

**DIRECTOR OF DELEGATED ABORIGINAL AGENCIES CASE  
PRACTICE AUDIT REPORT**

**Scw'exmx Child & Family Services (IEA)**

Fieldwork completed May 28 – 30, 2012  
Audit completed by Aboriginal Programs and Service Support Division, Ministry of Children and Family  
Development

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# **DIRECTOR OF DELEGATED ABORIGINAL AGENCIES CASE PRACTICE AUDIT REPORT**

## **Scw'exmx Child & Family Services (IEA)**

### **1. PURPOSE**

The purpose of the audit is to support and improve child service, guardianship and family service. 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 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. Audits of delegated agencies providing child protection, guardianship, family services and resources for children in care are conducted according to a three-year cycle. This is the fifth audit of Scw'exmx CFSS since 2003.

### **2. METHODOLOGY**

This was a practice audit of the agency. The scope of the practice audit of Scw'exmx Child and Family Services Society (SCFSS) was two years. The audit of the physical files focused on the period of time from May 2010 to May 2012.

This audit of the resource files was conducted to fulfill the recommendation made from the 2010 practice audit to re-audit the resource files by spring 2012. In August 2010, SCFSS underwent a scheduled practice audit of 100% of their open resource and family service files and closed intakes; a typical audit reviews only 30% of the files. The decision to audit at 100% was made in response to serious concerns with the resource and family service practice, in addition to existing concerns related to the agency's storage and management of confidential client information. At the completion of the 2010 audit the resources compliance was 16%; most of the standards were not met and there was very

limited documentation on the files. The resulting recommendation for re-audit was made so that the agency could address the outstanding areas of work.

The practice auditor conducted field work from May 28-30, 2012. The computerized Aboriginal Case Practice Audit Tool (ACPAT) was used to collect the data and generate both office summary compliance reports and an individual compliance report for each file audited. There were a total of 15 open resource files and two recently closed resource files at the time of the audit and 100% of the files were audited.

Upon arrival at the agency, the auditor met with the Executive Director to review the audit purpose and process. At the completion of the audit, the practice auditor met again with the Executive Director to discuss the preliminary findings of the audit. At this meeting, the next steps of the audit process were discussed including the report and the recommendations process.

### **3. AGENCY OVERVIEW**

#### **a) Delegation**

Scw'exmx Child and Family Services is currently delegated at C6 Child Protection. This level of delegation enables the 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.

In 2005, a Delegation Confirmation Agreement was signed enabling the agency to provide services to the five First Nations communities of Coldwater, Lower Nicola, Nooaitch, Shacken and Upper Nicola. In 2010, an extension to this Agreement was signed to March 31, 2011. A further extension of this Agreement was signed to March 31, 2012. A Delegation Modification Agreement is now in effect until March 31, 2013.

#### **b) Demographics**

The communities that SCFSS serves are situated along the creeks of the Nicola Valley; it is for this reason that the elders of these communities named the agency Scw'exmx Child and Family Services Society. Scw'exmx means a gathering of people by the creeks. Four of the five bands served by the agency,

including Shackan Indian Band, Nooaitch Indian Band, Cold Water Indian Band, and Lower Nicola Indian Band, belong to the Nlaka'pamux (Thompson) Nation. Upper Nicola Indian Band, also served by the Agency, belongs to the Syilx (Okanagan) Nation. All of the member bands are located in the Southern Interior of British Columbia.

The population of these communities totals approximately 2990 people (Source: *Registered Indian Population by Sex and Residence, Indian and Northern Affairs Canada 2008*).

## **COMMUNITY PROFILE:**

### **BANDS OF SWC'EXMX CHILD AND FAMILY SERVICES SOCIETY**

#### **Upper Nicola Indian Band: #697**

- Registered Population - 875

#### **Lower Nicola Indian Band: #695**

- Registered Population - 1080

#### **Cold Water Indian Band: #693**

- Registered Population – 781

#### **Nooaitch Indian Band: #699**

- Registered Population - 201

#### **Shackan Indian Band: #698**

- Registered Population - 122

SCFSS primarily works with the Merritt MCFD office as well as other agencies in the area. The agency is able to utilize the services of Children and Youth Mental Health and Alcohol and Drug services in Merritt. The agency also regularly refers the families to the support services offered by the individual Bands. Services are delivered primarily to those registered children and families on reserve. SCFSS does not provide services to Métis children and families.

### **c) Professional Staff Complement**

At the time of the audit, one resource social worker was off on maternity leave and a second worker had just left the agency. The Executive Director, a contracted social worker, and the two new guardianship social workers were following up on missing documentation/information on the resource files as well as managing the day to day needs and recruitment of existing and new caregivers.

In 2011 SCFSS contracted part time with a retired MCFD social worker to conduct an internal audit of the resource files and to begin addressing some of the identified missing/incomplete work on the files. This experienced social worker also mentored one of the agency's resource workers. The contract for this

social worker concludes at the end of July 2012, at which point the plan will be for the two guardianship workers and the Executive Director to continue to manage the resource work until the resource social worker returns from maternity leave in the fall.

#### **d) Supervision and Consultation**

The Executive Director and the team leader were sharing the resource supervisory responsibilities as the Executive Director has more experience in this program area. The contracted social worker brought many years of resource experience to the agency and this was also of great assistance to the team leader and the Executive Director.

Given that the resource team is so small, the team leader and Executive Director provide “open door” case consultation and supervision for any resource matters.

#### **4. STRATEGIES IMPLEMENTED TO ADDRESS RESOURCE CONCERNS**

SCFSS has made a concerted effort to address the resource practice concerns identified in the 2010 practice audit and their own 2011 internal audit and implemented the following practice improvements:

- The agency contracted with an experienced, retired MCFD social worker who brought a great deal of knowledge and passion for resource work. In providing this experience to the resource team and working with the Executive Director and team leader, the work was prioritized and addressed in a systematic manner which reflected in the documentation on the files.
- In 2012, the agency partnered with the Federation of Aboriginal Foster Parents to locally pilot the pre-service and 53 hour foster parent training. This in-person training was taken by seven agency caregivers and was completed in June 2012. This training was well received as it provided information on the history of residential schools and the impact on Aboriginal people in addition to the required legislation, policy and standards review.
- The agency standardized a number of forms, including the home study process, so that all of the necessary information could be gathered in a consistent and thorough manner.
- Increased contact with caregivers has improved relationships and the agency’s response to their needs.
- More restricted homes have been opened by the agency thus growing their own resource base.
- The agency is having preliminary discussions with the communities of Nlaka’pamux and Nooaitch regarding developing “family homes” similar to those used by another DAA. While these discussions are in the early

phase, it is seen as an improvement in the trust and engagement between the communities and the agency.

## **5. CHALLENGES IN RESOURCES**

The most significant barrier identified is the availability of training for the agency's caregivers. Once the training pilot is completed in June 2012, the delivery of the 53 hour training returns to the regular training cycle of being offered approximately once a year. The agency staff have not been approved to deliver this training themselves therefore the infrequency of the mandatory training is very challenging. Other training events are not offered locally on a regular basis and the need to travel to other locations for training has resulted in low participation from their caregivers. This is especially problematic as many of their caregivers are restricted and training would provide them with additional skills to assist them in addressing some of the concerns and questions that arise.

## **6. DISCUSSION OF THE PROGRAM AUDITED**

The audit reflects the work done by the delegated staff of the agency over the past two years.

### **a) Resource files**

As stated earlier, 15 out of 15 open resource files and both of the recently closed resource files were audited. Significant improvement was found in all of the standards and in the overall quality of the documentation and information on the files.

Many positive aspects found included: documenting supervisory approval for family care homes, completion of the home study, documentation of training offered to and taken by caregivers, and closing of family care homes.

In some of the files, documentation missing from the files included: completion of the application documentation, signed agreements with caregivers and completion of annual reviews of the family care homes.

In reviewing the practice concerns identified in the 2010 practice audit, the agency has successfully addressed most of the areas identified. However follow up regarding incomplete application material, ensuring signed agreements are completed annually and on file, and completing annual reviews continue to be outstanding issues. Given the seriousness of the 2010 concerns regarding the resource work, some of the focus of the work was to complete new home studies and close home that were determined to be inappropriate.

## 7. COMPLIANCE TO THE PROGRAM AUDITED

One auditor audited the resource files at Scw'exmx Child and Family Services Society. The 'not applicable' scores were not included in the total.

### a) Compliance to Resource Practice

The files were audited for compliance to the Aboriginal Operational and Practice Standards and Indicators, C3 Voluntary Services 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.

Seventeen (17) resource files were audited. The overall compliance was **71%**.

The following provides a breakdown of the compliance ratings:

<b>AOPSI – Standard Voluntary Services (VS)</b>	<b>IEA</b>
Standard 28 Supervisory Approval Required for Family Care Home Services	16 files compliant 1 file non compliant
Standard 29 Family Care Homes – Application and Orientation	6 files compliant 9 files non compliant 2 files not applicable
Standard 30 Home Study	13 files compliant 4 files non compliant
Standard 31 Training of Caregivers	16 files compliant 1 file non compliant
Standard 32 Signed Agreement with Caregivers	9 files compliant 8 files non compliant
Standard 33 Monitoring and Reviewing the Family Care Home	6 files compliant 5 files non compliant 6 files not applicable

Standard 34 Investigation of Alleged Abuse or Neglect in a Family Care Home Standard 33 Monitoring and Reviewing the Family Care Home	No files applicable
Standard 35 Quality of Care Review	No files applicable
Standard 36 Closure of the Family Care Home	2 files (100%) compliant 15 files not applicable

**8. RECOMMENDATIONS:**

October 10, 2012

The following responses were developed in consultation with Scw'exmx Child and Family Services Society and the MCFD Aboriginal Programs & Service Support (APSS).

Scw'exmx Child & Family services Society will develop a work plan to address the resource file deficits and will review the work plan with the APSS Practice Analyst within one month.

A follow up teleconference is scheduled for November 14, 2012 when the work plan will be provided to all meeting participants.

November 14, 2012 – Update

The resource compliance work plan was provided to all meeting participants and the agency has addressed most of the areas of non-compliance. The agency will be completing all outstanding areas within one month.