# Annual General Report 2020-2021 **Navigating Onuard**

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London Family Court Clinic



Annual General Report 2020-2021

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# Message from Director

As I wind down my 10th year as Executive Director at LFCC and over 22 years of service since the summer of 1999, and we continue the work of restructuring the organization, I am very grateful. LFCC benefits from the expertise of our dedicated Board of Directors, LFCC's skilled management team, and the many talented staff, students, and volunteers who aided the organization through this challenging pandemic driven year.

Despite the COVID-19 pandemic, LFCC proudly continued to provide services throughout the pandemic and quickly shifted to offer clients virtual clinical services, with in-person crisis support as needed. Specialized assessments and quick consultations, individual and group treatment services, and virtual trainings across many topic areas for diverse audiences were offered throughout this past year.

LFCC continued the successful procurement of several new project grants that you will read about in this report and wrapped up two multiyear large projects with comprehensive thirdparty evaluations included. As we await the word on other grants applied for this past year, LFCC continues to broaden the menu of services, consultations, evaluations, and communities of practice that we link with regularly.

Given the talent of our staff and management team, along with the continued support of the Board of Directors, our Ministry partners, and various external consultants, I see LFCC in a very good position as it moves forward to expand into the Social Enterprise niche under the leadership of Dr. Kim Harris with NavON. NavOn will be a new Social Enterprise working alongside LFCC going forward.



This organizational shift and good positioning of LFCC is coming at an appropriate time as it also aligns with my personal future planning. Recently, I announced my retirement from LFCC as Executive Director in 2022 to staff, managers, and the Board, and now to all of those reading or hearing this message.

Rest assured that the Board of Directors of LFCC are busy working to locate the next talented leader for LFCC to further navigate the coming changes ahead. Over this next year I look forward to helping with transition planning and other transformation within LFCC, supporting the development of NavOn and ultimately working as an external consultant across various service areas in NavOn, and working closely with our various sister organizations and many colleagues as change continues to unfold in many sectors.

To conclude, I wish to thank all who have tirelessly worked alongside of me over the many years I have been with LFCC. In addition, I wish to note my great admiration for the many clients that have reached out to LFCC and permitted us to aid them in moving forward with changing their lives.

Take Care all, and respectfully your colleague, Dr. (Dan) Ashbourne, PhD, C. Psych, Acc.FM.

#### Message from **Board President**

Last year I commented on how staying connected looked and felt different than it did pre COVID-19.Here we are, a full year later, and nothing has changed except staying connected in the manner we have had to is now the norm. Social distancing or physical distancing, masking, hand hygiene and vaccines are all phrases and words that we use regularly. The impact on our mental health is beyond what most of us could have ever imagined, and some of us have lost loved ones. As each day passes, it is apparent how society longs for some sense of normalcy but aren't quite sure what that looks like anymore or even how to get there.

The importance of staying connected has not changed. The importance of finding ways to move forward has taken center stage. The pandemic will become an endemic and we will need to learn to live with whatever our new norm is. In the meantime, organizations and people are finding innovative ways to press on. LFCC is no different.

Last year the LFCC Board of Directors provided guidance to the LFCC leadership team to implement significant organizational changes previously identified in LFCC's strategic plan. These changes are critical to the on-going success and growth of the organization and in true LFCC style, the leadership team and staff stepped up. In addition to their regular daily workload, they found the time, creativity, ingenuity and innovation to move this most critical work forward. We are now at the stage where we are finalizing the lowest level of detail, dotting all the "I's" and crossing all the "T's".



This is the hardest part of any project as great care must be taken to get it right, and while we want to see these changes implemented, we are not willing to rush. The great news is, we are no longer months away from implementation, but rather days.

As the LFCC staff and leadership team embark on this exciting journey filled with both change and old norms, the board of directors is extremely proud of what LFCC has accomplished in the past but even more excited for their future.

As this is my last year as LFCC Board President, I personally want to wish everyone all the best and every success both professionally and personally. It has been an absolute pleasure to work with such a dedicated team whose professionalism, caring and compassion is loud and clear in everything they do.

On behalf of the LFCC Board of Directors, stay safe, stay healthy and continue to stay in touch.

Respectfully, Darlys Corbitt, Board President

## Ongoing DBT Development

#### Final Virtual DBT Group

In April 2021, we concluded our last round of the virtual DBT program, which was a part of our 3 year Local Poverty Reduction project. Overall, the virtual DBT group was a success. We had an average of 5-8 participants in 5 group rounds and delivered skills to a population of youth that may not have had the chance to participate otherwise due to COVID-19 public health measures. Feedback received from group members showed positive outcomes from the acquisition of DBT skills in the form of increased coping skills, decreased self-harm behaviors, and a belief that group members were not alone in their struggles. A big thanks to everyone who helped with organizing and facilitating this virtual group! Also thank you to all community members and stakeholders for their referrals and collaboration during the past year. We are so please to have been able to offer such a needed learning experience during such a challenging time.

/ Vieno

#### New Asynchronous DBT Program

At the time of the release of this Annual General Report a group of individuals at LFCC are in the planning and creation stages of a new hybrid or 'asynchronous' model for teaching DBT skills. This new approach to delivering the DBT program will offer participants the opportunity to acquire the knowledge and skills of DBT through a curated video series and virtual group sessions. Participants will be able to access this video series on their own time and at their own pace. Program participants will also be involved in a weekly virtual group session to discuss the videos and how the DBT knowledge and skills can be applied to their daily lives. This hybrid model aims to serve a broad demographic of youth interested in learning DBT by removing barriers such as geographical location and accessibility related issues. This is an exciting new endeavor for LFCC as we continue to adapt to the ever-developing world of virtual learning. Stay tuned and thanks to the Centre of Excellence for the funding support.

## Lona'tshistanet

The Lona 'tshistanet (Firekeepers) project continues to roll out with the addition of a 5-day summer camp that took place August 16th- 20th, 2021. We interviewed project lead Kahawani Doxtator to get her feedback on the successes and progression.

# What was your favourite part of the Lona'tshistanet (Firekeepers) summer camp?



My favourite part was the "building of the Sweat-Lodge" and then participating in a Sweat-Lodge Ceremony. It felt really good to see others reconnecting to culture, and it was even more satisfying that we were able to harvest willow saplings together, prepare the foundation for the saplings with Indigenous tobacco, tie the saplings together and prepare the fire for our Ancestors, who joined us spiritually as well. Everyone enjoyed the smell of the medicines being burnt in the lodge as it cleansed and rebalanced us. We all had a chance to voice and give thanks through song, blessed by a sacred pipe, heard the whistle for the spirit of the Eagle to join us and made offerings of fish and blueberries to our Ancestors and all spiritual helpers that joined us. The youth were so excited to take part in one of the oldest ceremonies held to maintain ones wholistic well-being. My heart was full after witnessing how hard the youth worked to build the Sweat-lodge, watching them put medicine in the fire for us, and using their voice to say thank-you for the opportunity in learning all the sacred teachings from Wisdom Keeper Stacey Nahdee. The best part of all is that the Sweat-Lodge can be used by the people of Oneida Nation Territory for wholistic healing when needed. ♥"

Our monthly events continue September 23, 2021, with Bonita Abram as Knowledge Keeper providing teachings on the making of a medicine bundle.

To see regular updates on the project please join the Lona'tshsistanet (Firekeepers) group via Facebook.

## The Stats

London Family Court Clinic has provided a full menu of services again this year with ongoing pivoting for COVID restrictions as needed. Ministry programs, programs supported by individual grants and funding contracts and our revenue generating streams kept all of us busy and mostly meeting through our computer screens.

Below is a sampling of the number of cases opened between April 01, 2020 to March 31, 2021. These numbers in Ministry funded services represent a small portion of the individuals that are impacted by services as clients bring the benefits of counselling to interactions with many others in their lives.

- ADR Link: 175 families
- Child Witness Program: 133
- MCSP: 162 counselling clients in residential settings
- DBT group attendees = 59 with an additional 145 DBT skills sessions
- PRSO DBT: 33 youth in group settings completed DBT
- Youth Justice Assessments s34: 35 assessments
- Ongoing FASD family group nights and parent peer support
- Youth Therapeutic Court (assessing/consultation): 51 (diversion): 13
- Plan of Care meetings involved in = 44
- Specialized Consultations = 42
- External Case Conferences = 118

We look forward to another busy and rewarding year and we're hopeful that we can continue the path to steady increases in our ability to return to in person services.

#### A sampling of our Revenue based family and individual services:

- Counseling: 47 individuals
- Expert Testimony and Consultation: 20
- Neurodevelopmental assessments: 20
- Mediation: 1
- Parenting Capacity Assessments: 2
- Parenting Plan Evaluations: 4
- Specialized Assessments: 8
- Voice of the Child Reports: 1
- Shared Decision Making: 4
- Collateral Consultations completed = 175

#### A sampling of the various training sessions held included the following topics:

- Indigenous Dispute Resolution or ODR training
- Child Inclusive Mediation training
- Voice of the Child Report training
- Trauma Informed Care
- Motivational Interviewing
- Vicarious Trauma and Compassion Fatigue
- New Ways for Families (NWFF) training and recertification
- Helping Children Prepare to Testify (2-part series)
- Youth Suicide Prevention, Intervention and Postvention
- Fetal Alcohol Spectrum Disorder (FASD) series from Introduction to Developing Expertise
- ADR orientation sessions (16 sessions with 345 registered service providers)

#### Alternative Dispute Resolution

ADR-LINK receives referrals from CAS, First Nations Communities, Lawyers, Judges and Families and connects CAS involved families with a neutral third-party facilitator that assists in helping families settle child protection concerns in the form of a Child Protection Mediation (CPM), Family Group Conferencing (FGC), Original Dispute Resolution (ODR), or a 4th/Other option. The process is often quicker and less expensive than traditional court options. Families feel involved in the decision making process resulting in mutually agreeable solutions to resolve their disputes.

This year we continue to use video conferencing technology to our advantage. Zoom conferencing platform allows our ADR Practitioners to provide seamless service delivery by offering virtual ADR meetings and conferences to families. Positive feedback shows that this virtual service method will most likely stay available in the future to allow for a hybrid model of virtual and in person services.





Capacity building efforts took place virtually through information sessions that describe the ADR program services, including an in depth look at different situations where ADR can be particularly useful in the Advanced ADR sessions. Sessions for Legal professionals and the New Ways for Families approach (used in our 4th option) were introduced this year.

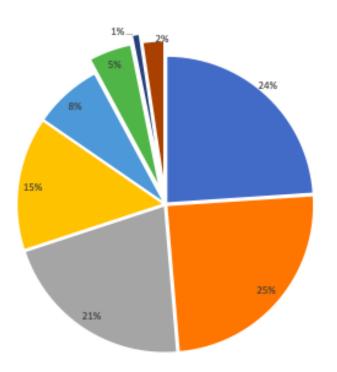
Indigenous ADR training for new Original Dispute Resolution (ODR) practitioners provided by Jim Doxtdator and Stephanie Morningstar took place in two 4 day sessions. This brings new practitioners on board to enhance our capacity to provide services to more Indigenous families.

## Financial Report

LFCC has experienced many changes during this fiscal year. Some projects were in their last year of delivery, we experienced some staffing changes as normally happens during the course of any year, and our methods of delivering work continued to be impacted by COVID. We discovered some efficiencies, some unexpected expenses and overall were able to provide excellent service that included financially responsible oversight.

#### Revenue | Fiscal Year 2020-2021

\$841,200	24%
\$868,728	25%
\$748,619	21%
\$514,593	\$15%
\$264,702	8%
\$165,000	5%
\$28,408	1%
\$83,215	2%
	\$868,728 \$748,619 \$514,593 \$264,702 \$165,000 \$28,408



#### Total: \$3,514,465

- Ministry of Children, Community & Social Services
- Fees for service
- Ministry of Children & Youth Services Youth Justice Services
- Ministry of Health Children and Family Interventions
- Ontario Trillium Foundation grant
- Ministry of the Attorney General
- Amortization of deferred contributions related to capital assets
- Other

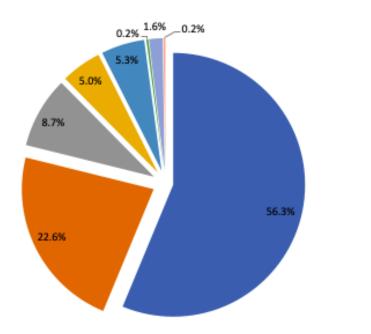
## Financial Report



#### Expenses | Fiscal Year 2020-2021

Salaries	\$1,987,393	56.3%
Consultative and professional fees	\$798,445	22.6%
Employee benefits	\$308,779	8.7%
Administrative	\$175,277	5.0%
Occupancy costs	\$187,822	5.3%
Travel	\$8,035	0.2%
Amortization of capital assets	\$58,077	1.6%
Publication printing	\$8,552	0.2%

#### Total: \$3,532,380





- Amortization of capital assets
- Publication printing

## Frank Brennan Award

Each year the Frank Brennan Award, named in tribute to a fondly remembered colleague from the early days of the London Family Court Clinic, is awarded to a peer working in the social services sector. Frank was 65 when he joined us and, to our great loss, he died five years later. He brought years of wisdom gained as a probation officer but also the legacy of a rich and remarkable life that included the experience of fighting in the Spanish Civil War, where he met Ernest Hemingway.

Frank, with his literate style and humorous nature, made his mark both on the children he counselled and the community he served.

Like Frank, the recipients of the award that bears his name provide exemplary service to local children and families in crisis.

They work within their own organizations and participate in broader community initiatives to exemplify the qualities for which Frank is remembered: compassion, integrity, respectful treatment of clients, effective communication, dedication to advocacy, and support to colleagues. With respect for Frank's strong sense of humanity, we continue to honour his life amongst us.

This year's winner of the Frank Brennan Award is **Stephanie Gummerson**.



Stephanie is a Registered Psychotherapist who works with adolescents and families involved in the justice system. She is currently employed at Wellkin in Oxford County. She has been employed in this capacity for 16 years primarily working with our youth population. During her early career, Stephanie worked in both open and secure residential facilities for youth and as Probation and Parole Officer with the Ministry of the Solicitor General.

Stephanie's expertise lies in her ability to strongly advocate for our youth and ensure that their best interests are taken into consideration by all those who are involved in a youth's circle of care. In her current practice, Stephanie uses a trauma-informed and therapeutic approach to serve our youth. There is no challenge or obstacle that cannot be overcome. Stephanie uses a creative and resourceful approach to ensuring that our youth have access to the services and resources that they need to achieve greater success in their lives.

Stephanie is a kind, compassionate and dedicated professional who has built collaborative working relationships with community partners in the Southwest region. Those who have had the privilege of working with her have described Stephanie not only as a strong advocate for our youth but also as a genuinely gifted clinician who understands the needs of our unique adolescent population. Stephanie's contribution to the youth we serve is invaluable. Her leadership and collaboration with the London Family Court Clinic is very much appreciated by all who benefit from her skills, her diligence, and her dedication to serving youth.

#### Wayne Willis Award





Wayne Willis

Wayne Willis worked at LFCC for over 40 years as a clinician. He took pride in being the first employee of LFCC. Wayne was respected for his commitment and unique skills in working with our youth. Every year we recognize the success of a youth that experience positive changes because of their involvement with LFCC.

Each year front line staff nominate a youth they've worked with to receive this award. The selected youth is recognized for taking significant steps to change the direction of their lives. Last year's recipient attended the presentation that reminded us of the power of hope and perseverance. Below is a copy of the note of appreciation that sparked his nomination for this award.

We thank the London Community Foundation for the financial support of this award through the Judge Maurice Genest funds.

### Wayne Willis Award

Recipient Honored in F21 for Following Through on Positive Changes in His Life *Nominated by Ellissa Riel* 

JD is a nineteen-year-old young man living in London, ON. He was a client at LFCC in 2018–2019. He was involved in a number of services including Youth Therapeutic Court, YJ Section 34 Assessment, YTC/IIS counselling, DBT group, and PRSO service coordination. He is well known to many of us at LFCC and we are all very proud of him. JD had struggled with his mental health for a long time but was always engaged in services and committed to bettering himself.

JD recently reached out to me with an update on how he has been doing since having received services at LFCC. I believe that his words say it best:

Hey Ellissa I used to be in your programs about 2 years ago. My name is JD. I was thinking back, and I just wanted to say thank you very much for helping me in the past. The things I learned from you guys has truly helped my life in every aspect. It's amazing to know that there is people like you who dedicate their time into helping people especially in times they need it. I truly appreciate and admire the work you do. You're a good person doing good things I have nothing but respect for that.

I have been relaying your teachings to my friends and family of the power of mindfulness and awareness. And I've got to say it has really helped me, and now I see it helping others. Ever since the days I was with you guys, my life has only gotten better because I have surrounded myself with positivity and I work on myself every day, and learn something new every hour from mindfulness.

I am in a great position today as I am top of my class in college, I represent my college at meetings with some of the biggest construction companies in Ontario, I am in the process of starting my own carpentry business, and I dumped the toxic relationship I was in for years and surround myself with good people.

I wouldn't be where I am today without you and your team. So just know I always think of you guys, and I am very grateful. If you guys ever need someone to volunteer for research purposes or anything I can help with (I remember doing surveys) just let me know I'd love to help, because I can learn a lot from those.

#### 2020 LFCC Training Highlights

LFCC has had a busy year with training on diverse topics that are aligned with our clinical expertise. LFCC was awarded funding in 2020 by the Ministry of Children, Community, and Social Services to provide 12 sessions of Vicarious Trauma and Resiliency training to their frontline staff. This training has been well received across Ontario by youth justice providers and couldn't have been more timely given the complex impacts of the COVID-19 pandemic. Frontline staff reported that the training helped them reframe their experiences and provided them with some practical tools and strategies to cope with the complexities of their demanding environments and the high risk/high need youth they serve.

LFCC also delivered 10 training sessions on Youth Suicide Prevention, Intervention and Postvention to youth justice service providers. Suicide continues to be the second leading cause of death for youth in Canada (PHAC). Youth in our justice system are at even greater risk and are about three times as likely to die of suicide (CJJR). Although we are still evaluating the impacts of the pandemic on the youth justice sector, we know that the situation for the broader community has worsened through the pandemic, with calls to Canada's Suicide Prevention Service up 200 per cent in 2020. LFCC's Suicide Prevention training continues to play a critical role in mitigating the negative impacts of mental health and suicidal behaviour.

LFCC continues to be actively engaged in capacity building efforts related to FASD. LFCC staff provided 18 training sessions to local social service agencies and First Nations communities. These trainings range from foundational information about FASD to evidence-informed supports and services to more advanced discussions about FASD in the justice and child welfare systems as well as FASD and trauma-informed care. Training participants reported to appreciate the clinical experience of the trainers, case study work, and hearing from those with lived experience. LFCC was also involved in developing content and played an advisory role in the provincial FASD service-provider training that was launched by Health Nexus in early September.

Helping children cope with separation and divorce and supporting families in high conflict situations continues to be a primary role for LFCC in the community. LFCC has offered multiple 3-day trainings on the Voice of the Child and Child-Inclusive Mediation, together with partners and through the Ontario Association of Family Mediation. These two intensive trainings serve to assist practitioners with bringing the child's voice into parental decisions that affect them, whether in court or in a family dispute resolution processes. Lawyers, mental health professionals, and Judges have all expressed appreciation for this comprehensive curriculum that balances the child's right to be heard, the role of parents (or courts) as decision-makers, and the complex family dynamics that emerge following separation and divorce.

For more information about training please visit our website at https://www.lfcctraining.com/events

## LFCC Clinical Training Cohort

#### **Thrived in Pandemic Conditions**



LFCC celebrates the success of our 2020-2021 clinical trainees: Congratulations Dr. Ashley Bildfell, who completed her PhD, and Ms. Alexis Winfield and Ms. Lisa Vanderloop who completed the MA of Counselling, at the University of Western Ontario. Psychology resident, Ashley, worked across programs in assessment and treatment.She joins us this September as a psychologist in supervised practice. Alexis was a treatment provider and clinical case manager specializing in FASD. She continues to work as a part-time clinical case manager. Lisa was a student clinician on the MCSP team working with high-risk youth. This training cohort fostered a strong sense of cohesion and support through weekly Zoom supervision throughout the year.

LFCC requires students who are already skilled therapists or assessors - ready to adapt their clinical plans to respond to the needs of clients. The pandemic required increased adaptability to navigate physical distancing, masking, and lockdowns. Before COVID-19, training focused on the development of advanced therapeutic and assessment skills that are subtle, interpersonal, and in-person. This year, COVID-19 frequently prevented in-person contact with high-needs/risk/trauma/conflict clients. Most services moved online and our talented trainees turned these challenges into opportunities to develop advanced skills. Ashley, Alexis, and Lisa became Zoom experts; they developed advanced skills in therapeutic presence and rapport in video and telephone technology. They were creative, providing therapeutic sessions in backyards and during therapeutic walk-and-talks, which provided clients with mood-improving breaks from being stuck at home. Ashley mastered the emerging art of online test-administration, adapting testing materials for videoconferencing, creating proxy support materials, and trouble-shooting technology issues to ensure results were valid estimates of client functioning. This was a remarkable cohort who managed to thrive while supporting vulnerable clients through a pandemic.

This year, we welcome psychology resident, Mr. Bradley Daly; advanced psychology practicum student, Ms. Mary Ritchie; and Master of counselling student, Ms. Anjali Ruparelia – all from the University of Western Ontario.

## Youth Therapeutic Court

The Youth Therapeutic Court (YTC) is a specialized court program that is designed to provide support to justice involved youth between the ages of 12 and 17 who have been charged with a criminal offence and who may have a diagnosed or suspected mental health issue, traumatic brain injury and or a developmental disability. The role of the Youth Mental Health Court Worker (YMHCW) is to work with youth, as well as their families and/or care providers to identify areas of need and to provide referrals to community-based resources, as well as provide consultation to the courts regarding Mental Health Diversion suitability. The process may involve intake, screening, assessment, and if suitable, the Crown may offer alternative resolution in place of prosecution by way of a Mental Health Diversion. Participation is voluntary and Mental Health Diversion plans are made in collaboration with the Crown, the youth, and their families and/or care providers.

Since the beginning of the Covid 19 Pandemic all youth court appearances have been conducted remotely. Initially, court appearances were accomplished by telephone conference calls. In September 2021 the Ministry of the Attorney General established a virtual court system via a Zoom link. Despite some of the challenges associated with these changes, with the collaborative efforts of our community partners, the courts, and our clients, the YTC program has continued to evolve and successfully provide services virtually.

As we continue to navigate these unprecedented times, we look forward to continuing to develop unique and creative ways to connect with our community partners and our clients.

#### Multidisciplinary Clinical Supports Program

The Multidisciplinary Clinical Supports Program (MCSP) is a team comprised of registered pychotherapists, social workers, psychologists, a nurse, and psychiatrist. Multidisciplinary team members provide one-on-one, intensive mental health services to young residents (and their families) of 6 facilities in Middlesex County, including therapeutic residential care and youth justice (custody) settings, as well as youth on probation and mental health diversion.



Throughout the global Covid–19 pandemic, the MCSP team continued to support our community by providing services through virtual platforms (e.g., video conference) and by phone. The MCSP team used creative ways to engage youth and their families in both individual and group work to meet the unique needs of this challenging time. We continued to foster strong partnerships with our stakeholder organizations virtually, such as Humana Community Services (formerly WAYS mental health support and Anago Resources) and Craigwood Youth Services.



We understand the importance of everyone having equitable access to mental health services at any given time, but especially, during trying times. We have continued to work with youth using a strength-based and collaborative approach by connecting with our clients and community partners remotely. More recently, we have begun working with clients face-to-face again, using the appropriate PPE guidelines. The MCSP team has been grateful to our community partners who have supported our offering of services using a hybrid model (e.g., face-to-face and virtual work). While we all would agree that in-person counselling is often times the most effective means of engaging youth, one colleague in particular, LFCC's facility dog NSD Yzer, has appreciated being able to finally return to offering in-person emotional support to youth.

#### Judge Genest Fund



The picture of Justice Genest on the bench with a young person on the witness stand illustrates the overwhelming experience of having to testify as a child. It demonstrates the unique and special needs of children that are different from those of adults who are called to testify. This depiction of a young, vulnerable witness and a judge speaks to the importance of special accommodations and support for young witnesses in a justice system that depends on seeking a full and candid account from those who are testifying.

#### Judge Maurice Genest May 17 1930 – August 9, 2006

In the early 1970s, Judge Genest gathered a group of local professionals to pursue the idea of a local Family Court Clinic, modelled after one established in Toronto. The major stumbling block – funding – fell away when Dr. Naomi Rae-Grant secured support from the Ministry of Health. As Judge Genest continues the story: "a modest complement of staff was hired, a volunteer board of directors was established, and in 1974 the London Family Court Clinic was started."

The Child Witness Project is a program that Judge Genest was particularly proud to support. Since its inception in 1987, the Child Witness Project has helped prepare thousands of children to testify in criminal or youth court proceedings.

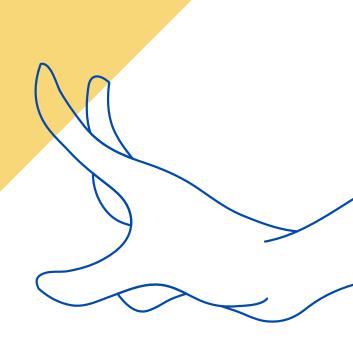
Judge Genest believed that youth adequately supported with kindness and fairness, will want to do well for themselves and their community. This is the philosophy on which LFCC was built.

Judge Genest's legacy continues to support youth in a very real way at LFCC and throughout our community. We are grateful to be able to administer financial support to the clients we serve through an annual gift received in memory of Judge Genest.

We continue to be inspired by the memory of Judge Genest's commitment to youth and remain grateful for his efforts in bringing his vision to life.



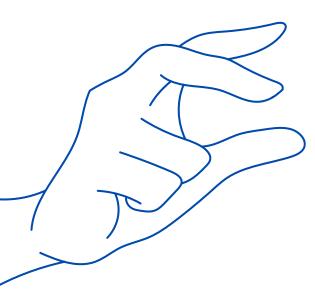
Suicide is the second leading cause of death among youth in Canada and suicide presents a risk for suicide clusters. Ecological studies support the hypothesis that suicide can be 'contagious;' exposure increases the risk of suicide behaviours and other related negative outcomes in youth. To create suicide-safe communities, mental health agencies in Southwestern Ontario proposed a comprehensive, coordinated, multisector response that involves youth, families, youth-serving agencies, schools, and community members. This collaborative is called EQ4. (Equity for youth across sectors that have traditionally been siloed in their work; health, mental health, justice, and education) It links health, education, mental health, youth justice, and community sectors to respond to youth mental health needs following a youth suicide.





A public health approach and recent lessons learned from the COVID-19 response has encouraged us to think of suicide much like a virus. It impacts individuals in circles of influence outside of the immediate household or peer group. For example, in 2016 Woodstock Ontario experienced 7 youth suicides in 9 months. The victims were not all within the most proximal circles of influence. Skilled community mental health clinicians came together in Woodstock and were one of the first communities to create a postvention protocol. The skilled efforts of frontline staff in Woodstock inspired our efforts to do more.

## EQ4



The London Family Court Clinic (LFCC) was able to secure funds from both Ontario Trillium Foundation and Bell Let's Talk to build a framework of support for youth impacted by suicide. Through partnerships with local children's mental health organizations and led by the London Family Court Clinic (LFCC) we embarked on the shared goal of increasing our capacity to respond to youth suicide across our community and creating a suicide safer community. We also wanted to be better positioned to support front line staff because the impact of youth suicide was significant for those working in schools and in the community.

The EQ4 Postvention Advisory committee has taken a developmental evaluation approach based on a standardized patient scenario model to develop and evaluate this template, which can be further adapted for protocols in other geographical areas. The EQ4 project created a postvention protocol, a framework for information sharing, a website with user friendly tools and resources and most importantly a developmental evaluation was completed by Dr. Dilys Haner, psychologist at LFCC. Dr. Haner worked with a team of nine volunteer research associates (RAs) (undergraduate and graduate university students in psychology, social work, and criminology) to create and execute practice scenarios based on a standardized patient model of learning and testing, administer pre- and post-project guestionnaires to frontline workers and leadership in partner organizations, and interview practice scenario participants. Despite the challenges of COVID-19 during our process, community partners were committed to working together to create a shared and coordinated response through our EQ4 project. We are exceedingly proud of the shared efforts of all our community partners. It demonstrates the collaboration and commitment of our children's mental health providers to continue to be both responsive and innovative in our efforts to find meaningful solutions to suicide prevention. The website and full evaluation can be accessed at http://lfcceq4.com/.

#### Child Witness Program

The goal of the Child Witness Program (CWP) is to prepare young victims and witnesses for their court experience to reduce possible trauma caused by their involvement in the criminal justice process. CWP works to achieve this goal by providing court preparation, trauma education, supporting the use of special testimonial aids, and providing in-court testimony support. CWP also seeks out additional funding through community grants, like Kiwanis, to support the Yzer NSD program and provide the best possible care for our clients.

During this past year, the CWP has congratulated Chelsea Quick on her transition from clinician to mother. Chelsea has been a true asset to the team, and we wish her growing family all the best. Rachel Bezzina is our new clinician and handler for Yzer NSD. Rachel has previously worked with the clinic as the Parent Connect Project Clinician Manager, and she has been a positive addition to the program.

One of our highlights this year was when the CWP team provided a virtual two-day workshop to Newfoundland and Labrador's Victim/Witness Assistance Program and their Assistant Crown Attorneys. This wellreceived training focused on best practices for preparing and supporting young witnesses and factors workers should consider when serving this population. Another major change to our program, prompted by the COVID-19 pandemic, is a shift to a digital and paperless approach to our care. This environmental innovative not only limits redundancy but also streamlines our approach by having all our materials conveniently on EMHware.

Throughout the COVID-19 pandemic, the operation of the CWP has needed to adapt to ensure the health and safety of our London community. Having the virtual option has not only allowed us to continue our role in preparing youth for court but has also provided clients with the opportunity to have more say in the process. Having a choice in how and where they prepare for court gives autonomy to a person who had their power taken away. CWP has remained supportive of the inventive way court has been operating because of the COVID-19 pandemic though we also remain conscious that not every client we serve will have access to remote supports. We continue to meet clients where they are at to ensure we maintain our goal of reducing possible trauma caused by their involvement in the criminal justice process.

#### FASD Parent Connect

#### Successes and Lessons Learned



In 2017, the Ontario Trillium Foundation funded the FASD Parent Connect caregiver mentorship program. The program was developed based on a needs assessment showing that 78% of caregivers of children with FASD did not have someone to turn to in times of stress. Peer support can reduce the emotional burden for caregivers, improve coping, and prevents the escalation of distress. A healthy caregiver is a protective factor for children, particularly those with disabilities such as FASD. The objective of the FASD Connect project was to connect isolated caregivers to trained mentors with shared experience, fostering a mutual support network.

Mentors participated in a comprehensive FASD mentor training at LFCC. Mentors and mentees were then matched based on demographic characteristics and lived experience. FASD Parent Connect served 140 families over the course of 3 years.

A total of 37 participants, 18 mentors and 19 mentees participated in an evaluation of the program by completing questionnaires and interviews prior to and following their participation. As a result of the program, mentees felt more understood and supported by others with similar lived experiences. Mentees also shared that they became more confident in navigating resources and parenting their children. Mentors shared that the program increased their connections to others in the community. Mentors also described how sharing their experiences made them feel more confident in their abilities as caregivers.

According to participants, the Program Coordinator was a major contributor to program success. The coordinator made successful matches, created opportunities to interact with other caregivers, and shared resources. The COVID-19 Pandemic forced the program to operate virtually, however, this shift proved to be beneficial for many as it was possible to "meet" without added pressures of finding transportation or a location for in-person connection.

FASD Parent Connect was incredibly successful in connecting caregivers of individuals with FASD, therefore, reducing social isolation. The program will continue to be run through LFCC as the evaluation demonstrated its importance for so many families.

## Youth Justice Assessment Program

The YJA program has the distinguished honour of being the first established area of service at LFCC. Since 1974, LFCC clinicians have worked with 12-to-18 year-olds who face criminal court charges. Youth involved with this program, come to the Clinic by way of court orders from the surrounding youth courts.Assessment focus generally involves mental health and addiction issues along with criminogenic factors and risk.As well, specialized assessment can be requested by the court to address concerns in the areas of: learning challenges, violence risk, sexual beahaviour problems, and developmental issues (including Fetal Alcohol Spectrum Disorder (FASD)). Over the years of working with this population, we have continued to observe atrend toward more complex cases being referred by the court for psychological assessment, with the majority of young people presenting with severe and/or long-standing mental health symptoms, unidentified learning challenges, poorly managed behavioural issues, and chaotic daily lives. Out of necessity, these psychological assessment reports have become more specialized in nature. Our clinicians not only help to facilitate the court's understanding of the role that these issues have played in the commission of young people's crimes, but also how to support youth in making meaningful changes in their lives.

This past year was indeed an unusual and challenging one for many. Nevertheless, the Youth Justice Assessment (YJA) program continued to operate and accommodate the needs of this region's court referred young people. Due to Covid-19 restrictions, these assessments were largely completed virtually, although arrangements were made when youth were without the needed technology or unable to manage the demands of on-line assessment. Out of necessity, our assessment practice changed and a more 'hybrid approach' to meeting with youth and their families has evolved.This has proved especially helpful for those who live at a distance from our office or whose mental health challenges result in their being more comfortable within their homes during discussions. We are proud of our continued ability to connect with youth during the past year, under such difficult circumstances and challenging times for many of these young people. We look forward to continuing to promote their voices and engage youth and their families in meaningful ways.

## Staffing Updates

We are so proud of our staff team. Our clients receive extraordinary services through our multi-disciplinary team who support each other in the pursuit of innovative counselling and assessment services. We work closely with many community partners who also understand the need to meet people where they are at on their healing journey. Our client base includes a broad range of ages, needs and circumstances. We appreciate the privilege of using our professional skills to have a positive impact on the lives of the people and communities that we serve.

#### Our current staff team includes:

- Katie Anderson
- Dr. Dan Ashbourne
- Joelene Bamford
- Rachel Bezzina
- Ashley Bildfell
- Ashlyn Carwana
- Kahawani Doxtator
- Heather Fredin
- Dr. Dilys Haner
- Dr. Kim Harris
- Elizabeth Lam
- Valerie MacGregor
- Ryan MacKay

- Jacqueline MacMillan
- Jesse Minns
- Melissa Moore
- Frances Nuvoloni
- Emilia Pacholec
- Dr. Joyce Radford
- Disha Rawal
- Dr. Kay Reif
- Ellissa Riel
- Tammy Riley
- Alexis Winfield
- Jacquie Winter-Officer

#### We said goodbye to the following staff who moved on to a variety of other positions/interests:

- Jeff Buchanan
- Leah Carrier
- Jillian Cavuoti
- Lisa VanderLoop
- Rose Santos

## Board of Directors

The staff of LFCC appreciate the dedication of the members of our Board of Directors. This team brings an incredible cross section of skills to the table and gives freely of their expertise to ensure programs, services and the general operation of LFCC are delivered with integrity. Their combined contribution of upwards of 200 hours over the last year reaches far beyond the board room table.

> Darlys Corbitt (Board President) Mary Ann Tucker (Vice President) Ketan Ramji (Secretary) Tuhin Jajal (Treasurer) Afeez Ajibowu (voting member) Brenda Young (voting member)

Dr. Dan Ashbourne (Executive Director) Dr. Kim Harris (Assistant Executive Director)

If you are interested in joining our Board of Directors, please reach out to us at info@lfcc.on.ca.

#### Consultant Spotlight



Louise has been a social worker for over 35 years bringing her experience to each unique family situation. Louise has been practicing Alternative Dispute Resolution since 2004, first with Family Group Conferencing and expanding to Child Protection Mediation. Louise is active in the ADR Community, serving on the FGC Ontario Provincial Resource Steering Committee for more than 10 years and now serving as the Program Manager for the OAFM Child Protection Mediation Roster Program. Louise has been a member of the LFCC ADR Working Advisory Group since 2011.

Louise has been an active partner with LFCC's ADR (Alternative Dispute Resolution) Link program since the beginning providing families with empathetic, professional services focusing on family strengths for resolutions. Louise has experience working with parents with children aged O–6, adults and children with developmental disability, adults and children with mental health challenges and families who find themselves in conflict over a custody and access matters and many other challenging family situations.

#### Louise Vandenbosch

MSW, RSW, ADR Practitioner, (Family Group Conferencing Coordinator and Child Protection Mediator) OAFM Family Mediator, OAFM Elder Mediator, New Ways for Families Coach and Trainer, OAFM Child Protection Mediation Roster Program Manager

Louise is also a skilled presenter who leads our orientation sessions for referral sources to our ADR Link program. We regularly host virtual information sessions that are open to all stakeholders in the delivery of ADR's 4 streams of:

- Family Group Conferencing
- • Child Protection Mediation
- Indigenous / Original Dispute Resolution
- •4th Option dispute resolution services

Over the last year, we had over 400 people registered for these sessions as well as sessions available for the legal community to increase their understanding of ADR. We invite you to visit www.lfcctraining.com to view the calendar of orientation sessions that you may wish to register for (free of charge).

Thank you to Louise for the support you provide to LFCC and most importantly, your commitment to the families that access your services through LFCC's ADR-Link.

## **Fee-for-Service**

LFCC provides services for individuals and families with a range of needs on a fee-for-service basis. These services have grown over the last 20 years and comprise a significant proportion of the work completed by staff at LFCC. LFCC provides clinical assessments for children, youth, and adults when there are concerns about learning, mental health, autism, or fetal alcohol spectrum disorder, as well as forensic assessments, including for parenting capacity, risk, and immigration. LFCC provides psychotherapy for children, adolescents, adults, and families. LFCC shares their expertise in-kind to the community by way of a biweekly support group for caregivers of individuals with FASD as well as a concurrent teen group.

LFCC offers a suite of services for families coping with separation and divorce. Our mediation service supports families in negotiating parenting time, parental decision-making, and finances. After a separation agreement has been finalized, some families struggle with the implementation of the plan and LFCC provides parenting coordination, which is a long-term intervention to reduce conflict and work through minor and temporary adjustments to the parenting plan. Other services include:

- Voice of the Child Reports: for parents to learn about their child's views, perspectives, and preferences for consideration when making decisions and plans;
- New Ways for Families<sup>®</sup>: an evidence-informed program and structured method to reduce conflict by emphasizing managed emotions, moderated behavior, checking impulses, and thinking flexibly;
- Family Therapy for Parent Child Contact Problems: for children who are resisting contact with one parent following divorce or a prolonged separation.
- Parenting Plan Evaluations: an independent assessment of a family following separation and divorce to assist parents, lawyers, and the court in deciding on parenting time and decision-making responsibilities that are in the best interests of the children.



## Shared Decision Making

As we have moved through the different phases of the COVID-19 pandemic, parents have been continually grappling with new information and making decisions about the safest arrangements for their children. Decision-making for separated parents during COVID-19 has been especially difficult.

London Family Court Clinic (LFCC) and London Health Sciences Centre (LHSC) partnered to offer Shared Decision Making to families in the community, where previously it was available only to hospital patients. This expansion was made possible through funding by the Government of Canada's Emergency Community Support Fund and Community Foundations of Canada. It was offered free of charge to families for one year.





The Shared Decision Making (SDM) community initiative built on special expertise at LFCC for helping children caught in the middle of parental conflict and the existing SDM program at the Children's Hospital (LHSC). The aim of SDM was to create an environment where families and clinicians work in partnership to arrive at a decision that is supported by the best health evidence and aligned with the family's values, preferences, and goals.

The SDM approach was helpful for participating families wanting to adjust parenting time or transitions, determine testing protocols, or make school-related decisions in the context of COVID-19. SDM also proved to be efficient. Following an intake to narrow the focus to one COVIDrelated decision, only two sessions were needed to determine a preferred decision. The decision coach was also able to incorporate the views and preferences of the children affected by the decision by involving them in the SDM process in an age-appropriate manner.

The SDM program remains available to patients of Children's Hospital LHSC and continues to be available on a fee for service basis to separated parents in the community.

## Facility Dog Program

Our facility dog, NSD Yzer, had been missing her in-person snuggles during the global pandemic. Recently, she resumed supporting children and youth involved in the justice system in-person, including supporting youth in residential settings.

Yzer was generously donated to us by National Service Dogs (NSD), a non-profit organization that provides specialized dog breeding and training to provide the community with the support of a working dog. Thanks to NSD, Yzer is able to provide unconditional support and love to children and youth who most need it. A youth in residential care made Yzer and her handler matching friendship bracelets. She wrote in a card: "Thank you for giving me cuddles Yzer". Another youth in residential care made Yzer a dreamcatcher "so that Yzer doesn't have any bad dreams". NSD Yzer has been able to help facilitate engaging youth in counselling as she provides guiet comfort and unconditional positive regard.



The sustainability of LFCC's Facility Dog Program is wholly dependent on private donations from our community. Expenses such as food and veterinary care add up quickly for this special working dog. As such, we are seeking funding from caring individuals, organizations and foundations in order to both sustain and expand the reach of this worthy project.

If you would like to donate to the facility dog program, please visit our website (www.lfcc.on.ca) and click Donate. Any additional funds received through private donations cover the cost of things such as grooming, equipment, treats, and other unforeseen costs.



## Engaging Clients

#### Through Alternative Therapies

Expressive therapy can play an important role in our work with high-risk youth. Too often these young people feel themselves to be without power, have low self-worth and have a difficult time trusting others. Because of these challenges, talk therapy is not always a successful initial strategy of engagement. Expressive therapy can help to encourage youth to feel comfortable; the use of dance and movement, creative art, and photography are a few examples of expressive therapy. The wonderful thing about incorporating art into our therapeutic practice is that it is available to everyone.All youth seem to respond positively to the suggestion of drawing.

A more directive strategy that has been useful when incorporating art involves getting youth to draw a Yin and Yang symbol. As part of this activity they are asked to symbolically draw their 'shadow' self' which involves those bad experiences and memories a young person may be holding. While youth are not asked to share the details of these experiences, they often do. A youth drew his shadow side which depicted a lot of pain and confusion and he was able to share the pressures that he had been feeling due to gang recruitment and his feeling exhausted because of running from these ties. Through the use of art, youth can feel less on the spot during discussions. It can be a more comfortable way for them to reveal a side of themselves that they are otherwise cautious about sharing.

Photography has been another useful tool when working with youth. During Covid-19 restrictions, when virtual appointments were being held, finding ways to positively engage youth using technology was particularly important.One youth who was prone to become easily dysregulated during computer time found it less stressful and fun to work with her counsellor using photo editing apps on her phone. It allowed this client to be more playful and feel like she was good at something during virtual sessions. How a youth edits a photo can be very informative and offer opportunity for exploration. Putting quotes under images or using emojis to add to photos allows questions to be asked about their choices and representations. Meanwhile the youth can feel insightful and understood.

In both cases these efforts allow youth to produce a creative piece that they are proud of and which they often choose to share with parents. This can lead to a parent feeling a new appreciation for a young person's positive abilities and efforts. As therapists we need to sometimes step out of the 'traditional' clinical box and be non-apologetic about using creative strategies for building rapport and engaging young people.

## Acknowledgements

We would like to thank everyone who contributed to the Annual General Report and Meeting. This wouldn't have been possible without your help.

We would also like to give special thanks to Disha Rawal and Alexis Winfield for creating, designing, and organizing this year's Report and Meeting. We appreciate your hard work!







#### **Our Mission**

Integrating specialized clinical practice, education and research that promotes resiliency in children and families to move beyond the justice system.

#### **Our Financial Supporters**

Bell Let's Talk **Employment and Social Development** Canada Government of Ontario – Local Poverty **Reduction Fund** Health Nexus Mental Health Research of Canada Ministry of the Attorney General Ministry of Children, Community & Social Services Ministry of Health Ontario Centre of Excellence for Child and Youth Mental Health **Ontario Trillium Foundation** Government of Canada's Emergency **Community Support Fund** Community Foundations of Canada Judge Maurice Genest Fund through London **Community Foundation** 



London Family Court Clinic

We appreciate the financial support received this year from individuals and businesses. Your contributions are important to us as they enable us to provide practical supports to clients in need.

Funding for this year's Annual General Meeting and Report is generously provided by the Margaret McCain Foundation.