



# **Much More than Paperwork Proper Planning Essential to Better Lives for B.C.'s Children in Care**

**A Representative's Audit on Plans of Care  
March 2013**

**This is a summary of the full report.  
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REPRESENTATIVE FOR  
CHILDREN AND YOUTH

## Executive Summary

This report presents the findings of an audit on the plans of care for children and youth who are in the long-term care of the Province of British Columbia.

On average, there are nearly 4,500 such children in B.C. at any one time. They have come into continuing care because their parents have been unable to provide a safe home. Most of them have experienced abuse, neglect and other traumatic circumstances that have increased their vulnerability. For these children, the Province has assumed the role of prudent parent, and its child welfare system has a duty to provide focused and comprehensive care and support to improve their opportunities and outcomes.

The Ministry of Children and Family Development (MCFD) is responsible for planning for the children in its care and must fulfil this responsibility in order to ensure the most positive outcomes possible. This planning is neither an option nor a luxury, although the audit shows that it often seems to be treated as both by a ministry continually preoccupied with crisis management.

The audit examined the lives of 100 children and youth in continuing care as of March 31, 2011. These children's files were randomly selected from MCFD regions and delegated Aboriginal Agency (DAA) offices across the province.

A review of all ministry planning tools, policies, guidelines and standards was also conducted in order to understand the assessment and planning process for developing a Comprehensive Plan of Care (CPOC), mandated for each child in care by ministry standards.

Overall, the Representative's audit found a disturbingly low level of compliance with practice standards for assessment and planning. Of the 100 children's files examined, only five included CPOCs that were fully compliant with ministry standards. Only 52 of the children had CPOCs that could be considered current.

The audit found scattered and ineffective documentation of planning for these children and youth, as well as evidence of a lack of understanding about the importance and purpose of comprehensive and regular planning and intervention for vulnerable children and youth.

Of the 100 children whose files were audited, 60 were identified as Aboriginal. But only three of those children had a cultural plan – a critical element in ensuring children remain connected to their traditions and cultural heritage and required by the *Child, Family and Community Service Act*. The number of children in the audit with an out-of-date CPOC was also much higher among Aboriginal children (27) compared to non-Aboriginal children (13).

There is only one word to describe the findings of this audit – unacceptable.

## Executive Summary

It is tempting for some to dismiss CPOCs as bureaucratic paperwork. But for children and youth in care, these documents and the process behind them are required to form an evolving life plan that includes a thorough assessment of their state when they arrive in care, as well as detailed, up-to-date documentation about how the physical, emotional, mental health or other challenges they face will be addressed by those supporting them. CPOCs are essential to the well-being of these children.

Plans of care are intended to be outcome-focused and developed in collaboration with the child, family, extended family, and the team of professionals supporting the child. These CPOCs should be reviewed regularly by the social worker and the child and be updated to reflect the current needs and goals of the child at each review. Ministry standards require that each plan be reviewed every 90 days, and more frequently under certain circumstances, with a comprehensive review done every six months.

In eight of the 100 children's files audited, there was no plan of care found. In the case of the other children, even when there was a plan of care, it was often out of date, incomplete, or written more like a status report than a properly documented assessment accompanied by a focused and accountable plan of action. The audit found that 92 of the 100 children and youth whose case files were audited included a CPOC, but only 52 were considered current and only five of the plans met both the 90-day and six-month review standards.

The ministry's own internal audit results also show historically low compliance by social workers in completing and regularly reviewing plans of care. The Representative had hoped to see improvements regarding this standard, since the ministry has long been aware that compliance is an issue. However, there has been no focused strategy or leadership to improve compliance in this important area. In addition, in recent years the ministry has reduced the number of practice audits it conducts annually, a troubling fact given the lack of any improvement.

When interviewed as part of the Representative's audit, social workers said their challenges include having enough time to transfer the information from case notes to CPOCs, and finding the time to summarize notes. Workers indicated that often their caseloads and the crisis aspect of their work leads to the completion of CPOCs being put on hold. The majority of social workers and team leaders stated that CPOCs become a high priority only when an audit is being done.

Most social workers said they relied on memory and notes to monitor assessment and planning, and few kept a formal record that reflected the intended structure and organization of a CPOC. The most common outcomes workers considered as indicative of well-being included the stability of the placement, school success, connection to family and adoption.

The majority of CPOC documents contained little evidence that the progress of services and interventions provided was being tracked in order to determine if the identified needs of the child were being met. For example, nearly half of the children and youth whose files were audited had been diagnosed with a mental health issue or special need, yet many of those children and youth did not have a Child and Youth Mental Health (CYMH) worker or a Child and Youth with Special Needs (CYSN) worker in place.

The audit findings also showed very little participation in plans by the child or youth, caregiver, birth and extended family or any other significant people in the child or youth's life.

The Representative believes that the ministry's existing practice standards require a close examination. It is unlikely that social workers do not want to meet standards; rather it is likely that they simply feel they cannot meet them or fail to see the relevance of them. If it is agreed that certain core standards (new or existing) are reasonable, practical, relevant and achievable, then the ministry must seriously consider what the consequences will be if standards are not met and hold regional managers and social workers accountable for ensuring that they are.

As part of a review of standards, the ministry must also ensure that social workers receive training on how to conduct proper assessment and planning, so that they understand the importance of developing meaningful, relevant and accountable plans for the children and youth in their care.

More work must be done to help support social workers to learn how to develop effective cultural plans for Aboriginal children in care. Of the three cultural plans that did exist among the 60 Aboriginal children whose files were audited, not one was up to date. The ministry must work to develop tools and resources to assist workers to help preserve the cultural identity of all Aboriginal children in care, and work with the DAAs and Aboriginal communities to ensure that these tools and resources are culturally appropriate.

The recommendations in this report are focused on concrete and practical changes that will impact the lives of children and youth in care in significant and positive ways. The Province has a responsibility to those vulnerable young people to ensure accurate and comprehensive record-keeping, with attention to detail that tells the story of each child and lays out a plan with their goals, the supports required to achieve them and the actions necessary to implement and monitor that plan.

## Findings Summary

The ministry has a responsibility to ensure that every child in care in B.C. has a plan of care. The onus is on the Province as the parent to provide a better environment than the one from which the child has been removed and to ensure the child is well supported and provided with opportunities to achieve life goals.

The CPOC was meant to be developed and carried out in a collaborative way with key professionals, caregivers, family and the child or youth. This process requires time and resources across various disciplines and sectors as well as the willingness of all concerned to collaborate.

The CPOC is the planning tool used by the ministry. However, during the last 10 years, this tool has often been viewed as an administrative paperwork exercise rather than an effective and comprehensive planning device that helps the most vulnerable children and youth to achieve their full potential.

The CPOC planning tool is meant to be a living document, in which those involved in the child's life are accountable for supporting the needs, rights and interests of that child. The acronym "CPOC" has a negative connotation with both ministry staff and children and youth in care, because the ministry has allowed assessment and planning to become secondary – a task at the side of someone's desk that is considered a low priority.

The Representative's audit found that updated CPOCs were typically found only in ministry offices that were undergoing a practice audit. It found CPOCs with no details about what had been approved and not signed off by a supervisor or the child. It found CPOCs without a thorough assessment of the child and with targets that were described as "ongoing," without clear outcomes or accountabilities. These may be the minimum standards that have been accepted by the ministry, but they are not acceptable to the Representative and they should not be acceptable to British Columbians.

## The Audit's Main Findings

### Overall Finding

The results of this audit show that the ministry consistently failed in its role as prudent parent to properly plan for the children in its care. Only five of 100 files audited by the Representative included CPOCs that could be considered fully compliant with standards. This is a dismal performance by the ministry, especially when its own internal audits have already revealed poor compliance for many years. Children in care deserve better and the ministry must take immediate steps to ensure improvement in this vital area.

## **MCFD's Accountability on Meeting CPOC Standards**

### **Low ministry compliance in ensuring children in continuing custody have an active plan of care**

This means that a meaningful assessment is not being done for these children, goals and objectives have not been established and services and interventions to meet their needs are not being identified. Many of these children had at least one plan of care in their case file. Without anyone regularly using and updating those plans, insufficient efforts are being made to address the needs, rights and interests of many of the most vulnerable children and youth in our province.

As the ministry has long been aware that low compliance has been an issue, the Representative had hoped to see improvements through this audit. The Representative is deeply concerned to instead find continued low compliance.

### **Lack of accountability by management and supervisors to meet compliance in assessment and planning**

Why is compliance with standards for care planning so low? It is unlikely that managers and supervisors in the ministry or staff of agencies are wilfully non-compliant or seeking to flaunt policy or the law. It is more likely that they find themselves in circumstances where they are lacking the tools, the resources, the training and the time to do what is expected of them. And often they find themselves confounded with a myriad of rules, tools, guides and advice, all seemingly constantly changing, which tends to paralyze rather than encourage appropriate practice. A social worker searching through random files for an approved CPOC is not an effective way to “self-train” on how to complete one.

It appears that when ministry offices anticipate an audit, CPOCs are hastily completed and therefore not meaningful. Teams Leaders and supervisors sign off on poorly written CPOCs to meet the demands of the audit. When these plans are approved, they are the ones that set the level of standard in that office.

### **Standards exist but are not consistently applied and enforced in practice**

Existing standards need a close examination. Each standard needs to be assessed to determine if it is practical, relevant and achievable. It is doubtful that social workers generally do not want to meet standards; rather it is likely that they simply feel they cannot meet them or fail to see the relevance of them. If it is agreed that certain core standards (new or existing) are reasonable, practical, relevant and achievable, then the ministry needs to seriously consider what the consequences will be if standards are not met and hold regions and social workers accountable.

### **No training on CPOC tools**

Workers and team leaders interviewed stated that they had received little or no training on the CPOC process and tools. Most indicated that some training would be useful. The provision of such training would not only bolster skill levels but would also send a strong message about the importance of the CPOC process in practice.

## **MCFD's CPOC Process and Practice**

### **Lack of regular review to meet CIC Standard 11**

For those children whose files do include an active plan, workers continue to struggle to meet the ministry's own standard of reviewing the CPOC every 90 days and conducting a comprehensive review every six months. The intent of these reviews is to measure the progress in achieving goals set out for the child or youth. Social work is a complex job and requires workers to manage a number of competing demands on their time. The ministry must recognize that reviewing a plan of care is an important task, not just for the ministry, but for the child. It needs to be an integral part of case management and practice. The Representative is extremely concerned that compliance in reviewing CPOCs is so low, especially after repeated ministry audits have shown similar results.

### **CPOCs resemble status reports, lack plan for intervention**

The majority of the narrative assessments that were reviewed varied significantly in terms of the type of information recorded and the level of detail. Some workers wrote a considerable amount of information, while others provided very little to no information. It is important to understand that the CPOC is intended to be an assessment and planning tool, meaning the information that is collected must be analyzed to form an assessment. A record without analysis is simply a status report or running record.

The majority of CPOCs recorded what was happening and did not move beyond that to consider why it was happening. When issues or concerns are identified for the child or youth, the worker should consider if this is an identified need that requires a service or intervention. If so, then a plan of intervention should be articulated so that there is a clear focus.

### **Poorly written goals and objectives in the plan of care with no measurable outcomes**

Many CPOCs had poorly written goals and objectives with no measurable outcomes. It was evident that workers struggled with defining what is meant by a goal and objective and what tasks are connected to them.

It is essential that the ministry provide opportunities for training and practice related to writing meaningful goals, objectives and having outcomes that are measurable. The ministry's child welfare training manual has a section on developing a CPOC.

### **No systems to track progress when care planning for children in care**

Most social workers relied on memory and notes to monitor assessment and planning, and few kept a formal record that reflected the domain structure of the CPOC. The concept of tracking outcomes for children in care seemed to surprise a number of social workers who were interviewed; some stated they would compare the current CPOC with the previous one.

The most common outcomes workers considered as indicative that the child was doing well included the stability of the placement, school success, connection to family and adoption. The majority of CPOC documents had very little evidence of tracking the progress of the services and interventions to determine if the identified needs of the child were being met. It was difficult to determine what activities occurred during the year (or years), as CPOCs were not being reviewed on a regular basis.

### **Lack of permanency planning for children in care**

The CPOC requires consideration of eight key domains but first and usually most urgent is the child's placement. It is critical that the child has an opportunity to live in a caring, stable environment with supports that match his or her needs. However, it is too easy for a successful placement to be considered a positive outcome for the child without sufficient and ongoing attention to all the other domains. The comprehensive nature of the plan of care is what contributes to a child's overall well-being; a stable placement is necessary but not sufficient on its own.

The child or youth's health, education, identity/culture/religion, family and social relationships, social presentation, emotional and behavioural development and self-care skills all need as much attention as the question of where the child will live. The ministry must pay more attention to the child's permanency plan by incorporating it into the CPOC with details about what that plan is, whether a concurrent plan is being considered and what progress has been made to achieve timely permanence. Permanency planning in a CPOC cannot simply be captured in a "tick box" for independence, return to parent or adoption with no concrete details on how to achieve the desired outcome.

### **Lack of cultural plans for Aboriginal children and youth in care**

The Representative finds it very concerning to discover such low compliance when it comes to cultural planning for Aboriginal children in care, especially when more than 50 per cent of the children in care in B.C. are Aboriginal.

Aboriginal children need the opportunity to realize the significance of who they are and where they come from – to understand what their culture and traditions are, what was lost and how, and what is possible now and in the future for someone who is Aboriginal. When Aboriginal children live in non-Aboriginal foster homes far from their family and community, this opportunity is often lost.

Cultural plans have been a requirement in the ministry for some time. However, it is evident that more work needs to be done to help support workers to learn how to develop effective cultural plans. Aboriginal communities and DAAs need to work together to develop tools and resources to assist workers, to help preserve the cultural identity for all Aboriginal children in care.

It was not a surprise that nearly all staff found the identity, culture and religion domain the most difficult to assess, plan and act on. This is an especially critical domain since, as has been documented many times and across Canada, Aboriginal children and youth are vastly over-represented among children in care. They are often the majority of children in care and generally spend longer periods in care than non-Aboriginal children.

Cultural planning is about maintaining cultural connections for children who may be from a wide range of diverse cultural and ethnic populations. Social workers are expected to have the capacity to understand the cultural diversity of the children and families they serve. This is a challenge for workers, who may have a diverse range of populations in their caseloads.



### **Lack of meaningful assessments and planning – majority of CPOCs approved by supervisors regardless of quality**

There was a wide variation in the quality of the CPOCs compiled – both the current ones and those that are out of date. The role of the supervisor is critical if CPOCs are to be effective. Supervisors and managers must be supportive of the CPOC approach and have experience and training in completing plans of care and writing meaningful goals and objectives.

Many of the CPOCs that were reviewed contained repeated information from previous plans with no progress tracking, intervention plans with no meaningful goals, and objectives and domains with little or no details. Some plans identified areas of concern for the child, but provided no means to address them. Nevertheless, these plans had supervisor's signatures as approved plans.

Supervisors must ensure that all sections of a CPOC are complete, that the plan has clear timelines for completion, and that the child's care team discusses the assessment with the worker and those who contributed to the plan. Supervisors must include CPOCs as a regular agenda item with teams, create reminders for staff and offer regular training.

### **Lack of participation in the development and review process of the plan of care**

The development and review of the plan of care should include the child, the child's family (whenever possible), the caregiver and other persons or service providers involved with the child and the child's family. Without these key participants, the plan cannot ensure that all those involved are aware of the child's needs, or what their role is in supporting those needs.

Young people in care have a right to participate in their plan of care, a right to see their plan of care and a right to be informed about the decisions that affect them.

### **Lack of transitional planning for youth leaving care**

It is imperative that social workers not give up on young, high-risk people who are difficult to serve or because they are 17 or 18 and will soon transition out of the child welfare system. Planning for transition or independence must start in earnest when the youth is age 15 or 16. Without adequate life skills and support, these vulnerable young people are often doomed to fail as adults and may ultimately be swallowed up by adult social and penal systems or end up on the streets.

Most versions of the CPOC reviewed in this audit do not lend themselves to transitional planning as they do not ask the right questions and are not youth-friendly. A number of alternative tools, such as the YIP and the PFI tools, are found more useful by youth and social workers. These tools should be readily available to all social workers to be employed as part of the CPOC process for this transition work.

**No formal plan of care meetings**

Formal plan of care meetings are part of cooperative planning. Cooperative planning is integral to the CPOC process. It was never intended that workers would do assessments and complete CPOCs in isolation. These functions were meant to be shared among various members of a care team according to each team member's role, knowledge and expertise. Team members should include the child, the child's family (whenever possible), the caregiver and other people or service providers involved with the child and the child's family. In the case of Aboriginal children, this team must also include an Aboriginal adult from the appropriate band or community.

## Analysis and Recommendations

The Representative's findings in this audit are clear: MCFD is failing to meet its own established planning standards and, more pointedly, it is not coming close to satisfying the reasonable standard of the "prudent parent" in caring for children who are in continuing custody.

Fulfilling the role of prudent parent means making careful and sensible decisions that maintain a child's health, safety, well-being, and interests. The Representative believes that the parenting standard should always be whether the level of care and concern for a child in government care is equivalent to that of a child living in a family with a prudent and kind parent who wants a child to develop and become a competent adult, supported to realize his or her dreams and full potential. In short, government should be providing the kind of parenting most British Columbians would want for their own children.

For MCFD to achieve this, it must demonstrate that level of commitment to planning for these children, and not a lesser standard when government has the parenting obligation.

In fact, for children in care, the Province has an extra duty that requires accurate and comprehensive record-keeping, with the attention to detail that tells the story of the child and lays out a plan with his or her goals for the future and the supports required to achieve them.

Good planning should help catch issues early, find suitable supports, and monitor progress through a meaningful relationship with a child who has a voice in his or her own life circumstances. Prudent planning includes respecting and providing for children's unique circumstances, such as Aboriginal children in care who must be connected to their languages, customs and traditions, children with developmental challenges and those with special needs. We must face these needs and assist the children to be supported through a positive childhood and adolescence, connected to many committed and involved adults in their lives and in their communities.

The Representative notes that the results of this audit, as well as some other more detailed investigations and reports undertaken recently, suggest there is much to improve upon. For some time now, insufficient attention and focus has been placed on proactively planning and supporting children in care. In many instances, the crisis-management nature of child welfare has infringed upon the time that workers require to spend with children in care and their families, to build the meaningful relationships needed to fully understand their needs and to properly support and plan for them.

Other jurisdictions have been where B.C. is today. They have engaged in improvement projects to meet accountabilities and have made positive change by showing renewed commitment to children in care, or "looked after" children. They appear to have made the change by investing in their projects through additional resources, clearer objectives around supporting children and youth and taking their rights seriously, as well as stronger accountability to report on the actual work they are doing with those children and youth and the outcomes achieved. The Representative points to our close neighbour, Washington State, where a detailed improvement process has lifted the standard

of care and concern for children in care with a higher degree of accountability and reporting to demonstrate a positive direction of care (see *Children's Administration, Compliance Plans in Response to Braam Oversight Panel Monitoring Report 10, 2011*).

[http://www.dshs.wa.gov/ca/about/imp\\_settlement.asp](http://www.dshs.wa.gov/ca/about/imp_settlement.asp)

The Representative supports MCFD to succeed in its important mission and is convinced, through extensive consultation with direct service staff of the ministry, that such a project is overdue in B.C. It would be met with endorsement by those closest to the children and families served, who are often distressed by their lack of capacity to do the work required, or by not receiving the direction and support necessary to keep the children at the forefront. These are the staff who place an advocacy call to the Representative's Office with their concern that a child's needs and rights have been lost in practice in their region. The Representative values this concern and finds in it a deep commitment to doing the work better, in a meaningful way, that can be effective to support equal outcomes for children in care with their peers across B.C.

The recommendations to follow build on that concern and also address some more immediate issues in an effort to foster improvement on these audit results.

## Recommendations

### Adequate Resources to Support Planning for Children and Youth

#### Recommendation 1

That MCFD fully invest in the resources necessary to properly enforce its own standards, accountability and compliance with the provisions of the *Child, Family and Community Service Act* in planning for children in care so that supporting and fulfilling the needs of children and youth becomes the primary focus of the work.

#### Details

- Develop and implement a detailed resourcing plan, including additional funding and staffing support, to meet the level of practice required for improving assessment and planning.
- Increase MCFD's capacity to report regularly on measured improvements in all domains of well-being, consistent with the standards of health and education of other children and youth in B.C.

A plan to be provided to the Representative for review by Sept. 30, 2013.

## Accountability in Meeting Ministry Standards

### Recommendation 2

That senior MCFD leadership take on a more active and determined role in overseeing assessment and planning for children in care in order to demonstrate the following:

- a) Clear respect for and commitment to ensuring the recognition and support for the rights of children and youth to have a plan, be involved with and informed of that plan, enjoy a positive and meaningful relationship with a guardianship social worker, and to enjoy health, education and well-being equal to their peers in B.C., with special emphasis on meeting the service responsibilities for the unique cultural rights of Aboriginal children and youth.
- b) A strong commitment and priority to assessment and planning that is supported by management.
- c) A culture of practice that focuses on developing and sustaining "quality" plans of care as an effective response to the assessed needs of children in care.
- d) A cycle of assessment, planning, intervention and review in social work practice and supervision to meet the objectives of an improvement process.

### Details

Improvements should include:

- Development of a new case practice framework that implements regular, unannounced ministry and DAA audits to effectively assess the quality of practice, sets targets to achieve standards and promotes continuous improvement of policy, practice and standards.
- Shift in focus from the current "service coordination" culture of social work to a relationship focus that better supports children and youth and sustains meaningful involvement in their lives, as well as their involvement and input in all of the domains covered by the planning requirement.
- Development of clear expectations and standards for creating and sustaining good quality plans of care to help ensure better reported outcomes for children in care.
- Creation of a mechanism to measure and track performance against standards, with an emphasis on learning how good practice is achieved.
- Commitment to public accountability through public reporting (bi-annual) on performance in meeting ministry practice standards, including compliance in developing quality plans of care.
- Detailed annual reports or as required by/to the Representative on compliance with practice standards. Report must include a performance improvement plan to meet compliance targets and report on progress at each year.

A new accountability plan for ministry standards to be presented to the Representative by Sept. 30, 2013, and a progress report on the plan by March 31, 2014.

## Improvement in Quality of Assessment and Planning for Children and Youth in Care

### Recommendation 3

That MCFD and DAAs focus on the practice and application of assessment and planning to ensure the developmental needs of children in care are met, including the desired outcomes and expected outcomes from services. Improvements in quality will be assisted by:

- a) Clearly defined roles and responsibilities of the delegated worker, caregiver and other significant individuals who are expected to support and plan for the child in care.
- b) Policies and guidelines that describe how to create good quality care plans, including content requirements for all stages of development (infancy, early childhood, middle childhood, pre-teen, adolescence).
- c) Supervisors who ensure that effective, quality plans are developed and objectives and tasks are observable and measurable.

### Details

Improvements should include:

- Every plan of care to consider short- and long-term permanency plans with clear goals for children in care, including details of the strategies, efforts and progress made toward those goals.
- Plans of care to record information that will help the child, family, caregiver and social worker understand why decisions have been, or will be, made for the child/youth in care.
- Every child in care subject to a CCO to have a life book that is maintained and contributed to on an annual basis.
- Children and youth to be respected and engaged and their views and opinions to be considered essential aspects of the discussions and decisions about their plan of care, so they can understand the purpose of planning, and be involved in decisions that affect them as well as be supported in having a positive relationship with the adults responsible for their well-being.

A comprehensive plan should be finalized by Nov. 30, 2013 and fully implemented by March 31, 2014.

## Flexible Work Arrangements to Better Serve Children and Families

### Recommendation 4

That MCFD explore a change to core hours to meet operational requirements of ensuring a meaningful plan and relationship between social workers and children in care. Guardianship workers must be encouraged and supported to spend sufficient time with children and families on their caseloads, particularly outside of school hours for school-age children and youth, and be available at the times when a prudent parent would be focused on hearing from the child as well as ensuring that the other adults in their lives can support their needs.

#### Details

- Every child in care is seen privately by his or her worker once every 90 days as prescribed in current standards, or more frequently if necessary to sustain a meaningful relationship, such as the requirement for Aboriginal planning standards of 30 days.
- Workers have sufficient time to work in partnership with birth parents, caregivers and other relevant professionals, particularly with school and therapeutic supports the child has or requires.

A review and recommendation to be completed by Dec. 30, 2013.

## Enhanced Planning Tools and Training to Support Practice

### Recommendation 5

That the ministry and DAAs immediately begin the process of renewing planning tools and related policies and guidelines for care planning that is supported by a comprehensive training and supervision plan so that children and youth in care are better served, and more consistently supported by staff. The process requires a recommitment between management and front-line guardianship staff so that everyone can bring focus and effective improvement to the planning work, including:

- a) Social workers and supervisors to be given opportunity to contribute to the development of the assessment and planning tools and policies.
- b) Social workers and supervisors to receive training, building on the skills and competencies required for planning.

#### Details

Improvements should include:

- Review of all existing planning tools and development of standardized, consistent planning tools that are developmentally age-appropriate, child-focused and consider the needs of children and youth with special needs, mental health needs, youth transitioning to independence and Aboriginal children.
- Development of content requirements for plans of care that meet the developmental needs of children in care.
- Planning tools that track and measure progress of outcomes and services.
- Information systems that reflect and support the new assessment and planning process and tools.

A plan to be completed by Sept. 30, 2013 and revised tools by March 30, 2014.

## Cultural Planning for Aboriginal Children in Care

### Recommendation 6

That the ministry and DAAs review all cultural plans for children in care to ensure they meet legislation, ministry and agency standards. Cultural plans reflect the rights of Aboriginal children and youth to enjoy their individual rights to a safe and supported childhood and adolescence as well as their collective rights to know and understand their language, culture and family of origin, and to maintain their contact and connection to their unique cultural background.

#### Details

- Every Aboriginal child in care to have a detailed cultural plan in place by Dec. 31, 2013.
- Development of a standardized cultural planning tool to meet the needs of Aboriginal children in care. The tool must be flexible to tailor to the many different and unique customs, practices and traditions of Aboriginal people.
- Development of clear content requirements for cultural plans and provision of tools, resource materials and supervision to enable social workers to facilitate collaborative development of a cultural plan that emphasizes true cultural connections. This will require social workers to be supplied with the necessary links to Aboriginal supports that can provide competency in customs, languages, traditions and cultures. Social workers will also need to have good relationships with the range of Aboriginal communities and service providers in B.C.
- Supervisors to ensure that Aboriginal children and youth participate in discussions about their spiritual beliefs, interests and practices. Particular attention to be paid to customs that acknowledge and celebrate culture while respecting the history and experience of Aboriginal peoples, and allowing children and youth to discover the positive and essential aspects of that relationship.
- A commitment to build a culture of respect of the rights of Aboriginal children and youth and supporting them to claim their rights.

A plan to be finalized by Sept. 30, 2013 will full implementation by Dec. 31, 2013.



## Transitional Planning for Youth

### Recommendation 7

That MCFD immediately develop policies and guidelines to support youth who are transitioning out of care and consider how best to support them beyond the age of 19 given that the planning has not been adequate to date to permit smooth transitions.

#### Details

Improvements must ensure that:

- Transition to adulthood planning for all youth in care begins no later than 15 years of age.
- All youth in care are offered thorough and timely transitional planning to support and improve the outcomes for youth leaving care.
- Supervisors confirm that a thorough assessment of the youth is completed, including their state of health, continuing need for education or training, practical life skills and competencies, support that will be offered by significant people, financial resources and accommodation needs.
- Youth in care are consulted and involved in the development and decisions made in their transition plan.
- The ministry undertakes an examination of how the transition process could be extended beyond 19 for those youth in care for whom planning has not occurred in a timely way, or for whom an extended period of support will be necessary.

A plan to be finalized by Oct. 31, 2013 and a progress report to the Representative by March 31, 2014.

## Educational Planning for Children and Youth in Care

### Recommendation 8

That MCFD, working in collaboration with the Ministry of Education promote and support educational achievement, as an integral part of the plan of care, to ensure that children and youth in care have opportunities to achieve educational outcomes comparable to other children in the community. This means that:

- a) Educational goals are not set at a lower standard than those of other children.
- b) All school and educational information is up to date for all school-age children and youth in care.
- c) Children in care are supported to be achieving at grade level and receive additional supports should they not be meeting expectations, especially in the core areas of literacy and numeracy.
- d) Each child in care to have opportunities to access educational opportunities at all ages of development, including young children.

### Details

Improvements to include:

- Children in care acquire the fundamental skill sets required for their developmental needs.
- All children subject to a CCO are on track to meet the Provincial requirements for high school graduation.
- School assessments, IEPs and learning plans are developed and regularly updated, when needed.
- Social worker, parents, and caregivers collaborate with educators to review and discuss learning outcomes, goals, educational achievement and progress of learning plans, on a regular basis, with particular emphasis during transition periods such as movement to middle school and high school.

A plan with targeted strategies for improvement should be finalized by Dec. 30, 2013.

## Reviewing the Findings of this Audit

### Recommendation 9

That the Public Guardian and Trustee of British Columbia, as Guardian of the Estate for children in continuing custody, review this audit's findings to assess whether the failure to adequately plan for children and youth in care presents potential or real risk of harm to these children, or sub-groups of these children and youth.

#### Details

The assessment might evaluate and consider the impact of the following factors:

- Placement instability and frequent moves due to inadequate planning or poor match of resources with needs of the child.
- Lack of cultural planning to meet the rights of Aboriginal children and youth.
- Unmet special needs that might impact the development of the child.
- Unmet physical or mental health needs that might negatively impact the behaviour of the child and their emotional and social development.
- Lack of educational planning and involvement to support equal achievement to their peers not in care.

A final report to the Representative by Dec. 30, 2013.

## Legislative Changes

### Recommendation 10

That the ministry review the *Child, Family and Community Service Act* to propose a regulatory framework that confers upon the Provincial Director of Child Welfare a duty to ensure that every child in care has a proper plan of care that complies with prescribed regulations of care planning. Section 70 of the Act could be considered for an improvement process, and the Representative recommends a plan for strengthening the obligation to plan and uphold the rights of children in care. This longer-term project should not be an impediment to immediate improvements.

#### Details

- Begin a discussion of how to engage children and youth in a renewal of section 70 of the *CFCS Act*.
- Work with the Representative's Office to engage youth transitioning out of care to understand whether their needs have been met and steps required to improve their life opportunities.

Legislative changes to be made no later than March 31, 2014.

## Conclusion

Each of the recommendations in this report is based on the concept that the B.C. government, as the legal parent, must ensure that accurate and comprehensive plans are developed and maintained for each child and youth in its care. Government is expected to ensure that these plans are regularly updated, living documents that guide the supports, interventions and planning necessary for success in life. Anything less than that is a dereliction of its duty to protect society's most vulnerable.

Unfortunately, the Province has not been living up to that key responsibility. This audit has revealed disturbingly low compliance with MCFD's own standards for assessing and implementing plans of care. The Representative's audit is certainly not the first time this critical shortcoming has been raised. The ministry's own internal audits have long revealed low compliance when it comes to this critical work, yet proper planning for these children is still not treated as a priority.

The status quo is unacceptable and is a clear violation of the rights of B.C. children in care. For these children, such plans are not simply bureaucratic paperwork. They represent the history and forward-looking blueprints of their young lives.

These plans must be developed with attention, rigour and with the full participation of those whose lives they are directly affecting. They should accurately reflect the goals and dreams of these children, and clearly show how these goals and dreams will be achieved.

Children and youth in care want meaningful planning that will help them overcome the challenges they face and build the resilience and life skills they need to be successful, to finish school and to move on to productive and positive adult lives.

The Representative believes that front-line social workers want the same outcomes and are committed to helping children in care to achieve them. But they must be properly trained, supported and resourced by the ministry in order to be able to complete and maintain the kind of comprehensive planning that can help create better opportunities for these children.

The Representative expects that MCFD will move to implement the recommendations of this report. This office will continue to monitor the ministry's progress on this file, to ensure that planning for children is made a firm priority by MCFD leadership, rather than the afterthought it has too often become in the past.

## Contact Information

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