

CASE PRACTICE AUDIT REPORT
USMA NUU-CHAH-NULTH COMMUNITY & HUMAN SERVICES
(IKA)

Fieldwork completed between April 16 and May 31, 2012
Audit completed by Aboriginal Programs and Service Support, Ministry of Children and Family Development

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DIRECTOR OF DELEGATED AGENCIES PRACTICE AUDIT REPORT

USMA NUU-CHAH-NULTH COMMUNITY & HUMAN SERVICES (IKA)

1. PURPOSE

The purpose of the audit is to support and improve child service, guardianship and 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. The previous practice audit for the Agency was completed in 2008.

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.

Aboriginal Programs and Service Support (APSS) conducted the audit using the Aboriginal Case Practice Audit Tool (ACPAT). Audits of delegated Aboriginal agencies providing child protection, guardianship, family services, and resources for children in care are conducted according to a three-year cycle.

2. METHODOLOGY

One auditor conducted fieldwork from April 16 to May 31, 2012.

The computerized Aboriginal Case Practice Audit Tool (ACPAT) was used to collect the data and generate office summary compliance reports and an individual compliance report for each file audited. A sample size of 20% was obtained. In all, 88 files were audited; 19 investigations, 30 child service files (inclusive of both temporary custody files and continuing custody files), 28 family service files, and 11 resource files. The child service, family service and resources files audited were selected from open files. The investigation files audited were chosen from files that had been closed in the last 6 months. Cases were selected to ensure that a cross representation of files from each team member was reviewed.

Upon arrival at the agency, the auditor met with the Executive Director and available staff to review the audit purpose and process. The auditor was available to answer any questions from staff that arose during the audit process. Staff members were invited to meet with the auditor to discuss office systems and procedures. This auditor met with 11 staff members during the course of the audit. At the completion of the audit, a telephone conference meeting occurred involving the Executive Director and the team leaders of the programs audited and this auditor to discuss

the preliminary findings of the audit and the next steps of the audit process including the report and recommendations.

3. AGENCY OVERVIEW

a) Delegation

The agency (USMA) was granted voluntary service (C3) delegation in 1987 and obtained Child Protection delegation in 1989. It was the first Aboriginal agency in BC to obtain child protection (C6) delegation. Currently, the agency has an existing Delegation Confirmation Agreement (DCA) that expires in March 2013. This level of delegation enables the delegated agency to provide the following services:

- Child Protection;
- Temporary custody of children;
- Guardianship of children in continuing custody;
- Support services to families;
- Voluntary care agreements;
- Special needs agreements; and
- Establishing Residential Resources.

b) Demographics

USMA provides the services described above to the following 14 communities: Ahousaht, Ditidaht, Ehattesaht, Hesquiaht, Huu-ay-aht, Kay, a:'yu: k't'h'/Che: K:tles7et'h, Mowachaht/Muchalaht, Hupacasath, Nuchatlaht, Tla-o-qui-aht, Toquaht, Tseshah, Uchucklesaht, and Ucluelet. These communities are located in the western part of Vancouver Island, extending from Port Renfrew to the south, to Kyuquot to the north. The agency is located in Port Alberni. Two of the communities are in the Port Alberni area; the others are a significant distance away with at least 6 communities often only accessible by air or water transport. These 14 communities combined have a population of approximately 9176. In 2005, the agency began providing off reserve guardianship services to Nuu-chah-nulth children and families in Port Alberni, Sproat Lake, Beaver Creek, and Cherry Creek. As of June 2011 USMA also provides off reserve C6 services to Nuu-chah-nulth children in the above noted areas.

In addition to the delegated services provided by the agency, the Nuu-Chah-Nulth Tribal Council (NTC) has hired nurses, infant development workers, mental health workers and prevention workers who provide services to all the communities. Each community also receives funds to hire their own support staff and all of the communities have hired their own family care workers and youth workers. Many of the communities also utilize services offered in the larger communities. These services include friendship centers, women's resource centers, mental health, drug/alcohol counseling. Community members also participate in educational, recreational and cultural events in the larger community. The RCMP also provides services to the communities.

c) Professional Staff Complement

USMA is made up of three delegated teams with a casework supervisor for each team. There is a child safety team, a resources team, and a guardianship team. There is one Executive Director who oversees the operations of the agency. The resources and guardianship teams are under one team leader.

The child safety team is responsible for assessing intakes, investigating all reports of alleged abuse and neglect and conducting the case management of all family services and related child in care files. The team currently consists of one case supervisor and 11 social workers including two workers on leave during the time of the audit. Included within this staff complement are three term social workers brought in to cover for the social workers on leave and assist with the transfer of off reserve services from MCFD in the last year. At the time of the audit, USMA was in the process of implementing a plan to split the child safety team into one off reserve team and one on reserve team. This would address workload issues arising from one case supervisor supervising all 11 workers.

The guardianship team is responsible for the supervision of all children in continuing custody, and consists of one supervisor and four social workers and one youth outreach worker.

The resources team is responsible for the recruitment, training and support of all USMA resource homes and is made up of one supervisor/social worker and two social workers.

In addition to delegated workers, USMA has a youth outreach worker assigned to the guardianship team as well as an administrative team. On this team there is a supervisor, two case aids assigned to each of the delegated teams, one full time receptionist as well as two casual employees for coverage as required.

All of the delegated staff have completed the Aboriginal Social Work Delegation training. Of those delegated staff with conduct and/or supervision of files at the time of the audit, all have the appropriate level of delegation required for their job duties. Additionally, the Executive Director has C6 delegation.

d) Supervision and Consultation

As noted above, each delegated team has a case supervisor. The supervision for these supervisors is provided by the Executive Director.

- **Child Safety Team:** supervision for team members is not scheduled, rather is accessed through an open door policy. Reportedly, however, it is difficult, at times, to meet with the supervisor, in part due to the demands of supervising such a large team. As noted earlier, there is a plan underway to develop two teams within the existing one with an on reserve team as well as one that serves off reserve families. Each of these teams would have its own case supervisor.

The team has recently begun having team meetings on a weekly/bi-weekly basis to discuss case issues.

- Guardianship Team: supervision for this team is also accessed via an open door policy and, by all accounts works well. The case supervisor, until recently, also provided supervision for the resources team and continues to provide supervision to the resource supervisor, who is in a senior caseworker supervisory position. In addition to individual consultation, the team has bi-weekly meetings.
- Resources Team: supervision for this team is likewise provided primarily through an open door policy and members participate in weekly meetings.

4. STRENGTHS OF THE AGENCY

It is evident that the staff at USMA is very committed to the work that they do with the families and children that they serve. The teams practice in a collaborative manner and there is a strong commitment to open and regular dialogue, whether it be regarding sharing of case related information amongst or across the teams or assisting one another when required. Staff interviewed described this as a very positive attribute to working at the agency and indicate that this has contributed greatly to a very positive working environment.

- Staff Commitment – many of the staff have been at the agency for a number of years and all members of the teams are extremely committed to the children and families they are working with. This was evident when speaking with them throughout the interview process. Many of the staff are willing to help in areas that are outside of their own responsibilities and look out for each other. Team building is an important aspect and contributes greatly to the functioning of the teams.
- Knowledge of Community - agency staff are committed to serving their clients and the community using their knowledge of the culture and traditions of the Nuu-Chah-Nulth people. They recognize the strengths and challenges facing the community. They attempt to work with the community's strengths and support the community in the challenges they face. The teams have the benefit of some workers who are members of the communities served by the agency and have knowledge of the history and culture of the Nation. Extended family remains involved in the child's life and often in the planning for the child, even though that child may be in continuing custody. The agency is also very supportive in maintaining contact between the child and his/her family members. Supervised visits, access to extended family, and placements with family are the methods most often utilized to preserve contact.
- USMA utilizes the Family Care Workers that work for the bands in each of the communities in order to ensure that families are doing well. This is a crucial piece of the work due to the distance and remoteness of many of the communities served.

5. CHALLENGES FACING THE AGENCY

The agency has faced significant challenges regarding staffing leading to workload issues and difficulty in ensuring that work is completed in a timely manner. Compliance has decreased significantly in two of the three program areas. The transfer of off reserve files from MCFD has had a major impact on the ongoing delegated work, and the agency concedes that they were not

prepared for these transfers. Interviews with staff, as well as a review of the files have revealed the following challenges:

- Transfer of off reserve files – as noted above the transfer of files in June 2011 appears to have had a significant impact on staff and their ability to meet the requirements of their caseloads. It has been reported that the influx of casework has doubled workloads in some cases. According to the agency, adequate resources did not accompany the transfer of the additional files.
- Supervision – there are reportedly instances when it is difficult to access a supervisor for case consultation.
- Staff Coverage – there are often times when only one worker from each team is available to respond to issues that arise.
- Division of Cases – staff report that structurally the agency has had some difficulty distributing the caseload equitably among workers. For this reason, staff indicate that the consistency in working with children and families is compromised.
- New Information System Implementation – the recent launch of the new ICM system has proven to be very problematic for staff. They report that it is a much more onerous system and that the training provided in the transition to the new system has been lacking.
- Workload – staff report that although their workloads have decreased since the fall of 2011, it still remains an issue with some caseloads as high as 40 files.
- Geographical Area Covered – the agency serves a very large area with some communities accessible only by boat or plane. This creates difficulty, at times, in maintaining regular in-person contact with clients and in recruiting and studying foster homes.

6. DISCUSSION OF THE PROGRAMS AUDITED

The audit reflects the work done by the delegated staff of the Agency over the past three years.

a) Intakes

As previously stated, 19 closed intakes were audited. This was problematic as, in many instances, it was difficult to ascertain which intakes were completed due to the difficulty the agency has encountered in entering information into the new ICM system. This program area is also experiencing challenges with excessive workloads, affecting both the social workers and the supervisor. Positive aspects were found in the investigations including: appropriately receiving reports of suspected abuse and neglect, assessing immediate risk and emergency response, deciding whether to investigate, determining the investigation response time, informing the police, and the social worker's knowledge of existing interagency protocols in the communities.

Many of the files audited shared the following concerns: missing case documentation, exceeding the time limit for investigations, neglecting to report the investigation results (particularly to the reporter), providing family support services, and documenting an initial plan of investigation. In particular, the investigations appear to indicate significant challenges in the follow through with the investigation plan after the initial assessment and response has been conducted.

b) Child Service files

As stated earlier, 30 out of 150 open child service files were audited showed a marked decrease in compliance from the 2008 audit findings. In the majority of cases, documentation missing from the files included: the social worker's relationship and contact with the child, monitoring and reviewing the child's comprehensive plan of care, discussing the rights of children in care with the child and caregiver and providing the caregiver with information on the child and reviewing appropriate discipline standards.

A number of positive aspects found in the files included: documented efforts to preserve the Aboriginal identity and providing culturally appropriate services, documenting supervisory approval for guardianship services, involving family and community when deciding where to place a child, meeting the child's needs for stability by ensuring there is continuity in their relationships, planning a move for a child in care, preparation for independence and documentation of the social worker's knowledge of the existing interagency protocols in the communities.

c) Family Service files

As previously stated, 28 of 145 open family service files were audited. The compliance in this program area showed a significant decrease from the 2008 findings. Documentation missing from most of the files included: voluntary support service agreements, case documentation including case recordings and referrals to/reports from service providers, family service plans, and evidence of the involvement of the Aboriginal community.

Positive aspects found in the family service files included: accepting appropriate requests for service within the agency's delegation, and documenting supervisory approval.

d) Resource files

As previously stated, 11 of 54 open resource files were audited. Excellent compliance was found within this program area. The compliance within this program area showed an improvement from the 2008 findings. Many positive aspects were found in the resource files including: documenting supervisory approval, training offered to and taken by caregivers, signed agreements with caregivers, and monitoring and reviewing the family home.

In two of the files, documentation regarding home studies were missing, and in three, some of the information required with the application package was missing.

7. COMPLIANCE TO PROGRAMS AUDITED

a) Compliance to Child Protection Investigations

19 closed intakes were audited. The overall compliance was **63%**.

The files were audited for compliance to the Aboriginal Operational and Practice Standards and Indicators, C6 Child Protection including, but not limited to:

- Supervisory consultation regarding child protection;
- Prior contact check and registration;
- Assessment and emergency response;
- Deciding whether to investigate and determining the response time;
- Initial plan and steps in investigation;
- Recording and reporting the investigation results;
- Time limits for investigations to be completed; and
- Developing risk and assessment and risk reduction plans.

The following provides a breakdown of the compliance ratings:

AOPSI Standards	Compliant	Non compliant with Factors	Non compliant	Not Applicable
Standard 1 Receiving Reports of Suspected Child Abuse and Neglect	18 95%	0	1	0
Standard 2 Prior Contact Check and Registration	14 74%	0	5	0
Standard 3 Immediate Risk and Emergency Response	10 100%	0	0	9
Standard 4 Assessing the Child Protection Report	14 74%	0	5	0
Standard 5 Kinship Care				19
Standard 6 Family Support Services	2 40%		3	14
Standard 7 Voluntary Care and Special Care Agreements				19
Standard 8 Cooperative Planning and Dispute Resolution			1	18
Standard 9 Less Disruption Measures	7 78%		2	10

AOPSI Standards	Compliant	Non compliant with Factors	Non compliant	Not Applicable
Standard 10 Deciding Whether to Investigate	18 95%	0	1	
Standard 11 Determining the Investigation Response Time	11 79%		3	5
Standard 12 Supervisory Approval Required for Child Protection Services	11 61%		7	1
Standard 13 Initial Plan of Investigation	5 38%		8	6
Standard 14 Informing the Police	6 86%		1	12
Standard 15 Steps in the Investigation	3 23%	1	9	6
Standard 16 Developing and Implementing a Child Safety Plan	7 70%		3	9
Standard 17 Child Protection Agency Protocols	13 81%		3	3
Standard 18 Seeing and Interviewing the Child	6 50%		6	7
Standard 19 Arranging a Medical Examination of a Child	2 29%		5	12
Standard 20 Seeing and Interviewing the Parent	5 38%	1	7	6
Standard 21 Deciding Whether or Not the Child Needs Protection	9 69%		4	6
Standard 22 Action Taken When the Parent or Child Cannot be Located	2 100%			17

AOPSI Standards	Compliant	Non compliant with Factors	Non compliant	Not Applicable
Standard 23 Reporting the Investigation Results	3 25%		9	7
Standard 24 Time Limit for Investigations	5 38%		8	6
Standard 25 Deciding Where to Place a Child	4 50%		4	11
Standard 26 Take Charge				19
Standard 27 Supervision Orders	5 100%			14
Standard 28 Where a Child or Family is Missing				19
Standard 29 Reportable Circumstances				19
Standard 30 Case Documentation	5 36%		9	5
Standard 31 Transferring Protective Family Service files			3 100%	
Standard 32 Transferring Children in Care Files				
Standard 33 Closing Protective Family Service			1 100%	
Standard 34 Investigating Allegations of Abuse or Neglect in Family Care Homes				
Standard 35 Quality of Care Review			1 100%	

b) Compliance to Child Service Practice

The files were audited for compliance to the Aboriginal Operational and Practice Standards and Indicators, C4 Guardianship child service including:

- 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;
- Informing the child and caregiver of the rights of children in care;
- Informing the child and caregiver of appropriate discipline policy; and,
- The level of file documentation.

Thirty (30) open child service files were audited. The overall compliance was **60%**.

The following provides a breakdown of the compliance ratings:

AOPSI Standards	Compliant	Non compliant with Factors	Non compliant	Not Applicable
Standard 1 Preserving the Identity of the Child in Care	22 81%	1	4	3
Standard 2 Development of a Comprehensive Plan of Care	6 75%		2	22
Standard 3 Monitoring and Reviewing the Child's Comprehensive Plan of Care	5 23%		17	8
Standard 4 Supervisory Approval Required for Guardianship Services	21 70%		9	
Standard 5 Rights of Children in Care	21 75%		7	2
Standard 6 Deciding Where to Place the Child	23 96%		1	6
Standard 7 Meeting the Child's Needs for Stability and Continuity of Relationships	24 80%		6	
Standard 8 Social Worker's Relationship and Contact with a Child in Care	1 3%	1	28	

AOPSI Standards	Compliant	Non compliant with Factors	Non compliant	Not Applicable
Standard 9 Providing the Caregiver with Information and Reviewing Appropriate Discipline Standards	9 31%		20	1
Standard 10 Providing Initial and Ongoing Medical and Dental Care for a Child in Care	23 79%	1	5	1
Standard 11 Planning a Move for a Child in Care	9 90%		1	20
Standard 12 Reportable Circumstances	1 17%		5	24
Standard 13 When a Child is Missing, Lost or Runaway	3 100%			27
Standard 14 Case Documentation for Child Services	7 23%		23	
Standard 15 Transferring Continuing Care Files	4 31%		9	17
Standard 16 Closing Continuing Care Files	1 100%			29
Standard 17 Rescinding a Continuing Care Order and Returning the Child to the Family Home	1 100%			29
Standard 19 Interviewing the Child About the Care Experience	2 29%		5	23
Standard 20 Preparation for Independence	1 25%	1	2	26
Standard 21 Responsibilities of the Public Guardian and Trustee	16 100%			14
Standard 22 Investigation if Alleged Abuse or Neglect in a Family Care Home	3 75%		1	26

AOPSI Standards	Compliant	Non compliant with Factors	Non compliant	Not Applicable
Standard 23 Quality of Care Review	2 100%			28
Standard 24 Guardianship Agency Protocols	24 83%		5	1

c) Compliance to Family Service Practice

The files were audited for compliance to the Aboriginal Operational and Practice Standards and Indicators, C4 Guardianship family service including:

- Information and referral for service;
- Supervisors approval regarding voluntary service;
- Family Service Plan and components for support;
- Review of Family Service Plan;
- Support Service Agreements with families;
- Voluntary and Special Needs Agreements; and,
- File Documentation.

Twenty-eight (28) open family service files were audited. The overall compliance was 49%.

The following provides a breakdown of the compliance ratings:

AOPSI Standards	Compliant	Non compliant with Factors	Non compliant	Not Applicable
Standard 1 Receiving requests for Service	21 88%		3	5
Standard 2 Supervisory Approval Required for Voluntary Services	21 75%		7	1
Standard 3 Information and Referral for Voluntary Services	11 52%		10	8
Standard 4 Involving the Aboriginal Community in the Provision of Services	14 54%		12	3

AOPSI Standards	Compliant	Non compliant with Factors	Non compliant	Not Applicable
Standard 5 Family Service Plan Requirements for Support Services, Voluntary Care, and Special Needs Agreements	6 26%		17	6
Standard 6 Voluntary Support Service Agreements	1 5%	1	19	7
Standard 7 Voluntary Care Agreements			1 100%	28
Standard 8 Special Needs Agreements				28
Standard 9 Case Documentation for Voluntary Service Files	5 21%	1	18	5
Standard 24 Transferring Voluntary Family Service Files	9 60%		6	14
Standard 26 Closing Voluntary Family Service Files	3 38%		5	21
Standard 27 Voluntary Services (Level 12 Delegation) Protocols	13 57%		10	6

d) Compliance to Resource File Practice

The files were audited for compliance to the Aboriginal Operational and Practice Standards and Indicators, C4 Guardianship resources including:

- Application and orientation of caregiver;
- Home study of caregiver;
- Training of caregiver;
- Signed Agreements with caregiver;
- Providing caregiver with written information regarding child; and,
- Monitoring and reviewing homes.

Eleven (11) open resource files were audited. Overall compliance to the resource standards was **89%**.

The following provides a breakdown of the compliance ratings:

AOPSI Standards	Compliant	Noncompliant with Factors	Non compliant	Not Applicable
Standard 28 Supervisory Approval Required for Family Care Home Services	11 100%			
Standard 29 Family Care Homes – Application and Orientation	7 70%		3	1
Standard 30 Home Study	8 80%		2	1
Standard 31 Training of Caregivers	10 100%			1
Standard 32 Signed Agreement with Caregivers	11 100%			
Standard 33 Monitoring and Reviewing the Family Care Home	9 90%		1	1
Standard 34 Investigation of Alleged Abuse or Neglect in a Family Care Home				11
Standard 35 Quality of Care Review			1	10
Standard 36 Closure of the Family Care Home				11

8. ACTION PLAN

Actions Identified	Person Responsible	Date to be completed
Implement USMA Leadership Development Project	DAA Director/Director of Operations, Nuuchahnulth Tribal Council	Feb 2013 – Dec 2014

Implement annual staff appraisals to support Professional Development	DAA Director /Team Leaders	ongoing
Implement regular clinical supervision for team leads with the agency Director	DAA Director /Team Leaders	April 2013 – ongoing (4 X year)
Retain additional on-site ICM training (Gateway)	DAA Director /Team Leader	March 2013 April 2013
Coordinate a day for ICM in-service skill sharing between all teams	Team Leader/APSS Practice Analyst	April 2013
Implement tracking forms (checklists) FS	Social Worker/Team Leader /Team Assistants/Admin Support Supervisor	May 2013
Create and implement 'Reporter response' letter for all CP investigations	Team Leader	April 2013
Develop and implement tracking system for CP ITK/INV timeframes	Social Worker / Team Leader	May 2013
'Reportables' training	APSS Practice Analyst/DAA Director	May 2013
SDM training/ Chapter 3 policy In service (all C6 staff)	APSS PA /DAA Director / Team Leader/ Social worker (to be supported by APSS as necessary)	May 2013
In-service legal training with contracted legal counsel	Contract legal counsel/ Social Worker/Team Leader	June 2013
Implement a process to track family plans	Social Worker/Team Leader	May 2013
Develop and implement 'placement package' (CIC rights, discipline policy, etc)	Team Leaders	May 2013
Implement CS and RE file checklists	Team Leaders/ Team Assistants	May 2013
Develop and implement internal BF systems for CPOCs and AOPSI Standard 8 (private visits)	Supervisor/Team Leader/ Team Assistants	June 2013
Ensure consistent use of up to date CPOC form	Supervisor/APSS Practice Analysts	April 2013