



# Family and Community Support Services Year-End Report



## Programs & Services for Increasing Social Inclusion

Reporting Period: January 1 to December 31

All Information provided is Public

Please note that all the sample Year-End Reports are for general information. The content is subject to change as needed.

### Program Delivery Method:

#### 1. What is the primary Program Delivery Method?

☐ Online ☐ In-Person ☐ Hybrid (a mix of online and in-person delivery)

#### 2. If the program is delivered in-person or is a hybrid delivery, what is the postal code (e.g. E2R 2W3) for the primary program delivery location?

Required, 300 characters maximum

#### 3. If applicable, provide the postal codes (e.g. E2R 2W3) for any other locations where the program is delivered.

Optional, 100 characters maximum

### Number of Unique Individual Clients or Participants in the program:

#### 4. Total Number of Unique Individual Clients or Participants

This section is for reporting the number of unique individual clients or participants from January 1 to December 31 **where a client file is opened**. If your program enters most clients/participants in FSII, this number should closely match the total number of clients or participants in the FSII Program Impact Report.

- Individuals should only be counted **once** per program per year.

Required, number

#### 5. If applicable, explain the reason(s) why there are any differences between the above reported total number of unique individual clients or participants versus the number of matched pre/post-test responses shown in the FSII annual reporting.

Optional, 4000 characters maximum

#### 6. If applicable, explain the reason(s) why there are any differences between the above reported total number of unique individual clients or participants and the target number of clients or participants to be served, as per your funding application (question 9 in application).

Optional, 4000 characters maximum

### Number of Contacts:

#### 7. Total Number of Contacts

This is for services where no client file is opened during the reporting period. It includes but is not limited to: telephone inquiries, drop-ins, one-time assistance with forms or referrals, participation in one-time information or education sessions, participation in community events, etc. **The impact of these services is NOT measured and not reflected in the FSII database.**

- Do NOT include the number of times a worker meets with a client from the 'individual clients/participants served' category.
- Do NOT include the number of web hits received.
- Do NOT include the number of newsletters or brochures distributed.

Required, number

#### 8. Comments regarding Contacts

Only if you have additional information you would like to share.

Optional, 4000 characters maximum

### Volunteer Number and Hours:

#### 9. Total number of Volunteers

Indicate the number of volunteers that provided support that directly benefits your program (e.g., volunteers who provide administrative support, direct program support, governance, fundraising, etc.).

- Volunteers should be counted only once.
- If volunteers provide support that directly benefits more than one FCSS funded program, please count them in only one of the program's Year End Reports.

Required, number

<b>10. Total number of Volunteer Hours</b> <i>This is the total number of hours that ALL of your volunteers have worked to support your program during the reporting period.</i>	Required, number
<b>11. Comments regarding Volunteers and Volunteer Hours</b> <i>Only if you have additional information you would like to share.</i> <i>Optional, 4000 characters maximum</i>	

<b>Target Population Impact:</b>	
<b>12. Identify the top priority population groups served by your program.</b>	
<i>List (Yes/No): Children/Youth; Families; Indigenous People; Newcomers to Canada; Seniors</i>	
<b>13. Describe how your program has impacted the population group(s) identified above.</b>	
<i>Required, 6000 characters maximum</i>	
<b>14. If the answer above is not the same group as identified in your application (question 8 in application), please explain below.</b>	
<i>Optional, 3000 characters maximum</i>	

<b>Success Stories:</b>	
<i>Please provide one or two short stories about people who have been impacted by your FCSS-funded program. Make sure to link the story to the FCSS outcome/FSII indicator that this program is contributing to. Please do NOT include any identifying information about your client/participant.</i>	
<b>15. First Story: required, 4000 characters maximum</b>	
<b>16. Second Story: optional, 4000 characters maximum</b>	

<b>Other Program Impact Data:</b>	
<i>The following two questions provide an opportunity for you to share additional information on the impact of this FCSS-funded program that may not have been captured in the previous questions. This could include, but is not limited to program evaluations, survey results, case studies, storytelling, or any other qualitative or quantitative data.</i>	
<b>17. If any additional program impact data is collected, describe the results here.</b>	
<i>Indicate how this data was collected and measured. If no additional data has been collected, enter N/A.</i>	
<i>Required, 6000 characters maximum</i>	
<b>18. Please provide any supporting documents or files related to the impact data described in the previous question. If sharing oral and/or visual storytelling data, this could include audio, video, or photo files. This can be done by either uploading them to the Documents tab in this report or providing web links below.</b>	
<i>If you collected additional program impact data but are unable to provide supporting documents, please indicate why.</i>	
<i>Optional, 3000 characters maximum</i>	

<b>Continuous Improvement:</b>	
<b>19. Report any program or organizational improvement or changes you made during the current reporting period that impacted this program.</b>	
<i>Optional, 4000 characters maximum</i>	
<b>20. Report any program or organizational improvement or change efforts planned for the next reporting period that could impact this program.</b>	
<i>Optional, 4000 characters maximum</i>	
<b>21. To help with the City of Calgary's continuous improvement efforts, please provide feedback on ways in which this reporting process could be improved.</b>	
<i>Optional, 4000 characters maximum</i>	

<b>Opportunities and Barriers:</b>	
<b>22. Briefly identify any opportunities or barriers (programmatic, policy, organization, etc.), potentially affecting your social inclusion work if there are any.</b>	
<i>This can include items such as government policy, sector relations, or funding availability.</i>	
<i>Optional, 4000 characters maximum</i>	

<b>Additional Comments:</b>	
<b>23. If there is anything else you would like to tell us, please do so here.</b>	
<i>Optional, 4000 characters maximum</i>	