

BLUEWATER

FAMILY SUPPORT
SERVICES INC.



FIRST

Family-based, Individualized, Responsive, Safe, and Trauma-sensitive

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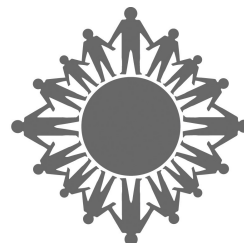
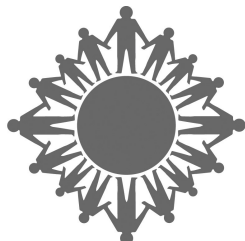
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2011

THE FIRST PROGRAM

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Bluewater Family Support Services Inc., (hereinafter known as Bluewater), opened to provide care in 1982. Bluewater is a network of foster family-based intensive support homes located in both the rural and urban areas of southwestern Ontario. Licensed by the Ministry of Community and Social Services, Bluewater serves a co-ed population of children and youth ranging in age from newborn to eighteen years.

The mission of Bluewater Family Support Services Inc. is to offer to the child welfare community of southwestern Ontario a foster care program that does not eject children from the program except by an appropriate reunification with natural family, graduation to independence, an order of the guardian or an order of the Court.

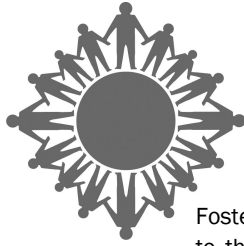
INTENSIVE SUPPORT PHILOSOPHY

Through trained Intensive Support Families, Bluewater provides family-based, individualized, responsive, safe, and trauma-sensitive (FIRST) care for troubled children. At Bluewater, there is an uncommon commitment from staff and Intensive Support Parents to caring for troubled children and youth in family homes: while family may have torn them apart, we believe only family can put them back together.

Bluewater children often display evidence of a serious emotional disturbance (SED) and/or remarkably concerning behaviours. They often have problems functioning and struggle to face the significant family issues that have resulted in their placement outside the home, (often in multiple foster homes and residential treatment prior to the referral to Bluewater). They are frequently young people with impaired attachments to others, affect regulation and modulation challenges, and beleaguered, easily exhausted, social competencies.

Bluewater Family Support Services is an intensive support program offering a unique philosophy and methodology to private foster care with troubled children. At Bluewater, foster families are families, too. In some ways, Intensive Support foster families are unique: not every family could invite a troubled child to be part of their home and family life. However, in many other ways they are no different from other families. The life of an Intensive Support Parent often looks like everyone else's (with some "exciting" exceptions). We know one thing that makes Intensive Support Parents unique: they all share a deeply held conviction to give something back.

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Foster families are families. How a family is structured and organized is important. Attending to the structure of families enables Bluewater to be respectful of the unique strengths of each family. Bluewater's trauma-sensitive program attempts to maximize those family strengths to promote positive change for children.

Just as importantly, Bluewater family support workers know how families live, especially Bluewater families. Bluewater's FIRST program is supervision intensive. Bluewater staff are engaged with the families they supervise. To Bluewater families, we hope the message is, "we will help you stay in charge of your family when the turmoil of a troubled child in your home erupts."

At Bluewater, special needs children occupy a position within the Bluewater Intensive Support Family that may be unique to their experience - the position of a child within the family. An important, although often overlooked, dimension of healthy psychosocial emotional maturity is knowing where you "fit"; experiencing that "fit" within a family is an important element in uncovering that knowledge. To paraphrase others, we believe children are normal in normal situations and "crazy" in crazy situations! It is our responsibility to try to create as normal a family environment as possible.

Bluewater provides intensive support to children in a family setting. These children need families with parents who understand the underlying causes of troublesome behaviour and have skills to help children manage their behaviour. They need parents who understand this is an opportunity to help children acquire and develop the skills they need to manage their lives more effectively. They need parents who are skilled at joining with children who are working to overcome their struggles and who can craft the healing power of the family in a planned way every day. They need parents trained, supervised, and supported by the family support staff of Bluewater.

Bluewater believes a child's well-being is inseparable from a family's well-being. We believe that which enhances the well-being of the family will enhance the well-being of a child. Consequently, Bluewater endeavors to provide ongoing, regular, thorough support to Intensive Support Parents through a curriculum of bi-weekly education seminars, a minimum of bi-weekly in-house supervision and support, with frequent telephone contact and special community events (i.e. a Christmas party, picnics, etc.). Shared experiences with others with similar difficulties, enhances the well-being of both the Intensive Support Family and the child.

Finally, it is not enough for the Intensive Support Parents simply to have developed expertise in the care and support of children with special needs; their well-being and the well-being of their family also require attention. The challenge to the staff of Bluewater is to help Intensive Support Families develop their skills in ways that are consistent with their own roles, values, and norms. Sensitivity and knowledge of the Intensive Support Family's development through time is essential to the success of this endeavour. Bluewater strives to develop, practice, and deliver policies and practices that do not harm the integral structures of the Intensive Support Family.

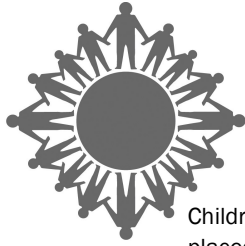
Natural Family

Bluewater encourages the involvement of the child's natural family in the intensive support process for the child. The nature and degree of family involvement varies depending on the wishes of the child and his/her family, the recommendations of the Placing Agency, the Courts, and the observations and experience of the Intensive Support Parents and Bluewater family support workers. The Foster Plan of Care addresses the ways through which all parties support that relationship.

"Of children seen by Children's Aid Societies, 62% had some evidence of emotional and mental disturbance, 48% had pervasive behavioural problems, 81% had limited acceptance by caregivers, 69% of caregivers showed evidence of mental health problems and only 32% of caregivers had realistic expectations of their children".

SWR An Ideal Model - Highly Specialized Services and Supports — Ninth Draft Final Report July 09/03

Program Description



Children who demonstrate poor self control throughout a wide range of behaviours are placed with Bluewater. Intensive Support Parents, using a specific set of tools, begin the task of improving a child's ability to exercise self control and as they do so, they are developing and strengthening the child's attachment; as the attachment develops, the child grows more secure and is able, from that secure base, to develop and master a range of social competencies that were not previously possible.

In our Intensive Support Family homes, there are four key elements to Bluewater's FIRST program. Not in any order, these elements are invitational language (non-threatening, non-coercive), regulation (breathing, colouring), journaling (attunement), and positive reinforcement (behaviour you want to see).

A further key element, linked to the intensive support home but not provided there, is the therapy itself. The journaling within the home is typically about day-to-day issues and behaviours and does not diminish the need for the child's story to be told. Because the intensive support home needs to be experienced as a place of safety, Bluewater has a CBT therapist on staff to whom the child's narrative can be told and kept out of the home.

Another cornerstone of the Bluewater program is the development and mastery of the vast array of social competencies we expect children to master before emancipation. While discussing delinquent youth, Chamberlain (1998) writes, "the child's abrasive style of interaction also results in rejection by significant adults, such as teachers, coaches and scout leaders. *This means the child does not benefit from many of the normal socializing experiences, such as participating in games, clubs or other group activities*" (Italics mine). Much the same can be said of many of the youngsters who come to Bluewater: their behaviours are frequently such that they are 'last to be picked' or excluded from many of the activities that contribute to normal socialization. Bluewater, through the use of community partners, (i.e. YMCA) endeavours to provide those missing experiences for youth. Typically, this service is not provided in the foster home.

METHODOLOGY: Milieu

Children belong in families. Bluewater values giving, even the most troubled child, the healing benefits of a caring family in a normal community. Bluewater's sensitivity to developmental trauma, allows Bluewater to create plans for children that are individualized and remarkably flexible. This individualization and flexibility, afforded by a family-based setting, enables Bluewater to effectively serve children who bring many different special needs, (i.e. developmental trauma, emotional disorders, PTSD, medically complex, dual diagnosis, developmental delays, PDD, etc) to placement.

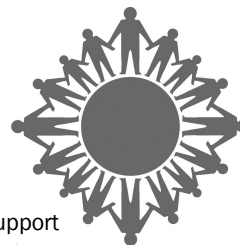
Children placed with Bluewater are children with special needs, requiring specialized care and services. No two children are alike; all Bluewater children are unique.

Bluewater staff help Intensive Support Parents understand the importance of parental control and supervision and the need for order, clarity, and organization within families to promote regulation. The Bluewater FIRST program also helps Intensive Support Families emphasize the development of practical skills, success and failure, and the need for individual autonomy (promoting development of social competencies).

In contrast to traditional foster parents, the Intensive Support Parent is the primary agent of change for the child-in-care. To paraphrase Dr. B. Perry, "Its all about relationship!" "Relationship is everything!" With staff support, Bluewater expects Intensive Support Parents to become intimately attuned to the child-in-care in their home and to use that relationship to effect change.

"Changing the life course of children with a history of persistent antisocial adjustment problems requires the implementation of a coordinated set of interventions in both the home and school settings. By the time antisocial children begin attending school, they often have inadequate social skills, academic problems in the classroom, and difficulty getting along with peers on the playground. Their early life experiences have laid the groundwork for a high rate of noncompliance and an abrasive style of interpersonal interaction. These youngsters have learned to use "high-amplitude coercive strategies to maximize short term gains." In short order these behaviours lead to rejection by parents, peers, and teachers; these children miss out on many of the normal opportunities for socialization as a result."
-Dr. Patricia Chamberlain, "Family Connections," Eugene: North West Media, 1998.

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The Director of Services and the Bluewater family support worker ensure Intensive Support Parents have the training, support, and supervision necessary to succeed in bringing about gains for the child. The Bluewater family support worker plans, coordinates and monitors the child, and regularly reviews the skills and needs of the Intensive Support Family.

While they are the primary agents of change, Bluewater Intensive Support Parents are not the only individuals who affect the child's growth, progress, and success. They act in close partnership with others on behalf of the child placed in their home. Based on specific individual needs, Bluewater children may engage their Bluewater family support worker, other mental health professionals, church and community mentors, special education professionals and/or tutors, etc. for additional supportive services.

METHODOLOGY: Matching

Post and Forbes (2006) write, "All negative behaviour arises from an unconscious, *fear-based state of stress*" (italics added). Some families are very good at managing fear-based behaviours; some families are very good at managing high levels of stress. Some families are talented problem-solvers; some families possess the gift of regulation. The measure of the child's history (the fear-based state of stress) informs our understanding of the child's relationships, interactions, decision-making, and problem solving skills. Bluewater matches the child's history and presentation with the appropriate, strength-based family environment

Family structure, family organization, and family relationship diversity classify Bluewater Intensive Support Families. The process of placement is matching a child's needs with the Intensive Support Family most able to maximize the child's potential by providing the most appropriate environment. In addition, consideration of the experiences within the home, the intensity of care required, personality issues, and other issues unique to the child influence the matching process.

In matching, the Intensive Support Parents are part of the "team" determining suitability for placement. Intensive Support Families may utilize day visits or overnight, weekend pre-placements to aid their decision-making. With this knowledge and with a clear understanding of the needs of the child, Bluewater makes the most appropriate match (versus the least inappropriate) for that child.

Finally, at Bluewater, all the systems involved with the child (the Intensive Support Parents, the Bluewater family support worker, the guardian, etc) work collaboratively to create a caring, safe and permanent home for the child (within the context of the guardian's Plan of Care for the child's family).

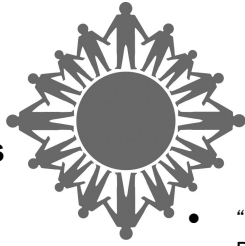
The "narrative approach" highlights the importance of building positive self-esteem through a profound insistence on a client-focused outlook. The approach fits nicely with families using the life book to develop therapeutic conversations. The "narrative approach" extends an array of therapeutic interventions into family life that enable Intensive Support Parents to help troubled youngsters rediscover and develop personal resources that seemingly had been lost to them because of their trauma. Similarly, the techniques of 'externalization' and "re-authoring" enable Intensive Support Parents to position themselves as allies for children, a relationship that is frequently quite alien to the youngster's prior experience.

METHODOLOGY: Modalities

Bluewater has a long history within the foster family-based treatment community. While Bluewater believes in the primacy and power of the family to promote and generate health, Bluewater teaches and utilizes a number of therapeutic tools to empower Intensive Support Parents in their work with children:

- "Parenting Skills Training: the ABC Model" developed by People Places, Inc. is a well-researched, effective training model for behaviour management;
- The "narrative approach" offers Intensive Support Parents a conversational and naturalistic model for therapeutic dialogue with children;

Notes / Questions



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- “Understanding Traumatized and Maltreated Children” features the work of Bruce D. Perry, M.D., Ph.D. presenting comprehensive information on the primary problems facing maltreated children and dynamic approaches for effective care-giving for professionals and lay people alike;
- child care;
- psychological assessment;
- psychiatric evaluation;
- art and play therapy; and
- cognitive behaviour therapy.

METHODOLOGY: Goals

Bluewater believes in "normalization": attempting to integrate the child as much as possible into the family and community. Consequently, expectations of the child are consistent with the Intensive Support Family's norms while remaining appropriate to the child's abilities. In addition, Bluewater encourages a strong life skills focus within each home.

Bluewater believes improved regulation is a desirable outcome. Post and Forbes (2006) write, "Regulation is the ability to experience and maintain stress within one's window of tolerance." Trauma significantly distorts the ability to experience and maintain stress. As an outcome, Bluewater strives to ensure the window of tolerance for each child-in-care has greater range.

Bluewater does not operate a specialized school program; children attend local, community school programs. (On rare occasions, Bluewater purchases specialized school services from other facilities.) Programs are usually available within the community school system to facilitate an appropriate placement.

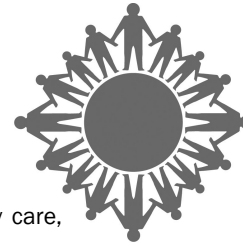
Bluewater, in cooperation and with the financial support of the Placing Agency, has occasionally supplemented the school program with extra tutorial time to assist children in areas of academic delays. The Intensive Support Family and the Bluewater family support worker use open lines of communication to maintain a close working relationship with the school staff.

Children need to live in a permanent, safe home. Increased likelihood of reunification, fewer behaviour problems, shorter stays in care as well as progressively increasing stability over time are outcomes associated with a consistent home setting for children in foster family-based care.

Because a consistent setting is so important, Bluewater's goal is to offer a program which makes an unconditional commitment to the child. It is our goal that Intensive Support Parents will make an unconditional commitment as well. In the event that a particular placement does not work, it is our hope the child will remain in Bluewater and, with approval and support of the guardian, move into the home of another suitable Intensive Support Family.

It is our hope that "children will not be discharged from Bluewater due to poor functioning or troublesome behaviour." Bluewater hopes every child's discharge is to a less restrictive

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setting: regular foster care, transitional living program/apartment, extended family care, biological family, or adoption.

CHILDREN SERVED

Bluewater accepts for placement a broad spectrum of children, including those with aggressive, acting-out behaviours, impaired relational skills, attachment difficulties, maladaptive coping patterns, significant development/ maturational delays and deep-seated emotional/ psychological problems. Within the FIRST program, Bluewater accepts children for placement who have experienced significant traumatic events and children who are developmental trauma survivors.

A small percentage of the population is mentally or physically challenged.

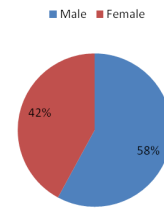
Bluewater serves a co-ed population with an approximate breakdown of 58-42% male-female. The majority of children in placement with Bluewater are wards of a Children's Aid Society.

REFERRAL AND ADMISSION

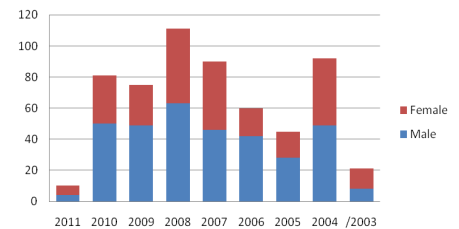
Bluewater requires written background information on the child from the Placing Agency to make informed decisions regarding the child's appropriateness for the program and for appropriate placement decisions.

Agencies are encouraged to call Bluewater prior to initiating a written referral, to allow for a preliminary screening. After an initial determination of placement possibilities, Placing Agencies send a referral package. Upon receipt of this, a further evaluation is undertaken regarding placement possibilities, and a preliminary visit may be set up with the child and his/her worker to obtain a further reading on the child's needs. The format and duration of the pre-placement visit(s) may vary depending on circumstances, time available, agency preferences, and needs of the child. When this is completed, Bluewater and the Placing Agency will set a placement date.

Gender on Referral



Gender on Referral



INTENSITY OF CARE CRITERIA

Any three of the following:

- a. Impaired functioning;
- b. History of residential instability (3 or more moves within 24 months);
- c. Functioning problems at home, school, or in the community;
(Problems include a history of at least one of the following: ADD/ADHD, persistent neglect, abandonment, sexual assault, physical assault, running away, fire setting, self-injury, delinquency, physical aggression, school failure, sexual offenses.)
- d. Involved in two or more systems: mental health, juvenile justice, special education, developmental services, and/or child welfare;
- e. A child has a DSM III / IV diagnosis; or
- f. A child is developmentally delayed.

- Ott, L., Ph.D. and Rautkis, M.B., Ph.D. "PRYDE Practice Model". Unpublished correspondence, 2003.

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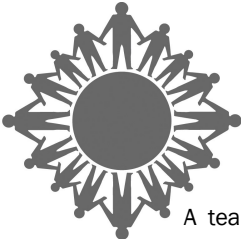
DOCUMENTATION

Within thirty days of placement, there is a Foster Plan of Care for

each child. The plan looks at both long term and short term goals and includes specific strategies. The Intensive Support Family continuously monitors the child's progress. Written summaries and renewed plans are prepared regularly. Bluewater sends copies of all reports to the Placing Agency.

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Notes / Questions



A team that includes, at minimum, the child, the guardian, Intensive Support Parents and Bluewater staff, develops the individual Foster Plan of Care. Additionally, other professionals and informal supports to the child may participate in planning, implementation, and reviewing the plan.

Bluewater's Foster Plan of Care is strength-based, and includes cultural preferences and other interests expressed by the child. Plans of care include needed supports and services that are outside of the Intensive Support Family setting (e.g. individual therapy, respite, and educational support) and change to reflect the changing needs of the child.

Finally, the implementation of the Foster Plan of Care is by an Intensive Support Parent in a home - a "normal" environment with additional supports.

Intensive Support Parents, for each child in their care, document a variety of issues as they affect the child, from administrative concerns such as payment of allowances, medical / dental visits, to intensive support issues, unusual events and Serious Occurrences.

REFERRAL INFORMATION
SOCIAL HISTORY
AGENCY REPORTS
MEDICAL EVALUATIONS
PSYCHIATRIC EVALUATIONS
PSYCHOLOGICAL EVALUATIONS
EDUCATIONAL EVALUATIONS
CHILD PERSONAL DETAILS:
STRENGTHS
INTERESTS
HOBBIES
HABITS
ROUTINES

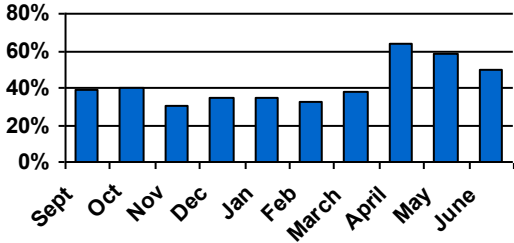
PROFESSIONAL DEVELOPMENT

Bluewater typically has between thirty and forty Intensive Support Families. Using interviews, personal, family- and self-evaluation forms, and collateral contact (references) in the determination of suitability, Bluewater staff screen applicants for Intensive Support Parents very carefully. Frequently, once approved as Intensive Support Parents, new families provide respite services during which time Bluewater assesses their motivation and native skills responding to emotionally troubled children.

Once approved as Intensive Support Parents, Bluewater provides an eight-hour orientation / training program to acquaint them with Bluewater's program and philosophy. These sessions provide an opportunity to acquaint new Intensive Support Parents with the administrative policies, procedures, and practices (roles, responsibilities, expectations, etc.) of Bluewater and the Ministry of Community and Social Services. Equally important, these sessions provide beginning Intensive Support Parents with further written information to enhance and facilitate their functioning as Intensive Support Parents.

An important part of being an effective Intensive Support Parent is continual personal growth and professional skill development. To this end, Bluewater provides bi-weekly training seminars for Intensive Support Parents and other Bluewater staff.

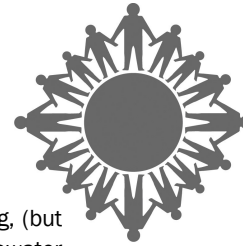
ATTENDANCE
(Bi-weekly Seminars)



seminars for Intensive Support Parents and other Bluewater staff. The focus of these seminars is educating, developing, and enhancing parenting knowledge and professional skills base, encouraging personal growth, and giving mutual support within a "community" context.

Bluewater recognizes that personal and professional growth and development happens at various

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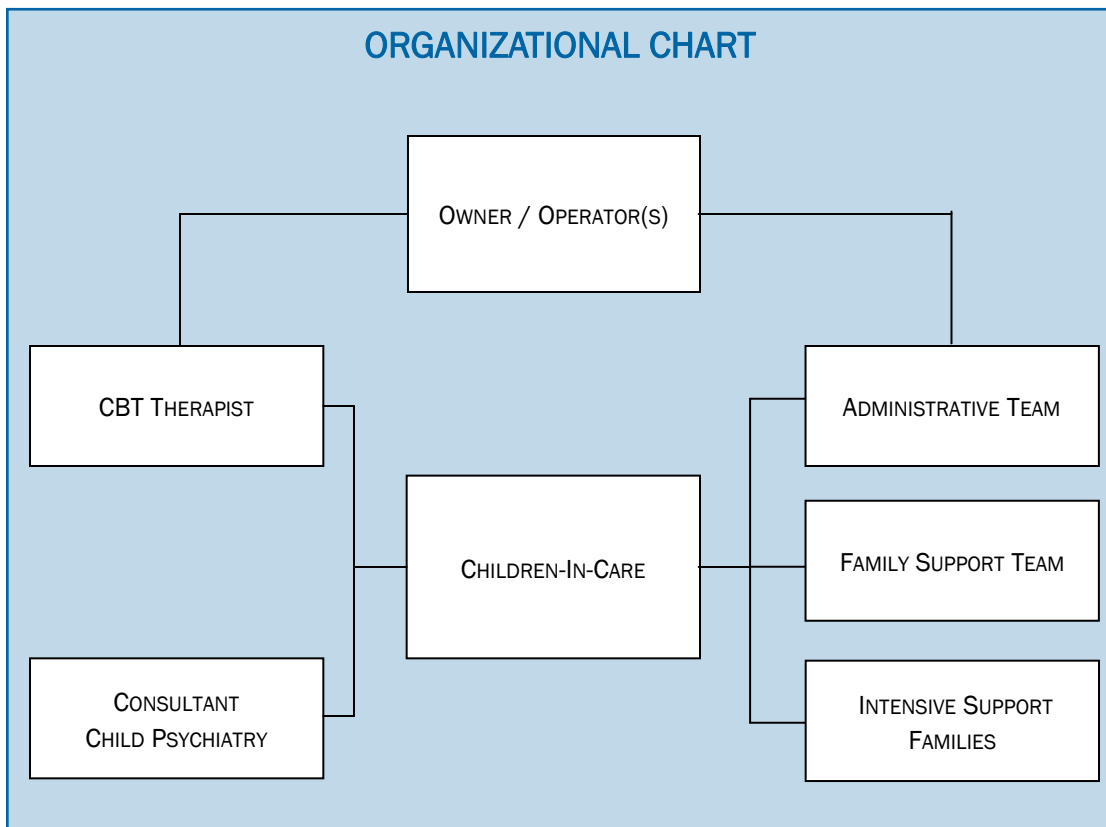
other times during Intensive Support Parents' tenure with the organization: including, (but not exclusively,) personal family life experiences, the supervisory times with the Bluewater Family support worker, and during formal and informal meetings (case conferences, planning sessions). Parents are encouraged and supported to attend workshops, conferences, and seminars related to their work and interests.

STAFFING

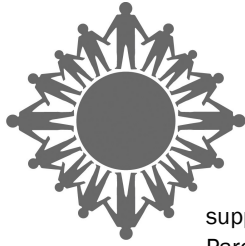
The on-site staff of Bluewater is organized in three teams: the Family Support Team, the Administrative Team and the Social Competency Team. Lead by the Director of Services, the Family Support Team also includes a clinical psychometrist specializing in trauma therapy. Additionally, Bluewater has developed a treatment relationship with a consulting child psychiatrist.

STAFFING - Family Support Team

The Bluewater family support team includes all the social workers and family support staff. The Bluewater family support team assists Intensive Support Families with addressing the special needs of the children placed in their home. The family support team, coordinated through the Director of Services, supervises the Intensive Support Families. The family



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support team provides 24/7 on-call support to Bluewater families. Intensive Support Parents also have access to all staff in emergencies. When differences arise between families and their family support team member that require third party intervention, Intensive Support Families have ready and easy access to the Director of Services and either or both of the Managing Directors.

Ongoing supervision with the Director of Services and the periodic psychiatric and/or psychological assessment of the children assists the process of monitoring, evaluating, and refining interventions and strategies. These activities are the responsibility of the family support team. The Bluewater family support team works closely with the Intensive Support Parents and social competency team staff to implement and evaluate the child's program. Collaboratively, the Intensive Support Parents, the Bluewater family support worker, and the Placing Agency worker, closely monitor the effectiveness of any and all interventions.

Delays in the competent expression of social skills is a truism of many children-in-care. Consequently, Bluewater augments the support provided to Intensive Support Families with trained 'in-home' support staff. This role varies markedly with each Intensive Support Family and child. As part of the FIRST program, Bluewater's is responsible to develop, plan and execute activities that support the development of social competency beyond the skill set developed in interaction with the Intensive Support Family. These activities and goals are outlined in the child's Foster Plan of Care. Those goals and activities are always about the acquisition of the requisite skills to manage the social environment in which the child is embedded which the Intensive Support Family are unable to offer. The in-home support role is always supportive of the Intensive Support Parents' primacy as the agent of change for the child within the Intensive Support Family.

STAFFING – Administrative Team

The Administrative team maintains Bluewater's infrastructure. How things are done and ensuring they are done that way is the predominant responsibility of the Administrative team. Clerical audits, compliance audits, policy audits, housing audits are all within the realm of the Administrative team. This team is fully responsible for Bluewater's relationship with MCSS / MYCS, for all public relations, and for the management of Bluewater's contractual obligations.

The Administrative team is responsible for maintaining and managing all of Bluewater's financial relationships: with Intensive Support Parents, children-in-care, Children's Aid Societies, staff, volunteers, and the community at large.

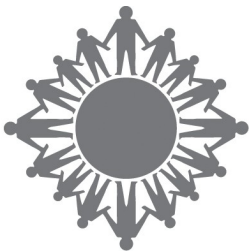
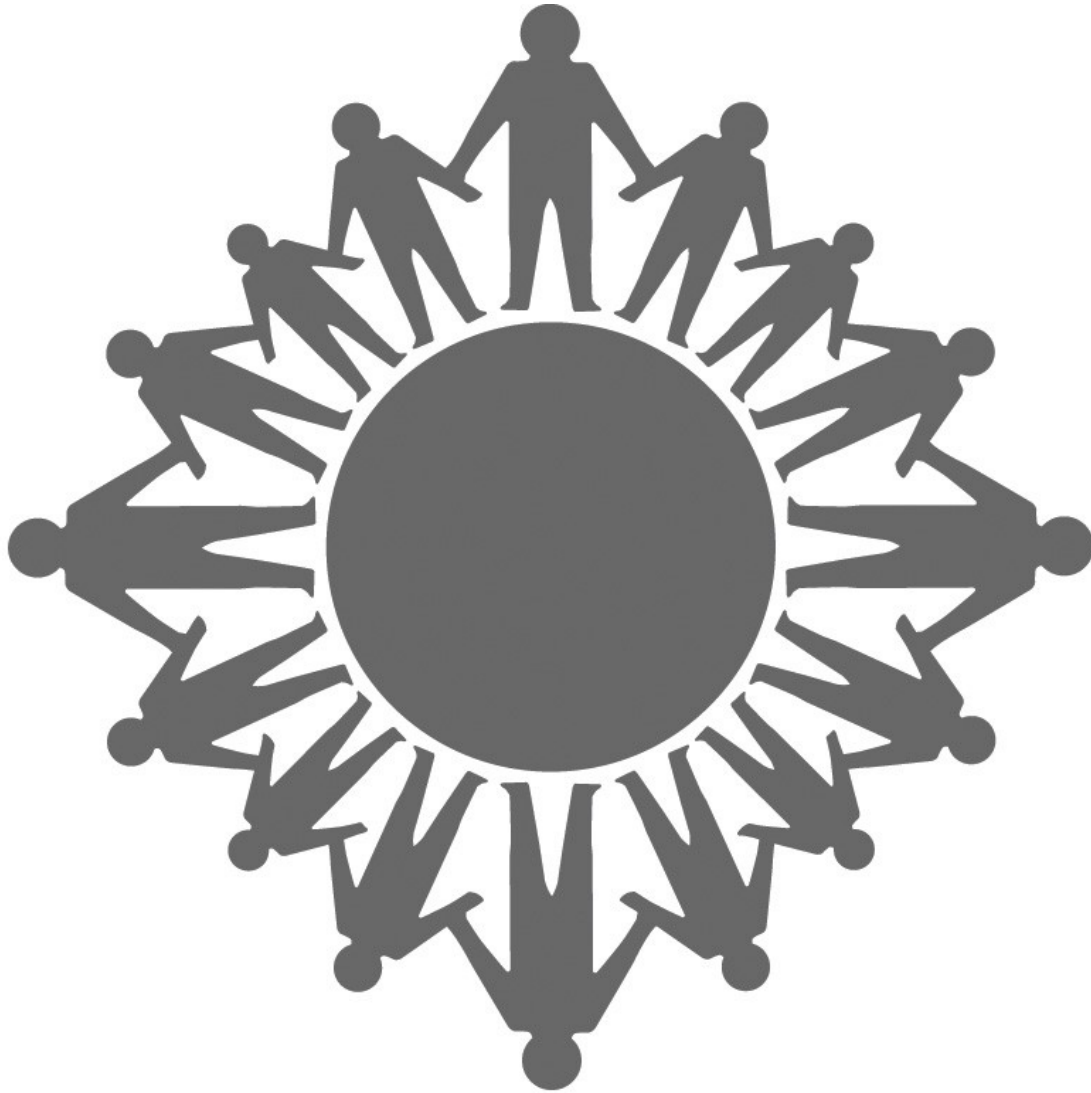
The Administrative team is responsible for all the clerical tasks of the organization. This team has responsibility for Bluewater's computers and interconnectivity, and manages Bluewater's hardware and software. The Administrative team is responsible for integrating new technologies into the operation of Bluewater Family Support Services, Inc.

STAFFING – CBT (Cognitive Behavior Therapy) Therapist

Frequently, the stories children-in-care tell of their adverse childhood events are painful and heartbreaking. At Bluewater, Intensive Support Family homes are safe havens, intended to be places away from pain and heartache. The place and the role of the therapist should be to anchor all of the child's fear, insecurity, and pain.

In the Adverse Childhood Experiences (ACE) study by Kaiser Permanente and the Center for Disease Control, 17,337 adult HMO members responded to a questionnaire about adverse childhood experiences, including childhood abuse, neglect, and family dysfunction. 11.0% reported having been emotionally abused as a child, 30.1% reported physical abuse, 19.9% sexual abuse; 23.5% reported being exposed to family alcohol abuse, 18.8% to mental illness, 12.5% witnessed their mothers being battered and 4.9% reported family drug abuse.

The ACE study showed that adverse childhood experiences are vastly more common than recognized or acknowledged and that they have a powerful relation to adult health a half-century later. The study unequivocally confirmed earlier investigations that found a highly significant relationship between adverse childhood experiences and depression, suicide attempts, alcoholism, drug abuse, sexual promiscuity, domestic violence, cigarette smoking, obesity, physical inactivity, and sexually transmitted diseases. In addition, the more adverse childhood experiences reported, the more likely a person was to develop heart disease, cancer, stroke, diabetes, skeletal fractures, and liver disease.



BLUEWATER

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