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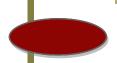
**June 2017** 



### **Summer Newsletter**

# Therapeutic Family Care Program

*VISION STATEMENT*: Every child, youth and family grows, builds on their strengths and reaches their potential in a permanent, secure and enduring environment.



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### **Program Manager's Report**

It is again a pleasure to be able to say hello to all of you through the newsletter. As we move towards the summer season, it is a pleasure to be able to report on the progress of the Program. As ever, I am first and foremost proud of the work being done by caregivers and staff. Our children are truly the benefactors of all their hard work and dedication.

The TFC Program began a planning process in February 2016 with the purpose to provide a map for the Program to help support the work of the three sponsoring societies. To identify and reaffirm its strengths and to identify areas for future development and to identify strategic priorities and underlying principles that will guide its future direction. External and internal stakeholders provided their input on agency's purpose and mission, its strength and areas for improvement and priorities for the future. Input was provided from 131 participants. Many thanks to everyone who was involved in focus groups or interviews. We hope to have the final updated strategic plan out to stakeholders in the next few weeks.

The Therapeutic Foster Home Program (TFHP) continues to provide service to children. TFHP provided 17,608 days service in 2016/17 in comparison to days service in 2015/16 of 16,800. Twenty eight caregiver families provided full time care with one relief home providing weekend and emergency relief. Matching of children/youth in homes remains extremely important and is often the reason that there is one child in one home.

The Clinical Service Support Program (CSSP) has continued to develop and grow. Over the past year CSSP provided 18,328 days service in comparison to 15,915 days service in 2015/16. CSSP provides service to foster, adoptive, kinship and biological families. The Program is helping TFC to broaden its' support to a variety of permanency options for children.

The Mixed Modality Program (MMP) continues to provide service to eight children and through children survey forms we see the benefits of children living in a family based therapeutic program with CYW supports. Children appear to be thriving within a family. Mixed Modality provided 2,400 days service in 2016/17 in comparison to 2,739 days service in 2015/16.

In January 2007 our Program began to implement use of the Assessment Checklist for Children (ACC) as a further means of measuring the range of issues faced by children in the Program as well as their progress. To date we have over 1300 data entries for the children in our three programs. It is now shown that children/youth are improving in all of our programs.

The support from our sponsored Societies continues to be strong and vibrant. We are extremely grateful for the support of the staff of the Societies and the TFC Executive Committee Tami Callahan, Chris MacPhee, Dawn Walcott-Parris, and Laura Quibell and the Executive Directors Wanda Secord, Mark Kartusch, and Jennifer Wilson.

This has been a busy and productive year to date. We hope that everyone has some time to spend with family and friends over the summer and come back feeling refreshed in the fall. We look forward to our work together. I want to thank



each one of you for the important part you play in the healing of our children. Please be in touch with us at any time if you have questions or suggestions.

Duane Durham



### TIMES CHANGE and NOW WE

KNOW Many individuals experience health symptoms when exposed to smoke and scented products. The Therapeutic Family



Care Program appreciates your cooperation towards a smoke and scent free environment. Please be mindful of sensitivities to smoke and scent. No scent should be detectable at more than an arm's length from another individual.

# 7770111115 2017 / 2018 CLUSTER

CLUSTER TRAINING SCHEDULE



Clusters will be held at the Grace Christian Reformed Church at 440 King St. E. in Cobourg. TFC trainings are open to caregivers and Society workers wanting to participate in training or connect with others. Clusters will begin at 10:00am with TFC business, announcements and greetings; the training will start at 10:30am.

# \*\* Special Note for September cluster \*\* "Using Relationships to Heal Trauma: Dyadic Developmental Psychotherapy (DDP)"

**Date:** Monday, September 25, 2017

**Time:** 9:00 a.m. - 4:15 p.m. **Location:** Best Western Cobourg

930 Burnham St.

**Fee:** \$67.80

**Register:** Jackie Chapman-Davis

905-372-1821 ext. 1258

Materials, lunch & nutrition breaks provided

**For Parent Therapists:** Paid spots have been reserved...call TFC Reception to register (if you haven't already).

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Date	TFC Business	Training
Monday Sept. 25/17	SEE NOTE ABOVE	SEE NOTE ABOVE
Thursday Oct. 26/17	10:00 a.m. TFC Business	Collaborative Treatment of Developmental Trauma
Thursday Nov. 23/17	10:00 a.m. TFC Business	Milieu Therapy and De- escalation Techniques TFC Holiday Celebration to follow
Thursday Mar. 22/18	10:00 a.m. TFC Business	P.A.R.T. Practice and Research Together
Thursday Apr. 26/18	10:00 a.m. TFC Business	Introduction to Signs of Safety (SOS)
Thursday May 24/18	10:00 a.m. TFC Business and TFC Awards	Supporting Permanency in Adoption & Wendy's Wonderful Kids Recruitment

**SIGN UP-** for caregivers and staff outside of TFC program please call TFC Reception at 905-373-0522 ext. "0" to register or at <a href="mailto:tfc.reception@tfcprogram.ca">tfc.reception@tfcprogram.ca</a>

# TFC going to FFTA, Chicago

Duane Durham and Mary Price-Cameron will be heading off to Chicago to attend the Family Focused Therapeutic Association (FFTA) conference July 15 to 19, 2017.

This conference also allows TFC staff to attend workshops by other agencies, mostly from the USA. Both Duane and Mary have chosen different training in the workshops being offered in order to be able to share the knowledge. Some of the training that they will be attending relates to leadership development, partnering for permanency, change management, strategic planning, achieving mission, issues of diversity, and many others.



# Children's Achievements...

M.B. is finishing up her second successful year at university! Congratulations to M., and to her foster family, who have remained committed to helping her meet with success.

S.J. (CSSP) is on track for graduating Grade 12 in June 2017. S. will be heading to Durham College



in September to study in the CYW Accelerated Program. Congratulations to S., and to kin parents, who have done an awesome job helping to keep S. on track!

J.T. in B. home recently received an award from the Durham Dragon's Hockey League for the

player with the biggest heart and most determination in the entire league! J. is also finishing up a very successful



first year of high school. Congratulations, J.!

The H. family (CSSP) is moving towards



adoption finalization of a sibling group of 4! Many thanks to Ed, who was instrumental in helping everyone in becoming a (big!) family.

Congratulations to L.B. (CSSP) and his parents, as they also move towards adoption finalization!

P at age 16 has lived with his foster family for more than half his life. He has made significant gains in school where he has moved from an Enterphase classroom into a mainstream school and is now in high school with indirect support. He has almost completed his volunteer hours for high school. P continues to be supported by a CYW in the home to help him through routines. This has helped further develop his connection and relationship with his foster family. This summer he will have the opportunity to attend a

destination wedding of the foster parent's daughter in Cuba. P has overcome many challenges in his life with the support of his foster family and continues to look forward into the future with hope and an understanding that he will maintain a relationship with his foster family into adulthood. With the determination and commitment of the foster parents, P has

developed into an engaging, kind, and wonderful individual with realistic hopes and dreams for the future.





Latency Camp will be held July 10 to July 14, 2017 at the TFC office, daily between 9:30 am and 3:30 pm.

Adolescent Camp will be held July 17 to July 21, 2017 at the TFC office, daily between 9:30 am and 3:30 pm.

- Daily swimming, crafts and games
- Big Apple Tour
- Trip to Cedar Park
- Tons of fun, fun, fun
- New Friends
- Prizes





### Pat Cormier Community Award

For many years now we have presented Community awards to recognize Society Workers or individuals in our community who help children/youth in one way or another.



This year we decided to rename the award to "The Pat Cormier Community Award". Pat is Lois and Larry Preston's son. The Prestons are Therapeutic Foster Parents with Durham Children's Aid Society. Pat passed away on February 8, 2017. Pat embodied

all the wonderful qualities of giving to others. Pat helped in numerous community ventures, working selflessly for others. At Pat's celebration of life you were overwhelmed with story after story of how he had helped others and given back to his community. I think Pat didn't think he was doing anything special (he might wonder why we would be doing this) but I can tell you the people he helped felt different, and that he was a special person in their lives.

- Duane Durham, Program Manager



Rupnow, DCAS Youth Mentor accepting The Pat Cormier Community Award presented by Lois & Larry Preston



Leslie Lemay, DCAS Children's Service worker also received The Pat **Cormier Community** Award. Elizabeth Gregory accepted the award on her behalf presented by Mary Price-Cameron



Caron Quinn accepting The Parent Therapist Memorial Award presented by Tasha Fitzpatrick and Maya Hickerson



Val Baker accepting The Parent Therapist Leadership Award presented by Elizabeth Gregory and Cheri Crane



Kathy Yandt accepting The Marie Croft Training and Mentorship Award presented by Tanya Hayford and Laura Gonsalves



# TFC Students

Danielle Petley is a graduating Child and Youth Care Practitioner student from Durham College

doing her final placement at TFC. Danielle began at TFC in May 2017 and will be with us until August 2017. Previous placement experience includes Big Brothers and Big Sisters of Clarington, Clarington Project and Participation House. Please join me in welcoming Danielle to TFC!



Nicole Carr is in her final year of collaborative studies with Durham College and Brock



University in the Child and Youth Care program. Some of her previous placement experiences include Big Brothers Big Sisters, and Dr. Angela Fountain and Associates. Nicole began at TFC in May 2017 and will be with us until August 2017. Please join me in

welcoming Nicole to TFC!

We appreciate the TFC staff that help supervise our students. Current supervisors of students are Sara Coyle, Cheri Crane, and Karen Hay.

# ARTICLES OF INTEREST

Signs of Safety (SOS)

Author: Mary Price-Cameron, TFC Supervisor

Currently TFC and two of the sponsoring agencies have embarked on a journey using Signs of Safety (SOS) as part of the methodology to engage with families. "The approach focuses on the question "How can the worker build partnerships with parents and children in situations of suspected or substantiated child abuse and still deal rigorously with the maltreatment issues?" This strengths-based and safety-focused approach to child protection work is grounded in partnership and collaboration. It expands the investigation of risk to encompass strengths and Signs of Safety that can be built upon to stabilise and strengthen a child's and family's situation. A format for undertaking comprehensive risk assessment — assessing both danger and strengths/safety — is incorporated. The approach is designed to be used from commencement through to case closure in order to assist professionals at all stages of the child protection process, whether they be in statutory, hospital, residential or treatment settings" (www.signsofsafety.net).

Here at TFC we have begun to utilize some of the techniques of Signs of Safety including three column conversations that identify the strengths, the worries, and the next steps in case planning. We have also been able to work in partnership with our child welfare collaterals to divide out responsibilities in tasks to complete, such as words and pictures, three houses conversations with children, the wizards and fairies tool to working with children, and helping to create a trajectory of cases from start to finish. As TFC has been using a solution focused approach in our work for many years, this transition to using SOS has felt quite natural in many ways, however, with any new way of thinking and new tools it



takes time to truly feel comfortable and embed this into our work. The team is eager to learn new strategies and have opportunities to put them into practice. Tiffany Thickson is the practice lead here at TFC and will be resuming this role upon her return from maternity leave.

The practice principles in SOS include:

- Respect everyone as individuals worth working with
- Always humbly engage others
- Focus on creating small change
- Engage the person and don't get lost in the problem
- Recognize that collaboration is possible even when differences exist
- Don't interpret actions, ask questions
- Treat every engagement as an opportunity for growth
- Recognize that all people have capacities and strengths
- Maintain a focus and cast a vision for excellence
- Treat the practice principles as aspirations, not assumptions
- Learn what the other person needs and strives for
- Offer choices.

If you would like more information on Signs of Safety please see the website www.signsofsafety.net

Dyadic Developmental Psychotherapy (DDP) Training with Dr. Sian Phillips Author: Cynthia Campbell-Dionne, TFC Clinical Case Consultant

Dyadic Developmental Psychotherapy (DDP) is an attachment- focused therapy developed by Dan Hughes and Arthur Becker-Weidman. It is an evidence-based treatment for complex trauma and attachment issues. It is a family-focused approach to therapy that focuses on relationships, attunement, intersubjectivity, and sensitive responsiveness. This form of psychotherapy was developed as an intervention for children who have experienced emotional trauma as a result of chronic early maltreatment within the caregiving relationship. The primary goal of this treatment is to support children in developing the ability to maintain attachment-based relationships with parents and caregivers.

Principles of DDP and attachment theory as well as research on neuro-biology have informed practice at TFC. Dr. Sian Phillips recently visited Cobourg and facilitated a four day training on DDP. Twenty-five participants were involved including TFC staff and Society staff. Dr. Phillips is a psychologist practicing in Kingston, Ontario, an adjunct Professor of Psychology at Queen's University and a Certified DDP Therapist, consultant and trainer. She also pioneered the Belong Program, an alternative classroom supporting children with trauma and attachment difficulties, through the use of *PACE* (*Playfulness - Acceptance - Curiosity - Empathy*).

DDP utilizes the PACE model of responsiveness. Playful, accepting, curious and empathetic caregiving responses are used to help the child engage in and benefit from attuned caregiving. The child learns safety and starts to perceive the adult as a source of comfort facilitating new neuropathways being built in the brain. Through attuned caregiving the child's nervous system can relax and the child can then start to learn new ways of relating relationally. When the limbic system is activated the child struggles to learn as they cannot access the cortex.

Dyadic therapy helps the child build a new autobiographical narrative. The child learns that they respond to their environment in certain ways because they were previously unsafe; this reduces the shame associated with early trauma and neglect. The use of touch to help a child regulate was paramount. She discussed the process of developing intersubjectivity. In primary

intersubjectivity the child and parent discover each other in a reciprocal relationship, and in this process discover more about themselves. child develops a sense of self, reflected in the responses to her from the parents and therapist. If parent responds in a manner communicates that they like and enjoy the child the child learns "I must be likeable". If a parent does not enjoy the child the child concludes "I must be unlikeable" as concluded in the early relationships. becomes child's This the understanding of themselves. In secondary intersubjectivity, as the adult helps the child make sense of the world, the child develops the capacity to think and gain understanding therefore learning from experience. Traumatized children have learned to survive without safety, security, or connection. They interpret their parent's anger, irritability, rage, indifference, or lack of coping as meaning there is something wrong with them "it must be my fault".

Dr. Phillips discussed the concept of "two hands of parenting". She explained children need both empathy and nurturance and clear limits in order to feel safe. She explained too much authoritarian parenting or too much empathy limits can restrict attachment without development. She discussed the importance of relational repair after upset and explained attachment is built in the repair process not in the She reminded attendees that disconnection. cortisol (stress hormone) releases very quickly when one is stressed but leaves the body very slowly so asking a child to apologize and do repair soon after an issue may not be effective as their arousal levels are still very high due to this stress hormone. She suggested caregivers allow the arousal levels to come down before processing and to use time in when possible versus time out, as time in co-regulates the child versus the child emotionally regulating on their own. She informed the adult also needs to feel regulated for messages to be received in a safe manner for the child. Understanding the child's responses from a neuro-biological perspective can assist with this. Dr. Phillips also reviewed the importance of using connection before correction when parenting from an attachment based perspective.

Dr. Phillips explained that it takes time, practice, and consistent responses for a child to build new neuropathways. She presented a YouTube video: *The Backwards Brain Bicycle - Smarter Everyday 133* to demonstrate what is involved in programming new neuropathways. I invite you to view this captivating video to help gain perspective on just how persistent established neuropathways can be and how diligent we need to be to build new healthier pathways.

www.youtube.com/watch?v=MFzDaBzBILO

Dr. Phillips will be visiting Cobourg again on September 25, 2017 to facilitate the training *Using Relationships to Heal Trauma: Dyadic Developmental Psychotherapy (DDP)*. See TFC Cluster Schedule for registration details.

In an effort to continue our development in regard to DDP and attachment based work with children, a few TFC Clinical Case Consultants will be attending the DDP International Conference in Kingston, Ontario in the fall. Keynote speakers include Dan Hughes, Jonathan Baylin and Danny Yeung. This conference will focus on caregiver regulation, blocked care, PACE as well as Accelerated Experiential Dynamic Psychotherapy (AEDP) in response to trauma. Dr. Hughes will discuss how AEDP compliments DDP. For more information on this conference visit:

http://www.attachmentcan.ca/workshops\_ddpi\_nov2017.php

https://ddpnetwork.org/usacanada/events/ddp-international-conferencekingston-canada-oct-17/

For more information on DDP please visit: **www.ddpnetwork.org** 

### FASD Community Development Project Author: Karen Hay, TFC Clinical Case Consultant

**FASD** In April 2016, an Community Development Project was initiated to build an evidence-based response to FASD in the communities of Northumberland, Hastings, and Prince Edward County. Representatives from Child Welfare, Mental Health, Community Living, Education, Treatment Centres, Youth Services and Health Care committed to involvement to build community capacity and resources. Administrators and managers from these sectors have identified the systemic gaps in services and recognize that adverse outcomes can be minimized or prevented with appropriate support, resources and strategies for the caregivers. Initially led by Sheila Burns, FASD Specialist, this Leadership group is focusing on building community resources, capacity within the current working group and providing a 'go to' person within the specific agencies to provide caregivers of individuals with or suspected of having this often invisible disability enhanced understanding and support in their caregiving roles. Focus on strength-based strategies, skill building and minimizing adverse outcomes are the primary focus. This leadership group is committed to developing themselves as practitioners with the goal to develop expertise that will inform and contribute to the emerging change in practice and policy currently underway in the province. Moreover, the goal is to provide a new perspective on case management programming by clarifying aspects of the disability, validating the experiences caregivers, sharing responsibility, and providing a language of hope that has often been missing from the FASD dialogue. At this point in the development project the focus in on establishing a caregiver support group in the community led by members of the leadership team, providing workshops/education discussions and knowledge exchange opportunities related to effective practice in the care of children and youth with this disability. At TFC, I have been given the opportunity to become involved in this

initiative and to collaborate with other agencies to maximize the effectiveness of service delivery within the Societies sponsoring TFC. With the understanding of the challenges caregivers face parenting children with this disability and the need to develop effective strategies for the home, school and community environments I hope to develop in my role as TFC Clinical Case Consultant to provide such support and resources to the families we work with. The leadership group meets bi-monthly to provide updates on accomplishments and goals within the subcommittees, offer resources to one another and consult on specific cases that have proven to be challenging and in need of support and resources.

### TFC Attending Conference for North American Council on Adoptable Children (NACAC) - Atlanta, Georgia, July 2017

Along with Heather Owens, Manager of Adoption, Jackie Robertson and Jean Skelton will be heading off to Atlanta, Georgia in July to attend the NACAC Conference. Jackie, Jean and Heather will also be presenting a workshop on a post-adoption support group entitled "Changing the Script: Relationship is the Key." This postadoption support group was held at TFC September-November 2015 and received very positive feedback from parents.

With the growing emphasis on finding legal permanency for children and youth, supporting adoptive/kinship parents is a critical and growing area of service. Adoptive/kinship parents consistently identify the ways in which the core issues in adoption continue to impact not only their child, but the entire adoptive/kinship family as well, over the lifetime. We will be sharing our experience of using this model of a post-adoption support group, which focuses on how parents use their relationship in order to influence children and youth and help them to shift towards healthier attachment styles.

This conference also allows TFC consultants to attend workshops being presented by other agencies, mostly from the USA. Jackie, Jean and Heather have coordinated their schedules so that they are attending different workshops/trainings in order to share the knowledge and also bring back more resources to share.

### Heat Stress - JHSC Author: Sue Robinson, Worker Representative

Summer fun time is here. Let's soak up the sunshine! Picnics, backyard BBQ's, gardening, baseball, soccer games, etc., all provide amazing fun times and memories. What about those extra hot days; especially with the addition of humidity and air quality, particularly for those on medications or with a precondition? How can they affect us? What can we do?

Working or playing in the heat puts stress on our body's cooling system. Hard physical work, loss of fluids, fatigue or some pre-existing medical conditions, can lead to heat-related illness. The harder your body works, the more heat it has to lose. When the environment is hot and/or humid our body must work harder to get rid of heat.

Medications or pre-existing medical conditions can make us more susceptible to heat stress. Speak to your personal physician or pharmacist to see if your medication(s) and/or health condition(s) will affect you differently in extreme weather conditions.

Utilizing local air conditioned community buildings are a great way to obtain a break from those extra hot days. Visit your local library, community center or even shopping mall to obtain a break from those extra hot days. If you're in luck, perhaps a nice cool swim is available to you. Just remember your sunscreen when out in the sun and always reapply regularly, especially after swimming or sweating.

Here are some guidelines for recognizing heat illness.

### **Heat Exhaustion:**

- Heavy sweating; cool moist skin; body temperature over 38°C; weak pulse; normal or low blood pressure; person is tired and weak, and has nausea and vomiting; is very thirsty; or is panting or breathing rapidly; vision may be blurred;
- GET MEDICAL ATTENTION. This condition can lead to heat stroke. Move the person to a cool shaded area; loosen or remove excess clothing; provide cool water to drink; fan and spray with cool water. Do not leave affected person alone;
- Reduce activity levels and/or heat exposure. Drink fluids regularly.

#### **Heat Stroke:**

- Heat stroke may develop suddenly or may follow from heat exhaustion;
- High body temperature (over 40°C) and any one of the following: the person is weak, confused, upset or acting strangely; has hot, dry, red skin (classic heat stroke) or profusely sweating (exertional heat stroke); a fast pulse; headache or dizziness. In later stages, a person may pass out and have convulsions;
- CALL AMBULANCE. This condition is severe. Remove excess clothing; fan and spray the person with cool water; offer sips of cool water if the person is conscious;
- Reduce activity levels and/or heat exposure. Drink fluids regularly.

### **CAREGIVERS WANTED**

If any Caregiver is interested in knowing more about our Therapeutic Foster Home Program, our Mixed Modality Program, or is interested in becoming a Parent Therapist, please contact TFC at (905) 373-0522 or tfc.reception@tfcprogram.ca



# TFC WALUES....

"IT'S NOT
HARD TO MAKE
DECISIONS
WHEN YOU KNOW
WHAT YOUR
VALUES ARE"

- ROY DISNEY



No permanence is ours, we are a wave that flows to fit whatever form it finds.

~ Hermann Hesse ~



Coming together is a BEGINNING
Keeping together is PROGRESS
Working together is SUCCESS
Henry Ford

















Durham Children's Aid Society 1320 Airport Boulevard Oshawa, ON L1H 7K4 1-905-433-1551 or 1-800-461-8140 www.durhamcas.ca

Highland Shores Children's Aid P.O. Box 186 363 Dundas Street West Belleville, ON K8P 1B3 1-613-962-9291 or 1-800-267-0570 www.highlandshorescas.com

Kawartha-Haliburton Children's Aid Society 1100 Chemong Road Peterborough, ON K9J 7X2 1-705-743-9751 or 1-800-661-2843 www.khcas.on.ca