previously believed no one else could step in to meet their child's complex medical needs. Through this support, they were able to take a weekend away while knowing their child was safe, well cared for, and having a positive experience as well.

Being able to train caregivers and trust that all medical and safety needs are met has provided families with a deep sense of relief. Families also value the ability to move at their own pace, allowing time for trust to develop, for their child to feel safe and comfortable with the caregiver, and for relationships to grow in a way that feels right for their family.

The Respite Provider has a good understanding of my child's medical needs and supports them accordingly



■ I agree ■ It is ok ■ I disagree ■ I am unsure

Interview Quotes

“I believe his future will be a bit easier once he also has a break from his family. He has been learning how fun it is to join in community activities”

“A loves to people watch and they have been getting on the SkyTrain each week going out and adventuring. They headed downtown one Saturday and joined in community parade events, and she still draws pictures about that day months later.”

“Respite services allow parents to sleep and to fulfill basic needs like showering”

Finding 3: Family dynamics

Key Take Aways

- Respite impacts sibling relationships and caregiver wellbeing by creating protected time, reducing resentment, and enabling parents to “breathe.”
- A break, a rest, a chance to have their child cared for safely gives hope to families.
- Parents are exhausted with no more to give, their wellbeing and mental health are declining, and their Social Worker referred their child for Respite.

Discussion

Families were very clear that prior to their referral to the Respite program, they had reached a point of deep exhaustion and uncertainty about how much longer they could continue asking for help. Several families spoke about the challenges of finding a capable and confident caregiver, along with the ongoing worry that a caregiver might move on after they had invested time and energy into training them.

One family shared that they had never had anyone else perform their child’s medical tasks and expressed immense relief in realizing they were no longer the only ones able to provide this care. Once families found a caregiver they trusted, they began to recognize that their child’s complex needs could safely be met by others. Not only were medical needs being attended to, but children were also out in the community — trying new activities, learning, growing and having fun.

All families emphasized the importance of having the opportunity to give their undivided attention to other members of the family while their child was with a Respite caregiver. Siblings were described as struggling with feelings of being overlooked, less important, or jealous. Respite created space for parents to offer focused attention, care and connection to their other children.

One mother shared that, for the first time in years, her older daughter was able to sit and play dolls with her sibling after spending a weekend away with her parents and receiving their full, undivided attention. This moment highlighted the meaningful impact Respite has not only on caregivers, but on the wellbeing and relationships of the entire family.

Interview Quotes

“Our other daughter’s resentment for the attention A gets has eased and we are now showing up together for events. We always split off and she never got the both of us and blamed her sister.”

“Seeing the excitement he gets when a caregiver comes to the door and they go out is wonderful.”

“Getting real-time updates and a photo has been a blessing and eases my mind knowing everything is going well.”

“Having someone to help support our family is critical for our mental wellbeing, I wish that all families with children with needs would have that. We are so grateful.”

Conclusion

The evidence gathered through family interviews and observations strongly demonstrates that the Respite program is providing the intended results of not only offering essential relief to caregivers but also fostering meaningful family connections and personal growth for children. By providing a safe, nurturing environment and trusted care providers, the program enables families to restore balance, attend to all members, and embrace new possibilities for their children. Families’ increased confidence in others’ ability to meet complex needs, coupled with children’s opportunities to explore and connect beyond their immediate circles, highlights the far-reaching impact of Respite care. Moving forward, it is crucial to build upon these successes, ensuring continued access to compassionate, skilled caregivers and expanding community engagement. The resilience and well-being gained through Respite Services reinforces the importance of sustaining and growing this support for families facing extraordinary challenges.

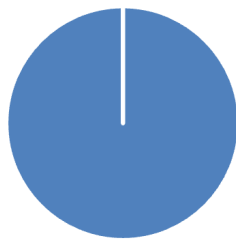
Insights Into Impact

Families have a break so are able to rest and rejuvenate.

Across the findings, families shared that they have learned to feel safe knowing their child is well cared for and have developed trust in their care providers. They described finding the courage and confidence to believe that others can care for their child with love, compassion, and attentiveness. Through this experience, both children and families are discovering their own resilience.

Children are learning that they can form secure relationships and engage in diverse experiences beyond their immediate family circle, while families are gaining reassurance and renewed capacity. The empathy, compassion, and dedication demonstrated by care providers were consistently described as exemplary.

Respite provides my family with the opportunity needed to rest and rejuvenate.



■ I agree ■ It is ok ■ I disagree ■ I am unsure

Reflections on Adjustments from Previous Impact Evaluation

Steps Forward

1. Maintain strong connections with families and remain responsive to their evolving needs. Regular check-ins and open communication will help tailor supports and reinforce trust between families and care providers.
2. Increase community engagement by partnering with local organizations, hosting events, and encouraging participation in diverse activities. This will broaden opportunities for children and families while fostering inclusion and support networks.
3. Expand recruitment efforts for caregivers, focusing on skilled, compassionate individuals who are equipped to meet complex needs. Providing ongoing training and support will ensure high-quality care and boost caregiver retention.
4. Monitor satisfaction and outcomes through regular evaluations and feedback, using this information to make continuous improvements and address any gaps in service.

Service Efficiency

Of the 32 new referrals 2 were deemed out of the scope of the program's capabilities. With full agreement and approval from MCFD the 2 youth were offered different resources through the Ministry.

Service Access

Service access – 93.75%
Target – 100%

All referrals were accepted excluding two. Although we hope for 100% of referrals to be able to access the Respite program, we cannot always fulfill this. Two were offered other options through MCFD had needs that exceeded the parameters of the respite program. We never want this to happen but did not have the resource to safely ensure the safety of the youth and potential caregivers. Two others moved to different community prior to program start and had their referral sent to their new community.

Service Satisfaction

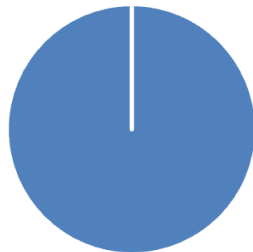
I am satisfied with the services my child receives from their Respite provider – 100%

Families continue to be very satisfied with the service they receive through the Children's Respite program. The families who completed the survey stated 100% satisfaction – in past years families had mentioned disappointment with the amount of days their child receives each year as well as the time it can take to find a qualified caregivers and screen them in.

"Thank you, BACI. I am very satisfied with the respite service for my child. I am so happy and content because we now have peace of mind, and I have time to relax. My child was able to engage in different activities, and I was truly amazed. This kind of provider really helps families with disabilities like ours. I am very thankful for everything you have done for us. You are the best provider ever."

"Thank you so much for all the support that you have given to our family! This respite support really means a lot to us. Thank you thank you!!!!"

I am satisfied with the services my child receives from their respite provider.



■ I agree ■ It is ok ■ I disagree ■ I am unsure

INFANT DEVELOPMENT PROGRAM

Program Overview

The Burnaby Infant Development Program (IDP) serves Burnaby families with a child or children with additional developmental needs, aged birth to three years old. Our program is a free, voluntary program funded by the Ministry of Children and Family Development (MCFD). We are primarily a home-based, in-person visiting program, where IDP Consultants visit infants and children with their primary caregivers at home. IDP Consultants are generalists. That is, they are experts in observing, evaluating and assessing infant and children's overall development including the areas of personal-social, cognitive, fine motor, gross motor and communication development. IDP provides information about children's developmental stages, screening and assessment of all domain areas of development, connection to community partners and community resources, and suggestions for the promotion of development within the infant and child's daily routines.

Intended Impacts

Just like other programs operating out of BACI, we are grateful to endeavor to improve the impact that we make on families, including parents, caregivers and their little ones. It has been our privilege to have the opportunity to explore our impact.

The program team developed the following Intended Impacts of the Infant Development Program:

- 1. Parents understand infant and child development, particularly their own child(ren)'s.**
As a result of IDP, parents learn more about developmental milestones, learn more about the developmental stage their child or children are in, and know more about their child's developmental strengths and stretches as an individual.
- 2. Parents engage in community, make new friendships, and gain meaningful support.**
IDP aims to ensure parents have multiple opportunities, and a variety of ways, to connect with other parents and children with additional needs. We intend that diversity and inclusion become part of the culture and language of IDP families. We also intend to bring awareness to parents of resources available to them and their children in the community. We want parents to be able to better advocate for their child's needs. Finally, we intend that parents will be able to expand their toolbox of resources and parenting ideas.
- 3. Parents advocate for services in a way that maximizes the child's opportunities for inclusion and meeting their full potential.**
The impact of IDP is signified as parents better understand and navigate the system (learning the strengths and limitations of the systems that support children). This means that the community is aware of the IDP program and its offerings. Finally, it means families are active in community advocacy and feedback (asking for more of what they need, naming gaps, and committed to the participation of their child in spite of the hurdles).
- 4. The family feels reassured, listened to, supported and empowered as they move through their early parenting journey.**
As a result of IDP, families and parents feel supported, listened to and reassured.

Demographics

Number of children served: 368

Ages of children served: Birth to 48 months

Gender Identity: 234 male, 126 female, 2 ungendered

Evaluation Methodology

The aim of our evaluation was to see what kind and quality of impact the Burnaby Infant Development Program (IDP) is having on the infants, children and their families in our program here in Burnaby. To understand this, we explored two broad evaluation questions:

1. What kind and quality of impact are we having for families?
2. What aspects of our program are causing this impact?

Over the course of the project, we:

- a. Developed and refined our ideas of intended impact and indicators.
- b. Designed and implemented a mixed methods outcome evaluation using both qualitative and quantitative means to collect and analyze data.
- c. Identified themes and findings.
- d. Considered the implications to those findings for program improvement and innovation.

This project began by identifying and clarifying the intended impact of the Infant Development Program (IDP). Once the ideas of impact had been developed, we used the Heart Triangle™ model to identify qualitative and quantitative indicators of impact on the mental, behavioral, and emotional changes in IDP parents. We used these indicators to design a qualitative interview protocol and a quantitative questionnaire to evaluate progress toward achieving our intended impact.

Qualitative Data Collection and Analysis

For the qualitative portion of the evaluation, we designed an in-depth interview protocol to gain data about the structural, qualitative changes resulting from our program. Each IDP Consultant invited an increasing number of families for whom they had a close rapport with to participate in the qualitative survey. Our population size for this evaluation was 21 families. We used a purposeful stratified sampling technique to select a representative sample from the population we serve. Our sample size was drawn from the following strata of our population:

- Parents of all ages.
- Parents of a variety of ethnicities.
- Most parents (90%) who speak English as an additional language.
- Parents of children of a variety of ages (children aged 12 months to 5 years old).

Our interview team consisted of six Infant Development Consultants. We convened one-on-one interviews lasting from between 45 minutes to one hour in length and collected interview data using voice recordings and transcriptions via Microsoft Teams.

We then analyzed the data inductively using a modified version of thematic analysis. Each interviewer analyzed the data from their interviews individually to identify initial themes. Together, we developed common themes from all the interviewees and brought them forward as findings.

Quantitative Data Collection and Analysis

For the quantitative portion of the evaluation, we designed a questionnaire to collect data on our quantitative indicators of impact. We administered this instrument to 192 people and had a response from 62, a 32% response rate. The data was analyzed primarily using measures of central tendency. We identified key insights, patterns and gaps within the data and incorporated these discoveries into the related findings. The most significant insights from the quantitative data are described in the following narrative.

Limitations

The qualitative data was collected in summertime, which is perhaps not the best time to get responses from busy families. An increasing number of families speak English as an additional language and may have barriers corresponding via written surveys.

In response to our difficulty again this year in planning for a successful and fruitful volume of qualitative interviews with families, the key limitations are: having no set time in the year to conduct the interviews and having it be a constant additional piece of work, not wanting to burden families who are already busy, and requiring interpretation for a great many families.

Findings

Finding 1: Confidence is Key

Key Take Aways:

Families are reporting greater **strength** and **persistence**. They are also reporting that they can be better **advocates**. All of this tied right back to an increase in **confidence** in their ability to parent their unique child.

Discussion:

Through the reassurance, warmth and care of the program, families go at their own pace to increase their confidence in being experts about their own children. The word we heard most when asking families about the changes they see in themselves as a result of IDP was confident. We are so pleased to hear this, because with this, along with a support network and the continued support from the program, families will be at their best to achieve all they need to for their little one. All parents can stand to improve upon their confidence in parenting and advocacy, IDP parents especially!

The data from our quantitative survey reflects a great deal of increased confidence in families this year. The survey question “I have confidence that I can parent my child” gave a response rate of 5 out of 5 from 71% of parents. 22.6% of parents rated themselves as a 4 out of 5. 4.8% reported a 3 out of 5 in confidence, and 1.6% reported a 2 out of 5. No respondents scored a 1 or 0.

Interview Quotes:

“Who could be a better advocate for him than me?” – A, I’s Dad

“It does give you more confidence just when you reflect on how far you’ve come, I guess. I thing you don’t really think much of it until you...reflect back”. – C, D’s Mom

Finding 2 Incremental Development

Key Take Aways:

This is similar to our 2024 finding called Step by Step (**Acceptance**). Families learn, through the help and guidance of IDP, that their child is unique, has **strengths**, and that development occurs incrementally. That is, children will not walk before they crawl, children will not talk before they understand a few words and gestures, etc.

Discussion:

We heard from families that they understand their child better. They understand them more broadly, but also they understand their development and developmental needs better. Families begin to accept their child for exactly who they are, where they are in the **present**. After time spent working with IDP, families report greater **patience** and **positivity**, curiosity, and increased acceptance of **living with the unknown**. Parents reported a grief process whereby they compared children of the same age to their child, or compared their child to their siblings. This period is usually followed by the realization that the support and steadfastness modelled by their Infant Development Consultant is all a part of themselves they need to foster to continue to be the best parent for their unique child.

When responding to the statement, “I can see the small developmental changes in my child and recognize their successes and milestones,” parents rated themselves overall very well:

- 56.5% of families responded with a 5 of 5
- 30.6% of families responded with a 4 of 5
- 9.7% of families responded with a 3 of 5
- 3.2% of families responded with a 2 of 5
- No families responded with a 1 or zero of 5

Interview Quotes:

“I feel like I’m more present” – C, S’s Mom

“It’s like when you’re able to listen...what’s surprising to me was that he’s more perceptive than you give credit.” – A, A’s Dad

“We don’t know what life can bring us in the future” – L, L’s Mom

“Knowing that him struggling a little bit actually will help him sometimes” – K, J’s Mom

Finding 3: Hard Work to Parent Well

Key Take Aways:

Many families reported the exhausting, all encompassing nature of parenting a child with additional needs.

Discussion:

This theme, again, is similar to the 2024 findings. Last year it was titled, “This is Hard.” We would anticipate that each year, we would expect to hear from families some level of **surprise, grief, and mental health impact** related to raising children with additional needs, and this is true in 2025. Many families report mental health conditions that were present before their child was born, including, but not limited to, ADHD, Depression and Anxiety. Some mothers also experience postpartum depression. An increasing number of families report trauma, PTSD and C-PTSD. Interestingly, an increasing number of families self identify as neurodiverse parents.

Not only do families experience mental health concerns, so too do they experience **isolation, exhaustion** (many reporting they needed more help than they expected they would), **frustration** and **disappointment** (manifesting in all sorts of ways – of the system, of the immense burden of paperwork and advocacy, of their support network, and beyond).

The quantitative survey results don't specifically pertain to this theme or finding, however it is reflected in the difficulty families find in making community friendships and connections.

The breadth of response to the statement in the survey “I have increased friendships and connections with other parents in my community, if that is something I needed and didn't have before,” reflects the disparity of growth in this area:

- 0 out of 5 – 3.2%
- 1 out of 5 – 3.2%
- 2 out of 5 – 9.7%
- 3 out of 5 – 27.4%
- 4 out of 5 – 24.2%
- 5 out of 5 – 32.3%

Interview Quotes:

“I have to say it is a lot of work, but in a different way than I expected. I think it's just like more mentally draining than I thought it would be.” -J, N's Mom

“I feel like I wasn't warned, like nobody told me this is what you face when you become a parent” – FA

“I'm always kind of waiting for the other shoe to drop” -P, M's Mom

Finding 4: Give us Joy

Key Take Aways:

What we heard more of, and we were so proud and delighted to hear, was that more families were able to articulate the **joy, celebration** and **pride** in their child.

Discussion:

A resounding increase in the **gratitude, freedom, peace, inspiration, hope** and other forms of celebration and joy reported this year was the theme we want to finish with!

Families are taking pride in the work they do to parent well, and in their beautiful, unique, powerful children. Families are expressing gratitude for the program and also it is reflected in the participation in IDP group offerings, friendships made outside of the program, and participation in community programs, parks etc., outside the family unit. **Socialization** and **multiculturalism** were mentioned by families this year, when they weren't before.

The quantitative data, as discussed in Finding 2: Incremental Development, reflects that parents are reporting that they are learning to see the successes of their children.

Interview Quotes:

“If every day I manage to have enough fun with him, like where he can actually...laugh, enjoy himself, be silly, it's a big win for me.” – V, A's Dad

“So when we see those milestones for the first time...I cannot express the joy we feel” – A, A's Dad

Conclusion

We are delighted to end on the note that more families are reaching feelings and evolution towards acceptance and finding value in living in the present moment; that they are finding joy in the time spent with their unique and wonderful children.

We also expected to see that families found the work of parenting their exceptional child challenging and that families learned more about the individual and incremental developmental milestones of their own children. Finally, what was missing in 2024 interviews came through loud and proud this year in that families are finding themselves to be more confident and better advocates, as a result of their time in the Infant Development Program.

Insights Into Impact

It is reassuring that the key themes exactly reflect our intended impacts. One final quote to leave you with: “All my worries are always addressed” – A, A’s Dad

Reflections on Adjustments from Previous Impact Evaluation

Opportunities were provided at Family Night to reflect on impact, as planned for in the previous Outcomes and Impact report from 2024. The reflection on this is that families deserve and appreciate a more private, formalized conversation where they can speak directly to their IDP Consultant about the impact of the service. While some families did provide meaningful insight about impact, they were taking time away from their child, family and their potential parent connections by speaking with the Manager.

Another intention for 2025 was to reach 30 interviews. While we did not achieve this, we did reach 21 – the highest sample of parent conversations for IDP thus far. Only one family was re-interviewed that had been interviewed in a previous year (another of the 2024 goals). This will continue to be difficult because of the quick turnover of families. We are delighted with the insights from initial conversations with new families.

Steps Forward

Moving forward, we have developed some strategies for the coming year to implement to try to elicit higher levels of community engagement, confidence and understanding of children’s development.

These include:

- Offering Autism-specific groups or drop-ins again in 2026, particularly in response to CYSN Funding changes announced in February 2026. Invite parents to be a support to their parent community and for families to ask direct questions about experiences from them.
- Centralizing resources. We will offer some “sanctioned” or recommended materials on a variety of topics in a structured way. This will be available in a variety of places – BACi website, IDP website, Instagram, via email, printed copies at groups and events.
- Updating the IDP website.
- Improving Burnaby IDP’s searchability in search engines.
- Greater community connection. Exploring further collaboration with the BACi Parent Support network. To kick this off, we’ll ensure the entire IDP team receives the newsletter.

Service Efficiency

TARGET: Meeting our contract obligations (70 direct hours with families and group time per FTE Consultant per month).

Not Achieved: 61.7 direct service hours per FTE (7 FTEs). An increase to the contract finally went through with the funder, but there was a vacancy for most of 2025.

Comparative data - 2024: Not achieved, average of 66.9 direct service hours per FTE (based on 6.0 FTEs).

Note: Funded for an additional FTE in early 2025.

Service Access

TARGET: Last revised 2020 – 6 weeks from registration to start of service.

Achieved. 2025 Average wait time – 22 days (3 weeks).

Comparative data - 2024: Average wait time four weeks, 2 days.

Service Satisfaction

July 2025 final survey question: “Overall, I am satisfied with the services and support I receive from the Infant Development Program”. Note: No comparative data this year as this is the first year that the satisfaction questions are embedded in this quantitative survey.

Together, those that rated their satisfaction a 4 or 5 out of 5 comprise 98.4% of respondents.

- 5 out of 5: 85.5%
- 4 out of 5: 12.9%
- 3 out of 5: 0%
- 2 out of 5: 1.6%
- 1 out of 5: 0%

Opportunities for Future Evaluation

- In 2026, as planned for in December 2025, there will be block style interviewing happening in or around May. This will be IDP’s Impact Interview month and most interviews will be completed then. Themes will be collected and discussed in June.
- We will continue to invite a breadth and diverse group of families to share the impact that IDP has had on their families.
- Quantitative interviews will go out a little bit earlier this year – June instead of July.

BURNABY INFANT DEVELOPMENT PROGRAM 2025 IMPACT EVALUATION INTERVIEW

Opening Questions

How has being a parent been different than you expected? The same?

What do you enjoy about your child? Please tell me about something cute your child does.

Know -> Believe

1. Know -> Believe

During your time with IDP what have you learned about your child's developmental stage? What still doesn't make sense about your child's developmental stage?

How has that information affected the way you think about your child?

2a. Know -> Believe

What did you discover about your child's development while working with IDP?

What do you value most about the time you spend with your child now more than you used to?

2b. Know-> Believe

What is still confusing or difficult to understand about your child's development?

How has your outlook on your and your child's future evolved?

3. Know -> Believe

What have you realized about your skills as a parent?

How has that made you think differently about how you are influencing your child's path? How have those skills influenced your way of parenting?

Do → Become

1. Do -> Become

Since starting with IDP, what new community activities have you tried? What has been easy about that? What has been difficult?

How has this helped you grow your friendships and connections with other families?

2. Do -> Become

During your time in IDP, what skills have you gained in speaking up for your child?

How has this made you a stronger advocate for your child?

3. Do -> Become

3. During your time in IDP, how have you dealt with difficult situations? What have you done, or has IDP done to help you become more resilient during tough times?

Feel -> Love

1. Feel -> Love

In your efforts to access services, what has given you the confidence to carry on?

What has been frustrating for you in accessing services?

What inspires you to keep going despite those frustrations?

2. Feel -> love

I've seen a lot of successes in your parenting of your child. Can you tell me in your own words when you have felt most successful as a parent during your time with IDP?

When have you felt least successful?

How do you carry this confidence into other choices you make with your child?

Closing questions

What are your hopes for the coming year?

Infant Development Program (IDP) Impact Survey July 2025

On a scale of 0-5, 0 being no improvement, and 5 being beyond expected improvement, please rate your experience as a parent because of your participation in the Infant Development Program.

0	1	2	3	4	5
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I can see the small developmental changes in my child and recognize their successes and milestones. (0-5)

I have confidence that I can parent my child. (0-5)

I can tell others about the milestones and achievements of my child. (0-5)

I am aware of the community activities that I can bring my child to if I wish. (0-5)

I feel it is important to include my child with their peers in community. (0-5)

I understand the expectations and limits of my child at their age and level of development. (0-5)

I can attend an IDP playgroup or event because it is inclusive. (0-5)

I can ask for what I need for my child in community spaces. (0-5)

I have increased friendships and connections with other parents in my community, if that is something I needed and didn't have before. (0-5)

I am accepted in my community and having more of my needs met as a parent by unpaid supportive adults. (0-5)

I have learned that IDP is part of many resources to support my child in the community and have begun to access others. (0-5)

I have learned to speak up for my child and my family. (0-5)

I know who to contact if I need more support for my child or myself. (0-5)

I understand that my child and family are unique and therefore I must make decisions and seek support that is unique for my child. (0-5)

My IDP Consultant is there to support my child and family and can be reached with questions and concerns. (0-5)

My IDP Consultant prioritizes my child and family's best interests. (0-5)

I can tell my IDP Consultant if my needs change, or if I would like them to change their approach. (0-5)

Overall, I am satisfied with the services and support I receive from the Infant Development Program. (0-5)

Responses Overview Active

Responses

62

Average Score

0

Average Time

03:55

1. On a scale of 0-5, 0 being no improvement, and 5 being beyond expected improvement, please rate your experience as a parent because of your participation in the Infant Development Program. (0 point)

● 0 ● 1 ● 2 ● 3 ● 4 ● 5

I can see the small developmental changes in my child and recognize their successes and milestones.

I have confidence that I can parent my child.

I can tell others about the milestones and achievements of my child.

I am aware of the community activities that I can bring my child to if I wish.

I feel it is important to include my child with their peers in community.

I understand the expectations and limits of my child at their age and level of development.

I can attend an IDP playgroup or event because it is inclusive.

I can ask for what I need for my child in community spaces.

I have increased friendships and connections with other parents in my community, if that is something I needed and didn't have...

I am accepted in my community and having more of my needs met as a parent by unpaid supportive adults.

I have learned that IDP is part of many resources to support my child in the community and have begun to access others.

I have learned to speak up for my child and my family.

I know who to contact if I need more support for my child or myself.

I understand that my child and family are unique and therefore I must make decisions and seek support that is unique for my child.

My IDP Consultant is there to support my child and family and can be reached with questions and concerns.

My IDP Consultant prioritizes my child and family's best interests.

I can tell my IDP Consultant if my needs change, or if I would like them to change their approach.

Overall, I am satisfied with the services and support I receive from the Infant Development Program.



BACi is an organization that must maintain due diligence as an employer and community agency. Therefore, it is important to evaluate and report on areas of the agency outside of our direct services that may directly or indirectly impact the overall service quality and capacity of the organization. Reports in this section include: Human Resources, Health & Safety, Complaints and Compliments.



HUMAN RESOURCES

Purpose

BACI truly values the work and contributions of all employees. They have an essential role in ensuring the children, adults, and families served by the organization receive high quality, safe and meaningful services and supports. The information shared below provides insight into staffing trends and turnover as well as measures regarding effectiveness in employee evaluation and capacity building. This helps inform ongoing strategies to strengthen employee engagement, build internal capacity, and support organizational growth aligned with BACI's mission and key strategic direction #5 – *Supporting and Caring for People Who Care for People*.

Impact Evaluation

In 2025, an impact evaluation process was completed by the Senior Manager of Strategic Initiatives & Impact, under the support and direction of Dr. Steve Patty. This process specifically reviewed the impact of Project Impact 2024 – a cross-agency initiative to train and support each department to complete a full impact/developmental evaluation cycle for their programs and with interested parties.

The intended impacts for this evaluation process were:

- **Leaders are intentional in their work.**
- **Leaders improve the skills of evaluative reflection.**
- **Leaders are committed to growth and learning for themselves and others.**
- **Leaders are inspired and feel confident, to enhance programs using the results of evaluation.**

A total of 20 interviews were completed (by a team of 5) with a cross-section of employees who participated in Project Impact – working in various roles and departments and with consideration of years/experience with developmental evaluation. The interviews were analyzed as per the impact evaluation methodology. Dr. Patty then provided a written report of the key findings and areas for consideration and steps forward. The following is a summary of the main points from his report.

The Impact of BACI Evaluation

The evaluation process identified several dominant and pervasive positive impacts across the interviews.

1. Increased Confidence

Staff reported feeling more confident in their roles and decision-making. The evaluation process helped people understand their roles more fully and gave them permission to ask difficult questions. Many described feeling more courageous in having real conversations with families.

2. Greater Connections with Persons Served and Families

A strong theme emerged around deeper connections with people served and their families. Staff reported a deeper sense of connection through the interview process, with more genuine interactions.

3. Going Deeper: Meaningful vs. Mundane

Staff consistently reported that the evaluation enabled more meaningful conversations, moving beyond surface-level interactions. The different questions asked in the evaluation process yielded different answers than typical conversations.

4. Better Presence and Reflection

The evaluation process helped staff become more reflective and less reactive. Staff described learning the importance of pausing, reflecting, and not rushing to fix everything immediately.

6. Alignment with the BACI Way

Staff expressed that the evaluation process fits with how BACI does things, describing it as part of the social fabric of the organization. People felt pride that this approach reflects BACI values of being curious with people, taking time, and trying something different rather than using typical satisfaction surveys.

7. Team Connection and Learning

The evaluation fostered stronger team connections. Staff valued getting together with others from different departments and gaining different perspectives.

8. Personal and Professional Growth

Staff reported growing more with each evaluation cycle, developing skills and feeling themselves becoming more capable.

Challenges and Concerns

The review also identified significant challenges that need to be addressed.

1. Interviewing Persons Served

A pragmatic challenge remains around interviewing people who do not communicate verbally as their primary means of expression. Staff struggle with communication devices and methods that produce one word at a time, making it difficult to build on responses. While staff expressed a strong desire to go deeper with these individuals, the practical limitations of conducting full interviews remain a barrier.

2. Time Pragmatics

Time emerged as a major theme across interviews. Staff feel tension between the demands of evaluation and other responsibilities, with day-to-day tasks taking them away from impact-focused work.

3. Disconnection Between Evaluation and Daily Work

A significant concern is that some staff see evaluation as separate from their daily responsibilities. Staff described not understanding how their administrative tasks connect to intended impacts. Some felt they lack influence over whether their work actually affects the intended impacts, creating frustration about the disconnect between what they are told to do and what they are trying to achieve through evaluation.

4. Feelings of Failure and Self-Blame

Some staff internalized findings negatively, feeling hurt and experiencing a sense of failure when they could not get inside the triangle or achieve what they perceived as the big things. There was implication that initiatives they tried were not enough. This created a negative cycle around balance and doing more.

5. Incomplete Understanding of the Full Cycle of Evaluation Learning

A major gap is that staff are solely focused on interviews without understanding or participating in the full evaluation cycle. Most spoke about interviews as the primary component, with little evidence of engagement with analysis, sense-making, or strategy development.

6. Process Not Yet Embedded Throughout Organization

The evaluation has not fully seeped into all teams.

7. Mistrust of Data and Defensive Postures

An unsettling finding was that some staff do not fully trust the information gathered in interviews, believing that people are just pleasing them by saying good things. Some interviewees took a defensive posture, wanting the interviewer to know how good their work is rather than engaging in personal reflection.

8. Family Suspicion and Annual Interview Format

Some staff reported that families, particularly newer ones, show suspicion about the annual interview format. Families wonder why they are being asked these deeper questions once a year, creating awkwardness that staff feel they need more confidence to navigate.

Areas Requiring Attention

- Some leaders feel discouraged and disempowered by the process.
- Certain departments feel separate from the rest of the agency.
- Misunderstanding of the evaluation model persists.
- The organization is approximately halfway to where it needs to be in “getting it”.
- The fullness of the process is not resonating; sense-making and moving forward are weak.
- Fidelity to process varies significantly.
- Different levels of participation affect how staff view the process.
- Pacing and timeline confusion creates stress.
- Structure and clarity is needed.
- People need to be trained multiple times and have that training reinforced to develop competency.

The Way Forward

The team identified key questions and potential strategies for improvement.

Key Questions to Address

1. Who should be involved, at what scale and scope, and in which steps?
2. How do we be more inclusive in our methodology, particularly with people served?
3. How do we use people who are inspired by this to inspire others?
4. What should the structure look like, including pacing, leadership, and support?
5. How do we teach, improve, and reinforce skills?
6. How do we build a culture of closing the loop?
7. How do we sustain and maintain succession and leadership for evaluation?

Proposed Strategies

Structured Evaluation Period:

Implement a highly structured evaluation month with clear phases. This would include a launch day with all-staff training, defined weekly check-ins, sense-making sessions at the end, and clear roles for everyone. The month would be the same every year, so staff know what to expect.

Hybrid Leadership Model:

Create an evaluation team with representatives from each department who provide leadership and guidance. This smaller group would meet regularly to prepare, then facilitate the process within their departments.

Community of Practice:

Develop ongoing communities of practice that extend beyond the evaluation month. These would provide continuous learning, reflection, and coaching throughout the year. The community of practice would be where new staff are onboarded and where the connection between identity, impact, and practice is maintained.

Rebranding and Clear Language:

Move away from evaluation language and toward concrete action-oriented terms. Use launch day, learning day, and close-the-loop day to name phases. This helps employees understand what is expected at each stage.

Embedded Training:

Incorporate impact evaluation content into onboarding and annual training for all staff. Develop modules on Open Future Learning that staff can reference. Repeat the training annually because people lose the why over time.

Clear Timelines and Accountability:

Ensure timelines and deadlines are clear, held to, and followed.

Inclusive Evaluation Methods:

Continue developing methodology for including people with different communication styles.

Integration with Quality Assurance:

Merge evaluation thinking into quality assurance initiatives and planning meetings. Consider revising existing tools to include impact statements.

Human Resources – Information & Analysis

The following shows a quarterly turnover rate by department followed by breakdown of employees by classification for each department.

Quarterly Turnover by Department

Quarter	IDP	Children’s	BEST	Outreach	Home and Community	Community Inclusion
Q1	14%	2 %	13%	7%	3%	7%
Q2	0%	11%	0%	6%	17%	6%
Q3	0%	3%	0%	0%	2%	3%
Q4	0%	10%	0%	0%	7%	10%

Agency Overview

Quarter	EE at Start	EES Terminated	EE Hired	Active EE at End	Average # of EE	Turnover
Q1	474	16	22	560	516	3%
Q2	560	65	37	525	542.5	12%
Q3	525	19	34	501	513	4%
Q4	513	38	28	513	513	7%

Quarter	FT	PT	Casual	Leaves
Q1	196	120	244	96
Q2	175	114	236	80
Q3	178	121	202	95
Q4	180	125	205	94

IDP Program

Quarter	EE at Start	EES Terminated	EE Hired	EE at End	Turnover
Q1	7	1	0	6	14%
Q2	6	0	0	6	0%
Q3	6	0	1	7	0%
Q4	7	0	0	7	0%

Quarter	FT	PT	Casual	Leaves
Q1	6	0	1	0
Q2	5	0	1	0
Q3	6	0	1	0
Q4	7	0	1	0

Children’s Services

Quarter	EE at Start	EE’s Terminated	EE Hired	EE at End	Average	Turnover
Q1	50	1	0	54*	52	2%
Q2	54	6	4	58*	56	11%
Q3	58	2	3	58	58	3%
Q4	58	6	1	56	57	10%

Quarter	FT	PT	Casual	Leaves
Q1	26	8	20	14
Q2	25	12	21	12
Q3	27	11	20	17
Q4	28	10	18	13

BEST

Quarter	EE at Start	EE’s Terminated	EE Hired	EE at End	Avg EE	Turnover
Q1	8	1	1 (int)	8	8	13%
Q2	8	0	0	8	8	0%
Q3	8	0	0	9	8.5	0%
Q4	8.5	0	0	9	8.75	0%

Quarter	FT	PT	Casual	Leaves
Q1	8	0	0	3
Q2	8	0	0	3
Q3	9	0	0	4
Q4	8	1	0	4

Outreach

Quarter	EE at Start	EE's Terminated	EE Hired	EE at End	Average	Turnover
Q1	13	1	1	16	14.5	7%
Q2	16	1	1	17	16.5	6%
Q3	17	0	2	19	18	0%
Q4	18	0	1	21	19.5	0%

Quarter	FT	PT	Casual	Leaves
Q1	14	1	1	2
Q2	15	1	1	2
Q3				
Q4	16	1	4	3

Home and Community

Quarter	EE at Start	EE's Terminated	EE Hired	EE at End	Average	Turnover
Q1	245	8	9	263	254	3%
Q2	263	47	20	273	268	17%
Q3	268	6	12	243	256	2%
Q4	256	18	14	249	252.5	7%

Quarter	FT	PT	Casual	Leaves
Q1	75	52	136	34
Q2	75	53	145	33
Q3	78	57	108	40
Q4	78	55	116	39

Community Inclusion

Quarter	EE at Start	EE's Terminated	EE Hired	EE at End	Average	Turnover
Q1	130	9	9	142	136	7%
Q2	142	9	4	139	140.5	6%
Q3	141	5	13	140	141	3%
Q4	141	14	12	151	146	10%

Quarter	FT	PT	Casual	Leaves
Q1	37	47	58	22
Q2	39	46	54	19
Q3	33	49	58	20
Q4	35	55	59	26

Data Analysis

Please note there are higher turnover rates during the year when casual employees are terminated due to no earnings or hours worked within a 6 consecutive month period. This impacts the turnover rate % when there is a one-time reduction of technically employed employees (but who have not worked). Overall, the turnover rate is lower than previous years – which has been as high as 20-25% at various times over the past 5 years. Also of note is the noticeable turnover rate decrease in Children’s Services – in previous years at approximately 30%. This is likely attributed to the Early Childhood Educators now being paid the wages and benefits of the sector Collective Agreement working in the \$10aday centres (provincially funded).

BACI continues to support a significant number of employees on leaves throughout the year. Please note the total share is the number of employees who were on a leave at any given time throughout the year. The leaves include but are not limited to: occupational-related injury leaves, medical leaves, leaves of absence, and maternity/paternity leaves. BACI works closely with our Early Intervention Program to ensure employees who are on occupational or non-occupational leaves receive early intervention supports and planning with their needs and return to work plans. Research confirms the earlier and more consistently an employee is connected to and with during a medical leave, the improved chances of a successful and timely return to work.

Over the past year, BACI has developed procedures and practices to comply with the new Worksafe BC legislation related to modified duties – again another strategy to support employees with remaining connected to the workplace while they recover and return to full duties. This will continue to be a priority – ensuring employees are connected to, well-informed, and supported accordingly during medical leaves (occupational and non-occupational). In addition, there will be a continued focus on proactive strategies like wellness and safe work practices training to ensure employees are healthy in the workplace.

HEALTH AND SAFETY

Objectives

- Decrease time loss incidents through strong stay at work/return to work programs and incident prevention measures.
- Invest in NCI training, annual renewals, mandatory new hire training as a preventative measure.
- Promote a culture of health and safety in the workplace.
- Have a robust Occupational Safety and Health (OSH) Committee that meets regularly.

Comparative Data

Type of WorkSafeBC Claim Filed	2023	# That Involved Lost Time From Work	2024	#That involved Lost Time From Work	2025	Time Loss
Acts of Violence	11	9	12	2	28	13
Overexert/Twist/Lift	8	7	4	4	11	4
Slip/Trip/Fall	5	4	6	2	6	4
Struck By/Against	4	3	2	3	3	1
Other	2	1	3	0	1	0
Motor Vehicle Accident	2	2	3	1	3	1
Psychological Trauma	0	0	0	0	0	0
Total	32	26	30	12	49	23
# Of days of Time Lost From Work (this year?)		752		502		576

Things to note

- The OSH Committee continued to undergo changes through 2025.
- The number of incidents reported and lost time incidents have increased in 2025.
- The committee gained 3 new employee members in July, however all have since resigned due to scheduling difficulties.
- There is currently an imbalance of employer reps (5) to employee reps (3).
- In November, the Committee began inviting two OSH Program representatives to each meeting for greater participation in OSH. The initiative so far has faced scheduling challenges.

- To facilitate greater participation from the OSH Program representatives, an OSH Program Representative Channel was created on MS Teams, and greater responsibilities in monthly OSH topics were outlined (such as vehicle maintenance and emergency preparedness).
- Updates to First Aid kits and drills took place over the course of 2024/2025, and are now in compliance with new WCB regulations.
- The OSH Committee tried out bi-weekly meetings in the early part of 2025 and later settled on monthly meetings mid-way through the year.
- A goal for 2025 was to review the Risk of Violence (ROV) Assessment Survey to collect more robust data and to increase response rates. The survey response was better than in prior years, though some programs still only had 1-2 respondents. Results were circulated by programs at ROV meetings.

Recommendations for 2026

- Continue annual training for all Supervisors, Coordinators, Managers and OSH Committee members to ensure understanding of their roles and responsibilities in creating and maintaining a safe workplace.
- Continue to provide training to program OSH Reps to enable them to help facilitate health and safety conversations in their team meetings.
- Continue to ensure all teams are reviewing incidents in meeting minutes, including the causes of incidents, the follow-up that was implemented and the effectiveness of the follow-up. Help staff to understand the link and importance of this reflection.
- Continue to encourage Supervisors, Coordinators and Managers to utilize team meetings for mini training sessions, focusing on tips and techniques to prevent injuries. Topics could be modified to address specific team needs and could incorporate things such as: a short video on stretching techniques or proper body mechanics, exercises on recognizing hazards in the community, violence prevention, trivia questions on safe driving techniques, or information on mental health.
- Continue with the annual review of employee accommodations, to ensure that accommodations are still appropriate for both the employee and the people they work with/program in which they work.
- Revise the Emergency Preparedness Manual template to ensure consistency across all programs.

Other information

Review of WorkSafe claims monthly: 100%

Completion of Incident Investigation Reports: 100%

OSH meetings held: 16 in 2025

Annual site visits and reviews: 100%

COMPLIMENTS

Highlights

There were a total of 16 compliments formally made by interested parties regarding BACI’s quality of services and our outstanding employees in 2025 (down from 49 in 2024). Of course, the number of compliments shared informally throughout the year is significantly higher.

The following interested parties formally shared compliments:

- Individual Receiving Services: 0
- Family Member: 13
- Community Member: 3

	Regarding Employees	Regarding Service Quality	Regarding Health & Safety	Regarding Rights	Regarding Property and/or Equipment
Administration		1			
Adult Services – Staff-supported Homes		1			
Adult Services – Community Inclusion (Day)					
Children’s Services – Child Care & Out of School Care		8			
Infant Development Program					
Life Sharing		4			
Outreach		2			
BEST					
Stride Housing					
Banff Housing					
Total		16			

Analysis of Compliments and Actions to be Taken

Action to understand the decrease in compliments received:

We wonder if the significant decrease in formal compliments received in 2025 can be attributed to our reporting process having changed for that year. We will revisit the process to determine whether how we’re now capturing this information is truly reflective of the compliments shared.

COMPLAINTS AND CONCERNS

Highlights

There were a total of 6 formal complaints made in 2025 (down from 19 in 2024), which were reviewed regularly by the Management Team. A member of the Management Team followed up on all complaints (100%) and in all cases, actions were taken or changes made to improve future outcomes.

The following interested parties brought complaints forward:

- Individual Receiving Services: 0
- Community Member: 0
- Family: 6

	Regarding Staff – Interpersonal Relations	Regarding Rights	Regarding Health & Safety	Regarding Service Quality - Internal	Regarding Service Quality - External	Regarding Property and/or Equipment
Administration						
Adult Services – Staff-supported Homes					1	
Adult Services – Community Inclusion (Day)						
Children’s Services – Child Care & Out of School Care					4	
Infant Development Program						
Life Sharing					1	
Outreach						
BEST						
Stride Housing						
Banff Housing						
Total					6	

We continue to welcome complaints and concerns as a source of learning and continual improvement for the organization (as per our policy).

Analysis of Complaints and Actions to be Taken

This year, there were no complaints by staff around interpersonal relations.

There were no complaints around Rights (the same as in 2024).

There were also no complaints around Health and Safety (the same as in 2024). Overall, the feedback from families, people served and employees was one of appreciation for BACi's health and safety protocols.

- **Actions to address improvements needed:** We continue to assess how we can improve the health and safety of all interested parties.

Complaints around Property and Equipment have lowered to 0 as well (from 2 in 2024).

- **Actions to address improvements needed:** We do our best to address all concerns and work hard to proactively maintain our property and equipment to minimize any concerns or complaints that may arise.

Complaints regarding Quality of Service have decreased, with 6 in 2025 (and 17 in 2024). The majority of complaints surrounded changes to services or the way they were delivered.

- **Actions to address improvements needed:** Changes to programs, processes, activities or staff, may take time for people to adjust to or understand. We work hard to support people and families to navigate the changes they need to make during transitional times.
- **Action to understand the decrease in complaints received:** We will revisit our reporting process to determine whether how we're now documenting complaints is truly reflective of what is happening.



Recommendations made throughout this report are reviewed by the Senior Management Team and developed into specific actionable initiatives that form the basis of BACI's 2026 Business Improvement Plan (BIP). Any goals not achieved in the 2025 BIP are also added to the 2026 BIP.

Other key reporting mechanisms – the 2025 Risk Management Plan, the 2025 Service Evaluation, the progress from the 2025 BIP and their corresponding recommendations – are also included in the 2026 BIP.

For those interested in learning more about BACI, our Risk Management Plan, Business Improvement Plan and Strategic Plan can be found here: <https://gobaci.com/strategy/>

Other reports referred to in this Outcomes Report can be viewed by contacting tanya.sather@gobaci.com or calling 604.299.7851.



“What we know matters,
but who we are
matters more.”

- BRENÉ BROWN