

DIRECTOR'S CASE PRACTICE AUDIT REPORT
MINISTRY OF CHILDREN AND FAMILY DEVELOPMENT
INTERIOR REGION
100 MILE HOUSE COMMUNITY SERVICES (EHF)

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**1. DIRECTOR’S CASE PRACTICE AUDIT REPORT
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100 MILE HOUSE COMMUNITY SERVICES (EFH)**

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SECTION I: INTRODUCTION

DIRECTOR'S CASE PRACTICE AUDIT REPORT INTERIOR REGION 100 MILE HOUSE COMMUNITY SERVICES (EHF)

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 (check applicable).

- 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

- a) Geographic/Demographic: Once a major hub on the Cariboo Wagon Road, 100 Mile House is now a major service and commercial area for the South Cariboo. Many towns along the Cariboo Highway are referred to by their distance along the Gold Rush Trail from Lillooet (Mile 0). There are many landmarks depicting this colourful history both traveling to and in the Cariboo region. 108 Mile House is the home to an extensive heritage site which displays many restored buildings from the days of the Cariboo Wagon Road

100 Mile House is located on Highway 97 the major north/south route between Vancouver and the northern communities of B.C., Yukon and Alaska. It is easily accessible by car, bus and rail. The closest commercial airport is located at Williams Lake.

100 Mile House and the surrounding area is well known for year round outdoor recreation. The hundreds of lakes in the area provide excellent camping and fishing throughout the summer months and some excellent ice fishing in the winter. The 100 Mile area has a reputation for their world class cross country ski trails. These trails have now become just as popular in the summer for trail biking.

The Cariboo at one time had extensive stands of forests and the lumber industry was a major employer for the area. The team leader at EHF says that the Pine Beetle has had an impact on the forest industry and the people in and around 100 Mile House. The team leader sits on a community committee “The Pine Beetle Action Group” formed to look at the effects the Pine Beetle has had on the economic and social fabric of the community. Forestry at one time accounted for over 30% of the jobs in the Cariboo with the Public Sector following at 24%.

The population of 100 Mile House is approximately 1,800 and the many small surrounding communities of the Cariboo-Chilcotin brings the population served by MCFD to approximately 20,000. According to BC Stats the visible minority population in the Cariboo is approximately 3.8% compared to BC at 21.6%. The largest ethnic group in 100 Mile is South Asian at 2.3% of the population. Aboriginal people make up approximately 14% of the population of the South Cariboo compared to BC at 4.4% of the population. BC Stats indicates that the population of the Cariboo-Chilcotin, which includes 100 Mile House, for residents under twenty-four years of age is 33.8% compared to BC at 30%.

c) **Service Delivery:** The 100 Mile House MCFD staff work in close partnership with other community service providers. The team leader has a binder that delineates the local and the provincial protocols. There is a protocol for each of the community partners and committees. The team leader sits at many of the community tables but also has delegated some liaison responsibilities to the social workers. All staff believe that this responsibility enhances knowledge of the community and also builds solid community relationships.

The 100 Mile House staff report a great working relationship with the RCMP despite the disruption caused by recent turnovers in police staff. The medical professionals in the communities and the hospital staff are also appreciated for their cooperation when assistance is required. Most children requiring medical attention are seen by local medical practitioners. Situations requiring specific expertise are referred to the Children's Health Centre (SCAN) in Kamloops. Much of the support required by children and families is provided by the Family Enrichment Centre in 100 Mile House. There is a Community Resources Coordinator in 100 Mile House whose position is partially funded through MCFD and partially through a municipal grant. She works in close liaison with the community partners including the Mayor.

Situated in the same building as the MCFD staff are the Fetal Alcohol Coordinator, Income Assistance Services and Adult Probation. The team leader states this is convenient for consultation purposes and for client referrals.

100 Mile House is serviced by the British Columbia Circuit Court. Family Court Cases are most often heard in Williams Lake and staff are required to travel to Williams Lake, an hour to the north, for court hearings. Documents are faxed for the hearing dates prior to the hearing. The social workers assist the families by arranging transportation and this does come with a high financial cost to MCFD.

On the 100 Mile House MCFD team there are seven social workers and until July 2005 there was a youth probation officer. EHF now receives services from the youth probation officer from Williams Lake and the back up to that person is the team leader at EHF. The social work staff at EHF provides after hours services to the community and the team leader shares in providing this service. This role of providing after hours services is filled by rotating a stand by position. There are four people that fill the three administrative support positions in the office; an office manager, and 2.1 administrative support jobs.

1/ **Residential services:** Services are provided by a social worker on the EHF team who has responsibility for both resources and adoption. This position is supervised by the EHF team leader. The team states it is an advantage having the resource social worker as part of their team. Resources/placement for children is a standing agenda item at the weekly team meeting. There are no emergency beds on contract to EHF but the social workers are aware of which homes will take emergency placements. The team says that recruitment and retention of foster

homes are major issues in planning for children. Although there are a number of aboriginal families that foster, the homes are more often than not filled to capacity as are the non-aboriginal foster homes. The team reports having a good working relationship with the foster parents. Much of the credit for the success is attributed to having the resource worker as part of the EHF team and part of the community.

Service Transformation: The infestation of the pine beetle has had a significant impact on the economic and social fabric of the greater 100 Mile House community. The team leader of EHF sits on the Pine Beetle Action Committee. The committee members are from 100 Mile House, Williams Lake and Quesnel. The committee was formed to study the economic and social effects of the Pine Beetle on the Cariboo area.

The team leader states that the Child and Youth Committee is still very active in 100 Mile House. She says that a number of key community partners meet once a month to discuss the needs of the area’s high risk youth. She states that the committee takes a holistic approach discussing community issues and brainstorming solutions.

Housed in the MCFD office is the Community Resources Coordinator whose position is jointly funded through MCFD and the Municipality. Having this resource person close at hand is seen as a real asset in providing services to children and families.

7. STAFFING

a) Professional Staff Complement/Staff Turnover:

The following chart indicates that there has not been significant turnover of the professional social work staff on the EHF team. The team consists of six fully delegated social workers, one partially delegated social worker and a team leader. One of the seven social workers has just been successful in receiving the position of Family Group Conference Coordinator. At the time of the audit this was part of a current planned change. The team does miss the youth probation officer being situated in the 100 Mile House MCFD office.

Position	Length of Time on Team	Educational	MCF Experience	Delegation	Status
CP SW				Full	FT

CPSW				Full	FT
CPSW				Partial	FT
CPSW				Full	FT
CPSW				Full	FT
CPSW				Full	FT
CPSW FGC				Full	FT
DS				Full	FT

- Current Workload:** The caseload management report (CMR) that was run on the first day of the audit (September 6, 2006) indicated fifty three open FS, forty seven open CS files , sixty one FS files closed within the last six months and eight CS files closed within the last six months. The following indicates the numbers of files open on each caseload at EHF at the time of the audit.

EHF-----10 FS-----6 CS
 EHF-----10 FS-----16 CS
 EHF-----04 FS-----02 CS (adoption caseload)
 EHF-----04 FS-----02 CS
 EHF-----08 FS-----04 CS
 EHF-----12 FS-----10 CS
 EHF-----08 FS-----07 CS

STAFF TRAINING

a) Ministry Training Program	TL	SW 1	SW 2	SW 3	SW 4	SW 5	SW 6	SW 7
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								

a) Ministry Training Program	TL	SW 1	SW 2	SW 3	SW 4	SW 5	SW 6	SW 7
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								
Advanced Interviewing								
Reflective Supervision								
CI Stress								
Solution Focused								
Sexual Abuse Interviewing								
Family Development Response								

4. SUPERVISION/CONSULTATION

The team leader does schedule individual supervision and consultation time with each social worker..

For case discussion and tracking cases the system produced Case Management Reports and Integrity Reports are used.

The team meets weekly for regular agenda items and for presenting critical cases to encourage case discussion and peer consultation. The Youth Mental Health clinician and the Youth Probation officer both attend the weekly meeting when available. Guests are also often included as part of the regular agenda

Community Services Manager located in the same office space.

5. INTAKE AND TRACKING SYSTEMS

- a) **Investigations:** All the social workers take one day a week as an intake day having the next day scheduled as being the intake worker’s backup. If an investigation requires an immediate response the intake worker does the investigation with the backup person taking over the intake duty. Any intakes received on the social workers duty day are kept on their caseloads with an exception for the adoption worker and the social worker who has a predominately aboriginal caseload. The team leader assigns any files that require assignment.

The team leader keeps an intake tracking log All staff phone number for consultation during after hours and the have the team leader’s team is called together the

next working day, if required, to discuss the work of the weekend.

previous evening or

- b) **Family Development Response:** Not audited at this time.
- c) **Ongoing Family Service and Child Service:** The two specialized caseloads in the office are the adoption/resource caseload and the aboriginal caseload. The majority of files for aboriginal families not living on reserve are assigned to the social worker with the aboriginal caseload. If the numbers merit the team leader will assign an aboriginal case to another worker. When an intake is taken by a duty worker that social worker usually keeps that file. At times adjustments are made depending on numbers and the type of case. The cases are tracked on a weekly basis by the team leader and the social worker using the CMR and the Integrity Report as guides.

8. SERVICES TO ABORIGINAL CHILDREN AND FAMILIES

The aboriginal band in the 100 Mile House service area is the Canim Lake Band. The Canim Lake Band is part of five bands that receive family and children services from a fully delegated agency, Knucwentwecw (KC). This agency and MCFD have a protocol in place. The transfer policy between the two is the same as any other office transfer. KC has at times requested that MCFD maintain a file for a time when staffing has been an issue for them. There is no Friendship Centre in 100 Mile house or other designated aboriginal services agency in the 100 Mile area.

EHF provides services for all aboriginal families and children not living on reserve. All the aboriginal children who are in care of MCFD at EHF have a cultural plan on file. The Band for the child or the family are included in the planning.

SECTION III: AUDIT RESULTS

9. AUDIT SAMPLE

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: There were eleven (21%) CS files audited, twenty four (24%) FS files audited during the audit of EHF. The youth agreement, adoption and non protection files were not included in the count for this audit. The files were thoroughly documented and most of the files, especially those of the children in care had numerous volumes.

EHF-----5 FS---1 CS
EHF-----6 FS---2 CS
EHF-----1 FS (new social worker—shared cases)
EHF-----4 FS---2 CS
EHF-----3 FS---2 CS
EHF-----1 FS---2 CS
EHF-----3 FS---2 CS

EHF-----1 FS

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

Twenty-four (24) Family service files were audited. Overall compliance to the child and family services standards was 91.6%. 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.

Twenty four files were applicable to this critical measure, with twenty three being compliant. On the remaining file the family was identified as being aboriginal but there was no documentation to indicate that an aboriginal community had been contacted.

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.

Seven of the twenty four files applicable to this critical measure were 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.

This critical measure was applicable to the twenty four files audited. Twenty three files were compliant. On the one other file there was a report of family violence. The family was referred to community services.

in family violence it is important to gather information from the children. Research shows that children more often than not have information that is important for assessing the report.

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.

Seventeen files were audited to this critical measure. Sixteen files were compliant and on the one other file there was no documentation to indicate why the investigation did not proceed within the five days indicated as the assessed time frame.

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.

Sixteen of the twenty four files audited were applicable to this critical measure. Fifteen files were compliant. On the one remaining file most steps of the investigation were adequately completed. _____ should have been viewed/reviewed by the social worker and a copy placed on the family service file. There is documentation to indicate that the social worker met _____ to discuss concerns. The information never discussed to verify the information.

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 children were seen and the parents were interviewed on sixteen of the seventeen files applicable to this critical measure. On the one other file the children in the home were never interviewed.

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.

Seventeen of the twenty four files audited were applicable to this critical measure. Sixteen files were compliant and one had documentation that indicated that the parents were notified at the conclusion of the investigation but there is no documentation to indicate that the reporter was notified.

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.

Seventeen of the twenty four files were applicable to this critical measure. Ten files were compliant and seven files did not meet the required time limit for completing an investigation.

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.

Ten of the twenty four files audited were applicable to this critical measure. The files were 100% compliant.

11. Reassessing a 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.

Four of the twenty four files audited were applicable to this critical measure. The four files were 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 was one file of the twenty four applicable to this critical measure and it was partially compliant.

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.

All twenty four files audited were applicable to this critical measure and the files were 100% compliant.

Practice Strengths: The critical measures for this audit were of high compliance with the exception of CM#9. The files were thoroughly documented and the staff used appropriate assessment tools in planning for children and families.

Areas For Improved Practice: There were no cases that needed to be brought to the attention of the team leader or manager. CM#9 Concluding an Investigation in a Timely Manner, is the one measure that indicates a need for improved practice. The team at EHF has as a current priority been addressing the investigations that are over thirty days and have not been documented as completed. The process and the timelines are being tracked weekly by the team leader.

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

NARRATIVE SUMMARY

Eleven (11) child service files were audited. Overall compliance to the child service standards was 92.6%. 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)

All eleven files were applicable to this critical measure and the files 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.

All eleven files were applicable to this critical measure and the files 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 eleven files audited 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.

All eleven files were applicable to this critical measure. Nine were compliant and two were not compliant. Of those two noncompliant files there was no documentation to indicate that the children had been explained their rights.

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

All eleven files were applicable to this critical measure and were 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

Nine of the eleven files audited were compliant to this measure. On the other two files there was no documentation to indicate the frequency of contact between the child and the social worker or if the child had private in person contact with the social worker.

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.

All eleven files were applicable to this critical measure and the files were 100% compliant.

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.

The eleven files audited were applicable to this critical measure and nine were compliant. The other two partially compliant files had no documentation to indicate that the child's written plan of care had been reviewed as required. The files did have current CPOCs completed.

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.

One file was applicable to this critical measure and it was noncompliant. The youngster reported missing efforts were taken there was no reportable circumstance on file.

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.

Two of the eleven files audited were applicable to this critical measure. The files were 100% 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.

Six of the eleven files audited were applicable to this critical measure and they were 100% 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 eleven files were all applicable to this critical measure and were 100% compliant.

Additional Comments: This auditor found that at EHF the CS files chosen to audit had many volumes per case. This can exist with CS files but my experience auditing indicates that the number of CS files at EHF that had numerous volumes per case were an exception.

Practice Strengths: The audit of the files at EHF indicated high compliance when planning for children in care. It was apparent from the files that the staff at EHF are knowledgeable about guardianship responsibilities and work at giving the children in their care good service. The social workers recognize that the skills, work ethic and support of the team leader assist in promoting an atmosphere of "doing your best". Integrated case management is practiced on a regular basis and involvement of the Child and Youth Committee is encouraged. This writer noted earlier that many of the children in care files audited had an exceptional number

of volumes per case. This could speak to not only complex planning issues but the amount and thoroughness of the documentation that exists on the files.

Areas for Improved Practice: There were no child in care files that required highlighting for the team leader and manager. The audit had a compliance rating of 93.5%

Frankie Williams
Auditor
Interior Region

Date

Brendan Flynn
Deputy Director
Interior Region

Date

11. AUDIT RECOMMENDATIONS

On March 6, 2007 members of the regional senior management team, the team leader at EHF 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 senior management team that the EHF audit was of high compliance. The files audited contained extensive and detailed documentation.

The timelines of completing an investigation (CM#9 CFS) was the one measure the audit identified as a practice issue for discussion. The audit indicated that the seven investigations that were determined to be non-compliant were just outside the time limit of forty five days. The Supervisor of EHF identified the difficulty of meeting the time frame for social workers; the rural environment (can be very remote), isolation, geography and the winter weather making it difficult to access some areas. The team leader is aware of each investigation, the time limits and tracks regularly. The supervisor and the manager for EHF will review this measure with the team and will continue to support the staff to complete documentation in a timely manner, including discussing ways to improve completing an investigation within the thirty days. The team already strives to a high standard of documentation as indicated through this audit and will continue to strive to do better. There will always be the rural office factor to consider for 100 Mile House

AUDIT SIGN OFF:

John Waters
A/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: EHF

Total # of cases audited: 24

	CRITICAL MEASURES	C		PC		NC		NA
		#	%	#	%	#	%	
1	Screening and Best Approach to Service Delivery CFS Standard #1	23	95.8%			1	4.2%	
2	When a Child is at Immediate Risk of Harm CFS Standard #11	7	100%			0	0	17
3	Assessing a Child Protection Report and Determining the Most Appropriate Response CFS Standard #12	23	95.8%			1	4.2%	0
4	Family Development Response CFS Standard #14	0	0	0	0	0	0	0
5	Determining a Time Frame to Begin an Investigation CFS Standard #15	16	94.1%			1	5.9%	7
6	Conducting a Child Protection Investigation CFS Standard #15	16	94.1%			1	5.9%	7
7	Seeing and Interviewing the Child and Family CFS Standard #15	16	94.1%			1	5.9%	7
8	Concluding a Child Protection Investigation CFS Standard #16	16	94.1%			1	5.9%	7
9	Concluding Investigation in a Timely Manner CFS Standard #16	10	58.8%			7	41.2%	7
10	Developing and Implementing a Plan to Keep a Child Safe CFS Standard #17	10	100%			0%	0	14
11	Reassessing Plan to Keep a Child Safe and Ending Family Service Response CFS Standard #17	4	100%			0%	0	20
12	Notification of Fatalities, Critical Injuries and Serious Incidents CFS Standard #24	0	0%	1	100%	0%	0	23
13	Supervisory Approval C&FD Standard on Supervisory Approval	24	100%			0%	0	
Total Applicable Indicators:		165	92.2%	1	0.6%	13	7.3%	133

= 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: EHF

Total # of cases audited: 11

	CRITICAL MEASURES	C		PC		NC		NA
		#	%	#	%	#	%	#
1	Preserving the Identity of an Aboriginal Child in Care CIC Service Standards #1 and #19	11	100%	0	0%	0	0%	
2	Assuming Responsibility for a Child in Care CIC Service Standard #4	11	100%			0	0%	
3	Ensuring a Child's Safety While in Care CIC Service Standard #5	11	100%			0	0%	
4	Ensuring the Rights of a Child in Care CIC Service Standard #6	9	81.8%			2	18.2%	0
5	Involving a Child and Considering the Child's Views in Case Planning and Decision Making CIC Service Standard #8	11	100%	0	0%	0	0%	
6	Maintaining Personal Contact with a Child in Care CIC Service Standard #9	9	81.8%			2	18.2%	
7	Meeting a Child's Need for Stability and Continuity of Lifelong Relationships CIC Service Standard #10	11	100%	0	0%	0	0%	
8	Assessments and Planning for a Child in Care CIC Service Standard #11	9	81.8%	2	18.2%	0	0%	
9	When a Child is Missing or Has Run Away CIC Service Standard #14	0	0%			1	100%	10
10	Notification of Fatalities, Critical Injuries and Serious Incidents C&FS Standard #24	2	100%	0	0%	0	0%	9
11	Planning for a Child Leaving Care CIC Service Standards #15 and #16	6	100%			0	0%	5
12	Supervisory Approval C&FD Standard on Supervisory Approval	11	100%			0	0%	
Total Applicable Indicators:		100	93.5%	2	1.9%	5	4.6%	24

= 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.

Director's Case Practice Audit – 100 Mile House - EHF

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

Signed by
Karen Gallagher on behalf of

Marilyn Hedlund
Provincial Director of Child Welfare

October 5, 2007