

## Operational Review Workplan Final Update September 30, 2023-April 1, 2024

**Definitions**

**On Schedule/In Progress:** Actions are underway to achieve the recommendations/requirement.

**Completed:** Completed and communicated.

**Completed – Ongoing:** Significant actions have been completed to meet the requirement; the organization is committed to ongoing attention to the issue to ensure desired impacts are achieved.

	# of Deliverables arising from Recommendations	On Schedule/ In Progress	Completed	Completed – Ongoing	% Completed + Completed – Ongoing by Category
<b>Leadership</b>	5	0	4	1	100%
<b>Diversity, Equity, Inclusion</b>	6	0	6	0	100%
<b>Human Resources</b>	10	1	8	1	90%
<b>Culture</b>	2	0	2	0	100%
<b>Governance</b>	2	0	2	0	100%
<b>Change Management</b>	2	0	2	0	100%
<b>Communication</b>	1	0	1	0	100%
<b>Services</b>	15	1	14	0	93%
<b>Totals</b>	<b>43</b>	<b>5%</b>	<b>90%</b>	<b>5%</b>	
		<b>5%</b>	<b>95%</b>		

Priority 1	To be initiated by September 30, 2021
Priority 2	To be initiated by March 31, 2022(Year One)
Priority 3	To be initiated by March 31, 2023(Year Two)

RECOMMENDATION	OUTCOME/DELIVERABLE	PRIORITY	STATUS	KEY ACHIEVEMENTS	CHALLENGES	MEASURES
<b>LEADERSHIP</b>						
Develop, communicate and implement a clear set of leadership principles, values and competencies for leadership at the society consistent with the	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	2	Completed- Ongoing	<ul style="list-style-type: none"> <li>- Fall 2023, Advanced Training in Signs of Safety (SofS) for all service leaders in the organization.</li> <li>- SofS Group Supervision process developed to support capacity building for service supervisors in the area of DEI.</li> <li>- Winter 2024, CEO engaged full management team in discussions focused on Leadership Alignment</li> </ul>		

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established values of YRCAS.	Region CAS Leadership Competency Framework.					
Develop clear direction, tangible strategy and goals for the organization, communicate and implement these across the organization.	The Society has an updated Strategic Plan effective in 2021 that sets the direction and priorities for the organization.	3	Completed	<ul style="list-style-type: none"> <li>- Jun 2023, YRCAS Strategic Plan launched.</li> <li>- Jan 2024, Child-Friendly Version of Strategic Plan introduced and shared internally and with our YR community.</li> <li>- Fall 2023, Departmental Plans developed in alignment with YRCAS Strategic Plan</li> <li>- May 2024, Child, Youth and Family Wellbeing Department Planning Day scheduled to review Departmental Plan</li> </ul>		
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.	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	Completed	<ul style="list-style-type: none"> <li>- Jun 2023, YRCAS Strategic Plan launched identifying a renewed set of Guiding Values</li> <li>- Sep 2023, Signs of Safety launched as a whole system approach to service; all staff received training with plans to provide training to new/returning staff in 2024</li> </ul>	Re-building trusting relationships at all levels of the organization requires an openness to share, listen, plan and act.	
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.	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	Completed	<ul style="list-style-type: none"> <li>- 2023/24, focused discussions with all staff in various forums - <i>Breaking the Hierarchy, Leading from Where You Are At</i></li> <li>- <i>Approval delegations and processes have been reviewed and updated in agency policies and practices.</i></li> </ul>		
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.	Staff feedback and consultation processes are established to create a safe environment where staff input is sought, valued, and implemented.	2	Completed	<ul style="list-style-type: none"> <li>- Arising from staff feedback, All Staff Meetings moved to monthly and extended with an updated format commencing in January 2024</li> <li>- Policies with broad impact, posted for 1<sup>st</sup> and 2<sup>nd</sup> readings to elicit staff input and feedback.</li> </ul>		<ul style="list-style-type: none"> <li>Call for Participation process initiated for 3 new opportunities within the organization.</li> <li>- Community Relations and Advocacy Department Project Team</li> <li>- Learning &amp; Development Committee</li> <li>- Employee Resource Group</li> </ul>

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						- In House Trainer – Understanding and Managing Aggressive Behavior
<b>DIVERSITY, EQUITY AND INCLUSION</b>						
The organization at every level will develop and maintain processes that support fair treatment, access, opportunity, and advancement for all people.	Organizational processes are fair and equitable in the treatment of: <ul style="list-style-type: none"> <li>all staff;</li> <li>service users;</li> <li>community partners.</li> </ul> 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.	1	Completed	<ul style="list-style-type: none"> <li>DEI Team provides ongoing consultation and active review of all policies, processes and practices using an anti-Racism, anti-Black, anti-Indigenous, and SOGIE and equity lens to support integration into all aspects and practices within the organization.</li> <li>Ongoing - intentional focus on ensuring that use of Signs of Safety is grounded in equity</li> <li>Feb 2024, first In-Person Black History Event hosted at YRCAS</li> </ul>		
	The organizational Diversity, Equity and Inclusion plan includes all aspects of the organization; from Board governance to operations.	1	Completed	<ul style="list-style-type: none"> <li>Fall 2023 - Sidekick Consulting presented vision for the new Equity, Community Relations and Advocacy Department</li> <li>Jan 2024, Recruitment initiated for Director of Equity, Community Relations, and Advocacy Department</li> </ul>		
	The Society has integrated the One Vision, One Voice Race Equity Practices.	1	Completed	<ul style="list-style-type: none"> <li>DEI Team and Employee Resource Groups active in the agency, supporting awareness and integration of OVOV Race Equity Practices.</li> <li>DEI Practice Integration Specialist reports on YRCAS activities and progress in honoring and integrating OVOV.</li> </ul>		
	The Society has integrated the Truth and Reconciliation commitments with respect to child welfare as well as the 9 Indigenous Commitments.	1	Completed	<ul style="list-style-type: none"> <li>Honouring Indigenous Commitments Committee provides leadership within YRCAS supporting integration of TRC recommendations and 9 Indigenous Commitments.</li> <li>Feb 2024, hosted Cultural Sensitivity Training with Tungasuvvingat Inuit Toronto</li> </ul>		
	The Society has integrated the 2SLGBTQ+ provincial recommendations and practices.	1	Completed	<ul style="list-style-type: none"> <li>Pride at Work Council provides leadership in this area.</li> <li>A member of the Youth Advisory Council is on the agency's Pride at Work Council.</li> </ul>		

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				<ul style="list-style-type: none"> <li>- Youth from YRCAS attend Camp Lifting Leaves each year.</li> <li>- Plan of Care incorporates identity-based information in relation to SOGIE to support a youth's unique identity.</li> <li>- 2SLGBTQ+ home study questions are incorporating into their assessments of foster/kin/adoptive applicants</li> </ul>		
The Board governance and work environment will be one where all individuals and groups are welcomed, respected, supported, and valued.	Society's work environment is safe, welcoming, respectful, and supportive. The Society's consultation and decision-making framework includes comprehensive feedback mechanisms.	1	Completed			
<b>HUMAN RESOURCES</b>						
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.	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.	1	Completed	<ul style="list-style-type: none"> <li>- People and Culture Dashboards are developed with key indicators including regarding recruitment, hiring, turnover and retention rates, absenteeism, dispute resolution, participation in wellness initiatives etc.</li> <li>- Mar 2024, HR/DEI training session addressing unconscious bias in recruitment and hiring</li> </ul>		
	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.	1	Completed			
Develop and implement a wellness framework, the purpose of which is to support staff and reduce work-related stress and burnout.	The Society's HR Framework includes a wellness strategy that is resourced to prioritize wellness promotion, prevention, and intervention for all staff.	3	Completed	<ul style="list-style-type: none"> <li>- YRCAS Employee Wellness Strategy embedded in HR Framework</li> <li>- Monthly virtual wellness seminars hosted by Homewood Health</li> <li>- May 10, 2024, YRCAS Annual Wellness Day scheduled on site at agency office</li> </ul>		<ul style="list-style-type: none"> <li>- Effective Apr 1, 2023, New EAP provider (Homewood Health) provides increased opportunities for alternative care providers and culturally sensitive services.</li> <li>- Effective May 23, 2023, transition to Acclaim Ability Management Inc to support third-party short-term disability claims adjudication and case management, medically related workplace</li> </ul>

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						accommodation requests and workplace ergonomic assessments.  <u>Q3 – Sep-Dec 2023</u> EAP Usage: 5.09% Wellness Participation: 92%
Establish clear hiring processes that are fair, open, and free of bias or favouritism.	The Society has equitable recruitment, hiring and promotion practices that are transparent and clear.	1	Completed			
Develop and implement a competency-based performance management system.	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	Completed	<ul style="list-style-type: none"> <li>- Employee Success Maps to be utilized as 'living documents' to support learning, development, and employee success.</li> </ul>		
Develop a process for assessing workload for all areas of the organization and a process through which identified workload issues can be addressed.	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.	1	Completed	<ul style="list-style-type: none"> <li>- Workload Assessment Project completed; recommendations shared with all staff. Ongoing oversight by Joint Job Evaluation Committee.</li> </ul>		
Develop and implement a training and development plan for the organization that ensures increasing competency for all staff.	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.	3	On Schedule	<ul style="list-style-type: none"> <li>- Fall 2023 Learning and Development (L&amp;D) Committee established to support enhancement of a learning and development plan for all roles in organization.</li> <li>- December 2023, various Learning Management Systems (LMS) reviewed; ADP LMS selected as the most cost-effective option with plans to engage in a 6-month free trial commencing in Q1 2024/25</li> <li>- In alignment with our Strategic Plan and strategic direction to "support an inclusive culture, effective training, and infrastructure to create well-being for our staff and those we serve", staffing resources are in place to develop and roll out an L&amp;D Strategy. The strategy will be developed in consultation with agency staff inclusive of policies, an orientation program, learning and career pathways to</li> </ul>		

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				enhance cultural and leadership competencies and succession planning, 'knowledge to practice' plans, a learning management system (LMS) and a record keeping system by 31Mar2025.		
	All staff have opportunities to access additional learning opportunities to further their development.	3	Completed	<ul style="list-style-type: none"> <li>- Multiple learning opportunities available via OACAS, Chai and Chats, Legal Clinics, Guest Speakers/Community Partnerships</li> <li>- Signs of Safety Foundational Training – all staff (Sep/Oct); Advanced Training for Leadership Team (Oct/Nov)</li> <li>- Train the Trainer opportunities for staff to support facilitation of OACAS curricula and worker safety training (UMAB).</li> <li>- 2023/24, Child Welfare Immigration Centre of Excellence (CWICE) training available for all staff</li> <li>- Opportunities for Conference attendance focused on issues of relevance.</li> <li>- ADP Learning Management System (LMS) to be piloted in spring 2024.</li> <li>- 12 staff responded to the call for UMAB Train the Trainer course.</li> </ul>		<p>Sep/Oct 2023, 248 staff completed SofS Foundations Training (2 days)</p> <p>2023/24, 5 staff completing OACAS Train the Trainer onboarding process to facilitate delivery of authorization training to child welfare professionals bringing number of the agency's CWP Trainers to 7.</p> <p>Apr 2024, 12 staff (management and front-line service) registered to participate in UMAB Train the Trainer course.</p> <p>2023/24, 130 staff completed introductory immigration training with CWICE (2 days)</p>
Ensure that there are meaningful and effective complaint processes available to all staff.	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.	1	Completed	<ul style="list-style-type: none"> <li>- Consultation and Decision-Making Framework to support employee complaint resolution and restoration available.</li> <li>- The Neighborhood Group (TNG) contracted to provide early resolution through facilitated conversations and mediated initiatives towards holistic resolution.</li> <li>- Relationship with a 3<sup>rd</sup> Party Investigator firmly rooted with lived experience established to support the achievement of an objective and equitable complaint resolution process when necessary.</li> </ul>		
Conduct a full review of all other HR functions, including leaves, accommodations, and return to work processes,	The Society's Human Resource policies, procedures and processes are aligned with legislated requirements and reflect the organization's values/priorities	3	Completed - Ongoing	<ul style="list-style-type: none"> <li>- July 2023, the following P&amp;C (formerly HR) Policies posted for 1<sup>st</sup> and/or 2<sup>nd</sup> reading:</li> <li>- <i>The following key policies have been developed and/or updated:</i> <ul style="list-style-type: none"> <li>- Employee Code of Conduct</li> </ul> </li> </ul>	Policy review requires focused attention and broad consultation with agency staff to ensure that policies and procedures are equitable and	

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ensuring that policies, procedures and practices are equitable and consistent with Diversity, Equity and Inclusion principles.	including diversity, equity, and inclusion.			<ul style="list-style-type: none"> <li>- Fair Employment Opportunity</li> <li>- Recruitment and Selection</li> <li>- Employee Resource Groups</li> <li>- Right to Disconnect</li> <li>- Harassment Discrimination and Workplace Violence Policy</li> <li>- Discrimination and Harassment by Service User, Community Service Provider or Vendor</li> </ul>	consistent with legislation, DEI principles, and best practice.	
<b>CULTURE</b>						
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.	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.	1	Completed	<ul style="list-style-type: none"> <li>- 2023/24, The Neighborhood Group (TNG) contracted to provide healing sessions with groups of staff through facilitated conversations towards holistic resolution of issues.</li> <li>- 8 formal and 2 informal Employee Resource Groups are in place that are sponsored and supported by the DEI Team</li> </ul>		
Establish and implement a permanent process for auditing the health of the organization.	The Society has implemented a system to measure the health of the organization on a permanent and ongoing basis, the results of which are shared with the Board, Ministry, all staff, resource parents, volunteers, identified external partners, and publicly posted.	3	Completed	<ul style="list-style-type: none"> <li>- Fall 2021, Staff Healing and Restoration Survey launched (Gessesse Consulting and FSK &amp; Associates)</li> <li>- Fall 2022, Staff Awareness Survey launched (Loft Consulting)</li> <li>- Feb 2024, Loft Consulting hosted focus groups to support development of Staff Engagement Survey to be launched early in Q1 2024/25.</li> </ul>		
Develop and incorporate a staff issue resolution process whereby issues can be raised and resolved at the lowest level in the Society without fear.	See HR Recommendation: Ensure that there are meaningful and effective complaint processes available to all staff.					
<b>GOVERNANCE</b>						
The Board conduct a full review of its governance structures to ensure these structures are designed to properly hold senior staff	The Board holds senior staff accountable to the strategic plan.	1	Completed	<ul style="list-style-type: none"> <li>- June 2023 NEW Strategic Plan launched.</li> <li>- Aug 2023 – Board established a list of Key Performance Indicators (KPIs) that require review by the various Board Committees <ul style="list-style-type: none"> <li>- CEO Self Assessment is complete.</li> </ul> </li> </ul>		

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accountable to the strategic plan of the Society.				- CEO 360 Assessment is underway with target for results early May 2024.		
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.	The board has a robust feedback strategy and monitors all aspects of organizational health.	1	Completed	- CEO accountable to provide monthly CEO Report to Board for review. Report contains information and metrics related to Child and Family Wellbeing, Community Relations, Communications, DEI, Culture Transformation, Wellness, and a Financial Forecast. Report shared with staff.		
<b>CHANGE MANAGEMENT/COMMUNICATIONS</b>						
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.	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	Completed	- Signs of Safety Change Management Lead in place to support whole system implementation of Signs of Safety with equity focus.		
	Resources are in place to support the review, prioritization, and coordination of all current and new initiatives in the organization.	1	Completed			
A transparent, open and structured communications plan needs to be developed, and communications needs 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.	The Society's communication plan is foundationally built on the 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.	1	Completed	<ul style="list-style-type: none"> <li>- Communication Memos shared via email provide updates on emerging issues and opportunities.</li> <li>- Monthly All Staff Meetings hosted by various staff groups/teams in organization.</li> <li>- Internal Newsletter (Buzz) produced biweekly.</li> <li>- External Newsletter (Pulse) produced quarterly.</li> <li>- Winter 2024, Media engaged to support key messaging regarding the need for foster families.</li> <li>- Feb 2024, Communications Survey launched to solicit feedback on communications strategy</li> </ul>	Communications Plan/Community Relations Plan developed and reviewed monthly to ensure alignment with organizational restructuring/strategic plan development.	



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<b>SERVICE: INTAKE AND ASSESSMENT</b>						
Review policies, processes, and practices to ensure compliance with ministry Fast Track Policy Directive; cease any practice of requesting that staff complete record checks in the absence of child protection referrals; review all instances where record checks were completed in the absence of child protection referrals and ensure compliance with Part X	The society demonstrates compliance with the Ministry's Fast Track/CPIN Policy Directive.	2	Completed			
	Policies, processes and practices are in place to ensure that record checks are completed in accordance with the Ministry's Fast Track/CPIN Policy Directive.	2	Completed	<ul style="list-style-type: none"> <li>- Target Date for policy completion/attestation – April 2024</li> <li>- Apr 2024 – YRCAS Record Check Policy completed and submitted for posting/attestation via Policy Tech</li> </ul>		Practices and processes are in place to ensure record checks are completed in accordance with the Ministry Directive.
	The society is in compliance with Part X including those for addressing unauthorized collection, use or disclosure of personal information under section 308 of the CYFSA.	2	Completed			
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.	The society has conducted a review of investigations completed with no further protection concerns related to referrals that are coded as child exposure to partner violence to determine whether a less intrusive approach could be used to mitigate risk going forward.	2	Completed			
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; reach out to 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	The society has implemented a less intrusive approach to assess risk in cases of DV where such an approach is supported by evidence-based practice/VAW sector; Society staff actively engage in safety planning when domestic violence may be a concern; the society has active, collaborative partnerships with the region's VAW service providers; Collaborative Response Protocol is current and guides decision making with respect to child exposure to partner violence	2	Completed	<ul style="list-style-type: none"> <li>- Internal IPV Committee continues to review best practices and build community collaborations through review of case situations, as required.</li> <li>- IPV Team working in collaboration with York Region Centre for Community Safety (the HUB); all staff trained and certified in Danger Assessments</li> <li>- Partnership in place with Yellow Brick House to provide dedicated VAW service to families involved with YRCAS.</li> </ul>		

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coordination of services with these organizations.						
Complete investigations transferring to ongoing family services within legislated timelines and where not possible, provide a documented rationale for departing from this requirement.	When legislated timelines for transferring cases to ongoing family services cannot be met, supervisory approved departures from Child Protection Standards will be documented in contact logs, with rationale for the departure captured.	2	Completed	- Jun 2023 - Due Date Tracking Dashboards implemented to support compliance with child protection standards.		
<b>SERVICE: ONGOING FAMILY SERVICES</b>						
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.	The society's Supervision Framework supports caseworkers to embed the service delivery model into practice.	2	On Schedule	<ul style="list-style-type: none"> <li>- September 2023, <i>Signs of Safety</i> Launch</li> <li>- 2024/25, Supervision Framework to be reviewed/amended to support organizational alignment with SofS as our service delivery model and commitment to embedding equity into the approach.</li> <li>- In alignment with our Strategic Plan and strategic direction to "support an inclusive culture, effective training, and infrastructure to create well-being for our staff and those we serve", we have identified the review of our Supervision Framework as necessary to meet our Operational Plan objective of empowering and supporting independent decision making at all levels. A review of our existing Supervision Framework, to be completed by December 2024, will be led by an internal Project Team of both management and non-management staff, ensuring its alignment with DEI and SofS Frameworks.</li> </ul>		
	The society has conducted a review of ongoing family service files to determine if the current supervision approach aligns with the society's Supervision Framework and service delivery model and includes a clinical assessment of the family's	2	Completed			-

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	progress to date in mitigating identified risk and safety factors.					
Supervisors to ensure that all case closure documentation complies with Child Protection Standard #8 prior to approving a case for closure.	Case closure documentation complies with Child Protection Standards noting no recent occurrences of child abuse/maltreatment, no evidence of current or imminent safety threats and a risk reassessment that confirms risks have been reduced or no longer exist. Closing documentation also captures evidence of specific and measurable behavioral improvements in the areas identified in the family's service plan and their ability to access and utilize resources for assistance.	2	Completed	-		
<b>SERVICE: CHILD IN CARE SERVICES</b>						
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.	The society has a robust conferencing and consultation model available to promote collaborative case planning, learning and implementation of best practices.	2	Completed	- September 2023, <i>Signs of Safety</i> Launch	Conferencing mechanisms are in place. Signs of Safety implementation will build further capacity for group supervision and case conferencing that is inclusive of the voice of the child, youth, family and community	-
Review 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.	The society has clear, documented policies, guidelines and processes, aligned with legislation and Child Protection Standards, related to the roles and responsibilities and decision-making pertaining to the admission and discharging of children to/from care	2	Completed		Organizational realignment (Feb 2023) created a need for further review of policies to accurately reflect procedural roles and responsibilities.	
Establish policies and procedures to address foster parent concerns and complaints related to child-	Resource parents have mechanisms available to raise concerns and complaints related to child in care services.	2	Completed			

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in-care services; establish processes to enhance relationships with foster parents.	The society has processes in place that seek to enhance relationships between agency staff and resource parents.	2	Completed			
<b>SERVICE: ADOPTION SERVICES</b>						
Agency to develop guidelines and clear expectations for completing adoption finalization documentation.	The society has a fulsome understanding of all of the documentation requirements, guidelines and expectations to finalize adoption and has instituted processes that have been communicated and supported through documentation reviews throughout the child/youth's period of time in care to support finalizations of adoptions in a timely way.	2	Completed	- Apr 2024, <i>Admission to Care to Permanency Process Map</i> finalized, shared and posted. Process map is a guide that has been aligned with QSF Regulations, supporting completion of actions aimed to ensure timely adoption finalizations, as applicable.		
Agency to better understand the reasons for the delays in finalizing adoptions and develop strategies to finalize adoptions in a timelier way.	Review agency policy to ensure that it aligns with legislation, regulations, and MCCSS guidelines and expectations regarding documentation	2	Completed	- November 2023, <i>Documentation to Finalize Adoption Policy</i> has been updated and available to all staff via Policy Tech		