

Alone and Afraid: Lessons Learned from the Ordeal of a Child with Special Needs and His Family **RCY Annual Review Year 4**

The Representative's report *Alone and Afraid: Lessons learned from the ordeal of a child with special needs and his family* was released in December 2018 and included eleven recommendations. Tracking of recommendation implementation is normally undertaken on an annual basis, however on occasion, circumstances can delay the assessment and/or posting. The public bodies provided the information for Year 4 progress assessment in February 2023. The tables below shows the results for the first, second, third and fourth year assessments.

In this four-year review, the Representative is gravely concerned at the considerable lack of progress towards fulfilling the recommendations laid out in this report and notes that for some recommendations progress has in fact regressed over time. The Representative regularly hears from families of children and youth with disabilities that they are in crisis and that they need supports now. Since the announcement of the "reset" of the Ministry of Children and Family Development's CYSN Framework in late 2022, some of the progress made towards recommendations have slid backwards to the pre-planning stages. For other recommendations the Representative is concerned about the lack of cross-ministry integrated planning, and limited evidence of the impact or effectiveness of changes that have been made for the children, youth and families who crucially need these services. The RCY is working with CYSN experts and families caring for children with disabilities to continue to raise awareness about the urgent need for immediate and long-term transformational change.

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: March 11, 2024.

Recommendation	
#1	<p>That MCFD undertake a comprehensive assessment of the actual need for CYSN services across B.C. and the capacity of the current system to meet those needs. This assessment to examine funding, staffing levels and workloads, program delivery and wait times. Findings to be used to inform comprehensive service improvements so all eligible children with special needs and their families receive culturally respectful, appropriate and timely services and supports.</p> <p>MCFD to complete the comprehensive assessment and plan by the fall of 2019, seek necessary funding enhancements and begin implementation of changes by April 2020.</p>
Ministry's Response	RCY Assessment
Year 1 Evidence – Received April 2020	Year 1 Assessment
<p>MCFD contracted with two research firms to complete consultation sessions to help inform a new CYSN framework which included assessing the actual need for CYSN services and determining where gaps exist. The research firms analyzed eligibility, equity, cultural responsiveness, inclusion and family supports (completed June 30, 2019).</p> <p>A predictive workload analysis and simulation model was designed to examine workload, staffing and service level risk (completed Oct. 24, 2019).</p> <p>MCFD developed a new CYSN Service Framework to provide overarching policy that guides the investment and provision of a suite of CYSN services. The framework aims to assist families, service providers and other ministry partners in understanding: who MCFD CYSN services are for; what they do; what families can expect when receiving them; and how they complement and relate to one another.</p>	<p>Some Progress</p> <p>MCFD completed a comprehensive assessment of the actual need for CYSN services and an assessment of the current system to meet those needs using a predictive workload analysis and simulation model and tracking of CYSN service requests.</p> <p>MCFD will be implementing the new CYSN Service Framework in Spring 2020.</p>
Year 2 Evidence – Received December 2020	Year 2 Assessment
<p>MCFD is continuing policy analysis, confirming financial implications and seeking direction from senior levels of government on the implementation of the CYSN Service Framework.</p> <p>MCFD is reviewing and assessing jurisdictional scans completed by other provinces and territories around individualized funding; integrated service delivery; promising practices for youth transitioning to employment; and assessment processes to determine eligibility or needs.</p>	<p>Some Progress</p> <p>MCFD has undertaken notable assessment, research and planning activities.</p> <p>There is no evidence that findings from the CYSN Service Framework are being used to inform comprehensive service improvements so all eligible children and youth with special needs and their families receive culturally respectful, appropriate and timely services and supports.</p>

Year 3 Evidence – Received June 2022	Year 3 Assessment
<p>MCFD is continuing the development of the CYSN Service Framework (September 2019 edition) and has begun engagement to validate the new family connection centre model with service providers, sector partners and families. MCFD plans to do a phased implementation of family connections centres, Disability services and Provincial services, beginning in two locations in early 2023, followed by provincial roll-out in fall 2024. The learnings from engagements and the early implementation centres will inform provincial implementation.</p>	<p>Some Progress</p> <p>MCFD is still engaged in early-stage design work for a number of key areas of the CYSN Framework development including: how eligibility and access to services will be determined, which assessment tools will be used and by whom, how children and families currently receiving services will be transferred to the family connection centres and when, how and when Indigenous Rights and Title Holders and agencies will be engaged, and what information and case management systems will be used across sites. Most of the activities that directly support the implementation of the recommendation have yet to be completed.</p>
Year 4 Evidence – Received February 2023	Year 4 Assessment
<p>As of January 2023, MCFD is implementing a needs-based integrated service model in four pilot areas of the province: 1) Haida Gwaii/Prince Rupert, 2) Terrace/Kitimat, 3) Bulkley Valley/Stikine, 4) Central Okanagan.</p> <p>In November 2022 the Province announced:</p> <ul style="list-style-type: none"> • the maintenance of individualized funding for children and youth with an autism diagnosis after 2025, including those who are diagnosed in the future; • the establishment of an engagement process co-designed with First Nations leadership and in partnership with leaders from the disability community; • a pause on the rollout of B.C.’s plan to establish a network of family connections centres, with the exception of the four pilots; and • new interim investments, as the new system is developed, to support children with disabilities and support needs that are currently underserved, including Fetal Alcohol Spectrum Disorder (known as FASD), Down syndrome and other neuro-cognitive developmental disabilities. 	<p>Some Progress</p> <p>Despite ongoing work towards the implementation of four pilot Family Connection Centres (FCCs), this recommendation remains firmly in a planning phase of development with no confirmation of or timeline for provincial implementation. The CYSN transformation initiative has been placed on “pause”.</p> <p>The Representative remains concerned that the comprehensive assessment of the actual need for CYSN services across B.C., and the capacity of the current system to meet those needs, as called for in her recommendation to inform service improvements and necessary funding enhancements remains incomplete.</p> <p>The Representative is encouraged by the opportunity for learning that can come from the pilot FCCs but is concerned that an evaluation plan has yet to be developed and that there have been delays in contracting and implementing services in a timely way, even in those 4 areas.</p> <p>The Representative appreciates that the new investments promised over the next 3 years highlight a priority to deeper engagement around CYSN reform moving forward, and investments in strategies to strengthen the workforce as human resources remain an ongoing challenge. However, the engagement is long overdue and the “interim” enhancements are not meeting the</p>

	<p>need for a “comprehensive service improvement” plan for the province’s children and youth with support needs.</p> <p>There is also a noted concern from the Representative that the evidence provided shows a lack of consultation with key Indigenous partners which is necessary to ensure that services will be culturally respectful, and appropriate for First Nations, Métis and Inuit children and youth with disabilities.</p>
--	---

Recommendation	
#2	Pending completion of the comprehensive assessment, that MCFD take immediate steps to improve the current accessibility of CYSN services and supports by providing respite within a reasonable period of time, eliminating the need to choose between medical and respite benefits, and monitoring and ensuring follow-up with families not using autism funding.
Ministry’s Response	RCY Assessment
Year 1 Evidence – Received April 2020	Year 1 Assessment
<p>In April 2019, a \$6.3-million increase to respite funding was announced.</p> <p>MCFD is revising respite policy (on track; target is Nov. 30, 2020).</p> <p>MCFD is streamlining respite services to align with CYSN Service Framework (in progress; target is fall 2020).</p> <p>Establishing a strategy that works across MCFD program areas that supports families with autism spectrum disorder (ASD) and makes the best use of our information system to monitor utilization of autism funding and respond where necessary with follow up and support (not yet started; target is fall 2020).</p>	<p>Some Progress</p> <p>MCFD has increased its respite funding. The increase in funding has taken 1,300 of the 3,900 families (as of March 31, 2018) off the respite wait list.</p> <p>MCFD continues to revise its respite policy, streamline respite services and establish a strategy for supporting families with ASD.</p>

Year 2 Evidence – Received December 2020	Year 2 Assessment
<p>In response to COVID-19, MCFD implemented interim policies offering flexibility for families who receive basic Direct Funded/At Home Program respite. Some flexible options may include, but are not limited to, meal preparation/grocery shopping assistance, homemaker supports, caregiver relief support for siblings, online programs for children who are CYSN-eligible, counselling services and any other options that support family functioning and alleviate stress. MCFD also enabled flexible service delivery options for families accessing contracted respite supports.</p> <p>Learnings from the interim policies offering flexibility in the use of respite funding in response to COVID-19 will inform options to improve respite service delivery.</p> <p>Cross-jurisdictional research on respite is informing the respite policy revisions.</p> <p>Autism Funding Utilization Working group established to develop short and long-term strategies to support and provide information to families.</p> <p>Enhanced process for supporting families has been established: After MCFD sends an Autism Funding agreement to families, Specialized Provincial Services (SPS) conducts follow-up calls two weeks, 30 and 60 days after the agreement is mailed if the agreement has not been returned. Once agreement has been received, a welcome call to the family provides information and answers questions. CYSN Social Workers are attaching a priority flag to children who are within six months of their sixth birthday.</p>	<p>Some Progress</p> <p>MCFD has continued to revise its Respite Policy including instituting interim policies that offer greater flexibility for families.</p> <p>MCFD has enhanced its process for providing information to and connecting with families who qualify for Autism funding.</p>
Year 3 Evidence – Received June 2022	Year 3 Assessment
<p>MCFD has advanced \$7 million split into four one-time grants to four community-based service providers. The grants serve as a “boost” for FCYSN respite services until the new CYSN service launches in 2024. This \$7 million is a one-time contribution and is not a permanent increase for the base amount of respite funding.</p> <p>MCFD plans to realign the At Home Program Respite and Direct Funded Respite service approach as part of the new CYSN Service Framework. There will be a continuum of respite supports from basic Direct Funded Respite (DFR), Agency Coordinated Respite (ACR), Caregiver Specific Respite (CSR) to respite through Specialized Homes and Support Services (SHSS).</p>	<p>Some Progress</p> <p>MCFD has prioritized one-time funding to address respite shortfalls and is significantly delayed in the provincial roll-out of the CYSN Service Framework.</p> <p>MCFD has increased the flexibility of respite services for families currently eligible for services and has again provided one-time funding to support community respite services, including funding for up to 400 families with children who have FASD.</p>

<p>Eligibility for DFR, ACR and CSR will be through Disability Services. It will be available to any family (in-care, out-of-care, not-in-care), aligned to their needs, to address an urgent family preservation for a limited period.</p> <p>MCFD reports that this new approach provides families with more varied opportunities to reduce stressors. The ministry speaks to a shift in their conceptualization and a reframing of respite as an outcome, rather than an input. Two examples are in-home supports and direct caregiver supports.</p> <p>The interim policies offering flexibility in the use of direct funded respite in response to COVID (announced Nov 2020) have been made permanent.</p> <p>MCFD also reports that it has completed its Autism Funding Utilization Working group, begun in Year 2, to enhance the agreement process, now including follow-up phone calls and priority flags for children within six months of their sixth birthday.</p>	<p>MCFD is working towards the realignment of services in the CYSN Service Framework to create a continuum of respite supports that is more accessible for families who are eligible for Disability Services. These services are more than two years past their expected implementation date and have now been scaled down to two early implementation sites with provincial roll-out not expected until 2024.</p> <p>The Representative is not satisfied with the enhancements identified by the Autism Funding Utilization Working group as phone calls fail to reflect the active follow-up called for in her report when families are not using autism funding.</p>
<p>Year 4 Evidence – Received February 2023</p>	<p>Year 4 Assessment</p>
<p>MCFD awarded \$2.76 million to the Vancouver Foundation in March 2022 for Fetal Alcohol Spectrum Disorder respite support. The Vancouver Foundation has engaged with two provincial organizations to administer respite funds to families: Carrier Sekani Family Services (CSFS) and The Asante Centre.</p> <p>Specialized Provincial Services (SPS) is continuing with follow-up calls to families with Autism Funding agreements (2weeks/30/60days after Agreements sent to families), as well as Welcome Orientation for new families.</p>	<p>Some Progress</p> <p>The year 4 evidence provided by the ministry shows that the CYSN framework has been “reset” with the ministry returning to early reimagining and engagement planning.</p> <p>The Representative notes prior progress towards implementation have not been made permanent (one-time grants) and there continues to be a lack of timely, permanent infrastructure for respite supports. This year’s grant for respite for families with FASD will support approx. 400 families which represents a small fraction of the population in need of support. Furthermore, it took almost a year after the grant funding was announced for a distribution plan to be rolled out. The ‘lottery draw’ roll out did not take into account acuity of need or time on waiting lists for services. The information within the Ministry was not clearly understood as in one region many families received a letter indicating that they would be losing their respite and if they still required would have to reapply and potentially be placed on the waitlist.</p>

	<p>No evidence as to the effectiveness of SPS call-back process has been provided by the misntiry and so the Representative remains concerned that this passive approach for supporting families will not reach those most in need.</p> <p>Given MCFD is back in pre-planning stages, and the lack of sustained and robust actions to improve the current accessibility of CYSN services and supports by providing respite within a reasonable period of time, eliminating the need to choose between medical and respite benefits, and monitoring and ensuring follow-up with families not using autism funding, the Representative has continued to assess as some progress only.</p>
--	---

Recommendation	
#3	<p>That MCFD take the lead in working with the Ministry of Health and the Ministry of Education to develop an integrated service delivery model that enables appropriate information-sharing between service providers. This model would ensure that children and youth receiving special needs services through MCFD can be supported by a case coordinator who is responsible for navigating access to, and provision of, all necessary services. The case coordinator to remain assigned to the child to ensure appropriate services and facilitate successful transition to adulthood.</p> <p>MCFD to lead development of a comprehensive plan by the fall of 2019 and seek funding and begin implementation of the plan by April 2020.</p>
Ministry's Response	RCY Assessment
Year 1 Evidence – Received April 2020	Year 1 Assessment
<p>MCFD is exploring opportunities for electronic record integration. A short-term strategy for information sharing is expected to be developed by the fall of 2020.</p> <p>MCFD will consider navigation and case coordination within the context of the CYSN Service Framework (spring/summer 2020).</p>	<p>Some Progress – planning No Progress – implementation</p> <p>MCFD, HLTH and EDUC are in the early stages of developing a strategy for information sharing.</p> <p>From the evidence provided, it is unclear what substantive steps have been taken towards implementation of an integrated service delivery system and exploration of a case coordinator other than preliminary meetings with HLTH and EDUC.</p>

Year 2 Evidence – Received December 2020	Year 2 Assessment
<p>The ministries are working through the privacy concerns and cost considerations of an integrated service delivery model and note that solutions require consultation and coordination.</p> <p>Within MCFD, the <i>Collaborative Practice between Children and Youth with Special Needs and Child Welfare Workers Policy</i> is being updated to enhance information sharing.</p> <p>MCFD is exploring parent-driven models as a short-term solution to foster information sharing while mitigating privacy issues. Engagement is needed to determine whether a parent-driven model is a viable solution.</p> <p>Enhancements to early intervention supports and infant mental health services are underway in five communities to promote social and emotional well-being in young children and provide enhanced access to family supports as part of the Pathway to Hope Strategy.</p> <p>As part of the phased implementation of the CYSN Service Framework, MCFD will aim to support integrated service delivery approaches in developmental- and goal-focused services. The CYSN Service Framework is intended to clarify pathways and service expectations regarding what families can minimally expect from services based on their needs. MCFD will consider navigation and case coordination within the context of the CYSN Service Framework.</p>	<p>Some Progress</p> <p>MCFD, HLTH and EDUC remain in the planning stages of an integrated service delivery model that enables appropriate information sharing between service providers.</p>
Year 3 Evidence – Received June 2022	Year 3 Assessment
<p>A parent-driven model to foster information sharing has been implemented. An integrated service delivery model is not currently being pursued. Rather, MCFD has informed RCY that the ministry will aim to support an integrated service delivery approach in developmental- and goal-focused service within the new CYSN Service Framework. MCFD reports that it will consider navigation and case coordination within this framework.</p>	<p>No Progress (reassessed)</p> <p>MCFD has prioritized a parent-driven model for information sharing and is no longer pursuing an integrated service delivery model per Recommendation 3. The shift toward a parent-driven model means the actions taken no longer meet the intention of the recommendation. As such, the progress made towards this recommendation has been reevaluated.</p>

Year 4 Evidence – Received February 2023	Year 4 Assessment
<p>The Ministry of Children and Family Development (MCFD) is establishing an integrated service delivery model that enables appropriate information-sharing between service providers.</p> <p>In four pilot communities:</p> <ul style="list-style-type: none"> there is implementation of an integrated case management system with a service provider portal, information sharing between MCFD staff: Children and Youth with Support Needs Workers (CYSN), Provincial Services Staff, and the range of service providers delivering services through family connections centres. <p>Creation and implementation of a CYSN Resource line to provide current information, eligibility for services and navigational support. MCFD is establishing a primary coordination function when families access any CYSN services in pilot areas. This way families are aware of a single point of contact from which they can coordinate their service journey.</p> <p>MCFD will evaluate the integrated service model with information sharing and primary coordination throughout the pilot process to understand how this deliverable can be advanced.</p>	<p>No Progress</p> <p>The evidence provided by the Ministry of Child and Family Development shows no evidence of continued planning with MCFD, HLTH and EDUC on an integrated service delivery model that enables appropriate information sharing between service providers. Instead MCFD's update focuses on their CYSN Framework four pilot communities. Further, planning for information sharing between the three ministries, appears to have halted, with MCFD focus on information sharing and navigation within and limited to their own MCFD CYSN Framework services.</p> <p>The Representative is deeply concerned to see fundamental improvements such as information sharing and cross-system collaboration being unaddressed in the four pilot communities. Even if successful, families will still be left to navigate health and education services separately, as well as manage the transition to adulthood.</p>

Recommendation	
#4	<p>That MCFD ensure its children and youth with special needs training is mandatory for child protection staff.</p> <p>MCFD to ensure that all child protection social workers complete training by April 2020.</p>
Ministry's Response	RCY Assessment
Year 1 Evidence – Received April 2020	Year 1 Assessment
<p>MCFD is developing an online CYSN training course for MCFD and Indigenous Child and Family Service Agency (ICFSAs which were formerly DAAs) Child Protection workers (on track; target date is Sept. 30, 2020).</p> <p>MCFD has created a project charter for the new CYSN course: "The new training being developed is focused on how child protection workers can access CYSN services for</p>	<p>Some Progress</p> <p>MCFD is developing a new CYSN course for MCFD and ICFSA (formerly DAA) child protection workers.</p>

<p>children/youth and how to work collaboratively with CYSN workers for the best possible outcome for clients.”</p> <p>Over 1,100 child protection workers will require the new CYSN training.</p>	
<p>Year 2 Evidence – Received December 2020</p>	<p>Year 2 Assessment</p>
<p>Within MCFD, the <i>Collaborative Practice between Children and Youth with Special Needs and Child Welfare Workers Policy</i> is being updated to clarify roles, responsibilities and communication between the CYSN, Child Protection, Guardianship and Resource Workers, Child Protection Services and Provincial Centralized Screening processes.</p> <p>The COVID-19 pandemic impeded progress, but the policy was approved. It has not been posted on the ministry’s intranet system.</p>	<p>Some Progress</p> <p>MCFD has resumed development of the policy training module after a delay.</p>
<p>Year 3 Evidence – Received June 2022</p>	<p>Year 3 Assessment</p>
<p>The CYSN training course for Child Welfare Practitioners launched Jan. 26, 2022. The development of this training was limited to in-house MCFD and ICFSA (formerly DAA) participation. MCFD has not provided evidence that the training will be a mandatory requirement for child protection staff.</p>	<p>Some Progress</p> <p>A CYSN training course for child welfare practioners has been launched as of January 2022. The Representative notes that this course does not appear to be mandatory for MCFD and ICFSA (formerly DAA) child protection workers nor have there been reported efforts to ensure all child protection social workers complete the training by April 2020. The CYSN training course therefore only partially fulfills Recommendation 4.</p>
<p>Year 4 Evidence – Received February 2023</p>	<p>Year 4 Assessment</p>
<p>MCFD has reported that CYSN for Child Protection Workers Training is required for MCFD staff and ICFS Agencies who practice under the CFCSA and work with First Nations, Inuit, and Metis children, youth, and families and is recommended for all other MCFD staff.</p> <p>Attendance/Completion data:</p> <p>April 1, 2021-March 31, 2022 (launched late January 2022)</p> <ul style="list-style-type: none"> • 166 completions (145 MCFD, 21 ICFS Agency staff) 	<p>Substantial Progress</p> <p>MCFD has reported that the new CYSN training course for Child Welfare Practitioners is mandatory for all child protection staff. Unfortunately, training completion rates remain low with only 212 staff (~20%) having completed the training at time of the update. This recommendation called for all child protection staff to receive this training by April 2020.</p>

<p>January 2022 – March 2022: 145 MCFD completions/1019 (monthly average CPW head counts) = 14.2%</p> <p>From April 1, 2022 – October 31, 2022</p> <ul style="list-style-type: none"> • 71 completions (67 MCFD, 4 ICFS Agency staff) • 96 enrolled (95 MCFD, 1 ICFS Agency staff) <p>April 2022 – October 2022: 67 MCFD completions*/1001 (monthly average CPW head counts) = 6.6%</p> <p>*in April-October 2022 an additional 95 staff were enrolled but not yet completed the course.</p>	<p>The RCY is encouraged to see substantial progress with training underway and participation made mandatory as recommended.</p>
--	--

Recommendation	
#5	<p>That MCFD take steps to support child protection social workers to adhere to policy on response times to child protection reports and ensure children are seen during child protection investigations. This should include consideration of additional staffing, training and resources. MCFD to track adherence to these policies.</p> <p>MCFD to begin implementation of these changes by April 2019.</p>
Ministry's Response	RCY Assessment
Year 1 Evidence – Received April 2020R	Year 1 Assessment
<p>MCFD developed a cross-divisional strategy to reduce front-line staff workload and increase capacity for family preservation work (completed on Oct. 31, 2019).</p> <p>The ministry's feasibility, assessment and implementation of the cross-divisional strategy to reduce workload and create increased capacity for family preservation work is in progress (target is Nov. 30, 2020).</p> <p>The ministry's streamlining of policy to ensure information is easily accessible by front-line staff, with improved consistency and readability is in progress (target is March 31, 2020).</p>	<p>Some Progress</p> <p>MCFD has developed strategies to reduce front-line workload and increase family preservation work and continues to assess the feasibility of implementing these strategies.</p> <p>MCFD is streamlining policy to make information accessible to front-line staff but it is unclear what steps it is taking to proactively track adherence to child protection policies.</p>

Year 2 Evidence – Received December 2020	Year 2 Assessment
<p>The ministry’s feasibility, assessment and implementation of the cross-divisional strategy to reduce workload and create increased capacity for family preservation work was delayed due to COVID-19 but is back in progress.</p> <p>All CYSN policies have been mapped and inventoried and the policy streamlining project has been operationalized.</p>	<p>Some Progress</p> <p>MCFD has streamlined policy to make information accessible to front-line staff but it is unclear what steps it is taking to proactively track adherence to child protection policies.</p>
Year 3 Evidence – Received June 2022	Year 3 Assessment
<p>Emerging out of the pandemic, MCFD reports that it is now pivoting from its previous approach of increasing capacity for social workers by reducing workload to increasing capacity for social workers to develop relationships and work directly with children and families. MCFD’s new approach will instead focus on core practice accountabilities. This work is being led by a cross-ministry working group with the goal of identifying what is core and critical in the procedures that accompany policy to allow more time for staff to spend with children, youth and families.</p> <p>Currently this approach is being applied to MCFD’s Chapter 3 Child Protection Policies. The core practice accountabilities allow staff to end child protection responses earlier when appropriate; streamline documentation, when possible, to reduce duplication; and include which structured decision-making tools must be used.</p>	<p>Some Progress</p> <p>MCFD has informed the Representative of a pivot away from increasing social worker capacity by reducing workload to increasing capacity for social workers to develop relationships and work directly with children and families. While examples of this new approach have been provided, the Representative does not see evidence of how the reported measures will support social workers to address workload challenges and adhere to policy on response times to child protection reports and to ensure children are seen during child protection investigations.</p> <p>The Representative is concerned with the lack of meaningful progress in addressing the core requirements of this recommendation which were to be implemented by April 2019.</p>
Year 4 Evidence – Received February 2023	Year 4 Assessment
<p>MCFD provided an update on their cross divisional working group that was formed in January 2022 that identified the procedures that frontline staff must complete to ensure the safety and well-being of children and youth. The identified procedures also support practice transformation with Indigenous children, families and communities and enable staff to focus on relational practice by increasing their capacity to connect and strengthen relationships.</p> <p>The Core Practice Accountabilities (CPA): Child Protection include the requirement that all policies and standards are mandatory and identify which procedures must be completed at a minimum.</p>	<p>Some Progress</p> <p>The Representative is encouraged to see efforts to reduce workload for social workers by streamlining policy and practice activities (i.e., clarifying required and discretionary activities) to increase time for youth and families. While MCFD reports that these changes have been made, it is unclear what impact they will have or have had as the RCY was not provided any evidence of the impact of these changes. The Representative will be requesting workload analysis data to determine if these policy and practice shifts will enable social workers to adhere to policy on</p>

<p>Policies related to meeting/interviewing children in a private, face-to-face conversation remains in effect.</p>	<p>response times to child protection reports and ensure children are seen during child protection investigations.</p>
<p>Over 27 Orientation circles were held for staff. Over 1400 staff participated in these sessions.</p>	<p>The Representative acknowledges these steps may support increased adherence to policy on assessment response times, however, she is concerned that no evidence of improvements has been provided. This assessment remains as '<i>some progress</i>' in line with the previous year's review, based on the lack of information related to this recommendation.</p>

Recommendation	
<p>#6 That MCFD and the Ministry of Education develop practice guidelines and a joint protocol to address concerns of unexplained school absences and withdrawals with the view to supporting children, youth and families and addressing barriers to school participation. MCFD and the Ministry of Education to conduct this work in consultation with advocates/stakeholders from the Indigenous and special needs communities.</p> <p>MCFD and the Ministry of Education to complete this work by May 2019.</p>	
Ministry's Response	RCY Assessment
Year 1 Evidence – Received April 2020	Year 1 Assessment
<p>EDUC, with support from MCFD, will develop practice guidelines identifying the roles and responsibilities of MCFD, school boards and independent schools (target is December 2020).</p> <p>EDUC, with support from MCFD, will develop a joint-ministry protocol outlining responsibilities to identify, monitor and/or respond to unexplained absences or withdrawals (target is December 2020).</p> <p>EDUC, with support from MCFD, will consult with rights holders and stakeholders from Indigenous communities and advocates for the rights of persons with disabilities or diverse abilities (not started).</p>	<p>Some Progress – planning No Progress – implementation</p> <p>EDUC and MCFD are jointly working on practice guidelines and a joint-ministry protocol regarding unexplained school absences. They have been communicating with each other and schools; however, draft practice guidelines and protocols have not been provided to the Representative to confirm progress towards implementation.</p>

Year 2 Evidence – Received December 2020	Year 2 Assessment
<p>EDUC is leading work with MCFD and the Ministry of Health on revising and updating the <i>InterMinisterial Protocols for the Provision of Support Services to Schools</i> and is targeting March 2021 for completion.</p> <p>EDUC is leading the development of the practice guidelines with a focus on roles and responsibilities of school boards to monitor and respond to unexplained absences and withdrawals. All school boards and independent schools have been informed that this work is underway.</p> <p>A draft of the practice guidelines is currently undergoing final review by EDUC, MCFD, ICFSAs (formerly DAAs) and the First Nations Education Steering Committee working group before beginning internal review processes.</p>	<p>Some Progress</p> <p>EDUC has drafted practice guidelines and is consulting with Indigenous stakeholders through a working group. Implementation has not begun.</p>
Year 3 Evidence – Received June 2022	Year 3 Assessment
<p>The Joint Protocol and Guidelines document for unexplained absences and withdrawal from school has been created by EDUC and MCFD in consultation with Inclusive Education partners. This document is currently moving through EDUC and MCFD internal approval processes. EDUC is moving forward with the process to update the Inter-Ministerial Protocols. (Target date by fall 2022).</p> <p>EDUC and MCFD continue to consult with Indigenous stakeholders regarding the draft Practice Guidelines and the development of the Joint Ministry Protocol, however there is no indication from MCFD that advocates for the rights of persons with disabilities have been part of the consultation process.</p>	<p>Some Progress</p> <p>A Joint Protocol and Guidelines document has been developed but remains in the consultation phase.</p> <p>There is no information reported on the implementation status of the practice guidelines or a target date of a finalized Joint Protocol and Guidelines document.</p> <p>The Representative notes that implementation for this Recommendation is long overdue as she called for completion of this work by May 2019.</p>
Year 4 Evidence – Received February 2023	Year 4 Assessment
<p>MCFD: Pending further engagement</p> <p>ECC:</p>	<p>Some Progress</p> <p>The Representative is concerned to learn that Joint Protocol and Guidelines remains in consultation stages. While it is recognized that government must fulfill its commitment to engagement within DRIPA, the delay on the implementation predates this legislation and is far beyond the</p>

<p>In October 2022, the Interim Approach to Implement the Requirements of Section 3 of the Declaration on the Rights of Indigenous Peoples Act was released.</p> <p>As the Joint Protocol and Guidelines document did not reach final approvals prior to the introduction of the Interim Approach, ECC is undertaking further engagement with Indigenous rightsholders and partners to incorporate into the Joint Protocol and Guidelines. ECC is currently determining which Indigenous partners are best suited and have the capacity to consult and provide feedback on the Joint Protocol and Guidelines.</p> <p>In October 2022, updates were made to the School and Student Data Collection Order These changes will necessitate a review and potential revision to the draft protocol and guidelines to ensure alignment.</p>	<p>recommended implementation date of May 2019. Furthermore, no timeline for completion has been provided.</p>
--	--

Recommendation	
#7	<p>That the Ministry of Education establish mechanisms to enable local school districts to identify and do timely follow up when a school-age student is not registered in an educational program.</p> <p>Ministry of Education to complete this work by September 2020.</p>
Ministry's Response	RCY Assessment
Year 1 Evidence – Received April 2020	Year 1 Assessment
<p>Assign personal education number (PEN) at birth to all children to enable school districts to follow up when a child is not enrolled in an educational program or registered as a homeschooler (in progress; target is September 2020).</p> <p>Ensure cross-ministry information-sharing agreements are in place to allow EDUC to track school-aged children who are not enrolled in an educational program or registered as a homeschooler (target is September 2020).</p>	<p>Some Progress</p> <p>EDUC is in the early stages of implementing this recommendation.</p>

Year 2 Evidence – Received December 2020	Year 2 Assessment
<p>Legislation enabling the Minister to issue PEN earlier was passed in March 2020. The PEN registry rebuild is in progress with implementation planned for March 2021.</p> <p>Target date for completion being extended to September 2021 to work through the complexities of developing cross-ministry record level information-sharing agreements and address potential legal barriers to sharing information.</p> <p>Progress on an Information-Sharing Agreement with the Ministry of Health has been slowed by COVID-19 workload and the complexities of matching personal education numbers with personal health numbers.</p> <p>Information-sharing protocol between MCFD and EDUC was finalized: https://www2.gov.bc.ca/assets/gov/education/administration/kindergarten-to-grade-12/inclusive/guide-sharing-information-about-cyic.pdf.</p> <p>Regular reporting of daily attendance data was initiated in June 2020 and for the 2020/2021 school year across all school districts using standard approaches and reporting methods.</p> <p>Current Withdrawal and Attendance Reason codes are being reviewed and will be streamlined to increase data quality and reporting capabilities across all districts which is estimated to be complete March 2021.</p>	<p>Some Progress</p> <p>EDUC and partner ministries continue to work through implementation of this recommendation.</p>
Year 3 Evidence – Received June 2022	Year 3 Assessment
<p>Note: this recommendation’s year 3 progress evidence was provided to the RCY after the assessment was posted, thus, the information has been updated since its original publication.</p> <p>Former manual PEN retrieval processes replaced with a new online service; GetMyPEN and UpdateMyPEN in 2020.</p> <p>The modernized PEN Registry was launched in December 2021. Issuance of PEN and birth privacy impact assessment and identity data sharing analysis is underway.</p>	<p>Some Progress</p> <p>EDUC has updated their PEN retrieval process, however, continues to work on implementing a process to enable local school districts to identify and do timely follow up when a school-age student is not registered in an educational program.</p> <p>This Recommendation is far overdue as completion was called for by September 2020.</p>

<p>EDUC and CITZ continue to work towards BC Service Card integration with PEN.</p> <p>FNESC has expressed concerns with this initiative. The Ministry will co-develop all PEN policies and procedures with FNESC to ensure a greater understanding of Indigenous perspectives around the use of early years data collection and associated research and reporting requirements.</p> <p>Current legislation does not allow sharing of personal information in an Information Sharing Agreement from MCFD to other Ministries or to school districts apart from the current practice of social workers communicating with school districts on individual cases. Other options are being explored. For example, we are improving collection of withdrawal code data so that enrolled students who leave the system may be easier to track. The challenge is setting up an effective and legal mechanism for children who are never enrolled.</p> <p>No progress made on ISA with Health due to COVID-19 workloads.</p> <p>Due to the pandemic, the development of a monthly report has been delayed. Regular reporting of daily attendance data continues across all districts using standard approaches and reporting methods. Current Withdrawal and Attendance Reason codes have been reviewed and streamlined to increase data and reporting quality.</p>	
<p>Year 4 Evidence – Received February 2023</p>	<p>Year 4 Assessment</p>
<p>The modernized Personal Education Number (PEN) registry improves schools’ access to PEN information and increases their ability to track students.</p> <p>The early issuance of PEN remains a priority. The Ministry of Education and Childcare is seeking to engage further with First Nations Education Steering Committee (FNESC) on this issue. The Ministry is also exploring legislative implications with Child Care division.</p> <p>Withdrawal codes should be operational by fall of 2024.</p> <p>In 2023 ECC will pursue a Common Integrated Program with the Ministry of Health to identify school aged children registered with the Medical Services Plan who are not enrolled with a public school or independent school.</p>	<p>Some Progress</p> <p>The Ministry of Education and Child Care continues to work on implementing a process to enable local school districts to identify and do timely follow-up when a school-age student is not registered in an educational program. While the Representative is encouraged by the intention to pursue a Common Integrated Program with the Ministry of Health (HLTH) to link MSP and PENs, she requires further information regarding the procedures for connecting with those school-age children who are not registered once identified.</p> <p>The evidence provided describes improvements to student absence and withdrawal tracking system, however, there is no evidence of how this translates to any follow up with families or for</p>

<p>Attendance reason codes were updated in MyEducation BC as of September 2022. This list more accurately and sensitively reflects the reasons a student may be absent.</p>	<p>children and youth in care. The Representative is also concerned with the reliance of parent reported absences through the MyEducation BC portal.</p> <p>Based on the evidence provided, the assessment remains at '<i>some progress</i>' for the current recommendation.</p>
---	--

Recommendation	
<p>#8</p>	<p>That the Ministry of Education determine how many students with special needs designations are being homeschooled and conduct a review to determine whether school districts should be offering additional support and guidance to these students.</p> <p>Ministry of Education to complete this work by September 2020.</p>
Ministry's Response	RCY Assessment
Year 1 Evidence – Received April 2020	Year 1 Assessment
<p>EDUC will:</p> <p>Develop clear guidelines about what conversations schools should be having with families so that families are aware of all the options and the supports and services that come with those options (in progress).</p> <p>Ensure cross-ministry information-sharing agreements are in place to review other agencies'/ministries'/programs' data collection activities to allow education stakeholders to identify homeschoolers who are receiving services from other ministries (target is September 2020).</p> <p>Engage with stakeholders to confirm the feasibility of enhanced approaches to collecting and tracking information about homeschooled children and confirm current homeschooling resources provided by schools and districts (planning completed May 31, 2019).</p> <p>Review supports provided by schools/districts to homeschoolers and assess schools' and districts' ability to provide special education supports for homeschooled children and youth (not yet started; target is fall 2020).</p>	<p>Some Progress</p> <p>EDUC is in the process of developing clear guidelines and has engaged with stakeholders to confirm supports available for students.</p> <p>EDUC has not started its review of whether school districts should be offering additional support and guidance to these students.</p> <p>RCY and EDUC have had several meetings about the intent of this recommendation. The Representative hopes that EDUC will consider offering additional support in the form of individual education plans and assessments to children with special needs designations, including those who are being homeschooled.</p>

<p>Review services provided by other ministries to help determine if additional educational supports are required. Branch analysis to inform project plan (targeted for fall 2020).</p>	
<p>Year 2 Evidence – Received December 2020</p>	<p>Year 2 Assessment</p>
<p>Cross-ministry information-sharing agreements are in progress but not complete. These agreements are required in order for EDUC to review other ministries’ data collection practices.</p> <p>Determining the total of number of home-schooled children that are in a special needs category would require linkage to data held by MCFD for program data and the Ministries of Mental and Health and Addictions (MMHA) and Health (HLTH) for diagnostic data to cover all possible sources of information.</p> <p>MCFD is currently working to determine whether sharing individual level information about children and youth in care is permitted under current legislation and, if so, the allowable avenues to share this information with EDUC and with school districts/independent school authorities.</p> <p>Progress on information-sharing agreements has been slowed by COVID-19 workload and the complexities of matching personal education numbers with personal health numbers.</p> <p>EDUC is in the process of developing home-schooling guidelines. It convened a Homeschooling Guidelines Working Group in 2020 which met twice and developed a first draft of the Guidelines document. The working group was then put on hold to enable work to progress on the ministry’s online learning policy, given the strong linkages between online learning and homeschooling.</p> <p>The sector’s capacity to engage in this work and implement changes in practices has been significantly impacted by the pandemic. Further, due to the pandemic, homeschooling registrations and questions related to homeschooling by parents, school districts and independent schools have dramatically increased in 2020/21, suggesting the need for some potential legislative changes.</p>	<p>Some Progress</p> <p>EDUC is in the process of ensuring cross-ministry information-sharing agreements are in place with MCFD and HLTH.</p> <p>EDUC is in the process of developing clear guidelines and has engaged with stakeholders to confirm supports available for students.</p> <p>EDUC has not started its review of whether school districts should be offering additional support and guidance to these students.</p>

Year 3 Evidence – Received June 2022	Year 3 Assessment
<p>Note: this recommendation’s year 3 progress evidence was provided to the RCY after the assessment was posted, thus, the information has been updated since its original publication.</p> <p>Current legislation does not allow sharing of personal information in an Information Sharing Agreement from MCFD to other Ministries or to school districts apart from the current practice of social workers communicating with school districts on individual cases.</p> <p>Given the pandemic’s impact on Ministry workload, the Independent Schools team has not yet conducted the scan of services but intends to meet the March 2022 timeline by corresponding with partner Ministries (MCFD; MoH, MARR) to determine what supports (if any) those Ministries provide specifically for homeschoolers with special needs.</p> <p>Developed Homeschooling Guidelines to provide schools with guidance when they are communicating with families the implications of selecting homeschooling. In particular it is important families understand that when they choose home-schooling they are aware that in opting out of the public education system they are also opting out of supports such as IEPs.</p>	<p>Some Progress</p> <p>EDUC reports that they have completed an internal review on supports provided by schools/districts to homeschoolers and assess schools’ and districts’ ability to provide special education supports for homeschooled children and youth. EDUC did not provide the Representative with the outcomes of this review.</p> <p>EDUC reports that they have been unable to determine supports provided by other ministries or develop information sharing protocols that could allow for better support across ministries.</p> <p>EDUC reports that schools and districts do not collect/report special needs data for homeschoolers, which leaves the Representative questioning how the ministry is able to support this population of learners when such learners are not identified in the system.</p>
Year 4 Evidence – Received February 2023	Year 4 Assessment
<p>In Dec 2022, Ministry staff sent a survey to ten partner ministries identified as being a potential source of support to registered homeschoolers with disabilities and/or diverse abilities; the survey requests information about provided services (both directly or indirectly) and how they can be accessed.</p> <p>ECC staff plan to update the Ministry’s Homeschooling Procedures and Guidelines Manual with relevant information on additional services available through other Ministries.</p> <p>Partner Ministries were requested to respond by January 17, 2023. Staff have received 6/10 responses. Two Ministries have provided ECC with information on supports available that will be added to the Guidelines.</p> <p>Staff will follow up with Ministries that have not yet responded in early February 2023. ECC plans to update the Manual with relevant information in Spring 2023.</p>	<p>Some Progress</p> <p>The Representative is encouraged to see evidence of a cross-ministry survey and looks forward to learning of the results and practice implications.</p> <p>The Ministry of the Education and Child Care (MECC, formerly EDUC) reports that schools and districts do not collect or report special needs data for homeschoolers, which leaves the Representative questioning how the ministry is able to support this population of learners when such learners are not identified in the system.</p> <p>The Representative is discouraged that little progress has been made on this recommendation now almost three years past due and continues to rate the assessment as ‘<i>some progress</i>’.</p>

Recommendation	
#9	<p>That MCFD ensure identification and involvement of an Indigenous child or youth's family, community and culture at the first point of contact with any MCFD service and continue this involvement on an ongoing basis. This should include, in consultation with Indigenous stakeholders and communities, the creation of guidelines for social workers working with Indigenous families, including resources to help them do this work.</p> <p>MCFD to complete this work by May 2019.</p>
Ministry's Response	RCY Assessment
Year 1 Evidence – Received April 2020	Year 1 Assessment
<p>The Aboriginal Policy and Practice Framework (APPF) has been implemented regionally. Program analysts in each region have built relationships, mentored and oriented staff across the service delivery division and developed further partnerships with Indigenous communities and service providers (completed March 31, 2019).</p> <p>Further, MCFD will:</p> <ul style="list-style-type: none"> • develop divisional plans to implement APPF across all areas of the ministry. A divisional plan working group has been established. Several divisional plans have been developed. The implementation of all plans is underway (target is March 31, 2020). • embed early identification and involvement of an Indigenous child or youth's family, community and culture in MCFD service frameworks (in progress; target is Dec. 31, 2020). • amend and implement the <i>CFCS Act</i> to support greater collaboration between Indigenous communities and the Director in caring for, supporting and protecting Indigenous children and building stronger planning and support networks by: <ul style="list-style-type: none"> ○ withdrawing from court proceedings if an Indigenous child's parents and community make an agreement that would keep the child safe (Oct. 1, 2018) ○ entering into Community Agreements with Indigenous communities (April 1, 2019) ○ supporting implementation of Bill 26 <i>CFCS Act</i> amendments by hosting <i>Walking Together with Children, Youth and Families in Respect for their Inherent Right to Culture and Connection</i>, provincial and regional gatherings for ICFSA (formerly DAA) 	<p>Some Progress</p> <p>MCFD has implemented the APPF (a framework that provides guidance to workers working with Indigenous families) regionally.</p> <p>The early identification and involvement of an Indigenous child or youth's family, community and culture has not been embedded in MCFD service frameworks yet.</p>

<p>and MCFD supervisors, team leaders and leadership staff (in progress; target is March 31, 2020).</p> <ul style="list-style-type: none"> • Develop and implement <i>Core Child Welfare Policy 1.1: Working with Indigenous Children, Youth, Families and Communities</i> to provide guidance respecting the identity of Indigenous children and collaboration with Indigenous communities. <ul style="list-style-type: none"> ○ Core Policy to include: <ul style="list-style-type: none"> ▪ 1.a: At initial contact, ask the child and family about whether they have an Indigenous identity ▪ 1.b: If a child or youth is Indigenous, identify and document the Indigenous community or communities to which the child belongs, including both maternal and paternal Indigenous identities. (policy in effect on Jan. 1, 2020). <p>Bill C-92: <i>An Act respecting First Nations, Inuit and Métis children, youth and families</i> was implemented on Jan. 1, 2020.</p>	
<p>Year 2 Evidence – Received December 2020</p>	<p>Year 2 Assessment</p>
<p>In-Care Framework has been developed, and implementation through modelling the system began in January/February 2020.</p> <p>The <i>“Walking Together with Children, Youth and Families In Respect for their Inherent Right to Culture and Connection”</i> Regional Gatherings, which were planned collaboratively with First Nation, Métis and Inuit communities, were held in eight communities and focused on breathing life into the <i>CFCS Act</i> amendments that came into force on April 1. The amendments call for collaborative practices.</p>	<p>Some Progress</p> <p>MCFD has implemented the APPF (a framework that provides guidance to workers working with Indigenous families) regionally.</p> <p>The early identification and involvement of an Indigenous child or youth’s family, community and culture has not been embedded in MCFD service frameworks yet.</p>
<p>Year 3 Evidence – Received June 2022</p>	<p>Year 3 Assessment</p>
<p>MCFD reports that a Restorative Practice Guide was finalized in March 2021 and continued orientation sessions are available to all staff across all Service Delivery Areas (SDAs) and all Service Lines. SDAs continue to develop integration plans where the APPF team provides orientations and training with a focus on working with Indigenous children, youth and families.</p>	<p>Some Progress</p> <p>The early identification and involvement of an Indigenous child or youth’s family, community and culture has been embedded in core child welfare policy for working with Indigenous children,</p>

<p>MCFD provided evidence of how early identification and involvement of an Indigenous child or youth’s family is embedded within multiple service frameworks including: the new CYSN Service Framework, the Youth Transitions Service Framework, the Prevention and Family Supports Service Framework, the 2019 CYMH Service Framework and the Network of Care (In-Care Network).</p> <p>In addition, MCFD reports that Provincial Centralized Screening ensures that early connection with MCFD involves questions around the Indigeneity of a child, youth or family. This ensures that MCFD can send memos to the relevant Indigenous Child and Family Service Agencies (ICFSAs), and/or that social workers can connect with the community. MCFD meets monthly with the Métis Commission to ensure MCFD staff and ICFSAs (formerly DAAs) are up to date on any training offerings for cultural planning for Métis children and youth.</p>	<p>youth and families. MCFD has also included early identification and involvement of an Indigenous child or youth’s family, community and culture into the development of their new service frameworks. The Representative awaits the implementation of the service frameworks to assess the completion of this recommendation.</p>
<p>Year 4 Evidence – Received February 2023</p>	<p>Year 4 Assessment</p>
<p>MCFD provided several updates in their year four progress report indicating they have made substantial changes to strengthen the role of Indigenous communities and updated identification processes to facilitate this involvement. Policy and practice changes to ensure early identification and involvement of an Indigenous child or youth’s family, community and culture are across service frameworks which are in various stages of development and implementation.</p> <p>Changes include:</p> <ul style="list-style-type: none"> • Develop and implement Core Child Welfare Policy 1.1: Working with Indigenous Children, Youth, Families and Communities • CFCSA amendments to support greater collaboration between Indigenous communities and the director in caring for, supporting and protecting Indigenous children and build stronger planning and support networks <p>Frameworks underway:</p> <ul style="list-style-type: none"> • CYMH, CYSN, In Care, Youth Justice, Family Preservation, Early Years Service Framework, Child Care BC Plan and Youth Transitions. 	<p>Substantial Progress</p> <p>The Representative is encouraged to see the early identification and involvement of an Indigenous child or youth’s family, community and culture being embedded in core child welfare policy for working with Indigenous children, youth and families. The ministry has also included early identification and involvement of an Indigenous child or youth’s family, community and culture into the development of their new service frameworks. The ministry has successfully aligned its response to this recommendation with the <i>Federal Act respecting First Nations, Inuit and Métis children, youth and families</i>.</p> <p>As noted from the evidence provided by the ministry, some frameworks are still under development and are awaiting implementation.</p>

Recommendation	
#10	<p>That the Ministry of Health and MCFD develop a plan to ensure early identification, timely assessment and appropriate and accessible supports for children under six-years-old with signs of developmental delay.</p> <p>Plan to be developed by April 1, 2020 with implementation to begin immediately thereafter.</p>
Ministry's Response	RCY Assessment
Year 1 Evidence – Received April 2020	Year 1 Assessment
<p>MCFD implemented the Early Years Service Framework on April 1, 2019. This framework provides over 100 communities with early years services including family child drop-ins and options for enhanced children and youth with special needs and child and youth mental health services.</p> <p>HLTH will:</p> <ul style="list-style-type: none"> • assess current state and identify gaps and opportunities to inform the plan (in progress; target is March 31, 2020). • develop the plan to ensure early identification, timely assessment and appropriate and accessible supports for children under six-years-old with signs of developmental delay (in progress; target is March 31, 2020). • provide guidance to the health care system about core public health services to be delivered to women, children and families from the pre-conception period up to Kindergarten entry, including guidance about developmental monitoring for children (in progress; target is March 31, 2021). • lead the Provincial Perinatal Substance use project. This project provides culturally safe and harm-reduction-informed care to reduce stigma that prevents parents who are using substances from accessing health care. The system of care enables earlier identification of children with signs of developmental delay (in progress; target is Sept. 30, 2021). • work with health system partners and appropriate care providers to ensure they are aware of services in the new Children and Youth with Special Needs (CYSN) Service 	<p>Some Progress</p> <p>MCFD implemented the Early Years Service Framework. HLTH and MCFD are in the process of creating a plan to ensure early identification, timely assessment and appropriate and accessible supports for children under six with signs of developmental delay.</p>

<p>Framework and how to access services within MCFD's programs (in progress; target is Dec. 31, 2021).</p> <ul style="list-style-type: none"> • explore opportunities to ensure seamless transitions of patient-centred care between health services and CYSN services to ensure services are streamlined and parents and caregivers of children needing services will know how to access appropriate services (in progress; target is Dec. 31, 2021). 	
<p>Year 2 Evidence – Received December 2020</p>	<p>Year 2 Assessment</p>
<p>HLTH has been working on issues of early identification and autism assessment, and regular meetings are occurring between HLTH and MCFD to assess the current state of service delivery to children and youth with special needs and their families. Due to COVID-19, the work had continued at a slower pace, but is now progressing.</p> <p>An updated version of the Collaborative Practice Protocol was developed in partnership with MCFD and released in September 2019, to correspond to the ending of “birth alerts.” The protocol outlines the roles and responsibilities for health sector and MCFD/ICFSA (formerly DAA) workers when supporting families experiencing vulnerabilities, clarifies rules around information sharing and separates the concepts of vulnerabilities (e.g., poverty, substance use, etc.) from child welfare concerns.</p> <p>Further work led by the Provincial Perinatal Substance Use Project is underway to build an online course for acute care social workers to better support perinatal women who use substances and experience vulnerabilities.</p> <p>Provincial Perinatal Substance Use Project has developed and released (October 2020) a Provincial Rooming-In Guideline for Perinatal Women Using Substances. This guideline supports birth parents and infants to stay together while in hospital.</p> <p>Evidence reviews were completed to expand and refresh Perinatal, Child and Family Public Health Service Standards in partnership with Regional Health Authorities, the First Nations Health Authority and partners.</p>	<p>Substantial Progress</p> <p>MCFD implemented the Early Years Service Framework. HLTH and MCFD are in the process of creating a plan to ensure early identification, timely assessment and appropriate and accessible supports for children under six with signs of developmental delay. Progress has been made towards planning for a universal and inclusive childcare system.</p> <p>COVID-19 has led to some delays, but implementation appears to be underway.</p>

<p>HLTH and MCFD are having regular meetings to discuss and learn about the services available through the CYSN Service Framework and find ways to integrate this knowledge into the health system. Regular meetings also serve to identify gaps and overlaps in services with a goal to ensure services are more accessible and streamlined for families.</p> <p>MCFD has been gathering information to inform planning for a universal childcare system that is inclusive of all children, including children with support needs. MCFD engaged key sector stakeholders and families regarding this conceptual model through a series of virtual sessions in June 2020.</p> <p>Affordability initiatives are supporting more lower income families in accessing childcare, and as a result, provide more opportunity for early identification of/intervention for children who have – or are at risk of – developmental delay as a result of the family’s experience of vulnerability:</p> <ul style="list-style-type: none"> • As of September 2020, over 71,500 children (53,500 families) have been approved for the Affordable Child Care Benefit (ACCB) which helps all eligible families with the costs of childcare, saving them up to \$15,000 per year, per child. In 2019/20, more than 4,500 children received the special needs supplement through ACCB. • The Child Care Fee Reduction Initiative (CCFRI) enhances childcare affordability by offering funding to eligible, licensed childcare providers to reduce and stabilize parents’ monthly childcare fees. 	
<p>Year 3 Evidence – Received June 2022</p>	<p>Year 3 Assessment</p>
<p>HLTH continues to work on issues of early identification and autism assessment. A Cross-Ministry Reference Group has been meeting bi-weekly since summer 2021 to explore connections and pathways between the health system and CYSN services. HLTH is working with BC Autism Assessment Network and the Complex Developmental Behavioral Conditions Network to explore strategies to increase access to timely autism assessments, including streamlined assessments and regional outreach. In the summer of 2021, the Population and Public Health Division hosted a series of engagements with health authority partners and other health system partners to learn more about challenges, gaps, and barriers experienced by families during their perinatal and early childhood journey, and particularly when</p>	<p>Some Progress (reassessed)</p> <p>The Representative notes through analysis of materials provided by HLTH and MCFD that little progress has occurred regarding Recommendation 10 between the second and third progress assessments – citing that HLTH is still “exploring strategies” and having “initial conversations” with a plan not expected until fall 2022. Therefore, the Representative has re-assessed the progress of this recommendation to “some progress” only as activities towards implementation have halted or been significantly delayed.</p>

requiring/accessing enhanced service. The final report for these engagements is being developed.

HLTH continues to offer the Nurse-Family Partnership (NFP) program, a preventative home visiting program to support eligible perinatal families experiencing vulnerabilities. NFP continues to increase its reach and is now offered in 69 urban and rural communities across B.C. including 13 First Nations communities. HLTH continues to implement Primary Care Networks (PCNs) across the province. Initial conversations have started with the Primary Care Division to support family access to early intervention services in a timely manner.

HLTH reports that it will develop a plan in fall 2022 to support the implementation of the CYSN framework through the health system, including intersections with the Service Standards policy, updating referral pathways and supporting the coordination of community-based planning in Primary Care Networks with local MCFD Family Connection Centres.

The streamlined assessment pilot concluded in December 2021 and is not moving forward. It may be renewed as a pilot program under the new CYSN model. Further consultation is required.

HLTH notes that work to fully refresh and update the Perinatal, Infant and Early Childhood Health Service Standards is underway and will continue in the 2022/23 fiscal year. This will include guidance to the health system about developmental monitoring and provide health care providers and families with additional information about when and where to seek services and supports when identifying signs of developmental delays.

The Provincial Perinatal Substance Use Project has developed an online web series to train acute care social workers who work with perinatal women who use substances. The course will support social workers to provide patient and family-centred, culturally safe, trauma-informed care with the aim of supporting bonding, attachment, family unity, maternal mental health and child development.

Year 4 Evidence – Received February 2023	Year 4 Assessment
<p>Ministry of Child and Family Development: No new evidence submitted for the year 4 review.</p> <p>Ministry of Health (MoH): The Population and Public Health (PPH) Division:</p> <ul style="list-style-type: none"> • Is continuing to lead the development of policy on promotion and prevention services to individuals and families during the preconception to early childhood life stages. This policy will include guidance to support timely referrals and connections to early intervention and/or specialized services across the continuum of care for healthy child development. Extensive engagement with partners occurred in the spring and summer of 2022, and will continue into 2023 to support iterative policy drafting. • Continues to oversee the delivery of the Nurse-Family Partnership (NFP) program One component of this program includes early infant developmental screening and referrals which promotes early identification, timely assessment, and appropriate and accessible supports for children under six-years-old who may be in high-risk perinatal families. As of November 2022, NFP is offered in 63 urban and rural communities, which includes 13 Indigenous communities/regions. • Engaged with over 30 groups from a range of agencies and organizations over 2021 and 2022, Engagement feedback, review of the literature, and NFP evidence was used to develop a draft <i>Enhancing NFP 2022-2027 Strategic Plan</i>. PPH is finalizing the draft with NFP delivery partners and will begin prioritizing and developing a plan and process to implement actions in 2023. <p>As the new CYSN framework continues to be developed, primary care is collaborating to support family access to early intervention services and identifying clear referral pathways to enhanced services.</p> <p>A draft General Policy Direction has been developed and is currently under review. Beginning in Fiscal Year 2023/24, PPH will begin engagement with key partners to support the development of affiliated supportive policy directives focused on specific promotion and prevention areas. An implementation plan, and a monitoring and evaluation framework will also be developed.</p>	<p>Some Progress</p> <p>The Representative is encouraged to see many initiatives under way, or in development, that can support the early identification of children under the age of six with signs of developmental delays, however there is discouragement in the lack of progress on implementation over two years past the deadline for this recommendation.</p> <p>It is also noted that the early identification of children with development delays is only one part of this recommendation. The RCY regularly monitors the wait times for autism assessments with the BC Autism Assessment Network and complex developmental behavioural assessments (CDBC). As of March 2023, they are the highest they have been in the last five years.</p> <p>The substantial wait times for assessment combined with the current diagnosis-based criteria for accessing supports through the current CYSN system negates the work of early identification.</p> <p>The Representative is disheartened by the siloed approach towards recommendation and the limited progress that has been made.</p>

Ministry of Education and Childcare (MECC) Update:

In 2022 childcare was moved from MCFD to the MECC:

Affordability initiatives continue to support more lower- and middle-income families in accessing childcare, and as a result, provide more opportunity for early identification of/intervention for children who may have a developmental concern or an established developmental delay:

- As of December 2022, the \$10 a Day ChildCareBC initiative increased from approximately 6,000 childcare spaces to about 10,500 spaces, with an additional 2,000 spaces projected to join by February 2023.
- The Affordable Child Care Benefit (ACCB) continues to support low-and middle-income families with their childcare costs. On average, over 28,400 children from over 22,500 families receive Affordable Child Care Benefits each month so far in 2022/23 (Nov 2022). Since 2018, through programs such as the New Spaces Fund, Start Up Grants and Neighbourhood Learning Centres, the BC Government has funded the creation of over 30, 500 spaces, which are in different stages of development. Currently, 10,500 of these new funded spaces are licensed and operational, with the remaining 20,000 under development and anticipated to become operational in the coming months/years. \$15M in grant funding will be provided in 22/23 to support low- or no-cost child care spaces in partnership with Métis Nation BC, and the Aboriginal Head Start Association of BC. An additional \$15M will be provided directly to First Nations to support child care activities in their communities, including space creation, capacity development and planning.

In April 2022, CanAssist at the University of Victoria launched the Foundations of Inclusive Child Care online training for child care providers. A second online course that will support child care providers in taking positive approaches to children’s behaviour is expected to launch in Fall 2023. Additionally, funding has been provided to BCcampus to procure professional development resources to support educators working with children and families who are Deaf and Hard of Hearing.

<p>In 2021/22, about 12,000 children had access to inclusive childcare supports through Supported Child Development (SCD) and Aboriginal Supported Child Development (ASCD). An average of 7,350 children each month received support. Since 2017/18, an additional 1,900 children are receiving services each year.</p> <p>Through the two ELCC agreements with the federal government, BC has increased funding for SCD and ASCD by \$31.8M in 2022/23 – in addition to existing annual funding of \$80M. This funding replaces the one-time-only \$16.8M provincial investment of 2021, bringing stability for families and service providers. This \$31.8M is expected to support the provision of inclusive child care services to approximately 1,500 more children and to enable SCD and ASCD programs to focus on building capacity for inclusion within child care programs.</p> <p>In the four pilot sites of Family Connection Centres, SCD services will continue to be provided and will be referred to as Inclusive Child Care Supports.</p> <p>As part of the 2021-25 Canada-Wide ELCC Agreement, BC has committed to the development of a wage grid for Early Childhood Educators (ECEs). The ECE Education Support Fund (bursaries) continues to provide financial support to ECE students attending recognized post-secondary programs, almost \$25M since 2018. This program continues to prioritize students who self-identify as Indigenous, and those who are completing additional, “post-basic” credentials.</p>	
--	--

Recommendation	
#11	<p>That the Ministry of Health take steps to incrementally decrease the wait times to three months for completed assessments of autism and complex behavioural developmental conditions across the province.</p> <p>Wait times to be reduced to nine months by Sept. 30, 2019; to six months by Sept. 30, 2020; and to three months by Sept. 30, 2021.</p>
Ministry’s Response	RCY Assessment
Year 1 Evidence – Received April 2020	Year 1 Assessment

<p>Increased funding, quality improvement efforts and increased staffing is underway at HLTH; however, the ministry is unable to meet the timelines for the recommendation due to increasing demands for assessments.</p> <p>Additional funding was provided to BC Autism Assessment Network (BCAAN) and additional funding will be provided to Provincial Health Services Authority (PHSA) to support BCAAN on an ongoing basis.</p> <p>Eight new qualified specialists were trained in 2019/20.</p> <p>BCAAN is on track to complete 444 additional assessments in 2019/2020.</p> <p>BCAAN continues to monitor wait times for assessments.</p>	<p>No Progress</p> <p>While HLTH has taken some steps in an effort to incrementally decrease wait times for assessments, evidence provided by BCAAN shows that wait times for assessments have increased.</p>
<p>Year 2 Evidence – Received December 2020</p>	<p>Year 2 Assessment</p>
<p>The Shared Care Triage screened 152 children in 2019/20, up from 53 in 2018/19. This surpasses the target of 70 additional children screened.</p> <p>The Shared Care Clinic program, which does the screening, continues into 2020/21.</p> <p>HLTH funded PHSA to provide an additional 444 assessments. BCAAN completed the additional 444 assessments that was funded with an extra \$1.183 million added to base funding. Total completed assessments were 2,154 (2019/20).</p> <p>Due to COVID-19 restrictions, BCAAN was only able to complete training for two new qualified specialists for a total of 10 since 2019.</p> <p>BCAAN has implemented virtual assessment options for specific age groups and hopes to expand the virtual assessment options to a larger number of children.</p> <p>BCAAN is also exploring a rapid assessment program for preschool-aged children identified as having high risk for ASD, as well as out-of-province children with previously diagnosed severe</p>	<p>Some Progress</p> <p>HLTH has taken some steps in an effort to incrementally decrease wait times for assessments.</p>

<p>ASD without detailed diagnostic paperwork to fast track them to a BCAAN assessment using fewer resources.</p> <p>BCAAN is working with referring physicians to connect them with BCAAN qualified specialists who could see a school-aged child for an MSP-billed ASD assessment sooner through their community practice.</p>	
<p>Year 3 Evidence – Received June 2022</p>	<p>Year 3 Assessment</p>
<p>Note: this recommendation’s year 3 progress evidence was provided to the RCY after the assessment was posted, thus, the information has been updated since its original publication.</p> <p>The Shared Care Triage screened 210 children in 2020/21, up from 152 in 2019/20 and 53 in 2018/19. This surpasses the target of 70 additional children screened.</p> <p>An annual base funding increase of \$1.18 million (to BCAAN) in 2019/20 has enabled an increase in the number of assessments performed each year except for 2020/21, due to in-person assessments being more difficult during the pandemic: 1,896 in 2020/21, 2,579 in 2019/20, up from 2,259 in 2018/19.</p> <p>BCAAN completed training 8 new Qualified Specialists at the end of January 2022, which surpasses the goal of training four. 3 Qualified Specialists will work in the Interior, 4 will work in Vancouver Coastal/Fraser Health and 1 in Island Health.</p> <p>BCAAN has implemented virtual assessment options for specific age groups and hopes to expand the virtual assessment options to a larger number of children.</p> <p>BCAAN is also exploring a streamlined assessment program for preschool aged children identified as having high risk for ASD, as well as out of province children with previously diagnosed severe ASD without detailed diagnostic paperwork to fast track them to a BCAAN assessment using less resources. The pilot concluded on December 31, 2021 and an evaluation will begin to determine the success of the pilot and whether it can be rolled out across the province.</p>	<p>Some Progress</p> <p>The Representative is pleased to learn that BCAAN has completed training for 8 new Qualified Specialists, surpassing the goal of 4, and that the annual base funding to BCAAN remains in place.</p> <p>However, as part of regular monitoring work on waitlist times for autism and complex developmental behavioural assessments the Representative is alarmed to see, as of February 2022, that wait times are substantially increasing, with the provincial median wait times at 21.6 months and 15.4 months respectively, the highest they have been in the last five years.</p> <p>In addition, as of January 15, 2022, there were 6,519 children and youth under the age of 19 on the waitlist for a BCAAN autism assessment, up 132.3 per cent from October 15, 2018. As of January 15, 2022, there were 1,100 children and youth under the age of 19 on the waitlist for a CDBC assessment, down 10.6 per cent from November 1, 2018.</p> <p>The Representative encourages HLTH to complete an assessment on the demand needs for BCAAN and CDBC assessments across BC and best practices in addressing such waitlist challenges. Such an assessment could inform a planned approach to addressing the inaccessibility of diagnosis for children and youth within BC. Further, this assessment could inform a cost analysis to lead to real investment in the diagnostic system.</p> <p>In addition, the Representative notes that the activities HLTH has outlined specific to decreasing wait times for assessment to date, will not meet the intention that <i>all</i> children under the age of six with signs of developmental delay experience, timely assessment as the actions focus on exploring strategies to increase access to timely autism assessments only.</p>

<p>For vulnerable school aged children followed through a specialized social pediatrics program (e.g. RICHER) BCAAN is working with referring physicians to liaise them with BCAAN qualified specialists who could see a school aged child for an MSP billed ASD assessment sooner through their community practice.</p> <p>A Cross-Ministry Reference Group has been meeting biweekly since the summer 2021 to explore connections and pathways between the health system and CYSN services.</p> <p>Cross-Ministry actions have been identified for systems readiness.</p> <p>HLTH will be developing a plan in early 2022 to support the implementation of the CYSN framework through the health system, including intersections with the Service Standards policy, updating referral pathways and supporting the coordination of community-based planning in Primary Care Networks with local MCFD Family Connection Hubs.</p>	<p>Finally, there is insufficient detail to understand the impacts of the actions outlined in cross-ministry work with the implementation of the CYSN framework on wait times for diagnosis referred to in this recommendation.</p>
<p>Year 4 Evidence – Received February 2023</p>	<p>Year 4 Assessment</p>
<p>The BCAAN and CDBC waitlists are now monitored and reviewed quarterly to support waitlist cleanup and ensure data integrity. A standardized process has been implemented to review the waitlists in a consistent manner to remove any duplicate referrals. Waitlists are also monitored for youth aging out to ensure they are prioritized for assessment. The volume of referrals to both BCAAN and CDBC continue to rise above capacity to complete assessments.</p> <p>BCAAN is working with Northern Health Authority to conduct outreach clinics with the goal of reducing wait times in this region.</p> <p>Following a successful 6-month pilot using virtual assessments that began in August 2020, Ministry of Children and Family Development’s (MCFD) individualized autism funding program has agreed to continue to accept virtual assessments and diagnosis for children under 43 months and youth aged 15-18 who are showing significant signs of autism.</p> <p>Streamlining Assessment Pilots: pilots concluded December 31, 2021, and an evaluation has been completed. The streamlined assessment pathway has become a model of care within</p>	<p>Some Progress</p> <p>The Representative regularly monitors wait times for autism assessments and complex developmental behavioural assessments (CDBC) and BC Autism Assessment Network (BCAAN) autism assessments. As of March 2023, the provincial median wait times for a BCAAN assessment is 21 months and the provincial median for CDBC is 13.8 months – both of which far exceed the recommended maximum wait time of three months recommended by the Representative.</p> <p>In addition, as of March 2023, there were 8,453 children and youth under the age of 19 on the waitlist for a BCAAN autism assessment, up 95 per cent from March 2019. As of March 2023, there were 893 children and youth under the age of 19 on the waitlist for a CDBC assessment, down 42 per cent from March 2019.</p> <p>The Representative is optimistic that the Ministry of Health (HLTH) is putting procedures in place to tackle the significant wait times for assessments at BCAAN and CBDC but notes that based on the assessment of current wait times to access assessments significant progress has not yet been made. This recommendation therefore remains at an assessment of ‘some progress.’</p>

VCHA, FHA and NHA. VIHA and IHA are exploring the model with interested clinicians. Wait times in VCHA and FHA have been reduced by 50% for children who meet the criteria for this pathway.

Two pilots are underway with the Centre of Ability using speech language pathologists partnered with a pediatrician to perform autism screening, referrals to BCAAN, and assessments. Evaluations are planned to be completed by Spring 2023. For vulnerable school aged children followed through a specialized social pediatrics program (e.g., RICHER) BCAAN is working with referring physicians to liaise them with BCAAN qualified specialists to see these children sooner for a publicly funded autism assessment through community practice.

In 2022/23 an additional \$5.4 million in one-time funding was provided by the MoH to CDBC to address wait times. Actions taken to address wait times for CDBC assessments have resulted in a provincial wait time reduction of 15% since March 31, 2022. The wait list for VCHA and FHA has decreased by 40% since March 31, 2022.

CDBC has contacted all families on the waitlist to determine readiness and willingness to be seen, implemented additional clinic hours (including Saturday clinics), and engaged/expanded contracts of more psychologists to perform additional assessments.

A collaboration with Jordan's Principle is being explored to reduce wait times and increase access to BCAAN and CDBC assessments for Indigenous children and youth. Outreach clinics for NHA and VIHA are planned for late Spring 2023.