



COLLABORATIVE
PRACTICE

Resolving Disputes Respectfully

Level 2

*Interdisciplinary Collaborative
Practice Skills Training*

October 4, 7 and 8, 2019

**Location: Centre for Social Innovation
192 Spadina Ave., Toronto, Ontario M5T 2C2**

Toronto Team Trainers

Victoria Smith, JD, C.Med., Cert. CFM (FMC)

Deborah Graham, B.A. Hons, LL.B, Acc.FM (OAFM)

Sheila Brown, M.S.W., R.S.W., Acc.FM (OAFM)

Alison Anderson, CFP, FDS, RRC

Laurie Stein, LL.B., M.S.W., R.S.W.

This workshop will be highly experiential and interactive, involving demos, exercises and roleplays. It will cover:

- **The choreography of an interdisciplinary collaborative case**
 - the initial client interview - explaining team process, overcoming resistance, understanding advocacy needs
 - process design - when do you need a Financial Professional? a Family Professional?
 - team preparation
 - the debrief - with the clients and with the team

NEW! Comprehensive Collaborative Team Protocols

- **High performance teams**
 - the evolution to settlement advocacy
 - the importance of neutrality
 - how the team can manage common case challenges
 - running effective meetings
- **Critical skills**
 - interest-based negotiation
 - key communication skills
 - working with the neuroscience that drives human behavior
- **The role of the law in an interest-based process**
 - understanding power
 - understanding fairness
 - the interplay of law, interests and fairness
- **Professional breakout sessions**
 - the Role of the Neutral Facilitator
 - the Role of the Neutral Financial Professional
 - advocacy issues for settlement lawyers

This training meets CPT, OCLF and IACP standards for training and trainers

This training contains 2 hours 5 minutes Professionalism Hours and 18 hours 40 minutes Substantive Hours

Please complete and return the attached registration form and payment to confirm your space.

Note: Materials and protocols will be provided.



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*Level 2 Interdisciplinary Collaborative Practice Skills Training
Registration Form*

Name: _____

Profession: _____

Address: _____

Contact: (e-mail) _____

(phone) _____

Early-bird (before September 6, 2019) \$950 plus \$123.50 H.S.T., for a total of \$1,073.50
After September 6, 2019, \$1000 + \$130 H.S.T., for a total of \$1,130.00

Cancellation Policy: by September 6, 2019, full refund with \$25 administration fee; by September 13, 2019, 50% refund with \$25 administration fee; no refund after September 20, 2019.

Method of Payment:

Cheque for \$ _____ made payable to Family Finance Solutions Inc. is enclosed

OR

Please charge \$ _____ to my VISA, MC (please circle one)

Name on card: _____

Credit Card No. _____ Expiry Date: ____/____/____ CCV No. _____

Please note: Your credit card statement will show payment to Family Finance Solutions Inc.

x _____

Cardholder signature

Please fax to (905)833-7156, e-mail to Alison at alison@alisonanderson.ca, or mail to

Family Finance Solutions Inc.
1033 Bay Street, Ste. 314
Toronto M5S 3A5

*For information please contact Alison Anderson by email at alison@alisonanderson.ca
or by phone at (416) 884-2842*