

# **ABORIGINAL SERVICE C6 CHILD PROTECTION PRACTICE AUDIT REPORT**

## **Niha'7Kapmx Child and Family Services (IEB)**

Fieldwork completed April 01, 2009

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# **ABORIGINAL SERVICE C6 CHILD PROTECTION PRACTICE AUDIT REPORT**

## **Niha'7Kapmx Child and Family Services (IEB)**

### **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 third audit for the agency. The last audit was completed in March 2006.

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; and,
- 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 Case 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 Practice Support of the Ministry of Children (MCFD). There were two practice auditors from MCFD.

Two auditors conducted field work from March 30, 2009 to April 01, 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 23 open Resource files, 16 open Family Service files and 26 open Child Service files. The auditors selected 6 recently closed investigations. Due to the low volume of intakes the time frame parameters were expanded to nine months for closed investigation files. A sample size of 7 Resource files, 5 Family Service files, 8 Child Service files and 6 closed investigation files were audited. In total 20, or approximately 30% of the agencies resource, open family service, child service files were audited. These

files were randomly selected to ensure that a cross representation of files from each team member was reviewed.

Upon arrival at Nlha'7Kapmx Child and Family Services (NCFS) the auditors met with the Executive Director and the Supervisor to review the audit purpose and process. The auditors were available to answer any questions from staff that arose during the audit process. At the completion of the audit, the auditors met with the Supervisor and staff 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**

Nlha'7Kapmx Child and Family Services is currently delegated at C6 Child Protection delegation. This level of delegation enables the delegated agency to provide the following services:

- Child protection;
- Temporary custody of children;
- Permanent guardianship of children in continuing custody;
- Support services to families;
- Voluntary Care Agreements;
- Special Needs Agreements; and,
- Establishing Residential Resources.

Nlha'7Kapmx Child and Family Services was established in 1994 and immediately received C6 delegation. NCFS currently operates under an Interim Delegation Confirmation Agreement that expires March 31, 2010. The agency provides services only to those band members residing on reserve. The exception to this is caregivers for children in care, who may live off reserve. The agency recruits caregivers both on and off reserve. The vision of NCFS is to provide wholistic services with Nlhakapmux cultural beliefs, values and traditions.

#### **b) Demographics**

Nlha'7kapmx Child and Family Services has been providing services to 6 bands in the Lytton area. These 6 bands are: Cook's Ferry, Kanaka Bar, Lytton, Nicomen, Siska, and Skuppah. The NCFS office is located on Skuppah Band land, which is 4 kilometers west of Lytton on Highway 1. The band furthest away is only ½ hour drive from the office unless the Fraser River ferry is not operating. In that case the drive time can be as much as three hours each way. The registered on reserve population for these 6 bands is approximately 1,304.

(Source: Registered Indian Population by Sex and Residence 2007 Indian Affairs and Northern Development).

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

Nlha'7kapmx Child and Family Services has an Executive Director, supervisor and three case managers. The agency is supported by one contracted family support worker, a youth support/case aide, an alternate care coordinator, a financial administrator/office manager, an executive assistant, and a receptionist. There are three term workers on site filling the file clerk, executive assistant and program worker roles.

Nlha'7kapmx Child and Family Services has two vehicles equipped with four wheel drive for client contact.

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

The Executive Director supervises the financial administrator/office manager, the executive assistant, and receptionist directly. The Executive Director supervises the supervisor on administration processes; however the supervisor makes delegated case management decisions. The Executive Director provides practice support by sharing community intellectual property including family histories, relationships and cultural context. The Executive Director maintains an 'open door' policy and is available by phone when out of the agency.

The supervisor is responsible for the three case managers, family support, case aide/youth support and the alternate care coordinator. The supervisor maintains an open door policy and is available after-hours for case consultation. The supervisor attends monthly case management review meetings and initials the minutes from those meetings.

One area for consideration is with regards to the supervisor carrying a case load and actively managing files without the opportunity for peer supervision. This isolation creates some concern for the supervisor who wants to ensure objectivity for case management decisions.

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

One of the biggest strengths of Nlha'7kapmx Child and Family Services is that most of the children are in placements with family or within their own community. The agency has done a very good job in maintaining the connection between those children in care and the important contacts with their family, extended family and community. The agency makes great efforts to locate family members who could be possible resources for children in care. It is clear that NCFSS

ensures appropriate cultural and support services are in place for the children they serve.

Another strength of NCFS is the team cohesiveness and team support. The Executive Director and the supervisor are available to staff with 'open door' policies. The team uses the shared information provided by all employees with the delegated direction coming from the supervisor.

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

The biggest identified challenge for Niha'7kapmx Child and Family Services was the infrequent calls for service or investigations. The MCFD data Warehouse (MARS) reports the agency received an average of one call per month for service over the last thirty-six months. At least fourteen calls were requesting family service, which leaves a maximum of twenty-two investigations over thirty-six months. This results in limiting social workers experience for collecting relevant information, supervisory consultation, following consistent processes and documentation.

A second challenge identified in the audit was the need to reconcile the traditional oral communication with the required written documentation. It was apparent the supervisor was either present at or informed of the case reviews and was giving direction, however the supervisor direction was not clearly documented on the files.

Other challenges specific to the agency include poor or no cell phone service in the communities. The ability to cross the Fraser River after hours or during high water is restricted and can add three hours of travel time one way. The Provincial Court in Chilliwack is the current venue for legal matters and is a two hour drive one way in good weather and on good roads.

## **6. DISCUSSION OF THE FOUR PROGRAMS AUDITED**

As previously stated, 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 23 open resource files were audited. During the last audit, this program had the lowest compliance ratings of the four programs audited. There was a slight increase in compliance during this audit. The audit identified 100% compliance for having signed agreements with caregivers and 71% compliance with supervisor approvals. The audit identified several areas that could improve including the application and orientation for caregivers, home

study's and monitoring and reviewing the care homes. The agency currently employs an undelegated Alternate Care Coordinator (resource worker) who arranges placements and conducts the home studies. The supervisor approves the work done by the Alternate Care Coordinator.

There were two alternate care homes without home studies or documented criminal record checks completed prior to placements.

#### **b) Family Service Files**

As previously stated, 5 out of 16 open family service files were audited. While the previous audit scored a higher compliance, a number of positive aspects in the family service files included: appropriately receiving requests for service, aboriginal community involvement in the provision of services, social workers knowledge of existing interagency protocols in the communities and voluntary care agreements.

Documentation missing from the files included: support service agreements, information of appropriate referrals for service, family service planning for support services and overall case documentation including supervisor approvals.

#### **c) Child Service files**

As already stated, 8 out of 26 open child service files were audited. There was a significant increase in compliance from the last audit with several standards 100% compliant including: documented efforts to preserve the Aboriginal identity and providing culturally appropriate services, supervisor approvals, involving family and community when deciding where to place a child, meeting the child's needs for stability by ensuring there is continuity in their relationships, providing ongoing medical and dental care, preparation for independence and documentation of the social worker's knowledge of the existing interagency protocols in the communities.

The audit determined the agency is entering into voluntary care agreements that do not meet the time limits set out by the Act. In some cases the managing social worker is signing consent when the parent still retains legal guardianship responsibilities.

Documentation missing from the files included: monitoring and reviewing the child's comprehensive plan of care, discussing the rights of children in care with the caregiver, information on the social worker's relationship and contact with the child in care, providing the caregiver with information on the child and reviewing appropriate discipline standards, interviewing the child about his or her care experience and a quality of care review.

#### **d) Investigation files**

As previously stated, 5 closed investigations were audited. There was a significant decrease in compliance from the previous audit; however several positive aspects were noted including: immediate risk and emergency responses, child protection agency protocols, time limits for investigations and deciding where to place children.

One file was closed on the Ministry information system (MIS) and no signed file copy was found. The information indicates a Section 13 concern was present and direction was given to the parent, however no outcomes or investigation steps were documented. On another file the response commenced 77 days after the call and there is no information that the subject child, related child or parent were contacted. A third report was generated by a non-delegated agency worker and the information documented on MIS and the file indicates a Section 13 concern was present. No documentation of an investigation, supervisor consultation or delegated agency worker participating in the assessment and delivery of services was located. In this case the agency entered into a 1 year Voluntary Care Agreement, contrary to the time limits set out in the Act.

Documentation missing from the investigations included: conducting a Prior Contact Check (PCC), assessing the initial report, supervisor approvals, initial [plan of investigation, following all the steps in an investigation, seeing and interviewing the child, action taken when a child or parent is missing and case documentation.

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

Two auditors audited the resource, family service, child service and investigation files at Niha'7kapmx Child and Family Services. The 'not applicable' scores were not included in the total.

### **a) Compliance to Resource File Practice**

Seven (7) of the twenty-three open resource files were audited. Overall compliance to the resource standards was **35%**. The files were audited for compliance to the Aboriginal Operational and Practice Standards and Indicators, C6 Child Protection 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)** – 5 files compliant; 2 files non-compliant.
2. **Standard 29: Family Care Homes – Application and Orientation (AOPSI Standard 29 Voluntary Services)** – 6 file non-compliant; 1 file not applicable.
3. **Standard 30: Home Study (AOPSI Standard 30 Voluntary Services)** – 1 file compliant; 5 files non-compliant; 1 file not applicable.
4. **Standard 31: Training of Caregivers (AOPSI Standard 31 Voluntary Services)** – 7 files (100%) non-compliant.
5. **Standard 32: Signed Agreement with Caregivers (AOPSI Standard 32 Voluntary Services)** – 7 files (100%) compliant.
6. **Standard 33: Monitoring and Reviewing the Family Care Home (AOPSI Standard 33 Voluntary Services)** – 4 files non-compliant; 3 files not applicable.
7. **Standard 34: Investigation of Alleged Abuse or Neglect in a Family Care Home (AOPSI Standard 34 Voluntary Services)** – no files 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.

#### **b) Compliance to Child Service Practice**

Eight (8) of the 26 open child service files were audited. The overall compliance was **68%**. The files were audited for compliance to the Aboriginal Operational and Practice Standards and Indicators, C6 Child Protection child service including:

- The quality and adequacy of the plan of care;
- The frequency and adequacy of the care plan review;
- The level of contact with the child;
- Placement stability and deciding when and where to move a child;
- The degree of stability and continuity provided to the child while in care;
- Informing the child and caregiver of the rights of children in care;
- Informing the child and caregiver of appropriate discipline policy; and

- The level of file documentation.

The following provides a breakdown of the compliance ratings:

1. **Standard 1: Preserving the Identity of the Child in Care and Providing Culturally Appropriate Services (AOPSI Standard 11 Voluntary Services)** – 8 files (100%) compliant.
2. **Standard 2: Development of a Comprehensive Plan of Care (AOPSI Standard 12 Voluntary Services)** – 4 files compliant; 3 files non-compliant; 1 file not applicable.
3. **Standard 3: Monitoring and Reviewing the Child’s Comprehensive Plan of Care (AOPSI Standard 13 Voluntary Services)** - 5 files non-compliant; 3 files not applicable.
4. **Standard 4: Supervisory Approval Required for Guardianship Services (AOPSI Standard 4 Guardianship Services)** – 8 files (100%) compliant.
5. **Standard 5: Rights of Children in Care (AOPSI Standard 14 Voluntary Services)** – 4 files non-compliant; 4 files non-compliant.
6. **Standard 6: Deciding Where to Place the Child (AOPSI Standard 15 Voluntary Services)** – 8 files (100%) compliant.
7. **Standard 7: Meeting the Child’s Need for Stability and Continuity of Relationships (AOPSI Standard 16 Voluntary Services)** – 8 files (100%) compliant.
8. **Standard 8: Social Worker’s Relationship & Contact with a Child in Care (AOPSI Standard 17 Voluntary Services)** – 2 files compliant; 6 files non-compliant.
9. **Standard 9: Providing the Caregiver with Information and Reviewing Appropriate Discipline Standards (AOPSI Standard 18 Voluntary Services)** – 8 files (100%) non-compliant.
10. **Standard 10: Providing Initial and Ongoing Medical and Dental Care for a Child in Care (AOPSI Standard 19 Voluntary Services)** – 8 files (100%) compliant.
11. **Standard 11: Planning a Move for a Child in Care (AOPSI Standard 20 Voluntary Services)** – 2 files compliant; 1 file non-compliant; 5 files not applicable.

12. **Standard 12: Reportable Circumstances (AOPSI Standard 21 Voluntary Services)** – no files applicable.
13. **Standard 13: When a Child or Youth is Missing, Lost or Runaway (AOPSI Standard 22 Voluntary Services)** – no files applicable.
14. **Standard 14: Case Documentation for Guardianship Services (AOPSI Standard 14 Guardianship Services)** – 7 files compliant; 1 files non-compliant.
15. **Standard 15: Transferring Continuing Care Files (AOPSI Standard 15 Guardianship Services)** – no files applicable.
16. **Standard 16: Closing Continuing Care Files (AOPSI Standard 16 Guardianship Services)** – no files applicable.
17. **Standard 17: Rescinding a Continuing Custody Order and Returning the Child to the Family Home (AOPSI Standard 17 Guardianship Services)** – no files applicable.
18. **Standard 19: Interviewing the Child about the Care Experience (AOPSI Standard 19 Guardianship Services)** – 3 files (100%) non-compliant; 5 files not applicable.
19. **Standard 20: Preparation for Independence (AOPSI Standard 20 Guardianship Services)** – 1 file (100%) compliant; 7 files not applicable.
20. **Standard 21: Responsibilities of the Public Guardian and Trustee (AOPSI Standard 21 Guardianship Services)** – 1 file compliant; 1 file non-compliant; 6 files not applicable.
21. **Standard 24: Guardianship Agency Protocols (AOPSI Standard 24 Guardianship Services)** – 8 files (100%) compliant.

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

Five (5) of the 16 open family service files were audited. The overall compliance was **48%**. The files were audited for compliance to the Aboriginal Operational and Practice Standards and Indicators, C6 Child Protection 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.

The following provides a breakdown of the compliance ratings:

1. **Standards 1: Receiving Requests for Services (AOPSI Standard 1 Voluntary Services)** – 3 files compliant; 2 files non-compliant.
2. **Standard 2: Supervisory Approval Required for Voluntary Services (AOPSI Standard 2 Voluntary Services)** – 2 files compliant; 3 files non-compliant.
3. **Standard 3: Information and Referral for Voluntary Services (AOPSI Standard 3 Voluntary Services)** – 3 files compliant; 2 files non-compliant.
4. **Standard 4: Involving the Aboriginal Community in the Provision of Services (AOPSI Standard 4 Voluntary Services)** – 4 files compliant; 1 file non-compliant.
5. **Standard 5: Family Service Plan Requirements and Support Services, Voluntary Care, and Special Needs Agreements (AOPSI Standard 5 Voluntary Services)** – 2 files compliant; 3 files non-compliant.
6. **Standard 6: Support Service Agreements (AOPSI Standard 6 Voluntary Services)** – 4 files non-compliant; 1 file not applicable.
7. **Standard 7: Voluntary Care Agreements (AOPSI Standard 7 Voluntary Services)** – 1 file (100%) compliant; 4 files not applicable.
8. **Standard 8: Special Needs Agreements (AOPSI Standard 8 Voluntary Services)** – 1 file non-compliant; 4 files not applicable.
9. **Standard 9: Case Documentation for Voluntary Family Service Files (AOPSI Standard 9 Voluntary Services)** – 1 file compliant; 4 files non-compliant.
10. **Standard 24: Transferring Voluntary Services Files (AOPSI Standard 24 Voluntary Services)** – no files applicable.
11. **Standard 26: Closing Voluntary Service Files (AOPSI Standard 26 Voluntary Services)** – no files applicable.
12. **Standard 27: Voluntary Services Protocols (AOPSI Standard 27 Voluntary Services)** - 3 files compliant; 1 file non-compliant; 1 file not applicable.

#### **d) Compliance to Child Protection Practice**

Six (6) closed child protection investigations were audited. Overall compliance to the child protection standards was **33%**. The files were audited for compliance to the Aboriginal Operational and Practice Standards and Indicators, C6 Child Protection including, but not limited to:

- Supervisory consultation regarding child protection;
- Prior contact check and registration;
- Assessment and emergency response;
- Deciding whether to investigate and determining the response time;
- Initial plan and steps in investigation;
- Recording and reporting the investigation results;
- Time limits for investigations to be completed; and
- Developing risk and assessment and risk reduction plans.

The following provides a breakdown of the compliance ratings:

1. **Standard 1: Receiving Reports of Suspected Child Abuse and Neglect (AOPSI Standard 1 Child Protection Services)** – 3 files compliant; 3 files non-compliant.
2. **Standard 2: Prior Contact Check and Registration (AOPSI Standard 2 Child Protection Services)** – 1 file compliant; 5 files non-compliant.
3. **Standard 3: Immediate Risk and Emergency Response (AOPSI Standard 3 Child Protection Services)** – 2 files (100%) compliant; 4 files not applicable.
4. **Standard 4: Assessing the Child Protection Report (AOPSI Standard 4 Child Protection Services)** – 1 file compliant; 5 files non-compliant.
5. **Standard 8: Cooperative Planning and Dispute Resolution (AOPSI Standard 8 Child Protection Services)** – no files applicable.
6. **Standard 9: Less Disruptive Measures and Removals (AOPSI Standard 9 Level 15)** – 2 files compliant; 2 files non-compliant; 2 files not applicable.
7. **Standard 10: Deciding Whether to Investigate (AOPSI Standard 10 Child Protection Services)** – 3 files compliant; 3 files non-compliant.
8. **Standard 11: Determining the Investigation Response Time (AOPSI Standard 11 Child Protection Services)** – 4 files compliant; 2 files non-compliant.

9. **Standard 12: Supervisory Approval Required for Child Protection Services (AOPSI Standard 12 Child Protection Services)** – 6 files (100%) non-compliant.
10. **Standard 13: Initial Plan of Investigation (AOPSI Standard 13 Child Protection Services)** – 6 files (100%) non-compliant.
11. **Standard 14: Informing the Police (AOPSI Standard 14 Child Protection Services)** – no files applicable.
12. **Standard 15: Steps in the Investigation (AOPSI Standard 15 Child Protection Services)** – 5 files non-compliant; 1 file not applicable.
13. **Standard 16: Developing and Implementing a Child Safety Plan (AOPSI Standard 16 Child Protection Services)** – 3 files compliant; 3 files non-compliant.
14. **Standard 17: Child Protection Agency Protocols (AOPSI Standard 17 Child Protection Services)** – 3 files (100%) compliant; 3 files not applicable.
15. **Standard 18: Seeing and Interviewing the Child (AOPSI Standard 18 Child Protection Services)** – 1 file compliant; 1 file non-compliant with factors; 4 files non-compliant.
16. **Standard 19: Arranging a Medical Examination of a Child (AOPSI Standard 19 Child Protection Services)** – 2 files (100%) non-compliant; 4 files not applicable.
17. **Standard 20: Seeing and Interviewing the Parent (AOPSI Standard 20 Child Protection Services)** – 1 file compliant; 1 file non-compliant with factors; 4 files non-compliant.
18. **Standard 21: Deciding Whether or Not the Child Needs Protection (AOPSI Standard 21 Child Protection Services)** – 2 files compliant; 4 files non-compliant.
19. **Standard 22: Action Taken When the Child or Parent Cannot be Located (AOPSI Standard 22 Child Protection Services)** – 1 file (100%) non-compliant; 5 files not applicable.
20. **Standard 23: Reporting the Investigation Results (AOPSI Standard 23 Child Protection Services)** – 1 file compliant; 1 file non-compliant with factors; 3 files non-compliant; 1 file not applicable.

- 21. Standard 24: Time Limit for Investigations (AOPSI Standard 24 Child Protection Services) – 3 files compliant; 1 file non-compliant; 1 file not applicable.**
- 22. Standard 25: Deciding Where to Place the Child (AOPSI Standard 25 Child Protection Services) – 5 files (100%) compliant.**
- 23. Standard 26: Take Charge (AOPSI Standard 26 Child Protection Services) – no files applicable.**
- 24. Standard 29: Reportable Circumstances (AOPSI Standard 29 Child Protection Services) - no files applicable.**
- 25. Standard 30: Case Documentation for Child Protection Services (AOPSI Standard 30 Child Protection Services) – 6 files (100%) non-compliant.**
- 26. Standard 31: Transferring Protective Family Service Files (AOPSI Standard 31 Child Protection Services) – no files applicable.**

## **8. RECOMMENDATIONS**

The following recommendations and responses were developed in consultation with Nlha'7kapmx Child & Family Services and MCFD Aboriginal Policy & Service Support. The time frame for completion of the recommendations is three months from the final sign off date.

*Nlha'7kapmx Child & Family Services management will:*

1. Use of peer support:
  - a) Continue to develop a protocol at the Interior Directors meeting that will enable the shared use of clinical supervision.
  - b) Continue to develop a protocol at the Interior Directors meetings that will enable alternate care resource mentoring and support.
2. Intake & Investigations:
  - a) Continue to review intakes as a team to increase case manager's exposure to service plans.
  - b) Implement the use of a standards checklist.
  - c) Develop a log-book system for the Clinical Supervisor to track intakes and service plans to ensure Standards are met.

3. Family Service:

- a) Review the time limits and terms of Support Service Agreements with case managers.
- b) The clinical supervisor will review with case managers the need to have written service plans anytime service is offered or commenced.

4. Child Service:

- a) Review time limits for service with case managers.
- b) Review guardianship responsibilities for Voluntary Care Agreements with case managers.
- c) CPOC's will be updated with Section 70, case manager contacts with the child and the information provided to alternate caregivers.

5. Resources:

- a) Implement the use of a checklist to support meeting the required Standards.

6. General compliance:

- a) The clinical supervisor will review the case files to ensure compliance to standards.

*MCFD First Nations Director will:*

- 1. Provide checklists for Intake & Investigations, Child Service Files and Resources.
- 2. Provide specific individual case audit reports to facilitate the Agency rectifying compliance issues.
- 3. Continue to provide support from the Aboriginal Policy & Service Support Practice Analyst.