



FAMILY SERVICES PROVINCIAL PRACTICE EVALUATION

Report Completed: December 2024

Office of the Provincial Director and Aboriginal Services
Quality Assurance Branch



Ministry of
Children and Family
Development

Staff Acknowledgment

The Quality Assurance Branch would like to thank all the MCFD staff working with the public for their dedication, hard work, and resiliency. We recognize the ever-growing workload, staff shortages, and stress that staff have endured. The Quality Assurance Branch appreciates the commitment to public service demonstrated by staff and the passion they bring to all aspects of this work. Thank you for your collaboration throughout this evaluation.

TABLE OF CONTENTS

BACKGROUND AND PURPOSE.....	3
SUMMARY OF FINDINGS.....	3
STRENGTHS.....	4
OPPORTUNITIES FOR GROWTH.....	6
ACTIONS TO DATE.....	8
ACTION PLAN.....	9
APPENDIX A.....	11
PURPOSE.....	11
METHODOLOGY.....	11
APPENDIX B.....	13
DETAILED FINDINGS.....	13
CLOSING.....	20
APPENDIX C.....	21
ACHIEVED CRITERIA.....	21
APPENDIX D.....	24
COMPLIANCE BREAKDOWN BY SERVICE DELIVERY AREA.....	24

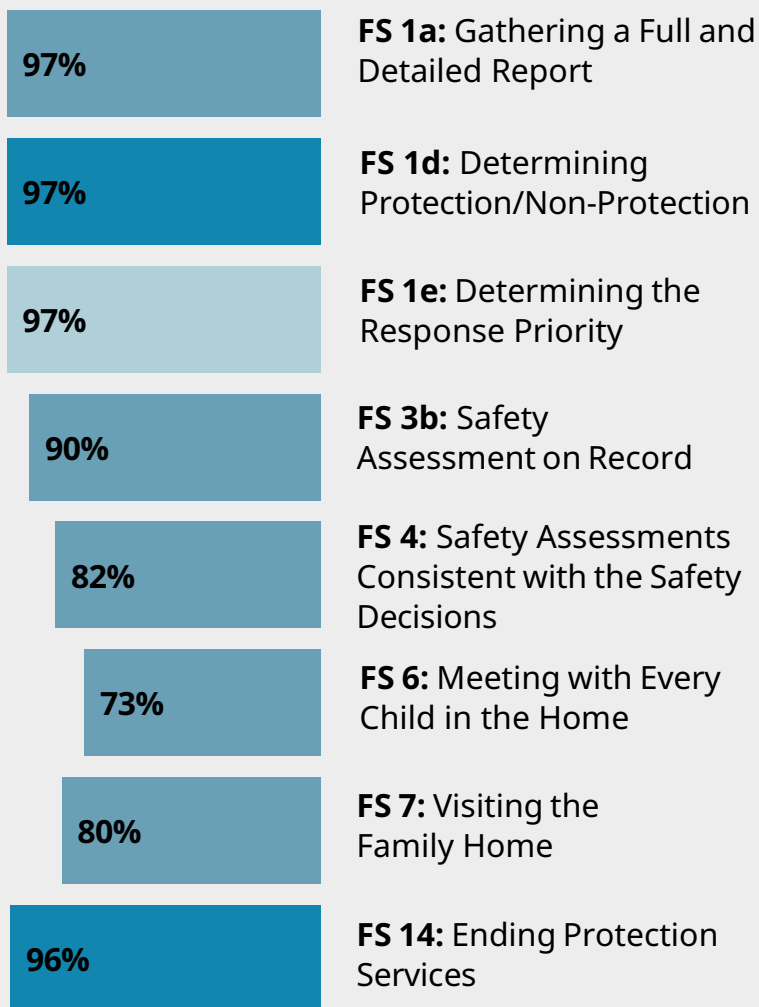


Family Services Provincial Practice Evaluation

Report Completed: December 2024

Family Service is a large and critical part of all child safety work, comprised of memos, incidents, service requests and family service records.

Highlighted Strengths



What We Measured

2328 Family Service records across the province. Evaluated the thoroughness and quality of work in addition to adherence to policy.

Overall Strengths

- Screening protection reports
- Safety Assessments/safety decisions
- Visiting the family home
- Documenting strengths and needs
- Ending protection services
- Use of Collaborative Planning and Decision Making

Growth Opportunities

- Indigenous Community involvement
- Family Plans
- Reassessment of risk of future harm and Reunification Assessments



Bright Spots

Collaborative Planning and Decision Making (CPDM) provides a **structured workflow** for child protection workers to document a family's strengths and needs, create a collaborative Family Plan, and assess the risk of future harm.

Records where CPDM was used show **better compliance in all areas** and the work was **more collaborative** with the family and the family's circle.

What We Found

- Practice impacted by Core Accountabilities varied in compliance. Clinical consult notes and documenting exceptions were often missed in documentation
- Recordings accurately documented important decisions, strengths, and needs
- Closed records scored higher on average for completion of tasks
- Indigenous Community involvement is an area of emerging practice
- CPDM is widely used even when not required

Actions Taken to Date

- Provincial Centralized Screening updated procedures to improve completion of Initial Record Reviews.
- Provincial Practice Branch released guides that provide clarity on Core Practice Accountabilities.
- Learning and Development Branch piloted training on Jurisdiction, Agreements, and Indigenous Law.

Next Steps

Documentation System: Practice tool to be created to support documenting key steps in assessing child protection reports.

Updated Training & Guidelines: Focused on Safety Assessments and gender-based violence.

Family Plans: Improve Family Plan development with families and their communities.

Reassessment & Reunification Assessment: This is a targeted area for improvement.

Highlighted Findings, Analysis and Trends

Background and Purpose

The Ministry of Children and Family Development's (MCFD) quality assurance branch (QA) conducts practice evaluations to examine compliance with legislation, policy, and standards, while providing oversight and public accountability.

For the timeframe reviewed, the child safety staff were impacted by multiple changes and challenges including the introduction of Core Practice Accountabilities, staffing shortages, wildfires, floods, and the dual health emergencies of COVID-19 and the toxic drug crisis. This evaluation introduced a tool reflecting new policies and practices, aiming to identify strengths, growth opportunities and targeted actions for practice improvements.

Process

Before starting the evaluation, QA engaged with service delivery staff and MCFD's Youth Advisory Council to identify key challenges, barriers, and practice areas to measure. This engagement led to the development of a new Family Service (FS) evaluation tool, shifting the focus from solely compliance based to key practice areas. The tool covers most areas of child protection practice, apart from guardianship and the provision of out-of-care arrangements, which QA will measure in future provincial evaluations.

The intake service records reviewed were closed between July 1, 2022, and June 30, 2022, while ongoing family service records covered work completed from February 1, 2023, to January 31, 2024. The full methodology can be found in Appendix A, and results for each measure are in Appendix B.

Summary of Findings

The evaluation focused on three practice areas: **screening and assessing child protection reports**, **assessing child protection concerns**, and **providing ongoing protection services**. These are documented across four record types:

- **Memos** document requests for service or child safety reports made to MCFD.
- **Service requests** document MCFD's steps in offering and/or providing voluntary (non-protection) services.
- **Incidents** record MCFD's assessment of child protection concerns through a Family Development Response (FDR) or Investigation (INV). INV is used for more serious concerns or when collaborative planning with parents is not possible.
- **Family service records** document MCFD's ongoing child protection services.

Screening and assessing child protection reports: These steps are primarily done by the Provincial Centralized Screening (PCS) office, with local offices screening calls made directly to them.

This measure applied to all 1494 records in the Intake sample and was only used for memos and service requests. It was divided into 7 tasks, 3 of which achieved **97%** compliance. This new approach aimed to better understand practice, highlight strengths, and identify growth opportunities. The measure showed strong practice and policy compliance, with an average compliance of **85%**.

Assessing child protection concerns: This evaluation reviewed 525 incidents across 8 service delivery areas (SDAs). Measures included assessing safety; interviews with children, parents, or caregivers; home visits; involving Indigenous Communities; and assessing the risk of future harm. Overall compliance was **69%**.

Providing ongoing protection service: New concerns can arise with families who have open records and incidents. This evaluation reviewed both open and closed records, focusing on assessing family strengths and needs, developing Family Plans, reassessment, closing procedures, and Collaborative Planning and Decision Making (CPDM). Overall compliance for ongoing family service records was **40%**.

Strengths

While some areas of high compliance show obvious strengths, the evaluation also identified strong areas of practice in measures with lower compliance, particularly in areas directly related to creating safety for children, youth, and families.

Screening: This evaluation showed high compliance, with PCS screening **70%** of the reports. By having dedicated, trained staff handle and screen most child protection calls, reports are thoroughly detailed and addressed promptly. This benefits the public by ensuring proper screening and reduces the workload for local office staff.

While most measures showed high compliance, the Initial Record Review (IRR) had the lowest completion rate at **64%**.



PCS took action and implemented a strategy to improve the successful completion of IRRs.

Safety Assessments/Safety Decisions: Safety Assessments are completed by child protection workers following initial contact with a family, documenting a child/youth's safety and any safety measures. While Safety Assessment completion was a significant strength, they were not always completed within the required 24 hours. Safety decisions aligned with the safety assessments **82%** of the time, showing significant strength.

Visiting the Family Home: Child protection workers are required to visit the family home before completing an incident as an important step in assessment and determining support needs. In this evaluation showed child protection workers either visited the family home or sought a valid exception to policy **80%** of the time.

Documenting Strengths and Needs: With the discontinuation of the Strength and Needs Assessment, the evaluation aligned with the changes outlined in the Core Practice Accountabilities and found a comprehensive assessment on record **62%** of the time, often documented in the Transfer Recording.

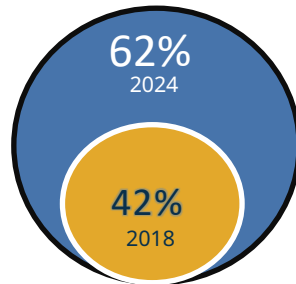


Figure 1: Assessment of Strengths and Needs - 20% growth in compliance since the last evaluation

Ending Protection Services: Records were closed according to policy **96%** of the time, reflecting sound clinical judgement in ensuring child safety. Non-compliant records were mostly due to unaddressed child safety concerns.

Collaborative Planning and Decision Making (CPDM): CPDM is a voluntary process, therefore this measure focused on documenting whether it was offered, declined, or occurred. CPDM was offered in **68%** of required records, and many Family Plans were developed through this process, indicating workers are utilizing these processes to work collaboratively and as a means of completing necessary documentation. When CPDM occurred, an average of **2** collaborative meetings per record were documented, enabling workers and families to review services, celebrate successes and identify needs.



CPDMs are used when needed and to support all families.

CPDM: processes that utilize a neutral, independent, third-party facilitator. Types of CPDM include Family Case Planning Conference (FCPC), FCPC at court, Family Group Conference (FGC), Child Protection Mediation (CPM), or Traditional Decision Making (TDM), including Circles for Indigenous Communities.

Opportunities for Growth

Opportunities for growth go beyond low compliance, addressing aspects of practice that impact assessments and addressing child safety concerns. By reviewing findings and obstacles to task completion, key actions are identified and implemented which meaningfully improves services for children, youth, and their families, as well as improves ease of use for MCFD staff.

Indigenous Community Involvement: The involvement of Indigenous communities was reviewed in 4 measures, marking the first review of this area. Families identified as Indigenous in 179 records. In 50 records, parents either did not consent to involvement of their community or no significant measure required it. Indigenous communities were involved in Family Plans **22%** of the time, and when an Indigenous Governing Body (IGB) was listed, they were notified during Reunification Assessments **45%** of the time. Additionally, Indigenous communities were involved in the CPDM process **45%** of the time.



Figure 2 : Indigenous Community Involvement Illustrates compliance with steps of working with an Indigenous family

Introduced in June 2022, the **Core Practice Accountabilities** replaced three Structured Decision Making tools—the Vulnerability Assessment, the Vulnerability Reassessment, and the Strengths and Needs Assessment—with new practice directives for documenting clinical consultation and decision making. The Reunification Assessment remained, but its narrative portion was discontinued. Staff could also end protection responses early if no safety concerns were identified after the initial assessment.

Family Plans: Family Plans clarify protection concerns, outline ways to address them, and hold participants accountable. They are meant to be developed collaboratively with families and their Indigenous communities. The absence of Family Plans can lead to confusion, service delays, and strained relationships. This measure had a compliance rate of **27%**, with lower completion rates for Indigenous families compared to non-Indigenous families.

Assessment and Reassessment of Risk of Future Harm, and Reunification Assessments: Core Practice Accountabilities introduced changes to practice and the need to document clinical consultations that include child protection history, a summary of the current circumstances, and the outcome. The measures had a **44%** compliance rate for assessing the risk of future harm, **42%** for reassessing risk, and **15%** for completing the Reunification Assessment.

The Reunification Assessment was affected by Core Practice Accountabilities. Despite being easier to use, most staff did not use this tool to document their assessment or rationale for not returning a child home. The most common issue was not completing the assessment before court proceedings, which require notice and comprehensive documentation. While assessment and consultation between staff, supervisors, families, and Indigenous communities likely occur, they do not replace the Reunification Assessment.

Trends

Closed Family Service Records: Closed records showed much higher compliance than open records, with more thorough documentation leading to achieved ratings. Closing procedures, including a closing recording, improved compliance rates for Assessing the Strengths and Needs and the Reassessment of Risk of Future Harm. Lower compliance for open records may indicate that workers prioritize direct work with families over documentation.

Family Service Records	Task Completion Rate across all measures	Total
Closed	46%	380
Open	33%	454

Figure 3: Task Completion Rate – Demonstrates the rate of records will ALL of completed tasks for Ongoing Family Services

Core Practice Accountabilities: Documentation supporting the consultation, approval and rationale for exceptions to policy was inconsistent or limited. Supervisors can end a response early if safety concerns are no longer relevant, but confusion arose between ending a response early and making exceptions for completing certain tasks, such as not contacting collaterals, instead of documenting the early closure was due to safety concerns that were no longer relevant.

Gender-Based Violence – Gender-based violence, or domestic violence, is present in a large portion of MCFD’s child protection reports. While policy requires parents to be interviewed separately and privately in investigations, the [Best Practice Approaches: Child Protection and Violence Against Women](#) recommends this practice whenever gender-based violence is a concern, regardless of the response type. In a few records, parents were interviewed together despite such concerns, resulting in insufficient information and a non-compliant rating.

In 2016 MCFD began using an adapted version of the BC Summary of Domestic Violence Risk Factors, following a recommendation from the [Representative for Children and Youth](#). This tool helps guide interventions based on identified risks. However, there was limited documentation of these risk factors in records with gender-based violence concerns, and when documented, it was most often completed during the initial call by PCS staff.

Actions to Date

Through a continual engagement process MCFD leadership across branches and program areas received early findings of this evaluation and started addressing practice concerns. Below is a list of actions implemented or in development:

1. PCS has updated procedures to improve the completion of thorough and timely IRRs.
2. Provincial Practice Branch has released the “Practice Guideline: Risk of Future Harm Discussion” and “Discussion Guide Job Aide: Determining Vulnerability and the Risk of Future Harm” to clarify the Core Practice Accountabilities Guide, with supporting documentation and orientation provided to staff. Additional updates are being developed to enhance guidance on closing incidents with documentation examples.
3. Learning and Development branch is piloting new training on jurisdiction, focusing on MCFD’s obligations and legal responsibility to Indigenous communities and the distinctions between jurisdiction, agreements, and Indigenous Law. This training will be incorporated into all future training.

Action Plan

Actions	Person Responsible	Completion Dates
<p><u>Family Service – Memos, Service Requests, and Incidents:</u></p> <p><u>Documenting the steps of the FDR / INV</u></p> <p>1. Provincial Practice will develop a practice tool to assist in documenting key consultation points on ICM when conducting an FDR or INV with a specific focus on:</p> <ul style="list-style-type: none"> a) Documenting the Safety Assessment. b) Exceptions to policy (e.g., extending the timelines, waiving steps of the FDR/ INV process, ending a protection response early). c) Involving the Indigenous community under the <i>CFCSA</i>. d) Closing consults (as per Core Accountabilities policy replaces the use of the Vulnerability Assessment). 	A/Executive Director of Practice, Provincial Practice Branch	June 30, 2025
<p>2. Training on the completion and documentation of Safety Assessments.</p>	Director, Learning and Development	June 30, 2025
<p>3. Practice guideline to be developed to provide clarity of the use of the BC Domestic Violence Indicator list and best practices when working with families impacted by gender-based violence.</p>	Executive Director of Practice, Provincial Practice Branch	June 30, 2025
<p><u>Family Service – Open and Closed Cases:</u></p> <p>4. Family Plans – Accessing a CPDM process greatly improves the outcomes for families and streamlines the workflow process in assessing strengths and needs and developing the Family Plan.</p> <ul style="list-style-type: none"> a) Continue to access and sufficiently resource CPDM and their teams as a workflow process of collaboratively completed Family Plans with children, youth, and families. b) Provide updated guidance to service delivery about how to document and complete Family Plans when not involved in a CDPM process, specifically when families are not engaging. 	A/Executive Director of Practice, Provincial Practice Branch	June 30, 2025

<p>5. Assessment of Future Harm, Reassessment of Vulnerability and Reunification Assessments all areas of assessment had low compliance specifically with where, how, and what to include in the documentation. Core Accountabilities provided greater leeway in how to document, but fulsome assessments were not frequently found. Additionally, Reunification Assessments are not being completed as per policy, however, assessments are being completed by child protection workers and team leaders when renewing agreements and court orders.</p> <ul style="list-style-type: none"> a) Training update with examples of how to document exceptions and closing summaries in incidents. b) Examples to be provided of how to document the reassessment of vulnerability in ongoing cases. c) Consider building the completion of the Reunification Assessment within clinical consultation with supervisors assisting in the documentation. d) Uncouple the completion of the Reunification Assessment with the court process. Aligning the Reunification Assessment with the six-month protection cycle may make it simpler to use to guide decision making. 	<p>A/Executive Director of Practice, Provincial Practice Branch</p>	<p>June 30, 2025</p>
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Appendix A

Purpose

Practice evaluations, or audits, are regularly conducted by the Provincial Director of Child Welfare (PDCW) across the Ministry of Children and Family Development's (MCFD) service lines and for services provided by Indigenous Child and Family Service Agencies (ICFSA) under the *Child, Family and Community Service Act* (CFCSA). These audits, led by the quality assurance branch, assess compliance with legislation, policy, and standards, while providing a systematic approach to the evaluation and improvement of services.

The evaluation focuses on improving practice in intake and ongoing family service within MCFD's child protection services. Goals include measuring policy compliance, evaluating documentation quality, confirming good practices, identifying challenges, and creating plans for improvement. The specific purposes of the evaluation are to:

- Assess current practice across records.
- Enhance practice development.
- Identify training needs.
- Inform updates to practice standards and policy.

Before the record review, quality assurance staff collaborated with service delivery and provincial practice teams to refine the evaluation tools and methods.

Records Identified for Action

Quality assurance policy states that during an evaluation any records that suggest a child may need protection under section 13 of the CFCSA, these records be identified for action. During this review, 12 records were identified for action.

Methodology

Practice analysts developed an evaluative tool with 15 measures to assess compliance with key practice areas. The findings were documented using a MCFD SharePoint site.

Intake Services

A total of 1494 intake records were reviewed, including 496 service requests, 473 memos, and 525 incidents.

Record Types	Total Files	Applied Measures
Closed incidents	525	10
Closed service requests	496	1
Closed memos	473	1

The samples represented the 8 Provincial Service Delivery Areas (SDAs), with sample sizes based on a 90% confidence level and a +/- 10% margin of error.

Records were selected with the following criteria:

- Service requests closed in the Integrated Case Management (ICM) database between July 1, 2022, and June 30, 2023, where the type was “request for family support” or “youth services.”
- Memos closed in ICM between June 1, 2022, and June 30, 2023, where the type was “screening” with "No Further Action" as the resolution. Memos created in error were excluded.
- Incidents coded as Family Development Response (FDR) or Investigation, closed between July 1, 2022, and June 30, 2023.

Ratings were based on documentation within the established timeframes to focus on recent practice.

Ongoing Family Services:

A total of 834 records were reviewed, including 454 open records and 380 closed records.

Record Types	Total Files	Applied Measures
Closed FS records	454	11-15
Open FS records	380	11, 12, 13, 15

The sample sizes based on a 90% confidence level and a +/- 10% margin of error.

Records were selected based on the following criteria:

- Closed FS records in ICM between February 1, 2023, and January 31, 2024, with a “Protection” service type.
- Open FS records as of January 31, 2024, that had been open for at least 6 months, with a “Protection” service type.

Ratings were based on documentation within the established timeframes to focus on recent practice. Supplementing the data gathered to rate the 15 measures, analysts collected additional information to provide context about the current practice. Additional information will be noted following the compliance details in each measure where applicable.

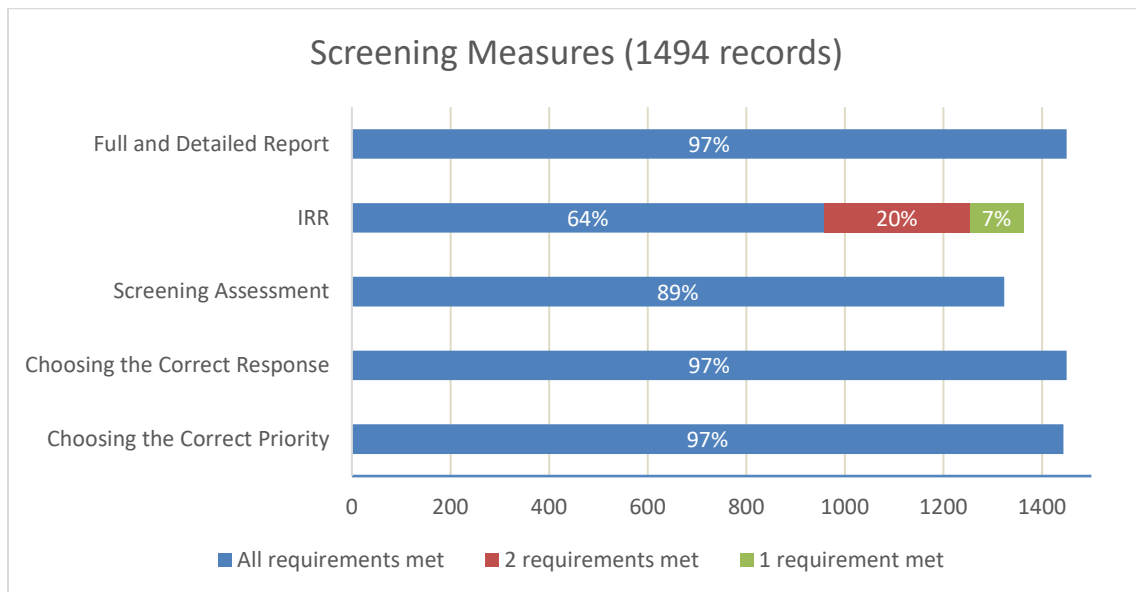
Appendix B

Detailed Findings

a. Intake Services

The overall compliance rate for Intake Services of the audit was **69%**. Measure FS 1 (Screening) was applied to all records, while FS 2 to FS 10 applied only to incidents. Although 525 incidents were reviewed, 4 were incorrectly assessed as protection when they should have been non-protection, so only FS 1 applied. There were an additional 26 memos and 8 service requests that were inaccurately assessed as non-protection despite having protection concerns present. As such, these 31 records were assessed as not achieved across the remaining measures, changing the total records assessed for measures FS 2 – 10 to 554.

FS 1: Screening Measures: In all 1494 records, **85%** of the records had full compliance.

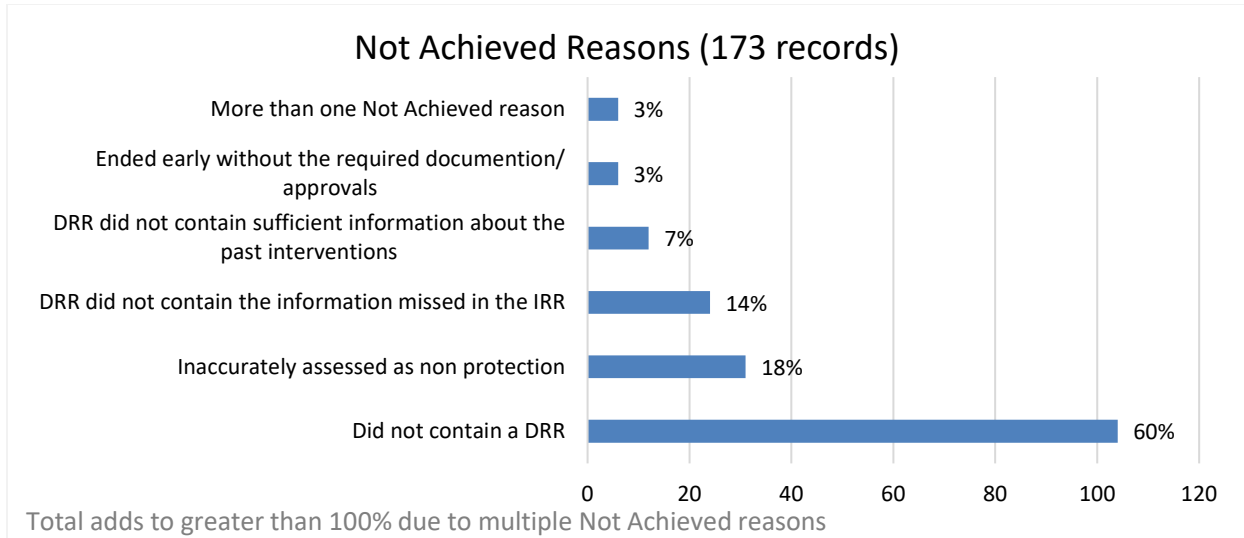


The most common component missed when reviewing IRR compliance was the Best Practices check.

Additional information obtained in this measure noted that:

- The Screening Assessment was not completed within the required timeframe **11%** of the time. The completion range was from 3 to 325 days, with the average being 19 days.
- Families were contacted in-person by a child protection worker within the prescribed timeframe **51%** of the time.
- Families were not contacted within the prescribed timeframe **49%** of the time. The average length of time it took to respond on these incidents beyond the assigned response priority timeframe was 27 days with a range of 1 day to 563 days.

FS 2: Conducting a Detailed Record Review (DRR): The compliance rate for this measure was **69%**, with 381 of 554 records rated achieved.



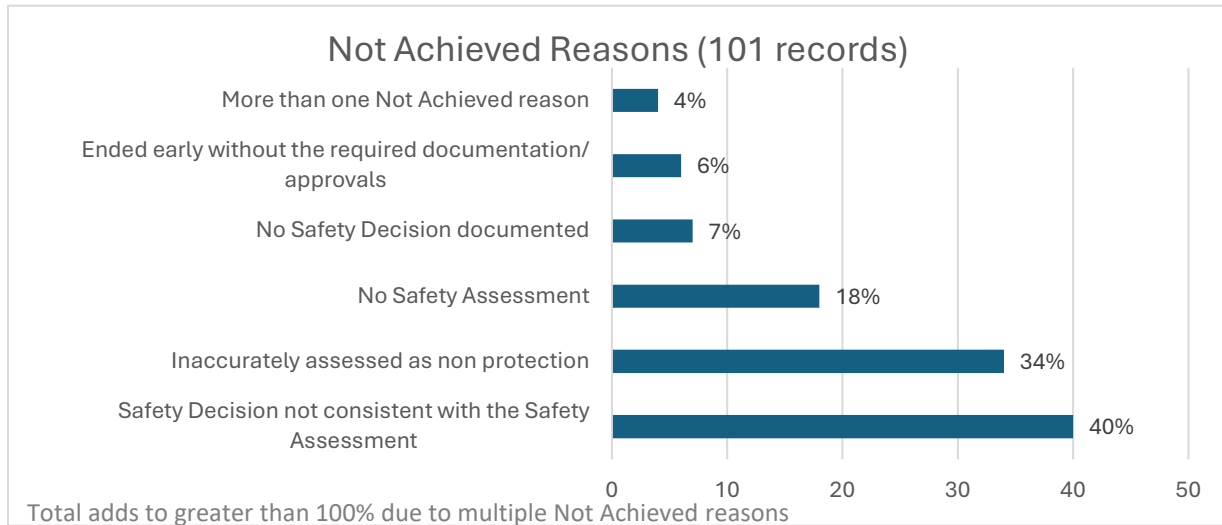
FS 3: Assessing and Documenting the Safety of the Child or Youth: In the 554 records reviewed, **41%** fully completed the assessment and documentation of the child/youth’s safety. In **5%** of the records the response ended early with supervisory approval and an acceptable rationale was documented.

On the remaining 525 records reviewed:

- the Safety Assessment fully adhered to policy **38%** of the time (198 records), with:
 - **69%** completed during the first significant family involvement.
 - **90%** containing a completed Safety Assessment.
 - **38%** completed within 24 hours.

Of the 247 Safety Assessments that were not documented in 24 hours completion took an average of 30 days, ranging from 1 additional day to 202 days.

FS 4: Making a Safety Decision Consistent with the Safety Assessment: The compliance rate for this measure was **82%**, with 453 of 554 records rated achieved.



FS 5: Meeting or Interviewing the Parents and Other Adults in the Family Home: The compliance rate for this measure was **69%**, with 383 of 554 records rated achieved.

Of the 194 records rated not achieved, 109 records did not have any/all parental interviews documented (see below for more details), 42 records did not have any/all interviews completed with the other adults living in the home, 31 records had a non-protection response which was not acceptable, on 24 records the child protection worker did not gather sufficient information to assess the safety and vulnerability of the children/youth living in that home, on 3 records the supervisor approved the decision to end early and the rationale was not documented, on 3 records the rationale for ending early was not acceptable, and on 1 record the response ended early without supervisory approval. The total number is greater than the records reviewed as 17 records were not achieved for more than one reason.

FS 6: Meeting with Every Child or Youth Who Lives in the Family Home: The compliance rate for this measure was **73%**, with 407 of 554 records rated achieved.

Of the 147 records rated not achieved, 46 had some but all of the required interviews, 41 had no child/youth interviews, 31 were inaccurately assessed and non-protection, 20 the interviews were not private or were not face-to-face, and 12 responses ended early without the required steps. The total number is greater than the records reviewed as 3 records were not achieved for more than 1 reason.

FS 7: Visiting the Family Home: The compliance rate for this measure was **80%**, with 441 of 554 records rated achieved.

Of the 113 not achieved, 75 lacked documentation of a home visit, 31 records had an incorrect coding of non-protection response, 3 did not have a suitable rationale for ending early, 3 records had supervisor approval to end early without a home visit, however the rationale was not documented, and 1 ended early without supervisory approval.

FS 8: Working with Collaterals: In the 554 records, **71%** rated achieved and collaterals were either completed as required or the response ended early with supervisory approval with rationale documented.

FS 9: Involving Indigenous Communities under the CFCSA: This was a new area evaluated. In 129 records involvement with the Indigenous Community was required. **71%** of the records confirmed the child/youth's Indigenous identity. **40%** of the records contacted the Indigenous Community, and **34%** of the records involved the Indigenous Community in planning and service delivery. **33%** of the records completed all 3 of the identified tasks.

In addition to the 129 records that required action and involvement, there were an additional 50 records in which the child protection worker confirmed the Indigenous identity of the child/youth but did not involve the community as the parent did not consent or no significant measure occurred.

FS 10: Consultation in Assessing the Risk of Future Harm and Need for Ongoing Protection Services: In previous evaluations the assessment of the risk of future harm and the need for ongoing protection was documented in a tool. This tool has been discontinued and in its place child protection workers were to document the assessment within a clinical consultation note. In the 554 records reviewed:

- **11%** (59 records) of the responses ended early with supervisory approval and an acceptable rationale

The remaining 495 records, a clinical consultation note met all three requirements **37%** of the time (183 records), with a breakdown of:

- **80%** containing a summary of the current circumstances
- **38%** containing a summary of the history of the family's child protection involvement
- **83%** documenting the outcome of the current involvement

Additional data collected found that of the incidents reviewed:

- 111 records ended within 30 days of receiving the report
- 37 records had a supervisor approved extension to close beyond 30 days

Additionally, this measure reviewed whether, in cases involving an Indigenous child and an IGB, the child protection worker provided notice to the IGB before taking significant measures. This applied to 13 records:

- 5 provided notice to the IGB
- 7 did not provide notice
- 1 did not notify all applicable IGBs

b. Ongoing Family Service

The compliance rate for ongoing Family Services was **40%**. A total of 834 records were reviewed: 454 open and 380 closed. For closed records, both physical and electronic records were reviewed. For open records, the quality assurance branch piloted a new approach where offices ensured all documentation was uploaded to ICM before review, minimizing the workload related to preparing and shipping physical records and improving security by keeping physical records in secure storage.

FS 11: Assessing the Family's Strengths and Needs & Creating and Implementing the Family Plan: This measure applied to all 834 records, broken down into 5 tasks and in **12%**, all tasks were completed. The compliance rate for each task are as follows:

- Assessment of the family's strengths and needs through supervisor consultation note or discontinued Strengths and Needs Assessment tool: **62%**
- Family Plan or equivalent on record: **36%**
- Family Plan or equivalent developed in collaboration with the family: **23%**
- Family Plan or equivalent reflective of the family's strengths and needs: **29%**
- Family Plan or equivalent approved by supervisor: **25%**



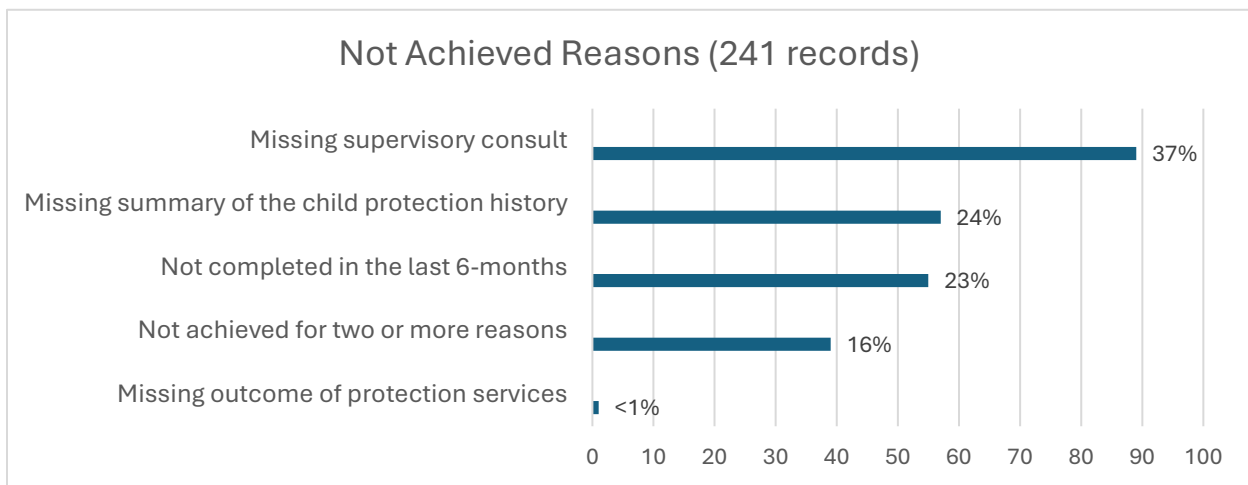
By broadening the scope in documenting a family's strengths and needs with Core Practice Accountabilities this practice has improved by **20%**.

In addition to determining the compliance for assessing the family's strengths and needs and developing the Family Plan, this evaluation also collected contextual data about how the practice was documented. This additional information provides insights on the uptake of the newly introduced changes that accompanied Core Practice Accountabilities. Findings included:

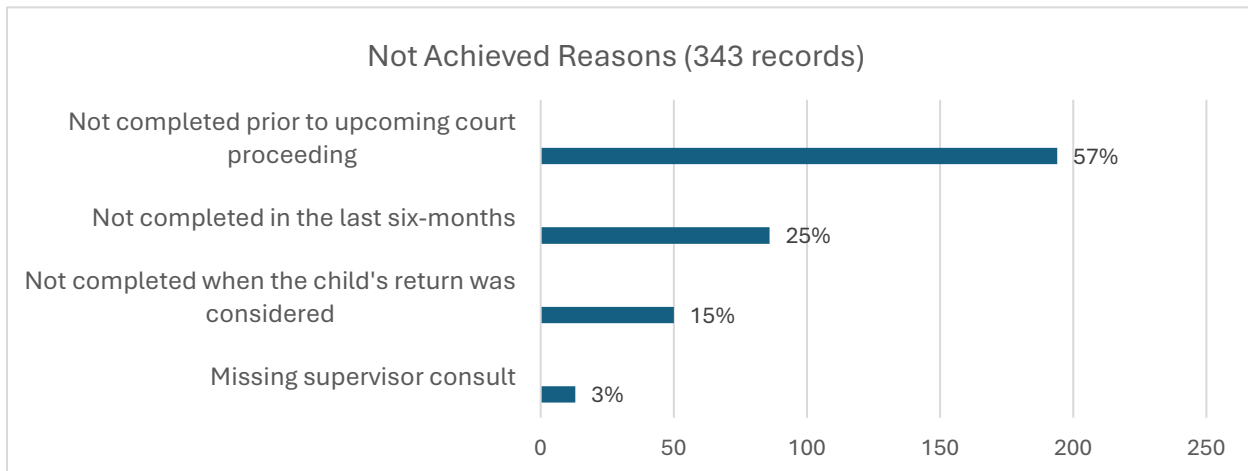
- The assessment of the family's strengths and needs were documented in recordings **62%** of the time. A particular strength was documenting strengths and needs in closing and transfer recordings.

- Collaborative Planning and Decision Making (CPDM) provided a structured workflow for child protection workers to document a family’s strengths and needs, create a collaborative Family Plan, and assess the risk of future harm. Records where CPDM were utilized show better compliance in all areas and the work was more collaborative with the family and the family’s community or support system.
- When required to be involved, child protection workers involved the Indigenous Community **22%** of the time.

FS 12: The Reassessment of Risk of Future Harm: Prior to the implementation of Core Practice Accountabilities, reassessment was documented in a tool. However, this tool was discontinued and the reassessment of risk of future harm could be documented multiple ways, but it was required to be documented within the context of a clinical consultation note. The measure was applied to 430 records and **44%** were rated achieved. The chart below illustrates the not achieved reasons.



FS 13: Completion of the Reunification Assessment: The compliance rate for this measure was **15%**, with 61 of 404 records rated achieved. The reasons for this rating are shown in the chart below:



Additional information found that 35 records involved Indigenous children/youth in care, and their communities were an Indigenous Governing Body (IGB). When working with an IGB, MCFD must provide notice before any significant measure, such as when a child/youth enters care, changes placement, or undergoes a legal status change. This evaluation found that:

- **51%** did not provide notice as required.
- **43%** did provide notice as required.
- **6%** provided notice for some, but not all, significant measures when multiple occurred.

FS 14: Making the Decision to End Ongoing Protection Services: The measure applied to 380 closed records with a compliance rate of **96%**.

Records were rated not achieved if they did not meet closure criteria, typically due to unaddressed child protection concerns. In at least one instance this was combined with not documenting efforts to locate the family. At least 1 record closed due to an agreed Extended Family Program (EFP), but policy requires such records to remain open for “administrative purposes.”

Most records were closed for the following reasons:

- The family accessed services, and concerns were addressed.
- Children/youth no longer lived with their parents on a permanent basis due to an in-care court order, an out-of-care permanent arrangement, or through another custody arrangement.

It was also noticed that some records, though rated achieved, remained open long after active work with the family had ended, with some records inactive for months or even years before closure.

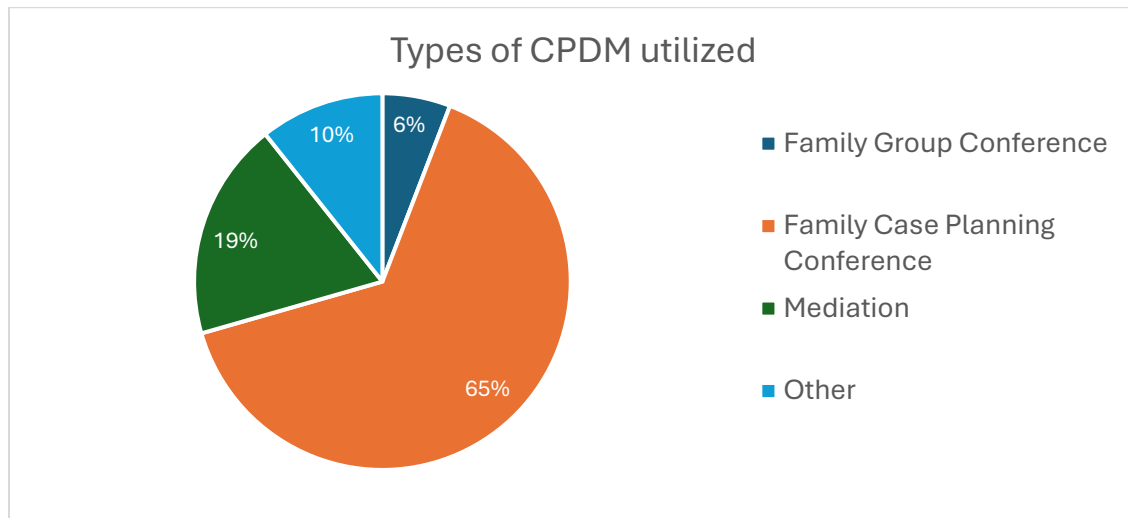
FS 15: Collaborative Planning and Decision Making (CPDM): The compliance rate for this measure was **68%**, with 133 of the 197 records rated achieved. The focus of this measure was to determine if a CPDM process was offered when required in policy. A full list of the many requirements for compliance, can be found in Appendix C.

Of the 64 not achieved records, most did not offer a collaborative process when considering the non-urgent removal of a child/youth. The other circumstance in which CPDM was not explored was prior to a contested or opposed court hearing.

Additional information collected indicated that:

- Child protection workers find CPDM processes helpful as a way to engage and collaborate with families.

- CPDM process allow workers and families to co-create goals to address child protection concerns; this also works to meet the documentation requirements for assessment and planning.
- **32%** of the records that did not require a CPDM referral in policy had one as this is a valuable tool in planning and decision making for staff and families.
- Nearly 500 CPDM meetings occurred across 251 records, averaging 2 per record.
- When applicable, Indigenous Communities were involved with the CPDM process **45%** of the time.



Closing

This evaluation covered a period of significant change within MCFD, with compliance ranging from **15%** to **97%**. Despite variability, notable strengths were identified. Screening stood out as exemplary, laying a solid foundation for subsequent intake and assessment steps.

Most tasks were completed, though not always within the prescribed timeframes. Ongoing Family Service work benefited from a structured workflow, with recordings offering staff a framework to document family strengths, needs, goals, and risk reassessments. Records utilizing CPDM processes showed higher compliance across multiple measures.

However, in about **25%** of Family Service records, documentation was incomplete or limited, and periods of inactivity led to prolonged record openings.

On a positive note, **30%** of records highlighted excellent documentation by child protection workers.



Key practice, policy, and training improvements are outlined in the attached [Action Plan](#).

Appendix C

Achieved Criteria

Measure #	Measure Name	Achieved Criteria
FS 1	Screening Measures	<p>The record needed to contain documentation of all of the following components:</p> <ul style="list-style-type: none"> • a full and detailed report • an initial record review (IRR) that was completed within 24 hours, documented checking the best practices database for additional information, and contained sufficient information about previous contact with the ministry • Screening Assessment that was completed immediately if necessary or within 24 hours otherwise • a clear and appropriate determination that the report requires either a protection or non-protection response • an appropriate determination of the response priority
FS 2	Conducting a Detailed Record Review (DRR)	<ul style="list-style-type: none"> • DRR was conducted in electronic databases and physical files • Contained any information that was missing in the IRR • Described how previous issues or concerns had been addressed, the responsiveness of the family in addressing the issues and concerns and the effectiveness of the last intervention • Was not required because there were no previous MCFD or ICfSA involvement • Was not required because the supervisor approved ending the protection response before the DRR was conducted and the rationale was documented and appropriate
FS 3	Assessing and Documenting the Safety of the Child or Youth	<ul style="list-style-type: none"> • The Safety Assessment process was completed during the first significant contact with the family • The Safety Assessment was on the electronic record • The Safety Assessment tool was completed within 24 hours after completion of the safety assessment process, or • The response ended early with supervisory approval and the rationale was appropriate and documented
FS 4	Making a Safety Decision Consistent with the Safety Assessment	<ul style="list-style-type: none"> • The safety decision was consistent with the information documented in the Safety Assessment form, or • The supervisor approved ending the protection response before the Safety Assessment form was documented and the rationale was documented and appropriate
FS 5	Meeting or Interviewing the Parents and Other Adults in the Family Home	<ul style="list-style-type: none"> • The child protection worker met with or interviewed the parents and other adults in the home (if applicable) • Gathered sufficient information about the family to assess the safety and vulnerability of all children/youth living or being cared for in the family home, or • If the supervisor approved ending the protection response before the child protection worker met with or interviewed the parent(s) and other adults in the home, the rationale was documented and appropriate

FS 6	Meeting with Every Child or Youth Who Lives in the Family Home	<ul style="list-style-type: none"> • The child protection worker had a private, face-to-face conversation with every child/youth living in the family home according to their developmental level, or • The supervisor granted an exception, and the rationale was documented, or • The supervisor approved ending the protection response before the child protection worker had a private, face-to-face conversation with every child/youth living in the family home, and the rationale was documented and appropriate
FS 7	Visiting the Family Home	<ul style="list-style-type: none"> • The child protection worker visited the family home before completing the FDR assessment or the Investigation or the supervisor granted an exception and the rationale was documented, or • The supervisor approved ending the protection response before the child protection worker visited the family home and the rationale was documented and appropriate
FS 8	Working with Collaterals	<ul style="list-style-type: none"> • The child protection worker obtained information from individuals who may have relevant knowledge of the family and/or the child/youth before completing the FDR assessment or the investigation, or • The supervisor approved ending the protection response before the child protection worker obtained information from individuals who may have relevant knowledge of the family and/or the child/youth and the rationale was documented and appropriate
FS 9	Involving Indigenous Communities under the CFCSA	<ul style="list-style-type: none"> • The child protection worker confirmed whether the child/youth was Indigenous, and • The child protection worker contacted the Indigenous Community, and • The child protection worker involved the Indigenous Community in the planning and delivery of services: <ul style="list-style-type: none"> ○ either via Section 79, section 92.1, or with consent, or ○ the child protection worker documented that they offered to involve the community, and the family did not give consent, or ○ there was documentation indicating that reasonable efforts were made to establish the child's Indigenous Community, or • The child protection worker confirmed the child/youth or family is Indigenous AND the parent did not consent to community involvement AND no significant measure was taken
FS 10	Consultation in Assessing the Risk of Future Harm and Need for Ongoing Protection Services	<ul style="list-style-type: none"> • A clinical consultation note which included the: <ul style="list-style-type: none"> ○ summary of current circumstances ○ summary of the history of the family's child protection involvement ○ outcome of this current involvement with MCFD, or • The response ended early with supervisory approval and the rationale was appropriate and documented
FS 11	Assessing the Family's Strengths and Needs & Creating and Implementing the Family Plan	<ul style="list-style-type: none"> • An assessment of the family's strengths and needs was on record through a consultation note with a supervisor or a discontinued Strengths and Needs Assessment Tool • A Family Plan or its equivalent was on the record • A Family Plan or equivalent that was developed in collaboration with the family • Family Plan or equivalent was reflective of the family's strengths and needs • Family Plan or equivalent was approved by the supervisor

FS 12	The Reassessment of Risk of Future Harm	<p>The reassessment of vulnerability must have been completed within the most recent six-month ongoing protection service cycle and the documentation in ICM had to include all of the following:</p> <ul style="list-style-type: none"> • a summary of current circumstances • history of child protection involvement • the outcome of whether ongoing protection services were still needed <p>These components may have been found separately on the record but had to be within a clinical consultation</p>
FS 13	Completion of the Reunification Assessment	<p>The record must contain the Reunification Assessment completed by the child protection worker and approved by the team leader during the audit timeframe at the following points in time:</p> <ul style="list-style-type: none"> • the most recent six-month ongoing protection service cycle or, • when the child/youth's return is being considered (if applicable) or, • when a custody court proceeding is approaching, and the previous assessment is older than three months or no longer relevant (if applicable)
FS 14	Making the Decision to End Ongoing Protection Services	<p>All of the relevant criteria were met before the decision to end ongoing protection services was made and approved by the supervisor. The following are the criteria to close:</p> <ul style="list-style-type: none"> • there have been no unaddressed reports of abuse or neglect • there are no indications of current or imminent safety concerns • the family has demonstrated specific and sufficient behavioural improvements in the areas identified in the family plan, and there is documented evidence of these improvements • a recent reassessment of vulnerability or reunification assessment confirms that factors which were identified as contributing to high vulnerability no longer exist or have been addressed sufficiently that they no longer pose direct risks to the child/youth's safety and well-being • the family has demonstrated the ability to access and use formal and informal resources to assist them in problem solving • family members state that they are ready and able to resume parenting without Ministry or ICFSA support
FS 15	Collaborative Planning and Decision Making (CPDM)	<p>Documentation in ICM must show that a CPDM process was offered when any of the following circumstances applied:</p> <ul style="list-style-type: none"> • a removal was likely to occur (excludes urgent removals) • after the removal occurs but before it is contested at the presentation hearing • when a protection hearing is contested • before applying for CCO or 54.01 when a parent is not in agreement • and/or it was offered for two or more siblings in the above-mentioned circumstances if removals occurred at separate times or it was inappropriate to engage in a CPDM process and the rationale was documented

Appendix D

Compliance Breakdown by Service Delivery Area

Compliance Breakdown by Service Delivery Area	OKANAGAN WEST KOOTENAY	INTERIOR EAST KOOTENAY	NORTH EAST FRASER	SOUTH FRASER
FS 1: Screening Measures				
Gathering a Full and Detailed Report	95%	96%	98%	97%
IRR completed within 24 hours	87%	89%	91%	90%
Best Practices Checked	68%	59%	76%	74%
IRR Contained Sufficient Information	74%	76%	84%	81%
Completing the Screening Assessment	90%	83%	87%	93%
Determining Whether the Response was Correct	98%	98%	97%	96%
Determining the Response Priority	98%	97%	97%	96%
FS 2: Conducting a Detailed Record Review (DRR)	61%	79%	76%	68%
FS 3: Assessing and Documenting the Safety of the Child/Youth				
Safety Assessment Process Completed During First Significant Contact	79%	83%	81%	77%
Safety Assessment on Record	94%	97%	94%	90%
Safety Assessment Tool was Completed within 24 hours	39%	42%	57%	46%
FS 4: Making a Safety Decision Consistent with the Safety Assessment	82%	91%	93%	83%
FS 5: Meeting with or Interviewing the Parents & Other Adults	78%	67%	84%	69%
FS 6: Meeting with Every Child/Youth	72%	83%	89%	72%
FS 7: Visiting the Family Home	79%	86%	83%	80%
FS 8: Working with Collateral Contacts	76%	88%	87%	58%
FS 9: Involving Indigenous Communities under the CFCSA				
Confirmation Documented Whether a Child/Youth is Indigenous	85%	69%	67%	33%
Indigenous Community Contacted	46%	31%	67%	11%
Indigenous Community Involved	23%	23%	67%	22%
FS 10: Consultation in Assessing Risk of Future Harm & Need for Ongoing Protection Services				
Summary of Current Circumstances Documented	84%	95%	84%	83%
Summary of History of Child Protection Involvement Documented	35%	61%	48%	41%
Outcome Documented	89%	95%	84%	83%
FS 11: Assessing the Family's Strengths and Needs & Creating and Implementing the Family Plan				
Assessment of the Family's Strengths and Needs is Documented	62%	69%	70%	64%
Family Plan or its Equivalent on Record	50%	50%	46%	31%
Family Plan or Equivalent was Developed in Collaboration with the Family	25%	32%	29%	21%
Family Plan or Equivalent is Reflective of the Family's Strengths and Needs	35%	35%	38%	28%
Family Plan or Equivalent was Approved by a Supervisor	35%	36%	24%	24%
FS 12: The Reassessment of Risk of Future Harm	43%	48%	45%	45%
FS 13: Completion of the Reunification Assessment	27%	16%	24%	14%
FS 14: Making the Decision to End Ongoing Protection Services	94%	91%	96%	91%
FS 15: Collaborative Planning and Decision Making (CPDM)	61%	68%	64%	79%

Compliance Breakdown by Service Delivery Area	VANCOUVER COASTAL	VANCOUVER ISLAND	NORTH COAST BULKLEY NECHAKO	NORTH CENTRAL PEACE REGION
FS 1: Screening Measures				
Gathering a Full and Detailed Report	97%	97%	97%	99%
IRR Completed within 24 hours	91%	87%	86%	86%
Best Practices Checked	82%	63%	72%	67%
IRR Contained Sufficient Information	83%	78%	76%	73%
Completing the Screening Assessment	94%	82%	84%	93%
Determining Whether the Response was Correct	96%	98%	95%	98%
Determining the Response Priority	96%	98%	95%	97%
FS 2: Conducting a Detailed Record Review (DRR)	76%	58%	64%	73%
FS 3: Assessing and Documenting the Safety of the Child/Youth				
Safety Assessment Process Completed During First Significant Contact	76%	59%	54%	60%
Safety Assessment on Record	88%	88%	84%	93%
Safety Assessment Tool was Completed within 24 hours	54%	35%	33%	21%
FS 4: Making a Safety Decision Consistent with the Safety Assessment	82%	80%	68%	80%
FS 5: Meeting with or Interviewing the Parents & Other Adults	81%	64%	52%	67%
FS 6: Meeting with Every Child/Youth	83%	68%	57%	70%
FS 7: Visiting the Family Home	83%	80%	72%	77%
FS 8: Working with Collateral Contacts	75%	72%	42%	67%
FS 9: Involving Indigenous Communities under the CFCSA				
Confirmation Documented Whether a Child/Youth is Indigenous	57%	64%	69%	92%
Indigenous Community Contacted	36%	21%	38%	64%
Indigenous Community Involved	29%	14%	31%	64%
FS 10: Consultation in Assessing Risk of Future Harm & Need for Ongoing Protection Services				
Summary of Current Circumstances Documented	78%	81%	68%	82%
Summary of History of Child Protection Involvement Documented	40%	38%	32%	39%
Outcome Documented	83%	91%	71%	85%
FS 11: Assessing the Family's Strengths and Needs & Creating and Implementing the Family Plan				
Assessment of the Family's Strengths and Needs is Documented	72%	70%	26%	50%
Family Plan or its Equivalent on Record	44%	39%	7%	14%
Family Plan or Equivalent was Developed in Collaboration with the Family	34%	23%	4%	11%
Family Plan or Equivalent is Reflective of the Family's Strengths and Needs	43%	28%	1%	11%
Family Plan or Equivalent was Approved by a Supervisor	35%	27%	7%	11%
FS 12: The Reassessment of Risk of Future Harm	48%	34%	28%	31%
FS 13: Completion of the Reunification Assessment	14%	9%	7%	49%
FS 14: Making the Decision to End Ongoing Protection Services	95%	95%	100%	96%
FS 15: Collaborative Planning and Decision Making (CPDM)	62%	57%	58%	9%