SUMMARY: FILE REVIEW
Of the Death of a Youth in the Care of the Ministry

A. INTRODUCTION

The Ministry of Children and Family Development (the Ministry) conducted the File Review (FR) to examine practice in the case of the subject youth of the FR (the youth).

For the purpose of the FR, Ministry records and BC Coroners Service documents were reviewed. The FR focused on the period of Ministry involvement prior to the death of the child.

B. TERMS OF REFERENCE

1. Was the assessment of the youth's needs and risks (particularly in relation to a specific concern) consistent with the relevant legislation, services standards, and policy?

2. Was a service plan developed, implemented and monitored that addressed the youth's needs and risks (particularly in relation to a specific concern).

C. BACKGROUND SUMMARY

The Ministry was involved with the family for an extended period of time due to high risk and criminal behaviours of both the parents and the youth. The youth was brought into the care of the Ministry because of these issues. There was a lack of parental engagement in a plan to address the issues impacting the youth. The youth was Aboriginal.

D. FINDINGS

1. The assessment of the youth's needs and risks (particularly in relation to a specific concern) were not entirely consistent with relevant legislation, service standards and policy. There was no evidence that the youth's needs were formally assessed as part of a Care Plan or by using the Structured Decision Making (SDM) tools. Assessments in relation to a specific concern were completed. The youth engaged in high risk behaviours and policy stated that a Reportable Circumstance was to be completed, but this did not occur.

2. Service Plans were developed intermittently, but there was little evidence of monitoring goals and progress with regards to the youth's needs and risks (particularly in relation to a specific concern). The youth received a number of supports and services from a Ministry Program and, during this time, a Care Plan was completed. These services and supports were not provided once the youth was no longer eligible for services from this Ministry Program. The youth remained in care; however, there was no subsequent documentation that replacement services, supports, and plans were put in place. A meeting to develop a new Care Plan occurred; however, the plan was neither formally completed nor reviewed. The youth's case was transferred between communities twice during the period of review, which may have contributed to the planning for the youth not being continuous and not addressing specific concerns. There was no evidence that the Social Workers regularly met with the youth as required by standards. Collaborative planning was initiated, but there was no documentation that it occurred. The youth requested a more independent placement. However, when one became available, a Social Worker was unavailable to transition the youth, and the transition did not occur. The youth had a positive relationship with the foster parent who took the youth to be assessed regarding a specific concern, and took measures to support and meet the needs of the youth.

E. ACTIONS TAKEN TO DATE

1. The Director of Practice in the Service Delivery Area (SDA) met with the involved Program Team Leaders to identify barriers to shifting practice in the area of completing SDM tools. This topic is now a standing agenda item on the monthly calls between the Director of Practice and the Team Leaders.

F. ACTION PLAN

1. The necessity that Care Plans for children and youth are developed, monitored and updated according to policy and standards is communicated to Team Leaders and Managers in the SDA with additional focus on:
   - The value of utilizing clinical consultation to ensure care plans are completed and updated according to policy and standards.
   - Obtaining support from the Adoption and Guardianship Consultant in the SDA, regarding completion of care plans.

2. A fact sheet for guiding the decision to complete an Initial Reportable Circumstance is developed to reflect the current practice, policy and standards and distributed to all social workers, team leaders, and managers in the SDA.