

Ministry of Children and Family Development (MCFD),  
Vancouver Aboriginal Child and Family Services Society (VACFSS) and the  
Representatives Office for Children and Youth (RCYBC)



Ministry of  
Children and Family  
Development



REPRESENTATIVE FOR  
CHILDREN AND YOUTH

Vancouver Aboriginal Child and Family Services Society

## PURPOSE

BC Women's Acute Perinatal Program, the Ministry of Children and Family Development, and the Representative for Children and Youth all have collaborate roles to play in supporting the health and well-being of newborns, and ensuring that decisions reflect the best interests of the child, above all else. The purpose of this guideline is to facilitate effective collaborative working relationships when issues arise with respect to the care and custody of newborns at Fir Square. All parties enter into the relationship open and willing to collaborate.

### Definitions:

"CFCSA" - [Child, Family and Community Service Act. \(CFCSA\) \(1995\)](#)

"FOIPPA" - [Freedom of Information and Protection of Privacy Act. \(FOIPPA\) \(1995\)](#)

"VACFSS" - [Vancouver Aboriginal Child and Family Services Society](#)

**Advocacy** – is a healthy and legitimate activity and an essential part of good professional practice. Put most simply, effective advocacy is about welcoming people into the decision-making process by ensuring that their views are heard and considered in decisions that are being made about their lives and that their rights are upheld. Advocacy is an assertive and collaborative approach to problem-solving rather than an aggressive and adversarial one. There are different kinds of advocates, including lay or natural, (for example [e.g.] a friend or older sibling), organizational or professional (e.g. a child and youth worker, social worker, a mental health worker or a representative for children and youth advocate), and legal (e.g. a lawyer whose client is a child or youth). Advocates provide help when people have difficulty speaking for themselves and sometimes, speaking for them when they have no voice.

**"Child in Care"** means a child who is in the custody, care or guardianship of a Director through an interim, temporary or continuing custody order under the *CFCSA* or when a Director is requested by a birth parent or other guardian to place the child for adoption under the *Adoption Act*. When a Director places a child with prospective adoptive parents (during the adoption residency period), the child remains under the guardianship of the Director until the adoption is granted. When a Director has care of a child under a voluntary care or special needs agreement, the child remains under the guardianship of the child's parent.

**"Delegated social worker"** means a social worker delegated under s. 92 of the *CFCSA* or section 77 of the *Adoption Act*. A delegated social worker may be employed by the MCFD or by an Aboriginal Child and Family Services Agency.

**"FIR/ hospital social worker"** means a social worker employed by the Children's & Women's Health Centre of British Columbia (C&W). C&W is an agency of the Provincial Health Services Authority. It is made up of British Columbia's Children's Hospital, British Columbia's Women's Hospital and Health Centre and Sunny Hill Health Centre for Children.

**"Liaison"** is a person assigned to maintain communication between units of organizations in order to ensure concerted action and/or cooperation.

“**Team**” includes all those assigned to act on behalf of the mother and/or her child. This could include nurses, social workers, physicians, lawyers, etc.

“**The Director**” refers collectively to the authority delegated by all designated directors under the *CFCSA* and *Adoption Act* within the MCFD and delegated Aboriginal Child and Family Service Agencies.

## OVERVIEW OF ROLES

The safety and best interests of a child will guide decision making and case planning.

In situations where a child or family has involvement with Fir Square, MCFD and RCYBC, the following roles and responsibilities will help in the provision of collaborative planning and decision making. MCFD and RCYBC will request or receive confidential information in accordance with *CFCSA*, *the Adoption Act*, *FOIPPA* and *Representative for Children and Youth Act*, *SBC 2006*.

As well, both groups agree to take all appropriate privacy and security measures necessary to ensure the information provided is protected in accordance with the *CFCSA* and *FOIPPA*.

### RCYBC

The advocates maintain an advocacy role as per legislation of the *Representative for Children and Youth Act*, *SBC 2006*. This is an independent office of the legislature. The functions of representative's are outlined in section 6 and state “the representative is responsible for performing the following functions in accordance with this Act:

- a) support, assist, inform and advise children and their families respecting designated services, which activities include, without limitation,
  - (i) providing information and advice to children and their families about how to effectively access designated services and how to be effective self-advocates with respect to those services
  - (ii) advocating on behalf of a child receiving or eligible to receive a designated service and
  - (iii) supporting, promoting in communities and commenting publicly on advocacy services for children and their families with respect to designated services;
- b) perform any other prescribed functions

RCYBC has no decision making authority under *CFCSA* and cannot override a decision of the Ministry.

### MCFD

Under s. 16 of the *Child, Family and Community Service Act (CFCSA)*, delegated social workers (SW) have a statutory responsibility to receive, assess and respond to reports that a child's safety may be at risk and well being may be endangered. Decisions are made regarding the most appropriate response for the ongoing safety and well being of that child according to the provisions of the *CFCSA*. Delegated social workers also have guardianship responsibilities for children in care under Part 4 of the *CFCSA* or s. 24 of the *Adoption Act*. It is in this context that delegated social workers and C&W workers will collaboratively ensure the safety and well being of the child according to the provisions of *CFCSA*.

### VACFSS

Vancouver Aboriginal Child and Family Services Society - a delegated urban agency providing a full range of delegated services under the *CFCSA*. VACFSS' service responsibility is for Aboriginal children and families within the City of Vancouver. Métis, Musqueam, and Nisga'a children and families will be served by the Vancouver/ Coastal Ministry of Children and Family Development. All other Aboriginal children and families will be served by VACFSS.

VACFSS' vision is a balanced and harmonious Aboriginal community. We strive to culturally and spiritually strengthen Aboriginal families through holistic service delivery. Child protection services are guided on the five core values of integrity, belonging, humility, respect and strength-based practice. Child protection

works with other services such as Family Preservation and Reunification and Collaborative Practice, to focus on prevention and keeping family units together whenever possible.

Like the Ministry, the safety and well-being of children will be the first priority of the Aboriginal Child and Family Services. The practice is grounded in the recognition that many Aboriginal families continue to be vulnerable due to historical factors and ongoing systemic barriers and challenges. It is recognized that sustained effort is required for engaging families within a supportive network of community resources. The overall goal is to empower families to recognize and overcome barriers that increase their vulnerability.

VACFSS operates under the Aboriginal Operations and Practice Standards and Indicators (AOPSI) and the Constitution: Vancouver Aboriginal Child and Family Services Society.

### **Fir Square**

The mandate of Fir Square is to provide antenatal and postnatal obstetrical and medical care to substance using women requiring hospitalization for detoxification, withdrawal management or stabilization as well as care for their substance exposed newborns. Services are founded on a positive, women - centered, harm reduction approach that supports and advocates for mother's and babies staying together. The Fir Square team works collaboratively to prepare women for motherhood, help women with their detoxification plans and find safe, supportive housing. This improves the well-being and safety of substance using women and substance exposed newborns. Women are encouraged by the Fir Square team to be open and transparent with their delegated social worker.

## **RESPONSIBILITIES**

The best interests of the child will guide the case planning and decision making of all involved. In the event there is a conflict, it is expected that resolution will be sought at the earliest possible stage and, if necessary, resolve the conflict through the progressive stages outlined under the following guideline:

### **Fir Square**

The Fir social worker is the liaison between the delegated social workers and the clinical team. She is the contact in order to organize planning with other members of Fir clinical team. It is in this context that delegated social workers and C&W social workers will collaboratively ensure the safety and well being of the child. Contacts on Fir Square for a liaison/advocate will be the social worker at 604 – 875 – 2618, Charge Nurse at 604-875-2229, or Program Manager at 604-875-2926.

### **RCYBC**

Use a decision making process to determine if there will be direct involvement. Their range of motion is prescribed by the statute and will not be modified by any other agreement.

The initial contact with RCYBC will be by the woman herself. There will be two child advocates assigned to Fir.

Fir Square will provide information to women about her resources including advocacy by RCYBC.

When coming to interview a woman, the advocate will give advanced notice, as above, of visit.

On arrival to the unit, buzz in if the unit is locked and request to speak to the CNL or SW. One of these health care professionals can make introductions to the woman.

### **MCFD**

Will have different delegated social workers that come to Fir from different "regions". The initial contact with Fir Square to set up a meeting will be with the Fir social worker. The regions also have a liaison social worker who can be involved in complex cases that require his/ her assistance. The delegated social worker or the Fir social worker can request assistance.

## REFERENCES

Aboriginal Operations and Practice Standards and Indicators (AOPSI), and [Constitution: Vancouver Aboriginal Child and Family Services Society \(VACFSS\)](#) (2005, June).

[BC Legislation & Regulations](#) and [BC Laws](#)  
[Adoption Act \(1996\)](#)

[Child, Family and Community Service Act. \(CFCSA\) \(1995\)](#)

[Freedom of Information and Protection of Privacy Act. \(FOIPPA\) \(1995\)](#)

[Representative for Children & Youth Act, SBC \(RCYBC\) \(2006\)](#)

Protocol Agreement Regarding Social Worker's Role and Responsibilities. (2008, February). Children's & Women's Health Centre.

### Participants:

BCW - Dr. Ronald Abrahams, Jill Mahy

MCFD - Shelia Robinson, Susan Waldron, Kathy Berggren-Clive

RCYBC - John Greschner

VACFASS - Donald Robershaw, Terry Lejko

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