



S-001 Services for Children in Care

Policies and Procedures Manual

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Admission and placement of a child

1.1 Admission, placement and termination of placement of a child

Policy

Definition: A child means a person younger than 18.

Valoris applies the Child, Youth and Family Services Act, 2017 (CYFSA), whose purpose is to promote the best interests, protection and well-being of children, and to offer services to families that need help caring for their children. Removing a child from its home to put it in a place of safety is a last resort. When making a placement, Valoris' ultimate goal is to reunite a child with its family.

First Nations, Inuit or Métis (FNIM) children, section to follow: customary care – see [hyperlink in the annex](#).

Unless restrictions have been imposed by the courts or there is a risk to the child, Valoris must strive to maintain the link between the child and its family by organizing regular contact between them. The parent or legal guardian must be encouraged to attend school meetings and medical appointments involving the child.

When a child is in Valoris' care, every possibility for placing the child with kin must be explored. If placement with a relative is not possible, Valoris must make the best match for the child with a foster family or another residential resource where the child's identity and cultural characteristics can be maintained. Placement in a family setting will always be the first choice.

Valoris looks after and supports children in its care until they reach adult age. Only the family court can terminate the placement of a child in care, unless there is a temporary care agreement.

The local Director may approve an arrangement other than one provided under the CYFSA, and a written record of that approval must be included in the child's file in CPIN under the contacts log. That record will be available for review by an inspector in our offices.

The clinical team may decide to terminate a placement if it is determined that the risk to the child has been sufficiently reduced and that such a decision is in the child's best interests. A placement termination may be ordered by the family court. In the case of a temporary care agreement, either party may decide to terminate it.

Procedures

Emergency placement

In an emergency situation, a child may be placed with an admission foster family or another designated resource until a foster family or kin can be found. If the emergency placement happens outside of normal business hours, the 24/7 advisor will turn to the network of available foster families or a kin that is deemed to be safe. When a placement is made by the 24/7, the advisor in charge of the placement will notify the advisor and the supervisor in charge of the case, as well as the placement coordinator. The latter is responsible for updating the list of foster families on a weekly basis.

When a child has been taken to a place of safety, the advisor must immediately notify Valoris legal services to plan the court hearing, which must take place within five days after the placement. A place of safety is defined in CYFSA 74(4) as follows:

“For the purposes of the definition of “place of safety” in subsection (1), a person’s home is a place of safety for a child if,

- a) the person is a relative of the child or a member of the child’s extended family or community; and
- b) a society or, in the case of a First Nations, Inuk or Métis child, a society and family service authority, has conducted an assessment of the person’s home in accordance with the prescribed procedures and is satisfied that the person is willing and able to provide a safe home environment for the child.”

Selecting a foster family

As soon as the decision to place a child has been made and approved by the supervisor, and there is no possibility of placing the child with kin, the assigned advisor must contact the person responsible for the placement and provide all of the particulars about the child. The advisor must fill out a Preliminary Assessment Placement Request (PAPR) under the Child Protection Information Network (CPIN). Every field in the PAPR must be filled out in as much detail as possible.

The advisor may be asked to appear before the placement committee chaired by the person in charge of placements. It is always best if the child can be placed in its own community and remain in its school.

The assigned advisor must provide to the identified foster parent all of the available pertinent information about the child so that they can make an informed decision.

Choice of placement

Before recommending a foster family, the assigned advisor must:

- consult with the advisor or supervisor for the foster family;
- consult with the advisor or supervisor overseeing the placement of any other child in that foster family; and

- take into account the child’s identity and cultural characteristics.

Choice of another type of residential resource or an external resource (last resort)

The clinical team in charge of the child in question must initiate a request for external placement if it has exhausted all options within Valoris’ foster family network. The team must call a case conference to demonstrate that it has made every effort to identify a foster family or to offer support to a family that could welcome the child.

The Director of Services must approve the decision to place a child with an external resource approved by the Ministry, as well as the per diem requested by the resource.

The supervisor in charge must prepare a service agreement between the agency and the resource. That agreement is to specify the per diem requested, the care to be provided to the child and the expected length of the placement. The person in charge of paying allowances must be notified of the placement.

The same placement procedure must be followed as for a placement with a foster family.

A child’s external placement must be regularly reviewed. Efforts to place the child with a family in its original community must start as soon as possible.

Valoris must check the annual evaluations of external resources.

Mandatory placement

The child’s advisor must contact the foster parent to plan the child’s pre-placement and placement. Prior to the placement, the advisor must accompany the child on one or more visits to the chosen foster family. The child will get to meet and talk to the members of the foster family, and visit the house and its room. Whenever possible, the advisor can encourage the child’s parent or legal guardian, or current foster parent, to join in the visit.

After the placement visit(s), the advisor will talk to the child one-on-one about the latter’s impressions and/or concerns.

The advisor must give the child as much information as possible about the foster family where it will be placed before the child’s first visit.

Steps following admission

At the time of admission, the child’s advisor must:

- accompany the child to its placement and invite the parent or legal guardian or resource person to accompany it if the foster parent is in agreement and that this does not put the child or the foster family at risk;
- let the child know that it can pick a resource person who will help the advisor take its identity and cultural characteristics into account in key decisions;
- collect information about the child’s identity characteristics;

- bring the child's personal effects and important items: stuffed animal, photos, bicycle, clothes, etc.
- ask the foster parent to prepare an inventory of the child's clothes and personal effects, and prepare a list of required clothes and other things;
- if applicable, authorize up to \$250 for an initial purchase of clothing;
- inform the foster parent about the child's routine, fears, habits and allergies, ways used to comfort the child, etc.
- review the house rules with the child and the foster family;
- provide a copy of the rights and responsibilities manual to the child and its foster parent, and go over it with them;
- review the complaints procedure, as well as the investigation procedure in response to allegations of mistreatment, with the foster parent and the child;
- develop a support plan with the foster parent;
- give the child's health card to the foster parent;
- if the child takes medication, give it to the foster parent and provide the latter with the medication information sheet, dosage and any side-effects;
- enter a copy of all of the information in the child's case and file in CPIN;
- arrange for the child's medical examination as soon as reasonably possible;
- in collaboration with the foster parent, arrange for any other medical, dental or other appointment, if necessary;
- inform the child of what it should do if the fire alarm goes off or if a fire breaks out, including the child's role and responsibilities;
- arrange the seven-day private visit (PV-7) with the child and foster parent;
- arrange a visit between the child and its parent or legal guardian as soon as possible; and
- enter the placement in CPIN and document the placement visit in the child's case and foster family's files.

Within seventy-two (72) hours after the child's admission in a residential placement, the advisor must obtain the following information:

- the child's health card number;
- the child's date of birth and current size and weight;
- the names of any medication the child takes, along with the dose, frequency, duration and purpose;
- the child's medical history, including medical and psychological assessments, as well as the child's medication history;
- any particular monitoring instructions and/or procedures (e.g. blood testing);
- allergies;
- the name and phone number of the doctor and other health care practitioners involved in the child's treatment; and
- the record of past behavioural, emotional and physical reactions to medications or other medical treatments.

If any of the above information cannot be obtained, an explanation must be entered in the child's or youth's file.

Within seven (7) days after the placement, the advisor must:

- have a private visit with the child;
- let the child know that it can identify a resource person (if not already done) who will help the advisor take its identity and cultural characteristics into account in key decisions;
- keep collecting information on the child's identity characteristics;
- let the child know about Valoris' obligation to respect its identity characteristics (also let the foster parent know);
- have a visit with the foster parent;
- notify the school that the child is now in the care of Valoris, particularly if the child cannot return to the same school;
- arrange for the child's return to its school or admission to a new school, with the consent of the parent or legal guardian consent when necessary;
- discuss with the foster parent how often the advisor will visit;
- discuss with the foster parent any other agency services that could help the child and arrange for referrals to those services;
- arrange a meeting between the staff in those services and the fosterparent;
- discuss other needs that the child may have, such as school supplies, sports equipment, recreational activities, community and extra-curricular activities, religious activities, etc.; and
- create a contacts log in the child's and foster parent's respective files to document the visit.

Within thirty (30) days after the placement, the advisor must:

- arrange the private visit with the child and the foster parent;
- review the rights and responsibilities manual with the child and its fosterparent;
- fill out the admission plan of care in collaboration with the parent or legal guardian, the foster parent and the child, and give them a copy;
- ask the foster parent to start a life story album for the child;
- start preparing a document on the child's social history, which must be completed within sixty(60) days after the placement;
- make sure that the child has all of its ID cards, including its health card, social insurance number and birth certificate; and
- obtain the child's vaccination booklet from its parent or legal guardian or the health unit, and update its vaccination if necessary.

Relocation request from the child or the foster family

An employee must meet with the child and its foster parent within a reasonable time to follow up on a relocation request from either the child or its foster family. The advisor must notify the supervisor when a relocation request has been made. Every effort must be made to avoid relocating a child who is in foster care. Different options and solutions should be weighed, including home support, compromises and/or mediation, in order to avoid a failed placement. Depending on the child's age and development, it must be consulted and involved in the decision and any preparations for such a relocation. The advisor must document the different steps.

Barring any serious personal circumstances, the foster parent must provide 30 days' written notice when requesting a child's relocation. This is in order to properly prepare the child for the transition and to identify another foster family.

Relocation of a child in extended society care or adoption

When a child in extended society care has been with a foster parent continuously for two years and Valoris intends to remove it, the foster parent must be given at least ten (10) calendar days' written notice of the intention and their right to request a review. The notice must be sent by registered mail, and must include the date when the child came into extended society care and the date when the child was placed with the foster family.

A foster family may apply to adopt a child in its care once the child becomes eligible for adoption. Following the family's request, Valoris must provide its decision in writing within ten (10) calendar days. The written notice of the decision must be sent by registered mail.

In both cases, Valoris must attach to the written notice a form applying to the Child and Family Services Review Board (CFSRB). The person who receives a notice can, within ten (10) days of receiving it, apply to the Board to review the decision by Valoris or the permit holder if that person disagrees with the decision. That person may also file a complaint directly with Valoris in accordance with the procedure in policy S-105.

Steps following a relocation

With the exception of an admission medical examination and the collection of information on the child's identity characteristics, every step in the section entitled "steps following an admission" must be completed.

Post-placement contact with the child and the foster parent

The child's advisor must meet with the child to discuss its experience during the placement that just terminated. The foster family's advisor must also follow up with the foster family. The information collected will help to gain a better understanding of the child and ensure a better match for a future placement with that same foster family.

Those contacts must be reported in detail in the child's and the foster family's file. If the child and/or foster parent refuse to have this discussion, their refusal must be documented in the intervention notes.

It is important to assess the pertinence of having the child maintain some contact with the previous foster family. Even though the placement did not work out, the connections made could be meaningful for the child.

Non-supervised or supervised contact between the parent or legal guardian and the child

At the earliest opportunity, Valoris will draw up a visit schedule, whether or not supervised, between the child and its parent or legal guardian taking into account the foster family's availability.

Temporary care agreement

A child may be taken into interim society care under an agreement. That agreement must be signed by the parent or legal guardian, by the child if it is over twelve (12) years of age, and by the Valoris advisor. The agreement is valid for a specific duration, and sets out each party's responsibilities.

During the placement, the parent or legal guardian retains all parental rights, and must agree to all medical treatments and decisions concerning the child. This type of agreement is favoured when the child's reunification with its family is the primary goal.

The agreement may be terminated by either party upon notice as specified in the agreement.

When a child is expected to be reunited with its family, the clinical team must decide whether that is possible, taking into account the risk assessment and the child's interests above all else. If not possible, the child's placement in a place of safety must be considered. The child's voice must be heard (Katelynn's principle).

Termination of the placement

Once the decision is made to reunite a child with its biological family, staff make the necessary arrangements by offering supports to the parent or legal guardian and child to enhance the chances of a successful reunification.

The family's advisor is responsible for interventions, if the family's file remains open, as soon as the child is officially reunited with its family.

An application may be made to the court for a status review in order to terminate an order placing the child in extended society care. The application can be submitted by Valoris or by the child, even if Valoris does not support the latter's position. Regardless of Valoris' position, the child must be given the necessary support, including representation by counsel.

If the parent or legal guardian has retained their right of access to their child, a brief breaking-in period can be arranged before proceeding with the legal steps.

A child in extended society care whose parent or legal guardian does not have right of access cannot at any time have contact with its family prior to a reunification effort without the court's reversal of the order.

Steps to follow upon termination of a placement

The child's adviser or another authorized employee must:

- personally accompany the child when it returns to its parent or legal guardian;
- give the child its clothes, personal effects and official documents;
- notify the parent or legal guardian of any scheduled medical or dental appointments;
- talk to the child about its placement experience and check off the box entitled “Post-Placement Evaluation” in CPIN;
- notify the parent or legal guardian of the need to apply to resume the child tax credit;
- close the file on the child in care in CPIN; and
- notify the community partners involved.

Documentation

All correspondence, documents, reports, assessments and consents related to a child must be in CPIN.

2. Services offered to a child in care with Valoris

2.1 Periodic and statutory visits

Policy

Children in care with Valoris must receive periodic visits from their advisor (Valoris employee). That employee assesses their safety, well-being, and how well they are adapting to their placement, and ensures that arrangements are made for their continued care.

Private visits are a good opportunity to assess the child’s well-being and the quality of care it is receiving. Those visits enable the employee to determine any concerns, impressions and needs on the part of the child, as well as that of their foster family.

The child’s advisor must meet privately with the child and its foster family, separately, within seven (7), thirty (30) and ninety (90) days after its placement in the foster family or another residential resource. After that, they must meet at least every ninety (90) days. However, at Valoris, the practice is to visit with the child and its foster family more often, i.e. once a month.

Procedures

During these visits, the advisor must meet with the child or the youth privately and make sure to visit the room where the child sleeps. The advisor must also visit with the foster family. The purpose of these meetings is to give the child or youth and its foster family the opportunity to express their concerns, impressions and needs. The advisor is responsible for ensuring that the placement is going well, and for intervening with the child to help it progress and for ensuring that any additional support that may be required is offered.

Children with communication difficulties

Some children have communication difficulties because of their age or their development, a disability or a developmental disorder. Because they are particularly vulnerable, the advisor must make every possible effort to try to communicate directly with them. The advisor may consult a sign language expert in the case of a child or youth who is deaf or severely hearing impaired.

A child with a serious disability may be unable to communicate. However, the advisor must nonetheless make private visits to observe the child and ensure its well-being and safety.

Documentation

Periodic and statutory visits must be documented in the contacts log, indicating “PV” for “private visit”. This type of contact must be clearly listed to facilitate the identification of these mandatory visits during the Ministry’s review of the child’s files. If a child refuses a private meeting, the advisor must indicate this in the record.

Exemptions

When no meeting has taken place with a child during the prescribed periods, the advisor must notify a supervisor. An exemption note, including the plan, must be added by the supervisor in CPIN. The exemption may only be granted for reasons deemed valid.

Annual interview with Ministry representatives

Ministry staff must annually meet, in private, a certain number of children in placement. Agency staff must collaborate and facilitate these meetings.

2.2 Rights and responsibilities of a child in care

Policy

Children in care, their parent or legal guardian, and their residential resources must be aware of the children’s rights and responsibilities, the complaint procedures and the procedures in the case of allegations of mistreatment in residential resources.

Procedures

A child in care with Valoris has rights and responsibilities. The child and the residential resource must be informed of those at the following times:

- at the time of placement or within 24 hours thereafter;
- 30 days after the placement;
- 3 months after the placement; and
- 6 months after the placement and every 6 months thereafter.

The advisor must ensure that the child has a good understanding of the complaint procedure based on its age, development and particular needs. The procedure is clearly set out in the rights and responsibilities manual. The manual will include, among other things, an explanation of the role of the *Residential Placement Advisory Committee (RPAC)*, and will explain to the child his or her right to contact it.

Prior to the placement or no later than seven (7) days thereafter, the employee must inform the parent or legal guardian of the child's rights and responsibilities during its placement, as well as of the procedure for filing a complaint.

During the placement, the advisor must review with the child, its parent or legal guardian and the resource family the investigation process in response to allegations of mistreatment by the resource family.

Child living in an external resource (group home or foster home)

Even when the child is living in an external resource, the advisor is responsible for reviewing the child's rights and responsibilities at the required intervals.

Child with special needs and child under seven (7) years of age

When a child is unable to understand its rights and responsibilities because it is too young or has a developmental or physical disability, the advisor must review the rights and responsibilities with the residential resource.

Identity characteristics

From the first contact in the initial offer of service process, Valoris must take into account the child's identity characteristics, and continue to do so in all subsequent decisions.

The advisor must inform the child, his or her guardians, and the residential resource of that obligation. If new information about the child's identity characteristics comes to light through the child or his or her guardians, that information must be taken into account and entered in the file.

The advisor must use every possible resource—including consulting the case file, the file of another provider that transferred the child, and the family member who can be contacted through reasonable means, who is aware of the child's placement and would reasonably be expected to have the information sought — to obtain information about the child's identity characteristics.

Training is to be provided to any staff involved in the decision who could have a significant impact on the child's interests and who provides services to Indigenous children on issues related to identity characteristics, regional differences, culture, heritage, traditions, community bonds and the concept of extended family. This training is to be provided no more than 8 months after the employee takes on the pertinent role.

Resource person

A resource person is the individual identified by the child when it is placed and who helps the advisor take into account the child's identity and cultural characteristics in key decisions. The advisor must contact the resource person to inform the latter of the types of decisions that Valoris may have to make about the child that could affect the child's interests. The advisor must make a note of any

information that the resource person wishes to provide. The parent also has the option of choosing a resource person to help with the decision-making and how the information on identity characteristics is to be taken into account in the child's placement.

If the child or its parent or legal guardian indicates that they no longer wish that resource person to be contacted or if a person identified as a resource person refuses to act or continue to act in that capacity, the advisor must stop contacting that resource person and ask the child or its parent or legal guardian to identify another resource person.

Documentation

Every revision of the child's rights and responsibilities with the child and the residential resource must be clearly documented in the child's file in CPIN. The child's identity characteristics and contact information in connection with the resource person must be clearly documented.

Private communications

A child in placement is entitled to have private conversations and meetings with the following people:

- its advisor and other Valoris staff;
- its lawyer;
- a person representing it, including an advisor assigned to it by the Office of Child and Family Service Advocacy;
- the Ombudsman and a member of its staff;
- a member of the Legislative Assembly of Ontario or of the Parliament of Canada; and
- a representative of the Ministry.

Private communications between the child and its lawyer

Out of respect for the privacy of the foster family, the child's advisor must inform the lawyer that the latter must provide forty-eight (48) hours' notice to visit the child. That visit must accommodate the routine and schedule of the child and its foster family.

The foster parent must ensure that the visit between the child and its lawyer is conducted in such a way as to keep their contact confidential. The role of the lawyer during those meetings is to represent the child, not to assess the foster parent or the quality of care that the child is receiving.

Mail

When a foster parent suspects that a child is receiving items that are dangerous or prohibited by law or agency policy, they must immediately contact the child's advisor. The mail can then be opened and inspected, in the child's presence, by the advisor or another representative of the agency.

If the advisor or another agency representative has any concern that the content of the mail may cause the child physical and/or emotional harm, they can examine or read the mail in the child's presence. This process must be well documented in intervention notes.

Mail from the child's lawyer is confidential and may not be read or examined by the advisor or another agency representative or by the foster parent.

Phone calls to and by the child

The foster parent must consider the safety and well-being of the child in placement. If they believe that any mail or phone calls may be harmful to the child, they must discuss it with the child's advisor.

When preparing the child's care plan, the foster parent, the advisor and the child must discuss the conditions for the child's phone calls: length, frequency, timing and supervision. Those conditions must be reasonable and compatible with the foster family's practices.

2.3 Intervention with a child and care plan

Policy

Valoris wants to ensure that every child in its care is placed in a residential setting that fosters its growth and the development of its full potential. Interventions are based on the profile, characteristics and needs of each child.

A child in care with Valoris is entitled to a plan of care designed to meet its needs.

Valoris uses the Looking After Children (OnLAC) approach to planning for the care and services for children in its care. Its care plans must reflect the eight (8) dimensions of OnLAC:

- *Residential and permanency plan*
- *Health*
- *Education*
- *Identity*
- *Family and social relationships*
- *Social Presentation*
- *Emotional and behavioural development*
- *Motor and social development / self-care skills*

These dimensions are used to develop the goals in the plan of care by focusing on the child's needs and strengths, and aim to improve the child's living conditions and experiences, as well as the quality of the parental guidance it receives.

The child, its parent or legal guardian and its foster parent must be involved in the preparation of the plan of care.

The plan of care must be completed within thirty (30) days after the placement, reviewed ninety (90) days after the placement, and then reviewed every six (6) months thereafter. If the child is relocated, the process starts over. In the case of court orders, the plan of care complements the plan of care set by the court. In every case it must include a permanency plan aimed at ensuring continuity of care.

Procedures

The Assessment and Action Record (AAR) is filled out in the twelfth (12th) month after the placement with the responsible adult and a child aged ten (10) or over. The AAR must be redone

annually, in the same month as the previous one.

The plan of care must take into account the eight (8) OnLAC dimensions in the development of goals. It is important that the advisor select goals related to each dimension. The advisor must document who was involved in preparing the plan of care in a contacts log and in the plan of care summary. In the event that a party cannot take part, this must be clearly identified and the reason for the lack of participation should be recorded. The counselor should also document the consultation process with parties who were not involved in developing the care plan, including efforts to include them and adjustments to the care plan if necessary. The counselor should also document the consultation process with parties who were not involved in developing the care plan, including efforts to include them and adjustments to the care plan if necessary.

Everyone identified as having a role to play in executing the child's plan of care must be consulted and informed.

Dimensions of the child's plan of care

a. Residential and permanency plan

The purpose of this dimension is to determine all of the measures that will enable the child to have an appropriate and stable family or residential life. A permanency plan and information about the resource person must be included in this section.

Every effort must be made to keep the child in its community so that it can maintain links with the people it is close to and to keep it in its school and involved in its extra-curricular activities. Whenever possible, Valoris strives to have only one placement per foster family or one set of siblings per home to ensure that the child receives the guidance it needs.

b. Health

This dimension aims to set out all of the prevention, monitoring or treatment measures for health issues or disabilities.

Just like any parent, Valoris wants to ensure that the child receives all the necessary health care. The child must be given all of the information it needs to make the right choices and avoid compromising its health. Certain steps are also set out by the ministry:

- medical examination that includes the child's hearing upon admission and annually thereafter;
- dental examination upon admission and annually thereafter;
- vision examination upon admission and annually thereafter;
- update of immunizations and record included in CPIN;
- compliance with the recommendations of health care professionals (e.g. orthodontist, optometrist, nutritionist, etc.);
- medication monitoring;
- access to resources needed to help the child improve its health; and
- access to the Ontario Child Benefit Equivalent (OCBE) subsidy to purchase equipment or sign up for physical fitness activities.

c. Education

This dimension aims to carefully plan the child's studies, ensure that it receives help with developing its full academic potential and has opportunities to develop interests and skills. It is important that all of the services offered to the child be recorded in this section.

It is also important to take the time to talk to the child about what is going on in school, about its career and study plan, and to check its agenda. The discussions should convey the expectation that the child will pursue post-secondary studies.

Valoris tries different ways of supporting a child in its academic pursuits, and encourages parents and legal guardians to do the same:

- makes every effort to keep the child in the same school even if the child has to move;
- does whatever is necessary to arrange transportation for the child to and from school;
- requires that foster parents buy educational books and/or magazines/toys to encourage the child to read;
- pays for or contributes to the purchase of the necessary equipment for youths who intend to pursue post-secondary studies;
- offers tutoring or other necessary services;
- encourages psycho-educational assessments;
- attends meetings of the Identification, Placement and Review Committee (IPRC) concerning the child and ensures that the identified placement meets its needs;
- requires foster parents to take part in parent-teacher meetings;
- encourages the child to take part in educational outings organized by the school;
- helps the child apply for scholarships from the Valoris Foundation and/or other sources;
- informs the child of its responsibility to pay for its studies by paying into the Registered Education Savings Plan (RESP) and of the option of applying to the Ontario Student Assistance Program (OSAP);
- supports youth who are still in post-secondary studies (ages 21 to 24) under the residential centre program;
- encourages youth who are no longer in care to make use of the contingency fund for children previously in care on an extended basis, until age thirty (30), either to resume their studies, to start up a small business or for any other project/need approved by the committee managing that fund;
- requires that a foster parent immediately notify the advisor if a child gets suspended from school so that the foster parent and the advisor can prepare a suitable supervision plan for the suspension period, request an official letter from the school confirming the suspension and the reason for it, and put the letter in the child's file;
- provides job search and supports to youth who are not attending school; and
- requires that the advisor ensure that all report cards, the individual education plan (IPCR), and other school documents are included in the child's file.

A child in care is encouraged to develop interests, talents and skills. The child is exposed to different opportunities and experiences, including access to sports, cultural and community activities. Valoris

and the foster family ensure that the child has access to the necessary equipment and materials. In case of an interim placement, the parent or legal guardian must be consulted about the child's choice of activities to obtain their approval and ensure that the child will be able to continue the activity upon its return.

d. Identity

Identity has several aspects, including sex, gender, ethnicity, religion, language, social class, age, sexual orientation, body image, roles, personality, interests, hobbies, family diversity, origins, citizenship, regional differences, personal and social history, and the ability to handle different situations. For First Nations, Inuit or Métis children, culture, heritage, traditions, community bonds and concept of extended family are also given special consideration. This dimension aims to ensure that the child's identity characteristics are known and respected by everyone. In this section it is important to note the efforts and measures put in place to protect and promote the child's identity characteristics. It is also important for the child or youth to be aware of the information about its parent or legal guardian and the reasons why it is in care.

The advisor is to ask the parents and children which identity characteristics are central for the child, and in what specific and tangible ways they can be supported on an ongoing basis. They are also to be informed that they can provide additional information throughout the process. Support with identity will help the child develop strong self-esteem. In terms of the cultural aspect, it is important that the child or youth be encouraged and supported in his or her pursuit of activities that foster his or her cultural identity, as defined below.

For First Nations, Inuit or Métis children, the advisor shall determine whether there are any pertinent services, programs or activities by checking with the child's First Nations, Inuit or Métis band or community or an organization closely linked to the child's culture, heritage and traditions.

If such services exist, the advisor shall ask the child whether he or she would like to take part, and shall support his or her participation.

As soon as a child is placed and every time its plan of care is reviewed thereafter, the advisor must address, with the child or youth, its right to receive religious or spiritual instruction in its religious faith or preference. Any participation in a religious program offered is strictly voluntary. No person working on behalf of Valoris may attempt to convert, proselytize or criticize other faith communities.

The advisor must ask the parent or legal guardian to provide photos of the child as a baby and other family members for its life story album. The foster family and the child must keep the album up to date.

Valoris supports children who wish to take part in its Youth in Care Network.

e. Family and social relationships

This dimension aims to ensure that the child can develop positive family and social relationships. The goals and conditions of visits between a child and its family are noted in this section, as are the activities that enable the child to develop its social skills.

Valoris seeks to be as unintrusive as possible in the foster family's way of living. The agency must do everything it can to ensure that the child's family experience is a normalizing one by:

- doing everything possible to place siblings together or close by so they can stay in touch and do activities together and that include their families;
- maintaining contacts with the child’s parent or legal guardian and any other significant person;
- leaving the parenting role to the foster parent, and clarifying the role of the advisor with the foster family;
- encouraging the foster family to turn to its own social network for respite; and
- encouraging the child to invite friends to their home and going to visit them in theirs.

f. Social presentation

This dimension aims to ensure that the child’s appearance, personal hygiene, language and manners reflect positively on it in society.

Some children or youth are socially challenged. The advisor must guide the foster parent in helping to work out those challenges. For more complex challenges that require more intensive intervention, a collaborator may be called in.

The foster parent must ensure that the child has nice clean clothes, suited to its size, age, activities, weather and taste.

The foster parent must teach the child proper hygiene and ensure that the child is clean and has all the necessary personal care products.

The foster parent must encourage the development of social skills appropriate for the child’s age.

g. Emotional and behavioural development

This dimension aims to assess the child’s emotional development and to identify any necessary services to address behavioural difficulties.

It is important to recognize the child’s strengths and to offer it positive experiences. It is sometimes necessary to offer the child mental health services. When the needs exceed the advisor’s ability, another Valoris professional may be called in to work on self-esteem, mourning, behaviour, etc.

h. Motor and social development / self-care skills

This dimension aims to assess the child’s level of development and to identify goals to meet its needs. From a young age, the child must be assigned small tasks that are appropriate for its skills and abilities. This section should also cover all of the goals set in place to achieve autonomy and prepare youth for independence, which must include efforts to help the youth develop financial literacy skills.

It is necessary to help children and youth develop organizational skills and the ability to manage their everyday life.

Youth must be informed about the available community resources. A youth must:

- be encouraged to find part-time work and supported in that effort;
- be informed that part of the cost of their driving lessons and driver’s licence will be reimbursed;
- receive help with opening a bank account;

- be given access to workshops on the Ontario Child Benefit Equivalent (OCBE) Savings Program; and
- be encouraged to apply for financial assistance once they reach the age of independence so they can move into an apartment.

Supervisor’s approval

The advisor’s supervisor must review and approve the AAR and the plan of care before the deadline.

Documentation

Following each plan of care review, the advisor must prepare a summary of the highlights of the child’s life since the last review. That summary will then be used to prepare a new plan of care agreement in CPIN.

The advisor must ensure that the child, the resource family and the parent or legal guardian, if appropriate, receive a copy of the plan of care.

2.4 Permanency plan

Policy

Family reunification must always be the primary objective when a child is removed from its family environment. However, a parallel plan must be set up in case reunification is not possible.

The permanency plan is an ongoing process in the case, and ends when the child is finally living in a permanent and safe place and the family’s file is closed.

Permanency plan options:

- *family reunification;*
- *kinship placement out of care;*
- *kinship placement in care;*
- *customary care;*
- *guardianship plan;*
- *transition to independence; or*
- *adoption.*

In order to comply with the requirements of the Child, Youth and Family Services Act, 2017 (CYFSA), Valoris has a team of employees who are responsible for facilitating permanency plan reviews for children living away from their home.

Procedures

The Permanency Planning Committee helps set the objectives for supporting or reuniting families taking into account the best interests and voice of the child.

- encourage and promote participation by the parent or legal guardian and the child in the decisions and plans concerning the child taking into account the best interests of the child and its family;
- offer a respectful and non-judgmental environment;
- respect the child’s rights, identity characteristics and cultural background; and
- support and valorize the roles of every person involved in the life of the child.

When should a Permanency Planning Committee (PPC) be considered?

- when a child is removed from the care of its parent or legal guardian, including placed with kin;
- to discuss the permanency plan for a youth to guide it towards independence and strengthen its support network (VYSA and CCSY);
- to review the file of a youth facing a change in placement / permanency plan (e.g. youth requesting a placement review) or with no identified permanency plan; or
- care in accordance with traditional care practices for a First Nations, Inuk or Métis child (possible *Circle of Care*).

Steps involved in the preparation of the permanency plan

Step 1: Clarify the permanency plan

- assess the child’s needs in accordance with its age, identity characteristics, personal characteristics, strengths and needs;
- assess the parent’s or legal guardian’s skills and their ability to fulfil their parenting role, taking into consideration the strengths and challenges of the family, parent or legal guardian;
- work closely with the parent or legal guardian to engage them in the plan and get them to develop the required motivation to take the necessary steps to meet their child’s needs; and
- help and guide the family and the child to identify a support and resource network that can guide them.

Step 2: Determine and develop the permanency plan

- prepare a plan that is in the child’s best interests;
- work jointly with the family and the child on setting the goals; and
- understand the positions of everyone involved, including the child.

Frequency of permanency planning committee (PPC) reviews

- PPC reviews depend on the age of the child, starting with the youngest one in the family; and
- for cases involving VYSA/CCSY, the reviews are based on the needs of the child.

Child under six (6) years of age (the prescription time is twelve (12) months):

- a. the first PPC meeting will take place within **sixty (60) days** after the child is removed from the family home;

- b. the next meeting will take place three (3) months afterwards (after approximately five (5) months in placement); and
- c. the last meeting will take place in the ninth (9th) month.

Child aged six (6) or over (the prescription time is twenty-four (24) months):

- a. the first PPC meeting will take place **sixty (60) days** after the child is removed from the family home;
- b. after that, there will be a meeting every six (6) months; and
- c. a meeting will take place in the twenty-first (21st) month (considering the twenty-four (24) month prescription period) to share Valoris' decision.

Referrals:

- a. Meet with the supervisor to determine whether the family meets the eligibility criteria;
- b. send an email to the PPC (equipecpp@valorispr.ca) to reserve a spot on the PPC schedule; and
- c. prepare the report* and email it to the PPC along with a list of the people who will be attending.

* Note that if the PPC does not receive the report by ten (10) days before the meeting date, the meeting will be cancelled.

IMPORTANT: The advisor must check the items on the checklist to be well prepared for the PPC meeting (see in SharePoint).

Roles of the PPC participants

Role of the permanency advisor:

- conduct an exhaustive search for the missing parent or legal guardian and any kin;
- discuss the case with the supervisor and the legal department **before** the PPC review and inform the family of Valoris' position;
- consider applying for alternative dispute resolution (ADR) for a family consultation or mediation;
- explain the PPC's role to the parent or legal guardian and guests, and give them an explanatory brochure;
- invite the people involved with the family (parent or legal guardian, youths, resource person identified by the child, FNIM community representative, members of the extended family, etc.);
- invite community partners according to needs, with the parent's or legal guardian's approval; and
- prepare the report: this is the responsibility of the advisor if the child is not in extended society care; the report must be in the client's language and is subject to disclosure at any time.

Role of the resilience advisor:

- explain to the youth the role of the PPC, depending on the youth's level of understanding, and strongly recommend that the youth's resource person attend the PPC review;
- discuss with the foster parent the strengths and needs of the youth, and invite the foster parent to the meeting if their presence is pertinent;
- prepare the "responsibility of the resilience advisor" report if the youth is in extended society care, in the youth's language, and subject to disclosure at any time;
- invite the FNIM community representative and any other person the youth would like to have at the meeting; and
- find out the youth's impressions of its family situation and its preference in regard to the permanency plan.

Roles of the lawyer:

- lawyers do not attend the PPC review unless a youth requests that its lawyer be present; the clinical team must hold a legal consultation ahead of time and be aware of Valoris' position before the PPC review.

Role of the PPC:

- review the documentation submitted by the advisor prior to the review;
- chair the meeting and, if necessary, reframe it in order to maintain a respectful and inclusive environment;
- develop an engagement plan and hand it out to the people in attendance;
- issue recommendations, which will be added to the contacts log;
- remain neutral;
- ensure that the meeting runs and ends on time;
- set the next meeting date; and
- enter a note on the meeting and download the document to the CPIN database.

The PPC has the final say over the recommendations made to the clinical team. That means the PPC's position may differ from that of the clinical team. Decisions made by the PPC may be contested by the clinical team supervisor further to a CPP meeting via the "Disagreement/Conflict Resolution Process (January 15, 2018)."

Role of the clinical supervisor:

Clinical team supervisors are not required to take part in cases that have an advisor with more than two years' experience. It is up to the supervisor or the advisor to decide whether the former should attend. The supervisor has final approval over the more litigious issues, such as legal issues, complaints (internal/Commission), and must follow up with the Director or services as required.

2.5 Nutrition, health care and medication

Policy

Valoris must provide the children in its care with balanced meals as set out in Canada's Food Guide. Valoris must take into account the diets associated with different traditions and cultures, and according to a child's personal convictions.

Valoris, with the support of the parent or legal guardian and the foster parent, is required to ensure that children develop properly and receive all of the necessary treatments, including medical, dental and other, at regular intervals, in accordance with the Ministry's standards.

Valoris supports the prevention of contagious diseases through vaccination for children, as recommended by the Ontario Ministry of Health and Long-Term Care.

The administration of psychotropic drugs is an extraordinary measure that calls for very close monitoring by all of the concerned health care professionals.

Valoris undertakes to follow the Health Care Consent Act, 1996.

Procedures

Nutrition and physical exercise

During the initial Parent Resources for Information, Development and Education (PRIDE) training, foster parents will, at the outset, receive a brief update on the proper diet and nutrition to support the growth and development of children and youth in their care. The foster parent must ensure that the child eats with the family, at regular hours, and receives three nutritious, varied, filling and balanced, properly proportioned meals, in accordance with the recommendations of Health Canada's Food Guide for Healthy Eating. A sample of this guide will be available to workers so they can provide it to foster parents as required. We recommend that meals be at set times, and that all family members join in. Children must also have access to healthy snacks between meals, according to their needs, and determined by their age, state of development and health.

The child's advisor must give the foster parent information related to the child's nutrition: health, any cultural, religious or ethnic traditions, and any food restrictions or preferences. Foster parents must adapt snacks and meals based on those habits. In terms of cultural diversity, the foster parent must serve appropriate meals and traditional dishes, including special dishes appropriate for traditional holidays. The foster parent must be careful about adapting meals for allergies, medical or religious requirements (namely fasting period imposed by known religious groups), diets adopted by choice (e.g. vegetarian) and specific nutritional requirements for children and youth as recommended by their authorized doctor or nurse.

Reasonable access to the pantry and kitchen must be granted to children outside of meal and snack times as well, unless otherwise provided in their care plan.

It is important that foster parents be on the alert for food reactions or allergies. If a foster parent suspects a reaction, intolerance or allergy, medical services must immediately be notified if it is an

emergency, followed by the worker. The foster parent will accompany the child to any related medical appointments in order to properly understand the extent of the allergy, risks and possible dangers, and to learn how to handle the food in the home and the child's surroundings to avoid aggravating the child's allergy and ensure safe environment for the child. If the child has an anaphylactic allergy, the foster parent will have to be trained in the use of an auto-injector and have epinephrin on hand at all times. All of this will have to be included in the child's care plan.

If necessary, a doctor will be consulted for children who refuse to eat, overeat or give signs of an eating disorder. The placement agency and the guardian or parents are to be notified, as applicable.

A doctor or a specialist is also to be consulted for children with unique food or nutrition requirements, or in the case of difficult eating behaviours that may not be of a medical nature.

Foster parents are encouraged to facilitate opportunities for children and youth to take part in meal planning and preparation. Foster parents can use those opportunities to teach the children about food preparation and adequate and recommended portions indicated in Canada's food guide, and to identify healthy and safe practices. **The parent will provide children with educational materials appropriate to their level of understanding to help them learn the principles of healthy eating.** Foster parents must at all times provide guidance and supervision to children taking part in food preparation. It is important to identify the foods, products or equipment that children may not handle without the parent, all according to their age and level of maturity and development.

Foster parents, children and youth must be careful to use appropriate food handling methods in order to promote proper food hygiene and safety. Among other things, emphasis should be placed on hand washing and proper food washing, refrigeration, cooking and storage.

It is important to remember that food may not be used as a means of pressure or encouragement, as a reward or as punishment. Children may not be deprived of food. There is a difference between depriving and setting limits, routines and symbolic reinforcement techniques related to food that are part of an individualized and documented treatment protocol administered under the supervision of a health care professional or a rehabilitation specialist.

The foster parent must encourage the child to be physically active. We support registering for community activities and team sports in the interest of healthy living.

Scheduled medical appointments

Children are to be accompanied to scheduled medical appointments as required. The person accompanying the child can be a staff member or a foster parent. Alternatively, the placement agency or the parent or guardian may be informed of the appointments. The child should only be accompanied into the consultation room if the child so wishes, unless it is a matter of legal status (e.g. under supervision or in detention) requiring the presence of a staff member.

Whether or not (in this case why) the child is accompanied must be recorded in the child's file, along with other pertinent information (e.g. treatment or diagnosis).

Vaccination

If the child's vaccination record is not up to date, the advisor must ask the foster parent to follow up as necessary. In regard to optional vaccines, for example flu or human papilloma virus (HPV), the

foster parent must consult the advisor. The decision will be based on the doctor's recommendations, the foster family's practices, and made in consultation with the child's parent or legal guardian in the case of a temporary placement or a child in interim society care.

Sex education and pregnancy

The parent or legal guardian, foster parent and staff must share the responsibility for the sex education of a child in placement. Sex education and morals include teaching the child a sense of responsibility in regard to its sexuality, self-respect and respect for others.

Sexually active adolescents must be thoroughly instructed about the risks of sexually transmitted diseases and pregnancy, and about contraception.

A girl aged fourteen (14) or over may see a doctor in confidence to get contraceptives without informing her parent or legal guardian, foster parent or Valoris staff. The doctor may advise her on the most appropriate method for her. However, Valoris must assist her if she so requests. The agency pays for any contraceptives

A girl under fourteen (14) must obtain written authorization from her parent or legal guardian to take oral or other contraceptives if she is in interim society care.

An adolescent girl who gets pregnant must be guided as quickly as possible to her doctor. Regardless of her decision, she must receive all of the associated services, information, support and assistance, without judgment or criticism throughout the process. An adolescent boy who gets a girl pregnant must also receive the necessary support. It is important to provide advice but to refrain from ever influencing the decision of either party.

Contagious diseases

When a contagious disease is confirmed, the advisor must inform the latter's supervisor in order to prepare an intervention plan that will protect the child, the staff, the foster parent and anyone else who comes in contact with the child. A notice will be filed with the Ministry as a serious occurrence report once medical confirmation is received of a contagious disease.

The child and its parent or legal guardian and foster parent must be informed of the child's condition and made to understand the impact of its contagious disease. The child must be informed of its obligations and the precautions it must take to avoid transmission to others.

In the case of a child in interim society care, its parent or legal guardian must be informed and involved in the entire process.

In the case of a child over twelve (12) in provisional or short-term care with Valoris whose parent or legal guardian refuses a screening test for the child or to share the information, Valoris may use legal recourse.

Information about the intervention plan for a child with a contagious disease must be included and updated in the plan of care.

The foster parent must inform the advisor of any serious contagious disease affecting a family member that could pose a risk to the child. The clinical team will then develop an intervention plan.

Medication

Other than non-prescription medication, a foster parent may only administer to the child medication that is prescribed by its doctor and in accordance with the prescription. Prior to administering any such medication, the foster parent must check the name of the patient, the name of the medication and the dosage on the bottle. The foster parent must notify the advisor as soon as a doctor prescribes medication for the child.

The foster parent must prepare medication in a sufficiently spacious and well-lit place to avoid any distraction or error. The foster parent must practice proper hand hygiene as instructed by the Ministry of Health and Long-Term Care.

The foster parent must carefully supervise the administration of prescription medication. The foster parent must notify the advisor if a child under sixteen (16) repeatedly refuses to take medication that is essential for its health. A personalized response plan must be developed to deal with a situation where a child or youth refuses to take its medication.

The foster parent must ensure that the prescription is renewed well in advance in order to avoid any interruptions. The foster parent must also ensure that when the child is away from home for one or more days, it can still take its medication, by providing to the guardians, agency or parent or legal guardian any necessary medical information and the required quantity of medication for the duration of the absence in the original bottle, along with any instructions on the administration, dosage, warnings, etc. related to the medication.

For regular planned absences, the advisor must prepare a plan in writing for the continued administration of medication and monitoring for possible side-effects. That plan must be shared with the people responsible for administering the medication, and must be documented in the child's or youth's file. For occasional planned absences, verbal or written confirmation must be provided by the prescribing doctor where there are significant safety concerns about any medication or disease, and when a doctor should be seen.

In the event of a child's transfer to another agency or person, a transfer or leave plan is to be set up and implemented. The plan is to include a copy of any medical information on file, medication in their original container (as applicable), a medication continuity plan (as applicable) and any other information pertinent to the person or agency receiving the child or youth. If no medication is provided or if a quantity for less than seven days is provided, the reason is to be documented and communicated to the person or agency receiving the child or youth. The transfer or leave is to be documented in the Valoris files, along with a copy of the transfer or leave plan provided to the person or agency receiving the child or youth.

A responsible adolescent over sixteen (16) may be in charge of its own medication. A child under sixteen (16) may also be in charge of its medication as long as the doctor has provided written consent to that effect.

Information about any prescription medication, including its possible side-effects and means of administration, must be obtained from the pharmacy. Whenever possible, the advisor must encourage the child or youth to speak to the health care practitioner or pharmacist directly. The advisor must share the information with the child or youth using age-appropriate terms and language appropriate for its level of comprehension, as well as with the foster parent or the person responsible

for administering the medication. When there is a change in medication, the advisor must notify the child or youth, as well as the person(s) in charge of administering the medication, and make a note in the child's file of the reason for that change, as well as of the fact that the reasons for the change were communicated to the child. Valoris must include a copy of the information about the prescription medication from the pharmacy and the reason for any change in medication in the file of the child or youth.

The foster parent must inform the child of the dangers of mixing any given prescription medication with another prescription medication or non-prescription medication or natural products. The foster parent must have the contact information for a local pharmacy or anti-poison centre in case there are any questions.

The foster parent must have a talk with the child or youth, using age-appropriate terms and language appropriate for its level of comprehension, about any concerns related to the medication the child or youth is taking. The foster parent must watch for any side-effects of prescription medication, and must document any observed changes in weight, behaviour, emotions and physical condition. Valoris must follow up on all medical and lab tests by a health care practitioner. Valoris must seek out medical opinions from health care practitioners as required, and document the steps taken in the child's or youth's file. Valoris is responsible for identifying, monitoring and reacting to incidents related to medication, including obtaining the necessary medical attention and information from the child or youth. The advisor must fill out a serious occurrence report for any incident involving medication. That incident will then be reviewed internally to minimize the risk of recurrence. Valoris must document in the child's or youth's file any measures taken to respond to any incidents involving medication.

Naturally, the foster parent must keep any of their own family's medication under lock and key in a place beyond the reach of the child or youth. Medication must be stored in accordance with the instructions on the label or packaging, for example refrigerated, at room temperature, or in the dark. Only the foster parent may have access to medication.

Expired medication or medication that is otherwise no longer good must be stored safely and brought to the pharmacy as soon as possible by the foster parent. Any used sharp objects, including syringes or needles, must be stored separately in a safe place in appropriate containers, which can be obtained from the pharmacy, and must be returned as soon as possible to the pharmacy. Disposal of such objects by any other means is prohibited.

Administration of psychotropic medication

Although we prefer psychosocial approaches and other types of support, we recognize that a child or youth may need psychotropic medication. The advisor, in consultation with the prescribing doctor, must fill out the consent form for the administration of any psychotropic medication.

The foster parent may not administer any psychotropic medication before receiving the required written consent.

A child or youth must undergo a medical examination or consultation with the prescribing doctor. The child or youth must get the opportunity to express its point of view and preferences. This information must be documented. A youth over sixteen (16) must sign the informed consent for psychotropic medication form.

Psychotropic medication may be administered for up to seventy-two (72) hours to a child or youth in care without consent if there are reasonable grounds and all of the following conditions are met:

- delaying the administration would cause the child or youth serious mental or physical harm, and no other more restrictive action plan can prevent that harm;
- the child or youth is in no condition to give its consent;
- the parent or legal guardian of a child or youth in interim care with Valoris is not immediately available to provide consent; and
- a Valoris representative, in the case of a child or youth in extended care with Valoris and placed with an external resource is not immediately available to provide consent.

The advisor must clearly identify the psychotropic medication based on the list provided and updated by the Ministry and the CPS (Compendium of Pharmaceuticals and Specialties) to ensure compliance with the guidelines.

There are four main categories of psychotropics:

- tranquilizers or anxiolytics;
- sedatives or hypnotics;
- neuroleptics or antipsychotics;
- antidepressants.

The foster parent must follow the instruction on dose and intervals, and may not modify or stop the medication without consulting the doctor and informing the advisor. The foster parent and the child or youth must be notified of the medication's side-effects and obtain a copy of those side-effects, a copy of which must also be included in the child's or youth's file. Foster families that offer respite must be informed about any medication and its side-effects.

A prescription for a psychotropic must be revised by a doctor every six (6) months. A psychotropic must never be renewed over the phone. The required consents must also be renewed when the prescription of a psychotropic is renewed.

High risk situations include the following:

- psychotropic medication prescribed as needed (*pro re nata* or *PRN*) and/or used as needed more than once a day for three or more consecutive days;
- a prescription for two or more psychotropic medications simultaneously;
- a prescription for a psychotropic for a child under seven (7);
- a prescription for psychotropic medication that has not been reviewed by a health care practitioner for more than six (6) months;
- the abrupt cessation of psychotropic medication by a child or youth without the approval of a health care practitioner; and
- any other situation that may be cause for concern.

In the case of a child or youth deemed to be high risk, documentation on measures taken in regard to the use of psychotropic medication and any follow-up done through intervention notes must be included in its file, and its foster parent and parent or legal guardian must be notified.

If necessary, the advisor may ask the socio-medical team to review the medication and provide

recommendations.

Hospitalization and surgery

In consultation with a supervisor, the advisor must authorize any medical treatment of a child or youth, and inform the parent or legal guardian as soon as possible. For a child in interim society care, the parent or legal guardian must consent to the medical treatment.

In case of an emergency, the foster parent must act promptly by calling an ambulance or taking the child or youth to a clinic or hospital. A foster parent or an adult well known to the child or youth must accompany it at all times in an emergency. If the child or youth is scheduled to be hospitalized, or hospitalized following an emergency, the foster parent must immediately inform Valoris. If, exceptionally, it should happen that a responsible person cannot be present, the pertinent coordinates and medical information are to be provided to the hospital, and the expected day and time of discharge are to be obtained to ensure that someone is there to accompany the youth.

The advisor must document all of the information about the hospitalization as well as the plans for accompanying the child or youth. A serious occurrence report must also be filled out.

Suicidal ideation and suicide attempts

Any suicide attempt, self-harm and/or expressions of suicidal ideation must immediately be reported to Valoris. An immediate consultation must take place with a supervisor to prepare an intervention plan. The foster parent must be actively involved in the assessment.

Before taking a child to the hospital for a psychiatric assessment of suicidal ideation, Valoris' AMIS (Aide mobile en interventions spécialisées) team will do an assessment to determine the degree of risk, and will issue recommendations. A serious occurrence report must also be filled out.

Psychological services and external references

Every effort must be made to determine the most standard and least intrusive means for responding to the needs of a child or youth before seeking the services of a psychologist or a psychiatrist. In certain situation, no other service can replace an assessment by a psychologist or a psychiatrist. Once approved by the supervisor, the advisor must make a request to the socio-medical service to find an external resource.

External services may be used on a short-term (maximum of ten (10) sessions) basis. If an extension is required, the decision to extend will be done in consultation with a director of services.

The advisor must request a written report from the specialist consulted. That report must be summarized by the advisor and the supervisor, and included in the child's or youth's file. The advisor must review the recommendations made by the specialist, and ensure that these are included in the plan of care. If the recommendations are not followed, the advisor must immediately document it in the file and provide the reasons why.

2.6 Safety Plan

Policy

A safety plan shall be developed in cases where a youth is behaving in ways that are deemed dangerous and pose a risk to the youth and people around them. That plan shall be implemented and regularly reviewed from the moment an employee or another person who is responsible for the youth becomes aware of the situation. Thus, behaviours that are deemed dangerous shall be promptly addressed, and adequate and necessary resources shall be assigned to help the youth and ensure everyone's safety.

Procedures

When an employee becomes aware of dangerous behaviour by a youth or suspects such behaviour, the employee shall notify their supervisor as soon as possible to determine the need for a safety plan.

Circumstances that call for a safety plan include, but are not limited to, any behaviour that could endanger the safety of the youth or of people around them (e.g. suicidal behaviour, self-injury, hunger strike, child pornography, sexting, gang membership). The level of risk to others and the hazardousness of the youth's behaviour will be a key factor in the discussion between the employee and their supervisor. It will determine the need to initiate a plan.

A meeting to develop a safety plan shall be promptly organized, and the following people, among others, shall be invited to attend: the youth, the responsible counselor, the foster parent, the youth's contact, and the biological parent (if applicable). The supervisor shall be consulted as required.

The safety plan shall be shared as required with the responsible individuals, and shall follow the youth as they move around. Thus, if the youth goes for respite or for a visit, the responsible individuals shall be made aware of the safety plan and actions to take to ensure the youth's safety.

The plan shall be created in the youth's CPIN file under *Special Cautions*. Depending on the situation, the employee shall make the appropriate selection from the following list:

- Behavioural Alert
- Health Alert
- Safety Alert

Depending on the *Category selected*, the employee shall determine the *type* of situation and, under *description*, enter the safety plan, which shall include:

- 1) Date of the initial or revised plan
- 2) List of participants
- 3) Concerns (reason for the plan)
- 4) Warning signs or behaviours indicating an imminent risk
- 5) Actions to take in case of imminent danger, including supervision by the responsible individuals and other measures
- 6) General level of supervision by the responsible individuals (e.g. foster parent, employee during visit, etc.)
- 7) List and roles of supports and clinical or specialized services offered or arranged to deal with the situation

The safety plan shall be regularly reviewed and shall evolve as the risk level increases or decreases. The frequency of reviews shall depend on the situation, and shall be updated in the *special*

precautions section of the CPIN file. The plan shall be regularly discussed with the supervisor to ensure that everything is going well. If the situation changes, the supervisor shall be consulted to discuss any change in behaviour.

2.7 Missing child

Policy

Valoris must at all times know the whereabouts of a child or youth. When a child leaves without notice or goes missing, every effort must immediately be made to find it after it is reported. Different factors must be considered when assessing the seriousness of the situation.

Procedures

When a child under sixteen (16) who is in a foster home is gone without notice and does not return when expected, Valoris must be notified and the supervisor immediately consulted. The foster parent and the advisor must start the search based on their knowledge of the child's habits and relationships.

The disappearance must immediately be reported to the police if there is any concern about the child's safety. In every case, police must be notified of a child's disappearance once it has gone missing for 24 hours. The advisor must immediately notify the parent or legal guardian of the child's absence when the child is in interim or short-term care with Valoris. In the case of a young offender on probation, the probation officer must be notified of the disappearance. A serious occurrence report must be filled out.

When a youth aged sixteen (16) or over who is in a foster home is absent from the home without permission for less than twenty-four (24) hours, the foster parent must notify Valoris. The advisor and the foster parent must decide together on the severity of the situation. The supervisor must immediately be informed and consulted. If the situation is deemed serious, the police must immediately be notified. The following factors must be weighed:

- the age of the youth;
- whether the youth has a physical and/or intellectual disability;
- whether the youth presents a risk to itself and/or others;
- whether the youth is in the habit of taking off without letting anyone know; and
- whether there is any chance that the youth is a victim of kidnapping, of a criminal gang or of unauthorized contact.

In the case of a missing child or youth placed in a residential home, the latter is responsible for reporting its disappearance to the police, for preparing the serious occurrence report, and for immediately notifying Valoris, regardless of how long the child or youth has been missing. The advisor is responsible for getting a copy of the serious occurrence report submitted to the Ministry by the residential home.

It is important to get a photo of the child or youth every year, and to include it in its file, as well as to update its address.

The Director of Services must be informed about the disappearance of a child if it has been missing

beyond a reasonable time.

When the child returns, the advisor must meet with it to discuss the reasons for its disappearance and the consequences of its actions, as applicable. If the behaviour becomes a habit, an intervention plan must be included in the plan of care to clearly indicate what is expected of the child and what interventions should be used. If a member of the original family is responsible for the child's unauthorized absence, the situation must be discussed with that person. The advisor can send that person a letter indicating the consequences of that action or take stronger legal measures, such as a request for a formal notice or a report of a violation of the *Child, Youth and Family Services Act*.

As soon as the child is found or returns to the foster family or the residential home, the latter must immediately notify the other parties mentioned above, including the police, the advisor, the parent or legal guardian, the foster parent and the Ministry.

If the child has been missing for more than twenty-four (24) hours, the advisor must enter a secondary placement in CPIN, checking the AWOL box. The advisor must also create an occurrence in the problems and procedures section in the child's CPIN file to download the serious occurrence.

3. Services for youth (VYSA - 16-17 years and CCSY - 18-21 years)

3.1 Voluntary Youth Services Agreement (VYSA)

Policy

Valoris provides a full range of child protection services to eligible youth up until their eighteenth (18th) birthday, including agreements with youth aged sixteen (16) and seventeen (17), called Voluntary Youth Services Agreement (VYSA).

Valoris must actively involve youth in decisions and foster their participation by helping them rely on their strengths and to solve protection issues that concern them.

Services must prioritize the least disruptive youth protection measures and promote participation by families, extended families and communities in decisions concerning a youth's safety and well-being.

Maintaining a link with kin, the community and the culture is closely linked to permanent placement planning and to positive results for the youth. The latter must have access to services adapted to its culture, to community support and to opportunities for personal development.

Procedures

As with children, the Ontario Child Protection Standards guide every step of service delivery for youth aged sixteen (16) and seventeen (17).

When it is determined further to an investigation that a youth needs protection and that placement outside the home is necessary, the advisor must present the youth the following options:

- placement with kin;
- customary care agreement;
- voluntary youth services agreement (VYSA);
- temporary care agreement (TCA); or
- residential placement by court order.

In all cases, a referral will be made to the Office of the Children’s Lawyer (OCL). The latter can provide legal representation for the youth.

A court order for a residential placement need only be sought if a youth has been offered and refused a voluntary youth services agreement (VYSA). Before entering into a temporary care agreement (TCA) with a parent and a child over twelve (12), the advisor must determine whether a VYSA would be more appropriate.

All of the standards applicable to children in placement apply when a youth under a VYSA is living with a foster family. Should the youth refuse to comply with and follow certain standards, any exceptions must be clearly indicated in the CPIN file.

Voluntary youth services agreement (VYSA)

The following eligibility criteria apply:

- the youth lives in the Prescott-Russell region;
- Valoris has determined that the youth is or may be in need of protection;
- Valoris is satisfied that no course of action less disruptive to the youth, such as care in the youth’s own home or with a relative, neighbour or other member of the youth’s community or extended family member is able to adequately protect the youth; and
- the youth wants to enter into the agreement.

The term of a VYSA can be for any period of time up to, but not exceeding, twelve (12) months. Valoris may renew the agreement with the youth providing that the total term of the agreements does not exceed twenty-four (24) months or continue beyond the youth’s eighteenth (18th) birthday.

Voluntary youth services (VYS) plan

The youth and the advisor must meet within thirty (30) days after signing a voluntary youth services agreement (VYSA) to develop a voluntary youth services (VYS) plan.

The following factors must be taken into consideration:

- permanent relationships;
- connection to communities, cultures, heritages and traditions;
- health and well-being;
- housing;
- education and employment;
- life management skills and personal development; and
- identity.

The VYSA plan must include at least the following elements:

- the financial and social supports that will be provided to and/or on behalf of the youth;

- roles and responsibilities, including any expectations of the youth and commitments of Valoris;
- specific planning with respect to transitioning to adulthood and independence including plans to build financial literacy and household management skills; and
- a reference to the youth's eligibility for Continued Care and Support for Youth (CCSY) until their twenty-first (21st) birthday if the VYSA expires on the youth's eighteenth (18th) birthday.

The youth and the Valoris advisor must review the VYS plan, in person, at least every three (3) months and update the VYS plan at least once every six (6) months.

Continuation of the VYSA is not contingent on the youth achieving its goals as stated in the VYS plan.

Support

Valoris must provide the youth financial support (e.g. allowance, rent, transportation) or any other support indicated in the VYS plan, in accordance with the requirements set out in Policy Directive CW 003-18.

A youth whose VYSA expires on its eighteenth (18th) birthday is eligible for the CCSY program.

Obligation to maintain contact

The youth must maintain contact with Valoris and attend mandatory meetings concerning the VYS plan in accordance with the agreement.

Contract termination

The VYSA remains in effect for the time indicated in the agreement unless steps are taken by either party to terminate the agreement.

The termination of a VYSA is governed by the following:

- Where an agreement is being terminated by either the youth or Valoris, written notice must be given to the other party.
- When an agreement is terminated by the youth or Valoris, the latter must provide notice of termination to the Ontario Child Advocate (OCA). The youth must be advised of the option to contact the OCA and the Ontario Ombudsman about the termination.
- An agreement may be terminated if the protection concerns are resolved, and terminating the agreement would not result in the youth being in need of protection.
- Valoris may terminate an agreement if the youth cannot be located and all reasonable efforts have been made to locate the youth.

When Valoris initiates the termination of the VYSA:

- The local director (or designate) must sign the termination notice.
- The notice must be provided to the youth (where possible) and the OCL. The notice must be given no less than three (3) months in advance, starting on the date the notice is issued by Valoris. The youth will continue to receive services, including financial supports, during the notice period.
- If the youth cannot be located to serve the notice, efforts to locate and give notice to the youth must be documented.
- The youth must be advised of the option to seek protection services at any point until the youth's eighteenth (18th) birthday, and of its eligibility for CCSY up to age twenty-one (21) where a VYSA expires on its eighteenth (18th) birthday.
- Valoris must make every effort to engage the youth in planning for the appropriate supports following the termination.

When the youth initiates the VYSA:

- Valoris must make every reasonable effort to address the concerns of the youth so that the VYSA can continue, if the eligibility requirements are met.
- The youth will be advised of the option to seek protection services at any point until its eighteenth (18th) birthday.
- Valoris must make every effort to engage the youth in planning for appropriate supports following termination.

Information, referrals and notifications

Before entering into a VYSA with a youth, Valoris must:

- Inform the youth about the voluntary nature and terms of the agreement. These will be explained in a manner that can be understood by the youth.
- Give the youth an opportunity to consult with a lawyer, an advocate and/or another trusted adult prior to signing the agreement, and/or to have a support person attend the meeting with the youth.
- In the case of a First Nations, Inuk or Métis youth, provide notification to a representative chosen by the youth's Indigenous band or community that Valoris is preparing to enter into an agreement with the youth.
- Valoris must make a referral to the OCL, which will provide legal representation to the youth if such legal representation is deemed appropriate.

Complaints and conflict resolution process

A youth who is unable to resolve a problem can file a complaint in accordance with Valoris' complaints process.

If the youth's complaint concerns Valoris' decision to terminate an agreement, the youth must continue to receive the current level of financial and non-financial support from Valoris throughout the notice period and complaints process.

Valoris must inform the youth about options to resolve any issue related to the youth or a plan for the youth's care, including access to alternative dispute resolution. Valoris must also inform the youth about the complaints procedure in a manner that may be understood by the youth, and provide the latter with written information about the complaints process at the following junctures:

- the signing of a VYSA;
- the development of the Voluntary Youth Services (VYS) Plan and reviews of the VYS Plan;
- placement changes;
- upon admission to care by court order or Temporary Care Agreement under section 75 of the CYFSA; and
- upon request by the youth.

Documentation

Upon signing a VYSA with the parties, Valoris must provide the youth with whom the VYSA is signed with the following documents in hard copy or electronically:

- a copy of the VYSA; and
- a copy to the VYS Plan.

Valoris must also provide the youth written information about:

- the Ontario Ombudsman;
- the Office of the Children's Lawyer (OCL); and
- the complaints process. (S-105 Complaints from Clients)

3.2 Continued Care and Support for Youth (CCSY)

Policy

Youth who stop receiving services from an agency or customary care are more likely to do better if they receive support and orientation services. This policy provides the guidelines for a program focused on the strengths of youths, and sets out the parameters within which Valoris must conduct its work with youth after their eighteenth (18th) birthday. Valoris will provide support and orientation to help youth achieve physical and emotional well-being, acquire basic day-to-day life management skills and develop social networks that include connections with supportive adults and the community.

Procedures

Continued Care and Support for Youth agreement

Valoris must enter into an agreement with each eligible youth to provide CCSY supports.

Valoris must engage with youth on an agreement prior to the expiry of their court order, the customary care agreement or Voluntary Youth Services Agreement (VYSA) (e.g. three (3) to six (6) months prior to the youth's eighteenth (18th) birthday).

The agreement must be signed by the youth and the advisor, and approved by the local director (or designate). The Valoris advisor must provide a copy of the signed agreement to the youth, and document in the youth's file that the youth received a copy of the signed agreement.

The continuation of an agreement is not contingent on whether the youth meets his or her goals as stated in the Youth Plan.

Youth Plan

The advisor and the youth must meet to develop a Youth Plan that is based on the youth's individual strengths, needs and goals. The advisor must consider, at a minimum, the following areas in the planning:

- permanent relationships;
- community connections;
- health and well-being;
- housing;
- education and employment;
- life management skills and personal development; and
- identity.

The advisor should work with the youth, where possible, to develop a budget as part of their plan and reinforce and enhance their financial literacy skills. The Youth Plan must include the financial and/or other supports that will be provided to the youth.

The initial Youth Plan is to be finalized within thirty (30) days of the CCSY agreement being signed.

The advisor and the youth must review the Youth Plan together, either in person or by other means, at least once every three (3) months, to discuss the youth's progress towards meeting his or her goals and to address any challenges that the youth has identified. The advisor must document these discussions in the youth's file. The advisor and the youth must update the Youth Plan at least once every twelve (12) months or earlier if necessary or requested by the youth.

Each Youth Plan (initial and updated) must be signed by the youth, the advisor and the local director (or designate). Valoris must provide a copy of the signed plan to the youth, and upon consent of the youth, to other participants involved in the development or implementation of the plan. For each Youth Plan, the advisor must document in the youth's file that the youth received a copy of the plan.

Valoris must prepare a closing summary for each youth at the end of his or her participation in the CCSY program, which is to be included in the final Youth Plan. The closing summary must be informed by the youth and include the youth's status with respect to each of the key areas in the plan.

Provision of supports to youth outside Ontario

Where an eligible youth is residing outside of Ontario and wishes to remain in a CCSY agreement, the youth will continue to receive supports, including financial supports.

Termination of CCSY agreements

Where an agreement is terminated by the youth, written notice must be submitted to Valoris. The agreement then remains in effect for a notice period of three (3) months from the date notice was received.

Valoris will continue to provide the supports set out in the agreement and Youth Plan to the youth during the notice period. Valoris will document in the youth's file the youth's reason for terminating the agreement and the efforts made to locate or engage the youth prior to the termination of the agreement.

Where Valoris ceases to provide financial supports in accordance with the Regulation, Valoris will resume payment of financial support to the eligible youth when the youth resumes contact with Valoris.

Where a youth's caregiver is no longer receiving a targeted subsidy or financial assistance through the Stay Home for School Policy, and the youth is still eligible for CCSY, a new CCSY agreement should be developed to reflect this change.

Where a youth is no longer receiving support under the *Ontario Disability Support Program Act, 1997* or the *Ontario Works Act*, a new CCSY agreement should be developed to reflect this change.

Dispute resolution

Valoris must provide written information on its dispute resolution process to youth upon signing the agreement and in circumstances where Valoris intends to terminate the agreement with the youth, where the youth can be located.

Valoris must give the youth written information on its complaints process when the youth signs the CCSY agreement, upon renewal of the agreement, or at any time when the youth expresses dissatisfaction with the service.

Documents and information

Valoris must ensure that upon signing a CCSY agreement, a youth is provided with:

- a copy of the signed agreement;
- a copy of the signed Stay Home for School Agreement;
- a copy of the youth's initial and updated Youth Plans; and
- written information about CCSY.

Stay Home for School Agreement

A caregiver is eligible for financial assistance under the Stay Home for School Agreement if the caregiver meets the following three (3) conditions:

- the caregiver received financial support from Valoris for the care it provided to the child immediately before the latter's eighteenth (18th) birthday;
- on its eighteenth (18th) birthday, the youth is:
 - a. eligible for the continuous care and support for youth (CCSY) program;
 - b. the youth is enrolled in high school for an Ontario Secondary School Diploma (OSSD) or an Ontario High School Equivalency Certificate (see exceptions below); and
 - c. the youth is enrolled in at least two (2) credit courses per semester unless one of the exceptions indicated below applies.
- the provider and the eligible youth voluntarily agree to this type of agreement and sign a Stay Home for School Agreement.

Exceptions to the Stay Home for School Agreement requirements

A youth may be only required to take fewer than two (2) credit courses per semester in any one of the following cases:

- the youth needs fewer than two (2) credit courses to complete its secondary school diploma or has successfully completed the required number of credit courses (compulsory and optional), and must still complete the required number of community service hours and/or meet provincial literacy requirements to obtain an OSSD;
- the youth has special education needs and its individualized education plan includes a program with modified or alternative curriculum expectations that require fewer than two (2) credit courses; or
- the youth does not attend school in the summer but is enrolled in the fall semester of the following school year and will still be eligible at that time for a Stay Home for School Agreement.

If the youth is not enrolled in high school or in an equivalency program for a short period or is taking fewer than two (2) credit courses in a given semester due to exceptional circumstances (e.g. serious illness), Valoris may, at its discretion, extend the caregiver's eligibility for that period on condition that it is the best solution for the youth, and the latter intends to pursue its high school studies. These exceptions must be approved by the local director (or designate).

If the youth is studying towards an Ontario High School Equivalency Certificate (i.e. GED®) rather than an OSSD, Valoris may, at its discretion, extend the caregiver's eligibility for a reasonable period, as long as it is in the youth's best interest. These exceptions must be approved by the local director (or designate).

Financial assistance

Valoris will provide an eligible caregiver with a daily allowance and supports for the youth (e.g. clothing, allowance) equivalent to what the caregiver received from the agency before the youth's eighteenth (18th) birthday.

Financial assistance will be provided to a caregiver from the point at which the youth turns eighteen (18) until one of the following happens:

- the youth completes high school or turns twenty-one (21), whichever comes first; or
- the youth or the caregiver decide to terminate the Stay Home for School Agreement, subject to reasonable notice.

Valoris may, at its discretion, suspend the financial assistance or terminate a Stay Home for School Agreement in situations where the youth is no longer living in the home.

An eligible caregiver receiving financial assistance under a Stay Home for School Agreement cannot receive financial assistance under another program that covers that same supports for youth.

A youth who has entered into a Stay Home for School Agreement is not eligible to receive financial assistance under the CCSY program while the former agreement is in effect.

Termination of the agreement

If the youth or the caregiver decide to terminate the Stay Home for School Agreement, reasonable notice (e.g. one month) is expected.

A youth who decides to terminate a Stay Home for School Agreement may renew it at a later date on condition that the youth and the caregiver still meet the eligibility requirements and voluntarily agree to the renewal.

Valoris must monitor every Stay Home for School Agreement by talking to the youth at least every three (3) months, when reviewing the Youth Plan under the CCSY program, to ensure that the living arrangements are still in the youth's best interests. Those talks must also address the youth's progress towards obtaining the OSSD and the challenges faced by the youth.

A youth who has entered into a Stay Home for School Agreement is deemed to be an adult living in the home and, as a result, will not be counted in the maximum permitted capacity for a foster family or a licensed group home.

Documentation

Separate documents on Stay Home for School Agreements must be included in the youth's file and that of the caregiver.

- The caregiver's file must include:
 - a document confirming that the caregiver voluntarily accepts the Stay Home for School Agreement and that the youth meets the eligibility criteria (e.g. a signed copy of the agreement).

- The youth's file must include:
 - a signed copy of the Stay Home for School Agreement;
 - a document proving that the youth is enrolled in a secondary school or an equivalency program (e.g. schedule); and
 - a document explaining the exceptions that apply to the youth's study requirements (e.g. case notes in the Youth Pan under the CCSY program).

4. Annex

[Formal Customary Care. A Practice Guide to Principles, Processes and Best Practices - MCCSS.](#)

5. References

Child, Youth and Family Services Act, 2017

CYFSA, 2017 Regulation 156

CYFSA, 2017 Regulation 158

VYSA and CCSY guidelines

Group home licence checklist

Ombudsman Act, R.S.O. 1990