

# No Time to Wait

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A review of MCFD's child welfare workforce

PART ONE



REPRESENTATIVE FOR  
CHILDREN AND YOUTH

July 2024



The Representative and staff, working throughout the province, would like to acknowledge that we are living and working with gratitude and respect on the traditional territories of the First Nations peoples of British Columbia.

We specifically acknowledge and express our gratitude to the keepers of the lands on the traditional territories of the Lheidli T'enneh peoples (Prince George) and the Lekwungen (place to smoke herring) people of the Songhees and Esquimalt Nations (Victoria) where our offices are located. We also acknowledge our Métis and Inuit partners and friends living in these beautiful territories.

July 23, 2024

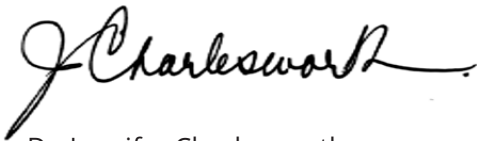
The Honourable Raj Chouhan  
Speaker of the Legislative Assembly  
Suite 207, Parliament Buildings  
Victoria, B.C., V8V 1X4

Dear Mr. Speaker,

I have the honour of submitting the report, entitled *No Time to Wait: A review of MCFD's child welfare workforce – Part One*, to the Legislative Assembly of British Columbia.

This report is prepared in accordance with Section 6(b) of the *Representative for Children and Youth Act* which gives the Representative authority to monitor, review, audit and conduct research on the provision of a designated service by a public body or director for the purpose of making recommendations to improve the effectiveness and responsiveness of that service, and comment publicly on any of these functions.

Sincerely,

A handwritten signature in black ink that reads "J Charlesworth". The signature is fluid and cursive, with a large initial "J" and a long, sweeping underline.

Dr. Jennifer Charlesworth  
Representative for Children and Youth

pc: Ms. Kate Ryan-Lloyd  
Clerk of the Legislative Assembly

Jinny Sims, MLA  
Chair, Select Standing Committee on Children and Youth

Mike Bernier, MLA  
Deputy Chair, Select Standing Committee on Children and Youth



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## Representative's Message

This report on MCFD's social worker workforce capacity is a companion to our investigation into the death of a child and accompanying systemic review of the child welfare system in B.C., *Don't Look Away – How one boy's story has the power to shift a system of care for children and youth.*<sup>1</sup> The systemic review identified several short-term measures that can be implemented fairly quickly as well as significant government-wide shifts that will take time to design and come to fruition.



In the meanwhile, the vitally important day-to-day work of social workers providing services and supports to children and their families, of course, needs to carry on. The public – and most importantly, children and families – expect MCFD's social worker workforce to be well-trained, highly skilled, and culturally attuned. They also expect that workforce to be well supported by reasonable workloads, access to appropriate family and community support services, quality supervision and mentorship, and adequate technological and administrative support.

The evidence set out in this report clearly belies these reasonable expectations. Indeed, the evidence suggests that MCFD's social worker workforce is in – or is close to – a state of crisis, with persistent and substantial understaffing, unmanageable workloads, an inability to routinely implement practice standards, and an unhealthy work environment characterized by undue stress, burnout and fear. Children and families have no time to wait – immediate steps need to be taken to address these critical circumstances.

A handwritten signature in black ink that reads "J Charlesworth". The signature is fluid and cursive, with a long horizontal stroke at the end.

Dr. Jennifer Charlesworth  
Representative for Children and Youth

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<sup>1</sup> Representative for Children and Youth, *Don't Look Away – How one boy's story has the power to shift a system of care for children and youth*, July 2024. [https://rcybc.ca/wp-content/uploads/2024/07/RCY-Dont\\_Look\\_Away.pdf](https://rcybc.ca/wp-content/uploads/2024/07/RCY-Dont_Look_Away.pdf)

# Introduction

This report is Part One of a two-part report on the workforce capacity of the Ministry of Children and Family Development's (MCFD's) child welfare services directly delivered by social workers.<sup>1</sup> A more detailed and comprehensive report is expected in the late fall, 2024. As such, this report is, in effect, an interim detailed summary of the findings of that review. Key results are being released at this time because more than enough information has been gathered to date to conclude that the current circumstances require urgent attention and there is no time to wait to identify the beginning steps that need to be taken immediately.

This workforce capacity review was prompted by the Representative for Children and Youth's (the "Representative's") investigation into the death of a child and accompanying systemic review of the child welfare system in B.C., *Don't Look Away – How one boy's story has the power to shift a system of care for children and youth*.<sup>2</sup> Although this is a stand-alone report, it should be read as a companion to that systemic review. The systemic review identifies a number of significant government-wide shifts that will take time to design and come to fruition. But in the meantime, children and their families require services and supports, children in need of protection require workers that act in their best interests,

children in care require someone to have eyes on and an attention to their well-being, families need support to nurture their children, and Indigenous Governing Bodies need to have strong allies to ensure that the transition to resumption of jurisdiction is done well. In other words, the work needs to get done under the existing legislative frameworks, while the broader system of care that can wrap around and support children and families is built. There is no time to wait. This work must begin now to ensure that workers are not only in a position to fulfill their current primary responsibilities, but they are supported to enhance their capacity to fulfill the promise of a new approach to child well-being.

Social workers who work in child welfare have an enormously challenging and complex job. When they respond to reports of neglect or abuse of children, or to requests for support services, they are typically working with children and families in the context of intergenerational trauma, chronic poverty, inadequate housing, mental health and substance use challenges, domestic violence and/or children and youth who have complex needs. Within this context, child welfare social workers must make critical decisions and provide services that, quite literally, can profoundly affect the safety, health and well-being of children and youth, the integrity of families, and in the context of Indigenous children and families, can affect the very future of their communities and Nations.

<sup>1</sup> MCFD no longer formally uses the title of "social worker", instead describing workers by function such as guardianship worker, resources worker, and child protection worker. "Social worker" is used generically throughout this report and includes: child protection intake and investigations, guardianship, resources, family services, youth services, adoptions, children and youth with support needs (CYSN), and generalist workers.

<sup>2</sup> Representative for Children and Youth, *Don't Look Away – How one boy's story has the power to shift a system of care for children and youth*, July 2024. [https://rcybc.ca/wp-content/uploads/2024/07/RCY-Dont\\_Look\\_Away.pdf](https://rcybc.ca/wp-content/uploads/2024/07/RCY-Dont_Look_Away.pdf)

To carry out this vitally important work in a safe and effective way, a well-trained, highly skilled, culturally attuned and experienced workforce is obviously required. That workforce also needs to be well supported by reasonable workloads, ready access to appropriate family and community support resources, quality professional supervision and support services, and adequate technological and administrative support.

Has that been the case? In a previous report entitled, *The Thin Front Line: MCFD staffing crunch leaves social workers over-burdened, B.C. children under-protected*, the Representative for Children and Youth (RCY) said:

*The Representative's review found that child protection workers deal with extremely heavy workloads caused by a steady stream of incoming reports of child safety concerns. The impact of heavy workloads is made worse by a lack of coverage for vacancies, vacations, and short- and long-term leaves, problems with recruitment and retention – particularly in rural and remote areas – and problems with supervision and mentorship. In recent years, the complexity and performance expectations of child protection work have also increased dramatically.<sup>3</sup>*

Those words were written nearly a decade ago, in 2015. Sadly, as this report will detail, they remain true today. Indeed, those words reflect the history of the circumstances of child welfare social workers in BC for the past three decades or more. While the landscape of child welfare services has changed considerably over that period with, for

example, dramatic reductions in the number of children in the formal care of government and the emerging resumption of jurisdiction over child and family services by Indigenous Governing Bodies,<sup>4</sup> little has really changed on the ground for social workers with respect to unrelenting demands for services, unmanageable workloads, inadequate family and community support services to meet the fundamental needs of children and families, and the very real personal burdens of workplace stresses and vicarious trauma. Indeed, a case can be made that the current demands on social workers are now even more complex and challenging, given the changing landscape in relation to Indigenous children and families, the proliferation of policies and administrative tasks in the interests of accountability, and the challenges in trying to find the right balance in making decisions in the face of ongoing media and political scrutiny of high profile cases where, on the one hand, social workers can be publicly criticized for inaction and on the other, for being too intrusive into the lives of children and families, especially Indigenous children and families.

This report examines the key factors relating to the workforce capacity of MCFD's child welfare social workers, including:

- Recruitment and retention of staff, with particular attention to rural communities
- Diversity and inclusion, with particular attention to Indigenous representation
- Qualifications, onboarding, training and professional development
- Standards, policies, procedures, practice guidelines and quality assurance to support good practice

<sup>3</sup> Representative for Children and Youth, *The Thin Front Line: MCFD staffing crunch leaves social workers over-burdened, B.C. children under-protected* (Victoria: Representative for Children and Youth), October 2015, p.1. [https://rcybc.ca/wp-content/uploads/2019/05/rcy-thethinfrontline-oct2015-final\\_revised.pdf](https://rcybc.ca/wp-content/uploads/2019/05/rcy-thethinfrontline-oct2015-final_revised.pdf)

<sup>4</sup> See, *An Act respecting First Nations, Inuit and Métis children, youth and families* S.C 2019, c.25. <https://laws.justice.gc.ca/eng/acts/F-11.73/page-1.html>



- Caseloads and workload
- Managing leave and backfill needs
- Availability of effective tools and resources to support good practice, including administrative/technological supports and supporting family and community resources
- Supervision, mentoring and practice support, with particular attention to supports and guidance when working with Indigenous families and communities
- Worker and workplace health and psychological safety
- Staff/ministry organizational design, culture,<sup>5</sup> and management.

Since workforce capacity is such a broad topic and the information gathered during the course of the review so large, this Part One report is a detailed summary of key findings. A more fulsome review and analysis, together with transparent disclosure of the data gathered, will be released in a subsequent stand-alone Part Two report in the late fall 2024.

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<sup>5</sup> Organizational culture – which should not be confused with the collective customs, beliefs and institutions of a particular nation, people or group – refers to the values, customs, rituals, and norms shared by an organization, which have to be learned by new members of an organization. Oxford Dictionary of Business and Management, Oxford University Press, 2009.

## Methodology

This review is limited to the child welfare social worker workforce employed by MCFD and does not include Indigenous Child and Family Services Agencies (ICFSAs) because the child whose death prompted the Representative's investigation and systemic review was in care of and the legal responsibility of the ministry and in any event, a review of the workforce capacity of ICFSAs would require a separate and distinct approach.

MCFD no longer formally uses the term "social worker" but rather describes child welfare staff by function, such as child protection worker, resource worker, adoptions worker, and so on. Social worker is used throughout for ease of reference and because, regardless of how the ministry describes them, that is how they are known to the public, and to themselves. For these purposes, social workers include those who work in the child welfare system (but not the child and youth mental health system) for MCFD and include: intake/investigations, resources, guardianship, family services, generalists, adoptions, children and youth with support needs (CYSN), youth services, and other specialist child welfare workers, as well as child welfare team leaders.

There were several sources of information that informed this report, including:

- Review of relevant key findings arising from previous reviews and reports by external parties and by the RCY
  - Review of the relevant academic and grey literature
  - A summary cross-jurisdictional scan of leading reports/analyses of workforce capacity-related issues in other Canadian and international jurisdictions
- Review of MCFD briefing/decision notes, planning documents, reports and similar information relating to social worker workforce capacity
  - Analysis of longitudinal data provided by MCFD regarding staffing allocations, utilization, recruitment and retention, leaves, and so on
  - Three online RCY consultations with community partners
  - Online survey of MCFD social workers and their team leaders
  - Similar, adapted online survey of MCFD excluded managers responsible for the management and oversight of, or support to, child welfare social workers; and
  - Focus group discussions with line social workers and team leaders.

The RCY community engagement groups with community partners involved open-ended invitations to social care sector, agency and MCFD staff, which provided for breakout group discussions on different topics, including workforce capacity.

The online survey of social workers and team leaders, which was conducted during April and May 2024, involved 45 structured questions, with provision for respondents to add further narrative comments on each of the ten topic areas.<sup>6</sup> The topics and questions were developed through a review of the literature

<sup>6</sup> The topic areas included: training and professional development; standards, policies, procedures, and practice guidelines; caseload/workload; technological and office supports; family/community support resources; supervision and mentorship; workplace stress and satisfaction; workplace culture; organizational culture and direction; and what could be improved and what is working well.

and consultations with experienced child welfare social workers. To give greater assurances of confidentiality, the survey was circulated through and with the official support of the BC General Employees Union (BCGEU). A total of 739 surveys submitted by social workers and team leaders, which represents approximately 40 per cent of the applicable MCFD staff, were included in the analysis.<sup>7</sup> Only a selection of the results of key questions will be provided in this summary report, together with some narrative comments that are considered emblematic. A full presentation of the responses to all the structured questions as well as a thematic analysis of the narrative responses will be presented in the detailed report in the fall 2024.

The questions in the survey of excluded MCFD managers related to the same topic areas but were adapted to their roles. In the interest of comparing the views of social workers and their managers, social workers were, for example, asked whether they agreed they had had adequate training in specified areas whereas managers were asked whether they agreed that social workers (not themselves) were adequately trained. A total of 57 MCFD managers completed the survey, again representing about 40 per cent of the applicable staff.<sup>8</sup>

There were three focus groups of team leaders and nine focus groups of line social workers, comprising a total of 49 participants.

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<sup>7</sup> Fully and partially completed surveys were included in the analysis; 644 surveys were fully completed, and 95 surveys were partially completed. Since there is reason to believe that the survey did not reach all social workers, the response rate may have exceeded 40 per cent.

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<sup>8</sup> Forty-six surveys from excluded managers were completed and eleven were partially completed.

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## A Brief History: Not a New Story

The child welfare system in B.C. has been the subject of several external reviews, often in response to media and political reactions to a tragic death of a child. Significant concerns about the capacity of the social worker workforce and consequent recommendations for remedial measures has been a recurring theme for the past three decades, as briefly outlined below.<sup>9</sup>

The 1995 report of the public inquiry into the tragic death of Matthew Vaudreuil – known as the Gove report – led to a number of recommendations for systemic reform of the child welfare system.<sup>10</sup> Significant concerns about social worker workforce capacity was a key theme, including for example: recruitment and retention; professional qualifications and training; caseload and workload; organizational culture and reputation; clinical supervision; support and resources; and oversight and quality assurance. Child protection social workers were described as overburdened and having “crippling” caseloads, which prioritize excessive documentation over client interaction and exacerbate worker stress and diminish morale.<sup>11</sup> Gove also called for all social workers to be regulated by a statutorily mandated self-governing professional body, an issue that remains current today.<sup>12</sup>

Ten years later, another public inquiry known as the Hughes Review<sup>13</sup> had a primary focus on external and internal oversight and accountability as well as the needs for organizational stability and clarity of direction. That review also identified key concerns about social worker workforce capacity, in particular, recruitment and retention of social workers, the need for greater diversity through recruitment of Indigenous staff, and training. The report broadly recommended that government provide sufficient funding, staffing, and training to support its newer approaches to child protection work.<sup>14</sup>

A 2008 investigation by RCY into the deaths of four children in the North region found the basic elements of child welfare work were not consistently carried out to the level required by the ministry’s service standards, which was attributable to inexperienced social workers, staff turnover and high caseloads, insufficient supervision, and ineffective training.<sup>15</sup> A comprehensive recruitment and retention plan for human resources in the child-serving system in the North region was recommended.

A 2013 report by the RCY found that only five per cent of the files of children in continuing care that were audited fully complied with ministry standards respecting plans for their care and, amongst other matters, recommended that MCFD develop and implement a detailed resourcing plan,

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<sup>9</sup> Only major reports have been selected. There are additional reports, in particular by RCY, that identify concerns around aspects of social worker workforce capacity.

<sup>10</sup> Thomas Gove. *Matthew’s Story: Report of the Gove Inquiry into Child Protection*, (Volume 1). Vancouver, B.C.: Province of British Columbia (B.C.), 1995.

<sup>11</sup> Gove, *Matthew’s Story*, 226.

<sup>12</sup> Gove, *Matthew’s Story*, recommendation 45.

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<sup>13</sup> Ted Hughes, *BC Children and Youth Review* (Victoria, British Columbia: Province of British Columbia, 2006). retrieved at: <https://cwrp.ca/sites/default/files/publications/en/BC-HuguesReviewReport.pdf>

<sup>14</sup> Hughes, *BC Children and Youth Review*, recommendation 42, 101.

<sup>15</sup> Representative for Children and Youth. *Amanda, Savannah, Rowen and Serena: From Loss to Learning*, April 2008. [https://rcybc.ca/wp-content/uploads/2019/07/amanda\\_savannah\\_et\\_al\\_0.pdf](https://rcybc.ca/wp-content/uploads/2019/07/amanda_savannah_et_al_0.pdf)

including additional funding and staffing support, to meet the level of practice required for improving assessment and planning.<sup>16</sup>

Another RCY report in 2014 identified chronic social worker staffing shortages leading to unsustainable workloads and an inability to adhere to practice standards, recruitment and retention issues, and inadequate training, supervision, and mentoring.<sup>17</sup> Amongst other matters, it was recommended that MCFD undertake a comprehensive assessment of staffing, workload and safety challenges and develop a plan to address identified issues.

In 2014, the (then) BC Government and Services Employees' Union (BCGEU) released a report about workforce capacity in the broad child, youth and family services sector provided or funded by MCFD, the (then) Ministry of Social Development and Social Innovation (MSDSI) and community-based social services agencies. The report was informed by 3418 responses to an online survey and fourteen community meetings involving 412 sector workers.<sup>18</sup> The report identified the "five failures" of the service systems: caseload and workload management, chronic understaffing and staffing management, occupational health and safety, Integrated Case Management (ICM) software and technological failures, and training and professional development. Some of the key issues identified included: insurmountable workloads profoundly

affecting staff morale; workload related stress and burnout; the need for frequent coverage of other workers' caseloads due to unfilled vacancies or long-term absences without backfill; and poor worker retention and high turnover. Recommendations included: increase funding to child, youth and family services in the short and long term to address staffing; fill current vacancies and create a comprehensive, transparent, and accountable staffing strategy; address occupational health and safety issues; review or replace ICM and invest in new technological resources; and review and redesign training and professional development investments. Government responded positively to this report by announcing on the same day of the report's release, a commitment to hire 200 new social worker positions, to establish a mobile response team of social workers to support hard-to-recruit and rural and remote communities, and centralization of child protection screening and intake.<sup>19</sup>

A complementary report by the BCGEU in 2015 employed the same methodology but focused exclusively on child welfare services to Indigenous children, youth and families provided directly by MCFD and through Indigenous Child and Family Services Agencies.<sup>20</sup> With respect to workforce capacity, that report found similar issues in relation to working conditions, health and safety, and recruitment and retention, noting that child, youth and family workers ranked workload as their number one issue. Their workloads were described as being characterized by complexity, staffing shortages, lack of cultural

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<sup>16</sup> Representative for Children and Youth. *Much More than Paperwork: Proper Planning Essential to Better Lives for B.C.'s Children in Care*, March 2013. [https://rcybc.ca/wp-content/uploads/2019/05/much\\_more\\_than.pdf](https://rcybc.ca/wp-content/uploads/2019/05/much_more_than.pdf)

<sup>17</sup> Representative for Children and Youth. *Lost in the Shadows: How a Lack of Help Meant a Loss of Hope for One First Nations Girl*, February 2014. [https://rcybc.ca/wp-content/uploads/2019/05/rcy\\_lost-in-the-shadows\\_forweb\\_17feb.pdf](https://rcybc.ca/wp-content/uploads/2019/05/rcy_lost-in-the-shadows_forweb_17feb.pdf)

<sup>18</sup> British Columbia Government and Services Union. *Choose Children: A case for Reinvesting in Child, Youth and Family Services in British Columbia*. November, 2014. <https://d3n8a8pro7vhm.cloudfront.net/bcgeu/pages/8901/attachments/original/1544481799/Choose-Children.pdf?1544481799>

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<sup>19</sup> Ministry of Children and Family Development. *New staff, streamlined services to benefit at risk kids*, November 6, 2014. <https://news.gov.bc.ca/releases/2014CFD0031-001685>

<sup>20</sup> British Columbia Government and Services Employees' Union. *Closing the circle: a case for reinvesting in Aboriginal child, youth and family services in British Columbia*, October 2015. [https://d3n8a8pro7vhm.cloudfront.net/bcgeu/pages/3463/attachments/original/1606344614/Closing\\_the\\_Circle\\_Report\\_FINAL.pdf?1606344614](https://d3n8a8pro7vhm.cloudfront.net/bcgeu/pages/3463/attachments/original/1606344614/Closing_the_Circle_Report_FINAL.pdf?1606344614)

awareness and knowledge, and insufficient allocation of time for cultural activities and community trust building.

RCY's 2015 report *The Thin Front Line*<sup>21</sup> about the workloads of child protection workers and their capacity to comply with ministry standards and policies, involved a literature review, analysis of MCFD data, budgeting and staffing information, an audit of case files, and interviews with social workers and team leaders. The report documented excessive workloads, worker shortages and recruitment lags, a lack of backfill for absences, and a widespread inability of staff to comply with the ministry's own standards and policies. In the latter regard, the report stated:

*The RCY's audit of MCFD offices found that many reports of child safety concerns were not addressed within the time frames set out by ministry standards and, in some cases, no response at all could be found in the ministry's paper or electronic files.*<sup>22</sup>

Another 2015 external report that was commissioned by the ministry – known as the Plecas Report – reported that in respect of social worker workforce capacity:

Front line social workers, Team Leaders and Regional management staff express consistent concerns about their challenges:

- Their inability to meet standards because they have too much work
- The lack of coverage for holidays, sick leaves, vacancies, and maternity leaves, leaving caseloads vacant
- Increasing complexity of cases
- Inadequate training both externally and internally

- Inability to attract experienced social workers to front line positions leading to consistent understaffing, particularly in the rural areas
- A widespread and significant change fatigue.<sup>23</sup>

In relation to staffing, Plecas commented that he thought the BCGEU's recommendation for three hundred additional positions was likely correct and recommended a workload measurement instrument be developed to inform staffing needs.<sup>24</sup>

Finally, in 2016, the provincial government's Special Advisor on Indigenous Children in Care submitted a report that addressed a myriad of issues, such as access to justice, the fiscal relationships and responsibilities of federal and provincial governments, prevention services, reunification and permanency planning, and so on. Citing the BCGEU report's "alarming picture of the child welfare system" and the subsequent commitment to hire 200 new social workers, the Special Advisor recommended recruitment of Indigenous staff, placement of those staff in First Nations communities, funding for at least an additional 92 social worker and support workers serving First Nations communities, funding for a child and family liaison and youth advocate for every First Nation, and an increase in front-line staff positions working with Métis children and families.<sup>25</sup>

<sup>21</sup> Representative, *Thin Front Line*, 2.

<sup>22</sup> Representative, *Thin Front Line*, 2.

<sup>23</sup> Ministry of Children and Family Development. *Plecas Review, Part One: Decision Time A review of policy, practice and legislation of child welfare in BC in relation to a judicial decision in the J.P. case*. December 4, 2015. <https://www2.gov.bc.ca/assets/gov/family-and-social-supports/services-supports-for-parents-with-young-children/reporting-monitoring/00-public-ministry-reports/plecas-report-part-one.pdf>

<sup>24</sup> MCFD, *Plecas Review*, 21.

<sup>25</sup> Province of British Columbia. *Indigenous Resilience, Connectedness and Reunification – From Root Causes to Root Solutions*, November 2016. Recommendations 1 and 2, pages 83-84. <https://fns.bc.ca/wp-content/uploads/2017/01/Final-Report-of-Grand-Chief-John-re-Indig-Child-Welfare-in-BC-November-2016.pdf>.

# Policy Non-Compliance and Linkages to the Investigation Report

A key issue that captured a great deal of public and political attention in the tragic case that prompted the sacred story investigation described in the *Don't Look Away* report was that the child was not seen by a social worker for seven months, despite being in the care of the ministry and despite a clear policy requirement that social workers must see every child in person at a care placement at least every three months.<sup>26</sup> During that prolonged period, he was severely neglected and abused, and eventually killed by his caregivers. In response to the subsequent furor, the minister stated:

*I have been assured by the provincial director that a thorough review has taken place and that all remedial action steps have already been completed. The ministry does have a robust set of policies and procedures and they weren't followed in this particular situation and that is not acceptable to me.*<sup>27</sup>

The implication of this statement is that this was a local and unusual issue involving non-compliance with policy and procedural requirements and that social workers are not only expected to comply with those requirements but also have the capacity to routinely do so. What is missing, as is detailed in the investigation report, is that this non-compliance with policy expectations occurred within the context of an office that was not at full staffing complement, had unstable and changing local leadership, had an extended period of social worker medical leave with no

backfill, and also had a lack of oversight and support in relation to addressing the complex dynamics associated with working with the local First Nation and consequent confusion about respective roles and responsibilities.<sup>28</sup> These are all factors that directly affect the capacity of social workers to not just comply with policy expectations but also to carry out safe, effective and quality case practice.

Turning to the broader issue of whether this was a localized and unusual circumstance, in the 2015 report, *The Thin Front Line*, the Representative stated:

*Social workers report that meeting ministry practice standards – standards mandated to protect vulnerable children and youth – is frequently impossible, and that not meeting mandated timelines has become routine due to heavy workloads.*<sup>29</sup>

Plecas echoed this in his 2017 report when he said social workers were unable to “meet standards because they have too much work.”<sup>30</sup>

Validation of that observation is available through the ministry's own audits. MCFD has previously conducted quality assurance practice audits<sup>31</sup> of the ministry's (then)

<sup>28</sup> Representative, *Don't Look Away*.

<sup>29</sup> Representative, *Thin Front Line*.

<sup>30</sup> MCFD, *Plecas Review*.

<sup>31</sup> Practice audits are publicly posted on MCFD's website, see <https://www2.gov.bc.ca/gov/content/family-social-supports/data-monitoring-quality-assurance/reporting-monitoring/accountability/child-welfare-practice-audits>. There have not been any audits posted since 2021. The ministry reports that it is in the course of revising its quality assurance audit processes to include practice evaluations of services. A provincial practice evaluation of family services is underway, and provincial evaluations in guardianship and resources are in the planning phase. A provincial practice evaluation of Community Youth Justice was posted in June 2024.

<sup>26</sup> Children and Youth in Care Policies – Chapter 5. Ministry of Children and Family Development Last Revised: April 15, 2024

<sup>27</sup> See, <https://globalnews.ca/news/9781552/foster-abuse-sentence-mcfd-changes/>

13 Service Delivery Areas (SDAs) across the province.<sup>32</sup> These involve a detailed review of a sample of electronic and physical records to assess compliance with child welfare legislation, policy and practice standards. Audits that are reported between December 2019 and March 2021 assessed 13 measures of compliance with policies demanded of resource social workers, who are responsible for screening and assessing prospective caregivers and family care homes; ensuring appropriate training and ongoing learning by those caregivers, providing ongoing monitoring; and assessing and reviewing quality of care concerns. A review of the results of those audits indicates the overall policy compliance rates across SDAs ranged from a low of 32 per cent to a high of only 47 per cent. Moreover, with respect to the specific policy requirement that there be an in-person visit to the care home at least once every three months, ten of the 13 SDAs had zero per cent compliance, with the highest compliance rate being three per cent.<sup>33</sup> The compliance rates for an annual review of care homes ranged from two to 30 per cent, with a provincial average of only ten per cent.<sup>34</sup>

<sup>32</sup> The number of SDAs has since been reduced to seven.

<sup>33</sup> For clarity, the requirement for resource social worker to visit the caregivers at the resource every three months, described earlier, should be distinguished from the requirement for a guardianship social worker to have an in-person visit with the child at the placement.

<sup>34</sup> An important caveat is that audits only measure what is recorded on file. It is possible and even likely that there is a greater degree of policy compliance on some measures but that those required actions (such as caregiver visits) are not recorded on file. Moreover, a zero per cent score for required visits every three months does not mean that the care home was not visited at all, but rather was not visited within the prescribed three month time frame, e.g., it may have been belatedly visited after five months. MCFD reports that in early 2023 the method for counting compliance with policy was changed so that, for example, if four in-person visits to a care home are required in a year and only two take place six months apart, that would be recorded as 50% (2/4) compliance instead of zero compliance.

Similar MCFD audits of social worker family services involve assessment of various measures of the processes and steps social workers are required to take in response to child protection reports. MCFD reports the average provincial compliance rate reported in audits was less than 35 per cent for five of seven measures and over 50 per cent (67 per cent) for only one measure.<sup>35</sup>

Of direct relevance to the requirement for a social worker to have in-person visits with a child in care was MCFD's 2021 provincial care plan audit, which involved a detailed review of a province wide sample of 228 files of children in care during 2018 to assess compliance with practice standards by social workers carrying out delegated guardianship responsibilities such as preservation of the child's cultural identity, assessment and planning for individual needs and ensuring their safety and well-being. That audit found an overall compliance rate of just 52 per cent with all of the assessed practice standards and, importantly, only seven per cent compliance with the specific requirement for four private, in-person visits with a child in care over the course of a year. Moreover, there was no documented evidence of any visits at all taking place in the previous year in 30 per cent of the cases reviewed, while the number of visits over the course of a year in the remaining cases ranged from only one to as many as 17. This report, which was published in June 2021 just after the death of the child that prompted the investigation, confirms a documented and known system-wide lack of compliance with this practice requirement.<sup>36</sup>

<sup>35</sup> These figures are reported in MCFD's Special Practice Audit, East Fraser Service Delivery Area, October 2022. This document, which was provided by MCFD, is not publicly available.

<sup>36</sup> Ministry of Children and Family Development. *Provincial Care Plan Audit Report*, June 2021 [https://www2.gov.bc.ca/assets/gov/family-and-social-supports/services-supports-for-parents-with-young-children/reporting-monitoring/04-accountability/04-3-child-welfare-practice-audits/2021/provincial\\_care\\_plan\\_audit\\_report.pdf](https://www2.gov.bc.ca/assets/gov/family-and-social-supports/services-supports-for-parents-with-young-children/reporting-monitoring/04-accountability/04-3-child-welfare-practice-audits/2021/provincial_care_plan_audit_report.pdf). See, also note 30.



It is important to note that these audits involve a review of documentation of social worker practices and do not contextualize the lack of adherence to policies and standards with critical factors such as staffing levels, leaves and backfill, and caseload/workload.

There have not been any audits of the family services, resources or guardianship functions of social workers since 2021 other than a provincial audit of adoptions practice. MCFD reports that a new provincial practice evaluation of family services is underway, and provincial evaluations of guardianship and resources are in the planning phase.

In 2017, the ministry engaged a consulting company, the Deetken group, to create a reliable analytical tool for child protection services (child protection, guardianship, resources) that would estimate the resources necessary (i.e., staffing) to meet service levels, the current resources available and the gap between them. Initial analysis confirmed that “current expectations significantly exceed the available resources.”<sup>37</sup> The Child Protection Workload Model was developed in 2019, which found that there was a huge gap of 636 full time equivalent (FTE) additional staff required to achieve 85 per cent compliance with child protection practice standards.<sup>38</sup> The model further found that even by completing proposed strategies such as filling the existing 138 vacancies in positions and various administrative measures to reduce workloads, there would still be a shortfall of 188 child protection worker full time equivalent positions (FTEs) that would be required

to achieve the targeted 85 per cent compliance levels. Notably, the entire focus of the ministry’s workload action plan was on administrative measures because there was no budget available for additional front-line staff.<sup>39</sup> The workload analysis tool was abandoned in 2021.

Finally, as will be detailed later, the Representative’s online survey indicated that 81 per cent of MCFD social workers and team leaders state that their workload does not permit them to effectively support the children, youth and families on their caseload while 78 per cent state they are unable to keep up with their administrative work on a weekly basis. As well, while not a majority, a substantial proportion – 44 per cent – reported that they are not able to routinely adhere to the standards, policies, procedures, and practice guidelines expected of them.

“There is no possible way that we can adhere to timelines and best practices with the large caseloads we carry and the lack of admin support. I feel well supported by my colleagues, team lead and director of operations, but incidents will sit for weeks after the initial call because there is not enough time or people to complete it.”

– MCFD Social Worker, 2024

<sup>37</sup> The Deetken Group, *MCFD Child Protection Services Staffing Simulation*, July 11, 2017. Information provided by MCFD, March 8, 2024.

<sup>38</sup> Ministry of Children and Family Development, *Improving Services for Children and Families Through Front Line Workload Management*, February 11, 2020. Workload measurement models were also developed for CYSN and CYMH services, which found a shortfall of 38.5 FTEs for CYSN services and 129 FTEs for CYMH services.

<sup>39</sup> The Deetken Group, *Workload Solutions Workshop*, January 23, 2019. Information provided by MCFD, March 8, 2024.

The major reports briefly reviewed earlier about the workforce capacity of social workers, together with the ministry's own audit and research data about the inability of social workers to comply with practice expectations set out in policies and standards, demonstrate that the lack of adherence to practice standards in the case that prompted the sacred story investigation was not an outlier, but rather a tragic and egregious outcome of a very longstanding systemic issue. Moreover, the challenges associated with social worker workforce capacity have been documented and well known to MCFD senior officials, ministers, and governments for decades. This begs the question: does the persistence of this situation amount to a tacit acceptance by successive governments of ongoing and systemic risks to the safety, health and well-being of children and youth involved in the child welfare system?

Before leaving this issue of known systemic policy non-compliance, it should be noted that the ministry has taken concerted action to ensure there is compliance with the requirement for in-person visits, albeit these actions did not occur in response to the death of the child that prompted the sacred story investigation nor the provincial audit findings of only seven per cent compliance in 2021, but rather in the wake of the furore that arose when the circumstances of his death became public in June 2023 following the sentencing of the individuals who tortured and killed the child in their care, and abused his siblings. In response, the ministry has strengthened and clarified its expectations regarding visits and implemented a new applet with its information system (ICM) to track and monitor completion of child visits. An independent,

third-party evaluation involving staff interviews at four locations and a review of a random sample of 582 case files found 99 per cent compliance with the practice standard for visits within three months.<sup>40</sup> A recently completed follow up evaluation confirmed that this level of compliance has been sustained.<sup>41</sup>

These are impressive improvements in compliance with a specific and important practice standard, but that is just one of a myriad of important practice standards for children involved in the child welfare system. Applets, reinforcement of policy and monitoring do not ease the workload nor improve the capacity of social workers to comply with the expectations of all practice standards. In the context of working conditions where there is ongoing excessive workload, increased work effort devoted to compliance with a specific practice standard inevitably means that there is less capacity to devote to compliance with other practice standards such as timely response to child protection reports or comprehensive assessment and planning to meet the needs of children. In other words, the foundational issue of systemic workload capacity needs to be resolved to better ensure compliance with the practice expectations of social workers, which is an issue that will be discussed in detail. Indeed, instead of addressing that foundational issue of direct service social worker under-staffing, MCFD reports it has created a Child Safety, Oversight and Practice Development Branch under a new Associate Provincial Director of Child Welfare position

<sup>40</sup> Ministry of Children and Family Development, *Children and Youth in Care Visitation Review Report*, February 1, 2024. There was evidence of in-person visitation within three months in 99.1% of cases while a further 0.7% occurred within four months; there was only one case (0.2%) where there was no evidence of an in-person visit.

<sup>41</sup> MCFD also reports that in-person visits are now systematically recorded in its information system (ICM) and as of June 20, 2024, 95% of children and youth were visited as per policy, and 87% were privately visited as per policy.

and that Budget 2024 has provided funding for 40 “oversight” managers and senior staff and financial audit staff. While oversight and tracking is, of course, important, these new positions will very likely be filled by existing MCFD field staff, thereby aggravating current direct service staffing challenges.

In the Representative’s view, increasing capacity to track and oversee direct service work, before ensuring that there is sufficient staff capacity to do the direct service work, seems misguided and echoes the caution in *Don’t Look Away* from the work of Eileen Munro, who conducted a three-year review of the United Kingdom’s child welfare system:

After conducting a three-year review of the United Kingdom’s child welfare system, Eileen Munro observed that, when children die tragically while in the child protection system, there is an understandably strong reaction and efforts are made to make sure nothing like this happens again.

However, systems then typically try to eradicate “risk” through first focusing on professional error (blame the workers) and controlling as much as they can with respect to the work (more policies, procedures and scrutiny) without looking at what caused the worker to be unable to meet the policies or address the needs of the children. Munro came to a conclusion that is also appropriate for B.C. – in reacting and attempting to control, we have consequently built a system that is designed around safety, risk-management and procedures, rather than one that is focused on relational practice to understand what a child and/or family’s issues and needs are and then being helpful to them. Uncertainty in child welfare cannot be overcome simply with more policies and scrutiny on compliance. B.C. has good policies now. A review may find, as it did in the sacred story investigation that we have conducted into what happened to Colby, that policy was not followed and practice was suboptimal. But the more important question is why.<sup>42</sup>

<sup>42</sup> Representative, *Don’t Look Away*, 13. See also, Eileen Munro, *The Munro Review of Child Protection – Final Report: A Child Centred-System* (Department of Education, UK, 2011) See [Munro-Review.pdf](#) ([publishing.service.gov.uk](#)).

## On the Need for Improved Human Resources Metrics

Before moving to a more specific discussion of crucial issues such as workload, staffing, and recruitment and retention, there is a need for comment on availability of key human resource measures.

MCFD is a large ministry, comprised of about 4,900 employees,<sup>43</sup> less than half of whom are child welfare social workers and team leaders.<sup>44</sup> The ministry's primary service streams are: child welfare; children and youth with support needs (CYSN); child and youth mental health (CYMH); and youth justice, all of which are overseen by management and corporate support services and supported by administrative support services.<sup>45</sup> These service streams have different types of professional staff: social workers in child welfare; clinical social workers/counsellors, nurses and psychologists in CYMH; a mix of field CYSN social workers and administrative staff in CYSN services (including Specialized Provincial Services<sup>46</sup>); and youth probation officers, youth custody and youth forensic psychiatric staff in youth justice services. Staff in these service streams have different qualifications and training, are subject to different professional regulatory bodies (or not at all), operate under different legislative frameworks and policies and procedures, and have different roles and responsibilities.

Moreover, staff in these service streams are situated differently: child welfare staff are typically unable to limit their workload whereas CYMH clinicians can triage cases and do limit their workload by establishing waitlists for less urgent services. CYSN social workers have extraordinarily high caseloads, typically in the hundreds,<sup>47</sup> whereas youth justice staff have light workloads.<sup>48</sup> In short, these are in many respects different *workforces* that are distinct in their circumstances and needs, and which require focused attention.

With the decades long history of ongoing issues such as excessive workloads, recruitment and retention and stress and burnout, one would expect that MCFD would routinely gather detailed human resource information about child welfare social workers and different types of social workers (e.g., intake and investigations, resources, team leaders). For example, do child welfare social workers have higher rates of sick leave than other types of workers in the ministry or in the broader public service, or do intake/investigations specialists have higher sick leave rates than, say, adoption social workers? While the ministry can provide aggregated sick leave rates for all ministry staff, due to limitations of the information system that

<sup>43</sup> 4,893 employees as of December 2023. Workforce Briefing to RCY, January 2024.

<sup>44</sup> MCFD reports a headcount as of March 31, 2024 of 2016 child welfare (1764), adoptions (63) and CYSN (189) social workers and team leaders.

<sup>45</sup> The ministry lists Adoptions as a separate service stream from child welfare, as well as Early Years services, the latter of which is overwhelmingly contracted through agencies.

<sup>46</sup> These services, such as Autism Funding and Medical Benefits are principally transactional, except Provincial Deaf and Hard of Hearing Services.

<sup>47</sup> For example, information received from MCFD on July 2, 2024 indicates the provincial average caseload for CYSN workers in June 2024 was 187.

<sup>48</sup> See, Representative for Children and Youth, *Missed Opportunities: A review of the use of youth justice resources*, January 2024. <https://rcybc.ca/wp-content/uploads/2024/01/RCY-Missed-Opportunities-Jan2024-1.pdf>

data is not disaggregated according to service stream and position types within those service streams.<sup>49</sup>

The ministry also does not routinely collect and analyze other key data about the circumstances of child welfare social workers that one would expect. For example, the ministry does not consistently conduct, aggregate and analyze exit interviews of child welfare social workers (or other workers) leaving the ministry, which could provide a wealth of important information about their reasons for doing so and their perspectives on working conditions. While the collective agreement with the BCGEU provides for a procedure for staff to formally identify workload issues – known as Appendix 4 – the ministry does not centrally collect and analyze those reports to ascertain frequency, trends, and the nature and location of the workload issues.

As will be detailed in the next section, the ministry formerly produced reports on staff teams that were critically understaffed at 50 per cent or less of staffed capacity, but no longer does so. Moreover, the ministry does not regularly monitor the number and locations of unstaffed child welfare positions and could not produce a report on the same.

This lack of data not only limited the information available for this review but far more importantly limits the ministry's capacity to identify key issues, develop informed workforce strategies, and track and monitor progress in addressing those issues.

Another crucial metric that is currently missing is a workload measurement tool, a matter that is discussed in the next sections.

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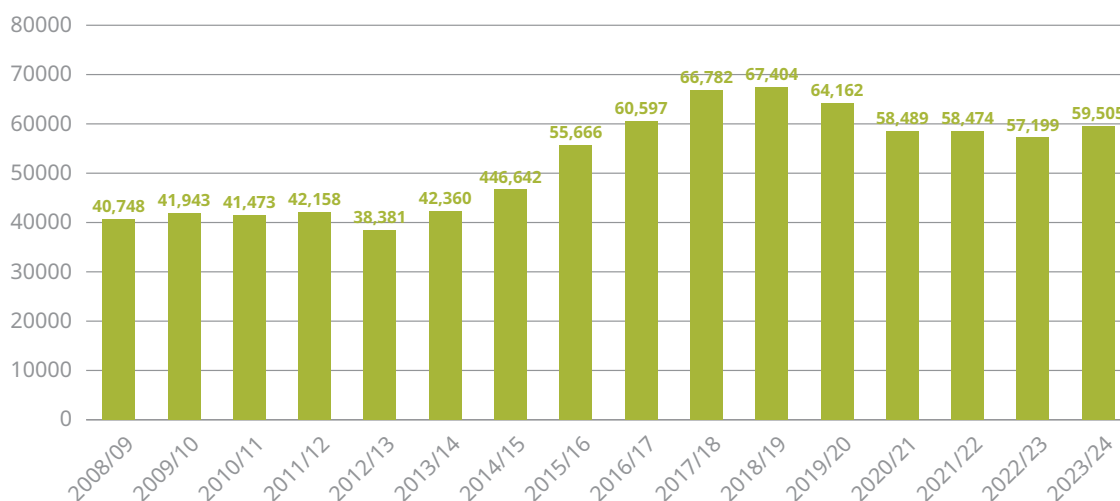
<sup>49</sup> As well, the Workforce Environment Survey (WES) can be disaggregated to multi-service service delivery area and local levels but, notably, are not disaggregated by service stream or occupational types within those service streams.

# Workload Demands on the Child Welfare System as a Whole

Since 2008/09 there has been a steady and very marked decrease in the number of children in care – from 8,832 to 4,834, a 45 per cent reduction.<sup>50</sup> Does this mean there has been an associated decrease in the workload demands on social workers? Hardly so. In order to assess the overall workload demands in the child welfare system, one should step back and look at the macro level at the number of child welfare intakes over time as well as the combination of both children in care and out-of-care options.

Figure 1 describes the annual number of new child welfare intakes in B.C. between 2008/09 to 2023/24, which indicates that intakes steadily increased after 2012/13 to a peak in 2018/19, then moderated during the recent COVID and post-COVID years. Nonetheless, the annual number of new intakes over the past four years has been appreciably greater than 10 years earlier and typically greater than the 2014 to 2016 period when, for example, the BCGEU, RCY, and Plecas reports described great concerns about the workloads of social workers. In short, the workload for social workers associated with assessing and responding to consistently high numbers of new intakes has not diminished.

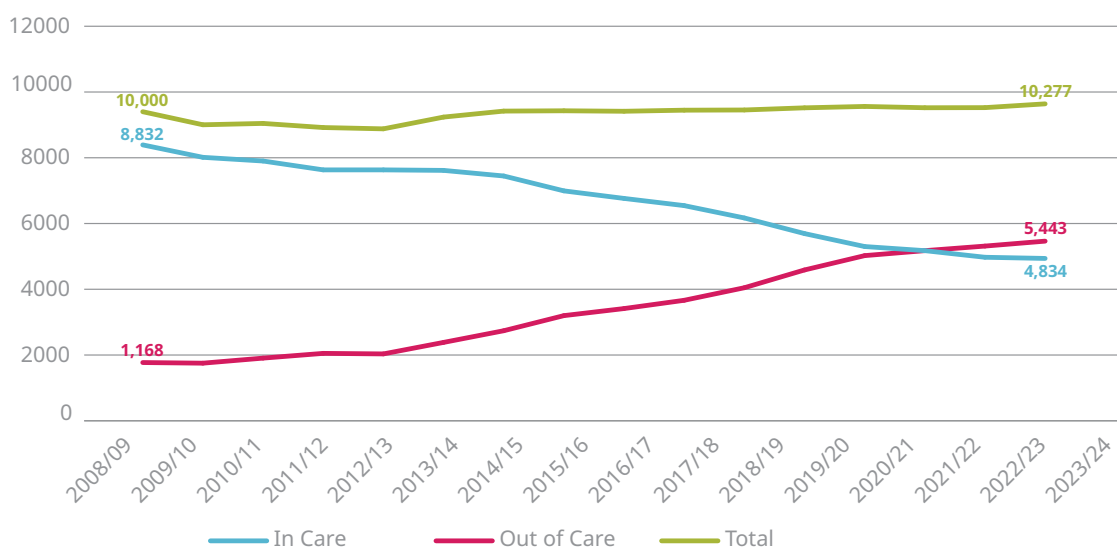
**Figure 1: New Child Welfare Intakes, 2008/09 to 2023/24**



<sup>50</sup> Data provided by MCFD, May 1, 2024. Caseload for both children in care and out-of-care options is measured as at year end (March 31) of each fiscal year whereas intakes are the total number of intakes (coded as Protection Report, Request for Family service or Request for Youth Services) during the course of a fiscal year.

Figure 2 describes the end of fiscal year caseloads for children in care and in out-of-care options separately,<sup>51</sup> and the combination of the two populations. To explain, and as discussed in detail in kinship care section of the *Don't Look Away* report there has been a concerted and successful effort over the past two decades to avoid bringing children into care or, if in temporary or continuing care, to move those children from “stranger care” (foster or group home) to placements with extended family by way of the Extended Family Program or transfers of custody to another person.<sup>52</sup>

**Figure 2: Number of Children in Care and in Out-of-Care Options, 2008/09 to 2023/24**



As Figure 2 indicates, the child in care caseload has decreased in step with equivalent increases in the out-of-care options caseload but the combination of the two populations has been consistently stable at a total of about 10,000 cases.<sup>53</sup> What this constancy suggests is that while the pressure points of workload may have changed over time in concert with these shifts in caseload type, the associated workload has not decreased. For example, with reductions in the number of children in care, ongoing guardianship responsibilities may have decreased, only to be replaced or exceeded by the considerable effort required to find, reach out to, assess, develop plans and agreements with, and support the transition to extended family caregivers. In this regard, social workers often inform the Representative that out-of-care options typically require more work than bringing a child into care.

<sup>51</sup> Data provided by MCFD on May 6, 2024.

Numbers are as of March 31 for each year.

“Out-of-care” includes the Extended Family Program, Out of Care by Court Order, sections 54.1 and 54.01 *CFCSA*, and Youth Agreements. The former Child in Home of a Relative Program (CIHR), which was authorized under the *Employment and Assistance Regulation*, is not included for several reasons. That program stopped receiving new applications after March 31, 2010, with the residual case population that has continued to receive funding dwindling from 4494 on March 31, 2010 to only 145 on March 31, 2024. In contrast to out-of-care options which are all either alternatives to bringing a child or youth into care or a means of moving a child or youth who is in interim, temporary or permanent care to out-of-care kinship placement, CIHR was simply an income assistance program that did not require involvement under the *CFCSA*, did not require screening and assessment, did not have a time limit and review process, and did not require follow up visits by a case worker. Moreover, CIHR was/is simply a financial assistance program that does not create workload for social workers.

<sup>52</sup> See, for example, sections 8 and 54.1 *CFCSA*.

<sup>53</sup> The child in care caseload decreased from 8,832 to 4,834 between 2008/09 and 2023/24 while the out-of-care caseload increased from 1,168 to 5,443. The total number of cases increased from 10,000 to 10,277, a 3% increase.

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## Workload and Caseload

Workload emerged as the single most crucial issue in the online surveys, focus groups and community consultations.<sup>54</sup>

“I have been on vacation for two weeks previously and there has been no coverage other than for emergencies. My team has been understaffed for 3 years. The expectation is that I assist with mentoring new staff, attending meetings and home visits with families on newer staff members’ caseloads, as well as managing my caseload. I do not have the time to develop a working relationship with my families, often resulting in them feeling neglected or disrespected. I work with more high-risk youth these days who require far more attention, sometimes hours a day. I am always behind, resulting in lower quality work which I feel guilty about.”

– MCFD Social Worker, 2024

Although the terms workload and caseload are often used interchangeably, they are quite different. Caseload can, in some circumstances, be a rough proxy measure for workload but workload is a far better indicator of the demands on the capacity of a social worker to carry out safe and effective child welfare practice. A simple count of the number of cases on a caseload cannot capture the considerable differences that arise with the different types of specialist functions of child welfare social workers (e.g., intake and investigations, resources, guardianship) or the mixed caseloads of generalist social workers. Nor does a simple count of cases account for differing complexities of different types of individual cases, court work, referrals to community resources, documentation and administrative requirements, travel requirements in rural communities (or even congested urban centres), requirements to help cover other workers’ caseloads when there are vacancies or leaves, and, given the legacy of residential schools and child protection practices from the past, the time required to learn culture, establish relationships and build trust with Indigenous families and communities. That is why a workload measurement tool, which captures both caseload numbers and types, and the time required to carry out a variety of day-to-day tasks of a social worker, is a far better approach than, for example, setting a simple caseload number as a standard.

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<sup>54</sup> B.C. is not unique in this regard. A cross-Canada 2018 survey of 3258 child welfare social workers by the Canadian Association of Social Workers found that 75% reported that unmanageable workload was a critical issue. *Understanding Social Work and Child Welfare: Canadian Survey and Interviews With Child Welfare Experts*, Canadian Association of Social Workers (CASW), 2018.



Yet, although MCFD did develop and utilize the Deetken workload measurement tool to inform workload management strategies between 2017 and 2019, it has not made the results of that workload measurement tool publicly available to workers or the public and has since abandoned the tool. As noted, it is known that that workload measurement tool found “current (policy) expectations currently significantly exceed the available resources,”<sup>55</sup> or more simply put, there were not enough social workers in place to routinely implement prescribed practice standards.

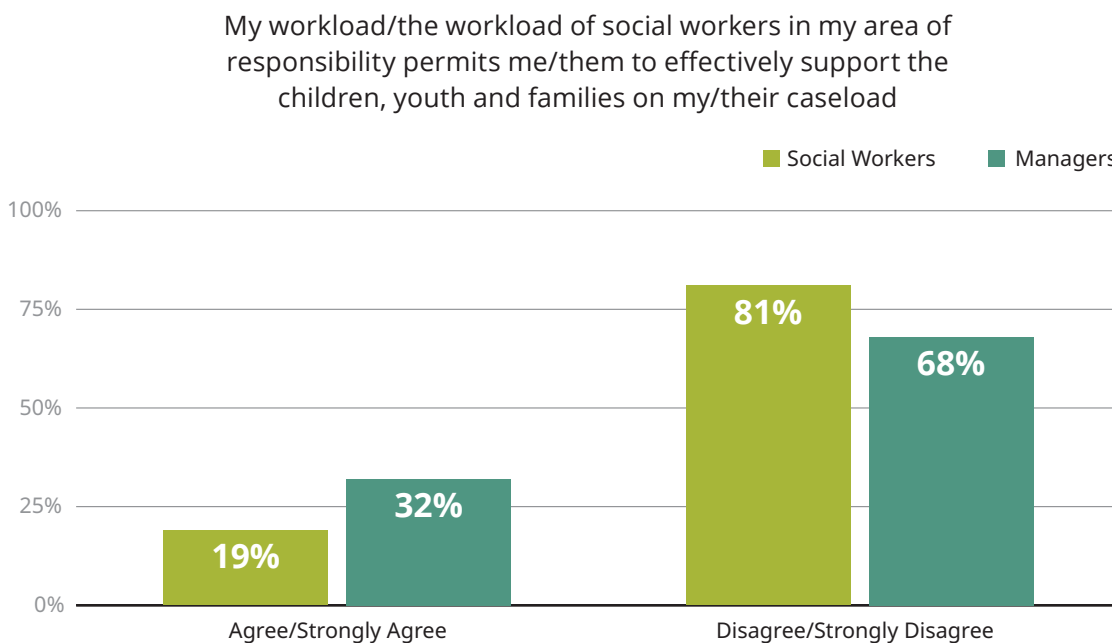
A workload measurement tool can serve several purposes, including the identification of staffing needs to inform the development of recruitment strategies as well as transparency about the circumstances of social workers and context to inform quality assurance assessments of case practice individually, locally and geographically. It is troubling that MCFD has not implemented a workload

measurement tool on an ongoing basis and made the results of those measurements publicly available.

Since the ministry does not have a current workload measurement system in place, we need to look at other indicators.

As Figure 3 indicates, over three-quarters (81%) of social workers and team leaders responding to the Representative’s 2024 online survey disagreed (32%) or strongly disagreed (49%) that their workload permits them to effectively support the children, youth, and families on their caseload. Notably, the strength of these views was very pronounced not only in terms of the cumulative total but also the proportion of strongly disagree responses (49%). As well, more than two-thirds (68%) of MCFD managers shared the views of the social workers and team leaders under their charge.

**Figure 3: Workload**



<sup>55</sup> Deetken, *Staffing Simulation*.

Social workers and team leaders were also asked to identify the top three issues where there was greatest need for improvement so there would be better assurances of quality services to children, youth and families. Workload was overwhelmingly the first choice: 55 per cent ranked caseload/workload as the number one area (and 17 per cent ranked it as number two) with the next most frequently ranked first choices being workplace stress and satisfaction at ten per cent and training and professional development at nine per cent. It is likely that there is a connection between the first two choices of social workers and team leaders, i.e., if workload was relieved so too would workplace stress be relieved.

Caseload/workload was also overwhelmingly ranked as the number one area for improvement by 48 per cent of managers, with the next most frequent first choices being supervision and mentorship and organizational culture and direction at 11 per cent each.

A thematic analysis of the workforce capacity component of the RCY's 2024 community engagement sessions found that workloads and caseloads were the most prominent theme, with participants commenting that social workers caseloads were too high, stretching them too thin, and not enabling them to deliver quality work and make adequate time for the children and families they serve.

The online survey of social workers and team leaders gave respondents the opportunity to provide additional narrative comments on the specific topic areas. Two-thirds (66%)<sup>56</sup>

provided narrative responses about the topic of workload, many of which were lengthy and multi-faceted. Analysis of these narratives underlines the inter-relationship between workload and other aspects of workforce capacity. For example, workload is affected by the adequacy of administrative, social worker assistant and technological support – if these are not adequate then greater administrative burdens fall on social workers. In this regard, just over three-quarters (78%) of social workers and team leaders indicated they are not able to keep up with their administrative work on a weekly basis, with an even greater majority of managers (84%) sharing the view that social workers are unable to do so. As well, almost two-thirds (65%) of social workers and team leaders disagreed or strongly disagreed that their office has sufficient assistant supports (such as administrative and Social Program Officer assistants) with 44 per cent of managers sharing that view.

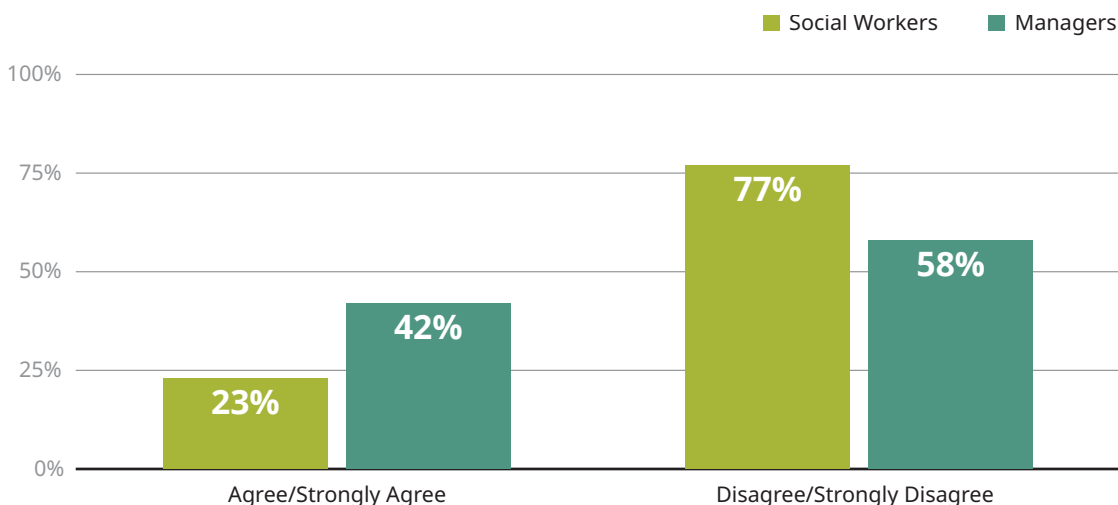
Similarly, the adequacy of community support resources for children and families such as individual child or family support workers, mental health and addictions services, respite care, and so on, affect workload – if these are not available in a timely way, or at all, then social workers spend more time making multiple referrals to agencies and/or patching together less adequate substitute services. As Figure 4 indicates, the vast majority (77%) of social workers and team leaders reported that they do not have timely access to the range of family and community support resources to effectively meet the needs of their clients, while a substantial majority (58%) of managers agreed with those views.

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<sup>56</sup> 490 out of 739 respondents added comments on the workload topic.

#### Figure 4: Access to Family and Community Support Services

In my geographic area, I/social workers have timely access to the necessary range of family/community support resources to effectively meet the needs of children, youth and families on my/their caseload



One key area directly related to workload where there was overwhelming consensus was found in the responses to questions in the survey about backfill coverage of vacant positions or colleagues on leave:

- Almost all (98%) social workers and team leaders indicated that they are required to help cover the caseloads of others when they are on leave or when the office is understaffed (in addition to their regular caseload). All (100%) of the responding MCFD managers concurred that social workers are required to do so.
- Eighty-seven per cent (87%) of social workers and team leaders disagreed (30%) or strongly disagreed (57%) that there is adequate coverage to meet the needs of the children, youth and families on their caseload when they go on leave, with an even greater majority (90%) of managers concurring.

Thematic analysis of the narrative responses to the workload-related questions in the survey indicated that the associated issue of backfill coverage elicited the most frequent comments next to workload itself.<sup>57</sup> This is not surprising given that even if a social worker's assigned workload is manageable, having to take on the work of a vacant position or absent colleague – even if limited to emerging critical issues – quickly makes that workload unmanageable. In their narrative responses, social workers said that only emergencies get dealt with, while regular case work and planning for families halts when their colleagues are on leave. They highlighted that families are suffering with inadequate and fragmented services, and that when children and families are not being seen or not receiving services that they need due to a lack of adequate backfill for staff on leave, children are put at risk. They described being often

<sup>57</sup> Matters associated with backfill coverage elicited 36% (176) of the 489 coded responses from social workers and team leaders.

overloaded with coverage work that is not reflected in the caseload numbers because that work is not specifically assigned to them yet expected of them to complete. Many comments reflected the fact that, other than emergencies, there is no coverage for any sort of leave and that the work simply waits and builds up until they return, at which time they are inundated with tasks, creating more stress.

“It has been incredibly difficult to balance my own workload, covering the workloads of colleagues who are on leave/have quit, and the mentorship of new staff and practicum students. Multiple staff have cried over the inability to manage it all, myself included.”

– MCFD Social Worker, 2024

The ministry has had significant issues with vacant positions. In this regard, the ministry has in the past produced regular reports on teams that were staffed at 50 per cent or less, the last of which was for July 2022. Concerningly, that report indicated there were 46 child welfare teams across the province that were staffed at 50 per cent or less, not just in rural communities, but in almost every service delivery area in the province.<sup>58</sup> Notably, the team that was responsible for care of the child that prompted the *Don't Look Away* report was on that list.

<sup>58</sup> Information provided by MCFD, May 17, 2024. Eleven of the (then) 13 SDAs had teams identified, 15 from the (then) three Fraser SDAs. There were also two specialist CYSN and ten child and youth mental health (CYMH) teams on that list.

It is concerning that the ministry no longer centrally and routinely gathers this information or similar information about unstaffed teams and positions. In response to a request for data on unstaffed social worker positions, the ministry responded that its human resources information system cannot reliably produce that data.<sup>59</sup>

The Representative also requested the ministry to provide sick leave rates for child welfare social workers but, again, was unable to produce that information specific to social workers. The ministry does, however, have aggregated sick leave data, which indicates that, overall, employees of the ministry have had sick leave rates that have been consistently and significantly (49%) greater than the BC Public Service average.<sup>60</sup> What this means is, given that social workers are routinely asked to cover the workloads of absent colleagues, they must do so at a far greater extent than their public service colleagues, thereby aggravating their workload burdens.

<sup>59</sup> These reports were sourced from self reports from the Executive Directors responsible for service delivery, not from the corporate human resources information system.

<sup>60</sup> Ministry of Children and Family Development, *Short Term Illness and Injury (STIIP) Report*, Updated March 15, 2023. “Sick leave” actually means illness and injury leave. MCFD averaged 13.8 sick days per employee in comparison to the BC Public Service average of 9.2 days. Additional data provided by the ministry indicated that in the five-year period between 2018 and 2022 MCFD’s average sick leave days per employee was 44% greater than the BC Public Service average. It is likely that the sick leave rates for child welfare social workers are even greater given that the 2023 ministry report indicated that the sick leave rate (14.6 days) in the ministry’s Service Delivery Division, where child welfare social workers are located, was higher than for the ministry as a whole (13.8 days). As well, MCFD reports the average number of sick leave days in 2023/24 increased to 15.0 which was the highest on record since 2011/12.

## Health and Wellness

Almost all of the significant reports about child welfare services over the past three decades highlight concerns about the health and wellness of social workers, in particular work-related stress, burnout and turnover. The nature of the work itself is emotionally and psychologically demanding and can lead to what is known as secondary or vicarious trauma. Child welfare social workers can experience trauma directly by witnessing the experiences of children and families on their caseload or secondarily through the stories they hear from their clients or co-workers, or information read in a file. Research in Canada has shown that burnout, compassion fatigue and post-traumatic stress are common amongst child welfare social workers<sup>61</sup>, whereas research in other jurisdictions has shown that more than one-half of child welfare workers experienced symptoms that replicated the symptoms of post-traumatic stress disorder (PTSD).<sup>62</sup>

The inherently stressful nature of child welfare social work can, of course, be considerably aggravated by the nature of the working conditions such as excessive workload or inadequate mitigating measures to help staff better cope with workplace stresses.

“The community I work in is incredibly understaffed and the expectations from management are extremely high. Not only is there a lack of physical/logistical support but there is a significant lack of emotional support and understanding for those taking on an extra workload (and a significant backlash when staff prioritize their own well-being). This inevitably led to significant burnout for me. I was taking on 90% of new intakes, managing multiple court-involved complex FS (family service) and guardianship files, mentoring 3 new hires, AND acting as TL (team leader) when my supervisor was away. This is a system-wide issue but is amplified in some offices.”

– MCFD Social Worker, 2024

To assess the degree of stress experienced by MCFD child welfare social workers and team leaders, the online survey incorporated six questions from the Mental Health Commission of Canada’s Guarding Minds survey – the Stress Satisfaction Scan – which is a screening measure that offers a snapshot of employee stress and satisfaction. Of the six questions, two are indicators of levels of stress while four are indicators of mediating factors that can serve to mitigate that stress. For example, stressful work due to prolonged high demand and high mental effort over time can have a negative impact on psychological health. A perceived lack of supervisory support, fairness

<sup>61</sup> See, [https://www.casw-acts.ca/files/documents/CASW\\_Child\\_Welfare\\_Report\\_-\\_2018.pdf](https://www.casw-acts.ca/files/documents/CASW_Child_Welfare_Report_-_2018.pdf)

<sup>62</sup> A. Barbee, L. Purdy, and M. Cunningham, “Secondary traumatic stress: definitions, measures, predictors and interventions.” *Quality Improvement Center for Workforce Development*, September 2023. STS-Brief\_0.pdf (qic-wd.org)

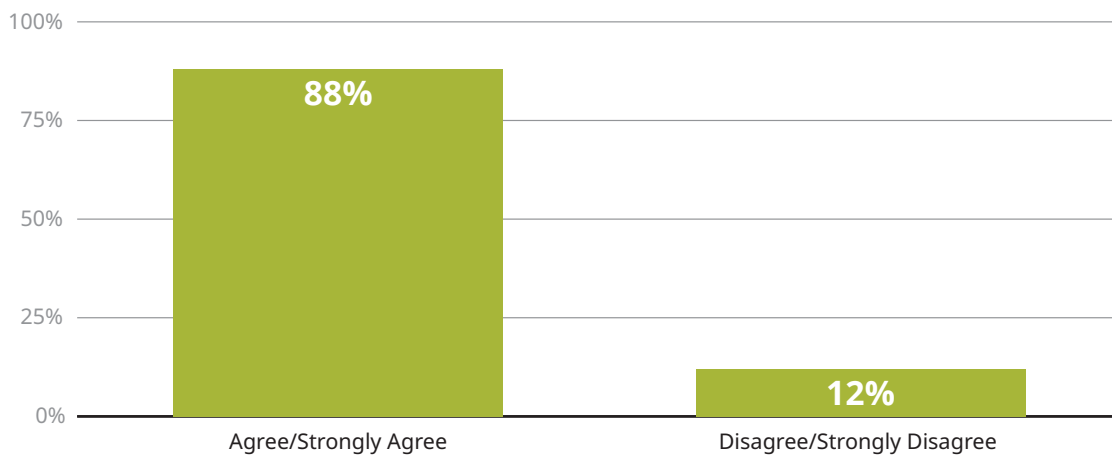
and respectfulness can worsen the impact. Conversely, these same stressful conditions can have less negative impact on employees when supervisory support, fairness and respectfulness are also experienced.<sup>63</sup>

The findings from the Stress Satisfaction Scan are deeply concerning and underscore the urgency for the ministry to take steps to ameliorate the working conditions of child welfare social workers. As illustrated in Figures 5 and 6, social workers and team

leaders are experiencing extraordinarily high levels of stress: an overwhelming proportion (88%) said that in the last six months too much time pressure at work has caused them worry, “nerves” or stress, while an even greater proportion (90%) agree that in the last six months they have experienced worry, “nerves” or stress from mental fatigue at work. There was a notable strength to these responses, with 57 and 61 per cent respectively “strongly” agreeing.

**Figure 5: Stress from Time Pressures**

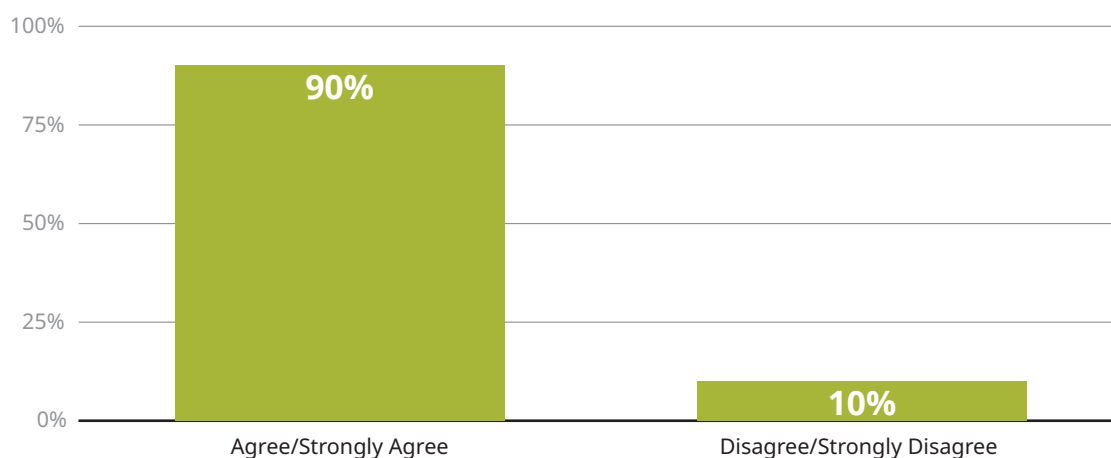
In the last six months, too much time pressure at work has caused me worry, “nerves”, or stress



<sup>63</sup> See, Understanding their Stress Satisfaction Scan, <https://www.workplacestrategiesformentalhealth.com/resources/understanding-the-stress-satisfaction-scan>

**Figure 6: Stress from Mental Fatigue**

In the last six months, I have experienced worry, “nerves”, or stress from mental fatigue at work



Turning to the four mediating factors that could serve to mitigate these very high levels of stress, three did not emerge, which indicates that more work is required for the ministry and managers to strengthen these:

Notably, almost two-thirds (64%) of social workers and team leaders do not feel they are well rewarded in terms of praise and recognition for the level of effort they put out for their job.

More than half (55%) are not satisfied with the involvement they have in decisions that affect their work.

More than half (52%) are not satisfied with the fairness and respect they receive.

On the other hand, one mediating factor – supervisor support – did emerge as a significant contributor to the mitigation of stress: more than two-thirds (69%) agreed that their supervisor supports them in getting their job done. This appears to be an area of existing strength that can be built upon, and which is discussed in detail in the next section.

It is notable that managers also expressed very high degrees of stress, with similar responses to the two stress questions (85% and 84% respectively), however, that high stress was mediated to a far greater degree than social workers and team leaders by the mitigating factors. More managers than social workers are satisfied with the amount of involvement they have in decisions that affect their work (76%), more feel they are well rewarded in terms of praise and recognition (67%), more feel they are treated with fairness and respect (83%), and even more enjoy the support of their supervisor (83%).

As discussed earlier, MCFD has a much higher rate of sick leave than the average in the BC Public Service, albeit these data cannot be disaggregated specifically to child welfare social workers. Excessive stress can, of course, lead to excessive sick leaves, which in turn affects services to children and families and further burdens colleagues with coverage responsibilities.

The ministry has acknowledged that stress and workload is a factor that contributes to these high rates of sick leave.<sup>64</sup> This is an important issue that should be further explored by the ministry to better inform remedial measures.

“This is a crisis which causes immense harm to children, youth, families and social workers. The cycle repeats. Social workers are overworked leading to illness and time off. Which causes more trauma and stress to other social workers who are left to pick up extra caseload. This is horrific and unacceptable.”

– MCFD Social Worker, 2024

One measure to mitigate employee stress is by making supports available yet, as shown in Figure 7, the majority of social workers and

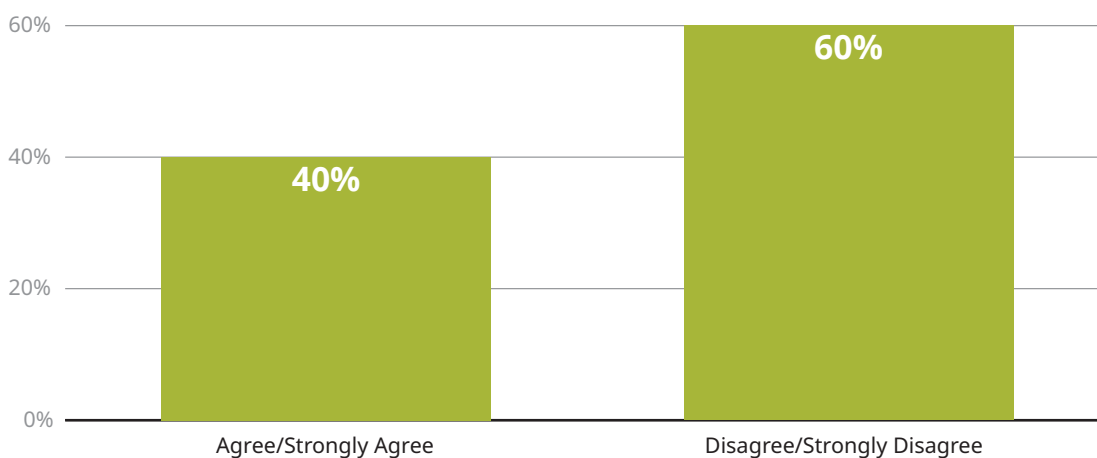
team leaders (60%) say that they are not provided with the necessary supports such as debrief, counselling, and mental health supports to help them deal with stress and vicarious trauma.<sup>65</sup>

There is, of course, an obvious connection between excessive workload and workplace stress and satisfaction, especially given the inherently stressful nature of child welfare work. This connection is reflected in the survey responses: when asked to rank the three most important areas in need of improvement, social workers and team leaders identified workload as the first priority, but stress and satisfaction as the next most frequent first choice; as well, workplace stress and satisfaction was their most frequent second priority.

Ongoing excessive workloads and excessive stress without adequate mitigating measures obviously can impact staff morale. This was evident from the responses of social workers and team leaders, 61% of whom said their work unit’s morale was not positive or high.

### Figure 7: Mental Health Supports

I’m provided the necessary supports such as debrief, counselling, and mental health supports to help me deal with stress and vicarious trauma when I need them



<sup>64</sup> Ministry of Children and Family Development, *People and Culture Plan Update*, 2022.

<sup>65</sup> Conversely, 77% of managers agreed that they were provided the necessary supports such as debrief, counselling or mental health services.



## Supervision and Mentorship

As noted earlier, support from supervisors emerged as a significant mediating factor in mitigating the considerable stresses experienced by child welfare social workers. Supervisors play a significant role in supporting child welfare social workers by setting clear expectations, facilitating training and resources, offering clinical guidance and support, mentoring, advocating for necessary staff and office resources, offering emotional and psychological support, recognizing achievements, and fostering a positive staff culture. These findings identify an area of existing strength that can be built upon and, importantly, aligns with the research literature as an important factor in not only stress mitigation and work satisfaction but also staff retention.<sup>66</sup>

There were additional findings from the survey which indicate a generally positive view of supervisors and allied supports:

- Almost three-quarters (73%) of social workers and team leaders<sup>67</sup> agreed that they are able to access their direct supervisors in a timely manner, so they receive advice and guidance when they need it

- Just over two-thirds (69%) agreed or strongly agreed that they are able to access practice support, expertise and guidance when they need it from either their direct supervisor, experienced colleague or practice consultant
- Two-thirds (66%) of social workers and team leaders agreed or strongly agreed that their unique skills and talents are valued and utilized.

On the other hand, an appreciable proportion (31%) of social workers and team leaders reported they did not agree that their supervisor supports them in getting the job done. Moreover, a slight majority (52%) indicated they did not have sufficient opportunities to receive direct mentorship from experienced colleagues. Support from colleagues is clearly important: when asked where they get the greatest degree of satisfaction in their job from, a majority (55%) of social workers and team leaders said it is the children, youth and families they work with, but the next most common (35%) was their colleagues.

A common theme throughout the narrative responses to the survey and the focus groups was that team leaders are often too preoccupied with administrative tasks, responding to urgent situations, and backfilling absent staff or vacant positions to be able to provide the degree of necessary mentorship, clinical guidance and psychological and emotional support to staff that they should. The same was true of experienced social workers who are often informally sought out by less experienced staff for advice and support but, having heavy workloads themselves, these informal mentors are unable to do so to the extent necessary.

<sup>66</sup> See, [https://www.casw-acts.ca/files/documents/CASW\\_Child\\_Welfare\\_Report\\_-\\_2018.pdf](https://www.casw-acts.ca/files/documents/CASW_Child_Welfare_Report_-_2018.pdf) and see also: *Building a 21st Century Children Services Workforce*. Public Children Services Association of Ohio. February 2022. [https://www.researchgate.net/publication/358414866\\_Building\\_a\\_21st\\_Century\\_Children\\_Services\\_Workforce](https://www.researchgate.net/publication/358414866_Building_a_21st_Century_Children_Services_Workforce) "The Workforce Development Framework." National Child Welfare Workforce Institute. November 2019. [https://ncwwi.org/files/Workforce\\_Development\\_Framework\\_Brief.pdf](https://ncwwi.org/files/Workforce_Development_Framework_Brief.pdf) "Child Protection Workforce Strategy." Victoria State Government, Health and Human Services. Impact Digital, 2018, Brunswick. [https://www.vgls.vic.gov.au/client/en\\_AU/search/asset/1297807/0](https://www.vgls.vic.gov.au/client/en_AU/search/asset/1297807/0)

<sup>67</sup> Team leaders are of course, supervisors themselves. The responses of team leaders and line social workers were disaggregated and compared to determine if there were appreciable differences in responses, and there were not. Given these similarities and since both groups are front-line workers, their responses were grouped together for ease of description.

# Training and Professional Development

When social workers and team leaders were asked to rank the top three areas in need of improvement, workload and caseload was by far the first choice, with the inter-connected issue of workplace stress and satisfaction the next most frequent choice. Training and professional development was identified by social workers and team leaders as the next most important area in need of improvement, some key aspects of which emerged through related questions in the survey.

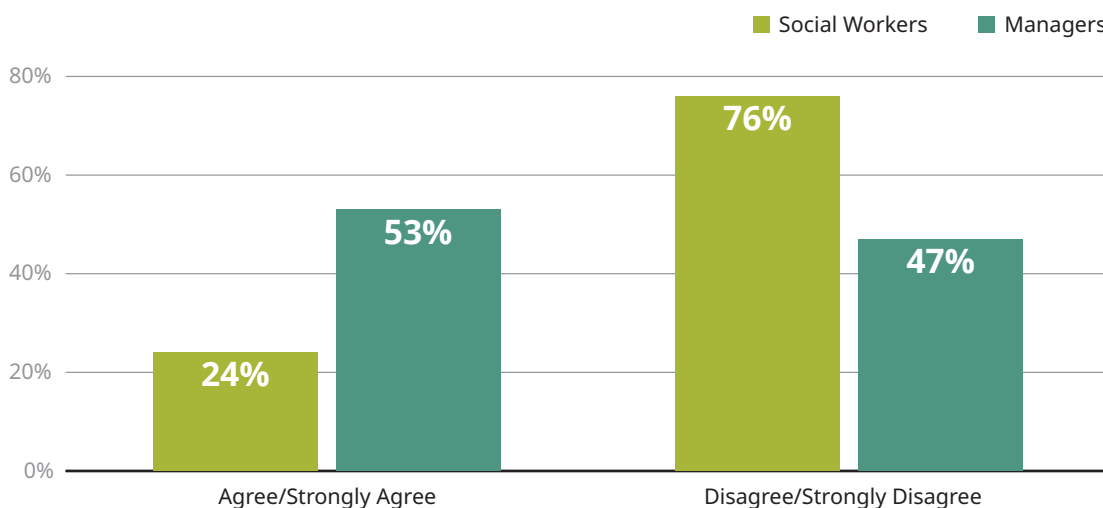
Although data is not disaggregated to child welfare social workers, it is known that the annual rate of exits of staff from MCFD as a whole is much higher than the BC Public

Service average.<sup>68</sup> A high turnover of social workers requires an equally high rate of hiring of new social workers.

As shown in Figure 8 below, the great majority (76%) of social workers and team leaders disagree or strongly disagree that newly hired staff are provided sufficient onboarding, initial training, mentorship and supervision to ensure they are able to effectively carry out their work. Managers' views on this issue are more divided, bearing in mind that there is substantial concurrence (47%) and that it is social workers and team leaders who are best positioned to directly observe the experiences of newly hired staff.

**Figure 8: Support for New Hires**

Newly hired staff are provided sufficient onboarding, initial training, mentorship and supervision to ensure they are able to effectively carry out their work



<sup>68</sup> See, [https://www.casw-acts.ca/files/documents/CASW\\_Child\\_Welfare\\_Report\\_-\\_2018.pdf](https://www.casw-acts.ca/files/documents/CASW_Child_Welfare_Report_-_2018.pdf). In the five year period between 2017/18 and 2021/22, MCFD's staff exit rate was on average 45% higher than the BC Public Service average.

These concerns about the inadequacies of the onboarding, training, mentorship and supervision of new staff were elaborated through the narrative responses to the survey, focus groups and community engagements: due to the combination of excessive workload and under-staffing, together with urgent needs of children and families, newly hired staff are too often asked to take on responsibilities they are not yet ready to undertake. In such circumstances, team leaders are faced with an unpalatable choice – assigning inexperienced workers or not – with neither choice serving children and families well.

“When I was a new hire (under six months) I was assigned 41 files on the intake team as one of my team members was in so far over her head she had to take a leave. I was overwhelmed, and under prepared. I was [staying] at work some nights until 10pm trying to catch up on all the notes, read the files and understand what needed to be done. I know looking back I didn’t do my best work. I was drowning and a brand-new hire. It felt like I was running around and getting no traction but all upper management wanted to see was files closing. I know there were families who I did a disservice to, how could there not be when I had 41 files and on average was being assigned two new ones a week. It was a mess and I don’t think it’s getting any better.”

– MCFD Social Worker, 2024

If staff are to be provided training and professional development, they need the time and opportunity to do so, yet the great majority (76%) of social workers and team leaders – with a majority (55%) of managers concurring – responded that when they want to engage in training opportunities, they are not provided with coverage and uninterrupted time to focus on learning. Here again, we see through the narrative responses, focus groups and community engagements the connection between excessive workload and under-staffing and how that inhibits access to training and professional development: staff say they are hesitant to or cannot leave an overwhelming workload unattended (or under-attended) and if they do so may pay a price to catch up when they return to their caseload work.

“There is no time left over for training or development as you are running to put out one fire after another. ”

– MCFD Social Worker, 2024

A crucially important area of training and professional development, and a key issue that emerged in the case of the child that prompted the *Don’t Look Away* report, relates to the capacity of child welfare social workers to work with Indigenous children and families, and their communities. An Indigenous child is about 18 times more likely to be in care than their non-Indigenous counterparts, and Indigenous children and youth comprise more than two-thirds of those in care.<sup>69</sup> This is a direct result of the impacts of colonial practices that have fractured families and communities over generations. Workers’ understanding of this dark history and capacity to support Indigenous children,

<sup>69</sup> Ministry of Children and Family Development, 2023/24 – 2025/26 Service Plan, February 2023.

families and communities in culturally aware and attuned ways is especially important. Further, with federal and provincial legislation in place that is enabling First Nations, Inuit and Métis peoples to restore their laws and resume jurisdiction over child and family services, there is significant shift in expectations for practice and relationships during these transitional times which can, as evidenced in the *Don't Look Away* report, lead to confusion about roles and responsibilities. In 2019, the federal government enacted legislation that changed the landscape of and added considerable complexity to child welfare practice in relation to Indigenous children and youth, and which will enable Indigenous Governing Bodies to establish their own laws and governance over child and family services,<sup>70</sup> while in 2022 the provincial government passed complementary amendments to the *Child, Family and Community Services Act* (CFCSA).<sup>71</sup>

A substantial majority (75%) of social workers and team leaders responded to the survey by saying that they think they have the cultural awareness and attunement necessary to be able to work effectively with the Indigenous children, youth and families on their caseload. They have much less confidence and agreement, however, with respect to the transformative legislative changes respecting Indigenous children and families:

- Social workers and team leaders were equally divided on whether or not they have sufficient information about and training in how to work with and apply the federal government's *An Act respecting First Nations, Inuit, and Métis children, youth and families* and the provincial government's related amendments to the *CFCSA* so

they can work effectively with Indigenous children, youth and families, and their communities, with a slight majority (53%) saying they have had sufficient training.

- They were also equally divided on the following: "During this period of emerging assertion of and transition to First Nations and Métis jurisdiction over child and family services, I have the necessary knowledge, skills and support to work effectively with Indigenous children, youth and families, and their communities," with a slight majority (53%) saying they do not have the necessary knowledge, skills and support.

Regardless of the division of views on these matters, roughly half of social workers and team leaders indicate that they have not had sufficient information and training in these matters, which is essential now and will be even more so as the resumption of Indigenous jurisdiction moves forward.

Finally, a key issue with respect to the training and professional development of social workers is the application of the *Social Workers Act*,<sup>72</sup> which establishes the BC College of Social Workers ("the College"). The College is a regulatory body for the profession of social work in B.C., with a mandate to protect the public from preventable harm by assessing the credentials of and registering qualified social workers, encouraging high standards of practice and reviewing complaints concerning social work practice.<sup>73</sup> A registrant must have a degree in social work from an institution accredited by the Canadian Association of Social Work Education. Employees of MCFD are exempted from mandatory registration with the College.

<sup>70</sup> *An Act respecting First Nations, Inuit and Métis children, youth and families* (S.C. 2019, c. 24)

<sup>71</sup> Legislative Assembly of British Columbia, *Bill 38 Indigenous Self-Government in Child and Family Services Amendment Act*, November 2022.

<sup>72</sup> SBC, Chapter 31

<sup>73</sup> See, <https://bccsw.ca/To>

The 1995 Gove Report, which led to the creation of the Ministry of Children and Family Development, recommended a requirement that all ministry social workers should be overseen by a self-governing professional body.<sup>74</sup> In the ensuing years the ministry promoted and supported the requisite professional qualifications and registration with the College but then abandoned that initiative. Since that time, in the interest of improving recruitment and in keeping with the recommendations of the Special Advisor on Indigenous Children in Care,<sup>75</sup> in 2019 the ministry moved in the opposite direction by expanding accepted educational qualifications for new social workers to include, for example, psychology, sociology, criminology, anthropology, early childhood education, Indigenous studies, education, theology or nursing.<sup>76</sup> As well, ministry child welfare staff are no longer described as “social workers” by the ministry but rather simply as “workers” such as “child protection worker” or “resource worker”.

The issue of professional qualifications and oversight of social workers is controversial and very challenging. MCFD recently conducted a series of public engagement events about the issue of oversight of social workers in the province. A “What We Heard” report of feedback they received from social workers, the public and stakeholder groups was posted on June 28, 2024,<sup>77</sup> which described diverse perspectives on this complex matter. That report states that the ministry intends to conduct further research and analysis to better understand and explore the impacts and effect of potential approaches. The Representative will not pre-empt that important process by examining this issue in this report but rather will address the matter in her second report on workforce capacity in late fall of 2024.

<sup>74</sup> Gove, *Matthew's Story*, recommendations 45 and 46.

<sup>75</sup> Province of B.C. *Indigenous Resilience*.

<sup>76</sup> In the administrative fairness process the ministry noted that degrees in Social Work and Child and Youth Care will continue to be the preferred degrees and applicants will continue to be screened and assessed at the time of hiring for a beginning level of competence as outlined in MCFD's Child/Youth Safety and Support Competencies (2014).

<sup>77</sup> Ministry of Children and Family Development, *Social Work Oversight Engagement in British Columbia*, June 28, 2024. <https://engage.gov.bc.ca/govtogetherbc/engagement/social-work-oversight-2/>

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## What the Ministry Has Done

The ministry has acknowledged many of the issues identified in this report – such as workload, recruitment and retention, and worker stress – and reports it has taken a number of steps to improve the working conditions of child welfare social workers.<sup>78</sup>

Key examples of those steps include:

- In 2014 establishing the Provincial Mobile Response Team to provide short term critical backfill requirements across the province in circumstances where a community is critically understaffed.<sup>79</sup> This team is complemented by a roster of additional social workers willing to volunteer for short term assignments to critically under-staffed areas.
- Centralizing intake and screening through the Provincial Centralized Screening in 2015 to remove work from field staff.
- Establishing a new child welfare training program in 2017 and in the interest of widening the recruitment pool of potential candidates, expanding the range of eligible university degree credentials in 2019.<sup>80</sup>
- To enhance recruitment and retention, providing additional compensation by way of annual incentive payments to front line workers in designated hard-to-recruit areas of the province, and increased compensation by way of temporary market adjustments for all social workers and more so for child protection social workers.
- Establishing a centralized internal hiring services team to increase and expedite the hiring process.
- With respect to better mental health supports, establishing a Critical incident and Cumulative Stress Management program through an external counselling provider<sup>81</sup> and a peer-to-peer support pilot project in the South Island.
- The addition of some social program officer assistants to relieve administrative work from front line social workers.
- Streamlining policy generally and temporarily modifying duties (i.e., relaxing policy requirements) in critically under-staffed areas to reduce expectations and workload.
- In December 2023 establishing the Provincial Centralized Administration Team (PCAT), a remote team that provides support to selected MCFD offices by taking care of administrative tasks that can be completed virtually, thereby alleviating pressure on direct service staff.
- In May 2024, establishing a centralized Jurisdiction Team to receive and refer child protection reports to Indigenous Authorities, to serve as a centralized 24/7 hub for inquiries related to jurisdiction agreements, and share information after-hours to support child safety responses and planning.

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<sup>78</sup> Information in this section was gleaned from a variety of documents provided by MCFD during the spring, 2024.

<sup>79</sup> MCFD reports a total of 6 staff (FTEs) assigned to this team in 2023/24.

<sup>80</sup> MCFD reports there were 50 new social workers hired with these expanded credentials in 2023.

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<sup>81</sup> Through government's Employee and Family Assistance Program (EFAP).

As well, the ministry has developed a “People and Culture” human resources plan, updated in 2022. More recently, in December 2023 the ministry drafted a first Child and Family Services Sector Workforce Plan;<sup>82</sup> since that plan is a draft in a developmental stage there is opportunity for the ministry to incorporate the recommendations from this report into that larger plan, with a clear and funded action plan accompanying it.

Some of the initiatives described above, such as centralizing screening and mobile response teams do not increase capacity nor reduce overall workload but rather relocate or change who, within an overall staffing complement, assumes that workload. Indeed, the fact that a mobile response team has had to remain in place for the past ten years to backfill critically under-staffed areas exemplifies the endemic nature of the staffing crisis.

With respect to the core issue of workload and staffing capacity to manage that workload, due to limitations of the government-wide human resources information system (CHIPS), the ministry was not able to provide reliably comparable staffing data from 2008/09 to 2023/24, instead providing reliable measures only from 2019 onward.

Given this, the Representative was not able to comprehensively assess changes over the entire period and in particular, verify whether the 2014 commitment to an increase of 200 child welfare staffing positions was implemented and maintained. That said, there does not appear to be reason to believe that was not the case. Even so, as was discussed earlier, it was in 2020 – well after the time when that new staffing was put in place – that the Deetken workload measurement found that the staff complement required for staff to meet social worker practice standards significantly exceeded current staffing levels.<sup>83</sup>

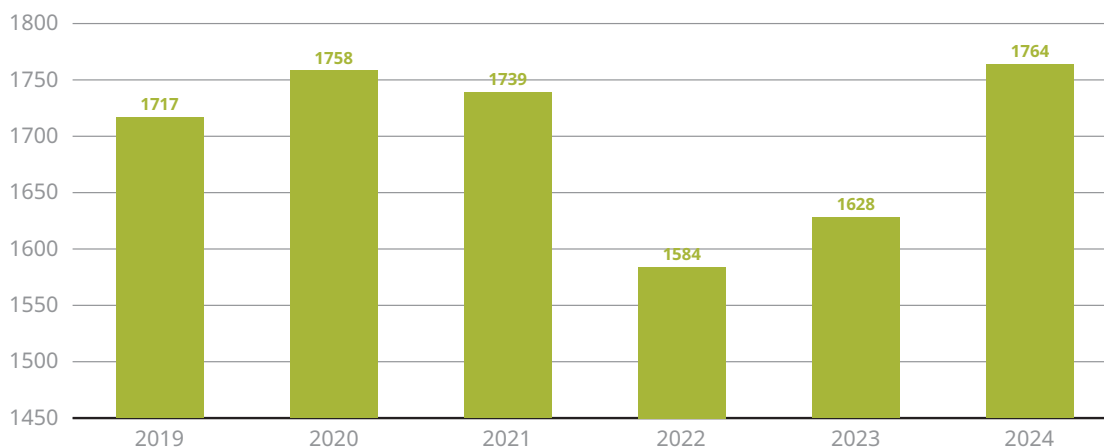
Figure 9 describes the headcount of child welfare staff as of March 31 for each year between 2019 and 2024.<sup>84</sup> As indicated, child welfare social worker and team leader staffing levels decreased appreciably during the COVID years but have recovered in 2024 to achieve parity with 2020, the year the Deetken workload measurement tool found the significant gap in staff resourcing.

<sup>82</sup> This plan addresses the entire ministry workforce as well the ministry’s contracted agencies (non-governmental) workforce.

<sup>83</sup> It is noted that the target for compliance with policy expectations was 85%, not 100%.

<sup>84</sup> The headcount includes social workers described as child protection, child protection multi (generalists), resource, child and family, and child welfare team leaders. Administrative support are not included nor are adoptions social workers and adoptions team leaders, given their distinctive specialist roles. (The number of adoptions social workers and team leaders remained stable through that period.) Data also does not include CYSN social workers because, although they deal with cases under the *CFCSA*, their caseloads are principally not *CFCSA* involved. The number of CYSN social workers and team leaders increased from 147 to 189 between 2019 and 2024 although the number of children and youth with support needs also substantively increased during that period; see footnote 39 regarding CYSN caseloads.

**Figure 9: MCFD Child Welfare Staff Headcount as of March 31**



There are three ways to reduce workload: reduce workload demand, increase capacity to manage that workload, or increase efficiencies in how that workload is managed. As discussed earlier (Figures 1 and 2) overall workload demand on the child welfare system has not appreciably decreased over time, nor is that a matter within the ministry’s direct control.<sup>85</sup> Nor, as described above, has workforce capacity expanded by increasing staffing.<sup>86</sup> As to efficiencies, the Deetkan measurement tool found that even with full implementation of efficiency strategies there would still be significant staffing shortages and it is apparent from the Representative’s

survey, focus groups and engagements, that efficiencies achieved to date, if any, have not made a material difference in the day-to-day work of child welfare social workers.

The evidence is overwhelming that the child welfare services stream of the ministry has had and continues to experience chronic under-staffing and consequent excessive workload. The ministry also appears to be caught in an unfortunate cycle: chronic under-staffing leads to chronic excessive workload; chronic excessive workload leads to undue stress, low morale, elevated rates of sick leave and greater rates of staff exits which place additional burdens on the remaining staff backfilling leaves and vacancies, thereby exacerbating workload and stress. And so the cycle continues.

Even with new staffing resources, it will be challenging for the ministry to break this cycle, which is occurring within broader labour market conditions where most professions are experiencing considerable challenges with recruitment and retention of staff. Recruitment and retention is even more challenging for MCFD, however, due to the reputational damage incurred over the

<sup>85</sup> With the caveat that, as discussed in the *Don’t Look Away* report, investments in prevention and early intervention strategies would undoubtedly reduce that demand over the longer term.

<sup>86</sup> Budget 2024 provides for 72 additional child welfare FTEs over a three-year period. Information provided by the ministry indicates that none of these new positions are intended to hire fully qualified social workers but rather involve 40 “oversight” managers and senior staff, financial audit staff, and 27 Social Program Officer (SPO21) positions, which are support positions.



years as a result of the notoriety that attends to tragic cases when children have been injured or died, and the recurring narrative of working conditions that are crisis-driven, overwhelming and inordinately stressful. Simply put, MCFD, and child welfare services in particular, is not generally seen as an attractive place to work and stay working.

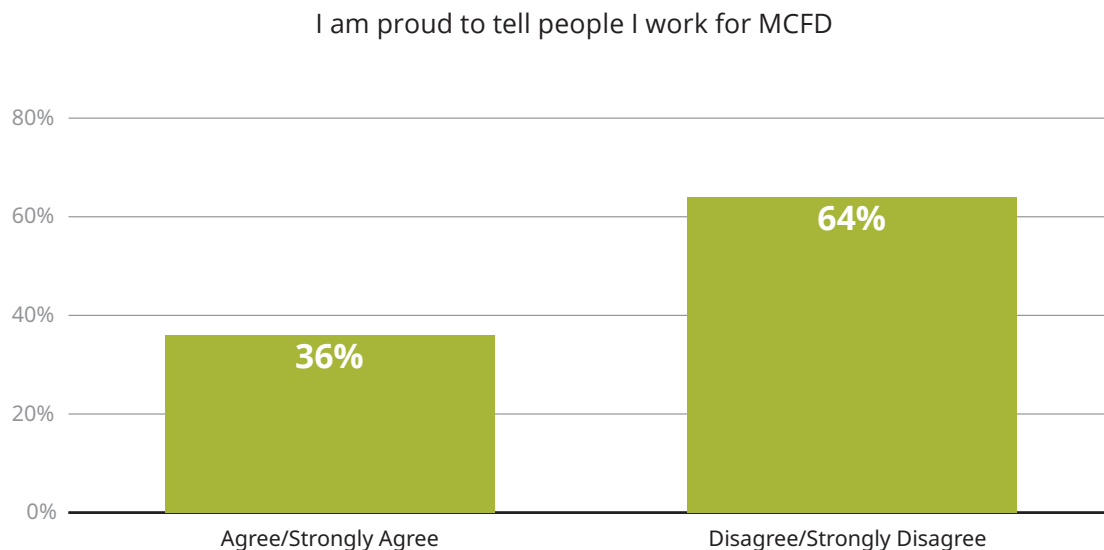
This view was evident throughout the narrative responses to the survey, focus groups and community engagements where, for example, participants indicated that students in post-secondary child welfare programs are reluctant to seek out practicum placements or employment with MCFD, an issue that was also identified in the ministry's own 2023 consultations with post-secondary institutions offering programs such as social worker or child and youth care degrees. Only about half (51%) of the surveyed social workers and team leaders indicated that, when they think several years into the future, they see themselves working at MCFD.

“Some (students) will very strongly want to go into child welfare, but a large number say they don’t want to go into it specifically. Due to the perception of the work, they feel employees in the field are overworked, burnt out, have large caseloads, and are not supported.”

– MCFD Consultation notes with a university School of Social Work, 2023

It is evident that the reputational damage MCFD has incurred over the years is also felt internally. As Figure 10 illustrates, when social workers and team leaders were asked if they are proud to tell people they work for MCFD, nearly two-thirds (64%) said they were not proud to say so.<sup>87</sup>

**Figure 10: Pride in MCFD**



<sup>87</sup> Conversely, two-thirds (67%) of managers agreed that they are proud to tell people they work for MCFD.

“Workers are scared to tell people they’re social workers. I used to tell people I worked at (another place) until I got to know them.”

– MCFD Team Leader, 2024

Another recurring theme that emerged through the surveys, focus groups and community engagements that connects to organizational reputation is the “culture of fear” experienced by many staff. This culture of fear has different facets: a fear of not being able to help the children and families they serve due to lack of time and resources; a fear that children and families may even suffer harm due to the inadequacies of the system of services; and the fear that staff may suffer consequences if children experience harm or that they too may find themselves in the public crosshairs of a tragedy that has captured media attention.

“We were so overwhelmed that I remember telling (a senior person) during our meeting that, ‘it was only a matter of time before a new incident we couldn’t get to had a serious injury or a child would die before we could properly investigate.’ I couldn’t finish my sentence without bursting into tears, as this was a real fear and pressure we lived with daily due to the demand of the volume of work and expectations of us. It was and continues to be impossible to sustain.”

– MCFD Social Worker, 2024

This culture of fear is exacerbated when the ministry – knowing full well that there is a chronic and systemic incapacity for social workers to fully comply with practice expectations due to under-staffing and excessive workload – releases statements that say it is “unacceptable” for policies and procedures not to be followed<sup>88</sup> and then tries to assuage public concerns by releasing a statement that says that the staff involved “are no longer employed by the ministry,” implying they were fired, as will others who do not comply with policy expectations.<sup>89</sup>

<sup>88</sup> Global News, note 27.

<sup>89</sup> Global News, *Staff lose jobs after abused foster child dies in care, opposition parties want Dean sacked*, <https://globalnews.ca/news/9802178/staff-gone-indigenous-child-abuse-case-mitzi-dean/>

## What the Ministry Needs to Do

Between the open engagement sessions, the surveys, and focus groups the RCY team has heard from close to 900 people who are working in MCFD and the Representative believes that they are more than ready to be a part of significant change and will embrace a child well-being model that is recommended in her systemic review. However, the current state needs to be stabilized.

Despite very demanding and too often unhealthy working conditions and inadequate resources, one thing that shone through the Representative's survey, focus groups and community engagements was the passion and commitment of child welfare social workers to help and support the children and families they serve. When asked to identify where they gained the most satisfaction from their jobs, most identified the children and families they work with. This commitment, along with the very good but unnoticed work that is carried out every day across the province by so many social workers, is a workforce strength that should be celebrated.

As this first report has detailed, however, the current circumstances of child welfare social workers demand urgent attention and priority, not only for them but, most importantly, for the children and families they serve. The ministry also needs to be cognizant of workload increases arising from recent and prospective changes. For example, in September 2023 the ministry changed policy requiring, as with children in care, in-person visits with children in out-of-care options every three months. While a welcome step forward, that one change will require four annual visits for each of the several thousand children and youth in out-of-care options. Similarly, in *Don't Look Away*, the Representative has recommended that, in keeping with the AOPSI

standards<sup>90</sup> for Indigenous children overseen by Indigenous Child and Family Services Agencies, children in care be visited in-person every thirty days. If implemented in due course, that change will appreciably increase staffing requirements.

Although it will likely take a decade of sustained and focused effort and investment to fully remedy these inter-related workforce issues, it is essential that concrete steps be taken now and sustained over the long term. Although this is a first interim report with more detail to come in the fall, there is more than enough information available now to identify some obvious key measures that the ministry can either implement right away or begin the process of planning and development pending a second, final report in the late fall, 2024, including building the Representative's recommendations into the ministry's draft Child and Family Services Sector Workforce Plan.<sup>91</sup> These steps include:

### Staffing:

- MCFD develop and implement a social worker workload measurement tool to determine required staffing levels, publicly posting the required and actual staffing levels at the provincial, service delivery area and local service area levels at least annually.
- The Minister of Finance and Treasury Board make sufficient annual funding available to MCFD to support required staffing levels, as determined by the workload measurement tool, regardless of whether MCFD has been or is expected to be able to recruit and retain staff at those required levels.

<sup>90</sup> Ministry of Children and Family Development, *Aboriginal Operational and Practice Standards and Indicators*, 2005.

<sup>91</sup> MCFD, *Social Work Oversight Engagement Session*.

### Health and Wellness:

- MCFD develop and implement a robust plan to better support the health and wellness of child welfare staff and mitigate the effects of stress, vicarious trauma and burnout by implementing a comprehensive and proactive system of debriefing, peer-to-peer, counselling and mental health supports.

### Recruitment and Retention:

- MCFD, in consultation with the BCGEU, implement more robust compensation incentives to better support the recruitment and retention of child welfare social workers.
- MCFD develop and implement a plan to more proactively reach out to and engage colleges and universities to better support the recruitment of students to social worker positions in MCFD.

### Leadership and Mentorship:

- MCFD develop and implement a dedicated program to enhance child welfare team leader competencies, with a particular focus on clinical supervision, health and wellness, staff engagement, respectful workplace, and fair treatment.
- MCFD fully implement province-wide Senior Leader positions,<sup>92</sup> comprised of experienced and expert child welfare staff who are provided appropriate compensation and reduced caseloads, to offer mentorship and clinical support to both newly hired and regular staff.

<sup>92</sup> MCFD reports that some Senior Leader positions have been established in Provincial Centralized Screening and South Fraser Service Delivery Area.

### Ministry Culture:

- The Minister of Children and Family Development publicly commit to refrain from direct or indirect criticism or blaming of child welfare social workers in circumstances where there are known systemic inadequacies.
- MCFD ensure that quality assurance mechanisms such as audits and provincial director reviews be complemented by consideration of the context in which staff are working, including critical factors such as local workload/caseload, leaves and backfill, supporting resources and clinical supervision and oversight.

### Training and Professional Development:

- MCFD enhance training and clinical and case management support for social workers in relation to working with Indigenous children, families, and communities, in particular to support staff to better understand and apply changes in practice expectations arising from changes in federal and provincial legislation, and changes in relationships and dynamics arising during the transition to Indigenous Governing Bodies reassuming jurisdiction over child and family services.
- MCFD recognize and encourage staff participation in local Indigenous ceremony and cultural events as a key component of professional development.

### Human Resource Metrics:

MCFD to take steps to improve human resources analytics and planning capability by, for example:

- Routinely disaggregating and analyzing current human resources data, including government's Workplace Environment Survey (WES) across ministry streams (i.e., child welfare, CYMH, CYSN, and YJ) and specific position types within service streams (e.g., child protection, adoptions).
- Routinely conducting and analyzing the results of staff exit interviews across and within ministry service streams.
- Centrally collecting and analyzing Appendix 4 workload reports.
- Annually conducting more in-depth health and wellness staff surveys to identify strengths and weaknesses, and measure progress across and within ministry service streams.

## Next Steps

As noted, this is Part One of a two-part report. Part Two is to come in the late fall, 2024, with final, detailed recommendations. In the coming months the Representative will complete the thematic analysis of the narrative responses to the survey and focus

groups, engage MCFD, the BCGEU, colleges and universities, and others in further consultations and reactions to this first report, and gather and analyze additional data, as available.



# Contact Information

## Phone

In Victoria: 250-356-6710  
Elsewhere in B.C.: 1-800-476-3933

## Fax

Victoria: 250-356-0837  
Prince George: 250-561-4624

## Text (children and youth)

1-778-404-7161

## Website

[rcybc.ca](http://rcybc.ca)


## Chat (children and youth)

[rcybc.ca/get-help-now/chat](http://rcybc.ca/get-help-now/chat)

## E-mail

[rcy@rcybc.ca](mailto:rcy@rcybc.ca)

## Social Media

 B.C.'s Representative  
for Children and Youth  
and RCYBC Youth

 Rep4Youth

 @rcybc and @rcybcyouth

 @rcybcyouth

## Offices

Suite 400, 1019 Wharf St.  
Victoria, B.C.  
V8W 2Y9

404, 1488 – 4th Avenue  
Prince George, B.C.  
V2L 4Y2



REPRESENTATIVE FOR  
CHILDREN AND YOUTH