

WINDSOR-ESSEX CHILDREN'S AID SOCIETY

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Executive Summary

Child welfare services in the Province of Ontario are provided by community-based agencies designated under the <u>Child and Family Services Act</u> as "Children's Aid Societies". They have exclusive responsibility for investigations where children are in need of protection from abuse and neglect, protection of children and adoption of children who are under the permanent care of the Society (Crown Wards). CAS cannot turn families away or place them on waiting lists when investigation or intervention is necessary to protect children at risk of abuse and neglect. CAS may provide additional services, including assessment, crisis intervention, and counseling and/or prevention services.

With this responsibility comes authority. Occasionally, the CAS is perceived as having too much authority within the community's they serve.

The Province of Ontario provides legislative standards and regulations for Children's Aid Societies with comprehensive checks and balances to supplement the professional training of its social work staff, particularly in the areas of clinical judgment, decision-making, and accountability.

The quality assurance instruments the government provides are as follows:

- 1. An eligibility spectrum, which standardizes and defines areas requiring the need for referrals / duty to report, as well as mandated response times.
- 2. A risk assessment model, including safety assessments, is utilized in all initial investigations / allegations of child maltreatment. The model is maintained on all open cases being serviced by the Society.

To ensure Societies comply with legislative standards and regulations, regular service and financial audits are conducted by Ministry officials.

Recently a review of the Windsor-Essex Children's Aid Society was conducted by the Ministry of Children and Youth Services.

Reason for the Review:

- Local news stories and complaints made to the Ministry expressed concerns over some of the service approaches used by the Society.
- Certain service volumes for the Society are much higher than provincial rates.
- Unlike the majority of Societies in the province, the Society has consistently operated within the funding determined by the Funding Framework. The Ministry wanted to understand the best practices in use.
- The size and stature of the new head office building is perceived by some to be out of line with the service needs and current fiscal realities.

Review Objectives:

Specifically, the review team reviewed and assessed the following:

- The effectiveness of the Society's service delivery mechanisms for determining and responding to service needs including compliance with legislative requirements and Ministry standards.
- The effectiveness of the Society's management and supervision structures and processes for supporting communication, planning and case decision-making.
- The effectiveness of the Society's systems and processes for ensuring data integrity and utilization of data/information to assist with planning and case decision-making.
- The use of the Ministry capital funding and the related processes.
- Compliance with Ministry funding parameters.

Summary of Key Findings:

Service Delivery:

- The organizational structure implemented by the Society provides clear direction for service delivery. Roles and expectations for staff and management are clearly articulated at the various levels within the organization. Case management systems, staff supervision, quality assurance mechanisms and communication patterns are well integrated into the organization. The review team was impressed at the level of successful integration that has occurred in a short time period since amalgamation.
- The Society's procedures to deal with complaints comply with the requirements of Section 68 of the Child and Family Services Act. Section 68 of the Child and Family Services Act requires that a Society must have a written procedure for hearing and dealing with complaints by any person regarding the services sought or received from the Society. The complaint procedure must provide an opportunity for the complaint to be heard by the Society's Board of Directors. The Society is in compliance with the requirements noted above and furthermore, a copy of the written complaint form is provided to all clients at the time of Intake.
- The Society's work relies on teamwork and co-operation from many other service sectors. Some protocols have been established however, several more need to be completed.
 - *The Society currently has 30 protocols in place and welcomes expanding partnerships with other service sectors in the community.
- The Society's service statistics related to investigations and cases transferred to ongoing service are much higher than provincial experience. Society practices and service delivery philosophy contribute to these higher rates. The Society must ensure that its decisions comply with the Risk Assessment Model and are fully documented in the case files.

There were 163 files audited and 154 were in compliance (95%). These findings are consistent with previous audits conducted over the last several years. The Society's philosophy is consistent with the legislative requirement that the best interest and well being of the children is paramount.

*Note: all underlining indicates the Society's viewpoint

The Society follows the provisions of the Risk Assessment Model however it is recognized that the documentation related to the decision-making needs to be more comprehensive.

The report reflected a concern about a policy to investigate all domestic violence referrals. Of the referral received, 20% are specific to domestic violence, reflective of trends in the province.

Statistics from The Centre of Excellence for Child Welfare indicate that from 1993 to 1998 there was a 770% increase in substantiated emotional maltreatment / exposure to domestic violence. (1000 cases – 8700 cases)

Risk Assessments are not completed consistently and Plans of Service do not have the level of
detail to guide the actions and activities to be taken by Society staff and families to address
identified protection concerns.

A modified "Blue Form" that was approved by the local Ministry office was developed and implemented to lessen administrative workload requirements with respect to paper work and maximize our ability to have more direct contact with families.

The quality of the plans of service require attention to ensure that they contain measurable outcomes. The quality of the written document is not necessarily an accurate reflection of whether the Society is providing effective service to our clients. Our staff are taking the necessary steps but are not incorporating the information into the recordings. We will continue to focus our training to emphasize how the documentation can be helpful in formulating measurable outcomes.

 Improvements are required in the coding of cases for Funding Framework purposes and the classification of specialized foster care services must comply with expectations of the Funding Framework.

In only 5% of the 163 files reviewed there was some difficulty with our coding of eligibility of our files. The Society will be reviewing the data entry procedures and ensure that documentation is completed appropriately.

The Foster Hhome rating / classification tool was developed by the Society utilizing the funding framework and with input from the local Ministry office. It was used with the local Ministry office's knowledge.

WECAS Comments on Service Delivery

Local news stories and complaints made to the Ministry expressed concerns over some of the service approaches used by the Society. Some of those concerns may be addressed by the following:

- At present there are 63 children in care who reside with family members / friends (provisional foster care) - 27% with grandparents, 40% with aunts and uncles and 33% with friends. (Appendix 1)
- A recent internal study has indicated that approximately 6% of all families that we work with on an ongoing basis have children that have moved to grandparents (41%), non custodial parents (27%), aunts and uncles (20%) or to friends (12%) rather than coming into care. (Appendix 1)

- The Society admits 6.1 children per 1000 (486 children) on an annual basis. Of those admissions 77% proceed to court, 3% are returned to the parent /family/ friends within 5 days, and 20% come into care under Temporary Care Agreements (mutual agreements). (Appendix 2 & 3)
- The Society utilizes Plans of Service agreements and will work voluntarily with clients where appropriate. Where the parents are not cooperative a court application is necessary. The courts adjudicate the Society's decisions and are integral part of protecting children.

Capital Funding:

- The size and design of the new head office building support effective service delivery.
- The total cost of the new head office-building project exceeded the most recent proposal approved by the Ministry and fundraising is below the level committed in the proposal. The Society must develop alternatives to address the difference of \$1,559,077 (less the proceeds from the anticipated sale of the Cataragui Street facility estimated at \$609,000).
- The capital agreement related to the Spago group home must be completed in compliance with Ministry policy.

Funding Framework:

- The Society has demonstrated continuous attention to effective fiscal management. A plan is developed in advance of the fiscal year to deliver services and manage resources within the Funding Framework. Effective processes are in place to monitor expenditures and services against plan.
- The Society has made significant investment in technology to support case management. The Business Plans should clearly document the annual charges to operations and the related administrative and efficiency savings that will be achieved as a result of this technology.
- The Society has made extensive use of debt financing to acquire technology and capital assets to support ongoing service delivery. Debt charges to operations must be consistent with Funding Framework cost groupings and business cases approved by the Ministry.

WECAS Comments On Capital Funding and Funding Framework Recommendations:

The Ministry Review document compliments WECAS in its core business practices and fiscal management skills. It should be noted that the Windsor-Essex CAS has managed to develop its physical plant and technological infrastructure required to provide timely and effective client service, while keeping within the funding framework revenue constraints. These are achievements that the Staff and Board of the Society are particularly proud of.

Readers of the Ministry Review document will observe a 95% rating in case file compliance to Ministry standards, and 100% compliance in the processing of service compliances to Section 68 of the Child and Family Services Act.

The Ministry provided eighteen (18) recommendations for improvements related to the above findings. The Society is in process of developing action plans to achieve all the review recommendations within this current fiscal year.

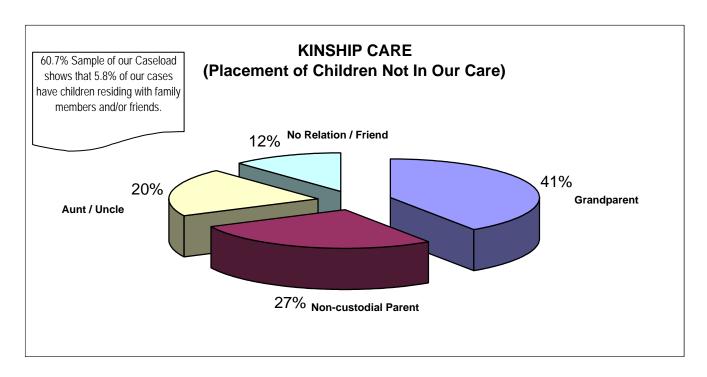
The Society has posted the full Review Report at its Web site for public viewing.

www.wecas.on.ca

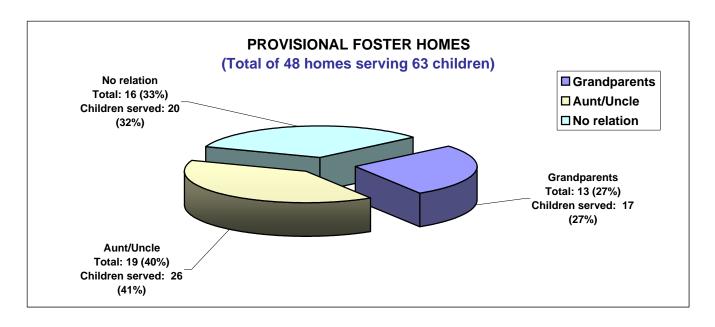
WECAS continues to strive for a caring, sensitive and transparent service delivery system.

William R. Bevan, MSW, BSW, RSW Executive Director

APPENDIX 1



TOTAL FAMILY SERVICE FILES OPENED AT TIME OF SAMPLE = 1,655 SAMPLE SIZE = 1,005 (May 2004)

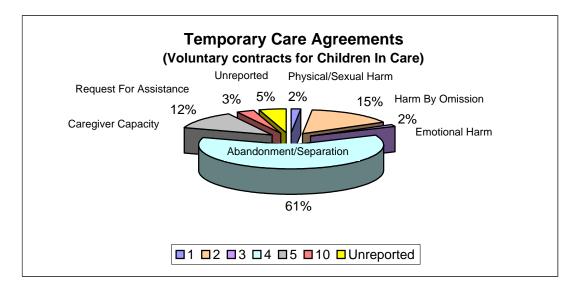


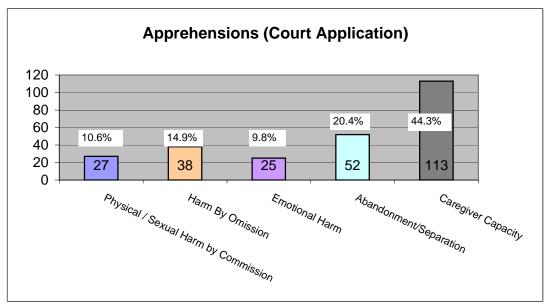
APPENDIX 2

ADMISSIONS TO CARE - April 1, 2003 thru December 31, 2003

Out of the total 320 Admissions (161 Families)

- 65 were Temporary Care Agreements (20.3%)
- 255 were Apprehensions (Court Application) (79.7%)

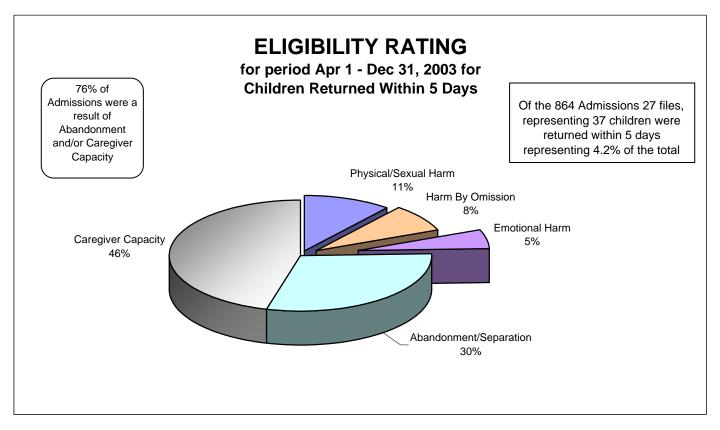




ELIGIBILITY RATING TOOL

- 1 Physical/Sexual abuse, threats of harm
 - 2 Lack of Supervision, neglect, failure to provide medical & psychological care. Child under 12 years old and has committed serious act.
- 3 Caregiver causes emotional harm, domestic violence
 - 4 Orphaned child, parent child conflict
 - 5 Caregiver has history of abusing/neglecting, parent not protective, caregiver has alcohol, drug issues, mental health concerns and physical limitations, impacting care of child, parent has poor or inadequate parenting
- 10 Request For Assistance Child is in care of another Society Unreported no information available

APPENDIX 3



ELIGIBILITY RATING TOOL:

- 1 Physical/Sexual Harm by Commission
- 2 Harm by Omission
- 3 Emotional Harm
- 4 Abandonment/Separation
- 5 Caregiver Capacity

Of the 37 children 29 or 78% were returned to parents.

- 8 children were returned as supports with Community Providers were put in place (20%)
- 1 child was admitted only for week-end relief for parents (child autistic)
- 2 children were returned upon completion of investigation children were apprehended due to child having STD
- 6 children were returned due to parent/child conflict moved to another jurisdiction
- 6 children were returned to mom domestic violence issues were addressed
- 4 children were returned to parent following health care issues
- 1 child was returned after parents terminated a 6 month TCA after 3 days
- 1 child was returned to mother to be assisted with care from a relative (15 yr. Old child)

5 children (13%) were returned to grandparents

- 2 children were discharged to a relative as a private arrangement with a written contract with mother
- 1 child was returned following investigation of father allegedly sexually touching a neighbour child