

CHILD WELFARE BUSINESS PLAN

2020-2021

INTRODUCTION

This document represents the 2020-2021 Business plan for Child Welfare services at Jewish Family and Child Service of Greater Toronto (JF&CS). It highlights the mandate, strategic priorities, key activities and performance indicators of the organization related to Child Welfare for the previous year. The plan also demonstrates how JF&CS continues to improve its child welfare services in the communities of Toronto and York Region.

MANDATE OF CHILD WELFARE AGENCIES

Children's Aid Societies (CASs) are independently governed agencies that are responsible for providing mandatory and critical services. CASs have been providing these services to communities in Ontario for over 100 years.

CASs are legislated to perform certain functions under the provisions of the *Child, Youth and Family Services Act, 2017 (CYFSA)*. The mandate of CASs, as described in Section 35 of the *CYFSA*, includes the following functions:

- Investigate allegations or evidence that children may be in need of protection;
- Protect children where necessary;
- Provide guidance, counselling and other services to families for protecting children or for the prevention of circumstances requiring the protection of children;
- Provide care for children assigned or committed to its care under this Act;
- Supervise children assigned to its supervision under this Act;
- Place children for adoption
- Perform any other duties given to it by this Act or the Regulations or any other Act.

This legislation and the supporting regulations, directives and standards prescribe specific and detailed requirements for what services CASs must provide and how they must provide them, including services to Indigenous children and families and French language services, as well as the timelines in which these mandatory services must be provided.

CASs provide critical and essential services which are a safety net for the most vulnerable members of our society – infants, children and youth who are at risk of or are experiencing physical, sexual and/or emotional abuse, neglect or abandonment. CASs are mandated to intervene if a caregiver cannot adequately care for or provide for a child.

CASs protect and safeguard most children while they remain with their families in the community. This family-based support takes the form of intensive assessments and service plans, contacts with numerous other professionals and service providers, as well as ongoing supervision of children while they remain in the family home. These are complex cases in which child protection concerns have been verified and there are risks of, or actual, abuse and neglect. As such, the work must be performed by skilled, qualified child welfare staff who participate in a rigorous authorization process provided by OACAS. Serving these children in the context of the home – when it is safe to do so – is considered least intrusive and consistent with the legislative and regulatory mandate and with the policy direction of government.

JEWISH FAMILY AND CHILD SERVICE VISION STATEMENT:

A resilient community where hope, dignity, diversity and humanity thrive.

JEWISH FAMILY AND CHILD SERVICE MISSION STATEMENT:

A multi-service agency that strengthens and supports individuals, children, families and communities by increasing safety and security, improving mental health and wellness and reducing the effects of poverty, within the context of Jewish values.

JEWISH FAMILY AND CHILD SERVICE VALUES:

Mutual Accountability
Trust & Collaboration
Learning & Renewal
Care & Resilience
Inclusion & Diversity
Adaptation, Innovation and Creativity

JEWISH FAMILY AND CHILD SERVICE STRATEGIC DIRECTION:

The mission of JF&CS is to support the healthy development of individuals, children, families and communities through prevention, protection, counselling and education and advocacy services, within the context of Jewish values. This mission rests on a strategic model of client-centred service delivery, an evidence-informed model that emphasizes seamless service delivery and effective communication among all areas of the Agency so that services are wrapped around the ongoing needs of the client. Agency services and supports are viewed as integrated solutions that are brought together using a comprehensive case management approach in order to support the three key strategic priority areas of JF&CS:

1. INCREASING SAFETY AND SECURITY

Services and supports designed to increase safety and security are provided to individuals and families in need of immediate intervention and support due to abuse and/or neglect. Most typically, this includes Jewish children and youth experiencing abuse and/or neglect, as well as any women (not only Jewish) experiencing physical, sexual, and/or psychological abuse by their spouse or partner. With a goal of Increasing Safety and Security, children and youth are supported through JF&CS's Child Welfare Services in its capacity as a mandated CAS and women are supported through our comprehensive array of woman abuse (VAW) services.

2. IMPROVING MENTAL HEALTH AND WELLNESS

As a multi-service agency, JF&CS is committed to delivering programs, services, and supports to improve the mental health and wellness of its clients, with a strong emphasis on prevention and early intervention. A broad range of client needs and issues are addressed, including stress, depression and anxiety, children's mental health, Chaplaincy needs, palliative care needs, parenting and marital issues, bereavement, separation and divorce, and social isolation.

3. REDUCING THE EFFECTS OF POVERTY

Poverty is both predictive of and the result of numerous psychosocial challenges including stress, depression, serious mental health issues, substance abuse, poor physical health, unstable housing, reduced educational access, and social isolation. The goal of this priority area is to reduce the negative effects of poverty on the most vulnerable members of the community. Through the support of the Jewish community and United Jewish Appeal Federation of Greater Toronto (UJA), and other community funders, JF&CS is able to provide a comprehensive array of services and supports to individuals and families experiencing poverty.

These three priority areas can and do overlap, both conceptually and in practice. JF&CS' client-centered model of service delivery seeks to ensure that all client needs are met through the wide array of services and supports that are available across the Agency. A significant strength of JF&CS is its multi-service structure, which allows the Agency to respond to multiple client needs and issues without the need for external referrals. When referrals are needed, our Centralized Intake Department has a comprehensive understanding of the community resources available to our clients. JF&CS also has partnerships with several community-based agencies in order to seamlessly coordinate the provision of service. For example, JF&CS clients in need of employment support have regular access to the services of two employment counsellors through Jewish Vocational Service of Metropolitan Toronto (JVS).

UPDATED JEWISH FAMILY AND CHILD SERVICE STRATEGIC PLAN:

In 2020, JF&CS launched an updated Strategic Plan. This plan is centered on four key strategic directions:

1. LEAD THROUGH SERVICE EXCELLENCE:

Partner through our Centre of Excellence with other professionals and organizations to continuously improve our services, based on evidence-informed and emerging best practices, for the short and long term, and share with broader communities.

Undertake a service model review; build upon work already completed in this area; determine if our current model is financially sustainable; develop priorities for addressing the needs of vulnerable, diverse and marginalized populations in the communities we serve, and those we strive to serve.

Develop a formalized plan to attract, retain and develop positions across the agency. Include opportunities for succession and mentorship. Address staffing supports, emerging competency requirements and ensure workplace diversity.

Maintain service excellence by ensuring service provision is agile, responsive, innovative, creative and client-centered, while building on evidence-informed best practices.

Support the mental health and wellness of staff during the pandemic and whenever other challenges arise.

Develop a formalized plan to address physical, technological, and logistical considerations, while adhering to privacy legislation and any related challenges, to ensure staff are able to effectively conduct their work, whether it is from home, the Agency, or any other foreseeable setting.

2. PARTNER BROADLY TO IMPROVE LIVES AND COMMUNITIES

Play a key role in strengthening our community's response to lonely, isolated seniors, leveraging opportunities to provide more holistic services, through additional funding and resourcing.

Develop multi-agency responses to serving the needs of diverse, marginalized and vulnerable children, individuals, families and communities by offering integrated solutions (e.g. ethno-cultural agencies).

3. AFFIRM OUR STRONG, COMPELLING IDENTITY

Develop a communication strategy, including key messages we want to share with all stakeholders.

Seize every opportunity and use every means (channels/platforms) of communication at our disposal to clearly articulate, internally and externally, who we are, what we do and for whom we do it.

Advocate for the continued health and welfare of our programs and services by ensuring our voice is heard and understood by influential decision-makers.

Take a proactive stance in our communications on emerging issues to visibly demonstrate that we are standing up for diversity and inclusion.

4. BUILD CAPACITY THROUGH SUSTAINABLE, DIVERSIFIED FUNDING

Pursue non-traditional donors with shared values, particularly in the private sector, and find ways to align their philanthropic goals with our own.

Seek-out greater staff engagement in fundraising activities; develop a framework for meaningful involvement and contribution.

Develop a recruitment strategy to attract diverse, passionate and engaged fundraisers for our Resource Development Committee and Board respectively. Expand our reach beyond traditional not-for-profit partnerships (e.g. private sector) with aligned values; consider alternatives to in-person fundraising events.

SERVICE PHILOSOPHY AND OVERVIEW OF CHILD WELFARE SERVICE AT JEWISH FAMILY AND CHILD SERVICE

For over 30 years, JF&CS has provided child welfare services to the Jewish community of Toronto and York Region. Protective services offered are governed by the Child, Youth and Family Services Act, 2017, and guidelines are provided by the Ministry of Children, Community and Social Services in relation to the contents of the Act.

At JF&CS, our child welfare services are fully integrated with our poverty reduction and child and adult mental health services. This includes individual, couples and group counseling, educational and financial assistance programs, woman abuse programs, preparation for independence programs for youth and a full spectrum of cultural, religious and social programs serving the most vulnerable within the Jewish community.

Staff at the Agency collaborate with school groups, summer camps, community groups, police departments, mental health organizations and other service providers who work with populations at risk of child abuse/neglect or in need of family support services. Frequent contact with these agencies and organizations has resulted in JF&CS also being used as a resource in the areas of child abuse and woman abuse for training and consultation. Close and frequent contact with our community partners allows the Agency to gain information and a first-hand understanding of where gaps in service may be found and ways and means of addressing those gaps. Over the years this has resulted in a range of Agency responses and innovations from working in schools to the introduction and growth of Russian and Hebrew speaking worker programs.

KEY INITIATIVES AND ACTIVITIES SUPPORTING STRATEGIC DIRECTIONS

At JF&CS, we engage in several initiatives to ensure that we are delivering the most client-centric service possible to our community. These initiatives include:

STRATEGIC DIRECTION: LEAD THROUGH SERVICE EXCELLENCE ENHANCING AND SUPPORTING OUR CLINICAL MODEL OF SERVICE

Initiative	Activity
<p>Multi-Service Wrap- Around Approach</p>	<p>Our child welfare services are fully integrated with over thirty other programs and services at JF&CS, including child and adult mental health, woman abuse, financial assistance, educational/vocational support, individual, couple and group counseling services, as well as preparation for independence programs and services for youth.</p> <p>In 2015-2016, 253 families receiving child welfare services also received other supportive services through JF&CS.</p> <p>In 2016-2017, 259 families receiving child welfare services also received other supportive services through JF&CS.</p> <p>In 2017-2018, 241 families receiving child welfare services also received other supportive services through JF&CS.</p> <p>In 2018-2019, 228 families receiving child welfare services also received other supportive services through JF&CS.</p> <p>In 2019-2020, 279 families receiving child welfare services also received other supportive services through JF&CS.</p> <p>In 2020-2021, 599 families receiving child welfare services also received other supportive services through JF&CS.</p> <p>* Note that this number rose significantly over the last period. It is hypothesized that a large part of the reason for this is due to the multi- faceted and more complex issues facing families due to COVID 19 and the extent to which this Agency has been able to provide a variety of wrap-around services in response to the increasing complexity of needs.</p>
<p>Domestic Violence-Child Welfare Co-Location Model</p>	<p>At JF&CS child welfare workers and woman abuse workers work closely together to safety plan and support families where domestic violence is present. When appropriate, workers consult with one another and attend home visits together. On any given day, there is always at least one child protection worker and one woman abuse worker “on-call” for potential emergencies.</p>

In 2015-2016, 53 families receiving child welfare services also received counseling service through our Woman Abuse Program.

In 2016-2017, 86 families receiving child welfare services also received counseling service through our Woman Abuse Program.

In 2017-2018, 84 families receiving child welfare services also received counseling service through our Woman Abuse Program.

In 2018-2019, 85 families receiving child welfare services also received counseling service through our Woman Abuse Program.

In 2019-2020, 89 families receiving child welfare services also received counseling service through our Woman Abuse Program.

[In 2020-2021, 83 families receiving child welfare services also received counseling service through our Woman Abuse Program.](#)

Poverty Reduction

Poverty Reduction activities at JF&CS seek to address the individual and systemic barriers a person in poverty may face, and center on the building of assets along multiple dimensions including basic needs, skills, and employment, and the strengthening of resiliency as a multifaceted resource, enabling clients to withstand life's challenges.

JF&CS has adopted the Sustainable Livelihoods Framework (SLF) (Murray & Ferguson, 2001) as the theoretical model underlying its Poverty reduction efforts. The SLF addresses the human (e.g., employable skills and knowledge, good physical and mental health) and social capital (e.g., personal and professional networks) involved in moving out of poverty while also addressing the role of systemic pressures (e.g., unaffordable housing). This comprehensive approach addresses the complex and numerous causes and consequences of poverty – and the interplay between.

While supplementary budgets are still a component of our Poverty Reduction suite of services, they are undergirded by Holistic Case Management, due-diligence in reviewing financial and bank records, and approvals from a Standing Committee that reviews each and every budget to determine the appropriate level of support, based on the client's circumstances and potential. Further, each budget also requires ongoing managerial approval. This ensures clients are receiving a full basket of timely and appropriate services, of which financial support is only one part. Newer positions to the agency include:

Financial Advocacy, Empowerment, and Problem-solving Services (FEPS) Worker:

- Assisting in accessing services and benefits (e.g., debt consolidation, tax filing, subsidized housing application)
- Assisting in creating and managing a budget and setting financial goals
- Providing individual and group sessions focusing on financial literacy and financial empowerment

Housing Case Aide Worker:

- Support clients in accessing affordable housing
- Ensuring clients are on the appropriate wait-lists for affordable housing
- Supporting clients in keeping their housing
- Liaising with community and government partners related to housing

In 2015-2016, for families who received child welfare services, there were 766 instances of financial support being provided.

In 2016-2017, for families who received child welfare services, there were 837 instances of financial support being provided.

In 2017-2018, for families who received child welfare services, there were 602 instances of financial support being provided.

In 2018-2019, for families who received child welfare services, there were 608 instances of financial support being provided.

In 2019-2020, for families who received child welfare services, there were 519 instances of financial support being provided.

[In 2020-2021, for families who received child welfare services, there were 599 instances of financial support being provided.](#)

STRATEGIC DIRECTION: IMPROVING AND ENHANCING SERVICES TO YOUTH WHO HAVE/ WILL BE GRADUATING OUT OF CARE INTO INDEPENDENCE

Initiative	Activity
<p>Pearl Project</p>	<p>The Pearl Project was launched in 2015 to support and serve young people who have graduated or “aged out” of the foster care system at 18-years-old. JF&CS founded The Pearl Project to support youth both with practical needs – housing, employment, education, and financial matters – and also with their need for community, mentorship, connections and a sense of belonging, all in the context of a long-term commitment to their success and well-being. The word “Pearl” was chosen because pearls begin as grain of sand and only develop when the appropriate cushioning, protection and support is provided.</p> <p>The Pearl Project has forged a number of community partnerships which include:</p> <ol style="list-style-type: none"> 1. Shoresh - http://shoresh.ca/ 2. PARC Connections Program - https://www.parcyouth.com/connections 3. Miles Nadal JCC - https://www.mnjcc.org/ 4. Prosserman JCC https://www.prossermanjcc.com/ 5. Schwartz-Reisman Centers https://srcentre.ca/ 6. JVS – www.jvstoronto.org 7. StepStones for Youth https://www.stepstonesforyouth.com/ 8. Eye movement desensitization and reprocessing (EMDR) therapy - Laurie Savlov 9. Mira Studios – www.mira.studio 10. JLS Entertainment – www.duosantos.com Our youth help to videotape and record the singing contest/ receive music lessons / receive media production mentorship & training 11. Howie, Sacks & Henry LLP Personal Injury Law www.hshlawyers.com Offers guidance, mentorship and employment opportunities to appropriate youth. 12. MAC Suites - https://www.macsuites.ca/ Provide access to free furniture 13. Horse Therapy Centre of Canada https://www.horsetherapycanada.com/ 14. WJ Properties - https://www.wjproperties.ca/ 15. Harold Green Jewish Theatre https://www.hgewishtheatre.com/ 16. Elizabeth Eisner Life Coach 17. Ontario Flute Centre - Jay Gemmil www.ontarioflutecentre.ca 18. Benjamin’s Funeral Home 19. Chef Jordan Wagman – www.jordanwagman.com 20. Equilibrium Lifestyle Management 21. Horses at Heart – www.horsesatheart.com <p>Over the last year, a number of new supports have been put in place.</p> <p>Pearl Project Data Elements:</p> <ul style="list-style-type: none"> - 25 Pearl Project clients served over this period - 16% have received short-term and/or ongoing financial assistance - 72% of youth received one-time financial support - 88% of youth received other Agency supports and/or referrals <p>In April 2019, JF&CS commissioned a Cost Benefit Analysis (CBA) Study with respect to the Pearl Project in order to determine the long-term return for every dollar invested in the Pearl Project members. By analyzing potential benefits with respect to the avoidance or decreased use of mental health services, avoided incarceration, lower rates of accessing Ontario Works (as a result of unemployment, and the corresponding gains to the government of annual tax revenues (as a result of being employed) the CBA revealed that there would be a government return of \$9.40 per every \$1 invested.</p>
<p>Counseling Cases when CIC closes</p>	<p>Being a fully integrated, multi-service Agency, we were able to implement a practice that ensures that the day a youth ages out of care, we simultaneously open a counselling file for that youth/young adult and assign it to the same Child in Care Worker with whom the youth/ young adult has established a relationship. This practice allows the Agency to continue to help and support the youth to plan for successful transition to adulthood.</p>

STRATEGIC DIRECTION: STRENGTHENING FAMILIES

Initiative	Activity
Supporting children and youth to remain in their own homes and communities	<p>At JF&CS a high value is placed on supporting children and youth to remain in their families of origin. As such, significant efforts have been made (as indicated in our clinical model of service), to support families in crisis via targeted prevention work. However, when children and youth cannot be cared for by their parents or guardians, the next best placement for them is within their extended family or community network. Such an arrangement /placement is known as a “kinship” placement. Finding, establishing and maintaining kinship arrangements is labor-intensive, and often requires a large amount of support, both financially and professionally, but the benefits to the families and children we serve are significant. With this focus, the number of children in the care of the Agency over the last few years has continually declined.</p> <p>In 2013-2014, this average was 57. In 2014-2015, this average was 43. In 2015-2016, this average was 37. In 2016-2017, this average was 31. In 2017-2018, this average was 36. In 2018-2019, this average was 26. In 2019-2020, this average was 26. In 2020-2021, this average was 28.</p> <p>*Note: In 2021, the Ontario government extended the moratorium on youth aging out of their care arrangements with Children’s Aid Societies. This has been extended to September, 2022. This will ensure youth in the child welfare system who would have passed the cut-off age during the Covid-19 pandemic will not have their services terminated as a result of simply “aging out of care”. For this reason, the average number of children in care in 2020-2021 slightly increased, as they did not “age out” of the system as planned pre-pandemic.</p> <p>In addition to this, out of all the children receiving child protection services from JF&CS over the last few years, very few of them are ever admitted into the care of the Agency. This means that the large majority of children remain in the care of their own families/community.</p> <p>In 2016-2017, 0.17% of children were admitted into the care of the Agency, and 99.83% of children remained in the care of their family/community</p> <p>In 2017-2018, 0.8% of children were admitted into the care of the Agency, and 99.2% of children remained in the care of their family/community.</p> <p>In 2018-2019, 1.4% of children were admitted into the care of the Agency, and 98.6% of children remained in the care of their family/community.</p> <p>In 2019-2020, 1.1% of children were admitted into the care of the Agency, and 98.6% of children remained in the care of their family/community.</p> <p>In 2020-2021, 1.19% of children were admitted into the care of the Agency, and 98.8% of children remained in the care of their family/community.</p> <p>*Note: In 2018-2019, there was a slight increase in the percentage of children admitted into care due to the fact that the “Age of Protection” increased from 16 years to 18 years.</p>
Targeted Prevention Work	<p>The Agency places a strong emphasis on supporting families to parent their children. Several efforts are made to strengthen families and parents’ ability to raise and nurture their children. When risk factors are identified within a family, our child protection staff focus on targeted prevention. As such, many in-home supports are implemented, such as Child and Youth Workers (CYW), financial assistance, camp subsidies, clothing, gas/transportation support, furniture and baby supplies, as well as instrumental and financial assistance for accessing extra-curricular activities, counseling and assessments.</p>

In 2016-2017, \$53, 155 was allocated to such supports.

In 2017-2018, \$54, 904 was allocated to such supports.

In 2018-2019, \$ 65, 120 was allocated to such supports.

In 2019-2020, \$ 40, 525 was allocated to such supports.

[In 2020-2021, \\$ 29,777 was allocated to such supports.](#)

*Note that over the last period, fewer dollars were allocated to in-home supports. It is believed that a large reason for this is that many of these supports were not able to take place in person, or were provided virtually, during the Covid 19 "Stay-at-Home" orders. The fact that we could not send CYW supports into homes, or that children and youth were unable to participate in summer camp are examples of this.

Partnering for Success (P4S) Program

The P4S program is designed to provide support to families to reduce incidences of child abuse and neglect by increasing the capacity of parents to more effectively manage their children's behavioral and emotional issues. The service is offered to families in their homes.

In 2015-2016, 20 families receiving child protection services from JF&CS were supported by the P4S program.

In 2016-2017, 18 families receiving child protection services from JF&CS were supported by the P4S program.

In 2017-2018, 15 families receiving child protection services from JF&CS were supported by the P4S program.

In 2018-2019, 8 families receiving child protection services from JF&CS were supported by the P4S program.

In 2019-2020, 10 families receiving child protection services from JF&CS were supported by the P4S program.

[In 2020-2021, 5 families receiving child protection services from JF&CS were supported by the P4S program.](#)

*Note last year, this program was placed on "hold" for the majority of the time due to the Covid-19 pandemic, thus there was an impact to the number of families served by this program.

Alternate Dispute Resolution (ADR)

ADR is a strategy to streamline court processes and/or adversarial client-Agency relationships and encourage alternatives to court action. It focuses on a more strength-based, inclusive and collaborative approach to resolving child protection disputes and encourages the involvement and support of the family, extended family and community in planning and decision making for children.

Through ADR efforts, as well as our multi-service, wrap-around clinical model of service, the number of child protection cases requiring Court interventions remains is very low. This is evidenced by the percentage of active child protection cases before the Courts:

In 2015-2016, this percentage was 3.6%. This means that 96.4% of families served through child protection were working voluntarily with the Agency.

In 2016-2017, this percentage was 5.0%. This means that 95% of families served through child protection were working voluntarily with the Agency.

In 2017-2018, this percentage was 5.2%. This means that 94.8% of families served through child protection were working voluntarily with the Agency.

In 2018-2019, this percentage was 7.9%. This means that 92.1% of families served through child protection were working voluntarily with the Agency.

In 2019-2020, this percentage was 6.4%. This means that 93.6% of families served through child protection were working voluntarily with the Agency.

[In 2020-2021, this percentage was 5.5%. This means that 94.5% of families served through child protection were working voluntarily with the Agency.](#)

STRATEGIC DIRECTION: FINDING PERMANENCY FOR ALL CHILDREN AND YOUTH IN CARE

Initiative	Activity
<p>Family Finding</p>	<p>The goal of Family Finding is to connect each child with members of the child’s family, extended family and community of origin, so that every child may benefit from the lifelong connections that a family and community provide.</p> <p>In September 2014, JF&CS hired its first Family Finder, and in 2014-2015 this family finder engaged in family finding initiatives with 21 children/youth in care, 7 child protection families, and 4 former youth in care. Through these efforts, approximately 470 potential kinship relationships were discovered.</p> <p>In 2015-2016, the family finder was engaged in 20 additional child protection cases, and worked with 10 more children/youth in care. From the 20 child protection families engaged in family finding, only three children were admitted into the care of the Agency, and two of these three were admitted into “Kinship in Care” (extended family/community) placements.</p> <p>In 2016-2017, the family finder engaged in 26 additional child protection cases and with 9 more children/youth in care or on Continued Care and Support for Youth (CCSY). From the 26 child protection families engaged in family finding, 11 kin placements were approved and 6 families continue to be engaging in ongoing work with the family finder. In addition, 3 more kin relationships were discovered and ongoing relationships have been established.</p> <p>In 2017-2018, the family finder engaged in 12 additional child protection cases. Within these 12 cases, 10 kin placements were approved, which included 5 situations where children/youth were discharged from care and into Kinship homes.</p> <p>In 2018-2019, the family finder engaged in 13 additional child protection cases. Within these 13 cases, 12 kin placements were approved, which included 4 situations where children/youth were discharged from care and into Kinship homes.</p> <p>For 2019-2020, the family finder engaged with 10 additional child protection cases. Within these 10 cases, 7 kin placements were approved. In addition to these cases, 3 children placed in foster care, were subsequently placed with kin thanks to the efforts of the family finder.</p> <p>For 2020-2021, the family finder engaged with 8 child protection cases. As a result, 4 of these protection cases subsequently led to kin placements, thus preventing those children from coming into the care of the agency. The family finder also engaged in searching for families related to 3 cases of Children in Care. In one of these instances, the child ended up being discharged from care and placed in the care and custody of kin.</p>

STRATEGIC DIRECTION: IMPLEMENTING PROVINCIAL PRIORITIES AND INITIATIVES

Initiative	Activity
<p>BIRTH ALERTS</p>	<p>BACKGROUND</p> <p>In early 2020 the Ontario government undertook a process to engage key stakeholders to learn more about the practice of issuing birth alerts in Ontario. The issue was raised in the context of the <i>National Inquiry into Missing and Murdered Indigenous Women and Girls</i>, which called on provincial and territorial governments to immediately end the practice of “birth alerts” or “hospital alerts” as they disproportionately impacted Indigenous women and children.</p> <p>NOTE: The practice of issuing “birth alerts” or “hospital alerts” is what happens when a social worker from a children’s aid society flags an expectant parent to hospital staff without their consent, because they are concerned that the parent may put their newborn at risk. The hospital then notifies the social worker when the baby is born.</p>

CURRENT

On July 13, 2020, the Ministry of Children, Community and Social Services (MCCSS) issued a province wide directive requiring the cessation of the use of birth alerts by October 15, 2020. The directive also required that hospitals, pre and postnatal service providers, and other relevant healthcare practitioners be advised that the practice of birth alerts would be ending. JF&CS took part in the development of communication materials that were sent to the identified service providers advising of the cessation of birth alerts and reiterating their individual “Duty to Report” suspected risk of possible child abuse and neglect. Since this communication was sent, the JF&CS has taken in part in meetings with hospitals and pre and post-natal service providers to review the Directive and begin to develop a more inclusive, supportive and preventive practices as they relate to expectant parents and their families.

Since this time, the Covid-19 pandemic impacted the sectors’ ability to conduct regular follow up meetings to discuss alternative ongoing collaborations, but a follow up meeting is scheduled for the Fall of 2021 to reengage the child welfare and healthcare sectors on the mutual goal of providing improved and supportive services and outcomes for expectant parents.

INDIGENOUS COMMITMENTS

There is a history of legislated oppression and cultural genocide of the First Nations, Inuit, Metis (FNIM) people of Canada. From the 1960s through some of the 1990s, 130 “Residential Schools” were created across Canada in which a total of 150,000 FNIM children were sent. These children were removed from their families and were immersed in both Christian and Anglo European traditions and values, while their Aboriginal languages and identities were suppressed. The schools themselves bore stark conditions, with excessive discipline and occasional brutality.

In 1951, legislation was enacted to enable provincial child welfare service delivery to status Indians on reserve. This led to what has been called the “60s Scoop”, a practice in child welfare in which social workers, tried to *resolve* the problems associated with the condition of FNMI children, but apprehending them from their families, and placing them in Residential Schools. In 1950, there were only a few FNMI children in the care of provincial child welfare systems. However by 1980, FNMI children, who comprised 2% of the nation’s child population at that time, made up 12% of the population of children in care. This trend/injustice continues today.

The legacy of the 60s Scoop is still felt today. Large numbers of FNIM children were apprehended and placed for adoption, almost always with non-FNMI families, in different provinces or outside of the country. Of all status Indian children apprehended between 1971 and 1981, 70-85% were adopted by non-FNMI parents.

In recognition of the legacy of residential schools and the Sixties Scoop, Child Welfare in Ontario has been actively building relationships with the First Nations communities across the province and restoring the responsibility of providing child welfare services back to indigenous communities.

The release of the Truth and Reconciliation Commission’s (TRC) report in the spring of 2015, has made the child welfare sector redouble its efforts. The final report includes five recommendations that specifically call out child welfare and relate to principles of connection, responsibility, involvement of the community in the lives of their children, and acknowledging cultural differences, in that one size doesn’t fit all in terms of engaging with families.

As a result of this, many initiatives have been enacted through OACAS to respond to very specific needs of the FNIM population. Nine key commitments have been made and are being actively pursued by all child welfare agencies in the province. These include:

- Reduce the number of Indigenous children in care
- Reduce the number of legal files involving Indigenous children and families
- Increase the use of formal Customary Care
- Ensure there is Indigenous representation on the Board level
- Implement mandatory Indigenous training for staff
- In consultation with Indigenous communities, create a unique agency plan to better address the needs of the children and families in those communities
- Continue to develop relationships between local agency and Indigenous communities
- Connection to culture and identity for children in care: involvement in community events, teachings, customs and ceremonies
- Change inter-agency protocol to include Jordan’s Principle as a fundamental principle (Jordan’s Principle states that FNIM children should get the same health and social services and supports

as all other children in Canada, regardless of where they live. Issues of jurisdiction must not be allowed to become a barrier to the realization of this principle).

- In 2020, a new policy directive was issued approving the use of “Heart and Spirit” as a home study process for the Indigenous people as an alternative to SAFE and PRIDE. This process for approving foster/customary care providers and adoption applicants in the Indigenous community is grounded in Indigenous values, philosophies and practices focused on Indigenous child and youth caring traditions.

The JF&CS's primary contact with the Indigenous community is in conducting sensitive investigations (if a conflict of interest is identified) on behalf of Native Child and Family (NCFS). In such situations, JF&CS consults with NCFS in order to ensure that JF&CS have a full understanding of the clients' Indigenous identity and heritage and that the service and legislative requirements that arise from this identity are met in as culturally sensitive a manner as possible.

JF&CS and NCFS continue to enjoy a collaborative partnership that, at its core, shares an understanding and sensitivity of intergenerational trauma.

Currently, JF&CS has no Indigenous children in care or in kinship service arrangements.

ONE VISION ONE VOICE

One Vision One Voice (OVOV) is a program led by the African Canadian community. It is funded by the Ontario Government through the Ontario Association of Children's Aid Societies (OACAS) and addresses the overrepresentation of African Canadian families in the child welfare system.

The OVOV program, in partnership with the African Canadian community, has developed a Practice Framework, made up of 11 Race Equity Practices, to be used by child welfare staff to improve outcomes for African Canadian children and families. The goal is to address the disproportionalities and eliminate the disparities in outcomes for African Canadian families when involved with the child welfare system.

The core 11 Race equity Practices are as follows:

- Commit to courageous leadership
- Collect and analyze data to measure racial disproportionality and disparities
- Evaluate programs and monitor performance
- Allocate appropriate and dedicated resources
- Engage African-Canadian parents and communities
- Engage and educate mandated referrers
- Establish effective internal complaints mechanisms
- Enhance human resource management
- Provide daily supervision, ongoing training, and supports for staff, volunteers and caregivers
- Establish collaborations and partnerships
- Strengthen the ability of caregivers to support African-Canadian children and youth

JF&CS has hired a staff member to assist our employees to better understand equity and inequity issues with our clients and each other. This staff member engages in conversations and workshops using an anti-oppressive framework with the staff to help them better engage with their clients.

With respect to work on policies and procedures, organizational strategies including “Embedding our Values in the Workplace”, decision-making, the CEO ensures equity and anti-oppression lenses are applied.

JF&CS is committed to exercising leadership through an equity practice which reflects Jewish values, culture and identity.

FRENCH LANGUAGE SERVICES

French is an official language in Canada and in Ontario, the French language is recognized as an official language in the courts and in education. As such, in an effort to recognize the contribution of the cultural heritage of the French speaking population and the need to preserve it for future generations, On July 1, 2011, the Ontario Legislative Assembly passed Regulation 284/11. This Regulation mandated all government funded agencies to have an “active offer” of French Language Services (FLS). Having an active offer of FLS implies that services in French are readily available, easily accessible and of comparable quality to those offered in English.

In February 2013, the OACAS hosted a summit to promote knowledge and develop strategies on delivering FLS within the Ontario child welfare sector. The OACAS French Language Advisory Committee collaborated with Marie-France LeFort, *Owner and Principal of Proforem Inc.* to develop the “Guide For Moving Forward On French Language Services In Ontario's Child Welfare Sector”. At this time, each CAS identified a FLS Champion to take the lead on ensuring that their Agency is working toward implementing an active offer of French Language Services.

Having an “active offer” of FLS includes the following:

- A bilingual greeting in person and on the phone
- The visual identification of all bilingual staff
- The publication of documents in a bilingual format and the transmittal of correspondence in the official language preferred by the family
- Bilingual Website
- The positing of bilingual signs

JF&CS is committed to having an active offer of French Services for our clients. To date, we have had little to no requests for services in French.

Some of initiatives that we have undertaken at JF&CS include the following:

- A general phone message redirecting clients to services in French
- Identification of all bilingual staff
- A list of all agencies offering French Language Services, which Intake can access and offer to callers/clients.
- Actively promoting, supporting and collaborating with the Central Zone Children’s Aid Societies to support the provision of FLS in the community.
- Identification of a JF&CS FLS Champion, who is currently participating in a Central Zone working group to further strengthen and enhance JF&CS’s compliance with Regulation 284/11.

Future initiatives for JF&CS include the following:

- Modify our website to include more French content and information regarding how to access FLS in the community.
- Translate relevant Agency pamphlets and relevant external communication into French.
- Ensure that there is signage posted in the reception areas at all branches providing referral information for French Language Services
- Officially designate bilingual staff by arranging for Provincial testing.
- Establish a protocol with another GTA Children’s Aid Society with larger FLS capacity which would outline a process for that CAS to conduct a child protection investigation on behalf of JF&CS if a French family requests that the investigation be conducted in French.
- Arrange for training of JF&CS staff regarding French Language Services.

STRATEGIC DIRECTION: PARTNERSHIPS AND OUTREACH WITHIN OUR GREATER COMMUNITY

Initiative	Activity
<p>JVS/JF&CS Joint Employment Program</p>	<p>JVS/JF&CS Joint Employment Program is a collaborative effort between JVS and JF&CS to empower individuals in our community to break the cycle of poverty by achieving self-sufficiency through meaningful employment. Clients may present with a range of circumstances and personal difficulties that present barriers to re-employment, such as separation and divorce, depression and anxiety, significant mental health issues, family violence, lack of sufficient skills or work experience, physical health challenges and disabilities, and criminal records. The program combines financial and psycho-social support from JF&CS social workers and in-depth employment counselling by JVS employment specialists.</p> <p>From 2013-2016:</p> <ul style="list-style-type: none"> • 384 clients have been accepted into the program. • 34.4% have found meaningful employment and are financially self-sufficient. • 4.2% have moved on to long-term training/education and no longer receive financial assistance. • 33.1% were unable to follow through and pursue employment for various reasons. These outcomes are expected given many barriers often faced by this population. • 28.4% active clients continue to make strides towards self-sufficiency. <p>From 2016-2017:</p> <ul style="list-style-type: none"> • An additional 137 clients were accepted into the program. • 42% have found meaningful employment and are financially self-sufficient. • 4% have moved on to long-term training/education and no longer receive financial assistance. • 25% were unable to follow through and pursue employment for various reasons. These outcomes are expected given many barriers often faced by this population. • 29% active clients continue to make strides towards self-sufficiency.

Between October, 2017 and March, 2018:

- a total of 140 clients were referred by JF&CS to the Joint Employment Program
- 36% have found meaningful employment and are financially self-sufficient.
- 4% have moved on to long-term training/education and no longer receive financial assistance.
- 18% were unable to follow through and pursue employment for various reasons. These outcomes are expected given many barriers often faced by this population.
- 13% active clients continue to make strides towards self-sufficiency.

Between September, 2017 and August, 2018:

- a total of 152 clients were referred by JF&CS to the Joint Employment Program
- 40% have found meaningful employment and are financially self-sufficient.
- 4% have moved on to long-term training/education and no longer receive financial assistance.
- 11% were unable to follow through and pursue employment for various reasons. These outcomes are expected given many barriers often faced by this population.
- 45% active clients continue to make strides towards self-sufficiency.

For 2018-2020:

- a total of 145 clients were referred by JF&CS to the Joint Employment Program
- 43% have found meaningful employment and are financially self-sufficient.
- Many in the program demonstrated movement toward better labour market in the short term:
 - Unpaid Work Experience (8%)
 - Determined a clear career target/ job objective (79%)
 - Skills Upgrading (16%) o Completed up-to-date and targeted resume(s) (86%)
 - Participated in pre-employment workshops (36%)
 - Assigned to work actively with Job Developer (48%)
 - Registered with EMET-Employment online job board (71%)
 - Completed a LinkedIn profile (40%)
 - Attended Job Fairs or reported other active job search actions (50%)
- Positive outcomes were demonstrated through 6 and 12 month follow up: 82 % of the respondents were still employed after 6 months, and 68 percent after a year (please note that this does not include those who we were not able to reach for information)

For 2020-2021:

- Number of clients JF&CS referred to the Joint Employment Program 123
- Percentage of individuals that found meaningful employment and are financially self-sufficient that have accessed the program. 50%
- Evidence that participants demonstrated movement toward better labour market in the short-term.
- 8% completed an Unpaid Work Experience
- 78% determined a clear career target/ job objective
- 13% completed Skills Upgrading
- 72% completed up-to-date and targeted resume(s)
- 53% participated in pre-employment workshops
- 54% worked actively w/ Job Developer
- 67% registered with EMET-Employment online job board
- 40% completed a LinkedIn profile
- 30% Referred to community services, e.g. job fairs, specialized programs
- Percentage of the respondents that were still employed after 6 months and 1 year. 76% and 63% respectively

Collective Impact Table on Jewish Poverty

The results of the 2011 National Household Survey have indicated that the rate of poverty among the Jewish Community in the GTA has risen from 11% in 2001 to 13%. The growing rate of Jewish poverty prompted the collaboration of a group of social service agencies (of which JF&CS is a member) to work together, using a *Collective Impact Framework* in order to develop effective strategies to mitigate poverty. Collective Impact is a framework designed to tackle complex social problems by collaborating work across government, business, philanthropy, non-profit organizations and citizens to achieve significant and lasting social change (Kania & Kramer, 2011). JF&CS had invested heavily in this initiative both financially and through leadership with regards to our expertise in evaluation.

A goal for the initiative was that (a) by 2020 we would improve the quality of life and sense of well-being for Jewish individuals and families living in poverty in the GTA; and (b) by 2025 we will have reduced poverty in the GTA by 10%. Our ultimate goal is to end Jewish poverty and we have decided to prioritize serving Holocaust survivors and vulnerable seniors first.

DoorToDoor has been the culmination of a shared community-wide vision to drastically reduce the effects of poverty for our community's most vulnerable seniors and Holocaust survivors. A coalition of Jewish community agencies has brought help directly to seniors in need.

Last period 193 clients are receiving case management and of them 160 clients also receive financial support.

Over the last period, service has not been provided due to Covid-19. Many of those in need have been able to be serviced by the Agency's Poverty Reduction program or through other community services. Due to efforts made to service these individuals elsewhere, the DoorToDoor program is in a wind-down phase.

LGBTQ2S+ Awareness

JF&CS continues to participate in Toronto's annual PRIDE parade and in doing so signals that the Agency serves the full sexual and gender diversity of the Jewish community. Due to COVID JF&CS did not participate in the 2020 or 2021 Pride Festivities; however, we took part in several internal Pride themed activities. JF&CS has expanded the position of LGBTQ2S+ Coordinator into the portfolio of Manager, Family Services with the continued goal of building internal capacity when working with LGBTQ2S+ Community Members. In addition to LGBTQ2S+ Services, the Manager has instituted an Equity, Diversity and Inclusion Committee (more details below). The following are some of the deliverables from this position to date:

1. Keshet Training

Day Leadership Training workshop for agency leaders to better engage the LGBTQ+ Jewish Community. Keshet followed through with 18 months of coaching following the Leadership Training Workshop to support JF&CS in reaching the goals that were developed in the Leadership Training.

2. Consultations

- There continue to be consultations, virtually, with agency staff regarding LGBTQ2S+ children, clients and families
- There continue to be consultations, virtually, with LGBTQ2S+ community members and their families
- Monthly LGBTQ2S+ Community of Practice (COP) meetings take place, virtually, for front line workers to ask questions and to support each other when working with LGBTQ2S+ clients. This year the COP was expanded to include all Agency staff so that all staff, regardless of role, could benefit from the support of one another.

3. Community Training

- Training with JF&CS foster parents, volunteers and children in care
- Two separate Trainings with JIAS Staff and, Volunteers and Teachers
- Training with grade 6, 7, 8 students at Leo Baeck Day School
- Training with Teachers and School Staff at CHAT
- Training with Centre for Differentiated Learning Staff at Associated Hebrew School Posluns and Kaiman Branch.

4. Community Links and Partnerships

- 519 Toronto
- Central Toronto Youth Service
- Eshel
- Family Service York Region
- Keshet
- KT Young Professionals
- Kulanu Toronto
- Miles Nadal JCC
- Pride Toronto
- York Region District School Board

5. Building Capacity Internally
 - Offering Lunch and Learns to all staff on a variety of topics as chosen by the staff through a survey
 - Continuing an LGBTQ2S+ Community of Practice where all direct service staff can bring cases with LGBTQ2S+ issues to consult
 - Having our LGBTQ2S+ lead attend and consult with agency Communities of Practice to discuss LGBTQ2S+ issues (Intake, Hospice, Children in Care)

6. Groups and Workshops
 - Jewish Rainbow Alliance – A drop in support group for parents and caregivers to discuss parenting LGBTQ2S+ Children. This groups runs 4 times a year or more based on need.
 - Ahava (name subject to change) – A 6-8 week psychoeducational group for parents and caregivers of trans and gender-diverse youth. The group supports members to navigate feelings and systems regarding having trans and gender-diverse children. This group is not currently running due to Covid 19.

7. No Silence on Race

A Canadian organization committed to making Jewish Spaces safer for Jews of Colour. JF&CS has agreed to work together to follow their nine pillars as a guideline.

8. Inclusivity Statement

JF&CS has adopted the following statement: “JF&CS strives for inclusivity in all its programs, serving community members of any income, family structure, ability, sexual orientation, gender identity, religious affiliation, level of observance, race, ethnicity, cultural identity and place of origin”.

9. Equity and Diversity Committee

This committee will be responsible for an agency self-assessment and training aimed to engage each other, board members, volunteers, service users and community members, with the goal of integrating the values of diversity, inclusion, anti-racism and anti-oppression into our daily practice and culture as an agency.

Director of Service Group (OACAS)

Directors of Service for Ontario’s CASs meet to identify issues, problem-solve particular service delivery difficulties and strengthen quality and consistency of child welfare service and programs across the province. This group provides leadership and expertise in developing provincial responses to child welfare challenges and promotes best practice.

Central Zone Children’s Aid Societies

Our involvement with the Central Zone allows the Agency to contribute to the broader (provincial) child welfare sector with respect to emerging issues as well as the coordination of services across all CASs. Some areas of focus include amalgamations and mergers of CASs; Reputation building; Standards development; Governance; Government Relations; Service Quality and Quality Improvement.

Child Welfare Requirements Working Group (CWRWG)

The JF&CS Child Welfare Project Coordinator co-chairs this working group through the OACAS, which was formed to provide sector leadership with respect to the interpretation and application of the Child Welfare Ministry Standards. This group meets months, and provides leadership with respect some of the following Provincial Requirements:

- Guidelines for Approved Departures
- Interpretation of Child Protection Standards
 - Quarterly Review of QIPs
 - Issues regarding Verification of Child Protection Allegations and Connected Documentation
 - Signs of Safety and Compliance with Standards
 - In Depth Analyses of Compliance Issues related challenges

	<ul style="list-style-type: none"> • Review of Kinship Standards and Best Practice Guidelines • Interpretation of requirements for CPIN Business Harmonization recommendations • Child Advocate/Ombudsman reporting requirements
Child and Youth Advocacy Centre (CYAC) Partners Advisory Committee	The purpose of this committee is to provide ongoing support for the CYAC, its future evolution and development. The Centre facilitates a coordinated, seamless and interdisciplinary response to child abuse victims and their families. JF&CS's Executive Director sits on this Advisory Committee, and our child welfare staff partner with the CYAC in conducting joint child welfare / police investigations.
Project Hope	This committee comprises of members from Children's Aid Societies in York region, York Region Police, the Crown Attorney's Office, DASA, Victim's Witness Service and Cedar Centre as a collaboration among these agencies to develop a Youth Advocacy Centre servicing children and youth who have experienced abuse and neglect, all under one roof.
Duty To Report	Several JF&CS child protection workers regularly attend schools (Jewish Day Schools and public schools), synagogues, camps, and other organizations, in order to provide information and training with respect to child abuse and neglect, as well as to educate professionals on their mandated "Duty to Report".
CARE UNIT	This group consists of representatives from Toronto and Durham Children's Aid Societies and Toronto and Durham Police Services. CARE refers to Children at Risk of Exploitation. The CARE units are a collaborative response to locating and protecting children and youth who are being exploited as part of a comprehensive Anti- Human Trafficking Strategy.
Provincial Screening Emergency After Hours Service (EAHS)/Intake Supervisors Meeting	This working group focuses on issues related to CAS intake Screening and EAHS, and works to address and enhance consistency in practice across the province. One of our child protection managers participates in this provincial working group.
C.A.S.T – Child Abuse Systems Team (York Region)	The goal of this table is to discuss the implementation of the existing Protocol, share practice concerns, discuss interagency effectiveness and enhance service delivery. Our child welfare project coordinator participates in this working group.
CAS/VAW (Violence Against Women) Collaboration Advisory Committee	The VAW/CAS Advisory Committee is a community based advisory group that disseminates information and recommendations from MCSS and MYCS and works across the CAS/VAW sector to increase collaboration and enhance service delivery for woman who are victims of domestic violence. Our Child Welfare Project Coordinator and one of our Direct Service Managers participates in this GTA working group.
Youth Homelessness Prevention & Housing Stabilization Strategy Steering Committee	Our Director of Service for Child Welfare participates on this York Region Collective Impact steering committee, which is comprised of leadership from multiple sectors servicing high risk youth. The Ministry of Children, Community and Social Services also participates at this table. The mission of the committee is address youth homelessness in York Region through an approach that focuses on prevention as well as intervention. The committee is chaired and coordinated through 360 Kids.
Healthy Babies Healthy Children (HBHC) Protocol	One of our Child Welfare managers participates on a working group which reviews and discusses the HBHC Protocol between Healthy Babies Healthy Children and the four Toronto CASS.
Fetal Alcohol Syndrome (FASD) Leadership Team	The focus of this table is to enhance knowledge of FASD in Ontario by providing consultation and training to agencies, individuals and families within the GTA. Two of our front-line staff have been trained and certified as FASD leads in the GTA, and they participate on this leadership team.

Provincial Child Welfare Quality Network (Q-Net)	Our Manager of Research and Evaluation participates in Q-Net, a network group which meets for the purpose of developing agency capacity, providing leadership and facilitating continuous quality improvement to support service excellence throughout the sector. There is a strong emphasis on the ongoing development of sector capacity to measure, monitor and evaluate the efficiency and effectiveness of child welfare services.
Kinship Resource Managers Meetings	Our Child Welfare Resource Manager participates in this group which assists with the implementation of provincial initiatives for both Kinship Service and Kinship Care, including new policies and standards. The work includes looking at the impact of those standards and policies on CASs and front line staff and the identification of education/training gaps. This group also plans the annual Kinship Symposium.
Working Group to address the issues facing servicing families with a child who has Complex Special Needs.	This working group, of which JF&CS is a member, explores multiple issues facing families with children with Complex Special needs and seeks to address gaps in the greater system beyond Child Welfare. Children with complex special needs have historically come into the care and custody of CASs across the province because their families have not been able to cope with and manage their care. This group is looking into ways in which these families can be supported, and how to advocate provincially and with other sectors so that parents do not lose custody of their children in the absence of child protection concerns.
Interagency Placement Committee	JF&CS is a member of the Interagency Placement Committee which evaluates residential and foster placements external to CASs, deciding on which resources to use. The Committee's work includes the development and refinement of residential agreements, Special Care Rate Agreements (SCRA), as well as informal consultation on difficult to place children. The Committee provides updates on new cost containment strategies, recommendations to endorse resources and the assessment and evaluation of resources.
Centralized Access to Residential Services / Quicker Access Advisory Committee	The primary aim of this initiative, in which JF&CS is involved, is to support quick and efficient access for child welfare youth to Children's Mental Health Centers, including ten designated residential Transfer Payment beds.
York Region Centralized Intake	The purpose of this table, at which JF&CS sits, is to review and authorize both children's mental health and CAS referrals for Residential Treatment Beds in York Region. The Committee also monitors bed availability to ensure maximum occupancy.

PERFORMANCE MEASUREMENT

CASs understand the importance of measuring performance and outcomes for children and their families. To this end, key Performance Indicators (PIs) that measure the effectiveness of the delivery of child protection services have been developed.

Currently five PIs are being reported:

- Recurrence of Child Protection Concerns in a Family after an Investigation
- Recurrence of Child Protection Concerns in a Family after Ongoing Services were Provided
- Days of care by placement type
- Time to permanency
- Quality of the caregiver-youth relationship

Each of these Performance Indicators is described in more detail below.

→ Recurrence of Child Protection Concerns in a Family after an Investigation

This PI measures the percentage of family cases closed at investigation in a fiscal year that were re-investigated within 12 months after closing and where the child protection concerns were verified.

This measure is important because closing a case following an investigation assessment suggests that there are no child protection concerns requiring ongoing CAS involvement, or there are factors present that are beyond the control of the agency. However, at the conclusion of many investigations, workers make referrals to community-based services for families. This measure is important for a further understanding of those families that return to a CAS with verified protection concerns and those that do not, in terms of the family's willingness to work with the agency, the emergent of new child protection concerns not present at the time of closure, the level

of engagement and intensity of the services offered, as well as the risks, strengths and needs of children and families. Increasing knowledge in these areas will inform decision-making and improve service delivery.

There is no agreed-upon benchmark for the “acceptable” level of recurrence. While a lower level is generally desirable, the rate of recurrence is unlikely ever to be 0% for a variety of reasons, including the chronic nature of many of the struggles experienced by families commonly known to the child welfare system, e.g., poverty, substance abuse and mental health problems. Furthermore, the reconnection of some families with the child welfare system can be in and of itself a protective factor to children whose families are connected with necessary supports.

→ **Recurrence of Child Protection Concerns in a Family after Ongoing Protection Services Were Provided**

This PI measures the percentage of family cases closed at ongoing protection in a fiscal year that were re-investigated within 12 months after closing where the child protection concerns were verified.

This measure is important because closing a case following ongoing services suggests that child protection concerns have been addressed and no longer require ongoing CAS involvement, or there are factors that are beyond the control of the agency. However, at the conclusion of CAS involvement, many families continue to receive supportive services from other agencies in the community. This indicator measures the extent to which services have been successful in reducing risk to children over the 12 month period following CAS involvement. This measure is important for further understanding of those families who that return to a CAS with verified protection concerns and those that do not, in terms of the family’s willingness to work with the agency, the emergence of new child protection concerns not present at the time of closure, the level of engagement and intensity of the services offered, as well as the risks, strengths and needs of children and families. Increasing knowledge in these areas supports improvements in decision-making and service delivery.

There is no agreed-upon benchmark for the “acceptable” level of recurrence. While a lower level is generally desirable, the rate of recurrence is unlikely ever to be 0% for a variety of reasons, including the chronic nature of many of the struggles experienced by families commonly known to the child welfare system, e.g., poverty, substance abuse and mental health problems. Furthermore, the reconnection of some families with the child welfare system can be in and of itself a protective factor to children whose families are connected with necessary supports.

→ **Permanency Outcome – Days of Care, by Placement Type**

This PI measures, for all children admitted to the care of a CAS, the days of care provided in the fiscal year, by placement type; that is, family-based care versus non-family-based care.

This measure is important because children placed in family-based care are more likely to achieve permanency when they exit care, i.e., be discharged to parents or family including adoptive families or legal custody arrangements, compared to children in group care. Family-based care is the preferred placement setting for the majority of children in care. Children placed in family settings have greater opportunities to form a connection with consistent caregivers and to experience the benefits associated with membership in a family.

While a high rate of family-based care is desirable, selection of a placement setting should be first and foremost influenced by the needs of the child and the fit to the placement. Given the mandate of a CAS, and the nature of the challenges experienced by some children and youth, it can be difficult for agencies to recruit and train quality alternative care through Kin arrangements and Foster Parents. It remains likely that there will continue to be some young people in care who require specialized treatment - programs and structure associated with residential care settings.

→ **Permanency Outcome – The Time to Permanency**

This PI measures, for all children admitted to the care of a CAS during the fiscal year, the cumulative percentage discharged within a specific time period (i.e. 12 months, 24 months and 36 months since admission).

This measure is important because one of the mission-critical outcomes in child welfare is to facilitate permanent living arrangements for all children that are safe, stable and supportive of lifetime relationships. The child welfare system in Ontario has multiple options through which permanency can be achieved (e.g., reunification with parents, legal custody, and adoption). Permanency planning is a significant focus for children in care, whose permanency status, both legally and psychologically, is uncertain. The timing and nature of permanency may look different for every child depending on the child’s needs, family circumstances, court processes, and availability of community service providers.

A key factor that influences time to permanency is child age at admission. Children who enter care at a young age are more likely to be discharged to certain types of permanency (e.g., adoption) compared to older children. Young children often achieve permanency within shorter timeframes, supported by legislation that limits the allowable cumulative time in short-term care for children under 6

years of age compared to older children. An additional factor that impacts time to permanency is the needs of the child, with more complex needs associated with longer timeframes to achieving permanency.

→ Wellbeing Outcome: The Quality of the Caregiver and Youth Relationship

This PI measures the average score for children in care (aged 10-17) from a standard scale that measures a young person's perception of the quality of the relationship with his or her primary caregiver. The scale measures the following four items:

1. How well do you feel he/she understands you?
2. How much fairness do you receive from him/her?
3. How much affection do you receive from him/her?
4. Overall, how would you describe your relationship with him/her?

Each of these four items is rated from 0 to 2, yielding a composite score with a minimum of 0 and a maximum of 8.

This measure is important because the quality of the caregiver-youth relationship is at the heart of service to children in care. Research demonstrates that a young person's perception of the quality of his/her relationship with his/her caregiver predicts the following: current happiness; self-esteem; positive behaviour; and placement satisfaction. As scores increase on the quality of the caregiver relationship scale, so do positive outcomes across each of these areas (e.g. higher self-esteem).

The key influencing factors in measuring the quality of the caregiver/youth relationship include, the age of the youth, the type of placement, gender and the length of the placement.

For data trends and explanations on JF&CS's PI data, please visit the following link:

<http://www.jfandcs.com/#!increasing-safety-and-security/c1qjj>

QUARTERLY CHILD WELFARE FILE AUDITS AND QUALITY IMPROVEMENT PLANS

Jewish Family & Child has been historically required to submit to the Ministry of Children Community and Social Services (MCCSS) a Quality Improvement Plan (QIP) on a quarterly basis.

The QIP has included:

- a. compliance results of 11 Child Protection Standards/requirements, including information on audit methodology used to generate the results;
- b. status of activities/actions taken to date to improve compliance; and
- c. where a compliance result was not 100%, future activities/actions to improve compliance for the next quarterly reporting period.

To comply with the Ministry's requirements, the Agency conducts comprehensive file audits on all documentation. Case file data is pulled electronically from the case management system (CPIN). Information that cannot be extracted electronically is collected via a manual review of case files selected for audit.

The audits cover several child welfare standards: case closures, supervision, investigations, ongoing protection work, children in the care of CASs and home visits. Audit results include the Agency's compliance percentages with each standard and the sample sizes upon which this data is based.

The Agency's goal is always 100% compliance per standard/requirement. Thus, the goal of JF&CS is to uphold its commitment to 100% compliance and to ensure that each QIP brings the Agency progressively closer to meeting this commitment.

We believe our high compliance rates are the result of continuous emphasis placed on: the importance of solid clinical service to our clients, compliance to Child Protection Standards, improving oversight through CPIN reporting, and the introduction of the Departure from Standard form (a form aimed at capturing legitimate and real-life reasons for departing from a specific standard).

Over the past year, the QIP has been placed on hiatus due the Covid-19 pandemic. The next planned QIP submission is scheduled to resume in October, 2021.

Also during this period, the Ontario government released a plan to redesign the child welfare system. This new strategy was developed in consultation and input from youth, families, caregivers, First Nations, Inuit and Metis partners, lawyers, community organizations,

frontline workers and child welfare sector leaders. One of the priorities of the new strategy is to “Continue to Improve the Service Experience and Outcomes” for children and youth. With child welfare redesign, there will be an opportunity to refresh the sector approach to measurement of outcomes. It is anticipated that there will be more of a focus on client outcomes data, as opposed to service compliance data.

CONTACT INFORMATION

Heather Shimkovitz , M.S.W., RSW
Director of Service, Child Welfare
Jewish Family and Child Service of Greater Toronto
4600 Bathurst Street | Toronto, Ontario | M2R 3V3
416.638.7800 x 6280 • hshimkovitz@jfandcs.com