

**ABORIGINAL CASE PRACTICE AUDIT REPORT – C4 GUARDIANSHIP**

**Vancouver Aboriginal Child & Family Services Society (IRB/IRC/IRD/IRE)**

Field Work Completed: July 11, 2007

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# **ABORIGINAL CASE PRACTICE AUDIT REPORT – C4 GUARDIANSHIP**

## **Vancouver Aboriginal Child and Family Services Society (IRB/IRC/IRD/IRE)**

### **1. PURPOSE**

The purpose of the audit is to improve and support child service, guardianship, and non-protective family service practice. Through a review of a sample of cases, the audit is expected to provide a baseline measure of the current level of practice, confirm good practice, and identify areas where practice requires strengthening. This is the second practice audit of the agency.

The specific purposes of the audit are:

- to confirm good practice and further the development of practice;
- to assess and evaluate practice in relation to existing legislation and the Aboriginal Operational and Practice Standards and Indicators (AOPSI);
- to determine the current level of practice across a sample of cases;
- to identify barriers to providing an adequate level of service;
- to assist in identifying training needs;
- to provide information for use in updating and/or amending practice standards or policy.

The audit is being conducted using the Aboriginal Case Practice Audit Tool. Audits of delegated agencies providing child protection, guardianship, non protective family services and resources for children in care will be conducted according to a three year cycle.

### **2. METHODOLOGY**

Field work was conducted from June 25, 2007 to June 29, 2007 by two auditors. The week of July 3, 2007 to July 6 2007, one auditor was present at the agency. On July 11, 2007 additional staff interviews were conducted by one auditor. The computerized Aboriginal Case Practice Audit Tool (ACPAT) was used to collect the data and generate office summary compliance reports and a compliance report for each file audited.

In all, sixty-one child service files and twenty-five resource files were audited. These numbers represent twenty percent of the open 307 child service files and 127 resource files for the agency. Twenty-four files were audited from guardianship team IRB representing the 122 open files, while thirty-seven files from the open 186 files from guardianship team IRC were audited. Cases were selected randomly but included files from each member of the team. All volumes of the selected physical files were reviewed as well as the electronic records available on the Management Information System (MIS) where required.

The auditors met initially with the three child service supervisors, the guardianship and child service managers and the office manager to review the audit purpose and process. The auditors

then met with the guardianship and resource teams to review the audit purpose and process and to answer any questions the staff may have. During the audit agency staff including managers, supervisors and administrative were interviewed with respect to office systems, service delivery structure, and community resources. At the conclusion of the audit, the auditors met with the managers, supervisors and staff to provide an overview of the results, including identified themes and patterns. The supervisors will be provided with the compliance report of each file that had been audited along with the audit report.

### **3. AGENCY OVERVIEW**

#### **a) Delegation**

Vancouver Aboriginal Child and Family Services Society, or "VACFSS" is currently delegated at C4 Guardianship. This level of delegation enables VACFSS to provide the following services:

- Guardianship of children in continuing custody;
- Support services to families;
- Voluntary care agreements;
- Special needs agreements
- Establishing and working with residential resources

Guardianship services under C4 may also include working with a social worker delegated by the Director of Adoption on registering a child for adoption.

#### **b) History**

Vancouver Aboriginal Child and Family Services Society, VACFSS, had its beginnings in June 1988 as an agency which provided aboriginal support programs for urban families in the area. Four years later in 1992, the agency officially changed its name from Mamele Benevolent Society to become Vancouver Aboriginal Child and Family Services Society (VACFSS) as it is now known. The agency continued to provide a variety of family support programs to those families who were at risk of becoming involved or who were involved with the child protection system in the Vancouver area. The agency also provided cultural support and awareness to children in care and to the caregivers that looked after these children.

In 1996, VACFSS was selected under the *Child, Family and Community Service Act (CFCSA) Regulations, Aboriginal Schedule 2: Community Designate* as the agency which would receive notices of aboriginal children who had been removed from their families in the Vancouver region. This designation enabled VACFSS to receive notices from the Ministry of Children and Family Development (MCFD), of a child being placed into care.

Over the next several years, a MCFD aboriginal service team was developed in order to better serve the aboriginal community in the Lower Mainland. This team was assigned to work on files where the children were in continuing custody care. With the aboriginal guardianship team in

place, talks began between the Ministry and VACFSS to enable the agency to provide delegated services under a Delegation Enabling Agreement (DEA). In late 2001, a DEA was signed enabling VACFSS to provide services to the communities of Vancouver and Richmond.

### **c) Demographics**

VACFSS is one of only three agencies in the province that serve an urban population. VACFSS provides services to the urban aboriginal population of not only the greater Vancouver area, but also serve aboriginal children and families located throughout the lower mainland. Services are not provided to those individuals who are served by delegated aboriginal agencies within the same geographic area. In the Fraser Valley, aboriginal people make up 5% of the total population while in Greater Vancouver, 2% of the total population is aboriginal (BC Stats, Summer 2004).

The aboriginal population of greater Vancouver area is made up of many diverse aboriginal cultural groups from across Canada and the province of British Columbia. The diversity of aboriginal people served by VACFSS contributes to the complexity of the cases the agency deals with as many of the children the agency serves have very high social, behavioural and health needs. These individuals have come to an urban area for a variety of reasons including, but not limited to, family of origin issues, drug and alcohol abuse, and family violence.

Often these children have little family or extended family supports close to them. Many of these families have moved from rural communities, leaving no extended family available to care for the children once they have been placed in care. They are often diagnosed with developmental disabilities due to neo-natal drug and alcohol exposure. Many of these children have learning difficulties and developmental delays requiring supports such as speech therapy and physiotherapy. These children also suffer from health issues such as AIDS and Hepatitis C. This group of children is often struggling with severe addiction issues and the high risk behaviours which are often associated with drug and alcohol abuse. For many of these children, ongoing long-term professional supports will be required to ensure that they are able to appropriately function at school and in the community.

### **d) Professional Staff Complement**

VACFSS currently has two office locations. The head office and non-delegated services are delivered through their office on Clark Drive, while the delegated services are delivered out of the office located on East Broadway. The delegated services are the focus for this practice audit. Delivery of the delegated services is done by one resource team and two guardianship teams. At the time of the audit, the agency was in the process of developing a third guardianship team. For each guardianship and resource team there is one supervisor and there is a guardianship and resources manager who oversee their respective teams.

Each guardianship team consists of one supervisor and a social work staff of 4 and 5 (two teams of 4 social workers and one team of five social workers). The resources team consists of one supervisor and eight social work staff. There is also an office manager and four administrative support staff. There are currently a total of 14 guardianship social workers and 8 resource

workers at VACFSS. All social workers have a variety of child welfare experience and education. The staff is approximately 75% aboriginal and only two staff on the guardianship team do not have a university degree.

As mentioned earlier, the agency is in the process of developing a third guardianship team, IRE. At the time of the audit, the guardianship team IRE had not been developed on the MIS system. Social work staff, including a supervisor, had been transferred to the team, but files were yet to be electronically transferred. This is in an effort to create smaller caseloads for all staff and to adjust to the growing number of cases open to the agency. Most of these positions have come from the existing staff compliment with only one worker being a new hire to the agency. In addition, IRE is inheriting most of their cases from the IRB guardianship team who has often struggled with staff shortages. A social worker vacancy remains on the team when once filled, would bring the social work compliment on the team to a total of five and the total number of guardianship workers to 14.

Since the last practice audit of the agency, hiring and retaining staff continues to be a challenge. At this time, the agency appears to be stabilizing with only one vacancy on guardianship team IRE. Guardianship team IRB has four new staff on their team, while IRC appears to be the most stable of the guardianship teams. Staffing on the resource team has been fairly stable over the years. The resource team (IRD) was short staffed one position for approximately eight months in 2005-2006 and again for one month in 2007. The administrative support team has also struggled in maintaining stable staff as the team is currently made up of temporary and casual staff.

Although the staffing levels have now begun to stabilize, there was a period of approximately a year in 2005 when the agency was very short staffed. In several instances, workers were covering additional caseloads due to a lack of staffing. The clinical supervisors for team IRE and IRB were assigned their new duties, but no additional staff were available at that time to cover their previous caseloads. Where workers were not able to take on an additional caseload, these caseloads would be left unattended until a new worker was assigned. These unattended caseloads were dealt with by the duty worker on an as needed basis.

During the time of the audit, the average caseload for guardianship team IRB was 24 cases per staff member and IRC was 23. With the development of the IRE guardianship team the average number of cases for all staff should be approximately 20. The average caseload for the resources team is 16 cases per worker. The caseload with the lowest files was 4, while the highest caseload was at 22 files.

#### **4. STRENGTHS OF AGENCY**

The auditors identified several strengths of the agency and of the agency's practice over the course of the audit.

Although many of the children in the care of VACFSS are not from the local area, all efforts are made by staff to ensure that children receive culturally appropriate information regarding their specific aboriginal heritage. Staff regularly asks for information from the child's home community to pass along to the child. Efforts have also been made to have children visit their home communities wherever possible. They also search for information on family members that might be shared with the child. Where suitable, family is involved in the child's life, even though that child may be in continuing custody.

The audit showed that most children in care were placed in long-term placements. For many of these children, they had been in the same foster home since they were born. Foster parents caring for these children often committed to providing a long-term placement for the child. While it is sometimes necessary to move a child from his or her placement, agency staff appear to understand how important it is for a good fit to be present between the child and the caregiver. VACFSS staff takes the time to search for the caregiver with the skills and personality, which will work well with the needs of the child who is being placed.

The staff at VACFSS is committed to the work that they do and feel supported by their managers, supervisors and each other. Staff feel respected by each other and the style in which they do their work. Staff feel that they are able to advocate for the children that they work with and that they are allowed to do the work in different ways. There is a strong sense that the agency is a "community" to the children and families that they work with.

All individuals felt that they had very good working relationships with the local Ministry of Children and Family Development teams. When issues do arise, matters have been addressed respectfully. The agency also appears to have good working relationships with other agencies in the community. Staff is committed to the agency and makes the effort to ensure that the agency is represented well within the community.

The audit results also show that the agency does a very good job in following certain standards including preparing youth for independence, interviewing children about their placements, determining the needs of children in care, providing medical/dental care and following up when a child is missing or lost or has runaway.

## **5. CHALLENGES FACING AGENCY**

One of the biggest challenges facing the agency at this time is the lack of consistent social work staff. During the last three years, there have been a number of vacancies which has lead to the agency being very short staffed. This in turn has affected the outcome of the audit as a number of files did not have an assigned worker for part of the scope of the audit. Information was often missing from these files. In conjunction with this, when the agency has hired staff, ensuring that staff receives the required training in a timely manner has also been an issue. When new staff is hired, they are not always able to attend the training quickly enough, and therefore cannot perform the required delegated duties.

Ensuring that there are an adequate number of good caregivers available to children is a concern. While the agency attempts to make the best possible placements for children in care, some staff feel that there is a lack of good caregivers to choose from. At times, there have also been differing opinions ..... as to the best placement for a child in care. Efforts need to be made to deal with those differences of opinion to ensure that the best options for the child are pursued.

There is a high degree of complexity in the cases that the agency works with. Although Vancouver is a large centre, the types of resources and services that are required to meet the needs of these children is not always available. Many of the children the agency works with have multiple diagnoses and require coordinated services.

## **6. IDENTIFIED AREAS FOR IMPROVEMENT**

The area which is requiring improvement is the need to ensure that plans of care are updated in a timely manner. While most files now had up to date plans of care, there were periods of time where a plan of care was not complete. Plans of care could also be used to improve upon other areas of low compliance. The plan of care could be used to document when the rights of children in care were last reviewed with the child, when the social worker had contact with the child in care and it can also be used to document when the child and the caregiver have been informed of appropriate discipline standards.

It should be recognized that while there were areas requiring improvement, the agency has made considerable efforts over the last year and a half to get all files up to date. As staffing levels for the guardianship teams have stabilized, so has documentation on most child service files. Although many child service files are currently up to date, the auditors were unable to provide the agency with full compliance ratings due to the gap in service which occurred during the three year scope of the audit.

The application and homestudy process is an additional area which could use improvement. While most of the homestudies have been conducted by MCFD, the agency still needs to ensure that all aspects of the application and homestudy process is complete. For example, the written homestudy could not be located on one file. It is important that the agency confirm that all aspects of the application and homestudy is complete and placed on file. If any components of these processes are outstanding, the agency needs to ensure that these pieces are addressed.

## **7. COMPLIANCE TO CHILD SERVICE PRACTICE**

**Sixty-one (61)** child service files were audited. Overall compliance to the child service standards was **57%**. This is the same overall compliance rating as was previously reported in 2004. Although there were three teams (IRB, IRC and IRE) operational at the time of the audit, the office code IRE was not yet functional in MIS and therefore, the files assigned to office code IRE had not yet been electronically transferred. Guardianship team IRB had a total of twenty-four (24) child service files audited. Compliance for IRB to the child service standards was

51%. Team IRB includes cases that have been re-assigned to guardianship team IRE. Thirty-seven (37) child service files were audited for guardianship team IRC. Compliance to the child service standards for IRC was 61%. Since 2004, the compliance rating for IRC has not changed, but the compliance rating for IRB has decreased by 12%.

The files were audited for compliance to the Aboriginal Operational and Practice Standards and Indicators, C4 Guardianship including, but not limited to:

- the quality and adequacy of the plan of care;
- the frequency and adequacy of the care plan review;
- the level of contact with the child;
- placement stability and deciding when and where to move a child;
- the degree of stability and continuity provided to the child while in care;
- the rights of children in care;
- the process of file transfer and closure, where applicable.

The following provides a breakdown of the overall compliance ratings:

1. **Standard 14: Assessment of Risk Prior to a Returning a Child in Continuing Care to his/her Home** (AOPSI Standard 14) – no files applicable.
2. **Standard 15: Assessment of Risk when a Continuing Custody Order is to be cancelled** (AOPSI Standard 15) – no files applicable.
3. **Standard 16: Permanency Planning** (AOPSI Standard 16) – no files applicable.
4. **Standard 17: Preparation for Independence** (AOPSI Standard 17) – 18 files (100%) compliant; 43 files not applicable.
5. **Standard 35: Interviewing the Child about his/her Care Experience** (AOPSI Standard 19) – 11 files (92%) compliant; 1 file (8%) non-compliant; 48 files not applicable.
6. **Standard 19: Case Closure for Children in Continuing Custody** (AOPSI Standard 20) – no files applicable.
7. **Standard 20: Responsibilities to the Public Trustee** (AOPSI Standard 22) – 21 files (91%) compliant; 2 files (9%) non-compliant; 38 files not applicable.
8. **Standard 23: The Rights of Children in Care** (AOPSI Standard 23 Level 12) – 11 files (20%) compliant; 43 files (80%) non-compliant; 7 files not applicable.
9. **Standard 24: Process for Determining the Needs of the Child** (AOPSI Standard 24 Level 12) – 60 files (100%) compliant; 1 file not applicable.

10. **Standard 25: Biographical Information and Family History (AOPSI Standard 26 Level 12)** – 61 files (100%) compliant.
11. **Standard 26: Development of the Comprehensive Plan of Care (AOPSI Standard 3)** – 1 file (33%) compliant; 2 files (67%) non-compliant; 56 files not applicable.
12. **Standard 27: Monitoring of the Child's Plan of Care (AOPSI Standard 5)** – 9 files (16%) compliant; 3 files (5%) non-compliant with factors; 43 files (78%) non-compliant; 6 files not applicable.
13. **Standard 28: Informing the Child and Caregiver about Appropriate Discipline Standards (AOPSI Standard 9)** – 7 files (13%) compliant; 49 files (88%) non-compliant; 5 files not applicable.
14. **Standard 29: Deciding Where to Place a Child (AOPSI Standard 10)** – 11 files (92%) compliant; 1 file (8%) non-compliant; 49 files not applicable.
15. **Standard 30: Deciding to Move the Child in Care (AOPSI Standard 12)** – 10 files (83%) compliant; 2 files (17%) non-compliant; 49 files not applicable.
16. **Standard 31: Planning a Move for a Child (AOPSI Standard 13)** – 9 files (75%) compliant; 3 files (25%) non-compliant; 49 files not applicable.
17. **Standard 32: Reportable Circumstances (AOPSI Standard 18)** – 5 files (83%) compliant; 1 file (17%) non-compliant; 55 files not applicable.
18. **Standard 33: When a Child or Youth is Missing, Lost or Runaway (AOPSI Standard 7)** – 10 files (100%) compliant; 51 files not applicable.
19. **Standard 34: Providing Initial and Ongoing Medical and Dental Care for a Child in Care (AOPSI Standard 36 Level 12)** – 56 files (93%) compliant; 4 files (7%) non-compliant; 1 file not applicable.
20. **Standard 35: The Social Worker's Relationship and Contact with a Child in Care (AOPSI Standard 6)** – 9 files (15%) compliant; 51 files (85%) non-compliant; 1 file not applicable.
21. **Standard 36: Case Transfer (AOPSI Standard 39 Level 12)** - 18 files (100%) compliant; 43 files not applicable.
22. **Standard 37: File Closure (AOPSI Standard 20)** – no files applicable.
23. **Standard 39: Recording and Documentation of Children in Care Files (AOPSI Standard 21)** – 10 files (16%) compliant; 51 files (84%) non-compliant.

**24. Standard 21: Investigating Allegations of Abuse or neglect of Child in Care in Family Care Homes (AOPSI Standard 20 Level 12) – 3 files (60%) compliant; 2 files (40%) non-compliant; 56 files not applicable.**

**25. Standard 22: Quality of Care Review of a Family Care Home (AOPSI Standard 21 Level 12) – 2 files (50%) compliant; 2 files (50%) non-compliant; 57 files not applicable.**

## **8. COMPLIANCE TO RESOURCE PRACTICE**

**Twenty-five (25)** resource files were audited. Overall compliance to the resource standards was **81%**. The files were audited for compliance to the Aboriginal Operational and Practice Standards and Indicators, C4 Guardianship resources including, but not limited to:

- Application and orientation of caregiver
- Homestudy of caregiver
- Training of caregiver
- Signed Agreement with caregiver
- Providing caregiver with written information regarding child
- Monitoring and reviewing homes.

The following provides a breakdown of the compliance ratings:

- 1. Standard 14: Application and orientation (AOPSI Standard 14 Level 12) – 4 files (67%) compliant; 2 files (33%) non-compliant; 19 files not applicable.**
- 2. Standard 15: Homestudy (AOPSI Standard 15 Level 12) - 2 files (29%) compliant; 5 files (71%) non-compliant; 18 files not applicable.**
- 3. Standard 16: Training of caregivers (AOPSI Standard 16 Level 12) -20 files (80%) compliant; 3 (13%) non-compliant; 2 files not applicable.**
- 4. Standard 17: Signed agreement with caregivers (AOPSI Standard 17 Level 12) – 25 files (100%) compliant.**
- 5. Standard 18: Providing information on the child (AOPSI Standard 18 Level 12) - 11 files (79%) compliant; 3 files (21%) non-compliant, 11 files not applicable.**
- 6. Standard 19: Monitoring and reviewing homes (AOPSI Standard 19 Level 12) -18 files (75%) compliant; 6 files (25%) non-compliant; 1 file not applicable.**
- 7. Standard 20: Investigating allegations of abuse or neglect of children in care in family care homes (AOPSI Standard 20 Level 12) – 2 files (67%) compliant; 1 file (33%) non-compliant; 22 files applicable.**



## **b) Resources Team**

Present:                   Resources Manager, VACFSS  
                                Clinical Supervisor, VACFSS  
                                Clinical Supervisor, VACFSS  
Ray Bronson, Deputy Director, Aboriginal Regional Support Services  
Denise Connell, Auditor, Aboriginal Regional Support Services  
Shannon Daniel, Practice Analyst, Aboriginal Regional Support Services

Date:       January 11, 2008

The following recommendations were developed in consultation with VACFSS and MCFD Aboriginal Regional Support Services Team. The timeframe for completion of the recommendations is three months.

*The Resources Management Team of Vancouver Aboriginal Child and Family Services Society will:*

- Review all resource files to ensure that the appropriate documentation as it applies to the application and home study processes are located on the file. Where documentation is missing, the management team will devise a plan to ensure that the required documentation is gathered and placed on file.
- Review the file transfer protocol with the Ministry of Children and Family Development to ensure required file documentation is completed by MCFD prior to transfer to the agency.

**APPENDIX I: AGENCY AUDIT COMPLIANCE REPORTS**

## **APPENDIX II: COMPLIANCE COMPARISON REPORT**