

**DIRECTOR'S CASE PRACTICE AUDIT REPORT**  
**MINISTRY OF CHILDREN AND FAMILY DEVELOPMENT**  
**INTERIOR REGION**  
**NAKUSP COMMUNITY SERVICES (AGY)**

**Field Work Completed: August 31, 2007**  
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## **SECTION I: INTRODUCTION**

### **DIRECTOR'S CASE PRACTICE AUDIT REPORT INTERIOR REGION NAKUSP COMMUNITY SERVICES (AGY)**

#### **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**

Nakusp is located on the eastern shore of the Upper Arrow Lake. It is one of the many towns in the Kootenays that came into being because of the mining boom in the Slocan Valley during the early part of the twentieth century. Nakusp is surrounded by the Selkirk and Monashee Mountains and is home to some large and beautiful hot springs. In spring, summer and fall the area is a favoured tourist site for folks wanting the experience of country or wilderness with the luxury of hot springs and dazzling scenery.

The area offers a number of festivals and community gatherings during the warmer months of the year. The biggest one seems to be the Hills Garlic Festival that now happens in New Denver, having outgrown Hills. Thousands flood into the little town to participate in the one day festival. It has a family flavour and there are little kids in abundance, sprouting fairy wings and painted faces.

Nakusp and the surrounding area is well known for being an excellent place to take advantage of great outdoor experiences and than relaxing in one of the hot springs. This vicinity today is known for its excellent hiking, canoeing, fishing, mountain climbing, skiing and hot spring soaking. The area has some breath taking scenery and a wilderness that a person could easily get lost in.

It is not an easy place to access in the winter as the roads going in and out hug the mountains and in more than one place can be reduced to one lane. Through out the year the travel to the area is by car or bus. The closest airport is in Castlegar some three hours away by car.

The Nakusp Community Services Office is located on Highway 6 in the downtown area of the city. The Nakusp office is unique in sharing the space with the Government Agent and the Ministry for Employment and Income Assistance. The Government Agent also fills the role of office manger. The Government Agent and one administrative staff do all administration duties in the office. The auditor observed a close, respectful, working relationship between all the service providers in the Nakusp office.

The Nakusp MCFD staff travel to the small towns and the vast rural areas along Highway 6, Highway 23 and Highway 31. The little towns that add about 1200 people to Nakusp's population of 1800 also had for the most part their birth during the mining boom in the early twentieth century. While most of the small towns still exist, Sandon, one of the mining boom towns, is considered to be a "ghost town" (and a tourist attraction). During this early part of the twentieth century the area was much heavier populated than it is today. Like many areas of the Kootenays the number of children are declining and parents have had a struggle to keep their little rural schools operating.

### 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, and 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 Nakusp. The Aboriginal Services Manager for the East and West Kootenays is located in Kelowna. The Nakusp MCFD team consists of a Team Leader and two social workers.

The team leader works half time as does one of the social workers. The team leader works is the team leader and the resources social worker in her half time position. The senior social worker on staff works as the team leader and social worker in her half time position. The one other social worker works full time. After hours services are delivered by the three team members. There is strong cooperation between the three individuals to ensure that after hours is always responded to and that one of the senior staff is always available for consultation. The team states that the RCMP are very cooperative and supportive in assisting with after hours' calls.

- 1/ Residential services is provided by the supervisor of the MCFD team in Nakusp. In her capacity of a resource social worker she reports to the Resources Team Leader in Nelson. All the duties and tasks of a resource social worker are completed by the team leader including, home studies, recruitment and retention of foster parents. The Supervisor described having a close supportive team of foster parents. She saw a big advantage to working in the small community where people know one another well and see each other often.

The decisions about reviews of complaints in a foster home and foster home investigations are made between the Resources Team Leader and the CSM. If an investigation or review of a complaint needs to be completed it is assigned to a senior social worker from another office. The Nakusp team leader says that this works well freeing her up to support the foster parents through the process.

- 2/ Service Transformation –the staff of MCFD are committed to working cooperatively with their community partners. There is a well established service group in the Nakusp area that meets once a month. The team leader described the other professionals in the community as really

being on board with family support and working together to protect children. The service group is involved in joint training supporting one another in building skills.

**4. STAFFING**

a) **Professional Staff Complement/Staff Turnover:**

<b>Position</b>	<b>Length of Time on Team</b>	<b>Educational</b>	<b>MCF Experience</b>	<b>Delegation</b>	<b>Status</b>
Team Leader				full	Permanent/ part time
SPO4				Full	Permanent/ part time
SPO1				partial	Permanent/ full time

b) **Current Workload:** the caseload management report (CMR) that was run on the first day of the audit (August 27, 2007) indicated five open Family Service files, seven open Child Service files, seventeen closed within the last six months Family Service files and three closed within the last six months Child Service files. The following indicates the number of files open on each caseload at AGY at the time of the audit.

AGY -----1 CS

AGY -----2 CS-----5 FS

AGY -----4 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 size of the team makes for quick and ongoing supervision and consultation. The team leader stated that this was her first time at having a practicum student this year. The student has now become an employee. The supervisor and the senior social worker consult freely and assist the newer social worker with case practice and case decisions are made as a team. This close connection ensures that all members of the team are aware of the plan for all cases on the office caseload. The team meets weekly for in depth discussion and case consultation.

The team leader has her file documentation and plans signed off by the CSM. She also will seek consultation from the CSM or from another supervisor in the West Kootenays when she has responsibility for a file or for an intake. The team leaders in the West Kootenay use each other to support the teams when they might not be available. It was described by the team as a “buddy system”.

## 7. INTAKE AND TRACKING SYSTEMS

- a) **Investigations:** Up until July, 2007 there were just two social work employees in the office. The social worker would do all intakes and the team leader would be the back up. At the time of the audit the additional(new) social worker would do intake with the other social worker doing half time backup and the team leader doing the other half time back up. As the two original staff would both work half time the new social worker documented the information and would take the intake for consultation with whoever was working at the time. The staff at AGY always makes sure that there is senior staff available for consultation. Home telephone numbers of staff were available for backup/consultation if needed and for after hours call out.

All Intakes were tracked by recording the information in a binder. The binder was kept up to date and the record could be checked quickly to see if a family had a history or to fill in “sketchy” information for a new intake. The team indicates that the binder is a great historical record. The Intake list is reviewed at the weekly team meeting.

- b) **Family Development Response:** *Not Audited At This Time*
- c) **Ongoing Family Service and Child Service:** The team members used two tracking sheets one for family services and one for child services. The forms were used to track the open cases at every weekly meeting and case decisions/planning was done at that time. The supervisor used the two forms to follow up individual cases with the social worker. When the team leader was required to keep a file that file was reviewed and tracked with the CSM. If a decision needed to be made and the CSM not available, the team leader would then consult with another team leader in the area. CMRs were used regularly to cross check what work might be required on a file.

## 8. SERVICES TO ABORIGINAL CHILDREN AND FAMILIES

There are no Aboriginal bands in the Nakusp catchment area. The team leader stated that they had very few Aboriginal families living in the in the area. If there was an Aboriginal family that required service or an Aboriginal child was brought into care the Nakusp office would request assistance from the staff at Ktunaya-Kinbasket to ensure the proper protocols were followed. In the West Kootenays there is one Aboriginal Family Support Worker who provides services to Aboriginal children through the school system. The staff of the Nakusp office were aware of the requirement for Aboriginal children in care to have a cultural plan developed and placed on their file.

### **SECTION III: AUDIT RESULTS**

#### **9. AUDIT SAMPLE**

There were twelve open files at the Nakusp office at the time of the audit, five open Family Service files and seven open Child Services files. Two of the FS files were appropriate to audit the other three, being open investigations. All seven CS files were audited.

Current caseload management reports (CMR) of cases assigned to this office were identified on the Ministry computer system. Cases were then randomly selected for review as follows: One hundred percent (100%) of the CS files were audited, both open and the three that were closed within the last six months before the audit. Forty percent of the open FS files were audited (100% of the files appropriate to audit) and twelve (70%) of the seventeen FS files that had been closed within the last six months.

AGY -----2 FS-----2 CS

AGY -----6 FS-----1 CS

AGY -----6 FS-----7 CS

#### **10. CRITICAL MEASURES AUDIT RESULTS**

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

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

### NARRATIVE SUMMARY

*Fourteen (14)* Family service files were audited. Overall compliance to the child and family services standards was **94.4%**. 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.

Thirteen of the audited files were compliant to this measure. On the one other file the family was identified as having aboriginal heritage and there was no documentation to indicate that this information was attended to.

#### 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.

One file was applicable to be audited to this measure and it was 100% compliant.

#### 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.

Thirteen of the files were 100% compliant to this measure. On the one remaining file the documentation indicated that \_\_\_\_\_, who had made a disclosure of \_\_\_\_\_, was never interviewed. This matter was brought to the attention of the supervisor who will follow up with the social worker.

#### 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.

This critical measure was 100% compliant to the 2 files audited to this measure.

#### 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: an 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 two files audited to this measure were 100% compliant.

#### 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.

The files audited to this measure 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.

The files audited to this measure were 100% compliant.

## 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.

The files audited to this measure were 100% compliant.

## 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.*

Two files were appropriate to audit for this measure and one was compliant. On the other file there was no documentation to indicate that a Comprehensive Risk Assessment was completed. The situation would have required one. This file was brought to the attention of the supervisor.

## 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 these criteria.
2. Criteria (c) is cross-referenced to CFS standard #20 (Ending Child Protection Services to a Child and Family).

This measure was not applicable to the files audited.

## 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) those 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.

This critical measure was not applicable to the files audited.

## 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 fourteen files audited were 100% compliant to this critical measure.

### **Additional Comments:**

**Practice Strengths:** this was an audit of high compliance and the files audited reflected a strong commitment to provide clear and thorough records for their clients. Documentation and interviews with the staff indicated a commitment to consistent communication and

support to each other and their community partners in providing services to children and their families.

**Areas For Improved Practice:** the two cases highlighted to the supervisor steps required to comply with the critical measure had not been completed. In one the social worker spoke with [redacted] about the incident [redacted] reported [redacted]. [redacted] did not deny the incident happened and provided additional information [redacted]. [redacted] was never interviewed. The supervisor was to discuss with the social worker that as child protection social workers our first priority is to assure the safety of the children and to assure that children are always heard.

On the second file a family presented as being at high risk [redacted]. All safety steps were taken to protect [redacted]. [redacted] history with MCFD and follow up had not occurred as it should have. It was time to complete a CRA. There was no CRA on file. In discussion with the supervisor she added information that supported that [redacted] are not at risk [redacted]. She agreed that a CRA should have been completed at the time. The file is currently closed. [redacted] connected to community supports.

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

### NARRATIVE SUMMARY

*Ten (10)* child service files were audited. Overall compliance to the child service 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. 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 audited 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 audited 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 audited 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.

On one of the ten files audited there was no documentation to indicate that the child had rights explained while in care. The child was in care for only a short while it is mandatory and a child's right to have rights explained and known while in care. The other nine files were compliant.

#### 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

The ten files audited were all 100% compliant.

#### 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

The ten files audited were compliant to this measure.

#### 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 to this measure were compliant. It should be noted that the majority of children that came into care were able to stay within their own community, maintaining their school and their friends and family who were local.

## 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 100% compliant. The two other files were partially compliant. On both those files there were yearly CPOC documented but both files lacked regular reviews of the plans.

## 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.

There were no files applicable to this measure.

## 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.

One of the ten files was applicable to this measure and it 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 measure and they were compliant

## 12. 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 applicable to this measure were 100% compliant.

**Additional Comments:** this was an audit of high compliance and documentation indicated a high degree of commitment to provide for children within their own community. There is

also documentation to indicate that staff seeks support and specialized services from other areas if required.

**Practice Strengths:** the documentation on the child services files had well developed plans for the children. The plans often described the child in such detail that it felt as if a picture had been painted. The plans were always, if at all possible, to keep the children in a family together, keep kids in their own communities and schools and to have the community partners share in the responsibility of providing the best for the children. Documentation indicated a strong link with the local foster parents.

**Areas For Improved Practice:**

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Frankie Williams  
Auditor  
Interior Region

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Date

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Brendan Flynn  
Deputy Director  
Interior Region

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Date

**11. AUDIT RECOMMENDATIONS**

On November 1, 2007 members of the regional senior management team, the team leader at AGY and the auditor convened in a teleconference during which it was acknowledged that the audit was of high compliance. The audit indicated that there were no problematic recurring practice themes. The few files that required additional documentation were discussed between the supervisor and the CSM and a plan developed to complete the documentation. The auditor and the Deputy Director of child Welfare met to discuss the audit results with the team.

**Recommendations developed by:** John Waters, Director of child Welfare, Nancy McComb, Director of Regional Operations, Angus McKierehan, Community Services Manager, Brendan Flynn, Deputy Director of Child Welfare and Margarete Kappus, Supervisor of AGY

**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: AGY

Total # of cases audited: 14

	CRITICAL MEASURES	C		PC		NC		NA
		#	%	#	%	#	%	
1	Screening and Best Approach to Service Delivery <b>CFS Standard #1</b>	13	92.9			1	7.1	
2	When a Child is at Immediate Risk of Harm <b>CFS Standard #11</b>	1	100			0	0	13
3	Assessing a Child Protection Report and Determining the Most Appropriate Response <b>CFS Standard #12</b>	12	92.3			1	7.7	1
4	Family Development Response <b>CFS Standard #14</b>	0	0			0	0	0
5	Determining a Time Frame to Begin an Investigation <b>CFS Standard #15</b>	2	100			0	0	12
6	Conducting a Child Protection Investigation <b>CFS Standard #15</b>	2	100			0	0	12
7	Seeing and Interviewing the Child and Family <b>CFS Standard #15</b>	2	100			0	0	12
8	Concluding a Child Protection Investigation <b>CFS Standard #16</b>	2	100			0	0	12
9	Concluding Investigation in a Timely Manner <b>CFS Standard #16</b>	2	100			0	0	12
10	Developing and Implementing a Plan to Keep a Child Safe <b>CFS Standard #17</b>	1	50			1	50	12
11	Reassessing Plan to Keep a Child Safe and Ending Family Service Response <b>CFS Standard #17</b>	0	0	0	0	0	0	14
12	Notification of Fatalities, Critical Injuries and Serious Incidents <b>CFS Standard #24</b>	0	0	0	0	0	0	14
13	Supervisory Approval <b>C&amp;FD Standard on Supervisory Approval</b>	14	100			0	0	
<b>Total Applicable Indicators:</b>		<b>51</b>	<b>94.4</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>5.6</b>	<b>128</b>

# = 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: AGY

Total # of cases audited: 10

	CRITICAL MEASURES	C		PC		NC		NA
		#	%	#	%	#	%	#
<b>1</b>	Preserving the Identity of an Aboriginal Child in Care <b>CIC Service Standards #1 and #19</b>	<b>10</b>	<b>100</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	
<b>02</b>	Assuming Responsibility for a Child in Care <b>CIC Service Standard #4</b>	<b>10</b>	<b>100</b>			<b>0</b>	<b>0</b>	
<b>3</b>	Ensuring a Child's Safety While in Care <b>CIC Service Standard #5</b>	<b>10</b>	<b>100</b>			<b>0</b>	<b>0</b>	
<b>4</b>	Ensuring the Rights of a Child in Care <b>CIC Service Standard #6</b>	<b>7</b>	<b>77.8</b>			<b>2</b>	<b>22.2</b>	<b>1</b>
<b>5</b>	Involving a Child and Considering the Child's Views in Case Planning and Decision Making <b>CIC Service Standard #8</b>	<b>10</b>	<b>100</b>			<b>0</b>	<b>0</b>	
<b>6</b>	Maintaining Personal Contact with a Child in Care <b>CIC Service Standard #9</b>	<b>10</b>	<b>100</b>			<b>0</b>	<b>0</b>	
<b>7</b>	Meeting a Child's Need for Stability and Continuity of Lifelong Relationships <b>CIC Service Standard #10</b>	<b>10</b>	<b>100</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	
<b>8</b>	Assessments and Planning for a Child in Care <b>CIC Service Standard #11</b>	<b>8</b>	<b>80</b>	<b>2</b>	<b>20</b>	<b>0</b>	<b>0</b>	
<b>9</b>	When a Child is Missing or Has Run Away <b>CIC Service Standard #14</b>	<b>0</b>	<b>0</b>			<b>0</b>	<b>0</b>	<b>10</b>
<b>10</b>	Notification of Fatalities, Critical Injuries and Serious Incidents <b>C&amp;FS Standard #24</b>	<b>1</b>	<b>100</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>9</b>
<b>11</b>	Planning for a Child Leaving Care <b>CIC Service Standards #15 and #16</b>	<b>4</b>	<b>100</b>			<b>0</b>	<b>0</b>	<b>6</b>
<b>12</b>	Supervisory Approval <b>C&amp;FD Standard on Supervisory Approval</b>	<b>10</b>	<b>100</b>			<b>0</b>	<b>0</b>	<b>0</b>
<b>Total Applicable Indicators:</b>		<b>90</b>	<b>95.7</b>	<b>2</b>	<b>2.1</b>	<b>2</b>	<b>2.1</b>	<b>26</b>

# = 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 – AGY Nakusp Community Services**

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

Marilyn Hedlund  
Provincial Director of Child Welfare