

Summary of Proposed Changes to Ontario Regulation 156/18 – Minister’s Regulation

Child, Youth and Family Services Act, 2017

Posting Date: August 20, 2021

Submissions Required by: October 4, 2021

Purpose

The purpose of this document is to seek feedback from Ontarians on a summary of proposed **draft** amendments to Ontario Regulation (O. Reg.) 156/18 under the *Child, Youth and Family Services Act, 2017* (CYFSA). The proposed changes apply to licensed residential services for children and young persons across various sectors and settings (i.e., child welfare, youth justice, child and youth mental health and special needs), and to placing agencies, including children's aid societies (societies).

This is one of two summaries that the Ministry of Children, Community and Social Services (MCCSS) is posting to the Regulatory Registry for feedback from Ontarians. A summary of the proposed **draft** amendments to O. Reg. 155/18 under the CYFSA has also been posted; please see *Summary and Proposed Amendments to Ontario Regulation 155/18 – Lieutenant Governor in Council Regulation*.

Please provide MCCSS with your comments on the proposal by email to qualitystandardsframework@ontario.ca by no later than October 4, 2021. Please reference the section letter, proposal number, and page number (e.g., Section A – Plan of Care, s. 91(1), p. 8) in your feedback for clarity. Responses must be received by MCCSS by October 4, 2021.

Disclaimer: In this policy intent summary, the term “residential” is used for legal accuracy, however, MCCSS recognizes that this term in the context of providing group and foster care to children and young persons in Ontario may be traumatizing and triggering for First Nations, Inuit and Métis peoples given the history of the residential school system in Canada. As a result, MCCSS is reviewing options for other language that could be used in the CYFSA and its regulations to describe “residential care provided to children and young persons in licensed residential settings. As this work continues, MCCSS will be consulting externally with stakeholders across Ontario, including representatives of First Nations, Inuit and Métis peoples and Indigenous service providers, given the importance of their perspective in this area and others.

Proposed Regulatory Changes

In July 2020, Ontario released a multi-year strategy to redesign the child welfare system, intended to shift the focus from reactionary service delivery to enhanced, community-based, prevention and early intervention-focused services to support the safety and success of children and youth. The Child Welfare Redesign (CWR) Strategy was developed with input from a diversity of perspectives including from youth, families, caregivers, Indigenous partners, lawyers, community organizations, frontline workers and child welfare sector leaders through over 100 engagement sessions. The [CWR Strategy](#) has five pillars, including Pillar 2: Quality of Care, which aims to improve the

quality of care and everyday experiences of children and young persons receiving licensed residential care¹ in Ontario.

As part of Ontario's announcement on the CWR Strategy, MCCSS released [Ontario's Quality Standards Framework \(QSF\)](#). The QSF provides an overview of what high-quality residential care looks like across all sectors and settings that make up licensed residential services for children and young persons in Ontario.

Implementation of the QSF is a cornerstone initiative under Pillar 2: Quality of Care. As the QSF is a resource document only, it does not have the force and effect of the law (i.e., the CYFSA, its associated regulations and directives). Proposed legislative amendments to embed elements of the QSF into the CYFSA and its associated regulations to improve quality of care is proposed to occur in a three-phase, multi-year plan over the next 3-5 years. This includes:

- **Phase 1:** Areas of focus include qualifications and pre-service training for persons delivering residential care, increased safety measures for children and young persons, and further enhancing the voices of children and young persons.
- **Phase 2:** Areas of focus include enhanced licensing enforcement measures, needs-based placements, and in-service training for persons delivering residential care.
- **Phase 3:** Areas of focus include operations and program delivery, enhanced reporting of serious occurrences, enhanced screening requirements and access to technology for children and young persons.

As part of **Phase 1 of the QSF regulations**, MCCSS is proposing regulatory changes to O. Reg. 156/18 in the following key areas to help improve the quality of care that children and young persons receive:

- A. [Plan of Care](#) (beginning on page 7)
- B. [Case Management](#) (beginning on page 21)
- C. [Education](#) (beginning on page 33)
- D. [Pre-Placement Assessment and Safety Plans](#) (beginning on page 36)
- E. [Pre-Service Educational Qualifications for Frontline Staff and Supervisors](#) (beginning on page 46)
- F. [Pre-Service Training for Foster Parent Applicants and Foster Parents](#) (beginning on page 50)
- G. [Other Minor Enhancements](#) (beginning on page 57)

The following chart provides a snapshot of each of the key areas, organized by section, that MCCSS is proposing to enhance to help improve quality of care in licensed residential settings²:

¹ Under the CYFSA, "residential care" means boarding, lodging and associated supervisory, sheltered or group care provided for a child away from the home of the child's parent, other than boarding, lodging or associated care for a child who has been placed in the lawful care and custody of a relative or member of the child's extended family or the child's community.

² MCCSS also expects that directly operated facilities delivering residential care comply with licensing requirements, which would include these proposed changes.

Section	Regulatory Area	Rationale for Proposed Changes	Quality Standard(s) Reference	Intended Outcome(s)
A.	Plan of Care	To help better ensure a child or young person’s plan of care is being used as a roadmap to enhancing their outcomes in residential care through identifying the services, supports, timelines and responsibilities of service providers needed to support progress toward the child or young person’s needs and goals	Quality Standard 2: Individualized Care Quality Standard 4: Children and Young Persons Voice	Children and young persons receive individualized care and continuous support while receiving residential services that helps meet their unique needs, recognize their strengths, and encompass all aspects of their lives and well-being
B.	Case Management	To help better ensure that children and young persons in care are receiving individualized care and continuous supports and that the roles and responsibilities of societies and licensees in overseeing, coordinating and monitoring the overall course of services and supports provided to a child in care are more clearly delineated	Quality Standard 1: Informed Placement Decisions Quality Standard 2: Individualized Care Quality Standard 4: Children and Young Persons Voice	Children and young persons receive individualized care and continuous support while receiving residential services that helps meet their unique needs, recognize their strengths, and encompass all aspects of their lives and well-being
C.	Education	To help better ensure that children in residential care are registered in school throughout their time in care and supported to regularly attend	Quality Standard 10: Educational Achievement	A child or young person’s right to education is supported to improve educational achievement and outcomes

Section	Regulatory Area	Rationale for Proposed Changes	Quality Standard(s) Reference	Intended Outcome(s)
D.	Pre-Placement Assessment and Safety Plans	<p>To help better ensure that residential placement decisions are being made based on an assessment of the child's needs and the licensee's capacity to meet those needs</p> <p>To help ensure that the safety of children in residential care is enhanced by having a plan in place that proactively protects them and others in the residential setting</p>	<p>Quality Standard 1: Informed Placement Decisions</p> <p>Quality Standard 5: Safe, Inclusive and Accessible Environments</p>	<p>Children and young persons feel that the licensed residential setting where they reside is safe, inclusive, and accessible</p> <p>Residential placement decisions are more informed and made based on an assessment of the child's needs, including cultural needs</p> <p>Improved safeguards are established to support the safety of children, staff or foster parents in residential settings</p>
E.	Pre-Service Educational Qualifications for Frontline Staff and Supervisors	To help ensure all frontline staff and their supervisors in licensed residential settings have certain qualifications before providing direct care to a child or young person	Quality Standard 8: Staff and Caregivers	Children and young persons are cared for by staff who have appropriate qualifications to meet their needs
F.	Pre-Service Training for Foster Parent Applicants and Foster Parents	To help ensure that all foster parents are subject to consistent training requirements to support them in the provision of high-quality foster care	Quality Standard 8: Staff and Caregivers	Children are cared for by foster parents who have completed some training to support them in the delivery of foster care.

Section	Regulatory Area	Rationale for Proposed Changes	Quality Standard(s) Reference	Intended Outcome(s)
				Foster parents feel supported and prepared with some skills to provide quality care to the children placed in their care
G.	Other Minor Enhancements	To support enhanced understanding and clarity of certain regulatory requirements under the CYFSA	N/A – Change being proposed for clarification purposes	Enhanced clarity of certain requirements that must be met by service providers under the CYFSA

The proposed regulatory changes in Phase 1 have been informed, in large part, by feedback received from youth with lived experience, stakeholders from sectors that deliver residential services, and external reports³ provided to MCCSS.

Proposed changes in Phase 1 would come into effect on a date to be determined, no later than January 1, 2023.

The ministry is also proposing legislative amendments under the distinct Indigenous approach of the CWR Strategy, and has additional mandates in respect of increasing access to customary care and enhancing access to prevention-focused wraparound supports for First Nations, Inuit and Métis children, youth and families. These proposed legislative amendments will seek to:

- More clearly distinguish customary care from residential care in the CYFSA, in order to address requirements that may act as a barrier to providing access;
- Provide standards for customary care that are more reflective of the distinct customs of bands and First Nations, Inuit or Métis communities;
- Implement “holistic wraparound supports for First Nations, Inuit and Métis children and youth under the CYFSA that follow an Indigenous “circles of care” model to enhance well-being; and
- Enhance the role of Indigenous service providers that are not societies within Ontario’s child and family services system.

MCCSS has posted these proposals to Ontario’s Regulatory Registry for public feedback.

³ These reports include *Because Young People Matter: Report of the Residential Services Review Panel* (2016), *Envisioning Better Care for Youth: Our Input into the Blueprint* (2017) and *Safe with Intervention: The Report of the Expert Panel on the Deaths of Children and Youth in Residential Placements* (2018).

The following provides a description of the intent of proposed changes to O. Reg. 156/18.

Section A. Plan of Care

Current provisions for children’s residences and staff-model homes licensees⁴ and foster care licensees related to developing and reviewing a plan of care for a child or young person in their care are outlined in sections 94, 127 and 128 in O. Reg. 156/18 under the CYFSA, respectively. This includes requirements specific to what information needs to be included in a plan of care, who needs to be consulted in the development and review processes, and timelines for when a plan of care needs to be developed and reviewed.

A child or young person’s plan of care is intended to be a roadmap that outlines their needs and identifies the services and supports required to meet those needs, support progress towards their goals, and enhance their overall outcomes. MCCSS has heard from stakeholders, including youth with lived experience, that current plan of care requirements for residential licensees need to be enhanced to help ensure that they are being utilized as intended.

Current provisions for children’s residences and staff-model home licensees related to supporting a child or young person’s transition to another residential placement⁵, returning home, to permanency⁶, to independence and adulthood or into adult services are outlined in section 91 in O. Reg. 156/18 under the CYFSA. This includes requirements specific to what information must be shared upon transfer or discharge of the child or young person, when that information must be shared, and who that information must be shared with. MCCSS has heard from stakeholders, including youth with lived experience, that many children and young persons are not prepared for the transitions they experience while in residential care, and changes are required to ensure that children and young persons are better supported through transitions between residential placements and when leaving residential care altogether.

MCCSS is also working with Indigenous service providers and representatives of First Nations, Inuit and Métis peoples to understand how a wraparound approach for First Nations, Inuit and Métis children, youth and families could be implemented. This approach to supporting First Nations, Inuit and Métis children, youth and families is based on a “circle of care” approach and would increase holistic and wraparound supports that involve Indigenous service providers, extended family members, Elders, community members, representatives chosen by the child’s bands and First Nations,

⁴ A ‘staff model homes licensee’ refers to a licensee, other than a foster care licensee, who provides residential care, directly or indirectly, for three or more children not of common parentage in places that are not children’s residences and that operate using a staff model (refer to s. 117 of O. Reg. 156/18).

⁵ Under the CYFSA, “residential placement” means a place where residential care is provided.

⁶ Permanency, for children in society care, may include reunification, legal custody, adoption and, for First Nations, Inuk and Métis children, customary care.

Inuit or Métis communities, resource persons, and other supportive persons when caring for First Nations, Inuit and Métis children. MCCSS recognizes that there are connections between the Indigenous-specific proposals and the proposed changes to plan of care regulations below, and will continue to work internally, and with Indigenous service providers and representatives of First Nations, Inuit and Métis peoples, to support successful implementation of this work.

The proposed changes related to plans of care and transitions are intended to:

- Better support children and young persons in licensed residential settings so that they receive individualized care and continuous support consistent with their unique needs, strengths, and all aspects of their lives and well-being; and
- Better prepare and support children and young persons in transitions from and between residential care placements, including placement changes and transitioning out of care returning home, to independence and adulthood, and to adult services.

The following chart summarizes the proposed changes in this area⁷:

Current Requirements	Proposed Changes
<p>91. If a resident of a children’s residence is transferred or discharged from the residence, the licensee who operates the residence shall, as soon as possible within 30 days after the transfer or discharge, provide the licensee, person or agency to whom the resident is transferred or discharged with a summary of the resident’s progress while in the residence, including a summary of the plan of care and an assessment of the resident’s needs at the time of the transfer or discharge.</p>	<p>It is proposed that this provision be amended to provide:</p> <ol style="list-style-type: none"> 1. If a child or young person is transferred or discharged from the children’s residence or other place where residential care is provided under the authority of a licence, the licensee shall, as soon as possible and no later than 7 days after the transfer or discharge, provide the following information to the person, licensee or placing agency to whom the child or young person is transferred or discharged: <ol style="list-style-type: none"> a) The most recent plan of care created or reviewed for the child or young person; b) The most recent safety plan created or reviewed for the child; and c) Any other information relevant to the provision of residential care to the child or young person at the time of the transfer or discharge.
<p>94. (1) A licensee who operates a children’s residence shall develop a written plan of care for each resident within 30 days after the resident’s admission. (2) In developing a written plan of care, the licensee shall use the resident’s case record.</p>	<p>It is proposed that this provision be amended to provide:</p> <ol style="list-style-type: none"> 1. The same timelines for development of a plan of care as set out in sub-section (1) of s. 94.

⁷ Please note that the proposed plan of care enhancements are separated into three sections within this chart to better support the reader.

Current Requirements	Proposed Changes
<p>(3) The licensee shall ensure that, if possible in the circumstances, the following people are consulted with and involved in the development of a plan of care:</p> <ol style="list-style-type: none"> 1. The parent of the resident, placing agency or other person who placed the child in residential care. 2. Any children's aid society that is supervising the placement or providing services to the resident, but who is not the resident's parent. 3. The resident's probation officer, if any. 4. The resident, to the extent possible given their age and maturity. <p>(4) If a person listed in subsection (3) was not consulted and involved in the development of a plan of care, the licensee shall,</p> <ol style="list-style-type: none"> a) make reasonable efforts to consult with and involve them after the development of the plan of care; and b) amend the plan of care, if necessary, to reflect their consultation and involvement. 	<ol style="list-style-type: none"> 2. In developing or reviewing a written plan of care, the licensee must use: <ol style="list-style-type: none"> a) The child or young person's case record; b) Documentation developed during the child's pre-placement assessment; c) Serious occurrence reports and incident reports about the child or young person, if any; d) Any personal, family and social history or assessment respecting the child or young person that has been prepared by or provided to the licensee; and e) The child or young person's safety plan, if any. 3. The licensee must ensure that, if possible in the circumstance, the following people are consulted with and involved in the development or review of a plan of care: <ol style="list-style-type: none"> a) The parent/guardian of the child or young person. b) The child or young person's placing agency. c) The child or young person, to the extent possible given their age and maturity. d) In the case of a child who is First Nations, Inuk or Métis, a representative chosen by the resident's bands or First Nation, Inuit or Métis communities. 4. The licensee is required to consult with the following persons in specified circumstances, including where the licensee is of the opinion that they would have information relevant to supporting the development or review of the child or young person's plan of care: <ol style="list-style-type: none"> a) Any medical professionals or clinicians providing services, supports or treatment to the child or young person. b) A resource person identified for the child or young person pursuant to section 5 of O. Reg. 156/18. c) A representative from the child or young person's school.

Current Requirements	Proposed Changes
<p>Please refer to page 9 for current requirements.</p>	<ul style="list-style-type: none"> d) The adult described under (11)(w) below. e) Where applicable, any person assigned as the child or young person's primary worker in the residence. <ol style="list-style-type: none"> 5. The licensee must ensure that consultation with the persons listed under (3) above involves at least one joint meeting between the parties when developing or reviewing the plan of care. 6. With respect to (3) and (4) above, the licensee must ensure the plan of care includes: <ul style="list-style-type: none"> a) The names and, where applicable, job titles, of the persons involved in the creation of the child or young person's plan of care together with the date or dates that they were consulted. b) The date or dates of meetings held to discuss the development of the child or young person's plan of care together with the persons who participated in the meetings. c) Individual signatures of the child or young person, where possible, their placing agency and their parent/guardian, confirming their agreement with the information reflected in the plan of care and the date of signature. 7. Where an individual refuses to or cannot sign the child or young person's plan of care, the licensee must document that refusal and the reasons in the child or young person's plan of care. 8. Before the child or young person signs their plan of care, the licensee must ensure: <ul style="list-style-type: none"> a) The child or young person is given an explanation of their plan of care in a language suitable to their understanding and in accordance with their age and maturity. b) The child or young person is asked if they want to receive a copy of their plan of care and, if so, whether they wish to

Current Requirements	Proposed Changes
<p>Please refer to page 9 for current requirements.</p>	<p>receive the document in written or electronic form.</p> <p>c) In circumstances where the child or young person would like a copy of their plan of care, the licensee shall provide the child or young person with a copy within 7 days of the plan being developed or reviewed.</p> <p>9. If a person listed in (3) above was not consulted and involved in the development of a plan of care, the licensee must document the reasons that the person was not consulted and involved in the child or young person’s plan of care.</p> <p>10. If a person in (3) was not consulted and involved in the development of the plan of care, the licensee must:</p> <p>a) Make reasonable efforts to consult with and involve them after the development of the plan of care and record those efforts in the child or young person’s plan of care; and</p> <p>b) Amend the plan of care, if necessary, to reflect their consultation and involvement.</p> <p>Note: The ministry recognizes that there may be intersections between these proposed changes and the Indigenous-specific proposals and will continue to work internally to align proposals.</p>
<p>94. (5) The plan of care shall include,</p> <p>a) a description of the resident’s needs, developed with reference to the findings of current or previous assessments of the resident, and a description of how those needs will be met;</p> <p>b) the desired outcomes that have been identified for the resident by the resident and the persons consulted with and involved in the development of the plan of care, based on the resident’s specific strengths and needs;</p> <p>c) a plan to secure, within specified timeframes, one or more specialized consultation, specialized treatment and other supports that</p>	<p>It is proposed that this provision be amended to include:</p> <p>11. A child or young person’s plan of care must include:</p> <p>a) A complete description of the child or young person’s needs and behaviours together with any challenges or concerns specific to those needs and behaviours. The description of the child or young person’s needs must include any developmental, emotional, social, medical, psychological, and educational needs, and any needs related to any behavioural challenges, any trauma</p>

Current Requirements	Proposed Changes
<p>have been identified to promote the desired outcomes for the resident;</p> <p>d) a statement of the educational programs that have been developed for the resident in consultation with the school boards in the area in which the residence is located;</p> <p>e) if applicable, a statement of the ways in which a parent of the resident will be involved in the plan of care including arrangements for contact between the resident and a parent of the resident and the resident's family;</p> <p>f) particulars of any specialized service to be provided directly by, or arranged for by, the licensee;</p> <p>g) the dates on which the resident's plan of care will be reviewed;</p> <p>h) a list of revisions, if any, to the plan of care; and (i) a statement of any anticipated plan for the discharge of the resident.</p>	<p>experienced by the child, and the child's identity characteristics.</p> <p>b) The licensee must ensure that the description of the child or young person's needs and behaviours reflects information set out in the following:</p> <ul style="list-style-type: none"> i. Current or previous assessments of the child or young person. The plan must identify all assessments relied upon to prepare the plan of care together with the title, author and date of the assessment. ii. Serious occurrence reports and incident reports. iii. Information reported by staff persons responsible for providing direct care to the child or young person. <p>c) If the child or young person has received a medical or clinical diagnosis, details of that diagnosis.</p> <p>d) A description of how the child or young person's needs, behaviours and, where applicable, diagnosis are being met.</p> <p>e) Details of any services, treatment or supports to assist in managing the child or young person's needs and behaviours, meeting their individual needs or supporting any medical or clinical diagnosis.</p> <p>f) In defining the services and supports for the resident under (11)(e) above, the licensee must ensure that consideration is given to any services and supports for the child or young person's identity, culture, language or creed and document whether the child or young person will be offered those services and supports.</p> <p>g) The licensee shall ensure that the plan of care includes the following details specific to the information under (11)(e):</p> <ul style="list-style-type: none"> i. A detailed description of all services, treatment or supports

Current Requirements	Proposed Changes
<p>Please refer to pages 11 and 12 for current requirements.</p>	<p>the child or young person has been receiving provided directly by the licensee or otherwise arranged for the child or young person.</p> <ul style="list-style-type: none"> ii. The reasons that any services, supports or treatment described in the child or young person's plan of care have not been obtained within the timeframe specified in the plan of care. iii. The names of persons, including medical professionals and clinicians providing services, treatment or supports to the child or young person, their contact information and the date(s) that the person provided the child with services, treatment or supports. iv. Any recommendations from persons providing services, treatment or supports for the child or young person, including as reflected in any assessment reports. v. A plan to secure, within specified timeframes, services, treatment or supports required to meet the child or young person's needs. vi. The names of persons responsible for providing the services, treatment or supports for the child or young person as described under (11)(g)(iv). <p>h) A complete list of any medications that the child or young person is taking together with the following:</p> <ul style="list-style-type: none"> i. Any concerns about missed medication. ii. Direction on how to respond to incidents of missed medication. iii. Details on whether the child or young person is taking more than one psychotropic drug listed in section 91 of O. Reg. 155/18.

Current Requirements	Proposed Changes
<p>Please refer to pages 11 and 12 for current requirements.</p>	<ul style="list-style-type: none"> i) A description of the child or young person’s strengths developed with reference to any information known to the licensee about the child or young person and a clear plan setting out how the licensee will promote those strengths. j) A description of the child or young person’s immediate and long-term goals, how those goals were determined and any progress the child or young person has made in achieving those goals. k) The licensee must ensure that the child or young person’s strengths, needs, behaviour and diagnosis, if applicable, are considered in the development of the child or young person’s immediate and long-term goals. l) A statement explaining how the child or young person was involved in the development of the goals specified under (11)(j), depending on the child or young person’s age and maturity. m) Practices to be implemented to support the child or young person in achieving the goals set out under (11)(j), including the name or names of persons and job titles (where applicable) of persons who will support the child or young person in carrying out these practices. n) If applicable to the child or young person, a summary of the review of their safety plan, together with any changes made to that safety plan (<i>see Section D below for more details</i>). o) Desired outcomes identified for the child or young person, based on their specific strengths, needs, behaviours and diagnosis. p) A description of the child or young person’s current educational status, including whether there are any concerns specific to their school attendance or academic performance.

Current Requirements	Proposed Changes
<p>Please refer to pages 11 and 12 for current requirements.</p>	<p>Where there are concerns, the plan of care must reflect action to be taken to support their education.</p> <ul style="list-style-type: none"> q) A description of any cultural, recreational, athletic and creative activities the child or young person participated in during the timeframe covered by the plan of care together with a description of how those activities are appropriate for their aptitudes, interests, needs and strengths. r) Where the child or young person is First Nations, Inuk or Métis, information related their culture, heritage, traditions, connection to community and the concept of the extended family and details on how the licensee has incorporated them into the care provided to the child or young person. s) A plan to enroll the child or young person in any cultural, recreational, athletic and creative activities that are appropriate for their aptitudes, interests needs and strengths or to ensure their continued involvement in such activities. t) A description of the child or young person’s dietary preferences and any dietary restrictions, together with details of how those preferences and restrictions, where applicable, are being met for the child or young person and will be met in the timeframe before their plan of care is reviewed. u) A description of the child or young person’s access to electronic devices and the internet, including whether and how this access is supervised. If the child or young person is prohibited from accessing the internet, the plan must include details of the reasons for that decision and measures implemented to ensure that the child or young person is not accessing the internet. v) A statement outlining the following:

Current Requirements	Proposed Changes
<p>Please refer to pages 11 and 12 for current requirements.</p>	<ul style="list-style-type: none"> i. The ways in which a parent/guardian, where applicable, or placing agency of the child or young person will be involved supporting the child or young person, including arrangements for contact between the child or young person and a parent/guardian or placing agency and their extended family. ii. If applicable, how the child or young person’s extended family will be involved in supporting their plan of care. <p>w) A statement of at least one trusting adult who is a positive influence in the child or young person’s life that includes the following:</p> <ul style="list-style-type: none"> i. The name and title, if applicable, of the adult. ii. Reasons why that person is important to the child or young person. iii. The role and responsibility of that person in supporting the child or young person’s plan of care. <p>x) If the child or young person is unable to identify an adult described under (11)(w) at the time of the development or review of the plan of care, the licensee must ensure that one of their goals includes identification of this adult.</p> <p>y) A description of the child or young person’s views and wishes respecting the care provided to them. The licensee must ensure that the child or young person’s views and wishes be integrated into their plan of care.</p> <p>z) A description of any concerns or changes recommended by the child or young person with respect to the services provided or to be provided pursuant to their plan of care and details on how the licensee has responded to</p>

Current Requirements	Proposed Changes
	<p>those concerns or recommended changes.</p> <p>aa) A description of the anticipated plans for transfer or discharge of the child or young person, including details on whether it is anticipated that the child or young person will be transferred or discharged from the residence, and details on whether the child or young person will be transferred or discharged to another residential setting, another caregiver including their parent/guardian or to a different living arrangement.</p> <p>bb) The next date on which the child or young person's plan of care will be reviewed.</p> <p>cc) A list of revisions, if any, to the plan of care made after the plan of care is finalized and an explanation for those revisions.</p>
<p>94. (6) The following shall be included in the resident's case record:</p> <ol style="list-style-type: none"> 1. The initial plan of care developed in accordance with subsection (1). 2. The reasons that a person listed in subsection (3) was not consulted with or involved in the development of a plan of care. 3. A description of the efforts made by the licensee pursuant to clause (4)(a). 4. The particulars of any review of the plan of care. 5. The reasons for which any specialized consultation, specialized treatment and other supports referred to in clause (5)(c) have not been obtained within the specified timeframe. <p>(7) The licensee shall ensure that the development of each resident is reviewed in relation to their plan of care at least once every 30 days during the first six months after the resident's admission and at least once every six months after that.</p> <p>(8) The licensee shall ensure that a resident is given an opportunity to express their views during a review under subsection (7).</p>	<p>It is proposed that this provision be amended to provide:</p> <p>12. The following must be included in the child or young person's case record/file:</p> <ol style="list-style-type: none"> a) The initial plan of care developed for the child or young person together with the particulars of any review of the plan of care. b) Whether the plan of care was provided to the child or young person in written or electronic form. <p>13. The licensee must ensure that each child or young person's plan of care is reviewed 90 days after their admission, 180 days after their admission and every 180 days after that.</p> <p>14. In addition to the timelines in (13) above, the licensee must review the child or young person's plan of care as soon as possible where there is a material change in circumstances, new information is received about their needs, behaviours or diagnosis or when the placing agency requests a review.</p>

Current Requirements	Proposed Changes
<p>(9) The licensee shall ensure that each resident’s plan of care is reviewed three months after the resident’s admission, six months after the resident’s admission and, if requested by a person consulted with and involved in the development of the plan of care, every six months after that.</p> <p>(10) Subsections (3) and (4) apply to a review under subsection (9) and a reference to the “development of a plan of care” in those subsections shall be read as a “review under subsection (9)”.</p>	
<p>Additional requirements – Plan of Care</p>	<p>It is proposed that the following new provisions be added to the plan of care requirements:</p> <p>15. The licensee must ensure that all individuals who provide direct care to the child or young person on behalf of the licensee complies with what is set out in their plan of care.</p> <p>16. The licensee must ensure that all individuals who provide direct care to the child or young person are kept aware of the contents of their plan of care and have convenient access to the plan.</p> <p>17. The licensee must ensure that a copy of the child or young person’s plan of care is available at the residence/home.</p> <p>18. The licensee must ensure that the child or young person’s placing agency or person who placed the child or young person receive a copy of the plan following its completion.</p>
<p>127. ... (3) Within 30 days after the placement of the child in foster care, the licensee shall, ... b) develop and finalize the foster plan of care after, if possible in the circumstances, consulting with, i. the placing agency, if the placing agency is not the licensee, ii. the foster parent or parents, iii. the child, to the extent possible given the child’s age and maturity, and iv. the child’s parents, if appropriate.</p>	<p>It is proposed that this provision be amended to include the same proposed changes as those described above for plans of care development for children residing in children’s residences, with modifications where necessary to reflect the unique circumstance of foster children (e.g., the requirement for involvement of the foster parent or parents in the development or review of the foster plan of care) (<i>See changes outlined in (1)-(18) above for more details</i>).</p>

Current Requirements	Proposed Changes
<p>(4) If the licensee finalizes the foster plan of care without consulting a person listed in clause (3)(b), other than a parent of the child, the licensee shall continue to make reasonable efforts to consult with those persons and, based on the consultation, make any changes to the plan of care that may be appropriate.</p> <p>(5) The licensee shall ensure that the foster plan of care,</p> <ul style="list-style-type: none"> a) takes into account all available information about the child as set out in any existing reports related to specialized consultation with respect to the child or specialized treatment or supports received by the child; b) identifies desired outcomes based on the child’s specific strengths and needs; and c) includes a plan to secure, within specified timeframes, one or more specialized consultation, specialized treatment and other supports that have been identified to promote the desired outcomes for the child. <p>(6) For the purposes of clause (5)(a), if the placing agency is not the licensee, the placing agency and the licensee shall ensure that any reports referenced in that clause are shared between them as soon as possible after either of them receives the report.</p> <p>(7) A placing agency shall initiate a social history of each child that it places in foster care within 60 days after the placement and update it at least once in every year following the placement.</p> <p>(8) The social history of a child shall include the following information respecting the child:</p> <ul style="list-style-type: none"> 1. Identifying information. 2. Admission information. 3. Family history. 4. Birth history. 5. Developmental history. 6. Health history. 7. Academic history. 8. History of court involvement. 9. Experiences of separation. 10. Personality and behaviour. 11. Aptitudes and abilities. 	

Current Requirements	Proposed Changes
<p>(9) If the placing agency is not the licensee, the placing agency shall provide the licensee with a copy of the child’s social history.</p> <p>(10) A licensee shall use the social history of a child as a resource in adapting the child’s foster plan of care.</p>	
<p>128. (1) A foster care licensee shall review the foster plan of care developed in accordance with section 127 for each child receiving foster care in a foster home used by the licensee to provide foster care.</p> <p>(2) The following people shall, if possible in the circumstances, be involved in a review:</p> <ol style="list-style-type: none"> 1. The licensee. 2. The placing agency, if the placing agency is not the licensee. 3. The child, to the extent possible given the child’s age and maturity. 4. The foster parent or parents. 5. The child’s parents, if appropriate. <p>(3) If a person listed in subsection (2) is not involved in the review, other than a child’s parent, the licensee shall note the reasons in the child’s file and shall,</p> <ol style="list-style-type: none"> a) continue to make reasonable efforts to involve the person after completing the review; and b) based on their involvement, make any necessary changes to the foster plan of care. <p>(4) A review shall take place at the following times:</p> <ol style="list-style-type: none"> 1. Three months after the child’s placement in foster care, six months after the placement and at least once every six months after that. 2. As soon as possible after the following events: <ol style="list-style-type: none"> i. A material change in circumstances occurs that necessitates a review of the foster plan of care. ii. A change occurs in the child’s placement. <p>(5) The licensee shall document in the child’s file the date of each review and any changes made to the foster plan of care as a result of the review.</p>	<p>It is proposed that this provision be amended to include the same proposed changes as those described above for plans of care reviews for children residing in children’s residences with modifications where necessary to account for the unique circumstances of foster children (<i>See changes outlined in (1)-(18) above for more details</i>).</p>

Current Requirements	Proposed Changes
<p>(6) If the placing agency is not the licensee, the placing agency and the licensee shall ensure that any reports respecting the child are shared between them as soon as possible after a report is received by either of them.</p> <p>(7) If a foster plan of care includes a recommendation to obtain one or more specialized consultations, specialized treatments or other supports for the child within a specified timeframe and the specialized consultation, specialized treatment or support is not subsequently obtained for the child within the timeframe, the licensee shall note the reasons in the child's file.</p>	

Section B: Case Management

For children in care, while societies have the rights and responsibilities of a parent under the CYFSA, MCCSS has heard from stakeholders that current requirements imposed on societies and licensees do not clearly identify who is responsible for managing the care of a child who has been placed by a society in residential care, particularly when a society places a child in a licensed residential placement that is not society-operated (e.g., Outside Paid Resource (OPR) or Transfer Payment Recipient (TPR) organizations licensed to provide residential care under the CYFSA).

As a result, MCCSS is proposing to introduce new, and to clarify existing, case management responsibilities for societies in relation to children in their care and custody who require residential care. These proposed requirements are intended to:

- Improve the quality of services and care children in care receive;
- Improve oversight of residential placements; and
- Increase accountability for societies when they place a child in a residential placement.

For the purposes of these changes, case management responsibilities involve directing, coordinating and monitoring the overall course of services and supports provided to a child receiving care in a residential setting. This includes, but is not limited to:

- Identifying the needs of the child and goals for service;
- Based on identified needs and goals, working with service providers to plan for, coordinate, and facilitate access to necessary services and supports;
- Providing oversight of services and supports, including monitoring the child's progress against identified goals; and,
- Planning and supporting transitions from and between placements and from care.

The following chart lists new and/or enhanced case management requirements for societies when a child is placed in a licensed or unlicensed residential setting (including a youth justice or child and youth mental health facility) and the child is in the society's care and custody pursuant to a temporary care agreement, a temporary care and custody order, an interim society care order, or an extended society care order.

These proposed changes were prioritized to support implementation of the QSF and address significant issues raised by youth with lived experience, societies, residential service providers and other stakeholders through consultations as well as by third party reports. Additional requirements for societies to improve service coordination, service integration and oversight will be contemplated in future phases of regulation development to support QSF implementation.

Current Requirements	Proposed New Requirements
<p>CYFSA 109.</p> <p>(2) The society having care of a child shall choose a residential placement for the child that,</p> <ul style="list-style-type: none"> a) represents the least restrictive alternative for the child; b) where possible, respects the child's race, ancestry, place of origin, colour, ethnic origin, citizenship, family diversity, creed, sex, sexual orientation, gender identity and gender expression; c) where possible, respects the child's cultural and linguistic heritage; d) in the case of a First Nations, Inuk or Métis child, is with, if possible, a member of the child's extended family or, if that is not possible, <ul style="list-style-type: none"> i. in the case of a First Nations child, another First Nations family, ii. in the case of an Inuk child, another Inuit family, or iii. in the case of a Métis child, another Métis family; and e) takes into account the child's views and wishes, given due weight in accordance with the child's age and maturity, and the views and wishes of any parent who is entitled to access to the child. 	<p>In addition to the existing requirement, it is proposed that a new requirement be introduced for societies related to residential placement decision-making:</p> <ol style="list-style-type: none"> 1. The society must document steps taken in order to comply with s. 109(2) of the CYFSA for every residential placement decision made for a child.

<p>New requirement – Society placing a child in an unlicensed placement</p>	<p>It is proposed that a new requirement be introduced for societies when a child is placed in an unlicensed placement:</p> <ol style="list-style-type: none"> 1. If a society places a child in an unlicensed setting, the society must fulfill the requirements imposed on residential licensees to complete a pre-placement assessment, safety plans (if applicable) and plan of cares (<i>see Section A above and Section D below for more details</i>). 2. Societies would be expected to come into compliance with the proposed requirement for children in society care in unlicensed placements within a specified timeframe.
<p>New requirement – Identity Documentation/Essential Documents at Admission to Society Care</p>	<p>It is proposed that new requirements be introduced for societies related to identity documentation for children in care:</p> <ol style="list-style-type: none"> 1. At admission to care, societies must make reasonable efforts to obtain the following identity documents from the child’s parent/guardian: <ol style="list-style-type: none"> a) Health Card b) Statement of Live Birth c) Birth Certificate d) Social Insurance Card (SIN) e) Immigration/Citizenship documentation (if applicable) f) Health benefits card (if applicable) 2. If the society cannot obtain the required documents at admission to care, the society must immediately take steps to apply for these documents, within a specified time period, on behalf of the child, where it’s not possible to obtain them from the parent/guardian or where the document does not exist. 3. Societies would be expected to come into compliance with the proposed requirement for children currently in society care within a specified timeframe. <p><u>First Nations, Inuk or Métis child</u></p> <ol style="list-style-type: none"> 4. For a First Nations, Inuk or Métis child, in addition to the above, where the child is a member or eligible to be a member of any bands or First Nations, Inuit or Métis

<p>New requirement – Identity Documentation/Essential Documents at Admission to Society Care</p>	<p>communities, the society must seek to obtain membership documentation for those bands and First Nations, Inuit or Métis communities at admission into care.</p> <ol style="list-style-type: none"> 5. If the society cannot obtain membership documentation at admission to care, the society must immediately take steps to pursue membership documentation, including applying for First Nations, Inuit or Métis identity documentation (e.g., (e.g., Certificate of Indian Status, Métis Citizenship Card, Inuit Land Claim Beneficiary documentation) for all of the child’s bands or First Nations, Inuit and Métis communities. 6. If at any time subsequent to the child’s admission to care, a society identifies that that the child in care may be a member or, or identifies with, any bands or First Nations, Inuit or Métis communities, the society shall immediately take steps to pursue membership documentation. . 7. Societies would be expected to come into compliance with the proposed requirement for children currently in society care within a specified timeframe. <p><u>Immigration and Citizenship</u></p> <ol style="list-style-type: none"> 1. Societies must determine the immigration and citizenship status of each child in care upon the child’s admission to care. 2. Societies must, with the consent of the child and in the child’s best interests, take steps to regularize the child’s immigration status (e.g. support a refugee claim, apply for permanent residency or citizenship) within in a specified timeframe. 3. Societies would be expected to come into compliance with the proposed requirements for children currently in society care within a specified timeframe.
<p>New requirement – Continuity of Services and Supports</p>	<p>It is proposed that new requirements be introduced for societies related to continuity of services and supports:</p> <ol style="list-style-type: none"> 1. The society must make best efforts to ensure continuity of services and supports

	<p>for a child entering or transitioning from a residential placement. This includes, if possible:</p> <ol style="list-style-type: none"> a) The child attending the same school, before- and after-school programming, and tutor (if appropriate). b) The child attending the same health services, such as physician/nurse in the extended class, mental health counsellor/services, dentist, and eye care. c) The child attending the same cultural, spiritual, social, extracurricular and recreational services/programming. <p>2. The society shall document its efforts to ensure continuity of services and supports, including an explanation of why it was not feasible to ensure continuity of any of the above services or supports.</p>
<p>New requirement – Enhanced Society Role in the Residential Plan of Care</p>	<p>It is proposed that new requirements be introduced for societies related to their role in the development of the child’s residential plan of care:</p> <ol style="list-style-type: none"> 1. The society must participate in the development of the child’s residential plan of care and document their participation (<i>see Section A for more details</i>). 2. The society must request a copy of the residential plan of care and keep it in the child’s file. 3. The society must document guidance and consultation provided to the licensee to support development of the residential plan of care and, where necessary, facilitate services and supports identified in the plan of care as being in the best interests of the child.
<p>New requirement – Other Services and Supports</p>	<p>It is proposed that new requirements be introduced for societies related to securing additional services and supports:</p> <ol style="list-style-type: none"> 1. The society must secure all services and supports identified for the child in the residential plan of care (at initial development and in subsequent reviews), that are not provided, procured or facilitated by a residential licensee, within 30 days of

	<p>required services being included in the residential plan of care and must document any reason why a service has not been obtained for the child within a timely manner and efforts made to secure services every 30 days until the service has been obtained.</p> <p>2. Where a risk of placement disruption has been identified, the society must consider whether additional services and supports could be put in place to stabilize the placement and must facilitate the implementation of any such services and supports. If additional services and supports are not put in place or are unsuccessful in stabilizing the placement, the society must document an explanation. These requirements will not apply in situations where a placement transfer has been identified and documented as being in the child's best interests; for example, where an alternative placement has been identified that will better meet the child's needs.</p>
<p>New requirement – Monitoring Plans of Care during visits by the child protection worker or a person designated by a society</p> <p>O. Reg. 156/18</p> <p>51. (1) A society shall ensure that each child placed in a foster home or other home by the society is visited by a child protection worker or a person designated by a society,</p> <ul style="list-style-type: none"> a) at least once within seven days after the child's placement in the home; b) in addition to the visit referred in clause (a), at least once within 30 days of the placement; and c) at least once every three months after the visit referred to in clause (b). <p>(2) The society shall ensure that each visit required under this section includes a meeting in private between the worker and the child and that the private meeting is documented.</p>	<p>It is proposed that new requirements be introduced for societies related to monitoring plans of care to align with visits by the society currently required in O. Reg. 156/18:</p> <ul style="list-style-type: none"> 1. Prior to every required visit with a child, the society must review the child's residential plan of care, including the child's development and identified goals and outcomes, in order to inform a conversation with the child, the child's caregivers, and organizations/professionals working with the child, as needed, to assess if the child's needs are being met. 2. At each required visit with a child, the society must have a private conversation with the child to support the society's assessment of whether the child's needs are being met as outlined in the plan of care. 3. At each required visit with a child, the society must have a private conversation with the child's caregiver(s) to support the society's assessment of whether the child's

<p>New requirement – Monitoring Plans of Care during visits by the child protection worker or a person designated by a society</p>	<p>needs are being met as outlined in the plan of care.</p> <ol style="list-style-type: none"> 4. After visiting the child, and within a specified time period, if the interviews with the child or the child’s caregiver suggest that the child’s needs are not being met, then the society must within a specified time period request information from other professionals/organizations working with the child, in order to assess if the child is progressing toward identified goals and outcomes as planned and if changes are required. The society must document information received from each service provider and if not received, why not. 5. The society must document guidance and consultation provided to the licensee to support implementation of the residential plan of care and facilitate supports in the best interest of the child. 6. Where the residential plan of care is not meeting the child’s needs, the society must ensure that the residential plan of care is revised immediately by the licensee, in consultation with the society, and others involved in the plan of care, and that services and supports are secured to meet the child’s needs. 7. After each visit with a child, within a specified period, the society must document: <ol style="list-style-type: none"> a) Its assessment of how the child’s residential plan of care is meeting the child’s needs, and any identified gaps, based on conversations with the child, caregiver, and other professionals/organizations working with the child (if needed) b) The society’s agreement with any revisions to the child’s residential plan of care, including any actions taken to better meet the child’s needs. 8. The society must participate in formal reviews of the child’s plan of care convened by the licensee every 6 months and as needed.
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<p>O. Reg. 156/18</p> <p>49. (1) A society shall ensure that each child in care of the society is given a medical and dental examination as soon as practicable after the admission of the child to care.</p> <p>(2) A society shall ensure that each child who is in care of the society is given a medical examination and dental examination at least once a year.</p> <p>(3) A society shall keep a record of each medical examination and dental examination of each child admitted into care by the society.</p> <p>(4) A society shall ensure that the treatment recommended as a result of a medical examination or dental examination of a child admitted into care by the society is carried out within the times recommended.</p> <p>(5) Psychological and psychiatric assessments or treatment or both shall be provided for each child in the care of a society in accordance with the needs of the child where the society is of the opinion that the behaviour and condition of the child indicate that an assessment or treatment or both is necessary in the circumstances.</p> <p>(6) The results of each assessment and treatment carried out under subsection (5) shall be recorded by the society.</p>	<p>It is proposed that this provision be amended to specify:</p> <ol style="list-style-type: none"> 1. Societies may depart from requirements for annual examinations in s. 49(2) of O. Reg. 156/18 in circumstances that are beyond the control of the society provided that the departure is approved by a supervisor and documented, and that the society further documents at least every 30 days thereafter the efforts it has made to meet the requirements until they are met. 2. Societies may depart from requirements in s. 49(4) of O. Reg 15/18 that treatments be carried out in the times recommended in circumstances that are beyond the control of the society provided that the departure is approved by a supervisor and documented, and that the society further documents at least every 30 days thereafter the efforts it has made to meet the requirements until they are met. 3. The society must ensure that a child in care receives any additional medical and dental examinations that are recommended by a medical professional. 4. The society must ensure that each child in care is given a vision examination at least once a year and the visit is documented. The society must secure corrective lenses, where prescribed, within 30 days of the examination. <ol style="list-style-type: none"> a) Societies may depart from this requirement in circumstances that are beyond the control of the society, provided that the departure is approved by a supervisor and documented, and that the society further documents at least every 30 days thereafter the efforts it has made to meet the requirement until it is met.
<p>New requirement – Civil or Other Claims for Compensation</p>	<p>It is proposed that new requirements be introduced for societies related to supporting a child in extended society care’s rights to civil or other claims for compensation:</p> <ol style="list-style-type: none"> 1. The society must take steps (to be specified) to pursue and protect the legal

	<p>rights to damages/compensation of a child in extended society care who has suffered serious abuse or neglect prior to or while in care.</p>
<p>New requirements – Identity Documentation when a Child enters Extended Society Care</p>	<p>It is proposed that a new requirement be introduced for societies related to identity documentation for children in extended society care:</p> <ol style="list-style-type: none"> 1. When a child enters extended society care, the society must support the child to obtain citizenship documentation: <ol style="list-style-type: none"> a) Passport (where the child is a Canadian citizen); b) Permanent Resident Card (where the child is a Permanent Resident of Canada); or c) Other citizenship documentation, as appropriate per the society's steps to regularize the child's immigration status. 2. When a child turns 16 years of age and is in extended society care, the society must support the child to obtain a Driver's license or Ontario Photo Card. 3. Societies would be expected to come into compliance with the proposed requirements for children currently in society care within a specified timeframe.
<p>CYFSA</p> <p>Right to be heard in respect of decisions 8. (1) For greater certainty, the rights under section 3 of a child in care apply to decisions affecting them, including decisions with respect to (...)</p> <p style="padding-left: 40px;">(c) the child's or young person's placement in or discharge from a residential placement or transfer to another residential placement.</p> <p>Society's plan for child 100. The court shall, before making an order under section 101, 102, 114 or 116, obtain and consider a plan for the child's care prepared in writing by the society and including, (...)</p>	<p>It is proposed that new requirements be introduced for societies related to transitions for children in care, including placement changes and discharges from care to support permanency:</p> <p><u>Requirements for all Transitions</u></p> <ol style="list-style-type: none"> 1. Societies are required to support the child's transitions (i.e., placement changes, discharges from care to support permanency) by involving them in conversations and decisions about transition planning by: <ol style="list-style-type: none"> a) Having honest, respectful and ongoing discussions about placement options being considered for them; b) Asking them to share their feelings, thoughts and opinions about placement options;

(b) a statement of the criteria by which the society will determine when its care or supervision is no longer required.

O. Reg. 156/18

29. (1) The following services provided by a society and powers exercised by a society are prescribed for the purposes of section 73 of the Act: (...)

6. Subject to subsection (3), the power to remove a child from a foster home or other residential placement.
7. The power to continue a child's placement following removal of the child as described in paragraph 6, if the child's placement changed before notice was provided or before any consultation could occur. (...)
9. Subject to subsection (4), the service of developing a plan to transition a child from being in a society's care to living independently.
10. The power to decide to terminate child protection services as described in the Child Protection Standards.

Ontario Child Protection Standards (2016)

Standard 8: Closing a Case outlines the minimum criteria that must be met and processes involved in deciding to terminate child protection services. The child protection worker must hold a termination meeting with the child and family and discuss with the family a plan for accessing services in the community to meet individual or family needs in the future before the risk of subsequent maltreatment escalates. In addition, the child protection worker informs collateral agencies of the intended case closure and the estimated timeframe within which the closure will take place.

- c) Ensuring their feelings, thoughts and opinions are considered in transition planning and for them to have a say on how decisions are made and what happens throughout the transition; and
- d) Providing information and answering the child's questions in a manner that is appropriate for the child's age and maturity.

2. Societies are required to document how they have considered the child's views and wishes, given due weight in accordance with the child's age and maturity, unless they cannot be ascertained, in transition planning.
3. The society must transfer the child's belongings respectful and dignified manner (e.g., use neatly packed suitcases or boxes instead of garbage bags to transport the child's personal belongings).

Residential Placement Transfers (while children are still in society care)

4. The society must take steps to ensure continuity of services and supports (see "Continuity of Services and Supports" section above), where possible, for the child, and support the child in their transition.
5. If a society transfers a child in society care from one residential setting to another setting, it is the society's responsibility to share case management information as soon as possible and in any event within 7 days after the transfer or discharge, with the new licensee, person or agency to whom the child is transferred. The following information must be shared:
 - a) The child's most recent plan of care and safety plan (if applicable),
 - b) Any personal, family and social history or assessment regarding the child,
 - c) Any relevant intake and assessment documents of the child including psychological assessments,
 - d) Reports from any agency or professionals involved with the child,

<p>Please refer to pages 29-30 for current requirements.</p>	<p>including dental, accident/injury, social work, school, psychometric, psychological and psychiatric, if applicable,</p> <ul style="list-style-type: none"> e) Copies of identification documents (e.g., birth certificate, health card, membership documentation for all of the child’s bands and First Nations, Inuit and Métis communities, social insurance number, permanent resident card, passport or other citizenship information, driver licence) in the society’s possession, f) Details of any current medical concerns, and g) Any additional relevant information or documentation. <p>6. The society will convene a transition meeting that includes, where appropriate: the new licensee, the previous licensee, the previous and new caregivers, resource person chosen by the child, and other societies when a child is placed in another society’s jurisdiction or is involved with the family, to discuss the information provided about the child at discharge/transfer, if applicable.</p> <ul style="list-style-type: none"> a) The child must be provided the opportunity to attend and participate in the transition meeting. b) Individuals who were invited to attend the child’s most recent plan of care must be notified of the placement change and provided an opportunity to participate in the transition meeting. <p><u>Transitions – Discharged from Care (excluding aging out)</u></p> <p>7. When a child is discharged from care, the society must support continuity of services and supports by notifying agencies or individuals providing services or supports to the child of the intended discharge and the estimated timeframe within which the discharge will take place (as per the</p>
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<p>Please refer to pages 29-30 for current requirements.</p>	<p>requirements under the Child Protection Standards).</p> <ol style="list-style-type: none"> 8. The society will convene a transition meeting with the person who will be providing care to the child, including if a child is returning home. <ol style="list-style-type: none"> a) The child must be provided the opportunity to attend and participate in the transition meeting. b) Individuals who were invited to attend the child's most recent plan of care meeting must be provided an opportunity to participate in the transition meeting. 9. It is the society's responsibility to share case management information as soon as possible and in any event within 7 days after the discharge, with the child or the person who will be providing care to the child, including if a child is returning home. This would include the following information, with respect to the child's recent time in care, where applicable: <ol style="list-style-type: none"> a) The child's most recent plan of care and safety plan (if applicable), b) Any personal, family and social history or assessment regarding the child, c) Any relevant intake and assessment documents of the child including psychological assessments, d) Reports and records from any agency or professionals involved with the child, including dental, accident/injury, social work, school, psychometric, psychological and psychiatric, if applicable, e) Details of any current medical concerns, including medical records (e.g., immunization booklets, prescriptions, medic alert information) f) Information about the process for how to request the child's personal information in society case files and an opportunity to make a request for the child's personal information. g) The child's personal documents and mementos, including the child's lifebook,
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<p>Please refer to pages 29-30 for current requirements.</p>	<p>artwork, photographs, keepsakes and other personal documents effects.</p> <p>h) All original identification documents secured by the society (e.g., birth certificate, health card, membership documentation for all of the child's bands and First Nations, Inuit and Métis communities, social insurance number, permanent resident card, passport or other citizenship information, driver licence).</p> <p>i) Key information with identification, such as passwords and answers to security questions.</p> <p>j) Any additional relevant information or documentation.</p>
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Section C. Education

Section 13(2) of the CYFSA sets out rights specific to children in care⁸. Sub-section (e) of this legislative requirement establishes the right of a child in care to receive an education that corresponds with their aptitudes and abilities, in a community setting whenever possible.

Current requirements related to the education of a child or young person vary depending on residential licence type. For example:

- Children's residence and staff-model home licensees are required to assess and document the educational needs of a resident before they are placed in the residence⁹ and are required to consult with local school boards to identify education resources for the residents at least once a year.
- Foster care licensees are required to assign a person to supervise and support all of their foster parents with contacting the child's teacher and/or principal to assess the child's adjustment and progress in school once every three months.
- Currently, there are no detailed requirements under the CYFSA or its regulations for agencies who place children into residential settings (e.g., children's aid societies) related to education of a child or young person.

⁸ Under the CYFSA, "child in care" means a child or young person who is receiving residential care from a service provider and includes,

(a) a child who is in the care of a foster parent, and

(b) a young person who is,

(i) detained in a place of temporary detention under the Youth Criminal Justice Act (Canada),

(ii) committed to a place of secure or open custody designated under subsection 24.1 (1) of the Young Offenders Act (Canada), whether in accordance with section 88 of the Youth Criminal Justice Act (Canada) or otherwise, or

(iii) held in a place of open custody under section 150 of this Act.

⁹ This regulatory requirement does not apply to children's residences in the youth justice system.

The proposed changes applicable to residential licensees and children’s aid societies related to the education of a child or young person are intended to further support a child or young person’s right to receive an education under the CYFSA, and to further promote the education of children and young persons, which is considered an important part of their preparation for leaving residential care and moving into adulthood.

The following chart summarizes the proposed changes in this area¹⁰:

Current Requirements	Proposed Changes/New Requirements
<p>101. (1) A licensee who operates a children’s residence shall consult at least once in a year with the school boards in the area in which the residence is located for the purposes of identifying and utilizing the educational resources available for the residents.</p>	<p>It is proposed that sub-section (1) of this provision be amended to:</p> <ol style="list-style-type: none"> 1. Expand the application of this requirement to all licensees delivering residential care, including foster care licensees. 2. Specify “once in every 12 months” instead of “once in a year” for the timeline. 3. The licensee must also consult with: <ol style="list-style-type: none"> a) If applicable, schools operated by a band, a council of a band, the Crown in right of Canada, an entity or an education authority that is authorized by a band or council of a band or by the Crown in the right of Canada in the area in which the residence or foster home is located (exact language to be determined).
<p>101. (2) If the licensee is of the opinion that a resident is unable to attend a school in the area in which the residence is located because of the severity of the resident’s behavioural, physical or emotional problems, the licensee shall,</p> <ol style="list-style-type: none"> 1. document the need for an educational program for the resident in the resident’s case record and the resident’s plan of care; and 2. consult with the appropriate director of education with respect to an educational program for the resident to be provided in accordance with the requirements of the Education Act and its regulations. 	<p>It is proposed that sub-section (2) of this provision be revoked and replaced with:</p> <ol style="list-style-type: none"> 1. The licensee must share information about the educational resources available in the area where the residence or foster home is located to support educational planning for the child or young person with the placing agency or person who placed the child or young person. 2. The licensee must provide the child or young person’s placing agency or person who placed them, if applicable, with the name and contact information of a person or persons responsible for providing residential care to the child or young person who may be contacted by the school regarding the child or young person’s education or for emergencies in circumstances where the child or young

¹⁰ Please note the proposed enhancements to s. 101 are separated to better support the reader.

	<p>person's parent/guardian or placing agency is not available.</p> <ol style="list-style-type: none"> 3. The licensee must ensure that the information provided as part of (2) is up-to-date and accurate as needed throughout the child or young person's school year. 4. New requirements specific to reporting to the placing agency or person who placed the child or young person where the child or young person has been absent from school together with the reasons for the absence.
<p>Proposed new regulatory requirement under the CYFSA – Suitable Study Environment for Children and Young Persons</p>	<ol style="list-style-type: none"> 1. All residential licensees must ensure that their licensed residential setting includes a suitable study environment that is responsive to the individual needs of each child or young person living in the residence/home, in accordance with their age and maturity, to support them in studying and completing their homework and assignments.
<p>New regulatory requirement under the CYFSA – School Registration</p>	<ol style="list-style-type: none"> 1. A society must ensure that the child is registered in school upon their admission to care. The society is responsible for registering the child in school at the time of admission and throughout their time in residential care if there is a need for the child to change schools. <ol style="list-style-type: none"> a) If a child is not registered in school upon their admission to care, the society must register each child in their care into school, or an alternative education program (based on the child's needs), upon the child's admission into residential care. b) If a child is registered in school upon their admission to care, but requires registration in a new school due to a change in residence, the society must register each child in their care into school, or an alternative education program (based on the child's needs), upon the child's admission into residential care. 2. If the society cannot register a child in their care upon their admission into residential care and/or following a change in schools or

	<p>an alternative educational program, they must document the rationale for this and their ongoing efforts to register the child into school. This must be done every 30 days until the child is registered in the school, or an alternative education program.</p> <p>3. Whenever possible during the transition process, a student should remain in their original school without interruption to school attendance.</p>
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Section D. Pre-Placement Assessment and Safety Plans

Current provisions related to a pre-placement assessment of the child’s needs, to be completed before a residential placement, are outlined in sections 86¹¹ and 127 in O. Reg. 156/18 under the CYFSA, for licensed children’s residences and staff-model homes, and foster care agencies, respectively. This includes requirements specific to a description of immediate needs of the child, and immediate objectives of residential care, and a written record that sets out any immediate needs of the child that cannot be met and how those needs will otherwise be met.

There are no requirements in regulation for residential licensees or placing agencies specific to developing and maintaining a safety plan¹² for a child or young person who is placed in a licensed residential setting. However, requirements to develop and maintain a safety plan are often set out as a licence condition on many residential licences across the province to support child safety. Regulatory requirements on this topic would support consistency across the province.

The proposed changes related to pre-placement assessment and safety plans are intended to:

- Support licensees and placing agencies in making more informed residential placement decisions based on an assessment of the child’s needs and the capacity of the residential licensee to meet those needs; and
- Support child safety.

The following chart summarizes the proposed changes in these areas:

Current Requirements	Proposed Changes
86. Except in the case of an admission of a young person who has been ordered into detention or custody by a youth justice court, before a licensee decides whether to admit a child to a children’s	Note: These proposed enhanced provisions would not apply to youth justice settings.

¹¹ This regulatory requirement does not apply to children’s residences in the youth justice system.

¹² For the purposes of this proposal, a safety plan is a document that outlines all of the safety risks a child poses to themselves and others, and the measures and/or interventions to be put in place to address those safety risks.

<p>residence operated by the licensee, the licensee shall ensure that,</p> <ul style="list-style-type: none"> a) a preliminary assessment is made of the child that sets out, <ul style="list-style-type: none"> i. the immediate needs of the child, ii. if it can be determined in the circumstances, whether the child is likely to be returned home, iii. the child’s legal status, and iv. any other information that, in the opinion of the licensee, is relevant to the immediate provision of residential care to the child; b) the immediate objectives of the provision of residential care are determined, taking into account the developmental, emotional, social, medical and educational needs of the child; and c) a written record is prepared that sets out, <ul style="list-style-type: none"> i. any immediate needs of the child that cannot be met in the children’s residence, if they can be ascertained, and ii. how those immediate needs will otherwise be met. 	<p>It is proposed that this provision be amended to provide set out rules for a pre-placement assessment applicable to all licensees:</p> <ol style="list-style-type: none"> 1. A placing agency or person that proposes to place a child in a residence or home operated by a licensee must provide the licensee with the following information for the purposes of informing an assessment of whether the child’s needs would be met if the child were admitted: <ol style="list-style-type: none"> a) The needs of the child, including developmental, emotional, social, medical, psychological, and educational needs, and any needs related to any behavioural challenges, any trauma experienced by the child, and the child’s identity characteristics. b) If the child is being placed by a society, the child’s legal status. c) Any behaviours which may pose safety risks to the child or others, and the safety measures that must be implemented to mitigate those risks if the child were to be placed in a residence or home operated by the licensee. d) The circumstances necessitating residential care for the child. e) The objectives of the provision of residential care for the child, taking into account the child’s needs above. f) Any other information that, in the opinion of the placing agency or person placing the child, is relevant to the provision of residential care to the child by the licensee. 2. Before a licensee decides whether to admit a child to a residence or home operated by the licensee, the licensee must ensure that the following information is obtained, assessed and documented (where documentation must be in writing and dated at the same time): <ol style="list-style-type: none"> a) The information described under (1) above.
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Please refer to pages 36 and 37 for current requirements.

- b) Details of any support services and training completed by the persons that would be providing direct care to the proposed placement in the residence/home.
 - c) Information about the persons (children and adults) receiving residential care in the residence or home at the time of the proposed placement, including:
 - i. their age and gender;
 - ii. A description of their needs and behaviours;
 - iii. Services and supports provided to them; and
 - iv. An assessment of how their needs might impact on the care to be provided to the child whose admission is being proposed.
3. The licensee must use the document prepared according to (2) above to assess and document (where documentation shall be in writing and dated at the same time) the following specific to the proposed placement:
- a) Whether the child's needs, including any behavioural, developmental, emotional, social, cultural and identity, medical, mental health and educational needs, can be met by the licensee should the child be admitted to the residence/home.
 - b) Any needs of the child that cannot be met if the child were admitted to the residence/home.
 - c) Any measures that must be implemented by the licensee prior to the child's admission to ensure that the needs of all persons receiving residential care in the residence/home operated by the licensee are met, including details of any additional services and supports to be provided to the child in the proposed placement or to other persons receiving residential care in the residence/home operated by the licensee.

Please refer to pages 36 and 37 for current requirements.

4. The licensee must provide the placing agency or person placing the child with the following information (and keep a record of the date this information was provided):
 - a) Support services and training provided to the persons providing direct care to children that are relevant to the care of the proposed placement.
 - b) The number of children and adults receiving residential care in the residence/home operated by the licensee at the time of the proposed placement.
 - c) The ages, gender, and any information about the needs, services and supports required to meet the needs of the other children or adults receiving residential care at the time of the proposed placement that might impact the services to be provided to the proposed placement.
 - d) Names of any documents, including date and author, relied upon to compile the information above about needs and behaviours of the persons receiving residential care in the residence/home and the services and supports to meet those needs.
5. A licensee is prohibited from admitting a child to a residence or home operated by the licensee unless:
 - a) It has completed all of the applicable steps described above in (2) and (3) and determined that the child's needs will be met in the residence; and
 - b) The licensee has complied with requirements for the development of a safety plan (described below) in the case of a child that has behaviours that may pose safety risks to the child or others.
6. A placing agency that proposes to place a child in a residence or home operated by a licensee must complete the following prior to placing the child:

<p>Please refer to pages 36 and 37 for current requirements.</p>	<ul style="list-style-type: none"> a) Complete an assessment, based on the information provided by the licensee in (4) above and information known to the placing agency about the child's needs, and on the basis of that assessment, determined that the child's needs will be met in the proposed placement. b) Document the assessment and provide a copy of this documentation to the licensee for inclusion in the child's file, if the child is admitted to the residence or home operated by the licensee. c) Consult with the child to the extent possible based on their age and maturity and the child's parent or guardian, if appropriate, about the proposed placement and document their views with respect to the placement decision. A copy of this documentation must be provided to the licensee for inclusion in the child's file, if the child is placed in the residence or home operated by the licensee. <p>7. A placing agency is prohibited from placing a child into a residence or home operated by a licensee where it has determined, on the basis of the assessment undertaken above, that the proposed placement will not meet the child's needs.</p> <p>8. The licensee must ensure that the documentation and agreements obtained, prepared or required above are maintained in the child's file, should the child be placed in the residence or home operated by the licensee.</p>
<p>126. (1) A foster care licensee shall maintain a register of children placed in a foster home used by the licensee to provide foster care.</p> <p>(2) The register shall include, with respect to each child,</p> <ul style="list-style-type: none"> a) their full name, sex and date of birth; b) if applicable, the fact that the child has been placed in interim society care or extended society care; 	<p>It is proposed that this provision be amended to include:</p> <ul style="list-style-type: none"> 1. The proposed changes from (1)-(8) above specific to foster care licensees with some modifications to account for information required specific to the proposed foster parent or parents. 2. The foster care learning plan must be reviewed before placing a child in a foster home to determine whether the necessary training to meet the child's needs has been

<ul style="list-style-type: none"> c) the name, address and telephone number of the placing agency or other person who placed the child; d) the address of the foster home in which the child has been placed and the date of placement; and e) if the child is transferred or discharged from the foster home, the date of the transfer or discharge and the name of the licensee, person or agency to whom the child is transferred or discharged. 	<p>completed (See Section E below for more details).</p>
<p>127. (1) Before a child is placed in a foster home to receive foster care under the authority of the licence of a foster care licensee, the licensee shall ensure that,</p> <ul style="list-style-type: none"> a) a preliminary assessment is made of the child that sets out, <ul style="list-style-type: none"> i. the immediate needs of the child, ii. if it can be determined in the circumstances, whether the child is likely to be returned home, iii. the child’s legal status, and iv. any other information that, in the opinion of the licensee, is relevant to the immediate provision of foster care to the child; and b) the immediate objectives of the provision of foster care are determined, taking into account the developmental, emotional, social, medical and educational needs of the child. <p>(2) A placing agency shall complete an assessment of a child that it places in foster care within 30 days after the placement, and the assessment shall set out,</p> <ul style="list-style-type: none"> a) any special needs that the child may have; b) the child’s legal status; c) the child’s family history; d) the circumstances necessitating foster care for the child; and e) any other information that, in the opinion of the placing agency, is relevant to the immediate provision of foster care to the child. <p>(3) Within 30 days after the placement of the child in foster care, the licensee shall,</p>	<p>It is proposed that this provision be amended to include the same proposed changes from (1)-(8) above specific to foster care licensees with some modifications to account for information required specific to the proposed foster parent or parents.</p>

<p>a) review the assessment prepared in accordance with subsection (2).</p>	
<p>Proposed new regulatory requirement under the CYFSA – Safety Plans</p>	<p>Note: These proposed new provisions would not apply to youth justice settings.</p> <p><u>General Rule</u></p> <p>9. Prior to a child’s admission to a residence or home operated by the licensee, the licensee must conduct a safety assessment for the purposes of determining whether a safety plan is required for the child. If a safety plan is required, the plan shall be established prior to the child’s admission in accordance with the requirements set out below.</p> <p><u>Safety Assessment</u></p> <p>10. The safety assessment consists of: (1) making reasonable efforts to determine whether the child engages in behaviours that may pose a risk to the safety of the child or others; and (2) obtaining the view of the placing agency or person placing the child on the need for a safety plan for the child.</p> <p><u>Safety Plan Required</u></p> <p>11. A safety plan is required if, after conducting the safety assessment, the licensee determines that the child may pose a risk to the safety of the child or others or the placing agency or person placing the child are of the view that the child requires a safety plan.</p> <p>12. Where no safety plan is required prior to the child’s admission, the licensee must document the reasons for that determination and information about the licensee’s consultation on the need for a safety plan with the placing agency or person placing the child.</p> <p><u>Content of the Safety Plan</u></p> <p>13. The licensee shall ensure that the safety plan shall sets out:</p>

Proposed new regulatory requirement under the
CYFSA – Safety Plans

- a) The behaviours of the child that may pose a safety risk to the child or others, and safety measures to mitigate those risks.
- b) Measures, including the amount of any supervision required, to be adopted to prevent the child from engaging in behaviours that may pose a safety risk to themselves or others.
- c) Procedures to be followed by the licensee’s staff, foster parents and any other person providing direct care to the child on behalf of the licensee should the child engage in behaviours that may pose a safety risk to themselves or others.
- d) The clinical or other supports to be provided to the child to address their needs.

Persons to be Consulted

14. The licensee must ensure that the following persons are consulted with and involved in the development of the safety plan:
- a) The placing agency, if the placing agency is not the licensee,
 - b) In the case of a child who is a First Nations, Inuit or Métis child, a representative chosen by each of the child’s bands or First Nations, Inuit or Métis communities,
 - c) The child’s parent/guardian, if appropriate.
15. If the licensee finalizes the safety plan without consulting a person listed above , the licensee must continue to make reasonable efforts to consult with those persons and, based on the consultation, make any changes to the safety plan that may be appropriate.
16. The licensee must ensure that the safety plan includes:
- a) The names and, where applicable, job titles, of the persons involved in the development of the child’s safety

Proposed new regulatory requirement under the CYFSA – Safety Plans

- plan together with the date or dates that they were consulted.
- b) Individual signatures of each person consulted in the development of the safety plan, confirming their agreement with the information reflected in the plan and the date of signature.
 - c) Any recommendations from persons that are or have provided specialized consultation, treatment or other clinical supports required to address the child's needs, including any reports or assessments prepared respecting the child.

17. The licensee must ensure that the persons consulted on the development of the safety plan above receive a copy prior to the child's admission to the children's residence or foster home.

Staff and Foster Parent Review of Safety Plan

18. The licensee must ensure that a child's safety plan is reviewed by all individuals providing direct care to the child, including foster parents, prior to them providing support to the child for the first time and any time the plan is revised. These individuals must confirm their review of the plan by signing the safety plan and including the date of their review of the plan.

Review Requirements

19. The licensee must review the child's safety plan at the following times for the purposes of determining whether the plan is still appropriate to meet the child's needs:

- a) During the development of the child's plan of care.
- b) During the review of the child's plan of care.
- c) Immediately, if the child poses a safety risk to themselves or others.
- d) In circumstances where new information is obtained respecting

Proposed new regulatory requirement under the
CYFSA – Safety Plans

the child's safety risks or behaviours that would impact the information included in the child's safety plan, including any measures to be adopted to prevent the child from engaging in behaviour that may pose a safety risk to themselves or others.

e) In circumstances where measures set out in the safety plan have not been effective in preventing the child from engaging in behaviours that may pose a safety risk to themselves or others. In these circumstances, the licensee must ensure that different measures are established and included in the safety plan to prevent the child from engaging in behaviours that may pose a safety risk to themselves or others.

f) When requested by a person involved in the development of the safety plan, including the child.

20. In conducting a review of the child's safety plan, the licensee must ensure that:

a) The requirements set out from (13)-(19) above are met.

b) Any changes made to the safety plan are documented in the safety plan together with the date of the changes.

21. The licensee must ensure that a copy of the child's safety plan is available at the residence/ home.

Documentation Requirements

22. The following documents must be included in the child's file:

a) The documentation required where no safety plan is required for the child, according to (10) above.

b) The child's safety plan, if one has been created for the child and any revised versions of the child's safety plan.

23. The particulars of any review conducted on the child's safety plan.

<p>Proposed new regulatory requirement under the CYFSA – Safety Plans</p>	<p>24. The reason that a person listed in (14) was not consulted with or involved in the development of the safety plan together with a description of the efforts made by the licensee to consult with that person.</p> <p><u>Transitional Requirements</u></p> <p>25. Within 30 days after these proposed provisions come into effect, licensees are required to conduct safety assessments for each child already residing in the residence or home operated by the licensee and, if it is determined that a safety plan is required, develop one as soon as possible in accordance with the requirements described above respecting the development of safety plans.</p> <p><u>Review of the Need for a Safety Plan</u></p> <p>26. Unless a safety plan has been established for a child, the licensee is required to conduct a safety assessment for the purposes of determining whether a safety plan is required:</p> <ul style="list-style-type: none"> a) During the development or review of the child’s plan of care; and, b) Immediately following any situation in which the child may pose a risk to the safety of the child or others.
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Section E. Pre-Service Educational Qualifications for Frontline Staff and their Supervisors

There are currently no regulatory requirements for pre-service educational qualifications for staff who directly provide care for children and young persons in licensed residential

settings or for individuals who supervise these staff. Recent reports¹³ have called for raising staff qualifications to improve quality of care, and stakeholders, including youth with lived experience, have highlighted the workforce as an important contributor to quality of care¹⁴.

Jurisdictions in Australia¹⁵, the United Kingdom¹⁶ United States¹⁷ and other Canadian provinces¹⁸ require minimum post-secondary education qualifications specifically for frontline workers in children's residential settings. Many other service delivery systems in Ontario also require minimum pre-service educational qualifications for staff providing care directly to children and vulnerable populations groups (e.g., early childhood educators providing care for children in child care settings licensed under the *Child Care and Early Years Act, 2014*, personal support workers providing care in long-term care homes licensed under the *Long-Term Care Homes Act, 2007*).

As part of Phase 1, MCCSS is proposing to introduce pre-service educational qualification requirements for persons providing direct care and supervision or those who supervise persons providing direct care to children and young persons in licensed residential settings. The change is intended to better support children and young persons by requiring that staff have certain educational qualifications relevant to their duties, the program provided by the licensee and the needs of the children being served.

MCCSS is also planning to propose further changes to strengthen the capacity of the residential services workforce, including enhancing minimum training requirements and establishing a core competency framework as a part of Phase 2.

The proposed new requirements for pre-service educational qualifications would not apply to foster parents as defined pursuant to s. 2(1) of the CYFSA. These requirements also would not apply to other types of family-based caregivers, including adoptive, kin and customary caregivers, and would not apply to a person with whom the child has been placed for adoption under Part VIII (Adoption and Adoption Licensing), or volunteers providing services in the licensed residential setting.

The proposed pre-service educational qualification requirements outlined below specify:

- Who is required to meet these qualifications;

¹³ *Because Young People Matter: Report of the Residential Services Review Panel (2016)*, *Safe with Intervention: The Report of the Expert Panel on the Deaths of Children and Youth in Residential Placements (2018)*

¹⁴ *Envisioning Better Care for Youth: Out Input Into the Blueprint (2017)*

¹⁵ Australian provinces that require pre-service educational qualifications for staff in children's residential settings include Queensland, Victoria, and Western Australia.

¹⁶ Countries within the United Kingdom also maintain minimum pre-service educational qualifications for children's residential staff, including Ireland, Scotland, Wales, and England.

¹⁷ In the United States, states such as New Jersey and New Hampshire similarly require certain pre-service educational qualification requirements for staff in children's residential settings.

¹⁸ Canadian provinces such as British Columbia also require pre-service educational qualifications for staff providing care in children's residential settings.

- What these qualifications include;
- Who is exempt from these requirements; and
- When these qualifications requirements are proposed to become effective.

Current Requirements	Proposed New Requirements
<p>Proposed regulatory requirement under the CYFSA – Pre-Service Educational Qualifications</p>	<ol style="list-style-type: none"> 1. Every licensee who holds a licence to provide residential care under Part IX of the CYFSA ensures that on and after [in-effect date], the following persons have the educational qualifications listed under (2) and satisfy the requirements under (3) prior to providing direct care or supervision to a child or young person in a children’s residence or other place where residential care is provided under the authority of a licence, regardless of job title: <ol style="list-style-type: none"> a) Any person employed or otherwise engaged by the licensee to provide direct care or supervision to a child or young person; or b) Any person employed or otherwise engaged by the licensee to supervise a person listed in (a). <p>These requirements do not apply to foster parents as defined pursuant to subsection 2(1) of the Act,¹⁹ a person with whom the child has been placed for adoption under Part VIII (Adoption and Adoption Licensing), or volunteers providing services in the licensed residential setting.</p> 2. The person listed in (1)(a) or (b) must have satisfied one of the following educational requirements: <ol style="list-style-type: none"> a) Possession of a certificate, diploma or degree from one of the following institutions: <ol style="list-style-type: none"> i. A university in Ontario that is authorized to operate under section 3 of the <i>Post-Secondary Education Choice and Excellence Act, 2000</i>;

¹⁹ By definition under the subsection 2(1) of the CYFSA, “customary caregivers” and “kinship caregivers” are “foster parents” if they are providing services in licensed residential settings.

<p>Proposed regulatory requirement under the CYFSA – Pre-Service Educational Qualifications</p>	<ul style="list-style-type: none"> ii. A college of applied arts and technology established under the <i>Ontario Colleges of Applied Arts and Technology Act, 2002</i>; iii. Any private career college providing a program that has been approved under the <i>Private Career Colleges Act, 2005</i>; iv. An Indigenous Institute recognized under the <i>Indigenous Institutes Act, 2017</i>; or v. Only in the case of a personal support worker program, any district school board as defined in the <i>Education Act</i> or an educational institution situated outside of Ontario that is analogous to a district school board; or <p>b) Possession of academic qualifications from an institution outside of Ontario which is, in the reasonable opinion of the licensee, substantially similar to a certificate, degree or diploma that would be issued by an educational institution described in paragraph (a).</p> <p>3. The person shall provide the licensee with proof that the diploma, degree or certificate was issued to the person by the educational institution described above, which shall be maintained in the person’s file and made available to the Director upon request.</p> <p>4. The licensee shall ensure that the educational program resulting in the certificate, degree or diploma referenced in (2) included course content, both academic and practical, that is directly relevant to the person’s duties, the program provided by the licensee, and the needs of the children served by the licensee. The licensee shall record this information in the person’s file.</p> <p>5. The licensee shall maintain and keep up to date written policies and procedures respecting how the licensee will ensure that the degree, diploma or certificate included</p>
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Proposed regulatory requirement under the
CYFSA – Pre-Service Educational Qualifications

course content, both academic and practical, that is directly relevant to the duties of the person listed in (1), the program provided by the licensee, and the needs of the children served by the licensee.

6. A person listed in (1) is exempt from the requirements referenced in (2)-(4) if they satisfy the following requirements:
- a) In the 12-month period preceding the regulatory requirement coming into effect the person was providing direct care or supervision to a child or young person or supervising a person who provides direct care or supervision to a child or young person in a children's residence or other place where residential care is provided under the authority of a licence.
 - i. on a full-time basis for at least three years during the five years immediately before being employed or otherwise engaged by a licensee; or,
 - ii. on a part time basis for the equivalent of at least three full-time years during the seven years immediately before being employed or otherwise engaged by a licensee; or
 - b) The person is enrolled in a program to obtain a certificate, diploma or degree in from an institution referenced in (2) that also meets the requirements in (4) if that person is supervised by a person who has satisfied the educational qualifications and requirements set out in (2) – (4); or
 - c) The person is a First Nations, Inuk or Métis Elder and/or Knowledge Keeper.

Note: A licensee must annually review the status of each person providing direct care and supervision during their enrollment to verify that the person has completed or continues to be enrolled in the program.

<p>Proposed regulatory requirement under the CYFSA – Pre-Service Educational Qualifications</p>	<p>Note: Additional exemptions are under consideration by the ministry, which may be based on the experience of the person but only where the licensee is unable to satisfy the requirements set out above.</p> <p>7. Provide a 5-year transition period from the time the proposed regulatory provisions described above come into effect for all persons currently providing direct care and supervision or supervising persons who provide direct care to children and young persons in licensed residential settings to meet the educational qualification requirements, other than persons exempt from these requirements under (6) above.</p>
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Section F. Training for Foster Parent Applicants and Foster Parents

Currently, ministry policy directive CW-003-20 requires children’s aid societies to ensure that all foster parents complete the Parent Resources for Information, Development and Education (PRIDE) or Strong Parent Indigenous Relationships Information Training (SPIRIT) pre-service training program prior to being approved as a foster parent. This directive only applies to children’s aid societies. MCCSS has heard that individual OPR foster care agencies have different practices for training foster parents approved to provide foster care under the authority of their licence.

MCCSS has received ongoing feedback and recommendations from stakeholders, including foster parents, that consistent and accessible training is needed to enhance a foster parent’s skills and build their capacity, so they are well-equipped and feel better supported to provide high-quality residential care to children placed in their home.

To create consistency among all foster parents and help build their capacity to provide high-quality residential care, MCCSS is proposing the following:

- Requiring all foster care licensees to ensure that prospective foster parents complete *either* the Parent Resources for Information, Development and Education (PRIDE) pre-service training or Strong Parent Indigenous Relationships Information Training (SPIRIT) pre-service training, prior to being approved. Approximately 80% of foster parents are already required to complete this training as per Ministry [Policy Directive CW 003-20: Approved Tools for Caregiver Assessment and Pre-service Training, and for Plan of Care Development](#).
- Introducing a new requirement for all foster parents and foster parent applicants to hold a valid certificate in Standard First Aid, including infant and child Cardiopulmonary Resuscitation (CPR).

- Introducing a new requirement for all foster parents and foster parent applicants to complete a minimum of 8 hours of First Nation, Inuit or Métis cultural competency training. Details are described in the proposed minister’s directive below.
- Introducing a new requirement for all existing foster parents and foster parent applicants to complete a minimum of 4 hours of training on trauma-informed care. Details are described in the proposed minister’s directive below.
- Introducing a new requirement for foster care licensees to develop an individualized learning plan for each foster parent approved under the authority of their licence. The individualized learning plan is intended to help promote intentional planning for training and skill development of foster parents. Training should be determined based on the identified needs of the child or youth placed in the foster home and the foster parent’s learning objectives.

Proposed amendments would be included in both O. Reg. 156/18, as well as a new proposed Minister’s directive. The charts below outline the proposed changes.

Current Requirements	Proposed New Requirements
<p>119. (1) A foster care licensee shall develop procedures for the selection, development and management of the foster homes used by the licensee to provide residential care.</p> <p>(2) A foster care licensee shall maintain written policies and procedures for the foster homes used by the licensee to provide residential care respecting,</p> <p>a) the admission and discharge of children to and from the foster home;</p> <p>...</p> <p>m) the manner in which a foster child is supported in relation to any work done and money earned by the foster child both inside and outside of the foster home.</p>	<p>It is proposed that this provision be amended to include:</p> <p>The requirement to develop policies and procedures respecting the development and review of the foster parent learning plan to this list.</p>
<p>121. (1) A foster care licensee shall not permit a person to receive a child for the purposes of providing foster care under the authority of the licensee’s licence unless,</p> <p>a) the licensee or a person designated by the licensee has approved the person as a foster parent on the basis of an assessment described in this section of the proposed foster parent and the proposed foster home; and</p> <p>b) the results of the last assessment of the foster parent or parents and the foster home under section 123, if any, indicated that the foster parent or parents and foster home remain</p>	<p>It is proposed that this provision be amended to include:</p> <p>1) <u>The Foster Parent Learning Plan</u></p> <p>Add a new provision that requires the foster care licensee or a person designated by the licensee to develop a foster parent learning plan in consultation with each foster parent.</p> <p>The learning plan shall include the following information:</p>

suitable to receive a child for the purposes of providing foster care.

- a) All training completed by the foster parent on the provision of foster care, including training completed pursuant to the proposed Minister's Directive [*insert number and name of directive and information on where it can be accessed*]
- b) Plans, including any applicable timelines for completion, for ongoing training and continuous learning that support the foster parent in the provision of foster care and are consistent with the program delivered by the foster care licensee and the needs of the children served, or placed in the home.
- c) Individualized learning objectives as determined by the licensee or a person designated by the licensee in consultation with the foster parent or parents and the proposed action plan and timelines for achieving those learning objectives.

The intent is that an individual learning plan be established for each foster parent even in cases where there are two foster parents providing foster care in a foster home.

2) Development of the Foster Parent Learning Plan & Completion of Training Requirements – Prior to Approval of Foster Parent

Currently, requirements specific to the approval of foster parents are set out in ss. 121 of O. Reg. 156/18. It is proposed that a provision be included that prohibits a licensee from approving a person to provide foster care unless:

- a) The person has completed the training required pursuant to the proposed Minister's directive within a timeframe to be specified in the regulation; and,
- b) The foster care licensee or a person designated by the licensee has

<p>Please refer to page 52 for current requirements.</p>	<p>established the foster parent learning plan. (described above under para. 1).</p> <p>For foster parents that are already approved to provide foster care, the proposal is that the above requirements for training and creation of the foster parent learning plan be met by a date to be specified in the proposed regulation.</p>
<p>122. (1) A foster care licensee shall assign a person to,</p> <ul style="list-style-type: none"> (a) supervise and support the foster parent or parents approved by the licensee; and (b) arrange for the support services provided for in a foster care service agreement under section 131. <p>(2) The person shall consult with the foster parent or, in the case of two foster parents, at least one of the foster parents, within seven days after a placement of a child in the foster home and again within at least 30 days after the placement.</p> <p>(3) If the foster care licensee is not the placing agency with respect to children placed in the foster home, the consultation shall be conducted in the foster home.</p> <p>(4) At least once every three months, the person assigned under subsection (1) shall,</p> <ul style="list-style-type: none"> (a) visit the foster home in order to provide support to the foster family; or (b) if there are no children placed in the foster home, contact the family. 	<p>It is proposed that this provision be amended to provide:</p> <ol style="list-style-type: none"> 1. The foster parent learning plan shall be reviewed at least once every three months by the person assigned to supervise and support the foster family in consultation with the foster parent 2. As part of the review, the licensee or person designated by the licensee or the person assigned to supervise and support the foster parent, as the case may be, shall assess whether any changes or updates to the plan are required and document the following: <ul style="list-style-type: none"> a) the specific training and continuous learning programs or activities that the foster parent has completed; and, b) the specific training and continuous learning programs or activities that the foster parent plans to complete. <p>Any changes or updates made to the foster parent learning plan shall be documented on the plan together with dates of the changes or updates and signatures of the persons involved in the review.</p>
<p>Additional requirements – Foster Parent Learning Plan Reviews</p>	<p>In addition to the review described above, it is proposed that the regulation be amended to include requirements for review of the foster parent learning plan at the following times:</p> <ol style="list-style-type: none"> 1) <u>Review of the Foster Parent Learning Plan</u> <p>The learning plan shall be reviewed by the licensee or a person designated by the licensee in consultation with the foster parent at the following times:</p>

	<ul style="list-style-type: none"> a) Prior to a foster child being placed with the foster parent or parents. b) Annually, as part of the annual review of the foster home required pursuant to section 123 of O. Reg. 156/18. c) As soon as possible after a material change in circumstances occurs that necessitates a review of the foster parent learning plan.
<p>124. A foster care licensee shall maintain a written file for the foster parent or parents approved to provide foster care under the authority of the licensee’s licence, and the written file shall include the following information:</p> <ul style="list-style-type: none"> 1. The assessment of the foster parent or parents and their home under section 121. 2. A copy of each foster care service agreement between the licensee and the foster parent or parents. 3. A copy of any review under section 123, signed by both the licensee and the foster parent or parents. 4. A record of any review, including the results of the review, regarding a concern or complaint respecting a foster parent. 	<p>It is proposed that this provision be amended to include:</p> <ul style="list-style-type: none"> 1) <u>Records</u> <ul style="list-style-type: none"> a) The foster parent learning plan and any revised versions of that plan b) Any documentation demonstrating the foster parent’s engagement in and completion of activities set out in the learning plan, including records of any training completed by the foster parent.

Proposed Minister’s Directive on Training for Foster Parents

Note: The information below is proposed for inclusion in a proposed Minister’s Directive setting out requirements for foster parent training:

This policy directive is proposed pursuant to Section 252 of the *Child, Youth and Family Services Act, 2017* (CYFSA) which sets out the authority of the Minister to issue directives to residential licensees with respect to any prescribed matter.

Training on the provision of residential care under the authority of a licence issued under Part IX of the CYFSA (Residential Licensing) is one such prescribed matter for which directives may be issued (para. 2 of s. 115 of O. Reg. 155/18 under the CYFSA).

This proposed directive sets out requirements specific to training on the provision of foster care. Foster care licensees must ensure that these requirements are met before approving a person to provide foster care under the authority of the licensee’s foster care licence.

The proposed directive includes rules specific to training that must be completed and timelines for completion of the training for prospective foster parents and those that are currently approved to provide foster care by the foster care licensee.

Note that the training requirements proposed in this directive would not constitute an exhaustive list of training that should be completed by foster parents prior to providing foster care. Foster care licensees should determine support services and training to be provided by the licensee to the foster parent pursuant to O. Reg. 156/18 under the CYFSA, which may require training on topics not covered by the requirements set out below in order to promote the best interests, protection and well being of foster children receiving care under the authority of the licensee's foster care licence.

Note: Societies should review this proposed directive together with Ministry Policy Directive CW 003-20: Approved Tools for Caregiver Assessment and Pre-service Training, and for Plan of Care Development.

Training Requirements for Foster Parent Applicants:

As part of the foster parent approval process set out in section 121 of O. Reg. 156/18 under the CYFSA, it is proposed that foster care licensees ensure that persons who seek to be approved by a foster care licensee to provide foster care complete the following training prior to approval:

1. The Parent Resources for Information, Development and Education (PRIDE) pre-service training **or** Strong Parent Indigenous Relationships Information Training (SPIRIT)
2. Valid certification in Standard First Aid, including infant and child CPR issued by a training agency approved by the Workplace Safety and Insurance Board.
3. Training on First Nation, Inuit and Métis cultural competency* (minimum 8 hours in length):
 - a) Training must be interactive and provide foster parent applicants [or foster parents] with information and skills on how to recognize and support the cultures, heritages, traditions, connection to community and concept of the extended family of the First Nations, Inuit or Métis children that could be placed in their homes
 - b) Training must include the following themes:
 - Anti-racism, anti-oppression, personal biases,
 - The history, impacts and intergenerational effects of colonialism, such as the residential school system,
 - The foundational differences between First Nation, Inuit and Métis and western world views
 - c) Selected training must have been developed by or co-developed with a band as defined under the *Child, Youth and Family Services Act, 2017* or First Nation, Inuit or Métis community.

4. Training on providing trauma-informed care (minimum 4 hours in length)
 - a) Training must provide knowledge and skills for foster parent to provide trauma-informed care to the children placed in their home.
 - b) Training must include themes related to:
 - Trauma theory: Shifting the focus from “what’s wrong with you?” to “What’s happened to you?” by addressing the following topics:
 - Understanding the impact of trauma and paths to recovery;
 - Recognizing signs and symptoms of trauma in children and youth; and
 - Learning how to actively resist re-traumatization.
 - Promoting and emphasizing a foster child’s well-being
 - c) Training must be developed by or co-developed with an organization with expertise in child and youth mental health.

It is proposed that a foster care licensee be prohibited from permitting a person to receive a child for the purposes of providing foster care under the authority of the licensee’s licence unless they have completed the training described above.

It is proposed that all foster parents approved under the authority of their licence to provide foster care as of [date to be determined], have completed all training as described in section 2, 3 and 4 above within the previous 24 months from [date to be determined]

* **Exemption:** The ministry is considering proposing an exemption from the First Nation, Inuit and Métis cultural competency training for members of a band or First Nations, Inuit or Métis community.

Section G. Other Minor Enhancements

The enhancements being proposed below are administrative in nature. They are intended to enhance clarity of certain requirements that must be met by service providers under the CYFSA.

It is important to note that some of the proposed changes below relate to the use of physical and mechanical restraint and are corresponding enhancements to align with the proposed changes to O. Reg. 155/18 in those areas (please see *Summary of Proposed Changes to Ontario Regulation 155/18 – Lieutenant Governor in Council’s Regulation* for more details).

Current Requirements	Proposed Changes
<p>82. (1) A licensee who operates a children’s residence shall maintain and keep up to date written policies and procedures for the residence respecting,</p>	<p>It is proposed that this provision be amended to include:</p> <ol style="list-style-type: none"> 1. “Once every 12 months from the last assessment” instead of “annually”.

<p>...</p> <p>(g) a health program for residents that provides for,</p> <p>...</p> <p>iv. assessments of the residents' general health, vision, hearing and oral health, at least annually,</p> <p>...</p> <p>(2) The licensee shall ensure that a copy of the policies and procedures is kept in the children's residence in a place that is accessible to staff.</p>	<p>2. Require licensees to ensure that the policies and procedures comply with any applicable requirements under the CYFSA or its regulations.</p> <p>3. Require licensees to ensure that all staff persons comply with all applicable policies and procedures established pursuant to the existing section 82(1).</p>
<p>83. (1) A licensee who operates a children's residence shall ensure that each person employed to work in the children's residence,</p> <p>a) receives an orientation to the policies and procedures of the residence, including the policies and procedures respecting emergency situations, within 30 days after commencing their employment in the residence; and</p> <p>b) reviews the policies and procedures at least once in every year following the year in which the person began working in the residence.</p> <p>(2) The licensee shall keep a record of any orientation provided to a person employed in the children's residence in accordance with subsection (1) and the record shall include the signature of the person who received the orientation.</p>	<p>It is proposed that this provision be amended to include:</p> <p>1. Policies and procedures are reviewed "at least once in every 12 months" instead of "at least once in every year following the year in which the person began working in the residence".</p> <p>2. Policies and procedures also need to be reviewed by each person employed to work in the children's residence any time they are revised and before the revisions are implemented.</p>
<p>90. A licensee who operates a children's residence shall ensure that, upon admission of a child or young person to the residence, the child or young person,</p> <p>a) receives an orientation to,</p> <p>i. the residence and the program provided in the residence, and</p> <p>ii. the residence's fire and emergency procedures plan; and</p> <p>b) is informed of the procedures that exist for a resident to express concerns or make complaints.</p>	<p>It is proposed that this provision be amended to include:</p> <p>1. The orientation a child or young person receives must be in a language suitable to their understanding and in accordance with their age and maturity.</p> <p>2. The child or young person must be informed if the licensee has a policy that prohibits the use of physical restraint pursuant to subsection 11(2) of Ontario Regulation 155/18 under the CYFSA.</p> <p>3. If the licensee uses or permits the use of physical restraint, the child or young person must be informed of the following:</p> <p>a) The meaning of "physical restraint" pursuant to the CYFSA; and</p>

Please refer to page 58 for current requirements.

- b) The rules governing the use of physical restraint under the CYFSA and its regulations including the circumstances under which the child or young person may be restrained and the procedures that must be followed following use of physical restraint on the child or young person.
4. If the licensee is authorized to use mechanical restraints on the child or young person pursuant to the CYFSA and its regulations, the child or young person must be informed of the following:
 - a) The meaning of “mechanical restraint” pursuant to the CYFSA; and
 - b) The rules governing the use of mechanical restraint under the CYFSA and its regulations, including the circumstances under which the child or young person may be restrained and the procedures that must be followed following use of mechanical restraints on the child or young person.
 5. Require the licensee to provide the information under s. 90 to the child or young person again (in addition to providing it “upon admission”) as “refreshers”:
 - a) 7 days after the child or young person’s placement in residential care.
 - b) Three months after the child or young person’s placement in residential care.
 - c) Six months after the child or young person’s placement in residential care and every six months after that.
 - d) Any time the child or young person requests that the information be provided to them.
 - e) Any time that, in the opinion of the licensee, the information should be reviewed with the child or young person.
 6. Require the licensee to document the following information in the file of the child or young person:

<p>Please refer to page 58 for current requirements.</p>	<ul style="list-style-type: none"> a) The date that the child or young person receives the orientation required under s. 90. b) The dates that the child or young person received a “refresher” of the information required under s. 90. c) Confirmation in writing that the child or young person understood the information each time it was provided.
<p>97. A licensee who operates a children’s residence shall comply with the following rules in operating the residence:</p> <p>...</p> <ul style="list-style-type: none"> 9. The maximum temperature of water in a washroom or bathroom in a children’s residence shall not exceed 49 degrees Celsius. 	<p>It is proposed that this provision be amended to include:</p> <ul style="list-style-type: none"> 1. The temperature of hot water in a children’s residence must be at least 40 degrees Celsius and cannot exceed 49 degrees Celsius.
<p>119. (1) A foster care licensee shall develop procedures for the selection, development and management of the foster homes used by the licensee to provide residential care.</p> <p>(2) A foster care licensee shall maintain written policies and procedures for the foster homes used by the licensee to provide residential care respecting,</p> <p>...</p> <ul style="list-style-type: none"> k) the responsibilities and obligations of the parents of the child, the foster parent or parents and persons assigned by the licensee to supervise and support the foster parent or parents with respect to the provision of health care to children placed in the foster home, including, <p>...</p> <ul style="list-style-type: none"> iii. an annual assessment of the health, vision, dental and hearing condition of the children. 	<p>It is proposed that this provision be amended to include:</p> <ul style="list-style-type: none"> 1. “At least once every 12 months from the last assessment” instead of “an annual assessment”. 2. Require foster care licensees to ensure that the policies and procedures comply with any applicable requirements under the CYFSA or its regulations. 3. Require foster care licensees to ensure that all foster parents comply with all applicable policies and procedures established pursuant to subsection (2).
<p>121.</p> <p>...</p> <p>(10) If the proposed foster parent or parents have been approved to provide foster care under subsection (6), the licensee or person designated by the licensee shall sign the assessment and ensure that the assessment is also signed by the proposed foster parent or parents.</p>	<p>It is proposed that this provision be amended to include:</p> <ul style="list-style-type: none"> 1. The assessment that is signed by the licensee or person designated by the licensees and the proposed foster parent(s) is the completed, or final, version.

<p>123. ...</p> <p>(6) After completing the activities described in subsections (3) to (5), the licensee or person designated by the licensee shall prepare a written assessment respecting the ongoing suitability of the foster parent or parents to provide foster care and of the foster home as a placement for a foster child and meet with the proposed foster parent or parents in order to communicate the results of the assessment.</p>	<p>It is proposed that this provision be amended to include:</p> <ol style="list-style-type: none"> 1. The written assessment that is prepared by the licensee or person designated by the licensee must be completed, or the final version, before it is communicated with the proposed foster parent(s). 2. The written assessment must also be signed by the proposed foster parent(s).
<p>130. A foster care licensee or placing agency that places a child in foster care shall,</p> <ol style="list-style-type: none"> a) arrange for a person known to the child or, if the licensee or placing agency or a person designated by the licensee or placing agency approves another person, that person, to accompany the child to the foster home on the date on which the child is placed in the foster home; and b) ensure that the foster parent or parents receive, in writing and at the time of placement, information about the child's health and medical and dental history necessary for the care of the child, including specification of any medical disorders, disabilities, special needs, allergies or limitations on activity. 	<p>It is proposed that this provision be amended to include:</p> <ol style="list-style-type: none"> 1. A foster care licensee must ensure that, upon placement in the foster home, the foster child receives an orientation, in language suitable to their understanding and in accordance with their age and maturity, to, <ol style="list-style-type: none"> a) The foster home and any program provided in the foster home. b) The procedures that exists for a foster child to express concerns or make complaints. c) The procedures to be followed when a fire alarm is activated or a fire is discovered, including their roles and responsibilities. d) If the foster care licensee has a policy that prohibits the use of physical restraint pursuant to subsection 11(2) of Ontario Regulation 155/18 under the CYFSA. e) If the foster care licensee uses or permits the use of physical restraint, the foster child must be informed of the following: <ul style="list-style-type: none"> ▪ The meaning of "physical restraint" pursuant to the CYFSA; and ▪ The rules governing the use of physical restraint under the CYFSA and its regulations including the circumstances under which the foster child may be restrained and the

Please refer to pages 60 and 61 for current requirements.

procedures that must be followed following use of physical restraint on the foster child.

f) If the foster care licensee is authorized to use mechanical restraints on the foster child pursuant to the CYFSA and its regulations, the foster child must be informed of the following:

- The meaning of “mechanical restraint” pursuant to the CYFSA; and
- The rules governing the use of mechanical restraint under the CYFSA and its regulations, including the circumstances under which the foster child may be restrained and the procedures that must be followed following use of mechanical restraints on the foster child.

2. Require the foster care licensee to provide the information above to the child again (in addition to providing it at the time of placement) as “refreshers”:
 - a) 7 days after the child’s placement in residential care.
 - b) Three months after the child’s placement in residential care.
 - c) Six months after the child’s placement in residential care and every six months after that.
 - d) Any time the child requests that the information be provided to them.
 - e) Any time that, in the opinion of the licensee, the information should be reviewed with the child.
3. Require the licensee document the following information in the file of the child:
 - a) The date that the child receives the orientation (described above)
 - b) The dates that the child received a “refresher” of the information (described above)

	c) Confirmation in writing that the child understood the information each time it was provided.
131. ... (3) The licensee shall review the foster care service agreement at least once in every year and as otherwise requested by a foster parent.	It is proposed that this provision be amended to include: 1. "Every 12 months" instead of "in every year".

Conclusion

All interested parties are encouraged to provide feedback on the proposed regulatory provisions and proposed Minister’s directive. MCCSS values the unique and diverse perspectives from children and youth, families and broader sector partners.

Please provide MCCSS with your comments by email to qualitystandardsframework@ontario.ca by no later than October 4, 2021. Please reference the section letter, proposal number and page number (e.g., Section A – Plan of Care, s. 91(1), p. 8) in your feedback for clarity.

Please note that you will not receive a formal response to your comment. MCCSS will review all feedback received and consider revisions to the proposed regulations and/or directives as appropriate.

Thank you for taking the time to review this document and provide feedback.