

CASE PRACTICE AUDIT REPORT

McBride Child and Family Services (QGH)

MINISTRY OF CHILDREN AND FAMILY DEVELOPMENT

North Region

Director of Child Welfare

Field Work Completed: February 08, 2006 – February 10, 2006
Report Completed: March 10, 2006

**CASE PRACTICE AUDIT REPORT
McBride Child and Family Services (QGH)**

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SECTION I: INTRODUCTION

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 was conducted proactively by the Director's office in the North Region. Proactive audits of district offices providing child protection, guardianship, youth and non protective family services are systemically conducted according to a 3 year cycle. The North Region conducts case practice audits as an integral component of their quality assurance plan.

METHODOLOGY

The audit was conducted in accordance with the Case Practice Audit Methodology and Procedures Document (April 2004). The specific audit tool used in conducting this audit was:

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

The current critical measures tool (April 2004) included 13 critical measures for the Child and Family Service Standards and 12 critical measures for the Child Service Standards.

The audit of the McBride Child and Family Service team was asked to include a minimum of 20-25% of open family service cases and a minimum of 20-25% of open child service cases.

The auditor conducted the fieldwork from February 08, 2006 to February 10, 2006. The auditor met initially with the social worker and the team leader to review the audit purpose and process. During this time the social worker was invited to identify files that reflected recent practice shifts e.g., Kith and Kin Agreements, Section 54.1 placements, Family Development Response and Alternate Dispute Resolution.

After the audit, the team leader, 1 social worker and the office manager were interviewed with respect to office systems, service delivery structure, and community resources.

Upon the completion of the audit the auditor held a teleconference with the social worker, team leader and the community service manager providing an overview of the results, including general observations, patterns and themes that were identified. The individual case reports were provided to the team leader and the community service manager. The individual case reports are thorough and detailed highlighting the life of the case.

Files were audited based on documentation found on the physical files.

SECTION II: SERVICE DELIVERY

COMMUNITY OVERVIEW

The northern region is comprised of rural and urban communities with varying population size.

The QGH team provides services to the area of McBride, which includes as far west as Penny access, as far east as the BC-Alberta border and as far south as Alberta.

There are no First Nation communities serviced by the McBride office. However there are Aboriginal people who reside in McBride. The Aboriginal people residing in McBride are from various Bands across the province.

McBride is located 220 km (136 miles) east of Prince George on Highway 16. The population of McBride is approximately 2,500 including the greater area. McBride is nestled in the Robson Valley. McBride is surrounded by a beautiful backdrop of mountains, waterfalls, meadows and rivers. Agriculture and forestry form the basis of its economy. McBride is close to Mount Robson, Canada's highest peak in the Rockies, and from the glorious national parks of Jasper and Banff.

Identified social problems amongst the client group include ongoing neglect. The concerns are related to children not being properly supervised, a lack of food and homes being kept below community standard.

The north region's management structure includes the regional executive director, director of operations, director of child welfare, deputy director and the community service manager who administered the delivery of child protection services and oversees ongoing and integrated child and family service delivery.

STAFFING

The QGH team consists of a team leader and 1 social worker. The team leader and social worker have been on the team since November of 2004. The team model consists of 1 family service worker and the team leader. The team leader is located in Prince George. The structure of the team model consists of an integrated caseload, which entails all functions including intake, on going protective family service, resources, adoption and guardianship to children and youth in care. The social worker is fully delegated and has her partial delegation for adoption.

The administrative support team consists of one clerk 5 supervisor. The McBride office is co-located with several other ministries. The administrative staff is responsible for providing file management, opening and closing intakes, transferring files and correspondence. During the audit, the file room was well maintained and organized.

STAFF TRAINING

The team leader obtained . The social worker obtained
 Please see chart for additional information on staff
 experience and education.

Position	Length of Time on Team	Education	MCF Experience	Delegation	Status
Team Leader				Full Delegation	
Child Protection Social Worker (1)				Full Delegation	

performance appraisals on an annual basis.

The document is then sent to the community service manager.

The Ministry of Children and Family Development implemented a new learning management system to assist employees in managing their learning and development needs. The north region implemented the program in November 2004. The north region sponsored and promoted learning events that were of interest to the employees and that aligned with the priorities of the region's service delivery plan.

The learning management system project provided the north region with the e-learning infrastructure and the set of on-line tools. The key drivers behind the initiative were:

- (a) the expectation that all north region employees will prepare an employee performance and development plan (EPDP) on an annual basis; and
- (b) the expectation of increased financial accountability in the regions for managing educational resources.

The learning management system provided several benefits for the north region in the following areas:

- Employee and organizational learning linked to ministry and regional service plans, human resources planning initiatives, and the budgeting process;
- Consistent application of policies for training approval, eligibility, and reimbursement;
- Common work practices for educational planning;
- Improved tracking and more comprehensive reporting of employee development activities, including employee development histories; and
- Streamlined administrative procedures for managing learning activities across the Ministry.

In addition to the learning management system employees completed a survey in 2003 as the first step in a regional employee training and performance development plan. The purpose of the survey was to create a strategic plan to address employee and organizational training needs and performance evaluations. The survey highlighted a need to have a strategic plan and identified tremendous strengths within the region. The region had developed an initial project charter that looked towards a long-term goal of incorporating a balance between regional staff training needs and performance evaluations considering the needs of employees and the organization.

In the fall of 2005 the north region developed a Regional Educational Committee. The purpose of the committee is to develop recommendations for regional professional conferences, to develop initiatives and to encourage regional participation.

Ministry Training Program	Team Leader	SW 1
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 module 2		
Leading the Way		

SUPERVISION AND CONSULTATION

supervision and clinical consultation with respect to the delivery of child protection.

The team leader reports that supervision occurs on an ongoing basis. The team leader is located in Prince George and provides the bulk of the supervision by telephone. The team leader provides supervision and consultation to 2 protection teams. The team leader is based out of Prince George.

The team leader states that if he is away from the office for a short period of time he is available by cell phone.

an alternative team leader is always available.

The team leader states that there is no regular scheduled supervision with the community service manager. The team leader reports that if he requires supervision he will request a meeting with the community service manager. The nature of contact with the community service manager is either by telephone, email or in person.

INTAKE AND TRACKING SYSTEMS

Investigations

The intake function is managed by 1 worker. The intake worker screens, assesses, and completes a prior contact check. The social worker will phone the team leader to consult. The team leader will sign on to the MIS system to view the caller's information. The team leader assists in mapping out the direction of the plan, which is made jointly with the worker. The first assessment is made based on the history of the family and the nature of the report. A decision to investigate is determined based on the assessment and intake information. Once the correct child welfare response has been determined the team leader will document the consult on the MIS screen. It is the responsibility of the intake worker to manage the case until completion. If a decision has been made to manage the case as a protection file it is the responsibility of the worker to manage the file on an ongoing basis. The intake reports are tracked electronically

Given the fact that there is only 1 social worker in the McBride office there is times when the administrative staff will take the call and contact the social worker on her cell phone. When this does occur the social worker will take notes on her legal pad which includes the caller's information then transfer the data to the MIS system.

ONGOING FAMILY AND CHILD SERVICE AND TRACKING SYSTEMS:

Ongoing Family Service and Child Service:

tracks all family service cases and children in

benchmarks in child protection practice.

a tracking sheet that captures key

supervision occurs every 4 to 6 weeks.
 ongoing supervision is provided primarily by telephone
 due to the distance between McBride and Prince George.

The social worker enters new admissions for children in care. It is the social workers' responsibility for tracking care plans and reviews. The electronic system provides a "to do" list that reminds the social worker that legal status and plans of care need to be updated. The team leader has a tracking sheet for children in care which tracks all the key points. The social worker also tracks the reviews by ongoing contact with the service providers. The social worker has frequent contact with the individuals who have been identified to complete certain tasks or goals. The care plan meetings are held when required. The social worker reports that all significant players in the child's life are invited to the care plan meeting. The social worker states that if all professionals are not able to attend the meeting then the information is collected and implemented into the document. The social worker is responsible for contacting involved persons in the care plan meeting.

The social worker reports that children in care are informed of their rights when they are taken into care. The social worker stated that the child is given the booklet that outlines their rights. The social worker stated that if the child is not old enough the foster parent is informed. The social worker stated that most of the children in care are connected with service providers who are aware of the child's rights.

SERVICES TO ABORIGINAL CHILDREN AND FAMILIES

The McBride office does not directly serve any Aboriginal Bands. There are Aboriginal people residing in the McBride area however there are no Bands that fall within the geographical boundaries. It was noted that the Aboriginals in the community are from various Bands throughout the province. The social worker stated that when an Aboriginal family comes to the attention of MCFD the provincial protocol is followed. The social worker had a strong understanding of the protocol in place with Aboriginal children and families. The social worker reports that the schools have Aboriginal workers available for Aboriginal families.

The following chart provided a breakdown of services provided to Aboriginal and Non Aboriginal people in the last 6 months.

Office QGH Children in Care - August 2005 to January 2006							
Aboriginal Status	Aug-05	Sep-05	Oct-05	Nov-05	Dec-05	Jan-06	Average
Aboriginal	3	3	3	3	3	3	3.0
Non-Aboriginal	3	3	3	3	3	3	3.0
Total	6	6	6	6	6	6	6.0

Office QGH Open FS Files - August 2005 to January 2006							
Aboriginal Status	Aug-05	Sep-05	Oct-05	Nov-05	Dec-05	Jan-06	Average
Aboriginal	2	2	1	1	1	1	1.3
Non-Aboriginal	11	11	10	9	9	10	10.0
Total	13	13	11	10	10	11	11.3

Office QGH Protection Reports Recorded - August 2005 to January 2006							
Aboriginal Status	Aug-05	Sep-05	Oct-05	Nov-05	Dec-05	Jan-06	Average
Aboriginal	0	0	0	0	0	0	0.0
Non-Aboriginal	2	3	1	0	1	2	1.5
Total	2	3	1	0	1	2	1.5

Office QGH Total Intakes Recorded - August 2005 to January 2006							
Aboriginal Status	Aug-05	Sep-05	Oct-05	Nov-05	Dec-05	Jan-06	Average
Aboriginal	0	0	0	0	0	0	0.0
Non-Aboriginal	3	3	1	0	1	3	1.8
Total	3	3	1	0	1	3	1.8

RESOURCES

Residential Resources

Foster homes are recruited jointly with MCFD resource worker and North Central Family Resources. North Central Family Resources will assist by attending information sessions, by distributing posters and they are available for questions from prospective foster parents. Resources are accessed through the same worker as the resource worker manages the protection function as well. The resource worker reported that the Robson

Valley is very short on foster homes. The resource worker noted that it is not unusual to look to other regions to request a placement for a child. The resource worker states that there is several ways that caregivers are supported. The resource worker is available to support foster parents when any issues may arise. North Central Family Resources provides a duty worker at any time throughout the working hours as well they provide a lead foster parent who is trained in supporting other foster parents. The resource worker states that annual reviews are completed. The resource worker will attend the home and complete the review with the foster parent. Both foster parents participate in the review. The resource worker will tour the home to ensure that all standards are being met. If one of the standards does not meet compliance the resource worker will identify a completion date and will follow up to ensure the standard is met. The resource worker and the team leader track the foster homes monthly to ensure that the resource worker has had contact with the home at least once per month.

The resource worker reports that there are 6 foster homes in the McBride area. Due to the severe shortage of foster parents the resource worker reports that she is currently recruiting more foster parents.

The QGH resource worker has access to regional resources in Prince George or other areas of the region.

Non Residential Resources

The following services provided are:

The Robson Valley Home Support Society provides several services such as:

- Child and youth mental health counseling;
- Children who witness violence program;
- Infant development program;
- Safe shelter program;
- Supported child care;
- Family initiatives;
- Parenting programs;
- Counseling for women who have been or are victims of abuse.

The Northern Health Authority has an adult mental health and addictions counselor. As well as a public health nurse who is responsible for communicable disease control, family services such as home visits to new parents and developmental screening, and adult wellness.

The RCMP detachment provides Victim Services and D.A.R.E.

SERVICE TRANSFORMATION

The communities of McBride and Valemount are served through contracts that the Ministry has with Robson Valley Home Support Society. These contracts provide for a range of Family Development, Child and Youth Mental Health, Supported Child Development and Infant Development services. The Family Development services offer individual and group supports to families in both communities. These services assist both parents and children/youth based on their individual needs. Some outreach services are offered for early childhood therapies through the Child Development Centre. The Child and Youth Mental Health services have gone through some transformation recently as the Northern Health Authority has provided adult mental health and addictions supports. These adult services had previously been provided through the MCFD Child and Youth Mental Health contract.

SECTION III: AUDIT RESULTS

AUDIT SAMPLE

The audit of the McBride Child and Family Service Team (QGH) included a minimum of 25% of the number of child protection intakes closed between August of 2005 and January of 2006 (6 months); a minimum of 20-25% of open Family Service cases; and 20-25% of open Child Service cases.

Caseload Management Reports were printed from the MCFD computer system prior to the commencement of the audit and used to arrive at a sample number. The Case Management Report recorded 13 open Family Services cases (this number included open intakes). Four open Family Service cases were audited representing 57% of 7 open ongoing Family Service cases. In the last 6 months 9 intakes were closed. Five out of the 9 intakes were audited representing 55% of the closed files in the last 6 months. Three out of 7 open Child Service cases were audited, representing 43% of open Child Services cases.

The Child Service sample is representative of cases involving Temporary Custody Orders and Continuing Custody Orders.

Family Service and Child Service cases represent a stratified sample.

RESULTS: CHILD AND FAMILY SERVICES: INTAKE FUNCTION

Practice Strengths:

The audit examined 5 closed files in the last 6 months.

Out of the 5 files examined 4 responses were coded as an investigation and 1 response was coded as offer support service. Of the 4 investigation completed there was a finding of protection in 2 of the files. These files were managed as ongoing protection files for a period of time and were closed in the last 6 months.

The investigations were well done. All of the steps of an investigation were completed and the information was clearly documented.

The files that were managed as ongoing protection files were monitored well. There were risk assessments and risk reduction service plans located on the files. There was evidence that the social worker contacted service providers on a regular basis to review the progress of the families. There was evidence on the file that supports a reassessment of risk prior to closing the protection files

It appeared that the social worker uses a strength based approach when dealing with families.

In general, files were well organized. The auditor was able to locate the selected files with ease.

Compliance Ratings Per Measure For Closed Family Service Cases

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 an Aboriginal service provider or delegated agency had been contacted where applicable.

- Compliance was met in 5 of 5 cases for 100 % compliance.

2. When a Child is at Immediate Risk of Harm

- N/A

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

The auditor looked for documentation that demonstrated that the worker had obtained and collected sufficient information to assess a report and determine the best child welfare response.

- Compliance was met in 5 of 5 cases for 100% compliance.

4. Family Development Response

- N/A

5. Determining a 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 initiated within the time frame specified.

- Compliance was met in 4 of 4 cases for 100% compliance.

6. Conducting a Child Protection Investigation

This critical measure outlines many of the activities involved in an investigation. This includes that all relevant information relating to the report has been reviewed, including information from people/professionals who have relevant knowledge of the family and that the child's living situation has been directly observed. All of the above steps need to be completed for compliance.

- Compliance was met in 4 of 4 cases for 100% compliance.

7. Seeing and Interviewing the Child and Family

This critical measure requires that the social worker interviews the subject child, siblings, parents, and the Aboriginal community involved if applicable. Each investigation includes at a minimum: seeing the child and all other vulnerable children in the home, interviewing the child and all other children in the home, where developmentally appropriate and with supports if necessary, and seeing and interviewing the parents. All of the above steps need to be completed for compliance.

- Compliance was met in 4 of 4 cases for 100% compliance.

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.

- Compliance was met in 3 of 4 cases for 75% compliance. Non compliance was found in 1 case where the information collected through out the investigation was incongruent with the finding. The information supported a decision that a child was in need of protection. It was clear that the file was being managed as a protection file however risk decision #4 was not documented properly.

9. Concluding an Investigation in a Timely Manner

This critical measure requires that there is documentation that demonstrates the investigation was concluded within 30 calendar days. The documentation includes the sign off by the team leader.

- Compliance was met in 4 of 4 cases for 100% compliance.

10. Developing and Implementing a Plan to Keep a Child Safe

The auditor looked for documentation that reflected safety planning that 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. This would involve the completion of the British Columbia risk assessment.

- Compliance was met in 2 of 2 cases for 100% compliance.

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

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

- Compliance was met in 2 of 2 cases for 100% compliance.

12. Notification of Fatalities and Critical Injuries and Serious Incidents

- N/A

13. Supervisory Approval

The auditor looked for documentation that reflected consultation with supervisors or managers at all critical points: assessing reports, decision on a response, conducting and concluding an investigation, notifying police, determining a child's need for protection, developing an ongoing safety plan, the court process, removal of a child, placement of a child, reunification, transferring responsibility for or ending services and exceptions to policy.

Compliance was met in 5 of 5 cases for 100% compliance.

RESULTS: CHILD AND FAMILY SERVICES: ONGOING SERVICE FUNCTION

Practice Strengths:

In general, files were well organized. The auditor was able to locate the selected files with ease.

The auditor examined 4 ongoing family service files. All files were being managed on an ongoing basis. One file was designated as a protection file and 3 were designated as non protection files. There may be some confusion related to the finding of protection as in one instance, the social worker did an extraordinary job in completing the investigation and confirming that an event did occur as defined under section 13 of the *CFCSA*. In this case, the investigation resulted in a finding that the children were in need of protection however the file was to remain open to provide services on a support basis.

There is evidence on the file that MCFD provides a proactive approach to families. It was clear that services and referrals are provided to families in a supportive manner.

Supervisory consults were clearly documented.

There was strong evidence that supervisor tracked with the social worker on a regular basis.

There is evidence on the files that MCFD has a good working relationship with community partners and the RCMP.

One file was flagged for follow up as the auditor located information on the file that warranted an investigation. The auditor was not able to locate an intake corresponding with the information. It was not clear if the section 13 concerns were addressed.

Compliance Ratings Per Measure For Open Family Service Cases

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 an Aboriginal service provider or delegated agency had been contacted where applicable.

- Compliance was met in 4 of 4 cases for 100 % compliance.

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 ensure the child's immediate health and safety, including a safety plan. If a child protection worker was not able to ensure that a child was seen immediately, the auditor would look for documentation describing alternative steps taken to ensure the child's immediate safety.

N/A

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

The auditor looked for documentation that demonstrated that the worker had obtained and collected sufficient information to assess a report and determine the best child welfare response.

- Compliance was met in 3 of 4 cases for 75% compliance. Non compliance was met in 1 case where information was received and there was no intake generated to reflect an appropriate assessment of the information.

4. Family Development Response

- **N/A**

5. Determining a 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 initiated within the time frame specified.

- Compliance was met in 2 of 2 cases for 100% compliance.

6. Conducting a Child Protection Investigation

This critical measure outlines many of the activities involved in an investigation. This includes that all relevant information relating to the report has been reviewed, including information from people/professionals who have relevant knowledge of the family and that the child's living situation has been directly observed. All of the above steps need to be completed for compliance.

- Compliance was met in 2 of 2 cases for 100% compliance.

7. Seeing and Interviewing the Child and Family

This critical measure requires that the social worker interviews the subject child, siblings, parents, and the Aboriginal community involved if applicable. Each investigation includes at a minimum: seeing the child and all other vulnerable children in the home, interviewing the child and all other children in the home, where developmentally appropriate and with supports if necessary, and seeing and interviewing the parents. All of the above steps need to be completed for compliance.

- Compliance was met in 2 of 2 cases for 100% compliance.

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.

- Compliance was met in 1 of 2 cases for 50% compliance. Non compliance was found in 1 case where the information collected through out the investigation was incongruent with the finding.

9. Concluding an Investigation in a Timely Manner

This critical measure requires that there is documentation that demonstrates the investigation was concluded within 30 calendar days. The documentation includes the sign off by the team leader.

- Compliance was met in 1 of 2 cases for 50% compliance. Non compliance was found in 1 case due to a delay over 30 days.

10. Developing and Implementing a Plan to Keep a Child Safe

The auditor looked for documentation that reflected safety planning that 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. This would involve the completion of the British Columbia risk assessment.

- Compliance was met in 1 of 1 case for 100% compliance.

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

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

- Compliance was met in 1 of 1 case for 100% compliance.

12. Notification of Fatalities and Critical Injuries and Serious Incidents

- N/A

13. Supervisory Approval

The auditor looked for documentation that reflected consultation with supervisors or managers at all critical points: assessing reports, decision on a response, conducting and concluding an investigation, notifying police, determining a child's need for protection, developing an ongoing safety plan, the court process, removal of a child, placement of a child, reunification, transferring responsibility for or ending services and exceptions to policy.

- Compliance was met in 4 of 4 cases for 100% compliance.

RESULTS: CHILDREN IN CARE

Practice Strengths:

Three child service files were audited.

There were many areas of strength found within the Child Service files. There was evidence on the files that social workers are ensuring that children with special needs are receiving assessments. The auditor located several assessments on the files. It was observed that out of care options were being explored and children were placed in living arrangements that met their identified needs. Documentation was also found indicating that appropriate strategies have been planned and implemented to promote stability and continuity of lifelong relationships. It was noted that social workers promote access with important individuals in children's lives.

Compliance Ratings Per 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. 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, indication that the social worker understands the child's history and current circumstances. The auditor also looked for a cultural plan within the file that reflected the social worker's efforts in promoting the child's Aboriginal heritage.

- Compliance was met in 3 of 3 cases for 100% compliance.

2. Assuming Responsibility for a Child in Care

The auditor looked for confirmation of the child's legal status such as court orders, agreements and an assessment of the child's history and current circumstances.

- Compliance was met in 3 of 3 cases for 100% compliance.

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 his or her needs, or for a child/youth refusing placement reasonable efforts were made to ensure a placement. File information also indicates that there is an adequate plan in place to address a child's safety needs. The auditor looked for documentation to ensure the physical safety and emotional well-being of a child or youth in care.

- Compliance was met in 3 of 3 cases for 100% compliance.

4. Ensuring the Rights of a Child in Care

The auditor viewed the documentation to ensure that the social worker 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.

- Compliance was met in 3 of 3 cases for 100% compliance.

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 documentation that supported that the child and other significant individuals to the child were involved as fully as possible in the case planning process and that any possible barriers to involvement were identified and addressed.

- Compliance was met in 3 of 3 cases for 100% compliance.

6. Maintaining Personal Contact with a Child in Care

The auditor looked for 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.

- Compliance was met in 3 of 3 cases for 100% compliance

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.

- Compliance was met in 2 of 3 cases for 67% compliance. Non compliance was found in 1 case where a child in care had not been connected with his siblings.

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 was developed for a child in care within six months and that the care plan contained the information outlined in CIC Service Standard #11.

- Compliance was met in 3 of 3 cases for 100% compliance.

9. When a Child is Missing or Has Run Away

- N/A

10. Notification of Fatalities, Critical Injuries and Serious Incidents

- N/A

11. Planning for a Child Leaving Care

- N/A

12. Supervisory Approval

The auditor looked within the Child Service file for documentation of supervisory approval when a child was placed, 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 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.

- Compliance was met in 3 of 3 cases for 100% compliance.

AUDIT RECOMMENDATIONS

Recommendations:

1. The Community Services Manager will ensure the report is shared with the staff to highlight the strengths noted.
2. The Director will ensure that the Regional Guardianship Consultant will facilitate training at a date to be determined related to Comprehensive Plans of Care.

Within receipt of the final report, recommendations #1 and 2 will be completed within 60 days.

The CSM will advise the Director of Child Welfare and the Regional Executive Director in writing when the recommendations have been completed. The Director of Divisional Operations will be copied for tracking purposes.

Tammy Stublely Regional Auditor/Analyst	Robert Watts Director of Child Welfare
Date:	Date:

Recommendations brought forward by Provincial Director:

Mark Sieben
Provincial Director

Date:

CLOSED FAMILY SERVICE CASES

	CRITICAL MEASURES	C	PC	NC	NA
1	Screening and Best Approach to Service Delivery CFS Standard #1	100%			
	Number of cases rated: 5 of 5	5			
2	When a Child is at Immediate Risk of Harm CFS Standard #11				
	Number of cases rated: 0 of 5				5
3	Assessing a Child Protection Report and Determining the Most Appropriate Response CFS Standard #12	100%			
	Number of cases rated: 5 of 5	5			
4	Family Development Response CFS Standard #14				
	Number of cases rated: 0 of 5				5
5	Determining a Time Frame to Begin an Investigation CFS Standard #15	100%			
	Number of cases rated: 4 of 5	4			1
6	Conducting a Child Protection Investigation CFS Standard #15	100%			
	Number of cases rated: 4 of 5	4			1
7	Seeing and Interviewing the Child and Family CFS Standard #15	100%			
	Number of cases rated: 4 of 5	4			1
8	Concluding a Child Protection Investigation CFS Standard #16	75%		25%	
	Number of cases rated: 4 of 5	3		1	1
9	Concluding Investigation in a Timely Manner CFS Standard #16	100%			
	Number of cases rated: 4 of 5	4			1
10	Developing and Implementing a Plan to Keep a Child Safe CFS Standard #17	100%			
	Number of cases rated: 2 of 5	2			3
11	Reassessing Plan to Keep a Child Safe and Ending Family Service Response CFS Standard #17	100%			
	Number of cases rated: 2 of 5	2			3
12	Notification of Fatalities, Critical Injuries and Serious Incidents CFS Standard #24				
	Number of cases rated: 0 of 5				5
13	Supervisory Approval C&FD Standard on Supervisory Approval	100%			
	Number of cases rated: 5 of 5	5			

APPENDIX 2: CHILD AND FAMILY SERVICES DATA SUMMARY

OPEN FAMILY SERVICE CASES

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

APPENDIX 2:

CHILDREN IN CARE CASES

	CRITICAL MEASURES	C	PC	NC	NA
1	Preserving the Identity of an Aboriginal Child in Care CIC Service Standards #1 and #19	100%			
	Number of cases rated: 3 of 3	3			
2	Assuming Responsibility for a Child in Care CIC Service Standard #4	100%			
	Number of cases rated: 3 of 3	3			
3	Ensuring a Child's Safety While in Care CIC Service Standard #5	100%			
	Number of cases rated: 3 of 3	3			
4	Ensuring the Rights of a Child in Care CIC Service Standard #6	100%			
	Number of cases rated: 3 of 3	3			
5	Involving a Child and Considering the Child's Views in Case Planning and Decision Making CIC Service Standard #8	100%			
	Number of cases rated: 3 of 3	3			
6	Maintaining Personal Contact with a Child in Care CIC Service Standard #9	100%			
	Number of cases rated: 3 of 3	3			
7	Meeting a Child's Need for Stability and Continuity of Lifelong Relationships CIC Service Standard #10	67%		33%	
	Number of cases rated: 3 of 3	2		1	
8	Assessments and Planning for a Child in Care CIC Service Standard #11	100%			
	Number of cases rated: 3 of 3	3			
9	When a Child is Missing or has Run CIC Service Standard #14				
	Number of cases rated: 0 of 3				3
10	Notification of Fatalities, Critical injuries and Serious Incidents C&FS Standard #24			100%	
	Number of cases rated: 0 of 3				
11	Planning for a Child Leaving Care CIC Service Standards #15 and #16				
	Number of cases rated: 0 of 3				3
12	Supervisory Approval C&FD Standard on Supervisory Approval	100%			
	Number of cases rated: 3 of 3	3			

Director's Case Practice Audit – McBride Child and Family Services - QGH

Reviewed by the Assistant Deputy Minister – no further recommendations to add.

Mark Sieben
Assistant Deputy Minister
June 27, 2006