

# **FIRST NATIONS DIRECTOR CASE PRACTICE AUDIT REPORT**

## **Nezul Be Hunuyeh Child & Family Services Society (IQE)**

Fieldwork completed July 10, 2009

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**1. PURPOSE**

The purpose of the audit is to improve and support child service, guardianship, family service and investigative practice. 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 first audit for the agency.

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.

Aboriginal Policy and Service Support is conducting the audit using the Aboriginal Practice Audit Tool. Audits of delegated agencies providing child protection, guardianship, family services and resources for children in care will be conducted according to a three-year cycle.

**2. METHODOLOGY**

This was a practice audit involving the Aboriginal Policy and Service Support Team of the Ministry of Children and Family Development (MCFD). There was one practice auditor from MCFD. This was the first practice audit for this agency.

One auditor conducted field work from July 6, 2009 to July 10, 2009. 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. There were a total of 11 open Family Service files and 8 open Resource files at the time of the audit. Seven of the Family Service files (54%) and two (25%) of the Resource files were audited. Four of the Family Service files were not audited as three had been transferred to the agency within the last three months and one had been transferred to MCFD for child protection follow-up. The remaining six resource files were open as pending files and were reviewed but not audited as they did not have complete file information on them.

Upon arrival at the agency, the auditor met with the Executive Director, the Supervisor of Delegated Services (Supervisor) and all the agency staff where the details of the audit were discussed. The auditor was available to answer any questions from staff that arose during the audit process. At the completion of the audit, the auditor met with the Executive Director and the Supervisor to discuss the preliminary findings of the audit. At this meeting, the next steps of the audit process were discussed including the report and the recommendations process.

### **3. AGENCY OVERVIEW**

#### **a) Delegation**

Nezul Be Hunuyeh Child and Family Services Society 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.

Nezul Be Hunuyeh Child and Family Services Society signed their initial agreement in 2002 and in 2009, an extension of the Delegation Enabling Agreement was signed confirming the agency's authority to provide child welfare services. This agreement expires March 31, 2014.

At the time of the practice audit, the agency also underwent a C4 Guardianship Operational Readiness Assessment. The agency was successful in moving to C4 Guardianship delegation.

The vision of the Nezul Be Hunuyeh Child and Family Services Society is that family life in their community will be restored as the primary focus, that the community is a place where children will learn and be nurtured through positive role modeling by community members, community leaders and that they will be guided by the teaching of our elders. Children will be empowered to carry forward the tradition of caring into the next generation.

#### **b) Demographics**

Nezul Be Hunuyeh Child and Family Services Society serves Nak'azdli First Nation and Tl'azt'en First Nation. The agency office is located in the town of Fort St. James, adjacent to the community of Nak'azdli. Tl'azt'en First Nation is comprised of three communities – Binche, Tache and Middle River which are

approximately 30 to 90 minutes from Fort St. James. All communities have good road access and are well maintained throughout the year.

The population of the communities total approximately 3200 people (Source: Nezul Be Hunuyeh Child and Family Services Society). Services available in Fort St. James include the RCMP, a small hospital and medical health clinic, School District #91 with K-12 programs, Nechako Valley Community Services Society which offers a number of community services, Northern Interior Health Unit and Fireweed Women's Shelter.

### **c) Professional Staff Complement**

At the time of the audit the agency staff consisted of six delegated social workers including the Executive Director and the Supervisor, three family preservation workers, three Special Services to Children workers, a Family Group Conference Coordinator and a team assistant for the delegated services. The agency has recently reached full staff capacity. In anticipation of their move to C4 Guardianship delegation, the agency recently contracted a Nak'azdli community member to develop a cultural training program for non-aboriginal foster parents.

The Executive Director and the Supervisor have spent most of the past year on developing and updating policies and protocols in anticipation of the agency taking on C4 Guardianship delegation. The Supervisor has also implemented a filing system, file tracking procedures and the transfer of the family service files from MCFD in 2008.

### **d) Supervision and Consultation**

The Supervisor is the main supervisor for all the delegated staff and the Family Group Conference Coordinator. He has an open door policy for all the delegated staff and all staff indicated that they are able to access supervision easily. In addition to the open door policy, the Supervisor has bi-weekly team meeting where all staff from the various programs attend and provide general reports on their program and communities. No specific case discussion occurs at this meeting. Following the team meeting, the social workers have scheduled case supervision time with the Supervisor where cases are reviewed and recordings are submitted for review and sign off. All the delegated staff indicated that they are very satisfied with the level of supervision they are receiving and acknowledge the practice experience and knowledge the Supervisor has brought to the agency. The Executive Director provides back fill for the Supervisor when he is out of the office for longer periods of time such as holidays.

The Executive Director has recently appointed one of the Child & Family Service Worker as the Supervisor for the current non-delegated staff in the Family Preservation program and Support Services to Children program. Prior to this, they were being supervised by the Supervisor of Delegated Services.

#### **4. STRENGTHS OF THE AGENCY**

One of the biggest strengths of the agency is that the children and families being served by the agency are receiving community based services, provided by skilled community professionals. There is a strong commitment by the staff in the agency to serve the community in whatever capacity they can. The agency places a high priority on community development and staff are expected to attend community events and be present in the community outside of work related activities.

Another strength of the agency is that the Executive Director and the delegated staff track approximately one hundred children in care from around the province from the two communities that they serve. The social workers maintain files for each child and document their cultural plan and any other contact they may have regarding that child. While these “shadow” files are not registered on MIS, the agency believes that these children are important to track and ensure they know where they come from. The agency was in the process of planning a large homecoming celebration for these children in care, their foster parents and social workers for August 2009.

Finally, a strength of the agency is the high level of professionalism and practice displayed by all the agency staff. Agency management has worked very hard over the past year to recruit skilled staff and develop the agency’s social work practice which will prepare them for future, higher levels of delegation. This practice is obvious in the high level of documentation on the files.

The auditor identified several strengths of the agency and of the agency’s practice over the course of the audit:

- MIS documentation – the agency social workers appropriately record voluntary requests for service on MIS and complete prior contact checks. When a child protection report has been received and needs to be transferred to MCFD, the agency documents the information on MIS in a Notepad and transfers it to the appropriate MCFD office for follow up.
- Collaborative practice – the agency and MCFD Fort St. James and Vanderhoof offices have a very positive, collaborative relationship. The agency and MCFD have written into their protocol that when responding to child protection reports in the communities, MCFD is expected to bring an agency social worker and if they are not available, arrangements are made for the community Family Care Worker to attend.
- Supportive work environment – all the staff commented on how enjoyable their work place is and that they felt supported by each other. They have morning “Bannock Day” twice a week which provides an opportunity for a casual gathering of staff, board members, MCFD staff and any others who may want to drop in.

- Agency size – as they are a small agency, the staff feel very connected to the communities.
- Board Members – the current Board of Directors are knowledgeable of the agency's work and are stable, professional and know what their role is. They do not interfere in the decisions made by the delegated staff and refer client complaints back to the agency for resolution.
- Community support – the Tl'azt en First Nation donated a trailer in one of their communities which the agency renovated and now uses it for various community groups and meetings and a weekly soup and bannock lunch.

## **5. CHALLENGES FACING THE AGENCY**

On a positive note, the few challenges identified by the agency staff were consistent throughout all the interviews:

- Current office space – The current office has very limited space, with the three Child and Family Service Workers sharing one office. There is no available space for private visits with children or families. As well, the current file room houses the files, computer equipment and the hot water tank.
- MCFD printer– the agency staff described ongoing problems with being unable to print anything from the MCFD printer. For example, currently an intake has to be printed off page by page with the Print Screen function and other documents/emails cannot be printed. The agency management have pursued a resolution with the MCFD Helpdesk and Technical Support however the problem persists.
- Staff Recruitment – professional staff recruitment has been difficult and only very recently has the agency become fully staffed.
- Funding – INAC funding does not cover all the service needs and the agency has not been able to offer comparable wages to MCFD.

## **6. DISCUSSION REGARDING THE PROGRAMS AUDITED**

### **a) Family Service Files**

As previously stated, seven of the eleven open family service files were audited. All applicable standards were met with 100% compliance. One very positive aspect found is that the agency has ensured that the requests for service have been entered appropriately on MIS under their office code, which reflects an accurate recording of the request and response provided by the agency.

### **b) Resource files**

As previously stated, two of the eight open resource files were audited. With the exception of one standard on one of the files, all standards were met with 100%

compliance. One file did not have a signed agreement with the caregiver on file. One very positive aspect found is that the agency has recently begun using the SAFE home study model. While this model is a labour intensive and time consuming process for the social worker and applicants, it was evident from the file that a comprehensive home study is produced which provides a very complete picture of the applicant and their family. The resources that were coded as Pending were reviewed but not audited however what documentation was found, was very thorough.

## **7. COMPLIANCE TO THE PROGRAMS AUDITED**

### **a) Compliance to Family Service Practice**

One auditor audited the family service files at Nezul Be Hunuyeh Child & Family Services Society. The 'not applicable' scores were not included in the total.

Seven (7) of the eleven open family service files were audited. The overall compliance was **100%**. 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
- File Documentation.

The following provides a breakdown of the compliance ratings:

- 1. Standards 1: Receiving Requests for Services (AOPSI Standard 1 Voluntary Services) – 7 files (100%) compliant.**
- 2. Standard 2: Supervisory Approval Required for Voluntary Services (AOPSI Standard 2 Voluntary Services) – 7 files (100%) compliant.**
- 3. Standard 3: Information and Referral for Voluntary Services (AOPSI Standard 3 Voluntary Services) – 7 files (100%) compliant.**
- 4. Standard 4: Involving the Aboriginal Community in the Provision of Services (AOPSI Standard 4 Voluntary Services) – 7 files (100%) compliant.**

5. **Standard 5: Family Service Plan Requirements and Support Services, Voluntary Care, and Special Needs Agreements (AOPSI Standard 5 Voluntary Services)** – 7 files (100%) compliant.
6. **Standard 6: Support Service Agreements (AOPSI Standard 6 Voluntary Services)** – 7 files (100%) compliant.
7. **Standard 7: Voluntary Care Agreements (AOPSI Standard 7 Voluntary Services)** – no files applicable.
8. **Standard 8: Special Needs Agreements (AOPSI Standard 8 Voluntary Services)** – no files applicable.
9. **Standard 9: Case Documentation for Voluntary Family Service Files (AOPSI Standard 9 Voluntary Services)** – 7 files (100%) compliant.
10. **Standard 24: Transferring Voluntary Services Files (AOPSI Standard 24 Voluntary Services)** – 2 files (100%) compliant; 5 files not applicable.
11. **Standard 26: Closing Voluntary Service Files (AOPSI Standard 26 Voluntary Services)** – 1 file (100%) compliant; 6 files not applicable.
12. **Standard 27: Voluntary Services Protocols (AOPSI Standard 27 Voluntary Services)** – 7 files (100%) compliant.

#### **b) Compliance to Resource practice**

Two (2) of the eight open resource files were audited. Overall compliance to the resource standards was **91%**. The files were audited for compliance to the Aboriginal Operational and Practice Standards and Indicators, C4 Guardianship 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.

The following provides a breakdown of the compliance ratings:

1. **Standard 28: Supervisory Approval Required for Family Care Home Services (AOPSI Standard 28 Voluntary Services)** – 2 files (100%) compliant.

2. **Standard 29: Family Care Homes – Application and Orientation (AOPSI Standard 29 Voluntary Services)** – 2 files (100%) compliant.
3. **Standard 30: Home Study (AOPSI Standard 30 Voluntary Services)** – 2 files (100%) compliant.
4. **Standard 31: Training of Caregivers (AOPSI Standard 31 Voluntary Services)** – 2 files (100%) compliant.
5. **Standard 32: Signed Agreement with Caregivers (AOPSI Standard 32 Voluntary Services)** – 1 file compliant; 1 file non-compliant.
6. **Standard 33: Monitoring and Reviewing the Family Care Home (AOPSI Standard 33 Voluntary Services)** – no files applicable.
7. **Standard 34: Investigation of Alleged Abuse or Neglect in a Family Care Home (AOPSI Standard 34 Voluntary Services)** – 1 file (100%) compliant; one file not applicable.
8. **Standard 35: Quality of Care Review (AOPSI Standard 35 Voluntary Services)** – no files applicable.
9. **Standard 36: Closure of the Family Care Home (AOPSI Standard 36 Voluntary Services)** – no files applicable.

## **8. RECOMMENDATIONS:**

**Date:** October 9, 2009

**Present:**

Michelle Chase, Executive Director, Nezul Be Hunuyeh Child and Family Services Society

Don McLelland, Supervisor of Delegated Services, Nezul Be Hunuyeh Child and Family Services Society

Denise Connell, A/Deputy Director, MCFD Aboriginal Policy and Service Support

Jackie Lee, Practice Analyst, MCFD Aboriginal Policy and Service Support

Darlene Thoen, Practice Auditor, MCFD Aboriginal Policy and Service Support

Jennifer Donison, Quality Assurance Analyst, MCFD Aboriginal Policy and Service Support

A teleconference took place with management staff from Nezul Be Hunuyeh Child and Family Services Society and MCFD Aboriginal Policy and Service Support. The practice audit report was reviewed and the agency was commended on the high level of professionalism and compliance in the program areas audited. This resulted in no recommendations being developed.

