



see what's possible...

# FolkStone

## Annual Program Report 2021-22

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### About us

The FolkStone program was developed in 2000 to provide an alternative to institutional care for adults who could no longer live on their own. The program model is based on PLEA's very successful experience in providing care to young people within family care settings in the community. Over the years we have expanded the program's scope and now provide a full range of services that includes:

- **specialized participant care** for adults experiencing significant physical and mental health challenges as well as health related challenges: including those with acquired brain injuries, dementia, mental health issues, addictions, autism, dual diagnosis, developmental disabilities, and FASD.
- short-stay, **rapid access/transitional** homes for adults transitioning from hospital care to long-term placements or other community placements.
- **semi-independent living** homes where adults can live independently yet have the safety and support from caregivers and staff when needed.
- **community inclusion** where adults are paired with a community support worker. The community support workers assist the participants in the community to provide support, life skills, companionship and assist the participant in finding meaningful employment. The staff work with the participants collaboratively and encourage them to identify and pursue personal goals.

All these components facilitate a highly individualized approach to meeting each participant's strengths, abilities, needs, circumstances and preferences, and can be combined, increased or decreased as required. Although the reasons for placements vary widely, every participant is provided with a safe, nurturing and healthy family environment supported by our staff teams, and with the other specific services they require. We focus on helping achieve a positive difference by helping restore self-confidence and bringing greater independence and resiliency to everyday life.

We develop and implement comprehensive service plans with each participant that include their strengths, ideas, and interests, and are sensitive to their culture and life experiences. We work closely with the Family Caregivers that we contract with, and value the significant time and energy they devote to providing the day-to-day needs of participants living with them. We make every effort to find the resources and service providers that the participant will feel comfortable with, and that are best qualified to meet their needs – and build collaborative relationships with them.

Our Family Caregivers live within Metro Vancouver and the Fraser Valley. Our services operate on an outreach model that maximizes direct engagement with the participants we serve, and ongoing support to our Caregivers. Our team offices are based in Vancouver and Abbotsford and provide service throughout the lower mainland.

[www.plea.ca](http://www.plea.ca)

Individuals are referred to FolkStone by the Vancouver Coastal Health Authority, Fraser Health Authority, Interior Health Authority, Community Living BC, the Authority of Health and Social Services of the Government of the Northwest Territories (GNWT), WorkSafeBC and BCCVAP (BC Crime Victims Assistance Program). We work very closely with the referring authorities and other service providers that support participants and their families to ensure our services are consistently individually focused, appropriate, safe, and well-coordinated.

We are committed to providing care that is safe and meets participants' unique care needs. Ensuring safe and effective individualized care is the foundation on which our program is built. We strive to go above and beyond to deliver exceptional care and service.

## Who we served...

Profile	2021-22	2020-21	2019-20	2018-19	2017-18	2016-17
# of cases <sup>1</sup>	154	161	155	143	151	137
# of participants	153	161	151	139	139	133
% women	17	20	21	19	21	24
% men	83	80	78	80	78	75
% self-identified as transgender	0	0	1	1	1	1
% self-identified as Indigenous	42	42	46	42	39	35
Average age when cases were opened	39	39	38	37	39	40

This year we helped transition several participants back to their home communities and saw a slight dip in the number participants we supported, however, the number of participants receiving complex diagnosis remains consistent. This includes the combination of various health-related challenges, mental health, and substance use challenges. We continue to align our training and hiring processes to focus expertise in these areas. The program continues to serve participants aged 19 onwards.

We use a person-centered, strength-based, and trauma-informed model that helps participants reach their full potential. Our team meets all contractual requirements for the participants we serve. We continue to enhance our positive working relationship with our stakeholders, Family Caregivers, participants and their families.

We recognize the rights of our participants and our staff to provide an environment without discrimination. Our staff are trained on and follow PLEA's code of ethics when providing care to our participants. We include the participants' opinions, recommendations, and their voice to continuously improve aspects of the program for the highest quality participant care and service.

*1 # of cases may be higher than # of participants due to participants being re-referred or dual funded.*

## How we did...against last year's goals

### 1. **Enhancing our Supportive Recovery program to facilitate group-themed sessions.**

Our supportive recovery program has grown from two to four addiction support workers. This has enabled us to support 12-15 participants. We have seen the number of substance-use incidents decrease as a result.

For the fiscal year of 2021/2022, we provided Addiction Support to 15 participants, 14 being supported in FolkStone Northwest Territory program and 1 being supported in the FolkStone Interior Health Authority program. Of the 15 participants, 12 identified as male and 3 as female. We had two discharges from the program, one male and one female. We provided 1731.50 hours of addiction support. Due to need for

increased addiction support, it was decided that an additional two workers were hired to support this need.

Due to Covid-19, our in-person group sessions were postponed and the primary focus has been one-to-one addiction support in the community with the participants. Community-related activities included cultural events, sporting events, community and recreational engagement, as well as attending AA and NA meetings. The one-to-one peer mentoring support had positive feedback from the participants.

The substances that our participants identify as using are: methamphetamine, alcohol, cannabis, dilaudid, ketamine, fentanyl and MDMA. Most of the participants receiving addiction worker support, report a secondary drug of choice and are polysubstance users.

## **2. Partnering with post-secondary institutions to provide opportunities for practicum placements.**

Due to evolving COVID-19 restrictions with some post-secondary institutions, this goal will be revisited in 2022-23.

Instead, we continued to focus one of our main goals on maintaining our supply of Personal Protective Equipment (PPE) for our participants, caregivers and staff in order to continue to deliver uninterrupted services during the pandemic. We were successful in continuing to secure, order and providing PPEs to our staff and participants as well as caregivers, minimizing the amount of COVID-19 positive cases for participants. Our one-to-one adult support worker hours and community inclusion hours to our participants remained strong as a result of the use of PPE to help us continue to deliver support that our participants required. We had the ability to adapt and communicate evolving Covid-19 changes to our participants, staff and caregivers to help them through the pandemic.

## **3. Continuing to develop and increase culturally relevant community resources that meet our individual participants' needs.**

The introduction of PLEA's Knowledge Keeper has facilitated the new cultural opportunities such as Changing of the Seasons event, Naka Festival, connection to Skwah Nation, mentorship to our indigenous participants and ability to provide staff an increase in knowledge towards participants' cultural plans.

We continue to increase culturally relevant community interactions by staff and participants such as: attending and participating in the National Day for Truth and Reconciliation event hosted by Katzie First Nation, staff and caregivers completing indigenous learning such as Living Well Together and San'yas modules, providing traditional meats to participants/caregivers such as rabbit, elk, bison and duck, incorporating traditional cultural recipes in our cooking program. We also had successful participation in our first annual tracking expedition, as well as engaging our participants with Earth Medicine Practitioner program that occurs twice a month and enhancing our sensory room by incorporating traditional animal pelts for the participants to touch and see.

In addition to introducing new cultural activities, we continue to facilitate opportunities from our Out-On-The-Land program such as berry picking, fishing, storytelling with Elders, nature walks, cedar brushing, smudges, drum making and connection to local indigenous communities.

## **Selected accomplishments...**

1. We successfully tailored our service delivery to participants and caregivers to meet COVID-19 safety guidelines. Our services were uninterrupted during the pandemic.
2. We expanded our services to add several hybrid staff-caregiver resources. These intensive support resource homes help the participants with complex mental health needs and allows these participants to safely live and engage in the community.

3. We were able to support several participants in accessing and completing substance community treatment programs. This has positively impacted their health and wellness thus reducing their substance misuse. We continue to support them with the caregiver model after their treatment to help them reach their individual goals.
4. We were able to strengthen and stabilize our management team by successfully recruiting a manager with credentials as a Registered Clinical Counsellor.
5. The development of our specialized transitional beds continues to be utilized at full capacity.

## Selected stories...<sup>2</sup>

### **Ezra's Story**

Ezra is a 26-year-old Indigenous male who was born in Yellowknife, Northwest Territories. As a child Ezra experienced trauma and abuse. As a result, Ezra was placed into foster care at the age of three and then subsequently as a youth lived in twenty different homes. Ezra was originally referred to PLEA in the U-Turn Program from Sahtu Health and Social Services in Deline, Northwest Territories. He transitioned into the PLEA FolkStone Program after he turned nineteen years of age to help meet his complex care as an adult.

Ezra is diagnosed with anxiety. A psychological assessment in 2012 reported a suspected diagnosis of Fetal Alcohol Spectrum Disorder. In addition, Ezra has had his own addiction issues with crack cocaine and methamphetamine. Ezra had a history of suicide ideation and a history of distrust; it takes him time to build trusting relationships.

Ezra has shown great potential while in the FolkStone program and has had several short-term employment opportunities. One major accomplishment for Ezra was his high school graduation from Suwa'lkh High School. Ezra is the first person in his family to graduate high school.

Between the years of 2018 and 2021 Ezra had challenges that he eventually overcame. During that time, he spent most of his time in the community using substances and engaging in criminal activity. There was a period of four months in the winter of 2019 where Ezra did not return home, but instead chose to live in a homeless camp. He also had several criminal charges and incurred several breaches of probation. However, during this time, Adult Support Workers and Service Coordinators kept in contact with Ezra and engaged him in the community. This engagement and allowing to meet Ezra on his terms, helped the foundations of developing a trusting relationship.

In October 2021, staff began to observe a change in Ezra. He attended Indigenous Court and created a healing plan for himself based on the Indigenous medicine wheel. Ezra showed great progress in areas that were previously a challenge for him. Ezra began cleaning his suite thoroughly on a weekly basis and practicing a regular hygiene routine. Ezra has been home every day and has not been a AWOL risk, Ezra has discovered his artistic talent through drawing/sketching and has expressed an interest in carving.

Ezra attended a 70-day drug and alcohol treatment program in January 2022. Even though he was discharged from the substance treatment program because he would not fully participate ( he stated he had difficulty sharing in group settings) , he did however complete 31 days of the program. Being discharged early from treatment did not seem to deter Ezra. He created several goals for himself and has already accomplished several of them. He accepted more 1:1 support from adult workers. In March, Ezra completed the steps to participate in the PLEA internal work program (Northwest Yard Care). He also completed the Blade Runners program, a three-week vocational program where he received certificates in: First Aid, WHMIS, forklift, health and safety training, fall protection, scaffold and ladder safety awareness, preventing heat stress, and backtalk awareness. Blade Runners will assist Ezra in finding employment. Ezra's goal is to work part-time in construction or in a warehouse.

Ezra has been referred to counselling. The goal is for Ezra to work through his childhood trauma and

substance use to continue his journey towards living a healthy lifestyle. Ezra is kind-hearted and well-liked by staff. It has been remarkable to see the change in him and being able to support him reach his potential and accomplish his goals.

## **Anton's Story**

Anton is a 27-year-old participant in the PLEA FolkStone Community Inclusion program. He has been receiving outreach community support hours from the FolkStone program since 2017 while living with a home share provider from another agency. Anton has a diagnosis of ADHD and Mild Developmental Disability. Some challenges for Anton include aggression, self-isolation and communicating effectively with others. The past few months have been very challenging for Anton due to his long-time care home breaking down after a traumatic experience, resulting in a move to a new home share provider home. Despite the added stress of starting over in a new home environment, Anton has made strides in his daily routine. Anton has been working successfully with his PLEA Community Support Worker on creating and following through with goals for personal hygiene, keeping his personal living space clean, and learning effective communication skills. Anton and his Support Worker have also been enjoying weekly bowling outings in the community! Anton has stated the transition into his new home has been difficult however the support he has received from PLEA and his community support worker is making it easier to adapt. Anton continues to show excitement on working on his life skills goals and increased community engagement to help reduce his isolation. His work with the PLEA community support worker in communicating effectively with others has helped with some of his aggression challenges. He has also been supported by his community support worker in helping with basic work skills. As a result of this support, Anton has put himself in the position to now be able to gain regular employment. We look forward to seeing and supporting the next steps of Anton's journey.

<sup>2</sup> Names and certain details have been altered to protect the privacy of the people we serve.

## **Biggest challenges...**

1. Continuing recruitment of quality Family Caregivers throughout the Lower Mainland to keep up with demand for homes that meet accessibility needs of individuals with mobility challenges.
2. Recruiting additional experienced staff to reinforce our qualified team.
3. Adapting our services to continue to safely meet the ongoing COVID-19 regulations while maintaining our high-quality service delivery.

## **Our team...learning undertaken**

We continue to practice our philosophy of person-centred, strength-based services and trauma informed practice. We continue to include training to our staff and caregivers such as: San'yas Indigenous Cultural Safety training, GNWT Living Well Together (Truth and Reconciliation series), Acquired Brain Injury training modules, Mental Health First Aid, MANDT training, LivingWorks Suicide Prevention training, Multisensory Snoezelen training, Class 4 Driver's License training, boundaries training, Trauma informed practice training, Self-awareness and wellness training, online Medication Assistance training, CLBC privacy training, Incident Report training, Quarterly Report training, Naloxone training, Self-employment skill building for person served workshop, SMART goal training, FoodSafe and Social inclusion & recovery training.

## Our team...staffing



## Next year's goals...

1. Realigning our services to ensure future opportunities with CLBC.
2. Partnering with post-secondary institutions to provide opportunities for practicum placements.
3. Recruiting and retaining diverse caregivers to meet our participants' needs.

## For more information...

Contact Jason deZara, Program Director, at 236-888-6127 or email [jdezara@plea.bc.ca](mailto:jdezara@plea.bc.ca)

## Appendix 1 – FolkStone By Funder<sup>3</sup>

### FolkStone – Government of the Northwest Territories

Profile	2021-22	2020-21	2019-20	2018-19	2017-18
# of cases	39	40	39	37	36
# of participants	39	40	39	37	36
% women	13	15	15	16	17
% men	87	85	82	81	81
% self-identified as transgender	0	0	3	3	3
% self-identified as Indigenous	100	100	100	100	100
Average age when cases were opened	24	24	23	23	23

### FolkStone – Community Living BC

Profile	2021-22	2020-21	2019-20	2018-19	2017-18
# of cases	40	41	40	36	31
# of participants	40	41	36	32	28
% women	23	27	28	28	36
% men	77	73	72	72	64
% self-identified as transgender	0	0	0	0	0
% self-identified as Indigenous	38	39	39	44	43
Average age when cases were opened	29	28	28	27	27

### FolkStone – Fraser Health Authority

Profile	2021-22	2020-21	2019-20	2018-19	2017-18
# of cases	38	41	37	36	38
# of participants	38	41	37	36	38
% women	16	12	16	8	11
% men	84	88	84	92	89
% self-identified as transgender	0	0	0	0	0
% self-identified as Indigenous	11	7	5	6	5
Average age when cases were opened	52	51	51	51	50

### FolkStone – Vancouver Coastal Health

Profile	2021-22	2020-21	2019-20	2018-19	2017-18
# of cases	27	27	27	20	27
# of participants	26	27	27	20	23
% women	19	22	26	30	30
% men	81	78	74	70	70
% self-identified as transgender	0	0	0	0	0
% self-identified as Indigenous	15	7	7	10	9
Average age when cases were opened	52	52	51	48	50

<sup>3</sup> # of cases may be higher than # of participants due to participants being re-referred or dual funded

# FolkStone – Interior Health Authority

<b>Profile</b>	<b>2021-22</b>	<b>2020-21</b>	<b>2019-20</b>
# of cases	8	6	5
# of participants	8	6	5
% women	0	17	20
% men	100	83	80
% self-identified as transgender	0	0	0
% self-identified as Indigenous	25	50	60
Average age when cases were opened	55	51	49