



Ministry of
Children and Family
Development



NIŁ TU,0

CHILD AND FAMILY SERVICES SOCIETY

PRACTICE AUDIT REPORT

Report Completed: April 2025

Practice and Quality Assurance Division
Quality Assurance Branch



The Quality Assurance Branch would like to acknowledge that we are living and working with gratitude and respect on the traditional territories of the Indigenous peoples of British Columbia. It was an honor for our team to travel to NIL TU,O and conduct our work on their traditional lands.



Beecher Bay First Nation



Pauquachin First Nation



Tsartlip First Nation



Songhees First Nation



Tsawout First Nation



Tseycum First Nation



T'Sou-ke First Nation

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AT A GLANCE: Practice Audit Report

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CHILD AND FAMILY SERVICES SOCIETY

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NIŁ TU,O Vision

Our Vision for the NIŁ TU,O Child and Family Services Society is to rebuild healthy families, communities and Nations that is based on who we are as NEW ("people").

NIŁ TU,O is dedicated to keeping Coast Salish children with their families and in their communities.

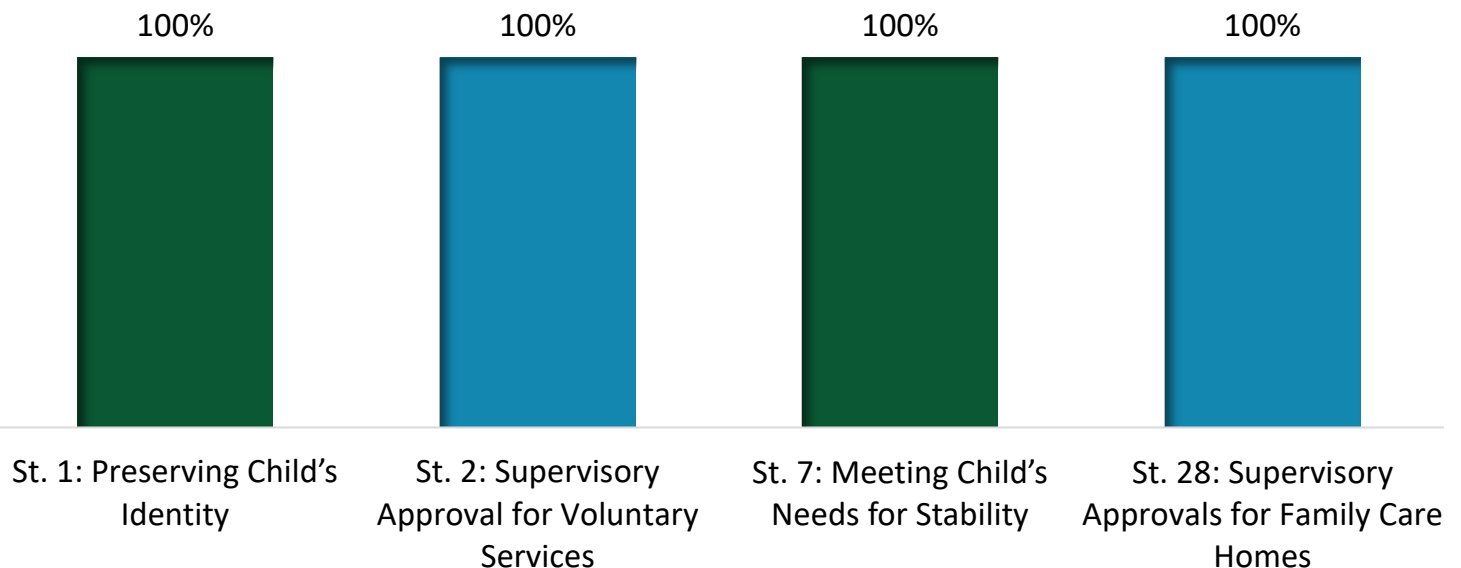
Overall Strengths

- Preserving a child or youth's cultural identity
- Home studies
- Continuity of relationships
- Training of caregivers

Growth Opportunities

- Monitoring and reviewing the family care home.
- Providing the caregiver with information and reviewing appropriate discipline standards.
- Family Service Plan requirements for Support Services, Voluntary Care and Support Needs Agreements.

Highlights





Supports available to Parents and Families

- Parenting programs
- Life skills programs
- Support for youth and young adults
- Support to caregivers caring for children from their extended family or community
- Groups and workshops
- Individualized supports

Services Provided

- Family Support Workers
- Family strengthening programs
- Support Services
- Caregiver supports

What We Heard

- The Agency offers training and professional development opportunities.
- Unique programs and cultural events with Elders are available to children and youth in care, families and individuals to ensure culture is being preserved and embraced.
- Staff are happy and well taken care of.
- There are many opportunities to engage and learn more about the Coast Salish culture and community.
- Staff can be creative and think “outside the box” when planning for children, youth and their families.

Actions Taken to Date

- ✓ In person learning session with Aboriginal Services Branch (ASB) on Reportable Circumstances (RC). All RCs have been submitted to date.
- ✓ Learning session on Resource Documentation by delegated staff and administration.
- ✓ Virtual learning session with ASB on the Child and Youth Visit applet (visit applet) functionality in ICM and documentation on 30 day Children and Youth in Care private visits.
- ✓ All outstanding required documentation was submitted.

Next Steps

- Improved method for Case Documentation for Guardianship Services.
- New template for Interviewing the Child or Youth about the Care Experience.

NUTSAMAUT SKWALAWAN, WORKING TOGETHER AS ONE

Since 1997

Background And Purpose

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

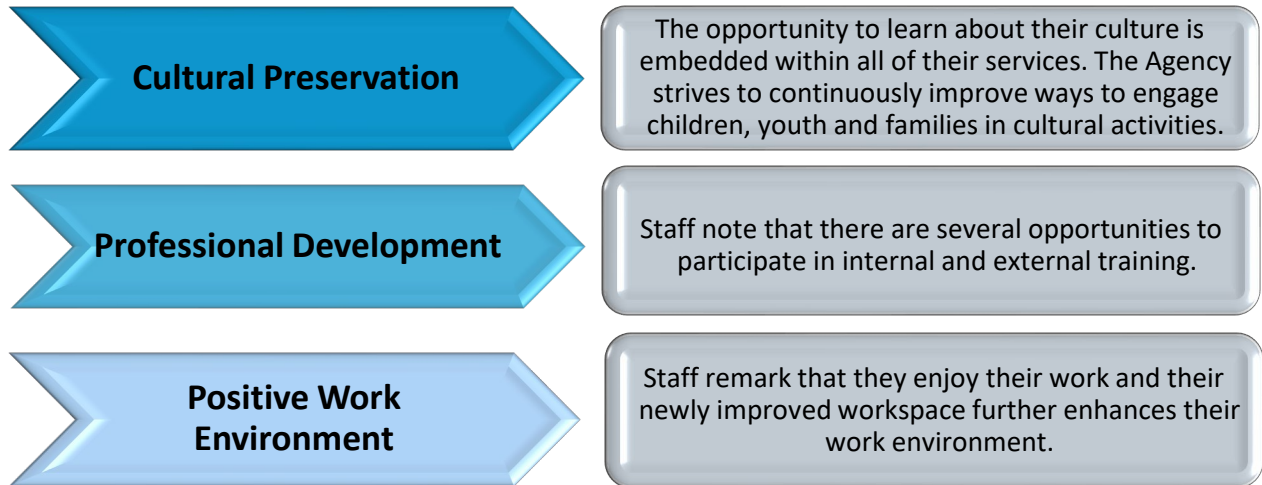
This audit reviewed the guardianship, voluntary family service and resource services provided by [NĪ TU,O Child and Family Services Society \(NCFSS\)](#) from June 1, 2021, to November 30, 2023. The audit measured the Agency's compliance with the [Aboriginal Operational and Practice Standards and Indicators](#) (AOPSI 2005). This is the sixth audit for NCFSS, with the previous one completed in January 2020.

NCFSS was formed and incorporated as a society in 1997 and received C3 voluntary services delegation in 2001. In 2007, the Agency achieved C4 guardianship delegation and began providing guardianship services. The Agency provides child and family services to the following communities: Tsartlip, Tsawout, Pauquachin, Songhees, Beecher Bay, T'Sou-ke, and Tseycum. NCFSS is delegated under the *Child, Family and Community Services Act* (CFCSA). See [Appendix A](#) for detailed information on delegation, community demographics organizational structure, and work environment.

Staff Perspectives

During the audit process, 10 delegated staff, including leadership and guardianship workers, were invited to share their perspectives about what was working well and where they saw opportunity for growth within NCFSS. Four staff members participated. To honor their voice, this report includes a summary of the strengths and growth opportunities they identified in their work and workplace. See [Appendix A](#) for more detailed information.

Strengths



Growth Opportunities



Guardianship Services Audit Results

The audit covers the NCFSS guardianship program over three years, based on 28 records from the selected sample, though not all 23 standards in the audit tool applied to each record. See [Appendix A](#) for the 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

- Supervisory consultations and approvals.
- Planning for moves.
- Placement of a child/youth.
- Involvement of the Public Guardian and Trustee (PGT).
- Maintaining and supporting cultural identity.
- Supporting and preserving family relationships.
- Responding when a child or youth is lost, missing or run away.
- Planning for independence.

Growth Opportunities

- Monitoring and documenting private visits with children and youth every 30 days.
- Providing caregivers with information on discipline and child-specific planning.
- Transfer of responsibility and records.
- Interviews with children and youth about their care experiences.
- Timely submission of reportable circumstances.
- Strengthen documentation.

HIGHLIGHTS

NCFSS excelled in preserving the cultural identity of the children and youth in care they serve. All the children and youth were registered, or in the process of registration, with records detailing family, community and cultural connections. Children and youth had access to cultural programs with teachings by Elders in canning, traditional cooking, moccasin and drum making and Coast Salish language.

NCFSS ensured that children and youth remained connected to their siblings, parents, extended families and significant others.

Findings and Analysis

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

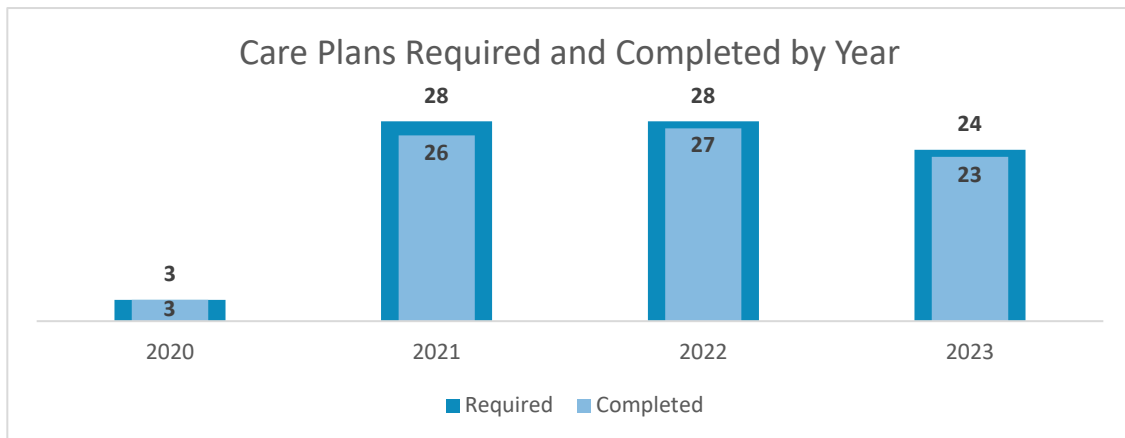
The compliance rate was **100%**, with all 28 records rated achieved.

St. 2: Development of a Comprehensive Plan of Care

There were no applicable records for this standard.

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

The compliance rate for this standard in 2023 and 2022 was **96%**, in 2021 it was **93%** and in 2020 it was **100%**. The standard was applied to all 28 of the records.



NCFSS had high compliance in this area, with most of the Care Plans updated each year. Of the four records rated not achieved, one record needed a current 2023 Care Plan and the remaining three records' Care Plans were not updated as required prior to 2023.



NCFSS showed consistency in Care Plan completion throughout the timeframe. NCFSS confirmed that the one Care Plan identified as required has been completed.

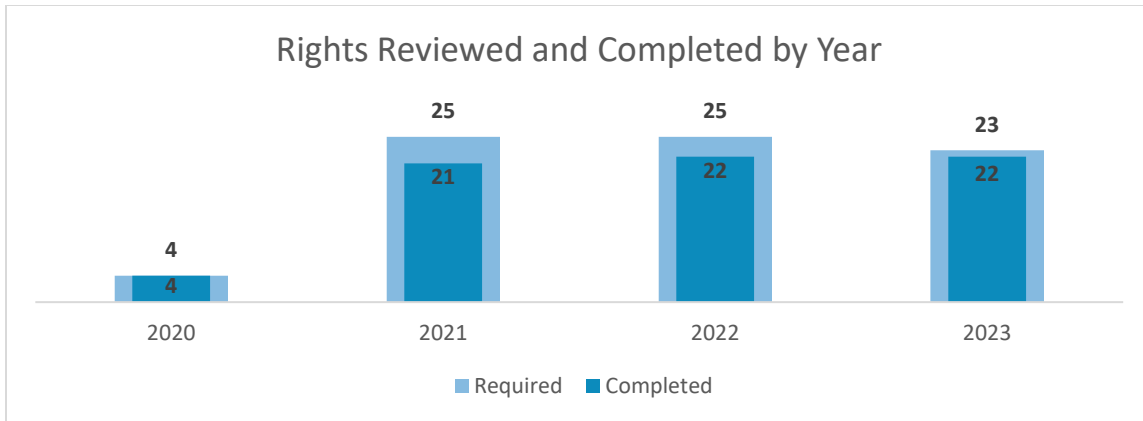
St. 4: Supervisory Approval Required for Guardianship Services

In most of the key areas where supervisory consultation was required, the accompanying documentation was thorough and detailed. This standard was applied to all 28 records in the sample; 23 were rated as achieved in all applicable areas of supervisory consultation and five were missing supervisory sign off on Care Plans only.

St. 5: Rights of Children and Youth in Care

The compliance rate was **96%** in 2023, **88%** in 2022, **84%** in 2021 and **100%** in 2020.

There were no instances identified during the audit where the child or youth's rights were not respected.



Following the audit, NCFSS completed the review of rights with the remaining records and confirmed all children and youth in their care have now had a recent review.

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

The compliance rate was **96%**; 27 records were rated achieved and one record was rated as not achieved.

On the one record rated not achieved, there was no active follow-up and there was no documentation that the section 71 requirements were met.

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

The compliance rate for this standard was **100%**, with all 28 records rated as achieved.

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

Of the 28 applicable records, all were rated as not achieved. All records had documented private visits, but these did not occur every 30 days.

The policy required a total of 941 private visits. Private visits occurred within the 30 day timeframe 549 out of the required 941 private visits, resulting in **58%** compliance.

The median number of days between private visits was 134 days. Eleven records documented between 100-200 days between private visits, on eight records there were 200-500 days between private visits and one record had 1095 days between private visits.



NCFSS recognized the need for focused attention in this area and implemented training on the Child and Youth Visit Applet in partnership with the ASB.

St. 9a: Providing the Caregiver with Information

The compliance rate was **93%** with 26 of the 28 records rated as achieved. The two not achieved records did not confirm that information regarding the child or youth's needs was provided to the caregivers at the time of placement.

St. 9b: Reviewing the Appropriate Discipline Standards

The compliance rate was **86%**, with 24 of the 28 records rated as achieved. Of these, three did not confirm that the discipline standards were reviewed with caregivers at the time of placement. Three of the four records remain open. It remains outstanding that the review of discipline standards occurred at placement and was documented on these records.

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

The compliance rate for this standard was **100%**, with all 28 records rated as achieved.

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

The compliance rate was **89%** with eight records rated as achieved and one record rated as not achieved.

For the one record rated as not achieved, there was no documentation that the child or youth was provided an explanation prior to the move and there was no orientation or pre-placement visit.

St. 12: Reportable Circumstances (RC)

The compliance for this standard was **82%**. The standard applied to 11 records. Nine were rated achieved for completing a RC when required and two were rated not achieved as the required report was not submitted.

The compliance for submitting the information to the Director within 24 hours from the time the information about the incident became known to the guardianship worker was **82%**. The standard was applied to 11 of the 28 records; nine records were rated achieved and two were rated not achieved. The range of time for submission for both was three days.

The Executive Director was notified of all outstanding and incomplete documentation.



NCFSS completed training specific to Reportable Circumstances in partnership with ASB and has now submitted all outstanding

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

The compliance for this standard was **100%** as the one applicable record was rated achieved.

St. 14: Case Documentation

This standard was applied to all 28 records. There were no records that required an opening recording within the audit timeframe.

The requirement for review recordings applied to 28 records. The compliance rating was **7%**, with two records achieved. Of the 26 rated not achieved:

- 24 records had reviews, but they were not completed every six months.
- Two records did not have any review recordings in this timeframe.

Many records had review recordings that covered longer than the six month review period and some had gaps between the review recordings over the three years.

Eighteen of the 26 records that were not completed every six months are currently due for review.

St. 15: Transferring Continuing Care Files

The compliance rate for this standard was **50%**. Of the 16 applicable records, eight were rated as achieved and eight were rated as not achieved.

Of the eight records rated not achieved:

- Five did not contain documentation that a guardianship worker met with the child or youth prior to the transfer of guardianship responsibility.
- Five did not contain documentation that a guardianship worker met with the caregiver prior to child or youth coming into their care.
- Three did not contain documentation that the guardianship worker met with the child or youth within five days after the transfer.
- Seven did not contain any transfer recordings.

The total exceeds eight due to a combination of these issues in six records.

St. 16: Closing Continuing Care Files

The compliance rate for this standard was **25%**, with four applicable records, one was rated as achieved and three were rated as not achieved. One record did not contain a closing recording, three did not contain documentation that the guardianship worker met with the child or youth prior to the closure and one record did not contain documentation that the guardianship worker met with the caregiver prior to the closure.

The total exceeds three due to a combination of these issues in one record.

St. 17: Rescinding a Continuing Care Order (CCO) and Returning the Child or Youth to the Family Home

The compliance rate was **100%**, with the one applicable record rated as achieved.

St. 18: Permanency Planning

A permanency plan is considered for a child or youth with a CCO as the legal status when the plan's priorities are in the best interests of the child or youth and the preservation of the child or youth's cultural identity are priorities of the plan.

This is an interim standard for use until Indigenous Child and Family Service Agencies (ICFSAs), cultural groups and Indigenous Communities have researched and reviewed the MCFD permanency planning policy. As this is still an interim standard it is not included in the audit.

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

The compliance rate was **58%**. Of the 12 applicable records, seven records were rated as achieved and five were rated as not achieved. All five records did not confirm that interviews were conducted with the children and youth after placement changes.

St. 20: Preparation for Independence

The compliance rate was **100%**. Of the six applicable records, all were rated as achieved.

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

The compliance rate was **100%**, with all 28 records rated as achieved.

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

The compliance rate was **100%**, with all seven applicable records rated as achieved.

As NCFSS does not conduct Family Care Home Investigations, records were reviewed for evidence of NCFSS staff's primary role, which is to offer support to the child or youth throughout the process. The summary report is then placed on the Child Service record after being provided to the Agency.

St. 23: Quality of Care Review

The compliance rate was **100%**, with all three applicable records rated as achieved.

St. 24: Guardianship Agency Protocols

The compliance rate was **100%**, with all 28 records rated as achieved.

Resources Audit Results

The audit reflects the work done by the staff in the Agency’s resource program over three years based on 22 records from the selected sample, though not all standards in the audit tool applied to each record. See [Appendix A](#) for the methodology.

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

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

Strength and Growth Opportunities

Strengths

- Consecutive agreements with caregivers.
- Closure of family care homes
- Supervisory consultations, approvals and involvement were well documented.
- Home study completion.
- Training provided to caregivers.
- Family Care Home Investigation and Quality of Care Summary Reports on the record.

Growth Opportunities

- Caregiver screening and assessment.
- Monitoring and reviewing family care homes.

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

HIGHLIGHTS

NCFSS provided many training opportunities for caregivers. Training included: Cultural Diversity within Indigenous Territories throughout BC, Paddling Together, Indigenous Home and Family Structures, Food is Culture, Empowered to Connect, Family Development Trauma and Complex Care and Intervention.

Findings and Analysis

Standard (St). 28: Supervisory Approval for Family Care Home Services

The compliance rate for this standard was **100%**. Whenever the documentation of supervisory consultation was required, it was found to be thoroughly detailed on the records. The standard was applied to all 22 records, all were rated as achieved in all applicable areas of supervisory approval and consultation.

St. 29: Family Care Homes – Application and Orientation

This standard applied to 22 records, with a compliance rate of **68%**; 15 were rated as achieved and seven were rated as not achieved.

Of the records rated not achieved:

- Two did not contain a completed Consolidated Criminal Record Check (CCRC) or Criminal Record Review Act (CRRRA).
- Four did contain completed medical exam forms.
- Three did not contain all the required reference checks.
- One did not contain a completed orientation.

The total exceeds seven due to a combination of these issues in three records.



NCFSS took immediate action and has now completed and submitted all outstanding documentation. Please see the Actions Taken section for more details.

St. 30: Home Study

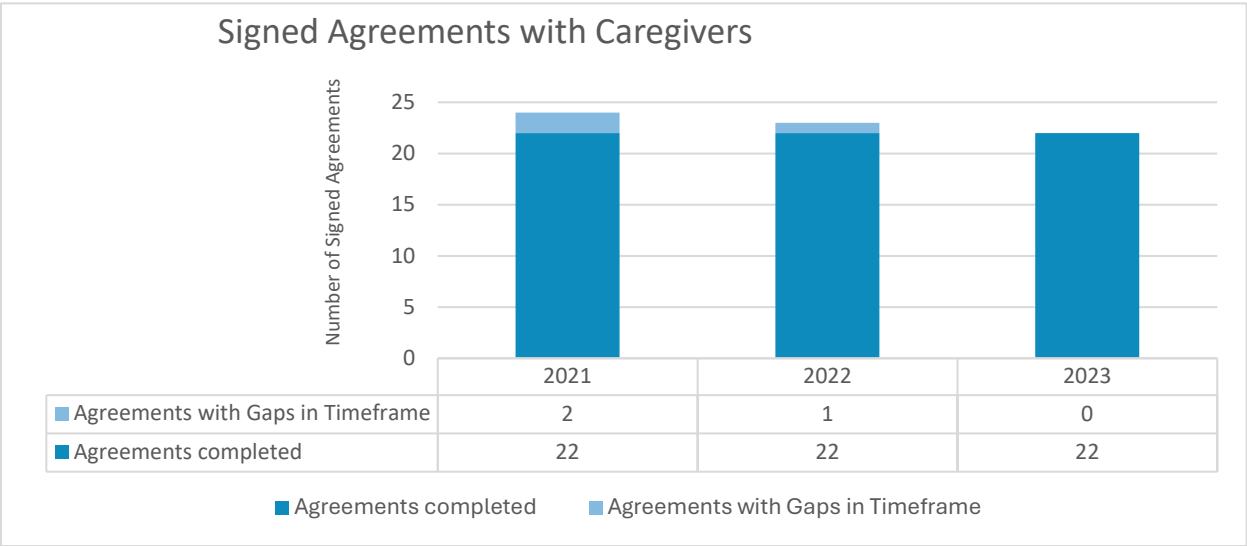
The compliance rate was **100%**, with all three records rated as achieved.

St. 31: Training of Caregivers

The compliance rate was **95%**, 21 were rated as achieved and one was rated as not achieved due to the absence of documentation on training offered or identified training needs.

St. 32: Signed Agreement with Caregiver

The compliance rate was **100%** in 2023, **95%**, in 2022 and **91%** in 2021; 19 records were rated as achieved and three records were rated as not achieved.



St. 33a: Monitoring the Family Care Home

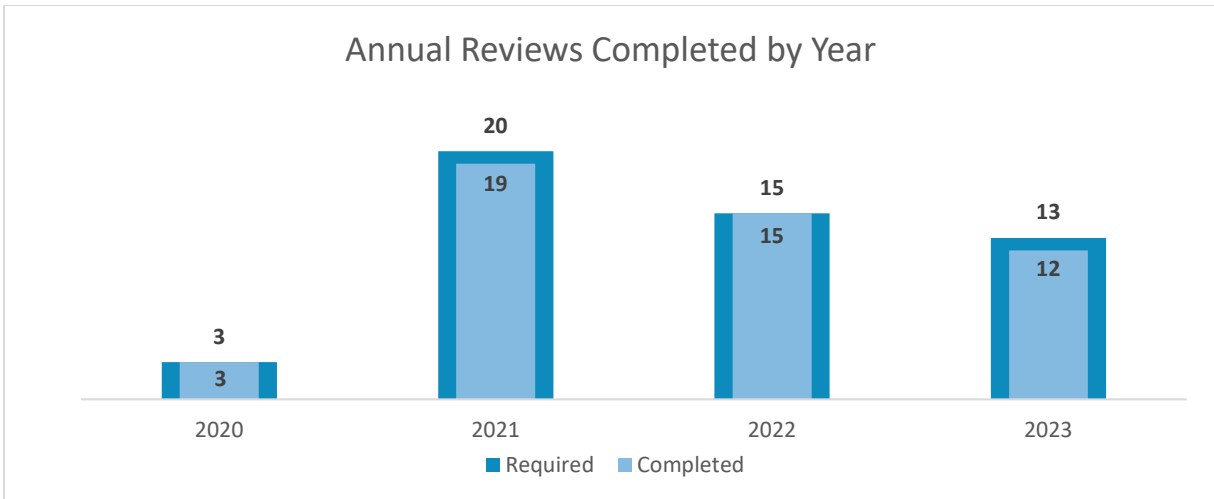
The standard was applied to all 22 records and the policy required a total of 202 visits. Sixteen records documented home visits, but not every 90 days and one record did not document any 90 day visits during the 3 year time period. Visits occurred within the 90 day timeframe 139 out of the expected 202 visits, resulting in a compliance of **69%**.



NCSSS delegated and administrative staff participated in training specific to the documentation of resource work to support improvements in this area.

St. 33b: Reviewing the Family Care Home

The compliance rate was **92%** in 2023, **100%** in 2022, **95%** in 2021 and **100%** in 2020. The standard was applied to all 22 records, 20 were rated as achieved and two were rated as not achieved. One record contained reviews, but they were not completed annually, and one record did not contain any annual reviews.



Following the audit, NCFSS completed the annual review with the remaining record.

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

The compliance rate was **100%**, all five applicable records were rated as achieved.

St. 35: Quality of Care Review

The compliance rate was **100%**, the one applicable record was rated as achieved.

St. 36: Closure of the Family Care Home

The compliance rate was **88%**, seven records were rated as achieved and one record was rated as not achieved. The one record had no documentation that written notice was provided to the caregiver.

Voluntary Services Audit Results

The audit reflects the work done by the staff in the Agency’s voluntary family services program over three years, based on six records from the selected sample, though not all standards in the audit tool applied to each record. See [Appendix A](#) for the methodology.

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

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

Strengths and Growth Opportunities

Strengths

- Information and referrals for Voluntary Services.
- Documentation of supervisory consultations and approvals.
- Closure of Voluntary Services records.

Growth Opportunities

- Documentation of Family Service Plans for support services.

HIGHLIGHTS

NCFSS family service workers consulted at the following key decision points: receiving a child protection report, approving a Family Plan, approving Support Services Agreements (SSAs), Voluntary Care (VCAs) and Support Needs Agreements (SNAs) and record transfer and closure.

NCFSS made sure the services provided were appropriate to the needs of the child or youth and the referral services were consistent with the identified needs of the child or youth.

Findings and Analysis

Standard (St). 1: Receiving Requests for Services

The compliance rate was **50%**. The standard was applied to six records, three were rated as achieved and three were rated as not achieved, with not all required prior contact checks (PCC) completed.

St. 2: Supervisory Approval Required for Voluntary Services

The compliance rate was **100%**. The standard was applied to six records, with all rated as achieved. In all key areas where supervisory consultation was required, the documentation found reflected sound consultation and excellent practice.

St. 3: Information and Referral for Voluntary Services

The compliance rate was **83%**. The standard was applied to six records, five were rated as achieved and one was rated as not achieved as there was no documentation that a referral for services was made.

St. 4: Involving the Indigenous Community in the Provision of Services

The compliance rate was **67%**. The standard was applied to six records, four were rated achieved and two were rated not achieved.

For the two records rated not achieved, the required family or community were not involved in planning and no efforts were documented.

St. 5: Family Service Plan Requirements and Support Services, Voluntary Care and Support Needs Agreements

The compliance rate was **0%** with all six records rated not achieved. All six records did not contain a Family Service Plan or an equivalent.

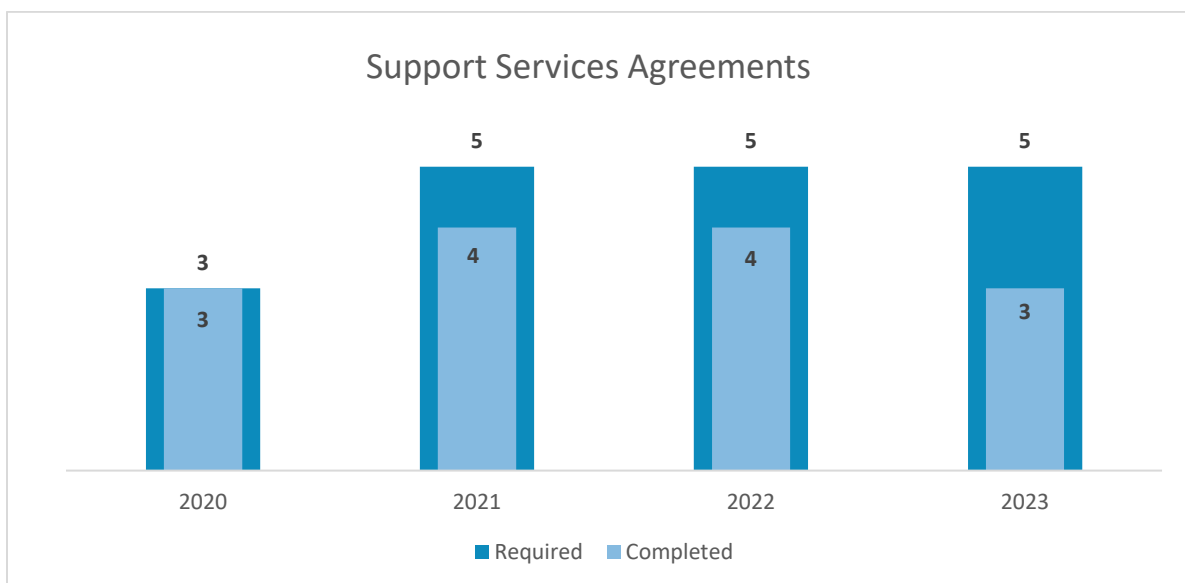


NCFSS completed an in person learning session in partnership with ASB on Voluntary Services and Agreements to build staff understanding in this area.

St. 6: Support Service Agreements

The compliance rate was **60%** in 2023, **80%** in 2022, **80%** in 2021 and **100%** in 2020. The standard was applied to all six records.

Over the audit timeframe six records required an SSA, four records had SSAs completed, and two records had SSAs completed but not every six months.



St. 7: Voluntary Care Agreements

There were no applicable records for this standard.

St. 8: Support Needs Agreements

There were no applicable records for this standard.

St. 9: Case Documentation

Three records required opening recordings. The compliance rating was **67%**, with two records rated achieved.

Six records required review recordings; the compliance rating was **0%**. Of the six records rated not achieved:

- Four did not contain review recordings.
- Two contained review recordings but they were not completed every six months.

St. 24: Transferring Voluntary Family Service Files

There were no applicable records for this standard.

St. 26: Closing Voluntary Family Service Files

The compliance rate was **100%**, with the one applicable record rated as achieved.

St. 27: Voluntary Services Protocols

The compliance rate was **100%**. The standard was applied to all six records, all were rated as achieved.

Actions To Date

NCFSS addressed some audit concerns prior to developing an action plan, as follows:

1. **Children and Youth in Care private visit applet** – A virtual learning session was held on April 3, 2024. The session was facilitated by an ASB practice analyst and Integrated Case Management (ICM) trainer. Training covered the applet functionality in ICM to document 30 day private visits. Training was delivered through a combination of screensharing, discussion and information sharing and was attended by delegated and administrative staff.
2. **Reportable Circumstances (RC)** – An in-person learning session was held at NCFSS on June 17, 2024. This training was delivered by an ASB practice analyst and was attended by delegated and administrative staff.

3. **Voluntary Services and Agreements** – An in-person learning session was held at NCFSS on July 25, 2024. This training was delivered by an ASB practice analyst and was attended by delegated and administrative staff.
4. **Resource Work Documentation** – A learning session was held for delegated and administrative staff on January 16, 2025. The session was focused on the documentation of the assessment and mitigation process of family care homes. Training included how to document planning, required approvals, and documenting the exception and approval process for homes over capacity. In addition to resource work documentation, this training also provided information on completing Family Service Plans for Voluntary Family Services.
5. **Administrative Staff Training** – Starting on January 23, 2025, the NCFSS administrative team will commence secondment opportunities with MCFD. Each NCFSS administrative staff member will work with MCFD administrative staff on a rotational basis for up to one month. The goal of these secondments is to improve the skill and knowledge of NCFSS staff, with a focus on receiving and requesting physical and electronic records.
6. **Visit Templates** – NCFSS created visit templates for ease of documentation which delegated staff will use to document 30 day private visits for children and youth in care as well as for use to document required 90 day visits to care homes and staffed resources. This was implemented on January 23, 2025.
7. **Updated Resource Documentation** – NCFSS confirmed on January 10, 2025, the completion of the outstanding documentation on the identified resource records, specifically:
 - One Annual Review was completed on an open resource.
 - Four references have been updated for the one resource record.
 - All required RCs have been submitted.
 - All CCRCs or CRRAs have been completed and added to the records.
 - One outstanding Care Plan for 2023 was completed.

Action Plan

Actions	Person(s) Responsible	Date Completed
<p><u>St. 14: Case Documentation for Guardianship Services</u></p> <p>1. NCFSS will review this standard with the team and develop a method for consistent documentation. Guardianship workers will ensure all documentation is maintained and updated regularly.</p> <p>Confirmation of the documentation method will be provided, via email, to the Manager of Quality Assurance (MQA).</p>	Executive Director	March 4, 2025
<p><u>St. 19: Interviewing the Child or Youth about the Care Experience (also relates to Standards 3, 5, & 9b)</u></p> <p>2. NCFSS will complete a review of the requirements of this Standard with the team and develop a templated form to document when an interview has been completed.</p> <p>Confirmation of who participated in this review and a copy of the templated form will be provided, via email, to the MQA.</p>	Executive Director	May 1, 2025

Appendix A

1. Delegation

Delegation for ICFSAs refers to the transfer of authority and responsibility for decision-making in child welfare services from the Designated Director, who is delegated under the CFCSA, 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 Designated Director.

NCFSS provides two distinct streams of services designed to keep Coast Salish children with their families and in their community. The first stream of services is Family Strengthening Programs for any member Nation, youth, parents or caregivers that could benefit from support. Secondly, NCFSS provides delegated Support Services, which was previously offered by MCFD. Support Services are now provided by NCFSS using Coast Salish definitions of care.

The current level of delegation enables the Agency to provide the following services to seven Coast Salish communities on South Vancouver Island:

- Guardianship and care for children in Continuing Care
- Voluntary Support Services to families
- Voluntary Care or Support Needs Agreements
- Recruitment, training and support for caregivers
- Youth Agreements
- Respite Services
- Agreements with Young Adults
- Resources
- Out of Care Options

The Agency is operating under a Bilateral Delegation Agreement which was renewed on March 31, 2025. NCFSS provides the following services and events to their member Nations' children, youth and families.

Family Strengthening Programs

- Groups and Workshops
- Support to Families Responding to Child Safety Concerns
- Support to Families to Enhance Family Life
- Support to Youth
- Support to Young Adults
- Supported Visitation Program

- Fetal Alcohol Spectrum Disorder (FASD) Support
- Indigenous Home Instruction for Parents of Preschool Youngsters (H.I.P.P.Y)
- Supporting Mothers and Raising Toddlers (SMART)
- Support to Caregivers Caring for Children from Extended Family and Community
- Counselling Services

Support Services

- Guardianship
- Voluntary Support Service
- Voluntary or Support Needs Agreements
- Extended Family Programs
- Agreements with Young Adults

Community-Based Programs

- Ready to Rent
- Financial Literacy
- Early Child Education and Parenting Programs
- Breaking Barriers-Building Strength
- Knowledge Keeper Support
- Youth Empowerment
- Coming Together for Wellness
- Life Skills: Women and Men’s Heart and Healing
- Prevention Worker Contract
- Tseycum Youth Program
- Geronimo Canoe Club Water Festival
- Youth Prevention Worker
- Tsartlip Women’s group
- Road to Wellness
- Triple P Parenting Program
- Cultural Nights
- Culture Camps

2. Community Demographics and Staffing Context

NCFSS is housed in an award-nominated Coast Salish Longhouse stylized building at Mt. Newton Cross Road and the Patricia Bay Highway on Tsawout territory in Saanichton, BC. The Agency provides child and family services to the following communities: Tsartlip, Tsawout, Pauquachin, Songhees, Beecher Bay, T’Sou-ke and Tseycum. These communities are close in proximity to the Agency and all are accessible by road.

Organizational Structure

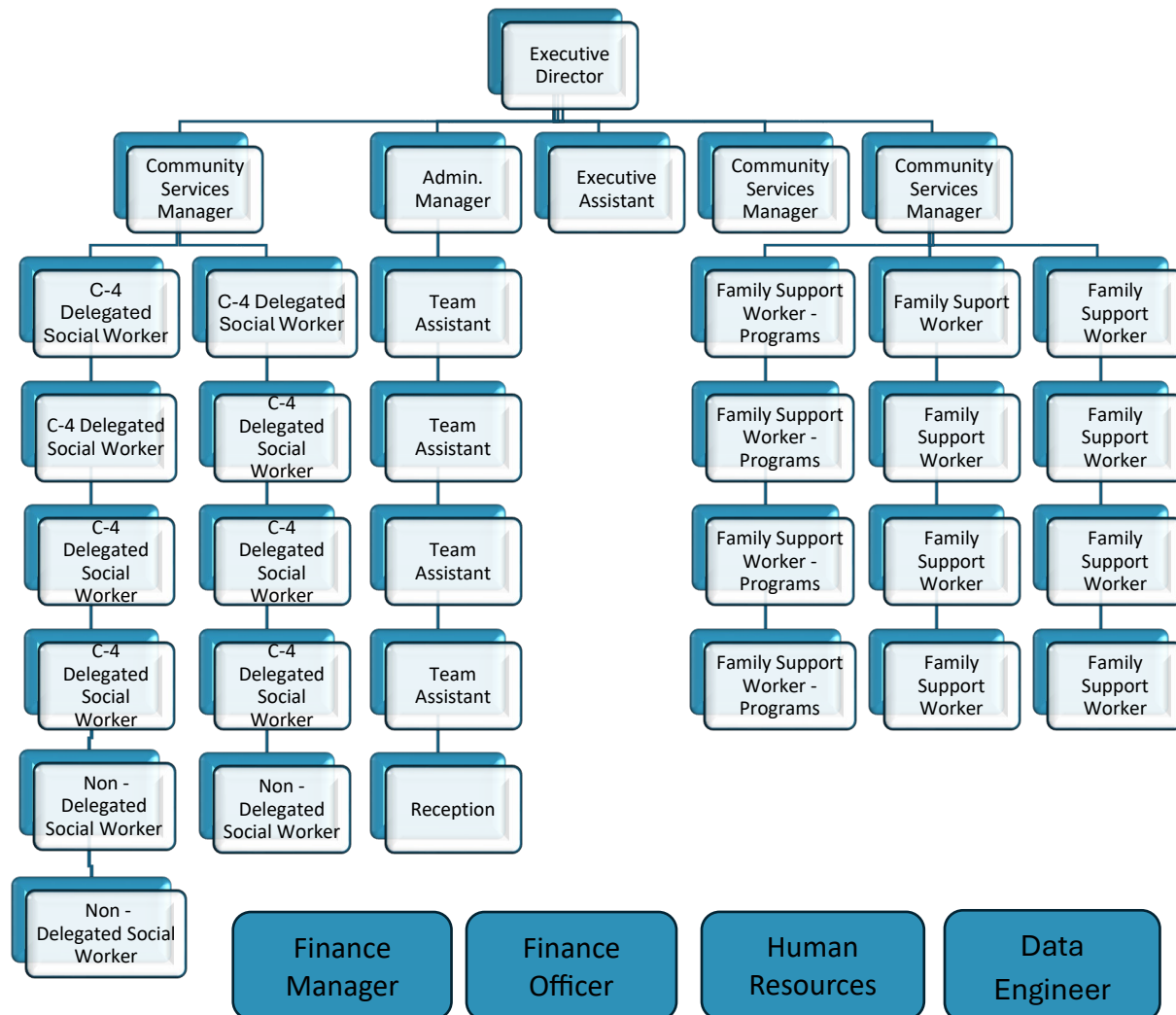
At the time the field work for this practice audit was conducted, the Executive Director (ED) had been in their position for 14 years and worked for NCFSS since 2009. NCFSS had 32 positions with two Community Service Manager (CSM) positions vacant. In the fall of 2024, an internal employee was promoted to the position of ED.

Within the Agency, the CSMs (three positions with two currently vacant) report to the ED. One CSM is currently providing supervision to all delegated and non-delegated workers as well as all the family support workers. NCFSS is currently in the process of providing supervisory training to some of the existing delegated workers within the Agency, in the hopes that these staff can apply to fill the two vacant CSM positions. Hiring for these vacant positions will enhance the leadership team and benefit the staff at the Agency.

Staff Delegation and Training

The ED, CSM and all the guardianship and resources workers are delegated to a C4 level. All the delegated staff have completed their delegation training either through the Indigenous Perspectives Society or the Justice Institute of British Columbia. Additional training or professional development opportunities are supported and encouraged by the Agency internally and externally. The staff have been with the Agency and in their positions for extended periods of time ranging from four to 14 years. NCFSS plans to implement supervisory training for staff looking to advance their careers within the Agency, as a strategy for retention.

NIL TU, O CHILD AND FAMILY SERVICES SOCIETY ORGANIZATIONAL CHART



3. Staff Perspectives: What We Heard

Ten of the staff participated in interviews, sharing their insights on strengths and growth opportunities within NCFSS, themed as follows:

Strengths:

- Cultural Preservation with Children, Youth, Families and Staff:** NCFSS offers cultural programs, such as canning, cooking and moccasin making. These programs are delivered with the instruction and participation of community Elders to preserve Coast Salish culture for children, youth and families.

The Agency created a Culture & Care Daily Planner with cultural, wellness and financial support and a Coast Salish coloring book for children to learn about their culture.

NCFSS is featured in Seaside Magazine in order to advertise its services. All the staff shared pride in the Agency and the opportunity to gain experience and knowledge about the Coast Salish culture, each of the seven communities, and what makes them unique.

- **Professional Development:** The Agency provides training in areas including intimate partner violence, vicarious trauma, cultural safety and trauma-informed practice to support staff growth.
- **Positive Work Environment:** Staff reported high levels of satisfaction and well-being. Enhancing the work environment, staff reflected that they appreciated opportunities to learn about Coast Salish culture and engage in creative problem-solving. The Agency's building features Indigenous plant gardens and a Basket Weave walkway, which reflects Coast Salish pride.

Growth Opportunities:

- **Leadership Recruitment:** As there are current managerial vacancies, staff found it difficult to access consistent clinical supervision or conduct comprehensive workload reviews.
- **Stronger Community Relationships:** Staff desired more opportunities to connect with the seven communities NCFSS serves to enhance collaboration and highlight the Agency's cultural integration in its services.

4. Methodology

This audit assessed the guardianship, voluntary family service and resource services provided by [NIŁ TU,O Child and Family Services Society \(NCFSS\)](#) from June 1, 2021, to November 30, 2023, measuring compliance with the [Aboriginal Operational and Practice Standards and Indicators](#) (2005).

Two quality assurance practice analysts from MCFD 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 ICM database. The sample sizes provide a confidence level of 90% and a margin of error of +/- 10%. Given that some of the standards used for audit were not applicable to all of the records, there is a decreased confidence level and increased margin of error on those records. The following are the sample sizes for the three record types:

Record Types	Population Sizes	Sample Sizes
Open Child Service (CS) records	36	24
Closed Child Service (CS) records	4	4
Resource (RE) records	31	22
Open Family Service (FS) records	5	5
Closed Family Service (FS) records	1	1

The populations of records from which the samples were drawn were derived as follows:

1. **Open CS:** records open in NCFSS on November 30, 2023, and had been open (continuously) at the Agency for at least six months with the legal statuses of VCA, SNA, CCO or Out of Province.
2. **Closed CS:** records that were closed on ICM between June 1, 2021 and November 30, 2023 and managed by NCFSS for at least six months (continuously) with the legal statuses of VCA, SNA, CCO or Out of Province.
3. **Open and Closed RE:** records in ICM that were managed by NCFSS that had children or youth in their care for at least three months (continuously) between December 1, 2020 and November 30, 2023. Children or youth in care 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.
4. **Open Voluntary FS:** records open in ICM on November 30, 2023 and managed by NCFSS for at least six months (continuously) with a service basis listed as non-protection.
5. **Closed Voluntary FS:** records closed in ICM between June 1, 2021 and November 30, 2023 and managed by NCFSS for at least six months (continuously) with a service basis listed as non-protection.

Appendix B

Audit Tools

Guardianship Services Audit Tool

AOPSI Standards related to Guardianship Services		
Standard (St) #	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.

		<ul style="list-style-type: none"> • 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 Relationships	<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.
St. 8	Social Worker's Relationship and Contact with the Child or Youth	<p>The standard requires the social worker to conduct a private visit with the child or youth:</p> <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 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 child or youth's family within five days after the transfer.
St. 16	Closing Continuing Care Files	The record, if it involved closing the record when services ended, confirmed that: <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

		<p>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 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

		<ul style="list-style-type: none"> • 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.

Resources Audit Tool

AOPSI Standards related to Resource Services		
Standard (St) #	Standard Name	Achieve Criteria
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.

Voluntary Family Services Audit Tool

AOPSI Standards related to Voluntary Family Services		
Standard (St) #	Standard Name	Achieve Criteria
St. 1	Receiving Requests for Service	<ul style="list-style-type: none"> Information was recorded about the family and the family's history. The service requested was within the delegation of the Agency. A prior contact check was completed.
St. 2	Supervisory Approval Required for Voluntary Services	<p>The social worker consulted a supervisor at the following key decision points:</p> <ul style="list-style-type: none"> Receiving a child protection report. Approving a Family Plan. Approving a Support Services Agreement. Approving a Voluntary Care Agreement.

		<ul style="list-style-type: none"> • Approving a Support Needs Agreement. • Approving a record transfer. • Approving a record closure.
St. 3	Information and Referral for Voluntary Services	<ul style="list-style-type: none"> • The services provided were appropriate to the needs of the child or youth. • The referrals to services were consistent with the identified needs of the child or youth.
St. 4	Involving the Indigenous Community in the Provision of Services	<ul style="list-style-type: none"> • Efforts were made to identify and involve the Indigenous Community. • Efforts were made to involve the family in planning. • Efforts were made to involve the extended family in planning. • Efforts were made to involve the child/youth in planning.
St. 5	Family Service Plan Requirements for Support Services, Voluntary Care, and Support Needs Agreements	<p>The family plan included:</p> <ul style="list-style-type: none"> • The goals for services with timeframes for review. • The roles and responsibilities for all those participating in the plan.
St. 6	Support Service Agreements	<p>Support Services Agreements were:</p> <ul style="list-style-type: none"> • Signed by the Agency. • Signed by the parents. • Consecutive and reviewed every six months.
St. 7	Voluntary Care Agreements	<p>The Voluntary Care Agreement:</p> <ul style="list-style-type: none"> • Was completed and signed by the custodial parent(s) or the child, if over the age of 12. • Involved the family, extended family, child, or designated community representative in the planning of the agreement. • Included an initial plan of care, services that would be provided, and a time period for the agreement.
St. 8	Support Needs Agreements	<ul style="list-style-type: none"> • A SNA that was completed and signed by the custodial parent(s) or child, of over the age of 12. • Involved the family, extended family, child, or designated community representative in the planning of the agreement • An assessment of file from a qualified professional regarding the support needs of the child and a multidisciplinary team in place to meet the needs of the child.
St. 9	Case Documentation for Voluntary Family Service Files	<ul style="list-style-type: none"> • An opening recording signed by social worker and supervisor. • Review recordings signed by social worker and supervisor and completed every six months throughout the audit period.

St. 24	Transferring Voluntary Services Files	<ul style="list-style-type: none"> • A transfer recording. • The transfer recording was signed by the social worker. • The transfer recording signed by a supervisor. • The social worker met with the family prior to transfer; efforts documented. • The service providers were notified of the transfer. • The Band was notified; efforts documented. • The social worker met with the family within 5 days of the transfer; efforts documented.
St. 26	Closing Voluntary Services Files	<ul style="list-style-type: none"> • A closing recording. • The closing recording was signed by the social worker. • The closing recording was signed by a supervisor. • The social worker met with the family prior to closure; efforts documented. • The service providers were notified of the closure. • The Band was notified; efforts documented.
St. 27	Voluntary Services Protocols	<ul style="list-style-type: none"> • All protocols related to the delivery of voluntary family services that the Agency has established with local and regional agencies have been followed.