



## **CLIENT ALUMNI SPEAKER PROGRAM**

The Client Alumni Speaking Program (CASP) is an opportunity for past clients of the DSYTC (both caregivers and youth) to support, motivate, educate and inspire current DSYTC clientele. These objectives are accomplished by speakers sharing select elements of their previous personal experience with the DSYTC, as well as the growth and change they were able to accomplish with the aid of DSYTC programs and services (e.g., residential, continuing care, parent programming, etc.).

### **FORMAT**

Speaking engagements would occur at specified dates and times at one of the DSYTC campuses. Target audience would include residential or ACC clients and/or caregivers who are participating in group programming, as well as DSYTC team members.

### **CONTENT**

Speaker content and delivery is flexible, although advance content discussion and approval is required and advance preparation is strongly recommended. CASP is not meant to mimic the sharing of personal stories like those disclosed in self-help groups, but rather consist of intimate but general messages that current clients can learn from and appreciate. That is, a strength-based presentation and discussion regarding how the speaker applied what they learned from DSYTC programming, and utilized their new knowledge and skill to help achieve their goals. Ultimately, content should entail positive, inspiring and hopeful messages which are delivered in a non-judgmental manner.

### **REIMBURSEMENT**

Although the CASP is a volunteer program, there may be occasions where reimbursements (e.g., mileage) or honorariums will be provided.

### **MINIMUM SPEAKER CRITERIA**

- Is a former client of the Dave Smith Youth Treatment Centre (DSYTC);
- 'Graduated' one of the DYSTC's programs (i.e., residential, ACC, FSN group);
- Has shown steady development and determination in pursuing his/her life goals – particularly those goals related to substance use/abuse (youth);
- Has overcome major life obstacles as a youth or caregiver;

- Current level of life stability is moderate to high (i.e., flexible, lack of crisis, etc.);
- Demonstrates clear boundaries and a positive attitude;
- Shows genuine concern for others;
- Personal treatment philosophy and views are consistent with those of the DSYTC;
- Does not present an emotional, psychological or physical risk to DSYTC clients or staff.

### APPLICATION PROCESS

1. Complete the “CASP Volunteer Application” portion of this document (see below) and submit to [troy.t@davesmithcentre.org](mailto:troy.t@davesmithcentre.org).
2. Complete a telephone and/or intake screening interview (NOTE: interviews will only be granted when CASP position openings are available. When speaking positions are not available, applications will be kept on file for future reference).

### EXTERNAL SPEAKING EVENTS

There are occasions where former DSYTC clients are requested to speak at community events. (e.g., parent education sessions, fundraising events, etc.). Where deemed reasonable to do so, the DSYTC will consider such requests. For youth to be eligible to speak at such engagements, they are required to have completed at least two (2) internal speaking engagements for DSYTC clients and/or successfully completed a ‘mock’ presentation with a designated team member. This prerequisite is intended to help support the speaker in preparing for such events (e.g., refining message, practice answering questions, etc.) as well as assure the DSYTC that this individual is adequately prepared to speak in a public domain about their experience.

### NON SPEAKING VOLUNTEERISM

The DSYTC may receive requests from former clients to volunteer in capacities outside of speaking engagements and that involve current DSYTC clients (e.g., volunteering at the residential sites or during fundraising events, etc.). While these offers are greatly appreciated, it is imperative for the safety and integrity of our clinical services that a stepped-up process occurs in these instances. Therefore, the CASP program will typically be the first step that needs to be completed before volunteering with current DSYTC youth will be considered. The expectation being that the prospective youth volunteer will complete two (2) internal DSYTC speaking engagements before applying to volunteer directly with current clients.

# CASP VOLUNTEER APPLICATION

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

DOB (dd/mm/yy): \_\_\_\_\_ Gender: \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Province: \_\_\_\_\_ Country: \_\_\_\_\_

Home Phone: \_\_\_\_\_ OK to Call  OK To Leave a Message

Work Phone: \_\_\_\_\_ OK to Call  OK To Leave a Message

Cell Phone: \_\_\_\_\_ OK to Call  OK To Leave a Message

Do you have any special needs that require accommodation? YES NO

If so, please describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

**What messages would you like to share as a speaker in CASP?**

**Have you ever spoken in public before? If so, please describe:**

**On a scale of 1 to 10 (1 = “totally uncomfortable” and 10 = “totally comfortable”) please rate how you would feel speaking to youth**

\_\_\_\_\_ / 10

**On a scale of 1 to 10 (1 = “totally uncomfortable” and 10 = “totally comfortable”) please rate how you would feel speaking to adults**

\_\_\_\_\_ / 10

**What do you personally hope to accomplish by speaking as part of CASP?**

**What concerns do you have (if any) about speaking to DSYTC clients?**

**Are you open to receiving questions from staff and/or the presentation audience?**

\_\_\_\_\_ YES

\_\_\_\_\_ NO

**Please indicate when you would be available to speak?**

\_\_\_\_\_ Mornings

\_\_\_\_\_ Afternoons

\_\_\_\_\_ Evenings

\_\_\_\_\_ Weekdays

\_\_\_\_\_ Weekends

**Do you have transportation to and/or from speaking events?**

\_\_\_\_\_ YES

\_\_\_\_\_ NO

**Additional Comments (e.g., anything else you feel we should be aware of or would like us to know).**

Kindly complete this document and return to:

Troy Thompson

*Clinical Director*

613-594-8333 ext. 2202

[troy.t@davesmithcentre.org](mailto:troy.t@davesmithcentre.org)

***THANK YOU FOR YOUR INTEREST IN THE DSYTC!!!***