

## RESPONSE TO THE CHILD DEATH REVIEW COMMITTEE

The Child Death Review Committee investigates the deaths of children under the age of 19 who have been in the legal care of the Minister, or known to the child protection system within the last 12 months prior to their death. One of the objectives of the committee is to make recommendations that would lead to improvements to prevent future deaths or improve services to children.

At the request of the Department of Social Development, the Child Death Review Committee investigated the case of a two-year-old child whose welfare was being investigated by the Department at the time of death in 2004.

At the conclusion of this investigation, the committee made recommendations to the Minister of Social Development under 10 subject headings. Social Development agrees with and has accepted each of the committee's recommendations.

Each recommendation made by the Child Death Review Committee and Social Development's response is published below.

### I. Relationship Between the Fredericton and Woodstock Office (Office Culture)

**The committee recommends that management make efforts to bridge the Woodstock-Fredericton divide with a view of shifting the culture from a problem-focus to a solution-focus. This may include joint meetings to look at common goals and interests with a focus on building upon best practices rather than a focus on office problems. Consideration can be given to the development of working teams that have a peer supervision approach. In addition, we suggest that efforts be made to validate the leadership functions which are effectively carried out by the Woodstock staff at all levels with a view of strengthening this capacity in order to shift from a survival mode of practice to one of conscious competence.**

The Department accepts this recommendation.

The Department will continue to devise strategies to promote leadership, teamwork and enhanced communication with staff in the Woodstock and Fredericton offices of Region 3.

Several actions have already been implemented to achieve these goals by the Fredericton-Woodstock management team.

Regionalized units have been established to promote teamwork in child-in care, foster homes and adoption services. Regular unit meetings are now an established practice, as is monthly management meetings for all regional supervisors and managers.

Training in leadership and human resource issues (performance reviews, confliction resolution and inter-personnel relationships) has also been provided. As well, a model that clearly illustrates decision-making authority has been implemented.

In Woodstock, a new child protection social work position was added to recognize the challenges of rural social work practice. This new position is dedicated to child protection investigations. Screening of referrals for all child protection investigations was moved to Fredericton to streamline service delivery throughout Region 3.

Other workplace adjustments include the reassignment of staff to new responsibilities maximizing their expertise and interest, as well as reassignments to priority areas such as, child protection investigations, ongoing child protection, foster homes and adoption.

## II. Workload Issues and Staffing in Rural Settings

**The committee recommends that the *Department of Family and Community Services*\* develop an effective approach to recruiting staff for rural settings which could be used in all areas of the province. A recruitment and incentive package could assist regional staff in increasing their success rate in filling open positions. Consideration could be given to adopting a recruitment and incentive package similar to that used by the Province in recruiting physicians to rural settings.**

This recommendation is accepted.

Social Development is developing a strategy to attract, recruit and retain child protection social workers.

## III. Staffing of Child Protection and Investigation Positions

**Recognizing the diversity of background work experience, age and readiness level of new social work graduates, the committee recommends that the *Department of Family and Community Services*\* develop an approach to assessing the readiness of new social work graduates to enter Child Protection and Investigations positions and follow up with training for supervisors in using this approach as part of the hiring process.**

The Department accepts this recommendation.

Social Development will review ways to further assess the readiness of new social work graduates entering child protection positions through a review of hiring tools.

Child Welfare CORE Training has been mandatory for social workers and supervisors in Child Welfare programs since 2000. CORE training is foundational Child Welfare training, which social workers must complete within one year entering a child welfare program.

The *Orientation and Training Policy for Child Welfare Social Workers* was implemented in 2005. This is a job-specific orientation and training policy for all new social workers in Child Welfare programs and assists supervisors to guide social worker development.

#### IV. Social Work Practice in Rural Areas

The committee recommends that the *Department of Family and Community Services*\* develop a module in the CORE training to address the unique challenges of doing child protection work in rural settings as part of the mandatory training. Further, the committee recommends that the rural practice module promote a team approach with other service providers to increase collaboration and decrease the isolation.

The Child Death Review Committee identified a recommendation from the Child Death Review Committee Report in its review of the death of a 16-year-old youth in 2000 that is relevant to this situation:

*"The committee recommends that the Child Welfare Project Workload Measurement Teams (Child Protection and Children in Care) be required to review the delivery of child welfare services in rural communities with a view to identify relevant caseload, supervision and support services changes required for child protection practice that meets standards and legislation".*

The Department accepts this recommendation.

Social Development will conduct research to identify training opportunities which address the unique challenges of child protection workers in rural settings. This will be incorporated into CORE training.

In Woodstock, a new child protection social work position was added to recognize the challenges of rural social work practice. This new position is dedicated to child protection investigations.

The Department acknowledges there is greater travel time required for child protection social workers to service rural communities. Supervisors take travel time into account when assigning cases to social workers where families receiving child protection services live in rural areas.

#### V. Child Neglect

**It is recommended as per the Internal Review Report that:**

**"Sharing information through case consultation becomes a firmly established practice within the various program sectors of Region 3, (i.e. Social Services Programs, Income Support Programs and Housing Programs). This would assist in tracking down and planning interventions with the families where protection issues exist but the families continually manage to evade [being investigated by the Department]."**

The Department accepts this recommendation. Region 3 has established a committee of internal partners to facilitate case collaboration.

In addition, *Child Protection Services Practice Standards and Guidelines* will be reviewed to ensure that sharing of information is emphasized throughout Child Welfare Standards. Supervisors and Program Delivery Managers will be expected to support and monitor information sharing between the various sectors of the Department.

Information sharing is promoted through regular meetings and case consultations.

**The use of Permanency Planning be considered as a tool in this process (professional brainstorming, case consultations, documentation as to family cooperation and information sharing with both external and internal partners could all come to the table). In addition to this, the Committee recommends that a permanency planning meeting be held automatically after three referrals have been received on a family.**

The Department accepts this recommendation.

Permanency Planning is a foundation for child welfare practice in New Brunswick. The role of Permanency Planning meetings is being reviewed under New Directions in Child Protection Initiative, a reform of the delivery of child-protection services to better protect children, provide more assistance to families, and strengthen the role of social workers.

The *Child Protection Services Practice Standards and Guidelines* were updated as of January 2007. An automatic investigation is now required when a third child protection referral is received on a young child within a 12 month period, even if the first two referrals were not valid. This procedure was formerly a guideline, but is now a mandatory Practice Standard. These standards are currently being reviewed to reflect the proposed reform of the delivery of child-protection services.

**The authority of social workers under the *Family Services Act* be reviewed and emphasized in the sense of the social workers having a clear understanding and utilization of their authority to demand actions be undertaken so as to ensure the safety of a child (e.g. dogs be removed where considered a threat to a child's safety or when they are used to intimidate Social Workers and prevent them from carrying out their duties).**

The Department accepts and has implemented this recommendation.

The authority of Social Workers under the *Family Services Act* has been reinforced in mandatory CORE training, foundational training for all child welfare social workers.

Under the *Child Victims of Abuse and Neglect Protocols*, revised in 2005, government departments work co-operatively to assist child protection social workers to ensure the safety of children. These protocols outline how government departments respond to allegations of child abuse and neglect.

*Guidelines to Consider When Assessing the Safety of Children with Respect to Animals as a Hazard* was introduced in April 2004. In October 2005, a *Bite Prevention Evaluation* tool was introduced to assist social workers when assessing the risk from dogs and other animals in homes where child protection services are required.

New guidelines were introduced in January 2005 to assist child protection social workers when they investigate reports of poor supervision for children under the age of 12.

**In cooperation with Central Office, research to update knowledge on best practices in handling cases involving neglect, lack of supervision and recalcitrant parents both unwilling and unable to care for their children”**

The Department accepts this recommendation.

Specialized training in child neglect will be offered to all child welfare staff in spring 2008 by Dr. Bruce Perry, a child neglect training expert. Dr. Perry will offer training in defining chronic neglect; the long term effects of neglect on brain development, cognition, behaviour, socialization, emotions and physical well being; best practice assessment/investigative approaches; promising interventions with children; innovative and effective investigative responses in chronic neglect cases; and innovative and effective treatment programs.

Training with experts knowledgeable with recent research in child abuse and neglect has also recently occurred:

- September 2007, provincial conference for all child welfare staff on collaborative, strength based approaches was held with Dr. Andrew Turnell, from Australia, a world renowned specialist.
- Since 2007, Dr. Steven Bellemare a paediatrician from the IWK in Halifax who specializes in child neglect has been a presenter at Child Welfare Core Training.
- *Child Neglect: A Shared Responsibility*, conference hosted in New Brunswick in 1999 attended by over 800 participants.
- Since the mid 1990’s and most recently in 2006, Dr. John Yuille, a prominent Canadian specialist in child sexual abuse, provided Investigative Child Protection Interviewing training.

CORE training is continuously under review and promotes best practices relevant to child protection services including neglect, lack of supervision.

## **VI. Clinical Supervision**

**The committee recommends that clinical reviews be carried out periodically by people with expertise on risk management as a way to prevent similar problems in carrying out investigations and to ensure quality child welfare practice. This could be done by:**

- 1) Establishing a rotating panel of supervisors who can do the clinical audits and**
- 2) Following up with coaching where the practices fall short.**

**This process could foster a collective ownership for the quality of Child Protection work. It should be mandatory and part of the routine in order to make the work more transparent and assure a built-in mechanism for quality control.**

The Department accepts this recommendation.

Clinical audits of Child Welfare case files will begin in fall 2008, beginning with audits of child protection case files. The clinical audits will promote system accountability, ensure mandatory standards and best practices are followed and identify areas for improvement and future training.

The Department of Social Development has established a working group to examine best practices for conducting clinical audits. An auditing component will also be built into the New Directions in Child Protection Initiative the reform of the delivery of child protection services in the province.

**The committee recommends that all unit supervisors be provided training in the new module on clinical supervision.**

The Department accepts this recommendation.

New clinical supervision training will be introduced in spring 2008 to further support supervisors.

The role of provincial Child Welfare trainers has been clarified to include the feedback process to supervisors concerning social workers who are experiencing difficulties with training.

**The committee recommends that measures be taken to establish resources available to provide clinical supervision for unit supervisors in order to support the integration of knowledge and skills provided in the module on clinical supervision.**

The Department accepts this recommendation.

Social Development has established a working group to look at ways of providing additional clinical support to supervisors. In addition, new clinical supervision training will be offered to all Child Welfare supervisors in 2008.

**It is recommended that Access and Assessment supervisors within Region 3 establish a regular peer review practice related to investigations to further assess consistency in service delivery.**

The Department accepts this recommendation.

In Region 3, a peer review practice is being implemented. The use of peer reviews is considered a best practice throughout the province.

## **VII. Use of Supervisory Orders**

**The committee recommends that the value of supervisory orders as a tool to increase the compliance of uncooperative clients or else establish grounds for further court action be emphasized in the CORE training. In addition, steps should be taken to decrease the work related challenges in accessing supervisory orders.**

The Department accepts this recommendation.

The use of supervisory orders is also promoted, whenever appropriate, and reinforced in CORE training on legal matters.

In 2007, 20 legal assistant positions were created. Legal assistants perform administrative functions required for court applications, which were previously completed by the child protection social workers. This has significantly reduced the work-related challenges in accessing supervisory orders.

### **VIII. Collaboration with Outside Agencies**

**The committee recommends that the *Department of Family and Community Services*\* review the recommendations made in former Child Death Review reports on the need for greater collaboration with other service providers with a view of ensuring that these recommendations are fully implemented in all regions. The committee recommends that the *Department of Family and Community Services*\* adopt a trans-disciplinary team approach in permanency planning meetings based on honest, respectful, direct and ongoing communication, in the context of a relationship-based team approach, as the most effective way of providing support and intervention to families at risk.**

The Department accepts this recommendation.

A Child Protection Consultant has been appointed to lead enhanced partnerships with other government departments through the use of Children at Risk Teams (CART) in all Social Development regions in 2008. CART teams improve communication, collaboration, services, and interventions for at-risk children. Team membership may include representatives from child welfare, income assistance, public health, mental health, policing, probation, crown counsel, education and external community partners.

A redesign of the Early Childhood Initiatives Program is also in progress to ensure more effective and collaborative approaches are developed between child protection social workers and other agencies/individuals involved in the family, like early intervention workers. This will be completed in collaboration with the reform of child protection services.

The *Child Protection Services Practice Standards and Guidelines* will also be reviewed to ensure information sharing is emphasized. In addition, other departmental standards and policies will be reviewed to ensure that staff and service providers understand that information sharing is not optional, but mandatory.

A number of protocols and policies have also been introduced to clarify roles and responsibilities of professionals working together in child abuse situations and to elaborate on the multidisciplinary approach necessary to provide supportive services to abused or neglected children and their families.



Some examples include:

- *Protocol Between the Departments of Family and Community Services and Health Respecting Children in Care of the Minister of Family and Community Services Who Are Suicidal or Have Suicidal Ideation* implemented in July 2005. This protocol clearly articulates the roles and responsibilities of the Departments of Social Development, Health, Mental Health Services, with respect to children/youth-in-care of the Minister, whether in temporary or permanent care, who are suicidal or who are believed to have suicidal ideation.
- *Child Victims of Abuse and Neglect Protocols* which encourage collaboration between government departments in serving child victims of abuse have been revised and implemented in March 2005. These protocols outline how government departments respond to allegations of child abuse and neglect.
- *Protocols in Response to Recommendation 5 of the Brewer Report* were implemented in 1999 and were revised in January 2006 to enhance collaboration between Social Development and Mental Health Services and to ensure a continuum of services for Child Protection cases, and for children/youth in the care of the Minister. Regional forums have been established in every region served by Social Development for the mutual exchange of information; ensuring timely access to Mental Health services; and to ensure a continuum of services, for child protection cases, and for children/youth in the care of the Minister (including both temporary and permanent status).
- *Guidelines for Exchange of Information Between Family and Community Services and Regional Health Authorities* were implemented in October 2006. These guidelines were put in place to improve the sharing of information between the Department and Regional Health Authorities. The guidelines clearly articulate the process for the *Exchange of Confidential Information* relating to children and families serviced under child protection and child-in-care programs.
- *Policy and Procedures Joint Investigations – Access and Assessment/ Child Day Care Services* were implemented in 2007. Joint investigations require on-going consultation, collaboration and regular communication between the investigating parties. This clearly sets out the roles and responsibilities of the Day Care Coordinator and the social worker at Access and Assessment when an investigation at a child day care facility includes allegations of abuse and/or neglect against the children attending the facility.

**The Committee recommends as per the (internal review) report that “In Region 3, the Woodstock office should ensure adherence to Practice Standard 23 which states “After consultation with supervisor, unless otherwise exempted by supervisor, the social worker will contact the police immediately in all cases of sexual abuse, child abuse and neglect cases where criminal activity is suspected. The decision must be documented when we decide not to contact the police.”**

The Department accepts this recommendation. This recommendation was implemented in Region 3.



In accordance with Practice Standard 24 and the *Child Victims of Abuse and Neglect Protocols*, the Department of Social Development and police conduct joint investigations when criminal activity is suspected in all cases of sexual abuse, child abuse and neglect.

Adherence to this practice will be ensured throughout the province through training and supervision. A directive was given to staff of the importance of complying with all aspects of the Child Protection Standards.

## **IX. The Invisibility of Common-Law Partners**

**The Committee recommends that common-law partners or boyfriends be interviewed when completing an investigation and when a new partner becomes a part of the family unit that a new risk assessment be done. In addition, social workers should be trained in assessing and understanding the impact of woman abuse in child neglect and abuse situations.**

The Department accepts this recommendation.

Interviewing common-law partners, boyfriends or any other caregiver is an expected practice under the Risk Management System. This is reinforced in CORE and Risk Management training.

Training in investigative interviewing has been provided and video taping protocols have been introduced.

## **X. Assessment Practices and the Use of the Risk Management Tool**

**The committee recommends that the Risk Management tool be reviewed to determine if it should be modified to be more user friendly and that follow-up training be provided to ensure that the tool is used appropriately to better reflect what is happening in the 'whole picture' and that criteria for risk assessment levels be further clarified with more concrete examples.**

The Department accepts and has implemented this recommendation.

A provincial Risk Management Committee with representation from each of the eight Social Development regions was established and the Risk Management System Tools were revised. The Risk Management System is a tool that assists social workers in identifying and assessing the level of abuse and neglect of children.

Risk Management Training has been modified and enhanced. This training is ongoing provincially. The *Risk Management Manual* has also been updated to provide clarification and more concrete examples provided in ways to assess risk factors for abuse and neglect.

All Social Development regional offices have identified a social worker to act as a resource expert to provide clarification to the Risk Management System.

**The Committee recommends as per the (internal review) report that:**

**“In the best interest of children under 5 who are less able to communicate concerns related to abuse or neglect, a triaged priority response could better ensure their safety and well being. This is particularly critical when resources are stretched. Although Access & Assessment staff in Woodstock were staffed at full complement prior to the Fall of 2003, they were experiencing workload pressures and staffing concerns during the Fall of 2003 and Spring of 2004 (i.e. one staff out on extended sick leave, one staff on secondment, and the two replacement social workers required training).**

**“If there are competing priorities, in Region 3 Woodstock interventions need to be triaged. The age of the child must be considered. Priority in service response is to be given to children under the age of 5 (i.e. albeit within each priority level).”**

The Department accepts and has implemented this recommendation.

The *Child Protection Services Practice Standards and Guidelines* now require social workers to see all pre-school or disabled children in their home environment and directly observe the child(s) living situation. This was previously a guideline and is now mandatory.

Specific to Region 3, centralized screening of referrals was established in April 2004 to help ensure consistency of child protection services.

**The Committee recommends as per the (internal review) report that:**

**“Ensure adherence to Practice Standard 18 in Region 3 Woodstock, specifically in terms of Risk decision # 1 (i.e. deciding whether to investigate a report). This decision is to be made with consideration to the history and overall profile of the case (i.e. number of previous referrals and seriousness of referral in light of child’s age). A decision to investigate should not be made solely on the current situation (i.e. in isolation of previous situations). In addition, whenever possible, subsequent referrals on a family are to be assigned to the initial investigator.”**

The Department accepts this recommendation.

This recommendation has been implemented in Region 3. A directive was issued to ensure compliance with Standards.

In addition, it is re-enforced in CORE training that a decision to investigate is not to be made solely on the current situation. Previous situations must also be taken into consideration when making a decision to investigate.

Each Social Development regional office has identified a social worker who is to act as a resource expert to provide clarification to the Risk Management System.

Risk Management Training has been modified and enhanced. This training is ongoing provincially.

**“Ensure compliance to Practice Standard 25 in Region 3 Woodstock. When a report is registered as a situation and assigned to investigation, the child must be physically viewed by the investigator and this must occur within the assigned priority of intervention time frame (i.e. Priority # 1 – immediate; Priority # 2 – within twenty-four hours; Priority # 3 – within four working days; Priority # 4 – within twelve working days).”**

This recommendation is accepted. This recommendation has been implemented in Region 3.

A directive was issued to ensure compliance with Standards. Supervisors throughout the province are expected to monitor and ensure response times are met.

In addition, clinical audits of Child Welfare case files will begin in fall 2008 beginning with clinical audits of child protection cases. The clinical audits will promote system accountability, ensure mandatory standards and best practices are followed and identify areas for improvement and future training.

The Department of Social Development has established a working group to examine best practices for conducting clinical audits. An auditing component will also be built into the New Directions in Child Protection Initiative, the reform of the delivery of child protection services in the province.

**“A review of *Department of Family and Community Services*\* “Child Protection Services Practice Standards and Guidelines for Child Protection Services” be undertaken by the Supervisor and staff of the Woodstock Access & Assessment Unit.”**

This recommendation has been implemented.

*Child Protection Services Practice Standards and Guidelines* will also be reviewed at least once per year in each regional Access and Assessment Unit and On-Going Child Protection Unit.

**“Ensure that Social workers and supervisors in Region 3 Woodstock at Access & Assessment attend and have priority access to both Risk Management training and applicable CORE training.”**

This recommendation has been implemented.

**“An in-service on the Risk Management Tool is to be provided to Woodstock Access & Assessment unit supervisor and staff. It is further recommended that a session on Attachment training be incorporated in to this session.”**

This recommendation has been implemented