

Ministry of **Children and Family
Development**



Provincial Pilot

Family Service Practice Audit

Report Completed: June 2013

FAMILY SERVICE PRACTICE AUDIT

Provincial Pilot

Table of Contents

SECTION I: INTRODUCTION.....3

1. PURPOSE3

2. METHODOLOGY3

SECTION II: SERVICE DELIVERY4

3. PROVINCIAL OVERVIEW4

4. SERVICE DELIVERY CHALLENGES4

5. SERVICE DELIVERY TO ABORIGINAL CHILDREN AND FAMILIES5

SECTION III: PRACTICE AUDITS5

6. CRITICAL MEASURES.....5

7. SAMPLE6

8. FINDINGS.....7

9. ANALYSIS.....8

10. SUMMARY.....14

12. ACTION PLAN AND STRATEGIES15

SECTION I: INTRODUCTION

1. PURPOSE

The Family Service (FS) Practice Audit is designed to assess achievement of key components of the child protection and family service process. The format for the audit is based on *Chapter 3: Child Protection Response* of the *Child and Youth Safety and Family Support Policies*. The purpose of the Provincial Pilot of the FS Practice Audit was to conduct a test of the new audit process prior to implementation at the Service Delivery Area (SDA) level. The Pilot was used to test the audit's design and provided an opportunity to evaluate and improve the process.

Three types of family service records, representing different aspects of the child protection and family service process, were audited:

- Service requests and non-protection incidents,
- Protection incidents with an investigation or family development response (FDR), and
- Cases.

2. METHODOLOGY

The Pilot FS Practice Audit reflects practice that occurred during the 12 month period leading up to the Pilot in November and December 2012. This 12 month period saw two significant initiatives in the Ministry of Children and Family Development (MCFD) that directly affected practice: new child protection policies (*Chapter 3*) and the new Integrated Case Management (ICM) computer system.

On April 2, 2012, the ICM system went live and the Structured Decision Making (SDM) tools that were part of the new child protection policies became available (with the exception of the Screening Assessment). Workers were expected to transition from the former Management Information System (MIS) and BC Risk Assessment Model (BCRAM) tools to the ICM system and SDM tools. The twelve month timeframe of the pilot bridged the two systems. Relevant MIS and BCRAM tools completed prior to April 2, 2012 and applicable SDM tools completed on or after April 2, 2012, found in the record, were rated for the audit.

The FS Practice Audit tool has 24 critical measures that assess achievement of key components of the child protection and family service process. The auditors' ratings of the critical measures are captured on a SharePoint site, with four textboxes providing additional information regarding the auditors' rationales for their rating of certain critical measures. A textbox for the auditors' general comments regarding practice is provided. The majority of the critical measures have the rating choices: *Achieved*, *Not achieved*, and *Not applicable*. A small

number of critical measures have the additional rating choice of *Partially achieved* when the relevant decision, assessment or plan was completed but the applicable time frame was not met (as long as the delay in completion did not affect the immediate safety of the child).

Chapter 2 of the *Child and Youth Safety and Family Support Policies* will provide standards for voluntary, non-protection support services. *Chapter 2* was not available at the time of the FS Pilot. An audit tool will be developed for voluntary support services once *Chapter 2* has been released. The SDM tools are not utilized for service requests or for cases open for voluntary services; therefore, the only critical measures that apply to these records are FS1.1, FS1.2, and FS3.1 through FS3.4 (FS9.1 through FS9.4 as well, for cases). Critical measures FS1.1 through FS6.2 are applied for incidents. The full audit tool is employed for protection cases.

During the audit, practice analysts watched for situations where the documentation on record raised questions about whether children may have been left in need of protection. Such records were immediately brought to the attention of the team leader and community services manager to review the circumstances to ensure child safety.

Evaluation of the FS Practice Audit tool will include ongoing assessment of rater reliability and validity.

SECTION II: SERVICE DELIVERY

3. PROVINCIAL OVERVIEW

MCFD has 13 Service Delivery Areas (SDAs) covering all of British Columbia. In turn, each SDA has several Local Service Areas (LSAs), totalling 47 LSAs for the province. MCFD provides child protection and family services across the province through 429 MCFD offices and a number of Delegated Aboriginal Agencies (DAAs).

4. SERVICE DELIVERY CHALLENGES

Practice analysts audited documented information in relation to standards, not necessarily the actions that were taken. MCFD workers were transitioning to new child protection policies and the new ICM system. Auditors heard from workers that there was confusion, especially in the early months after April 2, 2012, about how to retrieve, enter and save information in ICM. (For example, the Screening Assessment tool was not generated within ICM until July 2012). These implementation issues likely affected documentation and may have impacted the audit results.

5. SERVICE DELIVERY TO ABORIGINAL CHILDREN AND FAMILIES

The Provincial Pilot did not include DAAs; however, MCFD offices serving Aboriginal families and children were included. With commencement of the post-pilot FS Practice Audits, the DAAs with C6 Child Protection Delegation will be audited with the same FS Practice Audit tool as MCFD SDAs.

SECTION III: PRACTICE AUDITS

6. CRITICAL MEASURES

The 24 critical measures in the FS Practice Audit are based on the format of *Chapter 3* and the Child Protection Response Model. The critical measures are as follows:

Standard/ CP Response	Critical Measure	Compliance Description
3.1/R1	FS1.1 Obtaining a Child Protection (CP) Report or Request for Services	There is a full and detailed description of the reported incident or of the request for services
3.1/R1	FS1.2 Assessing the child protection Report or Request for Services	CP report: Section 1 of the Screening Assessment was completed within 24 hours Service request: The assessment was completed
3.1/R2, R3	FS2.1 Timeframe for Assigning the Response Priority	CP report: Section 2 of the Screening Assessment was completed and the response priority assigned
3.1/R2, R3	FS2.2 Determining an Appropriate Response Priority	CP report: An appropriate response priority was assigned
3.1/R2, R3	FS2.3 Textbox: Rationale for rating of FS2.2	Auditor's rationale
3.1/R2, R3	FS3.1 Determining the Response	The response was determined within 5 calendar days of receiving the CP report
3.1/R2, R3	FS3.2 Supervisory Approval of the Response	The decision about the response was approved by the supervisor within 24 hours and the approval was documented
3.1/R2, R3	FS3.3 Making a Response Decision Consistent with Assessment Information	The decision about the response was consistent with past information and reporter information
3.1/R2, R3	FS3.4 Textbox: Rationale for rating of FS3.3	Auditor's rationale
3.2/R4	FS4.1 Completing the Safety Assessment Process	The Safety Assessment process was completed during the first in-person meeting with the family
3.2/R4	FS4.2 Making a Safety Decision Consistent with the Safety Assessment	The Safety Assessment document was completed no later than 24 hours after completion of the process and identified a Safety Decision
3.2, 3.3, 3.6/R4	FS4.3 Involving the Family in Development of the Safety Plan	The Safety Plan was developed in collaboration with the family
3.4/R4	FS4.4 Collaborative Planning and Decision Making (CPDM)	When agreement on the Safety Plan was not reached, efforts were made to engage the family in CPDM
3.2, 3.3/R5	FS5.1 Completing the Vulnerability Assessment (VA)	The VA was completed in its entirety

Standard/ CP Response	Critical Measure	Compliance Description
3.2, 3.3/R5	FS5.2 Determining a Final Vulnerability Level	The Final Vulnerability Level was consistent with the information in the VA
3.2, 3.3/R5	FS5.3 Textbox: Rationale for rating of FS5.2	Auditor's rationale
3.2, 3.3/R5	FS5.4 Timeframe for Completing the Vulnerability Assessment	The VA was completed within the 30 day timeframe for Family Development Response or Investigation
3.2, 3.3/R6	FS6.1 Decision on Whether the Child/Youth Needs Protection Services	The decision regarding the need for FDR/Ongoing Protection Services was consistent with the VA
3.2, 3.3/R6	FS6.2 Textbox: Rationale for rating of FS6.1	Auditor's rationale
3.2, 3.3, 3.6/R7	FS7.1 Completing a Family and Child Strengths and Needs Assessment (SNA)	The SNA was completed in its entirety
3.2, 3.3, 3.6/R7	FS7.2 Supervisory Approval of the Strengths and Needs Assessment	Supervisory approval of the SNA was documented
3.2, 3.3, 3.6, 3.7/R7	FS7.3 Developing the Family Plan with the Family	The Family Plan was developed in collaboration with the family within the applicable timeframe
3.2, 3.3, 3.6, 3.7/R7	FS7.4 Integrating the Safety Plan into the Family Plan	Elements of the Safety Plan were integrated into the Family Plan within 30 days of incident closure
3.2, 3.3, 3.7/R8	FS8.1 Completing a Reassessment: Vulnerability Reassessment or Reunification Assessment	The formal reassessment was completed in its entirety
Case Transfer Policy & Procedures	FS9.1 Decision on Transferring a Case	The transfer decision was approved/documentated by supervisors of the originating and receiving workers
QA Standard 4	FS9.2 Supervisory Approval for Transferring a Case	Supervisory approval for transferring a case was documented
3.9/R9	FS9.3 Decision on Closing a Case	All three minimum criteria were met before deciding to end Ongoing Protection Services and closing a case
QA Standard 4	FS9.4 Supervisory Approval for Closing a Case	Supervisory approval was documented

7. SAMPLE

Samples for the provincial pilot were selected at a 90% confidence level with a 10% margin of error during an ICM data extract on October 15, 2012. The data for service requests, incidents, and cases were randomized at the provincial level and two hundred records in total were sampled. The sampled records were evenly distributed amongst the Quality Assurance practice analysts (the auditors) for completion of the audit process. The audit results were entered on the Family Service Audit SharePoint site by the auditors. The SharePoint site, sampling methodology, data extraction, and audit data report were developed with the support of the Modelling, Analysis and Information Management Branch.

8. FINDINGS

The Audit Report (attached) provides separate tables for the service request, incident, and case data. The data is presented as weighted percentages for “Achieved”, “Partially Achieved” (where applicable), and “Not Achieved”; the “Not Applicable” ratings are listed numerically and have been excluded from the percentage calculations.

SERVICE REQUESTS

Critical Measure	Achieved	Partially Achieved	Not Achieved	Not Applicable	Responses
FS1.1 Obtain Request for Service	76 %		24 %	0	25
FS1.2 Complete Screening	75 %	8 %	17 %	1	25
FS3.1 Determine Response	96 %		4 %	0	25
FS3.2 Supervisory Approval - Response	75 %		25 %	1	25
FS3.3 Make Response Decision	67 %		33 %	1	25

INCIDENTS

Critical Measure	Achieved	Partially Achieved	Not Achieved	Not Applicable	Responses
FS1.1 Obtain Child Protection Report	92 %		8 %	3	110
FS1.2 Complete Screening	18 %	6 %	76 %	9	110
FS2.1 Timeframe for Screening	20 %		80 %	12	110
FS2.2 Determine Response Priority	34 %		66 %	8	110
FS3.1 Determine Response	62 %	24 %	14 %	15	110
FS3.2 Supervisory Approval - Response	70 %		30 %	3	110
FS3.3 Make Response Decision	56 %		44 %	4	110
FS4.1 Complete Safety Assessment	53 %		47 %	29	110
FS4.2 Make Safety Decision	38 %	24 %	38 %	31	110
FS4.3 Develop Safety Plan with Family	49 %		51 %	55	110
FS4.4 Collaborative Planning/Decision	31 %		69 %	97	110
FS5.1 Complete Vulnerability Assessment	47 %		53 %	37	110
FS5.2 Determine Level of Vulnerability	57 %		43 %	35	110
FS5.4 Timeframe - Vulnerability Assessment	27 %	15 %	58 %	37	110
FS6.1 Decision for Need of Protection	64 %		36 %	32	110

CASES

Critical Measure	Achieved	Partially Achieved	Not Achieved	Not Applicable	Responses
FS1.1 Obtain Child Protection Report	95 %		5 %	23	65
FS1.2 Complete Screening	62 %	6%	32 %	31	65
FS2.1 Timeframe for Screening	66 %		34 %	33	65
FS2.2 Determine Response Priority	75 %		25 %	29	65
FS3.1 Determine Response	80 %	5%	15 %	24	65
FS3.2 Supervisory Approval - Response	73 %		27 %	24	65
FS3.3 Make Response Decision	82 %		18 %	26	65
FS4.1 Complete Safety Assessment	61 %		39 %	29	65

Critical Measure	Achieved	Partially Achieved	Not Achieved	Not Applicable	Responses
FS4.2 Make Safety Decision	65 %	19%	16 %	28	65
FS4.3 Develop Safety Plan with Family	77 %		23 %	39	65
FS4.4 Collaborative Planning/Decision	55 %		45 %	54	65
FS5.1 Complete Vulnerability Assessment	52 %		48 %	40	65
FS5.2 Determine Level of Vulnerability	62 %		38 %	36	65
FS5.4 Timeframe - Vulnerability Assessment	20 %	20%	60 %	40	65
FS6.1 Decision for Need of Protection	79 %		21 %	27	65
FS7.1 Complete Strengths & Needs Assess	29 %		71 %	27	65
FS7.2 Supervisory Approval –S&N Assess	31 %		69 %	29	65
FS7.3 Develop Family Plan with Family	16 %	13%	71 %	27	65
FS7.4 Integrate Safety Plan in Family Plan	13 %	13%	74 %	34	65
FS8.1 Complete Vulnerability Reassessment	16 %		84 %	27	65
FS8.1 Complete Reunification Assessment	8 %		92 %		
FS9.1 Decision on Case Transfer	86 %		14 %	58	65
FS9.2 Supervisory Approval of Case Transfer	86 %		14 %	58	65
FS9.3 Decision on Case Closure	43 %		57 %	42	65
FS9.4 Supervisory Approval for Case Closure	54 %		46 %	41	65

9. ANALYSIS

Chapter 3 and the ICM system became operational on April 2, 2012. Compliance rates were expected to be lower than normal while social workers adjusted to new documentation requirements, new forms for assessment and planning, and new procedures for recording information. The relevant critical measures for each of the three record types were:

- FS1.1, FS1.2, FS3.1 through FS3.4, FS10 for Service Requests
- FS1.1 through FS6.2, FS10 for Incidents
- FS1.1 through FS10 for Protection Cases
- FS1.1, FS1.2, FS3.1 through FS3.4, and FS9.1 through FS10 for Non-protection Cases

FS1.1 Obtaining a child protection (CP) report or request for services

This critical measure was applicable to 25 of the 25 service requests, 107 of the 110 incidents, and 42 of the 65 cases that were audited. The records not applicable for the critical measure had a CP report or request for services date that fell outside of the 12 month timeframe of the practice audit. The compliance rates for FS1.1 were 76%, 92%, and 95% respectively for service requests, incidents, and cases. The overall compliance rate was 90%.

FS1.2 Assessing the child protection report or request for services

This critical measure was applicable to 24 of the 25 service requests, 101 of the 110 incidents, and 34 of the 65 cases that were audited. The records not applicable for the critical measure had an assessment of the CP report or request for services date that fell outside of the 12 month timeframe of the practice audit. The compliance rates for FS1.2 were 75%, 18%, and

62% respectively for service requests, incidents, and cases. The overall compliance rate was 36%. The low compliance rate for this critical measure was due in part to the delayed availability of the Screening Assessment until July 2012.

FS2.1 Timeframe for assigning the response priority

This critical measure was applicable to 98 of the 110 incidents and 32 of the 65 cases that were audited. The records not applicable for the critical measure were assigned a response priority on a date that fell outside of the 12 month timeframe of the practice audit. The compliance rates for FS2.1 were 20% and 66% respectively for incidents and cases. The overall compliance rate was 31%.

FS2.2 Determining an appropriate response priority

This critical measure was applicable to 102 of the 110 incidents and 36 of the 65 cases that were audited. The records not applicable for the critical measure had a determination of response priority date that fell outside of the 12 month timeframe of the practice audit. The compliance rates for FS2.2 were 34% and 75% respectively for incidents and cases. The overall compliance rate was 45%.

FS2.3 Textbox: Rationale for rating of FS2.2

Due to the delayed release of the Child Protection Screening Assessment, this tool was included in some, but not all, of the initial staff training on the SDM tools. The Screening Assessment was added to ICM on July 16, 2012, and the revised SDM Screening Assessment was added to ICM on August 6, 2012. Incident records were audited in ICM, and case records were audited in MIS and ICM.

FS3.1 Determining the response

This critical measure was applicable to 25 of the 25 service requests, 95 of the 110 incidents, and 41 of the 65 cases that were audited. The records not applicable for the critical measure had a determination of response date that fell outside of the 12 month timeframe of the practice audit. The compliance rates for FS3.1 were 96%, 62%, and 80% respectively for service requests, incidents, and cases. The overall compliance rate was 71%.

FS3.2 Supervisory approval of the response

This critical measure was applicable to 24 of the 25 service requests, 107 of the 110 incidents, and 41 of the 65 cases that were audited. The records not applicable for the critical measure had a determination of response date that fell outside of the 12 month timeframe of the practice audit. The compliance rates for FS3.2 were 75%, 70%, and 73% respectively for service requests, incidents, and cases. The overall compliance rate was 72%.

FS3.3 Making a response decision consistent with assessment information

This critical measure was applicable to 24 of the 25 service requests, 106 of the 110 incidents, and 39 of the 65 cases that were audited. The records not applicable for the critical measure had a response decision date that fell outside of the 12 month timeframe of the practice audit. The compliance for FS3.3 was 67%, 56%, and 82% respectively for service requests, incidents, and cases. The overall compliance rate was 63%.

FS3.4 Textbox: Rationale for rating of FS3.3

The non-compliant ratings were due to either insufficient information about the screening, assessment and response determination or incorrect designation as a service request.

FS4.1 Completing the Safety Assessment process

This critical measure was applicable to 81 of the 110 incidents and 36 of the 65 cases that were audited. The records not applicable for the critical measure had a safety assessment completion date that fell outside of the 12 month timeframe of the practice audit. The compliance rates for FS4.1 were 53% and 61% respectively for incidents and cases. The overall compliance rate was 56%.

FS4.2 Making a Safety Decision consistent with the Safety Assessment

This critical measure was applicable to 79 of the 110 incidents and 37 of the 65 cases that were audited. The records not applicable for the critical measure had a safety decision date that fell outside of the 12 month timeframe of the practice audit. The compliance rates for FS4.2 were 38% and 65% respectively for incidents and cases. The overall compliance rate was 46%.

FS4.3 Involving the family in development of the Safety Plan

This critical measure was applicable to 55 of the 110 incidents and 26 of the 65 cases that were audited. The records not applicable for the critical measure had a development of a safety plan date that fell outside of the 12 month timeframe of the practice audit. The compliance rates for FS4.3 were 49% and 77% respectively for incidents and cases. The overall compliance rate was 58%.

FS4.4 Collaborative Planning and Decision Making

This critical measure was applicable to 13 of the 110 incidents and 11 of the 65 cases that were audited. The records not applicable for the critical measure had no indication that agreement on meeting child safety issues was not reached; therefore, collaborative planning and decision making was not necessary during the 12 month timeframe of the practice audit. The compliance rates for FS were 31% and 55% respectively for incidents and cases. The overall compliance rate was 42%.

FS5.1 Completing the Vulnerability Assessment

This critical measure was applicable to 73 of the 110 incidents and 25 of the 65 cases that were audited. There is no equivalent to a Vulnerability Assessment in MIS or BCRAM; therefore, the critical measure was not applicable to records with investigation or FDR response was completed prior to the 12 month timeframe of the practice audit. The compliance rates for FS5.1 were 47% and 52% respectively for incidents and cases. The overall compliance rate was 48%.

FS5.2 Determining a Final Vulnerability Level

This critical measure was applicable to 75 of the 110 incidents and 29 of the 65 cases that were audited. There is no equivalent to a Vulnerability Assessment in MIS or BCRAM; therefore, the critical measure was not applicable to records with investigation or FDR response was completed prior to the 12 month timeframe of the practice audit. The compliance rates for FS5.2 were 57% and 62% respectively for incidents and cases. The overall compliance rate was 59%.

FS5.3 Textbox: Rationale for rating of FS5.2

When a child protection report or request for services contains Section 13 concerns, a Vulnerability Assessment is completed. The non-compliant ratings were largely due to either the absence of or incomplete information in a Vulnerability Assessment.

FS5.4 Time frame for completing the Vulnerability Assessment

This critical measure was applicable to 73 of the 110 incidents and 25 of the 65 cases that were audited. There is no equivalent to a Vulnerability Assessment in MIS or BCRAM; the critical measure was not applicable to records with investigation or FDR responses completed prior to the 12 month timeframe of the practice audit. The compliance rates for FS5.4 were 27% and 20% respectively for incidents and cases. The overall compliance rate was 26%.

FS6.1 Decision on whether the child/youth needs protection services

This critical measure was applicable to 78 of the 110 incidents and 38 of the 65 cases that were audited. The critical measure was not applicable to records with the decision regarding protection services completed prior to the 12 month timeframe of the practice audit. The compliance rates for FS6.1 were 64% and 79% respectively for incidents and cases. The overall compliance rate was 69%.

FS6.2 Textbox: Rationale for rating of FS6.1

The non-compliant ratings were due to several factors, including incomplete assessments, investigations or family development responses; inadequate information leading up to decisions regarding ongoing protection services; and insufficient actions to address safety concerns.

FS7.1 Completing a Family and Child Strengths and Needs Assessment

This critical measure was applicable to 38 of the 65 cases that were audited. The critical measure may have been not applicable either because the case remained open for voluntary, non-protection services or because the Family and Child Strengths and Needs Assessment was not yet due in the 12 month timeframe of the practice audit. The compliance rates for FS7.1 were 29% for cases; this was also the overall compliance rate.

FS7.2 Supervisory approval of the Strengths and Needs Assessment

This critical measure was applicable to 36 of the 65 cases that were audited. The critical measure may have been not applicable either because the case remained open for voluntary, non-protection services or because the Family and Child Strengths and Needs Assessment was not yet due in the 12 month timeframe of the practice audit. The compliance rate for FS7.2 was 31% for cases; this was also the overall compliance rate.

FS7.3 Developing the Family Plan with the family

This critical measure was applicable to 38 of the 65 cases that were audited. The critical measure may have been not applicable either because the case remained open for voluntary, non-protection services or because the Family Plan was not yet due in the 12 month timeframe of the practice audit. The compliance rate for FS7.3 was 16% for cases; this was also the overall compliance rate.

FS7.4 Integrating the Safety Plan into the Family Plan

This critical measure was applicable to 31 of the 65 cases that were audited. The critical measure may have been not applicable either because the case remained open for voluntary, non-protection services or because the Family Plan was not yet due in the 12 month timeframe of the practice audit. The compliance rate for FS7.4 was 13% for cases; this was also the overall compliance rate.

FS8.1 Completing a reassessment: Vulnerability Reassessment or Reunification Assessment

This critical measure was applicable to 38 of the 65 cases that were audited. The critical measure may have been not applicable either because the case remained open for voluntary, non-protection services or because the reassessment was not yet due in the 12 month timeframe of the practice audit. The compliance rates for FS8.1 were 16% and 8% respectively for Vulnerability Reassessments and Reunification Assessments for cases. The overall compliance rate for completing a reassessment was 13%.

FS9.1 Decision on transferring a case

This critical measure was applicable to 7 of the 65 cases that were audited. The critical measure is only applicable when there is a case transfer between offices, not between two

social workers reporting to the same supervisor within the same office. The compliance rate for FS9.1 was 86 % for cases; this was also the overall compliance rate.

FS9.2 Supervisory approval for transferring a case

This critical measure was applicable to 7 of the 65 cases that were audited. The critical measure is only applicable when there is a case transfer between offices (as governed by the *Case Transfer and Joint Case Management under the CFCSA* document), not between two social workers reporting to the same supervisor within the same office. The compliance rate for FS9.2 was 86% for cases; this was also the overall compliance rate.

FS9.3 Decision on closing a case

This critical measure was applicable to 23 of the 65 cases that were audited. The critical measure is not applicable when case closure has not occurred within the 12 month timeframe of the practice audit. The compliance rate for FS9.3 was 43% for cases; this was also the overall compliance rate.

FS9.4 Supervisory Approval for closing a case

This critical measure was applicable to 24 of the 65 cases that were audited. The critical measure is not applicable when case closure has not occurred within the 12 month timeframe of the practice audit. The compliance rate for FS9.4 was 54% for cases; this was also the overall compliance rate.

10. SUMMARY

There is evidence that *Chapter 3* and ICM implementation issues affected the audit results. When auditing the sample of service requests and incidents, practice analysts examined only electronic information on MIS/ICM, not the physical file; whereas, for cases, analysts examined information on MIS/ICM and the physical file. Compliance rates on cases were higher than on service requests and incidents for the same critical measures. This suggests that physical filing of information had an effect on compliance rates, especially with assessment forms.

- The overall compliance rate of the audit was 54% with an additional 4% partially compliant.
- Compliance rates on cases were higher than on service requests and incidents for the same critical measures.
- The compliance to standards appeared to decrease as the critical measures progressed through the child protection process. Compliance rates were relatively high during initial activities, moved to moderate levels during family development/investigation assessment and planning, and were low for provision of ongoing protection services.
- Compliance rates of critical measures for reassessments and planning (FS 7.1 to 8.2) were very low and quite concerning. However, these measures were applicable for only 15 cases audited; therefore, firm conclusions cannot be made without further scrutiny. These are areas to watch during future audits.
- The compliance rate for obtaining fulsome information during service requests and child protection reports was high at 91%.
- There were moderate compliance rates for the response decision process, the development of safety plans with families, and decisions regarding the need for protection services at 70%, 77% and 79%, respectively.
- Compliance rates for timely completion of safety assessments and vulnerability assessments were lower at 56% and 49%, respectively.
- Compliance rates for aspects of ongoing protection services, including strengths and needs assessments, family plans, and vulnerability reassessments/reunification assessments were low at 30%, 28%, and 14% respectively.
- In this audit, 13 cases were flagged out of a total of 200 (6.5 %). Although records of flagged cases were not kept historically, it is the consensus of experienced analysts that this number is not unusual.

11. ACTION PLAN

- 1) In collaboration with the Office of the Provincial Director of Child Welfare, the Deputy Director and staff will lead a Live Meeting Exercise for the Executive Directors of Service and Directors of Practice to ensure that they are fully briefed and are able to ask questions about the report and the results. This will be completed on June 14, 2013.
- 2) In collaboration with the Office of the Provincial Director of Child Welfare, the Deputy Director and staff will lead a Live Meeting for Directors of Practice, Child Safety Consultants, and Practice Analysts to review the report, and this will be completed by August 30, 2013.
- 3) The Child Safety Teams in the province will all receive refresher training on the Child Protection Response Model (CPRM) inclusive of the Structured Decision Making (SDM) tools. The refresher training will be developed by Directors of Practice and Child Safety Consultants from the Practice Service Delivery Division. The curriculum for the training will be completed by September 2013 and delivery will start immediately.
- 4) The Chapter 3 Child Protection Policy will be revised to provide clarity for delegated staff on the child protection response model including clarifying documentation points and the use of the Structured Decision Making tools. This will be undertaken by a project team co-chaired with the Provincial Policy Division and the Practice Service Delivery Division. It is anticipated this will be complete by September 2013 to coincide with the CPRM refresher training for staff.