



News Release

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REPRESENTATIVE'S REPORT CALLS FOR OVERHAUL OF SYSTEM TO PROTECT AND SUPPORT CHILDREN WITH SPECIAL NEEDS

VICTORIA – The ordeal of one boy and his family shows that British Columbia's system of services to support children with complex needs must be overhauled, says an investigative report released today by the Representative for Children and Youth.

The report details the events that led to the removal of “Charlie” from his mother's care in 2016 after police found him alone, screaming, severely underweight and in a state of profound neglect. The 12-year-old boy, who has autism and is non-verbal, had endured years of malnutrition and neglect, inadequate services to address his special needs, and little education or socialization.

Alone and Afraid: Lessons learned from the ordeal of a child with special needs and his family, shows that Charlie reached this shocking state despite multiple interactions with the Ministry of Children and Family Development (MCFD) and both the health and school systems over nearly 10 years. The report makes 11 total recommendations to three government ministries, including the call for an overhaul of MCFD's Children and Youth with Special Needs (CYSN) services.

“Charlie and his family were extremely vulnerable in a number of ways, but the broader system of care never seemed to grasp just how vulnerable,” said Representative Jennifer Charlesworth. “Consequently, this family never received consistent supports needed to ensure Charlie's safety, development, health and education, and he suffered ongoing trauma no child should endure.”

Despite eight separate child protection reports received by MCFD about Charlie, the ministry consistently did not comply with standards and no MCFD social worker ever laid eyes on the boy as part of a child protection response until the day he was removed from his mother's care. Even when Charlie was seen by social workers, medical and educational professionals, his needs were often not fully recognized or addressed, and these professionals did not consistently communicate effectively about him. However, this report does not place blame on individual professionals in Charlie's case, but rather on the systems that can leave professionals unable to respond to the needs of children and families due to workload and caseload pressures.

Charlie showed signs of significant developmental delay before he was three but was not diagnosed with autism spectrum disorder until well after his sixth birthday, a delay that

prevented him from receiving early intervention funding that could have made a difference in his development. When his mother did not access funding available to Charlie after his autism diagnosis, MCFD had no alert mechanism to identify that and enable follow-up with her.

During two lengthy hospital stays, Charlie received a plethora of services and attention and his condition improved. But during periods back at home, he seemed to go largely unseen and there was little follow-up when his mother did not follow through with requested testing or appointments for her son. Charlie's mother clearly struggled to care for his complex needs – while living in poverty and dealing with her own mental health issues and other challenges – but she never received much-needed respite from MCFD that could have reduced the pressure.

After some initial success at school, where he was well-supported, Charlie's attendance fell off dramatically. He missed more than 100 days over two school years before his mother withdrew him in 2011. Concerns voiced to MCFD about his chronic absences and whether he was receiving any education after his withdrawal were not acted upon. His departure from school began a lengthy period in which Charlie was essentially out of sight. Despite MCFD having an open CYSN file on the family, they received little in the way of services.

“Charlie seemed to drop off the radar during this period when it should have been clear that he and his family still needed help,” Charlesworth said. “This led to the state of neglect in which he was found – a situation that was entirely preventable had the right supports been in place. We need to ensure that lessons are learned from his story and improvements are made, because there remain many other families out there with complex needs that the system struggles to support.”

The report recommends that MCFD work with the Ministries of Health and Education to develop an integrated service delivery model that enables appropriate information-sharing between service providers, including the option for children receiving special needs supports through MCFD to be supported by a case coordinator responsible for navigating services.

The Representative also calls on Health and MCFD to collaboratively develop a plan to ensure early identification, timely assessment and appropriate supports for children under six with signs of developmental delay, and for Health to incrementally decrease the wait times for assessments of autism and complex behavioural developmental conditions.

Among other recommendations, the Representative calls for MCFD to take immediate steps to reduce wait lists for respite and to monitor and follow up with families not using autism funding; develop a protocol with the Ministry of Education to address chronic, unexplained school absences; ensure social workers lay eyes on children and adhere to timelines during child protection responses; make children and youth with special needs training mandatory for child protection staff; and ensure identification and involvement of an Indigenous child's family, community and culture is made at first point of contact with any MCFD service and is ongoing.

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