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Children and Youth in Care Policies

Last Revised: October 1, 2018

Child Welfare Policy

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Chapter 5: Children and Youth in Care

Policy 5.1: Establishing and Preserving the Cultural Identity of Indigenous Children and Youth in Care

Effective Date of Policy:

June 30, 2017

Amendment Date of Policy:

October 1, 2018

Policy Statement

When an Indigenous child/youth is in care their cultural identity and ties to their family, Indigenous community and heritage are developed, strengthened and nurtured in a way that is meaningful to them and their Indigenous community.

Outcomes

- Indigenous children/youth are connected to their cultural communities.
- Indigenous children/youth receive services that are sensitive to their views, cultural heritage and spiritual beliefs.

Standards

5.1(1) Include cultural planning in the Care Plan of each Indigenous child or youth in care.

Procedures

Identifying and Involving the Indigenous Community

- When a determination needs to be made about the identity of a child/youth in relation to their Indigenous heritage, connections and community, review any available records and seek information from:
 - Child/youth;
 - Parents;
 - Extended family;
 - Delegated Aboriginal Agencies (DAAs);
 - Off-reserve Indigenous, organizations; and/or
 - Crown-Indigenous Relations and Northern Affairs Canada (CIRNAC).

- When the Indigenous community and identity of a child/youth cannot be determined, follow local and/or regional protocols if there are any.
- Where a protocol does not exist, consult with a DAA or Indigenous community closest to where the child/youth lives.
- When there are questions about whether a child/youth is Indigenous or about how to involve an Indigenous community where a protocol does not exist, consult with the appropriate regional staff, the closest DAA, Roots workers, Family Finders, or Family Preservation Worker.
- On learning that a child/youth who was previously not known to be of Indigenous ancestry may be Indigenous, contact and involve the appropriate Indigenous community and the DAA that may serve that community.
- If direct community connections are not available, contact local Indigenous agencies and organizations for information about events and activities open to or specifically for Indigenous children, youth and families.

Registering a Child/Youth for Status under the Indian Act and/or Obtaining First Nation Band Membership

- Where a child/youth is entitled, make sure that they are registered for status and/or have membership within the appropriate Indigenous community.
- For a child/youth who has identified or has been identified as belonging to a First Nation Band, ensure that their registration status is known and recorded.
- When working with parents:
 - Request copies of the child/youth's registration and/or Band membership from the parents or from the child/youth's First Nation(s), **or**
 - Make an application to register with the identified First Nation(s) in collaboration with the parents.
- In situations where parents are unavailable or uninvolved, take steps to obtain documentation related to the child/youth's registration or Band membership for the file by:
 - Asking the child/youth if they have copies;
 - Checking for copies with other involved MCFD/DAA offices;
 - Requesting copies from the child/youth's First Nation(s);
 - Making an application to register with the identified First Nation(s); or
 - Contacting CIRNAC to determine whether they have registration information regarding the child/youth and/or the child/youth's parents or grandparents.
- If a child/youth is not registered, obtain the Declaration of Particulars from Vital Statistics in order to be able to obtain a Certificate of Secure Indian Status.

Note: Registering for status under the Indian Act can be a sensitive area for a child/youth. Make sure to involve them in discussions about becoming registered for status, in a manner appropriate to their age and developmental level, and provide as much information as possible about the implications of the child/youth being registered.

Note: When applying to register a child/youth for status under the Indian Act or for citizenship under the Nisga's Lisims Government, information is available on the Indigenous and Northern Affairs Canada website:

<https://www.aadnc-aandc.gc.ca/eng/1100100010002/1100100010021>

Registering for or Obtaining Membership with Métis Organizations

- To determine eligibility and application procedures for registering or seeking membership in Métis organizations contact the organization(s) that represents the child/youth's Métis community, which may include:
 - Métis Nation of British Columbia;
 - Métis Commission; and/or
 - Métis organizations and communities outside BC.

- When there are questions about whether a child/youth is Métis, explore their heritage by consulting the:
 - Child/youth;
 - Parents;
 - Extended family;
 - Local Métis service provider or organization where the child, youth or family has indicated a connection;
 - Métis Nation of British Columbia;
 - Métis Commission; and/or
 - Métis organizations and communities outside BC.

- Where a child/youth is entitled, make sure that they are registered with and/or have membership within the appropriate Métis organization(s).

- For a child/youth who has identified or has been identified as Métis, ensure that their registration and/or membership is known and recorded.

- When working with parents:
 - Request copies of the child/youth's registration and/or membership from the parents or from the child/youth's Métis organization(s), or

- Make an application to register with the identified Métis organization(s) in collaboration with the parents.
- In situations where parents are unavailable or uninvolved, take steps to obtain documentation related to the child/youth's registration or membership with the identified Métis organization(s) for the file by:
 - Asking the child/youth if they have copies;
 - Checking for copies with other involved MCFD/DAA offices;
 - Requesting copies from the child/youth's identified Métis organization(s); and
 - Making an application to register or seek membership with the identified Métis organization(s).

Obtaining Membership with Inuit Regions

(including Inuvialuit, Nunatsiavut, Nunavik and Nunavut)

- When there are questions about whether a child/youth is from one of the four Inuit regions, including Inuvialuit, Nunatsiavut, Nunavik and Nunavut, explore their potential Inuit heritage by consulting the:
 - Child/youth;
 - Parent(s);
 - Extended family;
 - Relevant cultural organizations in the appropriate region; and
 - Inuit Tapiriit Kanatami, which represents Inuit Nunangat (including the four regions above).
- When a child/youth is from the Nunavut region, explore their potential Inuit heritage by consulting the appropriate sub-region, including:
 - Qikiqtani Region – via the Qikiqtani Inuit Organization;
 - Kitikmeot Region – via the Kitikmeot Inuit Organization; or
 - Kivalliq Region – via the Kivalliq Inuit Organization.
- Where a child/youth is entitled, make sure that they are registered with and/or have membership within the appropriate Inuit region.
- For a child/youth who has identified or has been identified as a member of an Inuit region, ensure that their registration and/or membership is known and recorded.
- When working with parents:
 - Request copies of the child/youth's registration and/or membership from the parents or from the child/youth's Inuit region, or

- Make an application to register with the identified Inuit region in collaboration with the parents.
- In situations where parents are unavailable or uninvolved, take steps to obtain documentation related to the child/youth's registration or membership with the identified Inuit region for the file by:
 - Asking the child/youth if they have copies;
 - Checking for copies with other involved MCFD/DAA offices;
 - Requesting copies from the child/youth's identified Inuit region; and
 - Making an application to register or seek membership with the identified Inuit region.

Working Collaboratively with the Indigenous Community to Establish and Preserve the Child/Youth's Indigenous cultural identity

- Establish and preserve the child/youth's contact and involvement with their Indigenous community by:
 - Involving the child/youth, their family, and individuals from their Indigenous community in assessments and development of the Care Plan;
 - With assistance from an Indigenous community member whenever possible, providing the child/youth with information about their unique Indigenous heritage, in a manner appropriate to their developmental level;
 - Honouring and following the placement priorities for Indigenous children and youth in care, consistent with the following priorities in Section 71(3) of the CFCSA:
 - First, placing with the child/youth's extended family or Indigenous community;
 - Second, placing with another Indigenous family;
 - Third, placing in a location where the child/youth can be:
 - In contact with their extended family and friends;
 - In the same placement as their siblings;
 - In a location that will allow them to continue in the same school;
 - Providing the caregiver with information about the child/youth's Indigenous heritage.

Cultural Planning for an Indigenous Child/Youth in Care

- Develop and implement a Care Plan for an Indigenous child/youth, within 6 months of them coming into care, which incorporates cultural planning within the different domains. Refer to Policy 5.6: *Assessment and Planning for a Child/Youth in Care*, and Policy 5.7: *Putting the Care Plan into Action* for more information about Care Plans.
- Plan for the development and support of the child/youth's cultural identity in consultation with:
 - The child/youth, maximizing their participation in a manner appropriate to their developmental level;
 - The child/youth's parents, extended family members and others who are significant in their life;
 - A representative of the child/youth's Indigenous community and an affiliated Indigenous child and family service agency (if applicable), provided the following have an opportunity to provide their views about Indigenous community involvement:
 - The child/youth if they are 12 years of age or over and is capable of understanding the nature and consequences of giving their consent; and/or
 - The child/youth's parents, if required (if the child/youth is in care under an Interim Custody Order, a Temporary Custody Order or a Continuing Custody Order, the parents' involvement is not required, although when there is a Temporary Custody Order it is usually good practice to discuss with the parents and consider their views when possible).

Note: Collaborative Planning and Decision Making options such as Family Group Conferences, Traditional Decision Making, Youth Transition Conferences and Family Case Planning Conferences can be used to gather information and identify key individuals to assist with the development of the child/youth's cultural planning.

- Develop cultural planning that outline:
 - The steps taken to ensure participation of the Indigenous community in the development and implementation of the child/youth's cultural planning, including the mobilizing and forming of a Circle;

- The identification and involvement of someone from the child/youth's Indigenous community or cultural group to be the child/youth's cultural contact or mentor;
 - The ways in which the child/youth's participation in culturally specific activities, including traditional customs and activities that are unique to the community, will be promoted and preserved;
 - The steps taken to facilitate the child/youth's involvement in the Indigenous community's oral history, traditional roles and responsibilities, traditional family systems, traditional diet, language, songs, dances, ceremonial activities, arts and crafts, sports events and activities;
 - The steps taken to explore the possibility of the child/youth travelling to their Indigenous community, or to participate in homecoming events where available;
 - How the child/youth will be connected to their culture within the community where they reside if they are not living in close proximity to their Indigenous community.
- When developing cultural plans:
- Seek out cultural centres where traditional culture and languages are accessible through the elders or through youth cultural workers and that, in some communities, incorporate museums, historical research, traditional healing and counselling;
 - In communities that do not have cultural centres, verify whether there is cultural programming by community members or through the Tribal Council at locations such as the school, Band office, community hall, longhouse or friendship centre;
 - When ongoing personal contact with the child/youth's Indigenous community is not possible, consider:
 - Arranging to have the Indigenous community's newsletter or newspaper sent to the child/youth, or use other methods such as telephone and social media when appropriate with community members on a regular and on-going basis;
 - Seeking out community agencies that might assist the child/youth in visiting their community;
 - Looking for ways to connect the child/youth to their Indigenous culture through peer groups and/or youth conferences or other organizations.

- During Care Plan reviews, discuss with the child/youth and their Care Team or Circle about the effectiveness of the cultural planning in developing and supporting the child/youth's cultural identity.
- Document the cultural planning as part of the child/youth's Care Plan.

Note: Much of the cultural planning documentation will naturally belong in the Identity domain of the child/youth's Care Plan. However, cultural planning is incorporated throughout the Care Plan within different domains where relevant and appropriate. For more information, refer to Policy 5.7: Putting the Care Plan into Action.

Jordan's Principle

- When there is uncertainty or a dispute over which level or branch of government has funding responsibility for supports and services for an Indigenous child/youth, access information about [Jordan's Principle](#).

Chapter 5: Children and Youth in Care	
Policy 5.2: Assuming Responsibility for a Child/Youth in Care	
Effective Date of Policy: June 30, 2017	Amendment Date of Policy: October 1, 2018

Policy Statement

When children/youth are in the care of the Director, there is an understanding of the Director's level of guardianship authority, duties and responsibilities to the child/youth, as well as the child/youth's circumstances.

Outcomes

- Children/youth in care have stable placements.

Standards

- 5.2(1)** Gather and document information about the child/youth's history and current circumstances:
- to assist with finding a placement that will best address the child/youth's needs; and
 - update the information at regular intervals based on Care Plan timelines, or when there are significant events in the child/youth's life, including a change of placement.

Procedures

Developing an Understanding of the Child/Youth's Circumstances

- Review court order(s) (including access orders), adoption consent or agreement and determine the scope of the Director's guardianship authority, duties and responsibilities. For further information, refer to Appendix A: Guardianship Responsibilities.
- Determine whether the child/youth is Indigenous, and if so, refer to Policy 5.1: *Establishing and Preserving the Cultural Identity of Indigenous Children and Youth in Care* for further information.

- Actively seek out and engage with the child/youth's parents, siblings, extended family, as well as those who have a significant relationship with or a cultural or traditional responsibility to the child/youth.
- Determine the parents' and extended family's involvement with the child/youth and the parents' continued rights and responsibilities regarding health care, education and spiritual/religious upbringing. Refer to Appendix A: Guardianship Responsibilities, for information regarding legal status and guardianship responsibilities related to children/youth in care.
- Review all Family Service and Child in Care file information, including closed files and information from other jurisdictions.
- Wherever possible, meet in person or by telephone with previous workers who have been involved with the child/youth, including those who have provided child protection, family support services, Child and Youth Mental Health, Child or Youth with Special Needs, or other MCFD services.
- Meet with the child/youth, caregiver, family members and others who are familiar with them, including school personnel, medical professionals and other service providers.
- Provide the child/youth with information about their legal status; i.e. a description of the order or agreement and what that means from the child/youth's perspective, in a manner appropriate to their developmental level.

Documentation in the Child/Youth's File

- Complete an Opening /Review recording.
- Ensure that the information and associated documents in the child/youth's file is accurate and complete, to help provide as much continuity as possible in their care and relationships, including:
 - The child/youth's legal status;
 - Records such as legal documents (including custody orders and care agreements) and the child/youth's birth certificate, Social Insurance Number (SIN), MSP Personal Health Number and Personal Education Number;
 - Interim Care Plan/Care Plan;
 - Medical, educational and other professional assessments, correspondence and reports;
 - If the goal for the child/youth is adoption, a certified copy of the registration of live birth;
 - Reportable circumstances and alerts;
 - The child/youth's views, including their understanding of, and attitude towards, identity and heritage;

- The child/youth's family history and genealogy;
 - The child/youth's current family relationships, including visitation arrangements;
 - The child/youth's care history;
 - The child/youth's placement history;
 - The child/youth's Life Book;
 - Names and contact information for family members, caregivers, and other significant persons in the child/youth's life;
 - Services provided and actions taken for the child/youth while in care;
 - Information about meetings with or about the child/youth;
 - A description of the child/youth, including a recent photograph, and with information about any tattoos/piercings, to be updated annually or more often when there is a significant change in their appearance;
 - The child/youth's citizenship or immigration status (for more information, refer to the [*Immigration and Refugee Practice Guideline & Checklist for Assisting Children in Care*](#)).
- For policy on documentation required for children/youth in care travelling outside Canada see [Travel by Children in Care and by Children on Adoption Residency](#)
 - Apply for the [Child Disability Benefit](#) (CDB) for all children/youth in any form of care who may be eligible including those on youth agreements.
 - Once the child/youth has received the CDB, consider whether they are eligible for a [Registered Disability Savings Plan](#) (RDSP), and support the application process as needed, depending on the child/youth's legal status.
 - If a child/youth is Indigenous, case documentation also includes information about:
 - Whether the child/youth is Indigenous;
 - Where applicable, the child/youth's and parents'
 - status registration number, and the parents' registration status; and/or
 - Band affiliation or membership; and/or
 - registration or membership with a Métis or Inuit organization.
 - The parents' place of residence at the time of removal;
 - The child/youth's cultural planning.
 - When a child/youth does not have appropriate identification, ensure that applications are made to obtain legal documents such as birth certificate and Social Insurance Number.

- Verify that the required information on the child/youth's information system file is accurate and complete.
- Ensure that the child/youth's and family's case files are kept confidential and in a secure location at all times.
- Review the child/youth's electronic and physical files annually or whenever there is a change in circumstances of the child/youth or family, and update as needed.

Note: The quality of personal information contained in the files is important to children/youth in care and their families. These records provide a unique biographical and developmental account of their life in care. For some children/youth, the file may be the only source of information about their families, the circumstances that brought them into care, and life events during their time in care. It is important that the documentation is relevant, accurate and complete. As information is collected and documented, consider that this will be part of a permanent record that may be eventually be read by the child/youth.

Placement of the Child/Youth

- Ensure that the child/youth resides in a safe environment in which they are nurtured and protected from harm or the threat of harm.
- Place the child/youth with a caregiver who has or is willing to develop an understanding of and sensitivity to the child/youth's views, cultural and ethnic heritage, spiritual beliefs and identity.
- Consistent with Section 71 of the CFCSA, priority is given to placing a non-Indigenous child/youth with a relative. If placing the child/youth with a caregiver who is their relative is not consistent with their best interests, then place the child/youth according to the three items listed below. Each is important and all of them should be followed whenever possible. They are as follows:
 - In a location where the child/youth can maintain contact with relatives and friends;
 - In the same family unit as the child/youth's siblings;
 - In a location that will allow the child/youth to continue in the same school.
- If the child/youth is Indigenous, priority is given to placing the child/youth as follows (in order of priority):
 - First, with the child/youth's extended family or within their Indigenous community;
 - Second, with another Indigenous family;
 - Third, according to the considerations listed above for non-Indigenous children/youth.

- If it is not possible to immediately place the Indigenous child/youth with extended family or within their Indigenous community, determine whether this can occur as soon as possible after the child/youth comes into care.
- Considering the best interests of the child/youth, when possible, select a caregiver who:
 - Is willing to support the long-term plan for the child/youth, consistent with their Care Plan, including return to parents or another permanency plan;
 - Provides the best match with the child/youth's needs, personality and goals;
 - Is willing to work with and include the child/youth's family members in the child/youth's life;
 - Has a previous relationship with the child/youth and/or their family;
 - Is willing to commit to caring for the child/youth for the duration of their time in care.
- Document all actions that have been taken to identify placement priority options consistent with Section 71 of the CFCSA regarding out-of-home living arrangements.

Hotel Placement for Children/Youth in Care

Hotels are not appropriate living arrangements for children/youth in care. Children/youth in care may only be placed in hotels in exceptional circumstances for short durations approved by a designated director when no other appropriate resource is available.

For the purpose of this policy, the term "hotel" includes hotels, motels, bed and breakfasts or any other short-term lodging that is commercially available to the general public.

This policy applies to all children/youth in care, including those on an Independent Living Agreement. However, it does not apply to children/youth in care:

- *Staying in a hotel while travelling with a caregiver;*
- *Staying in a hotel as part of an experience related to a school field trip or extracurricular activity;*
- *Staying in a hotel that serves as accommodation related to the child/youth's employment (e.g., work camp); or*
- *Who independently check into a hotel without the approval or support of a director (e.g., AWOL or runaways).*

- Prior to placement of a child/youth in care in a hotel, obtain approval from the designated director responsible for the Service Delivery Area or Delegated Aboriginal Agency in which the child/youth's file is managed, by:
 - Email: submission of a completed *Hotel Placement Form* by way of email to the designated director and receipt of written approval from the designated director by way of email response; or
 - Verbal: if circumstances necessitate verbal approval from the designated director, submission of a completed *Hotel Placement Form* by way of email to the designated director and receipt of written approval from the designated director by way of email response to occur within 24 hours.

- If the responsible designated director cannot be contacted in a timely way, obtain approval from another designated director, including the Provincial Director of Child Welfare.

- Ensure that placement of a child/youth in care in a hotel is documented in ICM. Responsibility for ensuring up-to-date electronic documentation belongs, in the following order, to:
 - The worker who placed the child/youth in the hotel (on the day of placement in a hotel, with the assistance of After Hours/ Centralized Screening for ICM entry if necessary);
 - The guardianship worker for the child/youth; and
 - The designated director with responsibility for the respective Service Delivery Area or Delegated Aboriginal Agency in which the child/youth's file is managed.

- When a child/youth in care is placed in a hotel, their Section 70 rights as a child/youth in care and the guardianship responsibilities of the Director continue to apply.

- Assess the hotel accommodations and care arrangements to ensure that the quality of care and supervision is appropriate to the child/youth's needs.

- The child/youth must be cared for by a delegated worker or approved caregiver.

- Provide the child/youth's caregiver with all relevant information about the child/youth's needs.

- Ensure that the caregiver is caring for no more than one child/youth or, in the case of a sibling group, no more than three children/youth.

- Meet with the child/youth and the caregiver daily until the child/youth is moved to an appropriate resource, and provide any immediate supports that are needed.

- Contact the designated director daily to:
 - Provide an update on the child/youth's safety and well-being;
 - Provide an update on the plan to move the child/youth to a resource; and
 - Obtain approval for the child/youth to remain in the hotel.

- The designated director informs the Provincial Director of Child Welfare in writing of the child/youth's initial placement in the hotel within 24 hours of the placement and on each subsequent day of the hotel placement. Information provided includes:
 - The completed [Hotel Placement Form](#); and
 - Any updates related to:
 - The child/youth's well-being;
 - The care arrangements for the child/youth, including any supports provided;
 - Efforts and plans to move the child/youth to a resource; and
 - The date the child/youth is moved to a resource.

- The Provincial Director of Child Welfare:
 - Tracks and monitors each hotel placement, including the duration;
 - Notifies the Representative for Children and Youth if a child/youth has been living in a hotel for longer than 3 days. The following information is provided to the Representative for Children and Youth:
 - The completed [Hotel Placement Form](#), and
 - Any updates related to:
 - The child/youth's well-being;
 - The care arrangements for the child/youth, including any supports provided;
 - The plan to move the child/youth to a resource;
 - Any other information requested by that office; and
 - The date the child/youth is moved to a resource.

Appendix A: Guardianship Responsibilities

Legal Status	Director, Public Guardian and Trustee (PGT)	Parent(s)	Child/Youth
Voluntary Care Agreements/ Special Needs Agreements (Sections 6 & 7, CFCSA)	Director has care of the child/youth.	Parents remain the personal and property guardian of the child/youth, and delegates to the Director as many of the guardianship responsibilities as is required to give effect to the agreement.	Under the <i>Infants Act</i> , the child/ youth may consent to their own health care if they have understanding of the nature and consequences of the health care, and that it is determined to be in their best interests.
Removal, before presentation (Section 32, CFCSA)	Director has care and control of the child/youth, with limited guardianship responsibilities; such as the right to: <ul style="list-style-type: none"> • authorize a health care provider to examine the child; • consent to necessary health care if, in the opinion of a health care provider, the health care should be provided without delay; • Consent to routine school, social and recreational activities. 	Parents retain some of the personal guardianship responsibilities, and remain the child/youth's property guardian.	As above
Interim and Temporary Orders (Section 47, CFCSA)	Director is temporarily the personal guardian; e.g. provides consent to necessary health care. Director does not have authority to consent to adoption.	Court can order that parents retain authority to consent to health care, education and/or religion. Parents remain the property guardian unless the court appoints the PGT.	As above
Continuing Custody Order (Section 50, CFCSA)	Director is the child/youth's sole personal guardian, and may consent to their adoption; PGT is the child/youth's sole property guardian.	The parents' guardianship is terminated and therefore have no guardianship responsibilities.	As above

Chapter 5: Children and Youth in Care

Policy 5.3: Safety and Well-being of Children/Youth While in Care

Effective Date of Policy:

June 30, 2017

Amendment Date of Policy:

October 1, 2018

Policy Statement

It is the Director's statutory responsibility to ensure that a child/youth's safety and well-being are paramount considerations, and throughout the child/youth's time in care, their rights are respected and actively promoted.

Outcomes

- Children/youth are safe.
- Children/youth in care receive care consistent with the rights defined by Section 70 of the CFCSA.
- Children/youth know their rights and entitlements according to their developmental level.

Standards

- 5.3(1)** Maintain in-person, private contact with a child/youth in care at least once every 90 days.
- 5.3(2)** Respond as soon as possible to any concerns about the child/youth's physical safety, emotional safety or well-being.
- 5.3(3)** Inform the child/youth about their rights, as defined in Section 70 of the CFCSA, as well as information about the MCFD Complaints Process, during the development of the Interim Care Plan (within 30 days of the child/youth coming into care), and then at least annually or if circumstances arise that make a review necessary (such as a significant event occurring in the life of the child/youth), in a manner appropriate to their developmental level.

Procedures

Contact with the Child/Youth

- Develop a meaningful relationship with the child/youth by maintaining regular, purposeful contact in order to oversee their care and development, to ensure their safety and well-being and to celebrate milestones and achievements.
- Have in-person, private visits with the child/youth at least every 90 days, and more frequently whenever possible, both where they live and outside the home.
- Whenever possible, meet with the child/youth:
 - On the day of placement;
 - Within 7 days of placement;
 - When there is a significant change in the child/youth's circumstances, Care Plan or family;
 - When there is a change in the child/youth's worker;
 - On or near the child/youth's birthday and other special occasions.
- Determine whether more frequent visits with the child/youth are needed, based on their vulnerability, special needs and visibility in the community.
- During visits with the child/youth, consistently seek their views, in a manner appropriate to their age and developmental abilities, about their own safety and well-being.
- Document information in the child/youth's file about meetings with them, including their views, significant events, and decisions or agreements reached with the child/youth.

Note: The connection a child/youth in care has with their worker is important for the child/youth's development and future outcomes. As much as possible, provide opportunities to spend meaningful time together.

Safety of the Child/Youth

- If there are items in the child/youth's possession that are unsafe or inappropriate, plan with the child/youth and the caregiver about how such items will be dealt with (e.g. stored, disposed of, returned to parents for safekeeping).
- Respond immediately to information from others that indicates that the child/youth's safety may be at risk, and take the necessary steps to address the safety concern, in consultation with a supervisor.

- If information is received about abuse or neglect of a child/youth in care in a foster care home, see the [Resource Work Policies](#) for information related to determining further action.
- If there is a death or critical injury of, or serious incident involving, a child/youth in care, refer to [Reportable Circumstances Policy](#).
- If the child/youth has experienced any form of emotional/psychological trauma as a result of a critical injury or serious incident, facilitate access to appropriate support services.
- Consider involving police if the child/youth has been the victim of a criminal act that may fall within the mandate of the police to investigate. In such circumstances, a report to police is required if the child/youth consents to the reporting to police or if making a report to police is necessary to ensure the safety or well-being of any child/youth or safety of any adult.

Note: In cases of sexual assault, victims who do not report to police may not be able to access victim services such as counselling. Also, for hospitals to collect forensic information about a sexual assault, they must have a police file number. Consequently, failing to report to police may mean that valuable medical evidence will not be gathered, and thus possibly impact the outcome of any future investigation or court proceeding.

Promoting Continuity and Stability for the Child/Youth

- Promote and support opportunities for the child/youth to develop and maintain emotional attachments with their parents, siblings, extended family and others who are significant in their life.
- Include the four dimensions of permanency: cultural, relational, physical and legal, when developing permanency plans for children/youth in care.
- Whenever possible, develop an out-of-care living arrangement that will provide the opportunity for the child/youth to maintain and develop lifelong relationships with extended family or other individuals who have a relationship with or a cultural or traditional responsibility to the child/youth, including the following options:
 - Extended Family Program Agreement;
 - Interim or temporary out-of-care order: placement with a person other than the parent under the Director's supervision under Section 35(2)(d) or Section 41(1)(b) of the CFCSA;

- Permanent transfer of custody after Continuing Custody Order under Section 54.1 under the CFCSA;
 - Permanent transfer of custody under Section 54.01 of the CFCSA;
 - Adoption.
- When deciding about visitation and access to the child/youth, consider their best interests, including attachment and continuity of relationships.
 - Regularly review access orders or provisions for access to determine whether the arrangement is consistent with the child/youth's wishes and best interests.
 - Maintain or, where required, develop stable living arrangements for the child/youth as quickly as possible.
 - As much as possible, minimize changes in the child/youth's placements.
 - Inform and involve the caregiver in developing and implementing strategies to promote the child/youth's stability and continuity of lifelong relationships.
 - As much as possible, avoid disruption of services and activities that were in place when the child/youth came into care.
 - Determine that the services identified to meet the child/youth's needs and to support the overall goal of their Care Plan are provided in a timely and consistent manner, and results are assessed regularly.
 - Make every effort to prevent unnecessary delays in decision making and implementation of court orders and agreements.

The Rights of Children/Youth in Care

Note: The rights of children and youth in care as defined in Section 70 of the CFCSA can be found throughout the Children and Youth in Care policies, standards and procedures. However, it is also important that children and youth in care regularly be informed of and educated about these rights and entitlements, as well as information about the MCFD Complaints Process, in a manner appropriate to their developmental level.

- Ensure that the child/youth's care reflects their Section 70 rights.
- Educate the child/youth about their rights and entitlements in a manner appropriate to their developmental level:
 - During the development of their Interim Care Plan, within 30 days of coming into care;
 - At least annually;

- When there is a significant change in their circumstances (i.e. a move, a change in worker, etc.);
 - When they request information about their rights.
- Use different methods of assisting the child/youth in understanding their rights, depending on their developmental level, including:
- Work with caregivers and community to support the child/youth's rights;
 - For children with increased maturity or developmental level, provide the child/youth with written and verbal information about their rights in age appropriate language and work with caregivers and community to support the child/youth's rights;
 - For younger children and children without the capacity to understand their rights, review their rights with a relative or other adult (not the current caregiver) who knows the child/youth and can act in their best interests.
 - For older youth, assist in developing skills and capacity to advocate for their rights.
- Use different resources to help explain a child/youth's rights, in a manner appropriate to their developmental level, such as:
- **This is me and I have rights:** for younger children, an interactive workbook;
 - **Know Your Rights:** a brochure developed by youth for youth on Section 70 rights of children/youth in care;
 - **Your Life Your Rights:** a resource guide for youth looking to explore their rights: <http://fbcyicn.ca/what-we-offer/resources/know-your-rights>
- Document each instance when the child/youth has been provided with information about their rights.
- Review the child/youth's rights with their caregiver when they are first placed with the caregiver, and then at least annually.
- In situations where a child/youth reports that their rights have not been respected:
- Meet with the child/youth and others involved to try to resolve the issue;
 - If required, offer an alternate dispute resolution process for resolving the issue;
 - Review with the child/youth how they can proceed with the MCFD Complaints Process if they choose to do so;

- Provide the child/youth with information about and assist them in contacting the Representative for Children and Youth, the Ombudsperson, or community or provincially based advocacy services;
- Support the child/youth throughout the time it takes to resolve the issue.

Note: The rights of children/youth in care, as defined in Section 70 of the CFCSA, do not apply to a child/youth who is in a place of confinement, which includes a youth custody centre under the Youth Criminal Justice Act or a mental health facility under the Mental Health Act. However, when the Director has custody of a child/youth who is in a place of confinement, the Director retains guardianship rights and responsibilities. This requires continued concern for the child/youth's safety and well-being and active planning for their care upon release or discharge from the facility.

Youth in Care Who are Involved in the Criminal Justice System

- In situations where a youth who is in care by a court order is charged under the *Youth Criminal Justice Act*:
 - Assist the youth to contact legal counsel or contact legal counsel on behalf of the youth, if legal counsel has not already been retained. For further information, refer to the [Practice Guideline: Legal Counsel for Children in Care Facing Criminal Charges](#).
 - Advise the youth of their right to privacy in discussions with legal counsel;
 - Advise the youth of their right to consult with legal counsel prior to making any statement to the police;
 - Seek the youth's views regarding whether they would like the worker or someone else to be available for support while they are being interviewed, searched or questioned by the police where criminal charges are possible;
 - Report to the Director any incident where a youth in care has been involved in a crime of violence, consistent with Reportable Circumstances policy;
 - Continue to provide emotional support to the youth throughout their involvement in the justice system.
- In situations where a youth is incarcerated, as much as possible continue with preparations to assist them to live successfully in the community when they leave care.

Chapter 5: Children and Youth in Care	
Policy 5.4: Providing the Caregiver with Information	
Effective Date of Policy: June 30, 2017	Amendment Date of Policy: October 1, 2018

Policy Statement

When children/youth are in care, caregivers are provided with all necessary information about the child/youth at the time of placement and as information becomes available throughout the period of the placement.

Outcomes

- Children/youth have stable, caring placements.

Standards

5.4(1) Provide the caregiver with as much information as possible about the child/youth at the time of placement and as information becomes available throughout the period of the placement, including all information necessary for the optimal care and safety of the child/youth and any information relating to possible safety risks posed to the caregiver or the caregiver's family by the child/youth.

Procedures

Providing the Caregiver with Information

Note: In order for a caregiver to provide the best possible care for a child/youth, they require as much information as possible about the child/youth in a timely way. The more understanding a caregiver has of a child/youth's history and experiences, the better the caregiver can meet the child/youth's needs.

Refer to the [Resource Work Policies](#) for more information.

The caregiver is part of the child/youth's Care Team or Circle and as such actively takes part in planning for the child/youth.

- Ensure timely, appropriate and adequate information sharing with the child/youth's caregiver as well as their family and others who are significantly and routinely involved in the day-to-day care of the child/youth.
- Provide the caregiver with copies of the Voluntary Care Agreement or Special Needs Agreement, and the Interim Care Plan/Care Plan, when available.
- Provide the caregiver with relevant information, at the time of placement and as information becomes available throughout the period of placement, about the care and safety of the child/youth and any information relating to safety risks posed to the caregiver or the caregiver's family.
- Provide information to the caregiver, in writing whenever appropriate, about the child/youth and their family, including:
 - The child/youth's full name, date of birth and legal status;
 - Information about the child/youth's overall goal and Care Plan, and the expectations of the caregiver to support that plan;
 - Circumstances leading to the placement, including:
 - Family information relevant to caring for the child/youth;
 - Cautions or restrictions on the child/youth's activities or contacts;
 - The names and telephone numbers of family members or significant others, as noted in the Care Plan, who are available as supports to the child/youth;
 - Contact information for the worker and their supervisor, as well as information about how to reach Centralized Screening for assistance after hours;
 - Information related to the child/youth's cultural and ethnic heritage, spiritual beliefs, values and identity;
 - Any safety risks to the child/youth, including the need to protect them from contact with another person (provide a copy of any police enforceable orders preventing contact);
 - Names and contact information of persons who have access to the child/youth and how access will be arranged;
 - How contact with parents, siblings, extended family, friends and community members will be facilitated;
 - How arrangements will be made for continuity in the child/youth's care, including participation in sports, recreational clubs or other activities;

- Information related to the child/youth's education, including where they will attend school and a copy of their school report, if available;
 - The child/youth's daily care, including mealtime and bedtime routines, sleeping habits, comfort items, toys and food preferences (for more information, refer to the Child's Routines form CF4065);
 - Information about the child/youth's interests, hobbies, friends and activities;
 - Any trauma triggers the child/youth may have;
 - Specific child management approaches that will benefit the child/youth's development based on an assessment of their individual needs;
 - Scheduled appointments with service providers/professionals;
 - Known medical and/or mental health history and needs, e.g. allergies (particularly life-threatening food allergies), prescriptions, treatments, concerns;
 - Management of special dietary needs and administration of medications;
 - The names and contact information of professional supports, including the child/youth's physician;
 - The child/youth's placement history and previous experiences in care or in the child/youth's home that may explain their behaviour and/or demeanor toward the caregiver;
 - Any allegations of abuse or neglect involving the child/youth in previous placement settings, whether the allegations were investigated, and the outcome (without providing any identifying information for the purpose of confidentiality);
 - Notification procedures if the child/youth is lost, goes missing or runs away, or if they suffer an injury or is at serious risk of harm (refer to Policy 5.11: *When a Child/Youth is Missing*);
 - Any other information that will assist the caregiver in responding to the individual needs of the child/youth.
- Make every effort to meet with the caregiver in person within 7 days of the child/youth's placement to provide an opportunity to address any questions or concerns they may have.
 - Involve the caregiver in:
 - Assessments and case planning;
 - Providing opportunities for the child/youth to establish stability and continuity of lifelong relationships.
 - Maintain all documentation and information in the child/youth's file.
 - Ensure that a copy of the information provided to the caregiver is in the file.

Chapter 5: Children and Youth in Care

Policy 5.5: Involving the Public Guardian and Trustee

Effective Date of Policy:

June 30, 2017

Amendment Date of Policy:

October 1, 2018

Policy Statement

The Public Guardian and Trustee (PGT) is the property guardian for a child/youth under the following circumstances:

- The Director has continuing custody of a child/youth under Section 49 of the CFCSA;
- The Director has temporary custody of a child/youth and there is a court order making the PGT the temporary property guardian of a child, under Section 58 of the CFCSA;
- The Director of Adoption is guardian of a child who has been relinquished for adoption under Section 24 of the *Adoption Act*;
- The Director and the PGT are the guardians of a child under Section 51 of the *Infants Act*.

The PGT protects the legal rights and financial interests of children/youth in care for whom the PGT is the property guardian.

Outcomes

- The PGT is appropriately involved in planning for a child/youth when acting as the child/youth's property guardian.

Standards

5.5(1) When the PGT is the guardian of the child/youth's property:

- Involve PGT staff in case planning for the child/youth, as required to represent the child/youth's legal and financial interests;
- Inform PGT staff as soon as possible of any known event that could affect the child/youth's legal or financial interests;
- Request up to date information from the PGT about the child/youth's trust fund or ongoing legal or financial matters and maintain current information in the child/youth's file.

Procedures

When the PGT is appointed as the property guardian of a child/youth in care, they protect the child/youth's legal rights and financial interests and, if appropriate, may take action on behalf of the child/youth to address circumstances when those rights and interests need to be upheld.

Note: The PGT will initiate contact with guardianship workers where a child/youth in care has funds in trust with their office. The PGT will make contact with the worker annually starting when the child reaches 14 years age.

Involving the Public Guardian and Trustee

- When a child/youth is in temporary custody, consult with the PGT and consider making an application to court for the appointment of the PGT as the child/youth's temporary property guardian:
 - When an event occurs that might affect the child/youth's financial or legal interests during the term of the temporary custody order; or
 - At the request of the PGT.
- When the PGT is the child/youth's property guardian, ensure that the PGT is provided with a copy of:
 - The continuing custody order as per section 50(4) of the CFCSA; or
 - The temporary custody order when the court has made an order to appoint the PGT as the child/youth's property guardian, as per section 58(4) of the CFCSA.
- Provide the PGT with information at the time it is appointed the child/youth's property guardian and annually thereafter, using the following PGT forms, which the PGT sends to the child's worker: the *Information Required by the PGT for Children in Continuing Care* form for children newly in continuing care; and the *Annual Review* form for children in continuing care. (These forms provide the PGT with information about the child/youth's disability designation(s) or diagnosis(es) when applicable, for the purpose of setting up a Registered Disability Savings Plan (RDSP) on behalf of the child/youth, as well as protecting the child/youth's legal and financial interests and assisting with transition planning.)
- When the PGT is appointed as the child/youth's property guardian:
 - Inform the PGT about the child/youth's circumstances and any known event that could affect their legal or financial interests;
 - Involve the PGT in the child/youth's case planning and the provision of services as required to represent the child/youth's legal and financial interests;

- Obtain information or updates from the PGT about a child/youth's trust fund or ongoing legal or financial matters, as needed;
 - Involve the PGT in transition planning for a child/youth in preparation for them leaving care.
- If a youth in care has money that is being managed by the PGT as the youth's property guardian and there are concerns that when they are nearing the age of 19 years, they may not have the ability to manage that money without assistance, contact the PGT to discuss options to assist the youth.
 - When the PGT is no longer the child/youth's property guardian as the result of a Section 54.1 order, adoption, or return to parent, provide the PGT with a copy of the court order.
 - When considering a permanent transfer custody under Section 54.1 of the CFCSA, involve the PGT early in the process and obtain their consent before applying for the order. For more information, refer to [Policy 4.6: Permanent Transfer of Custody after a Continuing Custody Order under Section 54.1](#).
 - When an incident occurs that does not fall under the criteria of a Reportable Circumstance (where the PGT is electronically notified) and there is the possibility of a legal claim to be made on behalf of the child/youth, notify the PGT by completing the *Initial Notification to the Public Guardian and Trustee of British Columbia* ([Form CF2681](#)). (For information about reportable circumstances criteria, refer to [Reportable Circumstances Policy](#).)
 - If the child/youth in care is Indigenous, whether on or off reserve at the time of their removal, contact the PGT to investigate whether there are Band entitlements or money in trust for the child/youth.
 - For information about the roles and responsibilities of MCFD and DAA workers and the PGT, refer to the protocol agreement [In Respect of Roles and Responsibilities of the Public Guardian and Trustee, the Ministry of Children and Family Development and Community Living British Columbia](#).

Chapter 5: Children and Youth in Care

Policy 5.6: Assessment and Planning for a Child/Youth in Care

Effective Date of Policy:

June 30, 2017

Amendment Date of Policy:

October 1, 2018

Policy Statement

When a child/youth comes into care, an assessment of their needs is completed and a Care Plan is developed and implemented in a way that promotes the child/youth's overall well-being and promotes the best possible outcomes.

Outcomes

- Children/youth's needs are met.

Standards

- 5.6(1) Within 30 days of the child/youth coming into care, develop an Interim Care Plan.
- 5.6(2) Within 6 months of the child/youth coming into care, develop a written Care Plan.
- 5.6(3) Review the child/youth's Care Plan at minimum every 6 months or more frequently if circumstances arise that make a review necessary.

Procedures

Developing the Interim Care Plan

- Within 30 days of the child/youth coming into care, complete an initial assessment of their needs and develop an Interim Care Plan, using the Family Plan/Interim Care Plan template ([Form CF0634](#)), that includes:
 - The child/youth's needs that are to be addressed, including the establishment of stable and ongoing living arrangements (including return to parents or extended family);

- Contact with the child/youth's parents, siblings, extended family, community, Indigenous community when a child/youth is Indigenous, and others involved with the child/youth;
- A description of the services required to implement the Interim Care Plan;
- The child/youth's health care needs and appointments;
- Where the child/youth will attend school, including whenever possible, strategies to arrange for the child/youth to attend the same school;
- Maintaining the child/youth's involvement in social, recreational and spiritual instruction and activities.

Developing the Care Plan

Note: The child/youth's Care Plan is a living, working document that remains relevant as the child/youth matures and as their circumstances change. Action-based planning continues throughout the child/youth's stay in care.

Documentation of all aspects of the Care Plan ensures that children and youth in care have a record of decisions made, priorities set and actions taken during the time they are in care.

- Within 6 months of the child/youth coming into care, complete a full assessment of their needs and develop and implement a Care Plan following the domains of the Care Plan template (found in ICM, or using Form [CF2594](#)).
- Encourage and support the child/youth's participation in the development of their Care Plan, as appropriate to their developmental level and ability.
- Assist the child/youth with the development of both short-term and long-term goals.
- Identify and address any barriers to informing and involving the child/youth in case planning and decision making, including:
 - Providing the child/youth with an interpreter or advocate where required;
 - Involving those who can promote a greater understanding of the child/youth's views about cultural, identity or other issues;
 - Providing the child/youth with counselling or other therapeutic interventions or supports if needed to help them cope with information contained in their plan.

- When appropriate and consistent with the child/youth's best interests, invite and support the participation of significant people in their life to develop the Care Plan, including their parents, siblings, extended family and community, members of their Indigenous community if they are Indigenous, their caregiver, advocates, proposed care providers/ caregivers/ adoptive parents, and any other individuals who have a significant relationship with the child/youth (this constitutes the child/youth's Care Team or Circle).
- Once the child/youth's Care Team or Circle is established, arrange a meeting to develop a collaborative understanding of the child/youth's strengths and needs.
- Develop a social and medical family history of the child/youth's natural family (for a sample guide to information that can be collected, refer to the *Birth Family Medical and Social History Forms* [CF2671](#) , [CF2671a](#), and [CF2671b](#)) in order to understand the child/youth's cultural, religious/spiritual, and medical histories and current support system.
- Complete each domain of the Care Plan within the context of the child/youth's age and developmental level.
- Include information in the Care Plan pertaining to the unique needs of Indigenous children/youth in care.
- Review the content of the child/youth's Care Plan, as well as their Life Book and Health Care Passport, and develop a plan to address any outstanding items. (For information about what to include in a child/youth's Life Book, refer to the [Adoption Services Toolkit & Resources.](#))
- For a child/youth in continuing custody who does not have Canadian citizenship, as soon as possible begin the process of applying for Canadian citizenship for the child/youth (obtaining citizenship can be a lengthy process and should be resolved prior to the child/youth leaving care). Fully explain the process to the child/youth and take into account their views and their best interests. (For more information, refer to the [Immigration & Refugee Practice Guidelines and Checklist for Assisting Children in Care.](#))
- Document a response to assessment recommendations, including any referrals that are required, as well as reasons for not following recommendations when appropriate.
- Obtain a supervisor's approval and signature on the Care Plan.
- Obtain signatures, or confirmation of agreement on the Care Plan from those with primary involvement related to implementing the plan.

- The signature of children and youth age 12 and over, with the capacity to understand what they are signing, must be sought once a year. Use discretion for children under 12 depending upon their developmental level and ability.
- Provide copies of relevant sections of the Care Plan to the child/youth and members of their Care Team or Circle. The child/youth's caregiver receives a complete copy of the Care Plan.
- Discuss with the child/youth the confidentiality and safety of their information, and where copies of the Care Plan will be kept.

Reviewing the Care Plan

- Regardless of the child/youth's current type of placement (e.g. Family Care Home, Staffed Residential Resource, Independent Living Agreement, Youth Custody Centre, etc.), review the child/youth's Care Plan (for further information, refer to the Care Plan Practice Guide):
 - At minimum 6 months after a new or annual Care Plan is completed, or more frequently if specified in the Care Plan or if circumstances arise that make a review necessary (such as a significant event occurring in the life of the child/youth);
 - When there is a change in the permanency goal;
 - In preparation for the child/youth leaving care.
- For regular Care Plan reviews, convene a Care Plan review meeting with the child/youth and their Care Team or Circle to:
 - Assess whether the Care Plan is effective in achieving the overall goal, particularly in relation to the child/youth's need for stability and continuity of lifelong relationships;
 - Review whether the services provided are effective in meeting the goals identified in the Care Plan.
- The child/youth's Care Plan can be reviewed in response to developments in their daily life and care, when necessary, without convening a Care Plan review meeting.
- For a child/youth in care by temporary order or agreement, notify the parents of the event or circumstances that prompt a review of the child/youth's Care Plan, and include them in a review of the plan and any resulting changes.
- A review of the Care Plan related to youth justice concerns includes the participation of the youth probation officer. (For more information, refer to

[Assessment and Planning for Young People Involved with Youth Justice Services.](#))

- If required, based on the review, revise the child/youth's Care Plan.
- Reviews and resulting revisions to the child/youth's Care Plan are based on an assesment of their current situation, strengths and needs.
- Obtain a supervisor's approval and signature.
- Keep copies of the child/youth's revised Care Plan in their file.
- Update on ICM the date the child/youth's Care Plan was completed.
- Provide copies of relevant sections of the revised Care Plan to the child/youth and members of their Care Team or Circle.

Annual Care Plan

- Within 6 months after a review of the Care Plan is completed, develop a new Care Plan.
- Each domain assessment should be reformulated for each annual completed Care Plan.

Chapter 5: Children and Youth in Care	
Policy 5.7: Putting the Care Plan into Action	
Effective Date of Policy: June 30, 2017	Amendment Date of Policy: October 1, 2018

Policy Statement

Throughout a child/youth's time in care, actions are taken to meet the objectives set out in their Care Plan to promote the conditions that lead to the best possible outcomes for the child/youth.

Outcomes

- Children /youth's needs are met.

Standards

5.7(1) Complete each domain of the child/youth's Care Plan.

Procedures

Care Plan Domains

Permanency

Note: Children/youth in care who have a number of changes in placement can experience a lack of consistency and predictability, as well as feelings of rejection. The likelihood of a child/youth being placed in a permanent living arrangement decreases with each change of placement that they experience. This could be related to the fact that there is a marked increase in disruptive behaviours in children/youth who experience multiple placement moves.

Note: Refer to Policy 6.2 Developing the Concurrent Permanency Plan for information about the concurrent permanency plan, which is part of the child/youth's Care Plan.

- Develop a plan to fulfill the child/youth's need for stability and continuity of lifelong relationships that identifies the responsibilities of those involved in the case planning for the child/youth to support reunification or consider all other options for care.
- When it is determined that a child/youth will not return to the care of their parents, develop an alternate plan for permanency by:
 - Providing the child/youth's parents, extended family and others who are significant in their life with information about the importance of permanence and stability for the child/youth's development and overall well-being.
 - Involving and seeking input from the child/youth's Indigenous community if the child/youth is Indigenous.
 - Addressing the four dimensions of permanency, including cultural, relational, physical and legal permanency.
 - Collecting information about the child/youth's birth family's history from their parents and/or extended family (for a sample guide to the kinds of information that can be collected, refer to the Birth Family Medical and Social History – forms CF2671, CF2671a, and CF2671b).
 - Considering the child/youth's individual strengths, needs, emotional and developmental levels.
 - Considering the child/youth's Indigenous heritage if the child/youth is Indigenous.
- Document the permanency planning process in the child/youth's Care Plan and review every 6 months, or more often if there is a significant change in their circumstances.

Note: When there is more than one permanency option proposed and there is disagreement about which plan would best meet the child/youth's needs, consider the use of Collaborative Planning and Decision Making with the involved parties.

Note: For older youth who are about to age out of care, if a caregiver or other person who has a significant relationship with the youth is interested in adopting them, it is advisable to arrange the adoption prior to the youth leaving care. Although post-majority adoption is possible, the Director would not be involved. A post-majority

adoption would require the prospective adoptive parent to take responsibility for hiring a lawyer to assist with completion of the adoption.

Identity

Note: Children and youth in care who are from minority groups are vulnerable to racism and discrimination and action must be taken to address circumstances where a child/youth in care experiences harm as a result of racism and discrimination. Depending on the child/youth's circumstances, this may range from educating those involved to taking legal action to address the discrimination.

Respecting and Cultivating a Child/Youth's Culture

- Whenever possible, involve service providers, caregivers and community members who are knowledgeable about and sensitive to the child/youth's views, cultural and ethnic heritage, spiritual beliefs and identity in case planning and the provision of services.
- All planning for Indigenous children/youth takes into consideration the unique history of Indigenous people in this country.
- Provide services and take actions that are sensitive to and respect the views, cultural and ethnic heritage, spiritual beliefs and identity of a child/youth by:
 - Providing services that support the child/youth's understanding of and connection with the culture and community they identify with (including communities supporting gender identity, gender expression, and sexual orientation);
 - Exploring the possibility of the child/youth's family, extended family, friends, community and cultural groups or organizations providing cultural resources for the child/youth;
 - Placing the child/youth, whenever possible, with extended family or within the same cultural community. For further information, refer to Policy 3.5, Less Disruptive Measures and Placement Decisions under Removal and Custody Orders;
 - Placing the child/youth with a caregiver who has or is willing to develop an understanding of and sensitivity to the child/youth's cultural, racial, religious heritage, or otherwise identified community, and is willing to support ongoing contact with members of the child/youth's community, when it is not possible to place the child/youth within their extended family or community;

- Providing the caregiver with information about the child/youth's cultural heritage. For more information, refer to Policy 5.4: Providing the Caregiver with Information;
 - Providing the services of a language and/or cultural interpreter to assist in assessment, planning and service delivery, when necessary and appropriate.
- Support a child/youth in care in understanding and cultivating their heritage, spiritual beliefs and identity by:
- Determining the child/youth's heritage and history;
 - Providing the child/youth with information about their heritage and identity in a manner appropriate to their developmental level;
 - Identifying and involving someone from the child/youth's community or cultural group to be the child/youth's cultural contact or mentor;
 - Encouraging and providing opportunities for the child/youth to participate in the cultural and religious instruction and events of their choice, as well as assisting the family to understand the child/youth's right to make those choices, when there is conflict or misunderstanding;
 - Including the child/youth's caregiver in these opportunities with the child/youth when it is appropriate to do so.

Gender Identity, Gender Expression and Sexual Orientation

- Respect and acknowledge a child/youth's sexual orientation, gender identity and preferred gender expression, when planning with and for them.
- When considering a placement for the child/youth, ensure that the child/youth:
- Is consulted about placement decisions;
 - Is placed in an environment where their gender expression and preferences will be respected and affirmed.
- Transgender children/youth should not automatically be placed according to their sex assigned at birth; they should be placed according to where they feel most comfortable, often (but not always) in accordance with their gender identity.

If a Child/Youth in Care is being harmed by Racism or Discrimination

- If a child/youth in care is being harmed by discrimination or racism, including disrespect for or discrimination based on the family's circumstances or the child/youth's gender identity, take action by:

- Validating the child/youth's experience by acknowledging the event or situation and the potential trauma it causes;
 - Seeking specialized services if required to reduce or mitigate the trauma;
 - Educating the child/youth about discrimination and racism;
 - Educating the child/youth about the history and strengths of their culture;
 - Educating the caregiver about steps they can take to address the discrimination and racism experienced by the child/youth;
 - Making a formal report or application to end the discrimination, when available; e.g., Human Rights complaint; threat assessment when a school is involved.
- Where it appears that a child/youth may have been a victim of a crime because of their race or identity, consult with and report the matter to the police.
 - In situations where there are allegations of discrimination or racism on the part of the caregiver, a quality of care review is conducted. (For more information about a quality of care review, refer to the [Quality of Care Protocols \(MIS\)](#)).
 - In circumstances where a child/youth has been harmed by discrimination or racism, consult with and involve those who may play a role in addressing and ending racism or discrimination, including:
 - Public Guardian and Trustee of British Columbia: <http://www.trustee.bc.ca/>
 - British Columbia Human Rights Tribunal: <http://www.bchrt.bc.ca/>

Developing a Life Book

- When it is determined that the child/youth is likely to remain in care for more than 6 months, begin to develop a Life Book for the child/youth to:
 - Provide an opportunity to connect in a meaningful way with the child/youth;
 - Produce an important record of the people, events and milestones in the child/youth's life during the period in care, giving them a sense of personal history and continuity. Refer to the [Foster Family Handbook](#) for detailed information about the development of a Life Book.
- Maintain the child/youth's Life Book jointly with the child/youth and their caregiver.
- Ensure that the child/youth's Life Book goes with them whenever there is a change in placement, and when the child/youth leaves care.
- Make a copy of the child/youth's Life Book before any change in placement and before the child/youth leaves care, in order to ensure that the contents are not lost.

Health

Determining the Child/Youth's Initial Health Care Needs

- Determine whether the child/youth has approved medical coverage. For information regarding medical, dental and optical coverage for children/youth in care, refer to [Health Supports for Children in Care and Youth Agreements](#).
- Determine whether an Indigenous child/youth is registered under the *Indian Act* in order to establish the benefit amounts to which they are entitled.
- Identify the child/youth's primary physician. Ideally this is a physician already in place and identified by the child/youth's parents. If there is no primary physician in place, and if the plan may be for the child/youth to eventually return to their family, consider the family's location when identifying a primary physician for a child/youth in care.
- An initial medical exam is completed at the time the child/youth comes into care. The medical exam is completed by the child/youth's primary physician whenever possible, within 24 hours if neglect or physical abuse is suspected or evident, and within one week in other instances.
- Complete the child/youth's permanent medical record, using Form [CF1606: Child's Permanent Medical Record](#).
- Although the use of walk-in clinics may be necessary at times, it is preferable for children/youth to receive care from a primary physician in order to work towards consistent follow up and complete medical records. If a walk-in clinic is used on occasion, advise the caregiver to request that a report be sent to the child/youth's primary physician.
- If a youth seeks medical assistance independently, encourage them to see their primary physician or, if they attend a walk-in clinic, to request that a report be sent to the primary physician.
- The child/youth's caregiver is informed about and prepared for any medical condition that may result in an emergency (keep in mind confidentiality considerations under Section 79 of the CFCSA, where information about a child/youth can be disclosed only in certain circumstances, including that it is necessary to ensure the safety or well-being of the child/youth and/or others).
- Consult with the child/youth, in a manner appropriate to their developmental level, as well as their parents, primary health care provider, and caregiver to determine:

- The child/youth's current health status, including medical and dental history, vaccinations, allergies, health concerns and physical or developmental disabilities;
 - The child/youth's current and future health care needs, and how those needs will be addressed;
 - Specific responsibilities of those involved in planning to assist in meeting the child/youth's health care needs and objectives.
- Continue to monitor the child/youth's health care needs through active involvement and coordination of services, and through Care Plan reviews that include continual assessment of the child/youth's health care needs and objectives.
- When a worker is aware that a child or youth in care is at risk of an overdose or has overdosed:
- Ensure immediate health and safety of the youth is addressed;
 - Ensure youth and their caregiver are trained and obtain a naloxone kit;
 - Discuss with youth and caregiver the risks of non-medical opiod use, how to connect with local health authority or community substance use services clinic, and the benefits of connecting with a substance use practitioner;
 - Provide youth and caregiver with fact sheet on opiod awareness and information on how to access/refill naloxone kits; and
 - Ensure an adequate plan for safety is in place and documented (including harm reduction planning).
 - Refer to [Opiod Use – Working with Youth and Parents Using Illegal Opiods](#) for more information.

When Additional Assessments are required to address the Child/Youth's Health Care Needs

- When it is indicated that a child/youth requires additional or higher level assessments:
- Referrals are made in a timely manner;
 - Relevant information is shared with the person conducting the assessment;
 - The child/youth is accompanied to scheduled appointments by their worker, caregiver or other appropriate adult;

- When the assessment is complete, review information and attend any meetings scheduled for the purpose of reviewing the assessment to obtain clarification of information and/or recommendations as required.
- Consider the issues identified in assessments related to the child/youth's physical or mental health during the Care Plan process and address assessment recommendations.
- When an assessment recommendation is not followed or addressed, document the reasons for this decision.
- When a child/youth is diagnosed with special needs, indicate this in their Care Plan and make appropriate referrals for specialized services.

Addressing the Child/Youth's Ongoing Health Care Needs

- Arrange regular medical exams for the child/youth, with the exception of those referred to in the *Infants Act* who do not consent, using the following schedule (as recommended by the Canadian Paediatric Society):
 - for infants and toddlers: at 2, 4, 6, 9, 12, 18 months, and 2 years;
 - for children 2 to 4 years of age: every year;
 - for children/youth 5 years of age and older: every one or two years; and
 - more frequent attention as recommended by the child/youth's physician.
- Arrange regular dental exams for the child/youth every six months, beginning at age three, unless the child/youth's dentist recommends that they occur more frequently.
- Arrange annual optical exams for the child/youth by a qualified ophthalmologist or optometrist. Routine eye examinations are covered for those children/youth 18 years of age and under.
- Children/youth in care have their hearing tested as recommended by the BC Early Hearing Screening Program or when language development or hearing is in question.
- All information about the child/youth's medical, optical, dental and hearing care is documented in their Care Plan and Health Care Passport. (The Health Care Passport, Form CF 2601, is available as a hard copy booklet from the Distribution Centre.)
- Update the Health Care Passport with the caregiver, and ensure that it follows the child/youth whenever there is a change in placement.

- For additional information about health care, optical and other supports refer to: [Health Supports for Children in Care and Youth Agreements](#).
- For additional information regarding dental care refer to: [Dental Benefits for Children in Care and Youth Agreements](#).
- Arrange a medical exam for children/youth who are about to leave care, with the exception of those referred to in the *Infants Act* who do not consent, prior to their leaving care. All documentation on the child/youth's Health Care Passport is up-to-date.

Decision Making About Health Care for Children/Youth

- Decision making about health care for the child/youth is determined by:
 - The capability of a child/youth to consent to their own health care;
 - The scope of the Director's guardianship authority, duties and responsibilities;
 - The capability of the child/youth's parents to consent to health care when the child/youth is not capable of providing consent.
- Make every reasonable effort to ensure that a capable child/youth's decisions about their own health care are made voluntarily.

Note: Section 17 of the Infants Act gives children/youth the right to consent to health care if the health care provider is satisfied that the child/youth understands the nature and consequences of the health care, and has determined that the health care is in the child/youth's best interests. This does not mean that parents, guardians and caregivers are not involved in discussions and decisions about the child/youth's health care. What this means is that health care providers have an obligation to ensure that children/youth are included in discussions about their own health care, that they understand what is going to happen and are asked, when appropriate, whether or not they agree. Furthermore, health care providers must provide confidential health care to a child/youth who requests it, if the health care provider is satisfied that the child/youth has the capability to look after their own health care needs and has determined that the health care is in the child/youth's best interests.

- When there are doubts about the child/youth's capability to consent:
 - Consult with the child/youth, to the fullest extent possible, and their Care Team or Circle about having an assessment of their capability completed;
 - If it is agreed that an assessment of the child/youth's capability is warranted, arrange for an assessment by a physician to determine

whether the child/youth understands the nature, consequences and reasonably foreseeable benefits and risks of the proposed health care;

- Request that the assessment take into consideration the child/youth's cultural and religious heritage;
 - If the child/youth is not willing to be assessed for capability, if the Director is considering making an application under Section 29 of the CFCSA, consult first with the health care provider and request that the matter be referred to the ethics committee of the local health authority or hospital for review and recommendation about the proposed treatment.
- When a child/youth who is assessed as capable refuses health care that a physician indicates is in the best interests of the child/youth, facilitate a discussion among those persons involved in making decisions about the child/youth's care in order to reach a resolution of the issues.
- Those involved in making decisions about their care may include:
- The child/youth;
 - Members of the child/youth's immediate and extended family;
 - Other workers involved with the child/youth;
 - Caregiver(s);
 - Health care providers, including physicians, nurses, specialists or others;
 - Representatives of the child/youth's Indigenous community, if the child/youth is Indigenous;
 - Any other significant persons identified by the child/youth.

Note: Section 29 of the CFCSA qualifies the child/youth's right under Section 17 of the Infants Act to consent to or refuse medical treatment. Section 29 applies when a child/youth that is assessed capable of giving consent, or the guardian of an incapable child/youth, refuses to give consent to health care that, in the opinion of two medical practitioners, is necessary to preserve the child/youth's life or to prevent serious or permanent impairment of the child/youth's health. Under Section 29, the court may make an order authorizing the necessary health care. Although the court may authorize the necessary health care, no court has the authority to order or compel a medical practitioner or other health care provider to perform a medical procedure. Therefore, prior to making an application under Section 29, it is important to determine that the health care provider will perform the necessary medical procedure – if authorized to do so by the court – even when faced with a continued refusal from the child/youth and/or their guardian.

Decision Making About Immunization

- Children/youth in care receive regular immunizations using the basic schedule and record of immunization that is included in the Health Care Passport.

Note: In accordance with Sections 47 or 50 of the CFCSA, a director generally has authority to consent to immunizations of a child/youth in the director's custody. An exception is where, respecting a child/youth subject to the temporary custody of the director, a court has specifically ordered that a parent retains the ability to consent to health care for a child/youth. Under Section 94 of the CFCSA, a director may authorize a caregiver to carry out any of the director's rights and responsibilities – including the ability to consent to such health care for a child/youth as standard immunizations. If no custody order under the CFCSA has yet been granted but the child/youth has been removed from the family home, the director may consent to necessary health care for the child/youth only if, in the opinion of a health care provider, the health care should be provided without delay. When a child/youth is in care by agreement, their parent normally retains the right to consent to health care, including immunizations. An important caveat to all of this is that, under Section 17 of the Infants Act, an older child/youth may have the legal right to consent, or not, to their own health care, including immunizations.

Managing Critical Health Care Issues

- When a child/youth in care who is terminally ill or who suffers from a potentially life-threatening medical condition:
 - The situation is reported to the Director;
 - The child/youth, their parents and/or caregiver are fully informed about the child/youth's medical condition, the nature of any proposed health care and the consequences, risks and benefits associated with the proposed health care;
 - Determine the scope of the Director's role and authority in making health care decisions for the child/youth;
 - When there are doubts about the child/youth's capability to consent, the child/youth has access to a formal capability assessment;
 - Facilitate a structured discussion with the child/youth and/or their parents about advance health care directives, when appropriate;
 - A documented health care plan is developed for the child/youth, which includes:
 - A determination of their capability to consent to their own health care;

- The Director's role, as well as the role of the child/youth's parents, in making health care decisions on behalf of the child/youth;
- Any critical health care decisions, including any advance health care directives, agreed upon with the child/youth and/or their parent(s);
- For further information, refer to [Managing Critical Health Care Decisions](#).
- In situations involving placement of hospitalized high-risk or medically fragile children/youth, make certain that:
 - There is a discharge planning meeting before the child/youth leaves the hospital that includes a plan for ongoing medical care, as well as training, support and supervision of the caregiver in providing for the child/youth's daily needs (for more information, refer to the [Protocol Agreement Regarding Children's and Woman's Health Centre of BC and MCFD: Roles and Responsibilities for Collaborative Practice](#));
 - The child/youth's caregiver, as well as the child/youth's parents when appropriate, are in attendance at the discharge planning meeting;
 - The child/youth's health care plan is reviewed at least every six months.

Death of a Child/Youth in Care

- The death of a child/youth in care must be reported to the Director immediately. For detailed information, refer to [Reportable Circumstances Policy](#).
- For information about when a child/youth in care dies, refer to [Death of a Child in Care, Including Burial Services and Organ Donation](#).

Behavioural Development

Understanding a Child/Youth's Context for Behaviour

Note: Research and experience indicate that behavioural and emotional problems are prevalent among children/youth in care. Often they are manifestations of emotional stress or predictable reactions to disruptive events in their life. A trauma informed response is empathetic, informed and thoughtful in order to reduce or eliminate systemic trauma that could intensify the child/youth's emotional and/or behavioural problems. The building of a trusting relationship with the child/youth can result in a positive connection to help counteract challenging behaviours. (For more information about trauma informed practice, refer to the document entitled Healing Families, Helping Systems: A Trauma-Informed Practice Guide for Working with Children, Youth and Families, using the following link:

<http://www2.gov.bc.ca/gov/content/health/managing-your-health/mental-health-substance-use/child-teen-mental-health>)

- Determine whether a child/youth has persistent emotional and behavioural challenges.
- Provide the child/youth's caregiver with the appropriate level of preparation, guidance, support and respite to be able to provide a consistent and nurturing care experience for the child/youth.
- Collaborate with the caregiver's resource worker to support the caregiver to meet the needs of the child/youth.
- Arrange for the child/youth to receive effective treatment and therapeutic support to address their persistent emotional and behavioural problems. For Indigenous children/youth, this may include the involvement of traditional healers or Elders within the child/youth's Indigenous community.

Informing the Child/Youth about Behavioural Expectations and Consequences

- Consistent with section 70 of the CFCSA, ensure that the child/youth is informed about:
 - The standard of behaviour expected by the caregiver;
 - The consequences of not meeting the caregiver's expectations;
 - Ministry standards regarding behaviour management practices.

Behaviour Management

- Caregivers are provided with guidance and training that promote positive behaviour management practices, including actions that:
 - Are motivated by the desire to assist the child/youth to learn responsibility and self-control;
 - Are reasonable and relate to the nature of the behaviour;
 - Model respectful behaviour;
 - Do not compromise the child/youth's rights or treat the child/youth's rights as privileges;
 - Respond to the behaviour as promptly as possible;
 - Are based on praise, encouragement and structuring of the environment for success in meeting appropriate developmental objectives, whenever possible;
 - Recognize the child/youth's strengths.

- There are specified behaviour management practices that are expressly prohibited, including, but not limited to:
 - Deprivation of a child/youth's basic rights or needs, such as food, clothing, shelter or bedding;
 - Physical discipline, such as spanking, shaking, slapping or hitting;
 - Degrading actions, such as humiliation and ridicule;
 - Restraint, other than for the immediate physical safety of the child/youth or others, after all other available procedures and techniques have been proven ineffective, and only for the brief time necessary to keep the child/youth or others safe;
 - Seclusion (not including time out) or confinement;
 - Assignment of unreasonable exercise or work that may be excessive or harmful to the child/youth;
 - Threats of removal from the care setting in order to manipulate or coerce the behaviour of the child/youth;
 - Arbitrary or unauthorized denial of visits, telephone contact or correspondence with family members or guardians;
 - Application of consequences in situations where it is not certain that the child/youth's behaviour has warranted them;
 - Being disciplined by another child/youth who has not been designated as a temporary caregiver;
 - Coercive behaviour by the caregiver(s) regarding their religious or personal beliefs.
- For more information about the use of restraint and/or seclusion, refer to Policy 5.13: *Restraint and Seclusion Regarding Children and Youth in Care*.

Education

Assessing the Child/Youth's Learning Needs

- Within 30 days of the child/youth coming into care, meet with their school and include the child/youth and their caregiver, and parents if appropriate.
- Develop an initial plan, which may include but is not limited to:
 - Assessments;
 - Educational supports or other activities to support the child/youth through their transition to care;
 - How contact and communication will be facilitated.
- Assess the child/youth's learning needs by:

- Gathering information from relevant sources, including the child/youth, their family, school, day care, preschool, family physician and/or pediatrician, caregiver, Indigenous community and any others with direct knowledge of the child/youth's abilities and needs;
 - Arranging for the child/youth to be evaluated by a qualified professional if there are any concerns or indications that they may have a learning difficulty for which they will need additional support.
- Consult with school staff to determine whether the child/youth requires an Individualized Educational Plan (IEP).
 - If necessary services are not available within the school system, consult with a supervisor to determine whether obtaining services outside of the school system would be the best plan for the child/youth.

Preparing for the Preschool Aged Child's School Readiness

Note: Research indicates that early childhood development that supports children's school readiness helps them become successful in school. Day care and preschool can be supportive tools to assist children to become school ready. Consideration should be given to the child's need for nurturing and attachment with the primary caregiver when determining the use of these programs. Day care and preschool programs can provide continuity for young children who are already involved in programs or who will continue after their time in care. However, if a child is experiencing many changes, the addition of a new program could be overwhelming to them and could negatively impact their connection with the caregiver.

- If it is determined that the child would benefit from attendance in a program to address their developmental needs, explore with the caregiver and Indigenous community (if the child is Indigenous), the child's participation in an early childhood development program.
- Consider the views of the child and their family, as well as the cultural context of available programs when determining whether to enrol the child in a particular program.
- Children in care are eligible for preschool and child care program funding through the ministry's [Child Care Subsidy Program](#).
- If the cost of a program is more than the subsidy allowance provides, determine how those costs will be covered prior to the child's attendance in the program.

Note: Research indicates that many children/youth that come into care have not had the opportunity for highly interactive early childhood stimulation, which promotes competence and interest in learning. Others may have fallen behind, have learning difficulties, behavioural and emotional problems, or a sense of hopelessness that blocks their ability to achieve their potential in school. These children require additional assistance and support if they are to be successful in school.

Planning for the School-Aged Child/Youth's Education

- Depending on the child/youth's age and in accordance with their Care Plan:
 - Ensure that they are enrolled in a government-accredited school, vocational or skills training program, or specialized educational program that meets the child/youth's individual needs;
 - Have regular contact with the school and participate in school meetings. For information about information sharing with the school, refer to the [Joint Educational Planning and Support for Children and Youth in Care: Cross-Ministry Guidelines](#);
 - Encourage and provide opportunities for the child/youth to participate in school activities, outings and extracurricular programs that will enhance learning and promote acquisition of academic and social skills;
 - Ensure that the school has an Individualized Educational Plan (IEP) for the child/youth if they have been assessed as having special learning needs;
 - Arrange for the child/youth to receive additional educational supports in order to address their learning needs, when recommended by the school or other professional, or when requested by the child/youth.

- Whenever possible, support children/youth to remain in the same school they attended before the current placement, in order to ensure continuity, minimize disruption in their education and promote relational and physical permanency.
- A change in school is only considered when there is no other reasonable option or when the Care Team or Circle determines that the child/youth will benefit from a change in school environment.
- When a change of schools is necessary, contact the current and new schools to help facilitate a smooth transition for the child/youth, and to ensure that school records and other important information is transferred to the new school.
- Address specific issues as they arise, such as prolonged absence or lack of achievement, in collaboration with school staff and the child/youth's caregiver as part of the child/youth's Care Team or Circle.

- Review the education program for the child/youth at least twice annually and document in the Care Plan.

Note: Supporting educational success, including meeting with school personnel, requires active involvement from the worker, the caregiver and others who are significant in the child/youth's life. Research indicates that high expectations and support are linked to higher student achievement.

Planning for the Education of Youth Transitioning to Adulthood

- In accordance with the youth's Care Plan, determine with the youth their education and vocational goals, as well as the services and supports that can be provided to assist with their education or vocational development.
- Determine with the youth whether a specialized education program or service is required to best meet their potential and goals. Options can include, but are not limited to:
 - Tutoring;
 - Apprenticeship programs;
 - Industry programs;
 - Alternate education programs;
 - Home schooling;
 - Indigenous education programs;
 - Accelerated programs;
 - Challenge programs;
 - Other individualized programs, including government accredited independent schools.
- After the youth's 16th birthday and prior to their 19th birthday, advise them about the services and supports that may be provided through an Agreement with Young Adults, how to apply for an agreement, and provide assistance in preparing to apply for an agreement.
- For youth who plan to complete high school, plan with them to participate in graduation activities with their classmates.
- During the youth's Grade 11 year, begin to make a plan about how graduation expenses will be covered.
- For youth in care under the age of 19 years who are planning to attend post-secondary education or training, refer to the Practice Directive: [Post-Secondary Supports for Children in Care or on Youth Agreements](#).

- For youth with special needs who are or may be eligible for adult services from Community Living BC, follow the transition planning protocols and begin the process when the youth is at least 14 years of age. Information about transition planning for children and youth with special needs can be found in Policy 5.11 Supporting Transition Planning for Youth in Care with Special Needs.

Note: While secondary school graduation is an important goal for many children and youth in the community, plans for children/youth in care should be individually developed according to their interests and goals. Individual plans may include a focus on trades, functional skills and other post-secondary education or training options. It is important that graduation from secondary school and/or other education programs are recognized as important milestones in a youth's life.

Note: Financial assistance and support services are available for youth who have reached the age of majority and want to continue their education:

- *Agreements with Young Adults are available for young people from 19 years of age up to turning 26 years of age, and who are formally in care or on a Youth Agreement on their 19th birthday, to continue their education, get job training, or take part in a rehabilitative program.*
- *The [Youth Education and Assistance Fund](#) (YEAFF) provides grants for post-secondary education for young people age 19 to 24 years who have been in care and are attending university.*
- *Several post-secondary institutions across BC have established tuition-waiver programs to support young people who are currently or formerly in care, in order to help them pursue post-secondary education.*
- *Additional information regarding post-secondary supports for children/youth in care or formerly in care, including the following resources:*
 - [Post-Secondary Supports Eligibility Chart](#);
 - [Post-Secondary Financial Support Process for Youth/Young Adults in Continuing Care](#).

Further information about these supports services can be found on the Youth Transition Services web page:

<https://intranet.gov.bc.ca/mcfd/content?id=F81276A36FB648F8B96E7B0628E06CE9>

Risk/ Threat Assessment for Children/Youth with Behavioural Issues

Note: Children/youth in care may have difficulty functioning within the regular school system due to the impact of trauma and/or specific behavioural or medical issues.

- When it is determined that a child/youth poses a risk to school staff or other students, work with the Threat Assessment Team in the child/youth's school district to respond to the immediate situation. For information about threat assessment and intervention used by the Ministry of Education, refer to the document [When Words Are Not Enough](#)
- Consult with a Child and Youth Mental Health Clinician or other behaviour management specialist to determine the best supports and interventions for the child/youth.
- If necessary, consider alternatives to in-school education programs in order to accommodate the child/youth's behavioural, medical or trauma related needs and to ensure the safety of others.
- Assess the immediate safety of the child/youth's caregiver and family members to determine whether increased intervention is needed.
- Develop a plan to meet the child/youth's education needs while protecting their safety and well-being, as well as the safety and well-being of others around them.

Social/Recreational Activities

Research has shown that hobbies, sports activities and other recreational and social activities are important in promoting skills and interests that enhance the child/youth's cognitive, social and physical development, and can lead to a sense of accomplishment and competence. Social and recreational activities can include lessons, clubs, camps, hobbies, sports, artistic pursuits and activities organized by a school, club, association, or a geographical, cultural or religious community.

Children/youth in care have the right under Section 70 of the CFCSA to participate in social and recreational activities if available and appropriate and according to their abilities and interests.

Signing permission forms for routine school activities:

Note: Guardianship workers are no longer required to send Indemnity forms to the Risk Management Branch of the Ministry of Finance for approval.

- Caregivers sign required permission forms allowing the child/youth to participate in routine school activities, including forms that include waivers and indemnities, unless
 - the activity is considered to be a high risk activity (see information below),
 - the activity is potentially inappropriate for the particular child/youth, and/or
 - the caregiver has concerns about signing a form.

- If the caregiver does not sign a required permission form to permit a child to participate in routine school activities, the caregiver must bring the form to the attention of the child's/youth's guardianship worker as soon as possible so that they can determine whether to sign the form prior to the activity taking place.

Note: Caregivers are insured against liability under the Master Insurance Program, and section 101 of the Child, Family and Community Service Act that states that no person, including foster parents, are personally liable for anything done or omitted in good faith in exercising a duty or function under the Act.

- Parental consent may be needed for a child or youth in care under a Voluntary Care Agreement or a Special Needs Agreement depending upon the terms of the agreement.
- Parental consent respecting a child or youth in care under an Interim or Temporary Custody Order may be needed if the Provincial Court has ordered, as permitted under s. 47(3) of the CFCSA, that the parent retains the ability to make necessary decisions about the child's education and religious upbringing (This is an unusual circumstance.)
- Guardianship workers advise caregivers of situations when parental consent is required.
- See table below for a summary of who has authority to sign permission forms:

Legal Status	Routine School, Social/Recreational Activities	High Risk Activities
In care by agreement (VCA, SNA)	Caregiver (unless parent retains this responsibility under the agreement)	Guardianship worker (unless parent retains this responsibility under the agreement)
Removal	Caregiver	Guardianship worker, but should involve parent wherever possible
Interim and Temporary Custody of the Director (TCO)	Caregiver	Guardianship worker

Continuing Custody of the Director (CCO)	Caregiver	Guardianship worker
Out of Care order or agreement (EFP)	Out of care care provider	Out of care Care provider

- Before signing permission forms, including waivers and indemnities, care givers and guardianship workers consider:
 - The level of risk of the activity;
 - Congruency with the child/youth’s care plan;
 - The child/youth’s views, ability to participate and interest in the activity;
 - The quality and nature of supervision;
 - Whether the activity will help support the positive development of the child/youth’s cultural identity;
 - How the activity fits in with other scheduled activities and daily routines in the child/youth’s life;
 - Whether the activity may interfere with family relationships and contact with family members with the child/youth;
 - Transportation requirements to and from the activity and the ability of the caregiver to meet those requirements;
 - The cost of the activity and availability of funding.
 - Recommendations for safety relating to each sport or activity the child/youth participates including:
 - [Canada Safety Council](#) recommendations on a variety of sporting and leisure activities;
 - RCMP requirements in [Firearm Users Younger than 18](#); and
 - Provincial information on [Off-Road Vehicle Safety](#).
 - If the child/youth has the necessary equipment to safeguard against accidents or injuries.
 - If the child or youth has the necessary qualifications or licenses required for the activity, and if child or youth receives proper instruction if they have not participated in the activity previously.
 - If the child/ youth knows what to do in an emergency.

- When necessary, contact applicable organizations and agencies for information to assist in an assessment of the level of risk associated with a non-routine activity.

- For a child under an EFP agreement or an out of care court order, indemnity forms are signed by the child's out of care care-provider, not by an MCFD or DAA delegated worker.

Signing permission forms for other types of recreational activities:

- Permission forms including waivers and indemnities for non-school routine activities can also be signed by foster parents unless the activity is considered to be high risk or the foster caregiver has concerns about signing.

High Risk Activities:

- Because some activities have a higher degree of risk associated with them, the decision about a child/youth's participation is made by a child/youth's guardianship worker considering the information outlined above for routine school activities and information included under the heading 'Assessing Risk'.
- Examples of activities considered to be higher risk include but are not limited to, the following:
 - Scuba diving
 - Snowmobiling
 - Horseback riding
 - Riding on or driving motor bikes, scooters, motor cycles, all terrain vehicles (ATVs)
 - Shooting - see information below
 - Hunting - see information below
- In addition to the criteria outlined above regarding participation in routine activities, consider the following when assessing risk for the child's/youth's participation in non-routine activities:
 - The adult operator's safety record for the activity,
 - The degree of supervision to be provided during all periods of activity and rest,
 - The ability of the service provider's staff to handle a crisis,
 - The mode of transportation to be used to take the child/youth to and from the activity,
 - Whether the equipment to be used meets current standards established for its use,

- The staff's demonstrated qualifications to perform their particular part of the proposed activity,
 - The participant's requirement for specialized training and/or certification before participating, and
 - Whether emergency procedures are in place.
- Contact applicable organizations for information that might help in the risk assessment or strategies to reduce the level of risk associated with a non-routine activity, including, but not limited to the:
- Ministry of Children and Family Development Manual of Standards and Policies for Outdoor and Wilderness Activities
 - British Columbia Camping Association that accredits camps in accordance with their standards and provides information on various camps
 - Outdoor Recreational Council of British Columbia
 - Horse Council of British Columbia
 - Canadian Equestrian Federation,
 - British Columbia Snowmobile Federation
 - National Boating Safety School
 - Off-Road Vehicle Act
- When determining whether or not a child/youth participates in an activity considered to be high risk:
- Review all of the available information about the activity and consider the relevant information outlined in this guideline,
 - Include the child/youth according to their age and stage of development in discussions about their involvement in the activity,
 - Educate the child/youth about the possible consequences of their involvement, including, when appropriate, the involvement of other professionals who may provide information and advice,
 - Recommend whether or not the child/youth can participate based upon their best interests and cultural needs,
 - Discuss the recommendation and supporting reasons with your supervisor, and
 - Make a decision with your supervisor.
- Consult with your Director of Operations or DAA equivalent position if there is difficulty in determining whether or not the child/youth participates in an activity.

- If the child/youth's guardianship worker is not available and a decision is required, the worker's supervisor in consultation with the child/youth's caregiver makes the decision.
- Advise the child/youth and caregiver of the decision and the reasons for it.
- Document all meetings, discussions and/or steps that led to the decision as well as the decision making process in ICM.
- If a caregiver or a child/youth in care disagrees with the decision and a resolution cannot be made in discussion with the guardianship worker or supervisor, discuss the issue with the involved Director of Operations or the DAA equivalent position.
- If the issue remains unresolved, offer cooperative planning and decision making processes.
- Keep copies of signed permission forms, including waivers and indemnities on the child/youth's file.

Giving Consent for Other Activities:

- For situations that are outside of typical social or recreational activities, but require a worker's consent:
 - Educate the child/youth about the consequences of such an action, including, when appropriate, the involvement of other professionals who may provide information and advice;
 - Make a decision based on the child/youth's best interests and cultural needs.

Hunting by non-Indigenous children:

- Children/youth in care must be 14 years old to hunt. Before a child/youth in care is allowed to participate in hunting activities, the child/youth's mental, emotional and behavioural capabilities must be fully assessed by the guardianship worker.
- Written approval to participate in hunting must be received from the child/youth's guardianship worker before permission is given.
- Children in care by agreement or in temporary custody must have written permission from their guardians to hunt, while those in continuing custody must have their guardianship worker's approval.

Note: In British Columbia, individuals must be over 19 to apply for a licence to own a firearm. Youth in care who hunt generally use firearms owned by a foster parent or lent by a parent. All firearms and ammunition in a foster home must be securely stored

according to the rules of the firearms acquisition permit and in accordance with Standard E.2.21 of the [Standards for Foster Homes](#).

Indigenous right to harvest fish and game:

- Hunting and/or fishing for sustenance supports traditional diets and is considered a key aspect of many Indigenous cultures. In connecting an Indigenous child/youth in care with their culture, a guardianship worker may support the child/youth's engagement in hunting or hunting-related activities if the guardianship worker determines that the Indigenous child/youth in care will be safe while participating in a hunt.
- Before providing consent for an Indigenous child/youth to go hunting, the child/youth's guardianship worker confirms that:
 - The child/youth will be under the close supervision of a responsible person who is exercising their inherent Indigenous right to harvest fish and game for traditional, ceremonial and food purposes or who holds a valid hunting or firearms license;
 - The child/youth expresses an interest in participating in the hunt; and
 - The child/youth's level of participation in the hunt is based on their abilities, understanding of the cultural relevance, and competencies related to safety.

Definitions:

Waiver: *An intentional relinquishment or abandonment of a right to sue for damages. In signing the waiver, the caregiver or guardianship worker (on behalf of the ministry) is:*

- *acknowledging that there is inherent risk in the activity, and*
- *agreeing that a child in care can participate despite the risk, and*
- *agreeing not to sue the organization for damages resulting from the child/youth in care's participation.*

Note: A waiver does not protect an organization from being sued as a result of outright negligence.

Indemnity: *Security against hurt, loss or damage, or exemption from incurred penalties or liabilities. A promise to compensate anyone who suffers a loss caused through a child's act or default. In signing the indemnity, the caregiver or social worker (on behalf of the ministry) is promising that the government will pay for damages to property or suffered by another participant caused by, or resulting from the participation in the activity of, a child in care.*

Self-Care and Independence Skills

Note: Many children and youth growing up in their own families learn to be independent, responsible adults by gradually being given more responsibility as they mature. Children and youth in care need additional training and support because they are more likely to leave their caregiver's home at an earlier age than children/youth growing up in their own families, sometimes without the same network of family support.

- Children/youth learn independence skills throughout their time in care, based on age and level of maturity, from the time they are young.
- By the time the child/youth is 14 years old, preparation for independence should be well underway regardless of which permanency options are being considered.
- Support the child/youth to gradually take increased responsibility for aspects of their life, according to their capabilities.
- Consistent with the child/youth's Care Plan, regularly assess their capacity for successful living in the community and develop plans to build on their strengths and address the vulnerabilities identified:
 - According to the child/youth's developmental level;
 - By involving the child/youth's Care Team or Circle.
- Seek the child/youth's views about their goals for the future, both short-term and long-term, and the level of support and kinds of services that would assist them in achieving their goals.
- Ensure that the child/youth's Care Plan identifies the services that will be available to enhance their self-care skills and knowledge within each of the Care Plan domains.
- Work collaboratively with others who are involved with the child/youth to prepare them for independence:
 - Through an ongoing process of building and assessing the child/youth's independent living skills, and providing education and opportunities to exhibit those skills;
 - By establishing and strengthening the child/youth's connections with family, extended family, friends, community, as well as informal and formal supports.
- For youth who are 16 years of age and older, consider a referral for a Youth Transition Conference where available.
- For youth who will be in the continuing custody of the Director until they turn 19 years of age, ensure that they are aware of the support and services available to

young people who have been in care, and know how and when to apply for those services. (For more information, see [Youth Transition Services](#).)

- Support the youth's development of independence skills in a manner appropriate to their developmental level. The [Skills Guide for Self Care and Independence Skills](#) is a useful resource to assist with this.

Drivers' Licenses for Youth in Care

- When a youth in care wishes to obtain a driver's license:
 - Assess their level of emotional maturity and stability to determine whether they demonstrate the ability to be a safe driver if properly trained;
 - Determine whether they are willing to take a driver's training course.
- When a youth applies for a learner's license or a driver's license:
 - Accompany them to the local Motor Vehicle License Office;
 - Ensure that they have the required identification;
 - Provide identification, including letter of delegation, to indicate guardianship and consent.
- The Director may contribute to the cost of the youth obtaining a driver's license and the driver's training course, depending on the circumstances of the youth.
- If the youth is in continuing custody and is employed, discuss with the youth about an appropriate amount for them to contribute toward the costs.
- If the youth is in care by agreement or under a temporary custody order, discuss with the parents and the youth about an appropriate amount for the youth and, if appropriate, the parents to contribute toward the costs.
- The purchase of motor vehicle insurance is the responsibility of the youth, not the Director or the youth's caregiver, and requires the worker to provide consent for youth under the age of 18 years.

Chapter 5: Children and Youth in Care

Policy 5.8: Supporting and Assisting a Child/Youth with a Change in Placement

Effective Date of Policy:

June 30, 2017

Amendment Date of Policy:

October 1, 2018

Policy Statement

Stability for a child/youth in care is promoted by preventing or reducing changes in their placements wherever possible.

Outcomes

- Children/youth experience a change in placement when it is in their best interests and within the context of their Care Plan and long-term stability.
- Children/youth have stable placements.

Standards

5.8(1) Document efforts that have been made to support the current placement before a decision to move a child/youth from one placement to another is considered.

Procedures

Supporting and Assisting a Child/Youth With a Change in Placement

Note: This refers to a child/youth's change in living arrangements that do not include a return to parent, adoption or other permanency options. Instead, this refers to a change of foster care placement or other in-care out of home living arrangement.

Note: A change in a child/youth's care arrangement may be disruptive and emotionally destabilizing. All efforts are made to support a placement when possible. When a change in placement is determined to be necessary, prevent and mitigate as much as possible the trauma that a child/youth may experience when making the transition.

Before Deciding to Move a Child/Youth in Care

- Determine that all possible efforts to resolve issues have been taken prior to considering a change in living arrangements for a child/youth, including additional training for the caregiver, enhanced supports or services, and resolution of possible conflicts between adults involved in planning for the child/youth using Collaborative Planning and Decision Making processes.

Deciding to Move a Child/Youth in Care

- Consider the need for a change in the child/youth's living arrangement as a potential opportunity to review available living arrangements within their extended family and community.
- When considering a change in placement for a child/youth in care, take into consideration their views, developmental level, specific care needs, length of stay and relationship with the current caregiver, and history of trauma and loss.
- All placement changes are guided by the placement priorities described in Section 71 of the CFCSA.
- Consider the long-term implications of the decision, including the potential impact of the move on the child/youth and whether the new placement will provide stability and the opportunity for attachments with the caregivers.
- When the child/youth's circumstances, age or developmental level are barriers to involving them in the decision making, meet with them in person and explain the reasons that have led to the decision to move them, with the assistance of an interpreter if necessary, in a language and manner appropriate to the child/youth's age and developmental level.
- Consult with and obtain approval from a supervisor regarding a decision to change the child/youth's placement.
- Involve the following in the decision about where to place the child/youth:
 - The child/youth;
 - Whenever possible and appropriate, the child/youth's parents, extended family and those who have a significant relationship with the child/youth;
 - Members of an Indigenous child/youth's Indigenous community;
 - The child/youth's current caregiver when this is consistent with the child/youth's best interests;
 - The proposed caregiver.
- When determining where to place the child/youth, refer to *Policy 5.2: Assuming Responsibility for a Child/Youth in Care*.

- Document the reasons for the decision to change the child/youth's placement and the steps taken to assist them with the transition.

If the Child/Youth is Indigenous

- Involve their Indigenous community in identifying:
 - The strengths of the community and possible options for the care of the child/youth;
 - Members of the child/youth's family or community who are willing and able to assume the child/youth's care.

Preparing the Child/Youth for a Move

- Whenever possible and appropriate, before moving the child/youth, prepare them for the move by:
 - Arranging for at least one visit to the child/youth's new home and, if possible, one overnight visit;
 - Developing a plan to support and promote the child/youth's connections with the current caregiver;
 - Completing the Child's Routines form ([CF4065](#)) and providing the completed form to the new caregiver;
 - Providing the child/youth with the means to maintain contact with those they have significant relationships with;
 - Providing the child/youth with the opportunity to discuss concerns, fears and other feelings related to the move;
 - Offering to refer the child/youth for supportive counselling when needed.

When Children/Youth Move to another Jurisdiction

- When it is determined, in consultation with the child/youth and their Care Team or Circle, that the best living arrangement for the child/youth requires a move to:
 - Another Service Delivery Area, refer to the Practice Directive entitled [Case Transfer and Joint Case Management under the CFCSA](#); or
 - Another province/territory, refer to the [Provincial/Territorial Protocol on Children and Families Moving Between Provinces and Territories](#).

Preparing the Current Caregiver for the Child/Youth's Move

- Before the child/youth's move to the new placement, provide the current caregiver with information about the reasons for the child/youth's move, when

and how the move will occur, and any relevant information about the proposed caregiver in order for the current caregiver to help support the child/youth during the transition.

- Meet with the child/youth and the current caregiver to discuss how the move will occur, including the transfer of all of the child/youth's personal possessions, documentation and other items to the new placement.
- Support the child/youth and the current caregiver through the transition process, and provide assistance with ongoing contact as needed.

Supporting the Child/Youth During and After a Change in Placement

- When appropriate, involve the child/youth in the packing of personal belongings (all personal belongings are respected and packed in luggage and other appropriate containers).
- Ensure that the child/youth takes their personal belongings with them to the new placement. This includes special equipment required for the child/youth's care as well as belongings that have a sentimental value such as toys, jewellery, pictures and keepsakes. If the child/youth states that they do not want to keep some of their belongings, return those items to their parents whenever possible and/or appropriate.
- Ensure that the child/youth has a place to put their belongings in the new placement.
- Work toward minimum disruption to the child/youth's relationships, school and community activities.
- When the child/youth is able to continue to attend the same school, notify the school about the child/youth's change in placement.

Chapter 5: Children and Youth in Care

Policy 5.9: Planning for a Child/Youth Leaving Care

Effective Date of Policy:

June 30, 2017

Amendment Date of Policy:

October 1, 2018

Policy Statement

When a child/youth leaves care, they are supported in making a successful transition to an ongoing living arrangement that is stable and secure.

Outcomes

- Children/youth's important relationships are safely maintained.
- Children/youth are connected to their cultural communities.

Standards

5.9(1) Before a child/youth leaves care, provide them or the person assuming care with supports and documentation, based on the listing included in the procedures.

Procedures

Planning for the Child/Youth Leaving Care

- When considering a plan to return a child/youth to their parent(s), a move to an alternate out-of-care living arrangement, or a move to a legally permanent arrangement, refer to Policy 3.8: *Returning Children and Youth to Parents or Considering Permanency Alternatives*.
- Review the reasons why the child/youth came into care and the Care Plan to ensure that the objectives related to the safety and well-being of the child/youth have been achieved.

- Consult with and obtain approval from a supervisor regarding any plan for a child/youth to leave care.
- Involve the child/youth, relevant family members, caregivers and other significant persons when planning for the transition.
- If the child/youth is Indigenous, involve their Indigenous community in planning for the transition, with the consent of the person assuming care of the child/youth.
- Consider the child/youth's best interests when determining the timelines of the transition process.
- Provide all relevant information, documents and assistance necessary to facilitate the transition to the new living arrangement.
- Arrange for the services and supports needed to assist the child/youth and their family after they leave care.
- Determine who has important relationships with the child/youth, and how those relationships will continue after they leave care.
- Support the child/youth and their caregiver in adjusting to the change in their relationship.
- If the Public Guardian and Trustee (PGT) is property guardian for the child/youth, provide adequate notice for the PGT to be involved in planning for the child/youth leaving care, including management of RDSP funds for youth with special needs if required.

When the Child/Youth Leaves Care

- Coordinate and monitor the child/youth's transition in order to avoid, if possible, their return to care, interruption of services, or further disruption in their living arrangement.
- When appropriate, involve the child/youth in the packing of personal belongings, and ensure that they have luggage and other appropriate containers as needed for all of their belongings.
- Ensure that the child/youth takes their personal belongings with them when they leave care. This includes special equipment they may require as well as belongings that have a sentimental value such as toys, jewellery, pictures and keepsakes. If the child/youth states that they do not want to keep some of their belongings, return those items to their parents whenever possible and/or appropriate.
- Provide the child/youth or the person assuming care with the child/youth's:

- Essential documents, such as birth certificate and health care card;
 - Medical and educational history and other relevant information, including copies of medical and school reports, and other relevant documents;
 - Life Book.
- Provide the child/youth or the person assuming care with information about the reinstatement of medical coverage.
 - Arrange for the child/youth to receive medical, dental, and/or optical care prior to leaving care, as needed.
 - Arrange for the child/youth to obtain adequate prescription medication until they or their parent/care provider is able to obtain medication.
 - If applicable, advise the person assuming care of the child/youth to contact the Canada Revenue Agency for information about federal benefits such as the Canada Child Benefit and the Child Disability Benefit.
 - When appropriate, arrange an event or ceremony to mark the transition from the child/youth's current living arrangement to their new arrangement.
 - When appropriate, provide a copy of the latest Care Plan to the child/youth and the person assuming care.
 - For information about what should be included in the child/youth's file, refer to the documentation list in Policy 5.2: *Assuming Responsibility for a Child/Youth in Care*.
 - Complete a Closing Recording.
 - Unless a Youth Agreement is made, close the child/youth's electronic and physical case files after they have left care, following procedures as outlined in the [Child Protection Response Policies](#).

Note: When providing the child/youth and/or the person assuming care with information about access to the child/youth's information, explain that a request for information may involve a great deal of documented personal information. It is important that they understand the need for a stable living arrangement in order to have a suitable storage arrangement for their personal information. In addition, discuss with a child/youth the possible need for support as they review their file history.

Records can be obtained by submitting a [Personal Freedom of Information Request](#).

Chapter 5: Children and Youth in Care

Policy 5.10: Preparing Youth to Live Successfully in the Community

Effective Date of Policy:

June 30, 2017

Amendment Date of Policy:

October 1, 2018

Policy Statement

Youth in care are assisted in preparing to live successfully in the community by providing them with the necessary training, guidance and support to take responsibility for every aspect of their lives, according to their capabilities, upon reaching the age of majority.

Outcomes

- Youth in care are prepared for independence.
- Youth are connected to significant individuals and their community.

Standards

5.10(1) Provide an Independent Living Agreement for older youth in care only when it is determined to be the option that would best meet their needs.

Procedures

Considering Independent Living Agreements for Youth

Note: With an Independent Living Agreement, a youth continues to receive ongoing support in order to increase the likelihood of a successful outcome. Since an Independent Living Agreement is similar to a Youth Agreement (YA), use the YA information included in the [Standards for Youth Support Services and Youth Agreements](#).

- For youth in temporary or continuing custody who are 17 years of age and over, where there are no appropriate placement options immediately available, determine the appropriateness of an Independent Living Agreement within the context of the youth's Care Plan, including such considerations as their:

- Level of emotional and behavioural development;
 - Attendance at school or employment;
 - Current level of independent functioning.
- Consult with a supervisor to determine whether an Independent Living Agreement is the option that best meets the needs of the youth.
 - If it is determined that an Independent Living Agreement is the best option, use the Independent Living Agreement template (Form [CF2631](#)) to document responsibilities of both the youth and the delegated worker.
 - Determine with your Team Leader the level of contact required to meet the needs of the youth. Some youth may require weekly contact with their worker, and in some cases, daily contact. If daily contact is required, this may be supported by a contracted youth worker.
 - Consider a variety of ways to connect with the youth on a regular basis, such as having the youth pick up weekly Independent Living Agreement cheques. For youth who do not require weekly contact, establish regular text or phone call check-ins.
 - Review with the youth the importance of self-reporting critical or serious incidents. Make sure to follow the procedures and timelines outlined in both the Reportable Circumstances Policy and the Missing Children and Youth Policy.
 - Document financial arrangements using the Schedule A ([CF0700a](#))
 - If any minor changes to the Independent Living Agreement are required, document these changes using the Modification Agreement form ([CF0702](#)). Please note that substantive changes, such as changes to start or end dates of an Agreement, cannot be made through a Modification Agreement. Instead, a new Agreement would be needed to be developed and signed.
 - Determine that the youth has appropriate social supports to increase the likelihood that an Independent Living Agreement will be successful.
 - Continue to explore permanency planning for the youth, including considering options to achieve legal permanency such as a transfer of custody under Section 54.1, reunification with parents, adoption.
 - Maintain regular in-person contact with the youth, and view their accommodation at minimum:
 - When the youth moves into their accommodation;
 - At least every three months, or more frequently should there be a significant change in the youth's circumstances or Care Plan, or as agreed upon with the youth.

- Maintain regular telephone contact with the youth.
- Indicate the frequency of contact beyond minimum standards in the youth's Care Plan, allowing for the frequency of contact to be based on the youth's individual needs.
- Document information in the youth's file about meetings with them, including their views, significant events, and decisions or agreements reached with the youth.
- As with all children/youth in care, continue to provide the youth with information about their rights as a youth in care at least annually, and at other times when they request information about their rights.

Assisting Youth to Live Successfully in the Community

- Before the youth reaches the age of 19 years, provide them with information about what is required of them and of the worker, including timelines, in order to prepare for the youth to leave care.
- When a youth is about to reach the age of 19 years, assist them with obtaining:
 - Basic living essentials such as shelter, food, clothing, furniture and household supplies;
 - Adequate financial and social support;
 - Information about their rights and responsibilities as a member of the community (e.g. as a tenant, an employee, etc.);
 - Informal or formal services or networks to support them in the community;
 - Information about health care coverage (for more information, refer to Practice Directive: [CARECARD - BC Services Card & BC PharmaCare](#));
 - Information about therapeutic support and emergency assistance when necessary;
 - Information about advocacy services;
 - Funding for post-secondary education or other training programs as needed, including the [Provincial Tuition Waiver Program](#), bursaries, scholarships, grants (e.g., [Youth Education Assistance Fund](#)).
- Provide the youth with or assist the youth in obtaining identification and personal records, including:
 - A valid birth certificate, other government identification and social insurance card;

- A valid [BC Services Card](#);
 - Certificate of Canadian Citizenship, if applicable.
- Assist the youth with the development of a resume.
 - Use different resources to assist the youth with planning to live successfully in the community, including the [Youth Independence Planner](#), and [Useful Tips for Youth and Young Adults – A Guide to Independent Living](#).
 - Provide the youth with information about how to request access to their file after leaving care.
 - For information about what should be included in the child/youth's file, refer to the documentation list in Policy 5.2: Assuming Responsibility for a Child/Youth in Care.
 - Where a youth has funds in trust with the Public Guardian and Trustee (PGT) (excluding an RDSP), the PGT will contact the worker when the youth turns 14 to arrange an opportunity to discuss with the youth the youth's financial management skills, future goals and the potential for the youth to choose the PGT to continue to hold the youth's funds until age 27. The PGT will initiate these conversations annually with the youth.
 - At 16, if a youth has legal issues related to a potential civil claim, the PGT will contact the worker to speak with the youth so that the youth has a better understanding of their rights and responsibilities for when they turn 19.
 - If the PGT is releasing funds held in trust to the youth, they will send the required release forms to the worker to account for and transfer funds to the youth they reach 19 years of age.
 - If the youth is Indigenous, provide them with information and documentation about their community membership and any associated Indigenous rights and entitlements. For more information, refer to Policy 5.1: *Establishing and Preserving the Cultural Identity of Indigenous Children and Youth in Care*.
 - For youth who are not capable of managing their own legal and financial affairs after they turn 19 years of age, the PGT will ensure that they receive the necessary support by establishing a committee, or a representation agreement to manage their legal and/or financial affairs.
 - Determine whether an Agreement with Young Adults would be the best option for the youth after they turn 19 years of age.
 - For youth who are difficult to reach, make every effort to ensure that they are prepared to live successfully in the community; when necessary, obtain assistance from another person in the community who the youth has a significant relationship with.

- Complete a Closing Recording.
- Close the youth's electronic and physical case files after they have left care, following procedures as outlined in the [Child Protection Response Policies](#).

A Youth in Care in a Marriage or Marriage-Like Relationship

Note: Under the Marriage Act, a child under the age of 16 cannot marry without an order of the court. A youth from 16 to 19 years of age requires consent from their parent or guardian to marry. The Marriage Act also allows a child 16 years of age and older to apply to the court for permission to marry if their guardian withholds consent for unreasonable or improper motives.

When a child/youth is living in a marriage-like relationship with an intimate partner, the legal rights and responsibilities that are applied to that relationship are described in a number of different laws, including the Family Law Act and the Income Tax Act, and these laws have different definitions of what it means to be a “spouse”.

- When working with a youth who is living with their spouse or intimate partner, assess their need for Youth Service assistance, as with all other youth in accordance with the [Standards for Youth Support Services and Youth Agreements](#).
- Marriage and marriage-like relationships are among the factors considered when assessing a youth's need for assistance and protective measures, as well as ongoing support for their safety and well-being (e.g., issues of concern such as domestic violence and sexual exploitation).

Pregnant and Parenting Youth in Care

- Assist the pregnant youth in care to engage in support services and planning, including but not limited to:
 - Counselling;
 - Prenatal support and education;
 - Prenatal allowance for the purchase of such items as vitamin supplements;
 - Identified informal supports such as family, extended family and other responsible adults in the youth's life.
- Assist and support the youth to make informed decisions and healthy choices.
- If the youth is considering adoption for their child, follow the [Practice Standards and Guidelines for Adoption](#) and consider involving an adoption worker early on.

- When a youth in care becomes a parent while in care and plans to raise the child, the youth assumes all parental responsibilities, including legal and financial, for the child.
- A parenting youth is entitled to independent legal advice if there is a legal proceeding involving the custody of their child, either under the CFCSA or the FLA, or if they are considering adoption.
- Assist the parenting youth in care to engage in support services and planning, including but not limited to:
 - Financial assistance from provincial and federal programs to support the youth with expenses related to the care of the dependent child;
 - Child care;
 - Transportation;
 - Postpartum counselling services, including sexual health;
 - Parenting support and educational programs.

Chapter 5: Children and Youth in Care

Policy 5.11: Supporting Transition Planning for Youth in Care with Special Needs

Effective Date of Policy:
October 1, 2018

Amendment Date of Policy:

Policy Statement:

Youth in care with special needs are supported to plan early for the transition to adulthood through a coordinated approach focusing on the youth within the context of their support network, community and culture.

Outcomes

- Youth are supported to plan for transition to adulthood after their 14th birthday in accordance with their abilities.
- Youth benefit from a collaborative and coordinated transition planning approach that is youth-centered and community-focused.

Standards

5.11(1) Transition planning is initiated for youth who are 14 years of age by incorporating transition goals and services into the youth's plan of care.

5.11(2) Required information and documentation for Community Living BC (CLBC) eligibility determination are provided after the youth's 16th birthday and no later than six months after the youth's 17th birthday.

Procedures

- Throughout the transition planning process, document the transition goals, services and planning activities in the youth's plan of care.
- For youth choosing not to engage in transition planning, advise the youth of potential impacts of delaying planning, especially if they may be eligible for services and supports from CLBC.

- For transition planning and sharing information regarding youth involved with Youth Justice Services or Youth Forensic Psychiatric Services, consult with the team leader and the youth's probation officer.

Supporting an early and coordinated transition planning process when youth turns 14

- When the youth turns 14, provide youth and their support networks with information about the transition planning process and potential adult supports and services.
- Encourage the parent to participate in transition planning when the parent/guardian remains involved with the youth and when it is in the best interest of the youth.
- Act as the transition planning coordinator and establish a transition planning team. Examples of team members include school staff, caregivers, service providers, and community members as appropriate.
- Ensure the youth has necessary identification including a Social Insurance Number (SIN), [birth certificate](#), or [proof of Canadian citizenship](#) and [BC ID Card](#).
- Confirm if the youth has been deemed eligible for the [Child Disability Benefit \(CDB\)](#) by checking if the ICM Case Plan tab is marked "I – In Pay".
- If the youth may be eligible for the CDB, but has not been assessed by a medical practitioner, indicate "Y" in the ICM Case Plan tab.
- Youth who are eligible for the CDB are also eligible for to have a [Registered Disability Savings Plan \(RDSP\)](#) opened and managed by the Public Guardian and Trustee (PGT). The PGT sends the worker an annual review form usually in the child/youth's birth month. The Annual Review form identifies if an RDSP has been set-up and the current value of the RDSP account. This form also identifies any other funds held by the PGT, any legal issues which have been referred to a PGT lawyer, and allows the worker to provide any additional relevant information.
- Discuss with the school the inclusion of transition goals in the youth's Individual Education Plan.

Eligibility for CLBC

- Ensure adherence to timelines in transition planning for youth in care who may be eligible for CLBC supports and services in order to avoid delays and/or funding challenges. Further details of these timelines or more information, is found in the [Services for Transitioning Youth Operating Agreement between MCFD/DAA and CLBC](#).

- Community Living BC (CLBC) accepts referrals beginning when a youth is 16 years of age. CLBC uses the DSM-5 diagnostic criteria as part of the eligibility requirements for CLBC-funded services and uses the term “intellectual disabilities”. DSM-IV-TR diagnoses continue to be accepted as well. See the [CLBC policy on eligibility](#).
- One of the following two forms that must be completed and submitted along with assessment reports in all cases:
 1. [CLBC Eligibility Form - Assessor Report \(To be completed by the actual Assessor\); or](#)
 2. [CLBC Eligibility Form - Review \(To be completed by the reviewing psychologist if original Assessor is not able to complete the Assessor form\)](#)

Please note: Any diagnosis of Intellectual Disability with an IQ greater than 70 (allowing for measurement error of +/- 5) upon application for eligibility to CLBC Services will be reviewed by a CLBC provincially contracted psychologist.

Referral to CLBC adult services and supports

- While the youth is 15, review the child service file to identify what assessments are needed to determine eligibility for CLBC services.
- If the youth may be eligible for the [Personalized Supports Initiative](#) from CLBC, ensure there is a copy on the file of the diagnostic report confirming a diagnosis of either Autism Spectrum Disorder or Fetal Alcohol Spectrum Disorder. This is in addition to the CLBC Eligibility Forms completed by a qualified assessor.
- If eligibility information and/or required assessments are not available, arrange funding for the required assessment(s).
- Scan all documentation and completed reports into ICM.
- Ensure youth has access to financial planning information and has opened a bank account if the youth has the capacity to manage their own funds.
- Provide all required information and documentation to CLBC for eligibility determination after the youth’s 16th birthday and no later than six months after the youth’s 17th birthday.
- If the youth does not consent to providing information to CLBC:
 - Advise the youth that failure to provide information to CLBC may delay receipt of CLBC services;
 - In consultation with the team leader, consider releasing information to CLBC without consent if it is in the youth’s best interest.

- Follow-up with CLBC if notification of eligibility is not received within five business days of sending required documentation.
- Consider options for the youth's residential services for when they turn 19. For more information on planning residential services or a shared residential resource, consult Appendix A – Shared Residential Services in [Services for Transitioning Youth Operating Agreement December 2015](#)
- If a youth is brought into care after their 16th birthday, consult with a CLBC facilitator as soon as possible about eligibility and collaborative planning to ensure that eligible services are in place at age 19.

Referral for other services and programs

- Consider a referral to [Services to Adults with Developmental Disability \(STADD\)](#) at age 16 if the program is available in the community. More information is available in Appendix B.
- If the youth has a physical disability and high-intensity care needs, contact the local health authority to determine eligibility for [Home and Community Care](#) or the [Choice in Supports in Independent Living \(CSIL\)](#) program.
- Before the youth's 18th birthday, support a referral to [BC Housing](#) if appropriate.
- When the youth is 18.5 years of age, provide support in applying for [Income Assistance](#) and/or [Persons with Disability \(PWD\)](#) benefits if appropriate.
- See Information on PWD benefits: [How to apply](#) and [Document Checklist](#). If a person has already been determined eligible for CLBC services a simplified application process is available for PWD.

Youth with a Registered Disability Savings Plan (RDSP)

- When a youth with an RDSP turns 17, the Public Guardian and Trustee (PGT) contacts the worker to initiate planning for the transfer of the holder of the RDSP from the PGT to the youth at age 19 or their legal representative.
- Determine if the youth has the capacity to manage their RDSP independently. This can involve consultation with the caregiver, school staff and others who know the youth well.
- The PGT can transfer the RDSP to young adults under specific circumstances depending on the youth's capacity and support network. A Representation Agreement may be needed. Having an RDSP does not affect PWD eligibility.
- Determine the youth's Disability Tax Credit (DTC) Certificate Status End Date by checking the date in the ICM Case Plan tab. The youth may need another T2201 completed if the DTC status ends prior to age 19.

Consider unique cultural customs, traditions and practices

- Transition planning includes consideration of relevant coming of age practices for youth transitioning to adulthood.

Appendix A: Checklist – Youth in Care with Special Needs Transitioning to Adulthood

Complete the following checklist to ensure all activities have been undertaken when planning for a youth in care with special needs who is transitioning to adulthood.

Age 14 - 15

- Explain to youth and caregiver the importance of early transition planning and the steps involved.
- When the parent/guardian remains involved with the youth and it is in the best interests of the youth, the MCFD/DAA worker encourages the parent to participate in transition planning.
- As the transition planning coordinator, establish a transition planning team, set up meetings and begin to develop a plan.
- Ensure the youth has necessary identification including a [Social Insurance Number \(SIN\)](#), [birth certificate](#), or [proof of Canadian citizenship](#) and [BC ID Card](#)
- If not already done, consider if the youth could be eligible for the Child Disability Benefit.
- Discuss with school the inclusion of transition goals in youth's Individual Education Plan.
- Document the youth's transition goals and planning activities in the youth's plan of care.

After 15th birthday:

- Gather required documents, assessment reports and consents.
- Arrange funding for required assessment(s) for eligibility purposes if not available.
- Ensure copies of assessments and other documentation is scanned into ICM file.
- Ensure youth has access to financial planning information and has opened a bank account if the youth has the capacity to manage own funds.

After 16th birthday:

- If the youth is likely eligible for CLBC, consider a referral to STADD at age 16 if the program is available in the community. Refer to Appendix B for more information.

- After the youth's 16th birthday and no later than 6 months after the youth's 17th birthday, provide all required information to CLBC for eligibility.
- Follow-up with CLBC if notification of eligibility is not received within 5 business days of sending required documentation.
- If CLBC eligible, meet with the CLBC facilitator and include caregiver and other team members.
- If the youth does not consent to providing information to CLBC:
 - Advise the youth that failure to provide information to CLBC may delay receipt of CLBC services.
 - In consultation with the team leader, consider releasing information to CLBC without consent if it is in the youth's best interest.
- Discuss adult residential options with youth and transition team. If the option of a shared residential service is being considered, consult the [Services for Transitioning Youth Operating Agreement December 2015](#)
- If a youth is brought into care after their 16th birthday, consult with a CLBC facilitator as soon as possible about eligibility and collaborative planning to ensure that eligible services are in place at age 19.

After 17th birthday:

- For youth with an RDSP, participate in discussions with the Public Guardian and Trustee about planning for the transfer of the RDSP and the establishment of a Representation Agreement if needed.
- Determine the youth's Disability Tax Credit (DTC) Certificate Status End Date by checking date in ICM Case Plan Tab. If necessary, arrange for another T2201 to be completed by a health care professional.
- Before 18th birthday, support a referral to BC Housing if necessary.
- Assist youth in applying for post-secondary education/vocational training and relevant education bursaries before age 18 if appropriate.
- Support youth in completing any planning pieces before end of school. If available, explore with school team the option of extra year in school and coordinate request with school as needed.

At 18.5 years:

- At 18.5 years, support youth in applying for [Income Assistance](#) and/or [Persons with Disability \(PWD\)](#) benefits if appropriate.

- Ensure youth is prepared for end of MCFD supports.
- If applicable, assist youth to connect with Adult Mental Health at 18.5 years of age
- If the youth has a physical disability and high-intensity care needs, contact the local health authority to determine eligibility for [Home and Community Care](#) or the [Choice in Supports in Independent Living \(CSIL\)](#) program.

Appendix B: Best Practice Guidelines for Workers working in communities offering Services to Adults with Developmental Disabilities (STADD)¹

1. Referral to STADD (at the age of 16):

- Contact STADD by calling the central number 1-855-356-5609 to confirm if services are available in the community;
- If the youth is interested in working with a Navigator, obtain a signed HR3563 “Consent to Collect, Use and Disclose Personal Information” form for sharing MCFD information with the Navigator (the form is available at the bottom of the [Find a Navigator](#) web page);
- Initiate referral or support self-referral to STADD using Collaborate, the online platform to track referrals and share information with the case team; and
- If the youth is not ready to connect with STADD, provide information about contacting STADD for use at a later time.

2. After the STADD referral:

- Participate on the transition team; monitor the status of the transition plan and communicate as necessary with other transition planning members using [Collaborate](#).
- As requested, provide information on MCFD policy and guidelines to individuals, support team members, and support networks.

¹ Based on [Partner Organization Roles and Responsibilities for Youth and Young Adults with Developmental Disabilities](#)

Chapter 5: Children and Youth in Care

Policy 5.12: When a Child/Youth is Missing

Effective Date of Policy:
February 2016

Amendment Date of Policy:

Policy Statement

Appropriate action is taken to locate a missing child/ youth and to safeguard them from harm or the threat of harm.

Outcomes

- Steps are taken to locate a missing child/youth.
- Steps are taken to plan for habitually missing child/youth.

Standards

5.12(1) Activate an immediate plan to find the missing child/youth and to protect them from actual or potential harm.

5.12(2) Continually monitor, update and revise the plan to ensure that efforts to locate the child/youth are sustained and reinforced, if necessary, until they are found.

Definition

A missing child/youth is any child/youth in care, including respite care, whose whereabouts are unknown and there are additional concerns about their safety.

Procedures

Responding when a Child/Youth's Whereabouts are Unknown and there are No Additional Concerns about the Child/Youth's Safety: Expectations of the Caregiver

- When a child/ youth is unreasonably late coming home, the caregiver is expected to take the same actions as a prudent and responsible parent would, including trying first to locate the child/youth prior to contacting the worker, Centralized Screening, or police/RCMP.
- Actions that would be taken by a prudent and responsible parent in an effort to locate a child/youth would include, but would not be limited to:
 - Actively trying to contact the child/youth directly via their cell phone, etc.;
 - Actively seeking out and contacting anyone, such as friends, coaches, or teachers of the child/youth, who may know their current or recent whereabouts; and
 - Identifying and checking likely locations where the child/youth may be.

Note: A youth on probation who could harm or put others at risk must be governed by the rules of their probation with regards to time away from a resource or required check-in. If a youth breaches their probation, the youth's worker/Centralized Screening or police/RCMP must be contacted immediately.

Responding When a Child/Youth's Whereabouts are Unknown and There Are Additional Concerns about their Safety

- The following factors are considered when determining if the child/youth is unsafe:
 - Vulnerability (i.e., due to: age or level of development, physical or cognitive disability, addictions or mental health concerns or involvement in high risk activities);
 - Their mental or emotional state (e.g., emotionally distraught, suicidal or likely to cause harm to self or others);
 - Extreme weather (without appropriate clothing such as coat, boots, etc.) or other physical conditions (e.g., terrain);
 - Any suspicious or dangerous circumstances surrounding the child/youth's disappearance, which suggest they may be the victim of a crime;
 - Whether it is out of character for the child/youth to be missing;

- There is reason to believe that the child/youth may have been involved in an accident or mishap;
 - The whereabouts of the child/youth have been unknown to the caregiver overnight.
- If the child/youth's whereabouts are unknown and there are additional concerns about their safety, consider the child/youth to be missing.
 - The caregiver, the child/youth's worker or Centralized Screening will immediately call the police/RCMP to report a missing child/youth in order for the police to take action to locate the missing child/youth.
 - If the caregiver informs the police/RCMP of the missing child/youth and requests action to locate the child/youth, they are required to contact the child/youth's worker or Centralized Screening and advise that a report to police/RCMP has been made. The child/youth's worker makes a Reportable Circumstance Report.
 - Once a report has been made to police/RCMP about a missing child/youth, ensure that all parties involved in searching for the child/youth are provided with all information pertaining to the possible whereabouts of the child/youth.
 - Provide police/RCMP with the following:
 - A detailed description of the last known clothing that the child/youth was wearing as well as any other items known to be or likely to be in their possession (e.g., cell phone, backpack, school books, sports equipment, etc.);
 - A current picture of the child/youth;
 - A physical description of the child/youth, including height, weight, hair and eye colour, whether they have glasses, braces, facial hair and other distinguishing features such as birth marks, tattoos, piercings, scars, or physical disabilities;
 - A list of known friends and associates, including addresses and phone numbers;
 - That the child/youth being in foster care is not to be included in any information made public in an effort to locate the child/youth; and
 - Clarification about how their efforts regarding locating the child/youth will be communicated and to whom.
 - Communicate with the parent(s) about the missing child/youth, unless the responsibility for such communication has been assumed by the police/RCMP.
 - Maintain contact with police/RCMP, the caregiver and parents regarding updates and revisions to the plan to locate the child/youth.

When a Child/Youth Has Been Located

- When the child/youth has been located, ensure that all parties are notified as soon as possible that the child/youth is no longer missing.

Physical or Emotional Injuries Observed or Suspected

- If injuries are observed or suspected, ensure that the child/youth is provided with medical assessment and treatment.
- If the child/youth experienced any form of emotional/psychological trauma while missing, ensure that appropriate support is provided for the child/youth.
- If the injuries meet the criteria in the [Reportable Circumstances Policy](#), make a further Reportable Circumstance Report.

When a Child/Youth is Habitually Missing

- For a child/youth who is habitually missing, work with the child/youth, the caregiver and others to determine information such as:
 - The reasons why the child/youth repeatedly goes missing;
 - Where the child/youth goes, with whom and what they do while they are gone;
 - Other information that could be used to locate the missing child/youth in the future; and
 - Whether there is a protocol in place between police/RCMP and MCFD/DAAs regarding habitually missing children/youth.
- Develop a plan with the child/youth and relevant service providers, including those providing residential care, to address identified issues and offer resources and services to help prevent the child/youth from going missing again.

Chapter 5: Children and Youth in Care

Policy 5.13: Restraint and Seclusion Regarding Children and Youth in Care

Effective Date of Policy:
June 30, 2017

Amendment Date of Policy:

Policy Statement

Caregivers are provided with information about the use of positive behaviour management methods.

Use of restraint is prohibited except in extraordinary circumstances:

- In an emergency, to protect a child/youth from risk of imminent harm to self or others when less restrictive means have been considered or attempted and determined to be insufficient in the circumstances; or
- As an extraordinary measure outlined in the child/youth's Care Plan.

Use of seclusion is strictly prohibited.

Outcomes

- Children and youth are physically and emotionally safe.
- Children and youth are supported in developing positive coping behaviours.

Standards

5.13(1) Where the use of restraint is part of the child/youth's Care Plan, the plan is approved by the designated director under the CFCSA.

5.13(2) Review the plan for the use of restraint with the child/youth's Care Team or Circle at minimum every six months.

5.13(3) The use of safe rooms/seclusion is prohibited under any circumstances.

Procedures

Preventing the Use of Restraint

- Ensure that the caregiver is familiar with:
 - The use of trauma informed approaches and positive behavioural supports and interventions to determine appropriate behaviour management methods, based upon a child/youth's needs and consideration of their best interests;
 - How to take all reasonable steps in all circumstances to avoid the need for the use of restraint, including emergency restraint and when the use of restraint is included in the child/youth's Care Plan.
 - If restraint must be used repeatedly to de-escalate the same challenging behaviour, how to try different strategies and review their effectiveness in order to address the behaviour and reduce the need for restraint. This must be incorporated into the child/youth's Care Plan.
- When the use of restraint is included in the Care Plan, the child/youth is informed about potential situations in which restraint may need to be used in order to protect the child/youth or others from immediate physical harm.

Note: Caregivers and service providers may use other behaviour management practices such as loss of privileges and 'time out'. Time out periods:

- *Can be used if several clear warnings have been given prior to the time out in order to allow a child/youth to calm down, analyze the situation and sort out their feelings;*
- *Are in keeping with a child/youth's age and stage of development;*
- *Take place in a neutral area that is comfortable for the child/youth;*
- *Are not excessive; and*
- *Never occur in locked rooms or in seclusion.*

Note: Positive behavioural supports and techniques are outlined in section D.1 of the [Standards for Foster Homes](#).

Planning for the Use of Restraint in the Child/Youth's Care Plan

- In circumstances where the child/youth displays a pattern of behaviour that has, or is likely to place them or another person at risk of immediate physical harm, and other approaches have been considered or are being developed, the use of restraint can be considered as part of the child/youth's Care Plan.
- Collaborate with a health professional who knows the child/youth and is knowledgeable in the safe use of restraint to develop a plan.

- The Care Plan is approved by a designated director, in writing.
- Provide information to the caregiver about notification procedures if restraint is used (i.e., verbal or written notification, daily or weekly briefings), and document these communications in the child/youth's Care Plan.
- The child/youth's Care Team or Circle reviews the plan for the use of restraint at minimum every six months.
- As part of the review, the child/youth's Care Team or Circle:
 - Considers other kinds of support that may be effective in reducing the behaviours of concern and could be used in place of restraint;
 - Evaluates the effectiveness of the plan and recommends adjustments as required.
- Advise the caregiver that:
 - Restraint is not to be used to enforce compliance or as a means of discipline or convenience;
 - Restraint is performed only by individuals who are trained in crisis intervention, including the safe use of restraint;
 - Medication and/or medical equipment are used in accordance with the child/youth's Care Plan.

The Use of Restraint

- If restraint is used:
 - It is used only in extraordinary circumstances;
 - It involves the least control and the least amount of time necessary to ensure immediate safety;
 - Is appropriate to the child/youth's level of development and condition;
 - Efforts are made to re-establish communication and end restraint as soon as possible; and
 - The child/youth is never left unattended while under restraint.

Following the Use of Restraint

- Following the use of restraint the caregiver :
 - Evaluates the child/youth's physical and emotional well-being;
 - Provides debriefing and support to the child/youth and any other individuals who are involved or witness the episode;
 - Documents the use of restraint; and
 - Notifies the child/youth's worker.
- When notification is received that restraint was used (physical, chemical or mechanical restraint), an incident report is created and a supervisor is informed.

Seclusion

- The use of safe rooms, confinement and seclusion of children/youth for any reason, including behavioural management strategies, is not permitted.
- This does not include the behavioural management approach of periods of “time out”, where a child/youth exercises a degree of cooperation and self-control.

Definitions

Restraint is defined as the intentional restriction of a child or youth’s movement or behaviour by use of physical, chemical and/or mechanical means.

Physical restraint is the use of physical force upon a child necessary to ensure the immediate safety of the child or others, appropriate to the child’s level of development and condition.

Chemical restraint means the use of medication to control a child’s violent or out of control behaviour to de-escalate crisis situations. (Chemical restraint differs from the use of on-going medication which is prescribed based upon a professional diagnosis to address/treat a child’s existing medical condition or behaviour and is included in the child’s care plan.)

Mechanical restraint is use of mechanical devices to control a child’s violent or out of control behaviour to de-escalate crisis situations rather than developing a planned strategy to address the behaviour.

Seclusion is defined as containment of a child/youth within any space from which they are not able to exit without the permission of another or within which their movements may be restricted. This includes safe rooms or confinement.

Safe rooms involve the use of a locked door or attendants confining the child/youth for periods of time.

Links

Use of prohibited practices: section D.1.11 of the [Standards for Foster Homes](#).

Use of physical restraint: section C.3 of the [Standards for Staffed Children’s Residential Services](#).