

EXCLUDED: Increasing understanding, support and inclusion for children with FASD and their families **RCY Annual Review Year 2**

The Representative's report *Excluded: Increasing understanding, support and inclusion for children with FASD and their families* was released in April 2021 and included eleven recommendations to address racism, discrimination and inequity for children with Fetal Alcohol Spectrum Disorder (FASD) and their families in the current Child and Youth with Support Needs framework. The recommendations included in this report identified immediate actions to ensure that children with FASD and their families receive equitable access to meaningful, evidence-based supports and services that are comprehensive and fully funded.

The Representative is deeply concerned with the lack of response and collaboration by government ministries to the recommendations made in *Excluded*. In November 2021, government has shifted away from joint action planning on recommendation implementation approaches and, as a result, the action planning and progress to date does not reflect a coordinated whole-system approach she called for in her report. Government, for the most part, remains within pre-planning stages of its response to recommendations, meaning none of the activities that directly support the implementation of the majority of these recommendations have been completed. The Representative will continue to monitor progress, and work with ministries to address the gaps in action planning to ensure children and youth with FASD and their families, have equitable access to a comprehensive and accessible system of care.

The public bodies provided the information for year two progress assessment in May 2023. The table below shows the results for both first and second year assessments.

RCY Assessment Definitions:

- **Complete** = All activities that directly support the implementation of the recommendation are complete
- **Substantial Progress** = Most of the activities that directly support the implementation of the recommendation are complete
- **Some Progress** = Some of the activities that directly support the implementation of the recommendation are complete
- **No Progress** = None of the activities that directly support the implementation of the recommendation are complete (pre-planning may be underway but there has been no progress in formal planning or implementation).

Date Published: Feb. 20, 2024

Recommendation	
#1	<p>Recommendation 1: That MCFD fully fund and implement a CYSN service framework and plan, fully inclusive of children and youth with FASD. The formation of the service framework and plan must extensively engage ICFSAs and all appropriate partners. This framework must articulate a comprehensive and accessible array of CYSN services, delivered based on both an assessment of functional needs and diagnosis and, therefore, fully including children and youth affected by FASD.</p> <p>MCFD to begin implementation by September 30, 2021, and complete full implementation of the CYSN service framework and plan over a three-year period ending March 31, 2024.</p>
Ministry's Response	RCY Assessment
Year 1 Evidence – Received July 2022	Year 1 Assessment
<p>MCFD submitted its Action Plan on April 13, 2022. The plan has not been approved by the Representative as it is missing information regarding the inclusion of children and youth with FASD in the CYSN Service Framework.</p> <p>The draft Action Plan submitted to RCY in April 2022 and then revised in July 2022 speaks to a phased implementation approach of the CYSN Service Framework scheduled to begin with two pilot locations in 2023 and full implementation in 2025. The new service model aims to be inclusive of the creation of family connection centers, disability services and provincial services and was publicly announced Oct. 27, 2021.</p> <p>MCFD's annual report indicates that work on the development and implementation of the CYSN Service Framework, which includes engagement with partners under non-disclosure agreements and consultations with CanChild and Canada FASD Research Network, are still ongoing.</p>	<p>No Progress</p> <p>Progress on this recommendation is overdue. MCFD has not begun implementation of the CYSN Service Framework by the target date of Sept. 30, 2021.</p> <p>MCFD's Year 1 progress report provided limited evidence for the Representative on how the proposed CYSN Service Framework will be inclusive of children with FASD. Beyond committing to a needs-based model for family connection centers, disability services and provincial services, no evidence of how a comprehensive and accessible array of support services, specific to the needs of children and youth with FASD and their families, was articulated. The Representative's review of annual progress determined that MCFD is still well within the planning stages on key areas of design and that none of the activities that directly support the implementation of the recommendation are complete (i.e., assessment tools, information systems, Indigenous engagement).</p> <p>MCFD's Year 1 progress report also provided no evidence for the Representative to assess progress on her recommendation to "fully fund" the CYSN Service Framework. MCFD's current actions in response to this Recommendation do not include steps to fund the implementation.</p> <p>MCFD's Year 1 progress report provides a presentation used to inform partners of the ministry's new service model and notes engagement with advisory groups, Indigenous leadership, and sector partners under non-disclosure agreements. No information related to engagement process or outcomes has been provided and so the Representative is unable to assess the adequateness of the engagement efforts. Feedback received from RCY's partners is that engagements to date have been one-way and</p>

	<p>lacked the meaningful dialogue necessary for effective communication, collaboration and change management.</p> <p>Given the above, the Representative has not found evidence of progress to directly support the implementation of the recommendation at this time and will request a more robust plan to address her recommendations before approving the action plan.</p>
<p>Year 2 Evidence – Received May 2023</p>	<p>Year 2 Assessment</p>
<p>In November 2022 the government announced a pause on the rollout of the Ministry of Children and Family Development’s (MCFD) newly developed Children and Youth with Special Needs (CYSN) framework with the exception of four agencies piloting the Family Connection Centre (FCC) model in two regions (Northwest and Okanagan) in 2023-25.</p> <p>MCFD indicates that initial engagement with community informed the creation of the CYSN framework, including the FCC model, and that the pilot sites will proceed. However, government committed to more fulsome engagement when the pause was announced and MCFD shared that their new CYSN engagement activities would take place between Winter 2023 and Winter 2025. This is planned to include ministry led engagement with Rights and Title holders, community led engagement and Indigenous led engagements.</p> <p>Contracts with the ministry for the FCCs four pilot sites have now been signed. With funding for early implementation committed in 2022 and funding for the FASD Key Worker Parent Support Program (KWPSP) re-allocated to the FCCs in the pilot areas only. The ministry reports that three sites have begun transitioning families to the FCC services with the fourth FCC requiring additional time.</p>	<p>Some Progress</p> <p>The Representative is encouraged to see some progress for families with children with FASD underway in four pilot communities but remains deeply concerned by the vast amount of work ahead to reform and transform CYSN services for the province, with minimal interim measures for children with FASD and their families.</p> <p>Although the ministry has begun the transition to the pilot FCC model in four areas, only one pilot FCC (Kelowna) is open and providing services as an FCC at the time of this review. Others are preparing to open later in 2023 or in 2024. It is also unclear based on the evidence provided if implementation of the pilot FCC sites will directly support the intention of this recommendation as the scope of services, eligibility and resourcing is still under development and evaluation.</p> <p>The Representative supports MCFD’s pause to re-examine and carry out more extensive engagements to inform the CYSN system reform but is also concerned that the provincial pause will result in at minimum another two years of exclusion for children with FASD located outside of these communities, with no promise the FCCs will be rolled out provincially.</p>

Recommendation	
<p>#2 Recommendation 2: Pending full implementation of Recommendation 1, that MCFD immediately include suspected or confirmed FASD, based on an assessment of functional needs, in the eligibility criteria for CYSN Family Support Services, thereby allowing children and youth with FASD and their families to access services available to others with specific neuro-developmental conditions. The ministry should seek appropriate funding to expand the capacity of these services to adequately support the number of newly eligible FASD families so that this recommended expansion of service eligibility does not lead to reduced services or longer wait lists for other CYSN families.</p> <p>MCFD to secure immediate funding enhancements and begin implementation of the expanded eligibility criteria by Sept. 30, 2021.</p>	
Ministry's Response	RCY Assessment
Year 1 Evidence – Received July 2022	Year 1 Assessment
<p>MCFD's proposed Action Plan to address this recommendation does not include immediate inclusion of children and youth with suspected or confirmed FASD for CYSN Family Support Services.</p> <p>MCFD's proposed Action Plan includes a full costing analysis of the CYSN service transformation that will include data on children and youth with FASD and outlines a phased approach for implementation of the new CYSN Service Framework beginning with four early implementation areas in 2023 and full provincial roll-out in 2025. MCFD's Year 1 Report indicates that the costing analysis has been completed.</p>	<p>No Progress</p> <p>MCFD has failed to respond to this recommendation. No immediate actions to include children with suspected or confirmed FASD in the current eligibility criteria for CYSN Family Support Services have been included, as such, the Representative is unable to approve the ministry's Action Plan and notes that the deadline for this recommendation was Sept. 30, 2021.</p> <p>MCFD's Year 1 progress report indicates that it has provided a one-time grant of \$2.76M to Vancouver Foundation for 400 families whose children have FASD to access respite funding beginning in winter 2022/23. While the announcement is encouraging, in the absence of a service demand assessment and an implementation plan the Representative is unable to determine if or how this fundings will meet the needs of the many families in need of services. Further, the one-time nature of the grant does not meet the intention of the recommendation, to ensure ongoing equitable access to Family Support Services.</p> <p>MCFD's Year 1 progress report does indicate that a full data and costing analysis has been completed. However, the 2019 research report and 2021 modelling identify several data limitations and outline future modelling projections that do not specifically address the cost and service delivery measures of children and youth with FASD. The reports are also missing key information related to internal case growth modelling and the exploration of magnitude of change for the CYSN Service Framework.</p> <p>Given the above, the Representative has not found evidence of progress to directly support the implementation of this recommendation at this time and has requested a more robust plan to address her recommendation.</p>

Year 2 Evidence – Received May 2023	Year 2 Assessment
<p>MCFD has provided evidence of a one-time grant of \$2.76M to Vancouver Foundation for 400 families whose children have FASD to access respite funding beginning in fiscal 2022/23. The Vancouver Foundation subsequently contracted with Carrier Sekani Child and Family Services and The Asante Centre to provide the respite services and conducted a lottery to determine which families would be eligible. This funding is now being distributed to 400 new families in rural, remote, and urban areas of the province, through these two agencies over the next two years.</p> <p>The ministry’s Budget 2023 includes new investments of \$34.5 million to underserved populations in the current system including FASD, Down Syndrome and other neuro-cognitive developmental disabilities. As part of this funding announcement MCFD has committed to doubling the budget for the FASD Key Worker Parent Support Program (KWPSP) and a 60% budget increase to agency-coordinated respite.</p>	<p>Some Progress</p> <p>The Representative is encouraged to see new investments for underserved and unserved populations with disabilities, including FASD. However, increasing investments to existing disparate and inadequate community services will not address the inequity faced by children excluded from the MCFD’s CYSN Family Support Services.</p> <p>With the CYSN Framework implementation now on pause, it is now more urgent than ever to immediately include suspected or confirmed FASD, based on an assessment of functional needs, in the eligibility criteria for CYSN Family Support Services, thereby allowing children and youth with FASD and their families to access services available to others with specific neuro-developmental conditions. Failing to do so is discriminatory.</p> <p>The Representative also notes that despite the much-needed investment, the recruitment challenges affecting the sector and public services is hampering efforts to establish and deliver services. Attention to the lack of workforce capacity needs to be addressed in collaboration with the ministry of Advanced Education and Future Skills.</p>

Recommendation	
#3	<p>Recommendation 3: MCFD to complete a comprehensive review of evidence-based and promising practices specific to serving children and youth with FASD, including from the Key Worker Parent Support Program, for integration into the CYSN framework. In the meantime, MCFD to take immediate action to ensure that the KWPSP has consistent quality service across all regions of B.C. and is accessible to all families of children and youth with FASD.</p> <p>MCFD to take immediate action to ensure equitability and accessibility of the KWPSP by September 30, 2021 and complete the best practice review by March 30, 2022.</p>
Ministry’s Response	RCY Assessment
Year 1 Evidence – Received July 2022	Year 1 Assessment

<p>MCFD’s Action Plan in response to this recommendation indicates that it will not be completing a comprehensive review of evidence-based and promising practices specific to serving children and youth with FASD, including from the Key Worker Parent Support Program (KWSPSP), for integration into the CYSN framework. Instead, MCFD will continue working with CanFASD to stay apprised of best practices.</p> <p>Further, MCFD reports that it completed a targeted focus group with FASD Key Workers in 2019 as part of the early engagements and is not intending to conduct a specific review of the KWSPSP given the current state of research and the transformation of services.</p> <p>MCFD has also informed RCY that it will not be investing more resources into the KWSPSP as services will be transitioning to family connections centers.</p> <p>To fulfill this recommendation, MCFD has instead proposed that it will include Key Worker functions as part of goal focused services of the CYSN Service Framework and commit to utilizing an ongoing developmental evaluation approach to inform continuous improvement related to the new service approach, including promising practices for FASD, and outcomes measures for all children and youth.</p>	<p>No Progress</p> <p>The Representative has determined that there are no actions planned by MCFD to complete a comprehensive review of evidence and promising practices specific to serving children and youth with FASD. As such, the Representative has not approved the Action Plan for this recommendation and finds no evidence of progress.</p> <p>The Representative notes that MCFD’s Year 1 progress report indicates it will maintain the KWSPSP as it transitions to the new CYSN service approach. However, the Representative sees no evidence that MCFD has taken immediate action to ensure that the KWSPSP has consistent quality service and is accessible to families across service regions as called for in her recommendations. Instead, the ministry has advised the Representative that it will not be investing more resources into the KWSPSP program during this transition period. In fact, the Representative’s recent assessment of KWSPSP funding identified a continued decline in investment in these services since the release of her report by more than 10 per cent from 2021/22 to 2022/23. She also notes that MCFD’s own internal costing analysis in 2019 determined that funding for this program has not grown since the 2016 fiscal year and investments are inconsistent across regions, meaning the inaccessible and inequitable nature of this service has been known and not addressed for more than three years. Given these findings, the Representative has determined that children and youth with FASD have fewer services now than they had when she released her report in 2021 and will request a more robust plan to address her recommendations before approving the Action Plan.</p>
<p>Year 2 Evidence – Received May 2023</p>	<p>Year 2 Assessment</p>
<p>MCFD has provided InSpire Kids – FASD Support Society of BC a one-time only grant of \$250,000 in 2023 to undertake a review of best practices in the provision of services and support to children and youth with FASD and their families. MCFD is also enhancing the Key Worker and Parent Support Program (KWSPSP) with the goal of doubling the funding to allow support for approximately 2,500 additional families with a child or youth with FASD.</p> <p>MCFD has also reported that they plan to utilize data collected through the evaluation of the four pilot FCCs to inform MCFD’s overall efforts to strengthen its approach for supporting</p>	<p>No Progress</p> <p>MCFD has not made progress towards this recommendation which had the target dates of September 30, 2021 for enhancements to the KWSPSP and by March 20, 2022 for a review of best practices.</p> <p>While MCFD has reported both the allocation of a grant to support a review of best practice and enhanced funding for the KWSPSP, at this time both initiatives are in the preplanning stages.</p>

<p>children and youth with FASD and their families. However, this data will not be diagnosis-specific. MCFD reports that it will create awareness of outcomes for children/youth through improved data collection and by tracking the number of children and youth newly receiving services and seeing improvement on more than one goal of their support plan.</p>	<p>The Representative will be monitoring this work for implementation and to ensure the scope of the comprehensive review of evidence-based and promising practices specific to serving children and youth with FASD that is called for, will be possible within the grant to Inspire Kids.</p>
---	---

Recommendation	
<p>#4</p>	<p>Recommendation 4: As a first step toward realizing fundamental changes in practice that address racism, stigma and bias, MCFD, in collaboration with ICFSAs, community service agencies and caregivers, to conduct a review of existing FASD awareness training and needs of all front-line staff working with children and youth with FASD. MCFD, working with ICFSAs, to use this review to support the development of evidence-based, culturally attuned and regularly updated training materials that ground a required training program for current staff across the range of MCFD service lines and, in particular, CYMH, CYSN, child welfare and youth justice. This awareness training should then be incorporated into basic entry training for newly hired staff and made accessible to community service agencies and caregivers.</p> <p>MCFD to complete the reviews and curriculum development and begin training by March 31, 2022, and complete training of all relevant ministry and agency staff by March 31, 2023.</p>
Ministry's Response	RCY Assessment
Year 1 Evidence – Received July 2022	Year 1 Assessment
<p>To address this recommendation, MCFD plans to create an advisory circle and a strategy for internal and external engagement that will inform the assessment of FASD training, training needs and training delivery approach. It plans to survey existing FASD training, complete its review and procure the development of FASD training for staff (MCFD & ICFSA) delivering services to children and youth with FASD.</p> <p>The ministry's Year 1 progress report indicates a project charter was signed May 11, 2022, the survey of FASD training is complete and the advisory circle began on May 2, 2022.</p> <p>MCFD completed a survey of organizations that provide FASD training, however the ministry reported that they were unable to assess the culturally sensitivity, inclusivity, or research-based lens in their review. No information about next steps was provided.</p>	<p>No Progress</p> <p>The Representative notes that work has begun on this recommendation through the creation of a project charter, survey of training available and calling of an advisory circle. However, she also notes that these preplanning activities fall short of the deadline of training beginning by March 31, 2022.</p> <p>Further, upon reviewing the evidence, the Representative notes that within this project charter the Budget Estimate has been left incomplete, no subject matter experts have been identified and the advisory circle membership is largely internal to MCFD, demonstrating an ongoing pattern of inadequate engagement of partners. MCFD staff also reported that its survey of FASD training was unable to verify if training options identified were developed with a culturally sensitive, inclusive or research-based lens. Given this, the Representative is concerned that the</p>

	<p>actions outlined and preplanning progress to date will not address the racism, stigma and bias identified in the <i>Excluded</i> research.</p> <p>The Representative also notes that MCFD has been unable to complete analysis on existing FASD awareness training needs of all front-line staff working with children and youth with FASD and does not include any actions related to implementation in its planning – specifically steps to complete training of all ministry and agency staff by March 31, 2023.</p> <p>Given the above, the Representative has not found evidence of progress to directly support the implementation of the recommendation at this time and will request a more robust plan to address her recommendations before approving the Action Plan.</p>
<p>Year 2 Evidence – Received May 2023</p>	<p>Year 2 Assessment</p>
<p>MCFD launched the Fetal Alcohol Spectrum Disorder Fundamentals training in March 2023 which is recommended for all ministry staff and Indigenous Child and Family Service Agency staff whose work falls under the <i>Child and Family Community Services Act</i>. The training course is tailored to the participating staff for their specific learning needs and job roles. MCFD has detailed a requirement that staff operating under the <i>CFCSA</i>, including staff supporting CYSN families and youth who are involved in the youth justice system, are expected to complete the FASD training within two years.</p> <p>Community partners and caregivers have also been given access to a CanFASD foundation course for learning relating to Fetal Alcohol Spectrum Disorder, and the ministry has shared this resource with BC Foster Parents Association (BCFPA) via email to their Executive Director in April 2023.</p> <p>No evidence on the number of staff or caregivers who have completed the training was provided in the update.</p>	<p>Some Progress</p> <p>The Representative is encouraged to see the completion of a new Fetal Alcohol Spectrum Disorder training course for ministry staff, partners and caregivers informed by an advisory circle and a survey of existing training.</p> <p>However, key elements of the recommendation remain unaddressed including: assessing the needs of all front-line staff working with children and youth with FASD, collaboration with ICFSAs, community service agencies and caregivers to develop the training, and the inclusion of training as mandatory in basic training. Instead, the training was developed internally and is being delivered as self-directed learning. While some progress has been made to create an internal training, efforts fall short of the recommendations and without data on the uptake, the RCY is unable to monitoring the implementation of the new training at this time.</p>

Recommendation	
<p>#5</p>	<p>Recommendation 5: That the Ministry of Mental Health and Addictions (MMHA), in collaboration with MCFD, ICFSAs and the Ministry of Health, lead a review, and develop and implement a plan, to provide effective and accessible mental health services for children and youth with special needs, including FASD. This should include a review of evidence-based, culturally attuned and promising practice models of therapy, intervention and care for children and youth with special needs including FASD, who have mental health impacts, as well as an assessment of current resourcing and resource gaps. The findings of this review and planning should be prioritized and built into MMHA’s Pathway to Hope for implementation.</p> <p>MMHA to complete the review and plan by March 31, 2022, with MCFD and Health beginning the implementation of new service approaches and enhanced services by Oct. 1, 2023, and completing implementation by March 31, 2024.</p>
Ministry’s Response	RCY Assessment
Year 1 Evidence – Received July 2022	Year 1 Assessment
<p>MMHA submitted its Action Plan on June 20, 2022. The plan has not been approved by the Representative as it is missing information regarding the implementation and resourcing of necessary system improvements.</p> <p>MMHA’s proposed plan to address this recommendation includes actions to complete a review of research, a jurisdictional scan, and a review of models of care. The plan includes partner engagement to validate findings and support system improvements for program development for <i>A Pathway To Hope</i>.</p> <p>In its annual update, MMHA reports it has drafted a research proposal and will be engaging with partners to validate and refine the approach before research begins. At this time, MMHA and Health have completed a scan of recent research and identified relevant research underway to support pre-planning activities.</p> <p>The MMHA Action Plan also speaks to ongoing efforts to implement <i>A Pathway To Hope</i> initiatives and note that these services are expected to be accessible for children and youth with special needs.</p> <p>In its annual update, MMHA commits to continuous improvements to mental health and substance use supports following the review.</p>	<p>No Progress</p> <p>The Representative has assessed MMHA’s Year 1 progress report and found that it has begun pre-planning the review to identify effective and accessible mental health services for children and youth with special needs, including FASD. At the time of MMHA’s Year 1 Report, the review had not begun, and is now overdue as the Representative called for the work to be completed by March 31, 2022.</p> <p>The Representative has not yet approved the Action Plan and is awaiting more information from MMHA on the implementation and resourcing of necessary system improvements.</p>

Year 2 Evidence – Received May 2023	Year 2 Assessment
<p>A cross-ministry steering committee on child, youth and young adults has been established, with the ministry of Mental Health and Addictions (MMHA) acting as chair with representation from the ministries of Children and Family Development, Health, and Education and Childcare. Discussions specific to mental health services for children and youth with support needs (CYSN) is ongoing. From this cross-ministry approach, there is a workplan specific to mapping of the CYSN services under development with the MMHA.</p> <p>The ministries of Mental Health and Addictions, and Health have completed a review of recent research to identify research projects already underway that may address components of the current recommendation.</p> <p>Work is underway to expand access, integration and quality of mental health and substance use supports for all children and youth, including children and youth with support needs. Implementation updates for the past year have been provided for Integrated Child and Youth teams based in schools, early childhood services, substance use beds and services, and Foundry Centres.</p> <p>The ministries are currently working in collaboration to identify opportunities for leveraging new and emerging Fetal Alcohol Spectrum Disorder training to support enhanced competency across <i>Pathway to Hope</i> initiatives. This work is ongoing and will also be informed by outcomes of research into mental health and substance use supports for children and youth with support needs previously identified.</p>	<p>No Progress</p> <p>The Representative is notably concerned by the limited evidence that supports direct implementation of the current recommendation. Whilst evidence of steering committees, and research scoping has been provided, most work remains firmly in early planning stages. The work has yet to begin on the recommendation to review, and develop and implement a plan, to provide effective and accessible mental health services for children and youth with special needs, including FASD.</p>

Recommendation	
#6	<p>Recommendation 6: That the Ministry of Health incrementally reduce wait times for complex developmental behavioural conditions (CDBC) diagnostic clinics, and also secure additional resources to provide for periodic follow-up assessments, at key development stages from infancy through to adolescence.</p> <p>The Ministry of Health to reduce wait times to nine months by March 31, 2022; to six months by March 31, 2023; to three months by March 31, 2024; and thereafter increase capacity to provide for follow-up assessments.</p>
Ministry's Response	RCY Assessment
Year 1 Evidence – Received July 2022	Year 1 Assessment
<p>HLTH submitted its Action Plan on June 20, 2022. The plan was approved by the Representative on Aug. 30, 2022.</p> <p>In response to this recommendation, HLTH has developed a two-phased approach to addressing wait times for CDBC assessments with short-term actions to address immediate need, and long-term actions to address, sustain and support further improvements.</p> <p>Short-term actions include an enhanced wait list management strategy and the development of partner tables to focus on improving services, collaborative problem solving and standardization.</p> <p>HLTH's Year 1 progress report indicates that the 1,100 families on the wait list have not yet been contacted, and no evidence of progress on the catch-up strategy was reported. HLTH has also not yet begun partner tables.</p> <p>Long-term actions include the development of standardized provincial care strategies as part of the Care Management Strategy, the establishment of a comprehensive evaluation framework and a sustainment strategy.</p> <p>HLTH's Year 1 progress report indicates it has begun a jurisdictional scan of assessment and referral pathways.</p>	<p>No Progress</p> <p>The Representative has determined that pre-planning for short- and long-term actions to address this recommendation are underway with the introduction of an enhanced wait list management strategy and the jurisdictional scan of referral pathways. With no families contacted to date, no progress has been made on the first phase of actions to reduce wait times.</p> <p>The Representative regularly monitors wait times and wait lists as she has made recommendations to incrementally reduce wait times for complex developmental behavioural conditions diagnostic clinics within two recent reports (Alone & Afraid, 2018; Excluded, 2021). As of Feb. 3, 2022, the provincial average wait time was 67.1 weeks (15.4 months), which is 1.7 times higher than the target to have a nine-month wait time by March 31, 2022 in the Excluded recommendations.</p> <p>While the Action Plan developed by HLTH is promising, progress is overdue.</p>

Year 2 Evidence – Received May 2023	Year 2 Assessment
<p>The ministry of Health (HLTH) has reported that efforts to address short term and long term waitlist reduction have continued with additional clinics initiated and implemented from June 2022 to Feb/Mar 2023 to reduce waitlist in addition to new staffing, added assessment capacity and contract capacity.</p> <p>In addition, an Indigenous Patient Advisor was recruited in April 2023 and the Complex Developmental Behavioural Conditions Network (CDBC) is now working to develop a robust engagement plan that includes multiple forms of engagement with Indigenous families and communities. HLTH, CDBC, and the Jordan’s Principle Enhanced Coordinator’s Hub (the Hub) are planning a joint initiative to provide outreach diagnostic clinics to First Nations children across BC through Jordan’s Principle. CDBC is currently working to understand the needs and desires of First Nations communities, in order to provide appropriate services through Jordan’s Principle funding.</p> <p>The combined wait list for Vancouver Coastal Health (VCH) and Fraser Health Authority (FHA) has decreased by 65% since March 2022, from 502 to 174 children/youth. There has also been a 20% decrease in provincial wait times, from 68 weeks in 2020/21 to a current median wait time of 55.4 weeks.</p> <p>HLTH has stated its plans to work with the Provincial Health Services Authority (PHSA), regional health authorities, and others to create partnership tables focused on improving access, shared problem-solving, and standardization for children and youth with support needs. These tables will also engage with healthcare providers and families. Full implementation of the partnership tables is currently on hold to identify the goals and concerns of the provincial operational working group.</p> <p>Engagement interviews with families were completed in November 2022 and revealed the strengths and limitations of the current CDBC assessment and referral process and identified concerns associated with the provision of trauma-informed care and the wait times for assessment. A survey for assessment providers was completed in April 2023. Results from the survey will inform a Focus Group with assessment providers (to be held in May/June 2023)</p>	<p>Some Progress</p> <p>The Representative is encouraged to see substantial progress in reducing wait times for complex developmental behavioural conditions (CDBC) diagnostic clinics, as seen through the additional staffing and creative short term ‘catch up’ plans such as Saturday clinics and joint-outreach. HLTH has provided evidence of a significant reduction in wait times consistent with RCY’s monitoring data – however with a current wait time of over 12 months, there is still a distance to go to reach the recommended three months by March 2024.</p> <p>HLTH’s approach also notes efforts to improve access and work across health partnership tables and programs (including Jordan’s principle) and to increase feedback and engagement from families and healthcare providers. The Representative is encouraged by these developments and is hopeful that a long-term plan to address CDBC wait times and assessment policies will result from this work.</p> <p>It is yet unclear how these positive changes will become permanent solutions and how HLTH will secure additional resources to provide for periodic follow-up assessments at key development stages from infancy through to adolescence.</p>

<p>designed to identify concerns around cultural safety and addressing racial bias in FASD assessment for Indigenous children.</p> <p>An in-person Provincial Collaborative meeting was scheduled for May 15 and 16, 2023 to develop a strategic, provincially consistent approach for continuing to respond to the RCY <i>Excluded</i> report recommendations.</p> <p>The Clinical Coordinator and other PHSA staff are continuing to develop strategic plans to standardize provincial care pathways for children and youth with support needs through mechanisms such as standardized triage assessments.</p>	
--	--

Recommendation	
#7	<p>That the Ministry of Health, in collaboration with the First Nations Health Authority and with guidance from the Task Team formed as a result of the In Plain Sight report, apply learnings from the review of systemic bias to referral pathways and assessment processes for CDBC diagnostic clinics. The changes/improvements should specifically address the issue of bias with regard to the referrals of First Nations, Metis, Inuit and Urban Indigenous children and youth for FASD assessments and ASD assessments.</p> <p>Ministry of Health to complete the review and implement recommended improvements by March 31, 2022.</p>
Ministry's Response	RCY Assessment
Year 1 Evidence – Received July 2022	Year 1 Assessment
<p>In response to this recommendation, HLTH has developed a detailed plan to conduct a retrospective review to understand the impact of Indigenous self-identification, as well as plans to build cultural safety capacity within BCAAN/CDBC. HLTH has also committed to working with HLTH's new Indigenous health and Reconciliation Division, the PHSA and FNHA to develop educational content to address Indigenous-specific racism in services for children and youth with FASD.</p> <p>HLTH's Year 1 progress update indicates that this work is underway.</p>	<p>Some Progress</p> <p>The Representative has reviewed HLTH's Year 1 progress report and has determined that some progress has been made including the completion of activities that directly support implementation.</p> <p>The Representative is encouraged to see changes within intake pathways already complete but is concerned that Indigenous self-identification has been introduced prior to addressing systemic bias in these pathways. The Representative has raised this concern with HLTH and will be monitoring the timeliness of efforts to apply learning from In Plain Sight, build cultural safety and address Indigenous-specific racism for FASD pathways closely.</p>

<p>HLTH has also committed to make changes to intake processes to include voluntary self-identification with a focus on process improvement as well as a model of care with Indigenous cultural safety and humility considerations.</p> <p>HLTH's Year 1 progress update indicates that changes to intake process to include voluntary self-identification has been completed.</p>	<p>At this time, progress on this recommendation is overdue as the Representative called for all of the work to be complete by March 31, 2022.</p>
<p>Year 2 Evidence – Received May 2023</p>	<p>Year 2 Assessment</p>
<p>In HLTH's year two progress report, they have indicated that approximately 1,000 families were contacted to better understand the demographics of the children/youth and families served by their program, including Indigeneity.</p> <p>In April 2023, Complex Developmental Behavioural Conditions Network (CDBC) and BC Autism Assessment Network (BCAAN) recruited to a Patient/Family Advisor position, who, along side an Indigenous Parent/Family Advisor, will collaborate with the Director of Indigenous Children and Women's Health within the PHSA to help build cultural safety and understanding into the referral and assessment processes.</p> <p>HLTH met with representatives from Indigenous Health and Reconciliation Division on December 5, 2022, and a monthly recurring meeting has been organized to ensure work for this recommendation aligns with the Health Standards Organization Cultural Safety and Humility Standard.</p> <p>An Indigeneity self-identification process was implemented in June 2022. While provincial practice standards outline that all families referred to CDBC should be asked if they would like to self-identify as Indigenous, implementing this practice remains challenging and is not yet consistently adopted across the province. At this time, CDBC also began to collect the child's gender identity, instead of simply collecting the child's biological sex. Further efforts to enhance demographic data collection, in alignment with the Grandmother's Report, are underway.</p>	<p>Some Progress</p> <p>The Representative has reviewed the evidence provided and continues to assess the recommendation as some progress having been made that directly supports the implementation.</p> <p>There are encouraging changes in demographic data collection to help improve referral pathways, although there remains a concern that Indigenous self-identification has been introduced prior to addressing systemic bias in these pathways. HLTH also notes that, whilst Indigeneity self-identification process is in place, implementing this practice consistently remains challenging.</p> <p>HLTH has not yet provided a plan for how the new Patient/Family advisor position will build cultural safety and understanding into the referral and assessment processes to the degree called for in the <i>In Plain Sight</i> review as this will require policy and practice change across the service – not just in one role.</p> <p>Progress on this recommendation remains overdue as the Representative called for all of the work to be completed by March 31, 2022.</p>

<p>A review of the FASD referral and assessment process is in progress and includes the following engagements:</p> <ul style="list-style-type: none"> • Family focus group • Indigenous family focus group • Assessment provider survey; Assessment provider focus group • FASD Provincial Referral Maps • Information gathered from this review will identify current strengths and opportunities for improvement. 	
--	--

Recommendation	
#8	<p>Recommendation 8: That the Ministry of Health conduct an assessment of existing FASD awareness training and the training needs of appropriate front-line staff working with children and youth with FASD, leading to the development of evidence-based, culturally attuned, Nation-specific, and regularly updated training materials that ground a mandatory training program for current staff across the range of health services.</p> <p>Ministry of Health to complete the assessment of existing FASD awareness training by March 31, 2022. Sequentially, the Ministry of Health to identify appropriate priority front-line providers to receive training, by Sept. 30, 2022, and develop training and access to training by Sept. 30, 2023.</p>
Ministry's Response	RCY Assessment
Year 1 Evidence – Received July 2022	Year 1 Assessment
<p>In response to this recommendation, HLTH has developed a phased plan that includes a review of the current state of FASD awareness training, enhancing existing FASD awareness training, cultural safety and humility, and the historic and ongoing context of colonization and Indigenous-specific racism, as well as the phased implementation of the new training.</p> <p>HLTH's annual update indicates that the ministry is working with internal and external partners and has completed the assessment of FASD awareness training. HLTH has also identified opportunities to collaborate on early findings and align partner engagements as the Representative has called for complementary training in education. HLTH also reports that it</p>	<p>Some Progress</p> <p>The Representative has reviewed the Year 1 progress report from HLTH and has determined that work of phase one, to review the current state of FASD awareness training, is underway with the assessment of training now complete. She is encouraged to see that HLTH has also begun activities that directly support implementation for phase two, enhancing FASD training, by convening internal and external partners.</p> <p>The Representative also notes that this is the only recommendation in which government has sought opportunities to work across systems, by connecting with the Ministry of Education to</p>

<p>has begun to review current work related to cultural safety and humility within the health care system.</p>	<p>identify opportunities to collaborate on early findings and align partner engagement for FASD awareness training.</p> <p>HLTH has fulfilled the first part of this recommendation to complete the assessment of existing FASD awareness training by March 31, 2022.</p>
<p>Year 2 Evidence – Received May 2023</p>	<p>Year 2 Assessment</p>
<p>In December 2022, HLTH completed: 1) an assessment of FASD awareness training via a literature search of relevant training curricula in BC and Canada, and 2) completed a review of current work underway related to cultural safety and humility in the provincial health care system. Results from these reviews identified the importance of promoting trauma-informed and culturally safe practices in the training module as well as racialized implications of FASD diagnosis, and opportunities to mitigate stigma and bias associated with FASD.</p> <p>The ministry of Education and Child Care (ECC), and MCFD have also reported opportunities for FASD awareness training. Following this, HLTH intends to seek opportunities to collaborate on early findings and align partner engagement opportunities.</p> <p>Results from the FASD referral mapping process in recommendation #7 and the Assessment Providers Survey currently in progress in recommendation #6, will inform and identify front-line staff and the type of training needed to support providers working with children and youth with FASD and their families.</p>	<p>Some Progress</p> <p>While the Representative is encouraged that HLTH has completed reviews of existing FASD awareness literature and training resources, there is still no plan for how HLTH will design, develop and deliver training for priority front-line providers.</p> <p>While the Representative is encouraged to see HLTH has committed to learn alongside the now live ECC and MCFD FASD trainings, she continues to see the siloed approach to training as a disservice to children and families who have to access supports across service providers.</p>

<p>Recommendation</p>	
<p>#9</p>	<p>Recommendation 9: MCFD together with the Ministry of Citizens’ Services to initiate the development of a cross-ministry plan, in collaboration with the ministries of Health, MMHA, Social Development and Poverty Reduction, and Education, and in association with ICFSAs, health authorities and Community Living BC, to routinely collect high-quality demographic and service data that allows for disaggregation, providing an essential foundation for more effective policy development, program provision and service monitoring for children and youth with special needs and their families, including those with FASD who are receiving services from these public bodies.</p> <p>The cross-ministry plan to be completed and implemented by April 1, 2022 and fully implemented by March 31, 2024.</p>

Ministry's Response	RCY Assessment
<p>Year 1 Evidence – Received July 2022</p>	<p>Year 1 Assessment</p>
<p>In February 2022, four months after <i>Excluded</i> Action Plans were due, MCFD notified RCY that it would no longer be leading this recommendation, and that Citizen Services would do so. CITZ submitted its Action Plan on May 30, 2022. The Representative has not yet approved the Action Plan as it is missing information regarding the implementation and resourcing of necessary data improvements.</p> <p>In response to this recommendation, CITZ outlines legislative changes underway that will allow the collection and disaggregation of data and its current work to coordinate actions across government to use data to advance equity, enhance insights and to support reconciliation in the BC Data Plan. Its annual progress report indicates that Anti-racism Data Legislation was introduced May 2022 and that the BC Data Plan has been approved by Cabinet. No actions related to implementation are included.</p> <p>CITZ's Action Plan also notes the availability of the Data Innovation Program, a data integration and analytics program that links and de-identifies data from multiple ministries. CITZ reports that a project specific to FASD could better understand trends and complexity of the issue and that demographics data will be available in winter 2023 for analysis but stops short of committing to carrying out or implementing findings of such a project.</p> <p>Finally, CITZ's Action Plan details work underway to develop information systems for the CYSN service transformation, the focus of this recommendation. The plan reports that information system solutions are expected to be operational for Early Implementation Areas in winter 2022/23 but that it will only be tracking the "type and volume of supports and services." The information systems development plan does not include actions that commit to the collection of high-quality demographic data that will allow for disaggregation as recommended.</p>	<p>No Progress</p> <p>The Representative and her team are encouraged to see progress in legislation that will support the development of a provincial data plan to coordinate the use of data to advance equity, enhance insights and support reconciliation. However, the action steps included in the proposed Action Plan have not addressed how the legislative changes will be implemented to provide the essential foundation for more effective policy development, program provision and service monitoring.</p> <p>Given the missing information regarding the implementation and resourcing of necessary data improvements, the Representative has not approved the CITZ Action Plan and has requested a revised plan focused on implementation. With considerable emphasis put on MCFD's Early Learning Evaluation of the CYSN Service Framework to evaluate and monitor the transformation underway, high-quality demographic and service data that allows for disaggregation will be essential to monitor equity and accessibility of care for children and youth with special needs and their families, including those with FASD.</p>
<p>Year 2 Evidence – Received May 2023</p>	<p>Year 2 Assessment</p>

<p>MCFD has provided no actions towards the development of a cross-ministry plan to routinely collect high-quality demographic and service data that allows for disaggregation, as called for in this recommendation.</p> <p>Instead, MCFD reports that they will be implementing information system enhancements in the four Family Connections Centres (FCC) pilot areas. Service providers and MCFD will have the ability to track and monitor the type and volume of supports and services that families and children are accessing through the FCCs and Disability Services. The pilot FCCs will start using the system as each FCC is due to open in the Spring of 2023. Data extraction and analysis including testing, validation, and quality assurance of the data is expected to take ‘several months’ after the FCCs start entering information.</p> <p>CITZ manages the Data Innovation Program which securely links and de-identifies data from multiple ministries and organizations. Inventory of demographic variables available in the Data Innovation Program pertaining to Children and Youth with Fetal Alcohol Spectrum Disorder is complete. Demographics data from the population-level survey will be available for analysis in the Data Innovation Program in early 2024.</p>	<p>No Progress</p> <p>Previous year reporting indicates that government is working to improve the quality of demographic data for B.C.’s population and has completed an inventory of cross-ministry demographic data available for individuals with Fetal Alcohol Spectrum Disorder (FASD) however, MCFD, or government writ large, has not provided any evidence towards the implementation of a cross-ministry plan to collect high quality demographic and service data by the target date of April 1, 2022.</p> <p>The collection of demographic data alone does not meet the spirit or intent of this recommendation therefore the Representative continues to assess as no progress.</p>
---	--

Recommendation	
#10	<p>Recommendation 10: That the Ministry of Education update its Inclusive Education Policy and supporting documents and incorporate information to increase awareness and understanding of the specific learning needs of children and youth with FASD and related disorders into the supporting documents.</p> <p>Ministry of Education to update Inclusive Education Policy and supporting documents and incorporate information to enhance awareness of FASD and related disorders by March 31, 2022. *</p> <p>*Target date revised from Sept. 1, 2021, to allow for meaningful consultation.</p>
Ministry’s Response	RCY Assessment
Year 1 Evidence – Received July 2022	Year 1 Assessment

<p>EDUC submitted its Action Plan on June 25, 2021. The plan was approved by the Representative on Aug. 11, 2021.</p> <p>To address this recommendation, EDUC’s Inclusive Education Branch has committed to incorporate information to increase awareness and understanding of the specific learning needs of children and youth with FASD into its new Inclusive Education Policy. The activities included in the recommendation Action Plan include the development of new policy, public consultation and release of the new policy which will move towards a needs-based model of learning support for children and youth with support needs.</p> <p>EDUC’s Year 1 update indicates that this work is underway but is delayed with the policy drafted and pending approval for public consultation. At this time, EDUC is working with First Nations Education Steering Committee (FNESC) and The Métis Nation BC (MNBC) to ensure the draft policy and related documents align with the <i>Declaration on the Rights of Indigenous Peoples Act</i>.</p>	<p>Some Progress</p> <p>The Representative is encouraged to see some progress towards implementation of new inclusive education policy including work with FNESC and MNBC and the forthcoming public consultations. At this time, the progress on this recommendation is overdue despite the target date being amended to March 31, 2022 to ensure time for meaningful public consultation.</p>
<p>Year 2 Evidence – Received May 2023</p>	<p>Year 2 Assessment</p>
<p>ECC’s year two update reports that preliminary drafts of a proposed Inclusive Education Policy and related documents have been developed to shift the focus from a medical diagnostic model to a needs-based model. This approach will allow educators to focus on the specific learning needs of students with Fetal Alcohol Spectrum and related disorders. Consultation on the proposed policy with rightsholders and other sector stakeholders is ongoing.</p> <p>ECC included a note requesting that RCY’s recommendation #10 implementation target date of March 31, 2022 for finalization of policy be amended as the ministry aligns engagement and consultation on the Inclusive Education Policy and related documents to the ongoing MCFD CYSN consultation and engagement process.</p>	<p>Substantial Progress</p> <p>The Representative notes ECC’s progress on the development, engagement, and ongoing consultation regarding the Inclusive Education Policy. This work continues to be behind the recommended timeline and the Representative is concerned to see the potential alignment of engagement and consultation with MCFD’s CYSN Framework given the significant delays and now paused work.</p> <p>Work towards need-based models of learning support and increased awareness and understanding of the specific learning needs of children and youth with FASD and related disorders, cannot and should not be delayed by operational model testing elsewhere in the system.</p>

Recommendation	
#11	<p>Recommendation 11: That the Ministry of Education work with the British Columbia Council for Administrators for Inclusive Supports in Education (BC CAISE) to support staff training and development needs for educators and school staff who work with children and youth with FASD or suspected FASD, and their families, and build on evidence-based and promising practice approaches to better support inclusion and improved learning outcomes for children and youth with FASD.</p> <p>Ministry of Education to work with BC CAISE and partners to support the implementation of staff training and development to better support inclusion and improved learning outcomes for children and youth with FASD and related disorders by Sept. 1, 2022.</p>
Ministry's Response	RCY Assessment
Year 1 Evidence – Received July 2022	Year 1 Assessment
<p>To address this recommendation, EDUC, BC CAISE and the Provincial Outreach Program for FASD (POPFASD) have partnered to create and implement staff training and development resources for staff and educators that leverage current courses from POPFASD to improve understanding and supports for students with FASD. Actions include the development of an on-demand online FASD 101 course and the development of a 200 level course that will be hosted on POPFASD's platform and available to B.C. educators, along with the development of a virtual learning series for students focused on destigmatizing, and raising awareness and prevention of FASD.</p> <p>EDUC's Year 1 progress report indicates that POPFASD is working to finalize the on-demand FASD 101 course and that work is underway on an FASD 200 series course. POPFASD has also recorded six presentations on specific topics commonly associated with FASD. Updated and new staff training materials are all on track to meet the deadline of Sept. 1, 2022.</p>	<p>Substantial Progress</p> <p>The Representative recognizes substantial progress towards the implementation of this recommendation with full roll-out of the first phase of training expected ahead of schedule. EDUC has made substantial progress working with POPFASD on the development and implementation of its FASD 101 and virtual learning series with materials being piloted in May 2022 and on track to be released for B.C. educators in September 2022.</p>
Year 2 Evidence – Received May 2023	Year 2 Assessment
<p>ECC, the BC CAISE and POPFASD have partnered to create the following resources:</p>	<p>Substantial Progress</p> <p>The Representative is pleased to see the launch of the new FASD 101 On-Demand course in partnership with POPFASD, with more than 1,005 participants at time of review.</p>

<p>POPFASD's online FASD 101 On-Demand course was made available for registration beginning October 3, 2022. As of May 2023, the course has had 1,005 participants.</p> <p>Development of the FASD 200 series course will continue over the 2023-2024 school year with anticipated completion September 2024.</p> <p>POPFASD has recorded six presentations to create a virtual learning series on specific topics commonly associated with FASD including Anxiety, FASD Awareness, Substance Use, Gender, Sexual Orientation, and Healthy Relationships. The virtual learning series will be available on the POPFASD website for educators and students. The anticipated release of the virtual learning series is November 2023</p>	<p>The Representative will be monitoring the completion of the FASD 200 series and ECC's work with BC CAISE and partners to promote awareness and support the implementation of these new trainings.</p>
--	--