



see what's possible...

FolkStone

Annual Program Report 2022-23

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 the scope of our service has expanded and now provides 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, forensic 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.

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).

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Charitable Registration
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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	2022-23	2021-22	2020-21	2019-20	2018-19	2017-18	2016-17
# of cases ¹	155	154	161	155	143	151	137
# of participants	153	153	161	151	139	139	133
% women	20	17	20	21	19	21	24
% men	79	83	80	78	80	78	75
% self-identified as transgender	1	0	0	1	1	1	1
% self-identified as Indigenous	43	42	42	46	42	39	35
Average age when cases were opened	38	39	39	38	37	39	40

The FolkStone program continued to help adult participants lead fulfilling lives in their chosen communities through our supportive outreach Caregiver and Home Share model. Our wrap around service model provides stability for individuals as well as positive outcomes for them. During the year, our model of care continued to provide our caregivers with greater resources and support, which in turn, provided housing stability and continuation of care stability for our participants.

This year was highlighted by the positive feedback we received for our innovative forensic-care service model. This model of care helps individuals with complex mental health forensic backgrounds integrate and live safely in the community. This unique and successful intensive staffed support resource to the home and participant has resulted in the individuals in this program having continued success living long term with their caregivers and integrating into the community. We foresee growth in this care model delivery in the next year due to the positive outcomes that have been demonstrated.

Another highlight for our participants and program, was working with our indigenous Knowledge Keeper. We enhanced current cultural programming and provided many indigenous and cultural opportunities for our participants. The Canoe Awakening ceremony bridged Indigenous cultural knowledge and learning across the agency that resulted in a special bonding moment for all that attended. As a result, participants indicated stronger connections to their culture, which is aligned with the satisfaction survey results as well as witnessing statements.

The Fraser Health Acquired Brain Injury Transition Bed program was another highlight of the past year. The program supported many individuals throughout the year. It provided them with a resource for short-term supportive care and assessment that gave them outcomes to help them successfully transition to a more independent and long-term placement. This partnership between Fraser Health and PLEA to support individuals for assessment and transition will continue into future years.

The number of participants we served remains consistent with last year. Participants' feedback on overall satisfaction and impact remains very high. This is consistent with our stakeholders' feedback that the FolkStone program has a very positive impact for those we serve. These outcomes are based on the 2022 satisfaction survey results.

We use a person-centered, strength-based, and trauma-informed model that helps participants reach their full

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

potential. Our program continues to produce positive outcomes that meet all our stakeholders' contractual requirements. This supports our continued positive working relationship with our stakeholders and caregivers.

We recognize the rights of our participants and our staff to provide an environment without discrimination. Our staff are trained 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, services, and outcomes.

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

1. *Realigning our services to ensure future opportunities with CLBC.*

We aligned our service model with CLBC contracts to match funding guide templates. We developed a Home Share Coordinator manual to ensure that our service delivery is consistent with CLBC mandates. This manual outlines the service required to meet CLBC contracts as well as providing support and care for our participants to live fulfilling lives in their communities.

The outcome of this alignment allows for future growth and services to Community Living BC. This allows the FolkStone program to continue to provide safe and supportive housing, community integration, and life skills development for referred participants.

During this re-alignment, we successfully maintained our Home Share Providers and secured continuity of care for our participants.

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

This year, we partnered with Douglas College's Psychiatric Nursing program. This partnership introduced two practicum students to the participants of the FolkStone program. These students supported participants with recreational and therapeutic programs, psychosocial rehabilitation skills, medication reviews, and accessing resources in the communities. The outcome of the practicum placement was successful for the students, participants, and programs. Douglas College and FolkStone have agreed to continue this relationship on an ongoing basis.

In addition, we provided practicum opportunities to two Music Therapy students from Capilano University. These students provided services to our participants involved in the Therapeutic Recreation and Life Skills program. These students provided music as a therapeutic tool for our participants with issues related to mental health, addictions, adverse childhood experiences and trauma, domestic violence, as well as creative arts, insight and self-expression, and related areas. Our participants attended weekly and expressed that it was a positive experience.

3. *Recruiting and retaining diverse caregivers to meet our participants needs.*

The FolkStone program partnered in a joint venture with our Communications and Development team, as well as our Community Assessment Team to assist with a Family Caregiver recruitment campaign. As a result of this campaign, new Family Caregivers were recruited to meet the needs of our current participants and increasing referrals from our stakeholders. We jointly attended several community events, continued to have bi-yearly caregiver information sessions, and used various modes of advertising throughout the year.

As a result, we increased the number of Family Caregivers, and were able to have a larger diversified pool of Family Caregivers who were able to accommodate our participants' unique needs, and able to meet the needs of our stakeholders and referred participants. The diversity of caregivers included homes with wheelchair accessibility, nurse and healthcare professionals, specific multilingual speakers, and cultural diversity which met our participants' and stakeholders' needs. As a result, participants were able to live in their chosen communities have stable long term housing options and receive the care they required.

Selected accomplishments...

1. WorkSafeBC's Personal Optional Protection insurance was introduced and implemented with all our Family Caregivers and Home Share Providers. As independent contractors, this insurance provides them with appropriate protection as well as protecting the agency.
2. The program was successful in renewing a 5-year contract with the Government of Northwest Territories (GNWT). This contract provides health and social service options for the GNWT and its population to access PLEA services for treatment, bio-psychosocial development, mental health services, life-skill programming, therapeutic services, health access and recreational opportunities. The FolkStone program helps lay a foundation of stabilization services with the goal of returning to the participants home community.
3. Our service delivery model for Forensic funded individuals continued to receive very positive feedback which allows for future growth in the program.
4. Satisfaction survey results from 2022 for participants, family caregivers, and stakeholders showed high levels of satisfaction as well as positive impact of our programming to participants' lives. This corresponds with participants stating that they are having better outcomes in relation to achieving their goals with the program support they are receiving.
5. Increased mental health housing services to Vancouver Coastal Health
6. Hosting the Canoe Awakening Ceremony that provided indigenous cultural learning across the agency.
7. Post Covid resumption of large group events and Caregiver events after 3-year absence.

Selected stories...²

Eric's Story

Eric is a 28-year-old who identifies as Two Spirit. Eric was referred to the PLEA Folkstone Program by Vancouver Aboriginal Child and Family Services in January of 2014. Eric became a Participant of Community Living of British Columbia (CLBC) when he aged out of MCFD. Eric transitioned into his FolkStone family care home from his foster home where he had lived for the past 16 years, after he was placed into foster care. Many of Eric's family members are residential school survivors which contributed to generational trauma in the family. Eric's presenting diagnoses when he came to FolkStone were Fetal Alcohol Syndrome and Mild Developmental Disability. When entering the program Eric stated that he strongly connects and relates to his Indigenous culture, his birth mother, and his three younger brothers.

Upon entry to the FolkStone Program, Eric faced many challenges such as substance use, personal hygiene concerns, creating healthy boundaries, exploitation risk and support with budgeting and finances. Eric required guidance and structure in his daily living and initially was reluctant to accept support from FolkStone staff. FolkStone staff continued to build rapport, trust and relationship while making themselves available for support. As Eric's time in the FolkStone program progressed, he slowly became more open to receiving support from his FolkStone care team. Thus, he began to make significant improvements with his barriers. He was provided home-based supports by his family caregivers and community-based supports by his support workers.

In 2017 because of improving outcomes and skill development that he acquired while in FolkStone, Eric decided he was ready to live independently in the community with his mother and his three brothers. He transitioned out of the FolkStone Home Share Program and entered the FolkStone Community Inclusion Program, thus receiving continuity of care while he became more independent. With support and guidance from FolkStone staff, Eric completed the HAVE Culinary Program and had gained part-time employment with the Peer Employment Program. He has maintained this employment as of today. Eric had also decided to join his mother in sobriety from alcohol and illicit substances and continues to choose sobriety. Eric plays a key role in caretaking his family's home and the family in general by preparing meals, grocery shopping and house cleaning. Eric spends most of his time with family and enjoys drumming and singing traditional music during spare time.

During Eric's time in the FolkStone Program, Eric joined many group activities and consistently utilized community support hours provided by his support workers. Eric has expressed to his support staff at FolkStone that he was grateful for the help he received while in the FolkStone Program and felt the support provided greatly contributed to his current happiness, well-being, and success.

Peter's Story

In the fall of 2021, Peter, a 60-year-old male, suffered a cerebral stroke resulting in an Acquired Brain Injury while living alone in his trailer located in a rural area of BC. Following an acute hospital stay and a brief time on a rehab unit, he was referred to Folkstone's Transitional Bed program. He was admitted in early 2022 to FolkStone.

Peter did not have an easy life. He had struggled on and off with substance and alcohol use for many years and was involved in the criminal justice system. Due to this, it was difficult for him to maintain employment and personal support systems prior to his injury. While Peter was in hospital, his trailer was vandalized, and all his personal belongings were stolen. He came to the Folkstone program with nothing but the clothes on his back.

Peter's acquired brain injury impacted many areas of his life and everyday functioning, including memory impairment, aphasia (difficulty comprehending language or forming words), decreased mobility, left-sided weakness, difficulties with planning and carrying out complex tasks and changes to mood. Despite these challenges, Peter was resilient and determined to continue living the life he wanted. He accomplished many milestones with the assistance of his caregivers, services coordinator, and adult support workers. Peter worked on a variety of living skills, such as grocery shopping, cooking simple meals for himself, banking, and budgeting. He also worked hard with his rehab staff comprised of a speech therapist, occupational therapist, and physiotherapist. Peter was able to improve his speech and improve motor function in his left arm and hand. Peter re-learned how to ride a bike to improve his mobility and access to the community. Peter began to get back into drawing and wood burning art, some of his passions he thought he would never be able to do again after his stroke. He regularly attended FolkStone's ManKind and Out on the Land programs, building friendships with peers and feeding his love of being outdoors and connecting to nature. Peter was also able to re-connect with his family and identify that his goal was to live independently in a community close to family supports.

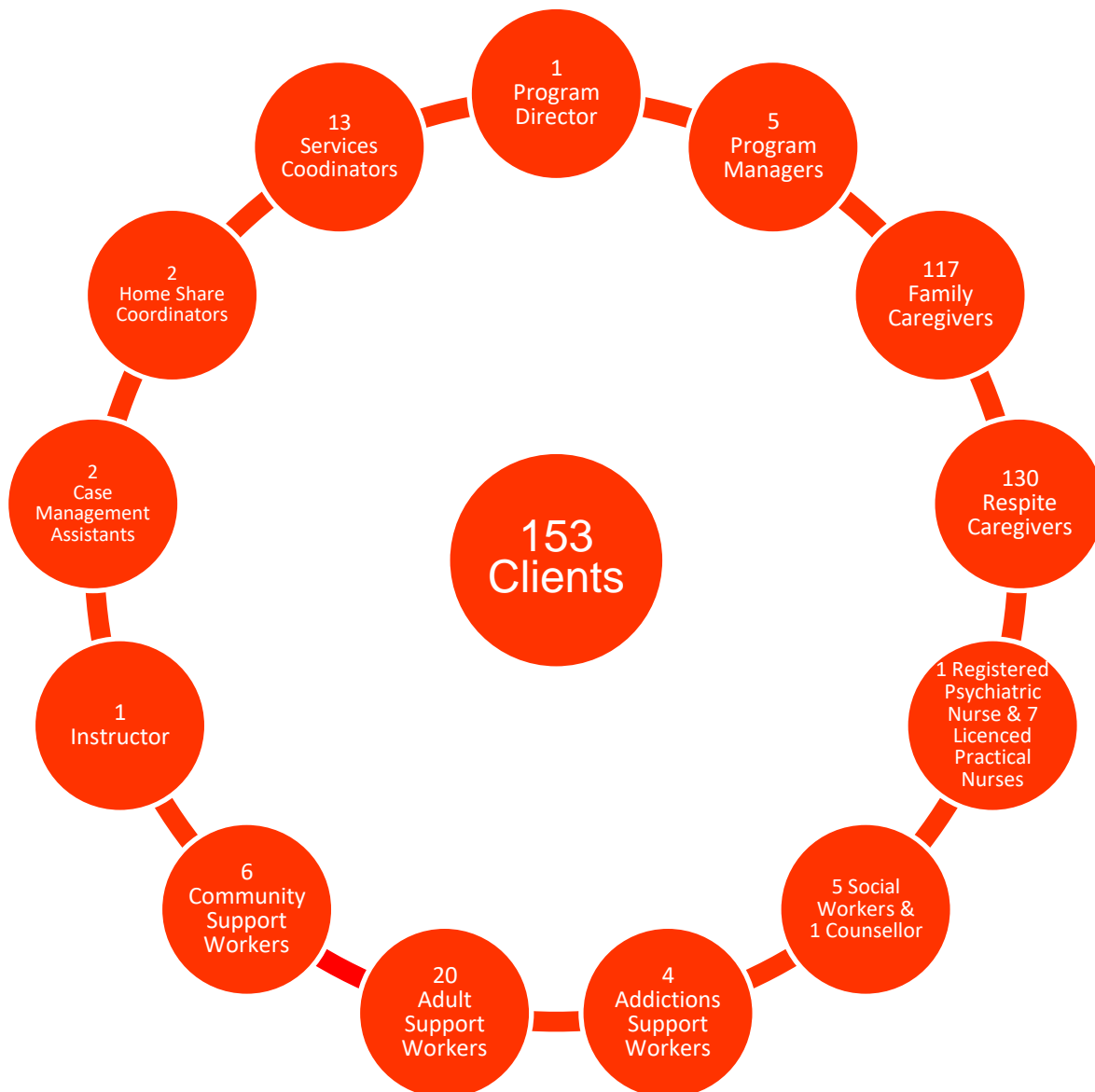
Because of Peter's resiliency, determination, and drive to "try" he was able to successfully transition out of the program to live in an apartment independently in the community of his choice, close to family supports. Upon exiting the program, Peter showed his appreciation for his caregivers by gifting them a beautiful piece of wood art he made as a way for them to remember him. Peter continues to stay connected with the caregivers and adult support workers with the occasional phone call and has said he "appreciates all we do, thank you". Peter's story highlights that with the proper support and persistence, living a rich and meaningful life is possible again, even when presented with some of life's most challenging obstacles.

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

Biggest challenges...

1. Ensuring our Family Caregivers are adequately covered by WorkSafeBC Personal Optional Protection insurance and the extra cost associated with the coverage while retaining them as independent contractors.
2. Recruitment of diverse Family Caregivers/Home Share Providers throughout the Lower Mainland.
3. Aligning our CLBC contracts to the CLBC funding guide templates. Adjusting to provide delivery of services for CLBC participants that is not as robust compared to other funders and the traditional PLEA home share model.

Our team...staffing



Our team...learning undertaken.

The past year has seen increasing collaboration amongst the FolkStone individual teams and the agency's other programs, including representation on each of PLEA's committees. The FolkStone program partners with other PLEA services such as counselling, addiction support, CAT, Communication & Development team as well as external partners. We continue to practice our philosophy of person-centered, strength-based services and trauma informed practice. Our trainings for staff focused on indigenous cultural competencies, goal setting as well as our continued healthcare-focused trainings. Our trainings for Family Caregivers included indigenous cultural competencies, de-escalation, case notes and assessment trainings. These trainings have supported the high satisfaction rates and positive outcomes for our participants.

Next year's goals...

1. To participate in the 2023 Pulling Together Canoe Journey for participants to celebrate indigenous culture.
2. To expand our Forensic referrals and placements to safely transition participants from institutional care.
3. To negotiate increases for Family Caregivers per diem rates to match the cost of living.
4. Successful transition of program Leadership team.

For more information...

Contact Jason deZara, Program Director, at 236-888-6127 or email jdezara@plea.bc.ca

Appendix 1 – FolkStone by Funder³

FolkStone – Government of the Northwest Territories

Profile	2022-23	2021-22	2020-21	2019-20	2018-19	2017-18
# of cases	40	39	40	39	37	36
# of participants	40	39	40	39	37	36
% women	13	13	15	15	16	17
% men	82	87	85	82	81	81
% self-identified as transgender	5	0	0	3	3	3
% self-identified as Indigenous	100	100	100	100	100	100
Average age when cases were opened	25	24	24	23	23	23

FolkStone – Community Living BC

Profile	2022-23	2021-22	2020-21	2019-20	2018-19	2017-18
# of cases	40	40	41	40	36	31
# of participants	38	40	41	36	32	28
% women	21	23	27	28	28	36
% men	79	77	73	72	72	64
% self-identified as transgender	0	0	0	0	0	0
% self-identified as Indigenous	42	38	39	39	44	43
Average age when cases were opened	28	29	28	28	27	27

FolkStone – Fraser Health Authority

Profile	2022-23	2021-22	2020-21	2019-20	2018-19	2017-18
# of cases	41	38	41	37	36	38
# of participants	41	38	41	37	36	38
% women	27	16	12	16	8	11
% men	73	84	88	84	92	89
% self-identified as transgender	0	0	0	0	0	0
% self-identified as Indigenous	7	11	7	5	6	5
Average age when cases were opened	51	52	51	51	51	50

FolkStone – Vancouver Coastal Health

Profile	2022-23	2021-22	2020-21	2019-20	2018-19	2017-18
# of cases	26	27	27	27	20	27
# of participants	26	26	27	27	20	23
% women	19	19	22	26	30	30
% men	81	81	78	74	70	70
% self-identified as transgender	0	0	0	0	0	0
% self-identified as Indigenous	19	15	7	7	10	9
Average age when cases were opened	48	52	52	51	48	50

³ # of cases may be higher than # of participants due to participants being re-referred or dual funded.

FolkStone – Interior Health Authority

Profile	2022-23	2021-22	2020-21	2019-20
# of cases	8	8	6	5
# of participants	8	8	6	5
% women	12	0	17	20
% men	88	100	83	80
% self-identified as transgender	0	0	0	0
% self-identified as Indigenous	25	25	50	60
Average age when cases were opened	56	55	51	49