Family and Community Support Services
Year-End Report – 2023

Programs for Increasing Social Inclusion

Reporting Period
April 1, 2023 to December 31, 2023

All Information provided is Public

1. What is the main 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 main program delivery location?	
Required, 300 characters	
3. If applicable, provide the postal codes (e.g. E2R, 2W3) for any other locations the program is delivered.	
Optional, 100 characters	

Number of Unique Individual Clients or Participants in the program:	Total Number of Unique Individual Clients or Participants
4. Total Number of Unique Individual Clients or Participants *This section is for reporting the number of <u>unique individual clients or participants</u> over the past year **where a client file is opened**. People counted should be from the primary target population described in the program Theory of Change. 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.*	Required, number
5. Please explain any significant differences between the above reported number of unique individual clients or participants versus the number of matched pre/post-test responses shown in the FSII Program Impact Report for the FSII annual reporting cycle ending December 31, 2023.	
Optional, 4000 char	
6. Please explain 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.	
Required, 4000 char	
7. Number of Contacts	
*This is for services where <u>no client file is opened</u>. 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 char	

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
10. Total number of Volunteer Hours. *This is the total number of hours that ALL of your volunteers have worked to support your program during this 12-month reporting period.*	Required, number
11. Comments regarding Volunteers and Volunteer Hours. *Only if you have additional information you would like to share.*	
Optional, 4000 char	

Target Population Impact:		
12. Please identify the top priority population groups selected in your application.		
1. Required [FCSS Calgary Framework]	2. Optional	3. Optional
13. Describe how your program has impacted the population group(s) identified.		
Required, 6000 char		
14. If this is not the same group as identified in your application, please explain below.		
Optional, 3000 char		
Success Stories:		
Please provide one or two short stories about people who have been impacted by your FCSS program. These stories are used to show the impact of FCSS funding. If possible, please link story to the FCSS outcome/FSII indicator that this program is contributing to. *Please do NOT include any identifying information about your client/participant.*		
15. First Story: required, 4000 char **16. Second Story: optional, 4000 char**		
Program Evaluation Reporting: (Optional)		
17. If you conduct any program evaluations related to this program, please describe the results. *Include any additional outputs, outcomes, qualitative analysis, and overall impact, as applicable. If no evaluation work has been completed, enter N/A.*		
Optional, 6000 char		
18. Please upload to the Documents tab in FIMS or provide links to any program evaluation files that demonstrate the impact of your program, as indicated in question 17. Provide the file names in the space below. (Optional) *These files can include written reports, oral reporting, video, or other multi-media items, as seem relevant to FCSS.*		
Optional, 3000 char		

Continuous Improvement:
19. Report any program or organizational improvement or changes you made during the current reporting period (2023) that impacted this program.
Optional, 4000 char
20. Report any program or organizational improvement or change efforts planned for the next reporting period (2024) that could impact this program.
Optional, 4000 char
21. To aid FCSS in its own continuous improvement efforts, please provide feedback on ways in which this reporting process could be improved.
Optional, 4000 char

Policy Opportunities/Barriers:
22. Please briefly identify any opportunities or barriers (programmatic, policy, organization, etc.), potentially affecting your social inclusion work. *(e.g. This can include items such government policy, sector relations, or funding availability).*
Optional, 4000char
23. Please summarize how your organization and/or program have been impacted by inflation. Provide specific examples, if possible.

Policy Opportunities/Barriers:
Required, 4000char

Alignment with and support of the Enough for All Poverty Reduction Strategy:
24. Enough for All is a community-driven poverty reduction strategy with the goal of aligning and leveraging the work of Calgarians. Please briefly describe how your FCSS funded work supports the goals of the Enough for All Poverty Reduction Strategy, if applicable. *Note: This information is being collected to determine the impact of FCSS funding on supporting poverty reduction. If this is not relevant to your program, please do not complete this question. Not all FCSS funded programs algin with this work.* Document ID number: Link:
Optional, 4000 char

Additional Comments:
25. If there is anything else you would like to tell us, please do so here.
Optional, 4000 char