



Community
Health Centre
Centre de santé
communautaire



Strategic Bridge Plan Report
October 1-December 31, 2021



MISSION

To improve, support and promote the health and well-being of the people and diverse communities we serve

VISION

A healthy and inclusive community for all

VALUES

These values guide the work of CCHC board, staff and volunteers:

Respect

Inclusiveness

Quality

Collaboration

Learning and Growth

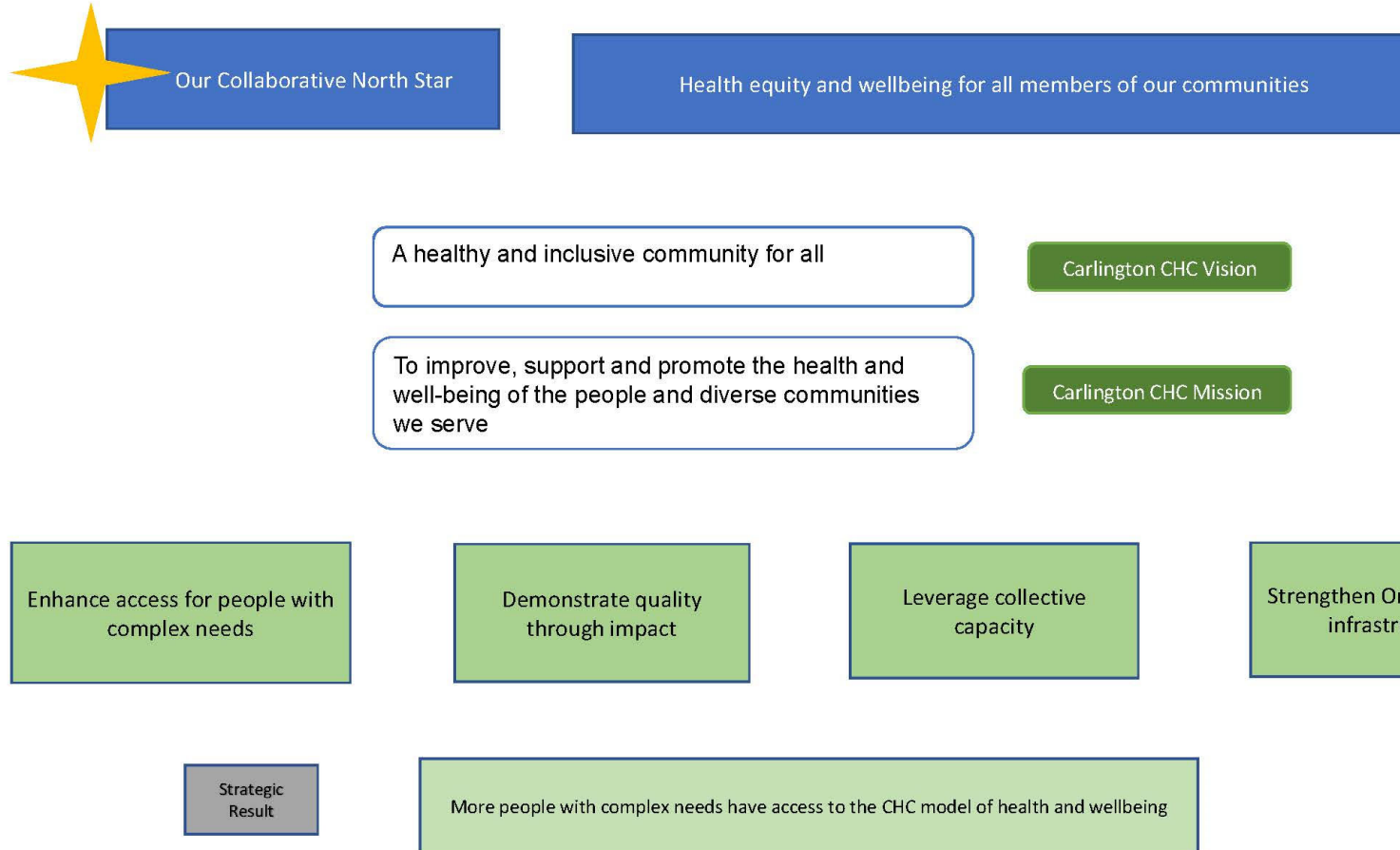
Person- and Community-Centered Care

Safety

Resourcefulness

The Centre's Mission, Vision and Values were developed by the Board of Directors in consultation with clients, community partners, volunteers and employees. They were, formally approved by Board of Directors on January 15, 2013 and re-affirmed May 18, 2021.

Carlington Community Health Centre Collaborative Strategic Plan 2018-2020



CARLINGTON CHC STRATEGIC BRIDGE PLAN

Preamble

The 2020-2021 fiscal year began with COVID-19, forcing Carlington to adapt and develop different ways of responding to the needs of our clients and neighbours impacted by the pandemic. Much of what was done in the last year was directly influenced by shifts in how care is provided, expectations imposed by all levels of Public Health and the roles and responsibilities of partner agencies in responding to the pandemic.

The 2021-2022 fiscal year begins with higher number of cases of COVID-19 than the same time last year, the emergence of more virulent variants, and the much-anticipated deployment of vaccines worldwide. The impacts from this pandemic will remain unpredictable for some time, making long-range planning virtually impossible. This 18-month bridge plan will allow the Centre to focus on continued COVID-19 response and recovery, while maintaining flexibility to adapt when necessary as the environment changes.


Approved by the Board of Directors March 16, 2021

STRATEGIC PRIORITIES	ACTIONS	OBJECTIVES	OUTCOMES Q1 & Q2	OUTCOMES Q3
<p>ENHANCE ACCESS FOR PEOPLE WITH COMPLEX NEEDS</p>	<p>Timely in-person appointments available as appropriate</p>	<ul style="list-style-type: none"> Reduction in PHC appointment cancellation and no-show rates 	<ul style="list-style-type: none"> Continued to offer medical appointments by phone or virtually through a secure encrypted platform. 	<ul style="list-style-type: none"> Wait time for the general counselling services has decreased from an average of 46 days to 42, despite one counsellor being on leave for 6 weeks
	<p>Timely virtual and/or telephone appointments available as appropriate</p>	<ul style="list-style-type: none"> Increased participation in programs 	<ul style="list-style-type: none"> Youth Counsellor/Trans Health Worker and VAW counsellor are now accommodating more in-person appointments 	<ul style="list-style-type: none"> PHC has resumed evening access to the clinic one day/week
	<p>Timely crisis intervention for emergency food, mental health counselling and harm reduction</p>	<ul style="list-style-type: none"> Client experience surveys reflect that 80% of respondents are able to access programs/services 	<ul style="list-style-type: none"> ACTT clients continued to be seen clients in-person. 	<ul style="list-style-type: none"> ACTT continued to see clients in-person and assist them with engagement in vocational, educational and/or social activities
	<p>Deliver daytime, evening and weekend programs, in-person and/or virtually on multiple platforms as appropriate</p>	<ul style="list-style-type: none"> Client experience surveys reflect that 80% of respondents are able to obtain an appointment when needed 	<ul style="list-style-type: none"> Annvale Headstart Nursery School operated in-person, as usual. All other programs, including early years, counselling, health promotion, youth and community engagement, have operated through a combination of virtual and in-person. Many program participants expressed an improvement in their mental health and feelings of isolation Results from the client experience survey reflect that 97% of respondents are able to access programs/services and 78% were able to obtain an appointment when needed. 	<ul style="list-style-type: none"> Annvale program remained opened at partial capacity. EarlyON programs offered in-person and virtually. Additional outdoor programs offered 4 outdoor activities per week. Intake Counsellors continued to see clients in person, with some virtual appointments. It is a priority for Intake to address all incoming referrals and requests within 48 hours. A contingency plan is in place should the counsellor be unable to meet this deadline. Health Promotion staff continue to deliver in-person group programming. PHC continues to offer virtual, telephone and in person appointments and same day urgent appointment for clients when needed. Our triage team follow up with clients and determinate urgency.

STRATEGIC PRIORITIES	ACTIONS	OBJECTIVES	OUTCOMES Q1 & Q2	OUTCOMES Q3
				<ul style="list-style-type: none"> Youth programs resumed in-person, including the SWAG program Results of the client experience survey reflect that 96% of respondents were able to access programs/services and to obtain an appointment when needed
	<p>Improve access to community-based mental health services</p>	<ul style="list-style-type: none"> Reduction in number of in-hospital psychiatric services 	<ul style="list-style-type: none"> Physicians meet monthly with ACTT psychiatrist for case conference/support w management of psychiatric meds to maintain client stability and avoid unnecessary emergency room visits/admissions for mental health disorders There was a reported 98% reduction in hospital bed days compared to 2 years pre-service. 	<ul style="list-style-type: none"> In this fiscal year, 10 new ACTT clients were assessed for service Y-T-D there has been a 96.4% reduction in hospital bed days compared to pre-service Counsellors interact with 175 unique clients and 121 new clients (547 encounters). PHC physicians meet monthly with ACT psychiatrist for case conference/support w management of psychiatric meds to maintain client stability and avoid unnecessary emergency room visits/admissions for mental health disorders
<p>Narrative</p>	<ul style="list-style-type: none"> The 96.4% reduction in hospital bed days (18,468) compared to 2 years pre-service is a savings of \$12,004,200 for hospitalizations (based on Ontario data \$650/bed day). ACTT continues to highlight vocational, educational and recreational activities, as it pertains to the psychosocial rehabilitation of our clients. Throughout the pandemic, opportunities for these activities dwindled which led to an increase in social isolation and a loss of social skills. The Carlington ACT team works diligently to get clients out of the house, connecting with meaningful activities. The Carlington ACT team ensures opportunities for face-to-face contact with appropriate PPE on visits currently and throughout the pandemic. The healthy lifestyle class has continued to provide unique opportunities for our clients (i.e. boxing lessons, the YMCA, alpaca farms). During this quarter, the Carlington ACT team has started a creative writing class. 			

STRATEGIC PRIORITIES	ACTIONS	OBJECTIVES	OUTCOMES Q1 & Q2	OUTCOMES Q3
	<ul style="list-style-type: none"> • ACTT continues to offer support to clients in accessing COVID 19 vaccinations, with approx. 83% having now received their 1st or 2nd dose. ACTT RNs have offered their support during vaccination clinics held at CCHC in December and several ACT clients accessed the clinics. • Annavale experienced significant challenges in filling vacant spots post entry into JK for 16 Annavale children in September, which is an unusual situation. New families’ hesitancy/fears in sending their little ones to daycare for the first time accounts for the biggest issue we encountered. Annavale ran with several empty spots from Sept to Dec 2021, leading to revenue loss this calendar year, which will be offset by reserve funds. Annavale also struggled to maintain mandated staffing ratio due to increased absenteeism, in part the result of stringent isolation directives when symptomatic, and also staff exhaustion working in childcare during COVID. Recruitment efforts to bring additional relief staff onboard have been very laborious. • SWAG programming was finally able to resume in-person, under a new roof at Notre-Dame High School, a long-time partner of the program. With a majority of SWAG participants historically coming from NDHS, this move makes perfect sense and acknowledges the benefits of this program to at-risk students. • Prenatal, breastfeeding, infant-feeding and early postpartum parenting support continued to be provided virtually (and in-person for breastfeeding/infant-feeding) or phone support. At least one other CHC adopted CCHC’s model of group-based breastfeeding support, which allows limited in-person lactation consultant services to focus on more acute needs. • Feedback from participants of Health Promotion’s “Women In the Wild” program: <ul style="list-style-type: none"> ○ <i>“Women in the Wild has been one of the most positive experiences of the pandemic for me. I love the chance to visit outdoor locations that wouldn't otherwise be accessible to me with a group of positive, like-minded people.”</i> ○ <i>“This group is truly amazing. It has allowed us woman to reconnect with each other and grow as a family. This group offers support, healthy relationships, a safe place and long-lasting friendships. I honestly love this group it's exactly what has impacted my life and has changed it in an amazing way. I am ever so thankful.”</i> ○ <i>“This group continues to amazingly connect me with others and decreases the isolation. Especially in COVID. In person group is so essential to keep those social contacts. I have no idea where I'd be without this group.”</i> • PHC continues to progress and transition back to more in person care and will continue to support clients with barriers to in-person access, by offering both virtual and phone visits, as appropriate for care. • PHC continues to support staff during the ongoing pandemic crisis by ensuring adequate supply of appropriate PPE and following Public Health Ontario guidelines for in-person appointments with clients. 			

STRATEGIC PRIORITIES	ACTIONS	OBJECTIVES	OUTCOMES Q1 & Q2	OUTCOMES Q3
<p align="center">DEMONSTRATE QUALITY THROUGH IMPACT</p>	<p>Capture impact of programs and services through meaningful data and qualitative success stories</p>	<ul style="list-style-type: none"> • Program evaluation data supports quality impact for participants • Client experience surveys reflect that 80% of respondents are satisfied with the quality of programs /services, whether in-person or virtual • Client experience surveys reflect that 80% of respondents feel that programs/services have a positive impact on their health and wellbeing 	<ul style="list-style-type: none"> • 92% of ACT clients surveyed reported an increase in quality of care and 100% reported feeling that they are involved in decision about their care • 97% of respondents to the client experience survey reported being able to access programs/services that they need; that they were satisfied with programs/services; and that programs/services have had a positive impact on their health and wellbeing • 100% of respondents to the client experience survey, to whom the question is applicable, reported that program/services were able to accommodate their disability • Program evaluations for virtual prenatal education reflect that 100% of respondents were satisfied with virtual programs and that programs have had a positive impact on their wellbeing • 78% of participants in a community kitchen program reported improved mental health and 100% reported a greater sense of belonging 	<ul style="list-style-type: none"> • Family-Caregiver Ontario Perception of Care survey was deployed in October 2021, with results reflecting a positive experience with service provided by the Carlington ACT Team. • A needs assessment was conducted in the Alexander/Caldwell community neighbourhood. Priorities identified by residents included safety and security, food security, services for youth and seniors. • Feedback from the ESL and Citizenship classes praised the instructions and commented on how much the classes assist them with the settlement in Canada. • A Sacred Fire Event created a gathering point in Caldwell, bringing people together to foster positive relationships within the neighborhood. Activities included Indigenous storytelling for children, charcoal painting and tasting bannock. • EarlyON served 153 unique adults and 124 unique children through a variety of virtual and in-person programming, for a total of 1,081 adult and 863 children encounters.

STRATEGIC PRIORITIES	ACTIONS	OBJECTIVES	OUTCOMES Q1 & Q2	OUTCOMES Q3
				<ul style="list-style-type: none"> Client survey results reflect that 94% of respondents were satisfied with the quality of programs/services Client survey results reflect that 90% of respondents feel that programs/services have had a positive impact on their health and wellbeing
<p>Narrative</p>	<ul style="list-style-type: none"> At one of the meals, a single mother, newly arrived to Canada with her 10-year-old son, was introduced to a 60-year-old male volunteer. This man offered to tutor the son in English so that he would not miss school. In 4 months, the child was able to catch up to his grade level and then started reading Harry Potter books. This gentleman has become a positive role model for this child and has helped this family with settling in to a new country and neighbourhood. Feedback from participants from the Sacred Fire: <ul style="list-style-type: none"> <i>“I’m Mi’kmaq. My great-grandmother was in a residential school. All our history and traditions were wiped clean. Lost. I think about this all the time; it makes me so sad. I have a niece and I really would have loved to share the culture with her, but I can’t”.</i> <i>“I’m so glad I came out for this. I didn't want to miss it. My niece is one of the missing Aboriginal girls. It’s been years. And it’s very difficult still. Never found. It’s heartbreaking for the family. But what can we do? We hope.”</i> <i>“There is a very rich history here that we know nothing about. We need to bring these traditions to communities everywhere. I had my first smudging ritual today. It was amazing”.</i> Although no formal program evaluation surveys were done in Q3, anecdotally, EarlyON clients are feeling extremely grateful of our EarlyON teams efforts to continue offering a variety of activities, whether online or in-person in safe manner during these difficult time. Clients often expressed feeling isolated and the EarlyON programs gave them an opportunity to meet new people in a COVID-safe way. Client feedback: Prenatal/ Early Post partum Parenting groups: <ul style="list-style-type: none"> <i>“I sincerely want to thank you and Carlington community health for everything you do for the community and especially for what you did for me. The pregnancy sessions you hosted were very helpful during my labor and delivery process. I knew what to expect and could make informed decisions. The</i> 			 <p><i>Indigenous Story Teller, Daniel Richer</i></p>

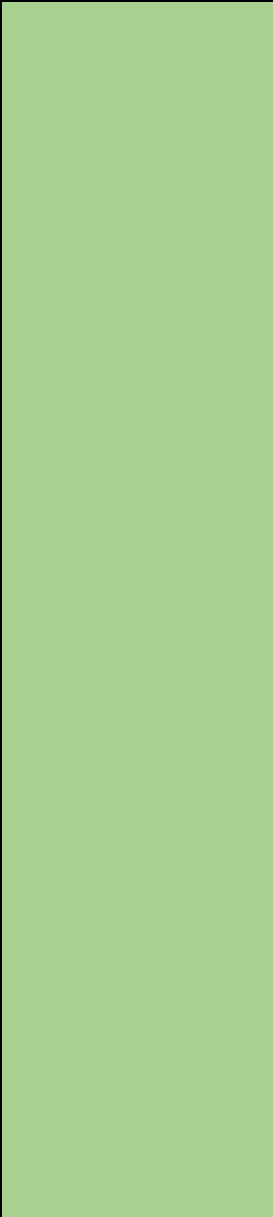
STRATEGIC PRIORITIES	ACTIONS	OBJECTIVES	OUTCOMES Q1 & Q2	OUTCOMES Q3
	<p><i>sessions were highly interactive and your knowledge and honest feedback regarding various pregnancy, post-partum and newborn care topics were very insightful. What I liked the most was how informative the sessions were and how patiently you answered all questions the participants had. Thank you</i></p> <ul style="list-style-type: none"> ● Parenting education group: <ul style="list-style-type: none"> ○ <i>“I feel more confident in being responsive and better equipped to respond to people who think I should parent differently. This I think has impacted my mental health since I'm better able to separate what is unsolicited advice from whether I'm a "good" mother”</i> ○ <i>“Surprisingly, the weekly zoom meetings have at times been the highlight of my week. I remember feeling refreshed, happy and supported after the meetings! These little social times makes you feel that you are not alone struggling and that no questions is stupid.”</i> ● Annavale Headstart: <ul style="list-style-type: none"> ○ <i>“I just wanted to thank you and everyone at Annavale the gifts to the girls and the gift cards are just wonderful, we are extremely grateful for everything you guys do. I won't lie, I cried a little when I opened that envelope. I hope you all know how truly amazing you all are and how appreciated you are. From C., G. and I, we would like to wish every one of you a merry Christmas and happy holiday 🎄🎄”</i> ● Youth programs: <ul style="list-style-type: none"> ○ <i>From our REDBLACKS Youth-Athlete Mentoring program: What mentoring means to me</i> 			
<p style="text-align: center;">LEVERAGE COLLECTIVE CAPACITY</p>	<p>Address food insecurity for clients/community residents through:</p> <ul style="list-style-type: none"> ● Health food programs ● Provision of emergency food, vouchers or gift cards 	<ul style="list-style-type: none"> ● Program evaluation data supports need is being met ● Client experience surveys reflect that 80% of respondents feel that their needs are being met 	<ul style="list-style-type: none"> ● With the addition of a second intake worker, increased outreach for food support and hot food delivery ● Health Promotion offered 16 food programs during this reporting period ● Clients who identified as food insecure were supported with food resources and internal referrals to Intake ● Results of the client experience survey reflects that 97% of respondents feel that their needs are being met 	<ul style="list-style-type: none"> ● More than 5% of ACTT clients are connected to 3rd party providers to improve care coordination (i.e. housing stability) ● Psychiatric resident placement with ACTT ● Annavale continue to provide ER food baskets to families who need to self-isolate. ● 94 participants received hot meals from the Mission Food Truck in the Shillington neighbourhood. ● 589 participants in the Van Lang community enjoyed a hot meal prepared by local volunteers

STRATEGIC PRIORITIES	ACTIONS	OBJECTIVES	OUTCOMES Q1 & Q2	OUTCOMES Q3
				<ul style="list-style-type: none"> 89% of clients who identified Food Insecurity had a referral and follow up
Narrative	<ul style="list-style-type: none"> Residents of Tamir group housing complex are very grateful for the opportunity to connect with neighbours and share in a meal. Two residents who face both physical and mental disabilities went out of their way to purchase special pastries for the volunteers of the Van Lang Community Kitchen to thank them for their service to the community. 25 Annavale families were connected to the Snowsuit Fund. 			
STRENGTHEN ORGANIZATIONAL INFRASTRUCTURE	Demonstrate use of technology to improve program and service delivery and evaluation	Efficient and reliable data, program evaluation and client experience feedback	<ul style="list-style-type: none"> Various virtual platforms such as Zoom, Facebook and YouTube have been used for service delivery, although virtual program evaluation remains a challenge for some programs due to literacy level of participants Client demographic updates and client surveys are completed through OCEAN, an add-on to PS Suites EMR 	<ul style="list-style-type: none"> On-going use of various virtual platforms for service delivery. Virtual program evaluation still a challenge in some program due to literacy level. Improved IT ticketing system to report IT issues in order to resolve IT issues more quickly and smoothly. Changed our email domain and branding to a more intuitive carlingtonchc from carlington.ochc Collection of client surveys and demographic data updates are now done through the PS Suites add-on OCEAN tablet both in person and by email The PSS OCEAN add-on allows for online booking; automatic client appointment reminders the day before, which the client can confirm; completion of Virtual Care Consent form for phone/video appointments; completion of a COVID screening questionnaire for in-person appointments; links to client survey

STRATEGIC PRIORITIES	ACTIONS	OBJECTIVES	OUTCOMES Q1 & Q2	OUTCOMES Q3
				<p>automatically emailed to clients the day after their PHC appointment</p>
	<p>Implement post-pandemic return to work strategy</p>	<p>Staff successful return to work onsite</p>	<ul style="list-style-type: none"> • Staff are kept informed about re-opening plans, engaged and connected during the transition, through regular touch-points and staff meetings. • Staff have been advised of the mandatory COVID vaccine policy that takes effect January 1, 2022 • HR is keeping abreast of best practices for return to work and mitigation strategies for refusal to work. Legal counsel will be consulted as required. 	<ul style="list-style-type: none"> • Planning continues safe return to work onsite as restrictions continue to ease • Teleworking and flexible work arrangement continue for some staff at the Centre, based on their position and business needs. • Health & Safety measures continue to be the highest priority for all individuals. All staff have been expected to adhere to H&S protocol while on-site (e.g. screening tools, social distancing, masking, PPE as required, etc.). • As per Directive 6 was implemented, encouraging and advising staff that a Mandatory Vaccination Policy would be underway, effective January 2022 to ensure safety for themselves and others, as a Health Centre • In this quarter 4 COVID vaccination clinics were held and approx. 600 doses were administered. PHC staff were prioritized for vaccination so they could receive their 3rd dose. • Staff continue to be supported with PPE and rapid testing so they can safely work onsite

STRATEGIC PRIORITIES	ACTIONS	OBJECTIVES	OUTCOMES Q1 & Q2	OUTCOMES Q3
	Develop strategy for post-pandemic delivery of programs and services	Blueprint for which programs and services will continue to be offered via virtual platforms and which will resume in-person	<ul style="list-style-type: none"> The Centre is taking a gradual approach to re-integrating staff back to the workplace, assessing both client and program needs to determine which staff are required onsite, while trying to align with the approach other CHCs are taking around program deliverables. A hybrid approach is being considered in order to remain flexible so sustainable program needs can continue to be delivered. In the next quarter, the Clinic will transition back to in-person and evening appointments in accordance with OMA/CPSO and OPH guidance wrt PPE. 	<ul style="list-style-type: none"> Essential staff have already returned onsite based on operational and program needs Policy has been developed with respect to working from home It will be left to manager discretion to determine what staff may work remotely and not PHC will continue to transition back to pre-pandemic hours including 3 evenings per week
	Track the wellbeing of Centre staff to ensure issues are addressed and staff feel supported	<ul style="list-style-type: none"> Periodic staff “pulse check” surveys reflect that 80% of respondents feel supported Periodic staff “pulse check” surveys reflect that 80% of respondents feel that that management is responsive to issues identified by staff 	<ul style="list-style-type: none"> Staff were not surveyed in this reporting period; however, resources were shared with staff around health & wellness tips, LifeWorks, group benefits (incl. mental health coverage). Management continues to encourage use of annual leave and sick time as needed and promotes better life-work balance. Regular team meetings are keeping staff connected and supported. A new performance appraisal tool is being implemented, which will include more frequent check-ins with staff. 	<ul style="list-style-type: none"> Regular team meeting include a “check in” component Staff engagement survey was deployed in December, specific to mental health and staff well-being to better understand how staff are feeling and their coping strategies. Results reflect that the pandemic is taking a toll. HR has ensured that staff are aware of supports available to them. Senior Leadership is looking at what it can do to address issues in the short and long term.

STRATEGIC PRIORITIES	ACTIONS	OBJECTIVES	OUTCOMES Q1 & Q2	OUTCOMES Q3
			<ul style="list-style-type: none"> Another 'pulse check' survey will be deployed in the coming months. 	<ul style="list-style-type: none"> A guest speaker will be invited to address the March staff meeting on mental health in the workplace
	<p>Demonstrate commitment to diversity, inclusion and anti-discrimination, with a focus on racial diversity</p>	<ul style="list-style-type: none"> Working group established to examine policies, procedures and practices, and advise leadership on ways CCHC can achieve a more diversified workforce 	<ul style="list-style-type: none"> CCHC's practices and procedures are being reviewed for ways to enhance DEI. Job postings have incorporated language that is more inclusive and the website update now includes language to reflect equity, diversity and inclusion in hiring practices. Management is committed to building a culture of inclusivity and is exploring establishing a DEI committee. A staff survey will be deployed to provide a sense of training/development needs wrt DEI. 	<ul style="list-style-type: none"> ACTT continues to seek out educational opportunities to enhance knowledge of the diverse communities that we serve. A session with the focus on diversity and equity during with OCISO has been arranged for January 2022. We held an all staff training meeting, conducting sub-groups for staff to share thoughts and suggestions with DEI (e.g. what it means to them, what they would like to see, sharing personal experiences, etc.). Into 2022, the intent is to support DEI initiatives from staff training/learning opportunities. Perhaps a public speaker and/or webinars to acknowledge and learn more specifically with DEI, as individuals and as a team at Carlington. HR continues to share DEI opportunities for the Management team to consider and support. PHC management ensures staff involved in interview panels are aware of the types of questions allowable under the Human Rights Code

STRATEGIC PRIORITIES	ACTIONS	OBJECTIVES	OUTCOMES Q1 & Q2	OUTCOMES Q3
	<p>Maintain and strengthen community partnerships</p>	<ul style="list-style-type: none"> CCHC is represented at key sector-specific tables 	<ul style="list-style-type: none"> The ACT Team collaborated with 3rd party providers to improve care coordination and increase housing stability for clients ACTT has collaborated with Ottawa Innercity Health, Salus and the CMHA with the COVID vaccine effort with 10 clinics, three ½-day outreach Health Promotion participated in the OPH Homebound and “Airplane Model” projects, in which clients were vaccinated in their homes, and the Pop-Up vaccine clinics where staff went door-to-door in the neighbourhoods to arrange vaccine appointments A new partnership was formed with Cornerstone Women’s Shelter to provide outreach services to women housed in our community Collaborated with OPH to offer COVID-19 vaccination clinics, both onsite and in the community Continued collaboration with Community Diabetes, Lung Health and Chiropody to meet client needs Director of PHC meets quarterly with CHC coordinators and Public Health Ontario around infection prevention and control 	<ul style="list-style-type: none"> CCHC continues to participate in various table at the local and municipal level, including: CDF tables, Ottawa Coalition of CHRCs, Food and Nutrition Security Working Group, Post-Incident Neighbourhood Support Network (PINS), Community Development Network, City of Ottawa Child Care and Early Years System Planning Advisory Group, Infant and Early Childhood Mental Health committee, Interchange tables Y-T-D, community volunteers have provided 777 hours teaching and guiding participants in the ESL & Citizenship classes and the Van Lang Community Kitchen. Director of PHC meets weekly with the health services directors at other Ottawa CHCs to plan /collaborate/strategize PHC meets quarterly with other CHC coordinators and Public Health Ontario at the eastern regional table to address updates/changes/questions related to Infection Prevention and Control

STRATEGIC PRIORITIES	ACTIONS	OBJECTIVES	OUTCOMES Q1 & Q2	OUTCOMES Q3
			<ul style="list-style-type: none"> • Director of PHC meets weekly with health services directors of Ottawa CHCs to plan/collaborate/strategize • Director of PCYS is active with the Community Development Framework (CDF) • PCYS is at the table for City-led Childcare & Early Years System Planning Advisory Group, and Infant & Early Childhood Mental Health committee • PCYS is present at Interchange tables and CDF youth sub-committee 	
Narrative	<ul style="list-style-type: none"> • ACTT continues to view volunteers as an important and valuable resource for its clients however, due to COVID-19 restrictions and other logistical barriers, there have not been new volunteers. Clients will be connected with volunteers in 2022, subject to restrictions being lifted. • 			
HEALTH EQUITY	Put Health Equity Charter into action	Strategic plan report demonstrates integration of the HE Charter		
Narrative	<p>The past year has been anything but “normal” for Carlington, its staff and its clients. With restrictions still in place, and an abundance of caution being exercised for the protection of staff and those who require access to our services, the opportunities to solicit feedback from clients on their experiences with CCHC’s services has been significantly limited.</p> <p>The Centre relies largely on feedback from program participants to gather information about the quality aspects of what has been delivered. Many of the impressions are subjective, and reflect the personal experiences of those who have come to receive supports.</p> <p>Other feedback comes in the form of more public recognition. For example, the United Way of Eastern Ontario conveyed a Community Builder Award on the coalition of organizations that played significant roles in the pandemic response – a group to which Carlington proudly contributed. CCHC has also been recognized in the media for its efforts in vaccine education and administration; ensuring that the people who have been disproportionately impacted by the pandemic are not further marginalized by remaining isolated.</p>			

STRATEGIC PRIORITIES	ACTIONS	OBJECTIVES	OUTCOMES Q1 & Q2	OUTCOMES Q3
	<p>CCHC's on-line presence has been a source of incredible accolades. For example, the Parent, Child and Youth team has been delivering an online perinatal care program that has had literally hundreds of participants, and has received recognition from the Ottawa Hospital, Ottawa Public Health, CMNRP and other partners for its accessibility and for the wealth of information shared.</p> <p>In the most recent client survey, the feedback was overwhelmingly positive. The areas identified as pain points have been addressed, as much as possible (access to appointments, struggles with the phone system), and have been noted for future consideration.</p> <p>Anecdotal feedback has all been expressions of appreciation for the supports received, the accessibility of services, in spite of difficult times, and for the caring and professionalism demonstrated by CCHC staff.</p>			