

CASE PRACTICE AUDIT REPORT
Heiltsuk Kaxla Child and Family Services
(IKC)

Fieldwork completed March 1, 2013
Audit completed by Darlene Thoen, Practice Analyst, MCFD Aboriginal Service & QA Division, QA Branch
Report completed by Darlene Thoen

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CASE PRACTICE AUDIT REPORT

Heiltsuk Kaxla Child and Family Services

1. PURPOSE

The purpose of the audit is to improve and support child service, guardianship and family service. Through a review of a sample of cases, the audit is expected to provide a baseline measure of the current level of practice, confirm good practice, and identify areas where practice requires strengthening. This is the third audit for Heiltsuk Kaxla Child & Family Services. The first practice audit was conducted in August 2005 and the second in November 2008..

The specific purposes of the audit are:

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

MCFD Aboriginal Service and Quality Assurance Division, Quality Assurance Branch is conducting the audit using the Aboriginal Case Practice Audit Tool. Audits of delegated agencies providing child protection, guardianship, family services and resources for children in care are conducted according to a three-year cycle.

2. METHODOLOGY

This was a scheduled practice audit and an operational review of the agency. In addition, the audit fulfills an outstanding recommendation from the 2008 practice audit of the agency to conduct a re-audit of the agency to ensure that appropriate documentation has occurred and that the files have been registered on MIS/SWS. There was one practice analyst from MCFD Aboriginal Service and Quality Assurance Division, Quality Assurance Branch who conducted the practice audit and the operational review.

The practice analyst conducted field work from February 25 – March 1, 2013. The computerized Aboriginal Case Practice Audit Tool (ACPAT) was used to collect the data and generate office summary compliance reports and a

compliance report for each file audited. At the time of the audit, there were a total of 7 open resource files and 1 open family service file and all of the files were audited. The scope of the practice audit was three years, from February 2010 to February 2013.

Upon arrival at the practice analyst met with the Executive Director, the social worker and the contracted consultant. At the completion of the audit, the analyst met with the Executive Director, the social worker, the contracted consultant and all available non-delegated and administrative staff to provide preliminary audit findings and to discuss the next steps in the audit process.

3. AGENCY OVERVIEW

a) Delegation

Heiltsuk Kaxla Child and Family Services (HCFS) is currently delegated at C3 Voluntary Services delegation. This level of delegation enables the delegated agency to provide the following services:

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

Heiltsuk Tribal Council's current Delegated Confirmation Agreement is in effect from March 29, 2011 to March 31, 2016. At the time of the review, this agreement had not been signed by AANDC due to staffing shortages within AANDC.

b) Demographics

HCFS serves the community of Heiltsuk in Waglisa (Bella Bella) on Campbell Island. It is approximately seven hours by ferry to Port Hardy or two hours by plane to Vancouver. The population of this community totals approximately 1066 people (Source: *Registered Indian Population by Sex and Residence 2006, Vital Statistics Canada*). Services available in the community include the RCMP, hospital, health centre, TeleHealth mental health, community school offering K-12, Community College offering upgrading and post secondary courses, Band office and a Band store.

Through regional contracts with MCFD, HCFS provides the following non-delegated services:

- Early Intervention Speech & Language Program;
- Aboriginal Supported Child Development;
- Family Preservation/Support Worker;
- FASD Key Worker/Complex Development Behavioural Conditions; and
- Aboriginal Infant Development.

c) Professional Staff Complement

At the time of the audit, agency staff consisted of one delegated social worker, the Executive Director, a Supported Child Development/Speech & Language worker, Family Preservation/Support Worker, Early Child Development/Speech & Language worker, Aboriginal Infant Development worker, Executive Assistant and a Receptionist/File Clerk. The social worker is on secondment from MCFD and began a two year term at the agency in April 2012. The Executive Director began working at the agency in November 2012. With the exception of the Executive Assistant, all of the other staff at the agency have been there for less than two years.

The social worker has child protection experience from MCFD and completed the ASW delegation training in 2012, obtaining C3 delegation. The Executive Director is in the process of completing the field guide portion of the ASW delegation training and expects to receive C3 delegation in March 2013.

The receptionist/file clerk provides administrative and records management support to the delegated social worker.

For the past two years, the agency has had a contract consultant, with C3 delegation, covering as the A/Executive Director. With the recent hiring of the full time ED, the plan is for the consultant to assist in the development of agency policy and transitioning any outstanding work to the new ED.

In addition to the completion of the ASW delegation training, staff have access to the MCFD mandatory trainings offered throughout the region as well as any community base training that is available.

d) Supervision and Consultation

At the time of the audit, the Executive Director was not delegated therefore the social worker has been consulting on delegated matters with the delegated contract consultant and/or the MCFD regional CSM. The majority of the consultation occurs by phone or email as neither are located full time in Bella Bella. There is no regular clinical supervision scheduled but the consultant is usually quite accessible.

Since the ED is new to her delegated role, the agency has submitted a proposal to MCFD Aboriginal Services that includes plans to address the supervision and mentoring requirements of the position.

In addition to his delegated responsibilities, the social worker is also the supervisor of the four non-delegated program staff.

4. STRENGTHS OF THE AGENCY

The most significant strength of the agency is its determination to serve the community through the provision of both delegated and non-delegated services. The agency has persevered through periods of time when there were no delegated staff except for the contract consultant and now have recruited an ED who has extensive child welfare management experience and an experienced seconded MCFD social worker. The agency has implemented a filing system based on MCFD's and is making effort to identify files that can be submitted for off-site storage

Additional strengths identified over the course of the audit:

- Collaborative practice – most of the services provided by the agency are co-located within the agency which allows for ease in referrals, confidential case consultation and sharing of program information.
- Supportive work environment – all the staff commented on how enjoyable their work place is and that they felt supported by each other. They have the opportunity for regular circles and good debriefing with each other.
- Community membership – a significant strength is that all the non-delegated staff are community members. They have a tremendous amount of knowledge of the culture, family membership and the community strengths and challenges. This knowledge and insight is very beneficial for working with the children and families as well as for sharing with the new ED and social worker.
- MCFD relationship – the agency staff have a close working relationship with the MCFD staff that work in the community.

5. CHALLENGES FACING THE AGENCY

One of the most significant challenges identified through the audit is the agency's management of the resource files registered to its office code. Based on information learned through the review of the files and staff interviews, it is clear that regional MCFD staff have been leading the work on the resource files which are registered to the agency and under the agency's responsibility as per their C3 delegation. Over the last three years, regional MCFD social workers and or/managers have completed the application documents and home studies,

approved the resource, signed agreements and conducted a quality of care review. During this period, there may have been times when the agency may have been lacking a delegated social worker however the delegated A/ED was in place to ensure the agency could continue to deliver the delegated services as per the DCA. It is unclear how or when this arrangement began but the day to day resource/caregiver monitoring, support and training by the agency has not been provided and this was evident throughout the resource files. Given that the agency has only seven resources open in the community, it is concerning that the necessary follow up has not occurred. The resource files have been on the A/ED's caseload and given that he is not working in the community on a full time basis, this may have impacted the casework. At times, the agency has contracted with a retired MCFD resource worker to complete a home study or other resource work; however this has been for short periods of time only. It was reported that the plan is to transfer the resource files to the social worker's caseload to ensure agency follow up occurs. This is important as most of the agency's resource homes have MCFD children in care placed in them.

6. DISCUSSION OF THE TWO PROGRAMS AUDITED

The audit reflects the work done by the staff in the agency's delegated programs over the past three years.

a) Resource files

As previously stated, 7 out of 7 open resource files were audited. In the 2008 audit, the agency did not have any resource files open.

In six of the seven files, supervisory approval was well documented.

Documentation missing from most of the resource files included: complete application information; home studies; monitoring and reviewing of the family care home; training offered to and taken by caregivers; signed agreements with caregivers and complete file closure information.

Following the completion of the fieldwork, the practice analyst provided a list of the missing information/standards in the resource files to the social worker and Executive Director for their follow up.

b) Family Service Files

As previously stated, 1 of 1 open family service files were audited. In 2008, the agency had four open family service files. This program area showed that very little service and contact is occurring with the family. Only one applicable standard was met with compliance, with documentation that the information and

referral for voluntary services was appropriate to the service requested by the family.

Documentation missing from some of the family service files included: the initial request for service recorded on MIS/ICM; supervisory approval; involving the aboriginal community in the provision of services; a family service plan; demonstrated knowledge of community protocols; completed support service agreements and overall case documentation.

7. COMPLIANCE TO PROGRAMS AUDITED

One auditor audited the resource, family service and child service files at Heiltsuk Kaxla Child & Family Services. The 'not applicable' scores were not included in the total.

a) Compliance to Resource File Practice

The files were audited for compliance to the Aboriginal Operational and Practice Standards and Indicators, C3 Voluntary Services resources including:

- Application and orientation of caregiver;
- Home study of caregiver;
- Training of caregiver;
- Signed Agreements with caregiver;
- Providing caregiver with written information regarding child; and,
- Monitoring and reviewing homes.

Seven (7) open resource files were audited. Overall compliance to the resource standards was **27%**.

The following provides a breakdown of the compliance ratings:

AOPSI – Voluntary Services Standards	IKC
Standard 28 Supervisory Approval Required for Family Care Home Services	6 files compliant 1 file non-compliant
Standard 29 Family Care Homes – Application and Orientation	1 file compliant 3 files non-compliant 3 files not applicable

Standard 30 Home Study	2 files compliant 2 files non-compliant 3 files not applicable
Standard 31 Training of Caregivers	1 file compliant 6 files non-compliant
Standard 32 Signed Agreement with Caregivers	7 files (100%) non-compliant
Standard 33 Monitoring and Reviewing the Family Care Home	6 files (100%) non-compliant 1 file not applicable
Standard 34 Investigation of Alleged Abuse or Neglect in a Family Care Home	No files applicable
Standard 35 Quality of Care Reviews	No files applicable
Standard 36 Closure of the Family Care Home	2 files (100%) non-compliant 5 files not applicable

b) Compliance to Family Service Practice

The files were audited for compliance to the Aboriginal Operational and Practice Standards and Indicators, C3 Voluntary Services family service including:

- Information and referral for service;
- Supervisors approval regarding voluntary service;
- Family Service Plan and components for support;
- Review of Family Service Plan;
- Support Service Agreements with families;
- Voluntary and Special Needs Agreements; and,
- File Documentation.

One (1) open family service files were audited. The overall compliance to the family service standards was **13%**.

The following provides a breakdown of the compliance ratings:

AOPSI – Voluntary Services Standards	IKC
Standard 1 Receiving Requests for Services	1 file (100%) non-compliant
Standard 2 Supervisory Approval Required for	1file (100%) non-compliant

Voluntary Services	
Standard 3 Information and Referral for Voluntary Services	1file (100%) compliant
Standard 4 Involving the Aboriginal community in the Provision of Services	1 files(100%) non-compliant
Standard 5 Family Service Plan Requirements and Support Services, Voluntary Care and Special Needs Agreements	1 file (100%) non-compliant
Standard 6 Support Service Agreements	1 file (100%) non- compliant
Standard 7 Voluntary Care Agreements	No files applicable
Standard 8 Special Needs Agreement	No files applicable
Standard 9 Case Documentation	1 file (100%) non-compliant
Standard 24 Transferring Voluntary Services Files	No files applicable
Standard 26 Closing Voluntary Services Files	No files applicable
Standard 27 Voluntary Services Protocols	1 file (100%) non-compliant

8. Action Plan:

On June 12, 2013, the following action plan was developed in collaboration between Heiltsuk Kaxla Child & Family Services Society and MCFD Office of the Provincial Director of Child Welfare & Aboriginal Services:

Actions	Person Responsible	Completion date	Actions taken to date
<p><u>Resources:</u></p> <p>1. Review resource files for required documentation and identify documentation to be completed</p>	Heather Lacey, Executive Director	<p>August 1, 2013</p> <p>Complete</p>	<ul style="list-style-type: none"> • The contract for the RE SW has concluded and the delegated ED is doing the RE work until a SW is hired. • ED has reviewed resource files and identified required documentation.

			<ul style="list-style-type: none"> • C3 (resources) support and mentorship to ED provided through clinical supervision with Mike Stockdale as per the approval of the plan by Jane Rousseau @ Ab. Services. Note this mentoring plan was for 6 months ending August 30th 2013.
<p>2. Complete required documentation including application information; monitoring and reviewing of the family care home, training offered to and taken by caregivers, signed agreements with caregivers and complete file closure information on all resource files.</p>	<p>Heather Lacey, Executive Director</p>	<p>September 30, 2013</p>	<ul style="list-style-type: none"> • The ED is in the process of updating the resource files with required documentation and entering in ICM. This action item should be completed by September 30th target date. • The ED is ensuring contact with caregivers is occurring. <ul style="list-style-type: none"> • The ED has connected with EDs Wendy White (Namgis) and received information on Namgis foster care program <ul style="list-style-type: none"> • The ED has Jeff Kizuk (Usma) who has offered to help with the agency's resource program. • C3 (resources) support and mentorship to ED provided through clinical supervision with Mike Stockdale

			as per the approval of the plan by Jane Rousseau @ Ab. Services. Note this mentoring plan was for 6 months ending August 30th
3. Determine which home study tool will be used for ongoing home studies conducted by the agency (NOTE: excluding EFP studies).	Heather Lacey, Executive Director	August 1, 2013 Complete	<ul style="list-style-type: none"> The agency will be utilizing SAFE home study protocol. The ED attended safe training and the safe supervisor training August 20-22, 2013. The ED will provide Aboriginal Services with certificate of participation as confirmation.
<u>Family Service:</u>			
1. Review family service file for required documentation and identify documentation to be completed.	Heather Lacey, Executive Director	August 1, 2013 Complete	<ul style="list-style-type: none"> The 1 FS file has been reviewed and updated The ED is opening service requests and downloading the documentation.
2. Complete required documentation on Voluntary Family Support Service file including: supervisory approval for voluntary services;	Heather Lacey, Executive Director	August 15, 2013 Complete	<ul style="list-style-type: none"> The ED has reviewed and completed required FS documentation in ICM. C3 (voluntary support services) support and mentorship to ED provided through clinical supervision

<p>involving the Aboriginal community in the provision of services; family service plan requirements; support service agreement and case documentation.</p>			<p>with Mike Stockdale as per the approval of the plan by Jane Rousseau @ Ab. Services. Note this mentoring plan was for 6 months ending August 30th 2013.</p>
<p><u>Re-audit:</u> Re-audit of the FS and RE files within six months.</p>	<p>Alex Scheiber, Deputy Director, MCFD QA & Child Safety</p>	<p>January 2014</p>	<ul style="list-style-type: none"> • A re-audit of the FS & RE files will occur to ensure compliance with C3 standards
<p><u>ICM:</u> Secure and deliver ICM training specific for C3 delegated agency (e.g. service requests, documentation, attachments).</p>	<p>Jacqueline Moisan, MCFD Practice Analyst</p>	<p>October 30, 2013</p>	<ul style="list-style-type: none"> • NOTE: this action item timeline bumped back to allow time for agency to hire social work staff and receive ICM training. The agency had recruited a social worker and sent off to core training. This person took a position with MCFD and the agency has recommenced recruitment process. The ED is hopeful the agency will have a social worker hired by mid-October 2013.

			<ul style="list-style-type: none">• The agency secured 3 hours of MIS and ICM training through Gateway. The ED received this training on July 29 2013 and now accessing MIS and ICM and basic functioning. More training will be required for ED and agency social work staff (to be hired).
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PRACTICE AUDIT SIGNATURE PAGE: HEILTSUK KAXLA CHILD & FAMILY SERVICES SOCIETY

The following recommendations have been added by the Deputy Director of Child Welfare:



Alex Scheiber
Deputy Director of Child Welfare, MCFD

Date: September 9, 2013