BRITISH COLUMBIA

Ref #: 266980
Date: June 2023

Summary: Child and Family Practice Review of the Death of a Child Known to the Director in 2021

Circumstances of the Fatality

The review examined the services provided to an Indigenous child who died. The child and their family received services at the time of the death.

Findings

Following the initial report, the director met with the child's parents to assess the safety concerns, supported the parents in accessing services, and developed a safety plan. The practitioner maintained frequent contact with the parents and encouraged them to access community support services to address their concerns.

A thorough assessment of all risk factors did not occur. Collateral contact checks with service providers and required assessments were not completed.

Prior to the review being finalised, a review of policies and best practices related to specific issues occurred.

Actions

The involved Service Delivery Area leadership and the Quality Assurance team developed an action plan to provide an orientation to the involved staff on updates to practice guidelines for a specific issue.

The review was completed in February 2023. The above action plan is due for full implementation in July 2023.