

AiMHi

PRINCE GEORGE ASSOCIATION
FOR COMMUNITY LIVING



PERFORMANCE IMPROVEMENT REPORT 2025

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AiMHi Mission Statement

“AiMHi provides opportunities and supports to people who have special needs and their families. Our culture empowers all people, both those we support and those we employ, to live their best lives at work, at home and in the community. AiMHi strives to create strong communities which recognize and celebrate the value of all citizens.”

As people’s needs, desires, and expectations change over time, AiMHi strives to keep services current and relevant. Our commitment to continuous improvement is stronger because of your input. Thank you to everyone who took the time to fill out a survey this year. This report is a summary of the accomplishments that have impacted and improved the services provided by AiMHi during the year 2025. Inside you will see comments from the surveys that YOU filled out. We appreciate the opportunity to present this information to you.

Message from the Performance Improvement Committee

The Performance Improvement Committee is made up of AiMHi employees who meet throughout the year to develop surveys, document resolutions to accessibility issues, obtain input, evaluate outcomes and generate this report. Surveys are available through Survey Monkey for employees and stakeholders which provide the option of including comments. Many people shared thoughts about their experience with AiMHi. You will find some of these comments interspersed throughout this report.

AiMHi provides services to approximately 921 people with disabilities or special needs and their families in Prince George, Mackenzie, Vanderhoof and Smithers. AiMHi places a high value on input from employees, people we serve and their families, as well as professionals and businesses in the community. Their input concerning the experience, effectiveness, efficiency, and access to our services encourages and influences our ongoing Association objectives.

In 2025 the committee continued to update and revise the layout and language of the Performance Improvement Report and surveys to better reflect the CARF standards. The Performance Improvement Committee provided education to the management team to clarify the expectations and creation of SMART goals within the Performance Improvement Report.

The Performance Improvement Committee

Robin Ehses (Co-Chair), Lee Miners (Co-Chair), Destiny Heidsma, Kortni Ducharme, Vera Donald, Cindy Buker, Judie Russman, Penny Soderena-Sutton, Wendy Goyer, Starla Flynn and Laura Waddell.

A photo contest was held this year for the cover photo. Latisha Banotra submitted the winning photo of the CNR bridge at Cottonwood Island Park. The photo was taken through the bench made especially for Chuck Chin, a beloved local photographer who passed away in 2024.

List of Definitions

This list of definitions is to support the reader in understanding specific terminology within the report.

CARF Measurable Terminology

Effectiveness: the analysis of how **effective** we are in providing services. Do the services we provide meet the needs and goals of the people supported?

Efficiency: the analysis of how **efficient** we are when providing services. How does the organization utilize the resources available? Are they well organized to meet the needs and goals of the people supported?

Experience: the analysis of the **experience** people have with the services provided. Do the services provided meet the goals and desires of the people supported?

Service Access: the analysis of the Organizations capacity to provide services to adults with disabilities and children with special needs. **Service Access** includes the ability to receive, use and benefit from services.

Table of Recommendations Terminology

Objective: What the Home or Department goals are in the year.

Indicators: What information is available to measure success?

Applies To: Who will be affected by this objective?

Data Source: Where is the information coming from? Surveys, tracking sheet, or charting?

Obtained by: Who gathers the information?

Timeline: The length of time to meet the objective.

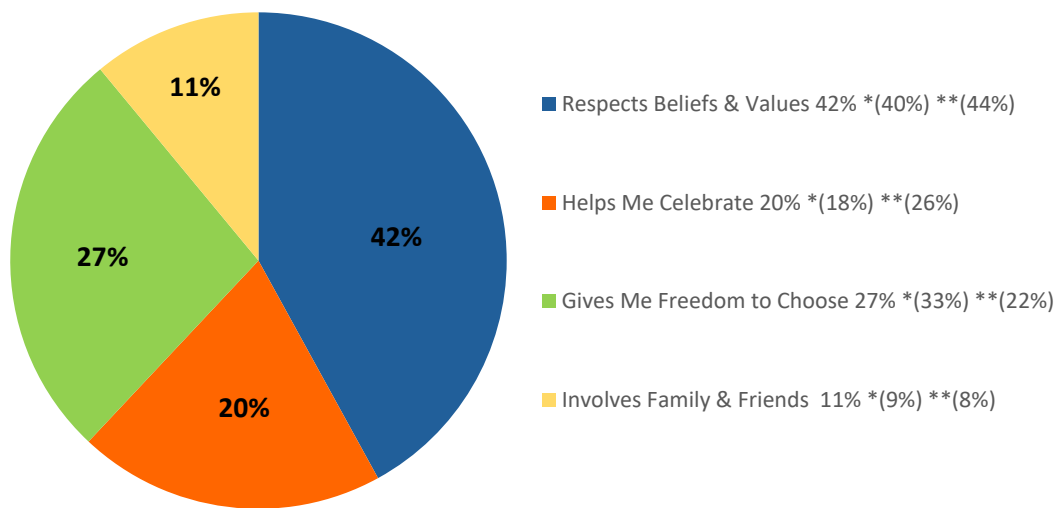
Target: What is the desired/expected outcome of the objective within the time frame?

Actual: What is the actual outcome of the objective within the time frame?

The Qualitative Analysis

In November 2025, the Performance Improvement Committee asked respondents to provide further information to give a qualitative view of their experience by asking three questions. The overall purpose of these questions is to help us see, more clearly, the lives of the people we support, and how we can help them continue to have quality lives. The pie charts below represent a summary of the main categories based on people's responses. This highlights the areas that people feel most strongly in. There is also a sampling of the responses submitted.

How does AiMHi support my cultural beliefs?

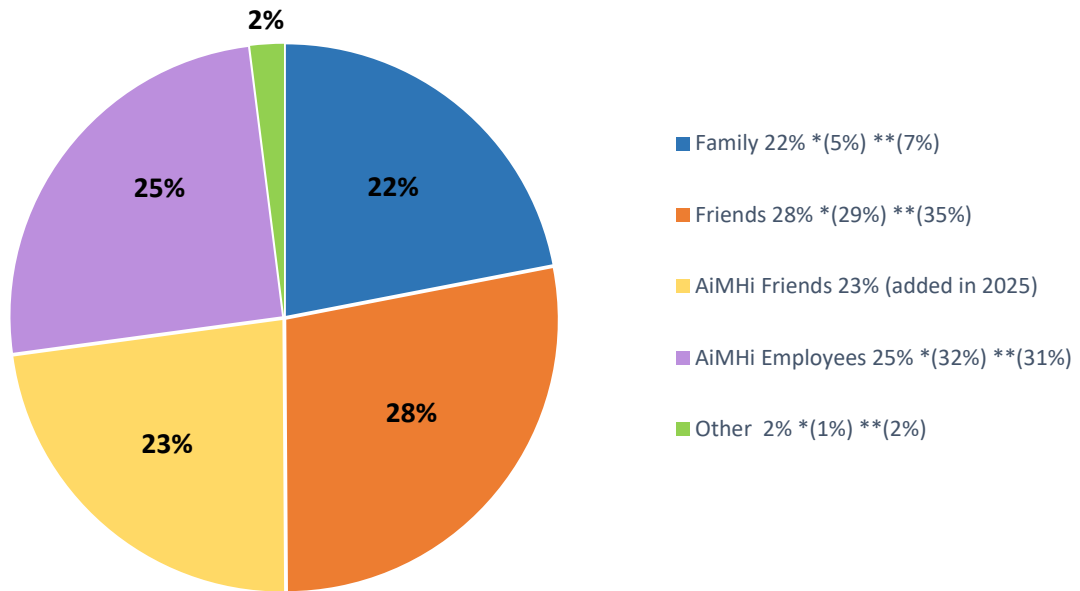


*Statistics from 2024 for comparison **Statistics from 2023 for comparison

The following statements are representative of the comments collected from the surveys of people we support:

- I enjoy going to Christmas activities and events
- AiMHi listens to me and supports me
- I feel supported by my staff and they respect and support my cultural beliefs
- Supports my family, provides specific meals for religious holidays, and respects my right to practice own religion and beliefs
- Creates a welcoming environment
- Ensures that I get to go to church
- Helps me celebrate Christmas, birthdays and other holidays
- By letting me be myself
- My support worker says prayer with me before we eat
- Supports my beliefs and traditions
- We go to cultural events and activities in the community
- Celebrate birthdays, holidays, special events, Christmas, New Years
- Listens to stories about my family culture
- Celebrate Christmas, Halloween and Diwali

Who do you like spending time with?



* Statistics from 2024 for comparison ** Statistics from 2023 for comparison

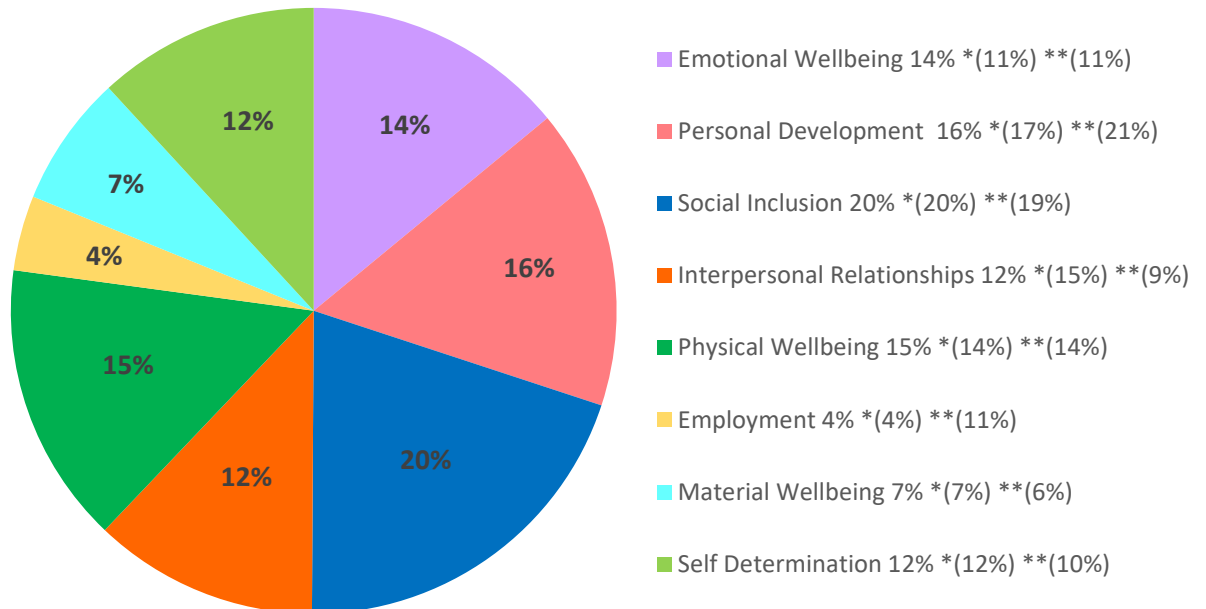
Who do you like spending time with and do you have a wonderful experience that you would like to tell us about that happened this year?

- I had a great time with a friend on vacation
- Spending time with my AiMHi friends
- I go home every weekend to see my mom
- Shopping with my sisters
- My mom and dad
- Halloween Dance, I loved wearing my Hulk costume
- My parents come to town to visit and bring me baked goods. My friends check up on me to see how I'm doing.
- I love dogs and went lots of times to the dog park to spend time with them
- Time with AiMHi employees
- AiMHi employees and Bowling Group
- Hugs mean lots to me and I am aware of who is receptive to them
- My AiMHi friend supporting me when I lost my dad
- My mom, brothers, sisters, my friends, AiMHi and high school friends are important to me
- Camping this summer and reconnecting with an old friend
- Ric Rec events and Karaoke every Friday afternoon in the AiMHi gym
- My sister's wedding
- Celebrating my birthday and volunteering at Second Chance
- Going to hockey games with my dad
- New experience for me – I love Starbucks
- Talking to my grandma

Goals worked on in 2025

In Adult Services, the focus for the 745 goals were in the following domains:

What skills or goals did you work on this year?



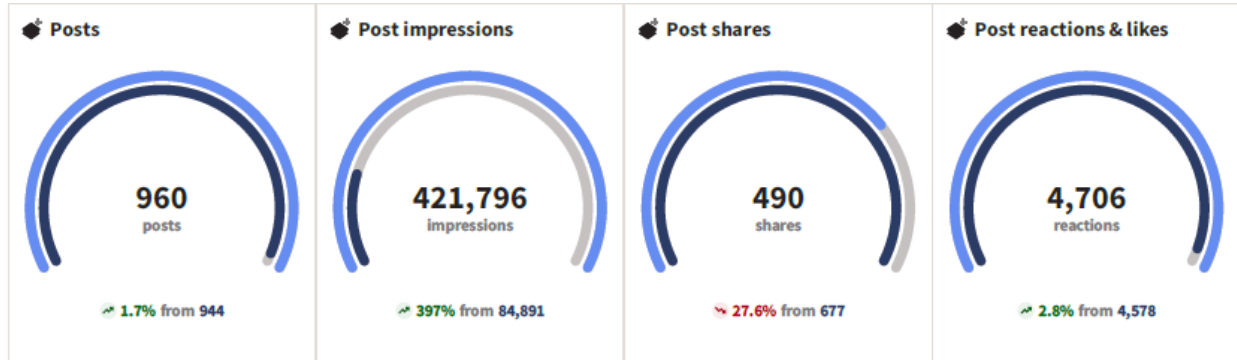
*Statistics from 2024 for comparison **Statistics from 2023 for comparison

Some of the goals worked on in 2025:

- Performed in multiple music performances
- Fitness. I like the reward of meditation after
- Walking at CN Centre during cold season
- Batch cooking and storing food in freezer
- Going to stores and restaurants
- Cleaning my place after friends visit
- I joined all the social events at AiMHi
- Christmas Party and Valentine's Dance
- Trip to Vegas
- Edmonton trip
- Saving money for a laptop
- Working on anger issues
- Setting boundaries
- Going to basketball weekly
- Cooking
- Found an apartment and got a cat
- Wednesday Friends to connect with friends
- Budgeting and finding a job
- Planning a family trip
- Using bank card to buy things
- YMCA and walking
- Exercising and socializing with friends
- Self care
- Camping in a trailer
- Renewing swim pass
- Always learning
- Employment skills and budgeting
- Finding a better paying job
- Kitchen Program at AiMHi
- Volunteering at St. Vincent de Paul

Digital Presence

Our biggest social media presence is on Facebook. We had an increase in our posts, impressions and reactions in 2025. Our top likes were the Holiday Santa Parade, Agency Annual Holiday Event and Special Olympics.



Top posts > Likes

AIMHI - Prince George Association for Commu...
Nov 30, 02:03

A few pictures of our float in today's PG Holiday Santa Parade 🎅 A big thanks to our community partners Westcana Electric and Lally Trucking! It was a beautiful sunny day ☀️

AIMHI - Prince George Association for Commu...
Dec 06, 08:56

A few pictures from AIMHI's 2025 Annual Christmas Party! It was an awesome night filled with live music from GOOD JUJU, a tasty Turkey dinner with all the fixings, a

AIMHI - Prince George Association for Commu...
Jul 14, 16:43

AIMHI would like to salute all our Special Olympic athletes who took part in the 2025 Special Olympics BC Summer Games 🏆 A special out to our Medal winners 🙌 Thank you

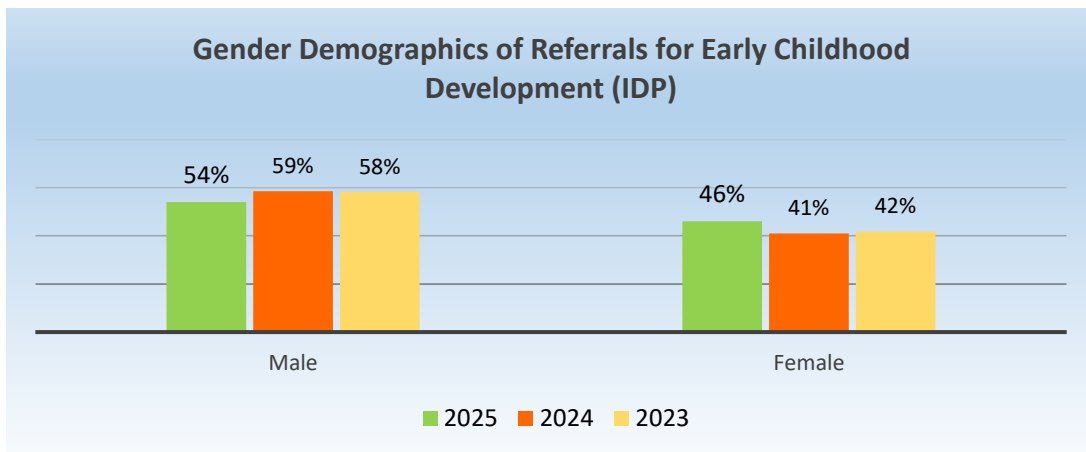
Early Childhood Development (Infant Development Program - IDP)

Introduction

Funder: Ministry of Children & Family Department

Program Description: This program provides home visiting services to families with infants from birth to three years of age who require extra support in one or more major developmental areas. Services are provided by one part-time and four full-time IDP consultants, and include home visits, developmental assessments and written reports, referrals to other resources, parent/childcare provider workshops, family conferences, parenting programs, resource loans (equipment, toys, books, etc.), parent/child playgroups, and participation on a variety of community committees and events. Parents are actively involved during home visits and are encouraged to be partners in planning their child’s program. The program has provided services to over 4,927 infants and their families since it first began in 1979.

2025 Demographics	2025	2024	2023
Total children on caseload from 01 January 2025 to 31 December 2025	352	388	333
Number of new referrals for 2025	115	152	115
Gender of new referrals by total number of children:			
Males	62	89	67
Females	53	63	48



Note: Demographics are gathered from participants as of December 31, 2025

Recommendations

Recommendations and follow-up for 2025

Objectives	Indicators	Applies To	Data Source	Obtained By	Time Frame	Target	Actual
Effectiveness							
Revise family survey to better align with the five categories that are included in CARF	Reducing the amount of time and effort it takes for families to complete	Parents, caregivers and families	Year-end family surveys	IDP	Jan 1 – Dec 31, 2025	Revise family surveys to ask more succinct questions	After careful consideration, it was decided the existing family surveys met our needs at this time. This is indicated by our 31% return rate
Experience							
Ongoing review of cultural safety on IDP forms.	Reflect on culture, attitudes, and beliefs, be respectful of differences, and participate in appropriate training and education.	Parents, caregivers and families	AiMHi training on culture and other relevant resources and educational opportunities.	IDP	Jan 1 – Dec 31, 2025	Complete annual AiMHi training and any additional educational opportunities that might present themselves	The IDP team engaged in the Truth and Reconciliation training using the valuable information to guide us in our daily interactions with families.
Efficiency							
Continue to support team growth and health	Team will access 3 Green Lights	Current and future IDP consultants	Weekly team meetings, ongoing and support for team development.	IDP	Jan 1 – Dec 31, 2025	Maintain a healthy and effective team	The IDP team completed two team health sessions with 3 Green Lights in 2025.
Service Access							
Connect with other community professionals to support their learning as well as learn from them	Invitations to participate in community meetings, training, and educational opportunities.	Current and future IDP consultants as well as other connected professionals	Annual professional surveys, case review, participation in joint visits and community engagement opportunities.	IDP	Jan 1 – Dec 31, 2025	Continue to build relationships, act as a resource for other community partners and collaborate with	This year the IDP team connected with several community professionals to collaborate, learn from and provide resource to.

						community resources.	
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Recommendations for 2026

Objectives	Indicators	Applies To	Data Source	Obtained By	Time Frame	Target	Actual
Effectiveness							
Connect with other professionals to collaborate services offered to families for early intervention	Discuss with CDC and UHNBC SLP professionals about any opportunities for collaborations for early intervention services	IDP consultants, professionals	Community professionals (CDC & UHNBC SLP)	IDP	Jan 1 – Dec 31, 2026	Increase early intervention awareness by identifying opportunities to collaborate with community professionals	
Experience							
Develop new process for dissemination of professional surveys to increase rate of return.	Increased professional survey response rate.	IDP consultants, professional survey recipients	Professional surveys	IDP	Jan1 – Dec 31, 2026	Receive increased number of professional surveys.	
Efficiency							
Develop back-up process for Central Registry database.	A current back-up copy of our Central Registry database will be accessible on ShareVision.	Current and future IDP consultants		IDP	Jan 1 – Dec 31, 2026	Evaluate secure and efficient process for back-up copy of IDP Central Registry database.	
Service Access							
Review referral process to ensure that we are providing concise and accurate information so that families can be contacted or added to a waitlist promptly.	Expedite referral process by providing timely information that is valuable to us and other service providers.	IDP consultants and community professionals	IDP, CDC, UHNBC SLP	IDP		Reduce having to take any extra steps or follow-up based on inaccurate referral information.	

IDP Family Survey Results

These statistics are based on the 52 returned surveys, a return rate of 49%.

Experience	Yes	No	N/A
Are you receiving the support/service you are looking for?	100%	0%	0%
Are you receiving information that is helpful for you and your child?	100%	0%	0%
My consultant connected me to community resources that are beneficial to my child and family.	81%	0%	19%
My consultant is sensitive to the needs and wishes of my family.	100%	0%	0%

Effectiveness	Yes	No	Some what	N/A	No Answer
My involvement with IDP made a difference by:					
Increasing my confidence in caring for my child.	97%	0%	1%	1%	1%
Increasing my understanding of my child.	98%	0%	1%	0%	1%
Increasing my knowledge of resources/ services.	96%	0%	3%	0%	1%
Learning new skills to support my child.	97%	0%	1%	1%	1%
Supporting my relationship with my child.	95%	0%	3%	1%	1%

Examples of comments from parents:

What do home visits with IDP mean to you and your family?

- Emotional and informative support that we can rely on. Developmentally appropriate toys, activities, instructions. Another perspective on our child that encourages us to grow with her.
- It is an important connection and support to help make the work I do as a foster parent be SEEN. Validated my input and connection to my children.
- Home visits have been such a great support for our family. It's reassuring to have someone come in and check on our baby's progress and offer guidance. The visits make me confident that my baby is developing well and getting what he needs.
- I get to learn how my child's brain and emotions work. Therefore, allowing me to adjust my approach to situations so then I feel that gives him space to feel his feelings.
- They are something we look forward to. It's a place where I feel I can speak freely and express feelings and concerns. My daughter enjoys the interactions she gets with each visit.
- They are always welcome and exciting. We look forward to each one.

What else would you like to say about the Infant Development Program?

- It has helped me to feel supported and informed. It has allowed me to be vulnerable and genuine about my struggles with my child's medical condition. Highly recommend to other parents.
- The toys we get to try out is an awesome bonus, helps me gauge what my sensory seeking child likes before investing my own money.
- This program is invaluable. I wish I had access with my first baby.
- Valuable program for children with needs greater than a typical child, although, in the perfect world, all families could benefit from this type of session.
- I think as an immigrant in this country, IDP is my big support system.

- I hope it continues for other families to get the same help.
- It is such a great resource to families that can struggle with knowledge or skills to support their child and child's needs.

Efficiency

- A helpful program while waiting for other supports to fall in place. As well as getting information to help guide us.
- Great to chat and practice skills for developing gross motor movements, good parenting advice, toy library, good examples of how to play with child so they learn.
- For us, IDP is a more accessible way in the community where we can seek for support for our concerns that are not urgent but important for the family and the baby. We are feeling much more comfortable to have it.
- After having so many appointments/encounters it was a relief to have sessions at my own home to reduce medical trauma: to help reduce stress of making it to appointments on time.
- The toys we get to try out is an awesome bonus, helps me gauge what my sensory seeking child likes before investing my own money.

IDP Professional Survey Results

A wide range of professionals in the community were distributed surveys to capture the following data. These statistics are based on a 71% return rate of surveys.

Speech Language Pathologist	2	Audiology	0
Occupational Therapist	2	Psychologist	0
Physiotherapist	1	Intersect	0
Supported Child Development	0	NHAN	0
Harmony House	0	Central Interior Native Health	0
Pediatrician	0	BCCH	0
Nurse	0	Not specified	0

Are you aware that AiMHi IDP provides the following services?	Yes	No	N/A
Information about child's development/delay/disability	100%	0%	0%
Developmental assessments	100%	0%	0%
Home visiting and support for families	100%	0%	0%
Developmental activity suggestions	100%	0%	0%
Resource lending (toys, books, equipment)	100%	0%	0%
Supporting healthy parent-child relationships	100%	0%	0%
Referrals to other services/connecting families to community resources	100%	0%	0%
Opportunities to learn infant massage, Itsy Bitsy yoga, Circle of Security Parenting, etc.	100%	0%	0%

What type of contact have you had with the AiMHi IDP in the past year?	Yes	No	N/A
Made referrals to IDP	100%	0%	0%
Received referrals from IDP	100%	0%	0%
Participated in joint visits with IDP	100%	0%	0%
Attend community meetings or trained with IDP	80%	20%	0%

Access

AiMHi IDP operates an open referral system and referrals come from a variety of sources including parent self-referral, the University Hospital of Northern British Columbia, pediatricians, and public health nurses. Referrals are received by phone, fax, mail, and through a fillable online form that is available on the AiMHi website. There has been a steady increase in the number of referrals that the program receives online and we continue to adapt our online referral process in order to continue providing easy access to our services. Consultants with the program attempt to contact families within two weeks of receiving a referral. Families that are not visited within the month that they are referred are considered to be on a waitlist according to the definitions provided by our funder.

Exit Reports

There was a total of 145 children who exited the Infant Development Program (IDP) in 2025. Of the children exiting service, 46 families responded to completing exit surveys (32% return rate). The primary reasons for not getting response to the surveys were: the family moved; the family was unable to be reached; Canada Post Strike; or they did not respond to the request to provide feedback.

The following reasons for leaving were given:

Exits	Number	Percent
CPW (Confident to proceed without service)	46	31%
CU (Child caught up)	10	7%
C3 (Child reached age of three)	36	25%
CM (Child / family moved)	15	10%
CD (Child died)	1	1%
INR (No response to initial contact)	7	5%
NR (No response to continued contact)	30	21%
Total Closed Files	145	

Community Inclusion

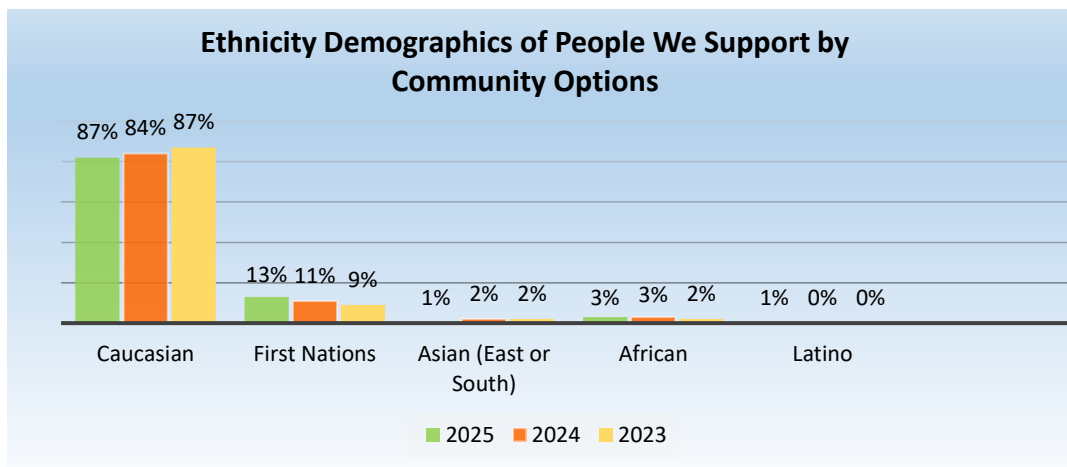
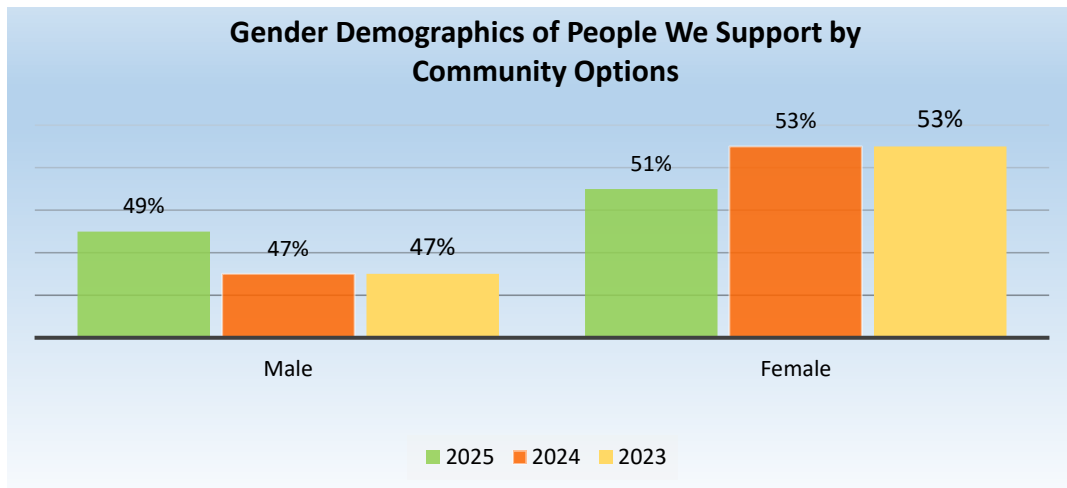
Community Inclusion Services consists of Community Options, Adult Life Skills and L.I.F.E. Each service is described below.

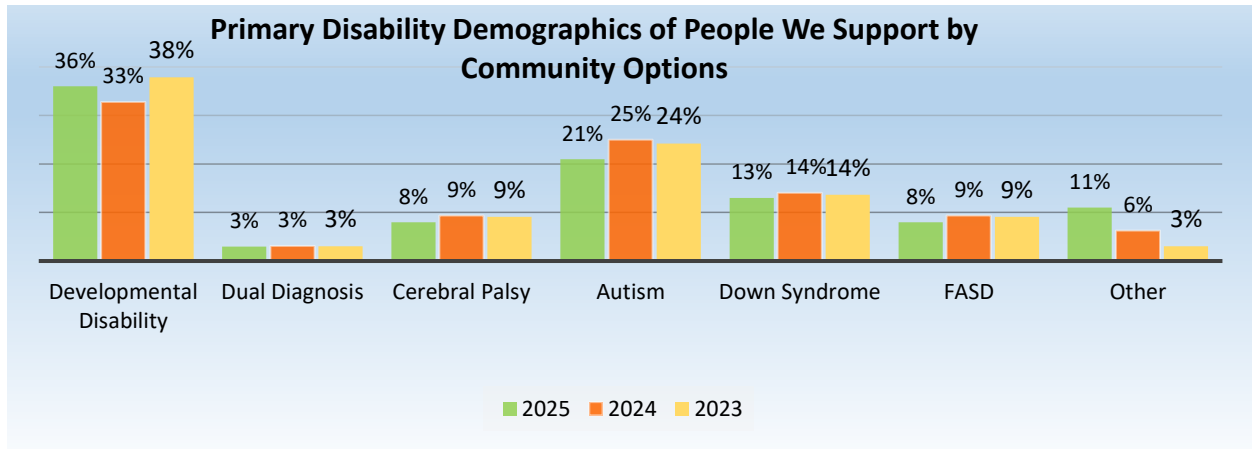
Community Options

Introduction

Funder: Community Living BC

Description: The Community Options Program, funded by Community Living BC, aims to support individuals with developmental disabilities in enhancing their independence through participation in various activities and community services. With approximately 12 dedicated employees, the program facilitates group and one-on-one interactions to encourage community involvement and skill development among participants.





Note: Demographics are gathered from active participants as of December 31, 2025

Recommendations

Recommendations and follow-up for 2025

Objectives	Indicators	Applies To	Data Source	Obtained By	Time Frame	Target	Actual
Effectiveness							
Ensure all people we support complete a feedback survey to assess program quality and impact.	70-80 Percent	People we support	Surveys	Manager	Nov 1 – Dec 1, 2025	85% participation (improved from 70% in 2024)	40%
Experience							
Encourage group events in the department for a greater social inclusion experience.	Expand group events to include more diverse activities for increased social inclusion.	People we support	Events tracking sheet	Manager	Jan 1 – Dec 31, 2025	95% participation	68.7% of people supported were In Community activities
Efficiency							
Reduce intake process from three weeks to two weeks while maintaining accuracy and quality of onboarding.	Assign dedicated staff members to handle intake tasks promptly	People we support	Intake tracking sheet	Manager	Jan 1 – Dec 31, 2025	Two-week intake process per referral	60% of the people supported were connected in first two weeks of referrals
Service Access							
Maintain the level of hours for individuals served.	Maintain shared/bonus hours between 2,300 and 2,800.	People we support	Shared/ bonus hour tracking sheet	Manager	Jan 1 – Dec 31, 2025	2,800 shared/bonus hours	8,885 Bonus hours

Recommendations for 2026

Objectives	Indicators	Applies To	Data Source	Obtained By	Time Frame	Target	Actual
Effectiveness							
Enhance service effectiveness by encouraging employees to create opportunities for persons supported	More upcoming events and activities	Employees	ShareVision logins by employees	Manager	Jan 1 – Dec 31, 2026	80% of Community Options employees independently create or co-facilitate group or activities within the calendar year	
Experience							
Planning diverse cultural activity opportunities by partnering with Cultural and Diversity Committee	Emails about monthly activities to Agency	People we support	ShareVision event forms and logins	Manager	Jan 1 – Dec 31, 2026	Five diverse cultural activities to broaden community participation and awareness	
Efficiency							
Use the new monthly tracker to get accurate ShareVision numbers without adding extra steps for the team	Creating new Goal Tracking sheets	Employees	ShareVision documents	Manager	June 2026	100% of employees will use new tracker by June.	
Service Access							
Enhance participant awareness by emailing community opportunity updates directly to persons supported and families	Create an email list of people supported and families. Distribute community event calendar monthly.	People we support	Email logs	Manager	June – Dec 2026	June 2026 for email list, then monthly emails till December	

CARF Standards

Community Options prepared 68 surveys and distributed these to active participants of the program. Of the 68 surveys, there were five that were unable to be completed as the people we support were unable to communicate, two people did not want to participate, and 42 surveys were not returned. These statistics are compiled from the 19 survey respondents.

Experience	Happy	Unhappy	Not Sure	No answer
I feel like part of the community	100%	0%	0%	0%
I am happy with the services I get from AiMHi	100%	0%	0%	0%

Effectiveness	Happy	Unhappy	Not Sure	No answer
I feel AiMHi keeps my information private.	100%	0%	0%	0%
I get help to make my own choices and decisions.	100%	0%	0%	0%

Efficiency

Community Options had a total of 8,885 bonus hours in 2025. This provided persons we support with interpersonal relationships, skill development, and social inclusion.

Access to Services

Referrals to service. We had eight new referrals in 2025 and there is no wait list for the program. Referrals are received from Community Living BC and services are provided as referrals are received. Seven people are being funded under the PSI (Personal Supports Initiative) for Community Options in 2025.

Exit Reports

Five people exited Community Options in 2025, the reasons are as follows:

- 4 – Moved
- 1 – Did not need services

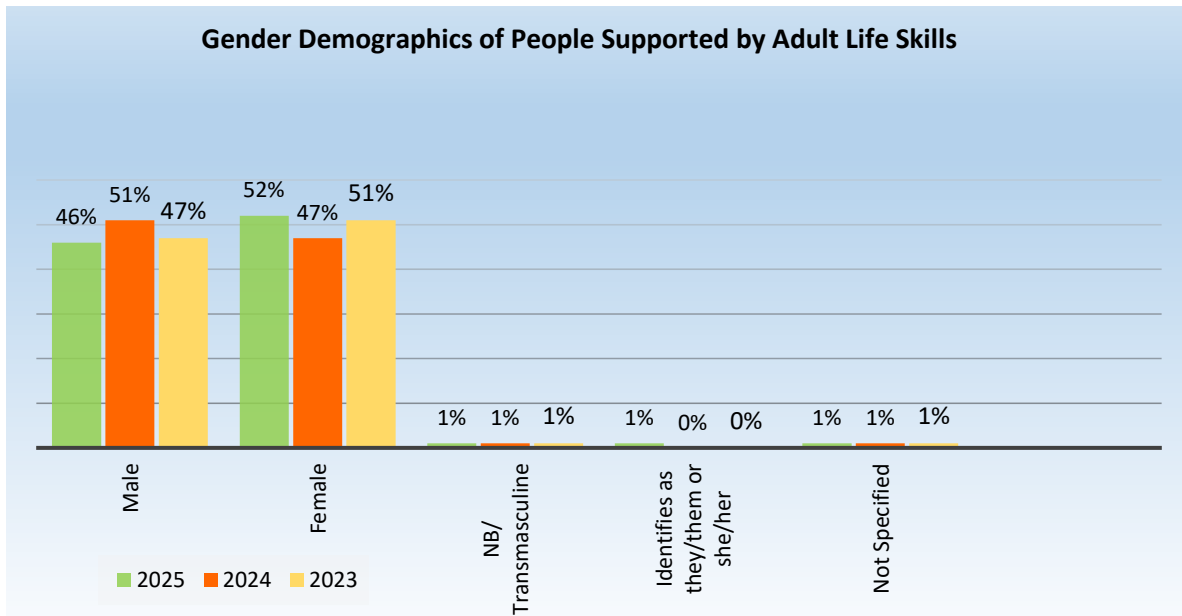
Adult Life Skills

Introduction

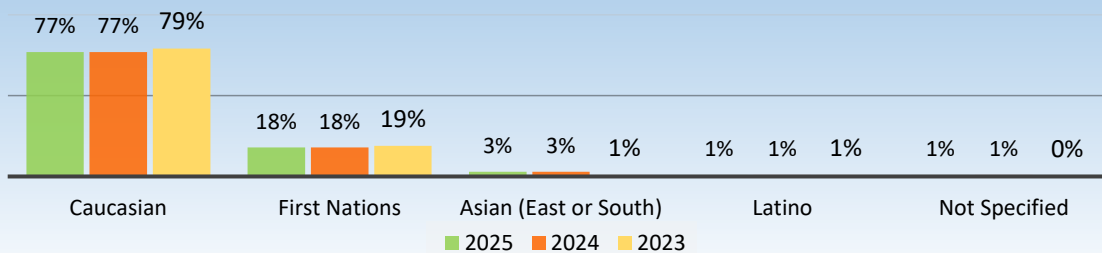
Funder: Community Living BC

Description: The Adult Life Skills Program offers training and support to adults, 19 years and older, who have developmental disabilities. Our mission is to help people live as full citizens in their community. A team of 32 employees provide services that are uniquely tailored to each person’s goals and needs, offering flexible schedules with varying times and days based on personal choice. Training is provided in the following areas (but not limited to these): household management, financial management, nutritional health and meal preparation, relationship building and personal development, transportation training, personal wellness, access to community resources, crisis supports and management, leisure and recreational skills and education exploration.

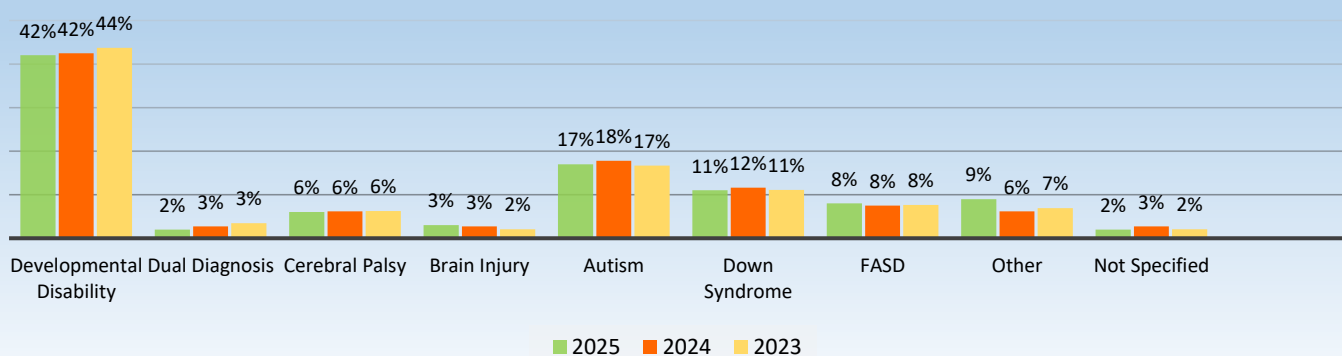
We are a strength-based, person-centered program that focuses on the positive qualities and accomplishments of each person. We develop goals, training, and support based on strength and needs assessment of skill level, and work with the person receiving services (and their support network) to develop short-term goals. We provide opportunities for people to learn about themselves, explore their strengths and challenges, develop interpersonal communication skills, employability skills and build relationships with others. Each goal is monitored and reviewed throughout the service delivery period to ensure that information is current and up to date; changes in objectives or strategies are monitored on a regular basis.



Ethnicity Demographics of People Supported by Adult Life Skills



Primary Disability Demographics of People Supported by Adult Life Skills



Note: Demographics are gathered from active participants as of December 31, 2024

Recommendations

Recommendations and follow-up for 2025

Objectives	Indicators	Applies To	Data Source	Obtained By	Time Frame	Target	Actual
Effectiveness							
Implementing a strategy to effectively train all employees on SMART Goals documenting on ShareVision.	All goals will be on ShareVision	Persons we support	ShareVision	PIC Committee	July 1, 2025 – Dec 31, 2025	100%	100%
Experience							
Providing additional skill building groups to support independence.	2 additional skill building groups	Persons we support	Survey/ individual interview	PIC Committee	Jan 1, 2025 – Dec 31, 2025	5 skill building groups a year	100%

Efficiency							
To train all employees on documentation and contractual documents.	All employees will be trained over 4 sessions	Employees	Survey/ individual interview	Adult Life Skills Managers	May 1, 2025 – Sept 1, 2025	4 group sessions over 2 months and follow up in 3 months	100%
Service Access							
Persons we support will receive adequate amounts of support.	Persons we support report the amount of time spent with them is enough	Persons we support	Surveys/ individual interview	PIC Committee	Jan 1, 2025 – Dec 31, 2025	5% increase from 2024 target	91% no increase

Recommendations for 2026

Objectives	Indicators	Applies To	Data Source	Obtained By	Time Frame	Target	Actual
Effectiveness							
Every person supported will have a SMART Goal on ShareVision with 12 months of goal tracking	Monthly tracking on the Goal Database and on ShareVision	Life Skills Instructors	Goal Database and ShareVision	Life Skills Managers	Jan 1 2026 - Dec 31 2026	90% of monthly goals will be tracked for people supported.	
Experience							
Providing additional skill building or cultural experiences for those we support.	5 or more skill building or cultural events will be planned	Persons we support	Individuals review, and review of the CI Gazette	Life Skills Managers	Jan 1 2026 - Dec 31 2026	5 new skill building opportunities will be offered.	
Efficiency							
Managers will create a new monthly qualitative goal tracking form	The new form will be created	Managers	The goal tracking form	Life Skills Managers	July 1, 2026	Completion July 1, 2026	
Service Access							
Provide people we support opportunity to participate in activities more than their funded service level hours.	Persons we support report the amount of time spent with them is enough	Persons we support	Surveys/ individual interview	PIC Committee	Jan 1 2026 - Dec 31, 2026	5% more bonus hours from 2025 for the department.	

CARF Standards

There was a total of 121 surveys distributed in 2025. Nine people exited services and did not complete the survey. Twenty-one declined to complete or were unable to complete due to illness, moved, passed away

or other reasons, two people were unable to complete due to limited ability to speak and answer the questions. The following statistics are compiled from the 89 people who responded to our survey.

Experience	Happy	Unhappy	Unsure or No Answer
The Life Skills program helps teach me my rights so I am able to make my own choices and decisions.	97%	1%	2%
I am happy with the services I get from the Life Skills program.	98%	0%	2%

Effectiveness	Happy	Unhappy	Unsure or No Answer
I feel supported by my Life Skills Instructor while working on my goals.	99%	0%	1%
The Life Skills program helps me learn new skills and complete my goals.	97%	1%	2%

Efficiency

Adult Life Skills provides training as needed on various life skills, health, sexuality, safety needs, and recreation. We often pair people and work with people in groups which increase our efficiency by providing more hours to people.

Access to Service

Life Skills has a global contract. We monitor the global contract monthly and as soon as hours are available, we take on new people. Once we receive the referral with hours attached from CLBC, an intake is completed and a Life Skills Instructor is assigned. Referrals received with direct funding are processed immediately with an approximate intake time of two weeks. Life Skills received 30 referrals in 2025; 30 referrals were for Skill Development, 19 were for Outreach, and 6 for PSI.

Exit Reports

There were 13 people who exited Adult Life Skills during 2025. The reasons were as follows:

- 1 - Moved into one of our homes
- 5 - Moved out of area
- 3 - No longer needed services
- 2- Chose another AiMHi CI Department
- 2- Passed away

L.I.F.E. SERVICES

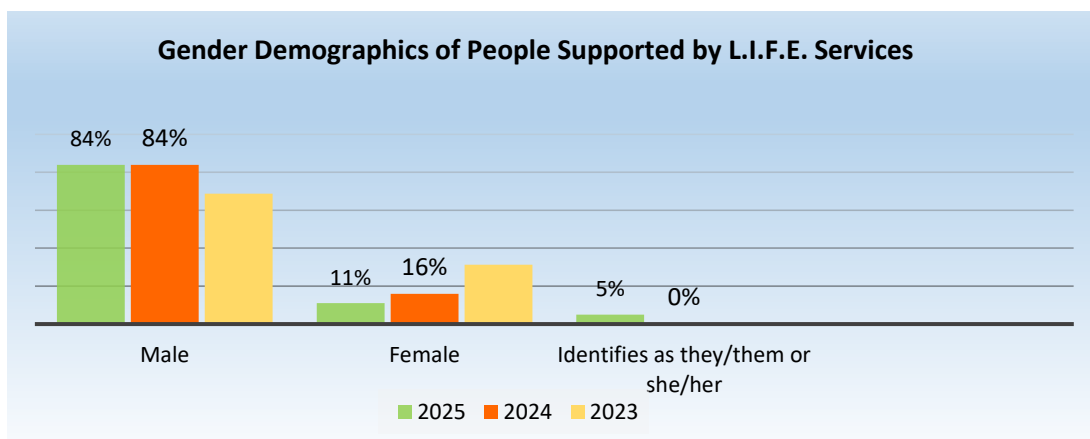
Introduction

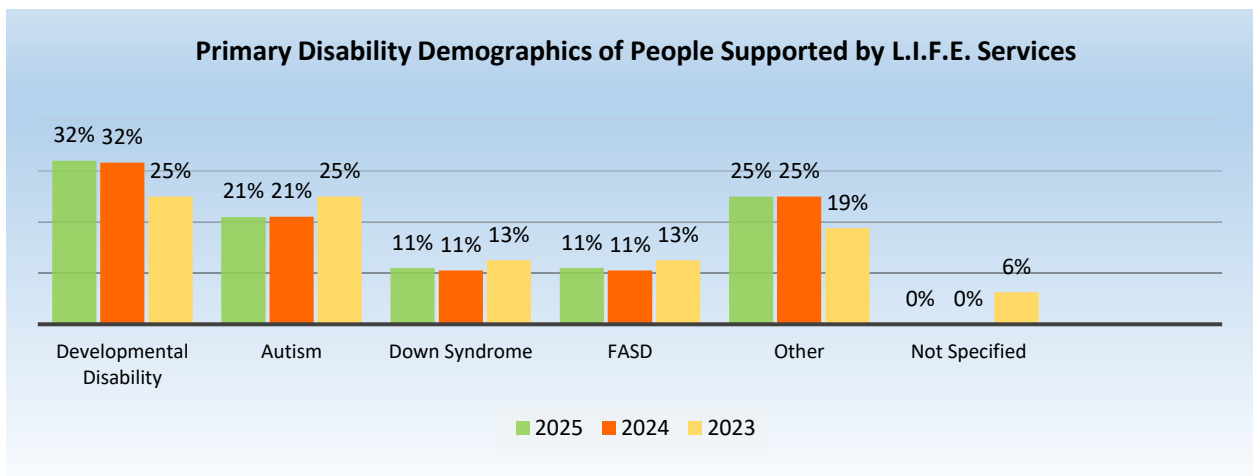
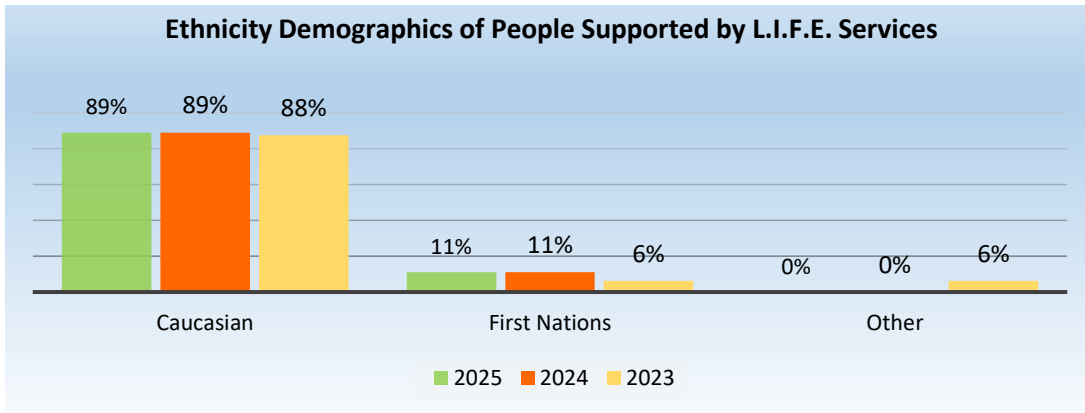
Funder: Community Living BC

Description: The L.I.F.E. Services Program offers training and support to adults, 19 years and older, who have developmental disabilities and has a team of six employees. Many people with diverse abilities want to work and have full and enriched lives. L.I.F.E. Services is a new Community Living BC catalogue of services offered at AiMHi which started March 2023. The service recognizes those intentions and provides a four-pillar approach to supporting people to achieve them: Learning, Inclusion, Friendship, and Employment, or LIFE. It recognizes that success in a job means more than just a job. It means building life skills, strengthening community connections, pursuing lifelong learning, and building meaningful relationships.

L.I.F.E. Services is about making a person’s life beyond just achieving goals, but rather recognizing how the goal will impact the person’s LIFE. The service is strength-based, user-driven and collaboratively designed with the person and their formal and informal supports in their life. The service will be offered in the person’s community. The service will be flexible and responsive and may vary in frequency, intensity, focus and evolves over time.

LIFE Services begins by identifying a person’s goals, then goes deeper to understand why those goals matter, which are referred to as “intended differences” — the meaningful impact or positive change the person wants to see in their life as a result of the initial goal. These intended differences go beyond traditional goals and are central to the service approach. They are tracked and reported quarterly through the PRL (Periodic Report), where CLBC reviews how many intended differences are identified, in progress, and achieved.





Recommendations

Recommendations and follow-up for 2025

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
Persons we support will report increased independence in the community	1) Identify an Increase in confidence	Persons we support	Surveys	PIC Committee	Jan 1, 2025 – Dec 31, 2025	90%	70%
	2) Identify an increase in natural supports		Periodic Report	Life Skills Managers		90%	72%
Experience							
Services provided are meeting the needs of people we support	People supported are satisfied by services received	Persons we support	Survey/ individual interview	Life Skills Managers	Jan 1, 2025 – Dec 31, 2025	95%	93%

Efficiency							
The connection between Direct A and Direct B hours to fulfillment of L.I.F.E. pillars	Direct A vs. Direct B hours on personal fulfillment of services.	Employees	Survey/ individual interview Periodic Report	Adult Life Skills Managers	Jan 1, 2025 – Dec 31, 2025	95%	82%
Service Access							
Persons we support will receive sufficient support through the ebb and flow practice of the L.I.F.E. Services program	Persons we support report the amount of time received is appropriate	Persons we support	Surveys/ individual interview Periodic Report	PIC Committee	Jan 1, 2025 – Dec 31, 2025	5 % increase from 2024 target	100%

Recommendations for 2026

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
Host 2 group reflection sessions to give participants and their families the opportunity to share feedback and ask questions	Families and people supported will offer us feedback either in person or via phone, email	Persons we support and their families	LIFE Managers	LIFE Managers	Jan 1, 2026 – Dec 31, 2026	50% attendance in each of the sessions.	
Experience							
Host evening social get togethers for the LIFE participants	Successful implementation of six opportunities	Persons we Support and their families	Managers and employees	Managers	Jan 1, 2026 – Dec 31, 2026	6 sessions will be offered in 2026.	
Efficiency							
Create a document to track intended differences, individual goals and monthly progress for people supported.	The new form will be created by July 1, 2026	LIFE Services managers and employees	Managers	Managers	July 1, 2026	Completion by July 1, 2026	
Service Access							
Increase the number of intended differences that are fully achieved for individuals	The PRL (progress report) will show the progress of	The people we support	Managers and employees	Managers via the PRL	Jan 1, 2026 – Dec 31, 2026	80% of intended differences stated will be achieved	

supported by the LIFE Services team.	intended differences.					for people supported.	
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CARF Standards

There were 21 total surveys distributed in 2025. One person moved and did not complete the survey, three people declined to complete, were unable to complete due to illness, or other reasons, and two people were unable to be contacted. The following statistics are compiled from the 15 people who responded to our survey.

Experience	Happy	Unhappy	Unsure or No Answer
The L.I.F.E. Services program helps teach me my rights so I am able to make my own choices and decisions.	94%	0%	6%
I am happy with the services I get from the L.I.F.E. Services program.	100%	0%	0%

Effectiveness	Happy	Unhappy	Unsure or No Answer
I feel supported by my L.I.F.E. Services Coach while working on my goals.	100%	0%	0%
The L.I.F.E. Services program helps me learn new skills and complete my goals.	94%	0%	6%

Efficiency
 L.I.F.E. Services Program works on the concept of Direct A hours and Direct B hours to support people served. The Direct B support hours are used indirectly to support the achievements of the person we support. Over time it will be interesting to see if Direct B hours correlate to success such as increased confidence, natural supports, etc.

Access to Service
 L.I.F.E. Services is a global contract, as soon as hours are available, we take on new people. Once we receive the referral, an intake is completed and a LIFE Services Coach is assigned. Referrals are processed immediately with an approximate intake time of two weeks. We received 9 referrals this year, bringing our total to 31 participants.

Exit Reports

There was 1 person who exited L.I.F.E during 2025. The reason was as follows:

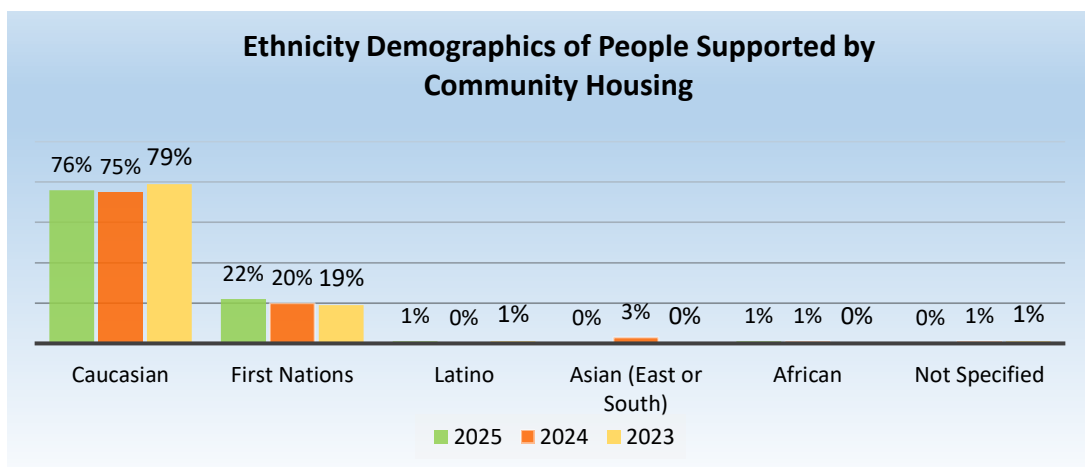
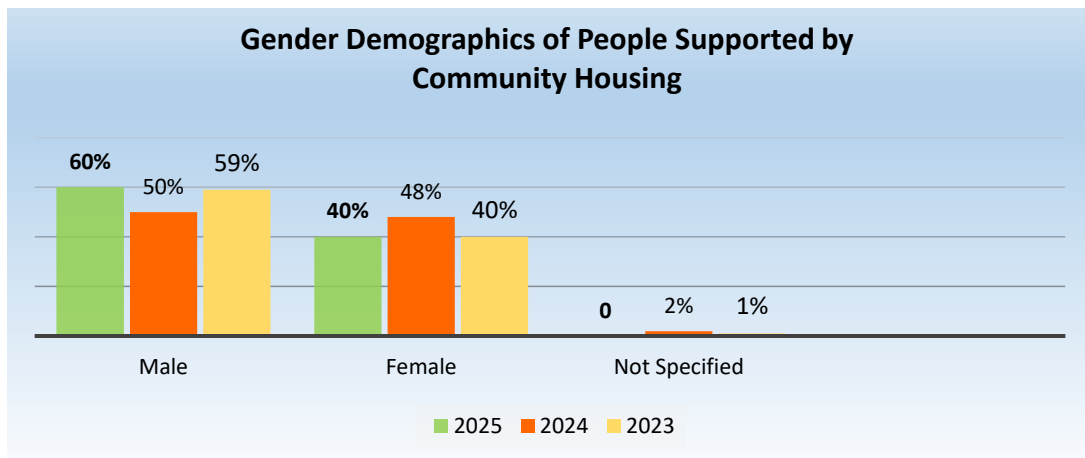
- 1– Moved

Community Housing

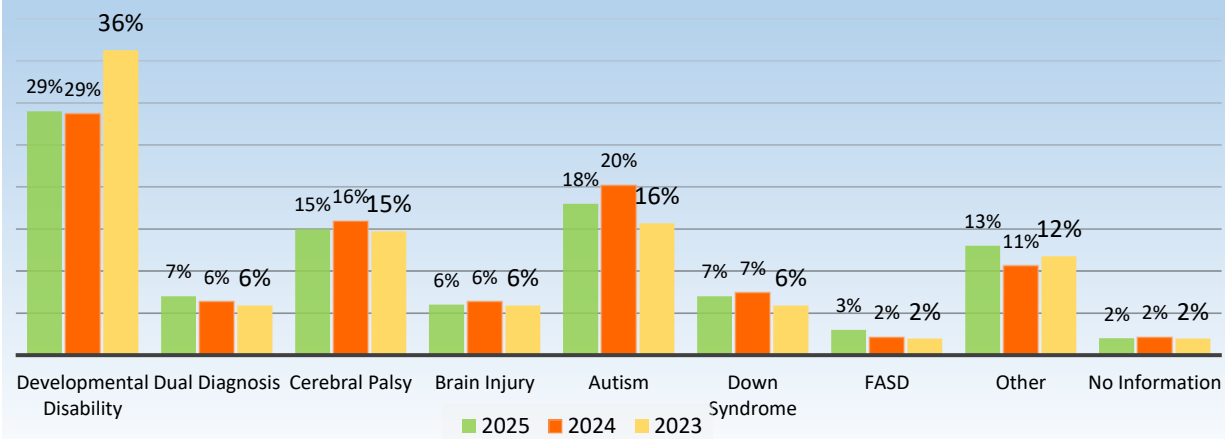
Introduction

Funder: [Community Living BC](#)

Description: There are approximately 302 employees who hold positions in our Community Housing departments. This includes employees who hold management, full-time, part-time and support positions. There are a number of employees from our relief pool who also work in these homes that are not included in this number. Employees help people in their homes with their day-to-day living in the following areas: accessing the community; food preparation; household maintenance; maintaining health; daily hygiene; exercise; activities; visiting family and friends; skill acquisition; and development and support in attaining goals. The mandate of Community Housing is to provide support for people with disabilities to live as independently as possible in their home settings. AiMHi accommodates, on an as-needed basis, Respite contracts and Home Sharing contracts within our current homes.



Primary Disability Demographics of People Supported by Community Housing



Note: Demographics are gathered from active participants as of December 31, 2025

Recommendations

Recommendations and follow-up for 2025

Objectives	Indicator Benchmark	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
To ensure every person supported has an individualized training plan and that it is actively being used. This includes when new people move in.	Implement individual training plans	People supported in Community Housing Services.	ShareVision	Directors of Services and Health Services Director	Jan 1, 2025 – Dec 31, 2025	100% of plans completed and actively being used.	98%
Experience							
Train new employees on how to create a SMART Goal on ShareVision during Employment Orientation.	An increase of SMART Goals on ShareVision	Employees	ShareVision SMART Goals	PCP Committee via Home Managers	Jan 1, 2025 – Dec 31 2025	80% of homes will have SMART Goals on ShareVision	97%
Efficiency							
To improve the tracking system for the data received from the people supported surveys.	A summary total of survey data.	People supported	Tracking sheet	PIC Committee	Jan 1, 2025 – Sept 30, 2025	To be complete by end of September	Achieved

Service Access							
To look for opportunities to increase accessible spaces within our homes.	Change non-accessible spaces to accessible spaces.	People supported in Community Housing Services.	Homes inventory	Directors of Services and Operations Director	Jan 1, 2025 – Dec 31, 2025	Transition one home / 2 beds from non-accessible to accessible	No new home was purchased due to limitation of available appropriate property listings. In 2025 there was over 25 improvements made for accessibility, including grab bars, walk in showers, and new or improved ramps.

Recommendations for 2026

Objectives	Indicator Benchmark	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
To develop a tracking system to ensure individualized training plans for people living in our homes are completed and up to date.	Tracking sheet	People supported in Community Housing Services.	ShareVision	Health Service Director, supported by the home managers and Director of Services	Jan 1, – Dec 31, 2026	Tracking sheet completed and sent to homes by August 31.	
Experience							
All people receiving services in their home will have at least one goal they are working on at all times.	An increase of SMART goals on ShareVision	People supported in Community Housing Services.	ShareVision SMART goals	PCP Committee via Home Managers	Jan 1, 2026 – Dec 31, 2026	100% of people in homes will have SMART goals on ShareVision	
Efficiency							
To reduce the use of waiver forms for SMART goals	Increase number of SMART Goals	People supported	Waiver Form	PIC Committee	Jan 1 – Dec 31, 2026	0 waiver forms approved.	

Service Access							
To look for opportunities to increase accessible spaces within our homes.	Change non-accessible spaces to accessible spaces.	People supported in Community Housing Services.	Homes inventory	Directors of Services and Operations Director	Jan 1, – Dec 31, 2026	Transition one home / 2 beds from non-accessible to accessible with option to increase bed capacity	Not completed but have purchased 2 homes this year.

CARF Standards

There were 99 people surveyed for Community Housing. Of these 99 surveys distributed, one person passed away, four people did not want to participate, and 24 surveys were returned by people who were identified as non-verbal and unable to complete the survey. These statistics are compiled from the 70 returned surveys.

Experience	Happy	Unhappy	Not Sure	No Answer
I know my rights.	95%	0%	3%	2%
I feel important in AiMHi and the community.	95%	3%	0%	2%
I am happy with the services I get from AiMHi.	95%	3%	0%	2%

AiMHi has purchased all of the homes people reside in within Community Housing with the exception of homes owned by BC Housing, two homes in Smithers and one in Vanderhoof that are rented. This allows people financial freedom by making housing affordable and to personalize their home as they wish.

Effectiveness	Happy	Unhappy	Not Sure	No Answer
I feel AiMHi keeps my information private.	92%	3%	3%	2%
I get help to make my own choices and decisions.	94%	2%	2%	2%

Efficiency
<ul style="list-style-type: none"> • Vacancy Rate - At the beginning of 2025 there were two vacancies. Throughout the year we had one person pass away. At the end of 2025 there was one vacancy. This is based on timing of the report as vacancies are filled quickly with referrals from CLBC. • SMART Goals/Goal Progress - A person's ShareVision site is used to document a person's SMART goals and goal progress on a daily basis. Employees are provided ongoing training to ensure proper, accurate and complete documentation. • AiMHi looks for opportunities to make moves for people within the homes to help meet people's needs. This may be a different roommate or a more accessible space. In 2025 there were three of these types of moves for people. • AiMHi will continue the usage of shared vehicles and maximize the use while minimizing the financial burden on the Agency.

Access to Services

People interested in AiMHi services need to be referred through Community Living British Columbia. The Emergency Placement process occurs on an as needed basis according to needs and availability. This is a cooperative process between AiMHi, Community Living British Columbia and Licensing when applicable.

Exit Reports

There was one person who exited services in 2025. The reason was as follows:

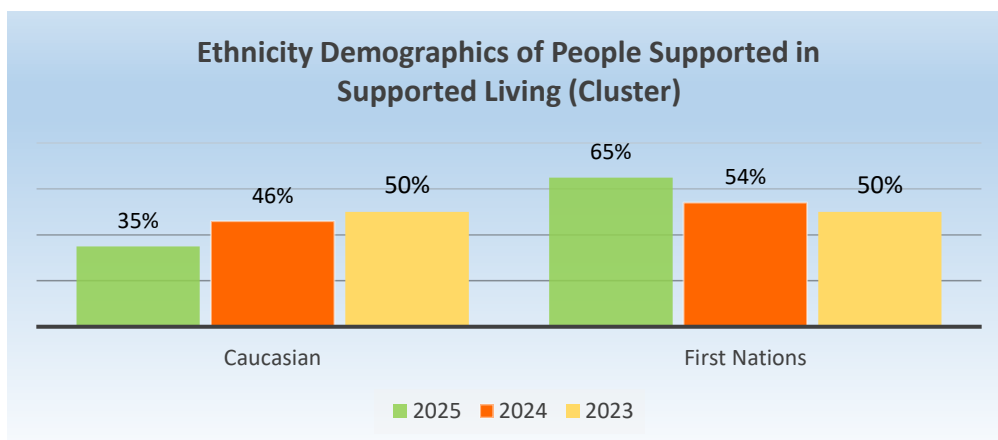
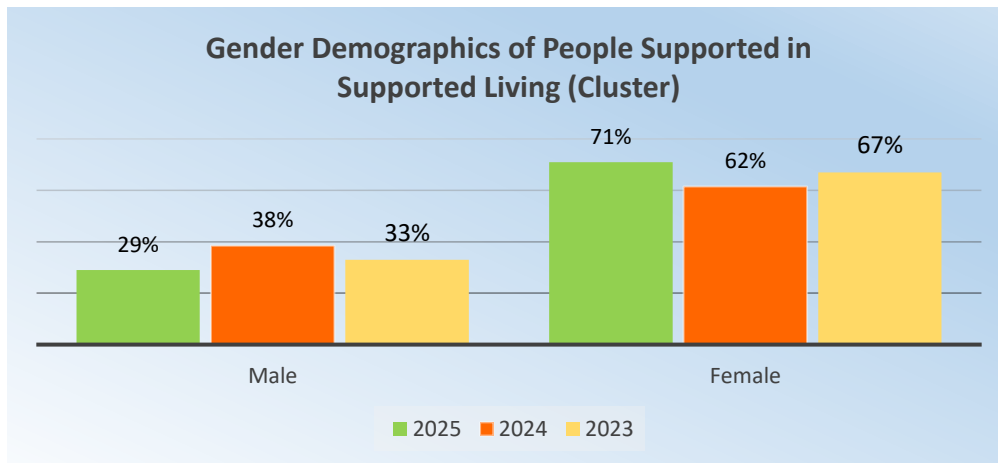
- 1 - Passed away

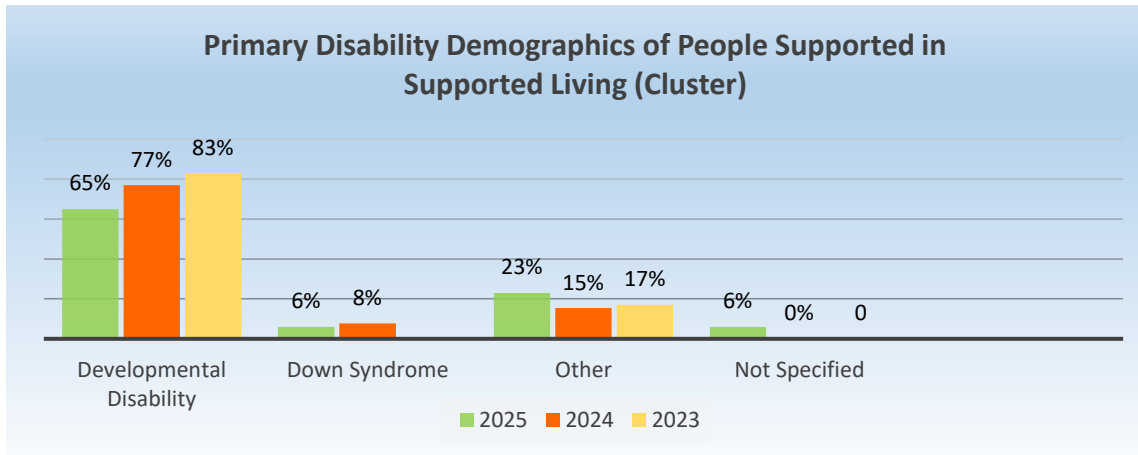
Supported Living (Cluster)

Introduction

Funder: Community Living BC

Description: There are seven employees who hold positions in our Supported Living (Cluster) department. This includes employees who hold management, full-time, and part-time positions. There are three employees from our Relief Pool who also work in this department that are not included in this number. Employees help people in their homes with their day-to-day living in the following areas: accessing the community; food preparation; household maintenance; maintaining health; daily hygiene; exercise; activities; visiting family and friends; skill acquisition; and development and support in attaining goals. The mandate of Supported Living (Cluster) is to provide support for people with disabilities who live independently in their own home. In 2025, we supported 13 people; five males and eight females.





Note: Demographics are gathered from active participants as of December 31, 2025

Recommendations

Recommendations and follow-up from 2025

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
Supported Living (Cluster) employees will help support people aged 25 years or younger, to continue to learn and gain skills around living alone, independent life, budgeting, schedules and more.	Day charts, manager visits to their homes and the overall happiness/pride seen by the people we support.	The newer, younger individuals we are supporting.	Day charts and SMART goals.	Cluster Employees and Manager	Jan 1 - Dec 31, 2025.	3 people supported	Achieved
Experience							
Supported Living (Cluster) employees will organize, help and encourage people supported to participate or volunteer at this summer's Special Olympics. This would be a fantastic experience for them.	All people receiving supports will be offered and encouraged to engage and participate.	People we support	Day charts, SMART goals, pictures.	Cluster Employees and Manager	July 12-15 2025.	50% of people to participate in some capacity.	Not achieved. 23% participation
Efficiency							
Supported Living (Cluster) employees will access the new PCP/SMART goal site on ShareVision and will transfer and keep individual	Monthly review of site will show up-to-date and it will be more streamlined and easier to	People we support	Day charts and ShareVision SMART goal site.	Cluster Employees and Manager	Jan 1 - Dec 31, 2025.	100% of people's goals will be transferred onto	Achieved

goals updated and on track.	document progress/data.					ShareVision site.	
Service Access							
Supported Living (Cluster) employees will help support individuals to access the Canfor Leisure pool and help them learn all there is to offer them.	All people receiving supports will be offered and encouraged to engage and attend.	People we support	Day charts and SMART goal forms.	Cluster Employees and Manager	Jan 1 - Dec 31, 2025	50% of the people will visit the Canfor Leisure Pool	Not achieved. 8% participation

Recommendations for 2026

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
Supported Living (Cluster) employees will help develop an employee schedule to better use time for service levels, logging and paperwork.	Quality charting, employees feeling less rushed, better-quality work with people supported. Employee survey at end of year.	All regular employees at the Cluster	Charting quality, employees' discussions and questionnaires	Cluster Employees and Manager	Jan 1 - Dec 31, 2026	Functional calendar to be complete by March, and reviewed quarterly, June, Sept, Dec, to modify as needed to meet the needs employees and tasks.	
Experience							
Supported Living (Cluster) employees will organize, help and encourage people supported to join a walking group/participate in the AiMHi walking group	All people receiving supports will be offered and encouraged to engage and participate.	People we support	Day charts, SMART goals, Move and Groove entries	Cluster Employees and Manager	Feb 1- Dec 31, 2026	25 % participation once a week	
Efficiency							
Cluster manager and employees will help create a check list schedule of due dates for binders, guidelines, health plans for quarterly, yearly, etc.	When it's created and in place and being used.	All Cluster employees and manager	The document itself and up-to-date ShareVision and binders.	Cluster employees and manager	Jan 1 - Dec 31, 2026	100% of people's binders updated by March, and reviewed June, Sept, December.	

Service Access							
Supported Living (Cluster) employees will help support people to participate in volunteering at KMS barbeque.	All people receiving supports will be offered and encouraged to engage and attend.	People we support	Day charts and SMART goal forms	Cluster employees and manager	May – Sept 2026	3 out of 5 of the KMS barbeques will be attended by 2 people supported and 1 employee.	

CARF Standards

There were 11 surveys distributed and 10 were returned by people receiving services in Support Living (Cluster).

Experience	Happy	Unhappy	Not Sure	No Answer
I know my rights.	100%	0%	0%	0%
I feel important in AiMHi and the community.	90%	0%	10%	0%
I am happy with the services I get from AiMHi.	100%	0%	0%	0%

Effectiveness	Happy	Unhappy	Not Sure	No Answer
I feel AiMHi keeps my information private.	100%	0%	0%	0%
I get help to make my own choices and decisions.	100%	0%	0%	0%

Efficiency

- Vacancy Rate - There are currently no vacancies at the Cluster.
- Goals/Goal Progress – All persons we support have signed new yearly contracts for 2025 that identify goals. A person’s ShareVision site is used to document a person’s goals and goal progress on a daily basis. Employees are provided ongoing training to ensure proper documentation and changes have been made on the site to address feedback received.

Access to services

People interested in AiMHi services need to be referred through Community Living British Columbia. The Emergency Placement process occurs on an as needed basis according to needs and availability. This is a cooperative process between AiMHi, Community Living British Columbia and Licensing when applicable.

Exit Reports

There were no exits in 2025.

Employees

Introduction

Funder: Community Living BC and Ministry of Children and Family Development.

Locations: Human Resources numbers include the entire Agency. We acquired a home in Vanderhoof in 2025, there are four people supported and seven employees. AiMHi includes residential locations, main office, Community Inclusions (Children/Adult Life Skills and Community Options), Employment Program, Infant Development, locations in Mackenzie and Smithers, and the attended donation station at 1000 1st Avenue.

Demographics: No demographic information was collected by Human Resources in 2025.

Overtime expenses: Our 2025 goal was to reduce the expenses by 10% from the prior year value of \$823,967 in 2024. In our 2025 calendar (payroll) year, our overtime expenses were \$644,463.83, representing a 22% decrease in expenses. We more than doubled our goal for reducing overtime in 2025, and we are pleased with this outcome. Our success is due to the consistent work that everyone is doing in this area. We will continue to find creative solutions and work toward reducing these expenses. Our goal is renewed for 2026, as we strive to reduce our overtime expenses by 10% compared to the prior year. This is not out of reach for us. Expenses in 2020 were \$492,416, representing a 67.3% increase from 2020 to 2024. In 2024 the average expenses for overtime per pay period was \$31,691. Comparatively in 2025, the average per pay period was down to \$24,787 per pay period.

Recommendations

Recommendations and follow up for 2025

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
HR needs to continue to focus on having adequate workforce available to decrease the costs associated with overtime.	Reduced costs due to a reduction of overtime shifts.	Employees	ComVida	Management team responsible for implementing change. Payroll Manger obtains all this information.	Jan 1, 2025 – Dec 31, 2025	10% reduction in overtime across the organization	Achieved
Experience							
Provide wellness opportunities to employees	To provide virtual and in attendance information to employees	Employees	HR Dept.	HR Dept.	Jan 1, 2025 – Dec 31, 2025	To provide five opportunities/information to the employees	Achieved

Efficiency							
HR needs to have the employee job descriptions reviewed in compliance with the Joint Job Evaluation Program.	Approval of five union employee job descriptions.	Employees	Job descriptions	CHRO	Jan 1, 2025 – Dec 31, 2025	Five job descriptions	Not achieved. One job description was completed.
Service Access							
Provide opportunities to encourage relief employees to feel more part of the AiMHi community	Encourage more participation and grow the culture of relief meetings, training and celebrations	Relief Employees	Monthly reports	HR Manager	Jan 1, 2025 - Dec 31, 2025	30% of employees in Employee Orientation will go into regular positions	40% of the new employees went straight into postings from EO. (within a month) Within a year of working 63% of relief employees entered Regular employment. 19 % entered Temp postings/Temp with out postings. 18% remain on the relief list and maintain this status as of the end of 2025.

Recommendations for 2026

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
HR needs to continue to focus on having adequate workforce available to decrease the costs associated with overtime.	Reduced costs due to a reduction of overtime shifts.	Employees	ComVida/ UKG	Management team responsible for implementing change. Payroll Manger obtains all this information.	Jan 1 – Dec 31, 2026	10% reduction over what was achieved in 2025	
Experience							
Develop and implement a seven day follow up form	Form will support Relief Employees in completing	New hires	Seven day follow up form	HR EO Manager	Jan 1 – Dec 31, 2026	Introduce in March Employment Orientation	

for Relief Employees	requisites, orientation planning and availability to be ready for work.						
Efficiency							
Implementation of UKG, a new employee Human Resources Information System	Reduction in manual labour in scheduling	The Agency	Scheduling and analytic reports	HR Project Manager	Jan 1 – Dec 31, 2026	Go live May 2026	
Service Access							
Develop a training manual from the UKG user guide to support training the Agency on UKG	Increased knowledge of UKG to increase efficiency in self-serve app.	Directors, Manager and Employees	Concept videos, reading material and UKG user guide.	Project and Training Leaders and Training Ambassadors.	May 13 – July 2, 2026	2 sessions per week between May 13 – July 2	

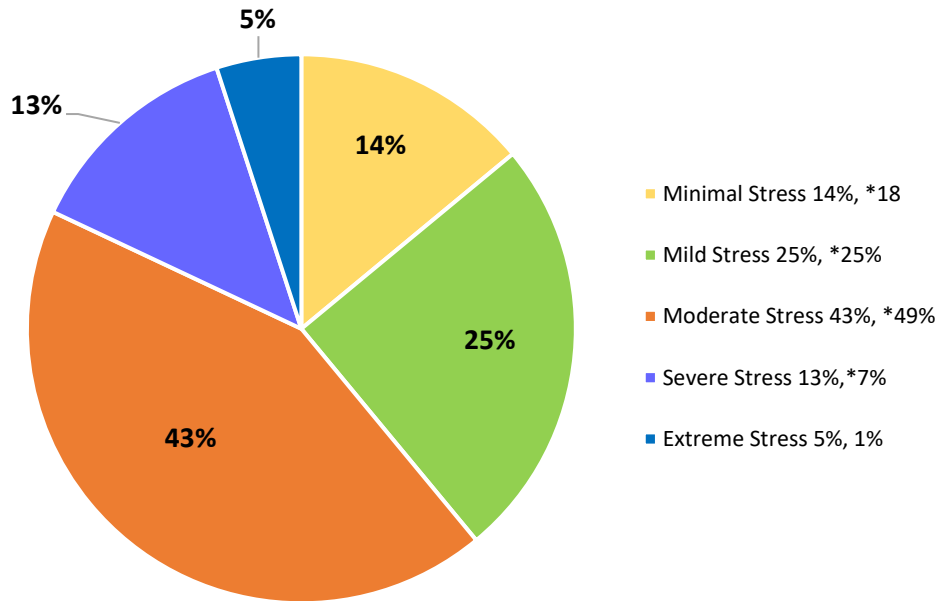
CARF Standards

In 2025, 76 employees completed the satisfaction survey. This is a decrease of 36 respondents from 2024. Our survey continues to be confidential and anonymous. Below are comments from completed surveys. We will continue to work on improving survey response numbers.

Experience	Yes	No	No Answer
Does the information AiMHi shares with you add value to your role?	91%	7%	2%
Is it easy to access the information you need when visiting AiMHi website, ShareVision, and ComVida?	66%	34%	0%
Do you feel your inquiries are responded to in a timely fashion?	66%	29%	5%
Do you feel AiMHi’s policies and practices protect your rights to confidentiality?	84%	15%	1%
Are you comfortable reporting a breach of confidentiality?	91%	9%	0%
Do you feel the opportunities provided by AiMHi flexible enough to support your growth and learning?	79%	20%	1%
Do you feel the education opportunities to be relevant to the challenges you face in the field?	66%	21%	13%
Has ShareVision training on Abuse and Neglect helped you to feel more comfortable reporting abuse and neglect concerns?	66%	29%	5%
Do you feel comfortable contacting AiMHi’s management when you have questions, concerns or comments?	78%	21%	1%
Do you feel AiMHi supports a positive teamwork environment?	75%	18%	7%
Would you recommend working at AiMHi to others?	87%	8%	5%

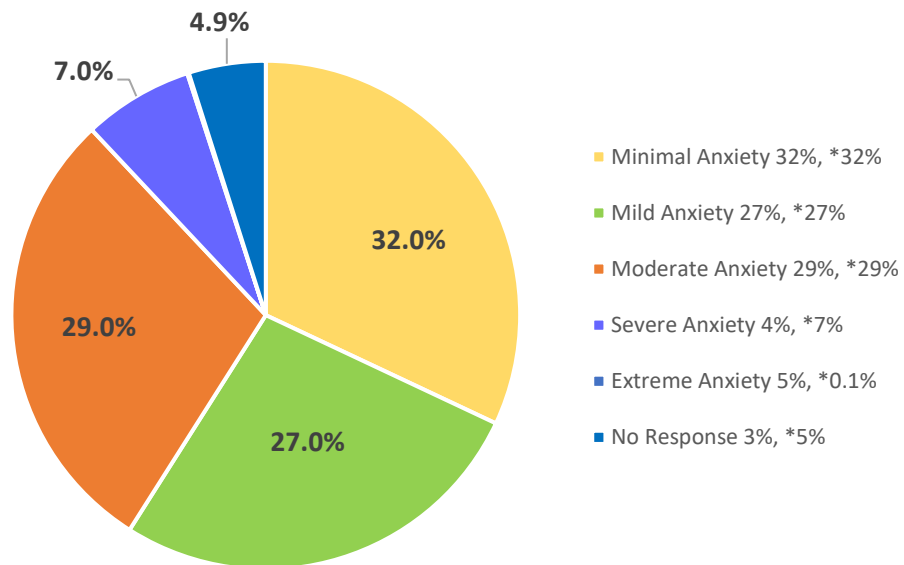
Do you feel AiMHi lives the Vision Statement “One Community – One Vision”?	88%	8%	4%
Do you feel AiMHi lives the Mission Statement “AiMHi provides opportunities and supports to people who have special needs and their families. Our culture empowers all people, both those we support and those we employ to live their best lives at work, at home and in the community. AiMHi strives to create strong communities which recognize and celebrate the value of all citizens”?	88%	8%	4%
At the heart of AiMHi is the fundamental belief that the organization’s role is to help people achieve a good life.	95%	5%	0%
The foundation of AiMHi is a culture of excellence, innovation and celebration.	92%	5%	3%
The individual development of every person contributes to the success and future of AiMHi.	95%	4%	1%
AiMHi supports people to feel confident, empowered and connected to others around them.	89%	3%	8%
AiMHi builds community through the development of respectful, supportive relationships and partnerships.	92%	3%	5%
AiMHi supports people to define opportunities, make choices and challenge limitations.	91%	4%	5%
AiMHi believes that advocating for positive social change contributes to a stronger, healthier community for everyone.	92%	7%	1%
Did you know that AiMHi has a Cultural Diversity and Inclusion Committee?	84%	11%	5%
Do you see yourself represented fairly in the current leadership of AiMHi (Board, Employees, Committees, etc.)?	73%	9%	18%
Have you or any of your peers encountered any barriers due to your age within AiMHi?	20%	68%	12%
Do you feel you have good work life balance?	66%	30%	4%
Do you feel your manager has created a working environment where you can openly discuss mental health concerns one-on-one?	69%	24%	7%
Do you feel your manager has created a working environment where you can openly discuss mental health as a team?	61%	29%	10%
Are you aware of the resources relating to Mental Health that are available at AiMHi?	94%	5%	1%

How would you rate your current stress level at work?



*Statistics from 2024 for comparison

How would you rate your current anxiety level at work?



*Statistics from 2024 for comparison

Is there any specific training or skill development related to your employment you need or are interested in learning?

- More with mental health and aging and what that looks like for the people we support
- Accountability based management
- Down syndrome and dementia
- Autism and ADHD
- Sign language
- More training around diversity, Indigenous cultural training, addiction and dual diagnosis
- Technology training, computers
- Class 4 driver training study group
- Build compassion and communication skills with role playing practice and real examples
- More detailed training regarding cash management and properly recording financial transactions
- Would love to learn about managing or acting manager

What are your favourite things about working here?

- Making a difference in the lives of those we support
- Relationships with people
- Teamwork, the culture and enjoying the people we support. Very positive
- Seeing a person supported grow, show joy, and be included
- The variety of lovely people we support and our peers. There are so many amazing people here
- Access to training and professional growth
- Watching the children grow and learn new things while attending respite
- No two days are the same
- Helping the people we support live their best lives
- Teamwork
- The people we support
- Better work life balance, friendly employees, community feel, yearly events like the June picnic and cultural celebrations
- Pride in doing a good job in taking care of people we support and their home
- Flexibility of hours
- The people and the positive environment

What areas do you feel AiMHi excels in?

- Supporting people to live good lives
- Promoting community inclusion, helping people to feel important
- Health and safety
- Helping people live their best lives
- Training and positive environment
- People's rights
- Celebrating
- Communication and processes
- Structure, very good training and orientation
- Advocating for people
- Inclusion and community involvement

- Caring about people – all people

What is one thing you would change about working here?

- Streamline processes and reduce duplication in work
- More money or more get togethers that encourage fun time to build culture
- Increased pay
- More training for specific shifts
- What you know, not who you know
- You never know if you're doing something right, but you sure hear about it if you've done something wrong or not up to expectations. I wish we celebrated employee wins more.
- More time with people we support, less paperwork
- The amount of administration
- Communication and front-line workers being heard more
- Not forcing us to use our personal phones for AiMHi business
- All the red tape of getting into a program
- In a perfect world, I would like to see a larger building and parking lot

As an organization, what do you feel we should be doing more or less of?

- We do well with the overall vision and big picture. We could use a bit more attention to the little details and, where possible, share how the little details build into the big picture.
- Less junk food. More movement activities. More learning activities like cooking and reading.
- Simplify SMART goal system.
- Less meetings and more team building activities.
- More transparency – tell employees what's next/upcoming projects.
- More time with the people we support and less being buried in a bunch of paperwork which takes meaningful time away from them.
- Employee safety. Day Services do not have cell phones for safety.
- More training.
- Already expanded service area but could space it out to have less urgent timelines.

Recruitment

AiMHi prides ourselves on continuous recruitment throughout the year. Our organization operates 24 hours a day. The goal is to maintain a workforce that allows for consistent coverage and the reliability of providing the best quality of life to the people we support. The graph below shows our commitment to our recruitment program. In future reports you will see the comparisons from year to year in these four categories.

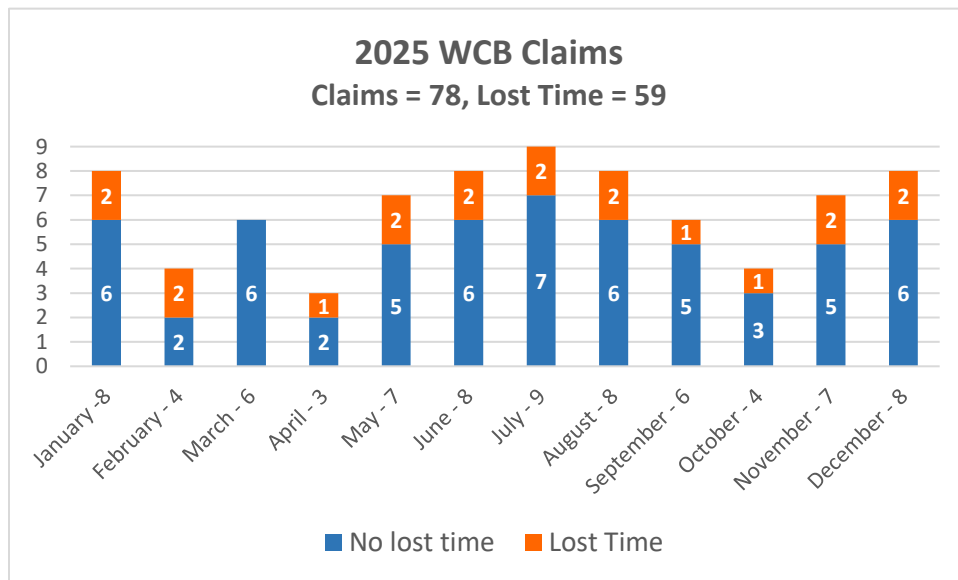


The job shadow assignment is part of the employment orientation. New hires are required to visit pre-assigned homes, where they are given a tour and provided with an overview of the daily activities and schedule. This hands-on experience allows them to gain a better understanding of the homes and how the agency operates. This will allow for new hires to choose a desired home/department as soon as their requisites are completed, decreasing the amount of time between completing Employment Orientation and a regular position in the Agency.

Employee Wellbeing

The health of our employees is crucial to the success of our organization. We encourage early return to work and offer modified duties as soon as an employee is hurt.

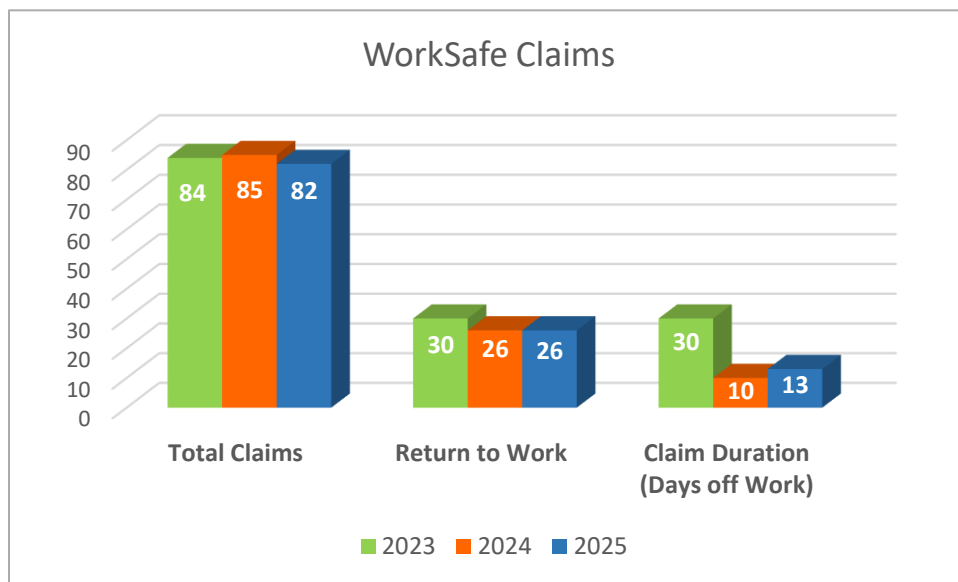
The chart below shows the total claims for the year and how many claims had lost time.



Employees have access to a third-party counselling/employee assistance program service that is included with their benefits package. Information regarding services is distributed with the benefits package. The employer sends information out to employees around the employee assistance program.

Employees have access to Disability Management Institute (DMI) when they are on a non-occupational or occupational leave. AiMHi worked with DMI to increase the eligibility of qualified employees to include over 65 years of age and relief status employees. Employees receive support through WorkSafe BC for occupational injuries.

The chart below shows the last three years of claims, the number of return-to-work claims and the length of days off. There was a significant decrease of days off per claim from 2023 to 2025. There was a discrepancy of four WorkSafe claims and AiMHi claims in 2025. These discrepancies can occur if a claim is non-active (no medical treatment or lost time).

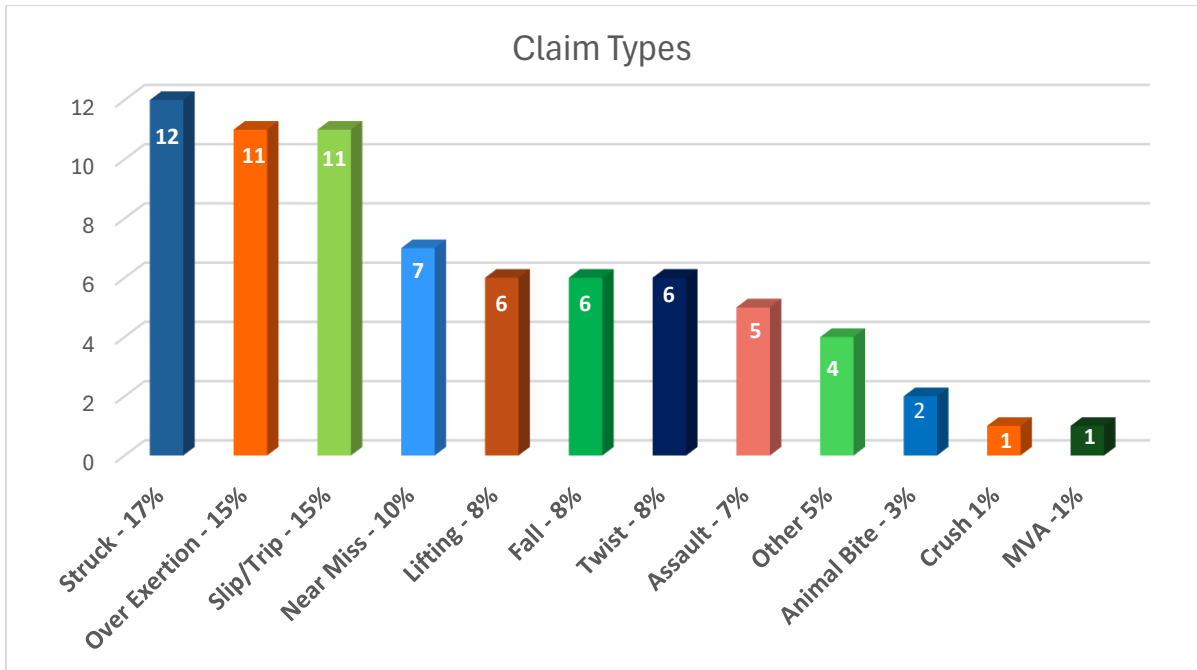


Below is a chart describing the claim types for 2025. The top three claims are:

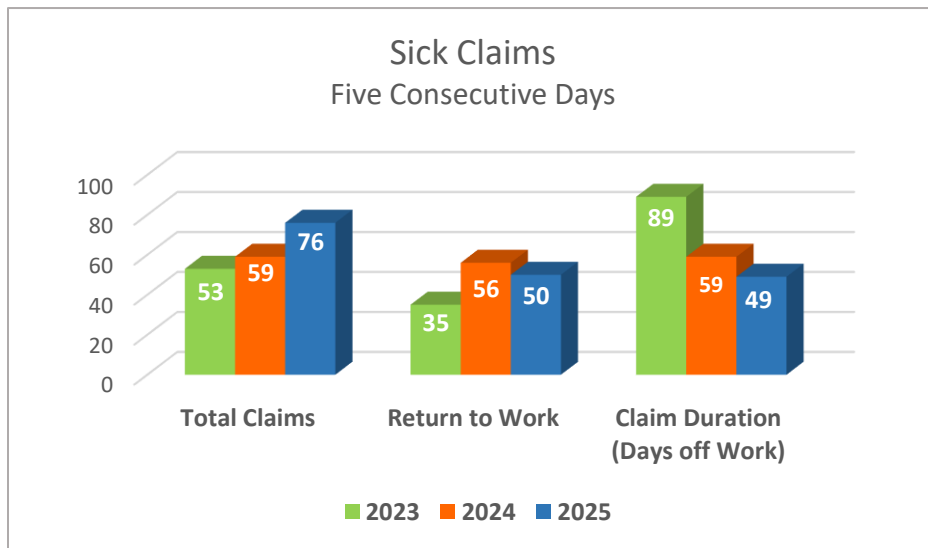
- Struck
- Over Exertion
- Slip/Trip

*Struck is a broad definition. It can mean an employee can be struck by object or a person unintentionally

**Slip/Trips happen outside for the majority of incidents and are based on weather conditions.

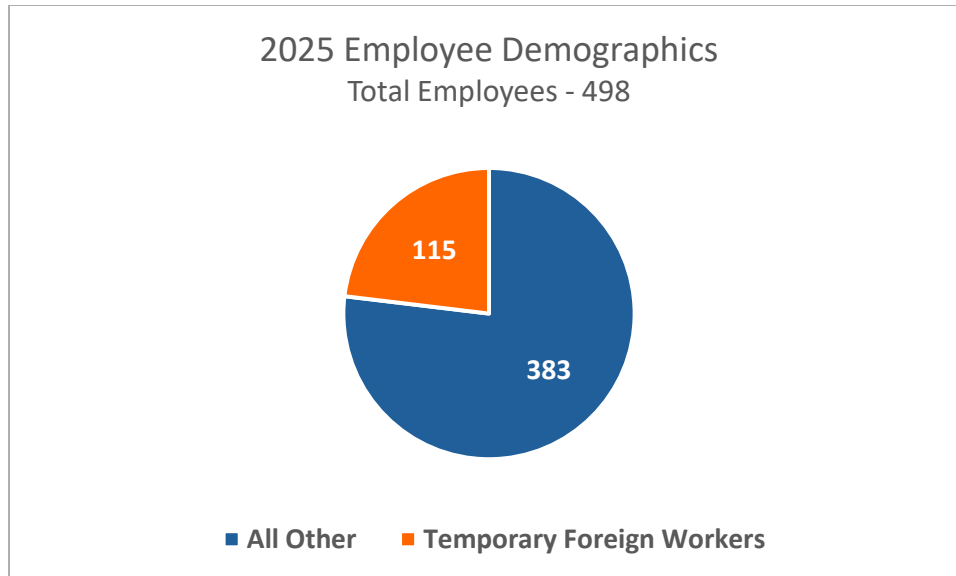


Sick time has increased by 43% since 2023, however the lengths of days off has decreased by 40 days which is a decrease of 45% since 2023. The return-to-work claims have increased 43% with 15 more claims in 2025. This is a direct correlation to a decrease of days off.



Employee Demographics

At the end of 2025, approximately 23% of our employee demographic was temporary foreign workers. Employing temporary foreign workers allows the Agency the opportunity to meet the growing demands. Recent changes to legislation have reduced the hours per week that temporary foreign workers on study permits can work to 24 hours. The work we offer provides temporary foreign workers the opportunity to obtain permanent residency, however this may lead the temporary foreign workers to leave our agency for other employment.



Training

New employees are provided with information, training and support to uphold AiMHi’s commitment to obtain and retain qualified employees. Required training such as: emergency first aid; crisis intervention training; Food Safe; annual required training; and relevant education/experience is essential for all employees.

Employment Orientation requires participants to engage in advanced reading on topics such as abuse and neglect, health and safety, respect in the workplace, person centered thinking, finance modules, policy reviews and WHMIS. This allows participants to familiarize themselves with these subjects, leading to more meaningful discussions and a higher level of understanding.

Besides the above training that had many components to build skills in leadership capacity, the management team was also provided with leadership training in the form of:

1. Attendance management guidance
2. WorkSafe training- presented on facts and response to work injuries
3. Employer incident investigations
4. ComVida training
5. HR topics: foreign workers; service levels; Bill 41; and administrative processes
6. Having difficult conversations

Understanding Trauma Informed Practices, interdependence, and compassion through the Relationship Matters training was valuable, insightful and inspiring. Supporting people to be the best version of themselves versus changing people to meet the standards of other is the caring gesture that supports growth. This training was offered to all employees in 2023.

Exit Reports

In 2025, we saw 99 employees leave AiMHi. Our retention continues to improve each year, as we are seeing a decline in the number of employees leaving AiMHi; 2023 (113) and 2024 (101). While usually we see more casual employees leaving AiMHi than regular employees, in 2025 the split was 46% casual and 54% regular status employees. In 2025 we saw a decline in employees leaving for other jobs (20% in 2025 compared to

29% in 2024) however this remains our most common reason for employees leaving. We continue to work on hiring employees into positions that they desire, in order to improve the retention of AiMHi’s employees.

Reason for Leaving	2025	2024	2023	2022
Abandonment	13	10	16	25
Availability	2	3	13	1
End of Term	0	0	0	0
Expired Work Permit	5	0	1	0
Family	6	8	10	5
Health	7	6	3	5
Moving	9	11	9	13
Other	12	4	2	18
Other Job	20	29	26	34
Passed Away	1	1	4	1
Retirement	7	8	10	9
School	9	8	7	9
Undisclosed - Personal	1	8	9	7
Unsuitability & Discipline	7	5	3	9
TOTAL	99	101	113	136

Years of Service at Time of Leaving	2025	2024	2023	2022
0 months	10	10	14	24
3 months or less	11	11	23	15
4 months to 6 months	7	13	12	9
7 months to 1 year	12	9	14	14
+1 year to 3 years	29	25	16	39
+3 years to 5 years	14	8	11	13
+5 years to 10 years	6	13	6	7
+10 years	10	12	17	15
TOTAL	99	101	113	136

Title at Termination / Resignation	2025	2024	2023	2022
Asleep Night	2	0	5	2
Community Support	1	1	1	1
Administration	0	1	0	2
Employment Trainer	3	1	0	6
Family Support	1	0	0	1
Infant Development	0	0	1	0
Life Skills	6	6	9	3
Relief	46	44	61	60
Residential	36	43	32	56
Management	4	5	4	5
TOTAL	99	101	113	136

Employment Services (Infinite Employment Solutions)

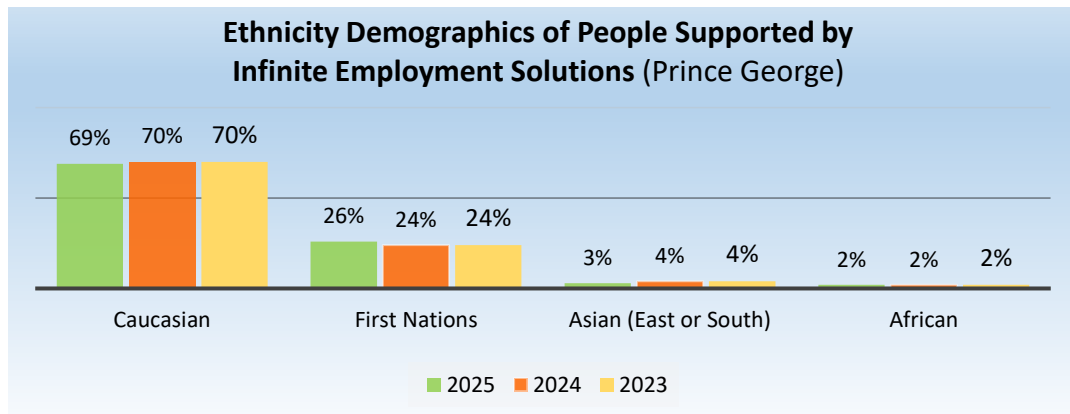
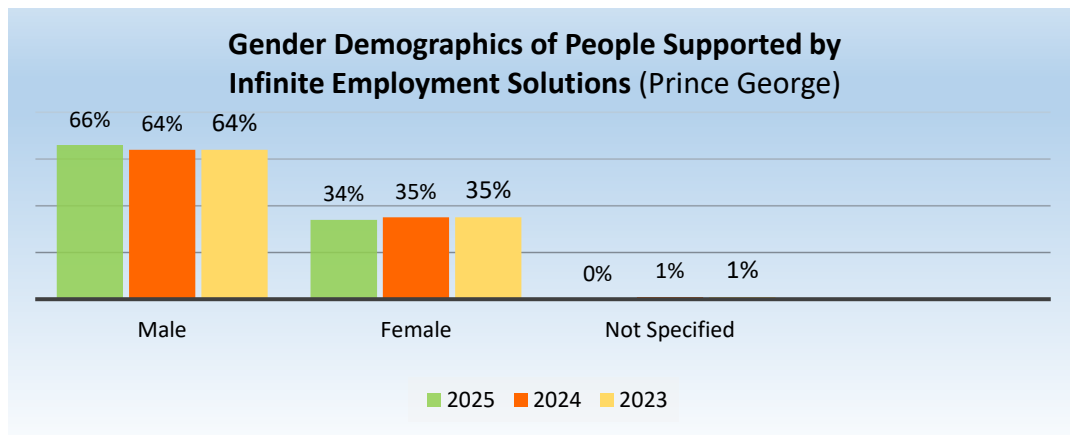
Introduction

Funder: [Community Living BC](#)

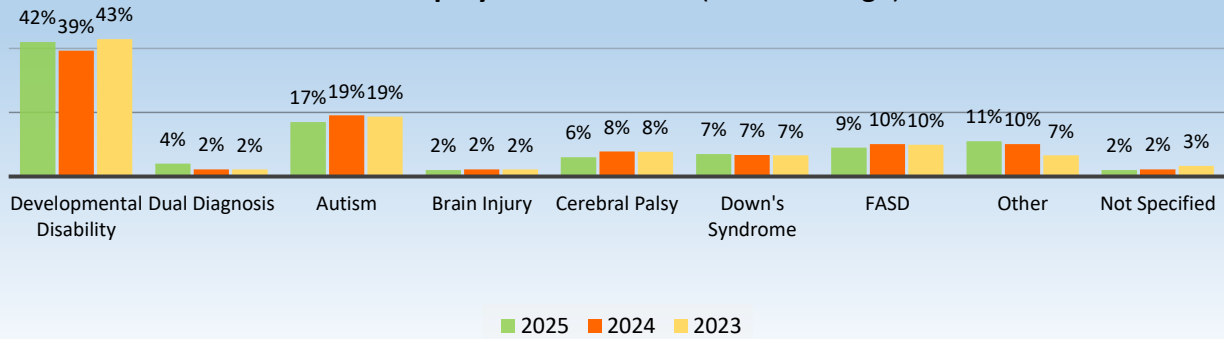
Description: Infinite Employment Solutions (IES) Prince George and Community Inclusion - Mackenzie.

Mandate: “Infinite Employment Solutions believes that all people have the right to contribute to their community by having meaningful and gainful employment.” Infinite Employment Solutions assists those who have identified employment as a goal. The IES team works directly with people to create extensive career plans by way of career interest assessments, skill training, job development, job coaching and support, SMART goals and person-centered planning to achieve labour market attachment.

Infinite Employment Solutions Prince George currently employs eight full-time employees out of the Kerry Street main office and our warehouse location (1000 1st Avenue). Community Inclusion Mackenzie (540 Mackenzie Blvd) has two full-time employees located within the College of New Caledonia building.

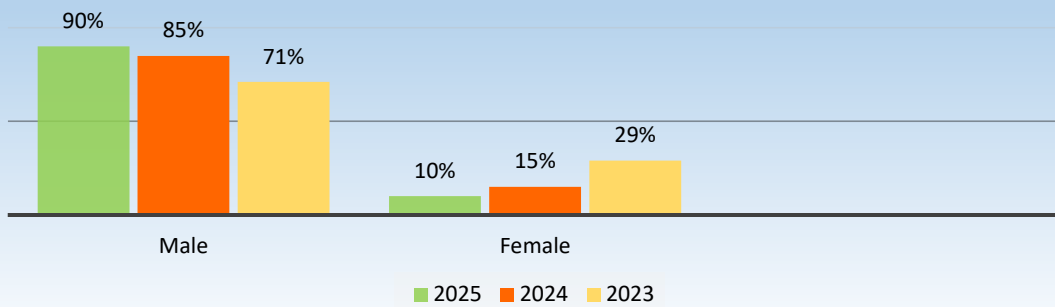


Primary Disability Demographics of People Supported by Infinite Employment Solutions (Prince George)

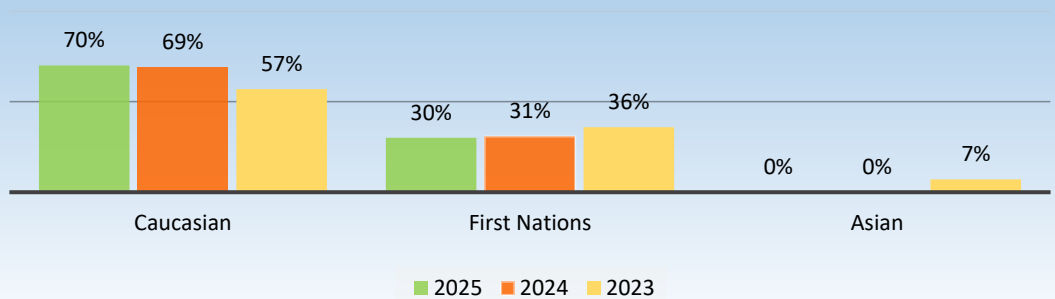


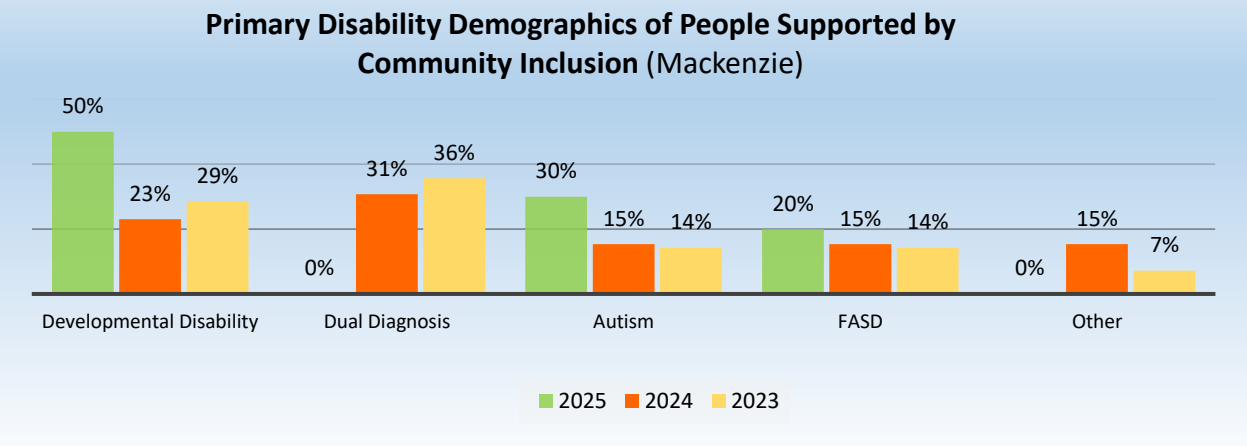
Note: Demographics are gathered from active participants as of December 31, 2025

Gender Demographics of People Supported by Community Inclusion (Mackenzie)



Ethnicity Demographics of People Supported by Community Inclusion (Mackenzie)





Note: Demographics are gathered from active participants as of December 31, 2025

Programs that IES provides are listed below:

- **Individualized Career Planning and Career Development:** Job Developers work with people on a one-to-one basis throughout the entire career planning process upon referral from CLBC. This process could involve work interest assessment tools that result in determining an individual’s work values and workplace preferences. We assist in resume and cover letter creation and interviewing skills. Job Developers also work with employers to promote and market the benefits of hiring someone with a DiverseAbility. Once employment is secured, job coaching services are available along with assistance in understanding workplace culture and expectations. There were 15 community jobs started in 2025.

For some, a more in-depth approach is required as people may have little to no work history. To aid in this, IES offers employment training opportunities to people who are seeking employment skills. All trainees receive a training allowance at minimum wage.

- **Common Goods (Value Village) and Bike Warehouse:** Individuals learn and develop skills to work as telemarketers, cube-van swampers, data entry, bike repair/selling and warehouse responsibilities. Each participant generally works two to five-hour shifts and up to three days a week. Ongoing feedback is provided and mutual strategic planning/goal setting is reviewed quarterly. There were nine callers, ten cube-van swampers, three warehouse assistants, and four bike warehouse trainees in 2025.
- **Main Office Cleaners:** Individuals sanitize the gym equipment, sweep/mop gym floor, sanitize Snoezelen Room and top up cleaner bottles in meeting rooms. There were four trainees in 2025.
- **Mobile Crew:** Provides snow removal, lawn care, dump runs, general yard maintenance, and internal moving services to AiMHi homes. Each participant generally works three to six-hour shifts and up to three days a week. Employment readiness skills such as safety, communication, social skills, initiative, production speed and quality of work are evaluated. Employment preparation such as work safety and WHMIS are reinforced through hands-on work and morning safety training “tailgate” meetings daily. Ongoing feedback is provided and mutual strategic planning/goal setting is reviewed quarterly. Ten people participated in this program in 2025.

Community Inclusion (CI) Mackenzie mainly provides Life Skills, Job Development6 and Community Options opportunities. In 2025, 13 people participated in this program.

Recommendations

Recommendations and follow up for 2025 - IES

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
Create appealing social groups/workshops for employment/safety skills.	An increase in attendance	Employment Seekers (Person Supported)	Attendance Records - ShareVision	Employment Specialists	Jan - Dec 2025	Host two employment themed social events	Achieved. Daily tailgate meetings, three training meetings, and one safety appreciation event.
Experience							
Approach local businesses for MentorAbility placements	An increase of MentorAbility placements	Employment Seekers (Person Supported)	New Mentors	Employment Specialists	Jan - Dec 2025	We will facilitate four MentorAbility placements	Not achieved, 3 out of 4 placements were facilitated.
Efficiency							
Community Connections Database	A list of community resources and connections accessible by IES employees	Employment Seekers (Person Supported)	Database accessible on W: Drive	Employment Specialists	Jan - Dec 2025	Add five new community resources and connections to the list.	Not achieved. IES joined a Job developer network and purchased a resource directory.
Service Access							
Develop digital resources for take-home packages.	An updated IES intake take-home package	Employment Seekers (Person Supported) and Families/ Supports	Intake Package (ShareVision & W:Drive)	Employment Specialists	Jan - Dec 2025	Three digital resources.	Not achieved. Intake package was updated but could not be digitized due to privacy and consent.

Recommendations for 2026 - IES

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
As we transition away from employment training programs, we will focus on job development, marketing and barrier education courses for 100% of IES employees	Research and enroll in CASE (Canadian Association for Supported Employment) and BCEN (British Columbia Employment	Job Developers	CASE & BCEN websites. Course work delivered virtually.	Manager and Job Developers	Jan - Dec 2026	100% of IES workers complete training.	

	Network) courses						
Experience							
IES will participate in youth/young adult employment events in Prince George	In partnership with Inclusion BC and The Rotary	Employment Seekers (Person Supported)	Inclusion BC and Rotary	Job Developers	Jan - Dec 2026	Two events	
Efficiency							
IES will contact trade workers and educators and host one career day at AiMHi	Make connections with the trades program at CNC, workers in the trades and research online	Employment Seekers (Person Supported)	CNC, online research	Job Developers	June - Dec 2026	20 trade workers/ educators to attend career day.	
Service Access							
Attend networking activities with other Job Developers in Prince George	Websites, reaching out to other supported employment agencies in PG	Job Developers	Other Job Developers in Prince George	Job Developers & Prince George Professionals	Jan - Dec 2026	Participate in three networking events to increase resources for supporting with diverse abilities.	

Recommendations and follow up for 2025 – CI Mackenzie

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
Create engaging workshop centered on Life Skills.	An increase in attendance	CI Mackenzie Participants (Person Supported)	Attendance Records - ShareVision	Community Inclusion Workers	Jan - Dec 2025	Host two workshops.	Achieved: Gardening and Kitchen etiquette workshop.
Experience							
Identify areas within Mackenzie for community groups.	An increase of group activities in community	CI Mackenzie Participants (Person Supported)	New community locations	Community Inclusion Workers	Jan - Dec 2025	Establish two community groups for CI Mackenzie.	Achieved: Senior's Lunch, Weekly Social Group and Community Gardening.
Efficiency							
Develop a comprehensive life skills resource database.	A list of available life skills resources	CI Mackenzie Participants (Person Supported)	Database accessible on ShareVision documents	Community Inclusion Workers	Jan - Dec 2025	Create three new "how-to" life skills documents for the database.	Achieved: resource database on laundry, money, communication and mobility skills.
Service Access							

Increase awareness of CI Mackenzie services	Service interest by new community participants.	CI Mackenzie Participants (Person Supported), Families and Community	Manager	Community Inclusion Workers	Jan - Dec 2025	Host CLBC in Mackenzie Community	Achieved: In October CLBC increased by making a presentation to teacher and facility of local high school. Attended the May Spring Exposition and sold 50/50 raffle tickets twice throughout the year at the local mall.
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Recommendations for 2026 – CI Mackenzie

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
Use attendance data to identify preferred group activities and adjust programming to support sustained or increased participant attendance over the program year.	An increase in attendance in group activities.	People Supported	Attendance Records – ShareVision. Survey people served.	Community Inclusion Workers	Jan - Dec 2026	Create three new community engagement activities.	
Experience							
Create a PowerPoint intake presentation which includes pictures and positive experiences in CI Mackenzie	Creative way to showcase successes in CI Mackenzie in a new format	People supported and their families	Pictures of previous events	Community Inclusion Workers	Jan - Dec 2026	December 2026	
Efficiency							
Modify and update “Life Skills for Independence” manual. A comprehensive manual encompassing the resources offered by the community of Mackenzie.	An increase in life skills materials that complement the program and support individual learning needs.	People Supported	Database created on ShareVision.	Community Inclusion Workers	Jan – Oct 2026	Complete comprehensive Life Skills for Independence manual completed by October 2026	

Service Access							
Increase community awareness of AiMHi and what services are provided.	Service interest by new community participants.	CI Mackenzie Participants (Person Supported), Families and Community	Manager	Community Inclusion Workers	Jan - Dec 2026	CI Mckenzie will attend two community events to increase awareness of services.	

CARF Standards

IES surveys were prepared for 75 people. Three people were unable to complete the survey due to being non-verbal, nine people declined to answer the survey, eight people were unable to be contacted, three people exited services and two people did not complete the survey for other reasons. The following results are based on 50 surveys that were completed.

Experience	Agree	Disagree	Unsure	No Answer
IES helped me discover my career choices.	94%	2%	4%	0%
IES helps me gain skills to get paying jobs, work experiences or volunteer opportunities.	88%	2%	6%	4%
I am happy with the services I get from IES.	98%	0%	2%	0%
Effectiveness				
I feel that IES keeps my information private.	98%	0%	0%	2%
I get help or feel supported to make my own choices and decisions.	94%	2%	4%	0%

Efficiency

- Common Goods – IES had 26 people trained in this paid initiative. There were nine callers, ten cube-van swamper, three warehouse assistants, and four bike warehouse trainees in 2025.
- Mobile Crew – Maintains driveways, sidewalks and lawns for AiMHi owned homes and Davie Street homes under the Mow to Snow contract, along with one community customer for snow removal and several A&H community customers. Ten people participated in this program in 2025.
- CI Mackenzie – CI Mackenzie does not facilitate training programs, but provides Life Skills, Job Development and Community Options to the 13 people we support there.

Access to Service

Community Living BC holds the referral list for all people interested in services. The person must qualify for Community Living BC services. Services are provided as referrals are received. The referral may be incorporated into the global contract or they will initiate a Funding Guide Template (FGT). The referral will then be passed to the Director of Services who is in charge of Employment Solutions, and then the Manager. If the IES team member is unable to connect with the person referred, the IES Manager will contact Community Living BC to request additional contact information and further instructions. IES received 19 referrals under the global contract and three in the PSI (Personalized Supports Initiative) in Prince George and one referral for Mackenzie under global contract supports in 2025.

Exit Report

There were 16 people who exited Infinite Employment Solutions (Prince George) in 2025. The reasons were as follows:

- 2 – Reached goals and no longer require services
- 6 – Could not make contact
- 5 – Employment is no longer a goal
- 1 – Moved
- 1 – Not interested in services
- 1 – Mental Health

There were three people who exited CI Mackenzie in 2025. The reasons were as follows:

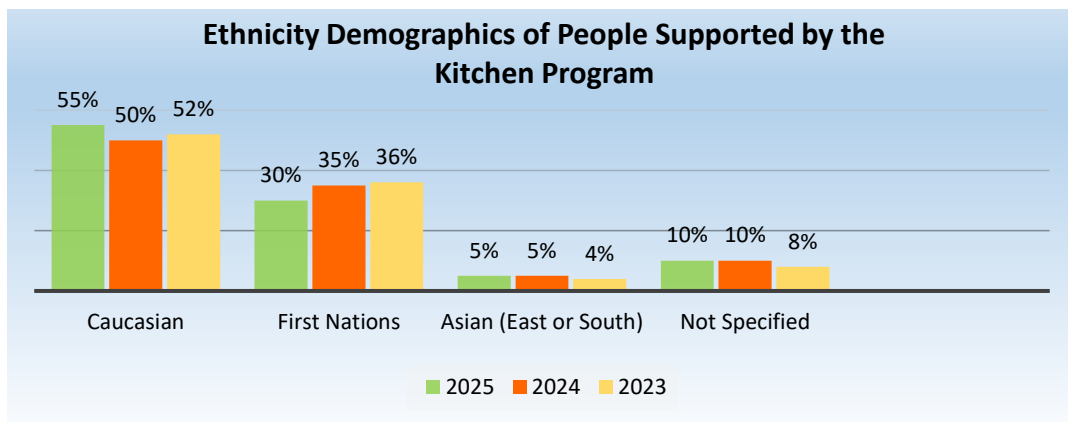
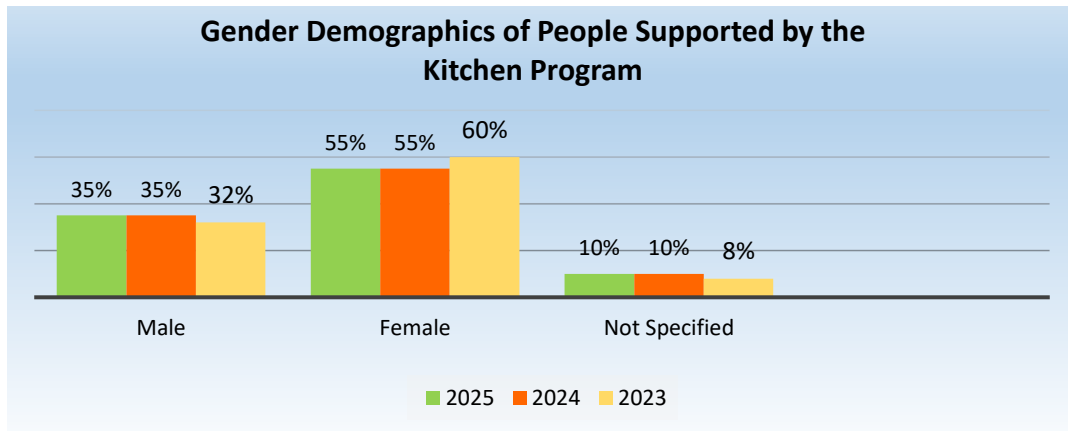
- 3 – Moved

Kerry Kitchen

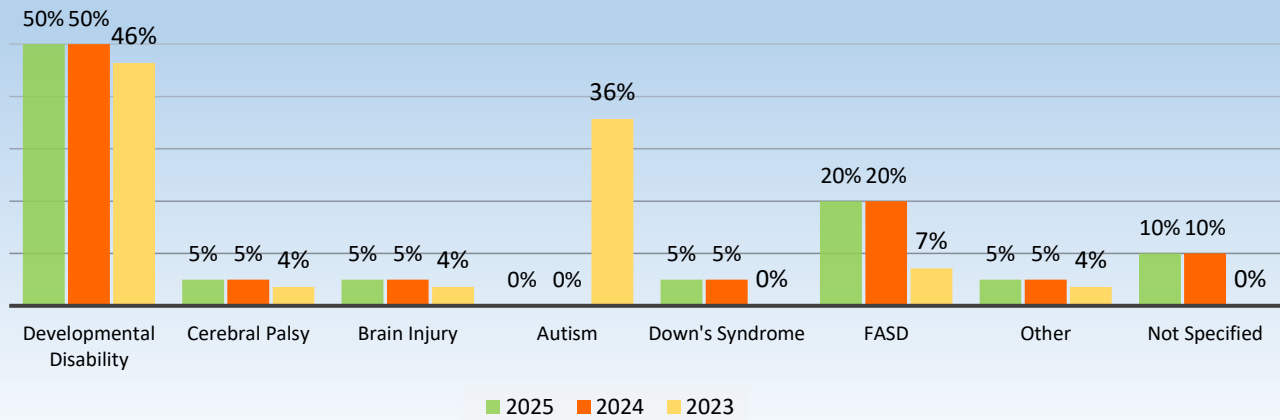
Introduction

Funder: Community Living BC

Description: The Kitchen Program, funded by Community Living BC, aims to equip individuals with essential food skills, kitchen safety knowledge, and employment preparation. The program offers a Kitchen Skills Program providing training in food preparation, food serving, front counter attending, and sanitation/dishwashing. Our goal for this year is to enhance the effectiveness, experience, efficiency, and service access of the program.



Primary Disability Demographics of People Supported by the Kitchen Program



Note: Demographics are gathered from active participants as of December 31, 2025

Recommendations

Recommendations and follow-up for 2025

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
Maintain a steady flow of referrals (16 per year) through expanded outreach.	Referral forms from CLBC and internal referrals	People we support	Tracking sheet	Manager	Jan 1 – Dec 31, 2025	Strengthen outreach efforts, build new partnerships, and promote the program through community networks.	Achieved, 16 trainees participated in the kitchen program in 2025.
Experience							
Enhance personalized training with structured quarterly mentorship.	Personalize training plans to align with participants' long-term career goals in the food industry.	People we support	Tracking sheet	Manager	Jan 1 – Dec 31, 2025	Implement quarterly progress reviews to track skills development and provide additional mentorship as needed	Not achieved, Yearly evaluation was completed.
Efficiency							
Reduce wait times for referrals, ensuring quicker access to training.	Reduce referral wait times from two weeks to one week for faster enrollment.	People we support	Tracking sheet	Manager	Jan 1 – Dec 31, 2025	Implement a pre-screening process to match referrals with available	Not achieved. 60% of referrals were pre-screened

						training slots quickly.	within the 2-week period.
Service Access							
Increase hands-on community participation, helping participants gain industry exposure.	Increase participation in community-based food activities.	People we support	Tracking sheet	Manager	Jan 1 – Dec 31, 2025	Organize two community-based events per year, such as food fairs, collaborative cooking sessions, and industry networking opportunities.	Achieved, Catered the Truth & Reconciliation event in October and CLBC meeting.

Recommendations for 2026

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
Sustain a steady flow of referrals this year by expanding efforts while restructuring the Kitchen program	Receiving referrals and inquiries on regular basis	People we support	Tracking sheet	Manager	Jan 1 – Dec 31, 2026	16 new referrals to participate in the program for 2026.	
Experience							
Execute a systematic training rotation to achieve competency within the kitchen program to prepare persons supported for community employment.	Progress of trainees can be seen on the sign off sheet and one-to-one training logs as required	Kitchen Program Trainees	Evaluation	Manager/ Kitchen Employee	Jan 1 – Dec 31, 2026	Achieve 80% proficiency across all kitchen stations	
Efficiency							
Implement support plans to retain participants throughout the entire 12-week training cycle	Verification of program graduation for 80% of the trainees as evidenced by 12 weeks of completed attendance logs and final competency assessments	Kitchen Program Trainees	Completed attendance logs and final competency assessments	Manager/ kitchen employee	Jan 1 – Dec 31, 2026	80% of participants successfully complete the full 12-week training curriculum	
Service Access							
Distribute a quarterly email to all AiMHi employees that	Delivery of scheduled email updates and response to	People we support	Tracking monthly and quarterly emails	Manager	Jan 1 – Dec 31, 2026	Send out emails four times a year to the	

outlines available training, enrollment dates, and station-specific learning opportunities	emails about the training openings					Agency four weeks prior to starting kitchen training program to have people supported in homes participate.	
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CARF Standards

The Satisfaction Survey was distributed to six Kitchen Program trainees. The data presented is based on the six completed surveys.

Experience	Happy	Unhappy	Not Sure	No Answer
I am happy with the services I get from the AiMHi Kitchen Program.	100%	0%	0%	0%
I know my rights.	83%	0%	17%	0%
I felt supported learning all the different jobs in the kitchen.	100%	0%	0%	0%

Effectiveness	Happy	Unhappy	Not Sure	No Answer
I feel that AiMHi keeps my information private.	100%	0%	0%	0%
I get help to make my own choices and decisions.	100%	0%	0%	0%
The AiMHi Kitchen Program helped me learn new skills in all areas in the kitchen, for personal and job opportunity.	100%	0%	0%	0%

Efficiency

- Monitor participation rates, success rates, and program completion rates regularly.
- Analyze trends in referrals and wait times to identify areas for improvement.
- Address any disruptions in program continuity promptly to minimize the impact on participant engagement.

By implementing these strategies and closely monitoring progress against set goals, we aim to enhance the overall effectiveness and participant experience of the Kitchen Program while ensuring efficient service delivery and improved access to program resources.

Access to Service

- Maintain open communication channels with Community Living BC to streamline the referral process.
- Conduct periodic reviews of service accessibility to identify barriers and implement solutions.
- Seek feedback from participants and stakeholders to continuously improve service delivery.

Exit Reports

In 2025, eight people exited out of the Kitchen Program. The reasons were as follows:

- 6- Goals achieved
- 2 - Left program

Intensive Family-Based Services (Family Support)

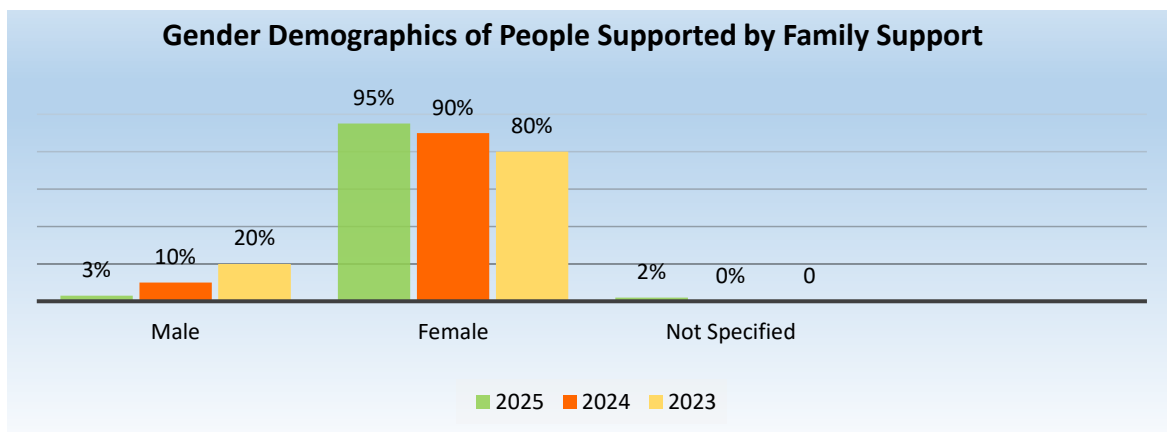
Introduction

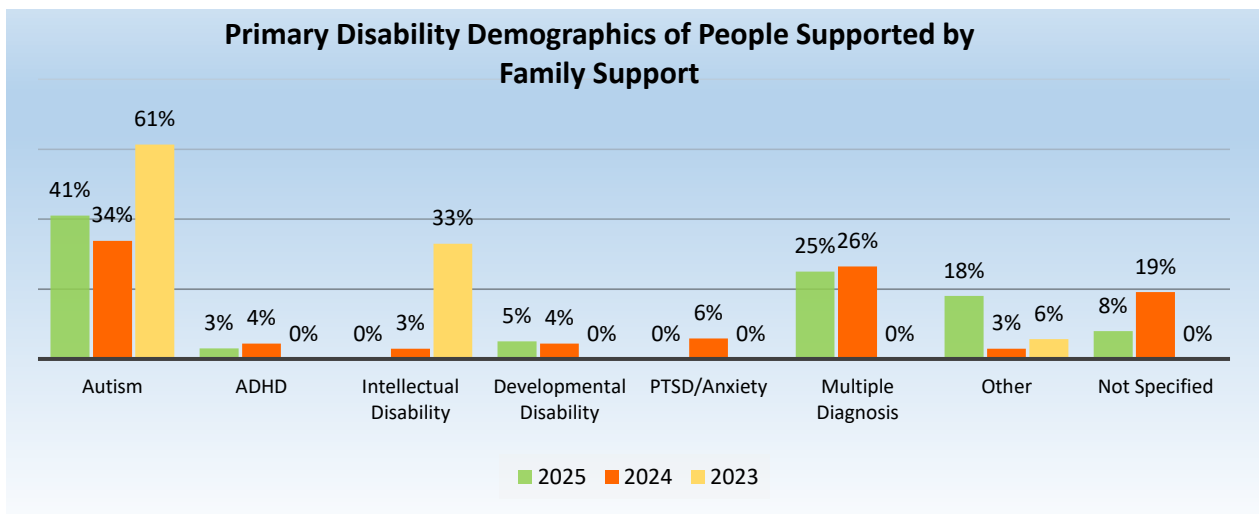
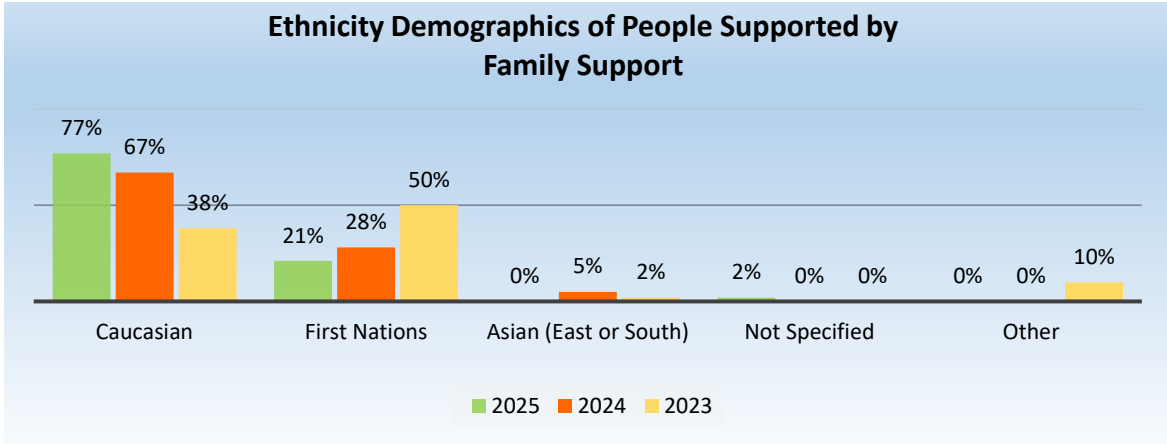
Funder: Ministry of Children and Family Development/Children and Youth with Special Needs

Description: The Family Support Program is available to all families who have children under the age of 19 years who are diagnosed with a developmental disability. The family is referred by the Children and Youth with Special Needs (CYSN) which is funded by the Ministry of Children and Family Development (MCFD). Family Support is a community and home-based service in which the parents are the chief decision makers.

Our mandate is to facilitate a family centered support system based upon the strengths and needs of the families. We assist families with:

- Developing and maintaining a sense of responsibility, motivation, commitment and independence.
- Coordinating health, educational and social services within the community through accessing community programs and resources, i.e., leisure, education, parenting, etc.
- Obtaining referrals for families to other agencies, programs and specialists.
- Enhancing communication skills.
- Promoting healthy lifestyles.
- Prenatal and postnatal care.
- Development of support networks.
- Facilitating transitions and establishing routines.
- Gathering and interpreting resource information.
- Crisis intervention as required.
- Helping parents learn how to manage their child's behaviour.
- Learning to advocate for their families.
- Support to seek funding for their child's assistive needs.
- Self-care strategies.





Note: Demographics are gathered from active participants as of December 31, 2025

Recommendations

Recommendations and follow-up for 2025

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
Family support will consolidate all their resources into a central database.	Comprehensive database of resources and training materials.	Employees	Family Support Drive	Manager	Apr 2025 – Dec 2025	Three resources per employee. Minimum of nine	Not achieved, information for the binder changed rapidly, it was hard to maintain.
Experience							
Increase number of PIC surveys submitted at the end of service.	Collecting feedback from families upon exit to evaluate	Families	Performance Improvement Surveys	Employees	Jan 2025 - Dec 2025	80% of distributed PIC surveys	Not Achieved 32% returned –

	and improve services as needed						this goal will be continued in 2026
Efficiency							
Implement a process that has parent handbooks and other intake documents prepared to reduce employees' indirect time.	Administration to copy and bind handbooks and other intake documents.	Employees	Copy request forms.	Manager	Apr 2025 - Dec 2025	100%	Achieved
Service Access							
To create a process to capture data to reduce time from referral received to first contact with families.	Decrease of time from referral to intake date booked or referral returned to CYSN.	Families	Referral spreadsheet & family contact records.	Manager	Jan 2025 - Dec 2025	30-day intake process	Not achieved, did not gather and track the information on a centralized tracking form

Recommendations for 2026

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
External training for employees	To enhance knowledge in service delivery goals such as RDSP, Autism Portal, etc.	Employees	Online/ Webinars	Employees	Jan 2026 - Dec 2026	Six hours external training per employee?	
Experience							
Increase number of feedback surveys completed at the end of service.	Collecting feedback from families upon exit to evaluate and improve services as needed	Families	Performance Improvement Surveys	Employees	Jan 2026 - Dec 2026	80% of distributed surveys to be returned.	
Efficiency							
Quarterly workshops to assist families when children are close to transitioning out of family support.	Reduce the number of hours completing the same task for families.	Families	Report on Effectiveness	Manager	Jan 2026 - Dec 2026	Four workshops, 1 each of PWD application, CLBC eligibility, STADD, and Disability tax credit.	

Service Access							
Increase awareness and knowledge for Family Support employees.	Collaboration with external partners	Employees	Board Report	Manager	Mar - Dec 2026	To host 2 information sessions. 1 session will have a Representative from Children and Youth, the second will have a CLBC representative.	

CARF Standards

The Satisfaction Survey was prepared for 15 families who were actively supported by Family Support at the end of 2025. The following is based on the 14 families who completed the survey.

Experience	Yes	No	No Answer
Has your involvement with Family Support been helpful?	93%	7%	0%
Are you happy with the supports from your Family Support worker?	93%	7%	0%

Effectiveness

Support levels are based on goal work with individualized service authorization agreements. The work Family Support employees did with each family varies and is not linear work. Each family has provided input into what is important for them and how they would like to meet these goals based on the family's strengths, needs and schedules.

Efficiency

Family Support had one full-time employee and two part-time employees who provided services to families in 2025. All areas of goal work are individualized and on an as needed basis.

Access to Service

There were 38 families referred in 2025. Depending on the family's needs and scheduling, it can take one to six weeks to begin support services.

Exit Reports

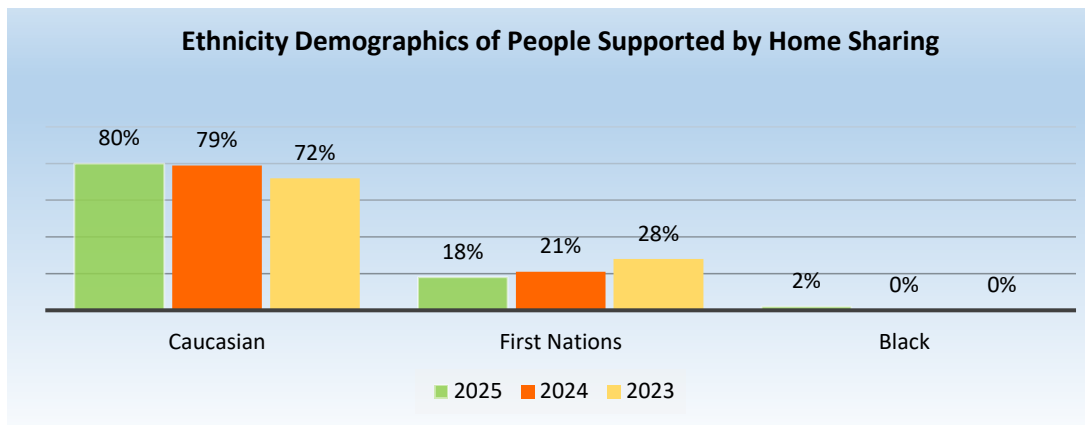
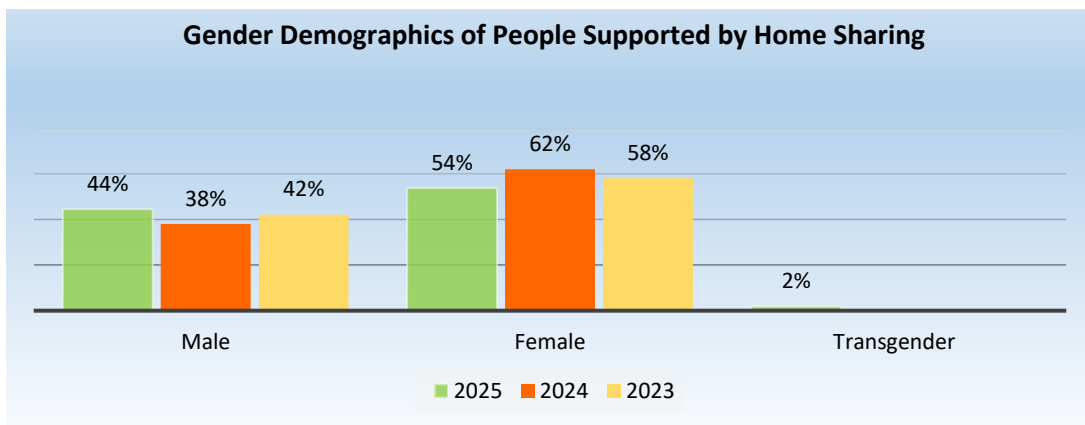
There were 16 families who exited from this program in 2025, with all goals achieved.

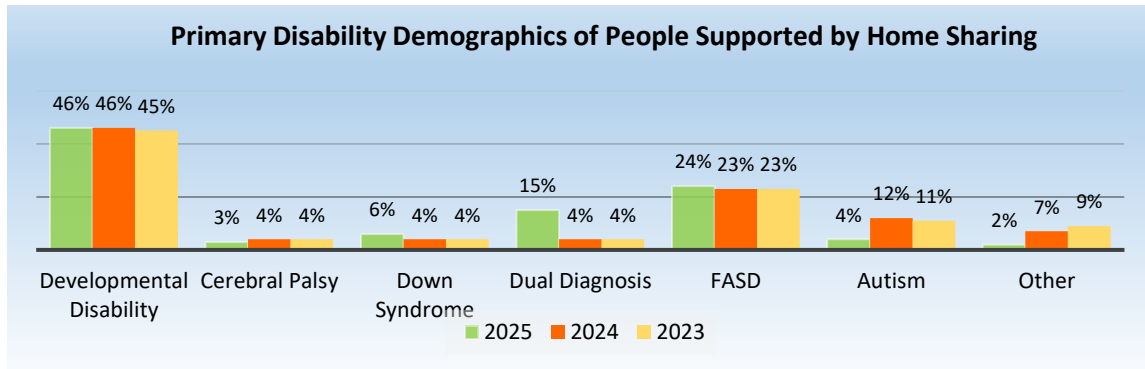
Home Sharing

Introduction

Funder: [Community Living BC](#)

Description: Managers are the sole employees of this program. The Home Share Providers are independent contractors and are not employees of AiMHi. Home Sharing services are provided in the independent contractor’s home. In 2025, Home Sharing supported 46 contractors to provide services to 54 people. The mandate of the program is to find home sharing matches for people who want this type of living option. Home Sharing is very person centered and the level of support is directed by the person receiving the services and their needs and desires. Matching people supported with a Home Share Provider can be a challenging process. There are many visits including staying in the home prior to moving in permanently to ensure the match is a life-long partnership. The Home Sharing Program provides services to adults aged 19 and over. The people we support have developmental disabilities and/or a dual diagnosis of a developmental disability and mental health support needs.





Note: Demographics are gathered from active participants as of December 31, 2025

Recommendations

Recommendations and follow up for 2025

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
Provide consistent communication with Home Share Providers	Quarterly newsletters, monthly agency activity calendars, community inclusion events	Home Share Provider and people supported	Emails to Home Share Providers	Home Share Managers	Jan–Dec 2025	24 group emails throughout the year.	Achieved
Experience							
Engage the approved Home Share Providers waiting for a person supported	Monthly emails	Approved Home Share Providers waiting for a match	Email thread to approved Home Share Provider	Home Share Managers	Jan – Dec 2025	12 emails a year	Achieved
Efficiency							
Department meetings for updates on applications and referrals	Decrease in down time for applications	Pending applicants and referrals	Bi-weekly meetings	Home Share Managers	Jan–Dec 2025	24 meetings	Achieved
Service Access							
Advocating for increases of services for people supported for more contact with community	Increase of existing hours and advocate for referrals with no CI hours attached.	People supported	FGT tracker and referral binder	Home Share Managers	Jan–Dec 2025	25% of requests approved for additional CI hours	Achieved

Recommendations for 2026

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
Create engaging learning opportunities to educate contractors around the Home Sharing Standards, Abuse & Neglect, and Critical Incident Reporting.	Monthly emails, quarterly newsletters and home visits	Home Share Providers	CLBC Home Share Standards, link to CLBC website	Managers	Jan – Dec 2026	12 group emails a year & 4 quarterly newsletters which explain home share standards in detail.	
Experience							
Create a Survey Monkey to challenge Home Share Providers in their knowledge of Standards, Abuse & Neglect and Critical Incident Reporting. Contest winner receives a prize.	Completed surveys from providers.	Home Share Providers	Survey Monkey	Managers	Jan 2026	70% of providers complete Survey Monkey	
Efficiency							
Complete the Home Share quick reference sheet for each person supported to go into their binders for fast access., such as emergency contacts, respite contact, family contact on one form.	Completed forms	Easy access of relevant information for covering managers ex: weekend coverage	Combination: personal binders, Home Share Providers, people supported and family/workers.	Managers	Dec 2026	100% of people using this service have adequate information to provide guidance in care needs.	
Service Access							
Have additional conversations with Home Share providers, reviewing the requirement and discussing their respite needs.	Requests for respite names from Home Share Providers	Home Share Providers and People Supported	Newsletters, emails, phone calls etc.	Managers	Dec 2026	25% of Home Share Providers have a respite plan in place	

CARF Standards

Fifty-three surveys were prepared and handed out to people living in Home Sharing in 2025. Three people were unable to complete the survey due to being non-verbal, one person exited services, and three people passed away. The following responses are from the 12 people we supported who completed the survey.

Experience	Happy	Unhappy	Not sure	No Answer
I know my rights.	100%	0%	0%	0%
I am happy with my activities at AiMHi.	92%	0%	8%	0%

Effectiveness	Happy	Unhappy	Not sure	No Answer
I feel that AiMHi keeps my information private.	100%	0%	0%	0%
I get help to make my own decisions.	100%	0%	0%	0%

Efficiency

- In 2025, there were seven new Home Share Providers approved. There were, eight Providers continuing to wait for a match with a person supported at the end of 2025.
- In 2025, there were nine new people supported in the Home Sharing program. There were eight people supported waiting for a match with a Home Share Provider.
-

Access to Service

AiMHi does not maintain an identified waitlist for Home Sharing. As people are referred, they are checked against the current approved providers to see if there is a possible match. If there is not, then we continue to recruit for that person. The time it takes to be placed depends on the person's needs and desires. Connecting a person with the right person/family could happen right away or it could take more time depending on the person's needs and who is available.

Exit Reports

Four people supported exited Home Sharing in 2025. The reasons were as follows:

- 3 – Passed away
- 1 - Exited

Community Youth Development (Children’s Life Skills)

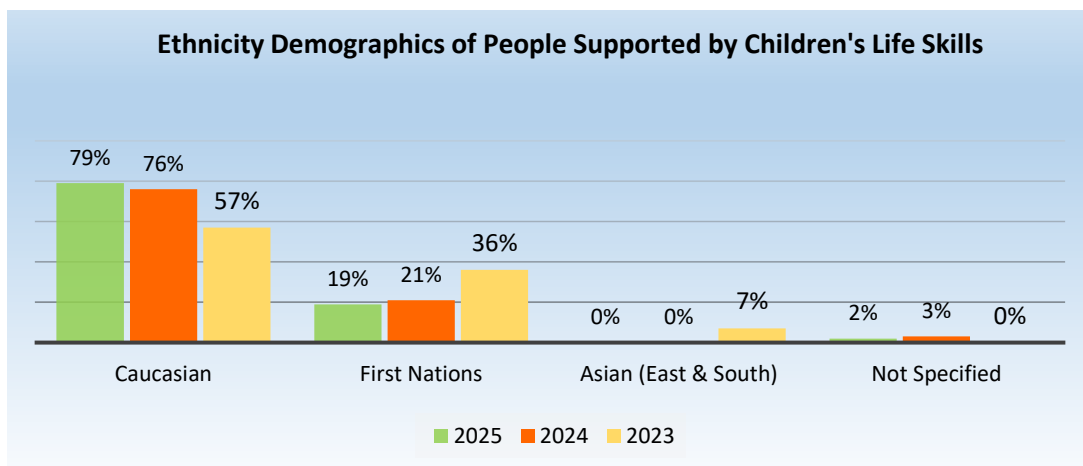
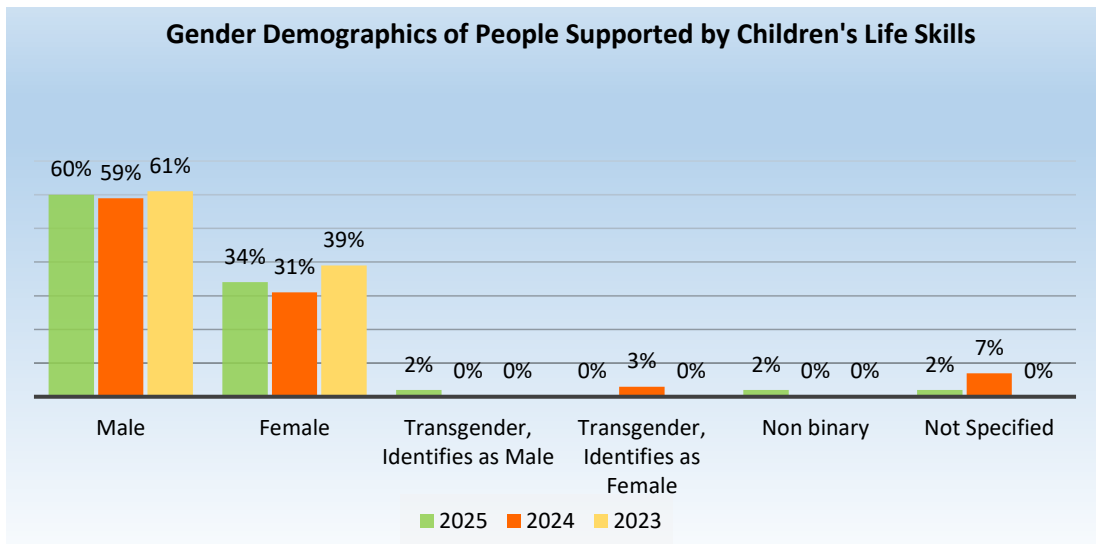
Introduction

Funder: Ministry of Children & Family Development

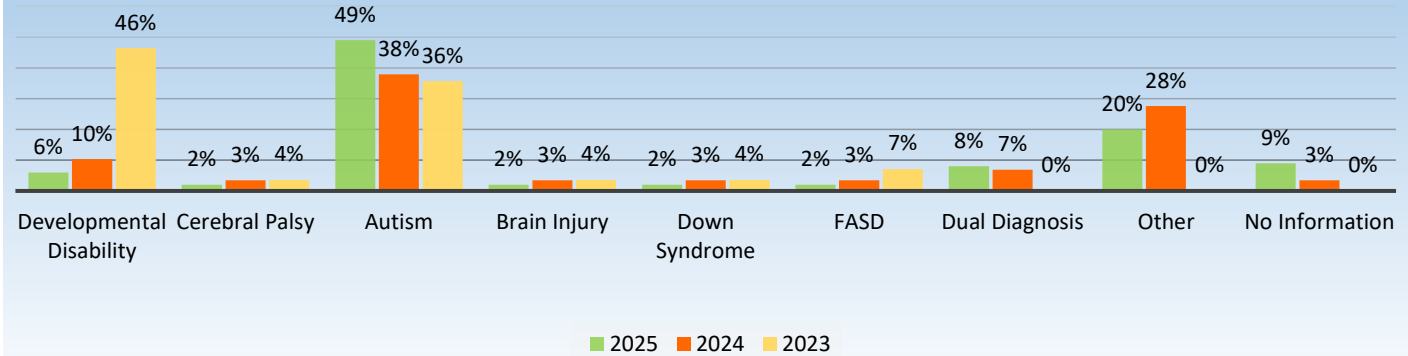
Program Description: Children with special needs (ages 4-18) are referred by the Children and Youth with Special Needs (CYSN) Team to the Life Skills Program at AiMHi. Parents sign a Child Care Contract and are assigned a Life Skills Instructor to work with their child on different skills defined by the parents and Social Worker. These include, among other things, pro-social skills, independence and transition skills, recreation, life skills and support to families. There were nine Children’s Life Skills Instructors in 2025, with two resignations due to relocating to another community.

The desired outcomes as defined by Ministry of Children & Family Development are to:

- Strengthen the family’s capacity to manage and care for their children’s special needs
- Optimize the child’s potential
- Maintain and enhance the independence and quality of life of families served



Primary Disability Demographics of People Supported by Children's Life Skills



Note: Demographics are gathered from active participants as of December 31, 2025

Recommendations

Recommendations and follow-up for 2025

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
To collaborate with CYSN to develop person centered SMART goals for each child and youth in their own words.	SMART goals	Families	Service Authorization forms	Manager	Jan 2025 - Dec 2025	100% of goals	Not achieved. All goals were in collaboration with CYSN, family, Life Skills Instructor and youth, however, goals were not rewritten in youth's own words.
Experience							
Increase number of PIC surveys submitted at the end of service	Collecting feedback from families upon exit to evaluate and improve services as needed	Families	Performance Improvement Surveys	Employees	Jan 2025 - Dec 2025	90% of distributed PIC surveys	87% of surveys returned
Efficiency							
To reduce timeline from referral to intake	Decrease of time from referral to intake date booked or referral returned to CYSN.	Families	Referral spreadsheet and family contact records.	Manager	Jan 2025 - Dec 2025	Reduce intake from six weeks to four weeks.	Intakes were completed in three to four weeks

Service Access							
Collaborate with CYSN on administration of their waitlist to increase the services to families	Maximize the direct services hours of employees to provide services to children and youth on the waitlist as prioritized by CYSN.	Employees	CYSN waitlist	Manager	Jan 2025 - Dec 2025	30% reduction in waitlist.	CYSN waitlist reduced by 70% either by coming into service, declining service or inability to contact. 100% attempt to contact everyone on the list provided.

Recommendations for 2026

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
Implement SMART goal documentation on ShareVision	All SMART goals will be on individual profiles on ShareVision	Youth	ShareVision	Employees	Jan - Dec 2026	100%	
Experience							
Provide additional skill building sessions to support independence for the youth	To increase the supported inclusion of all five MCFD domains	Youth	ShareVision	Manager	Jan - Dec 2026	8 weekly sessions focusing on the 5 MCFD domains.	
Efficiency							
Create a centralized inventory database on the CLS drive of existing resources for Life Skills instructors to access during appointments.	Decrease the indirect office hours creating activities and resources.	Employees	Excel Spreadsheet on the CLS Drive of resources and the Life Skills and domains they support	Employees	April - Nov 2026	90% of all resources will be in the database and available by November 2026	
Service Access							
Create a monthly newsletter including workshops and groups for youth and family in the program.	All activities will be transparent to current people in services	Youth	Copies saved to the CLS Drive	Employees	Mar - Dec 2026	6 newsletters distributed every 2 months.	

CARF Standards

Surveys were prepared for Children’s Life Skills. Life Skills Instructors phoned or spoke to parents in-person. Calls were made during the day, evening and on weekends to allow families to participate during different hours to increase response. The following responses are from the 26 surveys that were completed.

Experience	Happy	Unhappy	No Answer
Are you happy with the supports from your child’s Life Skills Instructor?	92%	4%	4%
Effectiveness	Yes	No	No Answer
Do you feel that AiMHi keeps my child’s information private and confidential?	96%	0%	4%
Do you feel that the goals that were identified are being met?	54%	15%	31%

In 2025, there was increased number of Group Activities due to receiving the CYSN waitlist. All appointment and group work followed the Independent Living Workbook and Skill Development Areas outlined in the Service Agreement with MCFD/CYSN.

Access to Service
 Forty new referrals were received during 2025. The length of time from referral to first appointment varies from one week to one month, depending on the needs of the child and the time needed to schedule meetings with the families.

Exit Reports

Twenty-three children exited the program in 2025 for the following reasons:

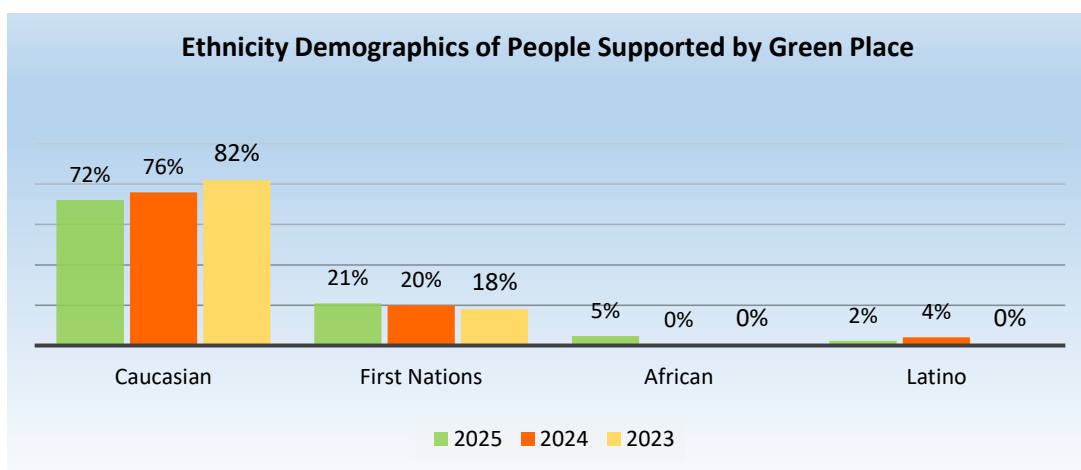
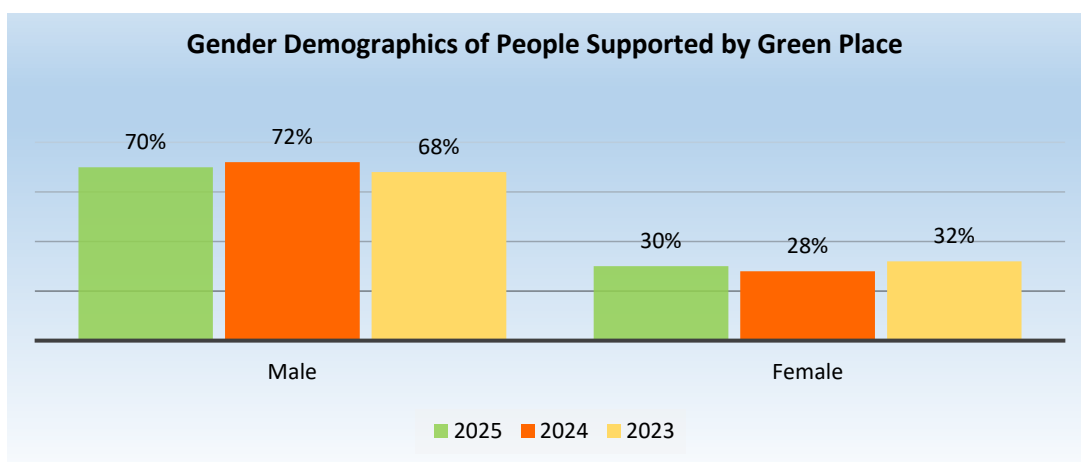
- 4 – aged out at 19
- 19 – Service agreement ended

Children’s Respite Services (aka Green Place)

Introduction

Funder: Ministry of Children and Family Development

Description: Children’s Respite (known as Green Place) is a dedicated home providing essential respite care for children with support needs. Designed to support families by offering temporary relief care by ensuring a safe and nurturing environment where children with support needs can receive quality care. Children's Respite has four respite beds and one additional bed designated for emergency placements accessed through the Ministry of Children and Family Development (MCFD). Children’s Respite plays a vital role in enhancing the well-being of both children and their families by offering a stable and supportive respite option. The respite home supports children until 19 years of age. Children's Respite employs eight full-time employees and four part-time employees committed to delivering compassionate and supporting care.



Note: Demographics are gathered from active participants as of December 31, 2025

Recommendations

Recommendations and follow up for 2025

Objectives	Indicators Benchmark	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
Provide emergency training to children on a more regular basis.	Training sessions and resources in the home on ODD, autism, etc.	Children	On the Children's Surveys it was clear that many children were not sure what to do in an emergency.	Children's Employees	Jan 1, 2025 - Dec 31, 2025	Children are taught emergency procedures (who to call for help, evacuation and meeting area) when they come for their first few visits. Green Place employees will review emergency procedures with children every two months	Achieved, and the training will occur every quarter for kids with the ability to participate.
Experience							
The Children's team will work on providing families with a list of activities that may be planned for the days their child is at respite	Allow families to be more aware about what their child does for activities when they stay at Children's Respite	Parents/ Guardians/ Families	Employees will hand out a calendar of activities at the beginning of the month to each family	Manager	Jan 1, 2025 - Dec 31, 2025	To have a calendar of activities to hand out to parents each month	Not achieved, as the needs of the children that attend respite changes often.
Efficiency							
The Children's Respite manager will work on the primary assessment form that parents fill out about their child's support needs	Update and make the intake forms easier to follow and fill out for parents	Stakeholders	The manager will review all forms in the intake package that families need to fill out	Manager	Jan 1, 2025 - Dec 31, 2025	Have forms that are easier for parents to follow and fill out so respite receives all information needed	Achieved
Service Access							
The team at Children's Respite will work on a more	Develop a process for checking medications	Persons we support	Manager and Employees will work on	Manager	Jan 1, 2025 - Dec 31, 2025	To develop a form that will guide employee	Not achieved, as there is no formal

streamlined process for when children come in to use Children's Respite	when a child comes in for the night.		processes that will work for medication intake			when intaking children's medications.	process written down. Employees learn during the job shadow on medication intake.
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Recommendations for 2026

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
Review emergency procedures with children twice a year.	The Health and Safety package for Kids, which is more detailed on Health and Safety procedures.	Children	On the Children's Surveys it was clear that many children were not sure what to do in an emergency.	Children's Employees	Jan 1 - Dec 31, 2026	Semi-annual review of the package in Sept and March	
Experience							
The Children's team will work on providing families with a list of activities that may be planned for the days their child is at Respite	Allow families to be more aware about what their child does for activities when they stay at Children's Respite	Parents/ Guardians/ Families	Activity newsletter.	Manager/ Employees	Jan 1 - Dec 31, 2026	4 times a year	
Efficiency							
The Children's team will send out a Spring/Summer and a Fall/Winter newsletter for parents	We will provide a newsletter to help keep families informed of any changes and to give tips and hints to make respite successful for their child	Families/ Stakeholders	The Children's team will send out a newsletter to families on a semi-annual basis	Manager	Jan 1 - Dec 31, 2026	Semi-annual newsletter about Respite guidelines and procedure.	
Service Access							

To collaborate with MCFD to develop a cancellation list to provide respite for families that do not have a regular respite schedule.	Increase of referrals from MCFD	Families	Cancellation list and MCFD referrals	Manager/ Employees	Jan 1 - Dec 31, 2026	May 2026	
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CARF Standards

In 2025, viewpoint questions were solicited from the 31 families who currently access these services. These results are based on 10 completed surveys that were returned.

Experience

The parents/guardians utilizing the respite services were asked the following survey questions:

1. What does Children’s Respite do well?
 - They are welcoming.
 - Meeting my child’s needs especially when my child is having a rough day.
 - Creative and inclusive activities.
2. What can we do better?
 - More food options that my child will eat.
 - Nothing. Excellent team.
 - More outside time and more activities.
3. Do you have any additional comments?
 - I’m very happy with Green Place and I’m happy my child gets to go somewhere that I know my child will be safe and well cared for.
 - Glad the service exists.
 - Provides a needed break for my family and socialization for my child. Very beneficial and healthy for my family.

Effectiveness

The ratio of children to employees is two children to one employee and sometimes three children to one employee depending on a child’s support needs. Although the manager, with MCFD consultation, may determine the ratio of employees that is needed as per respite needs or the child’s needs.

Efficiency

The efficiency of Children’s Respite is measured by looking at how many beds were available or left unused. When there are zero beds available, it is translated to mean Children’s Respite was running at full capacity. This information does not include the beds used for separately funded MCFD emergency placements outside of our global contract.

In 2025, 1,243 out of 1,435 contracted spaces in Children's were used which resulted in Children's running at capacity of 87% of the available days, which is a decrease of 5% from 2024. Children's still struggles with filling beds due to illnesses, not having a full list of children to fill the spaces on short notice, and not being able to place some children with others due to their support needs. With last minute no shows or cancellations, MCFD is working with Children's Respite to increase the cancellation list so we can provide respite services to more families.

Access to Service

Children's Respite received 26 referrals from MCFD; 21 children had tours with their family, 20 children had intakes completed and their children started using respite services. Three families declined services as they were not interested in respite care. Four families did not return messages to set up tours and intakes. One child was not a good fit for respite services. MCFD regularly sends a referral and the child is placed onto the cancellation list where the child will fill in respite when another child cancels their stay. Often Children's cannot take the maximum number of children to access respite services as MCFD, in special circumstances, will approve children for more than the standard amount of four days of respite per month. Currently there are 28 children approved from 4-6 days of respite a month. Children's Respite can have up to 30 children accessing respite if each child has only 4 days per month. In 2025, MCFD did not access the emergency placement.

Exit Reports

In 2025, six children exited out of this service. The reasons were as follows:

- 1 – Went into care with MCFD (used emergency placement bed)
- 5 – Families decided Respite was not working for their child

With children exiting, we moved three children from the cancellation list to having regular days per month by assessing the families' Priority Service Score and the families' Priority Response Level that MCFD assigns each family.

Stakeholders

Introduction

AiMHi has many various stakeholders ranging from the families of those we support to the professionals we have contact with and independent contractors, including Home Sharing providers, and also our funders. AiMHi raises funds in partnership with other businesses around our city. Stakeholders provide us with valuable insight as to how we are perceived and the importance of our work.

Recommendations

Recommendations and follow up for 2025

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
Implement a fundraising committee	A functional committee that will spearhead all fundraising efforts at AiMHi	AiMHi	Fundraising revenue	Finance	Jan 1, 2025 - Dec 31, 2025	Increase of 15% from previous year	Not Achieved/ cancelled
Experience							
To analyze the effectiveness of the changes to our social media and website	Update surveys with person accountable for our social media presence	Stakeholders	Surveys	PIC Committee	Jan 1, 2025 - Dec 31, 2025	Feedback from 80% of stakeholders surveyed	Not Achieved
Efficiency							
To improve functionality of website data collection and analysis to use in performance improvement strategies	Collection and review of pertinent data.	Stakeholders	AiMHi website	Operations Director and Director of Quality Assurance and others to be determined	Jan 1, 2025 - Dec 31, 2025	Develop a process for reviewing and implementing data analytics.	Not achieved
Service Access							
Continue to improve services in remote communities, such as Smithers, Mackenzie, etc.	Increase capacity in providing and developing resources and supports.	Stakeholders	Referrals	PIC Committee	Jan 1, 2025 - Dec 31, 2025	Increase referrals by 10%	Not achieved. AiMHi has made the decision to not explore expansion at this time.

Recommendations for 2026

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
To provide the Board of Directors with a secured and reliable form of communication.	Dedicated email address	Board of Directors	Email system	Executive Assistant	Jan 1, 2026 - Dec 31, 2026	100% of email communication is through their AiMHi accounts.	
Experience							
To analyze the effectiveness of the changes to our social media and website	Update surveys with person accountable for our social media presence	Stakeholders	Surveys	PIC Committee	Jan 1, 2026 - Dec 31, 2026	Applicable questions added to survey.	
Efficiency							
To improve functionality of website data collection and analysis to use in performance improvement strategies	Collection and review of pertinent data.	Stakeholders	AiMHi website	Operations Director and Director of Quality Assurance and others to be determined	Jan 1, 2026 - Dec 31, 2026	Develop a process for reviewing and implementing data analytics.	
Service Access							
Improve community awareness of AiMHi's presence in Northern communities.	The production of promotional video.	Stakeholders	Completed video	CEO	Jan 1, 2026 - Dec 31, 2026	Video available to public in 2026.	

CARF Standards

There were five Stakeholder surveys completed in 2025.

Experience	Satisfied	Unsatisfied	Don't Know
Are you satisfied with how information is shared between AiMHi and you/your organization?	100%	0%	0%
Are you satisfied that AiMHi works cooperatively with you/your organization?	100%	0%	0%
Are you satisfied with our policies regarding confidentiality?	80%	0%	20%
Effectiveness			
Are you aware that AiMHi supports children who have special needs, adults who have developmental disabilities and their families?	100%	0%	0%

Are you aware that AiMHi advocates for employment within the community for people with developmental disabilities?	100%	0%	0%
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Are you aware that the City of Prince George has an Accessibility Advisory Committee to assist the community at large?	Yes	No
	80%	20%

Efficiency

We do not ask a formal efficiency question but do ask for comments in regards to our services and organization in general. For this year there were no comments provided in the surveys we received.

Access to Service

To measure stakeholders' access to AiMHi, we asked if they were able to contact someone at AiMHi both during and after business hours. Of those who responded to this question, 80% of the respondents indicated yes and 20% of the respondents indicated they didn't know.

Association

Introduction

Funder: Ministry of Children and Family Development / Community Living BC

AiMHi serves approximately 921 people with disabilities including people supported in IDP who vary in the level of support they require to live good lives. AiMHi has forty-five homes for adults (not separate houses – there are often multiple departments operating within one location). In addition, AiMHi runs nine non-residential programs in Prince George with one location in Mackenzie, serving people in many different models of service from supported living to outreach and community inclusion services. People live at home with family, on their own, with a roommate and with or without assistance. AiMHi employs approximately 541 employees. AiMHi also supports people to live with another family on an independent contract basis through Home Sharing.

During 2025, AiMHi received five community complaints. Managers or Directors of the appropriate departments were contacted to resolve the issues. Response time varies in accordance to the issue at hand. All issues are responded to and resolved as quickly as possible. This was a decrease from eleven complaints from 2024.

Recommendations

Recommendations and follow up for 2025

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
To implement a structured exercise program (Move and Groove) within AiMHi homes to support healthy aging, general health, and well-being of individuals with physical, intellectual and developmental disabilities.	Increase and/or stabilization of physical functioning and quality of life for participating AiMHi persons supported.	Persons supported in AiMHi homes.	Goal Tracking Sheets Summative survey to participants and support workers	Director of Health Services and Home Managers	Jan 1, 2025 – Dec 31, 2025	In 2025, people in AiMHi homes will be supported to participate for 60 minutes a week. AiMHi support workers in Community Inclusion will be completing the program twice a week, with a minimum of 30-minute sessions and a minimum of 10 participants in each session.	Move and Groove was initiated in July with 37% of homes participating. Community Inclusion had a 23.5% participation rate.
Experience							
Extend the culture and mission of AiMHi to Smithers	Investigate options for typical AiMHi events and celebrations to	Smithers employees and people supported	Posters, notices, and emails	PIC Committee	Jan 1, 2025 – Dec 31, 2025	2 events	Participated in a Smithers community job fair. This resulted in the

	be promoted in Smithers						first implementation of employment orientation.
Efficiency							
Review BC Housing processes	Increased clarity and response time for BC Housing applicants and those that get subsidies	Association	BC Housing connect and processes	CFO	Jan 1 2025 – Dec 31, 2025	75%	Achieved
Increase turn around for payments and offer greater clarity to the management team	Financial statements available to managers 14 days from end of month.	Managers	Sage Intacct and Yooz	CFO	Jan 1 2025- Dec 31, 2025	3 out of 6 financial statements will be made available within 14 days	Not achieved
Service Access							
Investigate opportunities for increased community engagement in Smithers	Community engagement events	Smithers employees and people supported	Day charts, events calendars	Smithers managers	Jan 1 2025- Dec 31, 2025	2 events for each person	Achieved

Recommendations for 2026

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
Move and Groove will continue in 2026 to provide healthy aging for the people we support	Increased stabilization of physical functioning and quality of life for people supported	Persons supported in AiMHi homes and Community Inclusion	Goal tracking sheets, monthly draws.	Health Services Director & Manager of Homes & Community Inclusion	Jan 1, – Dec 31, 2026	30 homes will participate in 60 minutes a week in activities. 100 monthly submissions from Community Inclusion. Develop and offer 30 minutes of activities twice a week.	
Experience							
To develop an interactive Agency timeline on the website	How many interactions on the website	PIC committee	Website	Website Analytics	Sept 2026	Interactive Agency History timeline on website by Sept 2026.	

Efficiency							
To develop a Naloxone Policy to reduce risk and increase training, procedures and expertise in the use of Naloxone	Naloxone Policy with corresponding registration with Towards the Heart and their Facility Overdose Response Box program	Employees	Policy Manual	Health Services Director	Jan1, 2026 – July 31, 2026	Obtain registration with the Facility Overdose Response Box Program	
Increase the turn around for monthly financial statements for management review.	Have monthly financials available within 14 days of the following month.	Managers	Sage Intacct and Yooz	CFO	Jan 1 2025- Dec 31, 2025	12 monthly financial statements	
Service Access							
Investigate opportunities for increased community engagement for those living in Vanderhoof.	Community engagement events	Vanderhoof employees and people supported	Day charts, events calendars	Home manager	Jan 1 2026- Dec 31, 2026	2 major events for each person, such as Vanderhoof Airshow and Family and Friends Picnic.	

Performance Improvement Report

Introduction

Funder: Ministry of Children and Family Development / Community Living BC

AiMHi serves approximately 921 people who have disabilities or special needs. The Performance Improvement Committee studies each service provided and looks at the experience of the people we supported with the performance indicators of Experience, Efficiency, Effectiveness, and Access to Service on an annual basis.

Recommendations

Recommendations and follow-up for 2025

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
Implement a system of reviewing the progress of Agency PIC recommendations	Management meetings, and emails to appropriate managers/directors	PIC	Timeline	PIC Committee	Jan 2025 – Dec 2025	3 reviews per year - June, September and December, led by the Co-Chair	Achieved
Experience							
To increase the employee survey results	Percentage of surveys completed	Employees	Surveys	PIC Committee	Jan 2025 – Dec 2025	Increase the results by 35% from 2024's actual of 112 surveys	Not Achieved. 76 surveys were completed, a decrease of 33% from 2024.
Efficiency							
Increase management team's knowledge and ability to develop and implement their recommendations as per CARF standards	Increase of suitable recommendations	Management team	Submissions to the PIC reports	PIC Committee	Jan 2025 – Dec 2025	1 suitable recommendation for each of the key indicators Effectiveness, Experience, Efficiency, Service Access	Achieved
Service Access							
Increase employee team knowledge of performance measurement and management standards	Increase employee access to information regarding CARF standards	All employees	Employee meeting minutes	PIC Committee	Jan 2025 – Dec 2025	Quarterly PIC newsletter	Achieved

Recommendations for 2026

Objectives	Indicators (Benchmark)	Applies To	Data Source	Obtained By	Time Frame	Target (Goal)	Actual (Outcome)
Effectiveness							
Improve the system of reviewing the progress of Agency PIC recommendations	Management meetings, and emails to appropriate managers/ directors	PIC	Timeline	PIC	Jan 2026 – Dec 2026	3 reviews per year - June, September and December, led by the Co-Chair	
Experience							
To increase the employee survey results	Percentage of surveys completed	Employees	Surveys	PIC Committee	Jan 2026 – Dec 2026	Increase the results by 35% from 2025's actual of 76 surveys	
Efficiency							
Increase applicable employees' knowledge and ability to develop and implement their recommendations as per CARF standards	Scheduled meeting with PIC Chair.	Employees accountable for PIC recommendations.	Calendar meeting	PIC Chair	Jan 2026 – Dec 2026	1 scheduled meeting with each accountable employee / Group when reporting on and preparing new recommendations	
Service Access							
Increase employee team knowledge of performance measurement and management standards	Increase employee access to information regarding CARF standards	Employees	Management team meetings and PIC newsletters.	PIC Committee	Jan 2026 – Dec 2026	Discuss PIC standard at 4 management meetings which correlate with the newsletter	

CARF Standards

Experience

Our report continues to receive positive feedback in its new format. It flows clearly and provides a complete picture of our services and the experience that people identify on our surveys. By providing our past recommendations and the response to them, we will continue to provide a clear, holistic picture to those reading the report.

Effectiveness

The Performance Improvement Committee makes changes to the report, when necessary, based on received feedback. By providing the past two years of data alongside the current year, trends

and observances can be seen through a comparative analysis. The committee was successful in developing a format that documents measurable goals and outcomes.

Efficiency

Applying performance indicators from the surveys provided to all stakeholders allows for more efficiency in the information gathered, examined and reported on. It also allows us to make adjustments to our surveys and the survey process when indicated or necessary. The Performance Improvement Report is reviewed during theme month training on an annual basis. The committee has continued to implement an efficient report writing process by providing managers with a process that prompts them to submit required information in a timely manner.

Access to services

Our report is distributed to the Board of Directors and published on AiMHi's website. A plain language report is available to the people we support. Employees are informed of the contents of the report and a copy is available online. Anyone who wishes to see the report in full will be provided with a printed copy.

Exit Reports

Exit reports are collected and analyzed for each department in the report separately. This provides a more accurate picture of exits and the circumstances surrounding them. Some departments, such as Children's Services and Early Childhood Development, have more exits due to the children aging out of the program. Most times, these children simply transition to another type of service and not necessarily out of AiMHi's services.



APPENDIX I

ACCESSIBILITY REPORT 2025

Accessibility Report

Recommendations and Follow-Up from 2025

Accessibility: To focus on identifying and mitigating barriers that persons served might experience in the community. The Agency is encouraged to strengthen its examination and consideration of barriers to access that are internal to the organization

Architectural

Barrier	Persons experiences change through the aging process
Solution	<ul style="list-style-type: none"> ➤ AiMHi will accommodate persons we serve as they age by working closely with Health Services for Community Living (HSCL), using assistive devices, and training employees on specific individual needs and the aging process. AiMHi continues to provide resources such as a variety of resources and training materials on aging. AiMHi representatives meet regularly with HSCL to ensure needs are being met and identify any training/support that may be required. HSCL supports a number of people with their health-related needs at AiMHi.
Accountability	Health Services Director & Direct Care Team
Barrier	Persons we serve experience accessibility challenges at home and in the community.
Solution	<ul style="list-style-type: none"> ➤ Ramps, tracking and lifts will be installed and kept in good repair to meet the mobility needs in the homes that AiMHi operates services within. New tracking has been installed where needed, upgrades to several bathrooms have been done to make them more accessible. ➤ Throughout the winter, Infinite Employment Solutions (IES) will help keep ramps and driveways clear to assist with mobility and safety. ➤ AiMHi will continue to advocate for increased accessibility in the community. ➤ AiMHi continues to have representatives on the City of Prince George Advisory Committee on Accessibility and Inclusion and on the Regional District Committee.
Accountability	Operations & Direct Care Team

Financial Barriers

Barrier	People we serve experience financial challenges due to fixed income and the rising cost of living.
Solution	<ul style="list-style-type: none"> ➤ In order to alleviate financial barriers for people, AiMHi has purchased most of the homes that people live in, and charges less in rent and utilities than most landlords. The people supported in our homes pay what they receive from PWD – the real barriers for people we support are within our CI dept

	<p>mostly, those living and renting in community without subsidy assistance for rent.</p> <ul style="list-style-type: none"> ➤ AiMHi manages and distributes 45 rent subsidies provided by BC Housing, to persons supported by the cluster or those receiving services from one of our Community Inclusion depts. This includes performing inspections, managing the waitlist and communicating with landlords. AiMHi acknowledges the financial support of the BC Government. ➤ Even though the Community Living sector has continued to experience financial difficulties, AiMHi will continue to strive in providing quality service to the people we support. AiMHi will continue to provide workshops on a variety of topics related to finance for the people we support and their families. ➤ A Links to the Community Handbook is provided to people when they are new to AiMHi as it is part of their Intake Process. Included in this handbook is information and resources for those who may need additional supports as a person with low income. ➤ AiMHi arranged food baskets to be created as well as bagged lunches which were distributed to people supported who needed additional assistance. ➤ Each year AiMHi supports a tax clinic in partnership with Canada Revenue Agency volunteers to complete income tax returns for people of low income in the community at no cost. ➤ Adventure Odyssey is a group of people within AiMHi who organize fundraising efforts to assist in supporting people to achieve a quality-of-life goal or to have an emergent need covered financially. . Adventure Odyssey meets once a month to review requests. There is a maximum of \$500 for vacation and travel and up to \$2,000 for emergency funds. <p>For the year 2025, Adventure Odyssey continued to support people in achieving their dreams or assisting with emergency situations. There were 15 requests for the year at a cost of \$4,814.72, and 13 were funded by Adventure Odyssey This year, people did not access Adventure Odyssey funds for vacations as had occurred in the past. Requests tended to be towards moving costs for two people, dental costs outside of the what is covered with dental for one person, assistance with eye wear for another person, assistance with a hotel cost during a renovation for two people and a gazebo for some sun shade in the yard. There were two other requests that included new bedding for a new hospital bed and to assist in covering medications for a new diagnosis. It is not often that requests are denied, and need to be specific to the criteria outlined in the Adventure Odyssey forms. Adventure Odyssey is funded by AiMHi employee 50/50 payroll lottery.</p> <p>We continue to fundraise through the employee 50/50 draw. Every payroll, people who choose to purchase tickets into the draw, have the opportunity to win 50% of the proceeds that are collected each pay. The other 50% goes into the Adventure Odyssey funds. A win-win for everyone. With support from Community Options, we also collect the bottles from AiMHi and Value Village which go into this fundraising pool. Adventure Odyssey appreciates</p>
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	all of the support from the employees who participate all year long, in helping people with emergencies or with fulfilling their dreams.
Accountability	Finance & Operations
Barrier	During this time of economic uncertainty, AiMHi continues to face financial challenges,
Solution	<ul style="list-style-type: none"> ➤ AiMHi focused on grants within specific departments rather than work through a resource development committee. ➤ We continued to partner with Value Village to receive funds through their donation process. ➤ AiMHi increased focus on fundraising and community engagement. AiMHi held their first community 50/50 draw in several years. The website has a page dedicated to providing information to donors with a link to donate.
Accountability	Senior Management Team

Environmental

Barrier	As the needs change of the people supported, their homes and vehicles may need updates in equipment and/or environment to enable them to remain as independent as possible.
Solution	AiMHi will continue to replace and update equipment and vehicles at our houses as needed. Departments had vehicle changes to address the needs of people. Grab bars and additional railings are installed as needed for people.
Accountability	Operations
Barrier	Climate changes affecting Quality of Life for people we support.
Solutions	<ul style="list-style-type: none"> ➤ AiMHi has done substantial planning around environmental disasters including wildfires, floods, and pandemics. <ul style="list-style-type: none"> ○ Every 2 months Emergency and Disaster Response Drills are practiced at all locations on each shift. ○ AiMHi runs 2 full wildfire evacuations in the homes annually ➤ AiMHi continues to prepare for extreme weather conditions, such as extreme heat, cold, and air quality.
Accountability	Operations and Health & Safety Committee

Employment

Barriers	Persons with developmental disabilities who have the desire for paid employment.
Solutions	<ul style="list-style-type: none"> ➤ IES continues to offer services in Prince George and Mackenzie funded through Community Living BC.

	<ul style="list-style-type: none"> ➤ IES supports all people referred to the department to achieve paid community employment through customized, supported or entrepreneurial ventures ➤ L.I.F.E. Services continues to offer services in Prince George and is funded through Community Living BC.
Accountability	L.I.F.E. Services & IES

Transportation

Barriers	People we serve experience challenges accessing regular and wheelchair accessible transportation offered by the community.
Solutions	<ul style="list-style-type: none"> ➤ The Performance Improvement Committee (PIC) will continue to advocate for better access to accessible transportation in Prince George by having a representative on the Prince George Advisory Committee on Accessibility and Inclusion. ➤ AiMHi has a number of regular and wheelchair accessible vehicles within our Community Housing departments. AiMHi assists people to access City transportation and to purchase taxi saver coupons. AiMHi employees also transports people within their personal vehicles.
Accountability	The Agency

Attitudinal

Barriers	There is a lack of awareness and inclusion of people with disabilities.
Solutions	<ul style="list-style-type: none"> ➤ AiMHi will continue to develop partnerships and relationships in the community. <ul style="list-style-type: none"> ○ AiMHi hosted a 2-day Truth and Reconciliation conference in October 2025. The event focused on actionable decolonising strategies to help participants devel personal reconciliation plans through a “relentless incrementalism” framework. ○ AiMHi was proud to participate with our own float in the Annual Pride Parade in July 2025 ○ AiMHi partners with KMS tools and host fund raising BBQs to share awareness of who we are and what we do during their sales days at their location. ○ AiMHi was active in the Father’s Day car show by hosting our own booth to sell hot food and drinks. ○ AiMHi engages in all opportunities to participate in job fairs with other employment agencies at the local college, university and job fairs in Smithers in 2025

	<ul style="list-style-type: none"> ➤ AiMHi will continue to host annual events such as Family and Friends Picnic, Christmas Banquet, and appreciation events. ➤ Adult Life Skills has support groups for persons we serve that have identified as having gender roles or identities other than their sex. ➤ AiMHi has partnered with a community mascot group that provides us the opportunity to have Mofty participate in community events.
Accountability	The Agency

Communication

Barriers	Ongoing and consistent communication between AiMHi and our stakeholders (people we support, family, employees, and professionals).
Solutions	<ul style="list-style-type: none"> ➤ Information about AiMHi including newsletters, bulletins, special events, funding information, and job postings will be available in different formats for stakeholders to access. Information on the various departments within AiMHi can be found on the website along with various organization information such as the Performance Improvement Report. Viewers of the AiMHi website can translate to French or Hindi language, and can also convert text to speech. AiMHi can provide translated versions by paper by request. All employees have a personal AiMHi email to receive information. ➤ AiMHi has two Facebook pages. One Facebook page is public and shares a variety of information, news, and events. The other website is private invite-only hosted by Family Support Services to provide information to families. AiMHi has various social media platforms including, Instagram, LinkedIn, X and a YouTube channel.
Accountability	Quality Assurance & Community Engagement Manager
Barrier	Inconsistent knowledge and support of a culture of Person-Centered Thinking and Planning within AiMHi.
Activities	<ul style="list-style-type: none"> ➤ Person Centered Training (PCP) is included in Employment Orientation training and department specific orientations. Each employee is accountable to complete annual retraining in Person Centered Planning and participate in theme month training on Person Centered Thinking. AiMHi’s PCP committee did, and continues to, provide training with employee groups where needed. ➤ The PCP committee continues to host a Red-Carpet event that celebrates the person supported and gives them the opportunity to display their accomplishments for the year. ➤ AiMHi communicates with people supported and their support systems to start planning for their end of life wants and needs where appropriate. This information can be included in the person’s Budgeting and Banking guidelines in financial binders in homes, as well as digital copies of end-of-life planning on ShareVision.
Accountability	Person Center Planning Committee and Direct Care Management Team



APPENDIX II

HISTORY OF AiMHi

AiMHi History

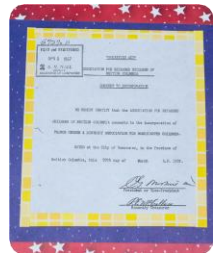
All information was found in the history books at the main office. Some news article and documents have specific dates which has been included in the timeline. Information has been placed in the timeline by the year or decade if no specific dates were available.

1950s

1955 -The first meeting was held at a health unit that consisted of 3 set of parents, a medical doctor, and a public nurse.

March 29, 1957 – Under the “Societies Act” the Association for Retarded Children in British Columbia consents to be incorporated to PG and District Association for Handicapped Children.

June 21, 1958 –The 2 room Aurora School was built in one day, on what is now the Harwin School grounds. 70 tradesmen arranged by the Kiwanis Club donated their time. The cost of the project was \$14,000, but with some material donated and the labour donated, the cost of the project was \$5,000. The tradesman started at 3am and finished by 9pm. Association Board meetings were held at the school.



1960s

February 12, 1962 – Third name change to PG and District Association for Retarded Children

Aurora Services moves to 5th Avenue, where it has room to accommodate 20 clients. At the time there was one paid worker and four part-time volunteers.

Oct 12, 1965 – Aurora School made a motion to SD 57 to be fully operated by the district. At this time there were 22 students, 3 full time and 2 part time teachers, 1 janitor, 1 bus driver, and a 25-passenger bus. The financing for school in 1964 was \$15,619.53.

May 9, 1967 – Aurora Industries now has 40 people supported and producing furniture, crafts, Christmas decorations and the very popular Mr. PG's.

1972 – Name change to Prince George and District Association for the Retarded.

1978 – Aurora Industries adds an extension to it wood working shop – Northern Lights Woodworking

1979 – Name change to Prince George Association for Retarded Persons.

1979 - AiMHi introduces The Infant Development Program. Referrals came from doctors, parents, social workers, and public health nurses.



1970s

1980 – Name change to Prince George Association for Handicapped Persons.

1982 – Name change to Prince George Association for Individuals with Mental Handicaps.



1980s

February 1982 – A press release was issued stating the first group home will be the home for 5 clients. The opening sentence to the press release was “An ordinary house on an ordinary Prince George street will be the home to 5 clients.”

June 1983 - Canadian Tire was the first local retailer to hire 2 individuals from Aurora Industries to work in the stock department. The feedback was these individuals were “quite accepted.”

December 31, 1984 – Tranquille Sanatorium officially closes down and approximately 36 residents move back to Prince George, Williams Lake, and Quesnel. The Land, Parks, and Housing Ministry purchases, renovates, and equip the home which AiMHi will support 5 residents of Tranquille back into their community.

June 25, 1986 – AiMHi sets the standard in the province. AiMHi plays a leading role in initiating new government programs and services throughout B.C. The B.C. Ministry of Health issued handicapped people their own Charter of Rights. The government is of one mind to put the “statement of philosophy” into practice. The statement guarantees handicapped people and their families the right to make choices and decisions as to lifestyles and goals.



June 28, 1986 – Northern Lights Woodworking Ltd, which employs AiMHi clients, opens a showroom at AiMHi’s ticket centre at Fifth Avenue and Dominion Street. Furniture made from Lodgepole Pine consisted of bedroom and living room furniture, as well as patio furniture.

1986/87 (specific date unknown) – AiMHi unionizes under the BCGEU. At the time there were 92 employees.

July 1987 – AiMHi “breaks the rules” by going against Ministry of Health government law when they placed 2 clients into the Ospika adult home rather than placing them in an institution. Both clients aged out of children’s residence (age 19) and due to being re-classed to non-ambulatory adults, they were meant be institutionalized.



September 16, 1989 – An article announces after 30 years Aurora Industries closes their doors to sheltered employment. AiMHi committed to the naturalization and integration of clients in the community.

1990 – Latest name change for the Agency – Prince George Association for Community Living

Circa 1995 – AiMHi acquires four homes from the Cerebral Palsy Association. One home on Gorse, two home on Hazelton, and one home on Irwin. People supported and some employees joined AiMHi and amalgamated into the Gorse home.



1996 – Woodlands Residential Institution officially closes. This was years in the making as closures started in 1981. During the 16-year closure, several residents moved back to Prince George and were supported in the AiMHi homes.

1990s

September 15, 1996 – The first camp outing at Ness Lake. It was four days of fun and laughter. Some of the activities were tie-dying t-shirts and dancing, and lifeguards were available for swimming. All together 30 people served attended this great event.

January 29, 1999 – AiMHi puts a proposal in motion to the City of Prince George to purchase 2.5 acres of a 20-acre parcel of land on the corner of Fifth & Tabor. A \$2m office building would be built to bring the agency in one location. On Feb 8, 1999 City Council voted “Yes” to start negotiations.

July 26, 2001 – AiMHi has a family picnic at Fort George Park (1st picnic?)

October 2001 – Mayor Colin Kinsley makes a proclamation that October is Community Living Month.

November 18, 2001 – The Self Advocate at AiMHi speaks out to support the end of the 3-month transit strike. She states “Our phones are ringing off the hook from people who need rides to get to their life skills classes.”

December 7, 2001 – AiMHi rallies on the lawn of City Hall regarding the proposed cut of 30% to the Ministry of Children and Family. An estimated 200 protesters from people supported to employees showed their support for community living programs.

December 5, 2003 – AiMHi achieved its first 3-year Accreditation by CARF.

February 27, 2004 – Hosted a Community Forum at the AiMHi Focus Center. The goal of the forum was to gather feedback from the community based on three questions.

- What does AiMHi do well?
- What could AiMHi improve?
- What could community services look like in the future?



April 14, 2005 – AiMHi has a grand opening in the new location of 950 Kerry St.

February 7, 2006 – Two self-advocates joined by two AiMHi employees joined 43 climbers from around the province on the Mount Kilimanjaro “Climb for Community Living” Challenge. They trained for a year by walking, hiking, biking, and working out. Several fundraising events took place that year including a pancake breakfast, bingo, and fashion shows. Both self-advocates and their support workers made it to the top! They returned home on February 23, 2006.

September 2006 – AiMHi officially takes over the St. Catherine’s home from the Catholic Dioceses of Prince George. For six months prior to the official takeover in September, AiMHi was supporting the people in the home.

November 2007 – News Release – AiMHi and Value Village join in partnership. Local donations of reusable clothing, housewares, and furniture to Value Village equals vital dollars to AiMHi.

September 18, 2009 – A group of 76 AiMHi people supported, employees, with family and friends set out on a cruise to Ketchikan Alaska. There was plenty of shopping, an excursion around the City of Ketchikan, and great food!

2010s

July 2017 – AiMHi opens their doors to support Williams Lake fire evacuees. IES played a crucial part in transporting supplies for evacuees, Community Inclusion welcomed everyone to join in group activities. In appreciation, the Williams Lake group presented us with the beautiful wood carving that was carved on a burnt log by an Aboriginal artist from the Timber Kings. This wood carving is displayed in our foyer.



Late 2018 – Building began on the Davie Street homes. During the first two years, the servicing work was completed, with the building of the homes starting in early spring 2020. There were minimal delays and supply chain issues to due to the COVID pandemic. A total of 10 homes were built to meet the need for affordable, and accessible housing in the Prince George region. Occupancy permits were received in February 2021, and the first tenants moved in on March 1, 2021.



2020s

April 2024 – AiMHi hosts a 2-day Truth and Reconciliation conference with presenter Dr. Dustin Louie. The conference focused on moving forward through a path of reconciliation.

July 1 2024 – AiMHi expands their services to Smithers by acquiring three homes, 25 employees, and supporting eight people.

September 2025 – Acquired the Vanderhoof home, this home has four people supported and seven employees.

October 16 & 17, 2025 – AiMHi hosted the Truth & Reconciliation two-day conference with Dr. Dustin Louie. This conference focused on our unique opportunities to create change, a theory of change based on relentless incrementalism, and developing a personal theory of decolonizing that is actionable and can inform future work.

