

Ministry of Community  
and Social Services

Ministry of Children and  
Youth Services

Ministère des Services  
sociaux et communautaires

Ministère des Services à l'enfance  
et à la jeunesse



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May 13, 2014

Rose Whyte-Bray  
19 Bair St. S.  
P.O. Box 26  
Bright, Ontario  
N0J 1B0

**Re: Request CYS2014/0006**

Dear Ms. Whyte-Bray:

I am writing regarding your access request made under the Freedom of Information and Protection of Privacy Act (the Act). You requested access to the following information:

I'm aware that in 2013 the government of ON did a report in regards to the Chatham-Kent Children's Services (CKCS), number of directives to the CKCS. I want that MCYS-CKCS report and those directives.

We received your outstanding payment of \$47.70 and have enclosed the records. As noted in our decision letter of April 16, 2014, the following exemption has been applied to the records:

Section 21 – personal information

You may request that this decision be reviewed by the Information and Privacy Commissioner of Ontario. The Commissioner can be reached at:

Information and Privacy Commissioner/Ontario  
1400-2 Bloor Street East  
Toronto, ON M4W 1A8  
(416) 326-3333

.../cont'd

If you decide to appeal a decision to the Commissioner, please provide the Commissioner's office with:

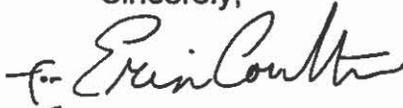
- 1) the request number assigned to the request;
- 2) a copy of this decision letter; and
- 3) a copy of the original request you sent to this ministry.

Appeals to the Commissioner must also be accompanied by the appropriate fee. The fee is \$25.00 if you are appealing a request for access to a general record or \$10.00 for access to personal information.

You have 30 days from the date of this letter to request a review from the Commissioner.

Please contact Erin Coulter, FOI Manager, at 416-327-8262, if you have any questions.

Sincerely,

  
Cate Parker  
Senior Manager

Enclosure



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## **Expenditure Management Review of Chatham-Kent Children's Services**

**Ministry of Children and Youth Services**  
August, 2013

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## **ACKNOWLEDGMENTS**

The ministry would like to thank the Board of Directors, along with the management team and staff of Chatham-Kent Children's Services for their cooperation with and accommodation of the team's requirements both prior to and during the on-site review. The society was able to make available the random sample of case files as well as additional files requested on site. Key information was presented to the review team upon arrival at the society. The review team greatly appreciated the responsiveness of the Board members, management and staff as additional requests for information arose during the review process. The ministry would also like to acknowledge that given the short notice period, the society responded in a timely and fulsome way upon receiving notification that CKCS had been selected for an expenditure management review.

# 1 INTRODUCTION AND BACKGROUND

Children's aid societies (CASs) in Ontario are mandated to serve children who have suffered or who are at risk of abuse and/or neglect. The Province's 46 CASs are independently run, Board operated agencies that carry out their work within their local communities, and are responsible for providing child protection services in accordance with the *Child and Family Services Act* while also taking into account the context and specific needs of their population. The Government of Ontario funds 100% of CASs' ministry approved budgets with respect to child welfare services.

Although the funding envelope for the child welfare program has increased significantly over the past decade, many CASs have struggled to manage expenditures within approved allocations due a variety of factors. In 2012-13, the majority of CASs indicated to the ministry that managing within their approved budget would be challenging. To address this, the ministry has been working closely with CASs on expenditure management strategies in order to help contain costs and bring child welfare expenditures in line with approved funding. This is especially critical within the broader context of the province's current fiscal reality.

As part of the ministry's 2012-13 expenditure management/fiscal sustainability strategy, the ministry announced two on-site reviews of CASs. One such review was conducted in Chatham-Kent Children's Services. A review team consisting of 12 ministry staff with diverse knowledge and experience (i.e., child welfare service, financial management, governance and accountability in social service transfer payment agencies) spent two weeks on-site at the society.

Chatham-Kent Children's Services (CKCS) has been an amalgamated agency since 1998, bringing together the former Lester B. Pearson Centre, the Heritage Children's Centre and the Kent County Children's Aid Society.

Chatham-Kent Children's Service provides Child Protection, Children's Mental Health, Children's Developmental, Youth Justice, as well as Prevention Services, translating into a multi-service approach to meeting clients' needs. CKCS is a non-profit charitable organization governed by a volunteer Board of Directors representative of the municipality of Chatham-Kent. The municipality, located in South-western Ontario, 60 minutes from the Windsor/Detroit border, has a population of 110,000, with 23 diverse communities, including the First Nations Reserve of Moraviantown. CKCS receives its funding primarily from the Ministry of Children and Youth Services, the Ministry of Community and Social Services, as well as other funders, with an annual operating budget of approximately \$30M.

The society is visible in several communities throughout the municipality. The main site, housing 250 staff, is located at 495 Grand Avenue West in Chatham,

across from the Municipal Building and next to The Children's Treatment Centre - a facility for children with physical and cognitive challenges. There is one other office site in the city of Chatham at 215 Murray Street, which houses the Supervised Access and Prevention programs along with 22 staff. As well, access to meeting rooms within three nearby towns in the municipality allows for easier accessibility for clients within these communities. One group home for children in the agency's care is located in Chatham, with 43 staff employed in this location.

The agency's Mission is to work with the community to strengthen families and promote the wellbeing and safety of children and youth. The stated values of the organization are as follows:

The Child is our Priority. Our Service Delivery places a value on:

- Service Excellence
- Responsiveness
- Innovation
- Collaboration
- Diversity<sup>1</sup>

CKCS had a 2012-13 approved child welfare budget of \$21,628,851. The society had a historical debt in the amount of \$724,728 (2007-08 and 2009-10 fiscal years). The society's 2012-13 budget submission which was approved by the Board of Directors on August 23, 2012, forecasted a deficit in the amount of \$303,576, with forecasted expenditures of \$21,932,427. The funding model eligibility for 2012-13 was \$21,628,851. The Expenditure Management Plan self-assessment report back was approved by the Board of Directors on January 8, 2013 and projected a reduction of the deficit to \$ 285,635 at Q2. This forecasted deficit increased to \$406,738 at Q3. At the end of March, 2013 the ministry provided CASs with one-time funding to address in-year pressures to support the sector as it transitions to a new funding model and a new approach to accountability.

Further, on April 17, 2013 the ministry announced that funding would be provided to CASs to retire historical debt so that CASs were ready to implement a new funding model and balanced budget requirement. The 2013-14 approved budget allocation (child welfare) for CKCS is \$21,255,145, which represents a 2% decrease in funding as compared to the 2012-13 October budget approval of \$21,628,851. In addition, the planning allocations provided to CKCS for the next two fiscal years show additional 2.0% reductions in each of 2014-15 and

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<sup>1</sup>Adapted from the -Excellence Canada PEP® QUALITY AND HEALTHY WORKPLACE® (PUBLIC SECTOR) LEVEL 2 SUBMISSION, November 2, 2012, Shelley Thibert, Manager of Quality Assurance.

2015-16. As a result, this society will need to take significant measures to contain costs in order to balance its budget for 2013-14 and going forward. Although this information was available only after the onsite review concluded, it is relevant context for the activities the society must undertake to ensure ongoing sustainability of child protection services in Chatham-Kent.

## **1.1 Purpose and Objectives of the Review**

The purpose of the review was to provide the ministry with an indication of:

- How the service delivery model and service philosophy of the society drive child welfare expenditures;
- The role of the Board of Directors and active participation in identification of cost drivers and expenditure management;
- Accuracy of data reported by the society to the ministry; and
- Promising practices employed by the society.

The objectives of the review were:

- To understand the cost drivers in the context of a multi-service agency;
- To identify opportunities for efficiencies, and
- To identify any promising practices of the organization that could be shared across the sector.

In order for the review team to meet the stated objectives, the team focused on assessing the effectiveness of the society's:

- Board of Directors' governance and accountability structure and how it supports the overall management of the society including but not limited to decisions made by the Board of Directors.
- Management and administrative structure and processes including internal decision-making, communication and planning processes as they relate to expenditure management activities and identification of opportunities.
- Financial processes in place to support the society's decision-making and accountability including forecasting, financial controls, administrative costs, operating costs and program-related costs.
- Systems and processes for ensuring data integrity and the utilization of information/data to assist with case management, decision-making and planning.

- Service delivery mechanisms for determining and responding to service needs in the community.

Both the findings and recommendations in this report are made within the context of the Funding Model in place at the time of the review and the 2012-13 Expenditure Management and Fiscal Sustainability Strategy.

## **1.2 Approach and Methodology**

Prior to conducting the on-site review, the review team developed lines of inquiry aligned with the objectives of the review. The lines of inquiry were guided by the following:

- A review of the society's 2012-13 budget submission, quarterly reports and expenditure management plan;
- Review and analysis of audited financial statements, Transfer Payment Annual Reconciliations and Q4 reports for the last 3 fiscal years;
- An analysis of the society's service and financial data as compared to CASs serving communities with similar socio-economic demographics (details discussed below); and
- Consideration of issues identified in foster care licensing reviews and crown ward reviews conducted by the ministry for the last 3 years.

Prior to the review, an analysis was conducted comparing CKCS service and financial data to a group of CASs serving similar communities, i.e., communities with similar rates of poverty and teen pregnancies, child populations, population density, etc. The utility of comparing CASs in this way is that it represents a more equitable approach to understanding differences in service delivery and expenditure data than comparing all CASs to a provincial mean or median. Indicators of service delivery and expenditure efficiencies were flagged as requiring further exploration where the society's results were 110% or higher compared to the group median or 90% or lower compared to the group median.

Throughout the review process, which included interviews with staff, questions were asked to gain a better understanding of the results of this analysis for CKCS.

The review team utilized the following methods to collect data and information related to the lines of inquiry:

1. File reviews across child protection (including kin service), child in care, and adoption file categories, and foster and kinship homestudies. Case files represented files open or reported to the society between April 1,

2012 and September 30, 2012. For a full list of file types reviewed, see Appendix I.

2. A review of the society's financial, service and human resources policies and procedures, accounting transactions, source documents and reports, Board meeting agendas and minutes and service protocols with key community partners.
3. Interviews with staff, supervisors, senior managers, and board members.

The purpose of the file review was not to review clinical decisions, nor was it intended to be a review of compliance with ministry standards. The file review was intended to provide information about whether cases were classified as the appropriate file type and eligible for funding, and supported the ministry's assessment of the accuracy of data reported by the society through budget submissions and quarterly reports. However, significant issues related to case decision-making and compliance were noted during the file review and immediately flagged for review by the management team. Compliance issues were identified to the Chief Executive Officer (CEO) and assigned to members of senior management so that safety concerns on individual cases and more systemic issues that applied across the agency could be addressed.

## **2 KEY FINDINGS AND RECOMMENDATIONS**

Findings of the review point to an organization that requires improvement across several areas, including the implementation of stronger accountability at all levels of the organization, better monitoring of and compliance with agency policies as well as ministry policy directives and standards—in particular the *Child Protection Standards in Ontario, 2007* (hereafter "Child Protection Standards")— and greater focus on timely permanency planning for children in keeping with the child-centred mission and vision and stated values of the agency.

The remainder of the report summarizes the major findings and recommendations across the five key areas covered by the review:

- Governance, Accountability and Performance Management
- Service Philosophy and Service Delivery Models
- Organizational Structure and Culture
- Case File Review
- Financial Management, Controllershship, and Cash Flow

## **2.1 Governance, Accountability & Performance Management**

To gain an understanding of governance and accountability at CKCS two approaches were undertaken: 1) staff and Board member interviews; and 2) review of relevant society documents (e.g., Board meeting minutes, policies and procedures). Staff interviews were conducted across all levels of the organization utilizing a semi-structured interview approach. Interviews with Board members also followed the same approach. There were seven members interviewed, including the Board President. At least two ministry staff were present at each interview and participants' responses were documented and then summarized. These summaries were then aggregated to draw general themes and findings.

The second component, the review of society documents, was undertaken while the review team was on-site at the agency and was used as a basis for understanding the overall governance structure, policies and procedures with respect to performance, and decision-making processes for the society.

### **2.1.1 Key Findings**

#### ***Board Governance & Accountability***

The Board of Directors of Chatham-Kent Children's Services reflects a diverse, cross-section of the community, including representation from the police force, the judiciary, school boards/education, business, foster parents, health care and other community services. According to the Board members interviewed, when new members are recruited, consideration is given to the expertise required at the time a position becomes available. A strengths and needs matrix has been developed to support this process. Applications from prospective members are vetted by the Nominations Committee which undertakes an interview process and then formulates recommendations for consideration by the Board. Board members interviewed as part of the review see turnover on the Board as important as it allows for new ideas and a refreshed look at both challenges and opportunities.

The review of society documents indicates that the Board has a robust structure, with three standing committees: Executive; Finance and Property; and Services and Personnel. There are other *ad hoc* committees, i.e., Audit, and Nomination and Recruitment that meet as needed. Board members noted that there is a rotating membership on the Service and Finance committees—the two most active committees—and members are strongly encouraged to participate on each committee rather than remain on the same committee during their tenure. This allows for greater depth and expertise across the whole of the Board. Members interviewed reported that they believed the Board structure is effective as they

feel it facilitates the engagement of all Board members to be active in their oversight responsibility. However, it was noted by the review team that the Board's finance committee does not include members outside of the Board, and the society may wish to consider having representation from the community and/or from financial auditors in keeping with generally accepted governance best practices.

The Board orientation process for new members and ongoing training for existing members appears adequate. In describing the Board orientation process, members cited multiple strategies. For example, information sessions on various service and financial issues are presented by staff before each meeting. Members have an opportunity to ask questions and seek clarification. Training regarding finance and the budget process is provided as one of the pre-Board meeting sessions. Members interviewed were less clear with respect to orientation on governance issues, noting that such training exists but they had not participated.

Board members interviewed present as extremely committed to the organization and their community. During the interview they highlighted their role as stewards of public funds and representatives of the community entrusted to ensure resources are managed in keeping with government expectations. However, within the context of their role in holding the society's senior leaders accountable for expenditure management, their understanding appeared less clear. For example, when asked about expenditure management planning within the organization, they noted that they have taken an oversight approach. It was noted by the review team that the Board does not receive an attestation from the CEO or Director of Finance that the society has met its statutory/financial obligations.

With respect to risk management in the society, Board members interviewed expressed confidence in staff expertise. However, it was the impression of the review team that the Board appears to struggle in assuming a strategic leadership role to provide guidance and direction to management around the need to reprofile the organization to deliver service in an efficient and effective way. For example, they have not required a balanced budget plan from the Chief Executive Officer with the identification of the risks associated with implementing such a plan. It was unclear what the society's plan is moving forward into 2013-14 and beyond to manage the agency within approved allocations. This is increasingly critical in light of recent changes to Regulation 70 requiring CASs to submit balanced budgets.

The Board advised that it follows the society's policy regarding the requirement to evaluate the performance of the Chief Executive Officer. The CEO receives an annual performance evaluation which is conducted by the Board President; results are provided to the full Board. The evaluation is tied to the CEO's job

description, which was not shared with the review team. It was not clear to reviewers how the CEO's performance goals and objectives are formulated or how they are assessed. Members of the Board expressed the opinion that the CEO is recognized for his expertise in child welfare as evidenced by his attendance at national and international forums in the field as well as his participation on OACAS and MCYS committees. They believe that many best practices emerge from CKCS due to his leadership.

The Board receives regular service and financial data reports from management, and Board members report that they have good access to data and information to inform their decision-making. However, what remained unclear was whether members received appropriate and relevant information to allow them to assess the effectiveness of management in running the organization and meeting strategic goals. It was the impression of the review team that the Board might not have a full understanding of what information to ask for and/or a process through which they might request pertinent information in a format conducive to their governance role. For example, the level of detail of the financial information provided to the Board appeared to be more appropriate for a line-by-line financial analysis rather than a broad focus on the agency's financial health and the effectiveness of senior financial staff in exercising full controllership and financial accountability.

The extent to which the Board and the CEO understand the difference between the types of information the Board requires to govern as opposed to manage the organization was unclear. For example, when asked about what information the CEO provides to the Board to demonstrate the safety of children who receive services from the agency, the CEO noted that the strategy he uses is to report to the Board President frequently.

Although the Board advised that they receive regular service data reporting, there was limited evidence that they were able to exercise their oversight role with respect to agency compliance with the *Child Protection Standards* in the absence of data from compliance audits conducted within the agency. Furthermore, some of the information provided to the Board regarding service issues may require more in-depth discussion at Board meetings. Specifically, Board members identified two service challenges for the society - the high number of children in care under Interim Care and Custody (ICC) orders and the workload demands associated with court ordered supervised access for children where the benefit of such access was not readily apparent. Members interviewed were of the impression that the society has limited to no avenues through which they might address these issues. In response, the review team provided information to the Board members who were interviewed regarding the society's ability to use Alternate Dispute Resolution (ADR) approaches to expedite children's legal status and permanency planning for children in care under ICCs, and to make a

request to the court to vary supervised access orders where access was not deemed to be beneficial to or in the best interest of the child(ren).

A review of Board meeting minutes for the last year also raised some concerns regarding information provided to the Board, and/or the Board's understanding/interpretation of information provided to them. For example, when the ministry notified the society of its intention to conduct an expenditure management review of CKCS, the CEO was advised that the review was part of the ministry's 2012-13 expenditure management and fiscal sustainability strategy. He was also advised that the society had been selected for review, in part, because it was forecasting a deficit and the expenditure management plan submitted to the ministry indicated that the society would not be able to manage within its 2012-13 allocation. The stated purpose of the review, as articulated through the Terms of Reference provided to the CEO on February 20, 2013 was to work collaboratively with the society to understand cost drivers and identify potential areas for efficiencies. The Board meeting minutes dated March 3, 2013 indicate that the purpose of the review was to assist the ministry in developing a new funding model for child protection. Board meeting minutes reviewed generally reflected decisions made but not the content or nature of discussions; as a result it was difficult to determine the depth of discussion around various issues and the extent to which the Board questioned information provided to them by senior management. It should be noted however, that the letter dated February 20, 2013 from the ministry notifying the Board Chair of the review was appended to the minutes.

### ***Accountability: Expenditure Management***

Interviews with the CEO covered issues related to the society's forecasted financial pressure at the time of the review. The society's financial pressure was attributed predominantly to external issues such as inadequate funding and the timing of funding allocations. Further, it was noted from the interview that the uncertainty associated with the current funding model (i.e., the one in place for 2012-13) was an issue that contributed to the financial instability of CKCS. Given that the sources of the financial pressure were framed as external to the society, the strategy developed by the society to address financial issues was focused on ameliorating the external context. Examples include the involvement of the CEO in various provincial bodies to advocate for more funding for the sector and that CKCS was an applicant in the application for judicial review related to 2009-10 funding approvals process as a means to resolve the society's historical debt pressure. It was the impression of the review team that this focus on external circumstances was not accompanied by concerted efforts or a sense of urgency and responsibility to look at issues internal to the organization that might drive expenditures and/or opportunities for efficiencies.

Despite the submission of an expenditure management plan to the ministry on August 24, 2012, at the time of the review, the society had not tracked any progress against this plan and the 2012-13- forecasted deficit increased from \$285,635 at Q2 (the time of submission of the plan) to \$406,738 at Q3. This in-year deficit, combined with the society's historical deficit at the time of the review led the review team to conclude the society requires a more structured plan in place to manage expenditures within the revenues received by the organization and, in the case of child protection services, within the approved child protection services budget. Given the current fiscal environment, the society needs to look beyond immediate short-term efficiencies and think more fundamentally about how to manage the operation long term.

The review team noted that salaries/ wages and boarding costs comprise over 88% of the child welfare expenditures for CKCS. Although a significant portion of staffing costs and all boarding costs are tied to service delivery—and it is acknowledged that reductions in these costs could impact service—prudent budget planning and a long-term expenditure management plan are critical to prepare the agency for the fiscal challenges ahead. The agency should begin by looking at solutions that will have impact on costs in the short-term (6-12 months) and also have a greater long-term impact. The long-term aim should be for the agency to increase its competence in cost management and to be continually challenging the cost structure, monitoring the relationship of costs incurred to service delivery and outcomes achieved, and aspiring to create an environment for increasing the value for money spent.

### ***Accountability: Individual Performance***

Data gathered by the review team indicate that there are limited practices in place at CKCS to hold staff accountable for individual performance. During interviews with the senior management team it was acknowledged that the organization is relatively weak in this area. Although the stated policy of the agency is for all staff to undergo a performance review every two years, many child protection staff reported going several years without a review, and some noted that it had been between six and eight years since their last review. It should be noted that most staff providing mental health services operated by CKCS have current performance appraisals as this was required to attain accreditation of the mental health program. The March 3, 2013 Board minutes report that CKCS overall (including both child protection and mental health staff) has a compliance rate of 67% with this policy, attributable to poor compliance in the child welfare program.

The CEO indicated that he has not been in the practice of conducting regular performance appraisals of those staff members who report directly to him. The view was that individuals who have achieved a senior level in the organization

should be able to perform competently and possess the necessary knowledge and expertise to do their jobs well. There are no regular one-on-one meetings scheduled between senior staff and the CEO, although he noted that those who report directly to him interact with him on a day to day basis, giving him an opportunity to observe their performance daily as well as through their committee participation. If there is a performance issue, the CEO noted that he manages it “then and there”, however it was not clear to the review team what the performance management process involved in those circumstances. It was noted in the interview with the CEO that a new performance appraisal process is under development and, when implemented, he understands that it will require his support and modeling, which he stated he is prepared to undertake.

Staff advised the review team that individual performance management has been identified as a priority by the society. The new approach will include mandatory training on performance appraisals and standardized scoring across the organization. Management advised that in April and May 2013 the society will complete a performance appraisal for every employee who has not had one in the last year.

Staff noted that in the absence of performance appraisals, supervision is used “widely” and has a clinical focus, although there was some evidence through the file review that certain issues that should be considered clinical priorities (e.g., permanency planning and its relationship to supporting children’s attachment to a stable, primary caregiver) were not well attended to (further details are provided in the section on the results of the file review, pp. 25-28). Staff noted that formal supervision is carried out every four to six weeks and many also advised that they have access to their supervisor on a daily basis and immediate direction to address issues can be acquired.

It was of concern to the review team that staff may be of the impression that supervision is a substitute for performance reviews. “Supervision” in the context of front-line child welfare service delivery focuses on the needs and progress of clients. The purpose of staff performance reviews is to set goals and targets for the employee’s performance, along with a detailed review/discussion of progress towards these goals and any issues requiring additional support and/or corrective action.

### ***2.1.2 Recommendations: Governance, Accountability & Performance Management***

It is recommended that:

1. The Board participate in governance/leadership training opportunities offered through the OACAS, and consider adoption of the Governance Performance Indicators developed by the OACAS Governance Advisory Committee.
2. The Board require the CEO to develop and provide a risk assessment including strategies to mitigate identified risks to accompany the society's balanced budget plan. It is also recommended that the Board require the CEO to provide regular reports regarding progress against the targets set out in this plan.
3. The Board should work with the CEO to develop a cost management strategy for the agency to maximise efficiency and to create an environment for increasing the value for money spent.
4. CKCS conduct regular performance appraisals for all staff in the organization in compliance with the agency's policy and in keeping with performance management best practices.
5. CKCS senior staff develop a reporting format for the Board that provides service and financial data to report on the performance of the agency relating to meeting legislative and regulatory requirements as well as Key Performance Indicators.
6. CKCS develop a monthly certificate of assurance so that the Board may be confident that the corporation has met its statutory requirements each month (e.g., CPP, EI, Income Tax remittances, etc.).
7. The Board include outside members and/or financial auditors on the Finance/Audit committee in keeping with generally accepted governance best practices.

## **2.2 Service Delivery Philosophy and Delivery Models**

To gain an understanding of the society's service delivery philosophy and its impact on expenditures, interviews and focus groups were conducted with 44 staff, managers and board members. Staff were asked to identify their approach to child protection work, and their understanding of key service priorities and challenges for the society. The review team also conducted a review of policies and procedures developed by the society. Further, through a review of a sample of case files (Results of the File Review are presented in section 2.4), the review

team was able to gather additional information regarding the service orientation of the society.

### **2.2.1 Key Findings**

The multi-service nature of the organization is integral to the reported service philosophy and the perception of the work by staff. For example, staff spoke to the significant benefits of an integrated agency that includes mental health services for families receiving child protection services. Specific mention was made of the ability to provide “seamless” service, and to make use of a coordinated approach that leveraged the availability of on-site mental health professionals, telepsychiatry, and training/support for staff and foster parents from the mental health side of the agency. In addition to the society’s focus on a coordinated approach to service, formal documentation of the service philosophy was found in the society’s values statement, which includes the notion of the child at the centre of service, along with principles of service excellence, responsiveness, collaboration, innovation and diversity. Many staff referenced these principles, particularly the child-centred approach, when discussing their work.

In keeping with the society’s stated child focus, staff at all levels, along with policy and procedure documents, noted a commitment to improved permanency planning for children, citing increased use of kinship service, kinship care and customary care placement as testament to this focus. Further, staff identified the positive initiative taken by management to implement “Extreme Recruitment”—an approach to seeking permanency options for children and youth who have been, historically, hard to place. In implementing this approach, the society has concentrated initially on those children who have been in care for lengthy periods.

Service delivery at CKCS is influenced by the multi-service nature of the organization, with case conferences across service providers mentioned as the primary vehicle through which coordinated services are achieved. Staff reported that a number of specific client populations including high-risk infants, families experiencing alcohol/substance abuse and/or domestic violence have influenced the service model, with more training provided for staff on these issues. Teen pregnancy has also been identified as a growing concern in the community and to address this, CKCS has partnered with an agency in Windsor that specializes in this area; this partner organization provides training, service and support to staff of CKCS.

Staff identified that there were, at times, challenges in putting into practice the principle of collaboration with some families. They spoke of the increased presence of Canada Court Watch in the community, and noted that this has prompted some families to “push back” making a more intrusive approach to

service delivery necessary at times. Further, despite the noted strengths of an integrated mental health/child protection agency, staff advised that there are some concerns that clients will not seek mental health services because they are anxious about the relationship to a CAS. It was noted that the society has taken action to address this. For example, supervisors have provided education for clients to understand the separation between the mental health and child protection services. Other approaches were also noted as successful such as Children's Mental Health staff meeting clients where they are comfortable (e.g., off-site to minimize the fear of CAS involvement). Overall, it was noted that if client engagement is approached successfully, fears related to service, whether mental health or child protection, are allayed.

The society has recently increased the focus on kin and adoption through the Family Finder Positions introduced in November of 2011. Workers spoke positively about a new "front door" approach with the kinship workers picking up cases at the outset of service. The assigned case worker will attend with kinship workers to meet families and support the identification and engagement of kin.

Despite these examples in the society's formal documents and those offered by staff, the review team noted some disconnect between the society's stated values and the findings that emerged through the file review. In particular, despite the much mentioned child-centred focus, including references to the importance of permanency, the file review highlighted the significant delays in obtaining orders for children in the care of the society, with many children remaining on Interim Care and Custody for extended periods of time (discussed further on p. 28). This is particularly concerning regarding children under six years for whom the legislation sets a limit of 12 months (cumulative) of temporary care after which a permanency plan must be in place (i.e., Crown wardship, reunification, adoption, legal custody). The results of the file review (see pp. 25-28) showed significant gaps in compliance with the *Child Protection Standards*, including delays in documenting risk assessments and eligibility for ongoing service, and face-to-face visits with children and families.

### **Service Delivery Challenges**

Throughout discussions with staff and the case file review, several challenges to service delivery were identified. Staff reported three key issues: caseload size; consistency in expectations (e.g., recording); and legal proceedings. These issues are discussed in more detail below.

#### *Legal / Court Proceedings*

The society is challenged by a number of issues related to service to children where there are legal proceedings underway. In particular, staff at all levels of the organization identified a high number of unresolved cases that remain before

the court, resulting in several unintended consequences for these children that affect timely permanency and service delivery. Of concern is the policy of the society not to transfer cases that have unresolved legal issues from investigation to ongoing services despite the conclusion of the investigation.

The subsequent backlog of cases sitting at investigation has had a significant impact on both children and workers. For children, it has resulted in delayed permanency planning (discussed in more detail in the results of the File Review section). For investigating workers it has impacted caseloads, with staff reporting high caseloads at investigation and significant workload as workers are required to complete their own affidavits and court documents. Further, the practice of holding cases at investigation pending resolution of legal issues is contrary to *Child Protection Standards, Standard #7*, which requires that investigations be concluded within 30 days of the receipt of the referral, or 60 days in certain circumstances, where supervisory permission is granted. This is a requirement of all children's aid societies in Ontario.

Higher than expected caseloads at both investigation and ongoing was one of the documented findings of the comparative analysis that was conducted by the ministry prior to the review. Through discussions with staff it became a concern that for this agency, higher caseloads may be an unintended consequence of the practice to keep cases open at investigation—rather than transfer to ongoing services—until legal proceedings are resolved. Investigation staff shared their concerns regarding high caseloads and workload, noting the increased stress associated with carrying large numbers of cases, often beyond their specific function in the organization (i.e., investigating workers carried cases that were slated for transfer to ongoing services). Workers noted that these cases may be less likely to be prioritized than incoming investigations, and that they did not always know the standards associated with service to a case outside of their specialized function (i.e., investigation workers may not be well versed in standards related to ongoing services) resulting in instances of non-compliance with the *Child Protection Standards*, e.g., missed child and family visits, assessments and reviews of the service plan.

In summary, although both staff interviews and documentation reviewed by the review team indicate a strong child focus with a commitment to permanency planning, this service delivery philosophy and the values of the society are in some instances impeded by the service delivery model and practices in place in the society. It was the impression of the review team that there is limited evaluation of how the current service model and practices might contribute to the service challenges and, as result there is no plan in place to address those factors that are within the society's control.

## **2.2.2 Recommendations: Service Delivery Philosophy and Delivery Models**

It is recommended that:

1. The society conduct a thorough review of its practice model and internal practice policies related to child welfare services to ensure compliance with standards and alignment with the stated service delivery philosophy and values of the organization.
2. The society develop a plan for assessing performance against service goals articulated within the society's service delivery philosophy and values, that includes evaluating the impact of changes to agency practice.
3. The society increase its communication with the judiciary in Chatham-Kent to discuss general strategies for expediting child protection cases, enlisting the help of the Ontario Association of Children's Aid Societies (OACAS) as appropriate.
4. The society consider strategies to increase its use of Alternative Dispute Resolution in order to expedite the legal status and permanency planning for children in the care of the society.
5. The society make use of time to permanency data from the provincial Performance Indicators data collection project initiated by the OACAS, as a way of benchmarking and tracking progress in this area.
6. Appropriate child protection staff responsible for children in care receive training regarding the impact of delayed permanency on the well-being of children, including attachment.

## **2.3 Organizational Culture and Structure**

To understand the organizational structure and culture and how they might contribute to society expenditures, several methods were employed including interviews with staff, management and Board members, along with a review of the society's organizational chart and salaries and benefits information.

### **2.3.1 Key Findings**

#### **Employee Satisfaction**

The review team noted that employee satisfaction at CKCS appeared high, with front-line staff, supervisors and managers all referencing the openness of

communication and the significant support provided to staff regarding work-life balance. The staff spoke of supervisors and managers having an “open door” policy and noted managers are on-site and frequently available for consultation. The organizational culture was described as “supportive”, “passionate”, “team focused”, “invested”, “no wrong answer”, “family oriented”, “engaging”, “dedicated” and conducive to “outside the box thinking”.

The society has several policies in place that contribute to employee satisfaction and work-life balance including a compressed work week resulting in staff having one of four days in the week off scheduled to ensure that at least 75% of staff are available on any given day of the week. Further, employees have been granted access to interest free loans for educational and personal expenses (further details on this policy are discussed in the Financial Review section beginning on p. 31). CKCS has developed different programs and events to help staff deal with work-related stress such as the peer support team, the organization of team days, creation of a wellness room, and the use of debriefing as a means to address immediate issues. Staff spoke very highly of management’s overall support.

One area in which front-line staff expressed some dissatisfaction was caseload size at both investigation and ongoing services and the impact of delays in legal proceedings on their work. Both the high level of staff satisfaction in addition to these specific concerns related to caseloads and workload were reflected to the Chief Executive Officer during the onsite review. He identified the high levels of staff satisfaction as, in part, attributable to his leadership and structural changes he made in the organization early in his tenure. The CEO indicated less concern regarding staff-identified issues regarding caseload size.

### **Culture of Quality Improvement and Use of Information Technology**

The Quality Assurance (QA) department consists of the quality assurance, information systems and information technology. The manager of QA noted that the larger focus of quality assurance has been on the strategic planning process with a little less emphasis at a more operational level.

Overall, with respect to the use of data to understand service and improvement priorities, the mental health, developmental and prevention streams tend to be fairly well developed. The protection stream has not reached the same level of development. CKCS is one of the 23 CASs that pilot tested the collection of provincial performance indicators (PIs) for child welfare developed by the Commission to Promote Sustainable Child Welfare, with the assistance of the OACAS and the University of Toronto. The manager of QA indicated that once data collection around these PIs becomes routine and the data have been

assessed for reliability, data sets in the protection stream will support the measurement of client outcomes and help identify priorities and strategies for continuous improvement.

In an interview with the QA manager, key themes emerged including the fact that there is no formal auditing process or strategy in place at the society. File audits appear to be undertaken on an *ad hoc* basis usually prompted by an event such as a child death review. The development of the next Strategic Plan is underway and the review team was advised that there is a desire to include performance indicators for every service stream, including indicators of compliance with requirements related to documentation, supported by a more planned approach to file auditing. Staff noted that performance indicators identified through the strategic planning process will also provide the leadership team with additional information to measure the progress achieved by children and family receiving child welfare services.

The reviewers noted that there is awareness at the society that there has not been the appropriate level of rigor, oversight and monitoring of requirements related to recording. Managers and supervisors also noted that the E-form system does not aggregate reports in a way that provides them with summary data that allows them to identify which recordings are overdue. However, supervisors can access an individual staff report of all active cases and review each of these with the relevant staff person, an activity that could form part of workers' formal supervision. It was clarified by CKCS that only the Information System Supervisor has the authority to override recording requirements in the system, which is an important control required to assist with monitoring compliance with the *Child Protection Standards*.

In discussing the role of the Information Systems Supervisor, it was noted that the QA manager is working toward creating a stronger link between the quality assurance function and the information management function through this position. It was understood by the review team that the current Information Systems Supervisor will be retiring in October 2013. The successor will have a broader role in terms of bridging between QA and I/IT. This will assist in providing support for service documentation. One of the biggest challenges articulated by staff is that quality assurance personnel are currently dedicated to managing only the technological infrastructure. The QA function itself rests with the QA manager along with a part-time QA specialist who focuses exclusively on client satisfaction (through interviews one day per week); however, by the fall of 2013 a portion of the new IT position noted above will also provide support to QA. It was the impression of the review team that while the QA manager has a fair sense of the many issues that require attention, the society's allocation of resources to support this function are, at present, limited. It was the opinion of the review team that senior management may not give sufficient attention to the need for a more robust approach to quality assurance that will support a culture of

continuous improvement. This opinion was reinforced through subsequent interviews with child protection senior managers and the results of the file review.

The agency has maintained accreditation with Children's Mental Health Ontario since 1990 with renewal coming in November 2013. In addition, Level 2 accreditation with Excellence Canada (National Quality Institute) was achieved several months ago. Level 2 spans the organizational areas of leadership, planning, client focus, people engagement, process management and supplier/partner focus. Emphasis is placed on ensuring policies and procedures exist in these areas along with goal setting and performance measures, customer service and client satisfaction measures, financial and human resource plans, recruitment, training and development strategies, employee engagement and a process management approach. It is the understanding of the review team that Level 3 accreditation would focus on demonstrating implementation of policies across the organization. While the review team noted that there were many good policies in existence, limited evidence was available to demonstrate the society's compliance with its own policies, e.g., the high number of child protection staff who have gone without a performance review for several years despite the requirement for reviews every 24 months.

The society provided the review team with several reports including an "Age of Investigation" report. The Excel file also included a list of children in care by age, legal status and length of stay in care, along with a list of ongoing service files open to the agency in excess of one year. These reports were requested specifically by the review team and were accessed quickly and without difficulty. These reports are a good example of data that can be generated by the society's software. The reports provide key data on the time elapsing between the initial referral to the society and conclusion of each investigation, as well as data that support an understanding of permanency planning and the length of service at ongoing.

The society provided the review team with the most recent "Age of Investigation" report. This report listed 74 files that had been open over 60 days and included one file open at investigation for 578 days. Although these data were collected and reviewed by senior managers, the high number of cases that had been open at investigation beyond the 30-60 day timeframe outlined in the *Child Protection Standards* suggests that there is an inadequate response to managing the performance of workers and supervisors. Managers were also unable to identify a regular process that they might use to address performance on an ongoing basis.

The review team selected four cases from the "Age of Investigation" report to determine if the delay in completion of investigations had an impact on the service to children and families. Detailed results of the review of these files are presented in the Results of the File Review section on pp. 26-27).

## Accountability and Expectations

Given the widespread absence of recent performance reviews for child protection staff, limited audits of files, and poor systems in place to track overdue recordings and follow up with staff, it was the impression of the review team that the organizational culture was also affected by limited expectations and accountability related to performance. This was evident at the management level as well and appeared to impact senior managers' sense of responsibility for and ownership of the challenges faced by the society. For example, when the scope of overdue recordings and non-compliance with standards was highlighted, a reason provided was that long-term staff have a "bad influence" on new staff. Further, in response to many of the issues drawn to senior management attention by the review team regarding child safety, overdue child visits and recordings, the response was often to blame the ministry, the society's IT system, the inadequacies of the funding model or legal proceedings. This focus on the perceived external sources of the society's challenges coupled with the inadequate system to monitor agency and individual performance has contributed to a culture where issues may go unidentified and/or unaddressed.

It is noteworthy that when asked about the senior staff's understanding of the systemic nature of non-compliance with standards, the CEO indicated that they were unaware of the degree to which it was a problem in the agency. This may indicate that other systems relied upon by the society to assess performance, such as regular supervision, were not adequate to identify systemic issues. Furthermore, although management regularly generates certain reports (e.g., the "Age of Investigation" report and a list of incomplete performance appraisals), they did not appear to be utilizing performance data in any regular and systematic manner, as evidenced by the findings of the file review and a review of society data.

In the absence of regular audits and reviews of performance, changes are often made in the organization in a reactive manner and in response to a perceived threat or crisis such as a ministry review. This was evident from the agency's "blitz" approach to certain activities such as performance appraisals and catching up on late recordings to prepare for the ministry's review. This raised concerns for the review team that when an issue is identified and addressed in a reactive way, proactive planning and management are not happening to support the activities required over the longer term. Furthermore, the society's "blitz" approach requires a concentrated allocation of human and financial resources. In the case of the pre-review catch-up on late recordings, staff worked overtime on the weekend. If late recordings were tracked routinely and systems were in place to ensure staff were held accountable, the need for this activity and resulting expenditure related to paid overtime for staff could be avoided.

## **Management Structure**

According to the organizational chart, there are five structural levels in place in the agency: frontline staff, supervisors, managers, directors and the Chief Executive Officer (CEO). There is an additional staffing level of 'senior director' which seems to serve the purpose of assistant Chief Executive Officer. Within CKCS's child welfare program, the ratio of direct reports to supervisors/managers tends to be variable, with the society reporting that they strive for an average of 1:6 or 7. It was noted, however, through a review of the organization chart that some units have higher staff to supervisor ratios

A new organizational structure was designed and implemented in 2010. Five management committees were created: Leadership; Program Review; Operations; Strategic Directions; and Management Team, comprised of all managers, supervisors and directors. Information flows inward and outward from the Management Team and the rest of the committees. Each committee has developed terms of reference, and membership involves various combinations of supervisors, managers, directors and the Chief Executive Officer.

This overall structure was reported as helping to develop a broader understanding across departments and staff reported that the result has been a greater interdependence. The goal of having many committees was to broaden the experience of staff and include supervisors in management work to support succession planning. An additional objective was also to increase financial management literacy and develop a shared understanding of the society's financial position.

At the level of supervisors exclusively, structured information meetings occur monthly. This venue is used for information-sharing on such topics as the agency budget, planning, human resources, and information systems. Within this supervisory forum the agendas are organized with standing items such human resources, supervised access, kinship, and thematic areas such as the increase in clients dealing with substance abuse issues as a service trend. It was noted that this venue also addresses client flow challenges and items between departments. The society is encouraged to make use of this existing forum to generate strategies to address the significant challenges in the transfer of cases from investigation to ongoing services.

## **Staff Complement and Staffing Levels**

The current child welfare staff complement is characterized by a combination of newer staff and long term employees, particularly in children's services and resource departments and senior management teams. The Society reported much higher turnover with frontline intake and ongoing service teams. The

higher turnover rate in ongoing services has presented significant challenges for the distribution of cases and the resulting impact on individual workloads. It was noted that this turnover is attributable to the large caseloads carried by ongoing services workers, which is compounded by the constant influx of new staff, whose caseloads are (appropriately) capped at a low level to allow for a reasonable orientation and introduction to the work of child protection. However, this places additional pressure on experienced staff.

Focus group interviews and discussion with senior staff also identified challenges in retaining experienced staff due to the benefit presented by the opportunity for experienced staff to not only transfer across child protection teams but also to apply to mental health positions within the agency. This greater opportunity for staff is a benefit to the society in terms of expanding the knowledge, skill and opportunity of their staff group, but has the disadvantage of increasing internal transfers and changes that lead to gaps in caseloads and temporary higher caseloads for remaining team members.

### **2.3.2 Recommendations: Organizational Culture and Structure**

It is recommended that:

1. CKCS develop a strategy to better utilize the society's quality assurance function to assess the strength of service delivery, identify priorities for action, and drive continuous improvement.
2. CKCS make use of reports already generated through the QA function to regularly review workers' performance to ensure that cases are dispositioned, assessments are completed and child and family contact occurs within the timeframes required by the *Child Protection Standards*.
3. CKCS supervisors review individual staff reports of all active cases and review these with the relevant staff person as part of regular and formal supervision meetings to ensure that recordings are up-to-date.
4. CKCS examine the staff to supervisor ratios in light of the high variability in span of control; some of the current ratios exceed the society's stated average threshold of 1:6 or 7.
5. CKCS consider changes to the compressed work week to ensure that operational requirements are met and that cases are being managed in compliance with standards, in accordance with the provisions of the Collective Agreement. Proposed changes must be assessed based on the requirements of the current collective agreement.

6. The Board work with the Chief Executive Officer to ensure leadership and management training occur for all senior managers , within the organization and that tangible evidence of the impact of such training (i.e., on the culture with respect to accountability and clear performance expectations) be measured and reported to the Board. This is to be undertaken using funding available to the society through its approved allocation.

## **2.4 File Review Results**

The purpose of the file review was to determine whether cases were coded and counted accurately for the purposes of funding eligibility. A random sample of files was selected for review and the list was provided to CKCS in advance of the review.

The review of the files revealed that the CKCS staff had worked the weekend prior to the review to complete recordings on files that were overdue. This prompted the review team to expand the sample size and review cases that had not been identified to CKCS prior to the review to get an accurate understanding of the current state of case work and recordings.

Overall, the file review identified significant delays in case management and recording activity such that the reviewers could not determine funding eligibility for a large number of files. What was most evident through the file review was the widespread non-compliance with the *Child Protection Standards*, in some cases raising concerns for the review team regarding the safety of children. A detailed report of the file review results is presented in Appendix I and key findings are outlined below.

### **2.4.1 Key Findings**

Reports Received No Investigation (RRNI) files were coded appropriately, with no significant concerns noted. In one instance reviewers questioned whether there was sufficient information documented to justify the decision not to open the case for investigation.

Cases dispositioned as Community Links were, in many cases, assessed by reviewers as being ineligible for funding. Reviewers noted that of the 10 files reviewed, seven represented information requests where the file was more appropriately coded as an RRNI. This has implications for funding as RRNI's were not eligible for funding under the funding model in place at the time of the review.

Files of completed investigations reflected appropriate coding and all were eligible for funding. However, given the delay in recording, it was not clear if they would have been eligible in the period they were reported. For investigation files transferred to ongoing protection services, all files reviewed reflected accurate coding and a range of protection concerns, with a large proportion of families dealing with substance abuse issues, a frequent reason for service in the society noted by senior managers at the entry meeting. For investigations generally, reviewers noted significant deviation from the *Child Protection Standards*, including delays in risk and safety assessment, documentation of investigation summaries, along with delays in referring families to supportive resources.

Standard 7 requires that CAS workers complete investigations within 30 days, or in certain circumstances, within 60 days with supervisory approval. As previously noted, the review team learned that the society regularly generated a report on the "Age of Investigations" (i.e., all investigations open to the society, by the number of days open). This report indicated that as of March 4, 2013, 127 investigations remained open for longer than 30 days. As of March 4, 2013, there were 53 investigations open for more than 30 days and 74 open for longer than 60 days, 46 of which had been open for 100 days or more.

To further explore this issue, four of the 46 files open for 100 days or more were reviewed in detail. In all four cases, documentation suggested that workers had not visited with the child or family since early 2012, a finding which was confirmed with senior program staff at CKCS. In all four cases the recording on file showed that the society had initially determined that the children were safe if service interventions were available to the family, although the nature, frequency and outcome of these interventions were not documented in the case file. Further, the review team confirmed with senior protection staff that hand written case notes did not exist and that the families had not been seen since the last recording on the files in 2012. In all four cases, the society had assessed the risk of recurrence of maltreatment to be moderate to high using the standardized risk assessment tool, and subsequent referrals had been received by police on two of the four cases, in one case citing serious concerns related to the safety of the mother and the child; there was no follow-up on these subsequent referrals by the society.

In one of the four cases, the information provided was that the worker was on a leave of absence from August 2012 and the case was not reassigned until October 2012. In a second case it was similarly explained that the worker was on a leave of absence from October 2012 and the case was reassigned in March 2013, the time of the review. One case was closed immediately after the review team reviewed the file online, with no additional contact with the family or documented assessment of risk or reason for closing. The review team requested that a worker involved in each of these cases make face-to-face contact with each child to advise of the child's whereabouts and condition. The

society confirmed this action had occurred on two of the four cases and indicated that they would ensure that appropriate action was taken in the remaining two cases.

The sample of cases currently open at ongoing services at the time of the review were all coded accurately, as were the sample of cases closed to ongoing protection services. However, there were significant deviations from the *Child Protection Standards*, most notably with respect to timely documentation and plans of service. The review team was unable to determine whether the files remained eligible for service in the periods of inactivity on the file. The *Eligibility Spectrum*, safety assessment, risk assessment and reassessment instruments, along with other tools mandated by the ministry are intended to provide workers with a basis to identify risk, determine plans to mitigate risk for children, and measure progress of families through service. When there is limited contact between workers and families, workers may not have adequate information to form accurate assessments and/or measure progress towards service goals. Additionally, the establishment of a helping relationship between the worker and the family plays a significant role in engaging families in services designed to reduce risk factors, and improve the well-being of children and the capacity of caregivers. It is not clear to what extent gaps in service affect workers' ability to develop a trusting, collaborative relationship with families thereby reducing the need for more intrusive and/or coercive approaches to service delivery, something staff at all levels of the organization cited as a significant problem in their work.

There was evidence of appropriate use of kinship service to prevent admissions and to facilitate discharge for children who had been admitted to care on a short term basis. Of the kinship service files reviewed, reviewers noted that they were closed at the point that the child was no longer in need of protection or the kinship caregivers no longer required the assistance of the society. The file reviewers did note delays in assessment and direct contact with children and kinship service families. The delays in early response to kinship service families was an issue identified by society staff who noted that with the development of the kinship as a specialized service, timely response to kinship families has increased.

The files of children admitted to and discharged from care were all eligible for service and reflected accurate coding and documentation timeframes. However, reviewers noted that the protracted court processes for children in care appeared to impact significantly the likelihood of timely exits to permanency for many young children in the care of the society. As of March 4, 2013 CKCS had 130 children in care under Interim Care and Custody orders, representing the largest proportion of children in the care of the society and 77 of those children were under the age of 6 years. Furthermore, a review of provincial data indicates that as at 2012/13 Q3, CKCS had the highest proportion of children on Interim Care

and Custody orders in the province – 46.9% versus a provincial average of 19.2%. Remaining in care under an ICC order for a prolonged period of time may impede children’s continuity of care and the development of stable, permanent relationships. For children who enter care at a very young age, it may also decrease the likelihood of certain permanency options such as adoption. These findings led reviewers to conclude that there is a pressing need for the society to ameliorate issues that impact on the permanency and wellbeing of children served in care.

There were no noted concerns with adoption, foster care or kinship care home studies completed.

In summary, there were minimal concerns noted related to coding of cases. However, the file review revealed significant gaps in meeting the *Child Protection Standards* some of which posed serious concerns related to the safety of children known to the society. Given the gaps in contact with children and families and overdue documentation, it was difficult to determine ongoing eligibility for child protection services in some many cases, and thus the review team was unable to quantify the impact on funding eligibility under the funding model in place at the time of the review. Further, without up-to-date documentation of worker contact and assessments, it is also difficult to understand the true volume of service need.

Since the conclusion of the on-site review, the society has advised the ministry that it has begun to address the cases on the “Age of Investigation” list that have been open beyond the 30-60 day period outlined in the *Child Protection Standards*. In a recent update to the ministry from the society, the CEO reported that the number of open investigations has been reduced from 219 on March 4, 2013 to 100 on April 22, 2013. Given this significant reduction in cases open at investigation it would be difficult to determine if investigation staffing levels by function were too high or too low.

#### **2.4.2 Recommendations: File Review**

To address non-compliance with the *Child Protection Standards*, it is recommended that the Regional Director of the South West Region of the Ministry of Children and Youth Services:

1. Issue Directives to the society under section 20.1 of the *Child and Family Services Act* and hold the society accountable for compliance with these directives within a timeframe determined by the ministry. These directives should focus on:
  - Ensuring compliance with *Child Protection Standards* on a go forward basis for all cases open at the society

- Ensuring staff review the standards and are aware of their obligations in this regard
- Ensuring supervisors are trained in clinical supervision of staff by an OACAS approved trainer
- Developing a system to identify overdue case work and recordings and hold staff accountable for meeting standards.
- Working collaboratively with a ministry representative to review case files as deemed appropriate by the ministry.

It is recommended that:

2. CKCS develop a strategy to ensure that there is a process in place to reassign all active cases immediately when frontline staff leave their position.
3. CKCS undertake a comprehensive examination of the long term stay of children in the care of the society and the backlog of court cases where children are awaiting permanent legal solutions. The review should be linked to society practices at each stage of service delivery from intake, ongoing protection, kinship services and child in care/residential services.

## **2.5 Financial Review**

The overall objective of the financial review was to gain an understanding of the cost drivers contributing to the level of expenditure, and to identify opportunities for efficiencies. The review team assessed the effectiveness of the society's management, administrative structure and processes including internal decision-making, communication and planning processes as they relate to expenditure management activities and identification of opportunities for efficiencies.

Specifically, the team reviewed and assessed:

- The society's service, staffing and financial data including policies, processes and practices that support decision-making and accountability including financial controls, administrative costs, HR practices, operating costs and program related costs;
- The society's service and financial data on a multi-year basis where required;
- The effectiveness of management and administrative structures and processes including internal decision-making, communication, forecasting and planning processes;
- The society's cash management strategies and controllership procedures; and
- Other information as considered relevant.

### **2.5.1 Key Findings**

#### **Financial Management and Controllership**

The review team reviewed CKCS's organizational charts and financial policies and discussed general financial administration with the Director of Corporate Service and the Supervisor of Finance. The review team also met with the CKCS auditor to discuss the extent of their work related to financial and management internal control policies and procedures. Although a full compliance review of the policies was out of scope for this review, where exceptions were noted they have been identified in this report.

Monthly financial information is produced from their accounting system and a financial package is prepared and presented for discussion at the monthly Operations Committee meetings. Bank accounts are reconciled monthly and the Supervisor of Finance has a detailed spreadsheet that tracks costs and allocations and reconciles them to the financial system. Cost per child can be

tracked using one of the modules, but not all costs are captured (e.g., if something is paid via credit card).

The society has policies on Financial Management, Financial Accountability and Governance that are posted on their intranet. However, while financial policies exist, they are not always adequate and/or followed. Further, the review team assessed the society's budget controls as relatively weak. The budget process appears to be used as a vehicle solely for forecasting expenditures with no emphasis placed on the allocation and control of expenditures and as a tool to promote accountability and effectiveness. Managers are not provided with a budget for their department/unit and, as a result, senior management do not have financial accountability for dollars spent related to their area of control.

Senior managers from across the organization meet regularly as the Operations Committee, which is chaired by the Director of Corporate Services. Senior managers reported that expenditures are tracked against budget and discussed at the committee, however, the chair indicated that the nature of the discussions was information sharing. There was no structured discussion focused on additional strategies that could be employed to manage expenditures in excess of funding.

The society does not have a formal policy on the apportionment of overhead cost and shared program cost. Shared costs are automatically charged to programs based on the percentage of staff in each department. This apportionment methodology is reasonable if it is applied consistently throughout the fiscal year; however, the society's staff explained that all programs provided through CKCS, except child welfare, are balanced at year end. Because of this year-end redistribution, the actual shared cost charged to programs does not align with the society's apportionment percentages.

It was noted that the society made several questionable spending decisions at year end, so that the amount of surplus reported to the ministry, was minimized. For example, in both 2010-11 and 2011-12 the agency paid down their mortgage and made other year end investments including prepayment for repairs and maintenance and the purchase of a vehicle. Prepayments are ineligible expenses under the ministry's funding policies. The integrity of the financial information in the agency's annual Child Welfare Transfer Payment Annual Reconciliation (CW-TPAR) is questionable.

There were several instances noted of funds being spent inappropriately, or payments made without adherence to agency policies, including:

- Non-interest bearing loans to staff including the Chief Executive Officer, for items such as computers, "wellness" equipment, iPhones, and salary advances. More than \$135,000 related to such loans was outstanding at

March 31, 2012, and in excess of \$144,000 in 2013. Taxable benefits are not routinely charged for these items, as required by the *Income Tax Act*.

- Duplicate payments of travel costs for the Chief Executive Officer.
- In at least two instances, cost was recorded in one fiscal year (March 29, 2012), with the work being done in the following fiscal year (May 2012).
- Year-end cash expenditures for large amounts such as a mortgage payment of \$25,000 on March 25, 2011 and a vehicle purchase of \$38,000 on March 21, 2012. The mortgage payment did not have the requisite pre-approval from the ministry.
- A retirement stipend (██████████) paid to the Chief Executive Officer, several years before his expected retirement.

#### Salaries, Wages and Benefits

Exempt: Section 21 – Personal Privacy

It was the assessment of the review team that CKCS could explore additional strategies to contain salaries and benefits costs of unionized staff. The four-year Collective Agreement was established in 2010, effective from April 1, 2010 to March 31, 2014. The overall wage structure including grid progressions in most cases is approximately 5% and cost of living increases of 9% over the term. Over four years an existing employee could have had an overall increase of over 32% depending on their classification. Benefits including vacation entitlements, standard work hours, sick leave, the absence of co-payments for benefits, discretionary days, personal internet connections, etc., are also fairly generous compared to other BPS organizations.

Management Staff: although for two years there was no movement along the management/non-union wage grid as required by the Management Constraint Policy, CKCS management salaries increased by 6% effective April 1, 2012. This was reflected in the records as an effective “catch-up” amount, equal to the amounts union staff received over the same period (2.25% +2% +1.75% in each of 2010, 2011 and 2012 respectively). This catch-up increase is difficult to rationalize given the current fiscal challenges the agency and the sector are facing.

#### Boarding Costs

The review team performed a detailed review of boarding costs, clients' personal needs and health and related costs for the 2011-12 fiscal year actual expenditures. Fourteen client files from various categories were selected and all

of the 2011-12 costs related to those clients were reviewed. No material discrepancies were noted.

The review team reviewed the "Foster Parent Financial Handbook" and concluded that CKCS has comprehensive policies in place to support boarding costs payments. The per diem rates and allowances appear reasonable.

The review team also reviewed five Special Rate Agreements (SRAs) and confirmed that the billing rates matched the agreements. In addition, the team reviewed the reason(s) why the SRAs were requested and all appeared reasonable (unique medical conditions, aggressive behaviour tendencies, etc.).

Based on the results of the reviews, the expenditures appear reasonable and in compliance with the "Foster Parent Financial Handbook." Financial processes are adequate.

### **Travel/Mileage**

Following a review of travel and mileage expenditures the review team concluded that the society requires significant improvement in controls and oversight to ensure that costs are appropriate, staff are accountable, and everyone complies with the society's Travel, Meal and Hospitality policy. Existing policies are usually lacking or weak and where policies are present and appropriate, they are not followed and there appears to be no consequences for staff who fail to comply. Support for this finding is outlined below.

The employee travel and meal allowance policy allows \$9.00 breakfast, \$13.00 lunch, and \$21.00 dinner, with no requirement for receipts. The Chief Executive Officer has a per diem of \$60 per day within the region, \$75 outside the region.

Although some useful tools have been developed (e.g. the Trip Calculator), the review team found very little evidence that the tools were being used or that anyone was actually reviewing travel claims with a critical eye. Further to this, the review team also noted that the process for travel, business and mileage claims was duplicative and inefficient. For example, staff are required to use different forms for meals ("expense claim form") and for mileage ("mileage report"), even though they might be claiming for one trip. Often 2 levels of approvals are required, but the signatures appear only there as a requirement, not as a control (i.e. the manager is not actually reviewing the claim with a view of assessing compliance as the claims are non-compliant). Examples of specific issues are outlined below:

- Under the BPS travel directive, economy class should be the standard class for rail travel and appropriate level of approval is required for any other class (VIA-1 or business class). However, under the society

policy/management handbook management staff traveling by rail can travel by VIA-1 travel business class provided they spend a majority of their time on the train working on society business. A review of senior management travel for the period August to November 2012 revealed that 52% (14 of 22) of the rail travel was by Business Class (VIA-1). There was no evidence attached to the travel claims that proved that staff was working on society business when they travelled VIA-1.

- The review team could not find evidence of verification of staff mileage prior to sign off and payment. The team reviewed staff mileage for nine (9) staff. Of those, 88.8% of claims were incorrect in mileage, with most rounded upwards. Although a manager is signing off on the claim, it does not appear that effort is made to review the worker's mileage claim prior to forwarding to the Finance department for payment. When questioned, the Finance department advised that they do random reviewing of claims, however it did not appear that the reviews were effective. CKCS does not maintain standard mileage charts for common trips. Often senior staff mileage claims do not provide actual starting or destination address, only the general area to which they travelled.
- The review team noted several instances of management staff using their own vehicles for car trips greater than 200 km, with no indication why it was not operationally feasible to find a cheaper means of transportation, as required by the society's policy.
- The review team noted several instances of travel claims without accompanying receipts (e.g. cab fares), even though the policy states that "taxi travel will be reimbursed only with receipts and where justified by exceptional circumstances."
- The review team noted some instances of meal claims in excess of the standard per diems, with no accompanying explanation.
- The review team noted other claims that did not have accompanying receipts (gas claims, personal internet connections).
- The review team noted two instances of the CEO being paid the per diem meal allowance and also charging meal costs on the same travel claim.
- Out-of-province travel claims by the CEO regularly included meals in excess of the per diems, and often receipts were not attached or only the credit card receipt was attached, and at times it was questionable whether the costs were only for one person.
- Meals at meetings such as Practice and Research Together or Adoption Resource Exchange that included staff were regularly in excess of the sum of the per diem costs per person.

## **Procurement**

CKCS has a procurement policy in place – the Contract Relationships and Purchased Services Policy. Through a review of five procurement files, the

review team concluded that several of CKCS's procurements did not follow the Purchased Services Policy and did not demonstrate that publicly funded goods and services were acquired through a process that was open, fair and transparent. Details of the concerns identified through these five files reviews are outlined below:

### *1. Roofing Contracts*

Three roofing contracts have been awarded to one vendor, with the following findings noted by the review team:

2008 Tender for 495 Grand Ave.

- There is no professional evaluation of the roof condition or any subsequent business case that might justify replacing virtually the whole roof.

2009 Tender for 215 Murray St.

- Letter from external consultant providing recommendations regarding which parts of the roof should be replaced, recommended time frame and an estimated budget, including drawing
- Recommended areas of the roof for the current year: 1, 2, 5
- Estimation of pricing \$82,000-\$93,000
- Bid price \$86,670 + GST (considered reasonable by the review team)

2010 Tender for 215 Murray St.

- Tender to replace several roof sections (A, B, D, E, F, H, I, J,) including drawing
- Sections 3 (D) and 4 (F), were included in the tender. Section 3 recommended to be done in 2010, section 4 to be done in 2011. Sections A, B, E, H, I, J were not included in the replacement recommendations. There was no record of a different recommendation and No business case for added sections.
- Estimated price for sections 3 and 4 \$134,000-\$144,000. Winning bid price for tendered roof areas \$249,170 + GST . The lowest bid was \$229,790 + GST but was not accepted as two references were not included in the bid package
- Contract was not fully executed

Concerns of the review team based on the information in the contract file included the possibility that work is being done that is not required. and that

efforts should have been made to pursue the lowest bid and save approximately \$20,000 given that the wording in the request document is conditional: "Errors, incomplete tenders . . . may render the tender invalid"; the agency could have asked lowest price bidder to provide the two references.

## *2. HVAC Conversion Contracts*

Two HVAC Conversion contracts were reviewed. Both of these procurements were not compliant with the Contract Relationships and Purchased Services Policy in many areas. Findings are detailed below:

### **HVAC Conversion at 495 Grand Ave.**

- According to provided file-one supplier was contacted to provide the work, no other communication with other potential vendors was found, and no RFP/tender was issued
- The bidding price was over \$40,000; at this level the CKCS Competitive Procurement Thresholds require a minimum of 3 suppliers be invited to bid
- No reason or business case provided to justify the work
- No reason provided for why only one supplier was contacted
- No requisition approval
- No contract
- The invoice was dated for March 30, 2012 and received April 11, 2012; however, the cheque requisition was dated March 22, 2012
- A cheque was written for March 20, 2012, returned to the Procurement Manager, held until work was completed; cheque was debited from the society's bank statement on May 28, 2012

### **HVAC Conversion at 215 Murray Street**

- No justification/business case in regard to why replacement needed to be done
- RFP was issued March 1, 2012
- No signed contract
- No requisition approval
- Purchase order is dated March 29, 2012
- Invoice is dated March 29, 2012
- Cheque requisition is dated March 29, 2012
- Cheque was held until work was completed; cheque was debited from the society's bank statement on May 30, 2012

### 3. Snow Removal Contract

A review of the snow removal contract between the agency and its snow removal contractor revealed questionable procurement practices including a potential conflict of interest that was not declared. Detailed findings include:

- Tender was issued; 4 suppliers responded with a proposal
- Review of the evaluation criteria raised concerns about the clarity of what was being asked in the evaluation criteria. The differences in the evaluation scores given can be explained by differences in the understanding of the criteria in the minds of the evaluation team members.
- The existing supplier, who has been providing the service since shortly after the society's inception, was awarded the contract.
- Upon review of the contract, it appears that an employee listed on the successful Supplier's submission is a relative of the owner. The work number listed for this employee is CKCS's phone number. The employee is also an employee of CKCS. The contract contains Article VI "Conflict of Interest" and the parties have signed to certify that there is no conflict of interest. The potential conflict was not recognized and no mitigation measures were put in place.

#### **Volunteer Drivers**

Like many non-profit organizations, CKCS relies on services provided by volunteers to reduce costs and establish a connection with the community. Given that CKCS clients are children and quite vulnerable, it is critical that all volunteers who have unsupervised access to children are adequately screened so that clients are not unnecessarily exposed to risk.

CKCS pays more than \$600,000 annually to volunteer drivers. With respect to the expense claims, the volunteer is responsible for submitting a kilometer expense report, indicating the child's name, the pick-up and drop-off locations, as well as the kilometres driven and hours spent. The supervisor stated that she would look at the report to double check that the volunteer had been asked to go to those locations on those days, however, she noted that she does not confirm the listed kilometres or independently verify the stated kilometres using MapQuest or Google Maps.

Four files of volunteers who received large (in excess of \$2,000) monthly cheques were reviewed. After tracking many of the routes, three files had many drives for which the kilometres seemed to be overstated. One file showed the volunteer driving over 86,800 km for the year. Some days the driver indicated they were driving for approximately 12 hours. This amounted to the volunteer receiving over \$38,000 in travel expenses, for which kilometres were not verified.

## **Mortgage Payments**

The agency has two outstanding mortgages. Payments (principal and interest) are charged to "Building Occupancy" and funded by ministry. Under the ministry's admissible/inadmissible expenditure policy mortgage expenses (principal and interest) are admissible expenses only with the prior approval of the ministry. In addition, based on the ministry funding model guidelines only "approved" financing cost should be included under "Building Occupancy".

The ministry did not approve any mortgage funding for the agency. In addition the agency paid down \$25,000 on their mortgage on March 25, 2011 without ministry prior approval.

## **Admission Prevention**

Contrary to the Ontario Permanency Funding Policy Guidelines, CKCS is counting family episodes more than once. In 2011-12 Q4 there were 35 episodes of admission prevention.

The ministry's reporting requirements for Admission Prevention are:

1. CASs must report an unduplicated number of families receiving admission prevention services. For example, if a family receives episodic support on more than one occasion, that family may only be counted once.
2. Expenditures reported under Admission Prevention are for "financial assistance" only and are only to be provided on an "episodic/emergency basis to meet short term needs and address immediate health and safety of the child and could prevent an admission to care". Expenditures such as, but not limited to, salaries and wages or administration must not be reported as Admission Prevention expenditures.

The review team reviewed the finance department's records with respect to Admission Prevention and noted that volunteering time/travel was posted to one family with 12 episodes being counted. As travel was to and from daycare, this is not considered episodic. Four other families were counted twice each.

## **Kitchen Arrangement**

Kitchen facilities were included when the extension of the Grand Ave location was built. CKCS has contracted with an independent operator to "run" the kitchen.

At the time of the review, the arrangement was that the operator supplies all consumables and pays any staff that she has working in the kitchen. The operator does not pay rent or any other fee. Payment can be made either by cash or via an employee account. The staff member provides their employee number and the operator provides the accounts receivable listing to the society's payroll department. The payroll department then deducts the amount owing from the employee's pay, and provides a cheque to the operator. The operator pays no fees for this service from payroll.

Payroll staff indicated that they spend approximately 1.5 hours between 2 staff members on a bi-weekly basis to complete the needed work to provide the operator with her earnings.

### **File Conversion**

CKCS incurred high costs for converting and indexing documents. In 2011-12 there are two invoices from Maple City (MC) Imaging totalling \$99,982.40 for converting /indexing paper documents (closed historical client files) to DVDs. The total amount of one invoice \$49,991.20 was prepaid in March 2012 per note on invoice, with the final amount of \$24,995 being paid August 2012 when the work was completed. CKCS no longer converts files to DVDs as it is considered too costly. Currently the society has laser fiche software and does on-site scanning of notes, etc. to the laser fiche software. When there is a high volume of scanning, the society outsources the scanning and conversion.

### **Disposing of Computer equipment**

CKCS does not have a formal IT Asset Disposal Policy. Their practice is to replace desktop equipment and servers every 4 to 5 years, depending on the use of equipment. Computers are repurposed where possible; otherwise hard drive and memory modules are pulled. Computers are then recycled to local organizations or businesses that participate in Ontario electronic stewardship (e.g. Goodwill, Staples). Monitors that are in working order are usually donated to local organization to distribute to the community. Hard drives are either repurposed or destroyed mechanically. When servers are replaced, all hard drives and memory modules are either repurposed or destroyed, which is more often the case.

Network switches, routers, radio equipment are upgraded or replaced in a 5 to 7 year time frame. These items are recycled.

### **2.5.2 Recommendations: Finance Review**

It is recommended that the ministry should retain a third party audit team to conduct a full review of staff expense claims, procurement practices and the

society's practice of providing loans to staff to ensure appropriate controls and mechanisms are developed for the ongoing sustainability of the organization and demonstration of value for money.

It is recommended that Chatham-Kent Children's Services should:

1. Continue working on strategies to manage within funding allocations including the reviewing of resource commitments (staffing and other expenditures) to ensure fiscal prudence and regard for economy and efficiency. There should be increased focus on HR planning in the society's planning and budgeting process to support strategic HR considerations that will promote the allocation of resources based on operating requirements and the delivery of services in an efficient and effective manner.
2. Strengthen its financial management by implementing departmental/unit budgeting. This should include the development of a formal Board-approved policy for allocating costs among the various program areas, and follow it consistently. The overall goal should be to apportion costs reasonably and in a consistent manner.
3. Review its financial management practices to ensure they support strategic planning and decision making and to improve accountability by holding managers to approved budgets.
4. Implement a cost management system that provides managers with accurate, useful, relevant and timely information on the full cost of delivering a service. This will help managers understand the costs associated with delivering services, and would be useful as the focus on delivering services as efficiently and economically as possible.
5. Have its Board should put more emphasis on its stewardship role through increased involvement in the budget approval process, including requesting and looking at the cost and financial information to guide decisions about improving value for money.
6. Remind all staff of existing financial and internal control policies and require compliance from everyone, including management.
7. Put systems in place to ensure that ministry financial policies are followed, specifically the ministry's Transfer Payment Operating Funds -Basis of Accounting policy; the Admissible/Inadmissible Expenditures policy and Year-End Reconciliation policy
8. Ensure all taxable benefits are charged to all staff as appropriate.

9. Pay only for costs incurred by CKCS staff that are appropriately supported with detailed receipts and in compliance with policy and BPS directives.
10. Revisit its Travel, Meal and Hospitality policy and consider amendments that will reduce costs and enhance accountability, such as:
  - Requiring all staff (including senior management) to review and comply with CKCS's revised Travel, Meal and Hospitality policy
  - Requiring receipts to support travel expenses
  - Requiring the use of the Trip Calculator (attached to the claim) or requiring staff to enter specific locations for all trips
  - Consider undertaking a competitive process to retain a vehicle rental company to have vehicles available for staff trips in excess of 200 km
  - Consider corporate travel cards for staff who travel regularly.
  - Establish standard mileage charts for common trips.
  - Require prior approval by the CEO for managers travelling by VIA-1, and Board President prior approval of CEO travel by VIA-1
11. Revise existing procurement policy and guidelines to comply with the requirements of the Broader Public Sector Procurement Directive, including the 25 mandatory requirements and provide procurement training for all staff and management associated with procurement activities.
12. Establish and follow a more rigorous controllership model for procurement so that goods and services are paid for only after they have been received.
13. Work with the South West Regional Office to ensure appropriate mortgage agreements are in place for mortgages funded by the ministry.
14. Establish and follow a more rigorous controllership model for volunteer drivers, including independent verification of kilometers travelled and hours driven.
15. At the conclusion of the existing kitchen services contract, competitively procure the services and require a fee from the operator that recognizes the cost of space, utilities, and employee time.
16. Instruct staff and management responsible for the acquisition of I&IT goods and services to follow the existing procurement practices, including approvals and tendering requirements. The society should also ensure appropriate documentation is on file for all I&IT acquisitions.
17. Adjust the Admission Prevention account to make sure only eligible expenditures are included. This includes ensuring that only an unduplicated

number of families is reported as receiving Admission Prevention services, in accordance with ministry requirements.

18. Consider discontinuing non-interest bearing loans for computers, iPhones and other goods or services for management and non-union staff and explore alternative funding arrangements. Proposed changes must be assessed within the requirements of the current collective agreement. Loans already granted by the society should be documented by the society as a taxable benefit in keeping with Canada Revenue Agency's Taxable Benefits and Allowances—T4130(E) Rev. 12.

The ministry will continue to work with the society to support the implementation of the recommendations outlined in this report.

## Appendix I Details of the File Review

File Type	# Files Sampled	# Files Meeting Service Eligibility	% Files Meeting Service Eligibility	Other Issues Noted
Report Received, Not Investigated	50	48	96%	The file type was generally coded appropriately with files eligible for service. Of the 2 files not eligible for this file type (4%), one file was appropriately open as an investigation and one file did not have sufficient information in the file for the reviewer to determine eligibility. Of the eligible files, 6 RRNI's were coded above the intervention line as they were requests to provide or share information regarding a child or children that did not live in the area or with concerns about a parent that the children did not live with. The files were appropriately transferred to another society.
Report Received, Not Investigated – Community Links	10	2	20%	There were two files in this sample that were requests for community links and the file demonstrated evidence that the family was referred to a community mental health service. Seven (70%) files in this category were essentially information requests where the file would be more appropriately coded as an RRNI. The service provided was appropriate. One file was re-coded due to the assessed risk to the family and the file was opened as an investigation and subsequently transferred to ongoing services.
Investigations completed and closed	34	34	100%	Of the file sample, 8 files (24%) were closed within 60 days of the initial referral. Within the 8 files, 4 files were closed within 30 days. The other 4 cases closed within a 60 day timeframe had delays in completion of the initial assessment and required documentation. In 21 files (62%) there were significant delays in one or more of the following: completion of the assessment of the family; delays in referring the child or family to appropriate resources; delays in the completion of safety and risk assessment tools and investigation summaries. In 7 cases, the file remaining on the intake team as an investigation had been open between 6-12 months.
Investigations completed and transferred to Ongoing	15	15	100%	Of the file sample, 9 files (62%) were transferred to ongoing. The files had thorough and detailed documentation and assessments with timely responses linked to the identified risk to the family. Of the 6 files that were closed, there were delays in the completion of the safety assessment, risk and investigation and closing summaries. The reason provided by supervisors for delays was workload. In one case the safety assessment was delayed for 3 months and the case was closed after 4 months at investigation. The delays in closing do not impact the funding eligibility for protection investigations.
File Open at Ongoing protection	50	50	100%	The initial file sample was 50 ongoing files. Of the initial file sample all 50 files were deemed to be eligible for service and required services beyond investigation. In this file sample the reviewers noted significant delays in 10 files (20 %) in the completion of documentation including initial and reassessment of safety and risk, lack of completion of the initial documentation following the 30 day transfer and delays in completion of the six month ongoing summary. The delays extended from 6 months to a two year gap in the completion of tools and ongoing summaries. In light of the gap in documentation, the reviewers could not determine if the eligibility for service was reviewed at each six month period with the possibility that files remained open beyond the need for child protection intervention. This finding led to the selection of two an additional 20 files for review (see last row of the Table for results).

File Type	# Files Sampled	# Files Meeting Service Eligibility	% Files Meeting Service Eligibility	Other Issues Noted
Cases closed at Ongoing protection	13	13	100%	The files in this file type were eligible for service and closed within 30 days of a decision to close the file. In 5 files or 38% of the file sample there were delays in summary documentation which may have also meant delays in the timely decision to close these files.
Children admitted to care	11	11	100%	All children admitted to care were eligible for protection service. In addition, documentation on the children in care was timely and reflected appropriate level of placements to children in the sample.
Children discharged from care	11	11	100%	The file documentation was completed within 10 days of the decision to discharge the child in nine of the files reviewed. In one file, the closing was completed 6 months following the discharge of the file. In one file the only file documentation was a discharge data form. There was evidence of children being reunified with their family and moved to kinship arrangements.
Kinship Service Cases Opened	9	9	100%	All kinship files that were open were eligible for service. The files were generally open between 6 to 12 months and provided good permanency alternatives for children in the care of the society. In the documentation there was a gap in the completion of initial documentation and comprehensive assessments in 3 (33%) of the files.
Kinship Service Cases Closed	9	9	90%	All kinship files in this file type were initially eligible for service and 9 of the files were closed at the time the child was no longer in the kinship home or the family no longer required support from the society. One file was closed 6 months following the child's departure from the home and would not have been eligible for this file type during the review period. In 3 (30%) of the files, there were gaps and delays in the completion of documentation including the late sign off by a supervisor nine months following the worker's completion of documentation.
Adoptions Completed	2	2	100%	Both files were coded accurately with no concerns.
Foster and Kinship Care Home studies Completed	12	12	100%	All foster/kin home studies were eligible for service and had the required documentation in the files. There were two kin care assessments completed. One kin file was coded as an 83A but should have been a 83F as the file was open to provide kinship care for a child from another society. There are no funding implications of this coding change.
Additional Ongoing Protection Samples	20	20	100%	Two additional file samples were reviewed as a result of the gap in service documentation in the initial random sample on open ongoing files. Each sample consisted of ten files. 5 of the 20 files sampled demonstrated significant gaps in service response and file documentation including late transfer documentation, safety and risk reassessments, and delays in the completion of ongoing summaries from 6 months to up to 2 years. The file documentation indicates that many documents were completed on the same day and that some files in the subsequent sample had documentation that was still outstanding.

**Appendix II**  
**2012-13 Child Welfare Expenditure Management Review**  
**Chatham-Kent Children's Services**  
**Documents Required for On-site Review**

The ministry will require case lists for the following categories of services, covering the period April 1, 2012 to September 30, 2012:

1. Report Received, Not investigated
2. Report Received, Not investigated – Community Links
3. Investigations completed and closed
4. Investigations completed and transferred to Ongoing
5. Cases open at Ongoing
6. Cases closed at Ongoing
7. Children admitted to care (Family file will need to accompany child's file)
8. Children discharged from care (Family file will need to accompany child's file)
9. Kinship Service Cases Opened (Family file associated with the child in the kinship arrangement.)
10. Kinship Service Cases Closed (Family file associated with the child in the kinship arrangement.)
11. Adoptions Completed ( Adoptive family file will need to accompany child's file)
12. Foster and Kinship Care Homestudies Completed

Using the case lists, the ministry will randomly select 10% of cases in each service category (minimum of 10 files, maximum of 50 files per category). Lists of files selected for review will be returned to the CAS within the same day for preparation. The CAS will advise whether reviewers will be reviewing paper or electronic files, or a combination of both.

**Over the course of the on-site review:**

**The review team will need access to the following documents during the on-site review:**

1. Organizational chart
2. List of Board Members and role on the board, including committee structures
3. CAS's strategic plan if applicable
4. Copies of all service protocols with external partners
5. Service policies and procedures for all program areas
6. Detailed listing of all days of care (free and paid) by type of care
7. HR policies, procedures and collective agreement
8. Board manuals
9. Board minutes and agendas and same for any board committees

10. Agency by-laws
11. Financial policies and procedures
12. Copy of closing general ledger trial balance for 2009/10, 2010/11, and 2011/12
13. Management letter issued by the Auditors for 2009/10, 2010/11, and 2011/12
14. Income tax report (T2010) filed for the past 3 years
15. Supporting documentation used to prepare the budget submission and quarterly year to date report forecasts for all service volume forecasts, staffing forecasts and expenditure forecasts.
16. Distribution of children in care by age and legal status as of September 30, 2012

The review team may also need access to other information/documents throughout the review based on progress and issues identified.

**Appendix III  
Review Team Membership  
Chatham-Kent Children's Services**

**Date of Review: February 26<sup>th</sup>, 2013 through March 8, 2013**

**Executive Lead On-site: Sally Johnson**

**Core Review Team Members:**

Joan Conrad  
Steve Novosedlik  
Madeleine Davidson (Finance)  
Donna Smith (Finance)

**File Reviewers:**

Jenny Rivers-Letink  
Gavin Shaw  
Tori McClean  
Sandra Frampton  
Holly Augerman

**Finance Review:**

Sookdeo Sookdeo  
Nancy Johanson  
Carol Lynn Holden  
Darryl Dean

**MINISTRY OF CHILDREN AND YOUTH SERVICES**

**Directives to Chatham Kent Children's Services**

**May 27, 2013**

**DIRECTIVE: Respecting the provision of services under the *Child and Family Services Act* R.S.O. 1990, c. C11.**

The ministry is issuing five (5) directives under section 20.1 of the *Child and Family Services Act* to Chatham Kent Children's Services ("the Society") effective **May 27, 2013**. These directives have been issued to support the Society to meet legislative and regulatory requirements related to child protection standards and services to children eligible for or in receipt of child protection services.

**REQUIREMENTS:**

To comply with directives within the prescribed timelines specified in each directive.

**REPORTING REQUIREMENTS:**

The Society will submit written reports each week to the ministry regional office program supervisor regarding the status of compliance with the directives.

**EFFECTIVE DATE:** These directives are effective May 27, 2013.

**ISSUANCE OF DIRECTIVES:**

**May 27, 2013**



Joanne Brown  
Regional Program Manager  
South West Region  
Ministry of Children and Youth Services

## **Directives to Chatham Kent Children's Services**

**May 27, 2013**

**CFSA S.20.1.** A Director may issue directives to one or more societies, including directives respecting their provision of services under this Act.

The following directives are issued under section 20.1 of the *Child and Family Services Act*. Chatham Kent Children's Services ("the Society") shall meet legislative and regulatory requirements related to child protection standards and services. The Society shall comply with the following:

1. The Society shall comply with the Child Protection Standards in Ontario - February 2007 ("the standards") in regard to every current investigation and all new reports that a child may be in need of protection commencing from the date of receipt of the directive, and within 90 days of receipt of the directive the Society shall provide the following written confirmation/reports:
  - (a) confirmation that the Society has achieved full compliance with the standards and a description of how the society assessed compliance.
  - (b) confirmation that Safety Assessments/Safety Plans and Risk Assessments have been completed prior to the verification process. Written confirmation shall include the number of current investigations, the number of referrals subsequent to receipt of the directive, the number of Safety Assessments/Safety Plans and Risk Assessments, as well as confirmation that Safety Plans have been monitored with supervisory involvement. (Standard #5 and #6)
  - (c) confirmation that the Society has developed policy and procedures (providing copies of same) that ensure each record, at the completion of an investigation, shall contain the information required under Standard #7.
  - (d) confirmation that the Society has developed and implemented policy and procedure (providing copies of same) that ensures all child protection documentation includes the child protection worker's plan and schedule to see the child(ren) and the family members face to face when providing services on an ongoing basis. The plan and schedule shall be addressed at regular intervals with a society supervisor and shall comply with the requirement under Standard #10 for direct contact with families in their home once per month or more frequent visits in cases with high or very high risk ratings.

2. Provide the ministry with written confirmation within 30 days of receipt of this directive that the Society has established an effective system to track overdue recordings and a practice to monitor and hold staff and supervisors accountable for completing recordings in accordance with Child Protection Standards.
3. Provide the ministry with written confirmation within 30 days of receipt of this directive that all child protection workers and child protection supervisors have reviewed, in its entirety, the Child Protection Standards in Ontario- February 2007 within 30 days of receipt of the directive. Written confirmation must indicate the date each staff member completed his/her review.
4. Provide the ministry with written confirmation within 90 days of receipt of this directive that all child protection supervisors at the Society receive clinical supervision training by an OACAS approved trainer within 90 days of receipt of the directive. Written confirmation must indicate the date of receipt of the training.
5. The Society will work cooperatively with a representative identified by the ministry who will assess the society's compliance with these directives. The Society will permit the representative, upon request, to attend on-site to meet with staff and review files, records and any information relevant to assessing the extent to which the society has complied with the directives. The review of files will include all cases identified in the society's March 4, 2013 "Age of Investigation" report in order that the ministry may assess the extent to which the society has complied with the standards and addressed child safety concerns identified through the Expenditure Management Review.