



St Mary's Home
PROGRAMS AND SERVICES
DELIVERY MODEL

*Philosophy, Approaches, Practices and Therapeutic
Services*

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St. Mary's Home

St. Mary's Home is a not-for-profit charitable organization that has continuously and responsively served pregnant youth in Ottawa since 1933. Specialized residential and community support services are provided to marginalized young pregnant women (ages 12-25), young parents and their children. The approach is holistic, grounded strength-based approaches with a strong commitment to empowering individuals and strengthening the personal resilience of each individual through a trauma informed lens; at the same time as teaching and developing skills, knowledge and successful parenting strategies and coping skills.

As the only Residential / Shelter program in Eastern Ontario for this population of interest, the Home accommodates homeless young women and newborn infants. Residential support continues from pregnancy until the infant is up to 8 months of age.

Community support and follow-up programs are available for a number of years after the residential support depending on the needs of the family unit; this support is provided at the Young Parent Outreach Centre which opened its doors in January 2002. The Parent Outreach Centre is a 'one-stop' hub of services that include health care, educational support, addictions treatment, mental health support, emergency and weekly food security services, relationship and parenting programs all provided by community partners who support the work. More than 20 organizations are partnered with St. Mary's Home, making specialized services accessible on site. A focus on a strength based and trauma informed approaches along with support for positive parenting and developing healthy attachment in young children are cornerstones of the agency.

Our Clients

St. Mary's Home serves pregnant and parenting youth (12-25 years) and their children in a residential/shelter setting and at a young parent outreach centre.

St. Mary's Home clients present with a list of high risk factors including but are not limited to:

- Anxiety
- Generalized Depression and Post Partum Depression
- Suicidal Ideation/self harm
- Substance Use and other forms of addictions
- Disordered Eating/Eating Disorders
- Low self-image
- Intimate partner violence
- Emotional regulation challenges
- Post traumatic stress disorder/Personality Disorders
- Unstable housing, homelessness and severe poverty
- Child attachment issues

- Behavioral and Emotional challenges from childhood or adolescent trauma
- Disorganized cognitive systems

Criteria for Service

Clients are:

- Pregnant or parenting youth (12-25 years) and their children (birth-4 years) are eligible for services at the Outreach Centre for:
 - Counseling and crisis support
 - Parenting, lifeskills and personal development programming
 - Attachment counselling
 - Addiction counselling
 - Health care services
 - High school credits
 - Basic needs supports
 - Children's programming to support developmental growth and assessment when needed
- St. Mary's Home accepts client referrals from a variety of sources including the young pregnant woman and/or young parent, their family and/or an outside professional.

Service Delivery Philosophy

St. Mary's Home believes that the best way to serve our clients is to use a strength-based and client-centered approach while looking through a trauma informed lens. The Centre recognizes that everyone is unique and that each client has individual social, physical, emotional, spiritual and psychological needs. Whenever possible, and by drawing on our internal and external resources, St. Mary's Home strives to provide services that incorporate the preferences, family and community backgrounds, needs, aspirations, values and cultural beliefs of each client.

Service Approach

St. Mary's Home sees its involvement with young parenting women as being on a continuum of intervention according to the complexity, severity and evolving nature of client need. The agency takes a dyadic approach addressing both the parent and child's mental health needs together. St. Mary's Home maintains a trauma-informed approach which integrates knowledge and skills about trauma in all of its programs, services and organizational structures.

The agency creates a physically and emotionally safe environment for clients, their children, and staff. St. Mary's Home ensures that all persons are treated with dignity and respect.

Multi-Disciplinary Approach

Research indicates that the involvement of all treatment partners is best practice when supporting clients. Contextual information as well as information from all treatment partners about each client is

sought out and discussed during multi-disciplinary meetings. Staff members who represent the parental Support and the Child Development programs, Attachment Counselling, Mental Health and Addiction Counseling engage in frequent dialogue to inform their work, recognizing that the complex issues that bring clients to St. Mary's Home requires support that is broad and developed through a trauma informed lens and a multi-disciplinary perspective. Discussions include: the development, implementation, and review of psycho-educational programs, therapeutic programs, care plans and life skills support, child development, psycho-social assessments, discharge and transition planning.

At the residence/shelter multi-disciplinary team meetings take place weekly using a collaborative approach both through clinical team meetings and for front line staff in the form of client service meetings to discuss the care plan of each client, the needs/support/strengths of each resident and their baby. Referrals are made from the discussions of the successes and the needs for the following week.

Trauma-Informed Approach/Practice

A trauma-informed approach/practice is an organizational structure and therapeutic framework we strive for that involves understanding, recognizing, and responding to the effects of all types of trauma. A program, organization, or system that is trauma-informed **realizes** the widespread impact of trauma and understands potential paths for recovery; **recognizes** the signs and symptoms of trauma in persons we support, families, staff and other involved with the system; **responds** by fully integrating knowledge about trauma into policies, procedures, and practices; and seeks to actively **resist traumatization**.

At the organizational level, trauma-informed practices provide a lens through which policies, procedures, and practices are reviewed and assessed. This includes but is not limited to the following activities:

- Organizational Planning and Performance - Strategic Planning
- Quality Assurance – Improvement Planning and Program and Services Review and Evaluation
- Employee Performance Development, Professional Learning, and Training
- Volunteer Orientation and Supervision
- Risk Management
- Budget and Resource Allocation
- Community Education and Advocacy

As a guide for our practice, the St. Mary's Home utilizes the information in the Jean Tweed Centre document: **Trauma Matters**.

Programs and Services

*Staff members are trained to be trauma-informed and use this approach in conjunction with other therapeutic approaches such as collaborative problem solving utilizing a strength bases lens as well as being attachment-informed. Based on this philosophy, St. Mary's Home takes the stance that clients do well if they can. St. Mary's Home adopts a strength-based approach using various screening and assessment measures in order to identify each individual client's personal strengths and areas for growth. Each client at the St. Mary's Home **Residence** has an Individualized Care Plan that focuses on specific goals as identified by the client in collaboration with their case manager to meet their needs and to promote skill development as well as personal autonomy.*

Residential Programming has a broad range of programs and services that are delivered by community partners and agency staff. These include, but are not limited to, parenting skill development, pre and post natal nutrition care, and access to intense Case Management support, St. Mary's Home and community resources. A client centered /strength-based approach is utilized with clients from the time of admission for planning for the success of these youth and their babies. For as long as a client lives at the Residence and for 3 months post discharge, clients have access to support, programs and services to include transitioning into stable housing in the community.

OUTREACH CENTRE PROGRAMS AND SERVICES

St. Mary's Home Young Parent Outreach Centre has a broad range of programs and services that are delivered by community partners and agency staff. The daily programming and services cover basic needs, reflective parenting and skill development, prenatal nutrition and education, health services, addictions treatment both individually and in group sessions, support counseling, personal and reflective development, enhanced child development and life skills.

The choice of programming that is offered is determined by the availability of suitable evidence based programs, expressed needs from the participants and observation from the multi disciplinary staff team at St. Mary's Home. The format of programs is either parent child joint programs focusing on interaction within the dyad or family unit or programs for parents and children offered simultaneously but separately.

Program evaluations consist of a combination of outcome based self evaluations of increased skills and knowledge and participant satisfaction surveys. The results are shared with the program team which and the Leadership Team. The participant feedback is considered in the selection of future programming.

Child Development Program

St. Mary's Home Young Parent Outreach Centre's child development program provides two types of programming: Parent/Child Programs and Childcare for parents who are participating in our programs and services.

Programming in the Child Development Room is designed to foster positive outcomes and support nurturing relationships between children and parents. It is based on positive parenting and promoting healthy infant/early attachment through role modeling and information sharing.

Two Registered Early Childhood Educators are involved in program delivery and one Registered Child and Youth worker as needed to assist / encourage / support youth parents as needed staff use screening and assessment tools for early identification of infants and children who might be at risk of development delays. Referrals to appropriate outside agencies are completed when required and agreed to by the parent.

Infant and Early Mental Health (IMH) Services

Infant and early childhood mental health, sometimes referred to as social and emotional development, is the developing capacity of the child from birth to five years of age to form close and secure adult and

peer relationships, experience, manage and express a full range of emotions, and explore the environment and learn – all in the context of family, community, and culture (Cohen, Oser & Quigley, 2012, pg. 1). Secure infant-caregiver attachment develops when the parent/caregiver responds to the child's distress in a sensitive and consistent manner. St. Mary's Home provides infant and early mental health and attachment programming in group and individual formats. Two evidence-informed, attachment-based parenting programs, one for infants 0-1 year and another for toddlers 1 to 3 years of age are offered. The programs provide effective infant and early childhood mental health prevention and intervention strategies. Modified Interaction Guidance (MIG) is provided. More information on this below under Counseling.

Counseling

Rideawood Mental Health and Addictions Counselling

Mental Health and Addictions Counselors at St. Mary's Home use an eclectic approach to treatment that is tailored to meet the individual needs of each client. When working with clients who have substance abuse issues, including concurrent disorders, we adopt a harm reduction approach. Counselors at St. Mary's Home use various research-based, evidence-informed assessment tools to guide their practice when helping clients move through the process of change.

Aligned with our trauma-informed approach to service our Mental Health and Addictions Counselors are trained to conduct trauma specific work and use a variety of treatment approaches including but not limited to:

- Motivational interviewing techniques
- Therapeutic Approaches (Emotional Focus Family Therapy – SU and ED, Cognitive
- Behavior therapy, Solution Focused therapy, Acceptance Commitment Therapy, Compassion Focused Therapy)
- Mindfulness based approach

Attachment Counselling

Modified Interaction Guidance (MIG) is an evidence-based intervention for attachment difficulties in parent-child relationships. The MIG intervention is implemented in a one-on-one environment and aims to promote parental sensitivity in the primary caregiver and secure attachment in the child. It helps caregivers respond warmly and promptly to their children's emotional needs, learn to read the cues of the child to promote prompt response and provides techniques to help children develop secure attachment using non-intrusive play techniques.

Short Term Solution Focused Counselling

With the strength-based philosophy of St. Mary's Home clients are seen as the experts in their lives so Solution Focused techniques are used when counseling is needed. The focus is on the clients strengths and resiliency while looking at the presenting problem as having a solution and exploring the steps needed for change. The clients inner resources are explored and what needs to be done differently so change and solution can be obtained. Solution focused short term counseling is effective with our client population.

Client – Centered Approach

Client-Centered Principles for Service Delivery

1. Clients are active participants in as many aspects of their experience at St. Mary’s Home as possible, including but not limited to: participation in the development of their individual care plan if at the residence and reaching their parenting goals through skill and knowledge development. ;
2. Clients are extended the opportunity to take part in the programs and services offered by staff at St. Mary’s Home Parenting Outreach Center and at the Residence including parenting counseling, attachment counseling, personal development psychoeducational groups, specialized reflective therapeutic groups, individual counseling for daily living barriers with a solution focused intervention, and attachment informed parent child relational groups;
3. Clients receive an orientation that includes a copy of “clients rights and responsibilities”;
4. Respect for privacy and confidentiality is maintained in accordance with the St. Mary’s Home privacy policies;
5. Clients are asked to provide input and make decisions and or choices about the services and support they receive within the limits set by the program and delivery framework at St. Mary’s Home ;
6. Accommodations are made, when necessary, to ensure that the client understands the services offered including communicating such information in a manner that is understandable by the client (language, physical challenges, developmental / emotional delays etc.);
7. Barriers to services are minimized as much as possible based on available internal resources and external support;
8. Clients have the right to withdraw from services at any time during their stay at the residence or during their participation in programs or services; and
9. There is a clear path for clients to make complaints and St. Mary’s Home uses this information, when applicable, for continuous improvement.

Collaborative Problem Solving (CPS)

St. Mary’s home Residence and Outreach Center utilize a client-centered, evidence-based approach to treatment with clients. Staff at the Outreach Center and at the Residence have been trained in the past and use this informed approach with clients when necessary to meet the needs of the clients in the moment. Collaborative Problem Solving is an innovative approach to understanding and helping young people with behavioral, social and emotional challenges. CPS is increasingly recognized as a leading practice model in a range of children and youth programming. Collaborative problem solving focuses on building helping relationships and teaching problem solving skills. CPS is founded on an understanding that children and adolescents want to do well if they can, but, at times, do not know how because they may lack the skills to engage in healthy adaptive behavior. CPS is one intervention that can be used and is aimed at giving young people the tools to fulfill their natural desire to succeed by helping them develop a range of possible adaptive solutions.

Client Rights and Responsibilities

St. Mary’s Home supports diversity and strives to be sensitive to race, culture, ethnicity, gender, age, abilities, religion, and sexual orientation. Flexibility is a key element for our success in providing a physically and culturally safe place for our clients. During intake, clients are made aware of their rights including the risks and benefits associated with accessing programs and services at St. Mary’s Home.

Indigenous Programs and Services

Clients are afforded the opportunity to self-identify during the intake process. In keeping with our Service Delivery Philosophy, Aboriginal persons are treated with respect and dignity and St. Mary's Home strives to ensure that their experience is culturally safe by respecting their beliefs, values, history and politics. St. Mary's Home is committed to improving cultural competence by providing pertinent information and relevant training to staff.

Privacy

Recognition is given to the fact that client records are legal documents and are an integral part of service delivery. At the same time, St. Mary's Home ensures that client confidentiality and privacy are respected and that written and spoken information is protected. The acquisition and retention of relevant client information is essential to fulfilling the legal, professional, City of Ottawa and Ministry of Children and Youth Services requirements. We recognize each client's rights to privacy, dignity and confidentiality in all aspects of their life. Client information is collected and only shared in accordance with the St. Mary's Home privacy policies.

Orientation

Clients are provided with an orientation of St. Mary's Home at the start of service. Orientation includes but is not limited to:

- An introduction and explanation of various departments in and programs and services offered by St. Mary's Home;
- A tour of St. Mary's Home (Residence or Centre or both as needed);
- An explanation of the client's rights and responsibilities and risks and benefits;
- An explanation of their right to privacy and use of personal information;
- An intake meeting with the Intake Counselor, or Case Manager at the residence;
- Appropriate referrals are made based on the assessments or self identified needs at intake to counseling, programs and services (community partners supports) to address but not limited to Mental Health supports.

At this time, clients are also provided with a Child Development Program brochure, Programs and Services Handbook and privacy information. A client orientation checklist is completed and signed off by the Intake Coordinator and/or Case Manager. All documents are written in an easy to understand format. Residential clients will receive a Residential Guideline Booklet, Parenting Guideline Booklet and parenting programs required for their care plan including referrals to programs at the Outreach Center. Clients are required to sign an Orientation Checklist indicating that they have received orientation. The checklist is maintained in the client's record. Accommodations are made where possible, to provide this information in a language and/or format that is understandable by the client.

Accessibility of Service

St. Mary's Home makes every effort to remove barriers to service for its clients. The Multi-disciplinary Team explores various strategies to accommodate client needs and individual circumstances such as: child custody arrangements, daily living challenges like housing, poverty, identification recovery, child access and custody concerns, transportation, scheduling conflicts, literacy and mental health needs. Communication is important and St. Mary's Home strives to ensure that the information shared with

clients is understood by them. St. Mary's Home complies with the "Accessibility for Ontarians with Disabilities Act. (AODA), 2005".

Referrals

At the time of intake, St. Mary's Home will direct clients seeking service to the most appropriate resource whether it is internal or external. An active referral to French Language services will be made and an effort made to find services for those needing language services other than French and English.

Transition Planning

Transition planning is an important part of our service delivery model and part of residential client's care plan. When clients leave St. Mary's Home, they participate in the development of a transition plan to identify ongoing goals and to ensure continued support in the community. Prior to discharge/transition, clients are able to access a "transitions counseling program" to assist with planning their transition from St. Mary's Home. The transition plan includes an offer to access services provided by St. Mary's Home following discharge (a therapy session) and recommendations of/or referrals to community services providers. A Community Resource Handbook is given to them

Client Voice

As part of our service delivery model, St. Mary's Home recognizes the importance of client feedback. Participating clients are issued a program effectiveness survey at the conclusion of each program cycle. In addition, a client satisfaction survey is issued annually to collect feedback from all clients regarding the programs and services provided by all departments at St. Mary's Home. The results are used to inform program reviews and evaluations as well as to identify any gaps in service and/or programming for future planning.

Continuous Improvement

As part of the delivery of service model, St. Mary's Home is committed to quality assurance and the ongoing improvement of its programs and services. The agency has a comprehensive process for quality improvement that involves the collection and analysis of data that may include: environmental scans, third party research, current research on evidence informed leading practice, information from the client database, community, staff and client feedback, observations and focus groups. Data is used to inform the planning, review and evaluation of programs, services and practices.

Definition of Terms

Residential Care Plan: A plan that is developed in collaboration with the client and staff members who are directly involved in the client's care and counselling program. The plan outlines goals for the client that are directly linked to the client's identified area of need, as well as the strategies the client intends to utilize to achieve her goals.

Infant and Early Childhood Mental Health: Infant and early childhood mental health, sometimes referred to as social and emotional development, is the developing capacity of the child from birth to five years of age to form close and secure adult and peer relationships, experience, manage and express a full range of emotions, and explore the environment and learn all in the context of family, community, and

culture (Cohen, Oser, & Quigley, 2012, pg. 1).

Mental Health: Mental health is defined as a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community (World Health Association, 2014).

Substance Use: Substance abuse refers to the harmful or hazardous use of psychoactive substances, including alcohol and illicit drugs. Psychoactive substance use can lead to dependence syndrome - a cluster of behavioural, cognitive, and physiological phenomena that develop after repeated substance use and that typically include a strong desire to take the drug, difficulties in controlling its use, persisting in its use despite harmful consequences, a higher priority given to drug use than to other activities and obligations, increased tolerance, and sometimes a physical withdrawal state (WHO, 2016).

Concurrent Disorders: *Concurrent disorders* describe a condition in which a person has both a mental illness and a substance use problem. This term is a general one and refers to a wide range of mental illnesses and addictions. For example, someone with schizophrenia who abuses cannabis has a concurrent disorder, as does an individual who suffers from chronic depression and who is also an alcoholic. Treatment approaches for each case could be quite different (Canadian Mental Health Association, 2016).

Trauma-Informed Care/Approach: a trauma-informed approach/practice is an organizational structure and treatment framework that involves understanding, recognizing, and responding to the effects of all types of trauma. A program, organization, or system that is trauma-informed **realizes** the widespread impact of trauma and understands potential paths for recovery; **recognizes** the signs and symptoms of trauma in persons we support, families, staff and others involved with the system; **responds** by fully integrating knowledge about trauma into policies, procedures, and practices and **seeks to actively resist** traumatization.

Collaborative Problem Solving (CPS):

Collaborative Problem Solving is an innovative approach to understanding and helping young people with behavioral, social and emotional challenges. CPS is increasingly recognized as a leading practice model in a range of children and youth programming. Collaborative problem solving focuses on building helping relationships and teaching problem solving skills. CPS is founded on an understanding that children and adolescents want to do well if they can, but, at times, do not know how because they may lack the skills to engage in healthy adaptive behavior. Intervention and treatment based on CPS are aimed at giving young people the tools to fulfill their natural desire to succeed by helping them develop a range of possible adaptive solutions. Continued training of staff with these approaches can be ongoing as needed.

St. Mary's Home Centre Policy and Procedures

The following St. Mary's Home Policies and Procedures provide procedural information related to St. Mary's Home Program and Services Delivery Model:

Human Resources

Anti-Discrimination
Anti-Racism, Diversity and Inclusion
Workplace Harassment, Sexual Harassment, and Violence

Privacy

Collection, Use, and Release of Personal Information
Confidentiality of Client Information – Client Files/Records
Privacy of Personal Health Information
Use of Client Information in Public Relations Activities
Breach of Privacy of Information

Quality Assurance

Programs and Services Review and Evaluation
Strategic Planning and Quality Improvement Planning

Programs and Services

The St. Mary's Home Residential Policies and Procedures Manual