



2014

ANNUAL REPORT





Our Mission

Children First in Essex County partners with families and the community to provide individualized support for children (birth to 6 years) with developmental and/or mental health challenges, helping them reach their full potential through early identification, education, and clinical intervention.



Our Vision

Children First is a leader in providing services where:

- All children and families are supported to help them reach their full potential;
- Children are supported to feel a sense of inclusion and belonging in the community;
- Relationships are nurtured with families, partner organizations, and the community to assist children who have developmental and/or mental health challenges;
- Timely and tailored supports are provided by professional staff who use innovative evidence-based practices.

Our Values

We believe in:

- Supporting the child's best interest and recognizing that family relationships are the foundation for growth and learning.
- Providing timely, flexible services that support children to reach their potential.
- Promoting continuous learning, innovation and evidence-based services among our valued staff.
- Honouring our partners and committing to work together to address the unique and evolving needs of children, families, and the community.





A MESSAGE FROM THE PRESIDENT

It has been my pleasure to serve as President of the Children First Board of Directors for the past year. My task was eased by the support I have received from my talented and committed fellow directors. I am particularly grateful to Past President Paul Layfield. Paul's dedication and many years of experience at the agency have been reassuring during my first year as President. I also salute two departing members of the Board, Melissa Coletti and Dwayne Wessel. Their talent and wisdom will be missed.

The social service environment in which Children First operates is on the cusp of dramatic change. The long trumpeted Mental Health Services Transformation initiative has arrived. Windsor/ Essex was one of the communities selected to implement the first phase of serve reorganization. In practical terms, a "Lead Agency" will be selected by the summer and will begin preparing to assume oversight and management of local services by the end of the year. The

transformation initiative will have profound effect on how Children First delivers its mental health services and programs.

Mental health transformation is only one of the change initiatives that will be affecting service delivery. In September of this year, the implementation of Full Day Learning will be complete and the migration of four year olds to the school system is already having dramatic impact on the child care sector. The delivery of provincial speech and language services is currently under review. More recently, the provincial government announced a new initiative intended to reorganize the delivery of special needs services.

In short, virtually all agency areas of service are either under extensive review or experiencing fundamental change. While all this occurs, agency staff continue to toil on behalf of the best interests of children with special needs. Agency budgets have been stagnant for several years and on a daily basis, staff continue

to stretch too few resources to too many families with significant needs. They do so while simultaneously adjusting to new approaches to service, increased accountability measures and demands for more evidence based approaches to service. I am grateful for the diverse talents and commitment of agency staff.

Despite the many challenges, I am confident that the future for Children First is bright. Over the past several years, we have reorganized services, trained staff on evidence based service approaches and invested in much stronger accountability mechanisms. We have done so while remaining true to our vision and values that focus on supporting children and families to reach their full potential within their own communities. So long as the agency remains focused on its vision and values, Children First will prosper.

BRIAN DUBE
BOARD PRESIDENT

A WORD FROM THE EXECUTIVE DIRECTOR

One year ago, in this report, I noted the dramatic changes to services that had been implemented over the previous year. One year later, the rapid pace of change continues unabated. The implementation of mental health transformation will have dramatic impact on service delivery. For the first time, Children First submitted its annual budget proposal using the new core functions format. I am pleased that our proposed realignment with the new system has been approved. The transformation timetable calls for the imminent announcement of a Mental Health Services Lead Agency. This will be followed by significant community service planning and the eventual submission of future year budget proposals to the lead agency for review and approval.

A key point of emphasis for the transformation agenda has been the drive for stronger outcome measurement. Children First's response was the implementation of the Child and Adolescent Needs and Strengths (CANS) needs identification tool. The CANS includes pre and post testing measures to quantify goal attainment. An external researcher was retained to conduct a research study and her results are included elsewhere

in this report. I am very pleased to note that the study results confirmed that agency services are effective and statistically significant growth was achieved during treatment. Children First has been one of the first agencies to conduct this type of study to measure the degree of change achieved by the families and children served by the agency.

Over the past year, demands for service at Children First have remained high, contrary to the demographically driven reductions being experienced by other agencies and sectors. Referrals for service have increased in each of the past six fiscal years. In the last year, 864 referrals for service were received representing an increase of 26% in comparison to 2008-09. On the one hand, these increases are cause for celebration as they suggest that the efforts of the Board directed Marketing Committee are bearing fruit and more families in need are being connected to the agency. However, it must be noted that during the same time period, no Ministry base budget allocation increases have occurred. In certain service areas, revenue has actually been reduced and fixed costs (such as the recent changes in postal fees) continue to rise. Clearly, Children First

is living the mantra of "doing more with less" but the point is quickly being reached where demands for service exceed what can reasonably be provided with current resources.

Children First's greatest assets are its professional and dedicated staff and Board of Directors. I am continuously impressed by the commitment levels and positive outlook of staff who labour to provide the best service possible under trying and stressful circumstances. They have coped with the seemingly continuous changes to how they do their work and drawn strength from the support of their colleagues. I wish to particularly salute Cathy Martel for her years of dedicated service as she moves to a new chapter of her life with retirement. I am also very thankful for the ongoing support of the Board of Directors who not only attend monthly Board meetings but also roll up their sleeves and devote their personal time to ongoing committee work and agency functions. Thanks are due in particular to two departing Board members, Dwayne Wessel and Melissa Coletti. With great appreciation for their efforts, we wish them well in the future.

MARK DONLON

2013-14 BOARD OF DIRECTORS

Brian Dube
President

Jennifer Pestrin
Vice President

Marina Iannitelli
Treasurer

Andrea Tremblay
Secretary

Paul Layfield
Past President

Bernadette Dzugan

Kate Dunlop

Rosemary Waldron

Melissa Coletti

Dwayne Wessel

Kristen Micallef

Rick Farrow

Research Study Confirms Service Effectiveness

Children First uses the Child and Adolescent Needs and Strengths practice to guide intervention services. This evidence based approach includes an assessment process that is used across Canada and internationally to identify specific needs with families and guide goal setting. One of the system's advantages is that it provides for both pre and post testing to measure outcomes. The agency contracted with an independent research psychologist, Dr. Jessica Sartori, to conduct a data analysis of 96 families that completed both the pre and post testing procedures. The results of the study were submitted to the agency in March, 2014. Study findings included:

- **Children and families showed significant improvements in scaled scores across all domains.**
- **Children and families showed the greatest improvements in the most critical areas: Life Domain Functioning and Child Strengths.**
- **For each domain, more than 50% of children and families experienced improved CANS scale scores, the highest being Life Domain Functioning with about 75% experiencing improved scores. Additionally, about 80% experienced improved Total Needs Scores.**

Based on her findings, Dr. Sartori concluded:

"The results clearly show that clients improved between Intake and Discharge. Moreover, changes in client scores were significant across most of the domains. Once again, this speaks to the agency's service quality and staff should be commended".

SERVICE HIGHLIGHTS

OUR WORK WITH CHILDREN & FAMILIES - April 1, 2103 to March 31, 2014

Over the past year staff have settled into the various 'streams' (Mental Health, Infant & Child Development, Child Care Support Services and Intake & Brief Services). The following summary outlines a few of the highlights that each stream has been working on this past year, most of which cross the artificial 'stream' boundaries. For more complete information on the services offered, visit our website: www.children-first.ca

Intake & Brief Services

In response to the release of the Comprehensive Mental Health and Addictions Strategy document, much work is presently underway to refine our intake processes. This includes but is not limited to eligibility, needs and strengths assessment, and brief services.

In recognition of the challenges in responding to service requests for families experiencing separation and divorce, guidelines for Families in High Conflict were created this year for use by social work staff.

Mental Health

Children First sought out the assistance of the Centre of Excellence-Evidence In Sight Program to identify the most effective parent-child attachment based interventions used within the province of Ontario. Initial steps have been taken to train staff in the Circle of Security program to strengthen the current parent-child based work provided to children and their families. Fostering strong and healthy relationships between children and their caregivers is the foundation behind all Children First services.

Agency social workers took part in a certificate training program aimed

at understanding and treating childhood related trauma due to the increasing number of children who are presenting with trauma related difficulties. Often these children have experienced medical traumas, been witness to domestic violence, been involved with the local Children's Aid Society and/or had multiple foster placements. This training was helpful in bringing together what we know about the importance of a safe and secure attachment, brain development, the impact of trauma upon children and an evidence informed approach to supporting children along their journey to wellness.

Two social workers have been participating in the Bridging Family Conflict's Mandatory Information Program initiative and each conduct a minimum of 2 sessions per year.

Infant & Child Development

A review of current best practices and evidence informed approaches in the early intervention field has resulted in Children First exploring the Routine-based Early Intervention (RBEI) model. The RBEI is regarded as a perfect fit for the current mission, vision, values and strategic plan of the agency. The model emphasizes the importance of delivering early intervention services in the child's natural environment(s) using the child's daily routines at home, in the community or childcare setting. RBEI involves gaining an understanding of the family ecology; completing a functional family-centered needs assessment leading to functional child/family outcomes; and using a transdisciplinary team approach with the primary partner designated as the main contact with the family. The teams piloting the approach have found it very effective in their work with families. At this time, the organization is exploring broader

implementation of the RBEI.

Community Collaboration efforts continue to go well, with the development or revision of several protocols with partner Agencies. (Thames Valley Children's Centre, John McGivney Children's Centre, Healthy Babies Healthy Children, Windsor-Essex Children's Aid Society, School Boards, Summit Centre).

Due to the high risk for poor developmental outcomes, Children First has entered into agreements with the Neonatal Neuro-developmental and NICU follow up clinics to provide developmental screening at set intervals to children with the diagnosis of Neonatal Abstinence Syndrome (NAS) and to those children born prematurely between 33 and 37 weeks gestation until the age of 4.5 years.

Child Care Support Services

The child care stream has worked diligently towards establishing strong working relationships with child care operators and early learning professionals while meeting the needs of the children in classrooms. Over the past year, five new Resource Consultants joined the child care stream, bringing new energy and ideas to very dynamic teams.

Focus has been given to providing professional development to child care staff, aimed at increasing their capacity to support children with special needs to be full and active participants within their licensed child care programs. This professional development has been offered individually, to centres or as an entire community group of Early Learning Professionals.

As the agency moves forward with the Routines Based Early

Intervention (RBEI) model, the stream's emphasis on returning to a more transdisciplinary service model will be realized. As team members pilot the RBEI, they are finding the model helps to inform the Child and Adolescent Needs and Strengths-Preschool Ontario Comprehensive (CANS-POC) and assists them in collaborating with families and child care partners in an even greater way.

Children First was successful in achieving the Bronze level in Raising the Bar for Special Needs Resourcing agencies. Raising the Bar is a child care community collaborative that strives to raise quality across the child care sector.

We are Reaching Out

Groups: Children First provides a variety of groups in the community and internally for current families. Many are done in partnership with community partners. This year Children First introduced two new groups to its lineup. In September 2013 the Road to Resilience group began. This group is intended to

help children between 4 and 6 years old better manage their emotions, cope with stress and worry, develop healthy problem solving skills, and have positive relationships with others. This is achieved by providing concurrent groups for children and caregivers. Both groups focus on providing developmentally sensitive and appropriate strategies for children. Building New Dreams is a psychoeducational parent group offering support to caregivers who are parenting a child(ren) that are experiencing or have been recently diagnosed with developmental delays and the impacts of that on the parenting role.

In the past year 741 caregivers and 108 children participated in the 66 groups or seminars facilitated by Children First staff!! Evaluation feedback for these programs have been very favourable. Visit our website to learn more about the various groups and when they are offered at www.children-first.ca

Screening Clinics: In order to support early identification, the agency

continues to partner with other service providers to offer families 'one stop' screening and information clinics. Calling All 2 & 3 Year Olds is a large scale event that was offered twice this past year. A total of seven events were set up at 6 locations across Windsor Essex with 157 children registering and 43 visiting with Children First staff. Seven new referrals to Children First were received. Since September 2013, three Promoting Early Development Clinics have been conducted in partnership with the Health Unit, providing parents with information about development, behaviour, social and emotional functioning, nutrition and dental needs. This resulted in seven new referrals to Children First. Plans are being made to conduct these events on a monthly basis. Visit our website to find out the times & locations of the next clinics at www.children-first.ca

Community Events: Children First participated in twenty- one information and community fairs education events.



BOARD ANNUAL COMMITTEE REPORTS

MARKETING COMMITTEE

This year, we have accomplished a great deal with the Marketing Group.

Last fall we launched the new Children First website <http://www.children-first.ca> after much input and collaboration and we are very pleased with the results! Our goal was to provide the most up to date information, with easy, convenient access for our families, service providers, medical professionals and the community as a whole. We feel that we have accomplished this and are thrilled to have a perfect venue to the public.

We were also able to complete the roll-out of a new poster campaign, which was designed to reach a greater population of children and families in need of our service and support. Our posters are now posted in many public centres (i.e. Child Care Centres, Public Libraries, Community Centres, Medical clinics, Doctors offices, etc...).

Two campaigns that we will be renewing this year given the breadth of awareness they provided for us, which are the Ads we placed on a rotation of City Buses throughout the city as well as a campaign running our posters at Devonshire Mall over the late fall into Christmas season.

You will continue to hear us on the radio as well as community presentations. Again this year, several of our very talented professionals have continued to appear as guests on the Lynn Martin show as well as conducting community presentations to specific groups such as our new medical professionals, Windsor Rotary, etc...

Andrea Tremblay, Chair

RECRUITMENT AND NOMINATION COMMITTEE

The Committee, made up of Paul Layfield, Rosemary Waldron and Mark Donlon, met on a number of occasions during the year to review the requirements of the Board and to make recommendations to the Board for the addition of new Members.

Recognizing that the Board was short by two positions following the prior year's Annual Meeting, the Committee presented and were accepted the Board two new Board Members, being Kate Dunlop and Kristen Micallef. Kate is a lawyer practicing with Miller Canfield and Kristen is an accountant practicing with Roth Mosey. Both Kate and Kristen bring professional experiences and vigor to the Board in specific areas that will shortly be as reduced as a result of retiring long term Board Members.

Unfortunately, the Board was reduced due the resignation of Dwayne Wessel, as a result of a personal matter. Dwayne brought much experience and insight in the area of technology and he will be sorely missed by the Board. Additionally, existing Board Members have identified their desire to retire beginning with one Member retiring June 2014, one later in the year and yet another by the 2015 Annual Meeting.

The Committee is considering available names to replace positions currently vacated and anticipated to be soon vacated and the Committee welcomes names to be brought forward for such consideration. As is usual for the Committee, recruitment within our medical community is always desired, as is potential candidates from our consumers and the business community.

GOVERNANCE COMMITTEE

This past year our committee performed our standard annual reviews including the following:

- Board Performance Survey (included 2nd evaluation on line)
- Organizational Performance Review
- Annual Risk Task Questionnaire Review

There was no real issues identified as a result of these reviews. The committee insured that the annual "Police Check" declaration was again completed by all Board Members. The committee is now in the process of revising several existing policies to better align them to new requirements being introduced with the new accreditation process in 2015.

As well, new policies are being drafted for Board approval relating to both short and long term vacancy of our Executive Director.

Lastly, we are currently evaluating facility lease options (under a subcommittee) as our current office lease expires in June 2015.

My thanks to the committee members, Mark, Sharri, and management for their support and assistance throughout the year.

FINANCE COMMITTEE

The Finance Committee provides oversight to the financial planning, management, and reporting matters of the agency. The committee reviewed the annual budget prior to presentation to the Board for approval. Each month the finance committee reviewed the Statements of Operations and Balance Sheets for the agency. These financial statements were presented to the Board along with a summary of highlights for the month and

explanations for variances from budget. The Finance Committee also presented motions to the Board for spending from fundraising and advised the Board about Children First's investments on a quarterly basis.

The committee functions as the Board's Audit Committee and met with the Auditor to review the audited financial statements prior to presenting them at the Annual General Meeting.

I would like to thank Melissa Coletti for her service to the Finance Committee as she leave us at the end of this year, and welcome Kristen Micallef to the committee.

Marina Iannitelli, Chair

FUNDRAISING COMMITTEE

The summer of 2013 was a busy one for the Fundraising Committee. The Board set a goal to raise \$50,000 and the committee began planning to reach that goal. We held a Summer Passport Series of Events that included the

Sprucewood Shores Estate Winery picnic by the lake, the Walkerville Brewery Tour and Tasting and the Hiram Walker whisky tour, tasting and dinner cruise. Thanks to the hard work of the committee, and our event planner extraordinaire Sharri Hamelin, these events raised more than \$20,000.

The committee worked alongside a staff-lead initiative to create a cookbook. This cookbook combined some of our favourite local restaurant's recipes with family ones handed down from generation to generation. The cookbook was a hit! Thanks to all the staff that contributed and worked so hard. The cookbook sales have raised \$3750 to date. If you would like to purchase a copy, please call the office at 519-250-1850.

In 2013 the agency was fortunate to receive the continued support of some very generous individuals and community groups. \$17,130 in donations was received; \$15,000 of which came from Farrow Group and \$1200 from The Windsor Transportation Club's annual Lobsterfest. Once again this year the Rotary Club of Windsor assembled more 60 Easter baskets for disadvantaged children in our program.

Want to stay informed?

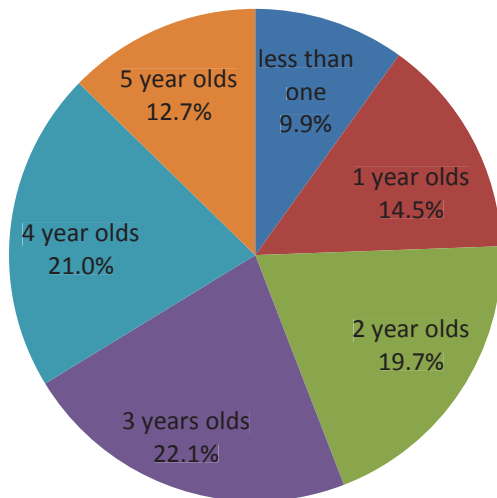
Make sure to sign-up to receive our quarterly newsletter through e-mail by visiting our website: www.children-first.ca



WHO WE SERVE



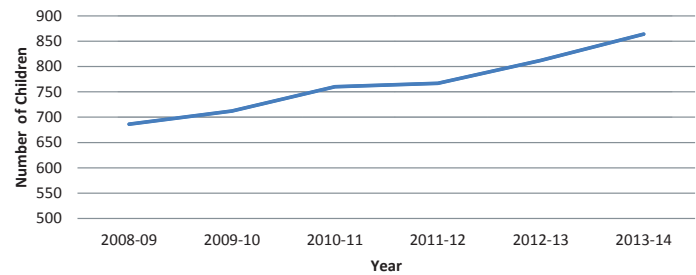
AGE OF CHILDREN AT REFERRAL



This year, there was an increase over the previous year in the number of referrals for infants less than one year and for five year olds. The average age of referral has remained constant at 3.2 years.

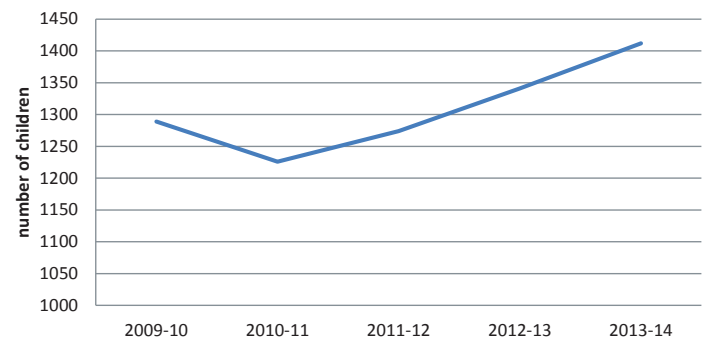


REFERRALS BY YEAR



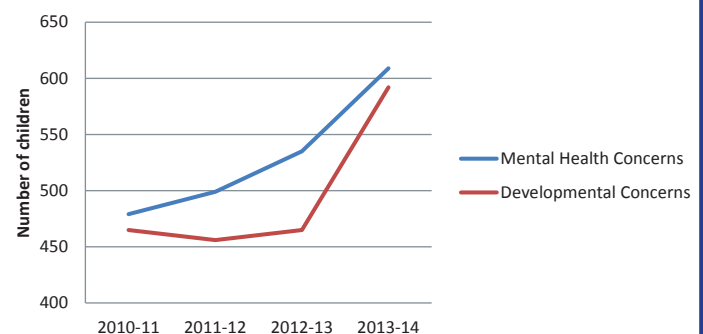
Referrals to the agency increased by 6% over 2012-13, with over 860 referrals to the agency.

CHILDREN SERVED



Over 1400 children were served by the agency in 2013-14. The number of children seen by Children First has increased by 15% since 2010-11.

REASON FOR REFERRAL



Parents and others will contact us with concerns about a child's development and mental health. Frequently, children will have elements of both categories. The incidence of referrals citing developmental concerns rose by 27% in the past year.

FAMILY SATISFACTION

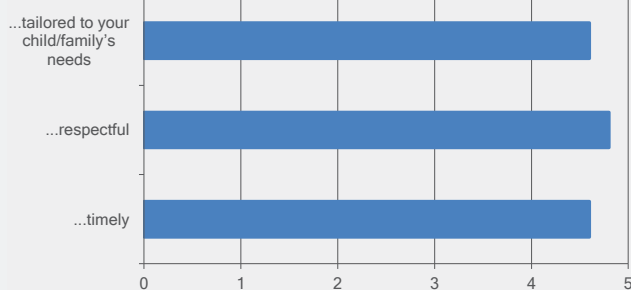
Children First gathers feedback from the families we serve to ensure ongoing high quality service to children and families in our community.

Families are asked to evaluate our service and the changes they have achieved on a five point scale as follows:

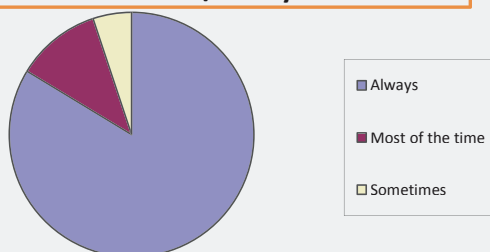
Strongly Agree	Agree	Not Sure	Disagree	Strongly Disagree
5	4	3	2	1

About our program:

We want you to think about your experiences with Children First. Would you agree that the services provided to your child/family were:



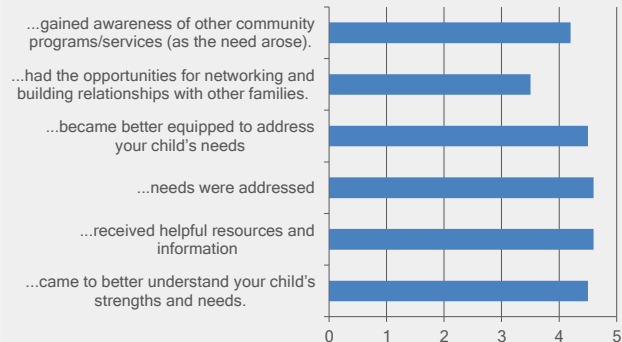
The times and locations of the services received from Children First were flexible to meet the needs of our child/family.



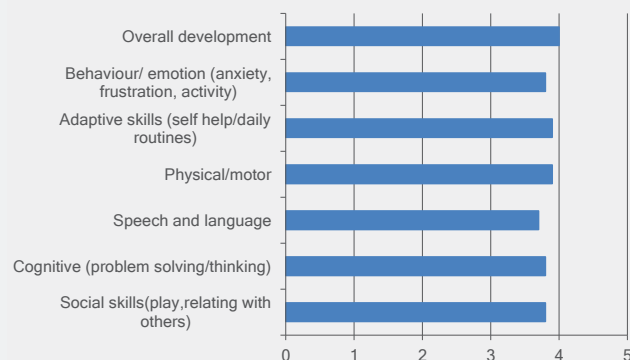
"Our workers were amazing. They listened to us and empathized as well they made us feel validated and never judged us."

Outcomes of our service:

Would you agree that as a result of services, your family:



Would you agree that as a result of services, there was an improvement your child's progress in the following areas:



"Children First was helpful in every way they could be"

CHILDREN FIRST IN ESSEX COUNTY

Summarized Statement of Financial Position for the year ended March 31, 2014

	Revenue Fund March 31, 2014	Capital Fund March 31, 2014	Total March 31, 2014
Assets			
Current assets:			
Cash - unrestricted	\$ 341,357	\$ -	\$ 341,357
Investments	298,416	-	298,416
Accounts receivable	34,739	-	34,739
Due from operating fund		208,393	208,393
Prepaid expenses	32,673		32,673
	<u>707,185</u>	<u>208,393</u>	<u>915,578</u>
Cash - restricted	54,110	-	54,110
Capital assets	-	309,697	309,697
	<u>\$ 761,295</u>	<u>\$ 518,090</u>	<u>\$ 1,279,385</u>
Liabilities and Fund Balance			
Current liabilities:			
Accounts payable and accrued liabilities	\$ 55,475	\$ -	\$ 55,475
Due to capital reserve fund	208,393	-	208,393
	<u>263,868</u>	<u>-</u>	<u>263,868</u>
Fund balance:			
Externally restricted	54,110		54,110
Unrestricted	443,317	518,090	961,407
	<u>497,427</u>	<u>518,090</u>	<u>1,015,517</u>
Commitments			
Contractual obligations			
	<u>\$ 761,295</u>	<u>\$ 518,090</u>	<u>\$ 1,279,385</u>

CHILDREN FIRST IN ESSEX COUNTY

Summarized Statement of Operations and Changes in Fund Balances for the year ended March 31, 2014

	Revenue Fund 2014	Capital Fund 2014	Total 2014
Revenue:			
Grant revenues	\$ 6,389,034	\$ -	\$ 6,389,034
Fundraising and donations	57,668	-	57,668
Other	38,168		38,168
	6,484,870	-	6,484,870
Expenses - program:			
Salaries and benefits	5,180,404	-	5,180,404
Program	39,333	-	39,333
Transportation and travel	176,797	-	176,797
Training	22,780	-	22,780
Building occupancy	367,611	-	367,611
Fundraising	12,372	-	12,372
Amortization		184,296	184,296
	5,799,297	184,296	5,983,593
Expenses - administration:			
Salaries and benefits	392,624	-	392,624
Administration	274,425	-	274,425
	667,049	-	667,049
Total expenses	6,466,346	184,296	6,650,642
Excess of expenses over revenue	18,524	(184,296)	(165,772)
Fund balance, beginning of year	490,929	690,360	1,181,289
Interfund transfers	(12,026)	12,026	-
Fund balance, end of year	\$ 497,427	\$ 518,090	\$ 1,015,517

NOTES:

[illegible]



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