

**CASE PRACTICE AUDIT REPORT
DENISIQI SERVICES SOCIETY (IED)**

Office of the Provincial Director of Child Welfare and Aboriginal Services
Quality Assurance Branch
Field Work Completed: July 16, 2015

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1. PURPOSE

The purpose of the audit is to improve and child service, resources and family service case practice. Through a review of a sample of cases, the audit is expected to provide a measure of the current level of practice, confirm good practice, and identify areas where practice requires strengthening. This is the first practice audit for Denisiqi Society Services (Denisiqi). Case practice audits are regularly scheduled on a 3 year audit cycle.

The specific purposes of the audit are to:

- further the development of practice;
- assess and evaluate practice in relation to existing legislation and the Aboriginal Operational and Practice Standards and Indicators (AOPSI);
- determine the current level of practice across a sample of cases;
- identify barriers to providing an adequate level of service;
- assist in identifying training needs;
- provide information for use in updating and/or amending practice standards or policy.

1. METHODOLOGY

There was one quality assurance analyst from MCFD's Office of the Provincial Director of Child Welfare, Quality Assurance who conducted the practice audit. The quality assurance analyst conducted the field work from July 15, 2015 – July 16, 2015.

Upon arrival the quality assurance analyst met with the staff and team leader to review the audit purpose and process. The analyst was available to answer any questions from staff that arose during the audit process. At the completion of the fieldwork, the analyst held a meeting with the team leader and executive director, to provide some preliminary findings and discuss the next steps in the audit process. At the conclusion of the fieldwork, in-person interviews were conducted onsite.

The computerized Aboriginal Case Practice Audit Tool (ACPAT) was used to collect the data for the child service, voluntary family service and resource files and generate office summary compliance reports and a compliance report for each file audited.

The population and sample sizes were based on data entered in ICM and confirmed with the agency prior to the audit commencing. At the time of the audit, there were a total of one open voluntary child service file; 3 open voluntary family service files and 2 open resource files. Given the small population of files, all open and closed child service files, family service files and resource files were selected for the audit. As all records in the agency that met the criteria (see below) were audited, the numbers in the samples ensure a 100% confidence level and a 0% margin of error. However, it is important to note that some of the standards used for the audit are only applicable to a subset (or reduced number) of the records that have been selected and so the results obtained for these standards may have an increased margin of error.

Two closed family services files were removed during the audit because they were open for the provision of Extended Family Placement. This program was not part of the audit criteria.

The scope of the practice audit was:

1. Child in care files: children in care files that were open on May 15, 2015 and were open for at least 3 months, or closed children in care files that were open for at least 3 months between November 1, 2012 and May 31, 2015.
2. Resource files: foster home files managed by the agency that had children or youth in care for at least 3 months between November 1, 2012 and May 31, 2015. 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.
3. Family Service files: open for at least 3 months, between November 1, 2012 and May 31, 2015.

2. AGENCY OVERVIEW

a) Delegation

Denisiqi currently holds C3 Voluntary Services delegation. This level of delegation enables the agency to provide the following services:

- Support services to families;
- Voluntary Care Agreements;
- Special Needs Agreements;
- Establishing residential resources for children.

The agency was granted delegation between November 1, 2012 through March 31, 2014. This agreement was extended through a series of modification agreements with no changes to the actual agreement wording. The current modification agreement expires on March 31, 2016.

b) Demographics

Denisiqi is a non-profit service organization providing voluntary delegated services; non-delegated prevention and support services to the Tsilhqot'in and Ulkatcho peoples.

Denisiqi has its own board of directors, constitution, and by-laws, providing services to the 7 member bands residing on reserve for the Tsilhqot'in and Ulkatcho traditional territory.

The Tsilhqot'in Nation traditional territory extends from the Fraser River to the coastal mountains and from the territory of the St'at'imx Nation to the territory of the Carrier Nations (Chilcotin country). The heart of the Tsilhqot'in territory is the Tsilhqox (Chilcotin

River) and its tributary lakes and streams. The Ulkatcho people belong to the Southern Carrier Nation and their traditional territory refers to the Itcha and Ilgachuz mountains. The traditional territory covers a large geographic area with the furthest community to the west being Anahim Lake (Ulkatcho) with a travel time of approximately 4 hours from Williams Lake and toward the southwest to Xenigwet'in (Nemiah) with a travel time of approximately 3 hours from Williams Lake.

The member nations include: Alexandria (?Esdilagh); Alexis Creek (Tsi DelDel); Anahim (Tl'etinqox); Nemiah (Xenigwet'in); Stone (Yunesit'in); Toosey (Tl'esqox); and Anahim Lake (Ulkatcho). The population on these reserves is approximately 2,395 (source; Registered Indian Population by Sex and Residence, Aboriginal Affairs and Northern Development Canada 2013).

Denisiqi provides a number of prevention and support programs including:

- Aboriginal Family Group Conferencing
- Infant Development Program;
- Supported Child Care;
- ECE Outreach Program;
- Support to Families Program;
- Restoring Balance (Life Skills for youth);
- Cultural and Language Camps;
- Traditional Parenting Workshops;
- Suicide Awareness Workshops;
- Annual Youth Leadership Conferences.

The communities access additional services through local hospitals, health units, Aboriginal CYMH, Public Schools, and local police services. Denisiqi has one office located in the downtown area of Williams Lake.

c) Professional Staff Complement

At the time of the audit, the staffing at the agency was:

- 1 executive director;
- 1 delegated team leader;
- 1 finance manager;
- 1 human resource manager;
- 3 delegated social workers;
- 1 family care manager team leader;
- 7 family support workers ;
- 1 Aboriginal FGC coordinator;

- 1 Aboriginal CYMH team leader;
- 3 Aboriginal CYMH clinicians;
- 1 early childhood development (ECD) team leader ;
- 2 ECD outreach workers;
- 1 Aboriginal infant development worker ;
- 2 administrative assistants.

d) Supervision and Consultation

The current team leader at the agency was hired just prior to the practice audit in June 2015. She has had many years of experience as a team leader with MCFD and another DAA. All staff have C3 level delegation. The staff reported that supervision was done by way of open door, email, phone or text with the previous team leader. Currently, there are consultations by open door and no scheduled staff meetings. Staff expressed the desire to have a weekly team meeting and individual supervision sessions with the team leader. The agency has plans for one of the social workers to be identified as an alternate team leader in the absence of the regular team leader as the executive director of the agency is not delegated.

The executive director plans to provide the team leader with monthly individual supervision sessions. In addition, a community services manager from MCFD is available to the team leader for practice consultations, when needed.

3. STRENGTHS OF AGENCY

The analyst identified several strengths at the agency and of the agency's practice over the course of the audit:

- The agency's practice is very focused on the First Nation's culture and integration of culture into the programs delivered by the agency;
- Staff are very committed and knowledgeable in working with Aboriginal communities;
- The stability of the staffing compliment has resulted in continuity of service for the clients;
- Staff expressed appreciation for the sharing of meals, cultural teachings, wellness days and a positive atmosphere at the agency;
- Staff are able to call upon each other when they are out of the office and require support;
- The agency has many support and prevention programs offered to the community members;
- The agency shares workspace with Aboriginal Child and Youth Mental Health, which is a benefit for clients and the referral process; and

- Staff is supported in enrolling in training opportunities. Training is primarily provided in conjunction with MCFD or workshops held in community.

4. CHALLENGES FACING THE AGENCY

The analyst identified several challenges at the agency and of the agency's practice over the course of the audit:

- There are housing shortages within the on-reserve communities of Tsilhgo'in and Ulkatcho. The housing conditions are described as poor which may impact early childhood development and overall family wellbeing;
- These rural reserve communities have limited resources to address alcohol and drug abuse, domestic violence, teenage gang affiliation and higher pregnancy rates;
- A large remote geographic service area for the agency requires significant travel times to attend the communities;
- Some staff identified the need for more collaboration with MCFD to clarify the roles and responsibilities of a C3 agency and to facilitate communication between both agencies;
- Recruitment/retention of Aboriginal foster homes has been identified as challenging. In addition, some staff reported MCFD holds the resource files rather than transferring these resource homes to the agency. The agency has delegation to recruit and maintain foster homes in their service area; and
- Staff identified the structure of the physical offices creates challenges as the internal doors are locked and there is some perceived barrier and isolation to the others in the building. Some staff expressed a desire to have regular collaborative meetings with all staff working in the building to gain a better understanding and awareness of the roles and responsibilities of their colleagues.

5. DISCUSSION OF THE PROGRAMS AUDITED

a) Resources

The audit reflects the work done by the staff in the agency's delegated programs over the past 3 years. The 9 standards in the Resource Practice Audit are based on the AOPSI Voluntary Service Practice Standards. The standards are as follows:

AOPSI Voluntary Service Practice Standards	Compliance Description
St. 28: Supervisory Approval Required for Family Care Home Services	The social worker consults with the supervisor and obtains the supervisor's approval at key points in the provision of Family Care Home Services and ensures there is a thorough review of relevant facts and data before decisions are made.
St. 29: Family Care Homes – Application and Orientation	People interested in applying to provide family care, restricted care, or specialized care complete an application and orientation process. The social worker provides an orientation for applicants re: the application process and the agency's expectations of caregivers when caring for children.
St. 30: Home Study	Family Care Homes are assessed to ensure that caregivers understand and meet the Family Care Home Standards.
St 31: Training of Caregivers	Upon completion of the application, orientation and home study processes, the approved applicant(s) will participate in training to ensure the safety of the child and to preserve the child's cultural identity.
St 32: Signed Agreement with Caregiver	All caregivers have a written Family Care Home Agreement that describes the caregiver's role, responsibilities, and payment level.
St. 33: Monitoring and Reviewing the Family Care Home	The social worker will monitor the family care home regularly and formally review the home annually to ensure the standards of care and the needs of the child(ren) placed in the home continue to be met.
St 34: Investigation of Alleged Abuse or Neglect in a Family Care Home	Allegations of abuse and neglect in family care homes are investigated by the Child Protection delegated social worker according to the Protocol Investigation of a Family Care Home.
St 35: Quality of Care Review	A Quality of Care Review of a Family Care Home is conducted by a delegated social worker whenever a quality of care concern arises where the safety of the child is not an issue.
St 36: Closure of the Family Care Home	When a Family Care Home is closed, the caregivers are notified of the reasons for closure verbally and in writing.

Findings from the audit of the resource files include:

- Documentation of supervisory approvals and consults was found in the files audited (50% compliance). These also include supervisory approvals on key documents such as the home studies, exceptions to policy and family care home agreements;
- A completed home study was found in the one applicable file audited (100% compliance). The home study was completed and transferred from another DAA during the scope period of the audit;
- There was minimal documentation on training offered and or taken by the caregivers in files reviewed (50% compliance). It was unclear if the agency has training opportunities available for their caregivers to meet their needs in the provision of services to children in care;
- The resource files did not contain current or signed contracts. Contracts were on file at the time of file transfers to the agency; however, these were not renewed upon their expirations (100% non-compliant);
- Annual reviews were not found for the one applicable file (100% non-compliant);
- Limited documentation of regular contact through in-person home visits with the caregivers was found in the files;
- Criminal record checks were up to date on the files; and
- In preparation for the audit, it was observed that there were several resource files registered as open on MIS/ICM that did not meet the sample requirements. When reviewing the list of open resource files provided by the agency, the team leader advised these were not active open files. It was recommended these files be reviewed and closed electronically if they are no longer in use.

Resource files achieved higher than 50% compliance to the following standards:

St. 30: Home Study

Resource files achieved lower than 50% compliance to the following standards:

St. 28: Supervisory Approval Required for Family Care Home Services

St 31: Training of Caregivers

St 32: Signed Agreement with Caregiver

St. 33: Monitoring and Reviewing the Family Care Home

b) Family Service

The 12 standards in the Family Service Practice Audit are based on the AOPSI Voluntary Service Practice Standards. The standards are as follows:

AOPSI Voluntary Care Practice Standard	Compliance Description
St 1 Receiving Requests for Services	<p>A Voluntary Services social worker accepts requests for service, determines the nature of the service request and the caller's eligibility for service.</p> <p>The Voluntary Services social worker ensures that the service offered is within the delegated authority of the agency. When the Voluntary Services social worker has reason to believe that a child may be in need of protection while receiving a request for services, the social worker makes a report to a delegated child protection worker. When the Voluntary Services social worker receives a child protection report rather than a request for services, the social worker directs the reporter to a delegated child protection social worker and ensures the report is made.</p>
St.2 Supervisory approval Required for Voluntary Services	The social worker consults with the supervisor and obtains the supervisor's approval at key points in the provision of voluntary services and ensures there is a thorough review of relevant facts and data before decisions are made.
St 3 Information and Referral for Voluntary Services	People requesting voluntary services are directed to the service that best meet their needs.
St 4 Involving the Aboriginal community in the Provision of Services	When providing services to children and families, the social worker involves the child, family, extended family and, when appropriate, the designated representative of the family's Band/cultural group or Aboriginal community in the planning and delivery of services
St 5 Family Service Plan Requirements and Support Services, Voluntary Care and Special Needs Agreements	The social worker develops a family service plan that defines the service needs of the child and family, the service required to address the needs, and the measurable goals of the service.
St 6 Support Service Agreements	When providing support services, the social worker enters into a signed Support Services Agreement with the family.
St 7 Voluntary Care Agreements	When a child comes into care through a voluntary agreement, the social worker enters into a signed Voluntary Care Agreement with the family.
St 8 Special Needs Agreement	When a child with special needs requires specialized services outside the family home, the social worker enters into a signed Special Needs Agreement with the family.
St 9 Case Documentation	There are accurate and complete recordings on file to reflect the Voluntary Family Services provided to the family.
St 24 Transferring	Prior to transferring Voluntary Services files, the social worker

Voluntary Services Files	will complete all required documentation and follow existing protocol procedures.
St 26 Closing Voluntary Services Files	Prior to closing a Voluntary Services and/or Voluntary Child in Care file, the social worker will ensure that the circumstances that necessitated the provision of services no longer exist.
St 27 Voluntary Services Protocols	The social worker is familiar with and follows all protocols related to the delivery of child and family services that the agency has established with local and regional agencies.

Findings from the audit of the voluntary family service file include:

- The information collected with respect to the request for service was well documented (100% compliance);
- Supervisory approval was evident at all key decision points throughout the file (100% compliance);
- The development of a family service plan, service provision and referrals were clear and comprehensively documented throughout the file. (100% compliance);
- There was evidence of planning meetings involving the Aboriginal community and family during the service phase (100% compliance);
- The file had good documentation of appropriate agreements in succession for the provision of services (100% compliance);
- Opening and review recordings were well documented with supervisor approvals documented (100% compliant); and,
- There was evidence in the file of local protocols being followed relating to the provision of services (100% compliance).

All applicable standards were above 50% compliance.

c) Child Service

The 16 standards in the Child Service Practice Audit are based on the AOPSI Voluntary Service Practice Standards. The standards are as follows:

AOPSI Voluntary Care Practice Standard	Compliance Description
St. 10: Case Documentation for Voluntary Children in Care Files	There are accurate and complete recordings on file to reflect the voluntary services provided to the child.
St. 11: Preserving the Identity of the Child in Care and Providing Culturally Appropriate Services	The social worker has preserved and promoted the cultural identity of the child in care and provided services sensitive to the child's views, cultural heritage and spiritual beliefs.
St.12: Development of a Comprehensive Plan of Care	When assuming responsibility for a child in care the social worker develops a Comprehensive Plan of Care/Care Plan. The comprehensive plan of care/care plan is completed within the required timeframes.

St. 13: Monitoring and Reviewing the Child's Comprehensive Plan of Care/Care Plan	The Comprehensive Plan of Care/Care Plan is monitored to determine progress toward goals, the continued safety of the child, the effectiveness of services, and/or any barrier to services. The comprehensive plan of care/care plan is reviewed every six months or anytime there is a change in circumstances.
St 14: Rights of Children in Care	The social worker has reviewed the rights with the child on a regular basis. The social worker has discussed the advocacy process with the child. Given the age of the child, the rights of the child or advocacy process has not been reviewed with the child but they have been reviewed with the caregiver or a significant adult to the child.
St. 15: Deciding Where to Place the Child	Documented efforts have been made to place the child as per the priority of placement.
St 16: Meeting the Child's Needs for Stability and Continuity of Relationships	There are documented efforts to support continued and ongoing attachments
St 17: Social Worker's Relationship and Contact with a Child in Care	There is documentation that the social worker meets with the child when required as per the frequency of visits listed in the standard. Meetings are held in person and in private, and in a manner that allows the child and the social worker to communicate freely.
St 18: Providing the Caregiver with Information and Reviewing Appropriate Discipline Standards	There is documentation that written information on the child has been provided to the caregiver as soon as possible at the time of placement, and the social worker has reviewed appropriate discipline standards with the caregiver and the child.
St 19: Providing Initial and Ongoing Medical and Dental Care for a Child in Care	The social worker ensures a child in care receives a medical and, when appropriate, dental examination when coming into care. All urgent and routine medical services, including vision and hearing examinations, are provided for the child in care.
St.20: Planning a Move for a Child in Care	The social worker has provided an explanation for the move to the child and has explained who his/her new caregiver will be.
St. 21: Reportable Circumstances	The agency Director and the Provincial Director of Child Welfare have been notified of reportable circumstances and grievous incidents.
St 22: When a Child or Youth is Missing, Lost or Runaway	The social worker in cooperation with the parents has undertaken responsible action to locate a missing, lost or runaway child or youth, and to safeguard the child or youth from harm or the threat of harm.
St. 23: Interviewing the Child About the Care Experience	When a child leaves a placement and has the capability to understand and respond, the child is interviewed and his/her views are sought about the quality of care, service and supports received in the placement. There is

	documentation that the child has been interviewed by the social worker in regards to the criteria in the standard.
St. 25: Transferring Voluntary Child in Care Files	Prior to transferring a Voluntary Care files, the social worker has completed all required documentation and followed all existing protocol procedures.
St. 26: Closing Continuing Care Files	Prior to closing a Continuing Care file, the social worker has completed all required documentation and follows all existing protocol procedures.

Findings from the audit of the child service file include:

- Comprehensive documentation was found in the opening and review recordings (100% compliance);
- Documentation included the development of a comprehensive plan of care and the review of comprehensive plan for the child (100% compliance);
- There was documentation of the rights of a child in care being reviewed with a significant other due to the child's age (100% compliance);
- Planning for placement was well documented and involved the family in the planning process to promote stability and ensuring continuity of care (100% compliance);
- Detailed medical information, including annual medicals and immunization records, was contained in the file (100% compliance);
- Completed documentation was found on Reportable Circumstances (100% compliance);
- There was regular contact with the caregiver and others involved with the child; however, it was difficult to find evidence of contact by the social worker directly with the child (100% non-compliant); and
- There was documentation of the caregiver being provided with information at the time of placement; however, there was a lack of documentation regarding the review of discipline standards with the caregiver (100% non-compliant).

Child Service files with above 50% compliance:

- St. 10: Case Documentation for Voluntary Children in Care Files;
- St. 11: Preserving the Identity of the Child in Care and Providing Culturally Appropriate Services;
- St.12: Development of a Comprehensive Plan of Care;
- St. 13: Monitoring and Reviewing the Child's Comprehensive Plan of Care/Care Plan;
- St 14: Rights of Children in Care;
- St. 15: Deciding Where to Place the Child;
- St 16: Meeting the Child's Needs for Stability and Continuity of Relationships;
- St 19: Providing Initial and Ongoing Medical and Dental Care for a Child in Care;
- St.20: Planning a Move for a Child in Care; and
- St. 21: Reportable Circumstances

Child Service files with lower than 50% compliance:

- St 17: Social Worker’s Relationship and Contact with a Child in Care; and
- St 18: Providing the Caregiver with Information and Reviewing Appropriate Discipline Standards.

6. COMPLIANCE TO THE PROGRAMS AUDITED

a) Resources

There were a total of 2 open resource files audited. The overall compliance rate for the resource program standards was **37%**. The notes below the table provide the numbers of records for which the measures were assessed as not applicable and explain why.

Standard	Total Applicable	Total Compliant	Total Non-Compliant	% Compliant
St 28 Supervisory Approval Required for Family Care Home Services	2	1	1	50%
St 29 Family Care Homes, Application and Orientation*	0			
St 30 Home Study*	1			100%
St 31 Training of Caregivers	2	1	1	50%
St 32 Signed Agreement with Caregivers	2		2	0%
St 33 Monitoring and Reviewing the Family Care Home*	1		1	100%
St 34 Investigation of Alleged Abuse or Neglect in a Family Care Home*	0			
St 35 Quality of Care Reviews*	0			
St 36 Closure of the Family Care Home*	0			

St. 29: 2 files included applications & orientations documented by MCFD or another DAA and completed prior to transfer;

St.30:1 file included a home study completed prior to the scope of the audit;

St.33: 1 file was recently transferred to the agency. The annual review was completed prior to transfer;

St. 34: 2 files did not have investigations of alleged abuse or neglect in a family care home;

St 35: 2 files did not have Quality of Care reviews; and

St. 36: 2 files remain open and no files were closed

b) Family Service

There was a total of 1 open voluntary family service file audited. The overall compliance rate to the family service program standards was **100%**. The notes below the table provide the numbers of records for which the measures were assessed as not applicable and explain why.

Standard	Total Applicable	Total Compliant	Total Non-Compliant	% Compliant
St 1 Receiving Requests for Services	1	1		100%
St 2 Supervisory approval required for Voluntary Cared	1	1		100%
St 3 Information and Referral for Voluntary Services	1	1		100%
St 4 Involving the Aboriginal community in the Provision of Services	1	1		100%
St 5 Family Service Plan for support services	1	1		100%
St 6 Support Service Agreements	1	1		100%
St 7 Voluntary Care Agreements*	0			
St 8 Special Needs Agreement	1	1		100%
St 9 Case Documentation	1	1		100%
St 24 Transferring Voluntary Services Files*	0			
St 26 Closing Voluntary Services Files*	0			
St 27 Voluntary Services Protocols	1	1		100%

St.7: 1 file did not have a VCA
 St.24: 1 file was not transferred
 St.26: 1 file was not closed

c) Child Service

There was a total of 1 open Voluntary Child Service file audited. The overall compliance rate to the Voluntary Child Service Standards was **83%** compliance rate. The notes below the table provide the numbers of records for which the measures were assessed as not applicable and explain why.

Standard	Total Applicable	Total Compliant	Total Non-Compliant	% Compliant
St.10 Case Documentation for Voluntary Children in Care Files	1	1		100%
St. 11 Preserving the Identity of the Child in Care and Providing Culturally Appropriate Services	1	1		100%
St.12 Development of a Comprehensive Plan of Care	1	1		100%
St.13 Monitoring and Reviewing the Child's Comprehensive Plan of Care	1	1		100%
St.14 Rights of Children in Care	1	1		100%
St.15 Deciding Where to Place the Child	1	1		100%
St.16 Meeting the Child's Needs for Stability and Continuity of Relationships	1	1		100%
St.17 Social Worker's Relationship and Contact with a Child in Care	1		1	0%
St.18 Providing the Caregiver with Information and Reviewing Appropriate Discipline Standards	1		1	0%
St.19 Providing Initial and Ongoing Medical and Dental Care for a Child in Care	1	1		100%
St. 20 Planning a Move for a Child in Care	1	1		100%
St.21 Reportable Circumstances	1	1		100%
St.22 When a Child or Youth is Missing, Lost or Runaway*	0			
St.23 Interviewing the Child About the Care Experience*	0			
St.24 Transferring Voluntary Service File*	0			
St.26 Closing Voluntary Child in Care file*	0			

St.22: 1 file had no missing child or youth

St.23: 1 file did not require interviews as child did not move

St. 24 1 file did not transfer

St/ 26 1 file did not close

7. ACTIONS TAKEN TO DATE

- On Oct 1, 2015, the agency reviewed all open resource files and confirmed that each contained a current signed Family Home Contract.
- On Oct 1, 2015, the agency closed all inactive resource files in the ICM and MIS databases and all resource homes that were currently being assessed were given a “pending” status.

8. ACTION PLAN

Actions	Person Responsible	Completion Date
<p>Resources:</p> <p>St. 31 Training of Caregivers; St. 33 Monitoring and Reviewing the Family Care Home.</p> <ol style="list-style-type: none"> 1. The agency will complete outstanding annual reviews on all open resource files. The agency will confirm the completion of this task, via email, to the Office of the Provincial Director of Child Welfare. 2. The agency will distribute a memorandum to all staff on the requirements for caregiver training and to document in the resource files all training taken and/or offered to caregivers. This memorandum will be shared with the Office of the Provincial Director of Child Welfare. 	<p>Joan Charleyboy Acting Executive Director</p> <p>Joan Charleyboy Acting Executive Director</p>	<p>November 30, 2015</p> <p>November 30, 2015</p>
<p>Child Service:</p> <p>St. 17 Social Worker Relationship and Contact with a Child in Care; St. 18 Providing the Caregiver with Information and Reviewing Discipline Standards.</p> <ol style="list-style-type: none"> 3. The agency will distribute a memorandum to all staff on the 	<p>Joan Charleyboy Acting Executive Director</p>	<p>November 30, 2015</p>

<p>requirements for documentation for all contact by social workers with children in care and caregivers. This memorandum will include the frequency of visits as set out by AOPSI Standard 17 and the annual review of discipline standard as set out by AOPSI Standard 17. This memorandum will be shared with the Office of the Provincial Director of Child Welfare.</p>		
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Alex Scheiber
Deputy Director of Child Welfare, MCFD

November 17, 2015

Date