



CHILDREN'S AID SOCIETY OF THE COUNTY OF PRINCE
EDWARD

FOSTER CARE PROGRAM AND SERVICES
OPERATIONAL REVIEW FINAL REPORT

DECEMBER 2011/JANUARY 2012

Ministry of Children and Youth Services, South East Regional Office.

PECAS Foster Care Program Operational Review Report
January 25, 2012

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EXECUTIVE SUMMARY

1. Introduction

In December 2011, the Ministry of Children and Youth Services initiated an operational review of the foster care program and services provided by the Children's Aid Society of the County of Prince Edward (PECAS).

2. Purpose and Scope of Operational Review

The Ministry initiated the review because of concerns regarding allegations of sexual abuse of children in foster homes and because the society had been assigned a provisional foster care licence for the 2nd consecutive time in 6 months.

3. Methodology

The review process comprised the following activities:

1. Interviews with foster children and youth, foster parents, staff and board members of the society as well as the Ontario Provincial Police (OPP);
2. File reviews for:
 - children currently in PECAS foster homes;
 - open PECAS foster and kin in care homes;
 - 3 closed PECAS foster homes.
3. Reviews of other documents including:
 - PECAS policies and procedures for protection and for children in care as well as the foster care manual;
 - the protocol with the Ontario Provincial Police for joint investigations;
 - the foster care licence report of December, 2011;
 - the Crown ward review for 2011.

4. Findings

a) Foster and Kin in Care Services

- The society is having significant difficulty achieving compliance with licensing requirements under the *Child and Family Services Act* and its regulations, as evidenced by three reviews (operational, licensing, Crown ward). This includes difficulty in proper completion of appropriate screening and assessment requirements for foster homes and kin in care homes including places of safety designations;

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- The society does not appear to have a well developed capacity to effectively apply required tools such as SAFE and to adequately assess information collected about potential resource homes;
- The society has made fundamental errors in the application of licensing requirements;
- There is a lack of consistency and standardization in record keeping practices that inhibits communication between staff about information regarding the history of, for example, a foster home. In some cases, it is difficult for staff to identify patterns because information is scattered across files.
- The society does not appear to have effective administrative practices for recording and management of resource home information.
- Although there is recognition of the need to establish and maintain effective working relationships with foster parents as a whole, it is not clear that there are concrete plans to do so.

b) Child Protection Services

- There is evidence, based on a file review and interviews with staff, of non-compliance with child protection standards regarding investigations and ongoing protection cases
- Record keeping regarding child protection investigations in foster homes is inconsistent and does not always allow staff to identify links between related files.
- There is conflicting information from staff about how decisions are made regarding verification of abuse in foster homes. Reports and files seldom record the rationale for any decisions or the decision-making process.
- Society child protection standards reflect MCYS standards but provide little guidance to staff on how they are to be applied within the context of the society and community culture.

c) Governance and Management Practices

- There are significant conflicts within the organization that are interfering with coordinated and collaborative approaches to planning and placement of children.
- Although some steps have been taken to address issues related to the allegations of sexual abuse in foster homes on a case by case basis, there does not appear to

be a comprehensive plan regarding how to deal with such situations in the short and longer terms.

- The board does not appear to be receiving all of the information it needs to exercise its responsibilities for governance, oversight and risk management nor does it appear to have a risk management plan for addressing current issues related to the allegations of sexual abuse and the provisional foster care licence.

5. Conclusions

The society has many dedicated board members and staff who have a strong commitment to providing effective child welfare services to children and who have a commitment to the organization and their community. However, the society is experiencing significant difficulty in a number of areas which is concerning from the perspective of services to children.

The extent of the difficulties are such that the society will require assistance from external expertise, at least in the short term to develop a comprehensive action plan that includes immediate remedial action in some areas and further review and analysis in others.

6. Requirements and Recommendations

The requirements identified below will be imposed as terms and conditions on the foster care licence.

a) Foster Care and Kin in Care Services

1. Requirement: Take action to immediately address inadequacies in the application of and compliance with licensing requirements and tools. This must include:
 - A process by which an individual(s) with relevant expertise systematically assesses the extent to which every foster or resource home is in compliance with the applicable requirements, and if not, appropriate action must be taken so that the foster or resource home achieves compliance no later than April 27, 2012;
 - An assessment by individuals with relevant expertise of the need for any training for resource staff, with the objective of increasing staff capacity to understand compliance with the licensing requirements, including the effective application of tools such as SAFE.
2. Requirement: Review, revise and implement policies and procedures for foster care and resource homes based on the *Child and Family Services Act* and its regulations, Ministry requirements and best practices. Best practices can be developed in consultation with the Ontario Association of Children's Aid Societies, other societies and other appropriate resources.

3. Recommendation: Develop and implement a plan for ongoing liaison, communication and support with the Foster Family Association at the supervisor, executive director and board levels with a view to creating and maintaining effective working relationships.

b) Child Protection Services

4. Requirement: Initiate a third party integrated file review to determine the current level of compliance with child protection standards as they relate to foster care. Based on that review, identify and implement any steps required to achieve compliance including any training required for staff.
5. Recommendation: Develop a plan to review, revise and implement policies and procedures for protection services in consultation with the Ontario Association of Children's Aid Societies, other societies and other appropriate resources. The policies and procedures should include:
 - requirements related to investigation of foster homes consistent with practices in other societies
 - record keeping practices that reflect continuity of information and improved communication between workers.

c) Governance and Management

6. Recommendation: Develop a strategy to increase the capacity of the board to exercise its role. This may include engaging expertise to help the board formulate new approaches, practices and procedures for exercising its responsibilities.
7. Recommendation: The board should consider engaging expertise to assist in the development, implementation and monitoring of a workplan for implementation of recommendations and directives from this operational review, the licensing review and the Crown ward review. The plan should include mechanisms for monitoring implementation and assessing the extent to which the required and recommended changes have occurred.
8. Recommendation: Establish a plan with clear time lines that includes the use of objective and skilled expertise to address existing conflicts within the organization in order to establish more effective working relationships. Concurrently, develop policies and practices within the organization that encourage collaboration and coordination in providing services for children and that support initiative and the exchange of ideas in developing holistic approaches to meeting the needs of children.

9. Requirement: Develop and implement a risk management plan for addressing the impact of the sexual abuse allegations and/or findings in foster care in the short and longer terms on all complainants and victims, as well as for staff of the society. This should include a critical incident debriefing, a communications strategy and a plan for providing support to complainants, victims and to staff.
10. Recommendation: Review administrative practices regarding data management to determine the extent to which they provide accurate information for planning and decision-making purposes within the organization. Based on the review conducted, implement improvements to these practices.

INTRODUCTION

In December 2011, the South East Region of the Ministry of Children and Youth Services (MCYS) initiated an operational review of the foster care program at the Children's Aid Society of the County of Prince Edward (PECAS). The review was a response to recent events including:

- investigations by the society and the Ontario Provincial Police involving allegations of sexual abuse and [REDACTED] in PECAS foster homes;
- The fact that the Society was assigned 2 provisional licences for foster care in 2011.

This report presents the findings of the operational review team and requirements and recommendations to address issues identified in the course of the review.

PURPOSE AND SCOPE OF OPERATIONAL REVIEW

The purpose and scope of the operational review are set out in terms of reference which were presented to the executive director and board members of the Society on December 1, 2011 (See Appendix A)

The purpose of the review was to assess:

- the safety of children and youth in foster homes at the time of the review; and,
- the efficacy of actions taken with respect to the foster care program and services at the Society,

The scope of the review was to include:

- an examination of information about foster homes and foster children/youth over a 3 year period;
- an examination of administrative controls as they relate to completeness and accuracy of information used for decision making purposes.

The objectives of the review were to identify any opportunities for improvements in administrative procedures and any specific concerns about foster care practices. The review was to be a focussed and limited operational review rather than a comprehensive and in depth look at all aspects of the organization.

The review was carried out by a team with expertise in child welfare, interviewing, project management and program review. It was conducted under the authority of the *Child and Family Services Act*, Part 1, Section 6 (1) and section 17.

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METHODOLOGY

1. Overview

The majority of the interviews and file reviews were conducted from December 5 through December 19. Interviews with supervisors, front line staff, foster parents and foster children took place at office space obtained for that purpose. A few additional telephone interviews were conducted early in January. Files were reviewed at the society and the off site office location.

The review process comprised the following activities:

1. Interviews with foster children and youth, foster parents, staff and board members of the society as well as the Ontario Provincial Police (OPP);
2. File reviews for:
 - children currently in PECAS foster homes;
 - current PECAS foster and kin in care homes;
 - 3 closed PECAS foster homes.
3. Reviews of other documents including:
 - PECAS policies and procedures for protection, children in care and foster care;
 - the protocol with the Ontario Provincial Police for joint investigations;
 - the foster care licence report of December, 2011;
 - the Crown ward review for 2011.

2. Interviews

A total of 49 interviews were conducted including:

- 17 of the 34 children and youth currently in PECAS foster homes as well as 1 youth on extended care and maintenance who asked to speak with the team. Children under 4 years or with severe developmental delays or communications disorders were excluded from the interviews. Except for one youth, the team did not include youths who had been the subject of recent OPP investigations. The society provided the team with a comprehensive list of children and youth in care as well as the reasons for the exclusion of individuals.
- 7 foster parents representing 7 of the approximately 36 open foster homes. This included the current and past presidents of the Foster Family Association. Those interviewed had varied lengths of experience with the society and included

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individuals who had requested an interview as well as others who were recommended by the society. In addition, the regional representative for the Foster Parent Association of Ontario was interviewed.

- 13 of the 30 current staff including the executive director, all supervisors and a cross section of front line staff plus 2 former staff. All individuals who requested an interview were accommodated as well as others identified by the operational review team in order to avoid bias and include a representative cross section of staff from each of the 3 front line units;
- 2 board members including the chair of the board; and, a member of the executive committee who chairs the services committee.
- 4 representatives of the local OPP including 2 detectives, a sergeant and an acting sergeant.

In the event that any child disclosed allegations of abuse or maltreatment in the course of an interview, it was agreed that the interviewers would report the information to a designated supervisor of the society.

It is important to emphasize that interviews were conducted in a way that recognized the society had experienced a number of disturbing events in the past year related to the investigation of allegations of sexual abuse in foster homes. The interviewers were directed to be sensitive to this fact and to avoid adding to any anxiety that any interviewees might be feeling. The Ministry's intent was to conduct a solution focussed rather than forensic review.

During the interviews, some individuals made statements that could not be corroborated through file or document reviews. Some of this information is included in the report and it is identified as having come from a single source. Findings in this report are based on information that could be corroborated through the files.

3. File Review

The file review included:

- 33 files of children in foster care;
- 18 kin in care home files;
- 13 foster home files, including three closed files.

In depth reviews were done of selected current files. [REDACTED]

[REDACTED] This limited review allowed for cross-checking of a number of related files in order to confirm information

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that appeared in individual files or was reported in interviews. In order to obtain comprehensive information about the foster homes, the team reviewed related electronic and/or hard copy ongoing files and case notes and, where applicable, child protection investigation files.

4. Reports on Preliminary Findings

The Ministry provided 2 reports to the society prior to completion of the review.

On December 9, members of the review team met with the executive director and a supervisor to report that, based on the results of interviews with children and youth, no immediate safety concerns had been identified although a few issues had been reported to the CAS supervisor in accordance with the agreed upon protocol. The majority of those issues were known to the society and had been addressed previously. The new issues did not appear to meet the criteria for a formal child protection investigation. Subsequently, during an interview in early January, [REDACTED] inappropriate sexual behaviour [REDACTED] This was reported to the supervisor. The MCYS program supervisor for the society has been advised of these reports and will follow up with the society for a report on action taken.

On December 22, the Ministry met with the board to report preliminary findings based on interviews and file reviews. At the meeting, a number of immediate concerns were identified and the board was asked to develop a high level action plan by January 6, 2012. This action was taken due to the serious nature of the concerns identified.

FINDINGS

1. Background

At the time of the review, there were 66 children in the care of the society. Of those, 34 were in foster homes and kin in care homes operated by the society. Based on information provided to the Ministry in the society's quarterly report, there were 36 active foster homes available in September, 2011.

The foster care program is supported by the resource department which includes a supervisor and 3.5 staff. Two other supervisors are responsible respectively for 7.5 and 8 front line protection and children in care staff with intake staff assigned exclusively to one of those supervisors. Prior to 2010, the executive director managed resource services and 3 supervisors managed protection and children in care services.

2. Key Areas of Concern

Although the focus of the operational review was foster care, other issues were identified in interviews and in the files. Those issues included protection services as well as governance and management practices. They were somewhat outside the scope of the

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review and were not investigated in the same depth. However, they are addressed in this report because they have a bearing on the well-being and safety of children in the care of the society and its capacity to deliver services.

This section of the report is organized according to the key areas of concern identified by the team:

- Practices related to foster and kin in care services;
- Practices regarding investigations of allegations of abuse in foster homes including verification of abuse and record keeping, particularly as they relate to the safety of children;
- Practices related to protection services;
- Governance and management.

3. Foster and Kin in Care Services

Significant issues were found with respect to foster and kin in care services. These were identified through reviews of files and relevant documents in addition to interviews with staff, foster parents and children currently in foster care. Issues included:

- Non-compliance with various licensing requirements under the *Child and Family Services Act* and its regulations;
- Errors in the application of licensing requirements;
- Apparent difficulties in managing relationships with foster parents;
- Apparent inefficiencies in administrative practices.

a) File Review

The following findings are based on an analysis of the 18 kin in care and 13 foster home files that were reviewed.

- SAFE is the Structured Analysis Family Evaluation Home Study required as part of approval process for resource homes. There are a number of instances where children are residing in homes where SAFE has not been completed as required. In one case, SAFE had not been completed a full 12 months after the home had opened.
- In some cases, the components of SAFE have been completed but the assessment is missing: there is no consolidation and analysis of all the information gathered into a final comprehensive assessment of the home. In other cases, factors that should have been identified as risks were noted but the risk implications were not assessed. The assessment and final analysis are critical components of the SAFE process.

- SAFE has been completed by a staff member who does not have the appropriate training regarding the tool and this is a minimum requirement for application of SAFE.
- The society is not meeting requirements for designation of a place of safety. Not one of the files reviewed was in compliance. There is a 7 item initial screen that must be started immediately and completed within 7 days of a placement. Within 60 days of placement, the SAFE Home Study must be completed. In one kin in care file, a home was opened and a child placed but it is not possible to tell if either the place of safety designation was done or if SAFE was completed. The child has since left the home but the home remains open and therefore available to place children, notwithstanding the uncertainty regarding appropriate screening.
- There appears to be a lack of awareness respecting the differences between places of safety and foster homes. Both are being treated the same way.
- In 4 of the 13 foster home files reviewed, the society had moved children without appropriate consultation or notice to the foster parents as required by legislation. In 2 cases, the foster parents appealed to the Child and Family Services Review Board which found in favour of the foster parents. Some child in care workers said in interviews that children had been moved without consultation with them.
- In one instance, a foster home was opened in September 2010 but it was not until the following May 2011 that required checks were made with other societies. At that time serious safety concerns were identified by other societies. In the interim, 2 children were placed.
- Significant variability was noted in the quality of children's plans of care. Both the licensing review and the Crown ward review also identify problems with plans of care. Foster parents and foster children report varying levels of involvement in the plans.
- Monthly visits by children in care workers are not regularly recorded in all files. The legislative requirement is every 3 months but PECAS, similar to other societies, has a policy of monthly visits.
- Case notes recorded by children in care workers confirm that some children are afraid to report inappropriate or abusive treatment to their workers because of the potential consequences such as repercussions from the foster parents, having to move or, conversely, not being moved. (See also, *Interviews with Children and Youth* below.)

In addition, the reviewers noted the following with respect to administrative practices:

- There are a number of open kin in care homes but with no children in them. This is unusual because kin in care homes are typically opened to accommodate a

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specific child. In addition, the reviewers were given a number of kin in care files that were empty.

- The team requested a list of currently open foster and kin in care homes as well as a list of foster homes opened and closed from 2008 to 2011. Some of the information provided was inappropriate. The list of current PECAS foster homes included outside paid resource foster homes in addition to PECAS homes. The list of all foster homes open and closed from 2008 to 2011 that was provided to the team showed homes opening and closing on the same day and, apparently, included homes where there had simply been an expression of an interest in fostering. The team was able to confirm a list of open PECAS homes at the time of the review but did not pursue a list of openings and closings for the 3 year period.
- Kin in care home records are being kept on paper rather than making use of the available electronic system which is being used for foster care. It isn't clear why different approaches are being used for similar processes.

The review team also identified concerns with respect to record keeping practices:

- Reviewers specifically noted that information about reports and investigations is not captured in a manner that allows for a comprehensive risk assessment when new concerns come to light and a worker is assigned to conduct an investigation. They noted the importance of continuity of information and communication, particularly in these circumstances and also in those where there are changes in workers for the files.

b) Interviews with Children and Youth.

Children and youth were interviewed primarily to determine if they were safe and secondarily to obtain information on the services being provided to them in the foster care program.

The interviews resulted in some disclosures which were previously known to the society and 3 additional disclosures of new issues.

All of this information was reported to the designated supervisor at the society for follow up.

In addition, some children said that meeting with workers in the foster home did not afford an appropriate level of privacy. The CFSA requires that workers have meetings in private with children.

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For the most part, the children and youth indicated that they had a good relationship with their workers and with their foster parents. Generally, they indicated that they trusted their workers. A number of the youth said that there were things they would not tell their workers in some cases for fear of repercussion and this is consistent with what is known about victimology and children in care.

c) Foster Parents

There were differing reports from foster parents about their experiences with the society.

There is evidence of conflict between the Society and the former foster family association that had existed for some time and culminated with a letter to the board. Some members of the foster family association felt they were unable to resolve this conflict with management and escalated their concerns to the board level.

Some senior society staff indicated that they believe the issues have been resolved with the change in the executive of the FFA.

In interviews, foster parents identified a number of specific concerns related to service delivery:

- The most common complaint expressed by foster parents was that they are not always provided with adequate and timely information, in accordance with licensing requirements, about the children who are placed with them. One cited instances where information was not provided on behaviour or mental health issues that represented safety risks to the foster parents, the foster child and/or other children in the home;
- Several foster parents expressed frustration in interviews and annual reports regarding the level of support available from the society's after hours services;
- A number of foster parents and some staff complained that there is a lack of funding for clinical support for children. Conversely, there were a few who indicated no difficulty in accessing clinical supports for children;
- A number of foster parents said they were not treated as part of the team, that they were not supported by workers, that workers don't return calls, or that they were not provided with copies of annual reviews. On the other hand, some indicated satisfaction;
- All noted that there is limited access to training through PECAS. Some have arranged training independently.

All foster parents were able to point to some positive working relationships with some staff. Foster parents who have been with the organization for a number of years reported that there has been a reduction in the level of support available to them in recent years.

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Newer foster parents were more positive in their comments about their relationship with the society and the level of support that they receive.

The executive director has reported to the Ministry that there has been a consultation with the FFA and that there will be ongoing consultations with foster parents to seek advice and provide opportunities for discussion on proposed changes to practice. It was not clear if there is a concrete plan for implementation.

d) Licensing Review of Foster Care Program and Crown Ward Review

The operational review team reviewed the most recent foster care licensing review and the Crown ward review and found similarities in the issues identified.

The initial licensing review was conducted in April 2011 and resulted in a number of terms and conditions being issued to the society. When those terms and conditions were not adequately addressed, a provisional licence was assigned with an October 31 expiry date. In October, another licensing review was conducted resulting in many more terms and conditions and a response required within 1 month. The society did not successfully address all of the terms and conditions.

Subsequently, a licensing report was presented to the society on December 5 by the Ministry (See Appendix B) with a number of terms and conditions and a response required by December 31, 2011. A response was received and some provisions were removed. However, because all of the provisions had not been adequately addressed, another provisional licence was issued with an expiry date of May 15, 2012.

The December licensing report included 22 terms and conditions addressing a number of areas including:

- Plans of care for children, timely medical and dental appointments, timely review of rights and responsibilities, timely completion of social histories, private meetings with children;
- Timely completion of a home study and approval process for a place of safety;
- Appropriate screening of resource home parents including Vulnerable Sector Screening through CPIC, completion of the home safety checklist with both foster parents, screening of all adults in the home;
- Failure to meet licensing requirements for annual reviews, regular visits and service agreements for foster parents;
- Failure to complete post placement reviews with foster children and foster parents.

In the past 5 years, 4 provisional licences have been assigned in the South East Region: 3 have been assigned to the Prince Edward CAS and 1 to another society for a short period of time in 2007.

The Crown Ward Review was completed in April 2011 (See Appendix C) and it contained a number of positive comments about services provided by the society to the Crown wards in its care. However, it concluded that the society's overall legislative compliance has declined from 73.5% to 60.7% since 2009. Similarly, the number of the directives per case has more than doubled during this time from 0.41 to 1.18. The areas identified for attention included the following:

- Timely completion of planning including social history, plans of care, 30 day plan of care following a move, supervisor endorsement;
- Appropriate content in plans of care including plans that address strengths and needs, detailed measurable goals and tasks;
- Placement continuity.

These reviews coupled with the current operational review, suggest that the society is having increasing difficulty in meeting requirements for children in care.

4. Child Protection Services

The terms of reference for the operational review did not include a full review of protection services. However, the lines of inquiry called for a review of intake and investigations processes relevant to concerns about foster care services. The review team was directed to review the intake and investigation processes and protocols of allegations about foster parents, including a documentation review and interviews with staff related to these functions. Consequently, the team asked staff about investigation processes and reviewed some protection files that involved child protection investigations in foster homes.

The information obtained raised questions regarding:

- Child protection investigation practices with respect to foster homes, particularly with respect to record keeping and documentation, verification of abuse and compliance with requirements for child protection investigations;
- Compliance with child protection standards.

In interviews, child protection staff stated that there were problems related to compliance with the child protection standards. It was also noted that staff reported that they could not accurately provide information on caseloads because some cases that should be closed remain open.

a) Child Protection Investigations of Allegations of Abuse in Foster Homes

The following issues were identified through file reviews or interviews with staff:

- Child abuse investigation reports on foster homes are partially sealed and there seems to be no standard approach to recording information in ongoing files which

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- would indicate that, at a minimum, a) an investigation has occurred, b) what the outcome was, including the rationale for the outcome, and c) what follow up is required.
- In many of the files reviewed, there is no rationale provided for investigation outcomes or decisions. Consequently, it is not always clear why an allegation is verified or not verified. Similarly, there is little to no information in the files about decision-making processes.
- There were conflicting reports from staff about how decisions are made regarding verification of abuse in foster homes. As noted, reports and files seldom record the rationale for any decisions or the decision-making process.

In addition to the above, the protocol for joint investigations with the police was reviewed and there was an interview with the police. The OPP reported that it had a generally good working relationship with the society. A few areas for improvement were cited including the need for a better shared knowledge about the respective roles, responsibilities and expectations of the OPP and the society during and after an investigation. They also had questions about information sharing in relation to the status of a case. The OPP noted the distinction between a police criminal investigation and a CAS child protection investigation. It was not always clear in the CAS files or in the interviews with staff that this distinction was consistently being made or that it was understood.

b) File Reviews

In addition to current files, the review team looked at the foster home files and related protection files in which there had been allegations of sexual abuse.

[REDACTED]

There was very little information in this foster home file. The electronic file contained only 1 supervisory note. There was also very little information in the resource home ongoing and casenotes files. The hard copy file contained limited information

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insofar as they impact on capacity to effectively manage the foster care program. The terms of reference included consideration of administrative controls as they relate to completeness and accuracy of information used for decision-making purposes, compliance with policies, practices and regulations and controls incorporated in the administrative systems. In addition, the team was directed to consider the society's follow up action with regard to the allegations of abuse in foster care. It is important to emphasize that governance and management were not investigated in detail by the operational review team and that a number of the findings are based almost exclusively on interviews.

Concerns identified include:

- Conflicts between staff that interfere with coordinated and collaborative planning and placement of children;
- The absence of a clear and cohesive response to the situations involving allegations of sexual abuse in foster homes;
- Apparent gaps in the board's approach to governance and oversight.

a) Board

Two board members were interviewed and staff were asked about interaction with the board. There was no review of board minutes to fully assess the questions that were raised by the interviews. The following areas were identified as potential concerns:

- The board does not appear to have a systematic approach to assure itself that the society is in compliance with legislation, regulations, standards and other requirements;
- The society is not meeting CFSA requirements for the foster care program and there has been a decline in compliance regarding Crown wards. It does not appear that the board has requested or has seen a plan to bring the society into compliance;
- It was not clear if the board is aware of the conflicts within the society that are affecting service delivery;
- The primary source of information for the board appears to be the executive director, and supervisors indicated that they rarely attend board meetings except occasionally to provide information on specific topics;

In addition to the foregoing, it was noted that some board members learned of the allegations of sexual abuse in foster homes through the media. This called into question whether the board as a whole is receiving the information it needs in order to manage risk and exercise its responsibilities for oversight.

As noted, the board seems to get most of its information from the executive director and, while it is recognized that there needs to be a level of trust between the board and the executive director, it is also important that there be a logical system of checks and

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balances that provides the board with the objective information it requires to fulfill its responsibilities.

b) Management

In conducting interviews and file reviews, a number of issues and questions were identified related to the management and administration of the society. Some of those matters were clearly within the scope of the review while others bore an indirect relationship to it. The key concerns identified are:

- The management team does not appear to have developed a comprehensive strategy to address the impact of the sexual abuse allegations in the short and longer terms;
- There is conflict among staff in the society that is having an impact on service delivery.

With respect to the sexual abuse allegations, the executive director has reported to the ministry that the following steps have been taken:

- Staff were asked to review all placements for risk of abuse immediately following the 2010 disclosures regarding [REDACTED] homes in which sexual abuse allegations were made;
- Youth who made the allegations were offered victim/witness services and counselling services were also offered to all youth who were cared for by the CAS, including youth no longer in care;
- Some research has been done including consulting a psychologist on risk reduction for children in care;
- Youth in care were given a day long session in the fall of 2010 on topics including self esteem and empowerment, experiences being in care and communication. The purpose was to gather information and inform decision-making on change in practice;
- All child protection staff persons were provided with a training session on sexualized behaviour;
- There was a consultation with the Foster Family Association and statements that the society intends to have ongoing consultations with foster parents to seek their advice and provide opportunities for discussion on proposed changes to practice.

In addition, it is believed that there was a critical incident debrief in 1 foster home for children who had been involved and one supervisor indicated she had spoken specifically to one of her staff regarding availability of counselling. It is also understood that the executive director and the board chair have sought legal advice.

Although a number of steps have been taken, it does not appear that the management team has followed up on the review of placements, the session for youth or the foster

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parent consultations noted above. Nor does it appear to have developed a comprehensive and cohesive approach to addressing impact including:

- A process for a thorough review and analysis with a view to identifying any potential areas for improvement in practices, procedures, policies or training;
- Support to staff including a critical incident de-briefing and follow up counselling for those who require it;
- Plans for ongoing support to complainants and victims beyond the initial offers of counselling;
- Development of a comprehensive approach to risk management.

In the course of interviewing staff about foster care services, it became evident that there was a significant amount of conflict within the organization and that it had a direct impact on the ability of the society to achieve coordinated and collaborative approaches to service delivery for children. With few exceptions, the staff interviewed identified serious concerns about the working environment. Following is a summary of the information provided in interviews:

- There is conflict between staff in different departments that gets in the way of effective communication about placement and planning for children:
 - Some staff responsible for children in care report they are involved in placement decisions with resource staff while others report they have no input, that their concerns are not addressed and that children have been moved without notice to them. On the other hand, resource staff report effective working relationships with some staff but complain that others are overly negative or critical;
 - Some staff said they are no longer able to advocate effectively within the agency for children on their caseload because they have no working relationship with staff in another department and/or with the executive director.
- A few staff reported varying levels of difficulty in dealing with the impact of the recent allegations of sexual abuse and varying amounts of support from the society.
- In addition to the foregoing, interviews with staff, including supervisors provided conflicting information on the availability of and access to training for staff. A number of staff also noted that requests for an Employee Assistance Plan had not been successful.

The team interviewed a cross section of staff and found evidence of conflict across the organization. Staff described the work environment as very divided and very stressful. Staff who have been with the organization for some time indicate that there was a

positive working environment that began to change approximately 4 years ago followed by significant deterioration within the last 18 to 24 months.

In contrast to the foregoing, there were a few positive comments made by a few staff. The team also found that despite concerns about the work environment, staff expressed a commitment and dedication to their work on behalf of children. In addition, some acknowledged issues and identified the kinds of constructive changes that need to be made within the society including changes in policies and procedures, relationships with foster parents and support to staff.

6. Summary of Findings

a) Foster and Kin in Care Services

- The society is having significant difficulty achieving compliance with licensing requirements under the *Child and Family Services Act* and its regulations, as evidenced by three reviews (operational, licensing, Crown ward). This includes difficulty in proper completion of appropriate screening and assessment requirements for foster homes and kin in care homes including places of safety designations;
- The society does not appear to have a well developed capacity to effectively apply required tools such as SAFE and to adequately assess information collected about potential resource homes;
- The society has made fundamental errors in the application of licensing requirements;
- There is a lack of consistency and standardization in record keeping practices that inhibits communication between staff about information regarding the history of, for example, a foster home. In some cases, it is difficult for staff to identify patterns because information is scattered across files.
- The society does not appear to have effective administrative practices for recording and management of resource home information.
- Although there is recognition of the need to establish and maintain effective working relationships with foster parents as a whole, it is not clear that there are concrete plans to do so.

b) Child Protection Services

- There is evidence, based on a file review and interviews with staff, of non-compliance with child protection standards regarding investigations and ongoing protection cases

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- Record keeping regarding child protection investigations in foster homes is inconsistent and does not always allow staff to identify links between related files.
- There is conflicting information from staff about how decisions are made regarding verification of abuse in foster homes. Reports and files seldom record the rationale for any decisions or the decision-making process.
- Society child protection standards reflect MCYS standards but provide little guidance to staff on how they are to be applied within the context of the society and community culture.

c) Governance and Management Practices

- There are significant conflicts within the organization that are interfering with coordinated and collaborative approaches to planning and placement of children.
- Although some steps have been taken to address issues related to the allegations of sexual abuse in foster homes on a case by case basis, there does not appear to be a comprehensive plan regarding how to deal with such situations in the short and longer terms.
- The board does not appear to be receiving all of the information it needs to exercise its responsibilities for governance, oversight and risk management nor does it appear to have a risk management plan for addressing current issues related to the allegations of sexual abuse and the provisional foster care licence.

CONCLUSIONS

The society has many dedicated board members and staff who have a strong commitment to providing effective child welfare services to children and who have a commitment to the organization and their community. However, the society is experiencing significant difficulty in a number of areas which is concerning from the perspective of services to children.

The extent of the difficulties are such that the society will require assistance from external expertise, at least in the short term, to develop a comprehensive plan that includes immediate remedial action in some areas and further review and analysis in others.

RECOMMENDATIONS AND REQUIREMENTS

The requirements identified below will be imposed as terms and conditions on the foster care licence for the society.

a) Foster Care and Kin in Care Services

1. Requirement: Take action to immediately address inadequacies in the application of and compliance with licensing requirements and tools. This must include:
 - A process by which an individual(s) with relevant expertise systematically assesses the extent to which every foster or resource home is in compliance with the applicable requirements, and if not, appropriate action must be taken so that the foster or resource home achieves compliance no later than April 27, 2012;
 - An assessment by individuals with relevant expertise of the need for any training for resource staff, with the objective of increasing staff capacity to understand compliance with the licensing requirements, including the effective application of tools such as SAFE.
2. Requirement: Review, revise and implement policies and procedures for foster care and resource homes based on the *Child and Family Services Act* and its regulations, Ministry requirements and best practices. Best practices can be developed in consultation with the Ontario Association of Children's Aid Societies, other societies and other appropriate resources.
3. Recommendation: Develop and implement a plan for ongoing liaison, communication and support with the Foster Family Association at the supervisor, executive director and board levels with a view to creating and maintaining effective working relationships.

b) Child Protection Services

4. Requirement: Initiate a plan for a third party integrated file review to determine the current level of compliance with child protection standards as they relate to foster care. Based on that review, identify and implement any steps required to achieve compliance including any training required for staff.
5. Recommendation: Develop a plan to review, revise and implement policies and procedures for protection services in consultation with the Ontario Association of Children's Aid Societies, other societies and other appropriate resources. The policies and procedures should include:
 - requirements related to investigation of foster homes consistent with practices in other societies

- record keeping practices that reflect continuity of information and improved communication between workers.

c) Governance and Management

6. Recommendation: Develop a strategy to increase the capacity of the board to exercise its role. This may include engaging expertise to help the board formulate new approaches, practices and procedures for exercising its responsibilities.
7. Recommendation: The board should consider engaging expertise to assist in the development, implementation and monitoring of a workplan for implementation of recommendations and directives from this operational review, the licensing review and the Crown ward review. The plan should include mechanisms for monitoring implementation and assessing the extent to which the required and recommended changes have occurred.
8. Recommendation: Establish a plan with clear time lines that includes the use of objective and skilled expertise to address existing conflicts within the organization in order to establish more effective working relationships. Concurrently, develop policies and practices within the organization that encourage collaboration and coordination in providing services for children and that support initiative and the exchange of ideas in developing holistic approaches to meeting the needs of children.
9. Requirement: Develop and implement a risk management plan for addressing the impact of the sexual abuse allegations and/or findings in foster care in the short and longer terms on all complainants and victims, as well as for staff of the society. This would include a critical incident debriefing, a communications strategy and a plan for providing support to complainants, victims and to staff.
10. Recommendation: Review administrative practices regarding data management to determine the extent to which they provide accurate information for planning and decision-making purposes within the organization. Based on the review conducted, implement improvements to these practices.

MINISTRY OF CHILDREN AND YOUTH SERVICES
OPERATIONAL REVIEW

The Children's Aid Society of the County of Prince Edward

PURPOSE OF OPERATIONAL REVIEW

The Operational review will focus on the foster care program and services in The Children's Aid Society of the County of Prince Edward (the Society). The focus is on safety of children and youth who have and are currently residing in foster care homes and the efficacy of actions taken with respect to the foster care program and services at the Society. The review will examine administrative controls as they relate to completeness and accuracy of information used for decision making purposes. Potential operational improvements in administrative procedures and specific concerns of foster care practices are also included as part of the review.

This review is being conducted under the authority of the *Child and Family Services Act*, Part 1, Section 6 (1).

SCOPE

The Operational review of the foster care program and services in Prince Edward Children's Aid Society may include:

- Interviews with children and youth in foster care.
- Interviews with selected personnel, foster parents association and associated people as required.
- Interviews with individual staff, foster parents or children and youth interested in speaking with the review team.
- Evaluating the controls incorporated in the administrative systems,
- Evaluating compliance with policies and practices, and regulations
- Reviewing procedures for potential operating improvements.
- Analyzing data including caseload size and supervisor span of control.
- If issues are identified that warrant further investigation and review, the Regional Office reserves the right to expand the scope of the review.

Potential Line of Inquiry	Process
Safety and Supports for children and youth in receipt of PECAS Foster Services	Interviews with children and youth – Frontenac CAS worker and Crown Ward Reviewer will meet all children and youth currently placed in foster homes at the PE CAS to assess whether all children and youth are safe.
Comprehensive review of Society's foster care policies, procedures, recruitment, screening and training requirements.	Review team will review Prince Edward CAS foster care policies and procedures recruitment, screening and training requirements for foster parents including home study approval process. Policies will be reviewed to assess compliance with Standards.
Staff training requirements	Review team will review Society training requirements for all foster care staff and assess whether staff has received training.
Review of foster care provisional licence	Program Supervisor and Program Advisor will document reasons for provisional licence and the Society response to date
Intake and Investigation processes relevant to concerns about foster care services	Review team will review the intake and investigation processes and protocols of allegations about foster parents, including documentation review and interviews with staff related to these functions.
Policies and procedures associated with opening, utilization and closing foster homes.	Review team will review all documented policies and procedures and interview staff related to the opening, utilization and closing of foster homes including a review of foster family files.
Systemic, operational, and case specific follow up by the agency regarding allegations of abuse in while in foster care	Review team will review individual cases and follow up on children and youth alleging abuse while in foster care to review what steps were taken and determine if there was appropriate follow up.
File Review of Children in Care placed in Foster Homes	Review team will review all files of children currently placed in foster care. Review will include: case #, date of admission, reason for admission, assessment of needs on file, does placement appear to meet the needs of the child, any allegations of abuse since placement, follow up and timeframes, actions taken, staff involved.
Foster Care and Ongoing workers Staffing Caseload Review	Review of organizational chart and accountabilities. Review of foster care staffing caseloads/supervisory span of control.
Society follow-up with Regional Office regarding Serious Occurrence	Program Supervisor will undertake serious occurrence reporting as regular Program

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reporting and Society's complaint procedures	Supervisor activity. Review of data related to any complaints within the Society and complaints taken to the Child & Family Services Review Board.
Establish a Review follow up team	A review follow up team will be established with Ministry and Children's Aid Society of the County of Prince Edward staff and Board representation to support implementation of recommendations. Program Supervisor for the Society will be a member of the review follow up team.

OPERATIONAL REVIEW STEPS

1. Introductory Meeting

The Operational Review team will meet with the Board Chair and Executive Director to outline the approach to the operational review. Management will be requested to identify any areas of possible concern or interest to be included in the review. A formal communication will be sent from the Ministry of Children and Youth Services to all staff and foster parents of Prince Edward Children's Aid Society to notify them of the operational review. Individuals will also be notified of the requirement to participate in interviews if necessary and to provide them with contact information if they wish to meet with the review team.

2. Interviews

The operational review team will conduct individual interviews with all children and youth currently in foster care to assess immediate safety. Interviews will also be conducted with senior management and foster care staff and associated people as required to obtain details of organizational systems and procedures. Where procedures or systems impact on other agency units, interviews may be conducted with personnel in the other units. Interviews will also be conducted with the foster parent association, and any foster family or child or youth wishing to meet with the operational review team.

3. Documentation

Agency policies and procedures related to foster care services will be reviewed. Children in care files will be reviewed for all children currently placed in foster care. Investigation files related to children in foster care, and Foster Family files will be reviewed to determine identified issues and actions taken. The scope of the documentation review will span from 2008 to current date, unless otherwise warranted. The information obtained in the file review and interviews will be used to prepare written narratives to document the foster care system.

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4. Review of Systems

The Operational Review team will use the above documentation to evaluate controls and identify areas for potential operational improvements. "Best practice" information may be obtained from reference materials or through surveys of other organizations. An internal control evaluation will be used to determine compliance with relevant policies and practices, the CFSA and regulations.

5. Reporting

A written report of observations and recommendations will be prepared and shared with the Board of Directors and Executive Director of the Prince Edward Children's Aid Society and as appropriate within the Ministry.

6. Required Resources and Skill Sets

An Operational Review team has been established to include expertise in foster care, governance and accountability, investigative procedures and operational review processes.

Review Team

Name	Responsibility	Background
Suzanne Hamilton	Project Manager Develop process to conduct interviews, tracking sheets, and documentation of review findings. Take part in Interviews with stakeholders including Society staff, board members, Foster Care Association and others wishing to speak to the review team. Review documentation, policies and procedures. Write draft and final Reports including Recommendations.	Experienced Project Manager
David Remington	Lead Program Supervisor Take part in interviews with stakeholders including Society staff, board members, Foster Care Association and individuals wishing to speak to the review team. Review documentation, policies and procedures including caseloads and supervisory span of control.	Program Supervisor, South East Regional Office
Judi Shields	Interview children and youth currently in foster care in Prince Edward County to assess immediate safety. Review systemic, operational and case specific follow up by the agency regarding allegations of abuse while in foster care	Crown Ward Reviewer MCYS Former Director at Simcoe CAS

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	including reviewing children in care, investigation and foster family files. Take part in interviews with stakeholders including Society staff, board members, Foster Care Association and individuals wishing to speak to the review team.	
Lisa Tripp	Interview children and youth currently in foster care in PE to assess immediate safety. Review systemic, operational and case specific follow up by the agency regarding allegations of abuse while in foster care including reviewing Children in Care, Investigation and foster family files. Take part in interviews with stakeholders including Society staff, board members, Foster Care Association and individuals wishing to speak to the review team.	Manager, Children's Aid Society of the City of Kingston and the County of Frontenac
Anne Moloney	Review of foster care provisional licence and society response to date. Review of Society follow up with Regional Office regarding Serious Occurrence Reporting.	Program Supervisor, South East Regional Office
Sandra Lowe	Review of foster care provisional licence and society response to date.	Licensing Specialist, South East Regional Office
Anna Raimondo	Review of process to assess whether legal requirements are met.	Lawyer, Legal Services Branch

7. OPERATIONAL REVIEW FOLLOW UP

A review follow up team has been established with Ministry and Prince Edward CAS representation including board representation to support implementation of recommendations. The Program Supervisor for the Society will be a member of the review follow up team.

Duty to Report

The Review team will be instructed around issues pertaining to our duty to report if immediate safety issues are uncovered during the review process. This process will be documented including reporting, oversight and review of issues uncovered.

OPP Investigations

The Review team will contact the local OPP detachment to notify them of the Operational Review to help ensure we do not intrude on any current police investigations that may be underway.

Ministry of Community
and Social Services

Ministry of Children and
Youth Services
South East Region
11 Beechgrove Lane
Kingston, ON K7M 9A6
Reception 613-545-0539
Toll Free 1-800-646-3209
Fax 613-536-7272

Ministère des Services
sociaux et communautaires

Ministère des Services à l'enfance
et à la jeunesse
Région sud-est
11, ruelle Beechgrove
Kingston, ON K7M 9A6
Reception 613-545-0539
Sans Frais 1-800-646-3209
Télécopieur 613-536-7272



December 5, 2011

Mr. William Sweet, Executive Director
Children's Aid Society of the County of Prince Edward
P.O. Box 1510
16 MacSteven Drive
Picton ON K0K 2T0

Dear Mr. Sweet:

Re: 2011 Licensing Report - Foster Care Program

This licensing report is based on the site visits of October 24, 25 and 26, 2011, which were conducted by Pat Tretina and Sandra Lowe, Program Advisors, South East Region, Ministry of Children and Youth Services, and the responses received from your agency on November 7th, 2011. The following is the program information, the review data summary and responses.

1. Program Information

Program: Foster Care - Transfer Payment Agency
Number of Homes: 32 active homes

2. Review Data

Checklist: Utilized *Foster Care Licensing Checklist*
Interviews: Management: 1 (at initial review)
Staff: 2
Foster Parents: 3
Youth: 2

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Files Reviewed: Foster Parents: 4
1 Closed
Children's Files: 3
1 Closed

Policies and Procedures

Policies and Procedures were reviewed as part of the initial licensing review in May 2011. Effective August 1, 2011, the operator has developed and implemented policies and procedures compliant with the Ministry of Children and Youth Services new and amended policy requirements for Safe Administration, Storage and Disposal of Medication, and Improved Communication and Transfer of Medication Information.

3. Licensing Issues Identified During the October 2011 Review

a) Foster Care Plan Review (Reg 70, Section 115)

On one youth's file, Plan of Care appears to be done on time; however it is only signed by the Supervisor. The youth is on Temporary Care Agreement and the Plan of Care does not include the involvement of the parent.

Directive: Ensure that all parties involved in Plans of Care sign the document at completion. Ensure that when a youth's parent is not involved, the reason is provided.

Response: The agency has not provided a response.

Status: Ensure that the Plan of Care is signed by all parties involved and there is a notation of why the child's parent was not involved.

This will be a Term and Condition of the License.

On one youth's Plan of Care; several goals remain in progress for a long period of time.

Directive: Ensure youth's goals identify desired outcomes within specified timeframes.

Response: The agency has not provided a response.

Status: Ensure that the goal identified on this youth's Plan of Care identify outcomes within specified timeframes.

This will be a Term and Condition of the License.

On one youth's file, Plans of Care were not completed at required timeframes, goals appeared to be "in progress" yet were out of date and Supervisory sign off did not occur for one year.

Directive: Ensure youth's Plans of Care are completed on time and are signed by the supervisor. Ensure that youth's goals identify desired outcomes within specified timeframes.

Response: The Supervisor has reviewed the file with the Child in Care Worker. The first Plan of Care was not completed and created a sequence of problems where the subsequent Plan of Care recordings were all late. The goals on Plans of Care are under review for proper alignment with the youth's development.

Status: Ensure timely completion of Plans of Care and signing of Plans of Care, as well as a review of youth's goals and timeframes.

This will be a Term and Condition of the licensing report.

b) Social History (Regulation 70, Section 111(7)(8))

On one youth's file reviewed, the Social History was not completed within the required timeframes.

Directive: Ensure that the Social History for a youth is initiated within 60 days of placement and updated annually.

Response: The Supervisor discussed the late completion of the Social History with the Child in Care Staff. The sixty day deadline for completion of the initial Social History has been confirmed.

Status: Compliance of Social History timeframes was a term and condition on the 2008, and 2009 and 2010 license.

This will remain a term and condition of the 2011 license.

c) Health Care Responsibilities (Policy Directive 0203-03)

On one youth's file the intake medical was completed significantly late. There did not appear to be a notation on file for the delay.

Directive: Ensure that youth have a medical and dental assessment at admission and annually thereafter.

Response: The agency has not provided a response.

Status: Ensure that youth have a medical and dental assessment at admission and annually thereafter.

This will be a Term and Condition of the 2011 license.

On one youth's file, the annual dental check up was 4 months delayed. Reason for delay was not noted. The dentist recommended an Orthodontic consultation. There were no notes on file to indicate this occurred. Optometrist appointment for this youth

in September 2010 recommended a 6 month follow up. No notes on file to indicate if this occurred.

Directive: Ensure that medical and dental reviews are completed annually and that recommendations made during treatment are followed up.

Response: The agency has not provided a response.

Status: Ensure that medical and dental reviews are completed annually and that recommendations made during treatment are followed up.

This will be a Term and Condition of the 2011 license.

d) Review of Children's Rights (Policy Directive 0202-09)

One youth's file does not indicate the youth's Rights and Responsibilities were reviewed at required intervals.

Directive: Youth should be made aware of their Rights and Responsibilities at admission to care, again at the Plan of Care that occurs one month after placement, and minimally, every six months thereafter.

Response: The agency has not provided a response.

Status: Youth should be made aware of their Rights and Responsibilities at admission to care, again at the Plan of Care that occurs one month after placement, and minimally, every six months thereafter.

This will be a Term and Condition of the 2011 license.

e) Supervision and Support of Foster Home (Regulation 70, Section 121)

Directive: Ensure that the file contains records of scheduled home visits. Staff should visit the foster home where a child is placed and meet with the youth and the foster parents within 7 days of placement, again within 30 days of placement and minimally, every three months thereafter.

On one Foster Parent file, the supervision visits appear to be 5 months apart.

Response: The Resource Worker visited the home at required intervals but recorded the visits in the general case note section of the file, not in the visit note section.

On one foster parent file, there was no record of Resource Worker visits between March 1st, 2011 and August 19th, 2011.

Response: The Resource Worker did visit the home in May 2011 for the annual review. The visits were not separately recorded.

On one youth's file, there was no record of a face to face meeting between the child and her worker from March 29th, 2011 to June 23rd, 2011 and no indication of a private visit after that date.

Response: The agency has not provided a response.

Status: This will be a Term and Condition of the 2011 license.

f) The Home Study Decision (Policy Directive 0207-05)

One home was deemed a place of safety and opened in December 2010. The home study was not completed and input electronically until October 2011. This document is still not approved.

Directive: When a home is deemed a place of safety, final documentation should be completed as soon as possible.

Response: The Resource Worker responsible for the home study has limited experience and was unclear on time lines for completion. The Executive Director was acting as an interim Resource Supervisor and the supervisory oversight provided was not adequate. The home study is under review with the expectation of completion by month's end.

Status: Completion of the Home Study and Approval will be a Term and Condition of the 2011 license.

g) Approval of a Foster Home (Regulation 70, Section 118)

On two Foster Parent files, the initial CPIC clearly states that it does not include Vulnerable Sector Screening.

Directive: As part of the Home Study approval, the file must contain a CPIC report and include Vulnerable Sector Screening

Response: An error was made when submitting the request for the CPIC of the foster parents. The second form that includes Vulnerable Sector Screening was not submitted. This is now in process.

Status: CPIC reports with Vulnerable Sector Screening for the two foster parent families will be a Term and Condition of the 2011 license.

On one foster parent file, the records only included two reference checks.

Directive: A single foster parent applicant is required to have three references on file.

Response: The agency has not provided a response.

Status: A single foster parent applicant is required to have three references on file.

This will be a Term and Condition of the 2011 license.

On two foster parent files, the Home Safety Checklist was not completed in full and all non compliances had not been addressed.

Directive: Ensure that the Home Safety Checklist is completed and signed and all areas of non compliance are addressed before a youth is placed in the the home.

Response: A new Home Safety Checklist is to be completed and signed by the foster parents and the workers.

Status: Ensure that the Home Safety Checklist is completed and signed and all areas of non compliance are addressed before a youth is placed in the the home.

This will be a Term and Condition of the 2011 license.

h) Screening/Reference Checks on all adults in Foster Family Household (Policy Directive 0202-05)

Directive: Legislation requires, in all circumstances, that individuals over the age of 18 provide CPIC reports that include Vulnerable Sector Screening.

On one foster family file, their [REDACTED]. On one foster family file, there is an [REDACTED] and previously, an adult son resided in the home for a period of time in 2011. There were no CPIC's or Vulnerable Sector Screening done on any of these adults.

Response: There is some question among Societies on the practice. Resources Staff have been advised by other Societies that the practice is not to request a Criminal Reference Check where a long time resident or family member turns 18 and where the Society is familiar with the person. It would be our preference to follow this practice.

Status: Verification will be required that the adults identified provide a CPIC with Vulnerable Sector Screening. CPIC reports that include VSS for all individuals in a foster home that are over the age of 18 will be a Term and Condition of the 2011 license.

i) Foster Home Review (Policy Directive 0207-11)

Directive: Foster parent files are to contain an Annual Review signed by the foster parent, the Resource Worker and the Supervisor.

Two foster home annual reviews completed in 2010 were not approved by the Supervisor until May 12, 2011.

Response: The Resource Worker assigned worked in Resources on an interim basis. Knowledge of timelines of document completion was not satisfactory and supervisory oversight did not capture the delay.

One foster home review was completed 7 weeks late.

Response: The requirement that Foster Home annual reviews are written, complete and signed by the worker, foster parents and supervisor, due on anniversary dates, has been reviewed with Resources staff.

Status: Timely completion and sign off of annual reviews will be a Term and Condition of the 2011 license.

EXEMPTION

Section: 21

j) Foster Care Service Agreement (Regulation 70, Section 120)

On two foster parent files, the Service Agreement was not completed at time of approval and opening of the home. Service Agreements were completed significantly later. On one foster parent file, the Service Agreement completed in July 2010 was not signed by the Supervisor until October 2011.

Directive: The Service Agreement is to be signed by the foster parent, the Resource Worker and the Supervisor on approval of the home and reviewed annually.

Response: The agency practice is to review the terms of a service agreement on the opening of a home as part of orientation. This requirement has been reviewed with Resources Staff following the licensing review. The Resources Supervisor will be monitoring completion of Service Agreements on home openings and during each annual review. The expectation that the Service Agreements are provided promptly to the Supervisor has been reviewed with Resources Staff.

Status: Completion of Service Agreements at the opening of a home, and each annual review will be a Term and Condition of the 2011 license.

k) Learning about a Placement after a Child Leaves (Policy Directive 0202-07)

On two youths' files, post placement notes could not be located for each placement a youth had left. On one foster parent file, three youth had been placed in the home, post placement notes were found in two cases. Notes were also found on one foster parent post placement contact addressing concerns they had. There was no record of how these concerns were addressed.

Directive: Post placement contact is to be made with a youth and the foster parent when a youth leaves a placement in which they have resided for 30 days or more. A process should also be in place to address concerns of the post placement meetings.

Response: Post placement has been addressed with one youth. Staff involved and recording of responses to foster parent concerns is driven by the nature of the complaint. Where the concern is with Resource services, the Resource Worker is responsible to report to the Resource Supervisor. Efforts made to resolve the concerns are recorded in the foster family file. Where a question is beyond Resources, other staff and supervisors are involved in resolving concerns.

Status: Completion of Post Placement notes when a youth leaves a placement in which they resided for 30 days or more will be a term and condition of the 2011 license.

l) Emergency, Fire, Safety and Health Protection (Policy Directive 0205-04)

A fire safety plan was not posted in one foster parent home. There were some concerns as to whether the youth in the home was familiar with the plan and would exit the home in case of fire.

Directive: Ensure that the fire safety plan has been posted and reviewed with the youth in the home.

Response: The Resource Worker met with the foster parent to have the fire escape plan posted and discuss what to do in the event of fire.
Status: The Society is to ensure that the fire safety plan has also been reviewed with the youth. This will be a Term and Condition of the 2011 license.

4. Licensing Issues Identified During the May 2011 Review

a) Foster Plan of Care Review (Reg. 70, Section 115)

On two youths' files that were reviewed in May 2011, goals on the Plans of Care were virtually unchanged. This still appears to be the same when reviewed in October 2011.

Directive: Ensure youths' goals identify desired outcomes within specified timeframes.

Response: The October 2011 Plans of Care have been completed. The Child in Care Supervisor is reviewing goals in response to question of relevance. Supervisors have been asked to review goal development with all Child in Care Staff to develop goals that are more time sensitive and measurable.

Status: This will be a Term and Condition of the 2011 license.

b) Supervision and Support of a Foster Home (Reg. 70, Section 121)

One foster family file reviewed in May 2011 did not show any resource visits after April 2011. An annual review was completed in June 2011 in which only the foster mother was present. The licensing review in October 2011 does not indicate follow up.

Response: Resource staff and Child in Care staff are experiencing difficulties in setting up visits with this family. The Child in Care Supervisor is scheduling a meeting with the family to repeat the expectation for regular meetings.

Status: The outcome of this meeting will be a Term and Condition of the 2011 license.

c) Approval of a Foster Home (Regulation 70, Section 118)

On one foster parent file, it was noted in May 2011 that the foster father did not have a medical assessment on file. This file was reviewed again in October 2011. There does not appear to be a Resource visit since April 19, 2011 and the issue of the medical has not been addressed.

Directive: All foster parents are required to have a medical assessment prior to approval.

Response: The foster family is considering closing their home. If the decision is made to continue, the foster parent will be required to provide a medical assessment.

Status: Follow up of the foster parent medical assessment or closure will be a Term and Condition of the 2011 license.

The agency has failed to address all of the issues raised during the licensing review. A Provisional License will be issued which will expire on May 15, 2012, with the following Terms and Conditions:

1. Terms and Conditions attached as Schedule "A".
2. The Society is to provide written verification to the Ministry's Program Advisor by December 31, 2011, that the Plan of Care for the youth identified in the licensing review has been signed and reviewed with the youth's parent.
3. The Society is to provide written verification to the Ministry's Program Advisor by December 31, 2011, that goals on the youth's Plan of Care identified in the licensing review are addressed and identify outcomes with specified timeframes.
4. The Society is to ensure timely completion and signing of Plans of Care which include review of all youths' goals.
5. The Society is to ensure timely completion of youths' Social Histories.

6. The Society is to provide written verification to the Ministry's Program Advisor by December 31, 2011, that a file notation has been made addressing the late medical intake for the youth identified in the licensing review.
7. The Society is to provide written verification to the Ministry's Program Advisor by December 31, 2011, that a notation is placed on file for the late dental appointment for the youth identified in the licensing review and that Orthodontic and Optical appointments have been addressed.
8. The Society is to provide written verification to the Ministry's Program Advisor by December 31, 2011, that Rights and Responsibilities have been reviewed with the youth identified in the licensing review.
9. The Society is to provide written verification to the Ministry's Program Advisor by December 31, 2011, that private meetings have taken place between the worker and the youth identified in the licensing review.
10. The Society will ensure that when a home is deemed a place of safety, there will be timely completion of the home study and approval process.
11. The Society is to provide written verification to the Ministry's Program Advisor by December 31, 2011, that the two families identified in the licensing report have provided Vulnerable Sector Screening.
12. The Society is to provide written verification to the Ministry's Program Advisor by December 31, 2011; that the foster parent identified in the licensing review has provided a third reference.
13. The Society is to provide written verification to the Ministry's Program Advisor by December 31, 2011, that the home safety checklist has been completed in full for the two foster parents identified in the licensing review.

14. The Society is to provide written verification to the Ministry's Program Advisor by December 31, 2011, that the adults identified in the licensing review have provided CPIC's with Vulnerable Sector Screening.
15. The Society will ensure that CPIC's with Vulnerable Sector Screening are obtained for all adults in foster homes that are over the age of eighteen (18).
16. The Society will ensure timely completion and sign off of Foster Parent Annual Reviews.
17. The Society will ensure that Service Agreements are completed upon opening of a foster home and updated at each annual review.
18. The Society will ensure that there are post placement meetings with youth and foster parents when a youth leaves a placement in which they have resided for 30 days or more.
19. The Society is to provide written verification to the Ministry's Program Advisor by December 31, 2011, that a fire safety plan has been reviewed with the youth identified in the licensing review.
20. The Society is to provide written verification to the Ministry's Program Advisor by December 31, 2011, that the youth identified in the licensing report in May 2011 has had Plan of Care goals addressed.
21. The Society is to provide written verification to the Ministry's Program Advisor by December 31, 2011, that the foster family identified in the May 2011 licensing review has had regular foster home visits and that expectations for regular meetings have been reviewed.
22. The Society is to provide written verification to the Ministry's Program Advisor by December 31, 2011, that the foster parent indicated in the May 2011 licensing review has provided a medical assessment or the home has been closed.

The operator of this foster care program is responsible to ensure the requirements of the Child and Family Services Act are met and maintained at all times. If you have any questions or concerns regarding licensing, please contact me at 1-800-646-3209, ext. 7266.

Yours truly,

Sandra Lowe
Program Advisor
Program & Compliance Review
South East Region

c: Anne Moloney, Program Supervisor

PECAS Foster Care Program Operational Review Report
January 25, 2012

APPENDIX C

PECAS Foster Care Program Operational Review Report
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**Crown Ward Review
Agency Report**

Society: The Children's Aid Society of the County of Prince Edward
 Review Dates: April 18 - April 20, 2011
 Post Review Meeting: April 21, 2011
 Program Supervisor: Anne Moloney
 Manager CWR Unit: Ron Cormier
 Reviewers: Judith Nailer (lead), Nancy Sweete (co-lead), Linda Linklater, Jo-Anne Harington

OVERVIEW

- 28 Crown wards reviewed
- 5 Crown wards reviewed for the first time
- 23 Crown wards previously reviewed
- 22 Crown wards completed confidential questionnaires
- 1 Crown ward requested an interview
- 3 Crown wards of native heritage, of which, 2 Status Indians, 1 eligible for review of status

SUMMARY OF FINDINGS: SERVICE

The focus of this section of the review is on the provision of service delivery to the children being reviewed. As in previous years, the recommendations (found in Appendix 2) are case related and made for the Society's consideration.

Child Profile

Table 1 represents a breakdown of the ages of the children reviewed at the time of Crown wardship and at the time of review:

TABLE 1 - Age at Time of Review

Age	Average	0-9 Years	10-12 Years	13-17 Years
At Time of Review	14.5	3	6	19
At Time of Crown wardship	9.1	13	10	5

As seen in Table 1, 19 (67.9%) of the 28 children and youth reviewed were between the ages of 13 and 17 years. The average age at the time of review was 14.5 years. Planning for this group requires services that focus on maintaining youth in stable placements and preparing them for independence. Children had access to recreational, skills building and financial management opportunities to provide them with the life skills needed for successful independence. There was evidence of consideration of the use of the Ontario Child Benefit Equivalent (OCBE) fund in the child's plan of care. Extended care and maintenance for youth who wish to receive ongoing financial support from the society past their 18th birthday was

EXEMPTION

Section: 21

thoroughly documented. Transitional planning for those youth requiring service from the adult developmental sector was also well developed in case planning.

Nine children (32.1%) were 12 years of age or younger, representing a population which requires services that focus on permanency and continuity of care. While documentation reflected consideration of children's needs for permanency and enduring relationships, there were cases where permanency planning did not reflect the efforts of the Society to explore adoption and legal custody with long-term caregivers, kin, or others. Two recommendations were made to review children's permanency plans.

TABLE 2a - Primary Diagnosis

As seen in Table 2a, 24 (85.7%) of the 28 children reviewed had a diagnosis of a special need. These children and youth required specific programming and services to address their identified needs. Eleven children were prescribed psychotropic medication (39.3%), which is lower than the 2009 provincial average of 49%. Fourteen children were involved in treatment (50.0%), which is above the 2009 provincial average of 41% of children who received therapy, including speech, occupational and physiotherapy as well as counselling services. Specialized treatment needs were addressed in the planning services. Consultation with outside service providers contributed to effective planning for children and youth and recommendations from these professionals were reflected in case planning. In some cases updated assessments may be beneficial to assist in planning and ensure valid and up to date diagnoses and treatment plans for children and youth. Recommendations were made in four cases to consider updated psychological assessments.

Diagnosis	Primary
ADD/ADHD	5
FAE/FAS	0
Eating disorder	0
Psychiatric diagnosis	6
Developmental delay	1
Neurological disorder	0
Multiple disabilities	3
Dual diagnosis	0
Depression/anxiety	2
Intellectual disability	1
Physical Disability	0
Medical Condition	0
Medically fragile	0
Learning disability	5
Emotional difficulty	0
Other disability	1

TABLE 2b - Behavioural Issues

As noted in Table 2b, 10 children and youth (35.7%) exhibited behavioural difficulties. There was consistent planning to identify and manage supports to children and their caregivers. The society utilized behaviour support services, including support from child and youth workers. This year, two children or youth (7%) were considered high risk due to behaviours that placed themselves and/or others at risk. Neither of these cases required follow up as the society recognized the needs of high risk youth and had made efforts to keep these children free from harm. The 2009 provincial average is 9% of youth designated as high risk.

Diagnosis	Primary
Frequent running behaviour	1
Inappropriate sexual behaviour	1
Involvement in prostitution	0
Self harming behaviour	1
Suicidal ideation / gesturing - current	0
Suicidal ideation / gesturing - historical	0
Aggressive/Assaultive behaviour	7
Substance Abuse	0
Other	0

TABLE 2c - Serious Occurrences

Table 2c indicates that 11 cases required serious occurrence reports over the previous year and all 11 reports were located in children's files. The requirements for Serious Occurrence reporting were understood and met by the society.

Serious Occurrences in previous 12 months	11	39.3%
Serious Occurrences in previous 12 months - cannot determine	0	0.0%
Serious Occurrence reports on file	11	39.3%

TABLE 2d - Previous History of Verified Abuse

Sexual abuse - home verified	0	0.0%
Physical abuse - home verified	1	3.6%
Both sexual abuse home verified and physical abuse home verified	2	7.1%
Total abuse - home	3	10.7%
Sexual abuse resources verified	1	3.6%
Physical abuse resources verified	0	0.0%
Both sexual abuse resources verified and physical abuse resources verified	0	0.0%
Total abuse - resources	1	3.6%
Number of children/youth abused at home and in a resource	1	3.6%

As noted in Table 2d, three children (10.7%) experienced abuse prior to admission to care.

One child reviewed experienced abuse following his/her admission to care. This situation occurred during the current review year. Appropriate steps were taken by the society to ensure the children received the planned treatment or support in response to the abuse he or she experienced. Planning indicated the Society's intent to pursue Criminal Injuries Compensation on the children's behalf.

	Prince Edward 2011	Ontario Year 2009
Previous History of Verified Abuse	10.7%	24%

CLINICAL ISSUES

Appendix II provides a summary of the 25 service recommendations made in 14 cases.

Eleven recommendations were made to improve documentation, which included eight recommendations to enhance plans of care and recording. While significant improvements were noted this year in the development of planning, the documentation required additional work in some cases to address children and youth's strengths and needs with related objectives in each OnLac dimension either with a related objective or indication of why an objective is not required. Children's plans of care took into account all available information on the child as set out in the Assessment and Action Record (AAR), any existing reports, as well as the child's social history. Social histories clearly documented the rationale for significant decisions made and the child's significant experiences in care. More information with regard a child's separation and placement history should be included in the documentation. Three recommendations were made to augment a child's social history.

Five recommendations were made to file pertinent reports, including Crown wardship orders and school reports. Two recommendations pertained to the documentation of the child's progress through progress reports from the therapist.

The society ensured that children and youth had opportunities to participate in age appropriate recreational activities.

SERVICES TO CHILDREN OF NATIVE HERITAGE

[REDACTED] of the 28 children/youth reviewed, [REDACTED] were identified as having native heritage. [REDACTED] were provided with opportunities to explore and develop knowledge of their cultural and spiritual heritage and to participate in cultural and spiritual practices.

EXEMPTION
Section: 21

EDUCATION

Tables 3a and 3b reflect the educational profile of the children reviewed.

TABLE 3a - Educational Placement

Preschool/Kindergarten	0	0.0%
Elementary regular	3	10.7%
Elementary IEP	7	25.0%
Elementary Subtotal	10	35.7%
Secondary Advanced	0	0.0%
Secondary General	8	28.6%
Secondary Basic	0	0.0%
Secondary IEP	7	25.0%
Secondary Alternative Program	2	7.1%
Secondary Subtotal	17	60.7%
Not Attending School	1	3.6%

As noted in Table 3a, 27 of the 28 children and youth reviewed (96.4%) were enrolled in a school program. Fifteen children (53.6%) had been reviewed by an IPRC Committee. The 2009 provincial average is 52%. Four children experienced suspensions during this review period.

TABLE 3b - Educational Progress

Progressing well toward promotion	13	46.4%
Progressing with some difficulty towards promotion	13	46.4%
Promotion at risk	1	3.6%
Cannot determine	0	0.0%
N/A (see individual case reports)	1	3.6%

As seen in Table 3b, 26 of the 27 children attending school (96.3%) were making progress towards promotion. Meeting children's educational needs was a consistent focus of the planning and there was evidence of advocacy within the school system to ensure children's educational programming was consistent with their abilities and they received educational supports. Educational placements were preserved whenever possible for children who experienced a placement change and youth were provided with support to make the transition to secondary school. There was discussion and planning for youth who were identifying post-secondary educational goals.

PLACEMENTS

TABLE 4 - Placement Type

Emergency/Receiving Homes	0	0%
Regular foster care (CAS)	4	14%
Specialized foster care (CAS)	8	29%
Treatment foster care (CAS)	3	11%
CAS operated group home	0	0%
CAS operated parental model	0	0%
OPR - parent model	5	18%
OPR - foster	2	7%
OPR - staffed	4	14%
CMHC	0	0%
YCJA	0	0%
Independence	1	4%
Provisional foster home	1	4%
Parental home	0	0%
Community caregiver	0	0%
Total	28	

As seen in Table 4, of the 28 children and youth reviewed, 16 (57.1%) were placed in society operated resources, representing a decrease in the number of children placed within the society's own resources. Last year 65.5% of the children reviewed were placed in CAS operated settings. The 2009 provincial average is 49%. The society has developed the resources necessary to place and maintain the majority of children within society operated care.

Eleven children (39.3%) were placed in outside paid resources with four children (14%) residing in staffed resources. Placing and maintaining children in family settings and placement with kin continued to be a primary goal for the society. At the time of this year's review, 23 children (82.1%) were living in family based settings. The 2009 provincial average is 76%. Efforts were made to keep siblings together when it was in their best interests to do so.

The permanency plan for 14 of the children reviewed (50.0%) was long-term foster care. For five youth (17.9%), the permanency plan was independence and three children (10.7%) were identified as remaining in long-term residential care. A transition to adult services was planned for one child. The Society was actively seeking adoption for one child (3.6%). The 2009 provincial average is 5% of children reviewed for whom adoption was planned. The society supported the development and maintenance of positive long term relationships for children and youth with their foster family and/or family of origin. There were four cases where the permanency plan was unclear and the children and youth may benefit from increased clarity with regard to their future permanency goals. Two recommendations were made to review children's permanency plans. In these cases the goals may not have reflected that all permanency options to ensure enduring relationships for children were explored and documented in ongoing case planning.

During an average of 65.0 months of Crown wardship, changes in placement and caseworker assignments were as follows:

TABLE 5 - Frequency of Placement Change

Prince Edward Average:2011	1 placement every 18.2 months
Ontario Average:2009	1 placement every 27 months

As noted in Table 5, the average placement length of the children and youth reviewed was 18.2 months which was shorter than the previous year's average of 22.3 months. The 2009 provincial average is a placement change on average every 27 months.

TABLE 6 - Placements Since Crown Wardship

Children with:	Number
1 placement since Crown wardship	7
2 placements since Crown wardship	6
3 or more placements since Crown wardship	15

As noted in Table 6, seven children and youth (25.0%) experienced placement continuity since Crown wardship. The children had an average of 3.6 placements since Crown wardship. The 2009 provincial average was 43% of children who had one placement since Crown wardship.

CASEWORKER ASSIGNMENTS

TABLE 7 - Frequency of Caseworker Change

Prince Edward Average:2011	1 caseworker every 20.9 months
Ontario Average:2009	1 caseworker every 21.1 months

As seen in Table 7, the children and youth reviewed experienced a change in caseworker on average every 20.9 months. The average length of caseworker assignment for the society's 2010 review was 22.9 months. Children and youth experienced less caseworker continuity on average over the last year and caseworker continuity was slightly below the provincial average of 21.1 months. The average number of caseworkers since Crown wardship was 3.1.

TABLE 8 - Caseworkers Since Crown Wardship

Children with:	Number
1 caseworker since Crown wardship	6
2 caseworkers since Crown wardship	2
3 or more caseworkers since Crown wardship	20

The average caseworker contact with children was 15.6 times in the past 12 months, which is greater than the 2009 provincial average of 11.9 visits and consistent with the society's 2010 average of 15.7 visits. The society is to be commended for their accomplishment in maintaining a high level of caseworker contact with children.

ACCESS

TABLE 9a - Access

Court ordered access	19	67.9%
Court order no access	8	28.6%
Court order silent	1	3.6%
Court order - cannot determine	0	0.0%

TABLE 9b.- Access Exercised

Mother only exercises	7	25.0%
Father only exercises	1	3.6%
Both parents exercise	8	28.6%
Other family members exercise	10	35.7%
Siblings exercise	24	85.7%
Cannot determine	0	0.0%

As noted in Table 9a, of the 28 children reviewed, access was court ordered for 19 children (67.9%) and eight children (28.6%) had orders of no access. If in the child's best interests, efforts were made to preserve family connections for children. In many cases, children and youth were supported in their relationships with family members both by the society and their foster parents. Children's wishes were addressed and overall, appropriate action was taken by the society to assist the child with any difficulties arising from the access. There were cases where further documentation was required to address updated information about the family's current situation and cases where the children appeared to require additional support during visits. Two recommendations were made to review the access arrangements.

Table 9b notes that access was exercised by mothers in 25% of the cases reviewed. Access was exercised by fathers in 3.6% of the cases reviewed. Both parents exercised access in 28.6% of the cases. Other family members exercised access with children in 35.7% of the cases. Proactive efforts on the part of the society to ensure meaningful and active sibling contact were evident in case documentation. Access between siblings occurred frequently (85.7%). Nineteen of the 28 children reviewed had siblings in care.

RESPONSES FROM CHILDREN

TABLE 10 - Questionnaires and Interviews

	Prince Edward 2011	Ontario 2007
Number of cases reviewed	28	5,548
Number of questionnaires submitted	22	2,742 (49%)
Number of interviews requested	1	289 (5%)

As seen in Table 10, 22 children and youth completed confidential questionnaires. One child reviewed requested an interview. Responses from the children and youth indicated that the majority were pleased with their placements, felt cared for, and trusted their caseworkers. The concerns expressed by children and youth included worries about their parents and siblings, being unhappy, getting along with their foster parents and other children in their foster homes, school, health, and what would happen to them when they turned 18 years of age and their wardship terminated.

ADOPTION PROBATION

None of the children and youth reviewed this year were placed on adoption probation.

SUMMARY OF FINDINGS: SYSTEMS

Table 11 indicates comparative figures for the past three years and the 2009 provincial average.

TABLE 11 - Overall Compliance

	Prince Edward 2009	Prince Edward 2010	Prince Edward 2011	Ontario 2009
Full Compliance	73.5%	69.0%	60.7%	66%
Directives per Case Reviewed	0.41	0.48	1.18	0.50

Seventeen files were in full legislative compliance. Thirty-three directives were issued in 11 cases. Two directives were issued for late minimum three month visits and two directives were issued for missed private visits. Twelve directives were issued for late plans of care, including four directives for a review within 30 days if a child moves, four directives for a late review of the plan of care and four directives for late supervisory endorsements of the plans of care. Five directives were issued for lack of timely AAR completion and five directives were issued for lack of timely update of a social history. Three directives were issued for late medical and dental examinations. Four directives were issued to develop a plan of care to address a child's specific needs. Please refer to Appendix I for a complete list of directives issued in the current review.

The society's 2011 legislative compliance rate was 60.7%, a decrease over last year's rate of 69.0% and lower than the 2009 provincial average of 66%.

Review Highlights:

- The society provided effective services overall for a high special needs population of children (85.7%)
- The majority of children and youth were placed in society operated care and 82.1% were placed in family settings;
- Children were involved in treatment services and medication therapy was reviewed and altered as necessary;
- Academic achievement was a focus of planning with the vast majority of children (96.3%) making progress;
- Youth were provided with support in preparation for independence and services for those youth transitioning to adult services were also well managed, through collaboration with the developmental services working group;
- Caseworker contact with children and youth was above the provincial average;
- Access was well managed overall and sibling contact was maintained for 85.7% of the children reviewed, and
- The society's response to the majority of the directives and recommendations from the 2010 Crown Ward Review was evident in the case files.

Areas Requiring Further Attention:

- Timely completion of planning is required, including the social history, AAR, plans of care, including the 30 day plan of care following a move, and supervisor endorsement, in keeping with required time frames;
- Consistent planning is required to develop plans of care that address strengths and needs in each OnLac dimension with the development of detailed, measurable goals and tasks or indication of why an objective is not required, including cases where children and youth were placed in outside paid resources, and
- Continued efforts to address placement continuity.

DIRECTIVES

APPENDIX I

- 17 Cases in full legislative compliance.
- 33 Directives issued in 11 cases.
- 0 Cases not in compliance - no directives issued.

Summary of Directives

- 0 7 day visit
- 0 30 day visit
- 2 Minimum three month visits by social worker
- 2 Private visits
- 5 Child's family history
- 2 Annual medical exam
- 1 Annual dental exam
- 4 Review of plan of care
- 4 Review within 30 days if child moves
- 4 Review of plan by Supervisor
- 4 POC address specific needs
- 0 Annual school report
- 0 Discussion of rights
- 0 Plan of care residential resources
- 0 File Serious Occurrence Report
- 0 Comply Court Order
- 0 Status review
- 0 File to be reviewed by Program Supervisor
- 0 File to be reviewed by senior management
- 5 Assessment and Action Record

APPENDIX II

RECOMMENDATIONS

14 Cases required no service recommendations
25 Service recommendations were issued in 14 cases, as follows:

Themes

The recommendations are identified in the following themes:

1. 11 (44%) related to enhancing or updating recording for plans of care, social histories and quarterly recordings.
2. 8 (32%) related to issues regarding planning for children/youth in areas of permanency, access, and referrals for clinical assessments.
3. 6 (24%) related to file documentation such as ensuring Crown ward orders, clinical and educational reports are on file.

A plan to address the above noted themes that emerged during the review can be provided to the Service Review and Compliance Unit as opposed to a response to individual recommendations made at the case level.

Summary of Recommendations

- 2 Review access arrangements
- 2 Review permanency planning
- 1 Counselling
- 2 File documentation to include Crown ward order
- 1 File documentation to include School Report
- 2 File documentation to include Clinical Report
- 7 Enhance /update Plan of Care
- 3 Enhance /update Social history
- 1 Enhance /update Quarterly recordings
- 4 Consider psychological assessment

APPENDIX III - Compliance with Standards

Standards	Cases where Applicable	Cases in Compliance	Level of Compliance
7 day visit	12	12.0	100.0%
30 day visit	12	12.0	100.0%
Minimum three month visits by social worker	28	26.0	92.9%
Private visits	28	26.0	92.9%
Child's family history	28	23.0	82.1%
Annual medical exam	28	25.0	89.3%
Annual dental exam	28	27.0	96.4%
Review of plan of care	18	14.0	77.8%
Review of plan within 30 days if child moves	12	8.0	66.7%
Review of plan by Supervisor	18	14.0	77.8%
POC address specific needs	28	24.0	85.7%
Annual school report	27	27.0	100.0%
Discussion of rights	28	28.0	100.0%
Plan of care residential resources	11	11.0	100.0%
Assessment and Action Record	28	23	82.1%

Table 11 previously identified the overall compliance rate for The Children's Aid Society of the County of Prince Edward in 2011 as 60.7%. The overall compliance rate is calculated by determining the number of cases in full compliance. In this case, of the 28 cases reviewed, 17 of the cases were fully compliant.