

## Chapter 3

### Section 3.02

# Child Protection Services—Children’s Aid Societies

## 1.0 Background

### 1.1 Overview

Child protection services are intended to help children and youth who have been, or are at risk of being, abused or neglected grow up in safer, more stable, caring environments. In Ontario, child protection services are governed by the *Child and Family Services Act* (Act), with the purpose to promote the best interests, protection and well-being of children. The Ministry of Children and Youth Services (Ministry) administers the Child Protection Services Program (Program) through which child protection services are provided, and the Minister has designated 47 local not-for-profit Children’s Aid Societies (Societies) located throughout Ontario to directly deliver child protection services. These Societies are mandated to perform the following functions:

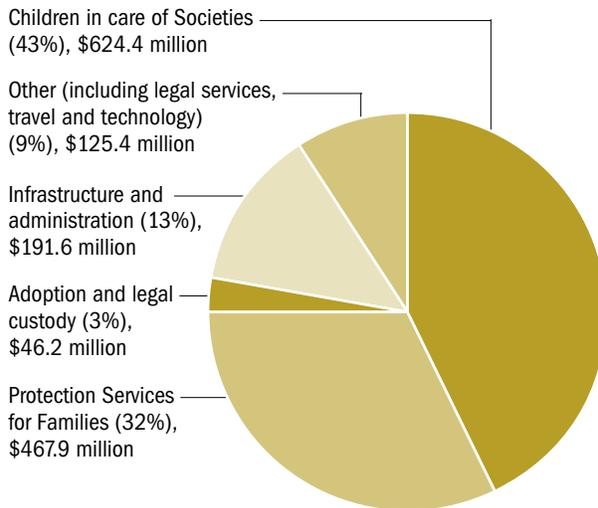
- investigate allegations and/or evidence that children under the age of 16 or in the Society’s care or under its supervision may be in need of protection;
- protect, where necessary, children who are under the age of 16 or are in the Society’s care or under its supervision, by providing the required assistance, care and supervision in either residential (e.g., foster home or group home) or non-residential (family home) settings;

- work with families to provide guidance, counselling and other services where children have suffered from abuse or neglect, or are otherwise at risk; and
- facilitate adoptions for Crown wards or children relinquished to Societies for adoption on consent by parents.

Unlike most other ministry programs, where the provision of services is subject to availability of funding, each Society is required by law to provide all the mandatory services to all identified eligible children. In other words, waiting lists are not an option for child protection services. In the 2014/15 fiscal year, ministry transfer payments to fund Society expenditures were \$1.47 billion. **Figure 1** illustrates the breakdown of Society expenditures by category for the 2014/15 fiscal year, about 43% of which were spent on services for children who have been removed from their home and placed in the care of Societies such as in foster, group or relatives’ homes. **Figure 2** identifies the funding provided to Societies and key service volumes for the last five fiscal years, illustrating that the number of children in the care of Societies has declined by more than 10% over this period. **Appendix 1** contains a listing of each Society’s funding allocation and key service volumes for the 2014/15 fiscal year, and illustrates the differences in the funding and service volumes of each Society.

**Figure 1: Children’s Aid Society Expenditures by Category, 2014/15**

Source of data: Ministry of Children and Youth Services



Note: Total expenditures reported by Children’s Aid Societies were less than total transfer payments to Societies identified in Figure 2 by about \$14.5 million. This is primarily because Ontario’s Societies collectively reported a surplus in 2014/15 that will be contributed to their balanced budget fund for future expenses.

All but three of the 47 Societies belong to and are represented by the Ontario Association of Children’s Aid Societies (OACAS). OACAS supports its member Societies by providing services in areas such as government relations, advocacy, information management, and education and training.

In addition, the Provincial Advocate for Children and Youth acts as an independent voice for children and youth who are seeking or receiving services under the Act. In response to a request or a complaint, or on its own initiative, the Provincial Advocate can undertake reviews, make recommendations and provide advice to the government, the Societies and other service providers such as operators of homes where Societies place children.

## 1.2 Children’s Aid Society Governance and Accountability

Societies are not-for-profit independent legal entities, each governed by an independent volunteer board of directors. Accountability agreements

between Societies and the Ministry require that each Society maintain appropriate policies and procedures for, among other things:

- the ongoing efficient functioning of the Society;
- effective and appropriate decision-making by the Society;
- prudent and effective management of the approved ministry budget allocation;
- accurate and timely fulfillment of the Society’s obligations under the Act and agreement with the Ministry; and
- the preparation, approval and delivery of all reports required under the Act, related regulations, and the agreement.

Each Society’s board of directors must receive regular reporting from their management with respect to the monitoring and evaluation of the Society’s progress toward meeting the requirements of the accountability agreement that the above policies and procedures are intended to address.

## 1.3 Delivery of Child Protection Services

While front-line child protection services are provided by Societies, the Ministry is responsible under the Act for establishing minimum standards for the delivery of child protection services (protection standards). Such protection standards—intended to promote timely, consistent and high-quality services to children and their families across the province—are either legislated or prescribed in the Ministry’s 2007 Child Protection Standards and other ministry policies. **Appendix 2** illustrates the general pathway through the child protection system, and **Appendix 3** outlines the key protection standards that Societies must follow in their delivery of child protection services and supports.

### 1.3.1 Reports of Child Protection Concerns

The Act requires anyone, including professionals who work with children, who has reasonable

**Figure 2: Ministry Funding Provided to Societies and the Protection Services They Provided, 2010/11–2014/15**

Source of data: Ministry of Children and Youth Services

	2010/11	2011/12	2012/13	2013/14	2014/15
<b>Transfer Payments</b>					
Amounts paid to Societies (\$ million)*	1,451	1,492	1,501	1,512	1,470
<b>Key Service Volumes</b>					
Total number of inquiries and reports	168,833	170,308	166,137	158,882	162,600
Total number of investigations completed	84,548	85,526	84,540	81,393	81,771
Average number of family protection cases	26,682	27,386	28,236	27,829	26,932
Average number of children in care	17,868	17,697	17,273	16,434	15,625
Total number of adoptions completed	979	838	837	974	862

\* Amounts paid to Societies include funding for other ministry priorities, including one-time funding to Societies for their historical debts in 2010/11 and 2013/14, and one-time funding to support amalgamation in each year.

grounds to suspect that a child is or may be in need of protection, to report their suspicion to a Society. A report of a child protection concern serves as the starting point of the Society's involvement.

Within 24 hours of a Society receiving a report of child protection concern, the Society must conduct and document its initial assessment of the situation. Based on its analysis of available information, the Society must determine the most appropriate response to the reported concern, which can include closing the case where the Society's initial assessment suggests that no intervention is required or conducting an investigation where a child may be in need of protection.

To help it assess the reported concern, the Society must screen for the presence of domestic violence and check its internal records and the provincial database of all Societies' records to identify any documentation of contact with the individuals involved. As well, if allegations are made that the child has suffered or may be suffering abuse, the Society must also check the Ontario Child Abuse Register for any previous history involving the child, the family or the alleged abuser.

### 1.3.2 Child Protection Investigations

Societies initiate a child protection investigation for any reported concern where there are reasonable and probable grounds that a child may be in

need of protection due to abuse or maltreatment. The investigation is to begin within 12 hours or up to seven days from the receipt of the reported concern, depending on the level of urgency or the assessed level of threat to the child's safety determined during the initial assessment.

The objectives of a child protection investigation include assessing the immediate and long-term risks to a child, verifying claims made relating to the child's need for protection, and ultimately determining if a child needs protection services. Prior to starting an investigation, the Society worker must develop and document an Investigative Plan based on a review of all current and historical information known about the child and the family. Although other steps may be taken to suit each individual situation, all child protection investigations require mandatory steps that include:

- face-to-face contact and an interview with the child alleged to be the victim;
- direct observation of the child's living situation;
- interviews or direct observations of other children being cared for in the home;
- interview of the alleged perpetrator of the maltreatment; and
- interview of the child's non-abusing caregiver.

Societies are also required to conduct a Safety Assessment as part of all investigations to identify if any immediate safety threats to the child

are present. A Safety Plan must be immediately developed where imminent threats to the child's safety are identified, to put in place the necessary interventions to secure the safety of the child and any other children being cared for in the home.

Before they complete their investigations, Societies are to complete a Risk Assessment to assess the future risk of maltreatment. Investigations are to be completed within one month of the report, but can be extended to a maximum of two months from the date of the report with the approval of a Society supervisor.

### 1.3.3 Management of Cases Involving Children in Need of Protection

#### Protection Services for Children Living with Their Families

When a Society's investigation has determined that a child is in need of protection but does not need to be removed from his or her home and taken into the Society's care, the child and family receive supports and services from the Society while the child remains at home.

The protection standards require that within one month of concluding the investigation a Society completes an assessment of the child's and family's strengths and needs and develops a Service Plan. At a minimum, the Service Plan must include specific goals, objectives and tasks, including persons responsible and time frames for completion, as well as the specific planned level of contact with the child and family by the Society caseworker. The Service Plan must be reviewed every six months while the child and family are receiving services, or when changes to family circumstances affect the relevance of the plan. The purpose of the review is to evaluate the family's progress in achieving the stated goals and objectives and to update the Service Plan as needed.

At a minimum, the caseworker is to make direct contact with families in their home once per month. The child being protected is interviewed privately either at home or in another setting. Children who

cannot communicate verbally are directly observed in their own home environment, and particularly as they interact with their parent/caregiver.

Also, ministry standards require the Society caseworker's supervisor to review every ongoing child protection case with the caseworker at least once every six weeks to monitor the quality of service and compliance with relevant protection standards.

#### Protection Services for Children in Care of Societies

When a Society's investigation has determined that the child must be removed from his or her home and taken into the Society's care, the child may be placed with relatives, in a foster home, or in a group home.

In these cases, the Society must prepare a Plan of Care that is designed to meet the child's individual needs within 30 days of a child being placed in a foster or group home or a relative's home. The Plan of Care is to be reviewed and revised as needed within three months of the placement, and again six months after placement, and every six months thereafter until the child is discharged from care or turns 18. For children who have been in care for 12 consecutive months or longer, the Plan of Care must address seven life dimensions: health, education, identity, family and social relationships, social presentation, emotional and behavioural development, and self-care skills.

Protection standards outlined in the Act also require that the Society conduct a private visit with the child within seven days and 30 days of placement, and every 90 days thereafter, to ensure that the child is safe and receiving appropriate care.

#### 1.3.4 Case Closure

A Society normally closes a child protection case when protection concerns have been successfully resolved and the child is no longer at risk. Before the Society's caseworker closes a case, the standards require that the caseworker review the case with the family, appropriate service providers (such

as day care, schools and doctors), and a Society supervisor. At a minimum, the following criteria must be met to close the file:

- there have been no recent occurrences of abuse or maltreatment of the child;
- there is no evidence of current or imminent safety threats to the child; and
- a recent Risk Assessment confirms that risks identified in the past no longer exist or have been sufficiently reduced that they no longer pose concerns for the child's safety or well-being.

## 1.4 Continued Care and Support for Youth

The Ministry introduced its Continued Care and Support for Youth (CCSY) program in 2013 to replace its Extended Care and Maintenance program. Like its predecessor, the CCSY program provides financial and non-financial supports through Societies to eligible youth aged 18 to 20. Eligible youth include former Crown wards and youth previously subject to a legal custody order (where an individual has legal custody of a child but has not adopted the child). The CCSY program aims to help youth transition smoothly to adulthood and independent living.

Societies must enter into a CCSY agreement with each eligible youth for whom they intend to provide CCSY supports. A Youth Plan must also be developed jointly by a Society worker and the youth based on the youth's individual strengths, needs and goals. The plan must include the supports (including financial supports) that the Society will provide. The Society worker and the youth are to review the Youth Plan together at least once every three months to discuss the youth's progress toward meeting the stated goals. Financial and non-financial supports are not contingent on the youth making any progress toward these goals.

## 2.0 Audit Objective and Scope

The objective of our audit of Ontario's Children's Aid Societies (Societies) was to assess whether the Societies have effective policies and procedures for ensuring that children in need of protection receive the appropriate service in accordance with legislation, policy and program requirements; and whether funding provided to Societies is commensurate with the value of the services provided.

Prior to commencing our work, we identified the audit criteria we would use to address our audit objectives. These were reviewed and agreed to by senior management at the Ministry and the Societies we visited. Our audit work was predominantly conducted between November 2014 and June 2015.

This report deals only with the Societies' role in child protection services in the province. Our report on the Ministry's role is found in **Section 3.03** of this Annual Report.

The scope of our audit of Societies included a review and analysis of relevant files, including child protection files, to assess compliance with legislated and ministry protection standards, as well as interviews with appropriate staff at the Ministry's head office and at seven Societies (Toronto, Durham, Kingston, Sudbury, Muskoka, Hamilton and Waterloo). We also surveyed all Societies in Ontario, and received responses from most of them, on the new funding model and their caseload benchmarks. As well, we surveyed the 14 Societies that were expected to be early adopters in relation to the Child Protection Information Network.

In addition, we met with senior staff at the Ontario Association of Children's Aid Societies, which represents 44 of the 47 Societies in Ontario, to gain a better understanding of their role and the issues in the child protection services sector. We also met with the Provincial Advocate for Children and Youth and the Chief Coroner of Ontario to obtain their perspective on child protection services and related challenges in Ontario.

We also reviewed reports prepared by the former Commission to Promote Sustainable Child Welfare, established by the Ministry in 2009 to examine and recommend changes to the child protection sector. We additionally contacted the offices of the Provincial Auditor of Saskatchewan and the Auditor General of Alberta to discuss information systems used in the delivery of social services in their provinces.

### 3.0 Summary

The role of Societies in child protection services is important but also difficult. Their interventions are not always welcome, and both their action and inaction can have a significant impact on the safety and well-being of children in need of their services. In this regard, we note that Societies need to improve their adherence to protection standards to ensure that children receive appropriate care and protection.

With 47 Societies operating independently across the province, we also noted differences in services and supports that are provided by Societies, along with variances in Society worker caseloads, which may have an impact on the consistency of care and supports received by children and families across the province. We noted that the average number of family protection cases per worker ranged from a low of eight to a high of 32 per month.

The following are some of our key concerns regarding Societies' delivery of child protection services:

- **Societies may be closing child protection cases too soon.** In more than half the files we reviewed that subsequently were reopened, the circumstances and risk factors that were responsible for the subsequent reopening of the case had been present when the case was initially closed. On average, the subsequent reopening of the case occurred within 68 days of the initial case closure, including several

cases where child protection concerns were reported to the Society within one week of the prior case closure.

- **Societies did not complete child protection investigations on a timely basis, and did not always complete all required investigative steps.** Such requirements are intended to ensure that the investigation results in credible evidence and information being obtained, and that the investigation is not more prolonged or intrusive than is necessary. In more than one-third of investigations we reviewed, Safety Assessments to identify immediate safety threats to the child were either not conducted or not conducted on time. Also, none of the child protection investigations we reviewed at the Societies we visited were completed within the required 30 days of the Society receiving the report of child protection concerns. On average, the investigations were completed more than seven months after the Society's receipt of the report.
- **Societies did not always conduct timely home visits and service plan reviews in cases involving children still in the care of their family.** In more than half the files we reviewed, Society caseworkers were able to visit the children and their families at home only every three months, instead of once a month as required by protection standards. In addition, in more than half the cases we reviewed, Service Plan reviews were not conducted every six months as required. Service Plan reviews include important steps such as evaluating the family's progress in achieving the goals stated in the plan to ensure the safety and well-being of the child, and making adjustments to the plan where necessary.
- **Societies did not always complete and review Plans of Care on a timely basis in cases involving children in Societies' care.** In about one-third of cases we reviewed, plans designed to address, among other things, a child's health, education, emotional

and behavioural development, and self-care skills were not completed or reviewed on a timely basis.

- **Societies did not always conduct child protection history checks on individuals involved with the children.** Failure to conduct such crucial checks for the presence of domestic violence or child abuse at the time the child protection concern is reported not only increases the risk that children are left in the care of individuals with such history, but also impacts the Societies' ability to properly assess the risk to children. In some of the cases we reviewed, Societies did not check their own records and the province's database of all Societies' records to identify the prior history of the people involved with the children. Also, in more than half of the files we reviewed where allegations of abuse were made, Societies did not check against the Ontario Child Abuse Register to determine whether there was a record of abuse relating to the child, the family or the alleged abuser.
- **The Continued Care and Support for Youth (CCSY) program is not fully achieving its objective of preparing youth for transition out of care.** The effectiveness of this program, which aims to help youth transition to adulthood and independent living, is impacted by Societies' non-compliance with ministry policies and their limited ability to influence youth to actively participate in transition planning. For example, in almost half the files we reviewed, there was no evidence that the youth were actively involved in, and were making reasonable efforts to prepare for, transitioning to independent living and adulthood. In 2013, the Ministry eliminated the requirement for youth to work toward achieving established goals in order to continue to receive financial and non-financial CCSY supports, limiting to an extent the ability of Societies to influence youth to work toward these goals.

- **Opportunities exist to ensure that funding is better used to provide direct services to children and their families.** For example, cost efficiencies could potentially be achieved through amalgamations of neighbouring Societies to realize economies of scale and through centralizing some administrative functions that are currently performed separately by Societies.

This report contains six recommendations, consisting of eight actions, to address the findings noted during this audit.

### OVERALL RESPONSE FROM CHILDREN'S AID SOCIETIES AND THE ONTARIO ASSOCIATION OF CHILDREN'S AID SOCIETIES

The audit examined practices at seven of Ontario's 47 Children's Aid Societies (Societies). This response consolidates their views and those of the Ontario Association of Children's Aid Societies (OACAS). The OACAS and the Societies welcome the Auditor General's recommendations.

The Children's Aid Society sector is working in collaboration with the OACAS and have a number of initiatives under way that will respond to the findings in this report. In particular, significant time and resources have been invested in defining, collecting and analyzing data for a comprehensive set of Performance Indicators. These will provide valuable information about the impact of services delivered to children and families, as well as about the capacity and governance of Societies across the province. Continued and strong financial and leadership support from the Ministry of Children and Youth Services is needed for this work to realize its full potential. This, along with other initiatives has served to strengthen an already accountable sector.

This report highlights the challenging funding environment for child protection and

Societies. The OACAS and its members are eager to work with the government to improve the funding issues and are committed to ensuring that efficiencies are realized across the province.

## 4.0 Detailed Audit Observations

### 4.1 Societies Need to Better Adhere to Protection Standards to Ensure Children Receive Appropriate Care and Protection

The seven Societies we visited did not always comply with legislative, regulatory and ministry policy requirements intended to promote timely, consistent and high-quality delivery of child protection services.

Both the Chief Coroner and the Provincial Advocate recognize the difficult work of Children’s Aid Societies in protecting children from harm. However, they also acknowledge that the child protection system has gaps that need to be addressed in order to ensure that society’s most vulnerable children and youth receive appropriate care and experience better outcomes. Some of our observations regarding protection services provided by Societies are consistent with findings and recommendations from the Chief Coroner’s review of child deaths where Societies had involvement with the child. Over the last five years, the Coroner has reviewed over 200 cases of child deaths involving Societies.

Our concerns regarding the Societies’ delivery of protection services are found in the following sections.

#### 4.1.1 Societies Did Not Always Conduct Child Protection History Checks on Individuals Involved with Children

In more than half the cases we reviewed where a child had suffered abuse or was alleged to have suffered abuse and an abuse history check against

the Ontario Child Abuse Register was required, we found that Societies did not conduct such checks to determine whether there was a record of any previous history of abuse involving the child, the family or the alleged abuser. We also noted that, in some cases, Societies did not screen for the presence of domestic violence in the child’s family, and/or check their own records and the province’s database of all Societies’ records to identify previous concerns about the people involved. These checks are important because they help assess the level of threat to the child’s safety when a case is initially reported. The rationale for not conducting the required checks was not documented in those cases.

Our concerns regarding these history checks are consistent with the findings of Ontario’s Chief Coroner, who has consistently noted over the last five years that, based on his reviews of child deaths, child protection history checks were not always completed on everyone involved with the child. The Chief Coroner has also noted the importance of obtaining and incorporating previous child protection history to inform Societies’ assessment of patterns of behaviour and risk to children.

Failure to conduct these crucial history checks puts children in serious risk of being placed or left in the care of individuals with a history of abusing children. This risk was realized when Jeffrey Baldwin died in 2002 after years of neglect and mistreatment by his maternal grandparents, both of whom had been previously convicted of child abuse. The grandparents’ previous history was not known to the Society because of its failure to check its own internal records. Such gaps in conducting child protection history checks may still exist 13 years after the death of Jeffrey Baldwin.

#### 4.1.2 Societies Did Not Complete Child Protection Investigations on a Timely Basis and Did Not Always Complete All Required Investigative Steps

The Societies we visited had not started about one-quarter of the investigations we reviewed within

the required response time, which ranges from 12 hours to seven days based on the level of urgency or the assessed level of threat to the child's safety. On average, these investigations began five days after the required response time. In half these cases there was no rationale documented for the departure from the required response time and/or no documented approval by a Society supervisor for the departure, as required.

In addition, we found that Societies had not completed some key investigative steps, or had not completed these steps on time. For example, in almost half the investigations we reviewed, the mandatory investigation plan that outlines the investigative approach and steps to be taken was either not completed or not completed before the investigation began, as required. As well, we found that in more than one-third of the investigations we reviewed, the Societies either did not complete a Safety Assessment (which should identify the presence of any immediate safety threats to the child), or had not completed the Safety Assessment within the required response time (12 hours to seven days). In these cases, the Safety Assessment was completed an average of almost 50 days from the date of the referral.

The Societies we visited did not complete any of the investigations we reviewed (to determine if the child is in need of protection) within 30 days of the case being brought to the Society's attention, as required. In one case, no investigation was ever completed. While the length of an investigation can be extended, with the approval of a supervisor, to a maximum of two months from the date the case was reported to the Society, in more than half the cases we reviewed there was no evidence of supervisor approval for an extension, or valid justification for extending the length of the investigation. Where investigations were extended and an explanation was documented, we noted the most common reason was that Societies were unable to reach the families to complete a proper assessment necessitating an extension to the investigation. On average, the investigations we reviewed were com-

pleted more than seven months after the Society received the report, and one took almost two years. Delays in investigations put children at risk longer than necessary, because services and supports to ensure a child's safety and well-being remain uncertain while investigations are being conducted.

#### **4.1.3 Societies Did Not Always Conduct Timely Home Visits and Service Plan Reviews in Cases Involving Children Still in the Care of Their Family**

In almost two-thirds of the cases we reviewed involving children needing protection while still in the care of their family, the Societies had not completed a Service Plan on time—within the first month of service. A Service Plan outlines specific goals and objectives for the protection and well-being of the child and the time frames for meeting them, as well as how often a caseworker will contact the child and family. Also, at the Societies we visited we found that in half of the cases we reviewed they did not complete an assessment of the family's and child's strengths and needs within the first month of providing service as required.

We also found that in more than half the cases we reviewed, caseworkers did not conduct Service Plan reviews every six months as required, including some instances where case reviews were not completed at all. The purpose of reviewing the Service Plan is to meet its key steps in ensuring the child's safety, such as evaluating progress in achieving goals and objectives, and making adjustments to the Plan as needed for the same purpose. In addition, we found that in more than half the cases reviewed, the Service Plan that was currently in place did not include details intended to ensure the child's safety, such as specific goals, objectives and tasks, the persons responsible for tasks, time frames for completion, or the planned level of Society contact with the child and family.

While we noted that caseworkers made attempts to make scheduled and unannounced visits to the child and family, in more than half the cases we

reviewed home visits did not occur every month. Instead, we found that home visits by caseworkers with the children and their families occurred on average every three months during the period of our review. The timeliness of such visits is of particular importance since they are to include an interview with the child, or observation that the child is safe and properly cared for. The Ontario Chief Coroner’s previous reports stated that workers should receive additional training and support so that they are better equipped to encourage caregivers who are reluctant to participate in child protection services, citing that if repeated attempts to meet with families are unsuccessful, a more intrusive approach may be required to ensure the safety of the child.

We also found Society supervision of caseworkers responsible for cases involving children still in the care of their family was not done on the required schedule. Although all such cases are required to be reviewed every six weeks in scheduled supervision sessions between a Society caseworker and his or her supervisor, we noted that, on average, documented supervision sessions occurred every 11 weeks, or almost double the minimum requirement.

#### 4.1.4 Societies Did Not Always Conduct Timely Visits and Reviews of Plans of Care in Cases Involving Children in Societies’ Care

We noted that, for almost one-third of cases of children in Societies’ care we reviewed at the Societies we visited, the Society’s reasons for placing a child in a specific placement, such as a group home or foster home, were not clearly documented or not documented at all, to support that the placement was the best option for the child.

We also noted that in about one-quarter of cases we reviewed the Societies did not complete Plans of Care within 30 days of a child’s placement in a group home or foster home. In addition, in over 10% of the cases we reviewed Plans of Care were not reviewed in the required time frames. These plans are to be reviewed within three months of

placement, and then within six months of placement and every six months thereafter. Plans of Care are important, as they are designed to meet each child’s particular needs and track the child’s progress in seven key areas that include health, education, and family and social relationships.

Consistent with our observations in **Section 4.1.3**, we noted that caseworkers made attempts to conduct private visits with children during the period of our review. Although we noted that private visits did occur, they did not occur within the legislated time frames in about 10% of the cases we reviewed, increasing the risk to these children. Societies are required to conduct private visits with children in their care within seven days and 30 days of admission and placement, and every 90 days thereafter.

### RECOMMENDATION 1

To ensure that children and youth who need protection receive timely, consistent and appropriate care and supports, Children’s Aid Societies should ensure that they meet all legislative, regulatory and program requirements in the following areas:

- conducting child protection history checks on all individuals involved with the child upon receipt of reports of child protection concerns;
- conducting child protection investigations within the required response time;
- conducting home visits and Service Plan reviews in cases involving children still in the care of their family within required time frames; and
- conducting Plan of Care reviews in cases involving children in the care of Societies within required time frames.

### RESPONSE FROM CHILDREN’S AID SOCIETIES AND THE OACAS

Children’s Aid Societies (Societies) and the Ontario Association of Children’s Aid Societies

(OACAS) agree that children, youth and families in Ontario should receive timely, consistent and appropriate care and supports.

We agree it is important that record checks are completed where there are allegations of suspected abuse or neglect of children, and Societies will ensure that these checks are performed on a consistent basis.

Societies and the OACAS are engaged in a long-term process to ensure that the evaluation of their work is focused on measuring the outcomes for the children and families they serve. Most important is the need to measure that appropriate decisions are made in a timely way to ensure the delivery of high quality of services, rather than solely focusing on whether a decision was made.

The OACAS and Societies will work together to develop methods to improve compliance with all standards identified by the Auditor General, including timely investigations, home visits, Service Plan reviews, and Plan of Care reviews.

## 4.2 Societies May Be Closing Child Protection Cases Too Soon

At the seven Societies we visited, we reviewed a sample of child protection cases that had been reopened after initially being closed, involving children who remained with their family and those who were admitted into the Society's care. We found that Societies may be closing cases prematurely, risking the well-being of children. Specifically, we found that:

- In almost half the reopened cases we reviewed, risk factors related to initial reports of child protection concerns were still present or not completely addressed at the time the case was initially closed. We found, for example, instances where a file had been closed after only one telephone conversation and without any contact with the child, and where physical discipline and domestic violence were noted as typical occurrences.

- In more than half the reopened cases we reviewed, the circumstances and factors that were responsible for a subsequent report of a child protection concern to the Society had been present when the case was initially closed. On average, the subsequent report occurred within 68 days of the previous case closure, including several cases where the Society had to intervene within one week. For example, in one case, at the time of closure the mother stated she was finding it difficult to care for her children, but the case was still closed. The file had to be reopened seven days later after the family doctor reported that the mother still needed Society services and had a history of postpartum depression and anxiety, and was on several prescribed medications. In another case, a child's school reported concerns regarding the mother's behaviour, specifically surrounding her drug use. Previously, a case had been opened for this child due to similar concerns about the mother, but was closed because the investigation did not verify the mother's drug use. The lack of this verification may have been reason enough to keep the case open, especially given that the mother's drug use was the reason for the subsequent report.

Our concerns over the premature case closures and children being discharged prematurely from Society care are consistent with the findings by Ontario's Chief Coroner. Over the last few years, the Chief Coroner's Paediatric Death Review Committee reports have consistently identified concerns surrounding the premature closing of files despite a long history of Society involvement, such as when families are difficult for the Society to locate or not receptive to Society involvement.

### RECOMMENDATION 2

To ensure that protection cases are not closed prematurely, Children's Aid Societies should ensure that risk factors that are present are

appropriately addressed before they close these cases. As well, an annual review and analysis of all reopened cases should be performed to determine if any corrective action is necessary to minimize premature case closures.

## RESPONSE FROM CHILDREN’S AID SOCIETIES AND THE OACAS

Children’s Aid Societies (Societies) and the Ontario Association of Children’s Aid Societies (OACAS) agree and recognize the need to ensure risk factors are addressed through their ongoing work with children and families. Data will be collected regarding the recurrence of maltreatment, and analysis of that data will inform changes in practice if required.

In addition, Societies are committed to the provision of quality services and strive to promote excellence through the establishment of a culture of organizational learning and continuous quality improvement. This work is done through internal case audits, program evaluation and client /stakeholder engagement, with the findings identifying best practices and supporting improvement initiatives.

### 4.3 Continued Care and Support for Youth (CCSY) Program Is Not Fully Achieving Its Objective of Preparing Youth for Transitioning Out of Care

In 2014/15, approximately 3,400 youth were receiving CCSY supports from Societies. Our review of the CCSY program identified that substantial improvement was needed in the delivery of the program by Societies and in the program’s effectiveness in helping youth transition to adulthood and independent living, as intended.

#### 4.3.1 Plans to Help Youth Prepare for Independent Living Are Not Always in Place or Monitored by Societies

We reviewed the required CCSY agreements between Societies and youth outlining the roles and responsibilities of the youth and the Society and found that, in some cases, the agreements were either not in place or not signed by all parties. Ministry policy requires that the CCSY agreement must be signed by the youth and a Society worker, and approved by the Society’s executive director or designate. Each agreement lasts 12 months and can be renewed annually.

We also found that Youth Plans, which include the youth’s goals and planned actions while receiving financial and non-financial support, were not always completed, reviewed and updated on a timely basis. The initial Youth Plan must be finalized within 30 days of the date the CCSY agreement was signed, and must be updated at least once every 12 months. Specifically, we found that:

- In about one-quarter of the cases we reviewed, the initial Youth Plan was either not completed within one month of the CCSY agreement being finalized as required, not signed by all required parties (youth, Society worker, and the Society’s executive director or designate), or not completed at all.
- In almost half of the cases we reviewed, the Youth Plan had not been reviewed at least once every three months as required, to discuss and assess the youth’s progress toward the plan’s stated goals. We also noted some cases where the review never took place.

#### 4.3.2 Societies’ Ability to Influence Youth Is Limited by Lack of Requirement for Youth to Actively Participate in Transition Planning

As discussed in **Section 1.4**, the Continued Care and Support for Youth (CCSY) program is intended to help youth develop the skills they need as they

transition to adulthood and independent living. We noted that when the CCSY program replaced the Ministry's Extended Care and Maintenance program in 2013, the Ministry eliminated the requirement for youth to work toward achieving their pre-established and agreed-to goals in order to continue receiving supports. Under the current CCSY program, support provided to youth is not contingent on the youth's progress toward meeting his or her goals as stated in the Youth Plan.

The Ministry explained that this requirement was eliminated as part of its attempt to reframe the CCSY program, from being an alternative to social assistance to a means of enhanced transition planning in order to improve outcomes and prevent poverty for youth leaving the care of Societies. Nevertheless, as Societies indicated to us, this change ultimately affected the Societies' ability to influence youth in their transition to independent living and adulthood.

In almost half of the cases we reviewed, we found there was no evidence that the youth were actively involved in preparing toward transitioning to independent living and adulthood as intended. In these cases it was not evident that youth had made reasonable efforts to prepare for the transition to adulthood.

### RECOMMENDATION 3

To help improve the Continued Care and Support for Youth (CCSY) program's effectiveness in assisting youth to transition to independent living and adulthood:

- Children's Aid Societies should ensure that signed agreements are in place, and Youth Plans are created, reviewed and updated accordingly; and
- the Ministry of Children and Youth Services should evaluate whether providing supports through the CCSY program that are not contingent on a youth demonstrating progress toward meeting his or her goals for transitioning to independent living and adulthood

is resulting in better youth outcomes (as opposed to requiring these supports to be contingent on such progress).

### RESPONSE FROM CHILDREN'S AID SOCIETIES AND THE OACAS

Children's Aid Societies (Societies) and the Ontario Association of Children's Aid Societies (OACAS) agree and appreciate the thoughtful comments provided by the Auditor General with respect to the Continued Care and Support for Youth (CCSY) program and will ensure signed agreements are in place, and that Youth Plans are created, reviewed and updated accordingly.

Given the obvious need to focus on youth autonomy in order to promote resiliency and life skills development, we are supportive of the CCSY program. As such, the OACAS and Societies welcome formal opportunities to work with the Ministry of Children and Youth Services (Ministry) to consider ways to support youths to plan for their transition to adulthood.

The Ministry decided that financial supports under the CCSY program would not be tied to a youth's goals and plan to meet those goals. Although at this time the Ministry does not intend to provide CCSY supports contingent upon goal achievement, the Ministry is currently working toward establishing outcome measures for the CCSY program, and will consider reassessing supports contingent upon progress in a youth's goals and other opportunities to support youths through the CCSY program.

## 4.4 Differences between Societies Lead to Inconsistencies in Child Protection Services throughout the Province

In 2010, the former Commission to Promote Sustainable Child Welfare (Commission) noted that there were more differences than similarities between Societies in areas such as capacity to

deliver services and models of service delivery, resulting in variations in the availability, management and delivery of child protection services at a local level. The Commission went so far as to state that the way children and families received child protection services across Ontario varied so much that it was difficult to claim that all Societies provided the same services under the same mandate. Five years after the Commission published its findings, we found through our analysis and visits to Societies that differences still exist.

#### 4.4.1 Variances in Worker Caseloads between Societies May Affect Consistency of Service Delivery

The Ministry has not established caseload standards against which Societies can assess the

reasonableness of their staff’s workload and can ensure they are effectively staffed to deliver timely and appropriate child protection services. We noted during our visits to Societies and through our survey that most Societies have established their own internal caseload benchmarks, which in many cases have also been incorporated into their collective bargaining agreements with their caseworkers.

We analyzed the staffing and service data reported by all Societies (including the seven we visited) for the 2014/15 fiscal year and noted a wide range among the Societies in caseloads by caseworker. **Figure 3** presents a province-wide comparison of caseloads in Societies for 2014/15. It shows, for example, that the total number of investigations open during 2014/15 per worker ranged from a low of 50 to a high of 111, and the average number of

**Figure 3: Province-wide Comparison of Caseloads in Children’s Aid Societies, 2014/15**

Prepared by the Office of the Auditor General of Ontario

	Central	East	North	Toronto	West	Province
<b>Number of Societies</b>						
Societies in the region	7	10	12	4	13	<b>46<sup>1</sup></b>
Societies with caseload benchmarks <sup>2</sup>	6	6	4	4	12	<b>32<sup>3</sup></b>
Societies with caseload benchmarks in their collective agreements	5	5	4	2	7	<b>23<sup>3</sup></b>
<b>Actual Caseload<sup>4</sup></b>						
<b>Investigations per Worker<sup>5</sup></b>						
Minimum	52	52	54	72	50	<b>50</b>
Maximum	108	110	111	94	92	<b>111</b>
Average	78	84	69	80	73	<b>75</b>
<b>Family Protection Cases per Worker<sup>6</sup></b>						
Minimum	8	13	13	12	11	<b>8</b>
Maximum	22	32	21	16	19	<b>32</b>
Average	15	17	17	14	15	<b>16</b>
<b>Children-in-care Cases per Worker<sup>6</sup></b>						
Minimum	11	8	9	9	12	<b>8</b>
Maximum	19	21	24	18	19	<b>24</b>
Average	16	16	16	15	16	<b>16</b>

1. In 2015/16 there are 47 Societies in Ontario.

2. Caseload benchmarks varied among Societies, with many benchmarks expressed as ranges and maximums, and others established as targets or triggers for caseload review.

3. Based on responses to our survey received from 40 Societies.

4. Extreme outliers were excluded to allow for a more representative range.

5. Figures are based on the total number of investigations open during the year.

6. Figures are based on average monthly caseload numbers for the year.

family protection cases per worker ranged from an average low of eight to a high of 32 per month.

Caseworkers told us that in addition to managing their assigned caseloads, they may also have other responsibilities such as training new workers, participating in committees for Society initiatives, providing peer support and supervising social work students. Caseworkers also noted during our discussions that cases can vary significantly in complexity and thus in time spent. Nonetheless, the vast differences in worker caseloads raise concerns about the consistency of child protection services across the province.

#### 4.4.2 Differences in Services Offered by Societies Result in Inconsistencies in Supports Received by Families

The seven Societies we visited varied in size, ranging from an organization with 50 staff and a budget of \$7 million to an organization of almost 750 staff with a budget of approximately \$160 million. While these differences in size can be attributed to Societies serving communities that can differ substantially in size, geographic distribution and socio-economic profile, this wide variation results in Societies having different capacities for providing child protection services. For example, one Society we visited had an on-site dental clinic, and another we visited had an on-site medical clinic, to ensure that children and their families receive timely and appropriate health services. Children served by the other Societies are referred to dental and medical clinics in the community.

The differences in capacities have also impacted the types of specialized support services offered by the Societies. For example, two of the seven Societies have Registered Nurses who complement their frontline staff, providing physical assessments and intensive monitoring for high-risk infants living with their family or in the Society's care. Conversely, one of the Societies we visited provided in-home supports (such as assisting with parent-teen conflicts) but indicated that recent reductions in

funding affected the way it provides these supports. Specifically, in order to provide such services to the broadest number of families, this Society has had to revise its referral criteria for this program and to set a limit on the number of direct service hours provided to each family.

#### 4.4.3 Societies Provide Different Levels of Financial Support to Youth Transitioning Out of Care

The Ministry informed us that during the development of the CCSY policy, youth who were formerly in Societies' care indicated the importance of setting a provincial rate for the monthly payment in order to create consistency for young people across the province. Consequently, the Ministry set a monthly financial allowance at \$850 to cover basic living expenses such as food, shelter and clothing. However, the Ministry has also given Societies the budgetary flexibility to provide youth with additional financial support to address other costs such as transportation, dental and health services, and moving costs.

We discovered that the Societies we visited provided different amounts of financial supports to youth in the CCSY program. All Societies provided the Ministry-established monthly allowance of \$850; however, individual Societies' ability to provide additional support varied, so that the base monthly allowance ranged from \$850 to \$1,000 in the Societies we visited. In addition, some Societies offered further additional ("supplementary") supports that varied in type and amount. Examples of these included a monthly "success incentive" of \$80 for which no criteria had been established, a monthly transportation allowance of \$125, and \$270 in birthday and Christmas allowances. Not all youth may be receiving the same benefit over the \$850 monthly allowance set by the Ministry.

## RECOMMENDATION 4

To ensure the effective and efficient delivery of child protection services in accordance with legislative, regulatory, and policy and program requirements, the Ontario Association of Children’s Aid Societies should work with the Ministry of Children and Youth Services to:

- develop standard caseload benchmarks for child protection services against which both Children’s Aid Societies and the Ministry can periodically compare caseloads and ensure that Society caseloads are reasonable; and
- determine what impact the differences in supports provided by Societies have on the quality of child protection services across the province, and develop a plan to ensure that children and families have equitable access across Ontario to the supports they need .

## RESPONSE FROM CHILDREN’S AID SOCIETIES AND THE OACAS

The Ontario Association of Children’s Aid Societies (OACAS) and Children’s Aid Societies (Societies) agree and welcome the findings and recommendation of the Auditor General regarding the development of standards and benchmarks for caseloads at Societies. While there is some variance in the size of caseloads at different Societies, we acknowledge the importance of effectively promoting child protection, and preventing abuse and neglect in the face of declining budgets at many agencies, and will work with the Ministry of Children and Youth Services (Ministry) in developing case-load benchmarks.

The OACAS would be pleased to be engaged with the Ministry on the development of a plan to analyze the impact of caseload sizes on service delivery and the quality of services for vulnerable children, youth and families.

The OACAS looks forward to an opportunity to work with the Ministry to determine the impact the differences in supports provided by

Societies have on the quality of child protection services across the province. It is our view that children, youth and families should have equitable access to local, high-quality services across the province. We believe that funding approaches for child protection have contributed to this in some respects and look forward to understanding options in the context of the upcoming review of the Child Protection Funding Model. Additionally, the availability of urgent services provided by Society partners in the children’s services system is unevenly distributed across the province, and this has a distinct impact on the services that Societies are able to provide to their community. The OACAS looks forward to ongoing work with the Ministry to determine how to develop an integrated strategy for servicing Society clients.

## 4.5 Opportunities Exist to Ensure That Funding Is Better Used to Provide Direct Services to Children and Their Families

As noted in **Section 4.6.3** in our report on the Ministry’s role in administering the Child Protection Services Program in **Section 3.03** of this Annual Report, almost half of Ontario’s Societies received an average of 4.5% less funding in 2013/14 than the total funding they received in 2012/13, including one Society whose funding was reduced by \$1.9 million, or 9.5%. The Societies’ legal responsibility to provide all mandatory services to all identified eligible children, combined with the new regulatory requirement that Societies must operate within their often reduced funding allocations, has led Societies to implement various cost-cutting strategies. For example, Societies have reduced staff and discontinued programs in their efforts to balance their budgets. Several Societies have raised concerns that although to date they have been able to deliver their legally mandated protection services, their ability to effectively deliver mandated services while operating within their allocation is questionable in the

future. In light of these budgeting challenges, we found that opportunities exist for child protection services funding to be better used to provide direct services to children and their families.

#### 4.5.1 Cost Efficiencies Could Potentially Be Achieved through Amalgamations of Societies and Shared Service Arrangements

As shown in **Figure 4**, the direct costs of providing child protection services vary widely among Societies across the province. For example, the cost of family protection cases ranges from \$4,700 per case to approximately \$16,100 per case. In 2010, the former Commission to Promote Sustainable Child Welfare (Commission) noted that size differences among Societies (both in budget and staffing) gave rise to varying levels of scale and capacity to cope with changes in service demands, including costs associated with children who have complex needs.

The Commission recommended that a number of Societies move toward amalgamating with a neighbouring Society in order to realize economies of scale. The Commission also noted that in some cases economies of scale can create efficiencies, which in turn free up valuable resources for services to children and families. From 2011 to 2015, 16 Societies have amalgamated into seven new Societies, including two Societies that recently amalgamated into a new Society on April 1, 2015. Among other advantages, the Ministry's estimate of cost savings attributed to the amalgamations (excluding the most recent amalgamation) indicates that the Societies projected savings of about \$6.6 million in 2013/14.

Another recommendation of the Commission was that a range of business functions currently performed separately by Societies should be implemented as shared services across all Societies. Some of the candidates for shared services include back-office functions, training and recruitment,

**Figure 4: Province-wide Comparison of Cost per Case in Children's Aid Societies, 2014/15**

Prepared by the Office of the Auditor General of Ontario

	Central	East	North	Toronto	West	Province
Number of Societies in the region	7	10	12	4	13	<b>46<sup>1</sup></b>
<b>Expenditure per Case (\$) <sup>2</sup></b>						
<b>Investigations <sup>3</sup></b>						
Minimum	1,276	1,142	1,227	1,705	1,292	<b>1,142</b>
Maximum	2,543	2,363	2,513	2,342	2,316	<b>2,543</b>
Average	1,750	1,618	1,720	1,961	1,746	<b>1,736</b>
<b>Family Protection Cases <sup>4</sup></b>						
Minimum	7,193	4,749	5,725	10,617	8,377	<b>4,749</b>
Maximum	14,104	16,097	12,200	13,891	12,808	<b>16,097</b>
Average	11,024	10,015	8,892	12,085	10,552	<b>10,242</b>
<b>Children-in-care Cases <sup>5</sup></b>						
Minimum	30,929	29,636	33,317	45,759	26,879	<b>26,879</b>
Maximum	55,249	61,133	57,437	48,801	41,820	<b>61,133</b>
Average	43,916	43,141	41,069	47,358	35,459	<b>40,771</b>

1. In 2015/16 there are 47 Societies in Ontario.

2. Extreme outliers were excluded to allow for a more representative range.

3. Figures are based on the total number of investigations open during the year. Expenditures include salaries and benefits, and training and recruitment.

4. Figures are based on average monthly caseload numbers for the year. Expenditures include salaries and benefits, training and recruitment, and client service expenditures.

5. Figures are based on average monthly caseload numbers for the year. Expenditures include salaries and benefits, training and recruitment, client service expenditures, and boarding expenditures.

promotion and publicity, and specialized assessments such as drug testing and psychological services. Based on our analysis of expenditure data provided by the Societies, expenditures related to the aforementioned services totalled approximately \$196 million in 2014/15, comprising 13% of total expenditures. Although work on shared services is still under way, and the Commission did not quantify potential savings from implementing shared service arrangements, one of the benefits for Societies identified by the Commission was the flexibility to redirect resources from back-office functions and infrastructure, and reinvest them in direct client services.

#### 4.5.2 A Significant Portion of the Cost of Implementing the Child Protection Information Network Is Funded through Societies' Operating Budget

Functions related to the province-wide Child Protection Information Network (CPIN) are among those identified by the Commission as candidates for shared services, including finance-related functions and those that support the delivery of child protection services. As mentioned in **Section 4.8.2** of our report on the Ministry in **Section 3.03** of this Annual Report, over half of the Societies do not have the resources to provide key functions to support the implementation of CPIN.

Our survey of the 14 Societies that were expected to implement CPIN by the end of the 2012/13 fiscal year indicated that these Societies have incurred expenses of approximately \$18.7 million to prepare for CPIN implementation, only \$2.8 million of which have been specifically subsidized for CPIN by the Ministry. In addition, our survey of the five Societies that have implemented CPIN indicated that, since going live on CPIN, those Societies have spent an additional \$5.4 million to manage workload pressures resulting from inefficiencies in CPIN.

These additional costs are funded through the Societies' own operating funds, which may cause further hardship and potentially impact

protection services, as Societies indicated that they are already experiencing significant financial constraints resulting from the funding model and balanced budget requirement described in **Section 4.6.3** of our Ministry report in **Section 3.03** of this Annual Report.

#### 4.5.3 Excessive and Questionable Spending by an Executive Director Was Approved by One Society's Board

At one of the Societies we visited, based on our review of executive credit card expenditures, we identified excessive and questionable spending by its former executive director being approved by the Society's board. These expenses also lacked supporting documentation to support that they were incurred for Society business. Specifically:

- A hotel room was rented in Toronto for a two-year period irrespective of whether it was used. Charges amounting to almost \$90,000, including over \$10,000 in incidentals such as parking and telephone charges, were paid by the Society. Although the Society and its board advised us that this room was rented because the executive director represented the Society as well as other Societies in a number of committees and other activities concerning child protection, it could not provide supporting documentation to demonstrate and substantiate its claim. In addition, the Society did not consider more cost-effective options such as leasing a condominium, which could have reduced Society costs considerably—perhaps by as much as 50%. We were also advised that the hotel room that was rented was used less than 50% of the time in the first year, which further questions the rationale for the annual rental.
- The executive director had been previously provided with a \$600 per month car allowance (to cover any transportation cost associated with Society business) that was then converted into the executive director's salary. However,

we noted that in the past year, the executive director incurred over \$14,000 in car rental charges that were reimbursed. Further, we noted that these charges included an instance where the Society paid more than \$1,000 per week for a rental car over the course of three weeks. The Society could not provide an explanation for incurring such an excessive and extravagant cost for a weekly rental.

- Other excessive costs were also incurred by the executive director and reimbursed by the Society, such as charges for meals that exceeded Society limits and meals that were claimed without itemized receipts.

The board acknowledged that its oversight of expenses should have been more disciplined, and that it would be in the future. Likewise, we were advised by the Society and its board that the former executive director has been contacted and will reimburse the Society for costs that were not consistent with the Society's policies, such as excessive and unsupported meal expenses.

We also noted that a recent review undertaken by the Ministry at another Society highlighted similar concerns over the oversight of CEO expenses. It noted that oversight by the board of directors was ineffective and that many questionable expenses were claimed and reimbursed to the CEO, including duplicate expenses, expenses that were not supported by itemized receipts, meal expenses in excess of daily limits, and the cost of a personal tour and dinner. A review commissioned by the Ministry also highlighted that this Society's board of directors approved advance payments to the CEO on a retirement payout before the CEO's retirement, in violation of ministry policies.

### RECOMMENDATION 5

To ensure that funding for child protection services is used appropriately to provide direct services to children and families, Children's Aid Societies should work with the Ministry of Children and Youth Services to identify oppor-

tunities to improve service delivery (including further amalgamation and shared services), with children's needs as the focal point.

### RESPONSE FROM CHILDREN'S AID SOCIETIES AND THE OACAS

Children's Aid Societies (Societies) and the Ontario Association of Children's Aid Societies (OACAS) agree with the Auditor General and are actively working on a number of initiatives to ensure funding for child protection services is used appropriately to provide direct services to children and families.

The OACAS is leading the sector work on a funding model review project to recommend changes to the funding model to more evenly distribute funding for protection services.

In addition, the OACAS and Societies across the province are embarking on a formalized shared services program to realize savings on back-office activities (e.g., procurement), improve Society capacity in quality and service delivery, and free up existing child protection funding for reinvestment into direct client services.

Societies in the Northern zones are meeting to consider multiple sustainability options to improve service delivery, including jurisdictional boundary realignment, amalgamations and sharing of services. Other potential opportunities for reconfiguration of the child protection system may become apparent as the formalized Shared Services Program is implemented.

### RECOMMENDATION 6

The board of directors of each Children's Aid Society should ensure that it oversees Society expenditures with sufficient care to ensure that funds are spent appropriately for child protection services.

## RESPONSE FROM CHILDREN’S AID SOCIETIES AND THE OACAS

Children’s Aid Societies (Societies) and the Ontario Association of Children’s Aid Societies (OACAS) agree with the Auditor General. The OACAS is leading a number of initiatives intended to strengthen the governance capacity of local boards, including the development of Performance Indicators that measure the functioning and capacity of local boards of directors. In future sessions, the OACAS and Societies will focus on ensuring boards of directors of Societies are aware of the requirements of the *Broader Public Sector Accountability Act, 2010*, and information will continue to be shared about ensuring boards understand their fiduciary duties as governance bodies.

## Appendix 1—Society Funding Allocations and Key Service Volumes, 2014/15

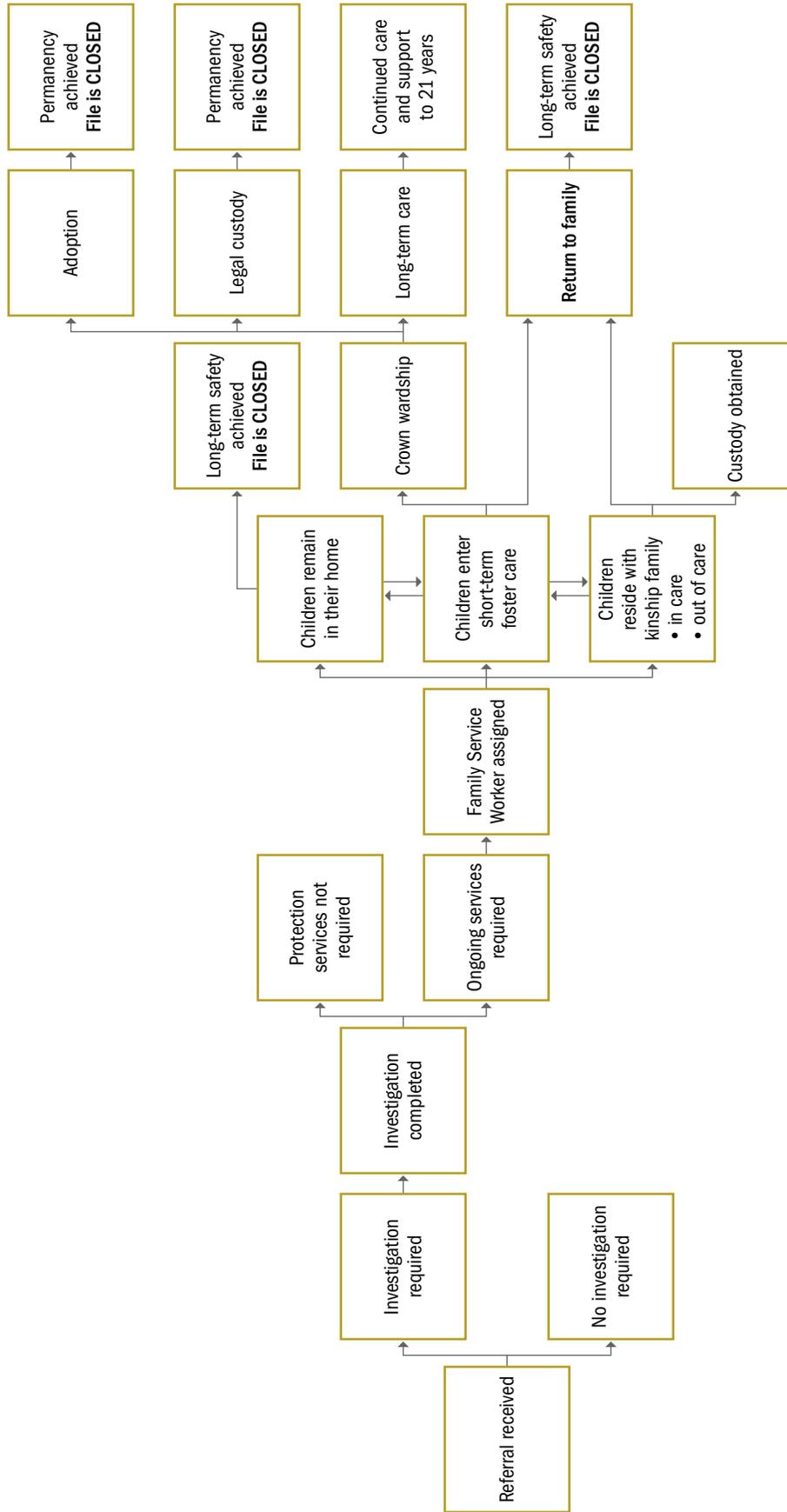
Source of data: Ministry of Children and Youth Services

Region	Children's Aid Society	2014/15 Funding Allocation (\$)	2014/15 Key Service Volumes				
			Total # of Inquiries and Reports Received	Total # of Investigations Completed	Average # of Family Protection Cases	Average # of Children in Care	Total # of Adoptions Completed
Central	Dufferin Child and Family Services	7,101,055	783	271	50	58	3
	Halton Children's Aid Society	17,532,202	4,024	2,385	305	146	15
	CAS of the Regional Municipality of Waterloo	49,927,214	6,090	3,334	991	470	56
	CAS of the City of Guelph & the County of Wellington	19,570,245	2,990	1,333	395	196	13
	Children's Aid Society of the Region of Peel	64,275,570	12,210	7,515	1,844	416	27
	The Children's Aid Society of the County of Simcoe	39,917,860	5,877	2,797	782	417	28
	Children and Family Services for York Region	45,024,122	6,265	3,916	1,001	443	20
<b>Central Region</b>		<b>243,348,268</b>	<b>38,239</b>	<b>21,551</b>	<b>5,368</b>	<b>2,146</b>	<b>162</b>
Toronto	Jewish Family and Child Service of Greater Toronto	8,265,516	859	536	85	43	2
	Catholic Children's Aid Society of Toronto	94,630,377	7,486	3,039	1,553	846	23
	Native Child and Family Services of Toronto	18,100,966	1,621	315	195	253	12
	Children's Aid Society of Toronto	157,613,658	15,760	7,052	2,389	1,440	59
<b>Toronto Region</b>		<b>278,610,517</b>	<b>25,726</b>	<b>10,942</b>	<b>4,221</b>	<b>2,582</b>	<b>96</b>
North	Dilico Anishinabek Family Care	28,909,056	2,781	1,003	501	551	3
	Weechi-it-te-win Family Services Inc.	10,851,905	355	104	183	218	0
	Children's Aid Society of Algoma	19,858,073	2,914	1,303	468	217	7
	Kenora-Rainy River Districts Child and Family Services	15,499,185	1,609	577	211	185	9
	The Children's Aid Society of the Districts of Sudbury and Manitoulin	36,229,093	2,548	1,875	464	446	19
	Anishinaabe Abinoojii Family Services	19,093,473	702	241	220	317	0
	The Children's Aid Society of the District of Thunder Bay	15,734,443	1,938	642	309	205	11
	Tikinagan Child and Family Services Inc.	47,529,386	2,711	618	843	564	0
	Payukotayno: James and Hudson Bay Family Services	13,193,066	574	224	206	122	19
	North Eastern Ontario Family and Children's Services	19,832,711	3,207	1,269	602	242	29
	The Children's Aid Society of the Districts of Nipissing and Parry Sound	17,920,642	3,060	1,490	404	258	16
	Family, Youth and Child Services of Muskoka	6,883,716	1,088	510	153	61	4

Region	Children’s Aid Society	2014/15 Key Service Volumes					
		2014/15 Funding Allocation (\$)	Total # of Inquiries and Reports Received	Total # of Investigations Completed	Average # of Family Protection Cases	Average # of Children in Care	Total # of Adoptions Completed
<b>Northern Region</b>		<b>251,534,749</b>	<b>23,487</b>	<b>9,856</b>	<b>4,563</b>	<b>3,384</b>	<b>117</b>
West	Bruce Grey Child and Family Services	21,249,349	2,186	1,086	369	196	16
	CAS of the City of St. Thomas and the County of Elgin	12,714,677	1,091	648	251	121	7
	Children’s Aid Society of the City of Samia and the County of Lambton Inc.	16,677,283	2,436	1,049	388	135	14
	CAS of London and Middlesex	63,834,812	6,874	2,640	1,071	769	67
	Children’s Aid Society of Oxford County	16,341,241	1,920	877	284	176	15
	Huron Perth CAS	16,571,527	2,345	927	352	147	8
	Windsor-Essex Children’s Aid Society	56,747,220	5,493	3,040	1,503	614	24
	Chatham-Kent Integrated Children’s Service	20,918,387	1,855	1,036	471	231	20
	CAS of Brant	23,718,220	2,745	1,425	459	290	28
	CCAS of Hamilton-Wentworth	26,004,792	2,583	1,011	429	295	29
	CAS of Hamilton-Wentworth	45,838,566	6,370	2,703	785	578	25
	Family & Children’s Services of Niagara	44,743,749	5,475	3,487	909	524	40
	The Children’s Aid Society of Haldimand-Norfolk	20,578,699	1,812	992	385	257	12
<b>Western Region</b>		<b>385,938,521</b>	<b>43,185</b>	<b>20,921</b>	<b>7,654</b>	<b>4,331</b>	<b>305</b>
East	The Children’s Aid Society of the Durham Region	66,423,209	6,557	4,379	984	645	18
	Kawartha-Haliburton Children’s Aid Society	23,172,981	4,293	1,751	552	208	16
	Family & Children’s Services of Renfrew County	13,916,686	1,023	770	243	239	7
	Children’s Aid Society of Ottawa	69,427,417	6,399	4,087	1,020	649	55
	Valoris pour enfants et adultes de P-R/Valoris for Children and Adults of P-R	15,392,883	1,643	861	319	116	9
	Children’s Aid Society Stormont, Dundas, Glengarry	23,080,269	1,649	1,345	392	245	13
	Akwasne Child and Family Services	1,560,600	38	26	2	8	0
	Family and Children’s Services of Frontenac, Lennox and Addington	29,273,142	2,975	1,596	546	340	29
	Highland Shores Children’s Aid Society	44,946,740	4,944	2,128	674	479	15
	Family and Children’s Services of Lanark, Leeds and Grenville	20,662,496	2,442	1,558	394	253	20
<b>Eastern Region</b>		<b>307,856,423</b>	<b>31,963</b>	<b>18,501</b>	<b>5,126</b>	<b>3,180</b>	<b>182</b>
<b>Province</b>		<b>1,467,288,478</b>	<b>162,600</b>	<b>81,771</b>	<b>26,932</b>	<b>15,625</b>	<b>862</b>

## Appendix 2—General Pathway through the Child Protection System

Source of data: Children's Aid Society of Toronto



## Appendix 3—Key Legislated and Ministry Protection Standards

Prepared by the Office of the Auditor General of Ontario

Area	Required Steps	Required Time Frame
Reports of children potentially in need of protection	Screen for the presence of domestic violence Conduct and document child welfare history checks: <ul style="list-style-type: none"> <li>• Internal Society records</li> <li>• Provincial database</li> <li>• Child Abuse Register (if report involves allegations of abuse)</li> </ul> Document Society’s initial assessment of report (whether a child protection investigation is required or not)	At the time of receipt of report  Within 24 hours of receiving report Within 24 hours of receiving report Within 3 days of receiving report Within 24 hours of receiving report
Child protection investigations	Develop an Investigation Plan Begin child protection investigation (response time depends on the level of urgency or assessed level of threat to child’s safety) Conduct Safety Assessment to determine if <b>immediate</b> safety threats are present Conduct Risk Assessment to assess <b>future</b> risk of maltreatment Conclude child protection investigation	Prior to start of investigation Within 12 hours, 24 hours or 7 days of receiving report (also referred to as “response time”) At point of first face-to-face contact within the response time Prior to concluding investigation Within 1 month of receiving report (can be extended up to 2 months from the date of report, with supervisor approval)
Case management: Children remaining with their families	Conduct Child and Family Strengths and Needs Assessment Develop Service Plan (see Glossary of Terms for description) Conduct formal case review, including: <ul style="list-style-type: none"> <li>• Risk Re-assessment</li> <li>• Child and Family Strengths and Needs Re-assessment</li> <li>• Service Plan Review</li> </ul> Conduct home visits with family and child (child is interviewed privately at home or in another setting, while children who cannot verbally communicate are directly observed at home)	Prior to development of Service Plan Within one month of end of investigation Every 6 months following the date of the development of the initial Service Plan  At least once per month while the family and child are receiving services

Area	Required Steps	Required Time Frame
Case management: Children in Society care	Conduct private visits with the child	Within 7 days and 30 days of placement, and every 90 days thereafter until the child is discharged from care
	Develop Plan of Care (see Glossary of Terms for description)	Within 30 days of placement
Continued Care and Supports for Youth (CCSY)	Review Plan of Care	Within 3 months and 6 months of placement, and every 6 months thereafter until the child is discharged from care
	Society enters into an agreement with the youth (referred to as the CCSY agreement—valid for 12 months)	No time frame specified
	Society worker and youth develop Youth Plan	Within 30 days of the CCSY agreement being signed
	Society worker and youth review Youth Plan to discuss the youth's progress toward his/her goals (either in person or by other means)	At least once every 3 months
	Society worker and youth update Youth Plan	At least once every 12 months

Note: This list is not exhaustive and includes only key mandatory activities and related time frames for completion.

## Appendix 4—Glossary of Terms

Prepared by the Office of the Auditor General of Ontario

**Children-in-care case**—A case where the child has been determined to be in need of protection and has been admitted into the care of a Children’s Aid Society. The child may be placed with relatives or in a foster home or group home.

**Crown ward**—A child who has been permanently removed from his or her parent(s) or caregiver(s), and placed in the care and custody of a Society until the child turns 18 years of age or marries, whichever comes first.

**Family protection cases**—Cases where the child has been determined to be in need of protection. These cases include cases where the child and family receive supports and services from the Society while the child remains at home with the family.

**Foster care**—The temporary placement of a child or youth in the home of someone who is not the child’s parent and who receives compensation for caring for the child. The foster parents provide day-to-day care for the child on behalf of a Society.

**Group care**—The placement of a child or youth in a home with unrelated children and youth who are cared for by staff.

**Plan of Care**—A plan that tracks the child’s progress in various developmental areas based on the child’s particular needs. (Applies only to children-in-care cases.)

**Protection standards**—Activities and related documentation that must be completed by Society caseworkers within specific time frames. Such activities are required under legislation or related regulations, or ministry policies.

**Service Plan**—An action plan that guides the child’s family, Society worker and other service providers toward goals and outcomes against which progress can be measured over time. (Applies only to family protection cases where the child remains at home with his or her family.)

**Society ward**—A child who has been placed in the care of a Society on a temporary basis for up to 12 months (if the child is less than 6 years of age), or 24 months (if the child is 6 years of age or older).