**The Paul Kitchin Award**

Paul Kitchin served as the Executive Director of Career Colleges Ontario from 1988 to 2017. During that period, he skillfully represented career colleges and their students in numerous provincial, federal and international committees and initiatives with a special focus on promoting institutional quality, ethical business practices, student outcomes, inclusivity and outreach.

In honour of his outstanding contributions to CCO, to the students of career colleges, and to the broader goals of job training and retraining in Ontario, the members of CCO have established *The Paul Kitchin Award for Outstanding Community Involvement* to be awarded annually to a CCO member college that has exhibited, through community involvement, exceptional service in the enhancement of the prosperity of Ontarians.

**Criteria**

The award recognizes initiatives or programs that are designed to enhance the welfare and self-sufficiency of individuals through targeted community outreach programs that are relevant to the mission of a career college (additional information in Appendix 1 Guidelines).

**Eligibility for Nomination**

Nominees must be:

* a registered PCC that has been in “good standing” with the Ministry for the last five years (and must remain in good standing through the evaluation process);
* a member of CCO for at least three years;
* under the same ownership for the last three years; and
* not have received the Paul Kitchin Award in the last five years.

**Nomination Process**

As the purpose of the Paul Kitchin Award is to celebrate and commemorate a college’s community involvement, it is anticipated that most nominations will be made by the community group(s) with which the college is working or the members of which are the primary target group of the program.

In certain instances, particularly those where the initiative is one where the recipients become students in one of the college’s registered programs, a self-nomination is acceptable provided it is accompanied by a third-party acknowledgment of the college’s collaboration with the third-party.

The nomination should be made by submitting a completed application form, which has three major sections (Appendix 2):

* Section B: College information
* Section C: Nominator information
* Section D: Information about the community initiative

**Appendix 1**

**Guidelines to Assist in the Nomination Process**

**The Criteria**

* to enhance the welfare and self-sufficiency of individuals in one or more of the following groups: children, youth, seniors, disabled, indigenous, newcomers, single parent, unemployed or under-employed;
* through targeted community outreach initiatives or programs
* either that are not a part of the college’s regulated or registered activities, or
* if directly connected to those activities, demonstrate an exceptional/unique and novel design;
* which initiatives or programs have one or more of the following purposes that are most relevant to the activities and mission of a career college:[[1]](#footnote-1)
* people who are economically vulnerable are able to meet their basic needs
* people who are economically vulnerable have access to community services that enhance financial stability
* people have the skills & knowledge to achieve greater financial independence
* people become or stay employed
* people become entrepreneurs;

**What an effective nomination should contain**

|  |  |  |
| --- | --- | --- |
| **Expected Results** | **Activities** | **Performance Indicators** |
| **What did the college want to accomplish?** Describe the changes you wanted to occur: your goal or desired outcome(s). **Use language that exhibits change and results**: • Improve • Reduce • Enhance • Expand • Decrease • Prevent • Maintain **Example*** Raise sufficient funds to pay for the construction of two dormitory buildings at the Grimsby camp for autistic children.
* Develop and train staff on the use of an inventory control program for the Food Bank of Northeast Brampton.
 | **How was it accomplished?** List the tasks or things that were done to achieve the expected results.**Use verbs/action words:** • Conduct • Deliver • Facilitate • Promote • Train • Provide • Repair **Example**: * Recruit and facilitate a series of information sessions on employment opportunities for residents of the Good Shepherd Centre
* Conduct personal meetings with the employees of ABC Coal Furnace Company Work to assess their retraining options.
 | **How do you know you’ve accomplished what you wanted?** Identify things that show the expected results have been or are being achieved.**Use indicator or description words:** • Quantitative o Numberso Percentages o Perceptions o Feelings o Attitudes **Example:*** 13 of the 22 people trained started their own businesses, and the total number of people employed is 47.
* 52 seniors improved their ability to meet their personal hygiene needs with minimal to no assistance.
 |

**Supporting Documentation**

Greater value will be given to indicators **both of the nature of the initiative/program and of its outcomes** that have accompanying “proof” (e.g., verifiable statistics, letters of support, testimonials, written policies, media reports, photographs, brochures, etc.,) than to simple statements of achievement.  The judges will make their decision based on what is submitted in and with the nomination form; they will not be involved in an independent validation of claims that are made in the nomination.

The key metrics that should be provided are, for example and where relevant:

* the number of people who access the initiative
* the number of people trained and/or developed
* the number of people who start their own businesses and the number of people employed
* the amount of money raised for or invested in the initiative
* the extent of the role (numbers and time) played in the initiative by the college’s students, instructional and administrative staff

|  |  |
| --- | --- |
|  | **SELF-SUFFICIENCY SCALE FROM LEAST TO MOST** |
| **CATEGORY** | **IN CRISIS** | **VULNERABLE** | **SAFE** | **BUILDING CAPACITY** | **EMPOWERED** |
| Income | No income | Inadequate income and/or spontaneous or inappropriate spending | Can meet basic needs with subsidy; appropriate spending. | Can meet basic needs and manage debt without assistance. | Income is sufficient, well managed; has discretionary income and is able to save |
| Employment | No job | Temporary, part-time or seasonal; inadequate pay; no benefits | Employed fulltime; inadequate pay; few or no benefits | Employed fulltime with adequate pay and benefits | Maintains fulltime permanent (at least 6 months) employment with adequate income and benefits |
| Shelter | Homeless or threatened with eviction | In transitional, temporary or substandard housing; and/or current rent payment is unaffordable | In stable housing that is safe but only marginally adequate | Household is in safe, adequate, subsidized housing | Household is in safe, adequate, unsubsidized housing |
| Food | No food or means to prepare it. Relies to a significant degree on other sources of free or low-cost food | Household requires assistance to meet basic food needs on a regular basis (limited to meet all food needs) | Can meet basic food needs but requires occasional assistance (includes lives at a site with food service) | Can meet basic food needs without assistance | Can choose to purchase any food household desires |
| Childcare | Needs childcare, but none is available/ accessible and/or child is not eligible | Childcare is unreliable or unaffordable; inadequate supervision is a problem for childcare that is available | Affordable subsidized childcare is available but limited | Reliable, affordable childcare is available; no need for subsidies | Able to select quality childcare of choice |
| Children’s Education | One or more eligible children not enrolled in school | One or more eligible children enrolled in school but not attending classes | Enrolled in school, but one or more children only occasionally attending classes | Enrolled in school and attending classes most of the time | All eligible children enrolled and attending on a regular basis |
| Adult Education | Literacy problems (no reading or writing skills) and/or no high school diploma/GED are serious barriers to employment and effective functioning in society | Enrolled in literacy program to improve basic reading and writing skills AND/OR Enrolled in GED program to improve other basic skills e.g. math AND/OR Does not have high school diploma/GED but has sufficient command of English (reading, writing) and other basic skills to not pose as a barrier to employment | Has high school diploma/GED, but does not have the education/literacy skills to function effectively in society | Has high school diploma/GED, but needs, or is actively pursuing additional education/training (postsecondary or specialized training) to improve employment situation and/or to resolve literacy problems to where they are able to function effectively in society | Has completed education/training needed to become employable. No literacy problems |
| Legal | Current outstanding tickets or warrants or other serious unresolved legal issues | Current charges/trial pending; noncompliance with probation/parole; legal issues impacting housing qualifications | Fully compliant with probation/parole terms; working on plan to resolve other legal issues | Has successfully completed probation/parole within past 12 months; no new charges filed; recently resolved other legal issues | No active legal issues in more than 12 months and/or no felony/significant legal/criminal history |
| Life Skills | Unable to meet basic needs such as hygiene, food, activities of daily living | Can meet a few but not all needs of daily living without assistance | Can meet most but not all needs of daily living without assistance | Able to meet all basic needs of daily living without assistance | Able to provide beyond basic needs of daily living for self and family |
| Mental Health | Danger to self or others; recurring suicidal ideation; experiencing severe difficulty in day-to-day life due to psychological problems | Recurrent mental health symptoms that may affect behavior but not a danger to self/others; persistent problems with functioning due to mental health symptoms | Mild symptoms may be present but are transient; only moderate difficulty in functioning due to mental health problems | Minimal symptoms that are expectable responses to life stressors; only slight impairment in functioning | Symptoms are absent or rare; good or superior functioning in wide range of activities; no more than every-day problems or concerns |
| Substance Abuse | Meets criteria for severe abuse/dependence; resulting problems so severe that institutional living or hospitalization may be necessary | Meets criteria for dependence; preoccupation with use and/or obtaining drugs/alcohol; withdrawal or withdrawal avoidance behaviors evident; use results in avoidance or neglect of essential life activities | Use within last 6 months; evidence of persistent or recurrent social, occupational, emotional, or physical problems related to use (such as disruptive behavior or housing problems); problems that have persisted for at least one month | Client has used during last 6 months but no evidence of persistent or recurrent social, occupational, emotional, or physical problems related to use; no evidence of recurrent dangerous use | No inappropriate drug /alcohol use in last 6 months |
| Family Relations | Lack of necessary support from family or friends; abuse (DV, child) is present or there is child neglect | Family/ friends may be supportive but lack ability or resources to help; family members do not relate well with one another; potential for abuse or neglect | Some support from family/friends; family members acknowledge and seek to change negative behaviors; are learning to communicate and support | Strong support from family or friends; household members support each other's efforts | Has healthy/expanding support network; household is stable and communication is consistently open |
| Transportation/ Mobility | No access to transportation, public or private; may have car that is inoperable | Transportation is available but unreliable, unpredictable, unaffordable; may have car but no insurance, license, etc. | Transportation is available and reliable but limited and/or inconvenient; driver(s) is licensed and minimally insured | Transportation is generally accessible to meet basic travel needs | Transportation is readily available and affordable; car is adequately insured |
| Community Involvement | No community involvement; in "survival" mode | Socially isolated and/or no social skills and/or lacks motivation to become involved | Lacks knowledge of ways to become involved | Some community involvement (church, advisory group, support group) but has barriers such as transportation, childcare issues | Actively involved in community |
| Safety | Home or residence is not safe; immediate level of lethality is extremely high; possible involvement of child protection services (e.g. Children’s Aid Societies) | Safety is threatened, temporary protection is available; level of lethality is high | Current level of safety is minimally adequate; ongoing safety planning is essential | Home is safe, yet future is uncertain; safety planning is important | Home is apparently safe and stable |
| Parenting Skills | Parenting skills are lacking and there are safety concerns regarding parenting skills | Parenting skills are minimal | Parenting skills are apparent but not adequate | Parenting skills are adequate | Parenting skills are well developed |
| Credit History | Bankruptcy/ foreclosure | Outstanding judgments | Has a credit repair plan | Moderate credit rating | Good credit/ manageable debt ratio |

Note: The categories and scale descriptions in the chart above are not proscriptive. They are intended to give nominators and colleges guidance and ideas on how to describe the purposes and results of the initiative.

**Application Forms Appendix 2**

**The Paul Kitchin Award for Outstanding Community Involvement**

**(Attachment 2)**

Note: This form is a Word Document. Therefore, the response sections will expand to accommodate the size of your entry. Although succinctness is appreciated, this should not be done at the expense of submitting a well-documented form.

**Section A: General Information and Submission Instructions**

Deadline for submission:

**April 15, 2020**

What must be submitted – the material and number of copies:

**1 electronic submission**

How it is to be submitted – electronic, hard copy:

**Electronic to:** **awards@careercollegesontario.ca**

**Section B: College Information**

|  |  |
| --- | --- |
| College Name: |  |
| College Address: |  |
| City and Province: |  |
| Postal Code: |  |
| Email: |  |
| Phone: |  |

**Confirmation of College’s Eligibility for Nomination**

The College must:

* be a registered PCC that has been in “good standing” with the Ministry for the last five years,
* be a member of CCO for at least three years,
* be under the same ownership for the last three years, and
* not have received the Paul Kitchin Award in the last five years.

□ Yes □ No

**Section C: Nominator Information**

**(to be completed if the nominator is NOT the college)**

The nominator is the college □ Yes □ No

Note: Since the purpose of the Paul Kitchin Award is to celebrate and commemorate a college’s community involvement, it is anticipated that most nominations will be made by the community group(s) with which the college is working or the members of which are the primary target group of the program. In certain instances, particularly those where the initiative is one where the recipients become students in one of the college’s registered programs, a self-nomination is most likely.

|  |  |
| --- | --- |
| Nominator's Name: |  |
| Nominator’s Organization(if applicable): |  |
| Nominator’s (if applicable,Organization’s) Address:  |  |
| City and Province: |  |
| Postal Code: |  |
| Website: |  |
| Nominator's Email: |  |
| Nominator's Phone: |  |
| **If nomination is being made or is officially supported by an organization, please provide the following information**  |
| What is your organization’s mandate and mission?  |
| What are your organization’s typical activities (e.g. programs, courses, events, services)?  |
| Who takes part in your organization’s activities or programs or who uses your services?  |

**Section D: Information about the Community Initiative**

|  |
| --- |
| 1. **What was the initiative/program?**
* Provide an overview of the program or activity that is the basis for the nomination
 |
|  |
| **Supporting Documentation**List the documentation attached to this nomination that relates to the above section (e.g. letters of support, testimonials, written policies, media reports, photographs, brochures, etc.,) |
| **Section D.1.a name of document****Section D.1.b name of document, etc.** |

|  |
| --- |
| 1. **What did the college want to accomplish?**
* Describe the changes you wanted to occur: the goal(s) or desired outcome(s). For example: to assist:
* people who are economically vulnerable to be able to meet their basic needs
* people who are economically vulnerable to have access to community services that enhance financial stability
* people to have the skills & knowledge to achieve greater financial independence
* people to become or stay employed
* people to become entrepreneurs
* Describe why the program is important: how it fills a gap, meets a need, develops a skill, builds on an opportunity, or solves a problem. (Feel free to use any of the wording from Appendix 1 that might help focus your description.)
* Describe who, specifically, in your community benefited from the program; who and why it was the target group.
 |
|  |
| **Supporting Documentation**List the documentation attached to this nomination that relates to the above section (e.g. letters of support, testimonials, written policies, media reports, photographs, brochures, etc.) |
| **Section D.2.a name of document****Section D.2.b name of document, etc.** |

|  |
| --- |
| 1. **How was it accomplished?**
* List the tasks or things that were done to achieve the expected results.
* Describe who performed these activities – categories, numbers and amount of time; e.g. administrative staff, instructional staff, students
 |
|  |
| **Supporting Documentation**List the documentation attached to this nomination that relates to the above section (e.g. letters of support, testimonials, written policies, media reports, photographs, brochures, etc.) |
| **Section D.3.a name of document****Section D.3.b name of document, etc.** |

|  |
| --- |
| 1. **Partner organization(s), if applicable**
* List any partner organizations involved in planning, doing or evaluating the work.
* Describe the nature of the relationship between the college and the partner organization – i.e., the responsibilities of each
 |
|  |
| **Supporting Documentation**List the documentation attached to this nomination that relates to the above section (e.g. letters of support, testimonials, written policies, media reports, photographs, brochures, etc.) |
| **Section D.4.a name of document****Section D.4.b name of document, etc.** |
| 1. **How do you know you’ve accomplished what you wanted?**
* Identify things that show that the expected results have been or are being achieved.
* The key metrics that should be provided are, for example and where relevant:
	+ the number of people who access the initiative
	+ the number of people trained and/or developed
	+ the number of people who start their own businesses and the number of people employed
	+ the amount of money raised for or invested in the initiative
	+ the extent of the role (numbers and time) played in the initiative by the college’s students, instructional and administrative staff
 |
|  |
| **Supporting Documentation**List the documentation attached to this nomination that relates to the above section (e.g. letters of support, testimonials, written policies, media reports, photographs, brochures, etc.) |
| **Section D.5.a name of document****Section D.5.b name of document, etc.** |

|  |
| --- |
| 1. **Any additional comments relevant to the nomination**
 |
|  |
| **Supporting Documentation**List the documentation attached to this nomination that relates to the above section (e.g. letters of support, testimonials, written policies, media reports, photographs, brochures, etc.) |
| **Section D.6.a name of document****Section D.6.b name of document, etc.** |

**Section E: Signature Page**

**E. 1. Nominee’s Signature**

By signing and dating below, the college attests:

* that it has agreed to be nominated for the Paul Kitchin Award;
* that it gives the appropriate authority in the Ministry of Advanced Education and Skills Development to verify that the college is
* a registered PCC that has been in “good standing” with the Ministry for the last five years,
* under the same ownership for the last three years; and
* that CCO and the panel of judges have permission to contact the nominator and third-parties referred to in this form, if required, in order to verify or clarify information contained in this form and its attachments.

|  |  |
| --- | --- |
| **Nominee’s Signature:** |  |
| **Date:** |  |

**E. 2. Nominator’s Signature**

By signing and dating below, the nominator attests:

* that this form has been completed in good faith and to the extent possible that the information contained herein is accurate and true; and
* that CCO and the panel of judges have permission to contact the nominator and third-parties referred to in this form, if required, in order to verify or clarify information contained in this form and its attachments.

|  |  |
| --- | --- |
| **Nominator's Signature:** |  |
| **Date:** |  |

|  |  |
| --- | --- |
| **Nominator****Name:** |  |
| **Nominee****Name:** |  |

**Section F: Submission Checklist**

|  |  |  |
| --- | --- | --- |
| **Item** | **Status** | **Attached [√]** |
| **Section B: College Information** | required |  |
| **Section C: Nominator Information**  | required unless the college self-nominates |  |
| **Section D: Information about the Community Initiative** |  |  |
| 1. What was the initiative/program?
 | required |  |
| 1. What did the college want to accomplish?
 | required |  |
| 1. How was it accomplished?
 | required |  |
| 1. Partner organization(s)
 | required if there was a partner organization |  |
| 1. How do you know you’ve accomplished what you wanted?
 | required |  |
| 1. Any additional comments relevant to the nomination (not required)
 | required |  |
| **Section E: Signature Page** | required |  |
| **Attachments (list all attachments by name and in order)** | required if there are attachments |  |
| **Attachment 1** |  |  |
| **“ “** |  |  |
| **“ “** |  |  |
| **“ “** |  |  |
| **“ “** |  |  |
| **“ “** |  |  |
| **“ “** |  |  |
| **“ “** |  |  |

1. These categories have been developed and implemented by the Ontario Trillium Foundation for categorizing and assessing applications for grants from community organizations working to address the prosperity needs of Ontario residents. See <http://otf.ca/sites/default/files/grantmetrics_allactionareas_en.pdf#page=4> [↑](#footnote-ref-1)