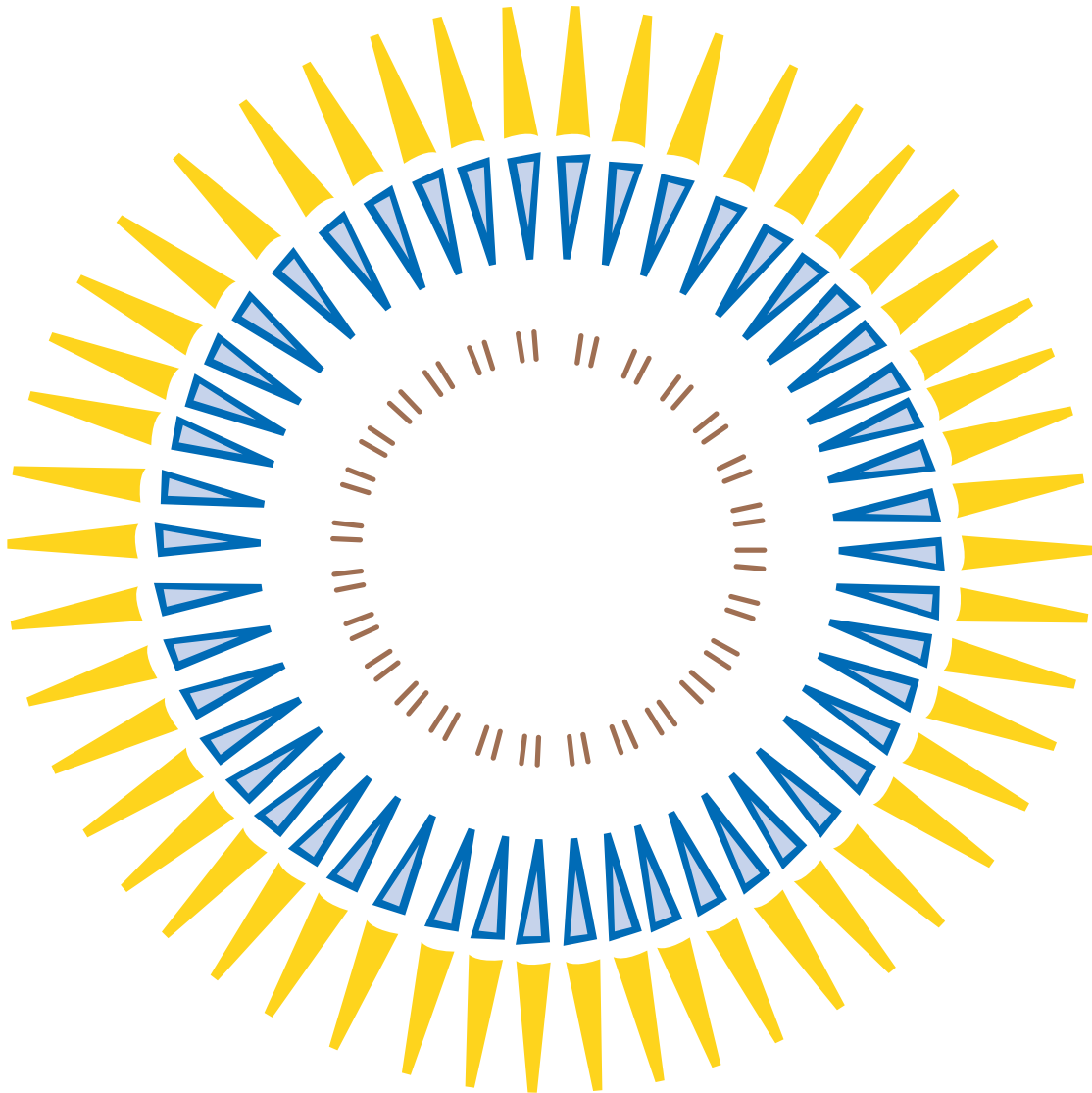


ABORIGINAL OPERATIONAL AND PRACTICE STANDARDS AND INDICATORS

REVISED
JUNE
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Aboriginal Operational and Practice Standards Review Project

History of the Aboriginal Operational and Practice Standards and Indicators

In 1996, a meeting was held in Whistler, British Columbia. Participants at this meeting included the Executive Directors of Aboriginal Child and Family Service agencies, the Department of Indian Affairs and Northern Development Canada (DIAND), and the British Columbia Ministry for Children and Families (MCFD). One of the initiatives to come out of the meeting was an agreement to establish a reference group that would proceed with the development of an Aboriginal Audit and Review process.

The first meeting of this reference group took place in March 1997. The reference group agreed that before an audit and review process could be established, the reference group would need to develop operational and practice standards for Aboriginal Child and Family Service agencies. The standards would be the basis for measuring agency compliance in an audit and review process. The Reference Group went forward and developed operational readiness criteria that enables First Nations Child and Family Service agencies (FNCFS) to sign Delegation Enabling Agreements (DEA) and went on to develop practice standards for each level of delegated authority. The result of their work is the Aboriginal Operational and Practice Standards and Indicators Manual (AOPSI).

At the completion of AOPSI in 1999, the manual was reviewed and approved by the Director of Child Protection and the Executive Directors of First Nations Child and Family Service agencies. The AOPSI was intended to be the starting point for the First Nations Audit and Review process initiated by the Ministry of Children and Family Development.

Purpose of the Initial Review 2001

In concert with the Audit and Review process, an AOPSI review was conducted in 2001. The purpose of the AOPSI review was to enhance the quality of social worker practice by ensuring that the operational and practice standards that guide practice and form the basis of the audit process are culturally appropriate, achievable and sound. The AOPSI had been in place for two years. FNCFS agencies had an opportunity to apply and test the AOPSI standards against their practice. In the process of measuring practice against the standards, the FNCFS agencies identified aspects of the standards that were appropriate and effective and others that were problematic, cumbersome and required revision.

The initial AOPSI Review was seen as ‘a place to begin’. Because First Nations child and family services is a relatively new process for First Nations communities, it will take time to define and refine services so that they genuinely meet the needs of the communities. It was understood that standards would require review and revision as the services evolved and as circumstances and conditions changed for the community

and the FNCFS agency. While it was appropriate to review the AOPSI standards at the time to ensure they were meaningful, attainable and relevant to current FNCFS practice, it is important to remember that review is an ongoing process.

To facilitate the process, the Caring for First Nations Children Society (CFNCS), in keeping with their mandate to conduct policy analysis and research in the area of child and family services, initiated the AOPSI Standards Review Project.

The AOPSI Standards Review Project 2003

In 2003, MCFD contracted with the Caring for First Nations Children Society to conduct a second revision of the AOPSI standards. The purpose of the AOPSI review was to:

- enhance the quality of social worker practice by ensuring that the operational and practice standards that guide practice and form the basis of the audit process are culturally appropriate, achievable and sound;
- ensure the AOPSI practice standards are consistent with the revised MCFD practice standards and legislative and regulatory requirements;
- ensure the AOPSI standards reflect the recommendations of Case Reviews for child protection practice;
- update and incorporate any additional changes required to the AOPSI practice and operational standards.

Purpose of Operational Standards

The delegation of authority to provide child protection services flows from the *Child, Family and Community Service Act* (CFCSA). When Aboriginal communities seek to develop their own delegated child and family service agencies, they must meet operational standards or requirements. Operational standards assist Aboriginal agencies and the ministry by establishing criteria for the delegation of authority for child welfare services under the CFCSA. The operational standards are important tools for the audit and review of Aboriginal Child and Family Service Agencies (ACFSA). The operational standards identify the key components of organizational development and service planning in ACFSA. They build upon the Operational Readiness Criteria that an agency must meet in order to sign a DEA and/or to receive funding from the Department of Indian Affairs and Northern Development Canada (DIAND) or the Province. The organizational development and service planning components include:

- governance;
- service delivery model;
- financial administration;
- human resources;
- communication;
- administration (e.g., information sharing, records management).

For each of the components there is a standard of operation, and a list of criteria for achieving the standard.

Purpose of Practice Standards

Standards are the foundation for providing child and family services, and represent minimum expectations of performance. Practice standards ensure that agency social workers and supervisors deliver quality services to children and families. Additionally, practice standards are also important tools for the audit and review of the ACFSA. This document outlines minimum standards for child and family services. However, it is recognized that ACFSAs may exceed these standards in their practice.

For each standard contained within this document, there is a statement of practice, and a list of criteria for achieving the standard.

Approach to Developing Standards

The Aboriginal Operational and Practice Standards and Indicators emphasize the importance placed upon family and community within Aboriginal cultures. Though the emphasis of some of these standards differ from those of the ministry, the safety and protection of children are always paramount. The AOPSI standards either meet or exceed those established by the ministry.

How to Use This Document

In the revision of AOPSI, the practice standards and operational standards are provided in separate documents. In this practice standards document, information relating to each standard is presented in the following manner.

1. **Standard Statement:** Identifies a function related to a specific service delivery category, and describes the expected outcome.
2. **Social Work Practice:** Identifies practical steps the staff of the Child and Family Service Agency (e.g., social workers, supervisors, agency director) must take to achieve the objective of the practice standard.

These standards represent the minimum expectation for social work practice.

Voluntary Services Practice Standards

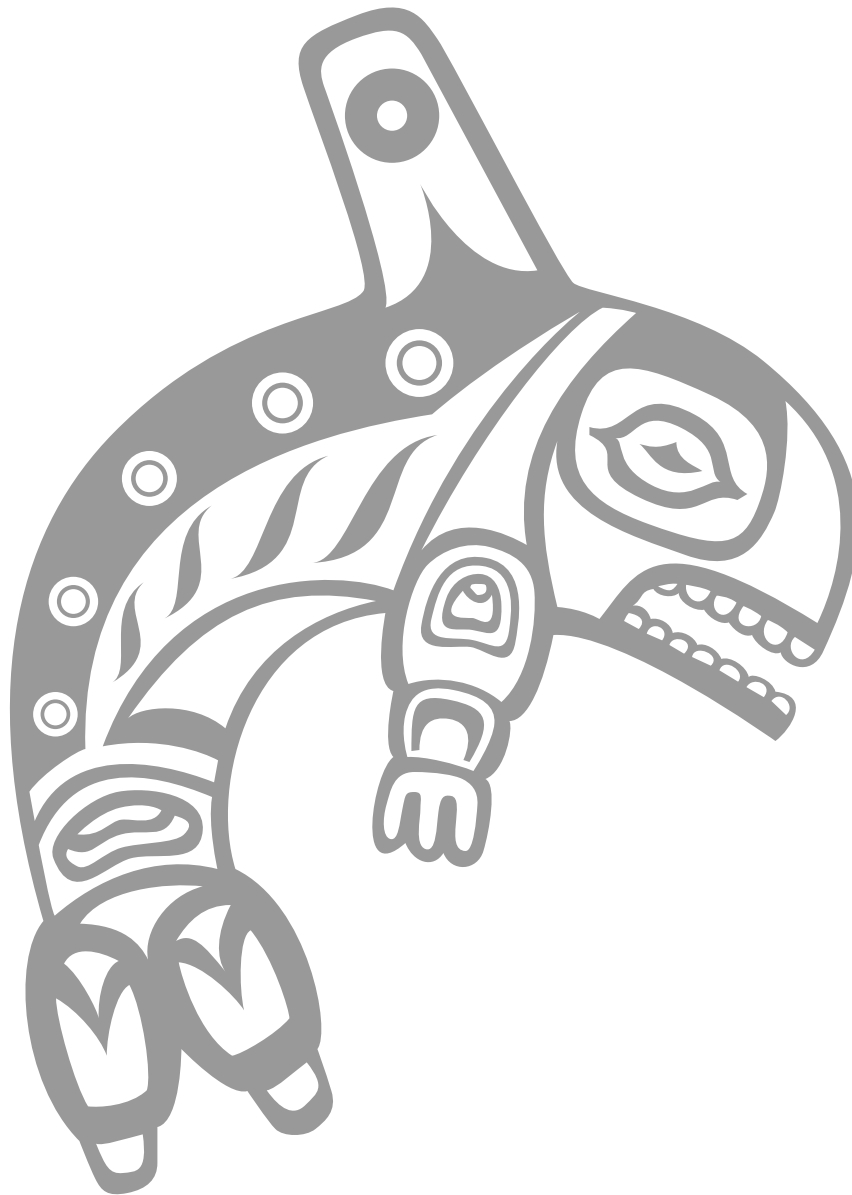


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STANDARD 1

Receiving Requests for Service

A voluntary services social worker accepts requests for service, determines the nature of the service request and the caller's eligibility for service.

The voluntary services social worker ensures that the service offered is within the delegated authority of the social worker.

When the voluntary services social worker has reason to believe that a child may be in need of protection while receiving a request for services, the social worker makes a report to a delegated child protection worker.

When the voluntary services social worker receives a child protection report rather than a request for services, the social worker directs the reporter to a delegated child protection social worker and ensures the report is made.

Social Work Practice:

Upon receiving a request for voluntary service, the social worker ensures:

- the person requesting the service is encouraged to express the information in his or her own words and the wording used by the person is reflected in the recording;
- the necessary information is collected about the family and the family's history to determine the most appropriate service;
- detailed information is solicited in order to determine if the service being requested is within the Voluntary Services delegation of the agency;
- clarification of all information is requested;
- a prior contact check (PCC) is conducted and recorded that includes the ministry, other Aboriginal agencies, and other provincial child and family services when appropriate;
- all known files are reviewed.

The social worker enters and locks the information in a common database (MIS).

References: CFCSA: s.2, s.3, Part 2, s.14
 AOPSI: Voluntary Services Practice Standard #2 Supervisory Approval Required for Voluntary Services

STANDARD 2

Supervisory Approval Required for Voluntary Services

The social worker consults with the supervisor and obtains the supervisor's approval at key points in the provision of voluntary services and ensures there is a thorough review of relevant facts and data before decisions are made.

Social Work Practice:

The social worker consults with the supervisor and obtains the supervisor's approval at key points, ensuring that there is a thorough review of relevant facts and data before decisions are made, including, but not limited to:

- when receiving a request for services that contains a child protection concern;
- when receiving a child protection report;
- developing family service plans;
- developing support service, Voluntary Care and Special Needs Agreements;
- placing a child outside the community in a non-Aboriginal home;
- developing the initial plan of care;
- finalizing and revising the Comprehensive Plan of Care;
- following through with reportable circumstances;
- varying or restricting the child's access to family or others with whom there is a significant relationship;
- moving a child from one placement to another;
- when a child is missing, lost or runaway;
- transferring and/or closing a file.

References: CFCSA: s.5

STANDARD 3

Information and Referral for Voluntary Services

People requesting voluntary services are directed to the service that best meet their needs.

Social Work Practice:

Providing Voluntary Services

The social worker ensures that when people contact the agency requesting services they are informed about what services are available and are offered services that:

- are based on an assessment of the needs of the child and family;
- build on the strengths and capacities of the family, extended family and community;
- are provided in a climate of understanding and respect of the family's cultural background, traditions and spiritual beliefs;
- fit the specific needs of the child and family and are the least disruptive services available.

Referrals to Community Services

When referring clients to other community services the social worker provides information about:

- the process for accessing those services;
- whether or not the service has a wait list;
- confidentiality.

References: CFCSA: s.3, s.74

STANDARD 4

Involving the Aboriginal Community in the Provision of Services

When providing services to children and families, the social worker involves the child, family, extended family and, when appropriate, the designated representative of the family's Band/cultural group or Aboriginal community in the planning and delivery of services.

Social Work Practice:

Providing Services

Throughout the provision of services, the social worker respects the views, cultural heritage, spiritual beliefs and identity of the child, family and extended family.

The social worker involves the child, family, extended family and, when appropriate, the designated representative of the family's Band/cultural group or Aboriginal community and a language/cultural interpreter to:

- identify the strengths and supports within the community;
- identify, plan and deliver services that are culturally appropriate and accessible;
- participate in the development, implementation and review of plans of care that respect the child's cultural identity;
- ensure the child's needs for stability and continuity of relationships are met.

When a Child's Aboriginal Community is Unknown

When a child comes into care through a Voluntary Care Agreement/Special Needs Agreement and the child's Aboriginal community is unknown, the social worker will conduct a thorough search to determine the child's community and request assistance from:

- the child, the child's family and extended family members;
- another Aboriginal delegated agency or Aboriginal human services agency.

When a Child May be Métis

When a child comes into care through a Voluntary Care Agreement/Special Needs Agreement and may be Métis, the social worker will consult with the child, parents or Métis Commission to determine the child's Métis heritage.

References: AOPSI: Voluntary Services Practice Standard #7 Voluntary Care Agreements
AOPSI: Voluntary Services Practice Standard #8 Special Needs Agreements
AOPSI: Voluntary Services Practice Standard #11 Preserving the Identity of the Child in Care and Providing Culturally Appropriate Services

STANDARD 5

Family Service Plan Requirements for Support Services, Voluntary Care, and Special Needs Agreements

The social worker develops a family service plan that defines the service needs of the child and family, the service required to address the needs, and the measurable goals of the service.

Social Work Practice:

Elements of a Family Service Plan

The social worker develops a family service plan that includes:

- a clear statement of the reasons for initiating the service based on a child and family assessment;
- a strategy that provides specific services to assist and support specific changes for a family and its members;
- a time frame for review.

Goals of Services

The social worker ensures the goals of the service plan are:

- specific, measurable, achievable, realistic, and time limited;
- based on assessed family's strengths and identified risks;
- stated in behavioural terms whenever possible;
- reflect the service priorities of the family.

Roles and Responsibilities

In the development of the family service plan, the social worker ensures:

- when coordinated services are provided by the voluntary services social worker and another child and family agency social worker, the specific roles and responsibilities of each social worker are clearly defined;
- all participants in the plan, including family members, extended family, service providers and others, understand the plan and their responsibilities with respect to the plan;
- the criteria for evaluation of the service plan are clear and all parties know when the evaluations/reviews will occur.

Child Protection Concern

If issues of risk to a child arise when developing a family service plan or anytime thereafter, the social worker reports the matter to a delegated child protection social worker.

-
- References:** CFCSA: s.5
CFCS Regulation: Part 2
AOPSI: Voluntary Services Practice Standard #2 Supervisory Approval Required for Voluntary Services
AOPSI: Voluntary Services Practice Standard #6 Support Service Agreements
AOPSI: Voluntary Services Practice Standard #7 Voluntary Care Agreements
AOPSI: Voluntary Services Practice Standard #8 Special Needs Agreements

STANDARD 6

Support Services Agreements

When providing support services, the social worker enters into a signed Support Services Agreement with the family.

Social Work Practice:

Planning and Completing a Support Services Agreement

The social worker collaborates with the family, child over the age of twelve (12) years, extended family and involved community members to develop an agreement that:

- addresses the safety and best interests of the child;
- meets the child's needs for safety, security, stability and continuity of relationships;
- considers the views of the child;
- captures all relevant information about the family's strengths, needs and vulnerabilities;
- includes the parents' and child's consent to disclosure of information for the provision of support services;
- identifies the type and duration of support services and the notice required to end the agreement;
- defines the period of the agreement.

The social worker gives a copy of the signed agreement to the parent and the child over the age of twelve (12) years.

The social worker makes a referral to the support service providers. The referral outlines the services identified in the support services agreement including:

- names of people responsible for providing specific services;
- time frames for completing the services;
- date and place of the review.

Providing Services on an Emergency Basis

When services are required on an emergency basis for up to thirty (30) days, they may be provided with the parent's verbal consent with a signed agreement to follow.

Reviewing and Renewing Support Services Agreements

The social worker and parent agree on the process to review the agreement and will conduct a review whenever there is a change in the circumstances of the family and/or every six (6) months (minimum). A review determines whether:

- the agreement is effective and suitable in meeting the needs of the child and family;
- any barriers exist that prevent the implementation of the service plan and ways to overcome the barriers.

Ending the Support Services Agreement

The social worker, family, extended family and involved community members may consider ending the agreement with the agreed upon notice when the services are no longer required.

References: CFCSA: s.5
CFCS Regulation: Part 2(3)
AOPSI: Voluntary Services Practice Standard #2 Supervisory Approval Required for Voluntary Services
AOPSI: Voluntary Services Practice Standard #5 Family Service Plan Requirements for Support Services, Voluntary Care, and Special Needs Agreements

STANDARD 7

Voluntary Care Agreements

When a child comes into care through a voluntary agreement, the social worker enters into a signed Voluntary Care Agreement with the family.

Social Work Practice:

Criteria for a Voluntary Care Agreement

The social worker will consider a Voluntary Care Agreement with the parent(s) and child over the age of twelve (12) years when:

- reunification with the parent is expected;
- the Voluntary Care Agreement meets the child's need for safety, security, stability and continuity of relationships;
- the Voluntary Care Agreement is in the child's best interests;
- the parent entering into the agreement has custody of the child;
- when the child over the age of twelve (12) years agrees to the agreement;
- the social worker and the parent(s) agree that the child requires out-of-home care;
- support services are unavailable or inadequate to meet the child's needs;
- the services in the agreement will promote the family's capacity to care for the child within the time frames of the CFCSA.

Preparing a Voluntary Care Agreement

Before entering a Voluntary Care Agreement, the social worker will:

- consider the child's views, dependent on the child's level of development, about his/her sense of safety and well-being in regard to the proposed living arrangement;
- ensure the child understands the reasons for and details of the proposed living arrangement;
- arrange for an on-going sharing of confidential information among the parties of the agreement;
- confirm how the parents and other significant people will maintain contact and involvement with the child;
- agree on a time frame as established in the CFCSA;
- confirm a family care home and services being offered are available;
- confirm the custodial responsibilities that are transferred by the agreement;
- confirm the required notice to end the agreement.

Completing the Voluntary Care Agreement

The agreement defines:

- the transfer of care from the parent to the Director;
- the initial plan of care;
- a plan for parental contact with the child;
- services provided to the family;
- the time period of the agreement.

Informing the Aboriginal Community

When the family/child belongs to another Band/cultural group or Aboriginal community, the social worker will inform the designated representative of the family/child's community when appropriate and follow the terms of the established protocols.

Supporting the Voluntary Care Agreement

The social worker supports the child's connection to family, community and culture by:

- assisting the child to maintain contact with the family;
- providing the child with information about parental activities and progress toward reunification;
- assisting the child to maintain relationships with siblings and significant others through visits and shared activities;
- identifying extended family members who may provide respite services or be considered as alternative caregivers.

Reviewing and Renewing a Voluntary Care Agreement

The social worker and parent agree on the process to review the agreement and when the agreement will be reviewed. The review will occur:

- at the request of the child, parent and/or social worker;
- at intervals relevant to the child's development;
- before the agreement expires or is extended.

If the parent does not resume custody of the child when the agreement ends, the agreement can be extended to a maximum of thirty (30) days in order to amend the plan for the child.

Ending the Voluntary Care Agreement

An agreement ends when any of the following apply:

- the parent resumes custody of the child;
- the child is unwilling or unable to reside with the caregiver;
- the required notice is given by a participant to the agreement;
- the criteria for the agreement no longer apply;
- other actions are taken under the CFCSA;
- the agreement expires;
- the youth reaches the age of 19;
- the child dies;
- the youth marries.

Parental Contribution to the Child's Care

Parents remain responsible for contributing to the care of the child. The contribution can be financial or in-kind such as clothing, transportation, or recreational or activity fees or equipment.

-
- References:** CFCSA: s.6, s.70, s.71, s.75,
 CFCS Regulation: Part 2(3)
 AOPSI: Voluntary Services Practice Standard #2 Supervisory Approval
 Required for Voluntary Services
 AOPSI: Voluntary Services Practice Standard #5 Family Service Plan
 Requirements for Support Services, Voluntary Care, and Special Needs
 Agreements
 AOPSI: Voluntary Services Practice Standard #16 Meeting the Child's
 Needs for Stability and Continuity of Relationships

STANDARD 8

Special Needs Agreements

When a child with special needs requires specialized services outside the family home, the social worker enters into a signed Special Needs Agreement with the family.

Social Work Practice:

Criteria for a Special Needs Agreement

The social worker will consider a Special Needs Agreement with the parent(s) and child over the age of twelve (12) years when:

- the agency has the required resources (e.g., financial, assessment, health, therapeutic, dietary) to meet the special needs of the child;
- it is in the best interests of the child;
- the agreement meets the child's need for safety, security, stability and continuity of relationships.

Assessment

Before offering a Special Needs Agreement, the social worker determines whether the child has special needs through an assessment completed by a qualified professional in the area of child development, such as a:

- psychologist;
- psychiatrist;
- physician or pediatrician;
- psychiatric nurse, mental health or infant development worker;
- special education teacher;
- other health care professional who has knowledge of or has recently assessed the child.

Preparing a Special Needs Agreement

Before entering into a Special Needs Agreement, the social worker will:

- ensure the agreement will meet the child's safety needs;
- consider the child's views, dependent on the child's level of development, about his/her sense of safety and well-being in regard to the proposed living arrangement;
- involve the family, extended family, the Band/cultural group or Aboriginal community and/or the designated representative of the community when appropriate;
- ensure the child understands the reasons for and details of the proposed living arrangement;
- ensure the parent entering into the agreement has custody of the child;
- arrange for an on-going sharing of confidential information among the parties of the agreement;

- confirm how the parents and other significant people will maintain contact and involvement with the child;
- agree on a time frame as established in the CFCSA;
- confirm a family care home and services being offered are available;
- confirm the custodial responsibilities that are transferred by the agreement;
- confirm the required notice to end the agreement.

Completing the Special Needs Agreement

The agreement defines:

- the transfer of care from the parent to the Director;
- an initial plan of care;
- a plan for parental contact with the child;
- services provided to the child;
- the time period of the agreement.

Participants

The Special Needs Agreement will provide a coordinated program of interventions designed to meet the needs of the child and will involve an interdisciplinary team that may include:

- medical professionals;
- other child and family service social workers;
- Community Living Services social workers;
- rehabilitation personnel;
- workers who have extensive experience working with chronically ill, physically disabled and developmentally delayed infants and children;
- area hospitals and health units.

Supporting the Special Needs Agreement

The social worker supports the child's connection to family, community and culture by:

- assisting the child to maintain contact with the family;
- providing the child with information about parental activities and progress toward reunification;
- assisting the child to maintain relationships with siblings and significant others through visits and shared activities;
- identifying extended family members who may provide respite services or be considered as alternative caregivers.

Reviewing and Renewing a Special Needs Agreement

The social worker and parent agree on the process to review the agreement and the timelines. The review will occur:

- at the request of the child, parent, and/or social worker;
- at intervals relevant to the child's development;
- before the agreement expires or is extended;

If the parent does not resume custody of the child when the agreement ends, the agreement can be extended to a maximum of thirty (30) days in order to amend the plan for the child.

Ending the Special Needs Agreement

An agreement ends when any of the following apply:

- the parent resumes custody of the child;
- the child is unwilling or unable to reside with the caregiver;
- the required notice is given by a participant to the agreement;
- the criteria for the agreement no longer applies;
- other actions are taken under the CFCSA;
- the agreement expires;
- the youth reaches the age of nineteen (19) years;
- the child dies;
- the youth marries.

The social worker gives a copy of the signed agreement to:

- the parent;
- the child over the age of twelve (12) years;
- the caregiver.

References: CFCSA: s.7, s.71, s.75
CFCS Regulation: Part 2(3)
AOPSI: Voluntary Services Practice Standard #2 Supervisory Approval Required for Voluntary Services
AOPSI: Voluntary Services Practice Standard #5 Family Service Plan Requirements for Support Services, Voluntary Care, and Special Needs Agreements
AOPSI: Voluntary Services Practice Standard #12 Development of a Comprehensive Plan of Care
AOPSI: Voluntary Services Practice Standard #16 Meeting the Child's Needs for Stability and Continuity of Relationships

STANDARD 9

Case Documentation for Voluntary Family Services Files

There are accurate and complete recordings on file to reflect the Voluntary Family Services provided to the family.

Social Work Practice:

Opening Recording

At the time services are initiated, the social worker documents:

- the initial request for services;
- the prior contact check;
- family background information which may include a genogram;
- referrals for services provided by other service providers;
- interagency service plans;
- the family service plan;
- Voluntary Care and/or Special Needs agreements.

Review Recording

The social worker completes review recordings every six (6) months or when the family's circumstances change to provide updates and expand the initial recording to include:

- additional historical information about the family;
- any agreements with the parents regarding access and guardianship responsibilities;
- case conference minutes;
- tracking summaries;
- reportable circumstances;
- correspondence.

The social worker and the agency supervisor sign all significant file recordings as per agency policy.

The social worker enters all required information in a common database (MIS).

The social worker ensures the family's file is kept confidential and in a secure location at all times.

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- References:**
- CFCSA: Part V Confidentiality and Disclosure of Information
 - AOPSI: Voluntary Services Practice Standard #2 Supervisory Approval Required for Voluntary Services
 - AOPSI: Voluntary Services Practice Standard #24 Transferring Voluntary Services Files
 - AOPSI: Voluntary Services Practice Standard #26 Closing Voluntary Services and Voluntary Child in Care Files

STANDARD 10

Case Documentation for Voluntary Children in Care Files

There are accurate and complete recordings on file to reflect the voluntary services provided to the child.

Social Work Practice:

Opening Recording

When a child comes into care through a voluntary agreement, the social worker documents:

- the date the child is admitted to care;
- the child's status, Band membership/affiliation and registration number;
- the parents' Band/cultural group, community membership or affiliation;
- an initial plan of care;
- reasons for service;
- biographical information about the child;
- family background information which may include a genogram;
- current placement and placement history;
- the child's medical history and reports;
- notice to the designated representative of the child's Band/cultural group or Aboriginal community, when appropriate;
- the emotional and physical circumstances of the child upon admission to care;
- confirmation that the child was made aware of the Rights of Children in Care;
- a photograph of the child.

Review Recording

The social worker completes a review every six (6) months or when the child's circumstances change that provides updates and expands the initial recording to include:

- a Comprehensive Plan of Care with references to previous plans;
- comprehensive plans of care reviews;
- updated placement information;
- additional education, medical and psychological reports, risk assessments and/or other assessments;
- contacts with the child, the child's family, the caregiver and other service providers;
- progress toward the goals of services provided for the child and family.

Additional documentation includes:

- copies of any agreements relating to the child;
- consents to the release of information;
- case conference minutes;
- tracking summaries;
- reportable circumstances;
- correspondence.

The social worker and the agency supervisor sign all significant file recordings as per agency policy.

The social worker enters all required information in a common database (MIS).

The social worker ensures the child's file are kept confidential and in a secure location at all times.

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- References:**
- AOPSI: Voluntary Services Practice Standard #2 Supervisory Approval Required for Voluntary Services
 - AOPSI: Voluntary Services Practice Standard #25 Transferring Voluntary Children in Care Files
 - AOPSI: Voluntary Services Practice Standard #26 Closing Voluntary Services and Voluntary Child in Care Files

STANDARD 11

Preserving the Identity of the Child in Care and Providing Culturally Appropriate Services

The social worker will preserve and promote the cultural identity of the child in care and provide services sensitive to the child's views, cultural heritage and spiritual beliefs.

Social Work Practice:

Preserving Identity

The social worker will:

- determine the Band/cultural group or Aboriginal community the child in care belongs to or is eligible to belong to;
- ensure the child is registered under the *Indian Act*, where entitled, and has membership status or is eligible for membership status with his or her own community;
- register the child with the Nisga'a Lisims Government, when entitled;
- involve the child, the child's family and the community representative, when appropriate, in assessments, case planning and development of the plan of care;
- provide the child in care with information about his or her heritage and culture, according to the child's developmental abilities;
- give priority to placing the child with the child's extended family or within the child's Band/cultural group or Aboriginal community.

When unable to place the child with extended family or within the community, the social worker will:

- ensure the caregiver is sensitive and knowledgeable of the child's heritage and identity and willing to support ongoing, regular contact with the child's family;
- ensure the child has access to his or her community's history, language, ceremonies, foods, and cultural, spiritual, artistic, athletic and recreational activities.

Providing Culturally Appropriate Services

The social worker will:

- identify family members, friends, community groups and organizations that can provide cultural resources to the child;
- enlist Band/cultural group or Aboriginal community services (e.g., child care worker, counsellor, children's therapeutic groups) for the child that are knowledgeable about and sensitive to a child's views, cultural and ethnic heritage, spiritual beliefs and identity;
- include the services of a language/cultural interpreter to participate in assessment, planning and service delivery, when appropriate;
- encourage and provide opportunities for the child to participate in cultural and religious instruction and events.

If a Child in Care is Harmed by Racism or Discrimination

When a child in care is harmed by racism or discrimination, the social worker, in cooperation with the parent, determines the appropriate response. Where it appears the child has been a victim of a crime because of his or her race or identity, the social worker will inform the parent and recommend the parent consults and reports the matter to the police.

References: CFCSA: s.2, s.3, s.4, s.70, s.71, s.75
CFCS Regulation: Schedule 1, 2
AOPSI: Voluntary Services Practice Standard #2 Supervisory Approval Required for Voluntary Services
AOPSI: Voluntary Services Practice Standard #15: Deciding Where to Place the Child

STANDARD 12

Development of a Comprehensive Plan of Care

When assuming responsibility for a child in care the social worker develops a Comprehensive Plan of Care.

Social Work Practice:

Before commencing a Comprehensive Plan of Care the social worker will:

- review the goals and services of all previous plans of care;
- review the legal status of the child;
- determine the level of guardianship authority required to provide services;
- determine the extent of the parent's involvement.

Timeline

The social worker ensures:

- an initial plan of care is developed within thirty (30) days of the child coming into care;
- a Comprehensive Plan of Care for a child is developed within six (6) months of a child coming into care;

Principles of the Plan of Care

The social worker develops a Comprehensive Plan of Care that:

- identifies the child's Band/affiliation, cultural group or Aboriginal community;
- meets the needs and capabilities of the child;
- ensures the physical and emotional safety of the child throughout the time the child is in care;
- establishes the family and community's involvement and continued rights and shared responsibilities for the child's health, education and spiritual development;
- promotes the child's existing relationships with siblings, family and community;
- is founded on a thorough understanding of the child's family history and current circumstances gathered through contact with a previous social worker, caregiver, family member and any significant persons in the child's life;
- acknowledges and respects the child's right to privacy;
- encompasses the views of the child and all the participants.

Assessment

The Comprehensive Plan of Care assesses:

- current functioning;
- the needs of the child;
- services required to meet the needs of the child;
- services and placements of the child while in care.

Participants

The social worker organizes a Comprehensive Plan of Care meeting that involves the following participants:

- the child over the age of twelve (12) years;
- members of the child's family, as identified by the child, unless one or more of the family members cannot be located or it is determined that it would not be in the child's best interest to include the person(s);
- service providers currently providing support or services to the child and the caregivers of the child;
- any person who has an important relationship with the child as identified by the child;
- any designated representative identified by the social worker, child or the child's family from the child's Band/cultural group or Aboriginal community.

Written Plan of Care

The social worker ensures that the meeting produces a written Comprehensive Plan of Care for the child that is distributed to the appropriate participants. The Comprehensive Plan of Care is based on all the information gathered from the participants, and includes:

- an assessment of the child's needs;
- a summary of the information presented;
- a long-term goal for the child;
- a description of the services to be provided and the names of the service providers;
- the goals of the services and time frames;
- a statement of the reasons why the services are being provided;
- a description of the evaluation process for each service;
- the date and place of the review;
- a provision for access to family, friends, community and culture (including language, history and traditional practices);
- approval of the supervisor.

Long-Term Goal

The social worker ensures the long-term goal of the Comprehensive Plan of Care is the return of the child to the parents.

References: CFCSA: s.2 (d), s.3 (a), s.4 (f), s.70 (1)(b)(c)
AOPSI: Voluntary Services Practice Standard #2 Supervisory Approval Required for Voluntary Services

STANDARD 13

Monitoring and Reviewing the Child's Comprehensive Plan of Care

The Comprehensive Plan of Care is monitored to determine the progress toward goals, the continued safety of the child, the effectiveness of the services and/or any barrier to services.

Social Work Practice:

The social worker gathers information from the child, parents, caregivers and service providers regarding:

- the child's progress;
- changes in the child's needs;
- changes in the family situation;
- the effectiveness of the plan in meeting the needs of the child;
- changes required to overcome barriers to achieving the service goals or to meet a change in the child's circumstances.

Timelines for Reviews

The Comprehensive Plan of Care is reviewed regularly, including:

- every six months – the social worker, in concert with the family, caregivers and service providers, reviews all aspects of the Comprehensive Plan of Care and identifies the necessary changes and updates;
- any time there is a change in circumstances for the child.

The worker ensures the monitoring process includes home visits.

References: CFCSA: s.2 (d), s.3(a), s.4 (f), s.70
AOPSI: Voluntary Services Practice Standard #2 Supervisory Approval Required for Voluntary Services

STANDARD 14

Rights of Children in Care

Children in care are entitled to be physically and emotionally safe, receive care consistent with their rights and be informed of their rights.

Social Work Practice:

The social worker explains to the child that he or she is entitled to be physically and emotionally safe and informed of the following rights, in a manner that is understandable to the child.

The Rights of Children in Care include:

- to be fed, clothed and nurtured according to community standards and to be given the same quality of care as other children in the placement;
- to be informed about their plans of care;
- to be consulted and invited to express their views, according to their abilities, about significant decisions affecting them;
- to reasonable privacy and to possession of their personal belongings;
- to be free from corporal punishment;
- to be informed of the standards of behaviour expected by their caregiver and of the consequences of not meeting the caregiver's expectations;
- to receive medical and dental care when required;
- to participate in social and recreational activities if available and appropriate and according to their abilities and interests;
- to receive religious instruction and to participate in the religious activities of their choice;
- to receive guidance and encouragement to maintain their cultural identity;
- to be provided with an interpreter if language or disability is a barrier to consulting with them on decisions affecting their custody or care;
- to privacy during discussions with members of their families, subject to any court orders that limit the access of family members to the child to protect the safety of the child;
- to privacy during discussions with a lawyer, an advocate from the Child and Youth Officer for BC, the Office of the Ombudsman, a member of the Legislative Assembly or a member of Parliament;
- to be informed of the procedures available for enforcing their rights.

The social worker reinforces the child's knowledge and understanding of the Rights of Children in Care by:

- ensuring the child is regularly informed of the rights according to the child's developmental level;
- advising the caregiver to reinforce the child's knowledge of these rights.

The social worker provides the child with a copy of the agency's review policy, and explains the purpose of the review process and how the child can be assisted in requesting a review.

In cases where the child reports that his or her rights have not been respected the social worker will:

- meet with the child and others to resolve the issues;
- inform the child of the agency review process, the services of the Child and Youth Officer for BC, the Office of the Ombudsman and any other advocacy services;
- provide support to the child throughout the review process.

References: CFCSA: s.2, s.4, s.70
AOPSI: Voluntary Services Practice Standard #34 Investigation of Alleged Abuse or Neglect in a Family Care Home

STANDARD 15

Deciding Where to Place the Child

When making decisions regarding where to place an Aboriginal child, consistent with the child's best interests and need for stability and continuity of lifelong relationships, the social worker gives priority to placing the child:

- with the child's extended family;
- within the child's Band/cultural group or Aboriginal community;
- with another Aboriginal family, if the child's own family or community cannot assume the child's care.

Social Work Practice:

In deciding where to place a child, the social worker considers the physical and emotional safety of the child and consults with the child's family and community to identify a safe and supportive living arrangement.

Placement Priorities

The social worker will:

- consider the adult members of the child's extended family, or other persons within the child's community as possible caregivers for the child;
- actively follow up with recommended members of the child's family or community to determine whether they would be willing and able to assume care of the child.

Ensuring Continuity

Additionally, the social worker will make every effort to:

- keep sibling groups together or arrange for frequent and regular contact if sibling groups are separated;
- ensure that the child will maintain contact with siblings, relatives and friends;
- ensure the child will attend the same school he or she attended before coming into care;
- ensure the child will maintain contact with his or her cultural community.

Placing the Child Outside His or Her Community

When it is necessary to place a child outside his or her community, the social worker will, with supervisory approval, select a caregiver who will:

- preserve the child's culture and identity by respecting the views, heritage, spiritual beliefs and socio-economic circumstances of the child's family;
- provide ongoing contact with the family;
- provide the child with opportunities to maintain regular and positive contact and involvement with his or her Band/cultural group or Aboriginal community.

- References:** CFCSA: s.4, s.93, s.35 (2)d, s.41 (1)(b), s.42.2 (4)(a), s.42.2 (4)(c), s.42.2 (7)(d), s.49 (7)(b), s.71, s.93 (1)(g)(ii)
- AOPSI: Voluntary Services Practice Standard #2 Supervisory Approval Required for Voluntary Services
- AOPSI: Voluntary Services Practice Standard #11 Preserving the Identity of the Child in Care and Providing Culturally Appropriate Services

STANDARD 16

Meeting the Child's Needs for Stability and Continuity of Relationships

Throughout the time the child is in care, the social worker supports the stability and continuity of the family and community relationships of the child.

Social Work Practice:

The social worker promotes continuity of family and community relationships for the child in care by:

- providing, promoting and supporting opportunities for the child to develop and maintain positive emotional attachments with parents, siblings, extended family and others who are significant in the child's life consistent with the child's best interests;
- maintaining a child's connections with his or her cultural heritage, spiritual beliefs and identity;
- minimizing disruption in the child's life through strategies to promote stability identified in the child's plan of care;
- involving the family and community in the planning and provision of services for the child and avoiding unnecessary delays in the decision process;
- using care as a service for a child when no less disruptive services are available;
- exploring on an on-going basis whether reunification with the family is possible;
- confirming the long-term goal of returning the child to the family.

References: CFCSA: s.2, s.3, s.4 (d), s.71

AOPSI: Voluntary Services Practice Standard #11 Preserving the Identity of the Child in Care and Providing Culturally Appropriate Services

AOPSI: Voluntary Services Practice Standard #15 Deciding Where to Place the Child

STANDARD 17

Social Worker's Relationship and Contact with a Child in Care

The social worker establishes a relationship with a child in care and meets with the child as indicated in the Comprehensive Plan of Care.

Social Work Practice:

Objectives

The social worker's objectives in working with a child in care are to:

- build a meaningful relationship with the child;
- develop trust between the child and the social worker;
- celebrate milestones and achievements, birthdays and significant occasions;
- seek the child's views on all aspects of the plan of care and identify and address any barriers that prevent the child's participation;
- seek the child's views on all aspects of daily activities including the child's living situation;
- identify challenges that exist with respect to the child's care;
- ensure that the child understands his or her rights as a child in care.

Frequency of Visits

The social worker makes every effort to meet with the child in care as indicated in the plan of care and as follows:

- one visit on the day of placement;
- seven days after placement;
- every thirty (30) days thereafter;
- when a child is moved;
- when there is a significant change in the child's circumstances;
- when there is a change in social workers (the new social worker meets with the child within five (5) days).

Frequency of additional contact is based on the child's:

- level of vulnerability;
- developmental needs;
- visibility in the community.

Meetings are held in person and in private, and in a manner that allows for the child and the social worker to communicate freely.

The social worker documents the meetings with the child including the child's views, significant events, agreements and decisions reached with the child in the child's file.

References: CFCSA: s.2 (d), s.4 (f), s.70 (1)(b)(c)

STANDARD 18

Providing the Caregiver with Information and Reviewing Appropriate Discipline Standards

The social worker provides the caregiver with information about the care and safety of the child at the time of the placement and reviews appropriate discipline standards with the caregiver and the child.

Social Work Practice:

Information to the Caregiver about the Child

The social worker will make information available to the caregiver regarding the child:

- at the time of the placement;
- when additional information becomes available during the time of the placement;
- in writing as soon as possible;
- when the child is placed on an emergency basis, the social worker will provide the information within one (1) week of the child's placement in the home.

The information will include the following specific information:

- full name, date of birth and legal status;
- the overall goal and plan of care for the child and the caregiver's role in the plan of care;
- plans of care;
- names of the social workers responsible for the child and the family care home;
- known medical and mental health history, needs and risks;
- child's daily care (e.g., mealtimes, bedtime routines);
- any safety risks to the child, including the need to protect the child from contact with another person;
- any health or safety risks posed by the child toward the caregiver or any other person in the home;
- scheduled appointments with service providers or professionals;
- names of people who will have access to the child and how access will occur;
- the child's Band/cultural group or Aboriginal community;
- the child's school;
- the child's participation in activities;
- any allegations of abuse or neglect in previous placements and the outcome of the investigations of the alleged abuse or neglect;
- notification procedures if the child is lost, missing, runaway, or suffers serious harm or injury.

Appropriate Discipline

In addition to informing the caregiver about the child, the social worker, the child and the caregiver review the rules of the home and appropriate discipline standards.

The social worker informs the child and the caregiver that the following practices are unacceptable:

- deprivation of a child'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 or youth, other children or youth, the caregiver, or others;
- seclusion (not including time-out) or confinement;
- assignment of unreasonable exercise or work that may be excessive or harmful to the child or youth;
- threats of removal from the care setting in order to manipulate or coerce the behaviour of the child or 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 individual's behaviour has warranted them;
- being disciplined by another child who has not been designated as a temporary caregiver,
- coercive behaviour by the caregivers regarding their religious or personal beliefs.

The social worker ensures a copy of the information provided to the caregiver is placed in the child's file.

References: CFCSA: s.70, s.79 (j)
 AOPSI: Voluntary Services Practice Standard #31 Training of Caregivers

STANDARD 19

Providing Initial and Ongoing Medical and Dental Care for a Child in Care

The social worker will ensure a child in care receives a medical and, when appropriate, a dental examination when coming into care. All urgent and routine medical services, including vision and hearing examinations, as recommended by the child's primary physician/dentist, are provided for the child in care.

Social Work Practice:

When a child comes into care, the social worker will:

- ensure the child receives a medical examination. Examinations are repeated as required and when the child leaves care;
- ensure the child receives dental, vision and hearing examinations and procedures as recommended by the child's primary physician and/or dentist;
- inform the caregiver of the status of the child's health so that the caregiver is prepared for any medical condition that may result in an emergency.

The social worker consults with the child's parent(s)/family, the child, the child's health care provider, and the child's caregiver to determine:

- current medication;
- immunization records;
- information regarding allergies;
- information regarding chronic health problems;
- information about any physical and/or mental disabilities;
- current treatment plans, including the names of all attending doctors, dentists and other health professionals.

In developing the health care component of the child's Comprehensive Plan of Care, the social worker collects and documents all relevant information about the child, including:

- the child's current and future health needs and how these needs will be met;
- the specific responsibilities of the social worker, as well as those of the child's parent(s)/family, caregiver and, if appropriate, the child, in meeting the child's health care needs and objectives.

References: CFCSA: s.13, s.29

Infants Act: s.16

AOPSI: Voluntary Services Practice Standard #12 Development of a Comprehensive Plan of Care

STANDARD 20

Planning a Move for a Child in Care

In making the decision to move the child from one placement to another, the social worker will:

- consider the child's safety, best interests and needs;
- prepare and support the child to the fullest extent possible for the move to the new placement;
- actively seek the child's views regarding the decision and determine if any of the child's wishes can be accommodated within the context of planning for the move;
- whenever possible and appropriate, involve the child's caregiver, child's parent(s)/family and proposed caregiver in making the decision, informing the child and planning the move.

Social Work Practice:

Supporting the Child

The social worker develops a strategy to actively prepare and support the child by:

- providing an explanation of the reasons a move is necessary in a language and manner appropriate to the child's age and developmental capabilities;
- explaining to the child who his or her new caregiver will be;
- helping the child to formulate questions and/or concerns about how his or her needs will be met in the new placement;
- if possible and appropriate, assisting the child and the current caregiver to reach a mutual understanding of how their relationship is ending, what the prospects of future contact may be, and how the child's care experience can be understood within the context of other life experiences.

The New Placement

The social worker will:

- arrange at least one pre-placement visit or contact, whenever possible;
- participate with the new caregiver and the child in an orientation tour of the child's new placement, ensuring that the child's questions and concerns are adequately addressed;
- ensure the new caregiver supports the child in understanding and cultivating his or her cultural heritage, spiritual beliefs and identity;
- ensure the new caregiver supports the child in developing a strong sense of identity, resiliency, self care and life skills according to the child's developmental abilities and capacity.

When the Child Requests a Move

If the child has requested to move or is refusing to return to a particular placement, the social worker:

- reviews the request with the family care home social worker and the caregiver;
- actively seeks the child's views and reasons for requesting to move or refusing to return to the placement;
- involves the child in problem solving around the issues influencing his or her views;
- provides a temporary arrangement, in consultation with the child and the child's parent(s), when appropriate, while the social worker assesses the reasons why the child is unwilling to remain in or return to the placement;
- determines whether it is possible to move toward a resolution of the child's concerns, complaints or possible conflict between the child and the child's caregiver with the goal of returning the child to the placement setting;
- determines whether a serious incident (i.e., reportable circumstance) involving the child has occurred and, if so:
 - consults with the supervisor and family care home social worker;
 - reports the incident to the Director, CFCSA;
 - follows any related protocol.

The social worker informs the supervisor of the change of placement, documents the change in the child's file and enters the information in a common database (MIS).

References: CFCSA: s.2 (d), s.3 (a), s.4 (f), s.70 (1)(b)(c)
AOPSI: Voluntary Services Practice Standard #2 Supervisory Approval Required for Voluntary Services
AOPSI: Voluntary Services Practice Standard #15 Deciding Where to Place the Child

STANDARD 21

Reportable Circumstances

The agency director and the Director, CFCSA for Aboriginal Agencies are notified of reportable circumstances and grievous incidents.

Social Work Practice:

When a child or youth who has, or whose family has, received services from the agency within the past twelve (12) months is involved in a reportable circumstance or grievous incident, a report is sent to the Director, CFCSA for Aboriginal Agencies and copied to the delegated agency director. The initial report must be prepared within twenty-four (24) hours of the incident, and a case review and written report must be submitted within ten (10) days.

Reportable Circumstances

Reportable circumstances include:

- the death of a child;
- a child in a life-threatening situation (e.g., illness, serious accident, abduction);
- a child who frequently runs away;
- a child who is lost or missing (with or without family) for 10 days;
- a child who is involved in a violent crime;
- a child who is abused or neglected in a situation that could be perceived as being linked to the Director, CFCSA of Aboriginal Agencies or his delegate (e.g., a child in care, respite care and/or receiving services);
- a child in care subject to a Protocol Investigation of a Family Care Home;
- a child who has been involved in, or exposed to, a high-risk situation or disaster.

Each of these examples is considered to be a reportable circumstance or grievous incident. In such situations the reportable circumstance procedure must be followed. The agency supervisor must make the initial report within twenty-four (24) hours.

Elements of the Report

The report must include:

- the name and birth date of the child;
- the legal guardianship status of the child;
- whether the child is Aboriginal and if so, the name and address of the child's Band/cultural group or Aboriginal community;
- the date(s) of the incident or situation;
- the name, address and type of placement that the child was in at the time of incident;
- the name of the social worker and supervisor assigned to the child;
- how the social worker was informed of the incident, and by whom;

- the known circumstances surrounding the incident including the date, time, place, other people present or involved, details regarding any abuse or neglect, and details of the incident which may have resulted from abuse or neglect;
- the current status of any child protection investigation or police investigation;
- a brief summary of the agency's involvement with the child and the family of the child, including all details of any past similar circumstances that may have caused harm to the child;
- a listing of people who have been notified by the social worker, including the police, family members, the community, other agencies or ministry staff;
- any additional actions taken by the social worker or supervisor.

When the information is not immediately available, the supervisor indicates when it will be forwarded.

Case Review

The case review and written report which must be submitted within ten (10) days includes:

- the name and birth date of the child;
- the name of the social worker and supervisor assigned to the child;
- any required information from the initial report that was not available at the time the initial report was completed;
- any factual information that would add to the initial report;
- summary of the history of previous services to the child and family, and the current reason that services are being provided to the family;
- a detailed statement of the child's placement history, including any information describing the nature or circumstances that lead to the placement of the child;
- all details of prior allegations or confirmed reports of abuse and neglect that are relevant to the nature or circumstances of the matter being reported;
- the status of any child protection investigation, including additional information received from the police or other people concerning suspected child abuse or neglect;
- an update regarding the needs of the child resulting from the incident and how these needs will be met;
- an update regarding any other children at risk, and the plan for protecting these children;
- a summary of any additional services provided to the child, family, caregivers and service providers as a result of the incident or circumstance;
- a summary of any steps being implemented to prevent further similar incidents, and the status of these intervention strategies;
- any plan for further investigation or other required actions;
- other information requested by the Director, CFCSA of Aboriginal Agencies.

The following information is to be provided as appropriate to the circumstances and as soon as it becomes available:

- the medical reports;
- the autopsy report;
- the results of the police investigation;
- the results of the case review.

Informing the Child's Family

The social worker will inform the child's family and provide supports to the family as appropriate to the circumstances and as soon as possible. Supports may include:

- referral to community supports;
- financial or in-kind assistance for travel costs;
- in the case where the child has died, a financial contribution for the funeral.

Director's Response

- Within two (2) days, the Director, CFCSA reviews the report and determines if an additional report is required and what specific information is to be included.
- Within five (5) days of receiving an additional report the Director, CFCSA will indicate if a further review is required, the nature of the review, and whether a referral to an external review body is made.

Involving the Public Guardian and Trustee and/or INAC Estate Planning

- Where there has been a death or critical injury to a child in care, the social worker informs the Public Guardian and Trustee and/or INAC Estate Planning of the event to determine their role in protecting the child's financial or legal interests.

References: CFCSA: s.51, s.52
 INAC Estate Planning
 AOPSI: Voluntary Services Practice Standard #2 Supervisory Approval Required for Voluntary Services

STANDARD 22

When a Child or Youth is Missing, Lost or Runaway

The social worker and parent(s) take responsible action to locate a missing, lost or runaway child or youth, and to safeguard the child or youth from harm or the threat of harm.

Social Work Practice:

When a Child in Voluntary Care is Missing, Lost or Runaway

The social worker in cooperation with the parent(s) will:

- ensure that the police have been notified;
- provide a current picture to the police;
- provide a list of known associates to the police;
- check with the police regarding their efforts to locate the child or youth;
- place an Alert on the common database (MIS);
- inform the Director, CFCSA if the child or youth is at high risk or harm;
- notify any persons significantly involved with the child or youth who may be able to locate him or her;
- actively seek out possible friends who may know the child or youth's whereabouts;
- identify/check possible persons or places where the child or youth may be located;
- actively and regularly coordinate search activities until the child or youth is found;
- maintain and intensify search efforts for as long as it takes to locate the child or youth;
- arrange a case conference with significant persons in the child or youth's life to ensure all possible options are considered to find the child or youth and to ensure his or her safety;
- consider media assistance when a review of the circumstances justifies releasing confidential information in order to ensure the child or youth's safety.

If a Child in Care Habitually Runs Away

When a child habitually runs away the social worker will:

- develop strategies to address the high-risk behaviour with parent(s), individuals and agencies that can assist in addressing the behaviour or minimizes the high risk associated with the behaviour;
- develop a safety plan with the child;
- identify who the child can contact to facilitate returning to care.

Missing, lost or runaway children or youth who may be at high risk of harm include those who:

- have an acute physical or psychological condition;
- have limited ability to care for themselves or to understand the possible consequences of their actions;
- may have been abducted;
- would not normally go missing and there is no apparent precipitating reason for them to run away;
- are known to have associations with people or places that have put them at significant risk of harm in the past.

When the Child is Located

When the child or youth is located, the social worker involves the parent(s) to:

- assess the child or youth's circumstances and need for medical treatment and/or therapeutic support;
- immediately advise the police and all others who were notified the child or youth was missing that he or she has been located;
- discuss any injury potentially requiring a criminal investigation or complaint with the police;
- assess the child or youth's reason for being lost or missing or for running away, and obtain the child or youth's views about the situation;
- return the child or youth to his or her placement or arrange another placement;
- assess whether the child or youth may be entitled to criminal injury compensation and inform the Public Guardian and Trustee if the child may be entitled;
- determine if the circumstances described by the child or youth or the reasons given constitute a reportable circumstance;
- determine whether the child or youth's Comprehensive Plan of Care needs to be reviewed and revised.

References: AOPSI: Voluntary Services Practice Standard #2 Supervisory Approval Required for Voluntary Services
AOPSI: Voluntary Services Practice Standard #21 Reportable Circumstances

STANDARD 23

Interviewing the Child About the Care Experience

When a child leaves a placement and has the capability to understand and respond, the child is interviewed and his or her views are sought about the quality of care, service and support he or she received in the placement.

Social Work Practice:

When interviewing a child about his or her experience in a placement, the social worker will:

- consider the child's age, developmental capabilities and cultural background;
- provide the child with an interpreter, if disability is a communication barrier;
- provide the child with the opportunity to give his or her own observations.

The social worker obtains the child's observations about his or her experience in the placement regarding, but not limited to, the following:

- personal safety;
- expressing views, being heard and being informed;
- maintaining relationships;
- positive parenting/behaviour management practices of the caregiver;
- health and nutrition;
- cultural identity and religious expression;
- access to the child's community's history, language, ceremonies, foods, and cultural, spiritual, artistic, athletic and recreational activities;
- leisure activities and education;
- autonomy and self-care;
- privacy and personal belongings.

The information obtained in the interview is documented in the child's file and relevant information is shared with the family care home social worker.

References: AOPSI: Voluntary Services Practice Standard #17 Social Worker's Relationship and Contact with a Child in Care

STANDARD 24

Transferring Voluntary Services Files

Prior to transferring Voluntary Services files, the social worker will complete all required documentation and follow existing protocol procedures.

Social Work Practice:

Transfer Criteria

Voluntary Services files will be transferred when:

- a family relocates to another geographical location;
- the service required is beyond the delegation level of the agency;
- a transfer from one social worker and/or specialized team to another within an agency is required;
- the sending/receiving agency supervisors have approved the transfer.

Role of Agency Supervisors in the File Transfer

The sending supervisor will:

- ensure all existing protocol procedures are followed;
- ensure the receiving agency is delegated to provide the required services;
- initiate contact with the receiving supervisor;
- ensure all required file documentation is updated and complete;
- provide supervisory approval;
- authorize transfer and complete transaction on the electronic system.

The receiving supervisor will:

- confirm the file is current;
- confirm the file transfer date;
- accept the file electronically;
- assign the file to a social worker.

Role of the Sending Social Worker in the Voluntary Services File Transfer

Prior to transferring a Voluntary Services file the sending social worker will:

- complete a service plan review;
- complete a transfer recording;
- identify with the receiving staff the need, timing and process for the transfer and ensure a full briefing is provided;
- meet with the parents, child and receiving social worker;
- notify service providers involved in the case about the transfer and the name and contact information of the new social worker;
- notify, when appropriate, the designated representative of the Band/cultural group or Aboriginal community if the child belongs to another community;
- involve, plan and inform the family, extended family and community representatives whenever possible of the transfer (where this is a planned move) and at a minimum, tell them the name and the contact information of the new social worker.

Role of the Receiving Social Worker in the Voluntary Services File Transfer

Prior to the transfer of a Voluntary Services file, the receiving social worker will meet with the:

- sending social worker for a full briefing of information;
- parents and child;
- family care home and service providers to review case planning.

At the time of the transfer of the Voluntary Services file, the receiving social worker will:

- conduct a service plan and file review;
- meet with the family and child within five (5) days of assuming responsibility for the file.

Elements of this standard may apply in local and inter-agency transfers only. Social workers are to consult with the supervisor to determine appropriate compliance to the standard.

References: Aboriginal Agency Protocols defining transfer processes
AOPSI: Voluntary Services Practice Standard #2 Supervisory Approval Required for Voluntary Services

STANDARD 25

Transferring Voluntary Child in Care Files

Prior to transferring a Voluntary Child in Care file, the social worker will complete all required documentation and follow existing protocol procedures.

Social Work Practice:

Transfer Criteria

Voluntary Child in Care files will be transferred when:

- a family relocates to another geographical location;
- the service required is beyond the delegation level of the agency;
- a transfer from one social worker and/or specialized team to another within an agency is required;
- the sending and receiving supervisors have approved the transfer.

Role of Agency Supervisors in the File Transfer

The sending supervisor will:

- follow all existing protocol procedures;
- ensure the receiving agency's social worker is delegated to provide the required services;
- initiate contact with the receiving supervisor;
- ensure all required file documentation is updated and complete;
- provide supervisory approval;
- authorize transfer and complete the transaction on the electronic system.

The receiving supervisor will:

- confirm the file is current;
- confirm the file transfer date;
- accept the file electronically;
- assign the file to a social worker.

Role of the Sending Social Worker in the Voluntary Child in Care File Transfer

Prior to transferring a Voluntary Child in Care file, the sending social worker will:

- complete a service plan review;
- complete a transferring recording;
- update the Comprehensive Plan of Care;
- identify with the receiving staff the need, timing and process for the transfer and ensure a full briefing is provided;
- meet with the child and caregiver to explain the transfer;
- meet with the child, caregiver and the receiving social worker;
- notify, when appropriate, the designated representative of the Band/cultural group or Aboriginal community if the child belongs to another community;
- notify the service providers involved in the case about the transfer, and the name and contact information of the new worker;
- involve, plan and inform the family, extended family and community representative whenever possible of the transfer (where this is a planned move) and at a minimum, tell them the name and contact information of the new worker.

Role of the Receiving Social Worker in the Voluntary Child in Care File Transfer

Prior to the transfer of a Voluntary Child in Care file, the receiving social worker will meet with the:

- sending social worker for a full briefing of information;
- parents and child;
- family care home and appropriate service providers to review case planning.

At the time of the transfer of the Voluntary Child in Care file, the receiving social worker will:

- conduct a service plan and file review;
- meet with the family and child within five (5) days of assuming responsibility for the file.

Elements of this standard may apply in local and inter-agency transfers only. Social workers are to consult with the supervisor to determine appropriate compliance to the standard.

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- References:** CFCSA: s.95
Aboriginal Agency Protocols defining transfer processes
AOPSI: Voluntary Services Practice Standard #2 Supervisory Approval Required for Voluntary Services

STANDARD 26

Closing Voluntary Services and Voluntary Child in Care Files

Prior to closing a Voluntary Services and/or Voluntary Child in Care file, the social worker will ensure that the circumstances that necessitated the provision of services no longer exist.

Social Work Practice:

Voluntary Services File

When closing a Voluntary Services file the social worker will:

- complete a closing summary;
- obtain the supervisory approval;
- meet with the parent(s)/family to discuss closure;
- notify service providers that the file will be closed;
- refer the family to appropriate services;
- notify, when appropriate, the designated representative of the Band/cultural group or Aboriginal community if the family belongs to another community.

Voluntary Child in Care File

When considering the return of the child to the parent, the social worker will:

- review the Comprehensive Plan of Care to ensure the objectives of the plan have been achieved;
- provide the family and child with relevant information;
- meet with the caregiver and child to discuss the return;
- obtain supervisory approval;
- ensure the child has all personal belongings, including pictures and lifebooks, where appropriate;
- notify service providers of the file closure;
- notify, when appropriate, the designated representative of the Band/cultural group or Aboriginal community if the child belongs to another community of the closure;
- identify and refer the family to appropriate support services;
- complete a closing summary.

The social worker enters the closure of the Voluntary Services and/or the Voluntary Child in Care file in the common database (MIS).

References: AOPSI: Voluntary Services Practice Standard #2 Supervisory Approval Required for Voluntary Services

STANDARD 27

Voluntary Services Protocols

The social worker is familiar with and follows all protocols related to the delivery of child and family services that the agency has established with local and regional agencies.

Social Work Practice:

The Aboriginal agency establishes and maintains protocols related to the delivery of child and family services with:

- the ministry;
- other Aboriginal Child and Family Service agencies (fully and partially delegated);
- Bands and Aboriginal communities;
- police;
- health authorities;
- school districts;
- other ancillary agencies.

The intent of the protocols is to define the:

- relationship between the agencies based on their level of delegation;
- jurisdictions of the agencies;
- roles of the social workers, supervisors and management in the assessment, planning, delivery and monitoring of services;
- process for assigning case management responsibility;
- the process for sharing and disclosing information.

Additionally, the protocol is intended to:

- enhance collaborative work practices;
- be consistent with all relevant legislation that defines practice in the delivery of child and family services;
- provide a clear conflict resolution process, a review process and training schedule.

References: CFCSA: s.14
BC Handbook for Action on Child Abuse and Neglect
Inter-Provincial and Provincial Protocols
AOPSI: Voluntary Services Practice Standard #24 Transferring
Voluntary Services Files
AOPSI: Voluntary Services Practice Standard #25 Transferring
Voluntary Child in Care Files

STANDARD 28

Supervisory Approval Required for Family Care Home Services

The social worker consults with the supervisor and obtains the supervisor's approval at key points in the provision of Family Care Home Services and ensures there is a thorough review of relevant facts and data before decisions are made.

Social Work Practice:

In the delivery of Family Care Home Services, the family care home social worker consults with the supervisor when:

- receiving a family care home application;
- the criminal record check completed by the family care home applicants (or any adult person residing in the applicant's home) identifies a criminal record;
- approving/rejecting the family care home application;
- approving/rejecting the family care home upon completion of the home study;
- signing an agreement with a caregiver;
- completing the annual review of the family care home;
- determining the level of a family care home;
- placing a child in a family care home prior to the completion of the home study;
- receiving reports of abuse and/or neglect in a family care home;
- receiving a Quality of Care report.

STANDARD 29

Family Care Homes – Application and Orientation

People interested in applying to provide family, restricted or specialized care complete an application and orientation process. The social worker provides an orientation for applicants regarding the application process and the agency's expectations of caregivers when caring for children.

Social Work Practice:

Application Package

The social worker ensures that the application package includes:

- Consent for Release of Information form;
- Medical Examination form;
- Application form;
- Criminal Record Information and Criminal Records Search forms;
- Reference forms.

Information Provided Regarding the Application Process

The social worker provides the following direction and information to the applicant:

- Consent for Release of Information – the consent form allows the social worker to speak with the references, physician and any other collaterals essential to determining the appropriateness of the applicants.
- Medical Examination – the applicants are directed to have medical examinations to determine if there are health or psychological issues that would prevent them from providing appropriate care for children placed in their home. When the physician completes the exam, he or she returns the form directly to the social worker. The social worker may have contact with the physician regarding the written report.
- Application Form – the applicants complete the application form. The social worker reviews the form with the applicants and responds to any questions.
- Criminal Record Information and Criminal Records Search Forms – the applicants complete the Criminal Record Information form and have a criminal records check completed through the appropriate police department. The social worker informs the applicants that other checks may be conducted to ensure that the applicants do not have a history that would negatively impact the safety and well-being of children placed in their home.

The social worker informs the applicants of the following matters related to the criminal records check:

- all people over the age of eighteen (18) years who reside in the home must complete a criminal records check;
- the home study will not commence until the criminal records check is complete;

- if a family member has a criminal record, the following factors will be taken into consideration when reviewing the application:
 - length of time since the conviction;
 - the seriousness and nature of the crime;
 - if the crime involved children or youth;
 - steps the applicant has taken to address and change the offending behaviour.
- if a family member has a criminal record, the delegated agency director, in consultation with the social worker, will determine if the record will impact the safety of any child placed in the home. Aboriginal Services is available for consultation with the agency if consideration is being given to approving a home where the applicant has a criminal record.
- when the applicant, family member or a resident in the home has a serious criminal history, the social worker will refer the application to the Aboriginal Services office in Victoria. A review will be conducted by the Attorney General and a determination will be made regarding the appropriateness of approving the home.
- References – the applicants identify three references and provide them with the agency’s forms. The references send the forms directly to the agency upon completion. The social worker reviews the form with the identified references. The references include a family member, a non-family community member, and an individual known to the applicant through the work place or a volunteer association.

Orientation

The social worker ensures that the orientation provided by the agency includes information about:

- the Rights of Children in Care;
- the role and responsibilities of caregivers;
- Aboriginal culture;
- the safe storage of firearms and ammunition;
- liability and other insurance coverage;
- discipline standards;
- confidentiality;
- medication storage;
- record keeping;
- child-safe cribs, car seats, seat belts, smoke detectors, etc.;
- additional training opportunities;
- the home study process.

The social worker ensures that prospective caregivers complete the orientation before being approved as a family care home. When the application process is completed and the home study is scheduled to begin before the orientation, the home study process should be explained to the applicant as well as the agency’s expectations for caregivers.

Application Assessment Process

The social worker reviews and assesses the following information to determine if the applicant should be a candidate for the home study process:

- Application – the social worker makes an initial determination of the applicant’s motivation to become a family care home provider;
- Prior Contact Check (PCC) – the social worker conducts a PCC of agency files, the Management Information System (MIS), other Aboriginal child and family agencies and other provincial child and family service agencies when the applicants are from another province;
- Criminal Record Information and Criminal Records Check – when a criminal record exists, the social worker, supervisor and agency director are responsible for determining if a child would be safe in the home;
- Reference information – the social worker determines if community knowledge of the applicants confirms their appropriateness as a family care home;
- Medical information – the social worker determines if the applicants are able to care for children based on the medical report provided by the physician.

Based on the initial assessment, the social worker makes recommendations to the agency supervisor who determines if the applicants should continue to the home study process.

References: CFCSA: s.70, s.71, Part 5
AOPSI: Voluntary Services Practice Standard #28 Supervisory Approval Required for Family Care Home Services

STANDARD 30

Home Study

Family care homes are assessed to ensure that caregivers understand and meet the Family Care Home Standards.

Social Work Practice:

Home Study Procedure

The social worker meets with the family in their home to assess the family. The assessment covers broad areas of family functioning and characteristics essential to successful fostering. They are:

- the reasons for fostering;
- the family and biological history of family members;
- the family rules, including parenting skills, expectations and methods of discipline;
- the relationships of parents and/or other adults in the home;
- the knowledge and practice of Aboriginal culture;
- child care skills.

Family Care Home Standards

The social worker reviews the Family Care Home Standards with the applicants. The standards cover the following key areas in the delivery of services to children in care:

- safeguarding children;
- short- and long-term planning;
- caring for children;
- preserving the child's culture and identity by respecting the views, heritage and spiritual beliefs of the child;
- ensuring the child has regular and on-going access to his or her community's history, language, ceremonies, foods and cultural, spiritual, artistic, athletic and recreational activities;
- working with the family and providing ongoing contact with the family;
- record keeping.

Upon completion of the home study process, the social worker will review all outstanding concerns or issues raised in the home study with the supervisor to ensure all issues are resolved satisfactorily and make recommendations:

- to accept or reject the applicant;
- for appropriate placements (e.g., age, gender, special needs, number of children to be placed in the home).

Approved family care homes must be inspected to ensure they meet the following requirements:

- all firearms and ammunition in the home are locked away and stored separately from each other;
- a fire extinguisher and smoke detector are located in the hall of each sleeping area and on all floors of the home as per provincial fire safety regulations;
- there are proper medication storage and dispensing procedures;
- seat belts and child safety restraints are available for the children (i.e., the child wears a seat belt or is placed in an approved seating restraint while travelling in a vehicle);
- when the vehicle is equipped with airbags, the child less than one year of age and/or under about 20 pounds travels in the back seat of the vehicle;
- cribs meet federal government safety standards;
- child walkers are not used;
- each child in care is provided with appropriate space identifiable as the child's own;
- the home is designed to keep children safe from the risk of fire and other hazards.

Documentation

Throughout the home study process, all information is documented and placed on the family care home file. The documentation must include:

- Application form;
- Prior Contact Check (PCC);
- Consent for Release of Information form;
- medical form;
- criminal information and criminal records forms;
- three references;
- home study;
- home study assessment and recommendations.

Where the prospective family care home is not approved, the applicant is informed both in person and in writing. Where family circumstances change, the home may be reassessed.

The social worker enters the information in a common database (MIS).

References: Ministry Foster Home Standards
AOPSI: Voluntary Services Practice Standard #28 Supervisory Approval Required for Family Care Home Services

STANDARD 31

Training of Caregivers

Upon completion of the application, orientation and home study processes, the approved applicant(s) will participate in training to ensure the safety of the child and to preserve the child's cultural identity.

Social Work Practice:

The social worker encourages the caregivers to participate in all available training and is responsible for:

- identifying training needs;
- determining training resources;
- notifying the family care home of all training opportunities;
- participating in the training delivery;
- conducting training evaluations at completion of training sessions;
- tracking all training offered to and attended by the caregivers.

Training Strategies

The social worker ensures training is available through:

- group training sessions;
- individual training sessions, when appropriate;
- inclusion of family care homes in agency and community training related to parenting, family dynamics, conflict resolution, behaviour management, suicide, Fetal Alcohol Spectrum Disorder, and grief, loss, separation and attachment disorders, etc.;
- training booklets, literature and videos provided on a group or individual basis;
- courses available on-line.

STANDARD 32

Signed Agreement with Caregivers

All caregivers have a written Family Care Home Agreement that describes the caregiver's role, responsibilities and payment level.

Social Work Practice:

Once the family care home has been approved, the social worker, supervisor/agency director and caregiver sign an agreement that defines the services they will provide to the child.

The social worker will:

- review the agreement with the family care home and make mutually agreed upon adjustments;
- sign agreements with the family care home annually;
- place the agreement on the family care home file and provide a copy to the family care home provider;
- ensure all revisions, deletions and additions to the Family Care Home Agreement forms and schedules are reviewed and approved by the Aboriginal Services office.

References: AOPSI: Voluntary Services Practice Standard #28 Supervisory Approval Required for Family Care Home Services

STANDARD 33

Monitoring and Reviewing the Family Care Home

The social worker will monitor the family care home regularly and formally review the home annually to ensure the standards of care and the needs of the child(ren) placed in the home continue to be met.

Social Work Practice:

Monitoring the Family Care Home

The social worker monitors the family care home by making regular home visits to:

- provide support to the caregiver;
- ensure the family care home meets the standards of care;
- ensure the well-being of the child;
- ensure the home continues to be a physically safe environment;
- identify significant changes for the family that would impact their ability to care for the children placed in the home;
- assess the ability of the caregiver to assist in achieving the short- and long-term goals for the children.

Annual Review

A review is conducted annually and includes the following:

- a file review;
- a home visit and interview with the family care home;
- a review of the physical and safety features of the home;
- the completion of a written review, signed by the supervisor or agency director, and social worker and caregiver, and filed in the family care home file;
- a discussion with the supervisor of all concerns that may arise in the review;
- a new assessment of the home if the circumstances or composition of the family has changed significantly in the last year;
- a review and signing of a new agreement.

The social worker ensures the documented review is discussed and signed with the family care home and all concerns that arose in the review are addressed and resolved satisfactorily.

References: AOPSI: Voluntary Services Practice Standard #28 Supervisory Approval Required for Family Care Home Services

STANDARD 34

Investigation of Alleged Abuse or Neglect in a Family Care Home

Throughout a protocol investigation, the voluntary services social worker responsible for the child in care ensures the safety of the child and provides supports to the child and the child's family.

The voluntary services social worker responsible for the family care home supports the caregiver.

Social Work Practice:

The procedures outlined in Protocol Investigation of a Family Care Home for Aboriginal Agencies with Voluntary Services and/or Guardianship Delegation apply when a voluntary services social worker receives a report of abuse and/or neglect in a family care home.

Supports for Family Care Home

The agency provides an advocate for the family care home, available upon request, who offers support and information to the home regarding the protocol investigation process.

Review Process

When the family care home is dissatisfied with the outcome of the protocol investigation, the caregiver may request a Community Review and/or appeal to the Director, CFCSA for Aboriginal Agencies.

Community Review Process

This process has the authority to review the administrative conduct of the investigation. It does not have the authority to review the delegated practice decisions of the Director or make recommendations regarding the conduct of practice.

Steps in the Community Review Process may include:

- The caregiver may direct his or her concerns to the delegated agency director and the identified Band representative to request a review of the protocol investigation process;
- The request must be made within 30 days of the caregiver receiving the protocol investigation report and agency director's letter;
- The identified Band representative, in consultation with the delegated agency director, completes an administrative review of the process;
- The Band representative and the delegated agency director inform the caregiver of the results of the review.

Appeal to the Director, CFCSA for Aboriginal Agencies

This process has the authority to review delegated practice decisions and make recommendations regarding the conduct of practice.

- The caregiver may direct his or her concerns to the Director, CFCSA for Aboriginal Agencies and request a review of the investigation;
- The request must be made within 30 days of the caregiver receiving the investigation summary and the agency director's letter;
- The Director, CFCSA for Aboriginal Agencies completes the review, reaches a decision, and informs the caregiver and the delegated agency director of his or her decision.

References: Protocol Investigation of a Family Care Home for Aboriginal Agencies with Voluntary Services and/or Guardianship Delegation

STANDARD 35

Quality of Care Review

A Quality of Care Review of a family care home is conducted by a delegated social worker whenever a quality of care concern arises where the safety of the child is not an issue.

Social Work Practice:

Quality of Care Review

The social worker will distinguish between a Quality of Care Review and a Protocol Investigation of a Family Care Home by using the following definitions.

Definitions

A **Quality of Care Review** occurs when there is a report that the family care home is not meeting the Standards of Care. The procedures outlined in the Quality of Care Review apply when a voluntary services social worker receives a quality of care report.

A **Protocol Investigation** occurs when there is a report of abuse or neglect of the child in a family care home and is conducted by a delegated child protection social worker.

Supports for the Family Care Home

The agency provides an appropriate advocate for the family care home, available upon request, who offers support and information to the home regarding the Quality of Care Review process.

Review Process

If the family care home is dissatisfied with the outcome of the Quality of Care Review, the caregiver may request a Community Review and/or appeal to the Director, CFCSA of Aboriginal Agencies.

Community Review Process

This process has the authority to review the administrative conduct of the Quality of Care Review. It does not have the authority to review delegated practice decisions of the Director, CFCSA or make recommendations regarding the conduct of practice.

Steps in the Community Review Process may include:

- The caregiver may direct his or her concerns to the delegated agency director and the identified Band representative to request a review of the Quality of Care process;
- The request must be made within 30 days of the caregiver receiving the Quality of Care Report and agency director's letter;
- The identified Band representative, in consultation with the delegated agency director, completes a review;
- The Band representative and the delegated agency director inform the caregiver of the results of the administrative review.

Appeal to the Director, CFCSA for Aboriginal Agencies

This process has the authority to review delegated practice decisions and make recommendations regarding the conduct of practice.

- The caregiver may request a review of the Quality of Care Report from the Director, CFCSA for Aboriginal Agencies;
- The request must be made within 30 days of the caregiver receiving the Quality of Care Report and the agency director's letter;
- The Director, CFCSA for Aboriginal Agencies completes the review, reaches a decision, and informs the caregiver and the delegated agency director of his or her decision.

References: Quality of Care Review of a Family Care Home for Aboriginal Agencies with Voluntary Services and/or Guardianship and/or Child Protection Delegation

STANDARD 36

Closure of the Family Care Home

When a family care home is closed, the caregivers are notified of the reasons for closure verbally and in writing.

Social Work Practice:

When a family care home is closed, the social worker will:

- verbally notify the family care home of the decision to close the home and the reasons for the closure;
- provide written notification within 14 days and ensure the notification is documented;
- offer support to all children placed in the home who were relocated as a result of the closure;
- close the family care home file.

When the caregiver disagrees with the closure, the social worker provides information about the Community Review Process and the appeal process of the Director, CFCSA for Aboriginal Agencies.

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- References:**
- AOPSI: Voluntary Services Practice Standard #34 Investigation of Alleged Abuse or Neglect in a Family Care Home
 - AOPSI: Voluntary Services Practice Standard #35 Quality of Care Review
 - AOPSI: Voluntary Services Practice Standard #28 Supervisory Approval Required for Family Care Home Services

Guardianship Practice Standards



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STANDARD 1

Preserving the Identity of the Child in Care and Providing Culturally Appropriate Services

The social worker will preserve and promote the cultural identity of the child in care and provide services sensitive to the child's views, cultural heritage and spiritual beliefs.

Social Work Practice:

Preserving Identity

The social worker will:

- determine the Band/cultural group or Aboriginal community the child in care belongs to or is eligible to belong to;
- ensure the child is registered under the *Indian Act*, where entitled, and has membership status or can be considered for membership status with his or her own community;
- register the child with the Nisga'a Lisims Government, where entitled;
- involve the child, the child's family and the community representative, when appropriate, in assessments, case planning and development of the plan of care;
- provide the child in care with information about his or her heritage and culture, according to the child's developmental abilities;
- give priority to placing the child with the child's extended family or within the child's Band/cultural group or Aboriginal community.

When unable to place the child with extended family or within the community the social worker will:

- ensure the caregiver is sensitive to and knowledgeable of the child's heritage and identity and willing to support ongoing, regular contact with the child's family and community;
- ensure the child has access to his or her community's history, language, ceremonies, foods, and cultural, spiritual, artistic, athletic and recreational activities.

Providing Culturally Appropriate Services

The social worker will:

- identify family members, friends, community groups and organizations that can provide cultural resources to the child;
- enlist Band/cultural group or Aboriginal community services (e.g., child care worker, counsellor, children's therapeutic groups.) for the child that are knowledgeable about and sensitive to a child's views, cultural and ethnic heritage, spiritual beliefs and identity;
- include the services of a language/cultural interpreter to participate in assessment, planning and service delivery, when appropriate;
- encourage and provide opportunities for the child to participate in cultural and religious instruction and events.

If a Child in Care is Harmed by Racism or Discrimination

When a child in care is harmed by racism or discrimination, the social worker determines the appropriate response. Where it appears the child has been a victim of a crime because of his or her race or identity, the social worker informs the family and reports the matter to the police.

References: CFCSA: s.2, s.3 (c), s.4, s.70, s.71 (3)
CFCS Regulation Schedule 1, 2
AOPSI: Guardianship Practice Standard #4 Supervisory Approval
Required for Guardianship Services

STANDARD 2

Development of a Comprehensive Plan of Care

When assuming responsibility for a child in care the social worker develops a Comprehensive Plan of Care.

Social Work Practice:

Before commencing a Comprehensive Plan of Care the social worker will:

- review the goals and services of all previous Plans of Care;
- review the legal status of the child;
- determine the level of guardianship authority required to provide services;
- determine the extent of the family's involvement.

Timeline

The social worker ensures:

- an initial plan of care is developed within thirty (30) days of the child coming into care;
- a Comprehensive Plan of Care for a child is developed within six (6) months of a child coming into care.

Principles of the Plan of Care

The social worker develops a Comprehensive Plan of Care that:

- identifies the child's Band/affiliation, cultural group or Aboriginal community;
- meets the needs and capabilities of the child;
- ensures the physical and emotional safety of the child throughout the time the child is in care;
- establishes the family and community's involvement and continued rights and shared responsibilities for the child's health, education and spiritual development;
- promotes the child's existing relationships with siblings, family and community;
- is founded on a thorough understanding of the child's family history and current circumstances gathered through contact with a previous social worker, caregiver, family member and any significant persons in the child's life;
- acknowledges and respects the child's right to privacy;
- encompasses the views of the child and all the participants.

Assessment

The Comprehensive Plan of Care assesses:

- current functioning;
- the needs of the child;
- services required to meet the needs of the child;
- services and placements of the child while in care.

Participants

The social worker organizes a Comprehensive Plan of Care meeting that involves the following participants:

- the child over the age of twelve (12) years;
- members of the child's family, as identified by the child, unless one or more of the family members cannot be located or it is determined that it would not be in the child's best interest to include the person(s);
- service providers currently providing support or services to the child and the caregivers of the child;
- any person who has an important relationship with the child as identified by the child;
- any designated representative identified by the social worker, child or the child's family from the child's Band/cultural group or Aboriginal community.

Written Plan of Care

The social worker ensures that the meeting produces a written Comprehensive Plan of Care for the child that is distributed to the appropriate participants. The Comprehensive Plan of Care is based on all the information gathered from the participants, and includes:

- an assessment of the child's needs;
- a summary of the information presented;
- a long-term goal for the child;
- a description of the services to be provided and the names of the service providers;
- the goals of the services and time frames;
- a statement of the reasons why the services are being provided;
- a description of the evaluation process for each service;
- the date and place of the review;
- a provision for access to family, friends, community, and culture (including language, history, and traditional practices);
- approval of the supervisor.

References: CFCSA: s.2 (d), s.3 (a), s.4 (f), s.70 (1)(b)(c)
AOPSI: Guardianship Practice Standard #4 Supervisory Approval
Required for Guardianship Services

STANDARD 3

Monitoring and Reviewing the Child's Comprehensive Plan of Care

The Comprehensive Plan of Care is monitored to determine the progress toward goals, the continued safety of the child, the effectiveness of the services, and/or any barrier to services.

Social Work Practice:

The social worker gathers information from the child, parents, caregivers and service providers regarding:

- the child's progress;
- changes in the child's needs;
- changes in the family situation;
- the effectiveness of the plan in meeting the needs of the child;
- changes required to overcome barriers to achieving the service goals or to meet a change in the child's circumstances.

Timelines for Reviews

The Comprehensive Plan of Care is reviewed regularly, including:

- every six months – the social worker, in concert with the family, caregivers and service providers, reviews all aspects of the Plan of Care and identifies the necessary changes and updates;
- any time there is a change in circumstances for the child.

The worker ensures the monitoring process includes home visits.

References: CFCSA: s.2 (d), s.3 (a), s.4 (f), s.70 (1)(b)(c), s.33.2 (1)(b), s.35 (1), s.42.1 (5)

AOPSI: Guardianship Practice Standard #4 Supervisory Approval Required for Guardianship Services

STANDARD 4

Supervisory Approval Required for Guardianship Services

The social worker consults with the supervisor and obtains the supervisor's approval at key points in the provision of Guardianship Services and ensures there is a thorough review of relevant facts and data before decisions are made.

Social Work Practice:

The supervisor approves key case management decisions, including, but not limited to:

- completing, reviewing and revising the Comprehensive Plan of Care;
- when a child is missing, lost or runaway;
- moving a child from one placement to another;
- placing a child outside the community in a non-Aboriginal home;
- following through with reportable circumstances;
- varying or restricting the child's access to family or others with whom there is a significant relationship;
- determining the child's participation in rigorous cultural ceremonies (e.g., sun dance, naming, fasting ceremonies);
- receiving a report of neglect or abuse in a family care home;
- placing a child back in the family home when contemplating and rescinding the continuing care order;
- contemplating a permanency plan or transfer of guardianship for a continuing care ward;
- developing a plan for independence for a continuing care ward;
- transferring and/or closing a file.

STANDARD 5

Rights of Children in Care

Children in care are entitled to be physically and emotionally safe, receive care consistent with their rights and be informed of their rights.

Social Work Practice:

The social worker explains to the child that he or she is entitled to be physically and emotionally safe and informed of the following rights, in a manner that is understandable to the child.

The Rights of Children in Care include:

- to be fed, clothed and nurtured according to community standards and to be given the same quality of care as other children in the placement;
- to be informed about their plans of care;
- to be consulted and invited to express their views, according to their abilities, about significant decisions affecting them;
- to reasonable privacy and to possession of their personal belongings;
- to be free from corporal punishment;
- to be informed of the standards of behaviour expected by their caregiver and of the consequences of not meeting their caregiver's expectations;
- to receive medical and dental care when required;
- to participate in social and recreational activities if available and appropriate and according to their abilities and interests;
- to receive religious instruction and to participate in the religious activities of their choice;
- to receive guidance and encouragement to maintain their cultural identity;
- to be provided with an interpreter if language or disability is a barrier to consulting with them on decisions affecting their custody or care;
- to privacy during discussions with members of their families, subject to any court orders that limit the access of family members to the child to protect the safety of the child;
- to privacy during discussions with a lawyer, an advocate from the Child and Youth Officer for BC, the Ombudsman, a member of the Legislative Assembly or a member of Parliament;
- to be informed of the procedures available for enforcing their rights.

The social worker reinforces the child's knowledge and understanding of the Rights of Children in Care by:

- ensuring the child is regularly informed of his or her rights according to the child's developmental level;
- advising the caregiver to reinforce the child's knowledge of these rights.

The social worker provides the child with a copy of the agency's review policy, explains the purpose of the review process and how the child can be assisted in requesting a review.

In cases where the child reports that his or her rights have not been respected the social worker will:

- meet with the child and others to resolve the issues;
- inform the child of the agency review process, the services of the Child and Youth Officer for BC, the Office of the Ombudsman and any other advocacy services;
- provide support to the child throughout the review process.

References: CFCSA: s.2, s.4, s.70
AOPSI: Guardianship Practice Standard #22 Investigation of Alleged Abuse or Neglect in a Family Care Home

STANDARD 6

Deciding Where to Place the Child

When making decisions regarding where to place an Aboriginal child, consistent with the child's best interests and need for stability and continuity of lifelong relationships, the social worker gives priority to placing the child:

- with the child's extended family;
- within the child's Band/cultural group or Aboriginal community;
- with another Aboriginal family, if the child's own family or community cannot assume the child's care.

Social Work Practice:

In deciding where to place a child, the social worker considers the physical and emotional safety of the child and consults with the child's family and community to identify a safe and supportive living arrangement.

Placement Priorities

The social worker will:

- consider the adult members of the child's extended family, or other persons within the child's community as possible caregivers for the child;
- actively follow up with recommended members of the child's family or community to determine whether they would be willing and able to assume care of the child.

Ensuring Continuity

Additionally, the social worker will make every effort to:

- keep sibling groups together or arrange for frequent and regular contact if sibling groups are separated;
- ensure that the child maintains contact with siblings, relatives and friends;
- ensure the child attends the same school he or she attended before coming into care;
- ensure the child maintains contact with his or her cultural community.

Placing the Child Outside His or Her Community

When it is necessary to place a child outside his or her community, the social worker will, with supervisory approval, select a caregiver who will:

- preserve the child's culture and identity by respecting the views, heritage, spiritual beliefs and socio-economic circumstances of the child's family;
- provide ongoing contact with the family;
- provide the child with opportunities to maintain regular and positive contact and involvement with his or her Band/cultural group or Aboriginal community.

-
- References:** CFCSA: s.4, s.93, s.35 (2)d, s.41 (1)(b), s.42.2 (4)(a), s.42.2 (4)(c), s.42.2 (7)(d), s.49 (7)(b), s.71, s.93 (1)(g)(ii)
- AOPSI: Guardianship Practice Standard #4 Supervisory Approval Required for Guardianship Services
- AOPSI: Guardianship Practice Standard #1 Preserving the Identity of the Child in Care and Providing Culturally Appropriate Services

STANDARD 7

Meeting the Child's Needs for Stability and Continuity of Relationships

Throughout the time the child is in care, the social worker supports the stability and continuity of the family and community relationships of the child.

Social Work Practice:

The social worker promotes continuity of family and community relationships for the child in care by:

- providing, promoting and supporting opportunities for the child to develop and maintain positive emotional attachments with family, siblings, extended family and others who are significant in the child's life consistent with the child's best interests;
- maintaining a child's connections with his or her cultural heritage, spiritual beliefs and identity;
- minimizing disruption in the child's life through strategies that promote stability identified in the child's plan of care;
- involving the family and community in the planning and provision of services for the child and avoiding unnecessary delays in the decision process;
- using care as a service for a child when no less disruptive services are available;
- exploring on an on-going basis whether reunification with the family is possible;
- confirming the long-term goal of returning the child to the family.

References: CFCSA: s.2 (d), s.4 (d), s.70 (1), s.71

AOPSI: Guardianship Practice Standard #1 Preserving the Identity of the Child in Care and Providing Culturally Appropriate Services

AOPSI: Guardianship Services Practice Standard #6 Deciding Where to Place the Child

CFCS Regulation: Schedule 1, 2

STANDARD 8

Social Worker's Relationship and Contact With a Child in Care

The social worker establishes a relationship with a child in care and meets with the child as indicated in the Comprehensive Plan of Care.

Social Work Practice:

Objectives

The social worker's objectives in working with a child in care are to:

- build a meaningful relationship with the child;
- develop trust between the child and the social worker;
- celebrate milestones and achievements, birthdays and significant occasions;
- seek the child's views on all aspects of the plan of care;
- identify and address any barriers that prevent the child's participation;
- seek the child's views on all aspects of daily activities including the child's living situation;
- identify challenges that exist with respect to the child's care;
- ensure that the child understands his or her rights as a child in care.

Frequency of Visits

The social worker makes every effort to meet with the child in care as indicated in the plan of care and as follows:

- one visit on the day of placement;
- seven days after placement;
- every thirty (30) days thereafter;
- when a child is moved;
- when there is a significant change in the child's circumstances;
- when there is a change in social workers (the new social worker meets with the child within five (5) days).

Frequency of additional contact is based on the child's:

- level of vulnerability;
- developmental needs;
- visibility in the community.

Meetings are held in person and in private, and in a manner that allows the child and the social worker to communicate freely.

The social worker documents the meetings with the child including the child's views, significant events, agreements and decisions reached with the child.

References: CFCSA: s.2 (d), s.4 (f), s.70 (1)(b)(c)

STANDARD 9

Providing the Caregiver with Information and Reviewing Appropriate Discipline Standards

The social worker provides the caregiver with information about the care and safety of the child at the time of the placement and reviews appropriate discipline standards with the caregiver and the child.

Social Work Practice:

Information to the Caregiver about the Child

The social worker will make information available to the caregiver regarding the child:

- at the time of the placement;
- when additional information becomes available during the time of the placement;
- in writing as soon as possible;
- when the child is placed on an emergency basis, the social worker will provide the information within one (1) week of the child's placement in the home.

The information will include the following specific information:

- full name, date of birth and legal status;
- the overall goal and plan of care for the child and the caregiver's role in the plan of care;
- plans of care;
- names of the social workers responsible for the child and the family care home;
- known medical and mental health history, needs and risks;
- child's daily care (e.g., mealtimes, bedtime routines);
- any safety risks to the child, including the need to protect the child from contact with another person;
- any health or safety risks posed by the child toward the caregiver or any other person in the home;
- scheduled appointments with service providers or professionals;
- names of people who will have access to the child and how access will occur;
- the child's Band/cultural group or Aboriginal community;
- the child's school;
- the child's participation in activities;
- any allegations of abuse or neglect in previous placements and the outcome of the investigations of the alleged abuse or neglect;
- notification procedures if the child is lost, missing, runaway, or suffers serious harm or injury.

Appropriate Discipline

In addition to informing the caregiver about the child, the social worker, the child and the caregiver review the rules of the home and appropriate discipline standards.

The social worker informs the child and the caregiver that the following practices are unacceptable:

- deprivation of a child'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 or youth, other children or youth, the caregiver, or others;
- seclusion (not including time-out) or confinement;
- assignment of unreasonable exercise or work that may be excessive or harmful to the child or youth;
- threats of removal from the care setting in order to manipulate or coerce the behaviour of the child or 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 individual's behaviour has warranted them;
- being disciplined by another child who has not been designated as a temporary caregiver,
- coercive behaviour by the caregivers regarding their religious or personal beliefs.

The social worker ensures a copy of the information provided to the caregiver is placed in the child's file.

Reference: CFCSA: s.70, s.79 (j)

STANDARD 10

Providing Initial and Ongoing Medical and Dental Care for a Child in Care

The social worker will ensure a child in care receives a medical and, when appropriate, a dental examination when coming into care. All urgent and routine medical services including vision and hearing examinations, as recommended by the child's primary physician/dentist, are provided for the child in care.

Social Work Practice:

When a child comes into care, the social worker will:

- ensure the child receives a medical examination. Examinations are repeated as required and when the child leaves care;
- ensure the child receives dental, vision and hearing examinations and procedures as recommended by the child's primary physician/dentist;
- inform the caregiver of the status of the child's health so that the caregiver is prepared for any medical condition that may result in an emergency.

The social worker consults with the child's parent(s)/family, the child, the child's health care provider and the child's caregiver to determine:

- current medication;
- immunization records;
- information regarding allergies;
- information regarding chronic health problems;
- information about any physical and/or mental disabilities;
- current treatment plans, including the names of all attending doctors, dentists and other health professionals.

In developing the health care component of the child's Comprehensive Plan of Care, the social worker collects and documents all relevant information about the child including:

- the child's current and future health needs and how these needs will be met;
- the specific responsibilities of the social worker, as well as those of the child's parent(s)/family, caregiver and, if appropriate, the child, in meeting the child's health care needs and objectives.

References: CFCSA: s.13, s.29

Infants Act: s.16

AOPSI: Guardianship Practice Standard #2 Development of a Comprehensive Plan of Care

STANDARD 11

Planning a Move for a Child in Care

In making the decision to move the child from one placement to another, the social worker will:

- consider the child's safety, best interests and needs;
- prepare and support the child to the fullest extent possible for the move to the new placement;
- actively seek the child's views regarding the decision and determine if any of the child's wishes can be accommodated within the context of planning for the move;
- whenever possible and appropriate, involve the child's caregiver, child's parent(s)/family and proposed caregiver in making the decision, informing the child and planning the move.

Social Work Practice:

Supporting the Child

The social worker develops a strategy to actively prepare and support the child by:

- providing an explanation of the reasons a move is necessary in a language and manner appropriate to the child's age and developmental capabilities;
- explaining to the child who his or her new caregiver will be;
- helping the child to formulate questions and/or concerns about how his or her needs will be met in the new placement;
- if possible and appropriate, assisting the child and the current caregiver to reach a mutual understanding of how their relationship is ending, what the prospects of future contact may be, and how the child's care experience can be understood within the context of other life experiences.

The New Placement

The social worker will:

- arrange at least one pre-placement visit or contact, whenever possible;
- participate with the new caregiver and the child in an orientation tour of the child's new placement, ensuring that the child's questions and concerns are adequately addressed;
- ensure the new caregiver supports the child in understanding and cultivating his or her cultural heritage, spiritual beliefs and identity;
- ensure the new caregiver supports the child in developing a strong sense of identity, resiliency, self care and life skills according to the child's developmental abilities and capacity.

When the Child Requests a Move

If the child has requested to move or is refusing to return to a particular placement, the social worker:

- reviews the request with the family care home social worker and the caregiver;
- actively seeks the child's views and reasons for requesting to move or refusing to return to the placement;
- involves the child in problem solving around the issues influencing his or her views;
- provides a temporary arrangement, in consultation with the child and the child's family, when appropriate, while the social worker assesses the reasons why the child is unwilling to remain in or return to the placement setting;
- determines whether it is possible to move toward a resolution of the child's concerns, complaints or possible conflict between the child and the child's caregiver with the goal of returning the child to the placement setting;
- determines whether a serious incident (i.e., reportable circumstance) involving the child has occurred and, if so:
 - consults with the supervisor and family care home social worker;
 - reports the incident to the Director, CFCSA;
 - follows any related protocols.

The social worker informs the supervisor of the change of placement, documents the change in the child's file and enters the information in a common database (MIS).

References: CFCSA: s.2 (d), s.3 (a), s.4 (f), s.70 (1)(b)(c),
 AOPSI: Guardianship Practice Standard #4 Supervisory Approval
 Required for Guardianship Services
 AOPSI: Guardianship Practice Standard #6 Deciding Where to
 Place the Child

STANDARD 12

Reportable Circumstances

The agency director and the Director, CFCSA for Aboriginal Agencies are notified of reportable circumstances and grievous incidents.

Social Work Practice:

When a child or youth who has, or whose family has, received services from the agency within the past twelve (12) months is involved in a reportable circumstance or grievous incident, a report is sent to the Director, CFCSA for Aboriginal Agencies and copied to the delegated agency director. The initial report must be prepared within twenty-four (24) hours of the incident, and a case review and written report must be submitted within ten (10) days.

Reportable Circumstances

Reportable circumstances include:

- the death of a child;
- a child in a life-threatening situation (e.g., illness, a serious accident, abduction);
- a child who frequently runs away;
- a child who is lost or missing (with or without family) for 10 days;
- a child who is involved in a violent crime;
- a child who is abused or neglected in a situation which could be perceived as being linked to the Director, CFCSA of Aboriginal Agencies or his delegate (e.g., a child in care, respite care and/or receiving services);
- a child in care subject to a Protocol Investigation of a Family Care Home;
- a child who has been involved in, or exposed to, a high-risk situation or disaster.

Each of these examples is considered to be a reportable circumstance or grievous incident. In such situations the reportable circumstance procedure must be followed. The agency supervisor must make the initial report within twenty-four (24) hours.

Elements of the Report

The report must include:

- the name and birth date of the child;
- the legal guardianship status of the child;
- whether the child is Aboriginal and if so, the name and address of the child's Band/cultural group or Aboriginal community;
- the date(s) of the incident or situation;
- the name, address and type of placement that the child was in at the time of incident;
- the name of the social worker and supervisor assigned to the child;

- how the social worker was informed of the incident, and by whom;
- the known circumstances surrounding the incident including the date, time, place, other people present or involved, details regarding any abuse or neglect, and details of the incident that may have resulted from abuse or neglect;
- the current status of any child protection investigation or police investigation;
- a brief summary of the agency's involvement with the child and the family of the child, including all details of any past similar circumstances that may have caused harm to the child;
- a listing of people who have been notified by the social worker, including the police, family members, the community, and other agency or ministry staff;
- any additional actions taken by the social worker or supervisor.

When the information is not immediately available, the supervisor indicates when it will be forwarded.

Case Review

The case review and written report, which must be submitted within ten (10) days, includes:

- the name and birth date of the child;
- the name of the social worker and supervisor assigned to the child;
- any required information from the initial report that was not available at the time the initial report was completed;
- any factual information that would add to the initial report;
- summary of the history of previous services to the child and family, and the current reason that services are being provided to the family;
- a detailed statement of the child's placement history, including any information describing the nature or circumstances that lead to the placement of the child;
- all details of prior allegations or confirmed reports of abuse and neglect that are relevant to the nature or circumstances of the matter being reported;
- the status of any child protection investigation, including additional information received from the police or other people concerning suspected child abuse or neglect;
- an update regarding the needs of the child resulting from the incident and how these needs will be met;
- an update regarding any other children at risk, and the plan for protecting these children;
- a summary of any additional services provided to the child, family, caregivers and service providers as a result of the incident or circumstance;
- a summary of any steps being implemented to prevent further similar incidents, and the status of these intervention strategies;
- any plan for further investigation or other required actions;
- other information requested by the Director, CFCSA of Aboriginal Agencies.

The following information is to be provided as appropriate to the circumstances and as soon as it becomes available:

- the medical reports;
- the autopsy report;
- the results of the police investigation;
- the results of the case review.

Informing the Child's Family

The social worker will inform the child's family and provide supports to the family as appropriate to the circumstances and as soon as possible. Supports may include:

- referral to community supports;
- financial or in-kind assistance for travel costs;
- in the case where the child has died, a financial contribution for the funeral.

Director's Response

- Within two (2) days, the Director, CFCSA reviews the report and determines if an additional report is required and what specific information is to be included;
- Within five (5) days of receiving an additional report the Director, CFCSA will indicate if a further review is required, the nature of the review, and whether a referral to an external review body is made.

Involving the Public Guardian and Trustee and/or INAC Lands and Estate Planning

- Where there has been a death or critical injury to a child in care, the social worker informs the Public Guardian and Trustee and/or INAC Lands and Estate Planning Services of the event to determine their role in protecting the child's financial or legal interests.

References: CFCSA: s.51, s.52
INAC Estate Planning Services
AOPSI: Guardianship Practice Standard #4 Supervisory Approval
Required for Guardianship Services

STANDARD 13

When a Child or Youth is Missing, Lost or Runaway

The social worker will take responsible action to locate a missing, lost or runaway child or youth, and to safeguard the child or youth from harm or the threat of harm.

Social Work Practice:

When a Child in Voluntary Care Is Missing, Lost or Runaway

The social worker will:

- ensure that the police have been notified;
- provide a current picture to the police;
- provide a list of known associates to the police;
- check with the police regarding their efforts to locate the child or youth;
- place an Alert in the common database (MIS);
- inform the Director, CFCSA if the child or youth is at high risk of harm;
- notify the child's family and any persons significantly involved with the child or youth who may be able to locate him or her;
- actively seek out possible friends who may know the child or youth's whereabouts;
- identify/check possible persons or places where the child or youth may be located;
- actively and regularly coordinate search activities until the child or youth is found;
- maintain and intensify search efforts for as long as it takes to locate the child or youth;
- arrange a case conference with significant persons in the child or youth's life to ensure all possible options are considered to find the child or youth and to ensure his or her safety;
- consider media assistance when a review of the circumstances justifies releasing confidential information in order to ensure the child or youth's safety.

If a Child in Care Habitually Runs Away

When a child habitually runs away the social worker will:

- develop strategies to address the high-risk behaviour with parent(s), individuals and agencies that can assist in addressing the behaviour or minimize the high risk associated with the behaviour;
- develop a safety plan with the child;
- identify who the child can contact to facilitate returning to care.

Missing, lost or runaway children or youth who may be at high risk of harm include those who:

- have an acute physical or psychological condition;
- have limited ability to care for themselves or to understand the possible consequences of their actions;
- may have been abducted;
- would not normally go missing and there is no apparent precipitating reason for them to run away;
- are known to have associations with people or places that have put them at significant risk of harm in the past.

When the Child is Located

When the child or youth is located, the social worker will:

- assess the child or youth's circumstances and need for medical treatment and/or therapeutic support;
- immediately advise the police and all others who were notified the child or youth was missing that he or she has been located;
- discuss any injury potentially requiring a criminal investigation or complaint with the police;
- assess the child or youth's reason for being lost or missing or for running away, and obtain the child or youth's views about the situation;
- return the child or youth to his or her placement or arrange another placement;
- assess whether the child or youth may be entitled to criminal injury compensation and inform the Public Guardian and Trustee if the child may be entitled;
- determine if the circumstances described by the child or youth or the reasons given constitute a reportable circumstance;
- determine whether the child or youth's Comprehensive Plan of Care needs to be reviewed and revised.

References: AOPSI: Guardianship Practice Standard #4 Supervisory Approval Required for Guardianship Services
AOPSI: Guardianship Practice Standard #12 Reportable Circumstances

STANDARD 14

Case Documentation for Guardianship Services

There are accurate and complete recordings on file to reflect the circumstances and admission of the child to care, the activities associated with the Comprehensive Plan of Care, and documentation of the child's legal status.

Social Work Practice:

Opening Recording

At the time services are initiated, the social worker documents the following:

- the date that the child is admitted to care;
- the child's status, Band membership/affiliation and registration number;
- the parents' Band/cultural group, community membership or affiliation;
- an initial plan of care;
- reasons for service;
- placement history;
- historical/biographical information about the child;
- family background information which may include a genogram;
- current placement and placement history;
- the child's medical history and reports;
- notice to the designated representative of the child's Band/cultural group or Aboriginal community, when appropriate;
- the emotional and physical circumstances of the child upon admission to care
- confirmation that the child was made aware of the Rights of Children in Care;
- a photograph of the child.

Review Recordings

The social worker completes a review recording every six (6) months, or when the child's circumstances change, that provides updates and expands the initial recording to include:

- a Comprehensive Plan of Care with references to previous plans;
- education reports, medical and psychological reports, risk assessments and/or other assessments;
- contacts with the child, the child's family, the caregiver and other service providers;
- progress toward the goals of services provided.

In addition, the social worker keeps on file:

- copies of all court documentation;
- copies of any agreements relating to the child (e.g., support services, voluntary care);
- consents to the release of information;

- any agreements that were negotiated with the parents regarding access, guardianship responsibilities and maintenance;
- copies of all legal documents (e.g., birth certificate, social insurance number, medical health number);
- a description of the child including a recent photograph;
- case conference minutes;
- tracking summaries;
- reportable circumstances;
- correspondence.

The social worker and the agency supervisor sign all significant file recordings as per agency policy.

The social worker ensures the child's file is kept confidential and in a secure location at all times.

The social worker enters the information in a common database (MIS).

References: CFCSA: Part 5 Confidentiality and Disclosure of Information
AOPSI: Guardianship Practice Standard #4 Supervisory Approval
Required for Guardianship Services

STANDARD 15

Transferring Continuing Care Files

Prior to transferring Continuing Care files, social workers complete all required documentation and follow all existing protocol procedures.

Social Work Practice:

Transfer Criteria

Continuing Care files will be transferred when:

- a child and/or family relocates to another geographical location;
- the service required is beyond the delegation level of the agency;
- a transfer from one social worker and/or specialized team to another within an agency is required;
- the sending and receiving supervisors have approved the transfer and reviewed the transferring file to ensure all required documentation is complete.

Role of Agency Supervisors in the File Transfer

The sending supervisor will:

- ensure the receiving agency's social worker is delegated to provide the required services;
- initiate contact with the receiving supervisor;
- ensure all required file documentation is updated and complete;
- follow all existing protocol procedures;
- provide supervisory approval;
- authorize transfer and complete transaction on the electronic system;

The receiving supervisor will:

- confirm the file is current;
- confirm the file transfer date;
- accept the file electronically;
- assign the file to a social worker.

Role of the Sending Social Worker in the Continuing Care File Transfer

Prior to transferring a Child in Care file, the sending social worker will:

- complete a risk reduction service plan review;
- complete a transferring recording;
- update the Comprehensive Plan of Care;
- identify with the receiving staff the need, timing and process for the transfer and ensure a full briefing is provided;
- meet with the child and caregiver to explain the transfer;
- meet with the child, caregiver and the receiving social worker;

- notify, when appropriate, the designated representative of the Band/cultural group or Aboriginal community if the child belongs to another community;
- notify the service providers involved in the case about the transfer, and the name and contact information of the new worker;
- involve, plan and inform the family, extended family and community representatives whenever possible of the transfer (where this is a planned move) and at a minimum, tell them the name and contact information of the new worker.

Role of the Receiving Social Worker in the Continuing Care File Transfer

Prior to the transfer of a Continuing Child in Care file, the receiving social worker will:

- meet with the sending social worker for a full briefing of information;
- meet with the family and child;
- meet with the family care home and appropriate service providers to review case planning.

At the time of the transfer of the Continuing Care file, the receiving social worker will:

- conduct a service plan and file review;
- meet with the family and child within five (5) days of assuming responsibility for the file.

Inter-Provincial Transfers

To transfer the Continuing Care file to another province, the social worker consults the Inter-Provincial Territorial Protocol on Children Moving Between Provinces and Territories.

Elements of this standard may apply in local and inter-agency transfers only. Social workers are to consult with the agency supervisor to determine appropriate compliance to the standard.

-
- References:** Aboriginal Agency Protocols defining transfer processes
AOPSI: Guardianship Practice Standard #4 Supervisory Approval Required for Guardianship Services
Inter-Provincial Territorial Protocol on Children Moving Between Provinces and Territories

STANDARD 16

Closing Continuing Care Files

Prior to closing a Continuing Care file, the social worker completes all required documentation and follows all existing protocol procedures.

Social Work Practice:

Closing a Continuing Care File

Prior to closing a Continuing Care file the social worker will:

- review the child's Comprehensive Plan of Care to ensure the objectives of the plan have been achieved;
- develop a plan based on the safety and best interests of the child that includes the following participants:
 - the child over the age of twelve (12) years;
 - the family and extended family when appropriate;
 - the child's family care home;
 - formal and informal service providers who have a role in supporting the child;
 - the designated representative of the Aboriginal band/cultural group or community if the child belongs to another community.
- meet with the family care home to discuss the file closure;
- meet with the child to discuss their care experience and the file closure;
- provide the child with relevant information;
- ensure the child has all personal belongings including pictures and life books;
- ensure support services are in place where appropriate;
- notify service providers of the file closure;
- notify the designated representative of the Aboriginal band/cultural group or community when the child belongs to another community when appropriate;
- complete a closing summary.

The social worker closes all files on common database (MIS).

References: AOPSI: Guardianship Practice Standard #4 Supervisory Approval Required for Guardianship Services
Inter-Provincial Territorial Protocol on Children Moving Between Provinces and Territories

STANDARD 17

Rescinding a Continuing Care Order and Returning the Child to the Family Home

When returning a child in care who is in the Continuing Care of the Director to the parent entitled to custody, the delegated child protection social worker and the guardianship social worker develop a plan to ensure the child's safety. The plan is developed prior to placing a Continuing Care ward in the family home and reviewed prior to rescinding the Continuing Care Order.

Social Work Practice:

Participants in the Placement Plan

Prior to placing the child in the family home, the delegated child protection social worker and the guardianship social worker develop a safety plan in cooperation with:

- the child over the age of twelve (12) years;
- the family and extended family;
- the child's caregiver;
- service providers who have a role in supporting the family;
- the designated representative of the child's Band/cultural group or Aboriginal community, when appropriate, if the child belongs to another community.

Components of the Placement Plan

The components of the plan include:

- conducting a review of the child's Comprehensive Plan of Care and the service plan to ensure the objectives of the plan have been achieved;
- conducting a review of the risks and strengths of the child, family and extended family using a culturally appropriate standardized assessment tool to ensure the safety and well-being of the child will be safeguarded and the circumstances of the family that resulted in the child coming into care have changed significantly;
- identifying and referring the family to appropriate support services.

Reviewing the Placement Plan

Within six (6) months of the child's placement in the family home, the delegated child protection social worker and the guardianship social worker review the placement plan.

If the social workers are satisfied that the safety and well-being of the child are safe-guarded in the home and that the family is meeting the goals of the plan, the guardianship social worker applies to have the Continuing Custody Order rescinded.

If it is not appropriate to rescind the order in six (6) months, the social workers review the case every six (6) months thereafter.

Until the Continuing Custody Order is rescinded, the guardianship social worker maintains responsibility for the child.

Assessing Risk

Risk is reassessed by the delegated child protection social worker:

- when information is gathered about new family members in the home that indicates the possibility of additional risk factors;
- when there are new factors or issues that could impact the safety of the child in the home environment;
- prior to rescinding the Continuing Care order.

References: CFCSA: s.54 (4)
AOPSI: Guardianship Practices Standard #4 Supervisory Approval
Required for Guardianship Services
BC Comprehensive Risk Assessment Model

STANDARD 18

Permanency Planning

A permanent plan is considered for a child with a Continuing Care Order when the plan's priorities are in the best interests of the child and the preservation of the child's cultural identity are priorities of the plan.

Note: This is an interim standard for use until Aboriginal Child and Family Service agencies, Bands/cultural groups and Aboriginal communities have researched and reviewed the ministry permanency planning policy regarding:

- increased number of adoptions of Aboriginal children;
- the Adoptions Exceptions Committee and a transfer of custody of children in care;
- legal notification of permanency planning to Bands/Aboriginal communities;
- current involvement of the Aboriginal community in permanency planning of community members;
- secure funding for adoptive families (i.e., Post-Adoption Assistance, Special Needs, Transfer of Custody);
- assurances that commitments to cultural plans will be implemented, monitored and maintained.

Social Work Practice:

Criteria

The social worker considers a permanent plan for a child in Continuing Care when such a plan:

- is in the child's best interests;
- provides stability and continuity of relationships for the child;
- respects and maintains the child's heritage and identity;
- provides ongoing, regular contact with the child's extended family and community;
- ensures the child has access to his or her community's history, language, ceremonies, foods, and cultural, spiritual, arts, sports and recreational activities.

The social worker ensures that the permanency plan includes an exploration of custom adoption practices.

References: CFCSA: s.54.1
AOPSI: Guardianship Practice Standard #4 Supervisory Approval for Guardianship Services
CFCSA Regulations

STANDARD 19

Interviewing the Child About the Care Experience

When a child leaves a placement and has the capability to understand and respond, the child is interviewed and his or her views are sought about the quality of care, service and support received in the placement.

Social Work Practice:

When interviewing a child about his or her experience in a placement, the social worker will:

- consider the child's age, developmental capabilities and cultural background;
- provide the child with an interpreter, if disability is a communication barrier;
- provide the child with the opportunity to give his or her own observations.

The social worker obtains the child's observations about his or her experience in the placement regarding, but not limited to, the following:

- personal safety;
- expressing views, being heard and being informed;
- maintaining relationships;
- positive parenting/behaviour management practices of the caregiver;
- health and nutrition;
- cultural identity and religious expression;
- access to the child's community's history, language, ceremonies, foods, and cultural, spiritual, artistic, athletic and recreational activities;
- leisure activities and education;
- autonomy and self-care;
- privacy and personal belongings.

The information obtained in the interview is documented in the child's file and relevant information is shared with the family care home social worker.

References: AOPSI: Guardianship Standard #8 Social Worker's Relationship and Contact With a Child in Care

STANDARD 20

Preparation for Independence

Youth in care receive the support, skills and guidance required to achieve independence upon leaving care as a result of reaching the age of majority (19) or becoming independent in some other way.

Social Work Practice:

Independent Living Skills

Before the youth leaves care, the social worker ensures he or she has developed the self-care and life skills required to live independently, including:

- banking;
- budgeting;
- housekeeping;
- laundry;
- cooking and nutritional menu planning;
- shopping;
- resumé writing skills;
- job seeking and career planning;
- scheduling and time management;
- parenting skills;
- leisure activity planning.

Assessment

In preparing and supporting a youth leaving care, the social worker assesses the youth's capacity for independent living by:

- using a standardized culturally appropriate assessment tool;
- involving the child, relevant family members, caregivers and appropriate service providers;
- referring the youth to Community Living Services, when appropriate.

Plan for Independence

The social worker assists the youth in developing a plan for independence by ensuring the youth has:

- obtained identification and personal records, including birth certificate, Band membership and status card, social insurance number, health card and medical history, photo identification (for youth age sixteen and over);
- found an appropriate place to live;

- obtained basic living essentials such as clothing, food, furniture and household supplies;
- obtained adequate financial supports – employment/financial assistance;
- secured funding for education and training;
- an understanding of his or her rights and responsibilities as a member of the community;
- established a family and community (formal and informal) support system;
- obtained information about health care coverage, therapeutic support and emergency assistance;
- obtained information about his or her time in care and how to obtain further information;
- obtained information about a fund, if the Public Guardian and Trustee/INAC Lands and Trust Service is holding a fund for the youth.

Reference: AOPSI: Guardianship Practice Standard #4 Supervisory Approval Required for Guardianship Services

STANDARD 21

Responsibilities of the Public Guardian and Trustee

The social worker accesses the assistance of the Public Guardian and Trustee to protect the legal and financial interests of the child when:

- the child is in continuing custody;
- the child comes into care through the *Family Relations Act*;
- the birth parent or other guardian gives consent to the Director so that the child may be placed for adoption.

Social Work Practice:

In cases where the Director, CFCSA for Aboriginal Agencies is named as guardian of the child and the Public Guardian and Trustee is appointed as the guardian of the child's estate, the social worker is responsible to the Public Guardian and Trustee to:

- provide information about the child's circumstances;
- provide a copy of the Continuing Care Order;
- inform the child about the role of the Public Guardian and Trustee;
- assist the child to contact the Public Guardian and Trustee;
- work co-operatively with the Public Guardian and Trustee.

Notification

The social worker will notify the Public Guardian and Trustee of events affecting the child's financial or legal interests, including (as applicable):

- the death of the child's parent;
- injuries to the child as a result of accidents or other incidents (e.g., assaults, fights, medical malpractice) while in care;
- injuries suffered as a result of abuse or serious neglect that result in physical or psychological damage to the child;
- claims when the child is involved in a civil action; or when a child becomes a ward through the *Family Relations Act*;
- when the child has turned 18 for the purpose of preparing the child for financial independence;
- consent to the adoption of the child is given by the birth parent or other guardian who requested the Director place the child for adoption;
- when the child has turned nineteen (19) years of age;
- when the child has married;
- when the court has cancelled a continuing custody order;
- the reasons for a court order, when the order is made under Section 58 of the CFCSA;
- when the plan is to obtain an order under section 54.1 of the CFCSA;
- when seeking court approval for the appointment of the Public Guardian and Trustee as guardian of the estate of a child in temporary custody.

The Lands and Trust Services of Indian and Northern Affairs Canada (INAC) may be trustee of some of the child's financial matters. The social worker contacts INAC to confirm its involvement.

References: CFCSA: s.50 (1)(b), s.54.1, s.58 (1)
Adoption Act: s.24 (2)
Family Relations Act: s.29 (3)

STANDARD 22

Investigation of Alleged Abuse or Neglect in a Family Care Home

Throughout a protocol investigation, the guardianship social worker responsible for the child in care ensures the safety of the child and supports the child.

Social Work Practice:

The procedures in the Protocol Investigation of Alleged Abuse and Neglect in a Family Care Home for Aboriginal Agencies with Voluntary Services and/or Guardianship Delegation apply when a guardianship social worker receives a report of abuse and/or neglect in a family care home.

Supports for Family Care Home

The agency provides an advocate for the family care home, available upon request, who offers support and information to the home regarding the protocol investigation process.

Review Process

When the family care home is dissatisfied with the outcome of the protocol investigation, the caregiver may request a Community Review and/or appeal to the Director, CFCSA for Aboriginal Agencies.

Community Review Process

This process has the authority to review the administrative conduct of the investigation. It does not have the authority to review the delegated practice decisions of the Director or make recommendations regarding the conduct of practice.

Steps in the Community Review Process may include:

- The caregiver may direct his or her concerns to the delegated agency director and the identified Band representative to request a review of the protocol investigation process;
- The request must be made within 30 days of the caregiver receiving the protocol investigation report and agency director's letter;
- The identified Band representative, in consultation with the delegated agency director, completes an administrative review of the process;
- The Band representative and the delegated agency director inform the caregiver of the results of the review.

Appeal to the Director, CFCSA for Aboriginal Agencies

This process has the authority to review delegated practice decisions and make recommendations regarding the conduct of practice.

- The caregiver may direct his or her concerns to the Director, CFCSA for Aboriginal Agencies and request a review of the investigation;
- The request must be made within 30 days of the caregiver receiving the investigation summary and the agency director's letter;
- The Director, CFCSA for Aboriginal Agencies completes the review, reaches a decision, and informs the caregiver and the delegated agency director of his or her decision.

Reference: Protocol Investigation of a Family Care Home for Aboriginal Agencies with Voluntary Services and/or Guardianship Delegation

STANDARD 23

Quality of Care Review

A Quality of Care Review of a family care home is conducted by a delegated social worker whenever a quality of care concern arises where the safety of the child is not an issue.

Social Work Practice:

Quality of Care Review

The social worker will distinguish between a Quality of Care Review and a Protocol Investigation of a Family Care Home by using the following definitions.

Definitions

A **Quality of Care Review** occurs when there is a report that the caregiver is not meeting the Standards of Care. The procedures in the Quality of Care Review apply when a guardianship social worker receives a quality of care report.

A **Protocol Investigation** occurs when there is a report of abuse or neglect of the child in a family care home and is conducted by a delegated child protection social worker.

Supports for the Family Care Home

The agency provides an appropriate advocate for the family care home, available upon request, who offers support and information to the home regarding the Quality of Care Review process.

Review Process

If the family care home is dissatisfied with the outcome of the Quality of Care Review, the caregiver may request a Community Review and/or appeal to the Director, CFCSA of Aboriginal Agencies.

Community Review Process

This process has the authority to review the administrative conduct of the Quality of Care Review. It does not have the authority to review delegated practice decisions of the Director, CFCSA or make recommendations regarding the conduct of practice.

Steps in the Community Review Process may include:

- The caregiver may direct his or her concerns to the delegated agency director and the identified Band representative to request a review of the Quality of Care process;
- The request must be made within 30 days of the caregiver receiving the Quality of Care Report and agency director's letter;
- The identified Band representative, in consultation with the delegated agency director, completes a review;
- The Band representative and the delegated agency director inform the caregiver of the results of the administrative review.

Appeal to the Director, CFCSA for Aboriginal Agencies

This process has the authority to review delegated practice decisions and make recommendations regarding the conduct of practice.

- The caregiver may request a review of the Quality of Care Report from the Director, CFCSA for Aboriginal Agencies;
- The request must be made within 30 days of the caregiver receiving the Quality of Care Report and the agency director's letter;
- The Director, CFCSA for Aboriginal Agencies completes the review, reaches a decision, and informs the caregiver and the delegated agency director of his or her decision.

Reference: Quality of Care Review of a Family Care Home for Aboriginal Agencies with Voluntary Services and/or Guardianship and/or Child Protection Delegation

STANDARD 24

Guardianship Agency Protocols

The social worker is familiar with and follows all protocols related to the delivery of child and family services that the agency has established with local and regional agencies.

Social Work Practice:

The Aboriginal agency establishes and maintains protocols related to the delivery of child and family services with:

- the ministry;
- other Aboriginal Child and Family Services agencies (fully and partially delegated);
- Bands and Aboriginal communities;
- police;
- health authorities;
- school districts;
- other ancillary agencies.

The intent of the protocol is to define:

- the relationship between the agencies based on their level of delegation;
- the jurisdictions of the agencies;
- the roles of the social workers, supervisors and management in the assessment planning, delivery and monitoring of services provided under the delegated guardianship authority;
- the process for assigning case management responsibility;
- the process for sharing and disclosing information.

Additionally, the protocol is intended to:

- enhance collaborative work practices;
- be consistent with all relevant legislation that defines practice in the delivery of child and family services;
- provide a clear conflict resolution process, a review process and training schedule.

References: *BC Handbook for Action on Child Abuse and Neglect*
Inter-Provincial and Provincial Protocols

Child Protection Practice Standards



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STANDARD 1

Receiving Reports of Suspected Child Abuse and Neglect

The social worker receives reports of suspected neglect or abuse by a person exercising a duty to report.

Social Work Practice:

The social worker receives a report of suspected neglect or abuse by a person exercising a duty to report and obtains information relating to the basis of the reporter's belief that the child may be in need of protection.

The social worker accepts anonymous reports, while encouraging the reporter to disclose his or her identity and/or contact information.

The social worker obtains:

- the name, age, present location, description of and contact information for any child the reporter believes may need protection;
- date of the incident and witnesses;
- the name and location of the alleged offender;
- the names, location and contact information for the child's immediate and extended family members;
- the current circumstances of the child;
- the names of other people, organizations or agencies who may be familiar with the child's circumstances;
- the reporter's relationship to the child.

The social worker informs the reporter:

- that there may be a request for further clarification of the initial information or for assistance in locating the family;
- of the estimated time frame for response;
- if and how the reporter will be advised of the outcome of the assessment of the received information;
- that the reporter's identity is confidential and will not be disclosed unless required in a court proceeding.

After receiving the initial report the social worker:

- assumes responsibility for further case activity;
- informs and consults with the supervisor regarding the protection report;
- enters and locks the information in a common data base (MIS).

References: CFCSA: s.13, s.14, s.15, s.16, s.27, s.96

AOPSI: Child Protection Practice Standard #12 Supervisory Approval Required for Child Protection Services

STANDARD 2

Prior Contact Check and Registration

When receiving the child protection report, the social worker completes a prior contact check and registers the intake.

Social Work Practice:

The social worker conducts a prior contact check (PCC).

Where a file exists outside the agency, the social worker contacts the social worker with the most recent information to discuss the report.

If the family is from out of province, the social worker conducts a prior contact check with the child welfare authority for the family's home community and requests a hard copy.

The social worker documents the prior contact check information in a common data base (MIS) and ensures confidentiality by storing the file in a secure location at all times.

References: Inter-Provincial/Territorial Protocol on Children Moving Between Provinces/Territories
Local Protocols

STANDARD 3

Immediate Risk and Emergency Response

When the report indicates the child is in immediate risk, the social worker takes the necessary action to ensure the child's safety.

Social Work Practice:

Immediate Response

The social worker responds to the report immediately if:

- the child appears to be injured or in a life-threatening or dangerous situation;
- the child is vulnerable to serious harm because of age or developmental level;
- the police have reported that the child has killed, assaulted or endangered another person;
- the police Take Charge and have not been authorized to return the child to the parent or a designated person.

Steps to Ensure a Child's Immediate Safety

The social worker, in consultation with supervisor, ensures immediate safety by:

- providing intensive in-home support services (e.g., homemaker);
- remaining with the child until the parents can be located;
- arranging for the child to stay with family or friends who will ensure the child's safety;
- entering into a Voluntary Care Agreement with the parent, if the parent is available and consents, and places the child in an out-of-home living arrangement;
- Taking Charge if required and taking the child to a safe place;
- removing the child and placing the child in an approved resource;
- if the child is from another Band/cultural group or Aboriginal community, involving the community to identify a safe place for the child.

If the Social Worker is Unable to Respond Immediately

If the social worker is unable to meet with the child who is in a remote area and an immediate response is indicated in the interim, the social worker, in consultation with the supervisor, may ask the following to attend:

- the police;
- a public health nurse;
- a Band representative;
- an after-hours social worker if available;
- another responsible person to determine whether the child's safety or health is in immediate danger.

This applies in situations when the child is in a remote area, or when the child's safety is at imminent risk and others may respond more quickly. The social worker attends as soon as possible.

In all other cases, the social worker must determine the most appropriate response within five (5) calendar days of receiving the report.

When Medical Attention Is Required

If the child requires immediate medical attention, the social worker ensures the necessary health care is provided. If at all possible, the child is taken to a health care provider who knows the child.

-
- References:** CFCSA: s.25, s.26, s.27, s.28, s.29, Part 5
 Infants Act: s.17
 Local Protocols
 AOPSI: Child Protection Practice Standard #12 Supervisory Approval
 Required for Child Protection Services
 AOPSI: Child Protection Practice Standard #19 Arranging a Medical
 Examination of a Child

STANDARD 4

Assessing the Child Protection Report

The social worker completes an assessment for each child who is the subject of the report and determines the most appropriate response within five (5) days.

Social Work Practice:

Initial Assessment

In order to complete an assessment, the social worker:

- reviews all information provided by the initial reporter;
- reviews all past records and other relevant information;
- contacts and obtains information from all individuals (e.g., teachers, police, medical professionals) who are aware of the child's circumstances;
- considers speaking with the parent, the child (with parental consent) and others who may have information about the child's circumstances if additional information is required;
- decides whether any risk factors are present.

Determining the Most Appropriate Response

After completing the initial assessment, the social worker will:

- use a standardized, culturally appropriate assessment tool to inform the decision and response that ensures the safety of the child and promotes the family and community capacity to care for the child;
- consult with the agency supervisor regarding the assessment and planned response;
- develop an Immediate Safety Plan if it is determined that the child is at risk.

Determining the Appropriate Response to a Report Involving a Youth

When determining the best response to a report involving a youth, the social worker will consider the youth's:

- age;
- developmental level and capacity;
- strengths and needs;
- available services.

A child protection investigation may be the best response for a youth that is delayed developmentally.

-
- References:** CFCSA: s.16
 BC Risk Assessment Model
 AOPSI: Child Protection Practice Standard #12 Supervisory Approval Required for Child Protection Services
 AOPSI: Child Protection Practice Standard #16 Developing and Implementing a Child Safety Plan

STANDARD 5

Kinship Care

When the parent is unable to care for a child, and other less intrusive measures have been exhausted, the social worker with parental approval considers a Kinship Care Agreement for the child.

Social Work Practice:

Criteria

The social worker considers making a Kinship Care Agreement when the:

- agreement ensures the safety of the child and is in the child's best interests;
- agreement meets the child's needs for stability and continuity of relationships;
- circumstances of the family prevent the parent from caring for the child;
- agreement is required to resolve the circumstances that have resulted in the parent being unable to care for the child;
- care provider supports the parent's ability to maintain regular contact with the child;
- arrangement to live with extended family can be financially supported by the family or a financial benefits program;
- re-unification of the child with the family is expected.

Selecting a Kinship Care Provider

When an out-of-home living arrangement is proposed for a child, the parent selects the care provider. The social worker will:

- review all records of previous involvement with the proposed care provider (prior contact check);
- discuss the plan with the care provider to ensure agreement and understanding of the plan;
- complete a criminal record check on the proposed care provider and all other persons over eighteen (18) years of age living in the home who could have significant access to the child;
- obtain two references for the proposed care provider to confirm the care provider's ability to safely care for the child;
- visit the home of the proposed care provider to determine if the care provider can meet the child's basic needs or obtain that information from a community professional or service provider who can accurately provide the information.

Making an Agreement Before Completing the Care Provider Review

An agreement may be made for up to sixty (60) days pending the completion of the care provider review. Before completing the agreement, the social worker ensures the safety and well being of the child by:

- obtaining the two references;
- completing the police records check.

When the Review Determines the Proposed Care Provider Will Not Ensure the Child's Safety

If the results of the review determine the proposed care provider is not appropriate, the social worker identifies the concerns with the parent and the proposed care provider. If the child is already placed in the home and the parent refuses to remove the child from the home, the social worker advises the parent that an assessment and child protection investigation will occur immediately.

Preparing to Make a Kinship Care Agreement

When entering into an agreement, the social worker will:

- consider the child's view regarding the proposed placement;
- ensure the child understands the reasons and details of the proposed arrangement;
- ensure the parent entering the agreement has legal custody of the child;
- ensure the care provider understands his or her obligations to meet the day-to-day needs of the child;
- advise the care provider to report critical incidents involving the child;
- ensure the care provider appreciates the importance of the child's need for stability and continuity of relationships;
- ensure the care provider understands and supports the goal of reunification for the child with his or her family;
- discuss formal and informal support services that may be required to support the living arrangement;
- discuss potential sources of financial support that may be available to the care provider.

Completing an Agreement

The Kinship Care Agreement identifies the:

- transfer of care from the parent to the care provider;
- parent and care provider obligations and guardianship responsibilities;
- terms of the agreement;
- time period of the agreement – up to a maximum of twelve (12) months;
- notice required to end the agreement;
- amount of financial support provided to the care provider and the source of the financial support.

The agreement is signed and shared with the participants.

Supporting an Agreement

The social worker will support the agreement by:

- promoting and supporting the goal of reunification and the child's connection to family;
- assessing the care provider and child's needs;
- referring the care provider to required services and supports.

Reviewing and Renewing an Agreement

The social worker will review an agreement:

- at the request of the participants;
- at intervals relevant to the child's level of development;
- before the agreement is renewed.

Timelines

An agreement can be renewed for a period of twelve (12) months. The total duration of an agreement, including all renewals, is calculated from the date the first agreement was signed and is based on the following maximum timelines:

- twelve (12) months, if the child or the youngest child who is the subject of the agreement was under five (5) years of age on that date;
- eighteen (18) months, if the child or the youngest child who is subject of the agreement was five (5) years of age or over but under twelve (12) years of age on that date;
- twenty-four (24) months, if the child or the youngest child who is subject of the agreement was twelve (12) years of age or over on that date.

If reunification is not possible, the social worker will inform the care provider of legally recognized options such as the *Family Relations Act* and Adoption and/or Custom Adoption.

Ending an Agreement

An agreement ends when the following apply:

- the parent resumes care of the child;
- the child no longer resides with the care provider;
- written notice is provided by a participant;
- the criteria for the agreement no longer applies;
- other actions are taken under the CFCSA relating to the care of the child;
- the youth reaches 19 years of age;
- the child dies;
- the youth marries.

References: CFCSA: s.2 (e), s.3 (e), s.5, s.8
AOPSI: Child Protection Practice Standard #12 Supervisory Approval Required for Child Protection Services

STANDARD 6

Family Support Services (Family Development Response)

When a decision has been made to provide Family Support Services in response to a child protection report, the social worker will:

- conduct an assessment of the family situation, using a standardized, culturally appropriate assessment tool;
- involve the child, family and extended family in the process;
- develop a plan to support the child and family that involve community service providers and addresses the child's safety and health throughout the process.

Social Work Practice:

Initiating Family Support Services in Response to a Child Protection Report

The social worker initiates Family Support Services when:

- it has been determined through a standardized, culturally appropriate assessment tool that the nature of harm and level of risk to the child can be addressed through Family Support Services;
- the family agrees to participate in an assessment;
- the family agrees to participate with the social worker and the support services required to address the risks identified in the assessment on an on-going basis;
- the supervisor has approved the decision to provide Family Support Services rather than proceed with an investigation.

Provision of Family Support Services

The social worker:

- refers the family to the appropriate community services required to address the needs of the family;
- monitors the progress of the services throughout the provision of Family Support Services;
- reassess risk to ensure the safety of the child;
- establishes an agreement that defines the roles and responsibilities of the service providers, and a schedule for review of services;
- informs the service providers of their duty to report suspected abuse or neglect.

When Family Support Services are Not Effective

When it is determined that the Family Support Services are not effective at the initial risk assessment or during reassessments or reviews of the plan, the social worker conducts a child protection investigation or reports the circumstances to a fully delegated social worker.

When the child protection investigation is conducted by a social worker other than the social worker providing Family Support Services, both workers must ensure that further responsibilities and future involvement with the family are clearly defined in a written agreement.

Ending Family Support Services

When it is determined that services to a family are to be terminated, the social worker will:

- conduct a review of the risks and strengths of the child, family and extended family using a standardized, culturally appropriate assessment tool;
- review information obtained from those who know the child and family and who may play a role in keeping the child safe;
- complete a closing summary;
- obtain the supervisor's approval;
- meet with parents and child(ren) to discuss closure;
- ensure support services are in place for the client;
- notify service providers that the file will be closed;
- notify when appropriate the designated representative of the Band/cultural group or Aboriginal community when the family belongs to another community;
- resolve any points of disagreement about a closure through a dispute resolution process;
- close the file on the agency's information system.

References: CFCSA: s.5, s.16 (2)
AOPSI: Child Protection Practice Standard #12 Supervisory Approval Required for Child Protection Services
Ministry Child Service Standard #14 Family Development Response

STANDARD 7

Voluntary Care and Special Needs Agreements to Ensure the Child's Safety

When a child needs protection, the delegated child protection social worker considers a care agreement as an alternative to a court ordered decision to ensure the safety of the child.

Social Work Practice:

Criteria

When a child needs protection, the delegated child protection social worker considers a care agreement as an alternative to a court ordered decision to ensure the safety of the child if:

- the agreement is in the best interests of the child;
- the agreement meets the child's need for safety, stability and continuity of relationships;
- the social worker and the parent agree that the child needs out-of-home care;
- a plan can be developed to resolve the circumstances that caused the child to need protection through collaborative planning or alternative dispute resolution processes;
- reunification of the child and family is expected;
- a support services agreement and/or kinship care agreement is unavailable or inadequate to meet the child's needs;
- the services in the agreement will promote the family's capacity to care for the child within the CFCSA timeframes.

Preparing an Agreement

Before entering into an agreement, the social worker will:

- consider the child's views, dependent on the child's level of development, about his or her sense of safety and well-being in regard to the proposed living arrangement;
- ensure the child understands the reasons for and details of the proposed living arrangement;
- ensure the parent entering into the agreement has custody of the child;
- arrange for an on-going sharing of confidential information among the parties of the agreement;
- confirm how the parents and other significant people will maintain contact and involvement with the child;
- agree on a timeframe within the CFCSA time frames;
- confirm the services being offered are available;
- confirm the custodial responsibilities that are transferred by the agreement;
- confirm the required notice to end the agreement.

Completing the Agreement

The agreement defines the:

- transfer of care from the parent to the Director, CFCSA;
- initial plan of care;
- plan for parental contact with the child;
- services provided to the family;
- time period of the agreement.

Supporting the Agreement

The social worker supports the child's connection to family, community and culture by:

- assisting the child to maintain contact with the family;
- providing the child with information about parental activities and progress toward reunification;
- assisting the child to maintain relationships with siblings and extended family through visits and shared activities;
- identifying extended family who may provide respite services or be considered as an alternative caregivers.

Reviewing an Agreement

The social worker and parent review the agreement. The review will occur:

- at the request of the child, parent and/or social worker;
- at intervals relevant to the child's development;
- before the agreement expires or is extended;

If the parent does not resume custody of the child when the agreement ends, the agreement remains in effect for a maximum of thirty (30) days from the expiry date in order to amend the plan for the child.

Parental Contribution

Parents remain responsible for contributing to the care of the child. The contribution can be financial or in-kind such as clothing, transportation, recreational or activity fees or equipment, etc.

Ending the Agreement

An agreement ends when any of the following apply:

- the parent resumes custody of the child;
- the child is unwilling or unable to reside with the caregiver;
- the required notice is given by a participant to the agreement;
- the criteria for the agreement no longer applies;
- other actions are taken under the CFCSA;
- the agreement expires;
- the youth reaches the age of 19;
- the child dies;
- the youth marries.

References: CFCSA: s.6

AOPSI: Child Protection Practice Standard #12 Supervisory Approval
Required for Child Protection Services

STANDARD 8

Cooperative Planning and Dispute Resolution

When agreement on an issue cannot be reached in the development of services to ensure the safety and well-being of a child, the social worker, rather than seeking a court order, may offer alternative processes for resolving the issue. The processes include traditional dispute resolution process, family conferencing, mediation and any other community dispute resolution process.

Social Work Practice:

While ensuring the immediate safety needs of the child are met, the social worker may offer alternative means of resolving issues when agreement can not be reached in the development of a plan of care and/or the types of services to be used to ensure the child's safety and well-being. The social worker participates with the child's family and community in any of the following processes.

Family Conference

A Family Conference may be initiated at any point throughout an investigation. The intent of the family conference is to:

- assist the family in the development of a plan of care that ensures the child's safety with the family or extended family;
- strengthen and support the family in caring for the child as a component of Family Support Services.

Mediation

Mediation is used to assist in resolving outstanding issues related to planning for a child and the types of services to be used. Issues appropriate for mediation include:

- Support Service Agreement components intended to ensure the child's safety and well-being in the family home;
- development of an out-of-home placement for the child;
- a child's plan of care;
- the terms and conditions of an order by consent;
- the terms and conditions of a supervision, access or any other order.

If action has been taken to protect a child, only approved mediators from the Child Protection Mediation Program roster may be used.

Traditional Community Dispute Resolution Process

A traditional community dispute resolution process may be used when the agency has an established process that includes the agency director, community facilitator or community representative who review the matter and make recommendations regarding the delivery of services to a family.

When a dispute resolution community facilitator or community representative is personally involved and/or may have a potential conflict of interest, another facilitator/community representative is identified to participate in the dispute resolution process.

A traditional community dispute resolutions process, a family conference and mediation are NOT appropriate to resolve the following delegated issues:

- the decision to conduct a child protection investigation;
- the decision about whether or not a child needs protection and why;
- any other delegated decision (i.e., placement, services to the child);
- decisions about resources or services that are not available.

Additionally, these processes should NOT be used when there is a significant power imbalance or potential for harm of one of the participants (e.g., sexual/physical abuse, family violence).

References: CFCSA: s.20, s.22, s.23, s.24
AOPSI: Child Protection Practice Standard #12 Supervisory Approval
Required for Child Protection Services
CFCSLIST Mediation Roster

STANDARD 9

Less Disruptive Measures and Removals

Less disruptive measures are considered when a child is in need of protection unless the child is in immediate danger AND no alternative care arrangements or service options will ensure the safety of the child.

Social Work Practice:

Less Disruptive Measures

When a child is in need of protection but NOT in immediate danger the social worker explores the following less disruptive measures to ensure the safety of the child:

- formal and informal support services including support service agreements with families;
- an agreement with the family on a plan to address the child's immediate safety;
- an arrangement for the child to reside with extended family or a community member with support services;
- an agreement for the child to reside in an out-of-home care living arrangement;
- a referral to a formal dispute resolution process, mediation or family conference to assist in the development of a child safety plan;
- a care agreement (e.g., Voluntary Care Agreement, Special Needs Agreement);
- Take Charge of a child;
- a supervision order;
- an agreement with the parent to ensure the person who has caused the child protection issue will no longer have access to the child;
- obtaining a court order that prevents contact between the child and a person likely to harm the child.

Removal

When the child is in immediate danger and/or less disruptive measures do not ensure the safety of the child, the social worker will remove the child and place the child in an approved family care home.

The social worker will, as soon as possible:

- notify the parents of the removal if they were not present at the time of the removal;
- inform the parents of the reasons of the removal and provide the information in writing when possible;
- explain what will happen next, including the time and place of the court hearing;
- advise the parent of legal services available to them.

References: CFCSA: s.5, s.6, s.8, s.25, s.26, s.27, s.28, s.29.1, s.30, s.31
AOPSI: Child Protection Practice Standard #12 Supervisory Approval Required for Child Protection Services

STANDARD 10

Deciding Whether to Investigate

After assessing the report, the social worker determines whether to investigate. In the case of a third child protection report within one year about a young child (e.g., under five), the social worker always investigates.

Social Work Practice:

When determining whether to investigate, the social worker reviews:

- information provided by the reporter;
- past records;
- information provided by collaterals.

Criteria for Determining Whether to Investigate

The social worker determines whether a child needs protection when:

- there is a reasonable doubt about a child's safety and well-being, a child's need for protection, or the ability and willingness of a child's parent to care for and protect the child;
- the report is directly related to the circumstances outlined in Section 13 of the *Child, Family and Community Service Act*;
- there are reasonable grounds based on one or more subsections of CFCSA s.13 that are supported by facts or credible information from direct observations or knowledge and/or professional opinion; agency records, other Aboriginal agencies, the ministry, or out-of-province child and family services records;
- the social worker has explored less disruptive measures and determined that the measures will not ensure the safety of the child.

The social worker determines the most appropriate response to the report when it appears that the child may need protection.

The social worker does not investigate when:

- the subject of the report is not a child as defined under the CFCSA;
- there is insufficient information;
- there is verification that the report is malicious and false;
- all previous information has been reviewed and it is verified that there is no new information.

References: CFCSA: s.13, s.16
AOPSI: Child Protection Practice Standard #12 Supervisory Approval Required for Child Protection Services

STANDARD 11

Determining the Investigation Response Time

The social worker begins the investigation as soon as possible, or immediately, if the child appears to be injured, in a life-threatening or dangerous situation OR within five (5) calendar days in all other cases.

Social Work Practice:

To determine how quickly to proceed with an investigation, the social worker gives careful consideration to:

- the severity of harm to the child;
- the age of the child;
- the vulnerability of the child;
- whether there is current injury or harm to the child;
- the severity of injury and/or the potential for injury or harm to the child;
- whether possible evidence will be available later;
- the immediate need for support and reassurance of the child or non-offending parent.

A child is considered highly vulnerable when the child:

- is five years of age or under;
- is not visible in the community (not attending day care, preschool or school, or there is no contact with public health);
- has a medical condition, developmental disabilities or displays behaviours that may affect his or her immediate health or safety.

References: CFCSA: s.13, s.30

AOPSI: Child Protection Standard #3 Immediate Risk and Emergency Response

AOPSI: Child Protection Practice Standard #12 Supervisory Approval Required for Child Protection Services

STANDARD 12

Supervisory Approval Required for Child Protection Services

The social worker consults with the supervisor and obtains the supervisor's approval at key points in the assessment and investigation process of reports of suspected child abuse or neglect, and ensures there is a thorough review of relevant facts and data before decisions are made.

Social Work Practice:

Assessment Consultation

The social worker consults with the supervisor in the assessment process, including, but not limited to, when assessing:

- whether to investigate a report;
- if the child needs protection;
- the child's immediate safety;
- the response time to a report;
- assessing the child protection report;
- if the provision of family support services are adequate to ensure the safety and well-being of the child;
- if a Voluntary/Special Needs Agreement will ensure the safety of a child;
- if a Kinship Care Agreement will ensure the safety of a child;
- a kinship care home;
- that a kinship care home is no longer ensuring the safety of a child.

Investigation Consultation

The social worker consults with the supervisor in the investigation process when:

- developing an initial plan of investigation;
- developing a child safety plan;
- considering the removal of a child or bringing a child into care through an agreement;
- when a child or family under investigation is missing;
- re-assessing risk;
- transferring or closing an investigation file;
- reclassifying a file from investigation case to protective family services or voluntary services;
- the investigation cannot be completed within 30 days;
- at any point where a reportable circumstance occurs;
- where police must be notified;
- arranging a medical exam for a child;

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- determining if offering a dispute resolution process is appropriate;
- where the court may be used;
- Take Charge;
- seeking professional consultation from outside the agency (e.g., Suspected Child Abuse and Neglect (SCAN) Team, Child Abuse Specialist/Children's Hospital and/or regional consultants).

STANDARD 13

Initial Plan of Investigation

Before starting an investigation, the social worker creates an initial plan for how the investigation will proceed.

Social Work Practice:

In consultation with the supervisor, the social worker's plan for the investigation identifies:

- collaterals;
- what professionals and community services providers will be involved (e.g., police, health services);
- how the necessary information will be gathered;
- when each of these events will occur;
- which protocols – community, regional and provincial – are to be adhered to in the investigation.

References: CFCSA s.3; s.16; s.30
AOPSI: Child Protection Practice Standard #12 Supervisory Approval
Required for Child Protection Services
Local and Provincial Protocols

STANDARD 14

Informing the Police

The social worker informs the police in all cases when he or she has received a report indicating that a child has been physically harmed, sexually abused, sexually exploited, or when a criminal act has occurred that affects the immediate safety of a child.

Social Work Practice:

The social worker will:

- inform the police of the report and all information relevant to a potential criminal investigation;
- discuss the need for a coordinated joint investigation;
- follow all local and provincial protocols relevant to a joint investigation;
- inform the police of the assessment of the child protection report and the planned response to the report;
- when required, the social worker will coordinate with the police the involvement of services to support the victim.

References:

CFCSA s.13

AOPSI: Child Protection Practice Standard #12 Supervisory Approval Required for Child Protection Services

BC Handbook for Action on Child Abuse and Neglect

Local Protocols with Police

STANDARD 15

Steps in the Investigation

The social worker completes the required steps in the investigation in order to develop a thorough and accurate assessment of the child's need for protection. The social worker gives priority to seeing the child and ensuring the child's immediate safety and completes the investigation within thirty (30) days.

Social Work Practice:

Interviews

In all child protection investigations, the social worker sees and has separate interviews with:

- the child;
- all other children in the household;
- the child's parents or caregivers;
- any other witnesses and any other people who may have relevant information about the child and family;
- the alleged offender when appropriate (if police are involved, the social worker consults with police before contacting the alleged offender).

Information Gathering

In addition to the interviews the social worker will:

- directly observe the child's living situation;
- obtain information and reports from collaterals;
- review relevant past records and files;
- contact the family physician or other medical practitioner who has recently treated the child;
- arrange for a medical examination of the child (in cases that indicate a need for a medical examination).

Throughout the investigation, the social worker provides services that ensure the child's safety, including out-of-home care.

Involvement of Community and Family

The social worker, while ensuring the safety of the child, involves the family to the fullest possible extent in the planning and decision making by:

- providing the reasons for the investigation;
- explaining how the investigation will proceed;
- asking parents who else might provide safety for the child during the investigation;
- obtaining the parent's agreement to contact other people during the investigation when appropriate;

- requesting names of those who could contribute information to assist in the investigation;
- attempting to work cooperatively with the parents through mediation or dispute resolution processes to reach agreement.

Throughout the investigation, the social worker considers and provides services that ensure the child's safety, including out-of-home care options.

In keeping with local protocols, the social worker informs the Band that an investigation is beginning and requests assistance as required. Throughout the investigation, the social worker maintains the confidentiality of all information gathered.

When the child is from another Band/cultural group or community, the social worker works in partnership with the designated representative of the Aboriginal community or agency when appropriate.

References: CFCSA: s.13, s.16, s.17, s.18, s.19, s.75
Local and Provincial Protocols

STANDARD 16

Developing and Implementing a Child Safety Plan

After determining a child needs protection, the social worker in consultation with the child, family and extended family develops a Child Safety Plan to ensure the child's safety.

Social Work Practice:

Child Safety Plan

The Child Safety Plan will:

- ensure the child's safety and well being;
- be based on a standardized, culturally appropriate assessment tool that determines the nature of harm and level of risk to the child and the strengths of family;
- involve collaborative planning and dispute resolution processes with the family, extended family and community supports to establish an agreement that identifies the necessary supports and services required to keep the child safe;
- involve support services to keep the child safe;
- address the child's need for stability and continuity of community relationships.

Child Safety Plan Components

The Child Safety Plan includes:

- the risk factors to be addressed;
- the strengths of the family and child that mitigate risk to the child;
- measurable outcomes of the plan;
- steps, strategies and services required to achieve the outcomes;
- the child's need for stability and continuity of relationships;
- specific dates for reviewing each strategy;
- approval of the supervisor.

Participants in the Child Safety Plan

Participants in the Child Safety Plan may include:

- the child, family and extended family;
- significant persons in the child's life;
- service providers involved with the family;
- the appropriate designated representative of the Band/cultural group or community or delegated agency when appropriate if the child is a member of another Aboriginal community.

Strategies for Ensuring Safety

Strategies for ensuring safety are based on a careful assessment and may include:

- providing information about and referrals to formal and informal supports;
- kinship care;
- family conferencing;
- Voluntary Care and Special Needs agreements;
- a supervision order;
- a protective intervention order (CFCSA s.28);
- an order to ensure necessary health care (where risk to the child is limited to a medical issue);
- arrangement for a child to stay with family or friends;
- application for a supervision order;
- removal of the child.

References: CFCSA: s.5, s.6, s.8, s.20, s.29 (1), s.28, s.30

AOPSI: Child Protection Practice Standard #12 Supervisory Approval
Required for Child Protection Services

STANDARD 17

Child Protection Agency Protocols

The social worker must be familiar with and follow all protocols related to the delivery of child and family services that the agency has established with local and regional agencies.

Social Work Practice:

The Aboriginal agency establishes and maintains protocols related to the delivery of child and family services with:

- the ministry;
- other Aboriginal Child and Family Service agencies (fully and partially delegated);
- Bands and Aboriginal communities;
- police;
- health authorities;
- school districts;
- other ancillary agencies.

The intent of the protocols is to define the:

- relationship between the agencies based on their level of delegation;
- jurisdictions of the agencies;
- roles of the social workers, supervisors and management in the assessment, planning, delivery and monitoring of services;
- process for transferring and assigning case management responsibilities;
- process for sharing and disclosing information.

Additionally, the protocol is intended to:

- enhance collaborative work practices;
- be consistent with all relevant legislation that defines practice in the delivery of child and family services;
- provide a clear conflict resolution process, a review process and a training schedule;
- address immediate response to child protection concerns and determine strategies for responding where agencies service remote areas.

References: *BC Handbook for Action on Child Abuse and Neglect*
Inter-Provincial and Provincial Protocols

STANDARD 18

Seeing and Interviewing the Child

The child who is the subject of a child protection investigation is seen immediately if the child is in a life-threatening or dangerous situation, or as soon as possible in all other situations.

Social Work Practice:

Child's Interview

Before interviewing the child, the social worker obtains information and considers the child's:

- developmental level;
- emotional and behavioural state;
- family and extended family relationships;

When the child is from another Band/cultural group or Aboriginal community, the social worker contacts the community or delegated agency when appropriate when planning to interview the child.

When meeting with a child during the course of a child protection investigation, the social worker assesses:

- the child's personal sense of his or her safety and physical and emotional condition;
- the child's views regarding the process and possible outcome;
- the child's safety.

When meeting with a child the social worker explains to the child:

- the reasons for the meeting;
- how the investigation is likely to proceed;
- what may happen as a result of the investigation.

Obtaining Consent to Interview

Before meeting with the child, the social worker must inform the child's parent, unless the social worker believes that the parent:

- may jeopardize the child's safety;
- may prevent the social worker from seeing the child;
- may leave the community with the child;
- could influence the child's discussion with the social worker.

Access to the Child is Denied

If the social worker is denied access to the child, the social worker may request assistance from the Chief and Council and/or in consultation with the supervisor and legal counsel, submit an application for a court order for access to the child. When such an order is granted, the social worker may ask the police to assist in the enforcement of the order if additional assistance is indicated.

If a person refuses to disclose the location of a child and the social worker has obtained a court order for access to the child, the social worker may apply to the court for a warrant for the person's arrest.

Moving the Child to Interview

If the social worker has to move the child to conduct the interview, the social worker must obtain the consent of the child's parent unless the social worker has chosen to Take Charge of or remove the child.

References: CFCSA: s.13, s.16, s.17, s.18, s.19, s.30, s.71 (3)

STANDARD 19

Arranging a Medical Examination of a Child

When the social worker has reason to believe that a child may have been physically abused, sexually abused or seriously neglected, the social worker will ensure that the child is examined by a physician in a timely manner.

Social Work Practice:

Circumstances Requiring a Medical Examination

A medical examination is arranged when there is:

- an allegation that a child may have suffered physical harm or injuries;
- a concern that the parent/caregiver's explanation of the injury is not consistent with the harm the child has suffered;
- no explanation for an injury;
- an allegation of serious neglect;
- an allegation that a child has been sexually abused;
- a concern that a child's development is likely to be seriously impaired by a treatable condition, and the parent(s) refuses to provide or consent to treatment;
- a concern that the child is being deprived of necessary health care;
- where a child has been physically or sexually abused or neglected, consideration should be given to having the child's siblings examined by a physician as well.

Whenever possible, the examination should be conducted by the child's family physician or specialist.

When it is believed a second medical opinion is required, the social worker contacts the Suspected Child Abuse and Neglect (SCAN) team for consultation.

Consent for Medical Treatment

At the time of an investigation, the social worker asks the child's parent/guardian to authorize a medical examination of the child.

If the social worker is unable to obtain the parent/guardian's authorization for a medical examination of the child and the situation is not medically urgent, the social worker may, in consultation with the supervisor, apply for a court order.

If the social worker has taken charge of or removed the child, the social worker may consent to the provision of necessary health care for the child.

The child's consent to medical treatment should be sought according to the requirements of the *Infants Act*. In cases where a child who has "capacity to consent" refuses medical treatment in a life-threatening situation or where refusal of treatment may have severe consequences for the child's health, the social worker must consult with the supervisor and further direction sought.

Role of the Social Worker

Where a medical examination has been arranged as part of a child protection situation, the social worker should:

- attend the medical appointment;
- if the parent will not be at the medical examination, the social worker should try to obtain, where possible, detailed information about the child's previous medical history (e.g., accidents, operations, illnesses, medications, allergies, immunizations, development);
- ensure that the examining physician has all relevant information about the presenting concerns.

Timeframes for a Medical Examination of the Child

Physical Abuse Allegations/Unexplained Injury:

- any injury requiring immediate medical treatment should be seen urgently by a physician/hospital emergency department;
- any injury or allegation of physical abuse (e.g., shaking, "rough handling," hitting) to a very young child, especially under the age of two, should be seen immediately;
- any injuries of a less serious nature in an older child should be seen as soon as possible. If documentation of injuries (e.g., bruising) is required, the child must be seen while the injuries are still easily visible.

Sexual Abuse:

- any child who may have been sexually abused within the previous 72 hours should be seen immediately by a physician;
- any child who may have been sexually abused and has pain or bleeding in the private area should be seen immediately by a physician;
- a child who may have been sexually abused more than 72 hours earlier, may be seen by appointment by a physician as available.

Serious Neglect:

- any child who appears to be suffering from serious physical symptoms related to neglect (e.g., failure to thrive, malnutrition, dehydration, serious skin conditions) should be seen immediately by a physician;
- other children suffering from neglect should be seen as soon as possible;
- for medical assessments related to neglect, the previous medical, developmental and social history of the child is very important and should be provided in advance to the physician who is doing the assessment.

References: CFCSA: s.13, s.29

AOPSI: Child Protection Practice Standard #12 Supervisory Approval Required for Child Protection Services

Infants Act s.16

Suspected Child Abuse and Neglect (SCAN) – specialized medical child protection teams are available in some communities for examinations and/or second opinions.

Child Protection Service Unit at BC's Children's Hospital – for serious, urgent or complex cases

STANDARD 20

Seeing and Interviewing the Parent

In all child protection investigations, the social worker must interview the parent(s) in person.

Social Work Practice:

During the course of a child protection investigation, the social worker interviews the parent(s) in person in order to determine:

- the nature of the injury, neglect or harm to the child;
- the parent's explanation of the incident;
- any factors to be considered in the immediate safety assessment and the risk assessment;
- the circumstances of the child and the family;
- who else is living in the household;
- who else may have relevant knowledge about the situation.

References: AOPSI: Child Protection Practice Standard #14 Informing the Police

STANDARD 21

Deciding Whether or Not the Child Needs Protection

In every child protection investigation, the social worker must decide whether the child needs protection. The investigation is concluded when all steps of the investigation are complete and the social worker has determined whether or not the child needs protection.

Social Work Practice:

The social worker carefully examines and considers all the information obtained during the investigation, including:

- statements made by the child;
- statements made by the child's parent(s) and/or extended family;
- statements made by the alleged abuser;
- forensic or scientific evidence;
- physical or medical evidence;
- personal observations of acts, behaviours and conditions reported by witnesses (including the child's extended family);
- the results of a standardized, culturally appropriate assessment tool;
- supports available through family and community to ensure the child's safety;
- any information of criminal activity, charges and/or convictions;
- supporting evidence (e.g., observations made by third-party individuals) that corroborate the allegation (e.g., a child crying);
- the opinion of a qualified professional (i.e. Suspected Child Abuse and Neglect (SCAN), Children's Hospital, regional consultants, practice analyst);
- all collateral information including credible community information.

The social worker makes every effort to obtain all information needed to complete the child protection investigation.

During the course of a child protection investigation, the social worker decides whether the child needs protection.

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- References:** CFCSA: s.13, s.16, s.17, s.18, s.19, s.30
 AOPSI: Child Protection Practice Standard #12 Supervisory Approval Required for Child Protection Services
 AOPSI: Child Protection Practice Standard #10 Deciding Whether to Investigate

STANDARD 22

Action Taken When the Child or Parent Cannot be Located

When the child or family cannot be located during the course of a child protection investigation, the social worker makes every reasonable effort to locate the child or family and complete the investigation. The social worker places an Alert on the Community Information System (CIS).

Social Work Practice:

When the child or family cannot be located during the course of a child protection investigation, and the social worker has reason to believe that a child may need protection, the social worker, in consultation with supervisor, continues the investigation by:

- trying to locate the child or family by contacting anyone who might know their whereabouts (e.g., family members, employers, neighbours, friends);
- contacting caregivers, community agencies or service providers in the community;
- contacting any other person in the community who has contact with the child or the family.

If, after completing these steps, the social worker still cannot locate the child or family, the social worker initiates an Alert on the Community Information System.

The social worker may also, when appropriate:

- notify the police and ask for their help in locating the child and family;
- refer the investigation to the appropriate jurisdiction, if the child or family resides in another community;
- ask to be notified if the child or family returns to the community (if a referral is made to another jurisdiction);

References: CFCSA: s.17, s.18, s.19
AOPSI: Child Protection Practice Standard #12 Supervisory Approval Required for Child Protection Services
AOPSI: Child Protection Practice Standard #29 Reportable Circumstances
Inter-Provincial and Provincial Protocols

STANDARD 23

Reporting the Investigation Results

The social worker provides information regarding the outcome of the investigation.

Social Work Practice:

While protecting the identity of the reporter, the social worker shares the outcome of the investigation to the following, unless reporting the result would cause physical or emotional harm to anyone or endanger the child's safety or when a criminal investigation into the matter is under way or contemplated:

- the parent/guardian or someone who stands in place of the parent/guardian apparently entitled to custody;
- the person who made the report;
- the child, if the child is capable of understanding the information;
- if the subject of the report is a child from another Band/cultural group or Aboriginal community, the social worker informs the designated representative of the community or delegated agency when appropriate.

Respecting confidentiality, the details of the child protection investigation that the social worker must report are limited to:

- the outcome of the investigation;
- the results of the immediate safety assessment;

If a criminal investigation is under way or being considered, the social worker must consult with police to determine if disclosing information jeopardizes the investigation.

References: CFCSA: s.16, s.75
CFCS Regulation Schedule 1, 2

STANDARD 24

Time Limit for Investigations

The child protection investigation is completed within thirty (30) days of receipt of the report.

Social Work Practice:

If circumstances make it impossible for the social worker to complete the investigation within thirty (30) days of receiving the report, the social worker must produce a plan for the completion of the investigation, and have it approved by the supervisor.

References: AOPSI: Child Protection Practice Standard #12 Supervisory Approval Required for Child Protection Services

STANDARD 25

Deciding Where to Place the Child

When making decisions regarding where to place an Aboriginal child, consistent with the child's best interests and need for stability and continuity of lifelong relationships, the social worker gives priority to placing the child:

- with the child's extended family;
- within the child's Band/cultural group or Aboriginal community;
- with another Aboriginal family, if the child's own family or community cannot assume the child's care.

Social Work Practice:

In deciding where to place a child, the social worker considers the physical and emotional safety of the child and consults with the child's family and community to identify a safe and supportive living arrangement.

Placement Priorities

The social worker will:

- consider the adult members of the child's extended family, or other persons within the child's community as possible caregivers for the child;
- actively follow up with recommended members of the child's family or community to determine whether they would be willing and able to assume care of the child.

Ensuring Continuity

Additionally, the social worker will make every effort to:

- keep sibling groups together or arrange for frequent and regular contact if sibling groups are separated;
- ensure that the child will maintain contact with siblings, relatives and friends;
- ensure the child will attend the same school he or she attended before coming into care;
- ensure the child will maintain contact with his or her cultural community.

Placing the Child Outside His or Her Community

When it is necessary to place the child outside his or her community, the social worker will, with supervisory approval, select a caregiver who will:

- preserve the child's culture and identity by respecting the views, heritage, spiritual beliefs and socio-economic circumstances of the child's family;
- provide ongoing contact with the family;
- provide the child with opportunities to maintain regular and positive contact and involvement with his or her Band/cultural group or Aboriginal community.

References: CFCSA: s.4, s.93, s.35 (2)d, s.41 (1)(b), s.42.2 (4)(a), s.42.2 (4)(c), s.42.2 (7)(d), s.49 (7)(b), s.71, s.93 (1)(g)(ii)

AOPSI: Child Protection Practice Standard #12 Supervisory Approval Required for Child Protection Services

STANDARD 26

Take Charge

The social worker takes charge of a child when it is necessary to provide temporary care in the absence of a parent.

Social Work Practice:

The social worker may take charge for up to:

- seventy-two (72) hours in the case of an unattended, lost or runaway child;
- twenty-four (24) hours where the police have taken charge of a child who is in immediate danger.

When the social worker takes charge of an unattended, lost or runaway child, the social worker must:

- take the child to a safe place;
- arrange to pay for food, clothing and necessary items;
- authorize necessary health care;
- make reasonable efforts to contact the person responsible for the child;
- inform the parent;
- if the child has been charged under the *Youth Justice Act*, consult with the police and/or a probation officer before making arrangements to return the child to his or her home community;
- make arrangements to return the child.

If the social worker has to provide care for an unattended child for more than seventy-two (72) hours, and the parent does not return or is unwilling or unable to resume care, the social worker makes an immediate safety assessment and decides whether the child needs protection. If so, the social worker, in consultation with the supervisor, makes a decision whether to remove the child, or to use less disruptive measures.

If the police request that a social worker assist in the provision of day-to-day care for a child who has been abducted from a parent with legal custody, the social worker can provide care for up to seventy-two (72) hours until:

- the custodial parent is able to resume care, or
- the social worker signs a Voluntary Care Agreement with the custodial parent, to care for the child until arrangements can be made to return the child to the custodial parent.

The social worker may provide assistance in returning a lost or runaway child without taking charge after assessing the child's needs when the child:

- does not need protection;
- has capacity and does not need day-to-day care;
- is already being cared for by a relative or friend;
- agrees with the plan to return home.

References: CFCSA: s.15, s.25, s.26, 27

AOPSI: Child Protection Practice Standard #12 Supervisory Approval
Required for Child Protection Services

Youth Justice Act

STANDARD 27

Supervision Orders

The social worker applies to the court for a supervision order with terms and conditions that ensure the child's safety and identify the intent to remove the child if the terms and conditions are not met.

Social Work Practice:

The social worker ensures all supervision orders include the following terms and conditions:

- that the social worker has direct and private access to the child and the child's home;
- the specific services the family is required to attend (e.g., drug and alcohol treatment, anger management, parenting courses) with defined goals and outcomes;
- the required changes in the family environment (e.g., sobriety, non-violence) that the family has committed to achieve;
- all additional terms and conditions.

The social worker ensures the wording of the order outlines the intent to remove the child if the specified conditions of the supervision order are not met.

The social worker removes a child who is the subject of a supervision order if:

- an existing supervision order no longer protects the child;
- a person breaches the terms or conditions of the order that places the child at risk;
- the court has ordered the child be removed if a person breaches a term or condition.

References: CFCSA: s.41 (a)(b), s.41.1, s.42, s.42.1, s.42.2, s.44, s.46

STANDARD 28

When a Child or Family is Missing, Lost or Runaway

When a child is missing, lost or runaway and/or a family with a Protective Family Services file is missing, the social worker will place an Alert on the Community Information System (CIS) and make ongoing efforts to locate the child or family.

Social Work Practice:

When a child is missing, lost or runaway, or family with a Protective Family Services file is missing, the social worker, in consultation with the supervisor, will:

- place an alert on the CIS;
- attempt to locate the child or family by contacting anyone who might know their whereabouts;
- notify police;
- if the child or family is found in another jurisdiction, ask the nearest child protection office/agency to immediately assess the child's safety;
- review the case for transfer if the child and family have relocated to another region.

References: AOPSI: Child Protection Practice Standard #29 Reportable Circumstances
Inter-Provincial and Provincial Protocols

STANDARD 29

Reportable Circumstances

The agency director and the Director, CFCSA for Aboriginal Agencies are notified of reportable circumstances and grievous incidents.

Social Work Practice:

When a child or youth who has, or whose family has, received services from the agency within the past twelve (12) months is involved in a reportable circumstance or grievous incident, a report is sent to the Director, CFCSA for Aboriginal Agencies and copied to the delegated agency director. The initial report must be prepared within twenty-four (24) hours of the incident, and a case review and written report must be submitted within ten (10) days.

Reportable Circumstances

Reportable circumstances include:

- the death of a child;
- a child in a life-threatening situation (e.g., illness, a serious accident, abduction);
- a child who frequently runs away;
- a child who is lost or missing (with or without family) for 10 days;
- a child who is involved in a violent crime;
- a child who is abused or neglected in a situation that could be perceived as being linked to the Director, CFCSA of Aboriginal Agencies or his delegate (e.g., a child in care, respite care, and/or receiving services from a child care worker);
- a child in care subject to a Protocol Investigation of a Family Care Home;
- a child who has been involved in, or exposed to, a high-risk situation or disaster.

Each of these examples is considered to be a reportable circumstance or grievous incident. In such situations the reportable circumstance procedure must be followed. The agency supervisor must make the initial report within twenty-four (24) hours.

Elements of the Report

The report must include:

- the name and birth date of the child;
- the legal guardianship status of the child (e.g., temporary order, continuing custody order);
- whether the child is Aboriginal and the name and address of the child's Band/cultural group or Aboriginal community;
- the date(s) of the incident or situation;
- the name, address and type of placement that the child was in at the time of incident;
- the name of the social worker and supervisor assigned to the child;

- how the social worker was informed of the incident, and by whom;
- the known circumstances surrounding the incident, including the date, time, place, other people present or involved, details regarding any abuse or neglect, and details of the incident that may have resulted from abuse or neglect;
- the current status of any child protection investigation or police investigation;
- a brief summary of the agency's involvement with the child and the family of the child, including all details of any past similar circumstances that may have caused harm to the child;
- a listing of people who have been notified by the social worker, including the police, family members, the community, and other agency or ministry staff;
- any additional actions taken by the social worker or supervisor.

When the information is not immediately available, the supervisor indicates when it will be forwarded.

Case Review

The case review and written report which must be submitted within ten (10) days includes:

- the name and birth date of the child;
- the name of the social worker and supervisor assigned to the child;
- any required information from the initial report that was not available at the time the initial report was completed;
- any factual information that would add to the initial report;
- summary of the history of previous services to the child and family, and the current reason that services are being provided to the family;
- a detailed statement of the child's placement history, including any information describing the nature or circumstances that lead to the placement of the child;
- all details of prior allegations, or confirmed reports of abuse and neglect, that are relevant to the nature or circumstances of the matter being reported;
- the status of any child protection investigation, including additional information received from the police or other people concerning suspected child abuse or neglect;
- an update regarding the needs of the child resulting from the incident and how these needs will be met;
- an update regarding any other children at risk, and the plan for protecting these children;
- a summary of any additional services provided to the child, family, caregivers and service providers as a result of the incident or circumstance;
- a summary of any steps being implemented to prevent further similar incidents, and the status of these intervention strategies;
- any plan for further investigation or other required actions;
- other information requested by the Director, CFCSA of Aboriginal Agencies.

The following information is to be provided as appropriate to the circumstances and as soon as it becomes available:

- the medical reports;
- the autopsy report;
- the results of the police investigation;
- the results of the case review.

Informing the Child's Family

The social worker will inform the child's family and provide supports to the family as appropriate to the circumstances and as soon as possible. Supports may include:

- referral to community supports;
- financial or in-kind assistance for travel costs;
- in the case where the child has died, a financial contribution for the funeral.

Director's Response

- Within two (2) days, the Director, CFCSA reviews the report and determines if an additional report is required and what specific information is to be included;
- Within five (5) days of receiving an additional report the Director will indicate if a further review is required, the nature of the review, and whether a referral to an external review body is made.

Involving the Public Guardian and Trustee and/or INAC Lands and Estate Planning

- Where there has been a death or critical injury to a child in care, the social worker informs the Public Guardian and Trustee and/or INAC Lands and Estate Planning Services of the event to determine their role in protecting the child's financial or legal interests.

References: CFCSA: s.51, s.52

AOPSI: Child Protection Practice Standard #12 Supervisory Approval
Required for Child Protection Services

INAC Lands and Estate Planning Services

STANDARD 30

Case Documentation for Child Protection Services

When providing child protection services the social worker will document all relevant, accurate, objective, complete and significant information gathered and actions taken during the provision of child protection services as defined by all AOPSI Child Protection Standards.

Social Work Practice:

The social worker documents all relevant information including decisions made, plans developed and actions taken while conducting a child protection investigation, including, but not limited to, the following:

- initial report of suspected abuse or neglect;
- results of prior contact check;
- reports from other provinces if required;
- collateral checks;
- assessment of the report and emergency response;
- determination of the response time;
- consultation with supervisor;
- contact with police;
- initial plan of the investigation;
- steps in the investigation;
- interviews with child, parents and others significant to the investigation;
- medical information related to the investigation;
- action taken when a child or parent cannot be located;
- assessment of risk and plan to address risk;
- child protection decision;
- less disruptive measures and services provided (e.g., Voluntary Care Agreements, family support services, kinship care);
- the child's case plan;
- reviewing risk;
- Take Charge;
- response to a missing child in care or family;
- all relevant court documentation;
- referrals to services;
- correspondence;
- reportable circumstances.

The social worker documents the child protection service information in a common database (MIS) and ensures all confidential information is stored in a secure location at all times.

STANDARD 31

Transferring Protective Family Services Files

Prior to transferring a Protective Family Services file, the social worker will complete all required documentation and follow all existing protocol procedures.

Social Work Practice:

Transfer Criteria

Protective Family Services files will be transferred when:

- the family relocates to another geographical location;
- the service required is beyond the delegation level of the agency's social worker;
- a transfer from one social worker and/or specialized team to another within an agency is required;
- the sending and receiving supervisors have approved the transfer.

Role of Agency Supervisors in File Transfer

The sending supervisor will:

- follow all existing protocol procedures;
- ensure the receiving agency's social worker is delegated to provide the required services;
- initiate contact with the receiving supervisor;
- ensure all required file documentation is updated and complete;
- provide supervisory approval;
- authorize transfer and complete the transaction on the electronic system.

The receiving supervisor will:

- confirm the file is current;
- confirm the file transfer date;
- accept the file electronically;
- assign the file to a social worker.

Role of the Sending Social Worker in the Protective Family Services File Transfer

Prior to transferring a Protective Family Services file, the sending social worker will:

- complete a service plan review;
- complete a risk assessment and risk deduction service plan;
- complete a transferring recording;
- identify with the receiving staff the need, timing and process for the transfer and ensure a full briefing is provided;
- meet with parents, child and receiving social worker;

- notify service providers involved in the case of the transfer and the name and contact information of the new social worker;
- notify, when appropriate, the designated representative of the Band/cultural group or Aboriginal community if the family belongs to another community;
- involve, plan and inform the family, extended family and community representative whenever possible of the transfer (where this is a planned move) and at a minimum, tell them the name and contact information of the new social worker.

Role of the Receiving Social Worker in Protective Family Services File Transfer

Prior to the transfer of a Protective Family Services file, the receiving social worker will meet with the:

- sending social worker for a full briefing of information;
- parents and child;
- caregiver and other appropriate service providers to review case planning.

At the time of the transfer of the Protective Family Services file, the receiving social worker will:

- conduct a file review;
- meet with the family and child within five (5) calendar days of assuming responsibility for the file.

Elements of this standard may apply in local and inter-agency transfers only. Social workers are to consult with the supervisor to determine appropriate compliance to the standard.

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- References:** CFCSA: s.95
 AOPSI: Child Protection Practice Standard #12 Supervisory Approval Required for Child Protection Services
 AOPSI: Child Protection Practice Standard #17 Child Protection Agency Protocols

STANDARD 32

Transferring Child in Care Files

Prior to transferring a Child in Care file, the social worker will complete all required documentation and follow all existing protocol procedures.

Social Work Practice:

Transfer Criteria

Child in Care files will be transferred when:

- a child and/or family relocates to another geographical location;
- the service required is beyond the delegation level of the agency's social worker;
- a transfer from one social worker and/or specialized team to another within an agency is required;
- the sending and receiving supervisors have approved the transfer.

Role of Agency Supervisors in the File Transfer

The sending supervisor will:

- follow all existing protocol procedures;
- ensure the receiving agency's social worker is delegated to provide the required services;
- initiate contact with the receiving supervisor;
- ensure all required file documentation is updated and complete;
- provide supervisory approval;
- authorize transfer and complete the transaction on the electronic system.

The receiving supervisor will:

- confirm the file is current;
- confirm the file transfer date;
- accept the file electronically;
- assign the file to a social worker.

Role of the Sending Social Worker in the Child in Care File Transfer

Prior to transferring a Child in Care file, the sending social worker will:

- ensure a copy of the risk reduction service plan is on file;
- complete a transferring recording;
- update the Comprehensive Plan of Care;
- identify with the receiving staff the need, timing and process for the transfer and ensure a full briefing is provided;
- meet with the child and caregiver to explain the transfer;
- meet with child, caregiver and receiving social worker;

- notify, when appropriate, the designated representative of the Band/cultural group or Aboriginal community if the family belongs to another community;
- notify the service providers involved in the case about the transfer, and the name and contact information of the new social worker;
- involve, plan and inform the family, extended family and community representative whenever possible of the transfer (where this is a planned move).

Role of the Receiving Social Worker in the Child in Care File Transfer

Prior to the transfer of a Child in Care file, the receiving social worker will meet with the:

- sending social worker for a full briefing of information;
- parents and child;
- caregiver and other appropriate service providers to review case planning;

At the time of the transfer of the Child in Care file, the receiving social worker will:

- conduct a file review;
- meet with the family and child within five (5) calendar days of assuming responsibility for the file.

Inter-Provincial Transfers

To transfer a Child in Care file to another province, the social worker, in collaboration with the supervisor, consults the Inter-Provincial Territorial Protocol on Children Moving Between Provinces and Territories.

References: CFCSA: s.95

AOPSI: Child Protection Practice Standard #12 Supervisory Approval Required for Child Protection Services

AOPSI: Child Protection Practice Standard #17 Child Protection Agency Protocols

Inter-Provincial Territorial Protocol on Children Moving Between Provinces and Territories

STANDARD 33

Closing Protective Family Services and Child in Care Files

Prior to closing a Protective Family Services or Child in Care file, the social worker will ensure that the circumstances that necessitated the provision of protective services no longer exist and the identified risks can be managed safely within the strengths and capacity of the family, extended family and community.

Social Work Practice:

Protective Family Services File

Prior to closing a Protective Family Services file, the social worker will:

- conduct a review of the risks and strengths of the child, family and extended family using a standardized, culturally appropriate assessment tool;
- complete a closing summary;
- meet with the parent(s)/family and child to discuss closure;
- ensure support services are in place for the client when appropriate;
- notify service providers of the file closure;
- notify when appropriate the designated representative of the Band/cultural group or Aboriginal community if the family belongs to another community.

Child in Care File

The social worker will develop a plan based on the safety and best interests of the child that includes the following participants:

- the child over the age of twelve (12) years;
- the family and extended family;
- the child's caregiver;
- formal and informal service providers who have a role in supporting the family;
- the designated representative of the Band/cultural group or Aboriginal community when appropriate if the child belongs to another community.

Prior to returning the child home or to the parent, the social worker will:

- review the child's Comprehensive Plan of Care to ensure the objectives of the plan have been achieved;
- conduct a review of the risks and strengths of the child, family and extended family using a standardized, culturally appropriate assessment tool;
- provide the family and child with relevant information;
- meet with the caregiver and child to discuss the return;
- ensure the child has all personal belongings including pictures and life books;
- notify service providers of the file closure;

- notify when appropriate the designated representative of the Band/cultural group or Aboriginal community if the child belongs to another community;
- identify and refer the family to appropriate support services;
- complete a closing summary.

The social worker closes all files in the common database (MIS).

References: AOPSI: Child Protection Practice Standard #12 Supervisory Approval Required for Child Protection Services

STANDARD 34

Investigating Allegations of Abuse or Neglect in Family Care Homes

Allegations of abuse and neglect in family care homes are investigated by the child protection delegated social worker according to the Protocol Investigation of a Family Care Home.

Social Work Practice:

Aboriginal Child and Family Service Agency Investigation Protocol

The procedures outlined in Protocol Investigation of a Family Care Home for Aboriginal Agencies with Child Protection Delegation apply when a child protection social worker receives a report of abuse and/or neglect in a family care home.

Supports for the Family Care Home

The agency provides an appropriate advocate for the family care home, available upon request, who offers support and information to the home regarding the Protocol Investigation process.

Review Process

If the family care home is not satisfied with the outcome of the protocol investigation, the caregiver may request a Community Review and/or an appeal to the Director, CFCSA of Aboriginal Agencies.

Community Review Process

This process has the authority to review the administrative conduct of the investigation. It does not have the authority to review the delegated practice decisions of the Director or make recommendations regarding the conduct of practice.

Steps in the Community Review Process may include:

- The caregiver may direct his or her concerns to the delegated agency director and the identified Band representative to request a review of the protocol investigation process;
- The request must be made within 30 days of the caregiver receiving the protocol investigation report and agency director's letter;
- The identified Band representative, in consultation with the delegated agency director, completes an administrative review of the process;
- The Band representative and the delegated agency director inform the caregiver of the results of the review.

Appeal to the Director, CFCSA for Aboriginal Agencies

This process has the authority to review delegated practice decisions and make recommendations regarding the conduct of practice.

- The caregiver may direct his or her concerns to the Director, CFCSA for Aboriginal Agencies and request a review of the investigation;
- The request must be made within 30 days of the caregiver receiving the investigation summary and the agency director's letter;
- The Director, CFCSA for Aboriginal Agencies completes the review, reaches a decision, and informs the caregiver and the delegated agency director of his or her decision.

References: Protocol Investigation of a Family Care Home for Aboriginal Agencies with Child Protection Delegation

STANDARD 35

Quality of Care Review

A Quality of Care Review of a family care home is conducted by a delegated social worker whenever a quality of care concern arises and where the safety of the child is not an issue.

Social Work Practice:

Quality of Care Review

The social worker will distinguish between a Quality of Care Review and a Protocol Investigation of a family care home by using the following definitions.

Definitions

A **Quality of Care Review** occurs when there is a report that the family care home is not meeting the Standards of Care. The procedures outlined in the Quality of Care Review apply when a child protection social worker receives a quality of care report.

A **Protocol Investigation** occurs when there is a report of abuse or neglect of the child in a family care home and is conducted as per AOPSI Child Protection Practice Standard #34 Investigating Allegations of Abuse or Neglect in Family Care Homes.

Procedures

The procedures outlined in the Quality of Care Review apply to social work practice when a delegated social worker has a concern regarding the quality of care in a family care home.

Supports for the Family Care Home

The agency provides an appropriate advocate for the family care home, available upon request, who offers support and information to the home regarding the Quality of Care Review process.

Review Process

If the family care home is dissatisfied with the outcome of the Quality of Care Review, the caregiver may request a Community Review and/or appeal to the Director, CFCSA of Aboriginal Agencies.

Community Review Process

This process has the authority to review the administrative conduct of the Quality of Care Review. It does not have the authority to review delegated practice decisions of the Director, CFCSA or make recommendations regarding the conduct of practice.

Steps in the Community Review Process may include:

- The caregiver may direct his or her concerns to the delegated agency director and the identified Band representative to request a review of the Quality of Care process;
- The request must be made within 30 days of the caregiver receiving the Quality of Care Report and agency director's letter;
- The identified Band representative, in consultation with the delegated agency director, completes a review;
- The Band representative and the delegated agency director inform the caregiver of the results of the administrative review.

Appeal to the Director, CFCSA for Aboriginal Agencies

This process has the authority to review delegated practice decisions and make recommendations regarding the conduct of practice.

- The caregiver may request a review of the Quality of Care Report from the Director, CFCSA for Aboriginal Agencies;
- The request must be made within 30 days of the caregiver receiving the Quality of Care Report and the agency director's letter;
- The Director, CFCSA for Aboriginal Agencies completes the review, reaches a decision, and informs the caregiver and the delegated agency director of his or her decision.

References: Quality of Care Review of a Family Care Home for Aboriginal Agencies with Voluntary Service and/or Guardianship and/or Child Protection Delegation

Glossary of Terms



- Agency:** Agency refers to the body that is planning or operating an Aboriginal Child and Family Service. Depending on the Aboriginal community's choice of service delivery structure, or the stage of delegation reached by the body's social workers, the agency may take the form of:
- an autonomous body such as a non-profit society; or
 - a child and family service of a Band, Tribal Council; or
 - a legal entity representing them.
- The agency may provide exclusive services related to its delegated authority, or may provide an “umbrella” of health and social services, of which the CFCSA-related services form a part.
- Agency Director:** The agency director refers to the most senior manager in an agency. The job title may vary (e.g., executive director/program director, chief executive officer). The agency director reports to an agency's Board of Directors, or the Band or Tribal Council, depending on the structure and reporting process determined by the aboriginal community.
- Ancillary Services:** Ancillary services refer to services to children and families provided on both a statutory (e.g., police, education, health and social services – both physical and mental) and non-statutory basis (e.g., parenting programs, alcohol and drug programs, family counselling, child care). The array of available ancillary services varies by community.
- Child Assessment:** Child assessment refers to the analysis and judgement made by social workers at various times while carrying out their delegated responsibilities including:
- assessment of the child's needs, for the purposes of developing voluntary care agreements under voluntary services delegation;
 - assessment of the child's needs as part of establishing and updating a comprehensive plan of care when a child is in continuing custody under guardianship delegation; and
 - assessment of risk in the context of child protection under child protection delegation.
- The assessment by the social worker takes into account any clinical assessment by health and education professionals.
- Community:** Community refers to both the geographic area/reserve in which families live, as well as the First Nation, which may cover more than one geographic area or reserve.
- Delegation of Authority:** Delegation of authority refers to provisions of the CFCSA under which the Director, CFCSA may delegate authority to the employees of an Aboriginal agency to undertake the administration of all or part of the Act. The extent of the responsibility undertaken by an Aboriginal agency will be the result of negotiations between the Director and the First Nation or Aboriginal community to be served by the agency. The Aboriginal agency requests delegation of authority through the Deputy Director of Aboriginal Services of the ministry.

- Director, CFCSA:** The Director, *Child, Family and Community Service Act* is defined in the CFCSA as the person designated by the Minister of Children and Family Development.
- Dual Accountability:** Dual accountability refers to the two primary reporting relationships that the agency has by virtue of its workers receiving delegated authority under the CFCSA. One relationship stems from the governance model adopted by the agency and its Board, Band or Tribal Council, which reflect the agency's role in the community. The other relates to the statutory requirements of the CFCSA, which hold the agency accountable to the Director, CFCSA for the protection of children. Social workers with delegated authority are, therefore, accountable to the Director for performing the function for which they have delegation. The agency's policies and its workers' practices need to reflect both levels of accountability.
- The agency and its staff are accountable to the community for non-delegated functions that relate to child welfare, with the context of the overall governance model.
- Family:** Within an Aboriginal context, family refers to the child's extended family (e.g., parents, aunts, uncles, grandparents and other blood relatives), and community members. When referring to the family's role in caring for a child, the term excludes any family member who would compromise the safety and physical and emotional well-being of the child.
- Family Assessment:** Family assessment refers to the analysis and judgements made by social workers at various times while carrying out their delegated responsibilities including:
- assessment of the family's needs, for the purposes of developing voluntary service agreements under Voluntary Services delegation; and
 - assessment of risk in the context of child protection under Child Protection delegation.
- The assessment by the social worker takes into account any clinical assessment of family members by health and education professionals.
- Ministry:** Ministry refers to the provincial ministry responsible for child welfare.
- Operational Standards:** Operational standards are measurable, minimum statements describing attributes of a First Nations or Aboriginal agency's organizational state that the agency and the Director, CFCSA need to be satisfied are in place prior to delegation of specific authorities under the *Child, Family and Community Services Act*.

- Parent:** A parent is the mother of a child, the father of a child, a person to whom custody of a child has been granted by a court or by an agreement, or a person with whom a child resides and who stands in the place of the child's parent. This includes a child's guardian, but does not include a social worker working with a child in care through voluntary agreement or court order.
- Practice Standards:** Practice standards are measurable statements that describe a desired level of staff performance against which actual performance can be compared. Practice standards vary according to level of delegation and service component.
- Supervisor of Agency:** The supervisor of the agency is the position to which social workers report for clinical and administrative direction, guidance and support. Typically, the supervisor reports to the agency director. The reporting structure and job title varies according to the agency's size and the organizational preferences of the Aboriginal community.

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