

**Elizabeth House  
Annual Report  
2020-2021**



*It's going to be okay*

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# Section 1: Message from the President and the Executive Director

## Message from the Executive Director

It is with great pride that we present to you our Annual Report of Activities for the fiscal period April 1, 2020 to March 31, 2021.

During this entire period, we, along with the rest of the world, faced the most challenging COVID-19 Pandemic. We have not hugged, nor had two cheek kisses, visits with our loved ones, trips abroad, and birthday celebrations for over a year. Some of us have faced illnesses, deaths, worries, loneliness, frustration, and fear.

In the wake of several deaths of black and Indigenous people at the hands of police, the year also brought renewed attention to systemic racism. These events continue to highlight the need to continue to have broader and more comprehensive conversations around the country but also in our workplaces. It continues to be important to call out racism when we see it, listen, educate ourselves and stand up for others. It is a continued area of work for us.

Despite these great obstacles, the Elizabeth House organization continued to carry out its great legacy built over 52 years of serving young families and children. The excellent staff team of Elizabeth House never skipped a beat, and always kept the care of their clients in the forefront, continuing to provide either direct clinical services, payment of our bills, a building clean and safe for us all to enter, our pay checks on time and most importantly, ongoing support for one other.

Our theme this year is “resilience” and outlined in this report, you will see the remarkable ways that the committed staff team adapted to the challenges that COVID-19 presented.

Our clients have shown us great strength in a year where their visits with family were limited and face to face contacts could not be relied upon. Contacts occurred through Zoom meetings, phone calls and walks in the community. Despite this, we witnessed young mothers moving on from us into independence, completing a school year, and having regular contacts with their children who had previously been in foster care. A number of incredible fathers stayed connected with their children and visited consistently at our PATH building.



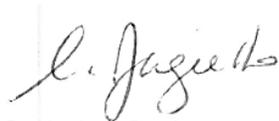
As well, we appreciate the great work of our Board of Directors who provided us with great strength and wise direction. Our Foundation Board continued to work diligently towards fundraising in a year where monies were spread very thin. Our donors remained very loyal to us – and we were able to accomplish great projects such as the renovations of all our windows and doors at our secondary building, Path, where our families are offered a more independent living type of situation.

Our administrative team continues to take shape, and we have continued to modernize and streamline our practices. Part of this modernization has included the ability to pay our suppliers electronically. Another important accomplishment this year has been to bring our payroll system in house. Having this important function controlled internally has allowed us, in a few short weeks begin to move towards direct deposit, and electronic time sheets.

Despite the challenges of gathering for meetings in this Pandemic year, we continued to consult on our Strategic Plan. A revised Mission Vision and Values statement was approved by the board and an initial set of objectives has been established to guide us forward.

We took stock this year of our Workplace Climate and are excited to move forward with a Collaborative Practice Committee which will look at improving ways to meet the needs of our staff.

As we come out of the confines of our isolations, I look forward to continue to explore new ideas and imagining what the next chapter in the Elizabeth House's future might look like!



Christine Jagiello,  
Executive Director, Elizabeth House

## Message from the President

What an incredibly challenging year for Elizabeth House! As I write this short note, I am realizing that tonight represents the first evening in 2021 that we have not been subjected to a curfew! The COVID-19 experience at Elizabeth House has been incredibly demanding on the Elizabeth House community, its residents, staff, board members and other volunteers. The challenges and stresses inherent in our personal lives; staying safe, protecting our loved ones, distancing from family and friends, enduring losses, adapting to constantly changing measures, have taken its toll....and that does not take into account life in our work world, keeping Elizabeth House residents safe, managing COVID-19 restrictions with residents and their young children, some having to live under quarantine while living in the House, implementing evolving disinfecting procedures, dealing with public health authorities... have all contributed to the challenge of grappling with the multitude of new stressors that abound. The House was directly impacted by COVID-19 effectively closing our programs and services for brief periods while those who contracted the virus recovered.

Despite these challenges, families and children continued to be serviced and for this I extend my personal indebtedness to our clinical and administrative staff. It is their dedication to our mission that assured that everyone remained as safe as possible, that our services were maintained, that new admissions were possible and that our residents and at home clients were served with our usual high degree of professionalism and care. The priorities of our administrative objectives, long awaited changes to our accounting and pay system were implemented which simplified accounting systems and will allow for direct deposits to take place. Desperately needed renovations to our buildings continued and significant resources were invested to support our staff team.

None of this work would have been possible without the dedication, devotion and hard work of our exceptional staff. My personal thank you to Christine, our executive director, as well as her management team, Erika, Hans and Tina for piloting our organization through an exceptionally challenging year. Your leadership skills are exceptional. Bravo!

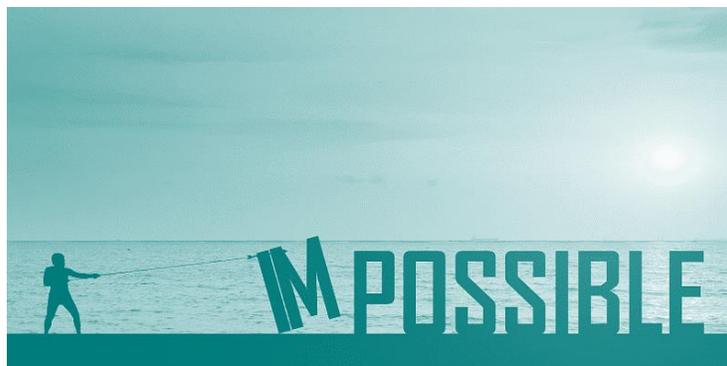
The Elizabeth House board transitioned from monthly, in person, board meetings to monthly virtual meetings without a hitch. I must say that I am grateful and impressed by the contributions made by all of our board members this past year. Board meeting and committee attendance has been at an all-time high and the virtual format did not impede the quality of our work together. In fact, COVID-19 we may continue to hold virtual meetings, particularly for committee work. I thank the Executive Committee for their guidance and support.

I extend a personal thank you to our donors and community partners who provide essential support and services to the organization and to the mothers', fathers' and children that we service. I would like to point out the great work being done by Tara and the Elizabeth House Foundation Board. I anticipate great results as the restraints of the pandemic ease and fund raising activity can resume in earnest.

To the board, staff, volunteers and partners, you all deserve a huge hug (post COVID-19 of course) for continuing to keep our organization thriving and well respected as a stalwart and long standing Anglophone institution within the health and social service network of Quebec.



Howard Nadler  
President, Board of Directors



## Section 2: Declaration Regarding the Reliability of Data in this Annual Report

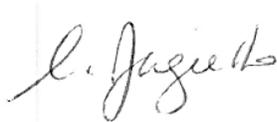
As Executive Director of Elizabeth House, I have the responsibility to ensure the reliability of the information contained in the Annual Report of Activities as well as the integrity of the related controls.

An audit of the coherence and plausibility of the information presented in this report was conducted by the independent firm Richter. A report to this effect was produced and is available in section 9 of the present document.

The results and data in this report of activities for the fiscal year 2020-2021 of Elizabeth House:

- accurately describe the mission, the mandate, the responsibilities, the activities and the strategic orientations of the organization;
- accurately describe the objectives, the indicators, the targets and the results obtained;
- present correct and reliable financial and statistical data.

I declare that the data contained in this Annual Report of Activities, as well as the related controls, are reliable and accurately reflect the situation as of March 31, 2021.



Christine Jagiello,  
Executive Director, Elizabeth House

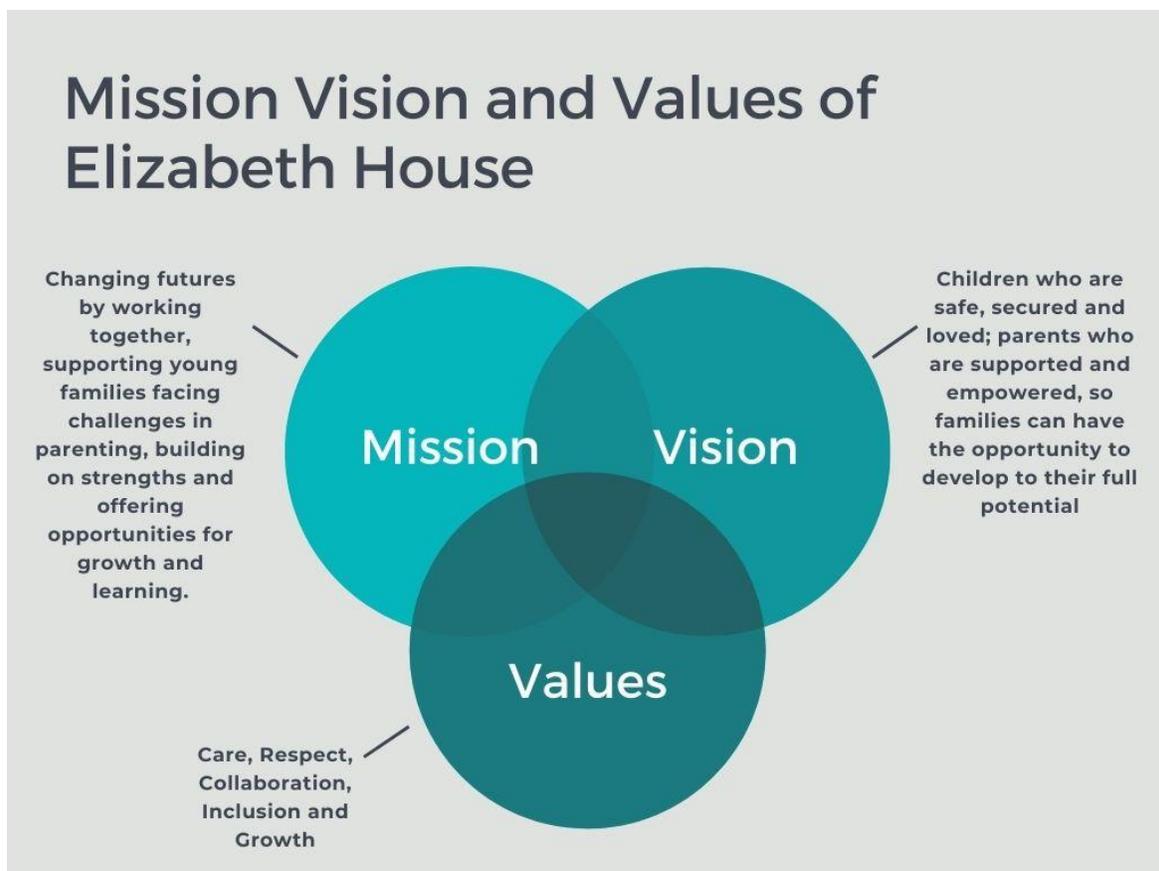
# Section 3: Presentation of Elizabeth House and Highlights of the Year

## 3.1 About Elizabeth House

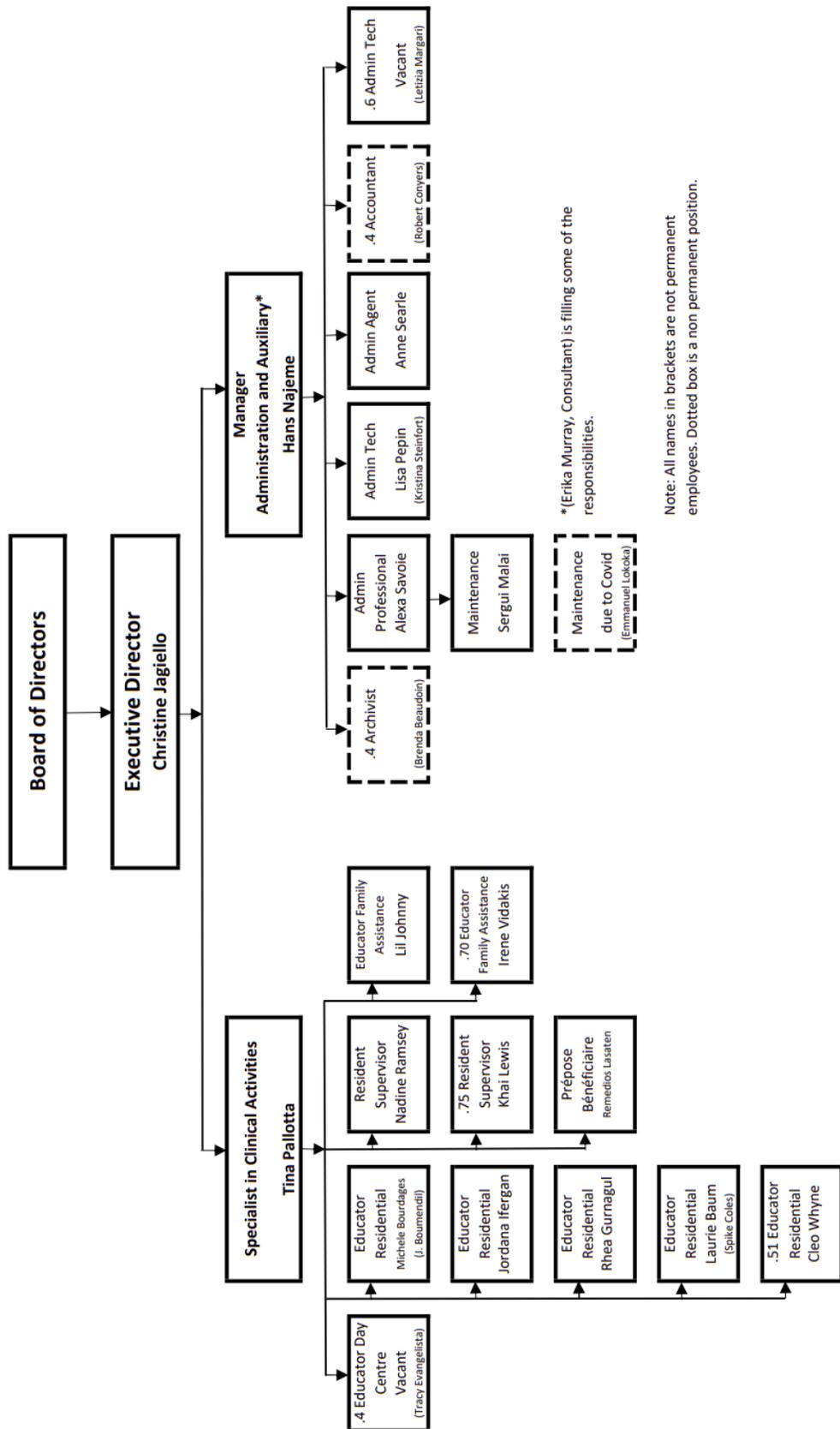
Elizabeth House is a rehabilitation centre that offers a continuum of intervention and support services to families with children aged 0-5 years. Elizabeth House works primarily with young mothers and mothers-to-be who are experiencing serious difficulties adjusting to pregnancy or their role as parents. The approach to treatment is educational and therapeutic, focusing on the needs, and building upon the strengths of the individual.

Services are provided to mothers and families through residential and external programs. Services are also provided to fathers through the external programs. Interventions focus mainly on the acquisition of parenting skills and life skills. Elizabeth House is equally concerned with optimizing children's development and with facilitating the development of a long term or permanent plan for each child.

Services are designed to serve the English-speaking community of Québec and are generally offered in the greater Montréal area. Elizabeth House is funded through the Ministry of Health and Social Services, but relies on private donations to support programs and activities.



# Organizational Structure



\*(Erika Murray, Consultant) is filling some of the responsibilities.

Note: All names in brackets are not permanent employees. Dotted box is a non permanent position.

## 3.2 Board of Directors

### Executive

- **President: Howard Nadler**  
Retired manager in health and social service.
- **Vice-President: Leigh Johnston**  
Retired assistant executive director of Batshaw Youth and Family Centres, with experience working and living in Nunavik.
- **Secretary: Sandra Sinclair**  
Translator, retired grants administrator, veteran of several non-profit Boards and committees.
- **Treasurer: Claudia Khawam**
- CPA, CMA Controller at Advantech Wireless Technologies (on leave).  
Replaced by **Geneviève Morin**, Interim Treasurer. Senior Manager Forensic Accounting and Financial Advisory Services, BDO Canada.
- **Member ex officio: Christine Jagiello**  
Executive Director, B.Ed., B.S.W., M.S.W.

### Regular Members

- **Cerise Morris**  
Social Worker, teacher of Social Service and psychotherapist in private practice.
- **Cristina Birks**  
Lawyer / Counsel at Borden Ladner Gervais LLP.
- **Jane Bracewell**  
Retired. Formally Director of Staffing and Recruitment (Administration and Support Staff) at McGill University.
- **Allison Kurz**  
Teacher & M.A. candidate (Educational Leadership); MotherWit certified doula.
- **Donna Varrica**  
Semi-retired communications specialist in institutional/educational communications and in the corporate sectors.
- **Staff Representative: Alexa Savoie**  
Specialist in Administrative Processes.

## Committees and Advisory Bodies

- Executive Committee;
- Finance and Audit Committee;
- Integrated Risk Management and Service Quality Committee;
- Service Quality and Vigilance Committee;
- Local Service Quality and Complaints Commissioner;
- Strategic Planning Committee;
- Building Committee;
- Users Committee (not presently operating due to COVID-19);
- Joint Standing Committee (English Montréal School Board and Elizabeth House Partnership).

## Code of Ethics

The code of ethics can be found at the end of this report. There were no violations of the Code of Ethics in 2020-21.

## Elizabeth House Foundation

- **President: Tara Sandler**  
Director of Strategic Education & Engagement, Canadian Council for the Advancement of Education
- **Treasurer: Geneviève Morin**  
Senior Manager Forensic Accounting and Financial Advisory Services, BDO Canada
- **Secretary: Christine Jagiello**  
Elizabeth House Executive Director
- **Clôtilde Fascione**  
Innovation Advisor, Health Canada
- **Sylvie Bergeron**  
Director of Brand Strategy - Addenda Capital
- **Christina Vongas**  
Retail Executive. Partner, ReTell Consulting
- **Ange Ndahayo**  
Administrative Agent, Jewish General Hospital
- **Christina Little**  
Team Leader & Senior Caseworker, Chez Doris Women Shelter Foundation
- **Kaitlin Common**  
Manager of In-flight Services Cabin Crew, Air Canada

# Our staff

Letizia, Anne, Tina, Hans, Irene, Kristina, Christine, Julianna and Sergiu



Robert, Lil, Rhea and Kristina



## 3.3 Achievements of the year

### Strategic Plan 2021-2022

The previous strategic plan of 2014-2018 was approved by the board of directors on September 29, 2014. Upon departure of the previous Executive Director in May 2019, it had not been revised. In November, 2019, a Strategic Planning Committee was formed. Work began with the full staff team in December 2019. Following the announcement of the Pandemic in March 2020, work was slowed and all meetings needed to occur via Zoom.

In February, 2021, the board approved changes to the Mission, Vision and Values Statement.

The following is a presentation of our focused areas of our Strategic Plan:

Despite its small size, Elizabeth House is a unique and effective organization that provides ongoing effects to the community. It provides a lasting legacy, helping the next generation. Our focus areas for the next two years include:

1. Being a sustainable organization- building upon our over 50-year history and ensuring that the organization thrives for generation to come.
  - Ensure the maintenance and upkeep of our buildings and ensure that they provide comfortable living and working environments. re-evaluate the use of the Path building;
  - Reassess our admission criteria with a view to expand our services (parent support groups, adult education, support regarding mental health and intellectual disability etc.);
  - Create alliances with the organizations supporting the English community;
  - Nurture and extend the culture of philanthropy through our Foundation.
2. Attracting, developing and retaining outstanding staff who model and inspire lifelong learning and growth.
  - Foster a culture in which staff are intrinsically motivated to improve;
  - Provide professional learning opportunities;
  - Support staff wellbeing;
  - Provide staff with timely performance evaluations and future focused career goals;
  - Provide a more thorough and supportive orientation to new staff.
3. Foster relationships within our community to extend our supports to our families.
4. Ensure Elizabeth House services to Anglophone families in Quebec is synonymous with excellence in our work with young families and pregnant women.
  - Provide an individualized approach acting on the specific needs of each client to help them reach their potential;
  - Improve parental capacity for all family members;
  - Gather and use data to track client progress and improve clinical practice.
5. Modernize our Administrative Services including Human Resources, Finance and Auxiliary Services in order to improve efficiency and excellence in the work produced.

# The COVID Experience

## Residential Program

*Contributed by Jordana Ifergan and Spike Coles, Educators*

COVID-19 impacted the lives of our clients in various different ways. Elizabeth House put strict measures in place in order to keep our clients safe and healthy. With the lockdowns put in place by our government, clients were no longer permitted any overnights out in the community. This proved to be very difficult for our mothers and their children. Visits with immediate family members were scheduled at our PATH apartments down the street in order to maintain some kind of normalcy.

When daycares shut down, our moms were faced with the ultimate challenge of parenting 24 hours around the clock. Staff worked with each mom to build an individualized schedule which incorporated a mix of structured activities, screen time, snacks, physical outdoor activities, and free play. Staff also provided respite to our clients to allow them time to shop for essential items, meet with their case coordinator or just to have some free time to themselves.

### In Numbers...

#### 12 mothers

- 6 adult mothers (including 3 over 30 or over), 6 minors (youngest was 14 at admission);
- 75% were first time moms, while the remainder were parenting a child other than their first;
- 3 indigenous moms;
- 50% of mothers were under Youth Protection;
- 2 mothers were still with us as of March 31<sup>st</sup>, 2021.

#### 11 children

- 5 children were under 1-year old. The others were 1-6 years old;
- 91% of children were under Youth Protection;
- 3 children were indigenous.

The average length of stay was of 111.26 days (3,7 months).

Elizabeth House kept a close eye on the regulations put in place as we shifted back and forth between being in red and orange zones. As the city began re-opening, activities in the community such as walks with family/friends were encouraged.

Meetings with professionals occurred either over zoom or at PATH as no one other than staff or clients were allowed entry into the Elizabeth House. Some counselling sessions with external professionals had to be put on hold for a time at the height of the pandemic.

Newly admitted clients were required to complete a 14-day quarantine. A quarantine zone was set-up, and staff did their best to ensure that the clients were comfortable and not too bored. Clients in isolation had a bedroom to sleep, a separate room to eat, and their own washroom. They were given a laptop/tablet with access to Netflix and

YouTube and a comfort kit with activities such as puzzles, adult coloring pages, a deck of cards, and puzzle books to keep their mind going.

Although faced with challenging times, Elizabeth House staff worked hard to create a balance where rules were respected and followed while considering each client's individual needs. Fun activities such as Friday movie nights and takeout dinners were also incorporated into routines to alleviate some of the weight of isolation.

## **Family Assistance**

*Contributed by Lil Johnny, Educator*

Every aspect of the functioning of the Family Assistance program has changed this year. COVID-19 changed the way we offer services and it has affected our clients in many ways. We have not been able to do any home visits and accompaniments. These services are crucial because most of the work we do is hands on. There were a lot of telephone, text message conversations, picking up and dropping off documents. We made the best of the situation by always being available to clients when they needed help.

COVID-19 brought its challenges and it highlighted a lot of issues our young families are facing. Mental health issues certainly were amplified this year: COVID-19 restrictions created stressors and anxieties and mental health resources were not easily accessible. It has been difficult accessing services that can offer support because the way in which we access services has changed. The Family Assistance worker along with the clients have spent countless time online registering for walk in clinics but the spots are limited and the clients were never able to secure an appointment to see a doctor. To fill in the gap, O3 has been able to connect with a drama therapist that is willing to charge the clients a low rate for therapy sessions. Since most of the Family Assistance clients live at O3, they were encouraged to access therapy until they can see a doctor. The Family Assistance cell phone was a tool that was used a lot this year, it is usually used for scheduling or cancelling appointments but the clients were always encouraged to call or send a text message if they needed to talk.

There were times when daycares were closed and our Families were forced to care for their children all day. Most of the Family Assistance moms are single mothers so they didn't have the help of a partner. Cabin fever was slowly settling in and moms

### **In Numbers...**

#### **9 mothers**

- All adults ranging from 19 to 31 years old;
- 5 files remain open as of March 31<sup>st</sup>, 2021;
- Of the 4 closed files, 50% received services for 6 months or less, and the other 50% received them for a more than a year.

#### **11 children**

- 5 children were under 1, others were 2-6 years old;
- 5 (from 4 families) were under Youth Protection.

Clients received support with budgeting, parenting, accessing mental health services and adapting / coping with the pandemic.

expressed feelings of being exasperated and not knowing what to do with their child during the day. The Family Assistance worker looked at their daily routine and most of the time their children were in front of a screen during the day. With the help of the moms, we were able to develop a daily routine that included outdoor play. The routine was visual and moms were asked to get their children involved and excited about following it. With the help of the Early Childhood Educator, we developed a “play time” baskets. This basket was to be used during structured play time that is included in their routine because it included educational toys to help with developmental milestones.

The worker at O3 played an integral role with Family Assistance this year. We worked closely together to support the clients with their IAP goals despite COVID-19. The big communal space at O3 helped with having meetings at a safe distance. We have been able to complete budgets and have face to face discussions. Having these types of meetings makes a big difference with clients. Family Assistance is looking at the possibility of cooking with clients in the space because menu and meal planning are things the clients are struggling with.

Moving forward, we hope that some of the COVID-19 restrictions will soon be lifted. In-home services are very important because most of our clients can see and understand the interventions better.

## **Day Center / Education Program**

*Contributed by Tracy Evangelista, Educator*

In March 2020, the day center was forced to close, as the government closed all schools due to COVID-19. Schools did not physically re-open until the fall of 2020. Although some schools were forced to use distance education, Elizabeth high School was fortunate enough to hold in-person classes all year. Distance education was still practiced on several occasions, so that everyone would be ready in the case where school closures were once again imposed.

School restarted in August 2020 with many changes. The use of masks and physical distancing was required. Student seating was strategically planned. The kitchen was no longer accessible to students; all food would be handled by staff. The students understood and accepted the changes gracefully.

### **In Numbers...**

10 students registered for the school year:

- 50% registered in the youth sector program, 50% in the DEAL program (distance adult education);
- 7 were returning clients. 3 were new to Elizabeth High School;
- 7 remain registered as of March 31<sup>st</sup>, 2021 (including one who is on maternity leave;
- 1 student was also a residential client and 1 was became a Family Assistance client;
- 1 indigenous student.

Attendance was a challenge. Clients were afraid to take public transit and were required to stay home with their children if either developed symptoms. Online learning was used as often as possible to accommodate the students in continuing their education. It was a year of adaptation and changes.

With cases now going down, we hope for a return to somewhat-normal come fall. The students have proven themselves to be resilient and strong. Most students will not be returning, as they will be moving on, so we look forward to welcoming a new group for the 2021-2022 school year.

## **Nursery**

*Contributed by Irene Vidakis, Educator*

During the pandemic, from February 2021 to June 2021, our Education Program reopened an on-site Nursery to accommodate the needs of the students.

One mother benefited from this service in 2020-2021, allowing her to concentrate on her school work, with her baby close-by, cared for by Elizabeth House staff.



*Providing respite*

### **In Numbers...**

8 children:

- All children under Youth Protection;
- 1 had a mother in the day center (school) and 7 were clients of the Residential Program;
- 6 were 18 months or younger, the others were 2 & 5 years old;
- 1 child was indigenous.

In parallel, the Nursery continued to operate from the residence, welcoming 7 children for short respite periods.

In both locations, our dedicated staff provided a warm, and nurturing environment for the babies, with strict COVID-19 measures in place.

## Fathers

*Contributed by Rhea Gürnagül, Educator*

Due to COVID-19 restrictions, the family room in our residence was temporarily closed. Since the room is used by fathers to visit their newborns and children, Elizabeth House worked diligently to transform both the upstairs and downstairs of PATH into two separate areas to accommodate fathers who wanted to visit their newborns and children during the pandemic.

Our early childcare expert evaluated both spaces and worked together with the maintenance team to create a safe and secure environment where both father and child can bond and thrive. After each visit, which were booked at least 48 hours ahead of time, our maintenance team would come in to disinfect the space and set up for the next visit. COVID-19 screenings were conducted with the fathers at the door to ensure protocols were being followed and food was provided by our residence down the street.

PATH will continue to be used for family visits during the pandemic. We are very happy and fortunate to be maximizing the use of both addresses to foster and empower fatherhood in our community. We will re-open our family room in our main residence building for future visits once conditions improve.

This year, 7 of the 11 children in our residence had their father declared on their birth certificate. Of those, 6 had some degree of contact with him, while 5 were unfortunately estranged. One father was the primary caregiver for his child. In Family Assistance 4 out of 11 children had regular visits or supervised contacts with their father. The fathers of the remaining 7 were not involved in their lives.

## Summer Program 2020

*Contributed by Irene Vidakis, Educator*

Elizabeth House was happy to be able to offer our Residential clients a 6-week summer program, despite the pandemic. Three Residential clients and their babies participated in our program this year which included various outings within the community.

Educators offered clients diverse activities that were fun, creative, promoted self-care and were economically friendly. Some activities enjoyed by our moms included a picnic at the park, bowling, movie, spa day, a painting workshop, and a Mom & Baby photo shoot.

The Summer program was an overall success and a great opportunity for our clients to learn about simple, and inexpensive activities they can do with their children during the summer months, that foster bonding, and wonderful memories for mother & child.



*Painting by one of our clients*

# Music Therapy

*Contributed by Rachel Norris, MTA, MT-BC*

Elizabeth House received music therapy services during the 2020-2021 year. Within the ethical guidelines of the Canadian Association of Music Therapists (CAMT), music therapy is defined as: the purposeful use of structured music experiences in both individual, dyad, and group settings to provide opportunities for emotional expression and to promote positive interpersonal and social interactions, feelings of safety, and being together.

Music therapy services at Elizabeth House are characterized as client-centered therapy, where client's own agency and autonomy dictate the direction of the therapeutic process. In group and individual sessions with adult clients, the therapeutic philosophy is rooted in a humanistic client-centered approach which emphasizes empowerment and participation at the level each individual feels comfortable. Dyadic sessions with mother-child pairs are informed by current research on attachment, affect attunement, and co-regulation between mothers and their infants. In these sessions, live music activities are used to promote bonding and interactions between mother-child pairs. In individual sessions with young children the approach involves trauma-informed practice as well as play therapy techniques within the music therapy modality to facilitate emotional expression and processing within a safe space.

After the unexpected termination of music therapy services in March 2021 due to the COVID-19 pandemic, all music therapy services throughout the 2020-2021 year were delivered online through zoom. Online music therapy sessions delivered at Elizabeth House between March 2020 and March 2021 focused on adult clients in group and individual format.

Interventions and techniques used in sessions involved a mix of pre-recorded preferred music selected by clients, instrument playing and learning, song-writing, music relaxation, and live improvised music using voices or instruments. Reflecting on clients preferred and meaningful music was a key technique used in group sessions with adult clients to facilitate emotional expression and insight into shared experiences with other clients.

<b>Client / Therapy Type</b>	<b>Total Hours</b>
Individual Music Therapy with Mothers (1 mother, external client)	5 hours
Group Music Therapy with Mothers (1-3 mothers per session)	10 hours
Total Hours (Direct Client Contact)	15 hours

Although the delivery of music therapy services was impacted by the COVID-19 pandemic, the transition to online music therapy has been a valuable learning experience. This online transition process has supported the continued development and exploration of optimal conditions to support Elizabeth House clients through online music therapy.

## Watch & Match

*by Lotus Flower*

When it comes to seeing  
Watch where you are going  
Don't step on people's toes  
give them some space  
& they will do the same  
for you.

When it comes to seeing  
watch their actions  
rather than their words  
It will speak a lot about  
their true colors  
and if they can be trusted.

When it comes to seeing  
Match your actions with your words.

*Poem by one of our clients (as part of a writing workshop)*

## Human Resources

### **Staffing and Orientation**

Over the last year, a New Manager of Administration is in place. One of our Administrative Technician left on retirement. We are looking at reorganizing the Administration to be more efficient.

An Orientation Committee was set up to look into clinical training and update contents. The training process has been modified and we do have a designated trainer for new hires.

### **Performance appraisals**

The Performance Evaluation is felt to be a very important tool. Not only does it help to promote communication, it provides useful feedback about job performance, facilitates better working relationships, provides a historical record of performance and contributes to professional development.

Management continues to track deadlines for yearly evaluations and continues to complete them in a timely manner.

## Finances

Processes in the Finance department are continually being streamlined. There has been a transition to direct payments of suppliers and letters have been sent out to all suppliers to encourage them to give us the authorization as well as their banking account information in order to pay invoices directly into their accounts.

Training has been ongoing with the new Administrative staff.

We have cleaned our Chart of Accounts and also in the process of optimizing the use of the Accounting software.

## Technology

We continue to work towards better Wi-Fi access for clients of the Residential Program. This year, we installed a second modem to cover more areas of the building. The connection is still not spotty, so we are evaluating our options to solve the issue.

Computers are being updated as the need arises. All computers are up to date.

Our third-party service provider is doing a great job managing our server and checking our hardware for any changes.

## Building

The duplexes that Elizabeth House occupies were built in the 1920s and are in need of renovations. Last year, our Building Committee reviewed the state of both buildings and established a list of priorities for their upkeep:

- Renovation of our transitional apartments (owned by our Foundation): living areas and programming spaces, windows and doors, balconies, kitchen;
- Repairs to the brick and parging;
- Skylights and cornice repairs;
- Conversion of heating system from oil to gas or electricity;
- Refinishing of the floors;
- Engineer evaluation of the main building.

The brick was repaired at our main building in August 2020 and we have upgraded our window treatment in all common areas and offices in first months of 2021.

At our PATH building, the windows and door were changed just before the winter and we have selected a contractor to renovate the balconies over the summer of 2021. We are still accepting quotes for the rest of the work.

## Archiving

*Contributed by Brenda Beaudoin, Archivist*

The focus this past year has been on producing and further refining the Archival & Historical Documentation Policy and Procedure Manual in preparation for its' approval by the Elizabeth House Board.

We are equally happy to announce that the McCord Museum will be digitizing the Sheltering Home of Montreal Registrars (1897-1966), prior to officially preserving and conserving them (at the museum).

The creation of the Elizabeth House Foundation - Donor List Database (2007-2014) was also completed. The database will be used for statistical purposes and as a reference guide for future fundraising campaigns organized by Elizabeth House. It will be maintained and updated on an annual basis.

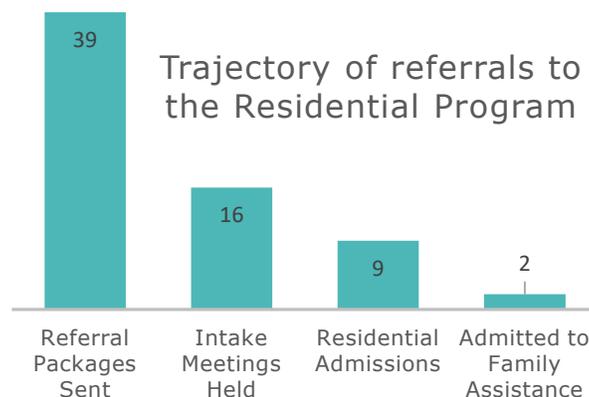
Long term goals: Developing a research project concentrating on the trends of residential, external and educational programs at Elizabeth House since 1968. McGill University will be contacted to further inquire as to how we can achieve this objective. Processing the existing and incoming documents will otherwise continue with consideration to analyze the diskettes and hard drives.

# Section 4: Partnerships, Collaborations and Community Links

Elizabeth House values collaboration and continues to work in partnership with other organizations in the Health and Social Services network and the Montréal community to ensure a range of complementary services for our clients, to promote clear and ongoing communication among treating professionals and to ease the transfer of clients between organizations.

## Clients were referred by

- CIUSSS Ouest-de-l'Île-de-Montréal
  - Batshaw Youth and Family Centres
  - Douglas Mental Health University Institute
- CIUSSS Centre-Sud-de-l'Île-de-Montréal
  - Centre Jeunesse de Montréal
  - CLSC des Faubourgs
  - CLSC St-Henri
  - CLSC Verdun
- CIUSSS Nord-de-l'Île-de-Montréal
  - CLSC Bordeaux-Cartierville
  - CLSC St-Laurent
- Nunavik Regional Board of Health and Social Services
  - Inuulitsivik Health Centre
  - Inukjuak Rehabilitation Center for girls
- Entre Mamans et Papas
- Maison Bleue
  - St-Michel
  - Côte des Neiges
- McGill University Health Center – Adolescent Medicine Clinic
- Le Chaînon
- CHUM
- Kahnawake Shakotiiia'takehnhas Community Services
- Canada Correctional Services
- Montreal Diet Dispensary
- CISSS de la Montérégie-Est
  - Centre Jeunesse de la Montérégie
- CISSS de Laval



## Support for our Staff, Clients and Organization

Collaboration with our community partners was substantially limited by the pandemic. However, we remain in touch with the following organizations and hope to continue to work together as things return to normal in the coming year:

- CIUSSS Ouest-de-l'Île-de-Montréal
  - Batshaw Youth and Family Centres - CARE project team
  - Douglas Mental Health University Institute
- CIUSSS Centre-Ouest-de-l'Île-de-Montréal
  - Jewish General Hospital
  - CLSC Benny-Farm
  - CLSC Parc-Extension
  - Miriam Home
- McGill University Hospital Center
  - Montréal Children's Hospital Adolescent Medicine Clinic
- Tables de concertation and partners
  - Table 0-5 ans Cavendish
  - SIPPE
  - Regroupement pour la Valorisation de la Paternité
  - English Montréal School Board
- Suicide Resources:
  - Service de police de la Ville de Montréal - Poste de Quartier 11
  - Suicide Action Montreal
  - TRACOM
- Addiction resources
  - Centre de Réadaptation en Dépendance Foster (CISSS Montérégie-Ouest)
- Food resources:
  - Montreal Diet Dispensary
  - NDG Food Depot
- Housing:
  - Maisons Transitionnelles O3-On Our Own
- Mosaik Family Resource Centre
- Mini-Biblio
- Unitarian Church of Montréal
- Volunteer Bureau of Montreal
- Generations Foundation

# Section 5: Risk Management and Quality Improvement

## Accreditation

Elizabeth House underwent its fourth accreditation in September 2017 and achieved a 91% score. The accreditors evaluated the organization’s practices and processes in the areas of Rehabilitation, Governance, Leadership in a Community Based Organization and Infection Prevention and Control. They made several recommendations to help us improve our operations. Here is some of the work we did this year:

<b>Recommendation</b>	<b>What was put in place</b>
Ensure that leadership is well versed in the area of change management and that staff are supported through this process.	A Workplace Climate Diagnosis was completed. Action Plan being put in place to improve staff, management relationship and communication.
Include clients and staff in the initial design and in development of quality initiatives.	Staff and clients well integrated into all discussions regarding quality initiatives. Resident meetings, staff meetings, consultation processes all used.
Ensure that clients and staff receive feedback on the quarterly reports in team meetings and resident meetings.	Unfortunately, with the COVID-19 pandemic, many in person meetings were on hold. Sharing of information continued with staff via Zoom and emails. Clients were given information via Residents meetings. Group work was also put on hold.
Continue to find ways to develop true partnerships with clients to focus on program development and decision input.	Resident meetings also used as an avenue for clients to give feedback regarding new guidelines or programming, as well as to identify issues requiring follow-up.
Confirm and re-organize program objectives and establish meaningful indicators of success.	The Evaluation Phases document which outlines the guidelines for client progression at Elizabeth House. The tool is currently being used with residential clients in discussion with them and to review their progress at team meetings. Chart for Evaluation Process which highlights benchmarks for clients as well as guidelines / feedback / tools to use for case coordinators. Quality Improvement Board used to measure successes on important initiatives.
Determine human resources services needed and hire, if necessary.	Administrative team taking shape. Administrative/Human Resources manager in place. Administrative Professional and

	Technicians and Agent in place. Roles continue to be defined.
Integrate recognition activities into the yearly schedule.	Long service recognition integrated into end of year meetings. Unable to organize celebratory gatherings due to COVID-19.
Finalize the implementation of the new Logibec system and report generator.	Completed.
Continue to assess the use of available space, including 2042/2044 Marlowe.	Windows and door renovations completed. Balcony renovation in progress. Continued assessment to be completed.
Evaluate the need for an intercom system.	Completed.
Create a quarterly newsletter for donors and partners, keeping them informed on new projects.	First newsletter sent in December 2019. Foundation Board telephone called donors.

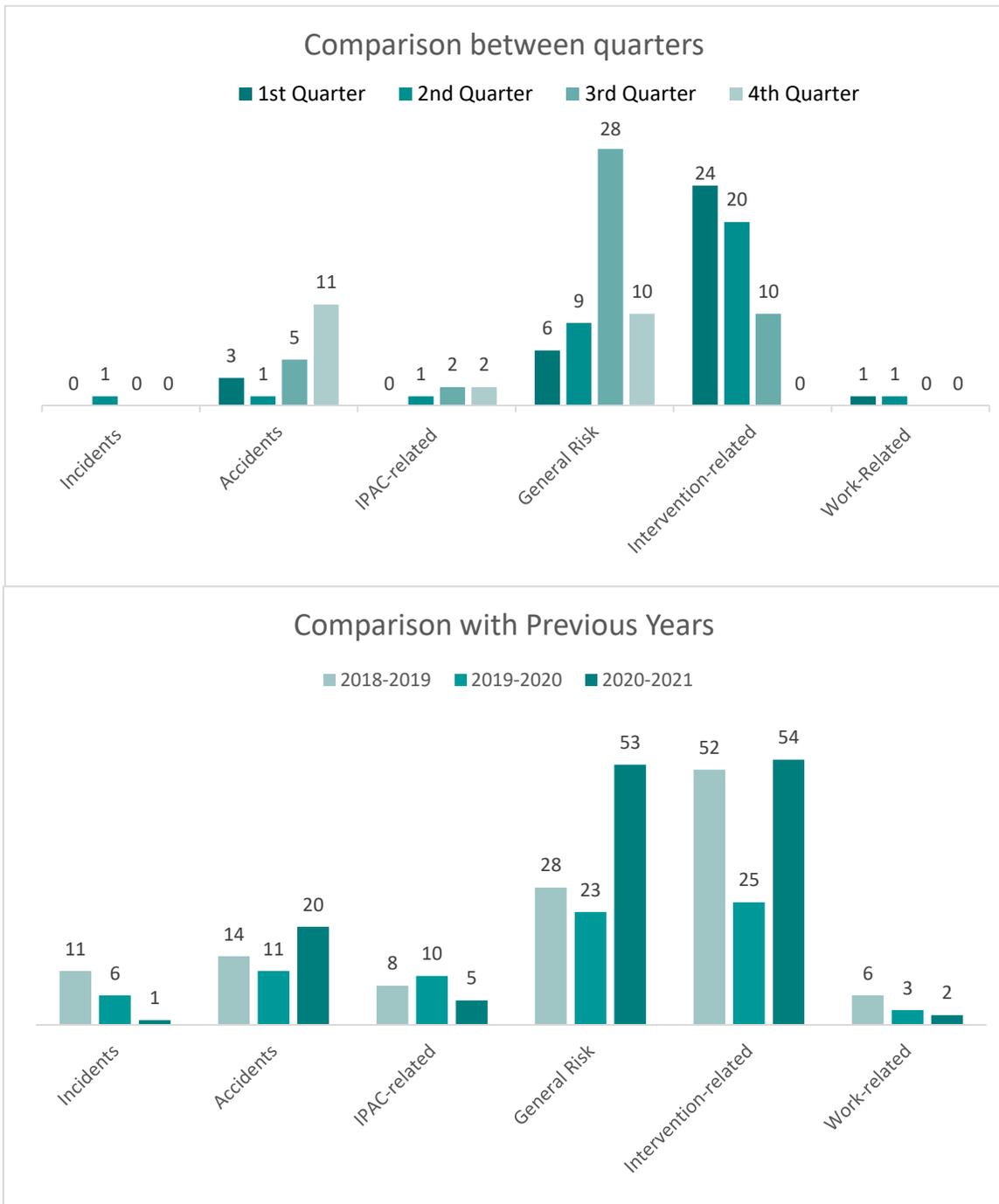
## The Safe Provision of Care and Services

Elizabeth House always strives to improve safety and service quality, while also respecting its obligations under the Law on Health and Social Services. In addition to these requirements, Elizabeth House has established its own process to monitor and report risk events that do not fall under the legal definitions of incidents and accidents.

This has resulted in a more comprehensive surveillance of all kinds of risk situations which could have a negative effect on the health, safety and security of clients, students, visitors, volunteers and personnel. We also make sure to involve all these parties in our culture of risk prevention and reporting, namely by providing an orientation on the matter as soon as they become involved with Elizabeth House.

The process is overseen by the legally mandated Risk Management and Quality Improvement Committee, while ongoing follow-up is ensured by management of all departments.

# Incident, Accident and Event (IAE) Report



**Overall Trends:**

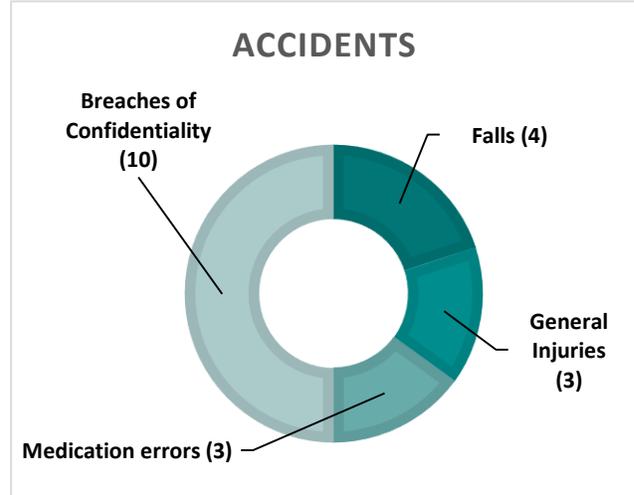
The number of events per category of risk is relatively stable except in Accidents, General Risk, and Intervention-related risk, all showing spikes from last year.

Comparisons for numbers of clients each year are 2018-2019: 17 mothers, 20 children; 2019-2020: 14 mothers, 13 children and this year 12 mothers, 11 children. As the number of clients has decreased, one would need to analyze why the increases occurred.

### 1. Incidents (0.7% of all events)



### 2. Accidents (14.8% of all events)



#### Analysis

Improvements need to be made in medication distribution as it relates to proper logging of information and staff carefully following distribution protocols.

Events regarding breach of confidentiality of client files occurred during a time where rooms were being painted and office items were displaced. A more careful oversight of this would be important in the future. This one event caused the major spike in accident reports.

#### 1. Incident

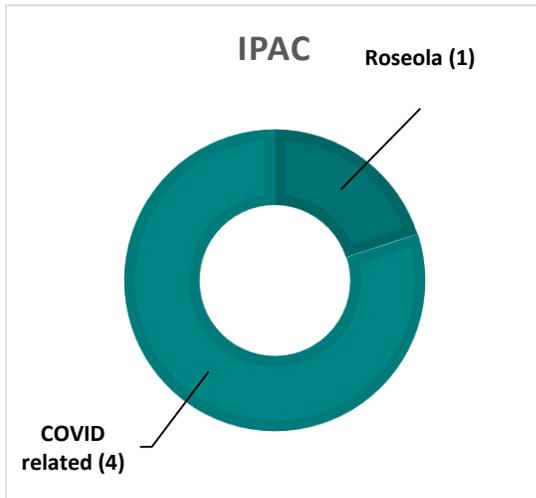
- Entire bottle of meds signed out during outing instead of one dose.

#### 2. Accidents

- Falls:
  - Mom fell through safety gate as she thought it was opened;
  - Mom tripped down the stairs;
  - Mom tripped while wearing flip flops;
  - Mom's leg fell asleep, and she fell over.
- Medication mishaps:
  - Mom given sleeping pill when asleep – distribution instruction not followed;
  - Client received old dose of medication as new one had not been logged;
  - Client had not handed in medication for infant and gave higher doses of Tempra than indicated.
- Injuries:
  - Baby fed hot cereal by mother;
  - Toddler pushed another toddler, bump in head resulted;
  - Toddler threw cell phone at mother, cut resulted above eye.
- Confidentiality Breach:
  - Ten reports of breach of confidentiality were handled. A box of closed client files had been left unattended in a meeting room due to miscommunication regarding its movement into archives. Disclosures were made to all 10 clients.

### 3. Events

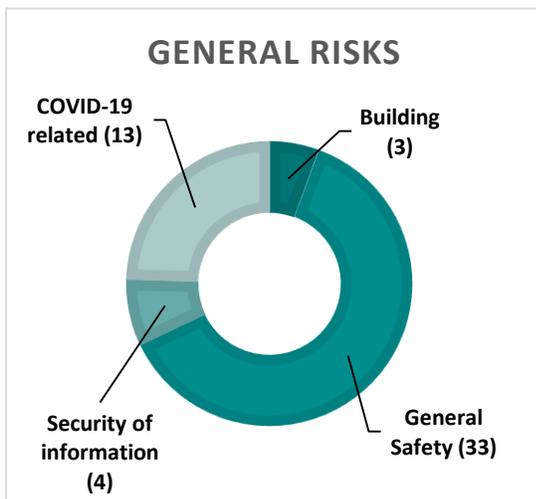
#### a) Infection Prevention and Control (3.7% of all events)



##### Analysis

IPAC events were somewhat lower in number considering the presence of COVID-19. As Elizabeth House became more familiar with the virus and how to manage it, staff were able to be more vigilant with identifying possible symptoms and applying necessary measures such as isolation and testing. Our lower client numbers also assisted in the management of the virus.

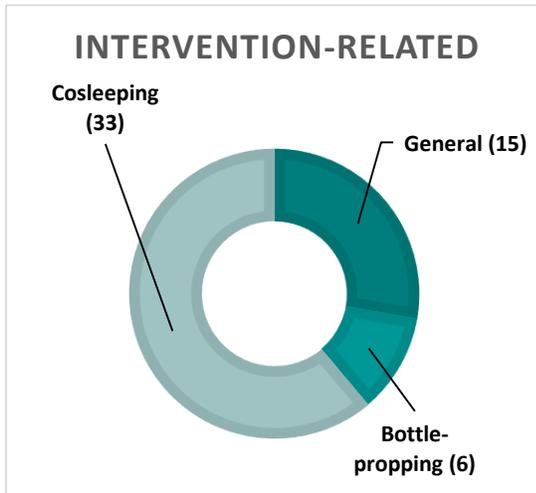
#### b) General Risk Events (39.3% of all events)



##### Analysis

The number of general risks were much higher this year compared to previous years. Several factors have influenced the numbers. Thirteen risks were reported where certain COVID-19 procedures were not followed by staff or clients. As COVID-19 is a new entity this year, these reports would have been non-existent in previous years. Adaptation to new protocols around the virus, took some time to become accustomed to. 33 general risks were reported, many occurring in period 3 when the program manager was on a leave. Several routines and structures were loosely followed resulting in more risk with regards to hazardous items left in kitchen or client rooms, unlocked doors, etc.

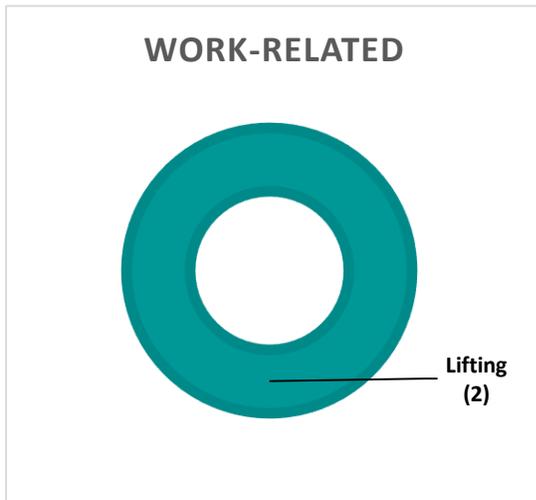
#### c) Intervention-Related Events (40% of all events)



##### Analysis

The 54 intervention related events all resulted from the behaviours of mostly 4 mothers. All 4 mothers were in their teenage years and most had come from particularly challenging backgrounds resulting in a very basic parenting ability. Three of the four were not able to continue to care for their children. Most events (33) resulted from co-sleeping events. The four mothers all had young children who woke up at night for feedings. Most struggled with this nighttime feeding. Other intervention related events included bottle propping (6) while the remaining events were a mixture of supervision, food prep and medication distribution errors made by the mothers towards their children.

#### **d) Work-Related Events (1.5% of all events)**



#### Analysis

The two work related events had to do with lifting or moving of heavy objects. There were no CNESST claims filed this year.

#### **Internal Processes**

In addition to the quarterly Integrated Risk Management and Quality Improvement meetings, incidents, accidents, and events have continued to be discussed amongst the management team as they arose. Feedback was given to staff and clients.

##### **a) Risk Management-Related Training (internal only)**

- Education on COVID-19 and Personal Protective Equipment (PPE).
- Unfortunately, fire drills were put on hold during the pandemic to avoid gatherings at the door, outside or at our emergency shelter. However, evacuation protocols and fire safety measure were reviewed individually with all new clients and staff as part of orientation.

##### **b) Proactive Risk Management Activities (not stemming from an event)**

- Risk Detection Exercise in November 2020 allowed us to identify 15 areas for improvement.

#### **Initiatives stemming from a risk detection exercise:**

In November 2020, the risk management team invited staff from all departments to walk around Elizabeth House and pay attention to potential risks in the environment. The main building was reviewed entirely, including work spaces, client areas and the exterior. Staff then submitted a brief report of their "findings". These were analyzed by the risk designate, following which corrective measures were planned and implemented.

1. On the front porch, the mats are not flush with the stairs so someone could trip.
  - a. Add tape to mark the edges of the mats so people realize that extra caution is needed.
2. The metal stairs in the back (kitchen and emergency exits) can become slippery when it rains.
  - a. There is anti-skid tape on the stairs. Add some on the rest of the balconies.
3. Install brighter light bulbs for better visibility on the front porch and in the backyard.
4. Tuck the chicken wire under the shed inwards to prevent injuries.

5. Install a child lock (that does not require a key) on the fridge in the dining room.
6. Repair or replace the blinds in the residence which do not function properly (cord gets stuck and pulling hard on it is a risk).
7. Improve the configuration of the second-floor educators' office to reduce clutter and ensure staff do not have their back to the door.
8. Designate a space for water jugs in the pantry to improve circulation and adjust delivery to only have a few jugs at a time.
9. Remove or cover useless cords (dangling) in the Family Assistance office.
10. Relocate the objects on top of the stationary cabinet in the administrative hallway to prevent tumbling.
11. Install hooks in the baby kitchen so mops and brooms can be hung up on the wall and kept out of evacuation routes.
12. Replace the safety locks on the cabinets in the client bathrooms with an easier model.
13. Keep toilet brushes under the sink in client bathrooms (out of children's reach).
14. Install boxes around the radiators in the residence to prevent burns.
15. Educators and residential aides to collaborate to flag and intervene immediately in risk situations related to clients (clutter impeding circulation, objects on the radiators or in cribs, choking hazards, food upstairs, etc).

### ***COVID-19***

A new set of procedures and guidelines were produced as a response to COVID-19. These procedures helped Elizabeth House manage things such as general safety within the house for staff and clients, visitors, outings in the community, home visits, possible in-house COVID-19 outbreak, etc. These guidelines were updated regularly by our Risk Management Designate who made herself aware of the changing scenarios within Public Health, CNESST and government directives.

As the year evolved, constant changes and improvements were implemented within the house to address the changes in requirements. Some of these included, changes in PPE requirements, adding reminder signs throughout the house, meetings via Zoom, working from home, removing shared toys etc.

Elizabeth House had an outbreak of COVID-19 in January 2021 which resulted in the removal of all clients from the residence and the house closing for 2 weeks while staff got tested and isolated.

### ***Follow-up and objectives for 2021-2022***

- Continue to find ways to provide regular feedback to clients on risk management issues;
- Continue to manage COVID-19 risks and implement the directives regarding the vaccine rollout;
- Complete the objectives listed on the Risk Management Improvement Plan.

## Measures of Control and the Management of Dangerous Client Behaviour

The treatment and interventions carried out at Elizabeth House do not include any form of Measure of Control. Alternatives, such as non-physical crisis intervention or police assistance, are favored.

As in previous years, there was no exceptional recourse to the application of physical restraints, chemical substance measures or isolation, nor to alternatives such as police assistance this fiscal year.

## Report on the Activities of the Service Quality Vigilance Committee

The Service Quality Vigilance Committee met via Zoom four times this year, on April 28, 2020; September 22, 2020; November 10, 2020 and February 2, 2021. It received and analyzed quarterly Incident, Accident and Event reports and reports from the Complaints Commissioner. The Committee monitored that recommendations were followed regarding the quality, safety and effectiveness of services; the handling of client complaints; the COVID-19 response and ensured that clients were aware of their rights.

## Report from the Local Service Quality and Complaints Commissioner

By Celine Roy, Local Service Quality and Complaints Commissioner

### ***Introduction***

This report is a summary of the activities of the Local Service Quality and Complaints Commissioner and includes a report of activities to improve the quality of services to our clients and to foster the enforcement of user rights. It is submitted to the Elizabeth House Board of Directors in conformity with the policy pertaining to the handling of clients' complaints. Complaints and Interventions processed and concluded for the year April 1st 2020 to March 31st 2021 are described.

### ***Summary of Complaints and Interventions***

For the year April 1st 2020 – March 31st 2021, there was no complaint processed nor any intervention file.

### ***Delays***

The Local Service Quality and Complaints Commissioner is required to conclude and respond to a client's complaint within 45 days of receipt.

In exceptional or complex situations, along with the client's permission, this delay is sometimes exceeded.

### ***Appeals to the Quebec Ombudsman***

Clients have the ability to appeal the outcome of their complaint to The Quebec Ombudsman, should they be dissatisfied with the Local Commissioner's response. There were no such complaints for this period.

### ***Comments by the Local Commissioner***

Clients continue to be aware of the complaint procedures. Elizabeth House has a long established practice of soliciting clients' satisfaction and encouraging them to address dissatisfactions and complaints directly with the persons involved.

As a result, clients continue to express that they are comfortable discussing their dissatisfactions directly with the staff or supervisor concerned.

The entente with the CSSS Sud-Ouest—Verdun for the services of the Local Service Quality and Complaints Commissioner, which was signed in September 2013, was continued with the CIUSSS du Centre-Sud-de-l'Île-de-Montréal on April 1st, 2020.

The activities of the LSQCC included:

### ***Promotional Activities***

- None. Because of the COVID-19 pandemic, there were no promotional activities organized this year.

### ***Committee***

Service Quality and Vigilance Committee:

- There were four meetings which took place on April 28, 2020, September 22, 2020, November 10, 2020 and February 2, 2021;
- No recommendation for the upcoming year.

### ***Maltreatment:***

Means "a single or repeated act, or a lack of appropriate action, that occurs in a relationship where there is an expectation of trust, and that intentionally or unintentionally causes harm or distress to a person"<sup>1</sup>.

- No maltreatment reports received for this period.

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<sup>1</sup> L-6.3, *Act to combat maltreatment of seniors and other persons of full age in vulnerable situations*, 2021, c 1, art 4(3), <http://www.legisquebec.gouv.qc.ca/en/showDoc/cs/L-6.3?digest=>

## Section 6: Donations and Fundraising

Despite the challenge of the Pandemic, our loyal donors remembered us again this year. Elizabeth House was able to count on our regular donors as well as new supporters who fundraised in creative, fun and delicious ways in order to supplement our programs.

A catalog that describes specific projects donors can support continues to be available. The document shows where investments are going and the difference they will make for our clients and organization. A copy can be requested through our administrative team.

We are grateful to all the individuals, foundations, philanthropic associations, and numerous partners who support Elizabeth House throughout the year. Their donations allow Elizabeth House to supplement its regular programming, providing clients with a more enriched treatment approach.

- **Scotiabank Charity Challenge**



This year started with our sixth participation in the Scotiabank Charity Challenge and what a challenge it was! Given the reality of the Pandemic, the challenge was initially postponed, then moved to a Virtual Challenge.

Although small in size, our team of 6 runners ran/walked on their own and raised a total of over \$6,000. We want to thank every one of the individual donors who made it all worth it. Your support means the world to us!

- **Church of St. Andrew and St. Paul**

The Church of St. Andrew and St. Paul has continuously supported Elizabeth House and its clients through a variety of initiatives over the years. This year, they continued to reach out to their congregation through newsletters, Zoom and YouTube events where their message of support continued.

Generous donations were received from the Guild and through their Christmas pageants and children's programs which helped us fund:

- ➔ Backyard toys and a new patio set, outdoor pillows;
- ➔ Tablets for the clients – so much needed during COVID-19 for Zoom programming and Netflix entertainment during lockdown;
- ➔ Christmas dinner for Residential clients and food baskets for families in the community.

- **Mount Royal United Church Sunday School and Youth Group**

Despite not being able to hold their annual Christmas breakfast, the Mount Royal United Church provided us with a generous donation. We thank them for keeping us in their thoughts this most challenging year.

- **Forest and Stream Christmas Luncheon**

Every year, an anonymous donor hosts a beautiful luncheon at the Dorval Forest and Stream Club, which is attended by numerous members of the Church of St. Andrew and St. Paul congregation.

Each participant graciously attends with a Christmas gift in tow for the families at Elizabeth House. This lovely event was cancelled due to COVID-19, however our amazing Christmas godmothers, as we warmly call them, did not forget us, and we received wonderful gifts, gift cards and monies which we were able to distribute to our families.

- **Unitarian Church – John Cordrier Fund**

The church provided us with a very generous donation this year to support us in our goals.

- **Anonymous – Backyard and garden**

Funding continued from our anonymous donor for the upkeep of our backyard. After our yard was put to sleep last fall, our gardeners from the company Biocyclette, helped us replant our vegetable garden and revitalize our flowers and plants.



A new bench was installed, where staff and mothers could gather. We received watering pots, and a wonderful bird feeder. The back balcony was painted, and the windowsills were also refreshed with a wonderful green paint. The garden was totally edible, making it safe for young children to explore, play and taste. With COVID-19 restrictions, the backyard truly became a getaway for both staff and families.

- **Goodfood boxes**



An extremely generous donor continued to offer us a Goodfood subscription (weekly box of 3 meals) throughout the year. This donation was particularly helpful during COVID-19 where trips to the grocery store were avoided. Staff continued to work with clients on meal planning, cooking and nutrition.

- **Mr. Howick – ongoing contributions to client wellness (\$5,000) and a flat screen television for the residence**

- **Christmas**

Every year, incredible people and companies come together to share the magic of the holidays with the families of Elizabeth House. They allow every single child and parent to open a Christmas gift they might not have been able to afford. This year’s angels include:

- Carolyn B.M. with Ikea Canada and Battat toys (toys for all the children and gift cards for the mothers as a recurrent donation many years in a row);
- Clotilde Fascione and friends (gifts and gift cards, apartment starter kits for clients settling in the community);
- Shoebox Project (boxes of toiletries, mittens, socks, candy, gift cards, etc.);
- Dorval Surrey Knitters (hats, mittens, lapghans and more);
- Nadira M. (toys for the children);
- Kids Fun and Learning Center (food and toys for families in the community);
- Julia Rochford and family (grocery gift cards for families in the community);
- Elizabeth Cochrane and the Gazette Christmas Fund (cheques for moms);
- Elizabeth House Foundation (poinsettias for the residence);
- Care Jeunesse (presents, Zoom party and Christmas dinner at the Day center).



- **Boards of Directors and their contacts**

The support of Elizabeth House Board members, and Foundation Board members, present and past, continues well past their own commitments and time to us through their contacts, friends and family. This year, these connections allowed us to benefit from the support of:

- Maria Papaioannou, from Paps Apple Pie, who offered a percentage of the proceeds of her holiday pie sales to support Elizabeth House;
- Stephanie Decotis of Sage hair salon, who arrived at our doorstep with monetary donations, new women’s clothing, baby formula, diapers and personal care products for our mothers. All had been collected at her salon through clients;
- Hanna Hajilou, owner of A La Table, who offered the proceeds from her delicious grazer boxes to support us for Women’s Day.



# Section 7: Human Resources

## Staffing Levels

As of March 31, 2021	Number of employees	Full Time Equivalent
2 - Para-technical, auxiliary and trade personnel	8	4
3 - Office personnel, administrative technicians and administration professionals	8	5
4 - Health and social service technicians and professionals	20	8
6 - Management personnel and others	2	2
Total	38	18

Elizabeth House operated with 14 permanent full-time and 5 permanent part-time employees for a total of 17.84 full-time equivalent positions. There were 10 educators, 3-night attendants, 1 Residential Aide and 1 maintenance worker on the on-call list, working replacement shifts as needed.

In addition, Elizabeth House also used the services of consultants, contract workers and occasional laborers.

# Section 8: Financial resources

## Use of financial resources by program

	2020-2021		2019-2020		Variance	
	Expenses	%	Expenses	%	Amount	%
<b>Programs-services</b>						
Public Health (pandemic response)	3,859	0.22%	305	0.02%	3,554	92.10%
Youth in difficulty (clinical programs, youth health & others)	848,880	48.75%	840,720	55.83%	8,160	0.96%
<b>Support Programs</b>						
Administration (administration, IT & others)	697,345	40.05%	529,144	35.14%	168,201	24.12%
Support services (food services & others)	16,397	0.94%	22,873	1.52%	(6,476)	(39.50%)
Building and equipment management (hygiene, safety, functioning & maintenance)	174,895	10.04%	112,876	7.50%	62,019	35.46%
<b>Total</b>	<b>1,741,376</b>	<b>100%</b>	<b>1,505,918</b>	<b>100%</b>	<b>235,458</b>	<b>13.52%</b>

\*Our complete financial statements are available in the AS-471 financial report published on our website.

## Budget Equilibrium

Under articles 3 and 4 of the Act to provide for balanced budgets in the public health and social services network (Chapter E-12.0001), an establishment must maintain a balance between its expenditures and its revenues during a fiscal year and must not have a deficit at the end of the fiscal year.

Elizabeth House finished the year with a deficit of \$39,599 which is slightly higher than the 2% of our revenues allowable by the government. As the expenditures were non recurrent in nature, such as maintenance and repairs on the building and the purchasing of our payroll system, the deficit was deemed acceptable as per the auditors.

# Section 9: Follow-up on reservations, comments and observations emitted by the Independent Auditor

## Financial Statements and Report from the Independent Auditor

### Rapport de l'auditeur indépendant

Aux membres du conseil d'administration de  
**Maison Elizabeth House**

*Rapport sur l'audit des états financiers*

*Opinion avec réserve*

Nous avons effectué l'audit des états financiers de Maison Elizabeth House (ci-après l'« établissement ») inclus dans la section audité du rapport financier annuel, qui comprennent l'état de la situation financière au 31 mars 2021 et les états des résultats, des surplus (déficits) cumulés, de la variation des actifs financiers nets (de la dette nette) et des flux de trésorerie pour l'exercice terminé à cette date, ainsi que les notes et les autres informations explicatives de la section audité des états financiers, y compris le résumé des principales méthodes comptables.

À notre avis, à l'exception des incidences du ou des problèmes décrits dans la section « Fondement de l'opinion avec réserve » du présent rapport, les états financiers ci-joints donnent, dans tous leurs aspects significatifs, une image fidèle de la situation financière de l'établissement au 31 mars 2021 ainsi que des résultats de ses activités, des gains et pertes de réévaluation de la variation de ses actifs financiers nets (sa dette nette) et de ses flux de trésorerie pour l'exercice terminé à cette date, conformément aux normes comptables canadiennes pour le secteur public.

*Fondement de l'opinion avec réserve*

Comme l'explique la note 2, les immobilisations sont comptabilisées au coût dans le fonds d'immobilisations et ne sont pas amorties. Également, les états financiers ci-joints ne comprennent pas la comparaison des résultats de l'exercice et des résultats prévus à l'origine. Ces omissions constituent des dérogations aux normes comptables canadiennes pour le secteur public. Cette situation nous conduit donc à exprimer une opinion d'audit modifiée sur les états financiers de l'exercice courant, comme nous l'avons fait pour les états financiers de l'exercice précédent.

Les incidences de cette dérogation aux normes comptables canadiennes pour le secteur public sur les états financiers aux 31 mars 2021 et 2020 n'ont pas été déterminées.

Nous avons effectué notre audit conformément aux Normes d'audit généralement reconnues du Canada. Les responsabilités qui nous incombent en vertu de ces normes sont plus amplement décrites dans la

section « Responsabilités de l'auditeur à l'égard de l'audit des états financiers » du présent rapport. Nous sommes indépendants de l'établissement conformément aux règles de déontologie qui s'appliquent à notre audit des états financiers au Canada et nous nous sommes acquittés des autres responsabilités déontologiques qui nous incombent selon ces règles. Nous estimons que les éléments probants que nous avons obtenus sont suffisants et appropriés pour fonder notre opinion d'audit avec réserve.

#### *Observations – Référentiel comptable*

Nous attirons l'attention sur la note 3 des états financiers, qui décrit le référentiel comptable appliqué. Les états financiers ont été préparés pour permettre à l'établissement de se conformer aux exigences en matière d'information financière du ministère de la Santé et des Services sociaux du Québec. En conséquence, il est possible que les états financiers ne puissent se prêter à un usage autre. Notre opinion n'est pas modifiée à l'égard de ce point.

#### *Autre point – Unités de mesure et heures travaillées et rémunérées et coûts unitaires*

Nous n'avons pas procédé à l'audit ou à l'examen des unités de mesure et des heures travaillées et rémunérées de l'exercice courant présentées aux pages 320 (colonne 3), 330 (colonnes 1 et 3), 351 (colonne 3), 352 (colonnes 1 et 3), 650 (colonne 3) et 660 (colonne 3) ainsi que des coûts unitaires de l'exercice courant présentés aux pages 650 (lignes 29 et 31, colonne 4). Par conséquent, nous n'exprimons aucune opinion d'audit ou conclusion de mission d'examen, ni aucune autre forme d'assurance à l'égard de ces informations. Les unités de mesure et les heures travaillées et rémunérées présentées à titre d'informations comparatives n'ont pas fait l'objet d'un audit, ni d'un examen.

#### *Responsabilités de la direction et des responsables de la gouvernance à l'égard des états financiers*

La direction est responsable de la préparation et de la présentation fidèle des états financiers conformément aux normes comptables canadiennes pour le secteur public, ainsi que du contrôle interne qu'elle considère comme nécessaire pour permettre la préparation d'états financiers exempts d'anomalies significatives, que celles-ci résultent de fraudes ou d'erreurs.

Lors de la préparation des états financiers, c'est à la direction qu'il incombe d'évaluer la capacité de l'établissement à poursuivre son exploitation, de communiquer, le cas échéant, les questions relatives à la continuité de l'exploitation et d'appliquer le principe comptable de continuité d'exploitation, sauf si la direction a l'intention de liquider l'établissement ou de cesser son activité ou si aucune autre solution réaliste ne s'offre à elle.

Il incombe aux responsables de la gouvernance de surveiller le processus d'information financière de l'établissement.

#### *Responsabilités de l'auditeur à l'égard de l'audit des états financiers*

Nos objectifs sont d'obtenir l'assurance raisonnable que les états financiers pris dans leur ensemble sont exempts d'anomalies significatives, que celles-ci résultent de fraudes ou d'erreurs, et de délivrer un rapport de l'auditeur contenant notre opinion. L'assurance raisonnable correspond à un niveau élevé d'assurance, qui ne garantit toutefois pas qu'un audit réalisé conformément aux Normes d'audit généralement reconnues du Canada permettra toujours de détecter toute anomalie significative qui pourrait exister. Les anomalies peuvent résulter de fraudes ou d'erreurs et elles sont considérées comme

significatives lorsqu'il est raisonnable de s'attendre à ce qu'elles, individuellement ou collectivement, puissent influencer sur les décisions économiques que les utilisateurs des états financiers prennent en se fondant sur ceux-ci.

Dans le cadre d'un audit réalisé conformément aux normes d'audit généralement reconnues du Canada, nous exerçons notre jugement professionnel et faisons preuve d'esprit critique tout au long de cet audit. En outre:

- nous identifions et évaluons les risques que les états financiers comportent des anomalies significatives, que celles-ci résultent de fraudes ou d'erreurs, concevons et mettons en œuvre des procédures d'audit en réponse à ces risques et réunissons des éléments probants suffisants et appropriés pour fonder notre opinion. Le risque de non-détection d'une anomalie significative résultant d'une fraude est plus élevé que celui d'une anomalie significative résultant d'une erreur, car la fraude peut impliquer la collusion, la falsification, les omissions volontaires, les fausses déclarations ou le contournement du contrôle interne ;
- nous acquérons une compréhension des éléments du contrôle interne pertinents pour l'audit afin de concevoir des procédures d'audit appropriées aux circonstances et non dans le but d'exprimer une opinion sur l'efficacité du contrôle interne de l'établissement ;
- nous apprécions le caractère approprié des méthodes comptables retenues et le caractère raisonnable des estimations comptables faites par la direction, de même que des informations y afférentes fournies par cette dernière ;
- nous tirons une conclusion quant au caractère approprié de l'utilisation par la direction du principe comptable de continuité d'exploitation et, selon les éléments probants obtenus, quant à l'existence ou non d'une incertitude significative liée à des événements ou situations susceptibles de jeter un doute important sur la capacité de l'établissement à poursuivre son exploitation. Si nous concluons à l'existence d'une incertitude significative, nous sommes tenus d'attirer l'attention des lecteurs de notre rapport sur les informations fournies dans les états financiers au sujet de cette incertitude ou, si ces informations ne sont pas adéquates, d'exprimer une opinion modifiée. Nos conclusions s'appuient sur les éléments probants obtenus jusqu'à la date de notre rapport. Des événements ou situations futurs pourraient par ailleurs amener l'établissement à cesser son exploitation ;
- nous évaluons la présentation d'ensemble, la structure et le contenu des états financiers, y compris les informations fournies dans les notes et apprécions si les états financiers représentent les opérations et événements sous-jacents d'une manière propre à donner une image fidèle ;
- nous communiquons aux responsables de la gouvernance notamment l'étendue et le calendrier prévus des travaux d'audit et nos constatations importantes, y compris toute déficience importante du contrôle interne que nous aurions relevée au cours de notre audit.

#### *Rapport sur la conformité aux autorisations spécifiées*

Nous avons effectué l'audit de la conformité aux autorisations spécifiées des opérations de l'établissement dont nous avons pris connaissance durant l'audit des états financiers. Les autorisations spécifiées à l'égard desquelles l'audit de la conformité a été effectué, conformément à l'article 293 de la *Loi sur les services de santé et les services sociaux* (RLRQ, chapitre S-4.2) et à l'annexe I du *Règlement sur la gestion financière des établissements et des conseils régionaux*, sont les suivantes :

- Dispositions de la loi susmentionnée et règlements s'y rapportant, dans la mesure où en sont touchés ses revenus ou ses charges ;
- Explications et définitions se rapportant à la préparation du rapport financier annuel ;

- Définitions contenues dans le *Manuel de gestion financière* publié par le ministère de la Santé et des Services sociaux du Québec en ce qui a trait à ses pratiques comptables.

### *Opinion avec réserve*

À notre avis, à l'exception du ou des problèmes de non-conformité décrits dans le paragraphe « Fondement de l'opinion avec réserve », les opérations de l'établissement dont nous avons pris connaissance durant l'audit des états financiers sont conformes, dans tous leurs aspects significatifs, à ces autorisations spécifiées.

### *Fondement de l'opinion avec réserve*

Comme l'explique la note 2, les immobilisations sont comptabilisées au coût dans le fonds d'immobilisations et ne sont pas amorties. Également, les états financiers ci-joints ne comprennent pas la comparaison des résultats de l'exercice et des résultats prévus à l'origine. Ces omissions constituent des dérogations aux normes comptables canadiennes pour le secteur public. Cette situation nous conduit donc à exprimer une opinion d'audit modifiée sur les états financiers de l'exercice courant, comme nous l'avons fait pour les états financiers de l'exercice précédent.

Les incidences de cette dérogation aux normes comptables canadiennes pour le secteur public sur les états financiers aux 31 mars 2021 et 2020 n'ont pas été déterminées.

La direction est responsable de la conformité de l'établissement aux autorisations spécifiées indiquées ci-dessus, ainsi que du contrôle interne qu'elle considère comme nécessaire pour permettre la conformité de l'établissement à ces autorisations spécifiées.

Nos responsabilités d'audit comprennent la planification et la mise en œuvre de procédures visant la formulation d'une opinion d'audit et la délivrance d'un rapport sur la question de savoir si les opérations dont nous avons pris connaissance durant l'audit des états financiers sont en conformité avec les exigences spécifiées susmentionnées.

*Richter s.e.n.c.r.l.*

Montréal (Québec)

Le 10 septembre, 2021

<sup>1</sup>CPA auditeur, CA, permis de comptabilité publique n° A125137

## Section 10: Disclosure of wrongdoing in the workplace

There were no reports of wrongdoing at Elizabeth House in 2020-2021.

# Annex 1: Code of Ethics

**MAISON ELIZABETH HOUSE**

Code of Ethics

## **Introduction**

The code of ethics sets out the rules and standards of behaviour for everyone at Elizabeth House. Our code of ethics tells clients and their families what rights they have and what their responsibilities are. Everyone who works for or at Elizabeth House; all full-time, part-time or on-call staff, clinical, auxiliary and administrative, all volunteers, stagiaires (students completing an internship program), members of the Elizabeth House Board of Directors, as well as contractual workers) must follow the code of ethics.

The code of ethics, along with the professional codes of ethics that apply to the various professionals who work at or for Elizabeth House, as well as the Elizabeth House policies and procedures guide our behaviour.

## **Organizational Commitments**

Elizabeth House is a private rehabilitation center providing a continuum of specialized services to pregnant adolescents and women, mothers and babies, fathers, and families experiencing significant difficulty in adjusting to pregnancy and/or to their new roles as parents and caregivers.

- 1. We believe that a pregnant woman or adolescent 14 and over has the right to determine her plans regarding her pregnancy. We will provide the information and support she needs to make a decision (regarding continuing the pregnancy to term, and the custody of the child) without imposing personal views or judgements.**
- 2. We care about and are committed to the well being of our clients, recognizing their physical, emotional, spiritual, social and cognitive needs and capacity.**

We do this by:

- considering these needs when developing intervention plans, activities, and programs;
  - looking beyond behaviour in an effort to understand its meaning;
  - carrying out our mandate in the least intrusive manner and choosing the least intrusive option, yet providing what is necessary;
  - promoting self-esteem, and guarding against actions which may be humiliating or intimidating;
  - taking the necessary time to work through an issue and ensuring adequate follow-up;
  - ensuring that our expectations towards clients and families are realistic, growth-producing, and in accordance with their capacities;
  - for clients with children, we support the mother and ensure that the mother provides for the baby's physical, emotional, cognitive, and social needs.
- 3. We help the young woman (and the young man) who chooses to become a parent to assume this role, while ensuring that the baby or child has a healthy, stable and safe environment.**
- We involve the client in developing intervention and service plans, listen to what the client has say and take the clients needs, opinions and desires into account.

- 4. Our prime concerns are optimizing the healthy development of the child and the young parent.**
- 5. We advocate with and on behalf of our clients according to their needs.**
- 6. As part of the discharge process when a client leaves an Elizabeth House program, appropriate post discharge services will be determined with the client, and the necessary services will be arranged.**
- 7. We promote ongoing collaboration among youth, families, and colleagues within and outside the health and social service system, in order to provide the best possible services.**

We do this by:

- conducting periodic and timely reviews of each client's service and intervention plans;
- committing ourselves to finding creative and resourceful ways of meeting their needs, and paying particular attention to these needs at key moments such as crisis situations and transfers (to other Elizabeth House programs, to other agencies, or to other living situations);
- ensuring that we share a common understanding of our clients;
- taking into account the point of view of others;
- sharing information necessary for others to carry out their role, within the context of the laws governing confidentiality;
- recognizing strengths, talents, and expertise, and by recognizing ways other individuals or organizations can contribute to the well-being of young mothers and children;
- providing opportunities for success and positive reinforcement for what may appear to be even the smallest of achievements;
- constantly seeking and reaching out to individuals who could contribute to clients' well-being, and identifying ways to involve them; refer clients to other professionals and /or seek assistance to ensure appropriate services;
- providing an environment conducive to dialogue, which allows room for the expression of differences of opinion and the resolution of conflict.

### **General Codes of Conduct and Ethical Standards**

Regardless of role or position, everybody who works for or at Elizabeth House (all clinical, administrative and support staff, members of the Elizabeth House Board of Directors, all volunteers, stagiaires (students completing an internship program), as well as contractual workers) acknowledges and acts in the spirit of the following principles.

#### **Respect for Others**

- 1. We treat everyone with dignity, care and respect, regardless of their race, religion, ethnic origin, socio-economic status, disability, age or what their plans or views regarding the pregnancy are.**

We do this by:

- using respectful language and tone with all;

- keeping ourselves informed about client rights;
- understanding how every client and every family is unique, and by developing individualised plans and approaches;
- uphold each person's right to self-determination, consistent with that person's capacity and with the rights of others;
- participating in activities and/or developing programs that promote an understanding of differences between people.

**2. We provide a residential, educational, and employment environment free from all forms of intimidation, hostility, offensive behaviour, discrimination and sexual harassment.**

We do this by:

- condemning and confronting all behaviours and attitudes which are racist, sexist, prejudiced or discriminatory;
- focusing on the prevention of aggression;
- working on conflict resolution in a manner which does not jeopardise the safety of those involved;
- demonstrating that we will not tolerate violence, threats of violence, or abusive language.

**3. We recognise that everyone is unique. We act in a manner that respects and promotes the understanding of differences and reflects the cultural diversity of our clientele. We respect the values, religious beliefs and sexual orientation of our clients. We work towards the elimination of prejudice, discrimination, and racism.**

We do this by:

- understanding how every client and every family is unique, and by developing individualised plans and approaches; we said this already
- participating in activities and/or developing programs that promote an understanding of differences between people; we said this already
- actively and continuously seeking to inform ourselves about the values and lifestyles specific to different cultures, religions, backgrounds and sexual orientations;
- understanding and taking into account a family's particular religious or cultural practices;
- identifying and linking with community resources that support various cultures or groups when indicated.

**Professionalism and Objectivity**

**4. We acknowledge that we are accountable for our actions and decisions. We are aware of the impact of our actions on others, and act in a manner that exemplifies integrity, consistency and caring. We acknowledge that we are all role models for our clients.**

We do this by:

- accepting responsibilities for our actions;
- constantly seeking to understand how our words, actions or decisions may be perceived by others;
- following through on the plans we develop and adjusting them, when necessary, in a manner which promotes continuity and clarity;
- actively participating in the evaluation of our work, our programs, and the services we provide.

**5. We act in a dependable and trustworthy manner while maintaining professional boundaries and objectivity.**

We do this by:

- recognising our values, biases and limitations, and ensuring that they do not interfere in our relationships with our clients nor in the carrying out of our responsibilities; or – we recognize our values, biases and limitations and how they influence our practice.
- Being aware of the power vested in our position;
- placing clients' needs over our personal needs;
- expressing differences of opinion, discussing them openly, and abiding by the decided outcome;
- following through on our commitments;
- ensuring proper communication with and about clients with the aim of promoting continuity and understanding;
- consulting with colleagues on our work with clients and families, and considering and/or incorporating their feedback;
- making significant decisions in consultation with, and not in isolation from, others (colleagues, supervisors, clients and their families);
- referring to established professional guidelines concerning staff-client relationships and, if still in doubt, checking the situation out with the supervisor.

**6. We exercise care, prudence, and diligence in the performance of our duties, and act honestly and in good faith in the best interest of Elizabeth House and our clients.**

- We are also mindful of the best interests of Elizabeth House and our clients when discussing any business related to the agency with private individuals and outside organizations.
- We make judicious use of the resources at our disposal.

**7. We know and respect the laws, standards and ethics of our particular professions or occupations, and Elizabeth House policies and procedures.**

We do this by:

- keeping abreast of relevant laws, and adjusting our practices to reflect new or changing legal requirements;
- promoting and adhering to the norms and standards that apply to our work and/or our professions;
- reading and respecting all policies and procedures, and asking for clarification when there is something we do not understand;

- participating, whenever possible, in the updating of policies and procedures.

**8. We invest in our personal and professional development in order to carry out our respective roles.**

We do this by:

- actively participating in ongoing supervision;
- making use of available training opportunities relevant to our work;
- sharing acquired knowledge with colleagues;
- keeping up-to-date on information pertinent to our jobs;
- upgrading our knowledge and practice;
- gathering expertise while providing services and carrying out our duties;
- keeping abreast of, and exploring, issues related to, and important to, young mothers and children.

**Conflict of Interest**

**9. We put the interest, the rights and needs of the client and of Elizabeth House before our interest and needs. We avoid actual or potential conflicts of interest, or even the appearance of conflict of interest, in the decisions we make and the way we intervene.**

We do this by:

- maintaining clear boundaries and a professional distance, without, however, losing our ability to care;
- identifying situations of potential conflict, informing the appropriate people, and consulting with our supervisor, when in doubt;
- recognizing that we are here for clients, and not vice-versa, and acting in their best interest;
- being constantly aware of what motivates our actions and decisions;
- avoiding situations which could jeopardize our capacity to exercise our specific functions in an independent and objective manner;
- not using our position or role at Elizabeth House, or confidential information or documents, to derive direct or indirect benefits for ourselves or others (beyond working for a salary, or hourly wage in the case of salaried, paid employees and contractual workers; members of the Board of Directors shall serve without remuneration);
- not using our position or role to promote and/or exercise professional or business activities other than those which we exercise by our function at Elizabeth House.

Board members shall avoid conflict of interest or perceived conflict of interest by:

- disclosing in writing any office they may hold and every property they may possess or acquire, whereby directly or indirectly a duty or interest might be created in conflict with the interests of Elizabeth House, the nature and extent of such a conflict, and shall abstain from participating in deliberations or decisions when an issue relating to such interest is discussed;
- disclosing in writing to the Board any contracts of professional services concluded with Elizabeth House by a commercial enterprise in which they hold financial interest;
- disclosing any situation in which personal, family, social or business matters, or their public expression of opinion or other manifestation of favouritism or hostility

may affect their objectivity or independence, or appearance thereof, and abstaining from participating in deliberations and decisions around the issue in question.

### **Confidentiality and Privacy**

**10. We respect the confidentiality of clients. We communicate – whether verbally, non-verbally, or in writing – in ways that respect the privacy of individuals, as well as their right to confidentiality.**

We do this by:

- always ensuring that confidential information is stored safely and only shared with authorised individuals;
- never discussing clients in ways or places where the respect for their integrity and right to confidentiality as individuals and as a group might be violated.

**11. We do not discuss confidential agency business with anyone who does not have a legitimate need to know the information. We respect Elizabeth House policies and procedures regarding communication with the media.**

The obligation to maintain confidentiality extends beyond the period of employment or service, and/or the expiration of the mandate of members of the Board of Directors.

### **Parental Responsibility and the Importance of Family**

**12. We act with the knowledge that parents retain primary responsibility for their children.**

We do this by:

- treating the minor client who is a parent as we would treat an adult parent: with the utmost respect;
- acknowledging that the primary caregiver of a client under 5 years old admitted to the residential program with his or her mother is the child's parent;
- modelling appropriate behaviour without usurping the role of the parent.

**13. The mother or father who is a direct client of Elizabeth House is always part of the process when decisions are made regarding intervention plans and about services to her or him, or to her or his child.**

**14. We act with the knowledge that family bonds are vital. We encourage grandparents, siblings, members of the extended family and significant others to be involved in the care and services we provide.**

For all clients, regardless of their status as a minor or as an adult, we do this by:

- welcoming parents and extended family to activities within Elizabeth House;
- promoting the involvement of family members in activities with the client, while taking into consideration their particular situation;
- incorporating family issues in our interventions regardless of the feasibility or likelihood of family re-unification;
- providing parents with information about their rights and responsibilities;
- supporting and encouraging them in carrying these out.

For clients who are minors we do this by:

- asking their parent(s) to participate in the decisions concerning their child, wherever possible;
- developing an understanding with their families of how they will be involved in decisions and activities and informed of the client's progress;
- recognizing that fathers play an important role in the life of a child;
- promoting the parents' and family's involvement in their child's daily activities while taking into consideration their particular situation.

### **Client Needs and Development**

**We help each client experience success and encourage the fullest possible development of the mother's, the child's and the family's potential.**

We do this by:

- identifying and helping others see strength and potential in individual clients, their families, and their natural environment;
- providing opportunities for success, and positive reinforcement for what may appear to be even the smallest of achievements;
- respecting the client's individual pace in working through difficulties;
- drawing upon the strength and contributions of parents, other family members and the larger community in the provision of care and services;
- identifying the special needs of clients and finding ways of having them met;
- encouraging self-reliance, independence and appropriate interdependence;
- maximizing educational opportunities;
- accepting that human development is a life-long process for all.

**We recognize the potential vulnerability of the clients we serve and use our authority in an appropriate and responsible manner as we carry out Elizabeth House mandates.**

We do this by:

- acting in a non-threatening, non-judgemental, and trustworthy manner, and remaining sensitive to the feelings of others;
- being aware of the power vested in our position;
- understanding the impact of our words, actions, and decisions;
- recognising the potential for abuse;
- making significant decisions in consultation with, and not in isolation from, others (colleagues, supervisors, clients and their families);
- allowing clients and the parents of minor clients to state their disagreement, and supporting them in using the appropriate channels to do so;
- working at resolving conflicts as they arise, and seeking the necessary supports to do so;
- informing clients and their families of their right to make a complaint, and assisting them if requested or required.

**We provide care and services according to the individual needs of the client, in the most appropriate setting for the client.**

- Clients do not remain in the residential program longer than is necessary to meet the needs assessed at intake or subsequently identified, and the purpose for which placement was provided.

- Recognizing that the driving force for development and has to come from within, we work with the clients to help them achieve their goals. We help them take responsibility and learn to find solutions.

**We promote a safe and secure environment.**

We do this by:

- involving ourselves in planning, strategizing and implementing ways to create safe and secure environments on a day-to-day basis;
- knowing, respecting, and applying safety and security procedures and informing clients of their existence;
- identifying and acting on any situation which poses a threat to safety or security;
- clearly communicating to colleagues, information which can have an impact on the safety of clients and staff;
- focusing on the prevention of aggression;
- working on conflict resolution in a manner which does not jeopardise the safety of those involved;
- demonstrating that we will not tolerate violence, drugs, alcohol or illegal substances.

**We promote responsibility and autonomy.**

We do this by:

- intervening when and only when necessary;
- encouraging clients and their families to define their own problems, needs, strengths and service priorities;
- involving clients in the decision-making processes;
- helping clients develop problem-solving abilities, rather than automatically imposing our own solutions;
- developing programs that focus on acquiring skills;
- equipping the client with as much knowledge and information as possible so she or he can make informed choices;
- exploring and identifying potential options and allowing for choices (whenever possible);
- guiding and directing clients without creating dependency;
- modelling appropriate behaviour;
- helping clients understand the consequences of their decisions.

**We provide the necessary information and support to allow access to services and resources, and the exercise of individual rights.**

We do this by:

- keeping ourselves informed about services, client rights and resources;
- making information about our programs and services available to our clients;
- offering guidance towards appropriate resources;
- realizing that written, verbal, and non-verbal communications are essential in carrying out our duties;
- communicating – whether verbally, non-verbally, or in writing – in ways that improve the quality of our services;
- using clear, accessible language that is non-judgemental and devoid of condescension;

- ensuring that the content and style of all communications, including our body language, are respectful;
- informing clients and families of their right to make a complaint and assisting them if requested or required;
- informing clients and their families about the recommendations we make to various decision-making bodies;
- posting, distributing and explaining the content of, and reasons for, residential program rules and the consequences of failing to respect them;
- providing continuity within our services in accordance with individual intervention plans;
- working with other organizations to ensure complimentary services that meet the needs of our clientele.

**In any intervention the protection and interests of the child take precedence over all other considerations. In any conflict between the rights and interests of a child, and the rights and interests of the child’s parent, the rights and interests of the child shall prevail.**

#### **Application of the Code of Ethics**

As employees of Elizabeth House, we incorporate our Code of Ethics and ethical considerations into the decisions that we make, in the way we intervene with our clients and their families, in the way we interact with each other as colleagues and co-workers, and in the way we carry out professional acts. We constantly strive to create an atmosphere of understanding and caring within Elizabeth House.

#### **Avoiding Conflicts of Interest**

Employees, volunteers, stagiaires and persons under contract to Elizabeth House are encouraged to discuss situations in which there may be a perceived or a potential conflict of interest with their supervisor or with the Executive Director, so that the situation can be resolved in such a way that no conflict of interest arises.

#### **Reporting Conflicts of Interest**

Any person who believes that a conflict of interest may or does exist must bring the situation to the attention of the Executive Director or her or his delegate (for employees, volunteers and persons employed by or under contract to Elizabeth House), or to the attention of the President of the Board of Directors or her or his delegate (for members of the Board, and in the case of a real or potential conflict of interest involving the Executive Director).

#### **Investigating Conflicts of Interest**

Should the allegations or situation concern an employee, a volunteer, or a person who has been hired to perform a service for Elizabeth House, the Executive Director shall conduct an inquiry into the situation or allegations, or designate individuals to do so.

Should the situation or allegations concern the Executive Director or a member of the Board of Directors, the President or Vice - President of the board may then designate individuals to conduct inquiries into the allegations or situation. The person in question shall be informed in writing that he or she is the subject of an inquiry.

The results of the inquiry will be submitted in writing to the appointing body. The person under inquiry shall receive a copy of this report.

If a potential conflict of interest is identified, the Executive Director or the Board of Directors shall take steps to ensure that it is avoided. If a conflict is found to exist, they will ensure that it is resolved, and that the clients' rights and interests are upheld.

### **Disciplinary procedures**

Any breach or omission of duty or standard prescribed under this code of ethics may entail the imposition of a sanction or disciplinary measures, which may include a warning, a reprimand, temporary suspension or dismissal, or in the case of a member of the Board of Directors, the temporary suspension of the member, or his or her removal from the Board, according to the seriousness and nature of the derogation.

Should the results of the inquiry result in a recommendation for dismissal, the matter shall be reviewed by a committee of at least two members. For employees of Elizabeth House, the committee shall consist of the Executive Director plus at least one other person appointed by her or him. If the conflict of interest involves the Executive Director, or a member of the Board of Directors, the committee shall consist of at least two members: the President or Vice-President of the Board, plus at least one other person.

All penalties shall be communicated in writing to the individual concerned.

All inquiries and any penalties imposed are to be confidential.

Individuals conducting inquiries as well as the individuals determining and imposing penalties cannot be prosecuted by reason of acts engaged in good faith in the performance of their duties and functions.

### **Integration of the Code of Ethics**

The code of ethics has been developed to help us fulfill our functions as we work together to help our clients. This document codifies much that is already in practice, and aims to clarify any points that might be ambiguous. Staff members, volunteers, stagiaires and contractual workers are encouraged to bring any questions or comments they may have about the code of ethics to their supervisor, or the Executive Director. Board members are encouraged to speak to the President of the Board of Directors, or to the Executive Director.

### **Clients' Rights**

#### **Everyone has rights**

There are many laws that govern what a person may do, what a person must do, what he or she cannot do, and what his or her rights are. The Québec Charter of Human Rights, the Civil Code and the Act Respecting Health Services and Social Services directly affect you as a client of Elizabeth House. The Youth Protection Act and the Youth Criminal Justice Act may also apply to you if you are under Youth Protection or placed at Elizabeth House under these laws.

#### **You have the right to**

- get an education through the public school system, if you are under 18;
- consult your file, if you are over the age of 14, by following set procedures;

- live in a place where you feel safe;
- have a continuity of care, stable relationships and stable living conditions which meet your needs
- have a lawyer, if you go to court;
- know what services are available, how to find them, and how to use them;
- receive services from Elizabeth House in English;
- get help from a child/youth worker, a counsellor, a social worker, or other professional;
- get help in a way that meets your needs as an individual;
- be treated with courtesy, fairness, respect, and understanding;
- have your opinion taken into account and participate in planning which concerns you;
- know what is happening and what decisions are being made about you.
- have your confidentiality respected so that information about you is protected, and can only be shared among people authorised to do so in order for you to receive treatment or services;
- to make a formal complaint if you are not satisfied with the way you are treated, and get help in doing so, if necessary, and to be supported by the User committee of the organization from which you receive services (the Elizabeth House user committee is called the Committee for Client Satisfaction and Support).
- Be accompanied by a person of your choice in processes affecting you unless this assistance is contrary to your interests, your rights or the rights of others.

**Elizabeth House is a rehabilitation centre for young mothers in difficulty. We have two types of clients: direct clients and indirect clients.**

- Direct clients are admitted to, or registered in, Elizabeth House programs.
- Indirect clients are not admitted to or registered in Elizabeth House programs, but have a family or emotional connection to direct clients.

**ALL clients of Elizabeth House, direct and indirect, have other, specific rights.**

**As a client of Elizabeth House you have the following rights:**

- to be actively involved in the planning and delivery of services to you and your child;
- to be informed as to what is going on, what plans are being made, and what progress your child is making;
- to consult your child's file, within the limits of the applicable laws;
- to get the help you need to understand your rights and responsibilities as a parent;
- to be free from exploitation or an invasion of personal privacy for the purpose of publicity or fund-raising efforts.

**Direct clients of Elizabeth House have added rights.**

You have the right to:

- know what Elizabeth House rules are, and what could happen to you if you do not follow them;
- get a copy and an explanation of the rules for yourself;
- participate in the development of your service and intervention plans, including setting the goals and objectives of these plans;

- have the goals and objectives of your service and intervention plans explained to you in a way that you understand;
- have your intervention plan reviewed to make sure your needs are being met.

**If you are admitted to the residential program have the right to**

- live in an age-appropriate environment that meets your developmental needs, with the necessary structure, routine, and rules to ensure care, protection, and security;
- get the medical help you need to stay healthy, and get help getting the medical attention if needed;
- personal privacy, within the rules set out by Elizabeth House, which ensure the protection and safety of all of our clients;
- communicate privately with your parents and/or siblings, unless a judge says you cannot;
- communicate in private with other people, unless the Director of Professional and Rehabilitation Services determines that it is clinically contra-indicated; only a judge or the Executive Director of the CIUSS can decide this.
- communicate in private with a lawyer, the Director of Youth Protection, the judge or clerk of the court, and/or the Committee for Client Satisfaction and Support by meeting with them in person, or speaking to them by phone or by writing to them;
- to get help in preparing for the change when you to move from Elizabeth House to another place.

If your baby or child is admitted with you, he or she has the same rights.

**Having rights also means having responsibilities**

In order to make the best possible use of the services available at Elizabeth House you must acknowledge that you have some responsibilities along with your rights.

These responsibilities include:

- respecting the rights of those who work at or receive services from Elizabeth House by respecting their right to safety, privacy, confidentiality and to be treated with courtesy, fairness, respect, and understanding;
- being involved in the planning for the services you receive;
- working with staff in finding solutions to problems;
- knowing and following the rules of the program in which you are involved;
- if you are dissatisfied with something, to speak up and be willing to work toward resolving the conflict.