



17th Legislative Assembly of the Northwest Territories

Standing Committee on Government Operations

Report on the Review of the
2014 Report of the Auditor General
of Canada on Northwest Territories
Child and Family Services

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**STANDING COMMITTEE ON
GOVERNMENT OPERATIONS**

**REPORT ON THE REVIEW OF THE
2014 REPORT OF THE AUDITOR GENERAL OF CANADA
ON NORTHWEST TERRITORIES CHILD AND FAMILY SERVICES**

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STANDING COMMITTEE ON GOVERNMENT OPERATIONS

REPORT ON THE REVIEW OF THE 2014 REPORT OF THE AUDITOR GENERAL OF CANADA ON NORTHWEST TERRITORIES CHILD AND FAMILY SERVICES

INTRODUCTION

The Standing Committee on Government Operations held its public review of the 2014 report of the Auditor General of Canada on April 23-24, 2014.

Members would like to thank Assistant Auditor General Mr. Ronnie Campbell, Principal Mr. Glenn Wheeler, and Lead Auditor Ms. Erin Jellinek for preparing the report and assisting the Committee during the public review. The Committee also thanks the Deputy Minister of Health and Social Services, Ms. Debbie DeLancey, Assistant Deputy Minister (Operations), Ms. Sue Cullen, and the Director of Child and Family Services, Mr. Andy Langford, for appearing as witnesses at the review.

ROLE OF THE AUDITOR GENERAL OF CANADA IN THE NORTHWEST TERRITORIES

The Auditor General of Canada conducts financial and performance audits in all three northern territories. Financial audits tell the Legislative Assembly and the public whether the government is keeping proper records and presenting its financial information fairly. Performance audits consider whether programs are being run with due regard for economy, efficiency, effectiveness, and environmental impacts. Since 2006, the Auditor General has conducted eight performance audits in the Northwest Territories and issued one status report evaluating progress on the recommendations of previous audits.

The Legislative Assembly's Standing Committee on Government Operations is mandated to review the reports of the Auditor General and make recommendations to the Government of the Northwest Territories. Members look for efficiencies, best practices, and gaps, with the intent of improving services to residents. The Auditor General's reports play a crucial role in Members' scrutiny of government spending and performance.

NORTHWEST TERRITORIES CHILD AND FAMILY SERVICES DELIVERED BY THE DEPARTMENT OF HEALTH AND SOCIAL SERVICES AND THE REGIONAL HEALTH AND SOCIAL SERVICES AUTHORITIES

The Auditor General's report was tabled in the Legislative Assembly on March 4, 2014. This year's performance audit focused on child and family services. The Department is responsible for the overall management of the child and family services system, and the Director of Child and Family Services has key obligations under the *Act* to protect children from harm, abuse, and neglect. The regional authorities are responsible for assisting the Director in fulfilling these obligations.

Many lives are touched by the child and family services system. Across our jurisdiction over 1,000 children—roughly one child in every six—receive services of some kind each year. Approximately 250 children are in temporary or permanent custody of the Director of Child and Family Services. The Government of the Northwest Territories spends about \$21 million annually on these services.

The Northwest Territories has one of the highest rates of child apprehensions in the country. Over 90% of child welfare cases involve Aboriginal children.

The root causes of maltreatment are well known. The Northwest Territories has extremely high rates of poverty, alcohol and drug abuse, mental health issues, domestic violence, homelessness, and crime. As well, safe and affordable housing is often unavailable.

Underlying these problems is the legacy of the residential school system. Residential schools caused profound disruption to Aboriginal families, forcibly removing children from their homes and eroding traditional practices that bound aboriginal families and communities together. The school system lasted four generations. Many children were subjected to physical abuse, sexual abuse, or neglect, or some combination of these types of abuse. While residential schools have been closed for decades, the devastating effects are still being felt today.

Child and family services is a very difficult area in which to work. Child protection workers are routinely exposed to traumatic and stressful situations in which they must make difficult decisions about the well-being of children. They also manage paperwork, prepare legal documents, and appear in court. There are many dedicated and committed child protection workers in the Northwest Territories.

Two previous reviews of child and family services have been conducted, the first in 2000 by a national organization known as the Child Welfare League. Among its recommendations were: 1) strengthen accountability; 2) increase resource

allocations for regional authorities; and 3) improve tools and guidance to support service delivery.

The second review was completed in 2010 by the Legislative Assembly's Standing Committee on Social Programs. Members traveled the territory extensively, hearing from people about how to improve the child and family services system. Eight core recommendations were made, out of which flowed several dozen others. The core recommendations were: 1) focus on prevention and early intervention; 2) take the least intrusive measures possible; 3) set up Child and Family Services Committees in every community; 4) provide alcohol and drug treatment options in all communities; 5) address gaps in services for youth; 6) improve administration and procedures; 7) develop a territorial anti-poverty strategy; and 8) develop a strategic plan for implementing recommendations.

THE AUDITOR GENERAL'S 2014 REPORT

The Auditor General's performance audit covered program delivery between April 2010 and September 2013. Case files for 46 individual children and 36 foster homes were sampled.

Looking to the *Child and Family Services Act* and the Child and Family Services Standards and Procedures Manual, the Auditor General tested the Department against its own rules. Four main questions were asked. First, is there an adequate accountability framework in place? Second, are there adequate mechanisms in place to support service delivery? Third, are the Department and regional authorities complying with key requirements under the *Act*? And fourth, are appropriate prevention and youth programs in place?

The Standing Committee on Government Operations was deeply troubled to learn from the Auditor General's report that there are serious systemic problems with the delivery of child and family services. The Department and regional authorities are not adequately meeting their key responsibilities. Deficiencies exist in almost every area examined.

According to the Auditor General, when the regional authorities initiated investigations, they did so within the required 24 hours, in most cases. However, 13% of these investigations did not include the required steps to assess the child's immediate safety. Moreover, not one of the investigations included a longer-term assessment of the potential for abuse or neglect to reoccur. Even more alarming was that in nearly a third of the files, child protection concerns had been reported but never investigated by the regional authorities.

The Auditor General also found that regional authorities did not conduct the necessary checks on foster homes. In 69% of the files examined, children were placed in foster homes which had not been properly screened.

In addition, neither the Department nor the regional authorities have developed programming to support vulnerable youth who are not entitled to protection under the *Act*.

OBSERVATIONS AND RECOMMENDATIONS

The Auditor General's observations can be summarized as follows:

The Department and regional authorities are not adequately meeting their key responsibilities for the protection of children, youth, and families.

The Department has not established an adequate accountability framework.

The Department has not assessed the financial and human resources required to carry out its obligations under the *Child and Family Services Act*.

Regional authorities do not always complete required steps to keep children safe.

- In 28% of files child protection concerns were not investigated.
- 18% of investigations were not completed within 30 days as required.
- In 27% of investigations required interviews were not conducted.
- In 13% of investigations the child's immediate safety was not assessed.
- Longer-term risk assessments were not conducted in any of the investigations.
- 14% of plan-of-care agreements had not been signed by the parties.
- In 54% of plan-of-care agreements compliance with conditions was not properly monitored.

Regional authorities are not meeting requirements for screening and reviewing foster care homes.

- 69% of foster care homes were not properly screened.
- Annual reviews were not performed in 81% of the files.

I. General Considerations

1. Develop and implement a comprehensive action plan

The Committee is alarmed by the number of deficiencies identified by the Auditor General and the degree of inaction displayed by the Department following the 2010 report. During the public review, departmental witnesses were unable to explain to the Committee's satisfaction why so little has changed. Instead, witnesses tended to deflect responsibility and blame the system.

In light of this grave situation, the Committee expects to see a comprehensive action plan for addressing deficiencies. The action plan should differentiate between short-term and long-term priorities, and identify specific goals, timelines and indicators for measuring progress. Such an action plan will be critical to successfully implementing recommendations contained in this report.

The Auditor General has sounded a warning in this area. The 2012 status report examined progress made by GNWT departments in implementing recommendations of previous performance audits and identified the absence of strong action plans as a significant impediment to effective management.

In addition, the Department has already failed to deliver on a number of promises. For example, in response to the Auditor General's report in 2011, the Department re-committed to revising the funding methodology for the regional authorities by the end of 2012-13, having made the original commitment in 2006. But it did not follow through. Given this poor track record, the Department's next steps will be closely monitored. The Committee may request that the Auditor General conduct a follow-up audit if progress is unsatisfactory.

Recommendation 1

The Standing Committee on Government Operations recommends that the Department of Health and Social Services produce its action plan by June 30, 2014 and table it in the Legislative Assembly at the earliest opportunity.

2. Focus on prevention, early intervention, and family preservation strategies

The Auditor General's report underscores a fact established in the 2010 report: the legacy of residential schools reverberates throughout the child and family services system. Over 90% of child welfare cases involve Aboriginal children.

The effects of this inter-generational trauma show themselves in struggles with poverty, substance abuse, and domestic violence—which figured prominently in the case files reviewed by the Auditor General. In 83% of them, alcohol or drugs were identified as putting a child at risk. Alcoholism and other addictions ravage families and communities. Yet regional authority officials regularly told the Auditor General there are not enough practical avenues for treatment or prevention services to assist families.

Neither the Department nor the regional authorities have developed comprehensive guidelines to assist child protection workers in accessing prevention services.

The Committee recommends swift and vigorous action in the area of prevention, early intervention, and family preservation strategies. Specifically, prevention services should be expanded in three areas:

- A. Alcohol and drug treatment options:** Community-based options must be expanded to ensure that parents requiring alcohol or drug treatment or rehabilitation are able to complete the terms of the plan-of-care agreement within a reasonable timeframe. Without such treatment options, the plan-of-care process for these families is doomed to failure.

- B. Healthy Family Program:** This program is aimed at providing in-home support to parents of young children and educating them about nutrition, oral health, play-based learning, and risk factors associated with developmental delays. The program is especially beneficial for survivors of the residential school system. In that system children were forcibly taken from their families, placed in institutional settings, and often unable to form loving attachments with their parents. Thus, many parents, even those a generation or two removed from the residential school experience, do not have the necessary life skills or emotional capacity to form strong, loving bonds with their children. The program is currently operating in all regions but not in every community. It should be expanded into all 33 communities with the goal of reaching every at-risk family in the territory.

- C. Family preservation workers:** Another promising avenue is to employ family preservation workers across the territory. According to the Auditor General's report, at least one such position exists. The purpose is to provide in-home, individualized intervention services, with the aim of preventing the out-of-home placement of children, whenever possible. The family preservation worker may provide assistance in the development of effective parenting skills such as: instructions in family budgeting; guidance in managing daily household tasks; information about nutrition and health; and identification of services that might help at-risk families.

The goal of prevention and early intervention strategies is to reduce the overall need for child apprehensions. In conjunction with vigorous prevention-based strategies, the Department should therefore establish targets—such as a 20% reduction in the number of child apprehensions over a given period.

As a word of caution, reductions in the number of child apprehensions must never be achieved by cutting back on child protection services but rather only by improving the well-being of children and families.

Recommendation 2

The Standing Committee on Government Operations recommends that the Department of Health and Social Services focus on prevention, early intervention, and family preservation strategies with the goal of reducing the need for child apprehensions. Measurable targets should be specified for the upcoming five- and ten-year periods.

Recommendation 3

The Standing Committee on Government Operations recommends that the Department of Health and Social Services investigate the feasibility of territory-wide expansion of family preservation workers. These workers provide in-home, individualized intervention services in order to promote the well-being of children and families.

Recommendation 4

The Standing Committee on Government Operations concurs with the Auditor General of Canada and recommends that the Health and Social Services authorities, in consultation with the Department of Health and Social Services, assist child protection workers in identifying and accessing the prevention programs available to children and families. They should also ensure that prevention programs such as the Healthy Family Program are offered to families in need.

3. Build linkages in earnest with Aboriginal governments

As a continuation of the previous set of recommendations, stronger linkages must be forged between the child and family services system and Aboriginal governments. This should be accomplished through enhanced community engagement.

Band administrators should be encouraged to participate and advocate at all stages of the child protection process. They should also be included in training activities and workshops and given regular opportunities to develop and participate in training programs for Child and Family Services Committees.

Recommendation 5

The Standing Committee on Government Operations recommends that the Department of Health and Social Services build stronger linkages with Aboriginal governments pertaining to child and family services.

4. Monitor future progress through updates to Exhibits 3, 4, 5 and 6 of the Auditor General's report

The Committee concurs with the Auditor General that ongoing progress will be best monitored through updates to performance indicators associated with Exhibits 3, 4, 5 and 6 of the Auditor General's report.

Updates should be provided on a quarterly basis to the Standing Committee on Social Programs, which will monitor progress on the Department's action plan.

Recommendation 6

The Standing Committee on Government Operations recommends that the Department of Health and Social Services provide quarterly updates to the Standing Committee on Social Programs on improvements to child and family services. These updates should replicate indicators associated with Exhibits 3, 4, 5 and 6 of the Auditor General's report. These exhibits pertain to the following areas respectively: conducting investigations; addressing confirmed child protection needs; attending to children in care of the Director; and screening and reviewing foster care homes.

5. Address deficiencies without delay

During the public review, the Committee heard departmental witnesses blame a broken child and family services system for ineffective management. The Deputy

Minister alluded to the need for amendments to the *Hospital Insurance and Health and Social Services Administration Act* as this legislation contributes to the convoluted accountability framework. The Deputy Minister also alluded to impending changes to the broader structure of health-care governance.

The Committee is gravely concerned that efforts to correct deficiencies in child and family services may be delayed or postponed until governance reforms take place. Members agree with the Auditor General that deficiencies can and must be addressed within the existing legislative framework, even as improvements are made to the governance system.

Recommendation 7

The Standing Committee on Government Operations recommends that the Department of Health and Social Services begin immediately and in earnest to correct deficiencies in child and family services. Improvements must not be delayed until governance reforms have taken place as reforms may take until the end of the 17th Assembly or longer to complete.

6. Develop a communication plan

Finally, given the long-standing and serious nature of the deficiencies identified by the Auditor General, key stakeholders and the public have a right to be informed about the Department's progress in addressing them.

Recommendation 8

The Standing Committee on Government Operations recommends that the Department of Health and Social Services develop a communication plan pertaining specifically to child and family services so that stakeholders and the public are informed about completed actions, upcoming changes, and anticipated timelines.

II. Accountability

1. Conduct a thorough review of the accountability framework

According to the Auditor General's report, the current accountability framework leaves the Director with little control over the day-to-day operations for which he is ultimately responsible under the *Act*. While the Director authorizes child

protection workers to exercise many of his duties and make decisions on his behalf, these workers are employed by the regional authorities and report to managers who are not accountable either to the Department or the Director for child and family services delivered in their region. **This is a serious impediment to accountability.**

During the public review, departmental officials tended to blame problems with accountability on a broken system. Departmental officials must not be allowed to deflect or redirect blame but rather must demonstrate a greater degree of leadership.

To date, the Department has not made full use of a statutory provision allowing the Director to appoint Assistant Directors in the regional authorities. An Assistant Director has been appointed in one of the regional authorities. During the audit, the Department was unable to explain why this provision had not been more widely used.

With respect to accountability and oversight, two promising signs emerged during the public review. First, departmental witnesses stated their intention to appoint CEOs in the regional authorities as Assistant Directors of Child and Family Services.

Second, they stated that progressive discipline will be introduced for the first time. Members learned that child protection workers and supervisors have been informed that, as the most extreme form of discipline, their statutory appointments may be revoked if the required eyes-on contact is not made with children in care of the Director or other serious breaches of policy or procedure occur.

Recommendation 9

The Standing Committee on Government Operations concurs with the Auditor General of Canada and recommends that the Department of Health and Social Services conduct a thorough review of its accountability framework for child and family services to identify existing deficiencies and implement mechanisms to enhance accountability.

2. Incorporate a performance component in contribution agreements

The current conditions of contribution agreements only require regional authorities to submit audited financial statements and incident reports. However, these documents do not provide the Department with information it needs to evaluate compliance with the *Child and Family Services Act*. By incorporating a

performance component in contribution agreements, the accountability framework would be strengthened significantly.

Recommendation 10

The Standing Committee on Government Operations recommends that contribution agreements with the Health and Social Services authorities include a performance component clearly indicating that funding is contingent on compliance with the *Child and Family Services Act*. This action should be taken immediately.

3. Complete required compliance audits

Under the Child and Family Services Standards and Procedures Manual, the Department is required to conduct annual compliance audits across all regions. However, these audits are not being completed. During the three-year audit period, a total of 21 audits should have been completed across the regional authorities. In fact, only 3 audits were completed, along with 1 follow-up action plan to address deficiencies.

Failure to complete these audits is significant. Compliance audits provide the Department with crucial information for monitoring compliance with the *Act* and, more fundamentally, ensuring that children are being protected from harm, abuse, and neglect.

Recommendation 11

The Standing Committee on Government Operations concurs with the Auditor General of Canada and recommends that the Department of Health and Social Services conduct compliance audits of child and family services files annually in all Health and Social Services authorities, as required by the Child and Family Services Standards and Procedures Manual. It should also require Health and Social Services authorities to submit action plans to address deficiencies and monitor their implementation.

As an additional accountability mechanism, the Committee recommends that all internal compliance audits and associated action plans be forwarded to the Standing Committee on Social Programs.

Recommendation 12

The Standing Committee on Government Operations recommends that internal compliance audits and action plans designed to address deficiencies prepared by regional authorities be forwarded to the Standing Committee on Social Programs.

4. Table compliance audits in the Legislative Assembly

The Committee recommends that compliance audit reports be tabled as a matter of course and further that these audit reports include updates on indicators associated with Exhibits 3, 4, 5 and 6 of the Auditor General's report.

Recommendation 13

The Standing Committee on Government Operations recommends that internal compliance audits, and action plans designed to address deficiencies, prepared by regional authorities be modified for privacy considerations and tabled in the Legislative Assembly. The Committee further recommends that internal audits include updates on indicators associated with Exhibits 3, 4, 5 and 6 of the Auditor General's report.

5. Report annually to the Minister as required under the *Act*

The *Act* requires the Director to report annually to the Minister of Health and Social Services. The Auditor General found that reporting had not taken place since 2002. In the absence of such reporting, the Minister has limited assurance that the system is meeting the needs of children, youth, and families. **This finding is significant.**

Recommendation 14

The Standing Committee on Government Operations concurs with the Auditor General of Canada and recommends that the Director of Child and Family Services report annually to the Minister of Health and Social Services, as required under the *Child and Family Services Act*.

6. Table the Director's annual report in the Legislative Assembly

The Department should commit to tabling the Director's annual report to the Minister in the Legislative Assembly each year. The report should include updates for each of the regional authorities on indicators associated with Exhibits 3, 4, 5 and 6 of the Auditor General's report.

Recommendation 15

The Standing Committee on Government Operations recommends that the Minister of Health and Social Services table the Director's annual report each year in the Legislative Assembly. The Standing Committee further recommends that the Minister of Health and Social Services arrange for the Director's annual report to include updates for each regional authority on indicators associated with Exhibits 3, 4, 5 and 6 of the Auditor General's report.

7. Adopt indicators associated with Exhibits 3, 4, 5 and 6 of the Auditor General's report as performance measures in all future departmental business plans

Finally, the annual departmental business plan should incorporate updated data on indicators associated with Exhibits 3, 4, 5 and 6 of the Auditor General's report.

Recommendation 16

The Standing Committee on Government Operations recommends that all future departmental business plans adopt as performance measures the indicators associated with Exhibits 3, 4, 5 and 6 of the Auditor General's report.

III. Support for delivery of services

1. Conduct a thorough review of required resources

When the *Child and Family Services Act* came into force in 1998, the Department set funding levels without assessing what resources would be required to fulfill its statutory obligations. Since 1998, the Department has never done a comprehensive assessment of this kind. When asked by the Auditor General's team to provide a rationale for the 1998 funding levels, the Department was unable to do so.

The 2000 report by the Child Welfare League recommended that the Department rationalize the allocation of resources. Unfortunately, when asked by the Auditor General for the Department's response to that report, departmental officials were unable to locate it.

The Committee concurs with the Auditor General's recommendation that the Department assess the human and financial resources required to fulfill its obligations under the *Act*. **The urgency of this task cannot be overstated.**

In light of the substantial deficiencies identified by the Auditor General, Members were puzzled during the public review when departmental witnesses said additional resources may not be required. The Committee's view is that additional resources are almost certainly required. Any needs for additional resources should be communicated through the business planning process, or, if necessary, through a supplementary appropriation request.

Recommendation 17

The Standing Committee on Government Operations concurs with the Auditor General of Canada and recommends that the Department of Health and Social Services, in conjunction with the Health and Social Services authorities, perform a detailed assessment of the financial and human resource requirements for delivering child and family services. The Department should then revisit this assessment periodically to identify any necessary changes.

2. Complete revisions to the Child and Family Services Standards and Procedures Manual

The audit examined whether clear standards, procedures, guidance and tools are in place to facilitate effective service delivery by the regional authorities and child protection workers. **The audit determined that the Department has failed in this area.**

The Department developed the Child and Family Services Standards and Procedures Manual in 1998. Despite attempts over the better part of a decade to revise the manual, the Department has never completed this task. As a result, the manual has never been updated to keep pace with changes to the *Act* or best practices in child welfare.

The audit also determined that some sections of the manual are lacking tools and guidance to assist child protection workers in meeting key requirements. These include sections on conducting investigations, administering plan-of-care

agreements, and screening prospective foster homes. **The absence of standardized procedures for all key responsibilities is a significant deficiency. It represents a grave failure to support child protection workers. This likely affects morale, staff turnover, and, ultimately, the well-being of children.**

Recommendation 18

The Standing Committee on Government Operations concurs with the Auditor General of Canada and recommends that Department of Health and Social Services, in consultation with the Health and Social Services authorities, update and clarify the Child and Family Services Standards and Procedures Manual and identify additional tools and guidance to better assist child protection workers in meeting key requirements of the *Child and Family Services Act*.

Recommendation 19

The Standing Committee on Government Operations recommends that the Department of Health and Social Services complete revisions to the Child and Family Services Standards and Procedures Manual by December 2014.

Recommendation 20

The Standing Committee on Government Operations concurs with the Auditor General of Canada and recommends that the Department of Health and Social Services, in consultation with the Health and Social Services authorities, develop a process for all parties involved in the delivery of child and family services to share information on best practices and challenges in delivery of these services.

3. Improve mandatory training

The Department is responsible for providing mandatory introductory training to child protection workers. Members learned during the public review that this training typically spans a two-week period.

When child protection workers were asked by the Auditor General team about the effectiveness of this training, their responses were mixed. Some stated the

training helped them understand their jobs but others said the training did not provide adequate guidance on how to apply the *Act* and the Manual in their daily work. The Department should assess the effectiveness of the existing training program and make enhancements accordingly.

Recommendation 21

The Standing Committee on Government Operations concurs with the Auditor General of Canada and recommends that the Department of Health and Social Services, in consultation with the Health and Social Services authorities, provide training to all child protection workers for all key responsibilities required to carry out child and family services. It should also assess whether the training provided is meeting the needs of child protection workers to deliver child and family services and make the necessary improvements as soon as possible.

4. Solicit input from child protection workers

During the public review, Members asked what opportunities child protection workers have to convey their ideas for improving the system. Members learned that informal opportunities—such as regular teleconferences—exist for child protection workers to communicate with departmental managers. However, Members do not think this is adequate and recommend a formal process for front-line experts to provide input.

Recommendation 22

The Standing Committee on Government Operations recommends that the Department of Health and Social Services implement an ongoing formal process whereby child protection workers have an opportunity to recommend improvements for the child and family services system.

5. Improve working conditions for child protection workers

The Committee has serious concerns about the stressful working conditions faced by child protection workers. The Auditor General reported that some workers consider their workloads to be high. The problem of overwork is not new. It was identified as a serious barrier to effective service delivery in the 2010 report by the Standing Committee on Social Programs.

Unfortunately, the Department has never developed caseload standards, so it is not in a position to determine whether staffing levels are adequate.

Upon completing the assessment of required financial and human resources, the Department should revise the funding methodology for the regional authorities and establish territory-wide caseload standards.

Members urge caution in assessing caseload standards. The appropriate caseload for child protection workers in Yellowknife, where a comparatively large number of resources and other helping professionals are on hand, may be higher than in communities such as Sachs Harbour or Trout Lake. The caseload assessment should also be sensitive to the fact that social workers employed by regional authorities are sometimes required to perform duties beyond the area of child and family services.

Recommendation 23

The Standing Committee on Government Operations recommends that the Department of Health and Social Services revise the funding methodology for the regional authorities upon completing the assessment of required resources.

Recommendation 24

The Standing Committee on Government Operations recommends that the Department of Health and Social Services establish territory-wide caseload standards for child protection workers, and further that the Department of Health and Social Services ensure that caseloads are fairly balanced across the regional authorities. Due consideration should be given to regional variation in duties, demands, and available resources.

6. Increase support for the social work program at Aurora College

Finally, Members recommend additional support for the social work program at Aurora College to increase the number of Aboriginal students who complete the program and subsequently have opportunities to serve as child protection workers.

Recommendation 25

The Standing Committee on Government Operations recommends that the Department of Health and Social Services work with the Department of Education, Culture and Employment and Aurora College to enhance support for students in the social work program with the goal of increasing the number of home-grown, Aboriginal students. A bursary program should be established. Online coursework and distance education options should also be considered.

IV. Child protection services and foster care

1. Summary of observations

Child protection workers, who are employed by the regional authorities, are the face of child and family services. They deliver services on behalf of the Director. The Auditor General examined whether the regional authorities are meeting key requirements under the *Act* and the *Manual*. Thirteen key requirements were examined in four areas: investigations (Exhibit 3); addressing confirmed needs for child protection (Exhibit 4); providing services to children in care of the Director (Exhibit 5); and screening and reviewing foster care homes (Exhibit 6).

A sample was drawn from 46 case files for individual children—26 who were receiving services in the parental home and 17 who were under the care of the Director. Another sample was drawn from 36 files of regular, provisional, and extended-family foster homes. The following observations were recorded:

- A. Regional authorities responded quickly to reported concerns for children:** The vast majority of investigations—92%—were conducted within 24 hours, as required by the *Act*.
- B. Key investigations steps were not followed:** The *Manual* requires specific steps for assessing a child's safety. However, safety assessments were not always completed. In 27% of cases, the required interviews with children and other family members were not performed. In 28% of the files, concerns about children possibly needing protection were not investigated. In 13% of investigations, safety factors were not assessed. Failure to follow required investigation steps leaves children at risk. In 66% of cases where proper steps were not followed, subsequent investigations ultimately found the child in need of protection.

- C. Investigations did not assess longer-term risk:** The statutory requirement to assess longer-term risk was not met in any of the case files. Most files were simply closed if the investigation showed the child was not at immediate risk. Yet the majority of these case files were subsequently reopened.
- D. Plan-of-care agreements were not properly monitored:** In cases where a child is deemed to need protection, the child may be allowed to remain in the parental home if a plan-of-care agreement is signed and followed. The Auditor General examined 37 plan-of-care agreements and found that more than half were not properly monitored. Furthermore, workers had not maintained regular contact with these children, as required by law. In 76% of cases, further protection concerns arose after the plan-of-care agreement was put in place.
- E. Children in custody were not sufficiently monitored:** Once a child has been placed in temporary or permanent custody, child protection workers are required to maintain regular contact. The Auditor General found that children placed in extended family foster care homes were least likely to receive follow-up services. In 59% of cases, regional authorities did not maintain regular contact with these children. Furthermore, none of the required case reviews were completed.
- F. Foster homes were not screened or reviewed annually:** Of the 36 files reviewed, 69% of the homes were not properly screened. In 2 cases this resulted in children being placed in foster homes that were later closed due to allegations of abuse and neglect.
- G. There is no standardized approach to foster care:** Beyond standard rates of pay for foster parents, there are no territory-wide standards for delivering foster care. As a result, there are disparities across the regional authorities in levels of support given to foster care children and families. Across the territory, there is a chronic shortage of foster care families.
- H. There are gaps in services for youth:** Under the *Act*, most youth who are 16 or older are not eligible for protection services such as foster care. Yet they are not eligible for territorial programs such as Income Assistance until the age of majority.

2. Develop a tool for longer-term risk assessment

Failure to assess longer-term risk results in recurring interactions with the system. In one case, for example, the Auditor General discovered that a child had been apprehended nine times.

The Department agreed with the Auditor General's recommendation to develop a tool for assessing longer-term risk but indicated the tool would not be in use before 2015-16 at the earliest. The Committee thinks this is too long to wait and urges the Department to make it a top priority to develop this tool.

In addition, as a word of caution in this endeavour, the Committee urges the Department not to operate under the illusion that neglect is a lesser form of abuse. Neglect can be extremely damaging to a child's well-being and often entails serious long-term consequences.

Recommendation 26

The Standing Committee on Government Operations concurs with the Auditor General of Canada and recommends that Health and Social Services authorities, in consultation with the Department of Health and Social Services, develop a tool to ensure that longer-term risks to children are formally assessed when determining a child's safety, as required under the *Child and Family Services Act*. This tool should be ready for use by front-line workers within the current fiscal year. To expedite the process, the Department should look to other jurisdictions for guidance.

3. Ensure services are delivered in compliance with the *Act* and Manual

Inadequate monitoring of plan-of-care agreements and of children in custody is simply unacceptable. Likewise, failures to screen and review foster homes are unacceptable. Such practices must not continue. Barriers to proper service delivery—such as insufficient resources or inadequate training—must be assessed and promptly addressed. Efforts should also be made to standardize foster care across the territory.

Recommendation 27

The Standing Committee on Government Operations concurs with the Auditor General of Canada and recommends that the Health and Social Services authorities comply with the *Child and Family Services Act* and the *Child and Family Services Standards and Procedures Manual* in their delivery of services to children and families. They should ensure that key requirements are met when: investigating concerns about child safety and well-being; providing protective services to children to address confirmed child protection needs; providing services to children under the care of the Director of Child and Family Services; and performing screening and monitoring of foster care homes.

Recommendation 28

The Standing Committee on Government Operations concurs with the Auditor General of Canada and recommends that Health and Social Services authorities, in consultation with the Department of Health and Social Services, should regularly assess whether the services they provide to children and families are in compliance with the *Child and Family Services Act* and the *Child and Family Services Standards and Procedures Manual*. The results of these assessments should be used to improve compliance and should be shared with the Director of Child and Family Services.

4. Address gaps in services for youth

For decades, youth aged 16-18 have been falling through the cracks in the child and services system. Youth under the age of 19 may not qualify for protection (e.g., foster care) yet because they have not reached the age of majority they cannot legally sign a lease or receive Income Assistance. The Department has known about these service gaps but has done little to address them. **This situation is unacceptable.**

A successful court challenge in 2010 of the Nunavut *Child and Family Services Act* determined that it discriminated based on age and therefore violated the *Charter of Rights and Freedoms*. This court decision indicates that changes to the *Child and Family Services Act* of the Northwest Territories are likely required. In the meantime, the Department should provide services to youth on the basis of discretionary provisions in the *Act*.

Recommendation 29

The Standing Committee on Government Operations recommends that the Department of Health and Social Services address gaps in services for youth and make appropriate amendments to the *Child and Family Services Act*. Performance measures should be included in all departmental business plans to track the number of youth receiving discretionary services and the types of services received.

CONCLUSION

According to the Auditor General, the Department is not adequately meeting its responsibilities under the *Act*. The Department does not have an adequate accountability framework in place. And neither the Department nor the regional authorities have adequate mechanisms in place to ensure key responsibilities are being met.

Even with a long-standing awareness of such problems, the Department has failed an entire generation of children and families. Since the publication of previous reviews of child and family services in 2000 and 2010, little has been done in the way of systemic analysis or action to address the weaknesses.

Dramatic changes are required. The Department must assess resource needs, fix the accountability framework, improve standards and procedures, and provide better training to child protection workers.

The Committee is encouraged that the Minister accepted the Auditor General's recommendations and plans to implement them. At the same time, Members are understandably sceptical because of the Department's lacklustre response to earlier reviews of this kind.

In conclusion, the Committee reiterates the words of the Auditor General: changes are within the Department's immediate control. The Department is at a critical juncture. It must go beyond making minor adjustments and overhaul the system.

Recommendation 30

The Standing Committee on Government Operations recommends that the Government provide a comprehensive response to this report within 120 days.

