BRITISH COLUMBIA

Ref #: 245769
Date: June 2021

SUMMARY: FILE REVIEW
Of the Death of a Child Known to the Director in 2019

Circumstances of the Fatality

The review examined the case files of an Indigenous child who died. The child and their family were receiving services at the time of the death.

Findings

The director was assessing concerns for the child's safety in collaboration with a community partner. The protection response was ongoing at the time of the child's death, and several steps of the protection response were initiated quickly and consistent with policy; however, key steps were missed or not completed in a timely manner. Specifically, a safety plan was not implemented; all of the required interviews were not completed; consultation points with leadership were missed; and, relevant practice guidelines were not adequately applied and/or understood.

Prior to the review being finalized, the involved staff reviewed policies and procedures related to issues identified through the review and implemented new templates to support consultation and the screening of child protection reports.

Actions

The Provincial Practice Branch and the Quality Assurance team developed an action plan to review the wording and application of specific practice guidelines.

The review was completed in January 2021. The above action plan is due for full implementation in December 2021.