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**Additional material
available on the
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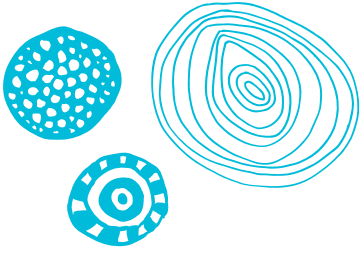
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C.8 Sample: Power To Be Staff and
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Appendix A

A.1 Sample: Leisure List

Sample: Leisure List

Please see this list as a source of inspiration to increase your engagement in leisure activities, whether these are new to you or old favourites, while always ensuring that you are following your government's guidelines to help ensure your safety and other people's in the context of the covid-19 pandemic.

Aerobics Animals (e.g. documentaries/YouTube videos, memes) Arrange to eat at the same time as a friend, so you can talk over breakfast/lunch/dinner Art Astronomy Audio books

Blogging (online journal)

Calligraphy Charades (virtual) Chess online (play, watch others play, tournaments, etc) Colouring in Computer games Computer programming Crafting Create a playlist (why not share it with friends?) Create an online quiz for friends Creative writing

Dance (or how about a dance-off?) on Tik Tok Set up an online dating profile Debating Online devotional activities (prayer, worship etc) Discuss books or films Doodle Download a new app Draw (e.g. a self-portrait or the view from your window)

Event or party planning for when quarantine is over Exercising

Family (chat online) Fantasy football Film making

Gadgets Genealogy Gratitude list (nightly) – see template here 

Give yourself a hand or foot massage Gift-giving Golf (online)

Hair styling Have a discussion

Journaling Juggling

Karaoke (why not try a virtual sing-off?)

Laughter yoga Learn how to say 'it's nice to meet you' in a new language Learn something new Life admin (e.g. emails, paperwork) Listen to others Listen to music Look at or organise photographs/albums

Magazines Magic tricks Make-up Manicures/pedicures Meditating Meet new people online Mindfulness meditation Motorcycles (magazines, documentaries etc) Multi-player gaming Music (making or listening)

Nature (e.g. what trees/plants/birds can you see from your window?)

Online colouring in Online shopping/browsing Origami Organise the contents of your cupboards, etc

Paper crafts Photoshopping Pinterest Play (spider) solitaire Photography Podcasts Poetry Practicing karate Practicing yoga Play a musical instrument (for yourself or to others online) A virtual push-up challenge

Radio Read a book for pleasure Recipes (e.g. find things you'd like to make during the cold weather to come) Relax Religion (reading, documentaries, debating, prayer) Research somewhere you'd like to visit in the UK

Scrapbooking online Sing Sketch Skip Social media (try a new site?) Solving riddles Sort the photos on your phone/laptop into folders Story telling

Tai chi Take a virtual trip or tour Talent show Talk on the phone Take online classes Teach someone something new to them (e.g. a dance or song) Technology TED or TEDx Talks Theatre (watching plays, musicals online) Tik Tok

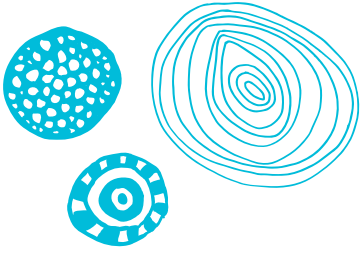
Unplug all your electronic gadgets for an hour UoN TikTok ('uniofnottingham') – a place for students to share lockdown experiences with each other

Video games Vlogging

Watch the sunrise or sunset Watch a movie online at the same time as friends/neighbours Watch a boxset/series Wish List (things you most want to do after quarantine ends) Word puzzles Writing (stories, books, poetry) Write a card or letter to cheer someone up Work out

Zumba

Other: _____



Appendix B

B.1 Samples: Wellness Proposal

B.2 Template: Wellness Proposal

Samples: Wellness Proposal

Sample #1

Outdoor Pursuits	
EDGE Program The EDGE is a multi-week mental health recovery program for youth. \$1000/year would fund 3 youth to attend the program.	\$2,000 (\$1,000/year)
Outdoor Recreation and Social Group Some activities to include youth with their families (parents, siblings etc.). Summer Series Weekly recreational activities to include hiking, kayaking, horseback riding, rowing. Costs include transportation, kayak rentals and instruction, Grouse Mountain passes, rowing fees. Winter Series Weekly recreational activities to include snowshoeing, hiking, climbing centre, aquarium. Costs include transportation, Grouse Mountain passes, tubing costs, climbing centre costs.	\$2,000 (\$1,000/year)
Wellness, Self-exploration and Empowerment	
Recreation/Fitness/Leisure Exploration Fund A fund for clients to try recreation/fitness/leisure activities. Sometimes being able to offer a free class can be enough to spark interest in exploring a leisure interest. Could include: <ul style="list-style-type: none"> • Punch cards for recreation centre • One-month intro pass for yoga studio near Foundry centre Some activities to include youth with their families (parents, siblings, etc.).	\$2,000 (\$1,000/year)

<p>Self-care/Independent Living Skills for Marginalized Youth</p> <p>Many of our outreach clients lack access to funds for self-care activities such as haircuts, driver's training and transportation.</p> <p>Fund to include:</p> <ul style="list-style-type: none"> • Haircut vouchers • Work clothing • Food vouchers • Driver's training • Transit passes • Other items as needs arise 	<p>\$3,000 (\$1,500/year)</p>
<p>A Special Projects Grants Fund</p> <p>Creation of a grants program for youth and staff to apply for funding to pursue a project that they would like to lead. Youth often identify an idea for a group that isn't offered (e.g., a music group, painting a mural for the community garden, etc.) and it would great to have extra funds and hours for a Peer Support Worker to facilitate a group to do that youth-led project with its own small budget.</p>	<p>\$4,000 (\$2,000/year)</p>
<p>Game Ready</p> <p>Game Ready Fitness Youth Development Programs aim to provide positive leadership to youth in the community. Youth are teamed with professional and Olympic athletes to provide them with encouragement and athletic training. Youth learn how to be productive, positive, well-balanced and physically fit.</p> <p>Money allocated to Game Ready could help to provide a weekly program, offer it at the local high school and also potentially pilot a version for the 12-16 age group.</p>	<p>\$3,000 (\$1,500/year)</p>
<p>Arts and Culture</p>	
<p>Build on our forming relationship with Squamish and Tsleil-waututh Nations by co-creating workshops for youth that incorporate First Nations culture and wellness.</p> <p>Examples include:</p> <ul style="list-style-type: none"> • Dreamcatcher workshop • Wellness workshops with Elders <p>Costs include honorariums for Elders and community teachers, as well as general costs for materials.</p>	<p>\$2,000 (\$1,000/year)</p>

Sample #2

<u>Activity</u>	<u>Sept 2019 - Aug 2020</u>	<u>Sept 2020 - Aug 2021</u>	<u>Comments</u>	<u>Two Year Total</u>
Yoga Classes	1,800	1,800	Yoga with emphasis on physical exercise and breathing. Initially one class per week during 36 weeks in school year. Instructors paid \$50/session. Mats, towels and water provided for new students.	3,600
Outdoor Recreation Adventures	1,000	1,000	Connecting youth with outdoor recreation experiences with specially trained guides at Agur Lake Camp or Hoodoo Adventures - kayaking, paddleboarding, fishing, mountain climbing, etc. Biweekly adventures during the summer months. Estimated \$250/session.	2,000
Cooking Program	1,800	1,800	An 18-week cooking program in our teaching kitchen, in partnership with Red Seal chef at Hillside Winery. We are also exploring a connection with Farm Fresh that does both education programs and social enterprises with 'farm to table' activities. Expenses are for ingredients and kitchen tools, chef is volunteering. Program includes practical life lessons in shopping, budgeting, life skills.	3,600
Community Dinner	1,200	1,200	Seasonal community dinners at Foundry to celebrate holidays/seasons. Youth leaders would be hosts and actively involved in planning and preparing the food and activities. Expenses are for food, decorations and activities.	2,400
Leadership and Land- based Teachings	2,000	2,000	An emerging partnership with Penticton Indian Band's Youth Engagement Worker to co-develop and deliver a curriculum that teaches personal and relational leadership, with connections to land-based experiences and teachings with Elders. Activities have not been determined yet pending visioning exercises with staff and youth.	4,000

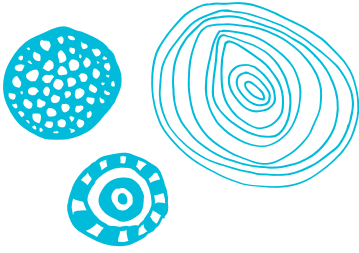
Visual Arts Program	1,800	1,800	Visual arts or multi-media classes. Plan with youth what kind of classes they would like to try and work with local artists to facilitate either a series of classes or one-time workshops. The expenses include supplies, venue (if outside Foundry) and instructor.	3,600
Weekly Wellness Activites	3,200	3,200	Weekly recreation and education activities based on input of youth and peer support workers. Activities cater to different ages - 19-24 or middle school and high school students. Lots of variety in activities: skating, swimming, paddleboarding, beach bonfires, dating and sex workshop, wall climbing, laser tag, karaoke, billiards, local festivals, etc.	6,400
Meditation and Mindfulness Workshop	600	600	Youth have requested Meditation and Mindfulness workshops. This would be two series of a 6-week program, pre-registered program with the same cohort of youth. Strong evidence-based practices with trained facilitator who does trauma-informed yoga and mindfulness classes.	1,200
Recreation Equipment	977		Purchase of recreation equipment to support programming - yoga mats, sports and outdoor supplies for weekly wellness activities.	977
TOTAL	\$ 14,377	\$ 13,400		\$ 27,777

Template: Wellness Proposal

Outdoor Recreation and Physical Activities (Physical Domain)	Budget \$
<ul style="list-style-type: none"> • Weekly recreation activities-hiking, cycling, skiing, horseback riding, rock climbing • Water-based activities – kayaking, canoeing, rowing • Community events & outings • Passes, transportation, equipment rental and instruction • Seasonal Activities: Fall/Winter/ Spring/ Summer series 	/Year
<p>Youth initiatives for Outdoor Activities (nature/land based programming)</p> <ul style="list-style-type: none"> • -Initiatives to be developed by the Youth Advisory & Peer Engagement workers • -Mentorship from healthy role models, sports teams, athletes • Indigenous land-based programming • Group, team or individual • Community Partnerships (Parks & Recreation, YMCA/YWCA, camps, local organizations) 	/Year
Wellness and Leisure exploration (Social /Emotional Domains)	
<p>Recreation Exploration fund –</p> <ul style="list-style-type: none"> • A fund to trial new leisure activities and promote interest/skill development • Could include: drop-in punch cards for local community recreation facilities <ul style="list-style-type: none"> - Yoga, Mindfulness, Weight rooms, swimming pool • Opportunity to sustain friendships and social connections • Low barrier • Gender diverse programming 	/Year
<p>Life Skills/Self Care</p> <ul style="list-style-type: none"> • To promote independence/ community inclusion • Funds could include: Hair cuts vouchers, clothing, food vouchers, loaded compass cards 	/Year
<p>‘Special Projects’ Fund</p> <p>Creation of a youth-led project</p> <ul style="list-style-type: none"> • Peer-led but Foundry supported with a small budget. 	

<ul style="list-style-type: none"> Youth driven and peer/staff supported. Could include: Community Garden, Community Special events & Cultural celebrations Opportunity for Youth Leadership 	/Year
<p>Leisure groups:</p> <ul style="list-style-type: none"> In house drop- in and structured group Instructor fees or Guest Social media awareness & use Friendship/ social Other youth 	/Year
Arts and Culture (Cultural & Spiritual Domain)	
<p>Cultural opportunities and programming; community partnerships with Elders and teachers</p> <ul style="list-style-type: none"> First Nations culture and wellness. Youth driven initiatives Land-based programming <ul style="list-style-type: none"> - Dreamcatcher workshop, - Holistic wellness workshops with Elders - Drumming - Cedar bark weaving - Sweat Lodge - Fishing - Costs to include honorariums for elders and cost of supplies 	/Year
<p>Art Exploration</p> <p>Exploring visual, expressive arts and mixed media</p> <ul style="list-style-type: none"> Art Therapy and/or classes Dance Creative writing; journaling Local art galleries, dance studios Contract Art Therapist & Music Therapist Music – rap, hip hop Paint Party - 	/Year
Peer Engagement	
Peer Support hours	

<p>Ongoing peer support to facilitate youth engagement in recreation and wellness activities.</p>	<p>/Year</p>
<p>Youth Empowerment Youth honorarium fund to empower youth 'mentors'</p> <ul style="list-style-type: none"> • Youth volunteer & leadership opportunities • Open Studio • Engagement Strategies for sustaining Wellness initiatives • Youth feedback on Wellness initiatives • Digital Storytelling 	<p>/Year</p>



Appendix C

C.1 Template: Session Plan

C.2 Sample: Session Plan

C.3 Sample: Check-In Activities

C.4 Sample: Icebreakers

C.5 Sample: Check-out Activities

C.6 Risk Management Checklist

**C.7 Sample: Power To Be Informed Consent and
Acknowledgement of Risk Form**

C.8 Sample: Power To Be Staff and Participant Information Form

Template: Session Plan

<u>PROGRAM SESSION TITLE:</u>	
<i>Date and Time:</i>	<i>Leader(s) Name(s):</i>
<i>Participant(s):</i>	<i>Volunteer(s):</i>
<i>GOAL 1:</i>	
<i>Objective 1.1:</i>	
<i>Objective 1.2:</i>	
<i>GOAL 2:</i>	
<i>Objective 2.1:</i>	
<i>Objective 2.2:</i>	
<i>Materials:</i>	<i>Equipment:</i>

Safety Concerns:

Preparation Steps:

<i>TIME</i>	<i>CONTENT</i>	<i>PROCESS</i>	<i>LEADERSHIP STYLE (Description)</i>

Sample: Session Plan

Program Session Title: Go with the Flow (Fluid Art)	
Date and Time: Wednesday, March 18, 2020 4:00-4:40pm	Leader(s) Name(s): Paulina
Participant(s) 4-5	Volunteer(s) N/A
<p>Goal 1: To demonstrate the ability to develop emotional expression appropriately</p> <p>Objective 1.1: To demonstrate the ability to identify one's emotions, thoughts and values and how they influence behaviour</p> <p>Objective 1.2: To share thoughts and emotions they are thinking/feeling in the moment</p> <p>Objective 1.3: To state why they might be thinking/feeling particular emotions</p> <p>Goal 2: To develop a repertoire of anger management skills</p> <p>Objective 2.1: Develop one or two anger management techniques to help with emotion regulation</p> <p>Objective 2.2: Able to adopt and apply anger management techniques to daily life situations to mitigate outbursts</p>	
Materials: Acrylic paints Gloves Aprons Disposable cups Canvases (2 x 5"x7") Silicone (optional) Stirring sticks	Equipment: Table Tablecloth
<p>Safety Concerns: Acrylic paints splashing on the participants Participants slipping on paint Inability to feel safe enough to express emotions or thoughts</p>	
<p>Preparation Steps:</p> <ul style="list-style-type: none"> • Purchasing/locating materials • Setting up the chairs and table • Making sure the table is protected • Ensuring participants are wearing aprons and gloves 	

Time	Content	Process	Leadership Style (Description)
3:55 – 4:00pm (5 minutes)	Beginning Preparation	Setting up the table – cover the table with plastic. Preparing paints and materials – put them on the table. Ensuring there are enough aprons and gloves for the participants.	
4:00 – 4:02pm (2 minutes)	Welcome participants & explain session outline	<p>Greeting all the participants by first name. Inviting them to sit down at the art table. Explaining session outline and going over the goals and objectives of the session.</p> <p>“Today we are going to nurture our artistic self-expression by creating some fluid art on canvases. We are also going to walk through some techniques that can help us navigate our angry emotions and that will teach us to re-direct or express our anger in a healthy and constructive way. Our goal is to have fun and relax. This is a space of safety and creativity. We hope to gain a new anger management skill and also learn to express our anger in a healthy way.”</p> <p>The session outline includes:</p> <ol style="list-style-type: none"> 1. Icebreaker 2. Anger management technique 3. Acrylic pouring 4. Presentation/reflection 	<p>Directing: Telling participants what our session entails. A brief description of our goals and the benefits they will receive from this experience. Setting a timeline.</p> <p>Coaching: Providing positive and energetic attitude. Telling the participants to relax and expect to have fun.</p>
4:02 – 4:07pm (5 minutes)	Toilet paper icebreaker	<p>Introduce the icebreaker game. Explain the rules and instruct the participants to tear a piece of toilet paper from the roll.</p> <p>“Tear as much as you would need and pass the roll around to the others.”</p> <p>Wait for participants to finish tearing toilet paper.</p>	<p>Directing: Providing clear, detailed instructions of the activity</p> <p>Facilitating: Encouraging social interactions. Positive, energetic attitude. Monitoring the participants’ emotional well-being.</p>

<p>4:07 – 4:15pm (8 minutes)</p>	<p>Teaching coping strategies as an anger management technique</p>	<p>“Now count the squares of toilet paper. For every square that you have, please tell us something interesting about yourself.”</p> <p>“Anger Management education promotes anger reduction and increases self-esteem among youth. It also improves a student’s coping abilities for conflict management” (Löka, Bademlib, and Canbazc, 2018)</p> <p>Recognizing the signs of anger: encourage to participants to share signs when they know they are angry.</p> <p>Some examples of signs are: sweating can’t get past problem feel hot / turn red clenched fists headaches becoming argumentative raised voice using verbal insults pacing aggressive body language feel sick to stomach go quiet / “shut down”</p> <p>Introduce the strategy for managing anger: “Diversions are an effective coping mechanism when you are dealing with anger.”</p> <p>Some diversions are: Doing yard work, drawing or painting, cooking or baking, lifting weights, playing with a pet and hiking in nature.</p>	<p>Directing: Instructing participants to focus/pay attention to the discussion. Facilitating: Initiating and adding value to the conversation and educating on topic. Coaching: Encouraging participants to share their telltale signs of anger and activities they engage in to re-direct their anger.</p>
<p>4:15 – 4:16pm (1 minute)</p>	<p>Middle</p> <p>Prepare acrylic paints for pouring,</p>	<p>Teaching the importance of a proper set-up prior to activity. Showing how much paint to use by indicating the marker on the cup. Introducing and</p>	<p>Directing: Instructing participants to protect themselves from potential paint spills.</p>

	instruct participants to put on gloves and apron	demonstrating the acrylic pouring methods; dirty pour, puddle pour or flip-cup & drag.	Directing: Giving clear instructions on acrylic pouring methods. Repeating if necessary. Ensuring that all participants can see what you are doing.
4:16 – 4:20pm (4 minutes)	Demonstrate acrylic pouring methods	“You have the ability to manipulate the way the paint flows on the canvas by tilting it from side to side, up and down. Just like your emotions, picture yourself having control over your reaction to a triggering event.”	Facilitating: Teaching art expression using a fluid acrylic paint medium on canvas. Providing positive attitude and using an upbeat tone of voice.
4:20 – 4:35pm (15 minutes)	Choosing colours and starting to pour paints on the canvases	<p>Instructing the participants to choose 4 colours and white base for each 5” x 7” canvas.</p> <p>“Pick the colours that speak to you at this very moment. You may choose a group of hot or cool colours or any combination of your choice. How do you feel right now? It’s important to practice being open and receptive to the endless possibilities of fluid art outcomes. Try to trust the process.”</p> <p>Mid-activity check-in: “Take note of what is surprising you about this process. Are feelings of relaxation and joy increasing? If not, what is hindering you from relaxing?”</p>	<p>Facilitating: Making sure everyone has the right amount of paint in their cup at the beginning and throughout the process of transferring it onto the canvas. Assist when needed.</p> <p>Coaching: Reminding the participants of the importance of enjoying the process and being open to exploring new ways of manipulating flowing acrylic paint on canvas.</p>
4:35 – 4:40pm (5 minutes)	Ending Reflection/ art presentation	Assisting with completion. Placing the artwork in a safe place to dry. Encouraging participants to share their art masterpieces if desired. Asking what they most enjoyed about the experience.	Coaching: Pleasant and encouraging demeanor. Inspiring personal reflection about the process.
4:40 – 4:45pm (5 minutes)	Clean-up		

Sample: Check-in Activities

A check-in is a great way to start your activity or group, especially at the start of a new program or to welcome new participants. A check-in has the following functions:

- Welcomes participants
- Sets a positive tone
- Invites sharing and story telling
- Establishes comfort and creates safe space
- Provides opportunity for connection
- Introduces group interactions and dynamics
- Opportunity for leaders to role model compassion, empathy and active listening

Think about your check-in questions and your participants: Plan ahead!

- How much time do you have for check-in?
- How Big is your question... something light, or does it invite sharing a story from the heart?
- How will your check-in support and connect the rest of your agenda or activity?
- What tone do you want to create through the check-in... playful, serious, connecting, sharing?

Sample check-in questions: Keep a list of your favorites!

- What's one thing that brings you energy and joy?
- What is your personal weather status today (cloudy, sunny breaks, rain showers)?
- What words describe where your head is at? Where your heart is at?
- What are your hopes and fears for today? For this new activity/group?
- What is one thing you are grateful for?
- What is one thing you would like to accomplish (in this program)?
- What is one of your interests that others might not know?
- What inspires you?
- Look around you and share what makes you smile.
- What is an intention you have for today (in one or two words)?
- What is your favorite saying, quote or mantra?
- What makes you smile? Laugh?
- What's something new and interesting you have been thinking about?
- Share one word that best describes you.
- What music/song represents how you are feeling?
- What emoji best describes you today?

"Listen with curiosity. Speak with honesty. Act with integrity. The greatest problem with communication is we don't listen to understand. We listen to reply. When we listen with curiosity, we don't listen with the intent to reply. We listen for what's behind the words."
-Roy T. Bennett, *The Light in the Heart*

Sample: Check-out Activities

A check-out is a way to wrap up your activity or group and provide closure for participants.

A check-out has the following functions:

- Thanks participants
- Invites any final words, storytelling or sharing of experiences
- Creates safe space for closure
- Provides opportunity for participant feedback, verbal or written
- Gives leaders input on how to improve the program
- Asks “how was that for you” or “what could be improved upon”
- Summarizes the session/activity

Think about your check-out questions and your participants: Plan ahead!

- How much time do you have for check-out?
- How Big is your question... something light, or does it invite sharing a story from the heart?
- How will your check-out support and connect the rest of your agenda or activity?
- What tone do you want to end on... playful, serious, connecting, sharing?
- Do you want a verbal or written check-out (depending on your activity/participant comfort)?

Sample check-out questions/activities:

- What did you like about the activity?
- What would you like to be different about this activity?
- Reflect on and share what you thought of the activity.
- What’s one thing you liked and one thing you didn’t?
- How are you feeling now? (more relaxed or ?)
- What’s your mood (in picture or emoji)
- What’s your internal weather report now? (as opposed to at start of group)
- What excites you for the next program?
- What would you like to see in the next program?
- Leaders give a compliment or word of appreciation to each participant.
- Participants are invited to give a compliment or word of appreciation to others.
- End on a positive note with a thank you, music or feel-good saying
- Leaders give encouragement, reassurance and positive feedback.

Always debrief with participants who have expressed anxiety or frustration or have had negative experiences/interactions/dynamics during the activity.

Risk Management Checklist

These are general checklists for quick reference. Risk management tools will be unique to your centre and need to be discussed prior to any in-person or offsite activities.

These considerations are dependent on the type of activity, level of risk involved, level of leadership/supervision and comfort of staff and participants.

Checklist for in-person activities:

- Emergency procedures
- Emergency contacts
- Participant/caregiver informed consent and liability waivers
- Youth:staff ratio for activity
- Risk assessment for specific activity
- Supplies and equipment (consider safety – sharps, instruction for use, risk factors)
- Safety checklist (if provided by your centre)
- Activity analysis to meet participant needs (assess beginner, intermediate and advanced levels of skill)
- Leadership skills (level of instruction, skills required for activity leadership)
- Resources, equipment, clothing, supplies, first aid kit
- Expectations of participants and program leaders

Additional checklist for offsite activities:

Note: Activities occurring outside of the centre have an additional layer of risk and liability. Plan ahead and ensure there are emergency procedures in place for leaders, youth and families.

- Emergency procedures
- Emergency contacts, including Foundry centre manager's cell phone number
- Emergency contacts for families/caregivers
- Clear participant expectations (verbal and written)
- Communication of activity including:
 - Location and timing of activity
 - Location and timing of drop off or pick up
 - Transportation details, contacts and guidelines
 - What to wear and bring (clothing, footwear, water bottle, snacks, backpack)
 - What will be provided by centre (equipment, supplies, rain gear, bagged lunch)
 - Signed and dated consent form/waivers prior to activity
 - Emergency contacts for all participants and leaders
 - Allergies/dietary concerns for all
 - Special considerations/information from participants
 - Any community partner roles/information

Reference: O'Hara A, Weber Z, Levine K. Skills for Human Service Practice: Working with Individuals, Groups, and Communities, Canadian Edition. Don Mills, ON: Oxford University Press Canada; 2016.

**POWER TO BE ADVENTURE THERAPY SOCIETY
INFORMED CONSENT AND ACKNOWLEDGEMENT OF RISK**

To be completed by all who are participating in Power To Be Programs

PARTICIPANT'S NAME: _____

PLEASE READ CAREFULLY!

This *Informed Consent and Acknowledgment of Risk* form is an agreement between the participant and/or the custodial parent/guardian of the participant named above and **Power To Be Adventure Therapy Society (PTB)**. The intent of this form is to inform you of the inherent risks associated with the activities and environments we operate in and the expectations of our programs so that the choice to participate in any PTB program is made freely with understanding of the associated benefits, risks and personal responsibilities. If you are signing on behalf of someone else (i.e. minor or other participant), please discuss this and have them initial and sign with you to show that they choose to participate.

This is not a waiver and signing this form DOES NOT waive any legal rights.

BENEFITS & RISKS

The activities offered at PTB are designed to pose appropriate challenges for participants. The enjoyment and benefit derived from the activities, events and services provided, and/or organized by PTB is, in part, a result of risks inherent in the activities and locations we program in.

- While PTB strives to manage risk, it is neither possible nor desirable to eliminate all risk.
- The potential benefits of participation include access to outdoor recreation, community contribution, community engagement, environmental education and stewardship, family connectedness, development of interpersonal skills, leadership and mentorship, life skills and personal development, and a greater sense of physical health and well-being. PTB offers outdoor and indoor activities which include, but are not limited to: lake, river and ocean canoeing, kayaking and stand up paddle boarding, high and low ropes courses, rock climbing, walking, running, coastal and alpine hiking, caving, swimming, surfing, alpine and Nordic skiing, playing games, yoga, cycling, snowshoeing, gardening, animal interactions, and front country and back country camping.
- PTB offers opportunities to learn or be a part of experiences that include, but are not limited to: use of camp stoves and campfires, cutting tools (i.e. knives, saws and hatchets), education of wilderness skills, transportation, consumption of food and beverage, consumption and storage of water, rescue and first aid services, equipment and adaptive modifications, and accommodation.
- The activities include inherent risks that may be different or greater than those risks normally assumed at home, work or school. These risks include, but are not limited to: burns or lacerations associated with cooking, exposure to potential environmental and food allergens, lifting, carrying heavy objects, exposure to inclement weather, slipping, falling, insect or animal bites that may or may not be a carrier of disease, being struck by falling objects, immersion in cold water, hypothermia (cold exposure), hyperthermia (heat exposure), uneven terrain, stream crossings, travel on active logging and unregulated roads, social or economic losses, improper use or malfunction of equipment or adaptive modifications, loss or damage of personal property, infectious disease contracted through viruses, bacteria, parasites, and fungi which may be transmitted through direct or indirect contact, injury, fatigue, permanent disability, illness or fatality.
- Communication and emergency response times will vary depending on the access to resources, activity location, remoteness, time of year, weather and time of day.

I/WE AGREE
(please initial)

Parent/guardian Participant

AGREEMENT

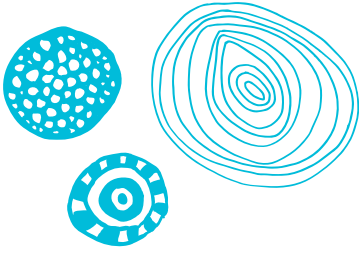
I/we understand and agree that participation in PTB activities require participants to, at times:

- Use third party service and facility partners.
- Share the responsibility for the safety of their self and others during all activities.
- Disclose any personal circumstances which include, but are not limited to, medicinal practices that may impair judgment or physical awareness or ability to participate in program.
- Follow all instructions and directions of PTB staff/volunteers and that failure to do so may compromise safety and result in removal from the program.

I/WE AGREE
(please initial)

Parent/guardian Participant

By signing this I/we agree to:



Appendix D

D.1 Sample: Invoice

D.2 Sample: Release and Waiver of Liability

D.3 PAR-Q+ Physical Ability Readiness Questionnaire

D.4 Sample: Media Consent Form



330 Ellis Street
 Penticton, BC V2A 4L7
 250-492-5814 www.pdcrc.com

Sample: Invoice

Number:	IN00029761
Page:	1
Date:	2021-01-31

Sold Foundry Central Office (Providence)
To: 915-1045 Howe Street
 Vancouver, BC V6Z 2A9

RE: Reimbursement for Penticton Foundry

Ship 915-1045 Howe Street
To: Vancouver, BC V6Z 2A9

RE: Reimbursement for Penticton Foundry

Reference - P.O. No.	Customer No.	Salesperson	Ship Via	Terms Code
	ADM016			NET30

Description/Comments	Amount
Morris Foundation Nov/20 grocery expenses (receipt attached)	56.12
Morris Foundation Dec/20 art expenses (receipt attached)	28.05
Morris Foundation Nov/Dec/20 expenses (receipt attached)	228.85
Morris Foundation Jan/21 art expenses (receipt attached)	137.42
Morris Foundation Jan/21 art expenses (receipt attached)	162.19
Due Date Amount Due Disc. Date Disc. Amount	
2021-03-02 612.63 0.00	

Remit To:

Subtotal before taxes	612.63
Total taxes	0.00
Total amount	612.63
Payment received	0.00
Discount taken	0.00
Amount due	612.63

RELEASE AND WAIVER OF LIABILITY AGREEMENT

I, _____, acknowledge that I am voluntarily participating in the **East Canyon Trail Day Trip** at Golden Ears Provincial Park on Wednesday August 26th, 2020 provided by the BC Parks Foundation and Foundry Abbotsford, operated by Archway Community services. This program involves physical activity including hiking, swimming and transportation provided through BC Parks Foundation.

I AM AWARE THAT THESE ACTIVITIES COULD CAUSE HARM AND I COULD BE INJURED WHILE ENGAGING IN THIS PHYSICAL ACTIVITY AND TRANSPORTATION. I AM VOLUNTARILY PARTICIPATING IN THESE ACTIVITIES WITH KNOWLEDGE OF THE RISKS INVOLVED, AND AGREE TO ASSUME ANY AND ALL RISKS OF BODILY INJURY, WHETHER THOSE RISKS ARE KNOWN OR UNKNOWN.

I verify this statement by placing my initials here: _____

Parent or Guardian's initials (if under 19): _____

Emergency Contact: _____ Phone Number: _____

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY BETWEEN MYSELF AND LIFE HACKS, FOUNDRY ABBOTSFORD, ARCHWAY COMMUNITY SERVICES, AND FEDERATION OF BC YOUTH IN CARE NETWORKS AND I AM SIGNING IT OF MY OWN FREE WILL.

If Signed by Parent or Guardian: I verify that the dangers of the activities and the significance of this Release and Waiver were explained to the Participant and that the Participant understood them.

PARTICIPANT

OR PARENT OR GUARDIAN

Signature

Signature

Address: _____

Address: _____

IF YOU ARE UNDER 19 YEARS OF AGE, YOU AND YOUR PARENT OR GUARDIAN MUST SIGN AND INITIAL THIS FORM WHERE INDICATED.

2021 PAR-Q+

The Physical Activity Readiness Questionnaire for Everyone

The health benefits of regular physical activity are clear; more people should engage in physical activity every day of the week. Participating in physical activity is very safe for MOST people. This questionnaire will tell you whether it is necessary for you to seek further advice from your doctor OR a qualified exercise professional before becoming more physically active.

GENERAL HEALTH QUESTIONS

Please read the 7 questions below carefully and answer each one honestly: check YES or NO.	YES	NO
1) Has your doctor ever said that you have a heart condition <input type="checkbox"/> OR high blood pressure <input type="checkbox"/> ?	<input type="checkbox"/>	<input type="checkbox"/>
2) Do you feel pain in your chest at rest, during your daily activities of living, OR when you do physical activity?	<input type="checkbox"/>	<input type="checkbox"/>
3) Do you lose balance because of dizziness OR have you lost consciousness in the last 12 months? Please answer NO if your dizziness was associated with over-breathing (including during vigorous exercise).	<input type="checkbox"/>	<input type="checkbox"/>
4) Have you ever been diagnosed with another chronic medical condition (other than heart disease or high blood pressure)? PLEASE LIST CONDITION(S) HERE: _____	<input type="checkbox"/>	<input type="checkbox"/>
5) Are you currently taking prescribed medications for a chronic medical condition? PLEASE LIST CONDITION(S) AND MEDICATIONS HERE: _____	<input type="checkbox"/>	<input type="checkbox"/>
6) Do you currently have (or have had within the past 12 months) a bone, joint, or soft tissue (muscle, ligament, or tendon) problem that could be made worse by becoming more physically active? Please answer NO if you had a problem in the past, but it does not limit your current ability to be physically active. PLEASE LIST CONDITION(S) HERE: _____	<input type="checkbox"/>	<input type="checkbox"/>
7) Has your doctor ever said that you should only do medically supervised physical activity?	<input type="checkbox"/>	<input type="checkbox"/>



If you answered NO to all of the questions above, you are cleared for physical activity.

Please sign the PARTICIPANT DECLARATION. You do not need to complete Pages 2 and 3.

- Start becoming much more physically active – start slowly and build up gradually.
- Follow Global Physical Activity Guidelines for your age (<https://www.who.int/publications/i/item/9789240015128>).
- You may take part in a health and fitness appraisal.
- If you are over the age of 45 yr and NOT accustomed to regular vigorous to maximal effort exercise, consult a qualified exercise professional before engaging in this intensity of exercise.
- If you have any further questions, contact a qualified exercise professional.

PARTICIPANT DECLARATION

If you are less than the legal age required for consent or require the assent of a care provider, your parent, guardian or care provider must also sign this form.

I, the undersigned, have read, understood to my full satisfaction and completed this questionnaire. I acknowledge that this physical activity clearance is valid for a maximum of 12 months from the date it is completed and becomes invalid if my condition changes. I also acknowledge that the community/fitness center may retain a copy of this form for its records. In these instances, it will maintain the confidentiality of the same, complying with applicable law.

NAME _____ DATE _____

SIGNATURE _____ WITNESS _____

SIGNATURE OF PARENT/GUARDIAN/CARE PROVIDER _____

If you answered YES to one or more of the questions above, COMPLETE PAGES 2 AND 3.

Delay becoming more active if:

- You have a temporary illness such as a cold or fever; it is best to wait until you feel better.
- You are pregnant - talk to your health care practitioner, your physician, a qualified exercise professional, and/or complete the ePARmed-X+ at www.eparmedx.com before becoming more physically active.
- Your health changes - answer the questions on Pages 2 and 3 of this document and/or talk to your doctor or a qualified exercise professional before continuing with any physical activity program.

2021 PAR-Q+

FOLLOW-UP QUESTIONS ABOUT YOUR MEDICAL CONDITION(S)

1. Do you have Arthritis, Osteoporosis, or Back Problems?

If the above condition(s) is/are present, answer questions 1a-1c

If **NO** go to question 2

- 1a. Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? (Answer **NO** if you are not currently taking medications or other treatments) YES NO
-
- 1b. Do you have joint problems causing pain, a recent fracture or fracture caused by osteoporosis or cancer, displaced vertebra (e.g., spondylolisthesis), and/or spondylolysis/pars defect (a crack in the bony ring on the back of the spinal column)? YES NO
-
- 1c. Have you had steroid injections or taken steroid tablets regularly for more than 3 months? YES NO

2. Do you currently have Cancer of any kind?

If the above condition(s) is/are present, answer questions 2a-2b

If **NO** go to question 3

- 2a. Does your cancer diagnosis include any of the following types: lung/bronchogenic, multiple myeloma (cancer of plasma cells), head, and/or neck? YES NO
-
- 2b. Are you currently receiving cancer therapy (such as chemotherapy or radiotherapy)? YES NO

3. Do you have a Heart or Cardiovascular Condition? This includes Coronary Artery Disease, Heart Failure, Diagnosed Abnormality of Heart Rhythm

If the above condition(s) is/are present, answer questions 3a-3d

If **NO** go to question 4

- 3a. Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? (Answer **NO** if you are not currently taking medications or other treatments) YES NO
-
- 3b. Do you have an irregular heart beat that requires medical management? (e.g., atrial fibrillation, premature ventricular contraction) YES NO
-
- 3c. Do you have chronic heart failure? YES NO
-
- 3d. Do you have diagnosed coronary artery (cardiovascular) disease and have not participated in regular physical activity in the last 2 months? YES NO

4. Do you currently have High Blood Pressure?

If the above condition(s) is/are present, answer questions 4a-4b

If **NO** go to question 5

- 4a. Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? (Answer **NO** if you are not currently taking medications or other treatments) YES NO
-
- 4b. Do you have a resting blood pressure equal to or greater than 160/90 mmHg with or without medication? (Answer **YES** if you do not know your resting blood pressure) YES NO

5. Do you have any Metabolic Conditions? This includes Type 1 Diabetes, Type 2 Diabetes, Pre-Diabetes

If the above condition(s) is/are present, answer questions 5a-5e

If **NO** go to question 6

- 5a. Do you often have difficulty controlling your blood sugar levels with foods, medications, or other physician-prescribed therapies? YES NO
-
- 5b. Do you often suffer from signs and symptoms of low blood sugar (hypoglycemia) following exercise and/or during activities of daily living? Signs of hypoglycemia may include shakiness, nervousness, unusual irritability, abnormal sweating, dizziness or light-headedness, mental confusion, difficulty speaking, weakness, or sleepiness. YES NO
-
- 5c. Do you have any signs or symptoms of diabetes complications such as heart or vascular disease and/or complications affecting your eyes, kidneys, **OR** the sensation in your toes and feet? YES NO
-
- 5d. Do you have other metabolic conditions (such as current pregnancy-related diabetes, chronic kidney disease, or liver problems)? YES NO
-
- 5e. Are you planning to engage in what for you is unusually high (or vigorous) intensity exercise in the near future? YES NO

2021 PAR-Q+

6. Do you have any Mental Health Problems or Learning Difficulties? This includes Alzheimer's, Dementia, Depression, Anxiety Disorder, Eating Disorder, Psychotic Disorder, Intellectual Disability, Down Syndrome

If the above condition(s) is/are present, answer questions 6a-6b

If **NO** go to question 7

6a. Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? (Answer **NO** if you are not currently taking medications or other treatments) YES NO

6b. Do you have Down Syndrome **AND** back problems affecting nerves or muscles? YES NO

7. Do you have a Respiratory Disease? This includes Chronic Obstructive Pulmonary Disease, Asthma, Pulmonary High Blood Pressure

If the above condition(s) is/are present, answer questions 7a-7d

If **NO** go to question 8

7a. Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? (Answer **NO** if you are not currently taking medications or other treatments) YES NO

7b. Has your doctor ever said your blood oxygen level is low at rest or during exercise and/or that you require supplemental oxygen therapy? YES NO

7c. If asthmatic, do you currently have symptoms of chest tightness, wheezing, laboured breathing, consistent cough (more than 2 days/week), or have you used your rescue medication more than twice in the last week? YES NO

7d. Has your doctor ever said you have high blood pressure in the blood vessels of your lungs? YES NO

8. Do you have a Spinal Cord Injury? This includes Tetraplegia and Paraplegia

If the above condition(s) is/are present, answer questions 8a-8c

If **NO** go to question 9

8a. Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? (Answer **NO** if you are not currently taking medications or other treatments) YES NO

8b. Do you commonly exhibit low resting blood pressure significant enough to cause dizziness, light-headedness, and/or fainting? YES NO

8c. Has your physician indicated that you exhibit sudden bouts of high blood pressure (known as Autonomic Dysreflexia)? YES NO

9. Have you had a Stroke? This includes Transient Ischemic Attack (TIA) or Cerebrovascular Event

If the above condition(s) is/are present, answer questions 9a-9c

If **NO** go to question 10

9a. Do you have difficulty controlling your condition with medications or other physician-prescribed therapies? (Answer **NO** if you are not currently taking medications or other treatments) YES NO

9b. Do you have any impairment in walking or mobility? YES NO

9c. Have you experienced a stroke or impairment in nerves or muscles in the past 6 months? YES NO

10. Do you have any other medical condition not listed above or do you have two or more medical conditions?

If you have other medical conditions, answer questions 10a-10c

If **NO** read the Page 4 recommendations

10a. Have you experienced a blackout, fainted, or lost consciousness as a result of a head injury within the last 12 months **OR** have you had a diagnosed concussion within the last 12 months? YES NO

10b. Do you have a medical condition that is not listed (such as epilepsy, neurological conditions, kidney problems)? YES NO





10c. Do you currently live with two or more medical conditions? YES NO

**PLEASE LIST YOUR MEDICAL CONDITION(S)
AND ANY RELATED MEDICATIONS HERE:**

GO to Page 4 for recommendations about your current medical condition(s) and sign the PARTICIPANT DECLARATION.

2021 PAR-Q+

 **If you answered NO to all of the FOLLOW-UP questions (pgs. 2-3) about your medical condition, you are ready to become more physically active - sign the PARTICIPANT DECLARATION below:**

-  It is advised that you consult a qualified exercise professional to help you develop a safe and effective physical activity plan to meet your health needs.
-  You are encouraged to start slowly and build up gradually - 20 to 60 minutes of low to moderate intensity exercise, 3-5 days per week including aerobic and muscle strengthening exercises.
-  As you progress, you should aim to accumulate 150 minutes or more of moderate intensity physical activity per week.
-  If you are over the age of 45 yr and **NOT** accustomed to regular vigorous to maximal effort exercise, consult a qualified exercise professional before engaging in this intensity of exercise.

 **If you answered YES to one or more of the follow-up questions about your medical condition:**

You should seek further information before becoming more physically active or engaging in a fitness appraisal. You should complete the specially designed online screening and exercise recommendations program - the **ePARmed-X+** at **www.eparmedx.com** and/or visit a qualified exercise professional to work through the ePARmed-X+ and for further information.

 **Delay becoming more active if:**

-  You have a temporary illness such as a cold or fever; it is best to wait until you feel better.
-  You are pregnant - talk to your health care practitioner, your physician, a qualified exercise professional, and/or complete the ePARmed-X+ at **www.eparmedx.com** before becoming more physically active.
-  Your health changes - talk to your doctor or qualified exercise professional before continuing with any physical activity program.

- You are encouraged to photocopy the PAR-Q+. You must use the entire questionnaire and NO changes are permitted.
- The authors, the PAR-Q+ Collaboration, partner organizations, and their agents assume no liability for persons who undertake physical activity and/or make use of the PAR-Q+ or ePARmed-X+. If in doubt after completing the questionnaire, consult your doctor prior to physical activity.

PARTICIPANT DECLARATION

● All persons who have completed the PAR-Q+ please read and sign the declaration below.

● If you are less than the legal age required for consent or require the assent of a care provider, your parent, guardian or care provider must also sign this form.

I, the undersigned, have read, understood to my full satisfaction and completed this questionnaire. I acknowledge that this physical activity clearance is valid for a maximum of 12 months from the date it is completed and becomes invalid if my condition changes. I also acknowledge that the community/fitness center may retain a copy of this form for records. In these instances, it will maintain the confidentiality of the same, complying with applicable law.

NAME _____

DATE _____

SIGNATURE _____

WITNESS _____

SIGNATURE OF PARENT/GUARDIAN/CARE PROVIDER _____

For more information, please contact

www.eparmedx.com
Email: eparmedx@gmail.com

Citation for PAR-Q+

Warburton DER, Jamnik VK, Bredin SSD, and Gledhill N on behalf of the PAR-Q+ Collaboration. The Physical Activity Readiness Questionnaire for Everyone (PAR-Q+) and Electronic Physical Activity Readiness Medical Examination (ePARmed-X+). Health & Fitness Journal of Canada 4(2):3-23, 2011.

Key References

1. Jamnik VK, Warburton DER, Makarski J, McKenzie DC, Shephard RJ, Stone J, and Gledhill N. Enhancing the effectiveness of clearance for physical activity participation; background and overall process. APNM 36(S1):S3-S13, 2011.
2. Warburton DER, Gledhill N, Jamnik VK, Bredin SSD, McKenzie DC, Stone J, Charlesworth S, and Shephard RJ. Evidence-based risk assessment and recommendations for physical activity clearance; Consensus Document. APNM 36(S1):S266-s298, 2011.
3. Chisholm DM, Collis ML, Kulak LL, Davenport W, and Gruber N. Physical activity readiness. British Columbia Medical Journal. 1975;17:375-378.
4. Thomas S, Reading J, and Shephard RJ. Revision of the Physical Activity Readiness Questionnaire (PAR-Q). Canadian Journal of Sport Science 1992;17:4 338-345.

The PAR-Q+ was created using the evidence-based AGREE process (1) by the PAR-Q+ Collaboration chaired by Dr. Darren E. R. Warburton with Dr. Norman Gledhill, Dr. Veronica Jamnik, and Dr. Donald C. McKenzie (2). Production of this document has been made possible through financial contributions from the Public Health Agency of Canada and the BC Ministry of Health Services. The views expressed herein do not necessarily represent the views of the Public Health Agency of Canada or the BC Ministry of Health Services.

Sample: Media Consent Form

I, _____,
(print full name)

- DO give permission to be quoted, videoed, and for my photo/ voice/ likeness/ interview/ name to be used for Foundry Abbotsford and/or Archway Community Services materials.
- DO NOT give permission to be quoted, videoed, and for my photo/ voice/ likeness/ interview/ name to be used for Foundry Abbotsford and/or Archway Community Services materials.

If applicable

I also provide permission for photos of my children _____
(provide their full names) to be taken by program staff.

I understand that these photos could be made available in the public domain and may remain available in perpetuity.

Examples of where photos could be used include, but are not limited to:

- Archway Community Services websites
- Social media
- Promotional material – posters, brochures, direct mail, etc.
- Slideshow presentations
- ACS publications – Annual Report, Stories Magazine, Program Guide

I understand that I can withdraw my permission at any time for future photos to be taken.

Signature _____ Date _____

The below signed parent or legal guardian of the above-named minor child hereby consents to and gives permission to the above on behalf of such minor child.

Signature of Parent

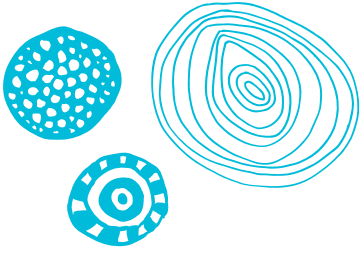
Or Legal Guardian: _____ Print Name: _____

The following is required if the consent form has to be read to the parent/legal guardian:

I certify that I have read this consent form in full to the parent/legal guardian whose signature appears above.

Date

Signature of Organizational Representative or Community Leader



Appendix E

E.1 Managing Group Dynamics

E.2 Managing Participant Anxiety

E.3 Challenging Group Behaviours

E.4 Learning Circle Guidelines

E.5 Cultural Considerations for Groups

E.6 Activity Selection and Modification Model

Managing Group Dynamics

In any group activity, group dynamics impact the flow and success of your group. Being mindful of cultural considerations will invite participation, increase comfort and emotional safety and lead to greater inclusivity.

Here are some common group dynamics to be aware of:

- Ensure physical and emotional safety
 - Discuss how to best create safe space for participants*
 - Invite participants to share a bit about themselves, share pronouns.*
 - What behavior and language are expected?*
 - What behaviour and language are not tolerated?*
- Establish confidentiality – discuss what that means for leaders and participants.
 - Las Vegas Rule: What is shared in this space, stays in this space.*
- Establish consent for sharing stories and disclosing personal information
 - Invite participation; invite but do not expect sharing of stories and experiences.*
 - Respect some participants' need for quiet space, privacy and less interaction.*
 - Participants have a right to decide what to share in group.*
- Discuss respectful communication and interactions between participants and leaders
- Role model healthy interactions and set boundaries on unhealthy interactions
- Recognize that challenging behaviours impact your group and how safe participants feel
- Recognize that participant anxiety or discomfort is expressed in various ways
- Be compassionate and respectful
- Keep calm and grounded; use mindfulness techniques
- Be aware of triggers, signs of tension and conflict
- Be aware of the impact of frequent interrupters and insensitive comments

Engagement strategies for healthy group interactions:

- Be aware of “groupthink” – it’s easy for one person to influence others
- Let participants know that their thoughts and contributions are valuable
- Invite sharing by calling on participants by name and inviting contributions
- At times, it’s ok to take a break, a time-out or have moments of silence
- Ask participants to use an “I statement” when describing their feelings
- Use prompts and transitions to move on to new topic or activity
- Don’t allow one participant to monopolize the group or be the centre of attention for too long – shift attention to others
- Be mindful of not shaming participants or putting anyone on the spot
- Remember if participants are quiet/shy/withdrawn that it can be uncomfortable to talk and be open in group settings
- Invite and encourage interaction – remember different types and levels of interactions

An effective group leader sets the tone, builds trust and creates emotional safety in a group setting.

Reference: Corey MS, Corey G, Corey C. Groups: Process and Practice (10th edition). Poston, MA: Cengage Learning; 2018.

Managing Participant Anxiety

Helpful tips:

- First invite participant to an alternate setting if needed
- Find a quiet space, with low stimulation and privacy
- Ask participant how you can assist them
- Encourage participant to use grounding techniques – deep breathing, use of sensory objects, personal coping techniques, mindfulness practice
- Stay with participant if requested or find someone who has relationship with them
- Hold space (be present and offer empathetic responses) or offer space for privacy
- Use respectful communication and helping skills
- Know your role and boundaries

If someone appears to be experiencing high levels of anxiety or distress, seek out a clinical team member to assist.

The following helping skills can be of use in 1:1 and group settings when as a leader you notice increased tensions, anxieties or distress:

- Active listening
- Attending
- Paraphrasing
- Empathic presence
- Empathic responding

Challenging Group Behaviours

Behaviour	Definition	Intervention
Silence or Lack of participation	A pattern of silence and lack of involvement that relieves the group member of initiating interactions with others in the group	<ul style="list-style-type: none"> • Explore meaning of the silence • Avoid consistently calling on the silent person • Reflect back non-verbal communication • Contract at checkout to speak next week
Monopolistic Behavior	A self-centred group member claims to identify with others but takes others' statements as openings for detailed stories about his or her own life.	<ul style="list-style-type: none"> • Explore possible defense behind this behavior • Respectfully challenge • "If I didn't talk" If I let others talk ..." • Help others express their reactions to this behavior • Develop interest and curiosity • Tune into your own internal dialogue
Storytelling	A lengthy recitation of life outside of the group that is done in a detached way.	<ul style="list-style-type: none"> • Distinguish from disclosure • Focus on feelings rather than the details of the story • Move beyond irrelevant stories to sharing in personal and concrete ways • Tell stories that keep the interest of others • Write stories as homework assignment
Questioning Challenging	Interrogation Asking questions that intervene at inappropriate times and are not helpful	<ul style="list-style-type: none"> • Educate the group about the function of questions • Ask what prompted them to ask that specific question • Ask them to fill in the details • Encourage statements rather than questions
Giving Advice	To tell other group members what they should feel, what they should do and not do, either directly or subtly.	<ul style="list-style-type: none"> • Explore the meaning behind the advice giving • Share personal struggles rather than provide ready-made solutions (self-disclosure) • Encourage brainstorming and problem-solving • Discuss expectations of the group • Provide information and ideas but decline role as an expert in order to build on strengths

Dependency	A reliance on other group members or leaders to provide direction, to take care of them	<ul style="list-style-type: none"> • Be aware of personal need to be needed • Encourage strength and independence
Offering <u>Pseudosupport</u>	Insincere expression of care and concern intended to distract from personal discomfort and emotional expression	<ul style="list-style-type: none"> • Allow group members to experience the depth of their pain, hurt, struggle etc. • Explicitly state the need and benefits to release pain in the process of healing
Hostile Behavior	Direct and often indirect expressions of hostility in the form of sarcasm, caustic remarks, jokes and other passive aggressive tactics.	<ul style="list-style-type: none"> • Screen hostile group members initially • Confront directly and immediately • Ask group member to listen without responding to how others are affected • Determine what the person wants from the group • Explore functions served by their hostility
Acting Superior	Superior, moralistic, critical or judgmental behaviours and attitudes that serve to deny any serious problems in their lives.	<ul style="list-style-type: none"> • Ask group member what they want from the group • Invite openness to feedback • How is behaviour affecting others?
Socializing	Counterproductive groups that form outside of the group as cliques and exclude other group members by creating subgroups and withholding information intended for the larger group	<ul style="list-style-type: none"> • Openly examine impact of outside socializing on the group process and cohesion
Intellectualizing	A use of thinking as a defense against experiencing feelings, and encountering feelings in a detached way	<ul style="list-style-type: none"> • Invite role playing and experiential exercises to move beyond thinking • Integrate cognitive and affective work • Bring awareness to the use of this style of communication; does it bring them what they want? • Encourage expression of feelings
Becoming an Assistant Leader	Aligning with and taking on the role of facilitator(s) by asking questions, probing, making interventions with the hope of avoiding vulnerability	<ul style="list-style-type: none"> • Bring awareness to the focus on others rather than themselves • Explore possible motivations for the behaviour • Review goals for this group experience.

Responding to Challenging Group Behaviours

- Express your difficulty (with the behavior) without shaming the group member
- Avoid responding to sarcasm with sarcasm
- Educate the members about how the group works; use community agreements in place
- Encourage group members to explore their defensiveness rather than expecting them to give up their ways of protecting themselves
- Avoid labeling and instead, describe the behaviour of the group member
- Do your best to state your observations and hunches in a tentative way as opposed to being authoritarian; be curious
- Demonstrate sensitivity to a member's culture and avoid stereotyping the individual
- Monitor your own countertransference reactions
- Challenge and encourage members in a caring and respectful way to do the things that may be painful and difficult
- Find ways to explore the conflict rather than retreating from it
- Avoid personalizing member's reactions, and avoid overly defensive responses
- Facilitate an exploration of a problem rather than offering simple or quick solutions
- Pay attention and be honest about instances when you are meeting your own needs at the expense of your participants
- Invite group members to state how they are personally affected by problematic group behaviours of other members while blocking judgments, evaluations, and criticisms
- If members evoke reactions in you, share this in a way that is therapeutic or process it with your coleader or supervisor

The Circle Way

BASIC GUIDELINES FOR CALLING A CIRCLE

Circle started around the cook-fires of humanity's ancestors and has accompanied us ever since. We remember this space. When we listen, we speak more thoughtfully. We lean in to shared purpose.

COMPONENTS OF CIRCLE

What transforms a meeting into a circle is the willingness of people to shift from informal socializing or opinionated discussion into a receptive attitude of thoughtful speaking and deep listening that embodies the practices and structures outlined here.



INTENTION

Intention shapes the circle and determines who will come, how long the circle will meet, and what kinds of outcomes are to be expected. The caller of the circle spends time articulating intention and invitation

START-POINT OR WELCOME

Once people have gathered, it is helpful for the host, or a volunteer participant, to begin the circle with a gesture that shifts people's attention from social space to council space. This gesture of welcome may be a moment of silence, reading a poem, or listening to a song – whatever invites centering.

SETTING THE CENTER

The center of a circle is like the hub of a wheel: all energies pass through it, and it holds the rim together. To help people remember how the hub helps the group, the center of a circle usually holds objects that represent the intention of the circle. Any symbol that fits this purpose or adds beauty will serve: flowers, a bowl or basket, a candle.

CHECK-IN / GREETING

Check-in helps people into a frame of mind for council and reminds everyone of their commitment to the expressed intention. It insures that people are truly present. Verbal sharing, especially a brief story, weaves the interpersonal net.

Check-in usually starts with a volunteer and proceeds around the circle. If an individual is not ready to speak, the turn is passed and another opportunity is offered after others have spoken. Sometimes people place individual objects in the center as a way of signifying their presence and relationship to the intention.

GUARDIAN

The single most important tool for aiding self-governance and bringing circle back to intention is the role of guardian. One circle member volunteers to watch and safeguard group energy and observe the circle's process. The guardian usually employs a gentle noise-maker, such as a chime, bell, or rattle, that signals to everyone to stop action, take a breath, rest in a space of silence. The guardian makes this signal again and speaks to why s/he called the pause. Any member may call for a pause.

The Circle Way

BASIC GUIDELINES FOR CALLING A CIRCLE

SETTING CIRCLE AGREEMENTS

The use of agreements allows all members to have a free and profound exchange, to respect a diversity of views, and to share responsibility for the well-being and direction of the group. Agreements often used include:

- We hold all stories or personal material in confidentiality
- We listen to each other with compassion and curiosity
- We ask for what we need and offer what we can
- We agree to employ a group guardian to watch our need, timing and energy. We agree to pause at a signal when we feel the need to pause

THREE PRINCIPLES

1. **Leadership rotates** among all circle members
2. **Responsibility is shared** for the quality of experience
3. **Reliance is on wholeness**, rather than on any personal agenda

THREE PRACTICES

1. **Speak with intention:** noting what has relevance to the conversation in the moment
2. **Listen with attention:** respectful of the learning process for all members of the group
3. **Tend to the well-being of the circle:** remaining aware of the impact of our contributions

FORMS OF COUNCIL

1. **Talking piece council** is often used as a part of check-in, check-out and whenever there is a desire to slow down the conversation, collect all voices and contributions, and be able to speak without interruption.
2. **Conversation council** is often used when reaction, interaction and an interjection of new ideas, thoughts and opinions are needed.

3. **Reflection, or silent council** gives each member time and space to reflect on what is occurring, or needs to occur, in the course of a meeting. Silence may be called so that each person can consider the role or impact they are having on the group, or to help the group realign with their intention, or to sit with a question until there is clarity.

CHECK-OUT AND FAREWELL

At the close of a circle meeting, it is important to allow a few minutes for each person to comment on what they learned, or what stays in their heart and mind as they leave. Closing the circle by checking out provides a formal end to the meeting, a chance for members to reflect on what has transpired, and to pick up objects if they have placed something in the center.

As people shift from council space to social space or private time, they release each other from the intensity of attention being in circle requires. Often after check-out, the host, guardian, or a volunteer will offer a few inspirational words of farewell, or signal a few seconds of silence before the circle is released.

May your circles be great teachers and places to rest on the journey.

This handout is a gift from **THE CIRCLE WAY**, a loosely connected global circle of colleagues who practice, consult, and teach The Circle Way. Originally mentored and guided by Ann Linnea and Christina Baldwin of PeerSpirit Inc., we offer our own consulting services and training opportunities all over the world. Drawing on the same set of teachings and practices, we work both independently and in partnership with one another to spread what we have learned further into the world.

Cultural Considerations for Groups

Here are some considerations when planning and implementing a wellness activity:

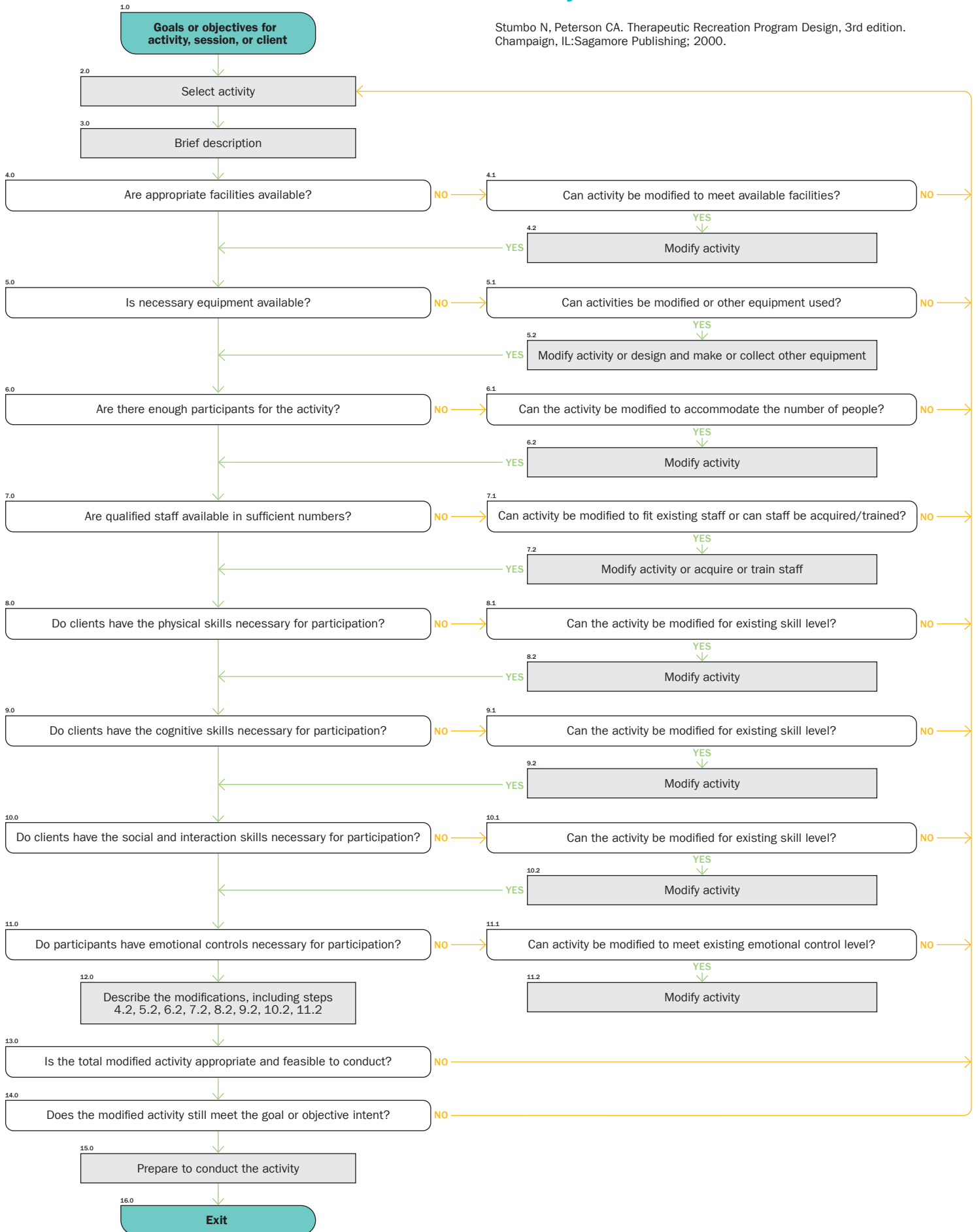
- Embrace the worldviews, values, behaviours and beliefs shared by participants
- Culture is learned in group settings
- Recognize and honour diversity and the diverse backgrounds of participants
- As a leader, be aware of your own personal values, attitudes, prejudices, and biases
- Be inclusive
- Be aware that group members will view group discussions and processes from different perspectives
- Different levels of participation and comfort (or reluctance) may be related to cultural factors
- Be mindful of your words and the language you use
- Practice genuine respect
- Use helping skills like empathetic presence and responding, active listening and encourage expression of feelings
- Leaders use intentional role-modeling to talk about sensitive topics
- Use and encourage healthy self-disclosure and setting of personal boundaries
- Take a strength-based focus to facilitate participant involvement
- Ask participants how they identify themselves (culturally and ethnically)
- Approach 'difference' as positive

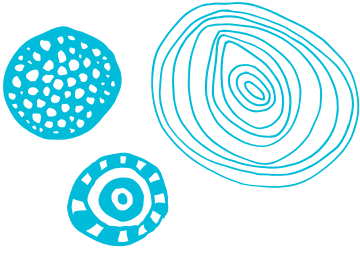
Remember more is learned by what we do and how we are with others, rather than by what we say.

Reference: Corey MS, Corey G, Corey C. Groups: Process and Practice (10th edition). Poston, MA: Cengage Learning; 2018.

Activity Selection and Modification Model

Stumbo N, Peterson CA. Therapeutic Recreation Program Design, 3rd edition. Champaign, IL: Sagamore Publishing; 2000.





Appendix F

F.1 Instructions for Entering Wellness Program Activity in Toolbox

F.2 Wellness Feedback Survey Poster

Instructions for Entering Wellness Program Activity in Toolbox

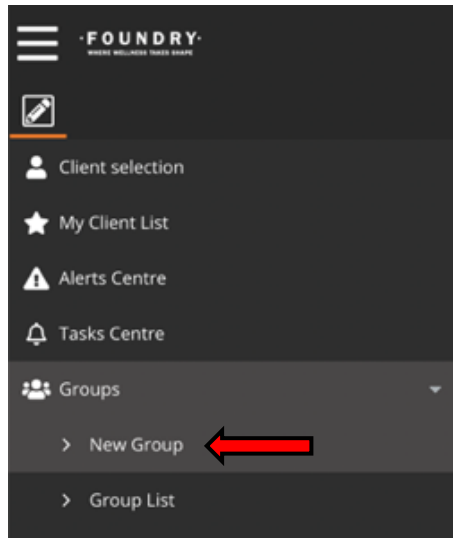
Toolbox 101 - How to Create a Group

Toolbox link:

<https://trust.dacimasoftware.com/foundry/View/Login.aspx?logout=1>

(Works best on Google Chrome!)

Step 1: Login and select **New Group** from menu

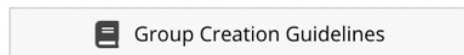


Step 2: Under Configuration enter **group name** and if it's a single **occurrence or multiple** *description is optional

- ⇒ if multiple occurrences selected, next enter number
- ⇒ Start low as you can always add occurrences, but you cannot remove occurrences. (e.g., select 5 if you think there will be 5 or more)

Step 3: Choose **Step of Care** and **Step Type**

- ⇒ Click to open document



- ⇒ Find and enter your step of care and step type

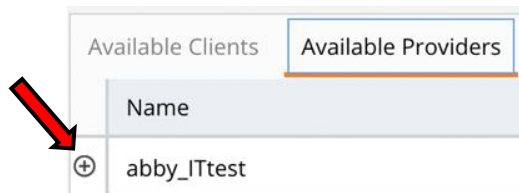
- ⇒ Example:

Step of care:

Step type:

Step 4: Under Status enter **Occurrence Date** and add **Group Facilitators**

⇒ Select **Available Providers** and click the + sign to add



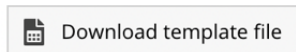
Step 5: Add Clients

⇒ If clients are already registered in Toolbox...

- Select **Available Clients** and follow the step above

⇒ If a client isn't registered in Toolbox...

- Click to download excel file



- Enter **Lname**, **Fname**, **DOB** and save to computer
- Next click and import (*excel file is normally located in your downloads)



Step 6: Click



Notes

- Toolbox will let you know if there is an issue with importing the excel file when there is an error
 - If this occurs it is likely the DOB was formatted incorrectly. Reopen file, correct the error, re-save and re-upload to Toolbox
 - Toolbox will not add a client who is already registered, so do not worry about accidentally adding duplicate clients when importing the excel file
- For creating a group name, you may get an error if you create a group name that already exists. Please create a unique name for each group
- Please only add the number of groups you think will be held, if more are scheduled you can always add more occurrences later
- After clicking **Validate** Toolbox will have created the new group which can be accessed under **Group List** on the main menu ✓

WE WANT TO HEAR ABOUT YOUR EXPERIENCE IN FOUNDRY WELLNESS ACTIVITIES!

If you have participated in a recreational group activity at Foundry, such as hiking or painting, cooking, yoga (and more!) scan the QR code below to fill out a 10-15 minute survey about your experience!

