

YORK REGION CHILDREN'S AID SOCIETY

Operational Review Work Plan

January 2021

Work Plan in Response to Operational Review York Region Children's Aid Society January 22, 2021

The following summarizes the process used by York Region Children's Aid Society (YRCAS), including both Board and staff, to achieve the work plan required in response to the Directive issued by MCCSS in announcing on July 31, 2020 their plans to conduct an Operational Review of the agency. The Work Plan reflects the combined efforts of Board and staff and has been approved by the Board of Directors in keeping with their governance role, on January 18, 2021. The process reflected in the following was an essential first step in signalling commitment by YRCAS, Board and staff, to making changes aligned with the recommendations received through the Operational Review.

Operational Review

In July 2020, after receiving allegations of racism, bullying and harassment involving senior staff at York Region Children's Aid Society (YRCAS/the Society), the Ministry of Children, Community and Social Services (MCCSS) initiated an Operational Review. MCCSS engaged Agree Inc.¹, to conduct a workplace assessment, including a review of human resources policies. In September 2020, Agree Inc. began its review. In addition, MCCSS staff conducted a review of the Society's compliance with the Child, Youth and Family Services Act, by reviewing numerous service files. The Review in total looked at all aspects of the organization including Board governance, internal operations, and service delivery.

On November 13, 2020, the *Operational Review* was received, distributed to all staff via email and posted on the YRCAS website for public awareness.

Change is Needed

The review by Agree Inc. found that staff had been deeply impacted by leadership at the Society that was "experienced as an autocratic, deficit-based culture of fear that targeted dissent and enabled oppressive behaviours." (*Operational Review, p. 3*). All BIPOC² staff reported experiencing racist behaviour in the YRCAS workplace. In addition, the "highest profile experience of racism at YRCAS was reported to be anti-Black racism." (*Operational Review, p.21*)

The review determined that a new leadership direction and approach was needed as were actions to create a healthy workplace culture. The organization viewed the outcomes of the Review as an opportunity to make changes in the organization toward health and excellence as a work place, delivery of services and governance.

In all, 35 recommendations were made, which have been grouped by the organization, under the following themes:

- Leadership (5 recommendations);
- Culture (3 recommendations);
- Diversity, Equity and Inclusiveness (2 recommendations);
- Change Management (2 recommendations);
- Human Resources (10 recommendations);
- Service (11 recommendations);

¹ Agree Inc. is an external third-party human resources firm with expertise in workplace reviews and cultural audits.

² Black, Indigenous, People of Colour

- Governance (2 recommendations).

Process to Develop the Work Plan

YRCAS is eager to turn the page and take the many steps necessary to be the healthy organization that its staff, resource parents, Board and the children, youth, and families it serves, needs, and deserve. The work plan reflects the organizational commitment to address the recommendations.

The Work Plan outlined in this document is the first step toward change; many projects and further planning, as well as actions, will be required to actualize the needed changes.

The process to develop the work plan involved:

- establishing principles;
- establishing a Project Team;
- establishing an Advisory Council;
- establishing an expanded mandate for the Board's Risk Oversight Committee.

Principles

YRCAS developed a set of principles to guide the Work Plan development. See below, p. 4.

Project Team

A small (5 members) project team was assembled to take overall responsibility for development of the Work Plan. Their scope was reflected in a scope of work document. External resources were engaged to provide project lead and administrative support roles recognizing the internal limitations due to existing workload. The team was inclusive of a:

- service supervisor, taking the lead for the service portion of the work plan;
- director of service, responsible for organizational development and;
- member of the Diversity, Equity and Inclusion team, who participated as a representative from Local 304 and as a subject matter expert for Diversity, Equity and Inclusion.

Work Plan Advisory Council

An Advisory Council was assembled to ensure that broad staff representation was available to advise regarding the contents of the plan to address the recommendations of the Operational Review. The Advisory Council worked on all recommendations with the exception of the two related to Board governance. The Risk Oversight Committee of the Board of Directors took responsibility for drafting the governance section of the Work Plan.

The twelve members of the Advisory Council included:

- Labour (3 representatives selected by Local 304);
- Non-Union (2 representatives selected by non-union staff as a group);
- Supervisors (3 representatives selected by Supervisory group);
- Manager (1 representative selected by the Managers' group);
- Director of Service (1 representative selected by the Directors of Service);

- Human Resources (1 representative selected by HR Director and team);
- Director of Service/Manager of Service DEI (1 representative selected by the DOS lead for DEI);
- Members of the Project Team not included above;
- The Council was supported in their weekly meetings by Gary Furlong, Agree Inc. as facilitator for the meetings.

The Advisory Council was committed to developing a work plan that would set YRCAS on the road to creating a workplace absent of bullying, harassment and racism as well as creating systems to ensure the best possible services to the community.

Risk Oversight Committee

The Board's existing Risk Oversight Committee was tasked with providing guidance and review to the development of the Work Plan on behalf of the Board of Directors. In addition, the Committee took responsibility for development of strategies to achieve the changes needed to achieve the recommendations related to governance. The Committee met weekly to receive and review the outputs of the Advisory Council as well as guide the communication with the Board.

Board of Directors

The Board received information about the Work Plan through receiving an initial draft as recommended by the Risk Oversight Committee on January 8th, 2021 and a more final draft following Committee recommendation on January 15th. The Board reviewed the material and as part of their January 18th Board meeting, via Motion, signaled their approval of the Work Plan. This approval reflected commitment to supporting the work across the organization as well as continuously working on their specific area, governance, and hearing of the progress in all other areas to ensure achievement of commitments.

Timeframe for Development

The July directive from MCCSS required that the Work Plan be submitted 30 days following release of the report. MCCSS had identified this as being December 29, 2020. As the work began, it became evident that an extension would be needed if the Society was to develop a work plan that was comprehensive and the process inclusive. As a result of a request from the Board, endorsed by Local 304, MCCSS granted an extension to January 22, 2021 as requested.

The Work Plan Takes Shape

Each week, the work of the Advisory Council was shared with the Risk Oversight Committee (ROC) of the Board. Feedback from ROC was then taken back to the Advisory Council. As noted above, the Board of Directors approved the Work Plan prior to its submission to MCCSS.

The Work Plan is intended to be a high level plan that will set the stage for specific project development by which YRCAS will move forward. The Work Plan also prioritizes the established outcomes. While it is clear that all of the recommendations and the associated outcomes are important, it is not possible to do everything at once. In addition, some outcomes are dependent on the completion of others.

The process by which this Work Plan has evolved is itself a demonstrative indication of the change in culture that YRCAS is seeking to integrate.

The Principles and Work Plan are below.

Principles to Guide the Development of the Work Plan

- **Child-centred, family-focused.** Children, youth and families will be at the forefront of our organizational processes and decision making.
- **Respect:** Individual worth, dignity and autonomy will be upheld in all actions and decisions.
- **Diversity of Engagement and Empowerment:** We will engage in fair, power-sharing, and participatory decision-making processes ensuring diversity of thought and representation.
- **Appreciation.** We will demonstrate caring and kindness, celebrate differences, recognize people for who they are and what they do well, and place value on their wellbeing.
- **Strength-based Approach.** We will start from a place of appreciative inquiry and take a strength based, outcome-focused approach to our work.
- **Transparency.** Communication regarding organizational priorities, processes, and decisions will be widely shared in an open, respectful, clear, and timely manner including what cannot be shared and why.
- **Accountability.** We will have clear measures and mechanisms in place to continually evaluate and strengthen organizational processes and service delivery practices in a way that recognizes that individuals and groups are impacted differently.
- **Efficiency and Efficacy.** We will build solutions that make sense, reduce duplication and unnecessary steps.
- **Learning Culture.** We will demonstrate attitudes, values and practices that encourage and support learning conversations and the process of continuous learning within the organization.
- **Equity.** We will build a process for fair treatment, access, opportunity, and advancement for all people, while at the same time striving to identify and eliminate barriers that have prevented the full participation of equity-seeking groups.
- **Inclusion.** We will build a work environment where marginalized individuals and groups can be and feel welcomed, respected, supported, and valued to participate fully.
- **Safety.** Safety is critical to service delivery at all levels in the agency - we will provide all staff, volunteers and resource parents with ongoing, relevant trainings and supports for their work.

York Region Children's Aid Society Operational Review Work Plan

As described above, the recommendations provided through the Operational Review have been organized, by YRCAS, into seven (7) themes:

- **Leadership**
- **Diversity, Equity and Inclusion**
- **Human Resources**
- **Culture**
- **Governance**
- **Change Management**
- **Service**

The Work Plan includes plans to address each of the recommendations.

An attempt is made to prioritize outcomes (1, 2 or 3). While all recommendations and the plans to address them are important, not everything can begin at once. In addition, some outcomes are dependent on the completion of others. Outcomes assigned priority 1 will begin first. Outcomes assigned priority 2 or 3 will begin as the overarching change management plan allows.

Stakeholders are categorized as R, A, S, C or I:

- **R** refers to “responsible” (is ultimately responsible for delivering the work, ensures that the work is done)
- **A** refers to “accountable” (has ultimate accountability, the person to whom “R” is accountable)
- **S** refers to “support” (provides support or does the work)
- **C** refers to “consulted” (must be consulted before the work is completed, input adds value)
- **I** refers to “informed” (must be notified of results)

For all Outcomes in the Work Plan, the person accountable (or body, where the Board of Directors is accountable) and groups that must be consulted are identified. Determination regarding “R”, “S” and “I” will be determined once the project details are established.

Leadership

L #1: Leadership: Develop, communicate and implement a clear set of leadership principles, values and competencies for leadership at the society consistent with the established values of YRCAS.

L #2: Vision, Direction and Strategy for YRCAS: Develop clear direction, tangible strategy and goals for the organization, communicate and implement these across the organization.

L #3: Guiding Principles and Values: Engage all staff in a review and commitment to the guiding principles and values of YRCAS. All staff, beginning with senior management, need to commit to key principles such as collaboration, staff engagement, and a strength-based approach in the workplace.

L #4: Roles and Responsibilities: Identify decision-making authority at all levels of the organization from the front-line up to the senior executives to make professional decisions and judgements appropriate to their role.

L #5: Staff Feedback and Input: Develop staff feedback, input and consultation processes that will create an environment where staff input is both sought in appropriate ways and valued when received.

Outcomes/Deliverables	Priority 1,2,3	Diversity, Equity and Inclusion	Stakeholders (RASCI)
L #1: Leadership			
<p>All leaders in the organization (emerging leaders to CEO) will demonstrate behavior aligned with diversity, equity, inclusion, organizational values, and competencies as set out in the York Region CAS Leadership Competency Framework.</p> <ul style="list-style-type: none"> The York Region CAS Leadership Competency Framework will be adapted from the OACAS framework. 	2	<p>Diversity, Equity and Inclusion is a value and competency with targeted mandatory training, mentoring and coaching.</p> <p>Lived experiences are valued in selection process for leadership roles.</p>	<p>Accountable: Board of Directors for CEO Accountable: CEO for all staff Consulted: All staff; Union</p>
L #2: Vision, Direction and Strategy for YRCAS			
<p>The Society has an updated Strategic Plan effective in 2021 that sets the direction and priorities for the organization.</p>	3	<p>Selection process for consultant to facilitate Strategic Planning Process will prioritize Diversity, Equity and Inclusion experience and skills.</p> <p>Integration of diversity, equity and inclusion across the agency to be included as part of the strategic plan.</p> <p>Diverse community representation in consultation process.</p>	<p>Accountable: Board of Directors Consulted: Staff; Union; Service Users; Community Partners; Foster Parent Association (FPA); resource parents; volunteers</p>

Outcomes/Deliverables	Priority 1,2,3	Diversity, Equity and Inclusion	Stakeholders (RASCI)
L #3: Guiding Principles and Values			
All Board members and staff demonstrate behaviours and commitment aligned with diversity, equity, inclusion, organizational principles and values, supporting a learning culture and respectful, healthy workplace.	2	Diversity, Equity and Inclusion will be embedded in the core values. Consultation with diverse community representation.	Accountable: Board of Directors Responsible: CEO for staff Consulted: All staff; Union; community partners; service users; Foster Parent Association; resource parents; volunteers
L #4: Roles and Responsibilities			
The organizational structure clearly defines, communicates, and supports best practice, balanced spans of authority, and effective, efficient, timely decision-making that is equitable, inclusive, and shares power.	2	Selection process for consultant will prioritize Diversity, Equity and Inclusion experience and skills.	Accountable: CEO Consulted: All staff; Union; Subject Matter Expert(s); Foster Parent Association; community partners; service users
L #5: Staff Feedback and Input			
Staff feedback and consultation processes are established to create a safe environment where staff input is sought, valued, and implemented.	2	Identify and remove any barriers to enable inclusive and diverse representation.	Accountable: CEO Consulted: All staff; Union; resource parents; volunteers

Diversity, Equity and Inclusion

DEI # 1: Equity. The organization at every level, will develop and maintain processes that support fair treatment, access, opportunity, and advancement for all people.

DEI #2: Inclusion. The Board governance and work environment will be one where all individuals and groups are welcomed, respected, supported, and valued.

Outcomes/Deliverables	Priority 1,2,3	Diversity, Equity and Inclusion	Stakeholders (RASCI)
DEI #1: Equity			
<p>Organizational processes are fair and equitable in the treatment of:</p> <ul style="list-style-type: none"> • all staff; • service users; • community partners. <p>All organizational structures promote diverse, equitable and inclusive policies, procedures, and practices that are responsive to the needs of equity-seeking groups and that address racism/anti-Black racism.</p> <p>The organizational Diversity, Equity and Inclusion Plan includes all aspects of the organization; from Board governance to operations.</p> <p>The Society has integrated the One Vision, One Voice Race Equity Practices.</p> <p>The Society has integrated the Truth and Reconciliation commitments with respect to child welfare as well as the 9 Indigenous Commitments.</p>	1	<p>A comprehensive review of policies, procedures and practices, along with HR data will be undertaken to identify gaps and needed revisions and build in mechanisms for regular review.</p> <p>An assessment and evaluation of the structure, resourcing and positioning of the Diversity, Equity and Inclusion Department/Team will be undertaken to ensure diversity, equity and inclusive principles and practices are supported throughout the organization and in the community.</p> <p>The Diversity, Equity and Inclusion Department/Team to develop and implement the organizational equity and inclusion workplan.</p> <p>The Diversity, Equity and Inclusion Department/Team will develop a workplan to implement the One Vision One Voice Race Equity Practices.</p> <p>The Diversity, Equity and Inclusion Department/Team to develop a workplan to implement Truth and Reconciliation recommendations and the 9 Indigenous Commitments.</p> <p>Review all organizational complaints processes and procedures to ensure that they have been framed from a Diversity, Equity and Inclusion lens.</p> <p>Review Local 304 Collective Agreement in collaboration with OPSEU to ensure that Diversity, Equity and Inclusion is embedded, and where necessary, consider how to make revisions if possible.</p>	<p>Accountable: CEO Consulted: Board of Directors; Staff; Union; Diversity, Equity and Inclusion Team; Resource Parents; Foster Parent Association; Internal Employee Committees/Resource Groups; Community Partners; Service Users</p>

Outcomes/Deliverables	Priority 1,2,3	Diversity, Equity and Inclusion	Stakeholders (RASCI)
		<p>Review finance/budget policies and practices from Diversity, Equity and Inclusion lens to ensure that support to service users is provided in an equitable manner.</p> <p>Review job evaluation tool as it relates equity-seeking groups, particularly for non-union staff.</p> <p>Systematically collect and analyze self-identifying data at all levels of staff to identify and address any systemic barriers.</p> <p>Diversity, Equity and Inclusion department/team to work in collaboration with HR to review HR process.</p> <p>Diversity, Equity and Inclusion department/team will develop material and/or seek out professional development opportunities that supports the ongoing transfer of learning and change in practice for all staff.</p> <p>Diversity, Equity and Inclusion training opportunities includes processes to identify further training needs within the agency.</p>	
DEI #2: Inclusion			
<p>The Society's work environment is safe, welcoming, respectful, and supportive.</p> <p>The Society's consultation and decision-making framework includes comprehensive feedback mechanisms.</p>	1	<p>Develop feedback processes, as set out in L#5.</p> <p>Human Resources to provide disaggregated data on complaints so as to identify racism, sexism, discrimination.</p>	<p>Accountable: CEO Consulted: Staff; Union; Resource Parents; Foster Parent Association; Community Partners; Internal Employee Committees/Resource Groups</p>

Human Resources

HR #1: HR Framework: Ensure that the Human Resources function is a resource for all staff in the organization and Diversity, Equity and Inclusion is integrated as a priority throughout the HR Framework.

HR #2: Diversity, Equity and Inclusion: Revise the HR strategy to ensure that Diversity, Equity and Inclusion is a priority throughout.

HR #3: Wellness Framework: Develop and implement a wellness framework, the purpose of which is to support staff and reduce work-related stress and burnout.

HR #4: Hiring Processes: Establish clear hiring processes that are fair, open, and free of bias or favouritism.

HR #5: Performance Management: Develop and implement a competency-based performance management system.

HR #6: Workload: Develop a process for assessing workload for all areas of the organization and a process through which identified workload issues can be addressed.

HR #7: Training: Develop and implement a training and development plan for the organization that ensures increasing competency for all staff.

HR #8: Complaint and Whistleblower Processes: Ensure that there are meaningful and effective complaint processes available to all staff.

HR #9: Other HR Policies: Conduct a full review of all other HR functions, including leaves, accommodations, and return to work processes, ensuring that policies, procedures and practices are equitable and consistent with Diversity, Equity and Inclusion principles.

HR #10: HR Framework: Ensure that commitment to Diversity, Equity and Inclusion is integrated throughout the HR Framework.

Outcomes/Deliverables	Priority 1,2,3	Diversity, Equity and Inclusion	Stakeholders (RASCI)
HR #1: Human Resource Framework			
<p>The Society has a Human Resource Framework aligned with the Strategic Plan and organizational values that supports the delivery of timely, efficient, and equitable human resource practices and processes to support staff.</p> <p>The Society's Human Resource Department has the resources, skills, diverse representation, reporting structure and capacity to ensure the department can respond to the needs of all staff in the entire organization.</p>	1	<p>Ensure equitable and inclusive practices are evident in policies, procedures and processes.</p> <p>Human Resource staff to demonstrate competency related to diversity, equity and inclusion.</p> <p>HR department to be reflective of the organization and York Region.</p>	<p>Accountable: CEO Consulted: All staff; Union; Board of Directors</p>

Outcomes/Deliverables	Priority 1,2,3	Diversity, Equity and Inclusion	Stakeholders (RASCI)
		Integration of diversity, equity, and inclusion across the agency.	
HR #2: Diversity, Equity and Inclusion			
See Diversity, Equity and Inclusion Section of Work Plan.			
HR #3: Wellness Framework			
The Society's Human Resource Framework includes a wellness strategy that is resourced to prioritize wellness promotion, prevention, and intervention for all staff.	3	<p>Ensure equitable and inclusive practices are evident in policies, procedures and processes.</p> <p>Identify barriers and ensure equitable access to benefits for union and non-union staff.</p>	<p>Accountable: CEO Consulted: All staff, Union, Board of Directors</p>
HR #4: Hiring Processes			
The Society has equitable recruitment, hiring and promotion practices that are transparent and clear.	1	<p>Ensure equitable and inclusive practices are evident in policies, procedures and processes.</p> <p>Review job evaluation process to ensure diversity, equity, and inclusion (i.e., Indigenous peoples, gender, racialized, people living with disability).</p> <p>Monitor and analyze data to identify any potential systemic barriers to advancement.</p> <p>Identify and plan to address barriers with respect to recruitment, applications, hiring.</p>	<p>Accountable: CEO Consulted: All Staff; Union</p>
HR #5: Performance Management			
The Society has implemented a knowledge and competency-based performance review process that is aligned with the organization's priorities and values that evaluates and supports the development of skills, behavior and goals.	3	<p>Ensure equitable and inclusive practices are evident in policies, procedures, and processes.</p> <p>Equitable and inclusive competencies are embedded and measured in performance.</p>	<p>Accountable: CEO Consulted: All staff; Union</p>

Outcomes/Deliverables	Priority 1,2,3	Diversity, Equity and Inclusion	Stakeholders (RASCI)
		All staff to have knowledge, understanding and specific training regarding the impact of unconscious bias/racism/stereotypes etc. in performance review.	
HR #6: Workload			
<p>The Society has implemented a workload assessment process that provides data to establish a baseline understanding of what constitutes a manageable workload for all job functions in the organization.</p> <ul style="list-style-type: none"> A systematic and equitable workload assessment process for all job functions in the organization to be undertaken. 	1	Ensure equitable and inclusive practices are evident in the continual assessment of workload and assignment of work.	Accountable: CEO Consulted: All Staff; Union
HR #7: Training			
<p>The Society has an integrated learning and development plan for all roles that provides for onboarding, training, mentoring and coaching, and opportunities for cross training.</p> <p>All staff have opportunities to access additional learning opportunities to further their development.</p>	3	<p>Mandatory training and ongoing support for all staff, volunteers, and resource caregivers to increase awareness, knowledge and understanding of equitable practices, anti-oppression, anti-racism/anti-black racism/anti-indigenous racism and how it impacts service delivery and interactions within the organization and with community partners.</p> <p>Onboarding of new staff will include organizational priorities (i.e., diversity, equity, and inclusion).</p> <p>Review and strengthen forums for ongoing sharing and transfer and sharing of knowledge related to diversity, equity, and inclusion.</p>	Accountable: CEO Consulted: All Staff; Union; Community Partners Informed- Staff, Service Users; Community Partners.
HR #8: Complaint and Whistleblower Processes			
<p>The Society has a meaningful and effective resolution process available to all staff, (of which all staff are aware), that includes a spectrum of options for staff to safely approach complaint discussions from early issue resolution to whistle-blower processes.</p> <ul style="list-style-type: none"> Develop and implement clear steps, tools, training and escalation options to ensure that all staff have mechanisms to safely identify concerns. Explore engagement of an external ombudsman service for whistle-blower complaints to establish trust in the process. 	1	<p>Ensure equitable and inclusive practices are evident in policies, procedures and processes.</p> <p>All staff have equitable access to processes available for complaint resolution which considers systemic barriers and acknowledges the impacts of the experience on the individual.</p>	Accountable: CEO Consulted: All Staff; Union; Board of Directors

Outcomes/Deliverables	Priority 1,2,3	Diversity, Equity and Inclusion	Stakeholders (RASCI)
HR #9: Other HR Policies			
The Society's Human Resource policies, procedures and processes are aligned with legislated requirements and reflect the organization's values/priorities including diversity, equity, and inclusion.	3	Ensure equitable and inclusive practices are evident in policies, procedures, and processes.	Accountable: CEO Consulted: All staff; Union
HR #10: HR Framework			
See HR #1 and the Diversity, Equity and Inclusion Section.			

Culture

C #1: Restoration and Healing: Acknowledge and validate the lived experience of all staff, as uncovered through the Operational Review and develop a process or processes that will allow the majority of people to draw a gentle curtain on the past and focus forward.

C #2: Healthy Workplace Audits: Establish and implement a permanent process for auditing the health of the organization.

C #3: Issue Resolution Process: Develop and incorporate a staff issue resolution process whereby issues can be raised and resolved at the lowest level in the Society without fear.

Outcomes/Deliverables	Priority 1,2,3	Diversity, Equity and Inclusion	Stakeholders (RASCI)
C #1: Restoration and Healing			
Processes are established for internal restoration and healing including safe environments for restorative conversations and addressing difficult issues between staff at all levels, with the goal to build a supportive, inclusive, and equitable organization conducive to collaborative work and learning. <ul style="list-style-type: none"> Develop plans for and engage in restorative processes that maintain the safety of all participants (e.g., talking circles, group conferencing, peer support). 	1	Selection for third party facilitators who may be engaged will prioritize expertise and skill in Diversity, Equity and Inclusion and Anti-Black Racism.	Accountable: CEO Consulted: HR; Diversity, Equity and Inclusion team; staff; Union.

Outcomes/Deliverables	Priority 1,2,3	Diversity, Equity and Inclusion	Stakeholders (RASCI)
C #2: Healthy Workplace Audits			
The Society has implemented a system to measure the health of the organization on a permanent and on-going basis, the results of which are shared with the Board, Ministry, all staff, resource parents, volunteers, identified external partners, and publicly posted. <ul style="list-style-type: none"> Develop and implement audit tools to measure the health of the workplace. 	3	Identify and remove barriers to participation. Establish a process within the audit tool to collect disaggregated data for all groups to identify systemic barriers within policies and processes connected with equity, diversity and inclusion objectives.	Accountable: CEO Consulted: HR; Diversity, Equity and Inclusion team; staff; Union
C #3: Issue Resolution Process			
Refer to HR #8, Complaint and Whistleblower Process			

Governance

Role of the Board of Directors - Overall, it is the role of the board to hold senior staff accountable for operating the society effectively by delivering against the objectives as set out in the strategic plan. To accomplish this, the board, regardless of whether they choose to position themselves toward the operational end or the governance/strategy end of the spectrum, must ensure they are not overly insulated from the organization. They must always have good information on not only whether the strategic goals are being met, but also whether the organization, as a whole, is in a state of good health. This includes the level of employee engagement and the level of staff morale. It is recommended that:

G #1: The Board conduct a full review of its governance structures to ensure these structures are designed to properly hold senior staff accountable to the strategic plan of the Society;

G #2: The Board develop a robust feedback strategy to ensure that in addition to financial performance, the health of the organization is also tracked and monitored.

Outcomes/Deliverables	Priority 1,2,3	Diversity, Equity and Inclusion	Stakeholders (RASCI)
G #1: Review of Governance Structures			
The Board holds senior staff accountable to the strategic plan.	1	The revised Strategic Plan will ensure integration of diversity, equity and inclusion.	Accountable: Board of Directors

Outcomes/Deliverables	Priority 1,2,3	Diversity, Equity and Inclusion	Stakeholders (RASCI)
		<p>The Board regularly receives information that supports its oversight of organizational progress to address racism/anti-black racism.</p> <p>The Board has established a Diversity, Equity and Inclusion Committee to oversee the integration of diversity, equity and inclusion into all policies, procedures and practices.</p> <p>The Board ensures that orientation of new board members includes training regarding diversity, equity and inclusion and that board development regularly includes re-fresher training for all board members.</p>	<p>Consulted: staff; service users; community partners; external expert on board governance</p>
G #2: Feedback Strategy			
<p>The Board has a robust feedback strategy and monitors all aspects of organizational health.</p>	<p>1</p>	<p>The feedback strategy will include capacity to oversee and meet the diversity, equity and diversity objectives as set out in the Strategic Plan.</p> <p>Employee engagement survey allows for provision of demographically disaggregated results.</p> <p>Complaint data (both employee and service user) is disaggregated.</p>	<p>Accountable: Board of Directors</p> <p>Consulted: staff; service users; community partners; external expert on board governance</p>

Change Management

CM #1: Change Management Strategy and Plan: Adopt a clear change management framework for each significant initiative that identifies the change being made, the rationale, timeframes, accountabilities, supports and resources, and metrics.

CM #2: Communications Plan: Develop a transparent, open and structured communications plan to become a key component of all change management initiatives. In addition, regular channels for communicating to staff, the union executive and to community partners need to be developed collaboratively to ensure an open and transparent environment is both created and modelled.

Outcomes/Deliverables	Priority 1,2,3	Diversity, Equity and Inclusion	Stakeholders (RASCI)
CM # 1: Change Management Strategy and Plan			
The Society has adopted a clear change management framework for each significant initiative that identifies the change being made, organizational readiness, rationale, timeframes, accountabilities, supports and resources, and metrics.	1	<p>Ensure that change management framework includes a variety of learning opportunities/methods to support different learning styles/strengths.</p> <p>Select a change management framework that supports the inclusion of diverse voices.</p>	<p>Accountable: CEO Consulted: Staff; Union; Internal Employee Committees/Resource Groups; Community Partners; Board of Directors</p>
Resources are in place to support the review, prioritization, and coordination of all current and new initiatives in the organization.	1	Application of diversity, equity and inclusion lenses required when establishing agency priorities.	<p>Accountable: CEO Consulted: Staff; Union; Internal Employee Committees/Resource Groups; Resource Parents</p>
CM #2: Communications Plan			
<p>The Society's communication plan is foundationally built on engagement of internal staff and external stakeholders. The Communication Plan reflects commitment to transparent, open, and structured communications aligned with the agency Strategic Plan and sector priorities. Communication planning is incorporated into all change management initiatives, projects and decision making.</p> <ul style="list-style-type: none"> A map of communication plan is developed so as to ensure and improve two-way communication with staff, Union Executive, service partners, other external stakeholder groups using effective and diverse mediums, venues and channels that have been collaboratively identified. 	1	Community engagement strategy in collaboration with Diversity, Equity and Inclusion and Service Delivery Model.	<p>Accountable: CEO Consulted: Diversity, Equity and Inclusion team; Staff; Union; Volunteers; Resource Parents; Community Partners; Media</p>

MINISTRY REVIEW OF COMPLIANCE AND SERVICE DELIVERY ISSUES

Intake and Assessment

S #1: The Society should review its policies, processes, and practices to ensure it completes record checks in accordance with the ministry Fast Track Policy Directive and that it ceases any practice of requesting that staff complete record checks in the absence of child protection referrals. The Society should also follow up with any incidents where staff completed record checks in the absence of child protection referrals and ensure that it has complied with the requirements in Part X including those for addressing unauthorized collection, use or disclosure of personal information under section 308 of the CYFSA.

S #2: The ministry recommends that the Society review a larger sample of investigations completed with no further protection concerns related to referrals that are coded as child exposure to partner violence to determine if a less intrusive approach could be used to mitigate risk.

S #3: The ministry recommends that the Society review and assess the *York Region Violence Against Women Collaborative Response Protocol* (the "Protocol") to guide decision-making with respect to child exposure to partner violence and reach out to its community VAW service providers to assess how well the CAS/VAW Collaboration Agreement is working in York Region with a view to enhancing communication, collaboration and coordination of services with these organizations.

S #4: The ministry recommends the Society aim to complete investigations transferring to ongoing family services within legislated timelines and where not possible, provide a documented rationale for departing from this requirement.

Outcomes/Deliverables	Priority 1,2,3	Diversity, Equity and Inclusion	Stakeholders (RASCI)
The Society will address and implement all recommendations relating to Intake and Assessment in the File Review of 2020.	2	<p>Ensure equitable and inclusive practices are evident in policies, procedures and processes.</p> <p>Review of history arising from record checks must incorporate a DEI lens; create tools to support identification of possible bias.</p> <p>Criteria for file reviews to include measures to assess for possible bias in decision making.</p>	<p>Accountable: Director of Service</p> <p>Consulted: Staff; Union; Community Stakeholders</p>

Ongoing Family Services

S #5: The ministry recommends that the Society review a larger sample of ongoing family service files to determine if the current supervision approach aligns with the Society's service delivery model and includes a clinical assessment of the family's progress to addressing risk and safety factors.

S #6: The ministry recommends that supervisors ensure that all case closure documentation complies with Child Protection Standard #8 prior to approving a case for closure.

Outcomes/Deliverables	Priority 1,2,3	Diversity, Equity and Inclusion	Stakeholders (RASCI)
The Society will address and implement all recommendations relating to Ongoing Family Services in the File Review of 2020.	2	<p>Ensure equitable and inclusive practices are evident in policies, procedures and processes.</p> <p>To engage in practice that is equitable and inclusive, critical self-reflection and self-reflexivity are identified as a core learning area for all staff and is embedded in the supervision framework.</p> <p>Criteria for file reviews to include measures to assess for possible bias in decision-making.</p> <p>Diversity, equity and inclusion lenses must be embedded in all mechanisms/supports available to resource families; possible biases to be identified and challenged in a constructive and safe manner to promote learning.</p>	<p>Accountable: Director of Service</p> <p>Consulted: Staff; Union</p>

Child in Care Services

S #7: The ministry recommends that the Society complete a review of child-in-care files across a larger sample of files to ensure that risk and safety factors are appropriately addressed prior to returning children and youth home.

S #8: The ministry recommends that the Society review its internal decision-making processes as well as roles and responsibilities of staff at all levels of the organization to address concerns related to both admitting and discharging children from care, and to ensure decisions are made in the best interests of the child, including taking into account the child's wishes.

S #9: The ministry recommends that the Society put policies and procedures in place to address foster parent concerns and complaints related to child-in-care services and put processes in place to enhance relationships with foster parents.

Outcomes/Deliverables	Priority 1,2,3	Diversity, Equity and Inclusion	Stakeholders (RASCI)
The Society will address and implement all recommendations relating to Child in Care Services in the File Review of 2020.	2	<p>Ensure equitable and inclusive practices are evident in policies, procedures and processes.</p> <p>Diversity, Equity and Inclusion lens must be embedded in all mechanisms/supports available to resource families; possible biases to be identified and challenged in a constructive and safe manner to promote learning.</p> <p>Criteria for file reviews to include measures to assess for possible bias in decision-making.</p>	<p>Accountable: Director of Service</p> <p>Consulted: Staff; Union; Internal Employee Committees/Resource Groups; Foster Parent Association; Resource Parents; Community Stakeholders</p>

Adoption Services

S #10: The ministry recommends that senior management work with adoption staff to develop guidelines and clear expectations for completing adoption finalization documentation.

S #11: The ministry recommends that senior management work with adoption staff to better understand the reasons for the delays in finalizing adoptions and develop strategies to finalize adoptions in a timelier way.

Outcomes/Deliverables	Priority 1,2,3	Diversity, Equity and Inclusion	Stakeholders (RASCI)
The Society will address and implement all recommendations relating to Adoption Services in the File Review of 2020.	2	<p>Ensure equitable and inclusive practices are evident in policies, procedures and processes.</p> <p>Criteria for file reviews to include measures to assess for possible bias in decision-making.</p>	<p>Accountable: Director of Service</p> <p>Consulted: Staff; Union; Foster Parent Association; Resource Parents; Adoptive Parents; MCCSS</p>