

CASE PRACTICE AUDIT REPORT

Kitimat Child and Family Services (QMC)

MINISTRY OF CHILDREN AND FAMILY DEVELOPMENT

North Region

Director of Child Welfare

Field Work Completed: March 28, 2006 – April 01, 2006
Report Completed: June 13, 2006

**CASE PRACTICE AUDIT REPORT
Kitimat Child and Family Services (QMC)**

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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 Kitimat 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 March 28, 2006 to April 01, 2006. The auditor met initially with the social workers to review the audit purpose and process. During this time the social workers were 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 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 Kitimat district office is part of the North Region. The QMC team provides services to the district of Kitimat and the adjacent Kitimaat Village Council. Kitimat lies on the north coast of BC about 650 km northwest of Vancouver, 56 km south of Terrace and 110 km east of Prince Rupert. Kitimat sits at the head of the Kitimat Arm extending from the Douglas Channel.

The population of the district of Kitimat is approximately 10,400. In addition, there are approximately 700 residents residing at the Kitimaat Village Council.

The immigrant population consists mainly of Portuguese people. It was noted that a large number of Portuguese people arrived at the opening of the Aluminum Company of Canada (Alcan) in 1950. More recent immigrant population includes German and Asian individuals. It was noted that there is a small population of Aboriginal people living off reserve.

The staff noted that many of the children and families they work with are affected by alcohol, drug abuse and domestic violence. The team leader stated that there has been a recent increase in reports regarding domestic violence and alcohol. The isolation of the community appears to have an effect on mental health issues, particularly depression and seasonal depression.

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 QMC team consists of a complement of a team leader and 2 social workers. The team leader has been consistent for several years. The team leader reports half time to the Kitimat office and half time to another office in the region. When the team leader is providing supervision to another team the Kitimat social workers have access to the team leader for consultation. The structure of the team model consists of integrated caseloads, which entails all functions including intake, on going protective family service files and guardianship to children and youth in care. The other disciplines served by the Kitimat office are resources, probation and child and youth mental health. The 2 social workers are fully delegated.

The administrative support team consists of 1 clerk 5 supervisor and worker. The Kitimat office is shared with the Ministry of Education and Income assistance. 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

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	
Child Protection Social Worker (2)				Full Delegation	

performance appraisals are due and need to be completed.

Based on the findings of the appraisal a work plan would be developed or training would be implemented if required. The team leader reports that she is currently reviewing EPDPS.

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	SW 2
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

The team leader provides supervision and clinical consultation with respect to the delivery of child protection.

supervision occurs on a regular basis.

The team leader reports that daily discussions occur around case practice.

clinical supervision occurs on a daily basis.

The team leader states that if she is away from the office for a short period of time she is available by cell phone. The team leader reports that if she is not available she always ensures that there is an acting team leader available.

there is no regular scheduled supervision with the community service manager. The community service manager is available by email,

phone or in person the community service manager is always available. If there is a difficult case the community service manager will attend the office.

INTAKE AND TRACKING SYSTEMS

Investigations

The intake function is managed by 2 workers. The team leader reports that for the most part the intake function is rotated. However, there are times when intake is covered by whoever is available. The intake worker screens, assesses, and completes a prior contact check. As well the administration staff will double check the prior contact check. Initially, the social worker will record the caller's information on paper and later input the data into the MIS system. The first assessment is made in consultation with the team leader. At this point a decision is made on who will receive the case in order to complete the child welfare response. The team leader will ensure that caseloads are balanced prior to assigning the case. If a decision has been made to manage the case as a protection file upon the completion of an investigation it is the responsibility of the worker to manage the file on an ongoing basis. The intake reports are tracked electronically as the QMC social workers are consistent and proficient in the use of the MIS/CIS systems.

ONGOING FAMILY AND CHILD SERVICE AND TRACKING SYSTEMS:

Ongoing Family Service and Child Service:

tracks all family service cases

The social worker enters new admissions for children in care. It is the social workers responsibility to track 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 care plan meetings are held when required. The team leader reports that all significant players in the child’s life are invited to the care plan meeting. The team leader 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 team leader reports that children in care are informed of their rights when they are taken into care. The team leader reports that the social worker will review the rights of care when completing the initial plan of care. If the child/youth is placed out of town the team leader reports that the rights are reviewed by phone.

SERVICES TO ABORIGINAL CHILDREN AND FAMILIES

There is 1 Aboriginal Band in the Kitimat area, the Kitamaat Village Council, which belongs to the Haisla Nation. Kitamaat Village Resources located on reserve provides drug and alcohol counselling and residential services. The Kitamaat Village Resources are available to the members off-reserve and other Aboriginal families residing in Kitimat.

The QMC social workers work directly with the Band social worker and the Aboriginal agencies regarding case planning for Aboriginal children and families. In addition the Band social worker is invited to the Comprehensive Plan of Care meetings when there are Aboriginal children involved. As well when a request for service or a child protection report is received for an Aboriginal child the Band is contacted.

The services provided by the Kitamaat Village Resources include:

- Social development;
- Drug/alcohol counseling;
- Residential treatment;
- Youth centre;
- Health centre;
- Outreach worker.

It was noted that the QMC team works closely with 2 other Aboriginal agencies as a number of children and families reside in the Kitimat area. The following agencies are:

- Nisga’a Child & Family Services
- Northwest Internation Family Services Society.

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

Office QMC Children in Care - October 2005 to March 2006							
Aboriginal Status	Oct-05	Nov-05	Dec-05	Jan-06	Feb-06	Mar-06	Average
Aboriginal	9	11	10	10	9	9	9.7
Non-Aboriginal	4	4	3	3	4	5	3.8
Total	13	15	13	13	13	14	13.5

Office QMC Open FS Files - October 2005 to March 2006							
Aboriginal Status	Oct-05	Nov-05	Dec-05	Jan-06	Feb-06	Mar-06	Average
Aboriginal	12	13	13	16	15	14	13.8
Non-Aboriginal	31	27	23	20	19	24	24.0
Unknown	0	0	0	0	0	0	0.0
Total	43	40	36	36	34	38	37.8

Office QMC Protection Reports Recorded - October 2005 to March 2006							
Aboriginal Status	Oct-05	Nov-05	Dec-05	Jan-06	Feb-06	Mar-06	Average
Aboriginal	1	3	0	2	2	3	1.8
Non-Aboriginal	4	3	1	4	2	6	3.3
Total	5	6	1	6	4	9	5.2

Office QMC Total Intakes Recorded - October 2005 to March 2006							
Aboriginal Status	Oct-05	Nov-05	Dec-05	Jan-06	Feb-06	Mar-06	Average
Aboriginal	1	3	0	2	2	3	1.8
Non-Aboriginal	7	6	1	4	3	10	5.2
Total	8	9	1	6	5	13	7.0

RESOURCES

Residential Resources

Residential resources for the Kitimat area are managed from the resource team located in Terrace. A resource worker is based half time in Kitimat. Social workers on the QMC

team access a placement by contacting the liaison worker. Once the resource worker locates an available home, the child's worker assumes responsibility for placement and providing the caregivers with essential information (referral form) about the child. The resource worker has developed a system whereby all the resources are set on a board describing the type and capability with a pocket containing tags with the names of the children in the resource. This system is reviewed and updated weekly.

Residential resources utilized by the QMC team include family care homes and leveled homes. Restricted foster homes are often identified by the social worker and referred to the resource worker for a home study for an individual child. In some cases, out-of-community, but within-region resources are used in Terrace, Prince Rupert or Prince George, depending on the child's needs. It has also been necessary to place children and youth with special needs in out-of-region resources in the Lower Mainland.

Staff report that in general the resources available are sufficient to the needs of the team however; the resources for teenagers are limited.

Non Residential Resources

There are a variety of contracted resources providing support services to families and children in the district of Kitimat.

The Child Development Centre manages a number of programs including:

- Child and youth care workers;
- Child care workers for special needs children;
- Infant development program;
- Audiology services;
- Speech and Language;
- Nobody's perfect program.

Other agencies in the community are as follows:

- Kitimat community services;
- Transition house;
- Northwest addictions services;
- Victim services.
- Northwest community health services society.

Staff report effective relationships with the RCMP, the schools, the local hospital, community health nurses, mental health, drug and alcohol services, and adult probation. The child and youth mental health worker is part of the team and readily accessible for consultation.

SERVICE TRANSFORMATION

SECTION III: AUDIT RESULTS

AUDIT SAMPLE

The audit of the Kitimat Child and Family Service Team (QMC) included a minimum of 25% of the number of child protection intake reports closed between October of 2005 and March 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 34 open Family Services cases (this number included open intakes). Eight open Family Service cases were audited representing 30% of 26 open ongoing Family Service cases. In the last 6 months 33 intakes were closed. Nine out of the 33 intakes were audited representing 30% of the closed files. Five out of 14 open Child Service cases were audited, representing 30% 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 9 closed files in the last 6 months.

Out of the 9 files examined 4 responses were coded as an investigation, 3 responses were coded as offer support services, 1 response was coded as refer to community agency and 1 response was coded as no further action. Of the 4 investigations completed there was a finding of protection in 2 cases. Two cases were managed as ongoing family service files for a period of time and were closed in the last 6 months.

The investigations were well done.

The accuracy and speed of the assessment of the report/request for services were completed in a timely manner.

Consultation with the team leader regarding the assessment of the report was clearly documented. The quality of the assessments was well done.

The process around file closure was clearly documented.

Good work in providing supports to children and families.

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

The auditor flagged 1 file for follow up as the closing recording was not accurate based on the information on the file.

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 8 of 9 cases for 89% compliance. Non compliance was found in 1 case where there was no evidence that the Aboriginal service provider or delegated agency was contacted during the assessment, planning and delivery of services.

2. When a Child is at Immediate Risk of Harm

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

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 7 of 9 cases for 78% compliance. Non compliance was found in 2 cases where the caller's information fell within section 13 and the most appropriate response was an investigation.

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 4 of 4 cases for 100% compliance.

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 4 cases for 25% compliance. Non compliance was found in 3 cases as the investigations were not completed within 30 calendar 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 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 1 of 2 cases for 50% compliance. Non compliance was found in 1 case where there was no evidence of a risk reduction service plan.

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 8 of 9 cases for 88% compliance. Non compliance was found in 1 case where there was a lack of evidence to support that the acting team leader reviewed the file prior to approving file closure.

RESULTS: CHILD AND FAMILY SERVICES: ONGOING SERVICE FUNCTION

Practice Strengths:

The auditor examined 8 ongoing family service files. All files are being managed on an ongoing basis. Six files are designated as protection and 2 files are designated as non protection.

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

Supervisory consults are clearly documented.

Protection files contained risk assessments and outlined service plans that clearly stated goals, objectives, and time frames; As well as evaluations and reviews of the service plans.

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

Two files were flagged for follow up. One file was flagged for consideration of a risk reduction service plan. One file was flagged as the auditor could not locate an intake reflecting the decision to place a child in the Director's care.

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 7 of 8 cases for 88% compliance. Non compliance was found in 1 case where there was no evidence that the Aboriginal service provider or delegated agency was contacted during the assessment, planning and delivery of services.

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.

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

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 8 of 8 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 7 of 7 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 6 of 7 cases for 86% compliance. Non compliance was found in 1 case where there was no evidence supporting the observation of the child's living situation.

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 6 of 7 cases for 86% compliance. Non compliance was found in 1 case where both parents were not interviewed.

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 7 of 7 cases for 100% compliance.

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 7 of 7 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 6 of 6 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 5 of 6 cases for 83% compliance. Non compliance was found in 1 case where there was no evidence of a risk reduction service plan.

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 8 of 8 cases for 100% compliance.

RESULTS: CHILDREN IN CARE

Practice Strengths:

Five child service files were audited.

There were many areas of strength found within the Child Service files. There is 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.

Areas for Improved Case Practice:

Areas of low compliance involved critical measures 4 and 8 associated with *Ensuring the Rights of a Child in Care and Assessments and Planning for a Child in Care*. Based on file documentation it was not clear if the child/youth had been notified of his or her rights. The auditor observed plans of care on file however several were due for a review.

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 5 of 5 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 5 of 5 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 5 of 5 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 5 cases for 60% compliance. Non compliance was found in 2 cases where there was no documentation supporting the review of the rights with the child or youth.

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 5 of 5 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 4 of 5 cases for 80% compliance. Non compliance was found in 1 case where there was no documentation supporting the ongoing personal contact with a child in care.

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 4 of 5 cases for 80% compliance. Partial compliance was found in 1 case where a child in care had not been connected with his siblings or extended family for a long period of time.

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 2 of 5 cases for 40% full compliance. Partial compliance was found in 3 cases where plans of care were due.

9. When a Child is Missing or Has Run Away

- N/A

10. Notification of Fatalities, Critical Injuries and Serious Incidents

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

11. Planning for a Child Leaving Care

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

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 5 of 5 cases for 100% compliance.

AUDIT RECOMMENDATIONS

Recommendations:

1.) The Community Service Manager will ensure the report is shared with the staff to highlight the areas of practice where there were high levels of compliance and the areas that require strengthening. In particular, the CSM will review the standard related to Rights of Children in Care (CIC Standard #6) and ensure staff understand the need for documentation when the Rights are reviewed with children in care and for practice to reflect the principles found in section 70 of the *Child, Family and Community Service Act*.

2.) The Community Service Manager will meet with the team leader to develop a plan to ensure the outstanding work identified in the audit is completed.

Tammy Stubley
Senior Regional Auditor/Analyst

Date:

Kellie Kilpatrick
Director of Child Welfare

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	89%		11%	
	Number of cases rated: 9 of 9	8		1	
2	When a Child is at Immediate Risk of Harm CFS Standard #11	100%			
	Number of cases rated: 1 of 9	1			8
3	Assessing a Child Protection Report and Determining the Most Appropriate Response CFS Standard #12	78%		22%	
	Number of cases rated: 9 of 9	7		2	
4	Family Development Response CFS Standard #14				
	Number of cases rated: 0 of 9				9
5	Determining a Time Frame to Begin an Investigation CFS Standard #15	100%			
	Number of cases rated: 4 of 9	4			5
6	Conducting a Child Protection Investigation CFS Standard #15	100%			
	Number of cases rated: 4 of 9	4			5
7	Seeing and Interviewing the Child and Family CFS Standard #15	100%			
	Number of cases rated: 4 of 9	4			5
8	Concluding a Child Protection Investigation CFS Standard #16	100%			
	Number of cases rated: 4 of 9	4			5
9	Concluding Investigation in a Timely Manner CFS Standard #16	25%		75%	
	Number of cases rated: 4 of 9	1		3	5
10	Developing and Implementing a Plan to Keep a Child Safe CFS Standard #17	100%			
	Number of cases rated: 2 of 9	2			7
11	Reassessing Plan to Keep a Child Safe and Ending Family Service Response CFS Standard #17	50%		50%	
	Number of cases rated: 2 of 9	1		1	7
12	Notification of Fatalities, Critical Injuries and Serious Incidents CFS Standard #24				
	Number of cases rated: 0 of 9				9
13	Supervisory Approval C&FD Standard on Supervisory Approval	88%		12%	
	Number of cases rated: 9 of 9	8		1	

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	88%		12%	
	Number of cases rated: 8 of 8	7		1	
2	When a Child is at Immediate Risk of Harm CFS Standard #11	100%			
	Number of cases rated: 2 of 8	2			6
3	Assessing a Child Protection Report and Determining the Most Appropriate Response CFS Standard #12	100%			
	Number of cases rated: 8 of 8	8			
4	Family Development Response CFS Standard #14				
	Number of cases rated: 0 of 8				8
5	Determining a Time Frame to Begin an Investigation CFS Standard #15	100%			
	Number of cases rated: 7 of 8	7			1
6	Conducting a Child Protection Investigation CFS Standard #15	86%		14%	
	Number of cases rated: 7 of 8	6		1	1
7	Seeing and Interviewing the Child and Family CFS Standard #15	86%		14%	
	Number of cases rated: 7 of 8	6		1	1
8	Concluding a Child Protection Investigation CFS Standard #16	100%			
	Number of cases rated: 7 of 8	7			1
9	Concluding Investigation in a Timely Manner CFS Standard #16	100%			
	Number of cases rated: 7 of 8	7			1
10	Developing and Implementing a Plan to Keep a Child Safe CFS Standard #17	100%			
	Number of cases rated: 6 of 8	6			2
11	Reassessing Plan to Keep a Child Safe and Ending Family Service Response CFS Standard #17	83%		17%	
	Number of cases rated: 6 of 8	5		1	2
12	Notification of Fatalities, Critical Injuries and Serious Incidents CFS Standard #24				
	Number of cases rated: 0 of 8				8
13	Supervisory Approval C&FD Standard on Supervisory Approval	100%			
	Number of cases rated: 8 of 8	8			

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: 5 of 5	5			
2	Assuming Responsibility for a Child in Care CIC Service Standard #4	100%			
	Number of cases rated: 5 of 5	5			
3	Ensuring a Child's Safety While in Care CIC Service Standard #5	100%			
	Number of cases rated: 5 of 5	5			
4	Ensuring the Rights of a Child in Care CIC Service Standard #6	60%		40%	
	Number of cases rated: 5 of 5	3		2	
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: 5 of 5	5			
6	Maintaining Personal Contact with a Child in Care CIC Service Standard #9	80%		20%	
	Number of cases rated: 5 of 5	4		1	
7	Meeting a Child's Need for Stability and Continuity of Lifelong Relationships CIC Service Standard #10	80%		20%	
	Number of cases rated: 5 of 5	4		1	
8	Assessments and Planning for a Child in Care CIC Service Standard #11	40%	60%		
	Number of cases rated: 5 of 5	2	3		
9	When a Child is Missing or has Run CIC Service Standard #14				
	Number of cases rated: 0 of 5				3
10	Notification of Fatalities, Critical injuries and Serious Incidents C&FS Standard #24	100%			
	Number of cases rated: 2 of 5	2			3
11	Planning for a Child Leaving Care CIC Service Standards #15 and #16	100%			
	Number of cases rated: 1 of 5	1			4
12	Supervisory Approval C&FD Standard on Supervisory Approval	100%			
	Number of cases rated: 5 of 5	5			

Director's Case Practice Audit – Kitimat Child and Family Services - QMC

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

August 16, 2006

Mark Sieben
Assistant Deputy Minister
Policy and Legislation Team

Director
Child, Family and Community Services Act