



CARRIER SEKANI FAMILY SERVICES PRACTICE AUDIT REPORT

Report Completed: November 2024

The Quality Assurance Branch respectfully acknowledges that we are living and working with gratitude and respect on First Nations lands throughout British Columbia. It was an honor for our team to travel to Carrier Sekani and conduct our work on their lands.



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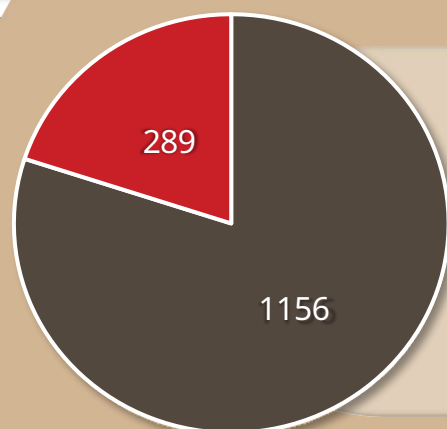
CARRIER SEKANI FAMILY SERVICES (CSFS) PRACTICE AUDIT

AT A GLANCE

WHAT WE MEASURED:

- ❖ Child Services including continued care, Voluntary (VCA), and Special Needs Agreement (SNA).
- ❖ Resource work throughout the preparation, planning and placement process and ongoing support.
- ❖ Evaluated the thoroughness of documentation in adherence to AOPSI standards and policy.

Contact with Children & Youth



Based on the number of children in care and standard requirements to meet in person every 30 days, social workers saw children and youth 80% of the required private visits during the timeframe.

- Visits completed
- Visits not completed

Carrier Sekani Family Services Mission Statement:

With the guidance of our Elders, we are committed to the well-being and empowerment of Carrier and Sekani Families by asserting authority over health, social, and legal services

STRENGTHS:

- Preserving Identity
- Continuity of Relationships
- Documentation of Resource Practice

OPPORTUNITIES FOR GROWTH:

- Reportable Circumstances
- Providing the Caregiver with Information & Reviewing Appropriate Discipline Standards
- Monitoring the Family Care Home

HIGHLIGHTS

Staff provide culturally relevant services guided by informal learning in the community and formally CSFS award-winning "Nowh Guna' Carrier Cultural Training."

CSFS Provides high quality programming to children, youth and adults aged 8- 29.

Employees describe a positive work environment, strong team work and effective workload management methods.

RELATIONAL WORK



- * Training completed & improved Reportable Circumstance process
- * All outstanding family care home investigations placed on records
- * All investigation follow up plans completed



Background and Purpose

The Ministry of Children and Family Development (MCFD) completes practice audits to support continuous improvements in policy, practice, and service delivery. Each audit focuses on a specific area of practice within MCFD or an Indigenous Child and Family Service Agency (ICFSA) and assesses compliance with legislation, policy and/or practice standards.

This audit assessed the guardianship and resource services provided by [Carrier Sekani Family Services](#) (CSFS) from April 1, 2020, to January 31, 2023, measuring compliance with the [Aboriginal Operational and Practice Standards and Indicators](#) (July 2009). This is CSFS's fifth audit. The last audit was completed in May 2018.

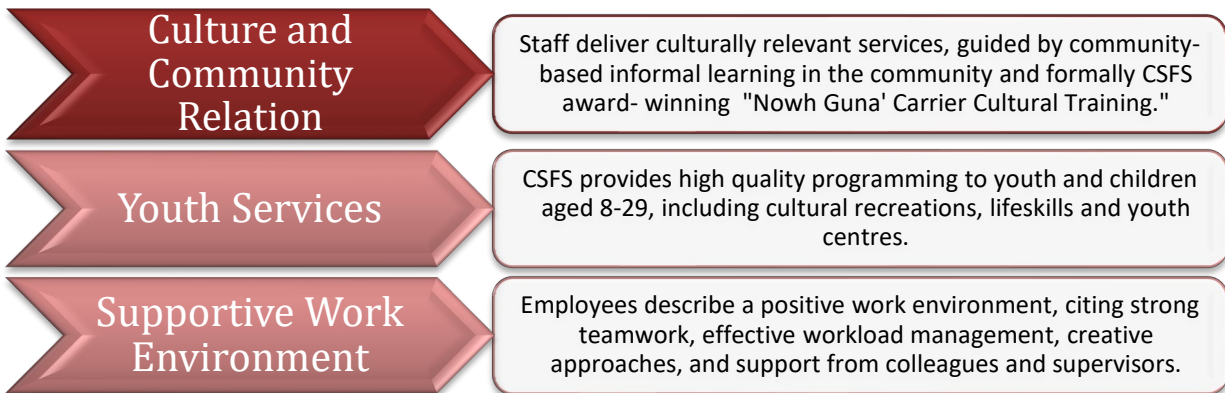
MCFD practice audits are just one tool the agency uses to ensure high quality service provision. The agency has internal quality assurance methods in place, including audits conducted by their own internal research team, and is an accredited agency governed by set standards of excellence.

CSFS is a branch society of the Carrier Sekani Tribal Council incorporated as a non-profit society in 1990. CSFS serves children and families of the 11 member Carrier and Sekani Nations residing in urban and rural areas of North-Central British Columbia. The province of British Columbia, represented by the director designated under the *Child, Family and Community Service Act (CFCSA)*, delegated CSFS with the responsibility to provide guardianship services, resource development and voluntary services to their 11 community Nations in 2003. See [Appendix A](#) and for more detailed information on delegation, community demographics and organizational work environment.

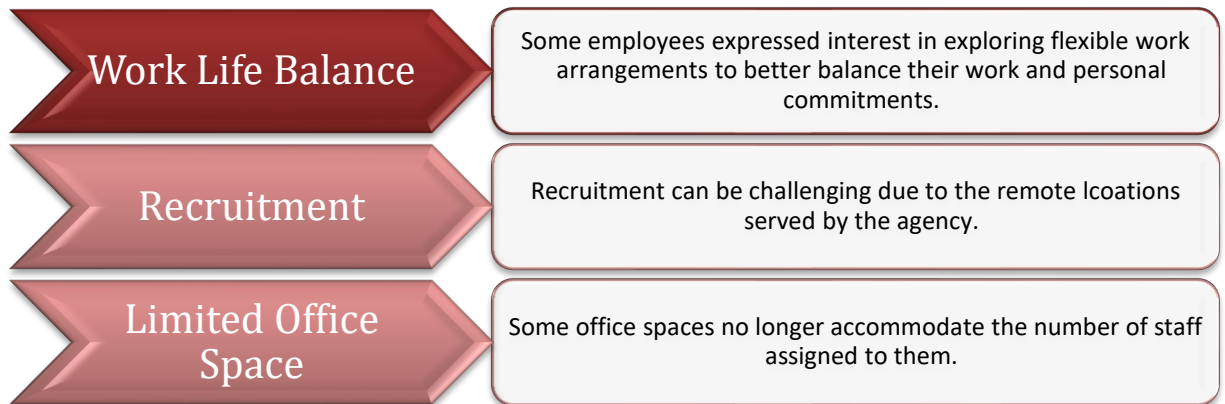
Staff Perspectives

During the audit process, 33 delegated staff, including leadership, social workers, resource workers and guardianship workers, were invited to share their perspectives about what was working well and where they saw opportunity for growth within CSFS. Nine staff members participated. To honor their voice, this report includes a summary of the strengths and growth opportunities they shared. See [Appendix A](#) for more detailed information.

Strengths:



Growth Opportunities:



Guardianship Services Audit Results

The audit covers the CSFS guardianship and family service programs over three years, based on 49 records from the selected sample, though not all 23 measures in the audit tool applied to each record. See [Appendix A](#) for more detailed methodology.

For standards requiring annual completion, results are shown by year.

Many standards require multiple criteria to be met for an achieved rating. See [Appendix B](#) for specific requirements.

Strengths and Growth Opportunities:

Strengths:

Maintaining and supporting cultural identity and family relationships.

Reviewing and monitoring plans of care.

Informing children of their rights.

Meeting health needs.

Planning for independence.

Supervisory consultations and approvals.

Planning for moves.

Record transfers.

Communicating and information sharing with caregivers.

Involving the Public Guardian and Trustee.

Growth Opportunities:

Timely submission of reportable circumstances.

Providing caregivers with information on discipline and child-specific planning.

Interviewing children about their care experience.

Monitoring and documenting private visits with children and youth every 30 days.

Highlights: CSFS had strong practice in preserving the identity of children and youth in care and providing culturally appropriate services.

All were registered or in the process of registering with their Nation.

Children's community involvement was well documented.

Children and youth had access to learning their Carrier language, culture camps, food harvesting, beading, drumming, and other cultural activities.

Many children and youth lived with extended family in their community.

Active efforts were underway to connect children with Indigenous caregivers or extended family.

Care plans were thoughtful, detailed, timely and child and youth centered.



CSFS took action to address these concerns and now use a new ICM applet to improve the monitoring and documenting of visits with children and youth.

Detailed Analysis

Standard (St.): 1 Preserving the identity of the Child or Youth in Care

This standard applied to all 49 records, with a **100%** compliance rate.

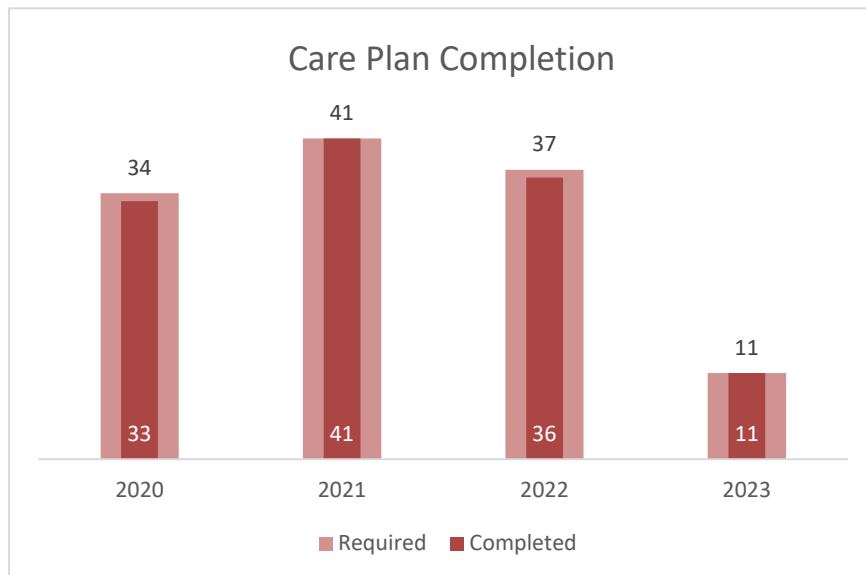
St. 2: Development of a Comprehensive Plan of Care

No records were applicable for this standard.

St. 3: Monitoring and Reviewing the Child or Youth's Plan of Care

This standard applied to 47. The compliance rate was **100%** in 2021 and 2023, and **97%** in 2020 and 2022.

The 2 records rated not achieved had care plans, but they were not updated annually. 1 requires a current care plan.



CSFS had high compliance in this area, with most care plans consistently updated annually. Of the 2 records rated not achieved, both were from past years. Current care plans were up to date at the time of this audit.

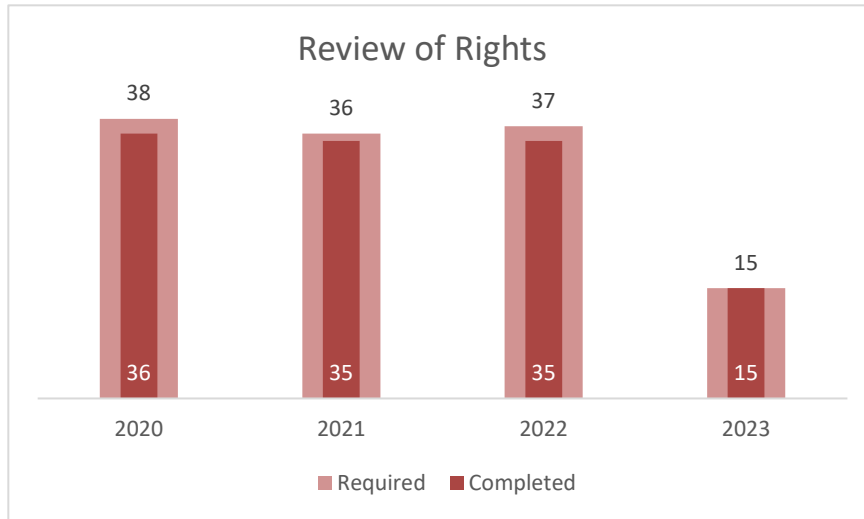
St. 4: Supervisory Approval Required for Guardianship Services

This standard applied to 49 records, with a **100%** compliance rate.

St. 5: Rights of Children and Youth in Care

This standard applied to 49 records. The compliance rate was **100%** in 2023, **95%** in 2020 and 2022 and **97%** in 2021.

Of the 4 records rated not achieved, a review of rights was not conducted annually each year. All current reviews were up to date at the time of this audit.



St. 6: Deciding Where to Place the Child or Youth

This standard applied to 49 records, with a **100%** compliance rate.

St. 7: Meeting the Child or Youth’s Needs for Stability and Continuity of Relationships

This standard applied to 49 records, with a **100%** compliance rate.

St. 8: Social Worker’s Relationship and Contact with the Child or Youth

The policy required a total of 1445 private visits among the 49 records reviewed. Private visits occurred within the 30-days timeframe 1156 times, resulting in a compliance of **80%**. The time between visits ranged from 21 to 446 days.

St. 9a: Providing the Caregiver with Information

This standard applied to 49 records. The compliance rate was **98%**, with 48 records rated achieved. The 1 not achieved record did not confirm that information about the child or youth was provided to caregivers at the time of placement.

St. 9b: Reviewing the Appropriate Discipline Standards

This standard applied to 49 records. The compliance rate for this standard was **86%**, with 43 records rated achieved.

Of the 6 not achieved, 4 did not confirm discipline standards were reviewed with caregivers, and 2 did not confirm this at time of placement. 4 of these records are open and require documentation confirming that the discipline standards were reviewed with the caregivers in 2022/2023.



CSFS took action and developed an action plan to improve in this area. See Action Plan for more details.

St. 10: Providing Initial and Ongoing Medical and Dental Care

This standard applied to 49 records, with a **100%** compliance rate.

St. 11: Planning a Move for a Child or Youth in Care

This standard applied to 29 records, with a **100%** compliance rate.

St. 12: Reportable Circumstances

This standard applied to 34 records. There was a **94%** compliance rate for submitting a reportable circumstance, with 32 rated achieved.

Of the submitted reportable circumstances, **26%** were submitted within 24 hours. The range of time for submissions was between 2 and 67 days, with over half of those submitted within 10 days.



CSFS took action and completed the remaining reportable circumstance reports. See Actions to Date for additional information related to Reportable Circumstance reporting.

St. 13: When a Child or Youth is Missing, Lost or Runaway

This standard applied to 6 records, with a **100%** compliance rate.

St. 14: Case Documentation

This standard applied to 49 records. The compliance rate was **96%**, with 47 records rated achieved. The 2 records not achieved contained review recordings or care plan reviews, but both were missing 1 in the timeframe reviewed. All required reviews were up to date for 2022 and 2023. One record had a review due for 2020 and the other from 2021.

St. 15: Transferring Continuing Care Files

This standard applied to 39 records. The compliance rate was **95%**, with 37 records rated achieved.

Of the 2 records rated not achieved, 1 did not contain documentation that a social worker met with the child or youth before the transfer of guardianship, and 1 did not contain documentation that the social worker met with the youth within 5 days after the transfer.

St. 16: Closing Continuing Care Files

This standard applied to 19 records, with a compliance rate of **100%**.

St. 17: Rescinding a CCO and Returning the Child or Youth to the Family Home

No records were applicable for this standard.

St. 18: Permanency Planning

A permanency plan for a child with a CCO is considered when its priorities align with the child's best interests and preserves cultural identity.

This is an interim standard until ICFSAs, cultural groups, and Indigenous communities review the MCFD permanency planning policy. As such, it is not included in the audit.

St. 19: Interviewing the Child or Youth about the Care Experience

This standard applied to 38 records. The compliance rate for this standard was **74%**, with 28 records rated achieved.

The 10 records rated not achieved did not confirm that interviews were conducted with the children and youth after placement changes.



CSFS took action and developed an action plan to improve in this area. See Action Plan for more details.

St. 20: Preparation for Independence

This standard applied to 28 records, with a compliance rate of **100%**.

St. 21: Responsibilities of the Public Guardian and Trustee (PGT)

This standard applied to 49 records. The compliance rate for this standard was **82%**, with 40 records rated achieved.

The 9 records rated not achieved did not contain documentation confirming the PGT was notified when the CCOs were ordered.

St. 22: Investigation of Alleged Abuse or Neglect in a Family Care Home

This standard applied to 14 records. The compliance rate was **93%**, with 13 records rated achieved and 1 not achieved. The 1 not achieved did not document follow up on a concern.

CSFS supports the child or youth during family care home investigations but does not conduct them. The summary report is placed on the CS record after being provided to the agency.

In 3 records, the summary report was initially missing, but when notified, CSFS took action and the required reports were placed on the record before finalizing the audit, counting as achieved.



CSFS took action and addressed these concerns prior to completing the audit. See Actions to Date for more information.

St. 23: Quality of Care Review

This standard applied to 3 records, with a **100%** compliance rate.

The 3 records contained documentation that quality of care reviews were conducted but summary reports were not initially on file. When notified, CSFS took action and updated the records.

St. 24: Guardianship Agency Protocols

This standard applied to 49 records, with a **100%** compliance rate.

Resources Audit Results

The audit reflects the work done by the staff in the agency’s resource program over three years, based on 28 records from the selected sample, though not all measures in the audit tool applied to each record. See [Appendix A](#) for more detailed methodology.

For standards requiring annual completion, results are shown by year.

Many standards require multiple criteria to be met for an achieved rating. See [Appendix B](#) for specific requirements.

Strengths and Growth Opportunities:



The Structured Analysis Family Evaluation (SAFE) home studies were comprehensive and effectively highlighted the caregivers’ strengths and their suitability for fostering.

Highlights

Supervisory involvement was well documented, with consultations, approvals, exceptions to practice, and mitigation of concerns found throughout the records.

Detailed Analysis

St. 28: Supervisory Approval for Family Care Home Services

This standard applied to 28 records, with a **100%** compliance rate.

St. 29: Family Care Homes – Application and Orientation

This standard applied to 28 records. The compliance rate was **89%**, with 25 records rated achieved.

Of the 3 records rated not achieved, 2 did not contain completed criminal record check(s), 1 did not contain prior contact checks, 1 did contain completed medical exam forms, 1 did not contain completed consent forms, and 1 did not contain a completed application form.

The total exceeds 3 due to combinations of issues in 1 record. The agency was notified and addressed these missing components.

St. 30: Home Study

This standard applied to 12 records, with a **100%** compliance rate.

St. 31: Training of Caregivers

This standard applied to 28 records. The compliance rate was **96%**, with 27 rated achieved. One record did not assess or identify training needs.

St. 32: Signed Agreement with Caregiver

This standard applied to 28 records, with a **100%** compliance rate.

St. 33a: Monitoring the Family Care Home

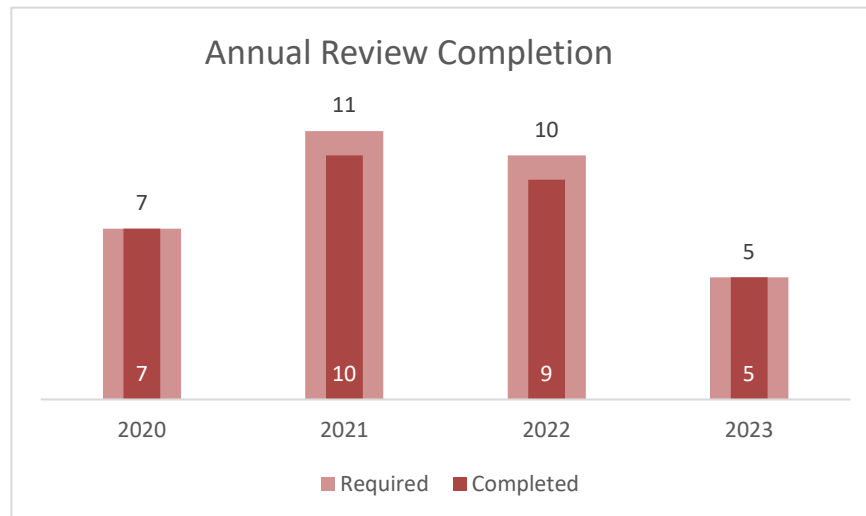
The standard applied to 28 records. In 16 records, visits occurred as outlined in the standard, and the remaining 12 records all had visits documented, but these did not occur every 90 days.

Policy required a total of 153 visits to the family care home among the 28 records reviewed. Visits occurred within the 90-day timeframe 125 out of the expected 153 visits, resulting in a compliance of **82%**.

St. 33b: Reviewing the Family Care Home

This standard applied to 28 records. The compliance rate was **100%** in 2023 and 2020, **91%** in 2021 and **90%** in 2022.

The 2 records rated not achieved contained reviews, but they were not completed annually. One was missing in 2021 and one in 2022. All current annual reviews were up to date at the time of this audit.



St. 34: Investigation of Alleged Abuse or Neglect in a Family Care Home

This standard applied to 7 records, with a **100%** compliance rate.

St. 35: Quality of Care Review

This standard applied to 4 records, with a **100%** compliance rate.

St. 36: Closure of the Family Care Home

This standard applied to 7 records, with a **100%** compliance rate.

Actions To Date

CSFS has already addressed some of the findings prior to developing an action plan, as follows:

St. 8: Social Worker’s Relationship and Contact with the Child or Youth

1. As part of a provincial initiative to increase contact with children and youth in care, the MCFD Child Safety Oversight & Practice Development (CSOPD) team launched an ICM tracking applet for visitation. This new applet supports staff and leadership to better document and track their visits with children and youth.

St. 12: Reportable Circumstances

1. The MCFD Aboriginal Services Branch provided Reportable Circumstance training to CSFS staff on August 16 and September 12, 2023, via MS Teams. The training will continue for new hires and staff needing a refresher. Reportable circumstances are now submitted to the director on the same day, with updates provided as new information becomes available. CSFS will no longer send pre-report emails, and Reportable Circumstances will be submitted within the 24-hour timeframe. (St. 12: Reportable Circumstances)

St. 22: Investigation of Alleged Abuse or Neglect in a Family Care Home

1. On December 7, 2023, CSFS confirmed outstanding family care home investigation summary reports were placed on the records.
2. CSFS confirmed completion of follow up plans with the following teams: Prince George resources on December 13, 2023; Prince George guardianship (X 2) on December 14, 2023; Vanderhoof resource and guardianship on January 10, 2024; and Burns Lake resource and guardianship on January 10, 2024.

Action Plan

Actions	Persons Responsible	Date Completed
<p><u>CHILD SERVICE:</u></p> <p><u>St. 9: Providing the Caregiver with Information and Reviewing Appropriate Discipline Standards</u></p> <p>1. In-service training will be provided to C4 delegated staff to review the practice standards for CFCSA section 70 rights and the discipline policy. CSFS has developed new forms for sign-off to be reviewed with children and youth in care and caregivers and placed on the file. These forms will be provided to staff and reviewed.</p> <p>Confirmation of the training resources used along with a copy of the form and training date(s) will be emailed to the manager of quality assurance.</p>	<p>Director of Practice, Quality Assurance & Program Development</p>	<p>April 9, 2024</p>
<p><u>St. 19: Interviewing the Child or Youth about the Care Experience (also relates to Standards 3, 5, & 9b)</u></p> <p>2. The agency is collaborating with their practice consultants and the Commission on Accreditation of Rehabilitation Facilities (CARF) to ensure that children and youth are interviewed about their experience in care, as well as their rights in care, discipline policy, advocacy process and that annual care plans are completed annually.</p> <p>In-service training has been and will continue to be provided to C4 delegated staff to review the interview questions and form.</p> <p>A CSFS Checklist will be created and used internally to guide staff in task completion.</p> <p>Confirmation of the review of the CSFS checklist within the next internal audit in March 2024 will be emailed to the manager of quality assurance.</p>		

Appendix A

A. Delegation

Delegation for ICFSAs refers to the transfer of authority and responsibility for decision-making in child welfare services from the provincial government to Indigenous communities or organizations. This process enables ICFSAs to exercise greater control over the care, protection, and well-being of their children, youth, and families in accordance with cultural values, traditions, and needs.

The level of delegation an agency has depends on the agreements made with the provincial government, as well as the agency's capacity to meet the standards required for child welfare service delivery.

CSFS operates under C4 delegation. This level of delegation enables the agency to provide the following services under the CFCSA:

- Out of Care Options
- Guardianship of Children and Youth in Continuing Custody
- Support Services to Families
- Voluntary Care Agreements
- Special Needs Agreements
- Establishing Resources
- Youth Agreements
- Respite Services
- Extended Family Program
- Agreements with Young Adults
- Alternatives to Care/Transfer of Custody

CSFS has provided C4 services since 2003. Their current delegated services agreement is from October 1, 2024, to March 31, 2025.

In addition to delegated services, CSFS focuses on providing community-based services that are culturally appropriate for Carrier Sekani people, as follows:

Health Services

- Registered nurses and residential care aides that serve ten of the Carrier Sekani Member Nations.
- A diabetes clinic that travels to northern and remote First Nations communities.
- Programs to help children overcome physical and learning delays.
- Support for patients and their families while in the hospital.

- An integrated mental wellness counselling and addictions program with a fully accredited healing camp.
- Tele-health and primary health services.
- Cultural liaison workers to support all aspects of service delivery.

Children and Family Services

- Walk Tall Youth programming.
- Family visiting programs which connect children and youth with their families and communities.
- Bridging and life skills programs that help First Nations people learn new skills.
- An urban soup bus that feeds more than 500 people every day.
- Cultural programs and healthy activities for adults and children.
- Youth Services.

Legal and Research Services

- Studies on health and social issues in their member First Nations.
- Planning for child welfare services based on wisdom from Elders and families.
- Researchers that collect and preserve Carrier knowledge and culture.
- A family justice program to help families plan for the safety of their children.

B. Demographics and Organizational Structure

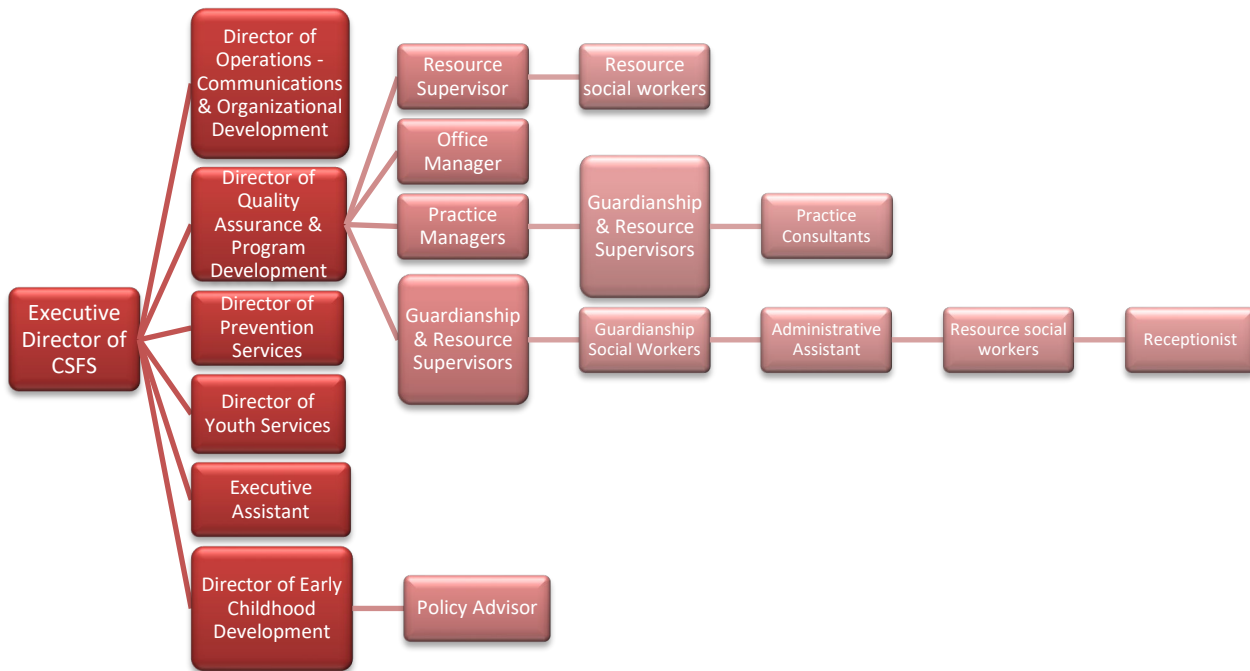
CSFS serves the following member Nations, which represent approximately 7,073 registered members: Ts'il Kaz Koh First Nation, Cheslatta Carrier Nation, Nadleh Whut'en, Stellat'en First Nation, Takla Nation, Yekooche First Nation, Wet'suwet'en First Nation, Saik'uz First Nation, Nee Tahi Buhn Indian Band, Skin Tyee Band and Lake Babine Nation.

CSFS serves a vast geographic area from Anaheim Lake in the south to Takla Lake in the north, and the Rocky Mountains in the east to Hagwilget in the west. It has five offices: three in Prince George (main office and two providing either guardianship and resource services), and one each in Burns Lake and Vanderhoof, offering integrated guardianship, resource, and voluntary services. Travel time by road from Prince George to Vanderhoof is an hour-and-a-half, and to Burns Lake is about two-and-a-half hours. Bus and train services connect the three communities.

CSFS delegated staff collaborate closely with other CSFS programs and local MCFD offices in Prince George, Vanderhoof, and Burns Lake. While the agency primarily serves community members, it also provides services to those living away from home when possible.

CSFS is in early discussions about expanding guardianship services for children and youth in temporary care within their service area and currently offers limited family service to Nation members.

CSFS ORGANIZATIONAL CHART



Professional Staff Complement and Work Environment

Since the 2018 audit, CSFS has grown significantly. The current staff includes an executive director, five directors (quality assurance and program development; operations, communications and organizational development; youth services; early childhood development; prevention services), a policy advisor, two practice managers, six guardianship/resource supervisors, six resource workers, 13 guardianship social workers, two roots workers, a family preservation supervisor, a family preservation worker, an executive assistant, two social work assistants, two practice consultants, five administrative assistants, an office manager and two receptionists.

The executive director and all delegated staff are at the C4 level, except for the roots worker and one guardianship worker, who are at the C3 level. The delegated staff the analysts spoke with, all completed their delegation training through Indigenous Perspectives Society or with MCFD via the Justice Institute of British Columbia.

CSFS offers mandatory and optional in-house training, ongoing learning opportunities, and access to MCFD training on policies, legislation and ICM. Employees also have an annual budget for professional development, with upcoming training in legal matters, reportable circumstances, mental health with youth, mental health first aid and SCAN (Suspected Child Abuse and Neglect Clinic) training. Staff appreciate opportunities to improve service and practice to deliver the best possible service to children, youth, and families.

CSFS prioritizes the value of employees attending cultural events in the community and has a cultural team who provide opportunities for staff to attend. While the COVID-19 pandemic impacted training availability over the past few years, management remains committed to supporting staff training and development.

Supervision and Consultation

Delegated staff report excellent, accessible supervision and consultation, with most having weekly to monthly tracking meetings and scheduled open-door clinical supervision. Staff can easily reach supervisors through in-person meetings, phone, text, or email. The director of quality assurance and program development hold monthly virtual leadership meetings, one-to-one tracking meetings, and open-door consultations as needed. Directors also meet monthly, as well as with the human resources department.

C. Staff Perspectives: What We Heard

Twenty-seven percent of delegated CSFS staff participated in interviews, sharing their insights on strengths and growth opportunities, themed as follows:

Strengths:

- Supportive and positive work environment: Staff described a supportive, positive work environment with strong teamwork, where colleagues have each other's backs. Leadership supports staff to carry a smaller number of records (capped at eight) and approach their work creatively while staying within policy and legislation. There is high delegated staff retention, with many staff described their teams as family, especially the smaller and more rural offices in Burns Lake and Vanderhoof. Staff can consult for support when overwhelmed, and a plan is made to reduce stress. Teams also collaborate to cover each other's caseloads when needed.
- Culture and community relationships: Staff have gained cultural knowledge through community experiences, enabling them to work with children youth and families from a culturally relevant perspective. Each community has a clan house as well as culture camps. The agency developed and offers Nowh Guna' Carrier Culture Training. Nowh Guna' means "Our Way" and indicates having a foot in both the Carrier and Western worlds and worldviews, as a necessary part of creating a strong and healthy future together. This award-winning training provides basic information about Carrier culture to develop the attitudes, knowledge and skills needed to provide culturally competent services. It is mandatory training for CSFS staff and is also available to both Indigenous and non-Indigenous partners.
- Youth Services: CSFS Youth Services provides high-quality programming for children and youth ages 8-29 within Carrier Sekani Nations. Youth programming includes cultural, recreational, and life skills opportunities, focusing on increasing protective factors through year-round group or one-to-one services. CSFS operates two youth centres: Sk'ai Zeh Yah (Prince George) and Syoh (Vanderhoof).

Challenges and Growth opportunities:

- Workload: Many staff spend significant time travelling to rural areas to serve children, youth, and families. They reported challenges with short notice for community visits, which can affect scheduling and availability due to prior commitments.
- Flex days: Many staff believe flex days would help them recover from the challenges of the work and manage family errands and appointments.
- Large geographic service area: Staff in Burns Lake and Vanderhoof cover a large geographic area, leading to lengthy travel days and at times, days out of the office.
- Social worker recruitment and office space: Recruiting staff in Burns Lake and Vanderhoof is challenging due to their location, and staff in these offices have outgrown their current spaces.

D. Methodology

This audit assessed the guardianship and resource services provided by Carrier Sekani Family Services (CSFS) from April 1, 2020, to January 31, 2023, measuring compliance with the Aboriginal Operational and Practice Standards and Indicators (July 2009).

Three MCFD quality assurance practice analysts conducted the practice audit. Collected data, compliance tables and a compliance report for each record audited was stored on a SharePoint site. Discussions with staff occurred by telephone or a virtual meeting after the data collection was completed.

The population and sample sizes for all the record types used in the audit were collected from the Integrated Case Management (ICM) database. The sample sizes provide a confidence level of 90% with a +/- 10% margin of error. However, there is a decreased confidence level and increased margin of error in some areas, as some of the standards used for the audit are only applicable to a reduced number of the records that were selected. The following are the sample sizes for the three record types:

Record Types	Population Sizes	Sample Sizes
Open Child Service	52	30
Closed Child Service	26	19
Open and Closed Resource	46	28

Sample Sizes were randomly drawn from populations with the following parameters:

1. Open Child Service (CS): CS records open in the agency's offices on March 31, 2023, and had been open (continuously) at the agency for at least six months with legal category Voluntary Care Agreement, Special Needs Agreement, Continuing Custody Order (CCO), or Out of Province.
2. Closed Child Service: CS records that were closed in ICM between October 1, 2020, and March 31, 2023, and managed by the agency's offices for at least six months (continuously) with the following legal categories Voluntary Care Agreement, Special Needs Agreement, Continuing Custody Order (CCO), or Out of Province.
3. Open and Closed Resource: Resource records in ICM that were managed by the agency's offices that had children or youth in their care for at least three months (continuously) between April 1, 2020, and March 31, 2023. Children or youth in care records had to have one of the following placement or service types: Regular Family Care, Restricted Family Care, Level 1 Care, Level 2 Care, Level 3 Care, and First Nations Foster Home.

Appendix B

AOPSI Standards

AOPSI Standards related to Guardianship Services		
Standard #	Standard Name	Achieve Criteria
St. 1	Preserving the identity of the Child or Youth in Care	<ul style="list-style-type: none"> • Efforts were made to identify and involve the child or youth's Indigenous community. • Efforts were made to register the child when entitled to a Band or Indigenous community or with Nisga'a Lisims Government. • A cultural plan was completed if the child or youth was not placed within their extended family or community. • The child or youth was involved in culturally appropriate resources. • If the child or youth was harmed by racism, the social worker developed a response. • If the child or youth was a victim of a racial crime, the police were notified.
St. 2	Development of a Comprehensive Plan of Care	<ul style="list-style-type: none"> • An initial plan of care completed within 30 days of admission, and • A plan of care completed within six months of admission.
St. 3	Monitoring and Reviewing the Child or Youth's Plan of Care	<ul style="list-style-type: none"> • Care plans were completed annually throughout the audit timeframe. • Efforts were made to develop the plan of care with youth over the age of 12. • Efforts were made to develop the plan of care with the family. • Efforts were made to develop the plan of care with the service providers. • Efforts were made to develop the plan of care with the caregiver(s). • Efforts were made to develop the plan of care with the Indigenous community.
St. 4	Supervisory Approval Required for Guardianship Services	<p>The following key decisions and documents were approved by a supervisor:</p> <ul style="list-style-type: none"> • Care plan. • Placement change. • Placement in a non-indigenous home. • Restricted access to significant others. • Return to the parent(s) prior to cco rescindment. • Transfer of guardianship. • Plan for independence. • Record transfer. • Record closure.
St. 5	Rights of Children and Youth in Care	<ul style="list-style-type: none"> • The rights of children in care, including the advocacy process, was reviewed annually with the child or youth or with a significant person if there were capacity concerns or the child was of a young age throughout the audit timeframe, and • In instances when the child's rights were not respected, the social worker took appropriate steps to resolve the issue.
St. 6	Deciding Where to Place the Child or Youth	<ul style="list-style-type: none"> • Efforts were made to place the child in an out of home living arrangement that was in accordance with section 71 of the Child, Family and Community Service Act (CFCSA).
St. 7	Meeting the Child or Youth's Needs for Stability and Continuity of	<ul style="list-style-type: none"> • A plan was in place to support and maintain contacts between the child or youth in care and their siblings, parents, extended families, and significant others. This was not found in the two records rated not achieved.

	Relationships	
St. 8	Social Worker's Relationship and Contact with the Child or Youth	The standard requires the social worker to conduct a private visit with the child or youth: <ul style="list-style-type: none"> • Every 30 days. • At time of placement. • Within seven days after placement. • When there was a change in circumstance. • When there was a change in social worker.
St. 9	Providing the Caregiver with Information and Reviewing the Appropriate Discipline Standards	<ul style="list-style-type: none"> • Information about the child or youth was provided to the caregiver(s) at time of placement. • Information about the child or youth was provided to the caregiver(s) as it became available. • Information about the child or youth was provided to the caregiver(s) within seven days of an emergency placement. • Discipline standards were reviewed with the caregiver(s) at the time of placement. • Discipline standards were reviewed annually with the caregiver(s).
St. 10	Providing Initial and Ongoing Medical and Dental Care	<ul style="list-style-type: none"> • A medical exam was conducted upon entering care. • Dental, vision and hearing exams were conducted as recommended. • Medical follow-up was conducted as recommended. • In instances when the youth had chosen not to attend recommended appointments, the social worker made efforts to resolve the issue.
St. 11	Planning a Move for a Child or Youth in Care	The record, if it involved a placement move, confirmed that: <ul style="list-style-type: none"> • The child or youth was provided with an explanation prior to the move. • The social worker arranged at least one pre-placement visit. • If the child or youth requested the move, the social worker reviewed the request with the caregiver, resource worker and the child to resolve the issue.
St. 12	Reportable Circumstances	<ul style="list-style-type: none"> • A report about a reportable circumstance was submitted to the director within 24 hours from the time the information about the incident became known to the social worker.
St. 13	When a Child or Youth is Missing, Lost or Runaway	The record, if it involved a child or youth who was missing, lost, or runaway, who may have been at high risk of harm, confirmed that <ul style="list-style-type: none"> • The police were notified. • The family was notified. • Once found, the social worker made efforts to develop a safety plan to resolve the issue.
St. 14	Case Documentation	The record contained: <ul style="list-style-type: none"> • An opening recording. • Review recordings or care plan reviews every six months throughout the audit timeframe. • A review recording or care plan review when there was a change in circumstance.
St. 15	Transferring Continuing Care Files	The record, if it involved a transfer of responsibility from one worker to another, confirmed that: <ul style="list-style-type: none"> • A transfer recording was completed. • The social worker met with the child or youth prior to the transfer or, in instances when the youth had chosen not to meet, the social worker made efforts to resolve the issue. • Efforts were made to meet with the caregiver(s) prior to the transfer. • Efforts were made to meet with the service providers prior to the transfer. • The social worker met with the child or youth within five days after the transfer

		<p>or, in instances when the youth had chosen not to meet, the social worker made efforts to resolve the issue.</p> <ul style="list-style-type: none"> • Efforts were made to meet with the child or youth’s family within five days after the transfer.
St. 16	Closing Continuing Care Files	<p>The record, if it involved closing the record when services ended, confirmed that:</p> <ul style="list-style-type: none"> • A closing recording was completed. • The social worker met with the child or youth prior to ending services and closing the record, in instances when the youth had chosen not to meet, the social worker made efforts to resolve the issue. • Efforts were made to meet with the caregiver(s) prior to the closure. • Service providers were notified of the closure. • The Indigenous community was notified, if applicable. • Support services for the child or youth were put in place, if applicable.
St. 17	Rescinding a CCO and Returning the Child or Youth to the Family Home	<p>The record, if it involved a rescindment of a CCO, confirmed that:</p> <ul style="list-style-type: none"> • The risk of returning a child or youth to their family home was assessed by delegated worker. • A safety plan, if applicable, was put in place prior to returning the child or youth to their family home. • The safety plan, if applicable, was developed with required parties. • The safety plan, if applicable, addressed the identified risks. • The safety plan, if applicable, was reviewed every six months until the rescindment.
St. 18	Permanency Planning	<ul style="list-style-type: none"> • A permanent plan is considered for a child with a CCO 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. • This is an interim standard for use until Indigenous Child and Family Service Agencies (ICFSA), cultural groups and Indigenous communities have researched and reviewed the ministry permanency planning policy. As this is still an interim standard, it has not yet been audited by Quality Assurance.
St. 19	Interviewing the Child or Youth about the Care Experience	<ul style="list-style-type: none"> • The record, if it involved a move from a placement, confirmed the child or youth was interviewed about their care experience.
St. 20	Preparation for Independence	<p>The record, if it involved a youth about to transition from care to an independent living situation, confirmed that:</p> <ul style="list-style-type: none"> • Efforts were made to assess the youth’s independent living skills, and • Efforts were made to develop a plan for independence.
St. 21	Responsibilities of the Public Guardian and Trustee (PGT)	<ul style="list-style-type: none"> • The PGT was provided a copy of the CCO, and • The PGT was notified of events affecting the child or youth’s financial or legal interests.
St. 22	Investigation of Alleged Abuse or Neglect in a Family Care Home	<p>If it involved a report of abuse and/or neglect of a child or youth in a family care home, confirmed that:</p> <ul style="list-style-type: none"> • A Family Care Home Investigation was conducted with the summary report on file, and • Efforts were made to support the child or youth.
St. 23	Quality of Care Review	<ul style="list-style-type: none"> • The record, if it involved a concern about the quality of care received by a child or youth in a family care home, confirmed that a Quality-of-Care Review was conducted.
St. 24	Guardianship Agency Protocols	<ul style="list-style-type: none"> • All protocols related to the delivery of child services that the agency has established with local and regional agencies have been followed.

AOPSI Standards related to Resource Services

St. 28	Supervisory Approval for Family Care Home Services	<p>The record confirmed that the social worker consulted a supervisor at the following key decision points:</p> <ul style="list-style-type: none"> • A criminal record was identified for a family home applicant or any adult person residing in the home. • Approving a family home application and home study. • Signing a Family Home Care Agreement. • Approving an annual review. • Determining the level of a family care home. • Placing a child or youth in a family care home prior to completing a home study. • Receiving a report about abuse or neglect of a child or youth in a family care home. • Receiving a concern about the quality of care received by a child or youth living in a family care home.
St. 29	Family Care Homes – Application and Orientation	<p>The record confirmed the completion of the following:</p> <ul style="list-style-type: none"> • Application form. • Prior contact check(s) on the family home applicant(s) and any adult person residing in the home. • Criminal record check(s). • Consent for release of information form(s). • Medical exam(s). • Three reference checks. • An orientation to the applicant(s).
St. 30	Home Study	<ul style="list-style-type: none"> • The social worker met the applicant in the family care home. • A physical check of the home was conducted to ensure the home meets the safety requirements. • A home study, including an assessment of safety, was completed in its entirety.
St. 31	Training of Caregivers	<ul style="list-style-type: none"> • The training needs of the caregiver were assessed or identified, and training opportunities were offered to, or taken by, the caregiver.
St. 31	Signed Agreement with Caregiver	<ul style="list-style-type: none"> • There were consecutive Family Care Home Agreements throughout the audit timeframe, and they were signed by all the participants.
St. 33	Monitoring and Reviewing the Family Care Home	<ul style="list-style-type: none"> • Annual reviews of the family care home were completed throughout the audit timeframe, when required. • The annual review reports were signed by the caregiver(s). • The social worker visited the family care home at least every 90 days throughout the audit timeframe, when required.
St. 34	Investigation of Alleged Abuse or Neglect in a Family Care Home	<p>The record, if it involved a report of abuse and/or neglect of a child or youth in a family care home, confirmed that:</p> <ul style="list-style-type: none"> • A Family Care Home Investigation was conducted with a summary report on file. • Efforts were made to support the caregiver.
St. 35	Quality of Care Review	<p>The record, if it involved a concern about the quality of care received by a child or youth in a family care home, confirmed that:</p> <ul style="list-style-type: none"> • A Quality-of-Care Review was conducted. • Efforts were made to support the caregiver.
St. 36	Closure of the Family Care Home	<ul style="list-style-type: none"> • The record, if it involved closure of a family care home, contained a written notice to the caregiver indicating the intent of the agency to close the family care home.