



COMMUNITY
SERVICES

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Waypoint Annual Program Report 2021-2022

About us

Waypoint is a unique four-month residential treatment program that serves young men aged 12 to 18 whose substance use is problematic. The young men accessing this program live with PLEA Family Caregivers in the community and participate in day, evening, and weekend programming at our treatment centre in Surrey.

Only one or two youth live in each home. The Family Caregivers are members of our treatment team who support and reinforce what the youth learn while they are at the centre. They are also trained to support youth through detox, stabilization, and the treatment process. We have provided these services since 2002. Since that time we have increased our overall program services by including Reintegration Support to provide more service post treatment as well as added cultural services during and post treatment.

Programming is tailored to each youth's individual strengths, needs and circumstances. It includes individual and group counseling, parent-teen mediation, teacher-supervised education, addiction awareness learning and practical life skills. A range of social, arts, cultural and recreational activities are integral components of the program and take place in the community. A School District #36 teacher (Surrey) delivers the educational component.

We follow a strengths-based and culturally sensitive approach to treatment and emphasize social learning and solution focused interventions that help participants to build the skills and competencies they need to live safe, fulfilling lives. Our model is gender-specific, addressing the learning styles and developmental needs of young men.

Waypoint's goals are to increase each youth's self-esteem, physical and mental health, educational and vocational functioning, and family connections, and decrease their substance use, criminal activities, and high-risk behaviours. This year we placed greater intentional focus on supporting successful transitions back to the community as well as support for housing post treatment.

For probation referrals, the youth must have a probation order that directs them to attend a full-time alcohol and drug treatment program. The order must be long enough to see them through the 4-month program. These 6 beds are funded by MCFD (Ministry of Children and Family Development) and are an alternative to custody. Access is province wide. Additional beds are available through private referrals from parents, social workers, community-based addiction counsellors and other professionals. Access is nationwide.

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Who we served...

Profile	2021-22	2020-21	2019-20	2018-19	2017-18	2016-17
# of youth	15	28	24	29	23	27
% self-identified as Indigenous	47%	50%	33%	34%	39%	23%
Average age when cases were opened	16.8	17	17	16	17	17
% of youth in MCFD care	20%	35.71%	17%	45%	35%	37%
% of youth who had spent time in custody	87%	82.14	88%	90%	70%	85%
Average # of days in program by discharged cases (N = number of discharged cases)	112.75 (N-12)	81.39 (N-23)	89 (N-17)	67 (N=27)	77 (N=20)	86 (N=24)
# of youth who successfully completed the program	12	16	12	12	10	15

The number of youth who successfully completed the program this year was at 80% which is an increase of 7% percent from the previous year which was 73%. Of the 15 youth we served this fiscal year one remains in the program and therefore not included in the completion statistics for this year. Our discharge rate was 13 %, discharges are either voluntary (youth decided that they want to leave the program) or involuntary (program or care team decide that the youth is not the right fit for the program). This year we had 2 voluntary and no involuntary discharges. Both participants who were discharged early transitioned safely back to their communities. Of significant note we had 13 fewer youth referred to the program this fiscal year.

The number of youth who self-identified as Indigenous continues to be consistent and was at 47% this year. We continue to provide culturally relevant program to the participants we serve.

The average age remained fairly consistent this year at 16.8 as to the year prior 17. The number of youth in care of MCFD was 20% which was a slight decrease. With youth in care, we were able to access additional supports for youth while in the program such as individual counselling, employment programs and this ensured wrap-around support to help many of our graduates attain independent living in either their home communities or in the community that they chose to reside in post treatment.

The number of youth who have spent time in custody increased slightly but has remained fairly consistent over the past few years. The trend also continued of more youth being released from custody and coming directly into the program. This reduces the risk of AWOLs, relapses and other risk factors associated with youth being in the community before their intake. With youth involved in the youth justice system we were also able to access additional support service such as ISSP and Youth Forensics supports.

Primary drugs of choice as reported by youth	2021-22	2020-21	2019-20	2018-19	2017-18	2016-17
Amphetamines	33.33	39.29%	21%	17%	22%	44%
Heroin and other opiates	13.33	7.14%	8%	10%	22%	7%
Cannabis	26.67	10.71%	21%	28%	9%	30%
Alcohol	6.67	25%	25%	17%	9%	0%
Cocaine		14.29%	17%	7%	13%	11%
Over the counter medications	13.33					
Benzodiazepines			8%			
Ecstasy/MDA/MMDA	6.67	3.57				
% Reporting a second drug of choice	100%	100%	100%	100%	91%	100%
% of youth reporting intravenous substance use	6.67%	17.86	8%	14%	13%	26%

Amphetamines was reported as the most frequent drug of choice by our participants again this year however there was a slight drop. Cannabis was our reported second most common substance and had a significant increase in its use and was up 16 percent. All youth reported a secondary drug of choice, and again this year the substance that was the most reported was cannabis. This may be connected to legalization as well as an older cohort. Most referral documents and the youth themselves report that their substance use is connected to mental health, anxiety, depression, trauma, and boredom. A substantial percentage of program participants have experimented with multiple substances and have use a variety of drugs or alcohol if available. Reported intravenous usage decreased 11 percent and could be connected to the ongoing concerns surrounding fentanyl.

How we did...service delivery

Measure	2021-22	2020-21	2019-20	2018-19	2017-18	2016-17
% bed utilization	64%	79.72%	85%	78%	72%	85%
# of youth who completed final assessments	8	12	12	7	7	13
# of youth reporting a decrease in substance abuse	8	12	11	6	6	13

Waypoint was at 64% for bed utilization for the fiscal year a 15 percent decrease from last year which could be due to the pandemic, as well as the continuing decline of youth in the youth justice system. We maintained all our existing caregivers for the year as well as added one additional respite caregiver with the capacity for two beds. This allowed some much-needed flexibility in the program as we have had the opportunity to provide some youth with single bed resources. Eight youth completed a Final Snap and there is a discrepancy of youth who completed the program and those who completed a Final Snap. Two youth left prior to completing the program and a Final Snap was not completed but they were given a completion by their YPO. An additional two youth are currently in a portion of our program and have not yet completed the Final SNAP. On the Final Snap all 8 youth reported a decrease in their substance abuse. This however would be consistent with just completing 4 months of treatment. At 6 months discharged follow up 8 youth were contacted, and all self-identify that their substance use continues to be better.

We had three youth attend Waypoint this year on a fee for service basis. One youth completed the program however the other two youth discharged voluntarily. All three identified as indigenous with an average age of 17.33. The drug of choice for these youth was Cannabis, Fentanyl and Opiates and all three identified as have a secondary drug of choice. Additionally, one youth identified as being an IV user. All three youth were in the care of MCFD and 2 had spent time in custody. The one youth who graduated the program has been provided on going reintegration support services and that will continue until he turns 19 in July 2022.

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

- i. Despite the continued trend of youth in the justice system declining, we would like to meet our contract deliverables by maintaining a utilization rate of 85% for the 2021-2022 fiscal periods.

We missed our contract deliverable for the year as we were able to achieve 64 % and cite two potential reasons for the miss: One was the continuation of Covid 19 pandemic which effected referrals as well as several potential intakes. The second was the Youth Justice numbers that continued to decline and therefore effect FTAP orders on youths' sentences. However, the number of youth who successfully completed increased by 7% and the program achieved 80% completion rate.

- ii. With low utilization rates this fiscal year, respite care has not caused as significant issue as in the past. As a way of ensuring the Family Caregivers are supported moving forward and with the hope that we will increase the number of participants in our program, we will continue to focus on the recruitment of both respite workers as well as respite family caregivers to ensure this issue does not arise again. To increase our program's capacity to serve more clients outside the FTAP mandated stream (fee for service and possibly health authority), we will also continue to focus our efforts on the recruitment of new Family Caregivers as well.

Due to the continued low utilization numbers this was less of an issue than anticipated. Our existing caregivers provide respite for each other with their available beds. We were able to secure one additional respite caregiver who did provide support when needed to the program.

- iii. We would like to seek an alternative source of funding to supplement the existing Youth Justice contract we currently hold. Obtaining some amount of funding through one or more health authorities would allow us to increase our service mandate outside of the FTAP requirement. This would allow us to provide more opportunities to more youth in our communities to receive the care and support they need to make changes to their problematic substance use.

We did not secure any permanent contracts through health authorities over the last year. We did however secure several Fee for Service opportunities as well as a pilot project with the Surrey School Board. The pilot was working in conjunction with the Surrey School Board to provide a safe support space to youth to further their education in a smaller ratio setting. The referred youth have identified substance use challenges.

Other selected accomplishments...

- i. Indigenous programming and reintegration work continues to work very well within the program. They continue to provide an increase in support to youth during the program and for transitions back to participants' home communities. Indigenous program works to connect to culture for our Indigenous clients as well as non-Indigenous clients. This programming has also increased elder support and strengthened our cultural curriculum. The reintegration worker supports clients with their goals and needs specifically related to transitioning back into their home community's post-discharge. This work allows us to remain connected to clients once they have left the program and support them in applying all their acquired skills out in the 'real world'. Due to Covid restrictions we have not been able to travel to home communities with clients which in past years has supported youth in setting up pro-social activities, re-organize their homes to decrease triggers, find housing and help them participate in meetings with professional supports.
- ii. Two youth who completed the Waypoint Program and moved to a Supported Recovery Waypoint Program and were able to continue to work on their substance goals by moving into a supported environment in the local community. We were able to provide additional support toward housing, employment, and families.
- iii. Provincially referrals to Full-Time Attendance Programs (FTAPs) are in decline. However, although Waypoint did not meet its contract requirement it was successful in achieving 64% in an ongoing pandemic. We believe this is a continued testament to the level of different components we offer including culture, reintegration, school, counselling, and theme. Staff were able to provide more intensive 1:1 support to meet the more complex needs of the clientele we are serving.

Selected story ...

Thomas's Story

Thomas came to the program late on a Friday on an emergency basis as his substance use and risk for overdose was extremely high and his support team was worried, he would not make it through the weekend. When Waypoint staff met Thomas' group home workers at the ferry to pick him up, they expressed they believed he had been using meth on the ferry ride over, and that he was very deep into his addiction. The first 72 hours he was placed on a ridged nonmedical detox in our caregiver home. Over the next couple of weeks as Thomas settled into Waypoint it was apparent that Thomas had lived a very street entrenched life with substance use struggles. He had some significant health challenges including dental and respiratory concerns, as well as kidney function issues. During his time in the program those health issues were addressed and eventually subsided. Thomas was ambivalent about treatment and did not believe he needed to be at Waypoint, (often going between stating that he can handle his substance use on his own and wanting to return to using). During Thomas's time in treatment as he became comfortable, he began to show some very strong personality traits. Thomas showed great resiliency and determination when he put his mind to

something and had an aptitude for mechanics/electronics. Thomas demonstrated these traits through disassembling and reassembling items such as speakers and stereos he had purchased at thrift stores. Thomas often had great insight during theme/drug awareness sessions and while he did struggle to explore ideas that challenged his current beliefs, he was still able to work with the team to build new life skills and deepen his understanding of substance use. Near the end of his treatment, Thomas expressed a desire to stay away from his home community and to move to the lower mainland. This decision coincided with a home visit where he was able to experience some of the challenges that he would experience should he return home. During his final few weeks in treatment, staff supported him in getting a phone, finding employment, and altering his transition plan. Thomas's transition plan was adjusted, and a plan was made for him to live in a PLEA caregiver home while he worked and saved money so he could live on his own after a couple months in supported living. Staff have since connected with Thomas who is reporting that he has stayed away from using substances, loves his job and his coworkers, and is working to coexist peacefully with his caregivers. Thomas has made huge strides forwards since his intake at Waypoint and will hopefully continue to do so while assisted by the reintegration program.

Biggest challenges...

- i. Our biggest challenge this reporting period continues to be utilization rates. We received a low number of referrals in the middle of the fiscal year due to Covid 19, a trend that happened across the province. There was also a low number of youth in the Youth Justice System
- ii. A continued challenge in this reporting period was the lack of respite caregivers and respite workers available to support our full-time family caregivers. For most of the fiscal year we did have one resources to offer adequate respite options for our full-time caregivers. Fortunately, with the additional caregiver it does provide some additional respite options.
- iii. We continue to have a higher number of youth over the past few years with significant, complex mental health issues. As Waypoint is structured as a group-based program, dynamics between peers can become challenging. Staff are finding that significant amounts of time are being spent working through group dynamics when the primary focus should be on the issues that brought each individual youth to the program in the first place. However, due to the lower numbers in the program, the staff were able to also provide intensive one-to-one support to youth who needed such assistance.

Our team...staffing



Our team...learning undertaken

Throughout this reporting period, the team at Waypoint engaged in a variety of training and educational sessions on the following topics: Naloxone Training, Mandt Training, Smart Recovery, Medication Assistance Training, FASD, Wellness, Harm Reduction, Youth Forensic Training, Cultural Awareness, Attachment & Trauma Informed Practice, Suicide Ideation & Prevention. In addition to sessions attended as a group, individuals within the team also participated in workshops and training sessions on their own. Some of the topics staff learned more about included Addictions and Mental Health, Trauma Informed Practice, Residential Schools, Decolonization, Drug Identification, Human Behaviour, Mental Health First Aid, Gender Pronouns, Self-Compassion, working with youth with Autism, Keeping Kids Safe Online, Seven Challenges, Privacy, Trauma Incident Reduction Training, Crisis & Trauma in Counselling, Cultural Diversity in Counselling, Interventions in Counselling, and Assessments in Counselling.

Our team...new relationships

Throughout the year we continued to solidify our relationships with various First Nations communities including Kwantlen First Nations, Semiahmoo First Nations, and Katzie First Nations. We have also had visits from Elders from the Musqueam, Matsqui First Nation and Semiahmoo First Nations. We continue to work collaboratively with our Probation Officer Liaison who supports our referral and screening processes, as well as continued consultation with Youth Forensics. We continue to have visits from Yankee 30 which includes a Liaison Probation Officer who works in a support car with an RCMP Liaison Officer in the Surrey area. Yankee 30 provides support to our program by working with our youth in a non-traditional way, encouraging them to develop a different experience with probation and police officers. We have maintained communication with the Addictions and Medical Teams at Burnaby Custody Centre and are able to ensure the transition from custody to our program is much smoother than in the past.

Next year's goals...

- i. Despite the continued trend of youth in the justice system declining, we would like to continue to strive to increase our utilization rate by being as flexible and creative in we can with respect to meeting the needs of the young people in our province. Our goal for the 2022-23 fiscal period is to increase our utilization rate to a minimum of 80% with a completion rate of 70 %. We will also continue to expand our ability to accept youth on bail which will allow more access to the program.
- ii. With low utilization rates this fiscal year, respite care has not caused as significant an issue as in the past. To ensure the Family Caregivers are supported moving forward and with the hope that we will increase the number of participants in our program, we will continue to focus on the recruitment of both respite workers as well as respite family caregivers to ensure this issue does not arise again. To increase our program's capacity to serve more clients outside the FTAP mandated stream (fee for service and possibly health authority), we will also continue to focus our efforts on the recruitment of new Family Caregivers as well.
- iii. We would like to seek an alternative source of funding to supplement the existing Youth Justice contract we currently hold. Obtaining some amount of funding through one or more health authorities would allow us to increase our service mandate outside of the FTAP requirement. This would allow us to provide more opportunities to more youth in our communities to receive the care and support they need to make changes to their problematic substance use.

iv. For more information...

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