



Ktunaxa Kinbasket Child and Family Services Level 12 Aboriginal Practice Standards

LEVEL 12 PRACTICE STANDARD 1-3: RECEIVING REQUESTS FOR SERVICE

- 1. The Agency screens request for service to determine the nature of the service request and eligibility for service.**
- 2. The Agency ensures that the service being offered by the Agency is within its Level 12 authority.**
- 3. As per Part 2 of the CFCS Act, the necessary information is collected to determine a service response. If there is reason to believe a child may be in need of protection, a report is made to a fully delegated child protection social worker.**

KKCFS Vision of Service Requests: For the community to deal with issues that are the source of concern rather than being apprehension focused.

KKCFS Process:

- Any person requesting service is encouraged to express the information in his/her own words and this wording is documented on the intake form;
- KKCFS Intake Worker will ask questions to clarify the information during the intake process and attempts to solicit more detailed information;
- The Intake Worker who gathered the information, assesses this information and family history, to determine the most appropriate service;
- The Intake Worker determines whether the service requests falls within Level 12 authority of the agency;
- All known files are reviewed, MCFD offices are contacted, and all pertinent information is shared between MCFD and the agency;
- It is the duty of the Intake Worker to report to a fully delegated child protection social worker as per the CFCS Act should the social worker believe a child may be in need of protection;
- If the Intake Worker is in doubt as to whether a protection report must be made, the Intake Worker will consult with a fully delegated child protection social worker to determine if a protection report is required;
- Note: At times families share information that must require a child protection response. It is critical to be aware that requests for voluntary services do not always receive a voluntary service response.
- Confidentiality and anonymity of reports must be respected wherever possible;
- Confidentiality of the person(s) making a request for service is ensured unless the information is that of:
 - Child protection;
 - Serious/life threatening/harm to self; or
 - Serious/life threatening/harm to others.

- Wherever possible requests for service should be seen as an opportunity to build on family strengths, should emphasize family views, and should only be directive when an issue of child safety/child protection is identified; and
- It must be remembered that the duty to report child protection is a responsibility of all citizens, which by reporting to KKCFS does not absolve the citizen with the information from reporting.

KKCFS Intake Process:

- Service Request and Intake Flow Chart.

KKCFS Intake Documentation:

- Intake Form (KKCFS – 101)
- KKCFS Ministry Contact Form (KKCFS – 008)

LEVEL 12 PRACTICE STANDARD 4: INFORMATION AND REFERRAL

People requesting services are directed to the service that best meet their needs.

KKCFS Criteria:

- KKCFS will ensure that when people contact KKCFS they will be informed of the services available;
- KKCFS will ensure people will be informed of alternate service providers and a referral will be done if required;
- KKCFS will provide clients whom it cannot promptly serve with information about alternative services.

KKCFS Process:

- A KKCFS intake worker receives referral/request and documents this on an intake form;
- If child protection concerns are identified by either the person making the referral or by the intake worker (person receiving the referral), immediate notification to MCFD is to occur via a person to person contact (in person or by phone);
- If referral/request is for a delegated service a delegated social worker will meet with the client(s) and assess the need for service and recommend a service plan to the KKCFS delegated supervisor;
- If the referral/request does not fall within KKCFS' mandate, or if KKCFS cannot promptly serve the needed service, KKCFS will provide information on potential other services;
- If KKCFS provides requested service within Level 12 authority, a Support Service Agreement, Voluntary Care Agreement, and/or Special Needs Agreement is/are completed;
- If a request is made for advocacy, by a client or individual, the KKCFS intake worker will ensure the client's views and needs are heard;
- When a request for advocacy is made the role of KKCFS is:
 - participation/support in meeting with MCFD;
 - participation/support in meeting with Chief and Council, etc, the KKCFS intake worker's priority will always be the safety, well being, and best interest of the child/(ren) involved.

KKCFS Documentation (Forms):

- KKCFS Intake Form (KKCFS – 101)
- KKCFS Pamphlet provides information on KKCFS programs
- KKCFS Referral for Support Services (KKCFS – 009)

LEVEL 12 PRACTICE STANDARD 5: INTERAGENCY COOPERATION

An agreement is in place with the Ministry for Children and Families when both the Agency and MCFD deliver services.

KKCFS Criteria:

- Services to families must be delivered in an integrated and holistic way with community participation wherever appropriate.

KKCFS Process:

- As per Level 12 Practice Standards 1 through 3 a prior contact check will be done on all requests for service; and
- For children and families who may be receiving services from more than one agency (ie. KKCFS and MCFD), KKCFS will make every effort to work in a collaborative and integrated approach.

KKCFS Documentation:

- Co- Management Agreement between KKCFS and MCFD
 - Can use documentation such as MCFD's risk reduction plan and KKCFS' support services agreement (KKCFS – 120)

Computer:

- Person Name Search
- Prior Contact Report – Print

KKCFS has been party to the development of the following protocols:

- Operational Protocol between KKCFS and MCFD;
- Columbia Lake Band, KKCFC, and MCFD;
- Lower Kootenay Band, KKCFS, and MCFD;
- Shuswap Band, KKCFS, and MCFD;
- St. Mary's Band, KKCFS, and MCFD;
- Tobacco Plains Band, KKCFS, and MCFD.

Key elements to these protocols are:

- Roles and responsibilities;
- Information sharing, communication and referrals;

- Responding to report of all children needing protection:
 - Duty to report;
 - Investigations;
 - Removals;
 - After hours work.
- Alternative out of home care for all children;
- Service Delivery and File Transfers;
- Case Planning for all children;
- Training;
- Protocol Investigations; and
- Dispute Resolution Process.

LEVEL 12 PRACTICE STANDARD 6: SUPERVISORY APPROVAL

The supervisor needs to approve key management decisions, including, but not limited to:

- **Finalizing and revising the comprehensive plan of care;**
- **Following through with reportable circumstances;**
- **Varying or restricting the child's access to family or others with whom there is a significant relationship;**
- **Moving a child from one placement to another; and**
- **Transferring or closing a file.**

In circumstances where the supervisor or identified delegate of the supervisor is unavailable, the KKCFS social worker will seek delegated authority from a supervisor of another Aboriginal agency, and if not possible a supervisor of MCFD.

KKCFS Criteria:

- The delegated supervisor will provide, in areas being reviewed, direction to the employee;
- When social worker discusses the family/child situation with their delegated supervisor:
 - will present a thorough review of relevant facts and data obtained before a decision is made;
 - Wherever possible, the delegated supervisor's approval is obtained before decisions are made;
 - If the social worker is unable to consult with a supervisor, the worker will act in the best interest of the child if it is felt the child's safety is in immediate concern.
- When the supervisor is providing direct service, the supervisor will seek a supervisor of another delegated authority to approve supervisor's actions.

KKCFS Process:

- Social Worker to notify supervisor of need for supervisory consultation;
- Supervisor to be available to staff for supervisory consultations;
- Supervisor will seek out a delegated supervisor from another aboriginal agency, and if required, will seek out a MCFD supervisor;
- Social Worker will document direction from supervisor and agreed plan of action;
- Social Worker can seek supervisor's signature on documented plan if requested.

KKCFS Documentation:

- Social Work Case Notes (KKCFS – 001) or Brief Contact Form (KKCFS – 002) can be used to document this decision.

LEVEL 12 PRACTICE STANDARD 7: FAMILY SERVICE PLAN RATIONALE AND COMPONENTS

The family service plan is clear and indicates the service needs for the child or family. The plan identifies which services are to be provided to address the needs and the goals of these services.

KKCFS Criteria:

- Family Service Plans are documented as part of the Support Services Agreement (see Level 12 Practice Standard 8);
- Clear statements to be included that address:
 - Reason for initiating the service which is based on the child and family assessments;
 - Strategy developed to provide specific support and/or to bring about specific change.
- Measurable Goals are developed through the service planning process that are:
 - Specific;
 - Measurable;
 - Achievable;
 - Realistic; and
 - Time Limited.
- Children and Families participate wherever possible in the development of this plan and understand their responsibilities with respect to the plan. The plan is mutually agreed upon; and
- Responsibilities for implementation of service plan components are clearly defined.

KKCFS Process:

- Social Worker to develop a plan in person with the client;
- Social Worker documents that plan for all parties involved to sign off;
- Social Worker to include service provided wherever possible.

KKCFS Documentation:

- Refer to Level 12 Practice Standard 8

LEVEL 12 PRACTICE STANDARD 8: SUPPORT SERVICE AGREEMENT FOR FAMILIIES

Upon completion of the service planning process, where a case involves support services for a family, the Agency enters into a signed agreement.

KKCFS Criteria:

- Input and view from family members, extended family, and community will be sought wherever possible, with KKCFS using discretion as to who should or should not be included;
- Agreement to be holistic;
- Preventative services to be provided wherever possible; and
- Circles and family meetings to be utilized in the development of an agreement.

KKCFS Process:

- Social Worker completes in person with parent(s), child(ren) and others;
- Agreement specifies types of support services to be provided to child and/or parents;
- Agreement includes a plan that addresses: assessment, goals, and timeframes;
- Social Worker provides a copy of agreement to:
 - Parent(s);
 - Child if over 12;
 - Service providers as deemed necessary; and
 - Community member as appropriate.

Documentation:

- KKCFS Support Services Agreement (KKCFS – 120)

LEVEL 12 PRACTICE STANDARD 9: DEVELOPMENT OF THE COMPREHENSIVE PLAN OF CARE

The process for the development of the plan of care will ensure that:

- **Participants share responsibility in the decision making process;**
- **There is a focus on the decision to meet the needs and capabilities of the child;**
- **The plan addresses issues of safety and risk.**

KKCFS Criteria:

The plan of care meeting will take into account the child's (ie. Ktunaxa/Kinbasket) culture, and will be conducted in a way sensitive to these cultures. Respect for communication processes and styles must be given.

KKCFS Process:

(1) Determining who should participate in the plan of care:

In determining who should participate, the social worker will consider involving the following people:

- The child (level of input is dependent on age);
- The child's family, as identified by the child regardless of legal or blood relationships, unless those people cannot be located or it is determined that it would not be in the best interest of the child to include such people;
- The child's community, as identified by the child, the family, and any First Nation community which considers the child to be one of its members;
- Any person who has an important relationship with the child, as identified by the child; and
- Any people currently providing support or services to the child and/or the child's family, including the caregiver of the child.

(2) Cultural Sensitivity:

The plan of care process must take into account the child's culture and be conducted in a way that is sensitive to the child's culture. In order to understand the child's culture, the social worker must take into account the cultural practices of the child's family/home. Wherever possible, the placement planning for a child should be in an environment that supports/matches the cultural practices of the child's family/home where the child lived prior to entering care.

The social worker is responsible for collecting all of the child's belongings with identification in the plan of care as to cultural practices applicable to that child and their community.

- Teeth and hair become the responsibility of a member of the community or a family member. Other examples include but are not limited to: eagle feathers, the umbilical cord and the hair from the child's first haircut and any other significant cultural or sentimental items.
- Training should be provided to foster parents in regard to cultural practices so an understanding is developed regarding the significance of the items listed above.

(3) Plan of Care Meeting Process:

The social worker will meet with the child privately to gather the child's views regarding his/her plan of care. The social worker will keep in mind the child's safety, best interest, and views throughout this process.

- The social worker will meet with family members, caregivers, service providers, and key community representative(s) as part of the plan of care assessment.
- The social worker will convene at least one meeting with all key individuals in the child's life, and whenever possible, the child, to finalize the plan of care.
- If there are concerns regarding the safety and well being of the child or protection concerns, the social worker will limit the participation of those putting the child at risk in the group meeting.
- If one or more participants were not included in the plan of care process or group meeting, the social worker will document why.
- The social worker must use the views stated by the child, family, caregivers and community as a guide for developing the plan; taking into consideration the child's best interest.
- The social worker ensures that the participants acknowledge the child's right to privacy
- The social worker must ensure a review date is established.

In the meetings the social worker:

- Ensures participants share responsibility in the decision making process;
- Focuses the decisions on meeting the needs and capabilities of the child; and
- Addresses issues of safety and risk.

(4) Documentation of Plan of Care Meeting Process:

The social worker must ensure that the meeting produces a written, comprehensive, plan of care for the child, which is based upon both the information shared by all the participants, and decisions at the meeting(s). This includes:

- An assessment of the child's needs;
- A summary of the information presented;
- A description of the services to be provided;

- A statement of the reasons why the services are to be provided, and a description of the evaluation of each service;
- The names of the people in charge of completing specific tasks, and the time frames for completing them;
- The reason why certain individuals were excluded in the development of the plan; and
- The date and place of review.

(5) Approval of the Plan of Care:

The social worker obtains the Agency's delegated supervisor's approval of the plan.

(6) Distribution of the Plan of Care:

The social worker distributes the plan of care to the child and caregiver. Where appropriate, the social worker distributes the plan of care in full, or in part, to other members of the service delivery team, focussing on the best interest of the child and the child's right to privacy. Refer to Operational Standard 4 - Level 12 - Client Confidentiality and Information Sharing.

KKCFS Documentation:

- Interim Plan of Care (KKCFS – 221)
- Plan of Care (KKCFS - 223)

LEVEL 12 PRACTICE STANDARD 10: VOLUNTARY CARE AGREEMENTS

Upon completion of the service planning process, where a case involves the placement of a child into voluntary care, the Agency enters into a signed agreement.

KKCFS Criteria:

- No current protection concerns;
- Parent(s) temporarily unable to provide care;
- Parent(s) has agreed upon plan with KKCFS as to what measures are to be taken to be able to resume care; and
- Agreement will likely reduce need for future protective services.

KKCFS Process:

- Social Worker determines who custodial parents are (if court order in place social worker requests copy of order –ie. through Family Relations or Divorce Act),
- Social Worker determines there are no protection concerns that must be reported to a fully delegated social worker;
- Social Worker gives copy of signed agreement to parent, child (when over 12), and the caregiver;
- Social Worker tracks progress toward reunification (with support of MIS Caseload Management Reports);
- Social Worker advises the parent that KKCFS will apply for the Child Tax Benefit if the child is in care over 30 days;
- Social Worker determines mother and fathers income bracket and advises them of financial contribution;
- Social Worker completes agency invoices to initiate kinship care payment;
- Social Worker completes Indian Affairs notification; and
- Social Worker completes Child Tax Benefit application;
 - Social Worker completes admission medical for child.

KKCFS Documentation:

- Voluntary Care Agreement (KKCFS – 220)
- Guardianship Checklist (KKCFS – 200)

Computer:

- Update CS Legal Screen

LEVEL 12 PRACTICE STANDARD 11: SPECIAL NEEDS AGREEMENTS

Upon completion of the service planning process, and where a case involves a child with special needs who requires specialized services outside of the family home, the Agency enters into a signed agreement.

KKCFS Criteria:

- No current protection concerns;
- Parent(s) unable to provide care due to child's special needs;
- Parent(s) has agreed upon plan with KKCFS as to what measures are to be taken to be able to resume care or remain actively involved in child's life;
- Agreement will likely reduce need for future protective services.

KKCFS Process:

- Social Worker completes special needs agreement with parent(s) and child (ren) where appropriate;
- Social Worker provides copy of agreement to parent, child (if over 12), and caregiver;
- Social Worker makes referral via referral form to the support service. The referral form outlines the services identified in the special needs agreement;
- Refer to Practice Standard 10 for Voluntary Care process.

KKCFS Documentation:

- Special Needs Agreement (KKCFS – 220)

Computer:

- Update CS legal screen

LEVEL 12 PRACTICE STANDARD 12: FILE DOCUMENTATION

File recording and documentation is completed according to Agency policy guidelines.

KKCFS Criteria:

- Files must contain accurate, timely assessment and related documentation;
- File format standards are consistent with file format of MCFD – refer to KKCFS file format guidelines.

KKCFS Process:

- Social Worker will complete monthly reviews that are documented on file;
- Social Worker will ensure all correspondence pertaining to a family is filed on the family's file.

KKCFS Documentation:

The Social Worker has the following recording, as applicable on file but not limited to:

- Opening summary (KKCFS – 004);
- Case conference minutes;
- Tracking summaries;
- Review recordings (KKCFS – 005),
- Relevant court documents and agreements;
- Plans of care (KKCFS – 223);
- Professional assessments;
- Reportable circumstances (Office Visions Template);
- Correspondence;
- Resource/placement history;
- Health history including immunizations;
- Closing of transferring recording (KKCFS – 006).

KKCFS File Documentation:

- Case notes (KKCFS – 001);
- Brief contact (KKCFS – 002);
- Group reporting (KKCFS – 003);
- Internal case plan (KKCFS – 007);
- Client information sheet (KKCFS – 012);

- File closure (KKCFS – 006);
- Support Service Agreements (KKCFS – 120);

- Voluntary Care/Special Needs Agreements (KKCFS – 220);
- Interim Plan of Care (KKCFS – 221);
- Plan of Care (KKCFS – 223);
- Admission medical information (KKCFS 230);
- Permanent medical information (KKCFS 231);
- Health Care Passport (MCFD).

LEVEL 12 PRACTICE STANDARD 13: REVIEW OF THE FAMILY SERVICE PLAN

The effectiveness of the family service plan is analyzed, and the plan is modified if required to reflect the current needs of the child and family.

KKCFS Criteria:

- Reviews occur anytime:
 - When there is a change in circumstance for the child;
 - When renewing agreements; and/or
 - At least every 6 months.

KKCFS Process:

- In completing reviews the social worker:
 - ensures a comparison of the child's and family's current situation with information originally gathered;
 - identifies any barriers to implement service plan and ways to overcome such barriers;
 - determines whether goals were met;
 - determines if the service plan is effective;
 - determines if the service plan is suitable to meet the needs of the child and family,
 - makes decision regarding update or termination;
 - ensures reviews are regular, based on all the information available, assesses the effectiveness and appropriateness of the service plan, and addresses identified issues and concerns.

KKCFS Documentation:

- Social Worker documents the review information on:
 - Case Notes (KKCFS – 001)
 - Brief Contact Form (KKCFS – 002)
 - Internal Case Plan (KKCFS – 007)
 - Support Service Agreement (KKCFS – 120)
 - Plans of Care – Interim (KKCFS – 221) Ongoing (KKCFS – 223)
 - Review Recordings

LEVEL 12 PRACTICE STANDARD 14: APPLICATION AND ORIENTATION

People interested in applying to provide a family care, restricted family care, or specialized family care home must complete an application and orientation process. The Agency social worker explains to applicants the Agency's expectations of caregivers as well as other policies that have an impact on caring for children.

KKCFS Criteria:

- KKCFS has a recruitment and retention strategy for Kinship homes to provide family based and group care. KKCFS is developing a continuum of resources to ensure a sufficient number of diverse placement options available. KKCFS and MCFD are developing a protocol for sharing resources.

KKCFS Process:

1. All potential foster parents will be required to attend a community information session. Information sessions will be ongoing in the communities. The orientation will include:
 - Rights of children in care, sec 70;
 - The role and responsibility of the caregiver;
 - The Ktunaxa Kinbasket culture;
 - The safe storage of firearms and ammunition;
 - Liability and other insurance coverage;
 - Discipline standards;
 - Confidentiality;
 - Medication storage;
 - Record keeping;
 - Child safe cribs, car seats, seatbelts;
 - Issues of home safety (ie. smoke detectors, telephones).
2. If potential parents are still interested in becoming care parents, individual meetings can then be set up with the Resources Social Worker of the Kinship Care Program. Once this meeting has taken place the application process can begin.
3. A criminal record check will be required by the applicants and also by anyone over the age of 18 that regularly resides in the home.
4. A prior contact check or PCC through the Ministry of Children and Families, Social Worker Information System (SWSMIS) will then take place.

5. When the Criminal Record Check and the Prior Contact check are completed and returned to KKCFS, and there are no concerns about past conduct, the application forms can be completed.
6. All potential foster parents will be required to attend a Community Information Session. Information Sessions will be ongoing in the communities.
7. If potential parents are still interested in becoming care parents, individual meetings can then be set up with the Resources Social Worker of the Kinship Care Program. Once this meeting has taken place the application process can begin.
8. A prior contact check or PCC through the Ministry of Children and Families, Social Worker Information System (SWSMIS) will then take place.
9. When the Criminal Record Check and the Prior Contact check are completed and returned to KKCFS, and there are no concerns about past conduct, the application forms can be completed. If there is a reason to believe that an applicant may pose a threat to a child based on past conduct; the application will be refused. If the applicant disagrees with this decision, he or she may appeal the decision.
10. Three references will also be required of the applicant, these may be personal or professional references.
11. A complete medical will also be required of the applicant to ensure that they are physically and emotionally able to care for children.
12. The homestudy will then be conducted by the Resource Social Worker and will take place over the next few weeks. All members of the family unit will be interviewed.
13. When the homestudy and all the required documents have been completed, the Resource Social Worker will make a decision to either recommend or refuse the application for fostering. The recommendation or refusal will then be presented to the Supervisor and the Executive Director of the KKCFS who will make the final decision based on the information gathered.
14. If the applicant is refused, he or she will be given a written explanation as to why they were refused with recommendations on changes they can make in order to meet the criteria for kinship care providers.
15. If the applicant agrees to make these changes in their home to meet the criteria then their application will be reviewed. If they cannot make these changes or they disagree with the decision, they will have the opportunity to enter into an appeal process.

16. When a home has been approved, the caregivers will be expected to attend an orientation session before children will be placed in their care, with the exception of extended family or where and emergency placement is required.

In circumstances where a criminal record exists the worker will:

- Consider the length of time since conviction
- The seriousness and nature of the crime;
- Whether the crime involved children and youth;
- What steps the applicant has taken to change behavior;
- Review the criminal record check and review with agency Director who makes the final decision on whether to approve the home.

KKCFS Documentation:

- Resource Intake (KKCFS 302)
- Letter to Kinship Care applicant (KKCFS – 303)
- Kinship Care application form (KKCFS – 304)
- RCMP Criminal Record Check (KKCFS – 308)
- Criminal Record Information Sheet (KKCFS – 309)
- Reference Letters (KKCFS – 307)
- Release of Medical Information (KKCFS – 306)
- Medical Reference Form (KKCFS – 305)

LEVEL 12 PRACTICE STANDARD 15: HOMESTUDY

Family care homes are assessed to ensure that caregivers understand and meet the Agency's standards. The social worker completes a homestudy and makes recommendations regarding placements. The supervisor or Executive Director of the Agency reviews and signs the homestudy, makes a decision regarding the application, and files the documents.

KKCFS Criteria:

- Placements of a child in a home known to the child can be done via a condensed Kinship Care Assessment;
- Home studies of families interested in taking any child must undergo a KKCFS full homestudy assessment.

KKCFS Process:

- All potential kinship care homes must meet safety standards:
 - Are all firearms and ammunition in the home locked away and stored separately from each other?
 - Is there a fire extinguisher in the house and a smoke detector in each hallway of the sleeping areas?
 - Is all medication stored in a proper, safe place? Is there a safe dispensing procedure?
 - Does the parent have proper seatbelts or safety restraints available in their vehicles to be used for transporting children? Do they meet the federal government safety standards?
 - Are the cribs in the home safe? Do they meet the federal government safety standards?
 - Does each child in the home have their own space, (e.g. Bed, dresser, bedroom if possible) to decorate in any manner they choose?
 - Is the home designed to keep children safe from risk? e.g. Fire, cleaning products stored properly, safety gates on stairs if there are small children, a yard free of hazardous items.
 - Are there any pets that could potentially harm the children? What precautions have been taken to alleviate the risk?
 - Is there a safety plan in case of fire? How often is this practiced? Does it include the following?
 - A method of getting out of the house in case of fire?
 - The location of safe places in each room of the house in case of an earthquake or other natural disasters?

- Emergency telephone numbers to call in case of other situations (describes how to call for help in emergencies).

- Selection Process:

The selection process of Kinship Care homes for children requiring care on a voluntary basis will be done in consultation with the natural parents, and will be done by taking the following criteria into consideration:

 1. Are there care homes available within the child's extended family?
 2. Within the child's community?
 3. Within the Nation?
 4. Is the child's best interest being taken into consideration?

Other criteria that should be taken into consideration when placing the child are:

 5. The level of care required for any special needs that the child may have, i.e. FAS, physical or developmental disabilities.
 6. Does the potential placement have the training to provide adequate care for a child with special needs?
 7. Are there other children placed in the home?
 8. Is there enough space if placing sibling groups?
 9. Age and gender of the child/children.
 10. Accessibility for visitation of the natural parents.
 11. Is the child safe if placed in their home community?

- Home Study Process
 1. The home study process will follow the Kinship Care Home Assessment tool and Home Study guidelines.

KKCFS Documentation:

- KKCFS Kinship Care Home Assessment Tool (KKCFS – 310)
- KKCFS Kinship Care Home Study and Review Checklist (KKCFS – 301)
- KKCFS Questions for Children in Prospective Homestudy (KKCFS – 310)
- Condensed Kinship Care Assessment (KKCFS – 312)

LEVEL 12 PRACTICE STANDARD 16: TRAINING OF CAREGIVERS

Caregivers receive training, which includes ensuring the child's cultural identity is developed and maintained.

KKCFS Criteria:

- Prospective Kinship Care providers (foster parents) must undergo Foster Parent Introductory Training prior to placement of child(ren) unless child(ren) require emergency placement.

KKCFS Process:

- Orientation and training sessions will be delivered to all prospective kinship caregivers by KKCFS staff.
- Training must include:
 - Rights of children in care;
 - History of Ktunaxa Kinbasket people;
 - Traditional practices of Ktunaxa Kinbasket family and community life;
 - Ways of encouraging children in care to participate in cultural activities;
 - Medical information such as FAS and FAE;
 - Services required to meet child's needs;
 - KKCFS policy on appropriate discipline. (ie. inappropriate practices experienced in residential schools);
 - Protocol for investigating allegation of abuse.

KKCFS Documentation:

- KKCFS will use the following documents until it develops its own:
 - MCFD Foster Parent Training Handbook;
 - MCFD Foster Parent Handbook;
 - Foster parent standards.

LEVEL 12 PRACTICE STANDARD 17: SIGNED AGREEMENT WITH CAREGIVER

There is a signed agreement between the caregiver and the Agency that describes the caregiver's role, responsibilities, and payment level.

KKCFS Criteria:

Once a Kinship Care home has been approved, an agreement is signed with the caregiver that includes:

- Maximum number of children in the home;
- The term of the agreement;
- The designation of the home;
- Arrangements for respite care;
- Payment level;
- Expectations regarding the caregiver's involvement in the planning and reviewing the child's plan of care;
- The Agencies commitment to ongoing training and support;
- Rules regarding the disclosure of information;
- Procedures for investigating allegations of abuse, specifically MCFD's role in investigating allegations of abuse and neglect in Kinship Care homes;
- Mutual roles and responsibilities of the caregiver and the agency social worker,
- Reporting requirements;
- Liability.

KKCFS Process:

At least once a year the Agency social worker will review the agreement with the caregiver and will make mutually agreed upon adjustments to the agreement.

Agency must obtain director's approval for the format of the agreement if different then the director's agreement.

KKCFS Documentation:

- Kinship Care Agreement (KKCFS – 313, 313A-E)
- Kinship Care Annual Review (KKCFS – 311)
- Kinship Caregivers Weekly/Monthly report (KKCFS – 315)

LEVEL 12 PRACTICE STANDARD 18: PROVIDING INFORMATION ON THE CHILD

Caregiver receives information about the child from the social worker to ensure the child's safety and well being.

KKCFS Criteria:

Prior to the placement of the child, the social worker provides the caregiver with written information about the child, which includes:

- Developmental level;
- Education;
- Current medical condition;
- Talents and interests;
- Connections to the Ktunaxa Kinbasket culture;
- Current community activities;
- Pets.

As the social worker learns more information regarding the child the social worker provides this information to the caregiver.

KKCFS Process:

Agency social worker provides a referral document to the caregiver prior to or at the time of placement.

KKCFS Documentation:

- Placement Request Form (KKCFS – 210)

LEVEL 12 PRACTICE STANDARD 19: MONITORING AND REVIEW OF HOMES

Kinship Care Homes are monitored on an ongoing basis and are formally reviewed at least annually to ensure they continue to meet the standards for care.

KKCFS Criteria:

- The KKCFS resource social worker meets with the Kinship Care Parent twice per year;
- When a child is placed with the caregivers, the social worker reviews the agreement with the caregivers.

KKCFS Process:

- In monitoring the Kinship Care Home the resource social worker will:
 - Assess the ability of the caregivers to achieve the goals for each child placed and adhere to the Agency standards for Kinship Care Homes;
 - Joint discussion between the Agency resource social worker and caregivers that includes positive feedback and the identification of significant changes for the caregiver and/or the home.
- The KKCFS resource social worker will conduct an annual review that will include:
 - File review;
 - Home visit;
 - Interview with all caregivers in the home;
 - Discussion with agency delegated supervisor and the family of all concerns identified on the review form;
 - New application when the family circumstances or family composition has changed. If family composition has changed, the home study must be updated and a review of physical and safety standards occurs.
- Agency resource social worker completes the review and has it signed by the caregivers. All concerns on the form are discussed with the Agency delegated supervisor and caregiver.

KKCFS Documentation:

- KKCFS Annual Review form (KKCFS – 311)

LEVEL 12 KKCFS PRACTICE STANDARD 19A: RETENTION AND SUPPORT OF KINSHIP CARE HOMES

KKCFS will actively work at supporting Kinship Care Homes in order to retain homes and ensure children placed in these homes receive the best care possible.

KKCFS Criteria:

- Ktunaxa Kinbasket children in care receive the best care possible when Kinship Care parents are maintained, so children don't have to move and are supported so any difficulties are addressed prior to a crisis developing.

KKCFS Process:

- The Resource Social Workers of the Kinship Care Program will carry out the retention of the Kinship Care Homes by:
 - When a child has been placed in a Kinship Care home, placement visits will take place on the first day of placement, seven days after the placement, thirty days after the placement and every ninety days thereafter.
 - The purpose of the placement visits is to monitor the placement. If issues arise with the care parents, or with the placement of the child in the care home, more frequent visits will take place in order to resolve these issues. Review of the child's Plan of Care will also take place during the monitoring of the home.
 - All relevant information pertaining to the care of the child will be given to the care parents. This will include any physical or developmental delays, education, family ties that need to be continued, community activities the child is involved in and any issues that may require additional care.
 - The Resource Social Worker will provide any additional training to all care parents on an as needed basis. The care parents will also be required to attend the Federation of British Columbia Foster Parents training when it is available. When the Kinship care program has developed their Foster Parent training the care, parents will be required to attend these training sessions.
 - The Resource Social Worker will provide mediation to families when conflict arises.
 - When there are allegations of abuse in any of the Kinship care homes, the report will automatically go to the Ministry of Child and Families Child Protection Unit. The Child Protection Manager will conduct the investigation. If the Child Protection Manager decides that it is not a child protection issue but believes that there is a Quality of Care issue, it will become the responsibility of KKCFS Kinship Care Program to conduct a Quality of Care review. The Supervisor of the Kinship Care Program will then conduct the Quality of Care review with the Resource Social Worker acting as support to the care parents.
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- If the allegations of abuse have been substantiated by the Child Protection Team, the Child Protection Manager and the Supervisor of the Kinship Care Program will make the decision about whether or not the child will be removed from the home. It will then become the decision of the Kinship Care Program as to whether or not the home will remain open.
- Monthly reports will also be required for all children placed in the Kinship Care Homes. These reports will include the child's progress in all areas of their life.

KKCFS Documentation:

- Case Notes (KKCFS – 001)

Level 12 Practice Standard 20: INVESTIGATING ALLEGATIONS OF ABUSE OR NEGLECT IN KINSHIP CARE HOMES

Investigations of allegations of abuse and neglect in family care, specialized care, and restricted family care homes are conducted by the Ministry of Children and Family Development and/or a First Nations Child and Family Service Agency with delegated child protection social workers.

KKCFS Criteria:

If a KKCFS staff person becomes aware of a concern of abuse or neglect in a Kinship Care Home the agency worker immediately notifies the agency delegated supervisor and a fully delegated child protection social worker with MCFD. If the agency supervisor is not available the agency worker must immediately notify a fully delegated social worker with MCFD.

It is recognized there will be:

- Ministry for Children and Family Development Foster Homes caring for children under the guardianship of Ktunaxa Kinbasket Child and Family Services;
- Ktunaxa Kinbasket Child and Family Services Kinship Care Homes caring for children under the guardianship of Ministry of Children and Family Development; and
- Ktunaxa Kinbasket children in Ministry for Children and Family Development Foster Homes and under the guardianship of the Ministry for Children and Family Development.

The roles of both the Ministry for Children and Family Development and Ktunaxa Kinbasket Child and Family Services will vary depending on which of the above situations apply.

KKCFS Process:

The Ministry of Children and Family Development continues to be responsible for investigating allegations of abuse or neglect occurring in foster homes and alternate care homes. Until Ktunaxa Kinbasket Child and Family Services social workers are delegated at Level 15 to investigate reports of abuse, the Ministry of Children and Family Development will provide an opportunity for Ktunaxa Kinbasket Child and Family Services to be actively involved in this process. If the resource is a Ktunaxa Kinbasket Kinship Care Home then Ktunaxa Kinbasket will fulfill the resource support function outlined in the Foster Parent Protocols. The minimal required involvement by the Ministry of Children and Family Development of Ktunaxa Kinbasket Child and Family Services is:

- Immediate notification of the decision to investigate alleged abuse in a Kinship Care home or a Foster Home caring for a Ktunaxa Kinbasket child;

- Clarification of roles of all parties involved in the process;
- Inclusion of Ktunaxa Kinbasket Child and Family Services in the review of the information gathered in the protocol process; and
- Immediate notification of the findings and recommendations once such findings and recommendations have been determined.

Ktunaxa Kinbasket Child and Family Services is responsible for the notification of the appropriate Band(s).

KKCFS Documentation:

- MCFD Protocols for Foster Homes Handbook – guidelines in handbook for documentation

LEVEL 12 PRACTICE STANDARD 21: QUALITY OF CARE

KKCFS Criteria:

Quality of care reviews are conducted whenever a quality of care concern arises, where the child's safety is not an issue.

KKCFS Process:

If a quality of care concern is raised to the Agency the social worker will review this with the Agency delegated supervisor to determine if a quality of care review should be conducted.

Ktunaxa Kinbasket Child and Family Services Society will ensure all staff completing Quality of Care reviews are delegated under Level 12.

The Ministry of Children and Family Development will actively involve Ktunaxa Kinbasket Child and Family Services social worker in Quality of Care reviews that involve Ktunaxa Kinbasket children under the responsibility of the Ministry of Children and Family Development.

Ktunaxa Kinbasket Child and Family Services will actively involve the Ministry of Children and Family Development resource social worker in Quality of Care reviews that involve Ktunaxa Kinbasket children, under the responsibility of Ktunaxa Kinbasket Child and Family Services, in Ministry of Children and Family Development resources.

Ktunaxa Kinbasket Child and Family Services may request support from the Ministry of Children and Family Development in the completion of Quality of Care reviews involving children under the responsibility of Ktunaxa Kinbasket Child and Family Services in Ktunaxa Kinbasket Child and Family Services resources.

KKCFS Documentation:

- Quality of Care Documentation and Reports as per the MCFD Protocol Handbook;
- KKCFS will send a letter to Kinship Care Parent when a decision to proceed to Quality of Care review is made stating the concerns being reviewed;
- KKCFS will send a letter to Kinship Care Parent when the Quality of Care review is completed stating the outcome and recommendation of the review.

LEVEL 12 PRACTICE STANDARD 22: CLOSURE OF THE FAMILY CARE HOME

When a family care home is closed, the caregivers are notified of the reason in person, followed with a letter of confirmation.

KKCFS Criteria:

- Whenever possible notification to caregiver must be in person and followed in writing identify the review process.

KKCFS Process:

- Meeting must be within 7 days of decision to close;
- Letter must be sent to caregiver within 14 days of the decision to close;
- Description of appeal process must be provided to caregiver;
- If home is closed following a MCFD investigation, MCFD must provide letter to caregiver;
- Support services must be offered to foster children in the home to minimize the disruption and trauma of relocation.

KKCFS Documentation:

- Letter to Kinship Care Parent

LEVEL 12 PRACTICE STANDARD 23: THE RIGHTS OF CHILDREN IN CARE

Children in care are informed of their rights under the CFCSA legislation and of the procedures for enforcing those rights.

KKCFS Criteria:

- All children in care must be advised of their rights as children in care, on a regular basis.

KKCFS Process:

- Social Worker will meet privately with child to review rights of children in care prior to or at the time of placement,
- Social Worker will inform child in care of:
 - Role and phone number of the Ombudsman and the Children's Officer;
 - They can have an advocate/support person to assist them in ensuring their rights.
- Social Worker to provide children in care a copy of rights of children in care;
- Social Worker to advise caregivers of the rights of children in care and ask caregiver to reinforce these rights with children in care;
- Social Worker to privately review these rights with children in care:
 - At least every six months;
 - When a child moves;
 - When a critical incident occurs in a kinship care home;
 - When there is a protocol investigation in a kinship care home.

KKCFS Documentation:

- KKCFS will utilize the following MCFD documentation:
 - Young children colouring book;
 - Know your rights brochure;
 - Rights of Children in Care.
- Social workers will document in their case notes and on the plan of care when rights have been reviewed privately with children in care.

LEVEL 12 PRACTICE STANDARD 24: PROCESS FOR DETERMINING THE NEEDS OF A CHILD

The process for determining the needs of the child will involve the child and family. Information is gathered and analyzed regarding the child and family, family history, and requests for support services.

KKCFS Criteria:

- KKCFS Social Work staff will have a solid understanding of the needs of children in their care.

KKCFS Process:

- Assessment of the child's needs to include:
 - Needs and strengths of child and family;
 - The family members' individual roles and interactions;
 - Any underlying issues or barriers to service;
 - Significant family or parental history;
 - Support network available and required;
 - Cultural practice of the family;
 - Any professional assessments conducted or required.
- Information in the file recording should include:
 - The meeting date for the comprehensive review, and participants involved;
 - Up to date family biographical information and/or family history
 - Social and cultural information;
 - Other professional services currently involved;
 - MCFD and other agency (i.e. First Nations agencies) involvement, including any safety or risk assessments;
 - Assessment of family functioning;
 - Presenting situation and service request.
- Determination of need is completed in a way that:
 - Is inclusive and holistic, and is structured in a manner that includes: child, family, and others (ie. teachers, extended family, service providers, community health reps);
 - The child(ren) and family have the opportunity to openly express their views;
 - The child(ren) and family have the opportunity to be involved in problem solving and decision making to the fullest extent possible, without compromising safety and risk;
 - The child(ren) and family are involved in all case transfers and closures, and have the opportunity for closure where required from service providers.

KKCFS Documentation:

- Interim plan of care (KKCFS – 221)
- Plan of Care (KKCFS – 223)
- MCFD condensed and comprehensive plans of care

LEVEL 12 PRACTICE STANDARD 25: REPORTABLE CIRCUMSTANCES

The Executive Director/Program Director of the Agency and the Director of Child and Family Services are notified of reportable circumstances and grievous incidents.

KKCFS Criteria:

- When a child or youth who has been receiving services within the past 12 months dies, or is critically injured, a report is sent to the Director of Child and Family Services and the KKCFS Director within 24 hours of the incident.
- A case review and written report is submitted within 10 days.
- Reportable circumstances include:
 - Death of child;
 - Child in life threatening situation (illness, accident, abduction);
 - Child frequently running away;
 - Child who is lost or missing for 10 days;
 - Child involved in a violent crime;
 - Child abused or neglect in situations which could be perceived as being linked to services the Director of Child and Family Services provides; and
 - Child involved in high risk situation or disaster.

KKCFS Process:

- KKCFS supervisor completes initial report within 24 hours;
- KKCFS director will determine what information is to be shared with family and community;
- KKCFS social worker or supervisor will contact immediate family members;
- KKCFS social worker or supervisor will contact community (band) representative identified in protocol between KKFCS and the band;
- Report completed on MCFD Office Visions information system – details required are on Office Visions template document;
- KKCFS supervisor completes case review and written report within 10 days;
- KKCFS supervisor provides the following information as available:
 - Medical reports;
 - Autopsy;
 - Results of police investigation; and
 - Results of the case review.
- KKCFS will ensure all necessary protocols are in place.

Documentation:

- Foster Parent Incident Report
- Office Vision templates

LEVEL 12 PRACTICE STANDARD 26: BIOGRAPHICAL INFORMATION AND FAMILY HISTORY

The child's biographical information and family history information are gathered, shared with the child, and placed on file.

KKCFS Criteria:

- Family history/lineage including pictures of elders and family members to be commenced within 60 days of child entering care
- Life Books are essential as part of child's plan, (i.e.: pictures, information on family history, hair cuts, teeth, umbilical cord, etc);
- Family, extended family, elders, and community to be involved wherever possible;
- For children not residing within a Ktunaxa Kinbasket community a KKCFS support worker to ensure cultural connections are established;
- As a part of the child's plan of care, a decision must be made to determine who will be entrusted to "keep" significant possessions such as hair, teeth, etc;
- The social worker is responsible for ensuring a person gathers and moves a child's significant personal belongings (i.e. toys, keepsakes).

Note: Ktunaxa and Kinbasket adults who were in care identify issues of:

- Not clearly understanding why in care – not explained in a way that they could understand, if at all;
- Not allowed to have access to parent despite parent's situation/condition, that access, even if not all positive, allows for the child to understand the truth and see first hand why may have to be in care;
- Not feeling connected to family, community, and culture due to lack of connectedness during growing years.

KKCFS Process:

- Social worker gathers information about the child including:
 - Information about family members;
 - Family constellation; and
 - Previous parental and sibling relationships.
- Information to be gathered includes:
 - Legal status that defines relationship between caregivers and child and the dates defining this relationship;
 - Information about the child's parents including the names and relationships of all the child's caregivers;
 - Information about the child's siblings including the names and relationships of all step and half siblings;

- Reason, from parents' and extended family perspective, why parents and extended family cannot provide care (if this is the case);
- Significant life events;
- History of physical moves the family has had;
- Placement history of the child in care;
- Information about extended family or relationships with non-family members who are regarded as significant, including:
 - Addresses;
 - Length of relationship;
 - Current involvements;
 - Willingness to be a caregiver should placement be needed in the future, and ability to be a caregiver should placement be needed;
 - Health history;
 - Family functioning including roles of family members;
 - Support systems including those identified above;
 - Previous and current services that family has received or is receiving;
 - Information about the child which could include development, educational, current medical, talents and interests, connection to the aboriginal culture, current community activities (aboriginal and non-aboriginal); and
 - Pets.

Documentation:

- Pictures and Life Book
- KKCFS Interim Plan of Care (KKCFS – 221)
- KKCFS Plan of Care (KKCFS – 223)

LEVEL 12 PRACTICE STANDARD 27: MONITORING THE CHILD'S PLAN OF CARE – PART 1

The plan's implementation is monitored to determine the progress towards goals, the continued safety of the child, the effectiveness of the services, and any barriers to service.

See Practice Standard 28 for criteria, process, and documentation

LEVEL 12 PRACTICE STANDARD 28: MONITORING THE CHILD'S PLAN OF CARE – PART 2

When necessary, the plan is changed to accommodate new information.

KKCFS Criteria:

- All plans must address the child's needs, including cultural needs;
- When there is a significant change in the child's circumstance (i.e. move, critical incident, professional assessment completed, etc) the plan of care must be reviewed and updated;
- Plans must be reviewed at least every six months;
- Review of Plans must ensure they include supportive information regarding the child and family;
- Knowledge of history of child and child's family is important to be documented but caution must be exercised in how such information is shared with the child, and it needs to be identified who is best to share certain information.

KKCFS Process:

- In monitoring the plan of care, the social worker gathers information related to:
 - Child's progress;
 - Changes in family situation;
 - Barriers to service or goal attainment;
 - Issues regarding the child's safety.
- Information is shared with Kinship Care Parent(s) and significant others as updated;
- Social Worker includes Kinship Care Parent(s) and service providers in the review of the plan;
- Social Worker ensures monitoring process is:
 - Vigilant;
 - Includes home visits;
 - Is supportive, encouraging, and motivating;
 - Recognizes changes and growth;
 - Is responsive.

KKCFS Documentation:

- Interim Plan of Care (KKCFS – 221)
- Plan of Care (KKCFS – 223)
- Case Notes

LEVEL 12 PRACTICE STANDARD 29: WHEN A CHILD OR YOUTH IS MISSING, LOST OR RUNAWAY

The social worker takes responsible action, as would be expected of a reasonable and prudent parent, to locate a missing, lost or runaway child or youth, and to safeguard the child or youth from harm or the threat of harm.

KKCFS Criteria:

As stated above

KKCFS Process:

When a child is lost, missing, or has run away, the social worker:

- Ensures RCMP have been notified;
- Informs the Director of Child Protection via a reportable circumstances form if the child is at risk of harm as per MCFD policy on reportable circumstances;
- Notifies the child's or youth's parents;
- Ensure the child's extended family members or significant others are notified;
- Actively seeks out possible friends who may know the child's or youth's whereabouts;
- Identifies or checks possible persons or places where the child or youth may be located;
- Provides a current picture of the child or youth to key people and RCMP;
- Provides a list of know associates to the RCMP;
- Determines if and Notifies border of concerns child may go or be taken across federal border;
- Actively and regularly coordinates search activities until the child or youth is found;
- Checks with the RCMP regarding their efforts to locate the child or youth;
- Arranges case conferences with significant persons in the child's or youth's life to ensure all possible options are considered to the child or youth, and to ensure his or her safety;
- Maintains and intensifies search efforts for as long as it takes to locate the child or youth;
- Considers media assistance when a review of circumstances justifies releasing confidential information in order to ensure the child's or youth's safety.

In determining if a child is at high risk of harm, consider if the child or youth:

- has an acute physical or psychological condition;
- has limited ability to care for him/herself or to understand possible consequences of his/her actions;
- may have been abducted;

- would not normally go missing and there is no apparent precipitating reason for him/her to run away;
- is known to have associations with people or places that have put him/her at significant risk of harm in the past.

When the child or youth is located, the social worker:

- assesses need for medical treatment or therapeutic support;
- immediately advises the RCMP and all who were notified the child or youth was missing;
- assesses the child's or youth's reasons for being lost, missing, or running away, and obtains the child's or youth's views about the situation;
- returns the child or youth to his/her placement or arranges another placement;
- determines if there was criminal injury requiring criminal investigation;
- assesses whether the child may be entitled to criminal injury compensation;
- determines if the circumstances warrant a reportable circumstance;
- reviews and revises the child's plan of care.

KKCFS Documentation:

- Reportable Circumstance Form – Office Visions Template
- Case Notes (KKCFS – 001)

LEVEL 12 PRACTICE STANDARD 30: INFORMING THE CHILD ABOUT BEHAVIORAL EXPECTATIONS AND CONSEQUENCES

The child in care is informed about:

- **The standard of behavior expected by the caregiver; and**
- **The consequences of not meeting the caregiver's expectations.**

KKCFS Criteria:

The Rights of Children in Care must be upheld. Children have the right to participate in their cultural and spiritual heritage. Children must be informed in a way that balances acceptable and non-acceptable actions and behaviors. Wherever possible caregivers will emphasize the positive behaviors that are expected.

Section 70 of the Child, Family and Community Service Act

The Rights of the Child in Care are:

- (a) to be fed, clothed and nurtured according to community standards and to be given the same quality of care as other children in the placement;*
- (b) to be informed about their plans of care;*
- (c) to be consulted and to express their views, according to their abilities, about significant decisions affecting them;*
- (d) to reasonable privacy and possession of their personal belongings;*
- (e) to be free from corporal punishment;*
- (f) to be informed of the standard of behaviour expected by their caregivers and of the consequence of not meeting their caregivers' expectations;*
- (g) to receive medical and dental care when required;*
- (h) to participate in social and recreational activities if available and according to their abilities and interests;*
- (i) to receive religious instruction and to participate in religious activities of their choice;*
- (j) to receive guidance and encouragement to maintain their cultural heritage;*
- (k) to be provided with an interpreter if language or disability is a barrier to consulting with them on decisions affecting their custody or care;*
- (l) to privacy during discussions with members of their families, subject to section (2);*
- (m) to privacy during discussions with a lawyer, the Child, the Youth and Family Advocate, the Ombudsman, a member of the Legislative Assembly, or a member of Parliament;*
- (n) to be informed about and to be assisted in contacting the Child, Youth and Family Advocate;*
- (o) to be informed of their rights under this Act and the procedures available for enforcing them.*

KKCFS Policy:

The social worker ensures that Kinship Care Parents and other caregivers are aware of the standards of expected behavior.

The social worker will emphasize to caregivers that discipline is teaching. The social worker will ensure caregivers are aware of the difference between discipline and punishment. The key difference is:

- with discipline the caregiver teaches and acknowledges reasonable and acceptable behavior, the child learns acceptable behavior, that the child likely feel successful and positive about what has been learned.
- with punishment the caregiver takes away or does to the child, the child may or may not learn that the action or behavior is wrong, the child may not learn acceptable alternative behavior, and the child likely feels bad or unworthy as a result of the punishment.

The Social Worker encourages caregivers to:

- clearly identify and teach acceptable behavior,
- reward and acknowledge positive behavior, and
- redirect the child to positive behavior prior to the need to consequence the child.

The social worker must provide caregivers with support in determining what is acceptable, reasonable and realistic behavior for the child. This must take into account factors such as:

- age of child,
- safety and well being of the child,
- special needs of the child,
- level of functioning of the child, and
- child's past current involvement in high-risk activities.

The social work will not just advise the caregiver of unacceptable behavior.

The social worker informs the caregivers the following practices are unacceptable:

- Deprivation of basic rights and needs including food, clothing, shelter, and bedding,
- Physical discipline, such as spanking, shaking, slapping, or hitting,
- Degrading actions such as ridiculing and humiliation,
- Restraint other than for immediate physical safety of the child or youth, other children or youth, the caregiver, or others
- Seclusion (not including time outs) or confinement,
- Assignment of unreasonable exercise or work that may be excessive or harmful to the child or youth,
- Threats of removal from care setting on order to manipulate or coerce the behavior of the child or youth,
- Arbitrary or unauthorized denial of visits, telephone contact or correspondence with family members or guardians,

- Application of consequences in situations where it is not certain that the individual's behavior has warranted them,
- Being disciplined by another child who has not been designated as a temporary caregiver,
- Coercive behavior by the caregiver or staff regarding their religious or personal beliefs.

To support the social worker and the caregiver of informing the child of behavioral expectations and rights the following may be of use:

- Colouring Book – Child in Care Rights
- Rights, Roles, and Responsibilities Book for Caregivers and Children
- CFCS Act – Section 70
- Publications of the BC Youth In Care Network

KKCFS Documentation:

- Social worker documents date of notification of caregiver of the above
- Social Worker documents any concerns related to these practices.

LEVEL 12 PRACTICE STANDARD 31: DECIDING WHERE TO PLACE A CHILD

When participating in decisions regarding where to place a child, consistent with the child's needs and best interests, priority is given to placing the child (in order of priority):

- **With the child's extended family;**
- **Within the child's aboriginal community; or**
- **With another aboriginal family, if the child's own family or community cannot assume the child's care.**

KKCFS Criteria:

For Ktunaxa Kinbasket Children:

- Ktunaxa Kinbasket children must be placed within the Ktunaxa Kinbasket Aboriginal community whenever possible and safe to do so.

For 1st Nation children of other ancestry living within the Ktunaxa Nation:

- Children must be placed where possible within the community first, with extended family second whenever possible and safe to do so.

For other children living within the Ktunaxa Nation:

- Children must be placed with extended family whenever possible and safe to do so.

In determining where to place a child effort must be made to secure an environment that is safe for the child and of a similar:

- Cultural background;
- Traditional background;
- Religious background.

Wherever possible the social worker should facilitate a family conference to seek input into placement planning for the child.

KKCFS Process:

Social workers (child and resource) consider:

- Adult members of the child's extended family or other persons within the child's community;
- Actively follows up any recommended or suggested members of the child's family or community to determine whether they would be willing and able to assume care of the child.
- Asks for suggestions from the extended family (facilitate a family meeting).
- Placement should be of a similar match in regard to the extended family's beliefs in such areas as culture and religion.

LEVEL 12 PRACTICE STANDARD 32: ARRIVING AT THE DECISION TO MOVE THE CHILD FROM ONE PLACEMENT SETTING TO ANOTHER

In arriving at the decision to move the child from one placement setting to another, the child's social worker:

- **Consults the child and family;**
- **Ensures that the decision is based on the child's best interests and that it is taken within the context of the child's comprehensive plan of care; and**
- **Considers the long-term implications of the decision, including the potential impact of the move on the child and whether the new placement will provide stability and the opportunity for attachments with the caregivers.**

KKCFS Criteria:

Wherever possible:

- notice to the child must be given when the child is moved from one environment to another;
- The child must be involved in the decision making process to the capacity that they are able; and
- The social worker consults with the child as to where they would like to stay.

KKCFS Process:

The social worker, with support of the supervisor informs the child by:

- Meeting with the child in person and explaining the reasons that have led to the decision;
- Explaining to the child who his or her new caregiver will be;
- Helping the child to formulate questions and/or concerns about this move;
- Seeking the child's views regarding the decision and determining if any of the child's wishes can be accommodated within the context of planning for the move;
- Where appropriate involving the child's caregiver and parent(s) in making the decision, informing the child, and planning the move.

The social worker must conduct the above with language and manner that is appropriate:

- to the child's age;
- to the child's developmental capability;
- to the child's psychological and/or emotional status.

If the child has requested to move, or is refusing to return to a particular setting, the social worker problem solves by:

- Involving the child in problem solving around the issues influencing his or her views;

- Providing a temporary arrangement, in consultation with key others where appropriate such as caregivers, service providers and parents, while the social worker assesses reasons why the child is not wanting to remain or return to placement;
- Meeting with the child privately to hear child's concerns, ensuring the child is aware of Section 70 Rights of Children in Care;
- Determining if a resolution is possible with the goal of remaining or returning,
- Reporting any serious incidents, that has led to the need to move a child, or the child's concern with the placement, as per Level 12 Practice Standard 25,
- Following any related protocol (i.e. Foster Parent Protocols);
- Reviewing findings and obtaining supervisory approval for plan to move or maintain placement.

Documentation:

- Critical Incident Shell Form on MCFD Office Visions System
- Case Notes

LEVEL 12 PRACTICE STANDARD 33: PLANNING TO MOVE THE CHILD

Following the decision to bring a child into care or to move the child from one living environment to another, the social worker considers the child's best interests and needs and:

- **Plans how the child will be moved, consistent with the child's best interest and needs;**
- **Prepares the child, to the fullest extent possible, for the move to the new living environment;**
- **Develops a strategy to actively support the child by maximizing continuity in the child's life and by minimizing any potential psychological and emotional trauma; and**
- **Following the requirements in practice standards 27, 28, and 37 in regard to the social worker's contact with the child and the child's caregiver.**

KKCFS Criteria:

As above

KKCFS Process:

The social worker must prepare and actively support the child by:

- Letting the child know who will be involved with him or her and what will happen while he or she is in care;
- Providing an explanation of the reasons a move is necessary and the approximate length of time the child will be in care, in a language and manner appropriate of the child's age and developmental capabilities;
- Asking the child where or what type of placement he or she would like to be placed in;
- Explaining to the child who his or her new caregivers will be;
- Helping the child develop questions or identify concerns about how his/her needs will be met in new placement;
- Facilitating pre-placement visits that involve as many significant others (parents, extended family, sibling, support workers) and ideally the current and future caregivers, but if not possible at least one pre-placement visit prior to placement;
- Participating with the new caregiver, child, and significant others in an orientation tour of the new living space, ensuring the child's questions and concerns are adequately addressed;
- If possible and appropriate provide closure to the current placement by assisting the child and caregiver to reach an understanding of how their relationship is ending, what the prospects of future contact may be, and how this care experience can be understood in the context of other life experiences;

- Ensuring the child has record from this placement that includes pictures of child and caregivers' family, milestones and accomplishments achieved while in this placement, and contact information in order to be able to maintain relationships established for the future;
- Ensuring child knows role of his/her social worker, how to contact his/her social worker, and who covers for his/her social worker when social worker is absent;
- Having a transition celebration where appropriate with key persons involved with the child;
- Moving personal belongings of the child in appropriate container with respect for the child's dignity (Appropriate examples would include rubbermaid container, duffel bags, or backpacks; Inappropriate example would be garbage bags).

Documentation:

- Financial change of placement forms (KKCFS 240, 241, 242)
- School notification form (KKCFS – 211)
- Referral to Foster Parent form (MIS Computer Referral Form)
- Request for Placement form ((KKCFS 210)

Computer:

- Update CS file location screen

LEVEL 12 PRACTICE STANDARD 34: INTERVIEWING THE CHILD ABOUT HIS OR HER CARE EXPERIENCE

When a child leaves a placement setting, if the child has the capability to understand and respond, the child is interviewed individually and his or her views are sought about:

- **The quality of care, service and support he or she received in the setting; and**
- **How to improve the quality of care, service and support children receive in the setting.**

The information obtained in the interview is documented in the child's file, and, when appropriate, shared with the resource social worker.

KKCFS Criteria:

Effort must be made to interview each child at the time of leaving care. The child's worker conducts this interview.

KKCFS Process:

When interviewing a child regarding his/her care experience the social worker:

- Considers the child's age, developmental capabilities, and cultural background;
- Provides the child with an interpreter if disability is a communication barrier;
- Uses a free narrative style by allowing the child to give his or her own observations and listening to what the child says;
- Uses open ended questions or non-leading requests for more detail;
- Uses words and concepts the child understands;
- Reassures the child it is okay to talk about his or her care experiences and provides support;
- Obtains the child's observations about his or her experience in the placement setting regarding the following, but are not limited to:
 - Personal safety;
 - Expressing views, being heard, and being informed;
 - Maintaining relationships;
 - Positive parenting/behavior management practices;
 - Health and nutrition;
 - Cultural identity and religious experience;
 - Leisure activities and education;
 - Autonomy and self care;
 - Privacy and personal belongings.

Documentation:

- Case Notes (KKCFS – 001)

LEVEL 12 PRACTICE STANDARD 35: PROVIDING FOR THE CHILD'S HEALTH CARE NEEDS

Within the context of the child's comprehensive plan of care, the social worker ensures that:

- **The child receives urgent and routine medical and dental services as well as vision and hearing examinations, as recommended by the child's primary physician and/or dentist;**
- **Appropriate medical records are maintained and updated in the child's file, including a complete medical history; and**
- **The child's caregiver is informed about and prepared for any medical condition that may result in an emergency.**

KKCFS Criteria:

In addition to above:

- The social worker ensures the child has a doctor and dentist;
- The social worker ensures the child receives urgent and routine medical and dental services;
- The social worker is aware of and considerate of the Infant's Act.

KKCFS Process:

In developing the health care plan, as part of a child's plan of care, the social worker consults with:

- Child (if the child has capability);
- Parents;
- Caregiver(s);
- Health care provider.

The social worker obtains:

- Child's current health care status;
- Child's medical and dental history.

The social worker must always ensure provisions for health care are made. If a child/youth refuses medical care or does not follow through with medical care the social worker documents this and consults with the delegated supervisor.

Documentation:

- Interim Plan of Care (KCCFS-221)
- Plan of Care (KCCFS-223)
- Plan of Care Monthly Report (Kinship Caregivers)(KCCFS-224)
- Health Care Passport (MCFD)

LEVEL 12 PRACTICE STANDARD 36: MEDICAL AND DENTAL CARE

A child receives medical and, when possible, dental examination when coming into care.

KKCFS Criteria:

Upon admission to care and discharge from care all children will undergo a thorough medical and dental examination.

KKCFS Process:

Social worker will ensure appointments are arranged for child and child attends appointment. Social worker may delegate this function as long as he/she ensures examinations are completed.

The social worker must always ensure provisions for health care are made. If a child/youth refuses medical care or does not follow through with medical care, the social worker documents this and consults with the delegated supervisor. The social worker and supervisor reviews the Infant's Act if a child refuses or does not follow through.

When making decisions regarding immunization the Social Worker will:

- Obtain Family history regarding immunization;
- Conduct an investigation prior to immunization;
- Review Pros and Cons for and against immunization;
- Consult with the family to obtain their views;
- Consult with the family to develop and implement an informed decision;
- Work with family to make informed decision –prior to immunization get record and history – need to be clear with foster parents about immunization record and any decisions regarding not to immunize- if not immunized find out why.

Social worker collects the following information from parent(s):

- Current medication;
- Immunization records;
- Information regarding allergies;
- Information regarding chronic health problems;
- Information about any physical and or mental disabilities;
- Current treatment plans, including names of all attending doctors, dentists, and other health professionals; and
- Any other relevant information.

If this information cannot be gathered from parent(s) the social worker will seek the information from other significant people in the child's life.

Documentation:

- Medical Admission Form (KKCFS – 230)
- Permanent Medical Record Form (KKCFS - 2310)

Computer:

- Update CS contact screen
- Update CS health and behavior screen

PRACTICE STANDARD 37: SOCIAL WORKER VISITS BUILDING AND MAINTAINING RELATIONSHIP WITH THE CHILD

The social worker meets privately with the child in care as indicated in the plan of care, with at least one visit on the day of placement, seven days after placement, thirty days after placement, and every ninety days thereafter.

KKCFS Criteria:

The relationship between the child and the social worker is the foundation to ensure the child's needs are met. Although social workers are not the child's caregiver, the social worker must engage the child in a relationship. At times the social worker may need to clarify the difference between guardian and caregiver. The needs of a child may require a social worker to maintain a level of contact beyond the minimum required. The best interest of the child must guide the level of contact. The social worker must be available and able to respond to the child's requests for contact with his or her social worker.

At a minimum the level of contact between the social worker and the child will be:

- On the day of placement;
- On the fourth day of placement (this visit can be performed by an alternate KKCFS employee in place of the social worker);
- On the seventh of placement; and
- Every thirty days thereafter.

KKCFS Process:

The social worker's objectives in meeting with the child are:

- To build a relationship with the child;
- To develop trust between the child and the social worker;
- To allow the social worker an opportunity to observe and talk to the child
- To seek the child's views on the plan of care, and on daily activities including the child's living situation;
- To determine if unidentified challenges exist with respect to the child's care;
- To ensure that the services provided are meeting the child's needs;
- To ensure that the child understands his or her rights as a child in care;
- To ensure that the child understands his or her plan of care and is willing to participate in it; and
- To ensure that there are identified people in the child's life to whom the child can go to for help when needed. Support systems establish continuity of relationships for the child, so that the child does not feel isolated.

Social worker ensures all contact with the child is documented, that this documentation identifies:

- If this contact was private;
- If the rights of a child in care were discussed; and
- If a safety check was completed.

KKCFS Documentation:

- Case note (KKCFS - 001)
- Plan of Care (KKCFS - 223)

LEVEL 12 PRACTICE STANDARD 38: CHILDREN WITH SPECIAL NEEDS

Services to children who have special needs are coordinated and service contracts are in place.

KKCFS Criteria:

Social worker will work in collaboration with:

- Aboriginal agencies and services;
- Medical practitioners;
- MCFD;
- Rehabilitation personnel;
- Support services; and
- Parents and extended families.

To ensure integrated case management is occurring.

If the agency (KKCFS) cannot provide the service due to the level of need, case specific negotiation with MCFD will occur.

KKCFS Process:

Social worker to meet with or facilitate an interdisciplinary team to determine need.
Social worker to consult with supervisor staff to determine *if* service can be provided.

KKCFS Documentation:

- Interim Plan of Care (KKCFS – 221)
- Plan of Care (KKCFS – 223)

LEVEL 12 PRACTICE STANDARD 39: CASE TRANSFER:

The decision to transfer a file includes consideration of a child’s safety, well being and best interest.

KKCFS Criteria:

Supervisor approval must be obtained.

KKCFS Process:

Social Worker and Supervisor decide to transfer a file:

- Based on the result of an evaluation process;
- In consultation with service providers;
- As a result of an examination of present risk to the child; and
- As per provincial policy “File Transfer and Computer Access to First Nations Agencies” dated September 1998.

The social worker transfers the file referring to the MCFD “File Transfers and First Nations Agencies” directive.

Prior to the transfer, the social worker must:

- In the case of a transfer to a First Nation’s Agency, ensure the Agency’s social worker has the appropriate delegated authority;
- Establish that the transfer is in the best interest of the child;
- Review the Agency’s protocol with MCFD or other First Nation’s agency with respect to provisions regarding case management and file transfers;
- Review and update the child’s plan of care;
- Provide a transferring summary, including agreed upon time frames, case management roles and responsibilities, and phasing in procedures; and
- Ensure a final transfer meeting with MCFD or the other First Nation’s agency to ensure that all questions or concerns have been addressed.

Documentation:

- Transfer Recording (KKCFS – 014)
- Plan of Care (KKCFS – 223)

LEVEL 12 PRACTICE STANDARD 40: CASE CLOSURE

The closure includes consideration of a child's safety, well being and best interest, disengagement and communication with the child, family, and service provider.

KKCFS Criteria:

Social Worker makes recommendation to supervisor to close file. Decision to close file is made in consultation with family, service providers, and supervisor.

KKCFS Process:

The social worker and supervisor decided to close a file:

- Based on the result of an evaluation process;
- In consultation with the service providers; and
- As a result of examination of risk to the child.

The social worker ensures the child and family are made aware of other services available to them, and how to access services in the future if they should require them.

The social worker advises key service providers of decision to close file and documents this on file.

The social worker exercises caution when closing a file. If the file is closed as a result of client disengagement, especially when the disengagement is due to avoidance, moving or service refusal, outstanding issues and recommended strategies to use/avoid are to be documented in the closing recording. The social worker determines whether the goals have been achieved and if not achieved how they will be achieved if the file is closed.

Documentation:

- Letters to client and key service providers/collateral
- File Closing Summary (KKCFS – 006)

LEVEL 12 PRACTICE STANDARD 41: CHILD INVOLVEMENT

The child is involved to the fullest extent possible in all aspects of the service plan, care plan development, care plan review, and the discharge plan.

KKCFS Criteria:

The child is the center of and reason for every plan. The child must participate to his/her fullest level possible in the development of his/her plan.

KKCFS Process:

The social worker provides opportunity for child:

- To be informed of their rights under Section 70 of the CFCS Act;
- To be included in assessment, problem solving and planning, to the fullest extent the child is able. This must be done without compromising the child's sense of safety and well being or negating any child protection issue;
- To express their views throughout the involvement with the Agency;
- To have a support person present during any interaction with the staff of the Agency;
- To be involved in the review process and to have their opinions included in their plan of care, to be informed of their plan of care, and to be consulted regarding the effectiveness of the implementation of the plan of care;
- To be involved in case transfer and case closure decisions; and
- To have a planned transition away from caregivers, service providers, and from the support and supervision of the Agency's staff.

LEVEL 12 PRACTICE STANDARD 42: FAMILY INVOLVEMENT

The child's family is involved to the fullest extent possible in all aspects of the assessment, care plan development, care plan review, evaluation, and case transfer or closure activities.

KKCFS Criteria:

Family, extended family, and community participation in the caring for, raising *and*, protecting of children is a fundamental expectation of the Nation.

KKCFS Process:

Through the care planning process the social worker ensures that:

- The process of assessment is inclusive, holistic, and structured;
- The family has an opportunity to express their views throughout their involvement with the agency;
- The family has an opportunity to be involved in problem solving and decision making to the fullest extent possible. This must be done without compromising a child's sense of safety and well being, and without ignoring any protection concerns;
- The family is to be involved in case transfer and case closure decisions, and to be given an opportunity to have a planned transition from caregivers, service providers, and from the support and supervision of the Agency's staff; and
- The development of the service plan invites participation and includes the child and family to the fullest extent possible. This involvement should be evident from the time of the development of goals and time frames, through to review and evaluation.