Creation of an FASD Community Coalition

8th International Research Conference on Adolescents and Adults with FASD Review, Respond and Relate: Integrating Research, Policy and Practice around the World Vancouver April 18-21, 2018

Cindy Olchowy Director

Yvette Kraychy Central Zone Key worker

Sharon Brintnell-Advisor Westlock & District Family and Community Support Services Executive

NorthWest central FASD Network

Occupational Performance Analysis Unit. Occupational Therapy Department University of Alberta







A Success Story

Creating a community support and service network for adults with FASD

A presentation on behalf of the members

WESTLOCK AND DISTRICT FASD COALITION A HEALTHY COMMUNITY IN ALBERTA A PRESENTATION OUTLINE Session Outline

Who we are What we achieved Who we serve How did we get there **Reflection & case example** Where we want to go **Questions & Discussion**

Learning Objectives:

- Increase knowledge and ability to create FASD coalitions
- Consider strategies that maximize funds, share resources, and expand FASD knowledge
- Reflect on how this coalition model can enhance client service

Who is the Coalition Caring local agencies

With a common purpose

- Westlock & District Family & Children Support Services
- Northwest Central Alberta FASD Network
- Barrhead Family & Community Support Services,

• Alberta Justice

• Alberta Health Services

Alberta Supports

o Alberta Child & Family Services,

• HOPE Resource Center

Westlock Independence Network

• Healthy Families, Healthy Futures.

Who we are

Cindy Olchowy	
Executive Director	Family and Community Support Services, Westlock a Provincial and local municipal funding partnership for preventative programs and services.
	Coalition Chair
Yvette Kraychy	
Central Zone Key	NorthWest Central FASD Network
Worker	Assess clients for eligibility and setup Outreach
Sharon Brintnell Coalition Resource	Occupational Performance Analysis Unit, University of Alberta, Professor & Member of NWC FASD diagnostic team & coalition advisor

What we achieved

HEALTHY COMMUNITIES LIKE WESTLOCK ATTRACT PEOPLE NEEDING SERVICES

Westlock Alberta A rural community

Serving approximately 12,750 residents

Westlock and district encompasses

- Westlock County with the Town of Westlock and the Village of Clyde
- Supported by agricultural industry,
- on farm production and agricultural related business.
- A healthy community
- Rich in the location of government services and programs
- Alberta Health Services, Alberta Community and Social Services. Income Support and Employment services the area.

MAP Alberta Photo

What we achieved

- Identified the targeted supports required to meet the complex needs of individuals with FASD
- Created a community coalition to address local issues and service gaps
- Advocated for and contributed to a dedicated FASD community worker
- Harnessed a rich resource base of community services and business to enrich client experience
- Enhanced interagency communication

На

Photos

What we achieved First 9 months

Photos

Funding for Key Worker shared by Network and FCSS

Donations in kind

FCSS provided office space

Key Worker, employee of FASD Network

Outreach Services – supervised by FASD Network, including personnel, case management, reporting

Awareness campaign – mocktail challenge, learning opportunities to the schools, interagency and directly to agencies as requested

What we achieved - Response to need

Client aggregate data to be shared

Before

Client aggregate data to be shared After

What we achieved - FASD worker position

Conditions changes

- Keyworker is located in the Westlock area
- Office space provided by FCSS
- Boardroom still available with HFHF along with FCSS
- o Travel time is cut down
- Smaller geographic area
- More time one on one direct client contact

Results

- Able to meet with more clients in one day
- Private office space to complete forms and have conversations
- Provide more services and able to make closer working connections with agencies.
- Building solid relationships with clients because I'm able to connect face to face on a regular basis.
- Able to attend more appointments with clients ie.. medicals, specialist appointments, addictions, probations, court, AISH, PDD, employment

How we got there

One person's

Vision

 Increase support to Caregivers & Clients in the Westlock district

Commitment to

- Reduce service gaps
- o make a difference and
- o respond to a growing service demands

Resulted in

Bimonthly meetings of community agency and provincial supports personnel

- Key task issues discussions
 - included needs assessment,
 - role responsibility identification,
 - program development,
 - funding and
 - Sustainability

Heightened community participation across many domains

How we got there

FCSS Ex Director - the initiator

- Assessed community assets
- Advocated on behalf of the community
- Worked collectively with stakeholders to:
 - increase, strengthen and develop community initiatives and
 - meet a growing demand for services
- Reached out and connected with like minded groups
- Promised good food

• Sought opinion's from other agencies on

how they were responding to FASD clients

- Sent out invitation (many times)
- Respectful of others' opinions
- o Inclusive
- Meetings began and ran on time
- Timely minutes

How we got there - Agreed on the priorities

- Commitment from Coalition members to focus on service gap on long term basis
- The commitment would not be cumbersome
 the meetings would be short, expectations
 would not create more work for the agencies
- Contributions to the Coalition would be based on strengths, mandate, resources and budget

- Develop financial commitment
- Secure location for point of contact
- Hire dedicated resource (employee) to be community key worker, supervised by FASD Network, having similar staff compliments in neighboring communities.
- Education and Awareness (prevention) be extended to area

How we got there Overcoming client obstacles

Barriers to direct client service

The Dx wait list for FASD assessment

- Compiling information
- Confirming PAE

Compiling the forms

- AISH/PDD/Income support
- Information and criteria needed from the clients to get them set up.
- Getting bank statements, letter from landlord, physical address forms, direct deposit forms.

Medical Needs:

- Finding local services
- Covering cost of transportation to medical needs outside our service area.

Challenges

- Communication between clients, community connections/service providers.
- Miscommunication due to clients not having a phone
- Increase in client case load
- Clients moving out of service area
- Lack of funding/ short term funding

How we got there Improving on the situation

Situation before Coalition support of position

- Keyworker covered a large geographic area
 - meeting clients in their homes
 - or public places
- No private office nor meeting space
- o Lost client time in travel
- Delay in meeting clients in crisis due to distance
- Reduced number of client daily meetings

- Reduced opportunities to
 - Meet local supports & build relationships
 - Advocate for clients
 - Participate in community & local events
 - Promote FASD awareness
- Keyworker was unknown resource

Reflection & case example

REFLECTION

CASE EXAMPLE

What the coalition contributes to community services.

What it means to service agencies and the clients

What can be improved upon

Will it work in other areas

A demonstration of the increased awareness of and supports for an adult client with FASD

Is used to stimulate application of a coalition in other geographic areas

Knowledge Sharing

Where we want to go from here

Celebrate the successes this is working

Work to sustain

- The Coalition
- The outreach services for as long as the need is there
- Political will to address FASD

Expand services to support children.

Where we want to go from here

TRACK EMERGING NEEDS AND CHANGES IN COMMUNITY FORECAST OUR ANTICIPATED NEEDS AND RESPONSE PLANS

Thank You to All **Clients Coalition Partners** and the Community of Westlock

AND FOR YOUR ATTENTION & COMMENTS