

DIRECTOR'S CASE PRACTICE AUDIT REPORT

FRASER REGION

Circle of Community #5 (FIL)

Field Work Completed: May 2 to 25, 2007

Report Completed: March 12, 2008

TABLE OF CONTENT

SECTION I: INTRODUCTION

1. PURPOSE
2. METHODOLOGY

SECTION II: PRACTICE IN THE COMMUNITY CONTEXT

3. SERVICE AREA OVERVIEW
4. STAFF TRAINING
5. SUPERVISION CONSULTATION
6. INTAKE AND TRACKING SYSTEMS
7. ABORIGINAL SERVICES

SECTION III: CASE PRACTICE REVIEW

8. AUDIT SAMPLE
9. CRITICAL MEASURES AUDIT TOOL – CHILD AND FAMILY SERVICE
 - NARRATIVE SUMMARY
10. CRITICAL MEASURES AUDIT TOOL – CHILD IN CARE SERVICE
 - NARRATIVE SUMMARY
11. RECOMMENDATIONS

SECTION I: INTRODUCTION

1. PURPOSE

The purpose of case practice audits is to support practice principles that promote improved outcomes for children and families. 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 providing child protection, guardianship, youth services and non-protective family services in the aboriginal and non-aboriginal streams are systemically conducted on a four year cycle. The Fraser region conducts case practice audits as an integral component of their continuous quality improvement/assurance plan.

2. METHODOLOGY

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

Critical Measures Audit Tool for Child and Family Service Standards (May 2004)

Critical Measures Audit Tool for Child in Care Service Standards (May 2004)

After the fieldwork was completed, exit meetings were held with the ACSM and ATL, followed by a recommendations meeting.

SECTION II: COMMUNITY CONTEXT

3. SERVICE AREA OVERVIEW

a) Geographic:

Surrey is located at the crossroads of the Pacific Rim, Greater Vancouver and the United States. There is easy and convenient access to the Vancouver International Airport and two international border crossings into the U.S.A. There is an excellent transportation network that includes six major highways, a railway network and a deep sea port.

There are six distinct areas in Surrey: Fleetwood, Whalley, Guildford, Newton, Cloverdale, and South Surrey. The land size is 317.19 sq. km.

FIL is an Aboriginal Family and Child Services team of Circle #5. The office is located at 10757 138th Street in Surrey. FIL is co-located with FIQ (Aboriginal Intake and Investigation) and FIM (Aboriginal Family Services).

b) Demographics:

The population of Surrey in 2006 was 394,976. This is an increase of 13.6% from 2001

BC Statistics show Surrey that visible minorities make up 37% of the population. The visible minorities include Chinese, Asian, Filipino, Japanese, Indo Canadian, Iranian; Burmese, Vietnamese, Sudanese (refugees), African, Jamaican and Latin American.

The educational system in Surrey is managed by School District #36 consisting of 93 elementary and 20 secondary schools. Other educational systems include 24 independent schools, BCIT, Kwantlen University College, Simon Fraser University and 11 alternate learning centres.

The community consists of Surrey Memorial and Peace Arch Hospitals; the Surrey Provincial Court House and Surrey Pretrial. The Fraser Health Authority; the Surrey RCMP and Surrey Fire Services (regular and volunteer) service the community.

c) Service Delivery:

The Regional Office is located in Surrey. The Fraser Region management structure consists of:

- The Regional Executive Director
- Director of Operations
- Director of Corporate Services
- Director of Integrated Practice
- Manager of Service Quality
- Manager of Practice Development
- Finance Manager
- Manager of Human Resources
- Manager of Collaborative Practice
- 13 Community Service Managers (includes Aboriginal services, Resources and After Hours),

- Four Project officers
- Four Associate Community Service Managers (at the time of this report)

SQD provides After Hour services for this team and is located in New Westminster

d) Residential Services

When a placement is required FIL makes a verbal request to the FIQ team. Then a written referral form outlining the child’s behaviours and needs is completed. Depending on the circumstances, either the FIL or FIQ social worker contacts the caregiver to arrange the child’s placement. The caregiver is also provided with a copy of the referral form.

4. STAFF TRAINING

Ministry Training Program	Team Leader	SW 1	SW 2	SW 3	SW 4	SW 5	SW 6
Child Protection – Core							
Resources							
Guardianship – Core							
Adoption – Core							
Clinical Supervision 1							
Clinical Supervision 2							
Risk Assessment – Core							
Advanced Risk Assessment							
Family Development Response							
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							
Enhanced Neglect							
Leading the Way							
Standards Orientation							
Out of Care Living Arrangements							
Excel/Windows/Word							
Arête Violence Prevention							
Wards of the Crown							
Best Prac.4 Vulnerable Aboriginal Children							
Working with stuck Kids							
Making Life Connections for Child. & Youth							
Kinship Care Conference							
Discrimination Prevention							
Parental Mental Illness – Dr.Mayberry							
Parent – Teen Mediation							

Roots & Permanency							
Wellness Training							
OSH Committee Course							
Verbal/Physical Management (in workplace)							
Inter-Generational Trauma in Aboriginal Community							
Mediation Forum							
Sexual Abuse Interviewing							
Section 54.1 Transfer of Custody							
Engaging Homeless & High Risk Youth							

5. SUPERVISION/CONSULTATION

The Acting Team Leader reported that monthly meetings are held with each of the social workers. The focus of these meetings is clinical case reviews of all of the open files for that worker. The Acting Team Leader reported that she is available by cell phone for case consultation.

6. INTAKE AND TRACKING SYSTEMS

The Team Leader maintains a tracking system to document incoming and outgoing file transfers, monthly case consultations, completed referrals and files closed by the team.

7. STAFFING

There are five social workers who have guardianship responsibilities. The Team Leader also covers a guardianship caseload. The administrative support consists of one office manager, two team assistants and one receptionist.

Position	Length of Time on Team	Education	MCF Experience	Delegation	Status
TL				Full	Permanent
SW #1				Full	Permanent
SW #2				Full	Permanent
SW #3				Full	Permanent
SW #4				Full	Permanent
SW #5				Partial	Permanent Float
SW #6				Full	Permanent

8. ABORIGINAL SERVICES

Since 2003, information was gathered in meetings, surveys, etc to help identify key themes, strengths and challenges of Aboriginal communities' services and what those communities would like their service delivery systems to be. This information, added with data about the community such as population, population of children, economic information and so on, has been used to identify a vision for services for identified 'circles of communities.'

The circles in the Fraser Region are as follows:

1 Eastern Region:

Urban Communities: Hope, Agassiz, Harrison, Boston Bar

First Nations: Chehalis, Seabird Island, Douglas, Scowlitz, Bothroyd, Boston Bar, Yale, Spuzzum, Peters, Chawathil, Shwx'ow'hamel, Skawahlook, Union Bar;

2. Chilliwack Region:

Urban Communities: Chilliwack

First Nations: Aitchelitz, Cheam, Kwaw Kwaw Aplit, Popkum, Skowkale, Skwah, Skway, Squiala, Tzeachten, Yakweakwioose, Soowahlie

3. Mission/Maple Ridge Region:

Urban Communities: Mission, Maple Ridge, Pitt Meadows

First Nations: Katzie, Leq'a:mel

4. Abbotsford/Langley/Aldergrove Region:

Urban Communities: Abbotsford, Aldergrove, Langley

First Nations: Kwantlen, Matsqui, Sumas

5. Tsawwassen/ Surrey/Delta/Ladner Region:

Urban Communities: Tsawwassen, Surrey, Delta, Ladner, White Rock

First Nations: Semiahmoo, Tsawwassen

6. Burnaby/New Westminister/ Tri-Cities Region:

Urban Communities: Burnaby, New Westminister, Coquitlam, Port Coquitlam, Port Moody, Anmore, Belcarra

First Nations: Kwikwetlem, New Westminister

The Aboriginal teams in the region use the Child's Roots are Forever program (ROOTS) extensively. The program assists parents, families, and guardianship workers to develop permanent plans for children/youth in care that respects their unique cultural and Aboriginal origins. The FIL Team reported that the program is crucial when locating family, developing family histories, genograms and cultural plans, maintaining stability and continuity etc. for children in care.

Service Issues and Barriers:

The following service issues and barriers were reported:

1. When children return to their parents they suffer undue hardship because CS files must be closed electronically and physically before they can reclaim child tax benefits.
2. The staff reported there is a shortage of foster homes.
3. The staff reported that there are less Aboriginal resources available to the Aboriginal families when compared to those available to the mainstream families.

SECTION III: CASE PRACTICE REVIEWS

9. AUDIT SAMPLE:

The case practice audit sample for FIL included 20% of open Family Services (FS) files and Child in Care Services (CS) files. The total sample was:

- 10 open FS files
- 13 open CS files

10. CRITICAL MEASURES AUDIT TOOL – CHILD & FAMILY SERVICE STANDARDS

DATA SUMMARY

Office Code: FIL

Total Number of Cases: 10

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.

= Number of applicable cases

% = Percent of total

	CRITICAL MEASURES	C		PC		NC		NA
		#	%	#	%	#	%	#
1	Screening and Best Approach to Service Delivery <i>CFS Service Standard #1 & #12</i>	09	90.0%			01	10.0%	--
2	When a Child is at Immediate Risk of Harm <i>CFS Service Standard #11 & #13</i>	01	50.0%			01	50.0%	08
3	Assessing a Child Protection Report and Determining the Most Appropriate Response <i>CFS Service Standard #12</i>	07	77.8%			02	22.2%	01
4	Family Development Response <i>CFS Service Standard #14</i>	--	--			--	--	10
5	Determining the Time Frame to Begin an Investigation <i>CFS Service Standard #16</i>	04	66.7%			02	33.3%	04
6	Conducting a Child Protection Investigation <i>CFS Service Standard #16</i>	04	66.7%			02	33.3%	04
7	Seeing and Interviewing the Child and Family <i>CFS Service Standard #16</i>	05	83.3%			01	16.7%	04
8	Concluding a Child Protection Investigation <i>CFS Service Standard #17</i>	03	50.0%			03	50.0%	04
9	Concluding an Investigation in a Timely Manner <i>CFS Service Standard #17</i>	02	33.3%			04	66.7%	04
10	Developing and Implementing a Plan to Keep a Child Safe <i>CFS Service Standard #18</i>	01	20.0%			04	80.0%	05
11	Reassessing a Plan to Keep a Child Safe and Ending Family Service Response <i>CFS Service Standard #18 & #21</i>	--	--			06	100%	04
12	Notification of Fatalities, Critical Injuries and Serious Incidents <i>CFS Service Standard #25</i>	--	--	--	--	01	100%	09
13	Supervisory Approval <i>CFD Standard on Supervisory Consultation & Approval</i>	09	90.0%			01	10.0%	--
Total Applicable Indicators: 73		45	61.6%	--	--	28	38.4%	57

NARRATIVE SUMMARY – CHILD AND FAMILY SERVICES

Ten (10) Family Service (FS) files were audited. Overall compliance to the Child and Family Services Standards was **61.6%**. 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

The auditor looked for documentation, which demonstrated the following: sufficient information was gathered and the family history was reviewed, requests for service were adequately assessed, services offered and/or provided were appropriate and the least disruptive available, and where applicable, an aboriginal service provider or delegated agency had been contacted.

Applicable files – 10
Compliant files – 90%
Fraser Regional Compliance – 79.3%
Provincial Compliance – 85.1%

There was one file that was found to be non-compliant because insufficient information was gathered at the time of the report (i.e. more information about the family, a review of the Ministry history, identity of the father).

2. WHEN A CHILD IS AT IMMEDIATE RISK OF HARM

In reports where a child is at immediate risk of harm, the auditor looked for documentation that adequate steps were taken to see the child and ensure the child's immediate health and safety, including a safety plan. If a child protection social worker was not able to ensure that a child was seen immediately, the auditor would look for documentation describing alternative steps taken and who was asked to see the child instead to ensure his/her immediate safety.

Applicable files – 2
Compliant files – 50%
Fraser Regional Compliance – 70.5%
Provincial Compliance – 84.9%

There was one file that was not compliant. In this file a child was determined to be at risk of immediate harm; however, the child was in hospital and not at risk of immediate harm.

3. ASSESSING AND DETERMINING THE MOST APPROPRIATE RESPONSE TO CHILD PROTECTION REPORTS

The auditor looked for documentation that demonstrated that the worker had collected sufficient information to make a decision about the type of response and, in the view of the auditor, that the decision to provide a specific response was supported by the information.

Applicable files – 9
Compliant files – 77.8%
Fraser Regional Compliance – 85.8%
Provincial Compliance – 85%

There were two files that were not compliant because there were sec.13 concerns; however, an investigation was not completed.

4. FAMILY DEVELOPMENT RESPONSE

When a Family Development Response (FDR) option has been selected the auditor looked for documentation detailing the rationale for providing an FDR, a completed assessment, a plan for supporting the family and keeping the child safe. See Critical Measure #4 (criteria) for further information.

Applicable Cases – Audit tool for this measure is currently not available

5. DETERMINING THE TIME FRAME TO BEGIN AN INVESTIGATION.

Where a determination has been made to investigate, the auditor looked for documentation determining that the time frame for beginning the investigation was appropriate to the report and confirmation that the investigation was begun within that time frame.

Applicable files -6
Compliant files – 66.7%
Fraser Regional Compliance – 65.9%
Provincial Compliance -80.9%

There were two files that were not compliant because the investigations did not commence within the chosen time frames.

6. CONDUCTING A CHILD PROTECTION INVESTIGATION

This critical measure outlines many of the activities involved in an investigation. These include: documentation that all relevant information relating to the report has been reviewed, documentation that information from people who have relevant knowledge of the family has been obtained, documentation that the child's living situation has been directly observed, etc. The inability of staff to meet even one of those expectations would result in a non-compliance rating.

Applicable files – 6
Compliant files – 66.7%
Fraser Regional Compliance –57.1%
Provincial Compliance – 65.9%

There were two files that were non-compliant. In one case, a home visit was not completed. In the other case, a medical examination of the child was not completed.

7. SEEING AND INTERVIEWING THE CHILD AND FAMILY

This critical measure requires that the worker sees and whenever possible interviews the subject child, siblings, parents, and if applicable, the family's aboriginal community.

Applicable Files – 6
Compliant files – 5 83.3%
Fraser Regional Compliance –61.7%
Provincial Compliance –68.2%

There was one file that was found to be non-compliant. In this file, the father and the boyfriend (who was also a caregiver) were not interviewed and no rationale provided.

8. CONCLUDING A CHILD PROTECTION INVESTIGATION

This critical measure requires the auditor to review whether or not the decision about the child needing protection is consistent with the facts that were gathered during the investigation and that all steps required to address the child's safety needs have been considered and implemented.

Applicable files – 6
Compliant files – 50%
Fraser Regional Compliance – 62.8%
Provincial Compliance – 71.1%

There were three files that were non-compliant. In these files, not all of the necessary steps of the investigation were completed.

9. CONCLUDING A CHILD PROTECTION INVESTIGATION IN A TIMELY MANNER

This critical measure requires that there is documentation that demonstrates child protection investigations are concluded within 30 calendar days.

Applicable files – 6
Compliant files – 33.3%
Fraser Regional Compliance – 34.8%
Provincial Compliance – 43.7%

There were four files found to be non-compliant because the investigation was not completed within 30 days; range was 44 days to 425 days.

10. DEVELOPING AND IMPLEMENTING A PLAN TO KEEP A CHILD OR YOUTH SAFE

The auditor looked for documentation that reflected safety planning occurred after there was a “finding” that the child was in need of protection. This plan should include an assessment of needs, risks, and strengths, review mechanisms, consider the child's need for stability and the participation of family in keeping the child safe.

Applicable files – 6
Compliant files – 20%
Fraser Regional Compliance – 74.1%
Provincial Compliance – 63.2%

Five files did not contain documentation to confirm that there was a plan that included services and strategies to address the child's safety needs.

11. REASSESSING A PLAN TO KEEP A CHILD SAFE AND ENDING A FAMILY SERVICE RESPONSE

The auditor looked for documented evidence that the plan to keep the child safe has been reviewed and updated as appropriate with key players. In ending a Protective Family Service Response, the auditor looked for documentation that an assessment had been completed that indicated the parents were able to keep the child safe without protection services.

Applicable files – 6
Compliant files – 0%
Fraser Regional Compliance – 63.4%
Provincial Compliance – 46.5%

Six files were non-compliant because reviews of the plans were not documented as required.

12. NOTIFICATION OF FATALITIES AND CRITICAL INJURIES (REPORTABLE CIRCUMSTANCES)

The auditor looked for documentation to confirm in the case of a fatality or critical injury, the designated Director was notified and that the appropriate people were notified and offered support in a timely way.

Applicable files – 0
Compliant files – N/A

13. MANAGEMENT AND SUPERVISORY CONSULTATION

During this audit the auditor was looking for documentation that reflected consultation with a supervisor (TL) or a manager (CSM) at the critical points: assessing reports, decision on a response time, conducting and concluding an investigation, determining a child's need for protection, developing an ongoing safety plan, the court process, removal of a child, reunification, and transferring responsibility for or ending family service. The quality of the supervision and/or the appropriateness of any documented clinical direction from the TL were not assessed by the auditor.

Applicable files – 10
Compliant files – 90%
Fraser Regional Compliance – 85.8%
Provincial Compliance – 86.4%

There was one file that was non-compliant. In this file, the supervisory involvement/approval was limited to closing the file.

11. CRITICAL MEASURES AUDIT TOOL - CHILD IN CARE SERVICE STANDARDS

Office Code: FIL

Total # of cases audited: 13

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
- NCF** Non-compliance to the standard for reasons beyond the control of the social worker or supervisor
- NC** Non-compliance to the standard's criteria requirements
- NA** Not applicable to the standard being measured.

	CRITICAL MEASURES	C		PC		NC		NA
		#	%	#	%	#	%	#
1	Preserving the Identity of an Aboriginal Child in Care <i>CIC Service Standard #1 & CFS Service Standard #20</i>	08	61.5%	04	30.8%	01	07.7%	
2	Assuming Responsibility for a Child in Care <i>CIC Service Standard #4</i>	07	53.8%			06	46.2%	
3	Ensuring a Child's Safety While in Care <i>CIC Service Standard #5</i>	10	76.9%			03	23.1%	
4	Ensuring the Rights of a Child in Care <i>CIC Service Standard #6</i>	02	20.0%			08	80.0%	*03
5	Involving a Child and Considering the Child's Views in Case Planning and Decision Making <i>CIC Service Standard #8</i>	03	23.1%	01	07.7%	09	69.2%	
6	Maintaining Personal Contact with a Child in Care <i>IC Service Standard #9</i>	01	07.7%			12	92.3%	
7	Meeting a Child's Need for Stability and Continuity of Lifelong Relationships <i>CIC Service Standard #10</i>	06	46.2%	01	07.7%	06	46.2%	
8	Assessments and Planning for a Child in Care <i>CIC Service Standard #11</i>	02	15.4%	01	07.7%	10	76.9%	
9	When a Child is Missing or Has Run Away <i>CIC Service Standard #14</i>	--	--			--	--	13
10	Notification of Fatalities, Critical Injuries and Serious Incidents <i>CFS Service Standard #25</i>	--	--	--	--	--	--	13
11	Planning for a Child Leaving Care <i>CIC Service Standards #15 & #16</i>	01	50.0%			01	50.0%	11
12	Supervisory Approval <i>CFD Standard on Supervisory Consultation & Approval</i>	10	76.9%			03	23.1%	
Total Applicable Indicators: 116		50	43.1%	07	06.0%	59	50.9%	40

NARRATIVE SUMMARY - CHILD IN CARE

Thirteen Child Service (CS) files were audited. Overall compliance to the service standards was **43.1%**. Information for determining compliance 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

In this critical measure, the auditor looked for documentation that reflected whether a child in care was aboriginal or not. In the case of an aboriginal child, the documentation identifies: the Band and/or Community; the child's status and membership number, or application for status; the worker understands the child's history and current circumstances; and a cultural plan for the child.

Applicable files –13
FIL Compliant files – 61.5%
FIL Partially Compliant files – 30.8%
Fraser Regional Compliance – 72.1%
Provincial Compliance – 80.5%

There was one file that was non-compliant. In this file, there was insufficient information in the file to confirm that the social worker understood the culture and the family's history.

2. ASSUMING RESPONSIBILITY FOR A CHILD IN CARE

The auditor looked for confirmation of the child's legal status such as court orders, care agreements, citizenship and immigration documents and an assessment of the child's history, current circumstances and needs. This measure also requires documentation that indicates the nature and extent of involvement of family members.

Applicable files –13
FIL Compliant files – 53.8%
Fraser Regional Compliance –84.4%
Provincial Compliance – 89.8%

There were six files where the children's legal status could not be confirmed (i.e. no current court order).

3. ENSURING A CHILD'S SAFETY WHILE IN CARE

Where a child has been brought into care, the auditor looked for documentation to indicate that the child has been placed in a living arrangement that meets their needs, or for a child/youth refusing placement reasonable efforts were made to ensure a placement. File information should also indicate that there is an adequate plan in place to address a child's safety needs.

Applicable files –13
FIL Compliant files – 76.9%
Fraser Regional Compliance – 87.9%
Provincial Compliance –91.8%

There were three files that were found to be non-compliant because the file documentation did not address the children's safety.

4. ENSURING THE RIGHTS OF A CHILD IN CARE

The auditor assessed the file for evidence that the child's care conforms to their rights as defined by Section 70 CFCS Act, the SW has informed the child of the Rights of Children in Care, and that any reports that a child's rights may have been violated, have been addressed. The auditor looked for documentation that when a child or youth comes into care, they are informed of these rights and are assisted in the understanding of these rights, according to the child's or youth's developmental abilities. Furthermore, the review of these rights with the child or youth occurs on a regular basis.

Applicable files –13
FIL Compliant files – 20%
Fraser Regional Compliance –62.8%
Provincial Compliance –56.9%

There were 11 files that were found to be non-compliant. The file did not contain sufficient information to confirm that the social worker had explained the Sec. 70 rights to the CIC.

5. INVOLVING A CHILD AND CONSIDERING THE CHILD'S VIEWS IN CASE PLANNING AND DECISION MAKING

In planning and making decisions for a child, the auditor looked for documented evidence that the child and others with significant relationships to the child were involved as fully as possible in the process, and that any possible barriers to involvement were identified and addressed. The auditor also looked for planning aimed to facilitate the involvement of a child or youth in care in case planning by:

- including the child or youth in all stages of the planning process, according to the child's or youth's developmental abilities;
- consulting with the child or youth throughout ongoing discussions and planning reviews
- encouraging the child or youth to fully express his or her views, and supporting him or her in doing so;
- including caregivers and others who have a significant relationship to the child or youth, consistent with the child's or youth's views and best interests, and informing the child or youth of all care plans and decisions, according to the child's or youth's developmental abilities.

Applicable files -13
FIL compliant files-23.1%
FIL Partially Compliant files- 7.7%
Fraser Regional Compliance -73.8%
Provincial Compliance – 78.6%

The nine files that were found to be non-compliant did not contain documentation to confirm that the children had been invited, participated or had their views represented in the planning.

6. MAINTAINING PERSONAL CONTACT WITH A CHILD IN CARE

The auditor looked for documentation that demonstrates the child has had private, in-person contact with their Social Worker as per CIC standard #9. Frequency of contact with a child is based on his or her level of vulnerability, developmental needs and visibility in the community, and is consistent with the goals of the plan of care. The auditor looked for documentation that the Social Worker has private in-person contact with the child.

Applicable files -13

FIL compliant files-7.7%
Fraser Regional Compliance -53.3%
Provincial Compliance –63.5%

In the 12 files that were found to be non-compliant, there was insufficient documentation to confirm that the children in care had direct and private contact with their social workers at least every 90 days or when there was a change in circumstances.

7. MEETING A CHILD’S NEED FOR STABILITY AND CONTINUITY OF LIFELONG RELATIONSHIPS

The auditor looked for documentation to demonstrate that efforts had been made to promote continuity for the child by supporting contact with significant people in the child’s life and maintaining connections to the child’s cultural heritage and identity. As well, the auditor looked for evidence of strategies that were implemented to promote stability and continuity of lifelong relationships and planning for the development of new lifelong relationships. According to CIC Service Standard #10, throughout the time a child is in care, the SW should make it a priority to promote the stability and continuity of lifelong relationships for the child, by:

- actively supporting the child in maintaining positive attachments with parents, siblings, extended family, friends, caregivers and others, consistent with the child’s best interest;
- making every effort to prevent unnecessary delays in decision making by using collaborative planning and alternative dispute resolution processes to reach agreements on developing and implementing the plan of care;
- reunifying the child with family or extended family, or if that is not possible, developing an alternative out-of-care living arrangement that will provide the opportunity to maintain and develop lifelong relationships; and
- exploring on an ongoing, regular basis whether reunification with family or extended family is possible.

Applicable files –13
FIL Compliant files – 46.2%
FIL Partially Compliant files – 7.7%
Fraser Regional Compliance –83.3%
Provincial Compliance –86.1%

There were six files that were non-compliant because there was insufficient documentation to confirm this critical measure had been met.

8. ASSESSMENTS AND PLANNING FOR A CHILD IN CARE

The auditor looked for documentation that an initial plan of care was prepared within the first 30 days of a child entering care, a more comprehensive plan of care for a child in care for over six months and that the plans contained the information outlined in CIC Standard 11. As well the auditor looked for information that indicates the plan is reviewed when appropriate.

Applicable files –13
FIL Compliant files – 15.4%
FIL Partially Compliant files – 7.7%
Fraser Regional Compliance – 47.6%
Provincial Compliance – 44.9%

There were ten files that were found to be non-compliant. These files had insufficient documentation to confirm that any recent assessments or planning for the children had been completed. The one file that was partially compliant did contain related documentation; however, it was not thorough enough.

9. WHEN A CHILD IS MISSING OR HAS RUN AWAY (REPORTABLE CIRCUMSTANCE)

In circumstances where children are missing or have run away, the auditor looked for documentation indicating that the appropriate individuals had been notified, a plan was developed and implemented, and in cases of habitual running away the plan of care was reviewed and strategies developed to address the behaviour. When a child or youth is missing or has run away, notification should be made as soon as possible to:

- the designated director, if the child or youth is at high risk of harm;
- the child's or youth's parent, unless this compromises the child's or youth's safety;
- other people who may be able to play a role in locating the child or youth.

Applicable files –0

10. NOTIFICATION OF FATALITIES, CRITICAL INJURIES AND SERIOUS INCIDENTS (REPORTABLE CIRCUMSTANCES)

In circumstances where there is a death or critical injury of a child in care or there is a serious incident that may affect the immediate safety or health of a child in care, appropriate members of the child's family, the designated director, community service providers, and delegated agencies are all informed of the incident.

A critical injury is defined as an injury that may result in the child's death or may cause serious or permanent impairment of the child's health, as determined by a medical practitioner. Serious incidents are circumstances involving a child who:

- is in life-threatening circumstances, including illness or serious accident;
- is lost, missing or continually running away to a situation that places him or her at high risk of death or injury;
- is missing for more than 10 days;
- is a victim of abuse or neglect by an approved caregiver, caregiver's staff or caregiver's child;
- is the victim of abuse or neglect by a care provider or care provider's family in an out of care placement;
- has been exposed to a high-risk situation or disaster which may cause emotional trauma;
- has been involved in crimes of violence or major property damage;
- has been abducted.

Applicable files –0

11. PLANNING FOR A CHILD LEAVING CARE

The Auditor looked for documentation that appropriate preparation takes place when a child leaves care, including involving the child, relevant family members, caregivers, and other significant persons in planning for the transition and arranging for appropriate services to support the child and family after the child has left care.

In a case involving a youth leaving care, that all youth in care are supported in developing self-care and independence skills and 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.

Applicable files – 2

FIL Compliant files – 50%

Fraser Regional Compliance –80.4%

Provincial Compliance – 77.7%

There was one file that was non-compliant and there was insufficient documentation to confirm that there had been any planning. .

12. SUPERVISORY APPROVAL

Director's Case Practice Audit Report – Fraser Region

Circle of Community # 5 (FIL)

Sandra Fournier, December 12, 2007

The auditor looked within the Child Service file for documentation of supervisory approval when a child comes into care, when reuniting a child with his or her family, when transferring responsibility for or ending services and when a child's plan of care is developed. The Child and Family Development Service Standard on Supervisory Consultation and Approval ensures that supervisory consultation is obtained in all significant circumstances and at all decision points relating to service delivery.

Applicable files –13

FIL Compliant files – 76.9%

Fraser Regional Compliance – 80.8%

Provincial Compliance – 82.1%

In the three files that were non-compliant the documentation did not confirm that supervisory approval had been sought and provided as outlined in the measure.

CFS:

Practice Strengths:

- screening and best approach to service delivery (90%)
- assessing a child protection report and determining the most appropriate response (77.8%)
- seeing and interviewing the child and family (83.3%)
- supervisory approval (90%)

Areas for improved practice:

- determining the time frame to begin an investigation (66.7%)
- conducting a child protection investigation (66.7%)
- concluding a child protection investigation (50%)
- concluding a child protection investigation in a timely manner (33.3%)
- developing and implementing a plan to keep a child safe (20%)
- reassessing a plan to keep a child safe and ending a family service response (0%)

**Of note: The majority the investigations that were reviewed were not completed by FIL staff. Nevertheless, the Team would benefit from a review of the investigative process.

CIC:

Practice Strengths

- preserving the identity of an aboriginal child in care (92.3%)
- ensuring a child's safety while in care (76.9%)
- supervisory approval (76.9%)

Areas for Improved Practice:

- assuming responsibility for a child in care (53.8%)
- maintaining personal contact with a child in care (7.7%)

- meeting a child's need for stability and considering the child's views in case planning and decision making (46.2%)
- assessment and planning for a child in care (15.4%; partial compliance 7.7%)

**Note: It was the experience of this author that the team is strength-based, client focused and dedicated to the aboriginal children and families they serve.

Sandra Fournier
Practice Analyst
Fraser Region

Date

Henry Grayman
Service Quality Manager

Date

11. RECOMMENDATIONS:

Recommendations Development Meeting: October 11, 2007

Participants:

Deborah Zapp	A/Community Service Manager, FIL
Walter Serraglio	A/Associate Community Service Manager, FIL
Susan Waldron	Manager of Practice Development, Fraser Region
Henry Grayman	Service Quality Manager, Fraser Region
Sandra Fournier	Regional Practice Analyst/Auditor, Fraser Region

Within three months:

1. The A/Community Service Manager, will develop a plan for ensuring that the compliance ratings for (CIC) Critical Measures #1, #2, #4, #5, #6, #8 and #9 are improved.
2. The A/Community Service Manager will develop a checklist to increase the compliance ratings for CFS Critical Measures #10 and #11.
3. The A/Team Leader will develop a training plan for each of the social workers assigned to FIL at the time of the audit that will include Advanced Risk Assessment, Fetal Alcohol Syndrome, Substance Misuse, Youth Suicide prevention and C.F.C.S.A. Section 54.1;
4. A re-audit of CS and FS files will be scheduled within one year



Bruce McNeill
Director of Integrated Practice
Fraser Region`

Date

Additional (Executive) Recommendations (if any):

Les Boon
Regional Executive Director
Fraser Region

Date

Additional (Executive) Recommendations (if any):

Marilyn Hedlund
Assistant Deputy Minister

Date