Wrap Around Family Intervention and Campus Outreach/Immersion:

_Fostering resilient families and removing the psychological barriers to post secondary education_
Our Team

Senior Management

Dr. J. Douglas Salmen Jr.,
Executive Director, Neuropsychologist

Heather Polzin
Director, Clinical Services/OT

Psychological Services Providers

Dr. Arun Pillai
Clinical, Rehab Psychologist

Andre Kozlowski
Rehab Psychological Associate

Dr. Jeffrey Karp
Clinical, Rehab Psychologist

Dorrie Brezina
Neuropsychologist

Lorrie Phe
Psychologist

Dr. Tatiana Durnietscu
Psychologist

Dr. Natasha Browne
Clinical, Rehab Psychologist

John Leopold
Vocational Rehab Consultant

Gloria Manlo
Psychometrist

Jennifer Hanenich
Psychometrist/Fire Analyst

Robert Brown
Risk Safety Consultant

Richard Heim
Risk Safety Consultant

Sid Kimel
Quality Assurance/Fire Analyst

Cindy Magal
Social Worker/QA Specialist

Pam Zuer
Vocational Specialist

Occupational Therapy Services Providers

Fernando Jones
Occupational Therapist

Ani Kaplan
Occupational Therapist

Tim Chang
Occupational Therapist

Shanell Beaublanc
Occupational Therapist

Jane Wong
Occupational Therapist

Administration

Chastane Swerdlow
Interim and Scheduling Coordinator

Ninsa Sehna
Office Assistant

Heem Vandell
Administrative

Sarah Hailer
Special Projects Coordinator

Tyler Salmin
Special Projects Coordinator

Lauren Smack
Administrator
RTW Integrated Health Management (RIHM) follows a social enterprise model providing unique services in the public and private spheres with focus on enhancing public health care and rehabilitation through innovation, evolving evidence-based care, a focus on the social determinants of health, social/environmental justice advocacy and related professional education/training initiatives.

RIHM's evolving evidence-based care model and related interventions are supported by research initiatives by *Rehabilitation Research, Education and Evaluation Services* (www.rrees.com), close linkages with the Mental Health Program/Psychology Department at University of Toronto Scarborough, industry funding partner Multi-Health Systems (www.mhs.com) and national accelerate grant funder MITACS (www.mitacs.ca).
WHAT WE DO – OUR SERVICES

As a dynamic and interdisciplinary rehabilitation and organizational disability management firm, RTW Integrated Health Management (RIHM) consistently delivers expert clinical and vocational assessment treatment and intervention in relation to:

- Acute through vocational rehabilitation stages
- Integrated clinical and assessment services
- Functional restoration & Vocational Rehabilitation Fast-Stream Treatment Programs
- Comprehensive & Integrated Extended Treatment Programs
- Educational Programs and Updates in the Field for Healthcare & Legal Professionals
*The Gladue process is a Supreme Court of Canada mandated assessment of Aboriginal/First Nations persons whereby such individuals undergo an exhaustive psychosocial developmental assessment to assist the court in considering alternative sentencing tools to foster rehabilitation, community reintegration, reduced recidivism, and to place “particular attention to the circumstances of aboriginal offenders” in efforts to redress: “The drastic overrepresentation of aboriginal peoples within both the Canadian prison population and the criminal justice system”. The Fetal Alcohol Spectrum Disorder (FASD) pilot project in which RIHM is involved is co-sponsored by Anishnawbe Health Toronto (Community Health Care Clinic; www.aht.ca) and Aboriginal Legal Services of Toronto (www.aboriginallegal.ca). The project involves a multi-disciplinary pre-sentencing assessment (including Gladue-Social Worker, Physician, Neuropsychologist, Traditional Healer) of the incarcerated person towards the potential diagnosis of FASD, and holistic treatment/rehabilitation recommendations in the context of a feedback meeting oriented strictly for the offender, and a related report for the court/sentencing judge. For further information pertaining to the Gladue process, please visit http://media.wix.com/ugd/fcfa63_559c20fbeb794eb59975b0abd3b6f0d3.pdf.
Wrap Around Family Intervention: Creating resilient families
Centre for Family, Child and Adolescent Advancement:

www.cfcaa.com

Evidence based wrap-around family intervention model
Initial Pilot Target Group

• At Risk Children/Parents Include known or suspicions of:
  – Fetal alcohol (FASD);
  – Learning disability;
  – Traumatic brain injury (to moderate); AD/HD;
  – Psychological Disorders (to moderate)
Pilot activity summary

- 32 families treated over 18 months (Interim)
- 2 parent coaches: Indigenous (FTE); Caribbean (.5 FTE)
- 42 families served total

- 30 families of Indigenous identity
- At one point 12 families active NCFST protection
- One coach of Indigenous background
Centre for Child Family & Adolescent Advancement Model

- Pilot model then in-house training for NCFST in-home-based parenting/family intervention education program, with comprehensive supports:
  - Facilitating in home environment safety and stabilization (housing, food/nutrition/budgeting/daily routine/organizational management, etc.)
    - Parenting/disciplining/coping life skills development.
    - Parenting educational/support group.
    - Individual counselling and support.
  - School liaison, homework support, psychoeducational assessments → IPRC support and addressing of barriers to full benefit for children/youth
    - Cultural community integration (spiritual, recreational, educational)
    - Vocational facilitation for youth and parents re-entering workforce: skills and income upgrading
  - Specialized assessments: Neuropsychological; Psycho-educational; Psychodiagnostic; Psychovocational; medical/visual/auditory/speech-language assessment
    - Advocacy and community referrals
<table>
<thead>
<tr>
<th>Infant-Pre-School Stream</th>
<th>K-8 Stream</th>
<th>9 – 12 Stream</th>
</tr>
</thead>
<tbody>
<tr>
<td>3. Early Years Centres involvement?</td>
<td>3. Non-custodial parent support.</td>
<td>3. Occupational placement support</td>
</tr>
<tr>
<td>5. Culturally sensitive/oriented milieu support.</td>
<td>5. Educational advocacy based upon “3”.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>7. Psychoeducational reviews.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>8. Culturally sensitive/oriented milieu support</td>
<td></td>
</tr>
<tr>
<td></td>
<td>9. Parental career support: Vocational/Neurovocational asst</td>
<td></td>
</tr>
<tr>
<td></td>
<td>10. Individual/group counselling.</td>
<td></td>
</tr>
</tbody>
</table>
Example of depressed single father (of 3 boys) who had never before parented

• The children displayed significant emotional and behavioural symptoms (chronic runaway, no supervision, crying, fighting, and profound school issues).
  
• Parent Educator provided the following interventions leading to highly successful improvement in family/each individuals’ functioning
Example Interventions

- Family and personal calendars: Helped organized the day with a schedule of events for each child, including when to get them up, prepare breakfast, buy food, clean house, homework/read
- Set up talking circles and story times to help the children and the father to communicate and problem solve
- Introduce an elder to support the families
- Linked the families to Native support groups
- Address school problems by advocating with the school, providing psychological/educational testing, changing schools, obtaining a special class, negotiating with the school principal, initiating tutoring support
Outcome Evaluation

- CFCAA has developed an outcome evaluation system based on the widely used instruments combined with specialized rehabilitation measures (ROMS; www.rrees.com)
- Instruments directly measure the service objectives
Measures

• **Life Skills**: measured by the R-ADLS (ROMS)

• **Parental relationship** – Parenting Stress Index (PSI), Behaviour Management (BMSA)

• **Social/community linkage support** - Interpersonal Support Evaluation List (ISEL)

• **Children** – Conners’ Global Index (CGI)

  • **Teens** - The Conners’-Wells Adolescent Self-Report Scales (CASS)

  • **Adults**: The Conners’ Adult ADHD Rating Scales (CAARS)
Higher scores reflect improvement towards pre-condition baseline.
Improvement direction dependent on subscale
CFCAA Model - Recognition

Heather Pickin
RIHM Director, Integrated Rehabilitation and OT Services

Approaching 20 years now, Heather has worked as a consultant to personal injury and motor vehicle accident victims, their lawyers and insurers, providing:

- Occupational Therapy and Rehabilitation Management Services following severe and catastrophic injuries
- Family Dynamics and Value of Service Analyses in cases of permanent disability or accidental death
- Vocational Analyses, Work Site/Ergonomic Evaluations; Return to Work Negotiating and Planning
- In-Home Functional Assessments; Functional Reintegration Programmes
- Attendant Care Needs Assessment
- Future Care Needs Analyses
- Accommodation Needs Assessment and Discharge Planning
- Rehabilitation Case Management
- Home and workplace design and modifications, in consultation with architects and quantity surveyors.
Case Study (protected name)

BACKGROUND

• Joan is a 57 year old single Indigenous woman with a complex medical history, including multi-trauma/abuse experiences.
• She sustained a head injury in a motor vehicle accident twenty-four years ago with residual cognitive impairments (inc. poor short term memory, planning and organisational skills).
• She has cancer and is on the transplant waiting list while continuing to having ongoing tests and chemotherapy.
• She reported low mood, weight gain and anxiety when stressed, along with low self-esteem and confidence; consequently she has few social contacts.
• She lives alone in subsidized housing, receiving a monthly ODB income which covers her rent, utilities, food and basic needs with nothing left for recreational activities.
• Non-restorative sleep due to pain and discomfort resulting in fatigue has left her unmotivated to initiate and sustain a meaningful daily routine; her home became cluttered and disorganised adding to her stress and anxiety.
OT Intervention

• Outstanding functional issues and goals were identified immediately: e.g. to improve planning and organisational skills and so effect change in managing housekeeping, reducing clutter, meal planning, tracking income, expenses, budgeting and saving, filing medical documents/bills etc, maintaining a daily exercise plan (walking and cleaning); with savings purchased 1st computer
• Contact with other resources including VHA Community Support, Alternatives, Dieticians, CCAC OT
• Assistance indentifying issues client needed to raise with her health practitioners – making lists and keeping notes.
• Now reviewing volunteer options based on client interest; readiness affected by health status (ongoing symptoms, new medications, multiple hospital appointments, cataract surgery).
• Facilitating applications or recommendations for assistive devices through ADP and OSDB funding e.g. replacement RTS and long handled devices, community gym membership, funding for light therapy lamp, Lumosity and organisational tools. With funds saved she was able to purchase a tablet.
• The R-ADLs graph shows the functional gains made since OT intervention was initiated between July 2015 and January 2016.
“Joan”: Higher scores reflect improvement towards pre-condition baseline
UTSC Campus Outreach/Immersion:

Removing the psychological barriers to post secondary education
Kimberley Tull
University of Toronto
Scarborough
Manager, Manager,
Community Development &
Engagement
Planning, Partnerships and
Strategic Affairs
Kingston Galloway/Gabriel Dumont Community – One of Canada’s largest urban Indigenous communities

steps away from...

- University of Toronto – Scarborough
- Centennial College – Morningside Campus
• UTSC as rich “pre-graduate” multi-faceted immersive family resource
The Indigenous presence is strong and growing...
Toronto Pan Am Sports Centre UTSC + Toronto Parks & Rec:
Where family’s can play together...
UTSC – Towards tutoring support, STEM exposure, library & beyond
UTSC: Perhaps the world’s most diverse campus
“We’re all here” ... surrounded by nature
While also, the campus of tomorrow...
Real, current, 

Career Exposure...
CAREERS

after

MATH, STATISTICS &
COMPUTER SCIENCE

PANEL & NETWORKING
NIGHT

Wednesday, March 9 • 5-7pm • IC Atrium

Wondering what types of careers graduates of computer science, math, and statistics have pursued?

Attend this event to network with and learn the career stories of various professionals!
For a list of professionals who will be attending this event, please check cln.utoronto.ca.
DOCTOR FOR A DAY
HAVE YOU EVER WANTED TO KNOW
WHAT IT WOULD BE LIKE TO BE A DOCTOR?

MARCH 04, 2016
11am - 3pm
MEETING PLACE

CAREERS
MATH, STATISTICS &
COMPUTER SCIENCE

Panel & Networking Night

Wed, Mar 16, 2016
5pm - 7pm
AA160

CAREERS after psychology

Learn about career options for psychology graduates
and hear from a panel of alumni about what they
did with their degree. Ask questions and get advice
on how to navigate your career path.

If you require an accommodation due to a
disability please contact Esther Chung at
echung@utsc.utoronto.ca

Wednesday, March 9 • 5-7pm • IC Atrium

Wondering what types of careers graduates of computer
science, math, and statistics have pursued?

Attend this event to network with and learn the career stories of various professionals!
For a list of professionals who will be attending this event, please check cinc.utoronto.ca
IN the FIELD
real success

Join us on a workplace tour!

toronto ZOO

WHEN
Tour: Friday, March 4th
9am - 12:30pm

WHAT
• Behind the scenes tour @ The Toronto Zoo
• Introduction to a range of career paths @ The Toronto Zoo

HOW
Prep Session: Monday, February 29th
4pm - 5pm
AC 321

EXPIRY DATE
MAR 04 2010

Register on clin.utoronto.ca for a mandatory prep session.

Thursday, March 3 • 5:30-7:30pm
ESCB Atrium (New Environmental Science Building)

Learn what you can do with a science degree.
Meet professionals who are currently putting their science degree to work.
Expand your knowledge about career options and how to make a smooth transition from school to work. For a list of representatives from a variety of fields who will be attending this event, please check clin.utoronto.ca.

RSVP
for event at clin.utoronto.ca.
BUILD YOUR CO-CURRICULAR RECORD TODAY!

VISIT uoft.me/utscccr TO LEARN MORE ABOUT THE CO-CURRICULAR RECORD

THE DEPARTMENT OF STUDENT LIFE
Casual dance comp practice late on a Saturday night...better place for youth to hang out?
VOLUNTEER

Want to be part of something bigger?

SIGN UP FOR A COMMUNITY ACTION PROJECT

FOR MORE INFO, VISIT uoft.me/communityvolunteer

Tell your story at UTSC. Explore the Co-Curricular Record (CCR) for involvement opportunities! Visit uoft.me/CCR and get started today.

Follow us on Twitter! @utscstudentlife.

Upcoming Events

WELEAD: Community Building (Leadership Development)
Tue Mar 8

Department of Student Life - Indigenous Seminar Series
Wed Mar 9

ILEAD: The CCR & Building Your Resume
Wed Mar 9 @ IC-318

Today
-2° / -3°

Mon
8° / 1°

Tue
11° / 3°

Wed
14° / 2°
Co-op Programs
University of Toronto Scarborough

- 13 Academic Departments
- 30 Co-op Programs
- 2,500 registered co-op students
- Campus enrollment is 12,000
- Co-op programs *only offered* at UTSC campus
- Platform to advance students on success trajectory
- 1,000 paid co-op work terms per year
- Arts and Science Co-op Programs grown by 300%
- It’s about how you leave, not how you got in
NWOW – Navigating the World of Work  Developed by Roger Francis

• Introductory course for new co-op students
• Onboard, acclimate and provide opportunities to learn through doing
• Networking events
• Simulation assignments/activities
• Direct industry engagement
• Programming that has learning objectives and outcomes
• Allows for *self-reflection to happen earlier*
• The purpose is vocational with the focus on the ecosystem of self, environment and career success
However, attending UTSC or Centennial per se is not the goal...

Breaking down the psychological barriers to post-high school studies is critical to assure the impact of free tuition