

DIRECTOR'S CASE PRACTICE AUDIT REPORT
MINISTRY OF CHILDREN AND FAMILY DEVELOPMENT
INTERIOR REGION
Castlegar Community Services AGW

Field Work Completed: August, 2007
Report Completed:

**DIRECTOR’S CASE PRACTICE AUDIT REPORT
INTERIOR REGION
CASTLEGAR COMMUNITY SERVICES (AGW)**

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SECTION I: INTRODUCTION

DIRECTOR'S CASE PRACTICE AUDIT REPORT INTERIOR REGION CASTLEGAR COMMUNITY SERVICES (AGW)

1. PURPOSE

The purpose of case practice audits is to support practice to promote improved outcomes for children and families served by the Ministry. Through a review of a sample of cases, case practice audits help to confirm good practice and identify areas where practice requires strengthening.

The specific purposes of case practice audits are:

- to confirm good practice and enhance the development of best practice,
- to support the Ministry's service transformation initiatives
- to assess and evaluate practice in relation to current legislation and standards;
- to determine the current level of practice across a sample of cases;
- to identify cases where additional assessment and/or intervention is required;
- to identify barriers to service provision;
- to assist in identifying training needs;
- to provide information for use in updating and/or amending practice standards or policy.

This case practice audit is being conducted proactively by the Regional Director's office. Proactive case practice audits of district offices are systemically conducted on a regular cycle. Regions conduct case practice audits as an integral component of their quality assurance plan.

2. METHODOLOGY

The audit was conducted to meet provincial standards in accordance with Case Practice Audit Methodology and Procedures Document (April 2004). The specific audit tools used in conducting this audit are indicated below.

- Critical Measures Audit Tool for Child and Family Service Standards**
- Critical Measures Audit Tool for Child In Care Service Standards**

SECTION II: SERVICE DELIVERY

3. COMMUNITY OVERVIEW

Castlegar is located in the southern part of what is known as the West Kootenays or the Kootenay Boundary region. Castlegar is located where the Columbia and Kootenay rivers converge and along with the Arrow lakes flow in from the north. On these bodies of water there are nine dams that control the water flow and generate electricity for many North Americans. Castlegar folks are known to claim that Castlegar is the best “Dam” city in the world. Castlegar is located halfway between Vancouver and Calgary along highway # 3 and requires about eight hours of driving to reach either city. Castlegar does have the major airport in the West Kootenays with regular service daily to both Vancouver and Calgary. Castlegar is also serviced by bus from both the west and the east.

Castlegar’s population of approximately 8,000 residents live nestled in the valley of the Selkirk and Monashee mountain ranges. The surrounding communities of Robson, Brilliant, Ootishenia, Blueberry Creek, Genelle, Pass Creek, Shoreacres, Tarry’s and Thrums increases the population of the area to approximately 16,000.

For full medical service the residents of the West Kootenays travel to Trail home of the Kootenay Boundary Regional Hospital. It is about a forty minute drive from Castlegar. In Castlegar there is the Castlegar & District Community Health Centre that provides urgent care services daily between 8:00 am and 8:00 pm. The social workers say that the local physicians provide the medical consultation and examinations for cases of suspected child abuse. For complex cases needing a greater expertise the social workers usually consult with Children’s Hospital in Vancouver.

Children (under the age of 14) make up 19 % of the population and this population is declining while the seniors (over 65) at 13% of the population are an increasing population. This is evidenced by the declining enrollment in schools and the increased demand for senior’s housing.

No matter your age, Castlegar offers an abundance of activities for its residents. Its very pronounced seasons offers the opportunity to enjoy many outdoor adventures. In close proximity are two world class ski hills, excellent cross country ski trails and numerous trails for hiking and mountain biking. The rivers and lakes offer opportunities for great fishing and boating along with numerous campsites. Other experiences offered in the area are white water rafting, wilderness horseback riding, bird watching, skating, hockey, mountain and rock climbing plus a wide variety of less strenuous activities.

Castlegar has a rich cultural history. At one time the area was shared by two Aboriginal bands the Kutenai and the Interior Salish. The people were somewhat nomadic traveling by the seasons on their quest for food. There were numerous permanent winter camps along the Columbia and Kootenay rivers and the Arrow Lakes. Much of the land once traveled and occupied by these industrious people is now owned by the white population.

The Lakes Indian People now live on two reservations in the USA, the Bonner and the Flathead and on several small reserves in British Columbia.

Part of the history of Castlegar began with the immigration in the early 1900s of a Russian pacifist group. This group of people known as Doukhobors were an industrious hard working people who developed communal enterprises and lived in communal housing. As the community prospered two splinter groups developed, one of which the ‘Sons of Freedom’ who were prepared to use both civil disobedience and violence to lead their people back to a more traditional way of life. The more radical of the Sons of Freedom began escalating acts of violence and some of the acts of violence included the burning of schools. This dispute with the government over the education of the Doukhobor children escalated and in 1953 the children were removed from their communities and placed in a “camp”. During the years 1953 to 1959 the children remained in the camp and were forced to go to school. One documentary made at the time shows the children and their parents visiting through the wire fence that surrounded the enclosure. Many Doukhobors still live in the community and add a great richness to the fabric of the community.

c) Service Delivery:

The Interior Region includes three large areas within the province of British Columbia: Shuswap/Okanagan, Cariboo/Thompson and the East and West Kootenays. The Regional office is located in Kamloops and there are sub regional offices in Nelson and Kelowna. At the time of this audit the Regional Sr. Management Team consisted of a Regional Executive Director, a Director of Regional Operations, a Director of Child Welfare, a Director of Operations for Aboriginal Services and a Director of Corporate Services. Throughout the Region there are six Community Services Managers and 2 Aboriginal Services Managers. The Community Services Manager for the East and West Kootenays has his office in Nelson and has responsibility for the child welfare practice for Castlegar. The Aboriginal Services Manager for the East and West Kootenays is located in Kelowna. The Castlegar Community Services Team (AGW) consists of a Supervisor, three Social workers a youth probation officer, two CYMH clinicians. Clinical support for CYMH clinicians is received from a supervisor in Nelson. The supervisor in Castlegar covers the administrative responsibilities.

- 1/ Residential Services –the responsibility for residential services belongs to the Resource Team in Nelson (AET). The Castlegar team has a designated resources social worker that assists with the planning and placement of children in care. Referrals are directed to her or a member of the resources team in her absence. The social workers at AGW say having a designated resource person is of great benefit. They describe the resources worker as being present in the AGW office frequently and consider her a part of their team. She was described as being easy to communicate with and helpful and cooperative when finding a home to fit the needs of a particular child.

4. STAFFING

a) **Professional Staff Complement/Staff Turnover:** the Castlegar office AGW has seen a significant turnover in staff during the last two years. One social worker and the office manager have been the constant members; the office manager has worked at AGW for years and the one social worker for years. The staff gave the impression of being well on their way to forming a close supportive team. Also as part of the larger team there are two CYMH clinicians and a youth probation officer. The team leader also responsibility and supervises the adoption social workers who are located at the regional office in Nelson.

| Position | Length of Time on Team | Educati on | MCF Experience | Delegati on | Status |
|-----------------|-------------------------------|-------------------|-----------------------|--------------------|---------------|
| Team Leader | | | | Full | P/F |
| SW 1 | | | | Full | P/F |
| SW 2 | | | | Partial | P/F |
| SW 3 | | | | Full | P/F |
| | | | | | |
| | | | | | |
| | | | | | |

b) **Current Workload:** On the first day of the audit (August 1, 2007) the Case Management Reports (CMR) showed twenty one open Family Service files (FS) and forty five closed in the last six months FS files. CMRs also showed fifteen open Child Service files (CS) and six closed in the last six months CS files. The following indicates the number of files open on each caseload at AGW at the time of the audit.

AGW -----9 FS-----5 CS

AGW -----7 FS-----3 CS

AGW -----13 FS----7 CS

5. STAFF TRAINING

| a) Ministry Training Program | Team Leader | SW 1 | SW 2 | SW 3 | SW 4 |
|-------------------------------------|--------------------|-------------|-------------|-------------|-------------|
| Child Protection Worker (core) | | | | | |
| Resources Worker | | | | | |

| | | | | | |
|-------------------------------|--|--|--|--|--|
| Guardianship (core) | | | | | |
| Adoption (core) | | | | | |
| Clinical Supervision Level 1. | | | | | |
| Clinical Supervision Level 2 | | | | | |
| Risk Assessment | | | | | |
| Advanced Risk Assessment | | | | | |
| Enhanced Neglect | | | | | |
| Cultural Awareness | | | | | |
| Integrated Case Management | | | | | |
| Investigative Interviewing | | | | | |
| FAS/E and NAS/E | | | | | |
| Looking After Children | | | | | |
| Substance Misuse | | | | | |
| Youth Alcohol & Drug | | | | | |
| Youth Suicide prevention | | | | | |
| Youth agreements | | | | | |
| District Supervisor module 1 | | | | | |
| District Supervisor mod. 2 | | | | | |
| Leading the Way | | | | | |

6. SUPERVISION/CONSULTATION

The supervisor has a file for each social worker and keeps a monthly sheet of tasks to be completed using the information for case discussion. Each case is reviewed and at times specific cases will be designated separate supervision time. The supervisor says that this practice helps with case planning and for files being closed without delay.

Formal supervision is scheduled twice a month for each social worker and the supervisor uses the open door policy. She advises that she is highly available, a statement which is supported by the staff, and often consultation takes place “on the fly” as needed. The social workers support and rely on one another to do case discussion/consultation bringing the decision to the supervisor for consideration and approval. This collaborative learning is encouraged by the team leader. All the staff agrees that it works to keep everyone up to date on the cases in the office.

7. INTAKE AND TRACKING SYSTEMS

- a) **Investigations:** AGW uses a daily rotating schedule for doing intake and investigations. All intakes are loaded on the system, consultation and the section 16 assessment is completed. If it is an open file the intake is passed on to the social worker who has the file or if not an open FS, kept for follow up by the duty worker. At times cases will be assigned if there is a need. The supervisor has a word document that she renews monthly for tracking each social worker’s cases. She relies on the CMRs to check for investigations that are nearing the ‘30 day’ mark. Work that requires completion is highlighted and a copy given to the social worker with an expectation that the work will

be completed in the near future. When the investigation has been completed and signed off the control copy is placed on the clients file.

- b) **Family Development Response: Not audited at this time.**
- c) **Ongoing Family Service and Child Service** Caseload tracking is done twice a month with the social worker. The work on each file that requires completion is highlighted and a copy of the tracking sheet is given to the social worker. When the file comes in for approval or brought for consultation the completed work is signed off by the team leader. There is little transferring of cases between the three social workers at AGW and all regional or provincial transfers follows the provincial policy for case transfer. The team leader approves all requests for transfer of files.

8. SERVICES TO ABORIGINAL CHILDREN AND FAMILIES

There are no Aboriginal Bands located within the catchment area of AGW. When a family and/or child are Aboriginal the social workers use the family's knowledge and/or do a search to locate the appropriate band. This information is at times not easily obtained and the social workers first provide cultural experiences for the children through the local Aboriginal Family Support Worker. The social workers use the Roots Project, the Aboriginal Consultant or Ktunaxa-Kinbasket to assist with developing cultural plans for the children in care and to locate the band if their band of origin is not known by the family. When the band can be identified the band is contacted and informed of the involvement of MCFD. There is a Métis Services office in Castlegar that AGW contacts when a child or family is identified as Métis

SECTION III: AUDIT RESULTS

9. AUDIT SAMPLE

Current Caseload Management Reports of cases assigned to AGW were identified on the Ministry computer system. Cases were then randomly selected for review as follows: there were twelve open FS files that qualified to be audited and eight (75 %) were audited. There were forty five FS cases closed within the last six months and nine (20%) were randomly selected to be audited. There were fifteen open CS files at AGW and ten that qualified to be audited, seven (70%) were randomly selected to be audited. Of the six CS files closed within the last six months three (50%) were randomly selected to be audited. The cases were selected as follows:

AGW ----8 FS----4 CS
AGW ----5 FS----2 CS
AGW ----4 FS----4 CS

RESULTS

- A. CMAT CFS Narrative Summary
- B. CMAT CIC Narrative Summary

10A. CRITICAL MEASURES AUDIT - CHILD AND FAMILY SERVICES (CMAT-CFS)

NARRATIVE SUMMARY

Seventeen(17) Family service files were audited. Overall compliance to the child and family services standards was **95.7 %**. Information for determining compliance to the service standards was based on documentation. The following provides a narrative summary and explanation of the ratings for each critical measure:

1. Screening and Best Approach to Service Delivery

CRITERIA

The Family Service file contains documentation indicating:

- (a) that the social worker receiving the information has obtained sufficient information from the caller to support an appropriate assessment.
- (b) that the social worker has reviewed the information provided by the reporter, ministry records and any additional information gathered in assessing whether the child may need protection as defined in s.13 of the CFCSA. that an Aboriginal service provider or delegated agency has been contacted when appropriate, when a request for service or a child protection report is received for an Aboriginal child.

The critical measure was applicable to the seventeen files audited and was 100% compliant.

2. When a Child is at Immediate Risk of Harm

CRITERIA

The Family Service file contains:

- (a) an appropriate determination that the child may be at immediate risk of harm and documentation of adequate steps taken to see the child and ensure the child's immediate health and safety.
- (b) documentation of any circumstances in which the worker was unable to see the child in a time frame that would ensure the child's immediate health and safety, and therefore requested another person to initially see and/or interview the child.

The critical measure was applicable to three of the files audited and two were compliant. On the other one file the response called for was immediate and it was two days before the children were seen.

3. Assessing a Child Protection Report and Determining the Most Appropriate Response

CRITERIA

The Family Service file contains documentation indicating:

- (a) that the social worker has determined an appropriate response to the report, conducting a child protection investigation only when alternative approaches would not ensure the child's safety.

The critical measure was applicable to the seventeen files audited and was 100% compliant

4. Family Development Response

Not audited at this time

5. Determining Time Frame to Begin an Investigation

CRITERIA

Where a determination has been made to investigate, the Family Service file contains a documented appropriate determination as to the time frame to begin the investigation and confirmation that the investigation was begun within that time frame.

The critical measure was applicable to eleven of the files audited and was 100% compliant.

6. Conducting a Child Protection Investigation

CRITERIA

Where a determination has been made to investigate, the Family Service file contains:

- (a) documentation that all relevant and necessary information related to the report, including existing case records and files, have been reviewed.
- (b) documentation that information from people who may have relevant knowledge of the family and/or child has been obtained.
- (c) documentation that the child's living situation has been directly observed.
- (d) where required by policy in specific circumstances:
 - documentation that a medical examination of the child has taken place and a copy of the medical report is on file, or where a medical examination was not done, the reasons are documented.
 - documentation that a child with capacity has given consent to medical treatment and has not received medical treatment without their consent unless so ordered under section 29 of the CF&CS Act or in compliance with other legislation. (examples: a unconscious child who requires critical treatment and a parent/guardian is not available, or required treatment under public or mental health legislation).
 - documentation that the aboriginal community and/or identified delegated agency, have been contacted and involved, according to established protocols.
 - where a child is considered to be in immediate danger and the child or family cannot be located, there is documentation that the police were involved and information/action alerts were completed as required.
 - where in the course of an investigation, a conclusion has been reached that a child does not need protection, there is documentation of any decision to discontinue the investigation and where required, of any alternative response chosen.

The critical measure was applicable to eleven of the seventeen files audited and ten files were 100% compliant. Documentation on the one other file indicated most steps of an investigation were completed there was no visit of the home documented.

7. Seeing and Interviewing a Child and Family

CRITERIA

Where a determination has been made to investigate, the Family Service file contains documentation that:

- (a) the child has been seen and, where developmentally appropriate, interviewed.
- (b) all other vulnerable children in the home have been seen and, where developmentally appropriate, interviewed.
- (c) the parent/s have been seen and interviewed.
- (d) if the child is aboriginal, the aboriginal community or agency is involved, if appropriate.

Eleven of the seventeen files audited were applicable to this critical measure and were 100% compliant.

8. Concluding a Child Protection Investigation

CRITERIA

The Family Service file documents:

- (a) a decision as to whether or not the child is in need of protection (as defined under section 13 of the CF&CS Act), which is consistent with the facts gathered during the investigation.
- (b) all necessary steps required to address the child's need for protection have been considered and implemented.

Ten of the eleven files that were applicable to this critical measure were compliant. On the one other file one of the steps of a child protection investigation was not complete and could not be seen as concluded.

9. Concluding a Child Protection Investigation in a Timely Manner

CRITERIA

The Family Service file documents that the investigation was completed within 30 calendar days.

Ten of the eleven files applicable to this critical measure were compliant. On the one other file the investigation took between 31 to 45 days to complete.

10. Developing a Plan to Keep a Child Safe

CRITERIA

The Family Service file contains:

(a) a documented plan which:

- adequately addresses the child's safety needs.
- identifies the strengths of the child and family that mitigate the safety risks to the child.
- considers the child's needs for stability and continuity of relationships.
- considers the participation of extended family in keeping a child safe.
- identifies the time frames for a review of the plan.

(b) documentation that adequate services and strategies to address the child's safety needs were implemented in a timely manner.

Note: *This critical measure does not include the reassessment section of the CFS standard which is covered in Critical Measure # 11.*

Seven files were applicable to this critical measure and six were compliant. On the one other file there was no documented CRA or RRSP to indicate the decision making for developing a plan to keep a child safe.

11. Reassessing Plan to Keep a Child Safe and Ending Family Service Response

CRITERIA

The Family Service file contains:

(a) documentation on an ongoing and regular basis, of reassessments and any adjustments to the plan necessary to keep the child safe, or when significant changes in the circumstances of the family or child has occurred.

(b) documentation that the plan to keep the child safe and any reassessments are reviewed with the child as appropriate, with those who have a role in keeping the child safe and wherever possible, with those involved in the plan development.

(c) documentation that in all cases where a Protection Family Service Response has ended, the family service file contains an assessment that supports a conclusion that the parents are able to keep the child safe without further protection family services.

Notes

1. Only those portions of CFS standard #17 above related to reassessment are relevant to this criteria.
2. Criteria (c) is cross-referenced to CFS standard #20 (Ending Child Protection Services to a Child and Family).

Of the seventeen files audited one was applicable to this critical measure and was 100% compliant.

12. Notification of Fatalities and Critical Injuries

CRITERIA

The Family Service file contains documentation confirming:

- (a) that an initial report in the prescribed format has been submitted to the designated director within 24 hours of learning of a death or critical injury of a child who has received services within the past 12 months.
- (b) that reasonable efforts have been made to inform and offer support to the child's legal guardians and appropriate members of the child's family and extended family.
- (c) that community service providers and delegated agencies involved with the child have been informed of the incident.

There were no files applicable to this critical measure.

13. Supervisory Approval

CRITERIA

The Family Service File contains documentation of circumstances requiring supervisory approval and documentation of approval including at a minimum when:

- (a) * determining if an intake call or information is a protection report.
- (b) deciding on a response to a child protection report and an appropriate response time.
- (c) conducting and concluding a child protection investigation.
- (d) notifying the police.
- (e) determining whether a child needs protection.
- (f) developing an ongoing safety plan.
- (g) using the court process.
- (h) removing a child.
- (i) placing a child.
- (j) Reuniting a child with their family.
- (k) transferring responsibility for or ending services.

*an exception to policy has been considered and approved.

The seventeen files audited were applicable to this critical measure and were 100% compliant.

Additional Comments: this audit was of high compliance with six of the Critical Measures at 100%. On the remaining seven Critical Measures each had one file that was non-compliant. The files were well organized and documentation was for the most part easily located. It appeared that the social workers all kept extensive black book notes. One reminder given to the team was when conducting a child protection investigation the home of the child must be visited for every investigation.

10B. CRITICAL MEASURES AUDIT - CHILDREN IN CARE (CMAT-CIC)

NARRATIVE SUMMARY

Ten (10) service files were audited. Overall compliance to the child service standards was 88.8 %. Information for determining compliance to the service standards was based on documentation. The following provides a narrative summary and explanation of the ratings for each critical measure:

1. Preserving the Identity of an Aboriginal Child in Care

CRITERIA

The Child Service file:

- (a) indicates whether or not the child is Aboriginal.
- (b) identifies the Aboriginal community or First Nation with which the child is affiliated, and contains documentation of the child's status and membership number, or of application for status as appropriate.
- (c) Indicates that the social worker has developed an understanding of the history and current circumstances of the child and family, by involving the child, the family, the child's Aboriginal community, any significant people in the child's life, and community members who have been or will be involved in the child's life.
- (d) Indicates that a cultural plan has been developed for the child within six months of the child coming into care, if the child is an Aboriginal child as defined in the CFCSA. (See Cultural Plan for Aboriginal Children in Care - Draft, November 2003)

The ten files were applicable to this critical measure and were 100% compliant.

2. Assuming Responsibility for a Child in Care

CRITERIA

The Child Service file:

- (a) contains a copy of the court order, adoption consent, voluntary care or special needs agreement, or other documentation confirming the child's legal status as a Child in Care, and documentation of citizenship and immigration status, if applicable.
- (b) documents the nature and extent of involvement of the child's parents and other family members.
- (c) if the child is not Aboriginal, identifies any unique cultural identity as applicable.
- (d) indicates that the social worker understands the child's history and current circumstances and needs.

The ten files were applicable to this critical measure and were 100% compliant.

3. Ensuring a Child's Safety While in Care

CRITERIA

- (a) The Child Service file contains documentation confirming that the child has been placed in a living arrangement that addresses the child's identified needs, including safety needs, or that, in the case of a youth who refuses placement, all reasonable efforts have been made to assure such a placement.
- (b) The Child Service file contains documentation that all reports in connection with a child's safety have been adequately addressed; or that an adequate plan is in place to address them.

The ten files were applicable to this critical measure and were 100% compliant.

4. Ensuring the Rights of a Child in Care

CRITERIA

The Child Service file contains documentation confirming:

- (a) that the child's care conforms with the rights defined by s. 70 of the CFCSA.
- (b) that the child has been informed of these rights, as appropriate to the child's age and developmental level.
- (c) in cases where the child reports that his or her rights have not been respected, that the social worker has met with the child and others involved to try to resolve the issues; that an appropriate dispute resolution process has been offered and promoted where required; that the child has been provided with information about the Office for Children and Youth, the Ombudsman, and other available community or provincial advocacy services; and that the child has been supported throughout the time required to resolve the issue.

Seven of the ten files audited were compliant to this critical measure. On the other three files there was no documentation to indicate that the child, or a significant person in the child's life, was explained a child's rights while in care.

5. Involving a Child and Considering the Child's Views in Case Planning and Decision Making

CRITERIA

The Child Service file contains documentation confirming:

- (a) that the child has been involved as far as possible in the development and review of his or her plan of care, as appropriate to the child's age and developmental level.
- (b) that the caregivers and others with a significant relationship to the child have been involved in the development and review of the child's plan of care, as consistent with the child's views and best interests.
- (c) That appropriate steps have been taken to address any identified barriers to informing and involving the child in case planning, such as providing an interpreter or involving people who can promote a greater understanding of the child's views about cultural, identity, or other issues

Nine of the files audited were compliant to this critical measure. On the other one file there was no documentation to indicate that the child had been involved in case planning or decision making.

6. Maintaining Personal Contact with a Child in Care

CRITERIA

The Child Service file contains documentation that the social worker has had private in-person contact with the child at least every 90 days, and whenever there has been a change in placement, social worker, or other significant circumstances

Eight of the ten files audited were compliant to this critical measure. On one of the other files the rating reflects the lack of documentation by the previous social worker not the social worker who has conduct of the file at the time of the audit who had documented regular contact with the child. On the other file there is no documentation to indicate regular contact with the child

7. Meeting a Child's Need for Stability and Continuity of Lifelong Relationships

CRITERIA

The Child Service file contains documentation confirming:

- (a) that efforts have been made to promote continuity for a child in care by supporting contact with parents and family members, and other significant people in the child's life, where such contact is in the child's best interests; and by maintaining connections with the child's cultural heritage and identity.
- (b) that appropriate strategies have been planned and implemented to promote stability and continuity of lifelong relationships, including the exploration of maintaining existing relationships, re-establishing past relationships, and planning for the development of new lifelong relationships.

The ten files audited were 100% compliant to the critical measure.

8. Assessments and Planning for a Child in Care

CRITERIA

- (a) The Child Service file contains an initial written plan of care, prepared within 30 days of a child's admission to care, which addresses:
 - the overall goal for the child, including the establishment of stable and ongoing living arrangements
 - contact with parents and other family members, community, and others involved with the child, as appropriate
 - services required to implement the plan of care
 - the child's health care needs and appointments
 - the child's education
 - the child's involvement in social, recreational and spiritual instruction and activities
- (b) If the child has been in care for over six months, the Child Service file contains a thorough assessment of the child's needs, and a written plan of care. As appropriate, the child, the child's family, the caregiver, a representative of the child's Aboriginal community (if the child is Aboriginal), and other significant people in the child's life, are to be involved in the development of the plan of care. The plan of care should address the following:
 - health, emotional, spiritual and behavioural development
 - educational and intellectual development
 - culture and identity
 - family, extended family, and social relationships
 - social and recreational involvement
 - social presentation and development of self-care skills related to assuming successful independent functioning
 - placement
- (c) The Child Service file contains documentation confirming that there has been a review of the child's written plan of care at least every 90 days while the child remains in care.

Eight of the ten files audited were compliant. The other two files were partially compliant. There were current CPOCs on those two files but the required reviews had not been documented.

9. When a Child is Missing or Has Run Away

CRITERIA

The Child Service file contains documentation confirming:

- (a) that the designated director, the child's parent if appropriate, and others who may assist in locating the child, have been notified as soon as possible when a child in care is missing or has run away.
- (b) That the police have been notified and that appropriate identifying information has been provided to the police.
- (c) that an appropriate plan has been developed and implemented to locate the child.
- (d) if the child habitually runs away under circumstances that place him or her at high risk of harm, that the plan of care has been reviewed to develop strategies to address the high-risk behaviour.
- (e) if the child has been located, that all interested parties have been notified and appropriate action has been taken according to MCFD policy.

Three files were applicable to this critical measure and two were compliant. On the other file documentation of the child's behaviour indicated that a Reportable Circumstance would have been required

10. Notification of Fatalities, Critical Injuries and Serious Incidents

CRITERIA

The Child Service file contains documentation confirming:

- (a) that an initial report in the prescribed format has been submitted to the designated director within 24 hours of learning of a death, critical injury, or serious incident involving a child in care.
- (b) that reasonable efforts have been made to inform and offer support to the child's legal guardians and appropriate members of the child's family and extended family.
- (c) that community service providers and delegated agencies involved with the child have been informed of the incident.
- (d) that the Public Guardian and Trustee has been notified of the death or critical injury of a child in care for whom the Public Guardian and Trustee is guardian of the estate; and that the Public Guardian and Trustee has been notified of any serious incident involving a child in care for whom the Public Guardian and Trustee is guardian of the estate, if that incident may affect the child's legal or financial interests.

The one file applicable to this critical measure was compliant.

11. Planning for a Child Leaving Care

CRITERIA

The Child Service file contains documentation confirming :

- (a) that appropriate preparation takes place when a child will leave care, including involving the child, relevant family members, caregivers, and other significant persons in planning for the transition; arranging for appropriate services to support the child and family after the child has left care; arranging for a medical examination if necessary or if requested by the child or family; and ensuring that the child and caregiver have the opportunity to discuss the transition.
- (b) that MCFD staff coordinate and monitor the transition from care to placement with parents or other out-of-care placement, ensuring that the child has all of his or her belongings; that the child and/or person assuming care have all necessary documentation and information; that the child and/or the person assuming care have information about the reinstatement of health care coverage; and, if applicable, that the person assuming care has been provided with information about application for or reinstatement of the Child Tax benefit.
- (c) that all youth in care are supported in developing self-care and independence skills.
- (d) that a youth's capacity for successful living in the community is assessed with the participation of others involved in the youth's plan of care.
- (e) that, prior to leaving care, a youth is provided with appropriate information and support in obtaining the necessities noted in the Standard Statement.
- (f) that, prior to leaving care, a youth is assisted in obtaining identification and personal records, and with information on how to request access to his or her files.

Four files were applicable to this critical measure. Three were compliant and on the one other file without a plan of return being documented.
Supervisory Approval

CRITERIA

The Child Service file contains documentation of supervisory approval :

- (a) when placing a child;
- (b) when reuniting a child with his or her family;
- (c) when transferring responsibility for or ending services;
- (d) when a child's plan of care is developed;
- (e) when child's plan of care is reviewed.

The ten files audited were applicable to this critical measure and were compliant.

Additional Comments:

Practice Strengths: Six of the critical measures for this audit were 100% compliant. The social workers consult regularly with the supervisor keeping her up to date on the planning for children in care. The files often had pictures of the children in care on file.

Areas For Improved Practice: Critical measure #9, When a child is missing or has run away was brought to the attention of the team leader for one file.

It was suggested that there be a Reportable Circumstance be sent to the Director.

Frankie Williams
Auditor
Interior Region

Date

Brendan Flynn
Deputy Director
Interior Region

Date

11. AUDIT RECOMMENDATIONS

On November 1, 2007 members of the regional senior management team, the team leader at AGW and the auditor convened in a teleconference during which practice issues identified by the audit were discussed and recommendations for addressing the issues were proposed. It was recognized by the management group that the audit was of very high compliance. There were no trends that reflected poor practice. The auditor and the Deputy Director of Child welfare met with the team to discuss the outcome of the audit. Prior to this meeting the team leader had met with the team upon receiving the audit results and any files that were not compliant were identified and a plan developed to make the needed changes. The CSM had discussed the audit results and plans with the supervisor. The senior regional management team acknowledged that the few files where there had been an issue had all been addressed and the needed changes made. There are no recommendations required.

Recommendations developed by: John Waters, Director of Child Welfare, Nancy McComb, Director of Regional Operations, Angus McKeirahan, Community Services Manger, Brendan Flynn, Deputy Director of Child Welfare and Rhonda Shears, Supervisor of AGW.

AUDIT SIGN OFF:

John Waters
Director of Child Welfare
Interior Region

Date

Provincial Director

Date

SECTION IV: APPENDICES - AUDIT DATA SUMMARIES

A. CRITICAL MEASURES AUDIT -CHILD AND FAMILY SERVICES (CMAT-CFS)

DATA SUMMARY

Office Code: AGW

Total # of cases audited: 17

| | CRITICAL MEASURES | C | | PC | | NC | | NA |
|-------------------------------------|--|-----|------|----|---|----|------|-----|
| | | # | % | # | % | % | # | |
| 1 | Screening and Best Approach to Service Delivery CFS Standard #1 | 17 | 100 | | | 0 | 0 | |
| 2 | When a Child is at Immediate Risk of Harm CFS Standard #11 | 2 | 66.7 | | | 1 | 33.3 | 14 |
| 3 | Assessing a Child Protection Report and Determining the Most Appropriate Response CFS Standard #12 | 17 | 100 | | | 0 | 0 | 0 |
| 4 | Family Development Response CFS Standard #14 | 0 | 0 | | | 0 | 0 | 17 |
| 5 | Determining a Time Frame to Begin an Investigation CFS Standard #15 | 11 | 100 | | | 0 | 0 | 6 |
| 6 | Conducting a Child Protection Investigation CFS Standard #15 | 10 | 90.9 | | | 1 | 9.1 | 6 |
| 7 | Seeing and Interviewing the Child and Family CFS Standard #15 | 11 | 100 | | | 0 | 0 | 6 |
| 8 | Concluding a Child Protection Investigation CFS Standard #16 | 10 | 90.9 | | | 1 | 9.1 | 6 |
| 9 | Concluding Investigation in a Timely Manner CFS Standard #16 | 10 | 90.9 | | | 1 | 9.1 | 6 |
| 10 | Developing and Implementing a Plan to Keep a Child Safe CFS Standard #17 | 6 | 85.7 | | | 1 | 14.3 | 10 |
| 11 | Reassessing Plan to Keep a Child Safe and Ending Family Service Response CFS Standard #17 | 1 | 100 | | | 0 | 0 | 16 |
| 12 | Notification of Fatalities, Critical Injuries and Serious Incidents CFS Standard #24 | 0 | 0 | 0 | 0 | 0 | 0 | 17 |
| 13 | Supervisory Approval C&FD Standard on Supervisory Approval | 17 | 100 | | | 0 | 0 | 0 |
| Total Applicable Indicators: | | 112 | 95.7 | 0 | 0 | 5 | 4.3 | 104 |

= Number of applicable cases

% = Percent of total

Rating Definitions:

C Full compliance to the standard

PC Partial compliance: The intent of the standard is met but significant practice issues have not been addressed

NC Non-compliance to the standard's criteria requirements

NA Not applicable to the standard being measured.

CRITICAL MEASURES AUDIT - CHILDREN IN CARE (CMAT-CIC)

DATA SUMMARY

Office Code: AGW **Total # of cases audited:** 10

| | CRITICAL MEASURES | C | | PC | | NC | | NA |
|-------------------------------------|--|-----------|-------------|----------|------------|----------|-------------|-----------|
| | | # | % | # | % | # | % | # |
| 1 | Preserving the Identity of an Aboriginal Child in Care CIC Service Standards #1 and #19 | 10 | 100 | | | 0 | 0 | |
| 2 | Assuming Responsibility for a Child in Care CIC Service Standard #4 | 10 | 100 | | | 0 | 0 | |
| 3 | Ensuring a Child's Safety While in Care CIC Service Standard #5 | 10 | 100 | | | 0 | 0 | |
| 4 | Ensuring the Rights of a Child in Care CIC Service Standard #6 | 7 | 70 | | | 3 | 30 | 0 |
| 5 | Involving a Child and Considering the Child's Views in Case Planning and Decision Making CIC Service Standard #8 | 9 | 90 | 1 | 10 | 0 | 0 | |
| 6 | Maintaining Personal Contact with a Child in Care CIC Service Standard #9 | 8 | 80 | | | 2 | 20 | |
| 7 | Meeting a Child's Need for Stability and Continuity of Lifelong Relationships CIC Service Standard #10 | 10 | 100 | 0 | 0 | 0 | 0 | |
| 8 | Assessments and Planning for a Child in Care CIC Service Standard #11 | 8 | 80 | 2 | 20 | 0 | 0 | |
| 9 | When a Child is Missing or Has Run Away CIC Service Standard #14 | 2 | 66.7 | | | 1 | 33.3 | 7 |
| 10 | Notification of Fatalities, Critical Injuries and Serious Incidents C&FS Standard #24 | 1 | 100 | 0 | 0 | 0 | 0 | 0 |
| 11 | Planning for a Child Leaving Care CIC Service Standards #15 and #16 | 3 | 75 | | | 1 | 25 | 6 |
| 12 | Supervisory Approval C&FD Standard on Supervisory Approval | 10 | 100 | | | 0 | 0 | 0 |
| Total Applicable Indicators: | | 88 | 89.8 | 3 | 3.1 | 7 | 7.1 | 22 |

= Number of applicable cases

% = Percent of total

Rating Definitions:

- C** Full compliance to the standard
- PC** Partial compliance: The intent of the standard is met but significant practice issues have not been addressed
- NC** Non-compliance to the standard's criteria requirements
- NA** Not applicable to the standard being measured.

Directors Case Practice Audit – AGW Castlegar Community Services

Reviewed by the Provincial Director of Child Welfare – no further recommendations to add.

Marilyn Hedlund
Provincial Director of Child Welfare

February 18, 2008