

## CHILD CARE MIGRATION FROM MCFD TO MINISTRY OF EDUCATION

### Introduction

The new government's mandate letters instruct many ministries to prepare for the transition of child care from MCFD to the Ministry of Education by 2023. This move has been advocated for by child care advocates for several years. And while there are benefits to such a change, there are also potential complications: how to retain a play-based approach within the Early Years, how to ensure trauma-informed practice, and (most urgently) how to incorporate decolonizing practices (schools are notably not a safe place for many Indigenous peoples). Most importantly, discussions regarding this move need to include the providers of child care within the community social services sector.

### Background

- [MCFD CYS Inclusive Childcare Framework findings](#)
- [Childcare Advocates of BC A Plan for School-Aged Child Care in Schools](#)
- [\\$10aDay Child Care Plan](#)
- [MCFD Aboriginal Policy and Practice Framework](#)

### Current Considerations

- **MCFD Mandate Letter includes:** Work with the Minister of Education and the Minister of State for Child Care to integrate child care into the broader learning environment by developing a strategy to move delivery of child care into the Ministry of Education by 2023.
- **MAEST Mandate letter includes:** Support the work of the Minister of State for Child Care to implement and enhance the Early Care and Learning Recruitment and Retention Strategy.
- **Minister of State for Childcare Mandate letter includes:** Work with the Minister of Education and the Minister of Children and Family Development to integrate child care into the broader learning environment by developing a strategy to move delivery of child care into the Ministry of Education by 2023, and Support the Minister of State for Child Care and the Minister of Education to work toward providing universal access to before and after school care, prioritizing care on school grounds so parents know their children are safe at one place for the full work day.
- **Minister of Education Mandate letter includes:** Work with the Minister of Children and Family Development and the Minister of State for Child Care to integrate child care into the broader learning environment by developing a strategy to move delivery of child care into the Ministry of Education by 2023; Support the Minister of State for Child Care and the Minister of Children and Family Development to work toward providing universal access to before and after school care.



## RURAL, INDIGENOUS COMMUNITIES HAVE ACCESS TO CULTURALLY SAFE CARE

### Introduction

We know that effective services are those that are designed and provided closer to home, within communities, and based on local knowledge, history, culture, and geography—allowing people to remain connected to their family and support systems. The pandemic has demonstrated the importance of a strong social care system while also uncovering the gaps that still exist: the need to decolonize our systems and services, increase availability of specialized services, health care, training and education opportunities closer to home; and improve connectivity. Given the government's recent commitment to addressing systemic discrimination and putting people first this is a great opportunity to act together on the "what, why, and how" of those solutions.

### Background

- [BC Representative for Children and Youth Report, \*Detained: Rights of children and youth under the Mental Health Act\*](#)
- [BC Legislation, Declaration on the Rights of Indigenous Peoples Act Bill 41-2019](#)
- [Re-Imagining Community Inclusion Report](#)
- [Rural Development in BC What We Heard Report Jan 2019](#)

### Current Considerations

- **MCFD mandate letter includes:** Support families involved with the child welfare system by focusing on family preservation and keeping children and youth connected to their communities and culture, while working to ensure that in cases where children and youth come into care, consideration of their individual needs determine their placement.
- **Ministry of Health mandate letter includes:** Work with rural and Indigenous communities to ensure the success of our rural collaborative framework to deliver more immediate and culturally safe care closer to home; With support from the Parliamentary Secretary for Anti-Racism Initiatives, draw from the work of the independent investigation into systemic Indigenous-specific racism in health care in B.C. to address systemic racism in the health care system, including by leading work with health employers and unions to prioritize the hiring of a health care workforce that better represents the diverse communities it serves.
- **Attorney General mandate letter includes:** Work with Indigenous communities and the BC First Nations Justice Council to advance the First Nations Justice Strategy and improve access to culturally appropriate justice, including continuing to establish Indigenous Justice Centres.

## HEALTHY SUPPORTS AND TRANSITIONS WHEN CHILDREN IN CARE “AGE OUT”

### Introduction

For children in care, turning 19 often leads to a reduction in supports and services and new, additional challenges navigating other formal systems of support and administration. Work has been undertaken to address the challenges of “aging out” of care, yet this population of young people continue to face pervasive challenges related to precarious housing, poverty, and lack of access to health and social services. One option is to raise the age under which young people can continue to receive supports (more and more and more young people not in care are being supported by their families well into their twenties). At the same time, we must also look at the ways in which the formal care system prepares (or fails to prepare) young people for discharge when they come of age and how we can ensure that the supports they need are firmly in place.

### Background

- [BC Representative for Children and Youth Report: A Parent's Duty: Government's obligation to young people transitioning into adulthood](#)
- [Federation/MCFD 2011 Residential Review Final Report](#)
- [McCreary Centre Society Report, Supports in the Spotlight](#)

### Current Considerations

- **MCFD mandate letter includes:** Build on our expanded supports for young adults in care, with particular attention to supporting the transition to independence and ensuring supports reach all youth; Support the work of the Minister of Advanced Education and Skills Training to expand tuition waivers to all former youth in care, regardless of age.

## COORDINATION OF (AND ACCESS TO) YOUTH HARM REDUCTION SERVICES

### Introduction

Last summer legislation was introduced (and then halted) to amend the *Mental Health Act* allowing involuntary care of children and youth deemed to be at risk of severe personal harm or death related to substance use. Previous attempts to create similar legislation has been attempted in the past; however, policy-makers have yet to find a way to balance the human rights of the young people and the desire to keep them safe. Drawing from the information provided by Dr. Paré and within reports by the RCY, this topic will explore what is required to better respond to the needs of children and youth at risk of severe substance-use harm while protecting their human rights and supporting a transition away from risky behaviours.

### Background

- [Representative for Children and Youth \(RCY\) Report, \*Detained: Rights of children and youth under the Mental Health Act\*](#)
- [RCY Statement on the Ministry of Mental Health and Addictions \(MMHA\), August 2020](#)
- [MMHA News Release June 2020: Stabilization care proposed for youth following an overdose](#)
- [Mental Health Amendment Act \(Bill 22\)](#)
- [BC Pediatric Society Mandated Care for Youth with dangerous substance use disorders](#)

### Current Considerations

- Mandate letters of MCFD and MMHA include a commitment to improve coordination of and access to services across the system
- **MCFD mandate letter includes:** Support the work of the Minister of Mental Health and Addictions to continue addressing mental health concerns early by rolling out new mental health and addictions care initiatives for children and youth, and ensure these programs are aligned with and support the work of the Minister of Mental Health and Addictions; Support families involved with the child welfare system by focusing on family preservation and keeping children and youth connected to their communities and culture, while working to ensure that in cases where children and youth come into care, consideration of their individual needs determine their placement.
- **MMHA Mandate letter includes:** Expand the availability of treatment beds for people by building new treatment, recovery, detox and after-care facilities across the province with some beds specifically for British Columbians under age 24.

## BUILDING A MORE COLLABORATIVE RELATIONSHIP BETWEEN THE COMMUNITY SOCIAL SERVICES SECTOR AND GOVERNMENT

### Introduction

In 2020, all of the mandate letters handed to BC's ministers included direction from the Premier to "build thoughtful and sustained relationships through public and stakeholder engagement plans that connect with people to incorporate their perspectives early in the policy development process. These plans must include measurable outcomes and ensure active dialogue and ongoing outreach in your ministry's actions and priorities." This has long been something Federation members have advocated for, in recognition that the majority of government funded social services are delivered by community social service organizations. This relationship, like all relationship, has two sides. How can we strengthen and support our working relationships with our government colleagues?

### Background

- [Social Services Sector Roundtable \(SSRT\) overview website](#)

### Current Considerations

- **MCFD mandate letter includes:** Support families involved with the child welfare system by focusing on family preservation and keeping children and youth connected to their communities and culture, while working to ensure that in cases where children and youth come into care, consideration of their individual needs determine their placement.
- **All ministry mandate letters include:** Reconciliation is an ongoing process and a shared responsibility for all; requires working with Indigenous peoples as they move toward self-determination; every ministry must focus on creating opportunities for Indigenous peoples to be full partners in our economy; British Columbians expect their elected representatives to work together to advance the broader public good despite their partisan perspectives. That means seeking out, fostering and championing good ideas, regardless of their origin.

## INDIGENOUS CHILD WELFARE LEGISLATION: ACTING ON UNDRIP IN BC

### Introduction

Within the last five years, the province of BC has implemented legislation related to reconciliation and reparations to Indigenous peoples and committed to address systemic racism and to implement decolonizing practices within the child welfare system. With such high-level promises, legislative changes, and corresponding commitments within social care ministries to incorporate a reconciliation lens into service provision, now is the time to work together to identify what needs to happen to ensure the social care system demonstrates cultural safety and de-colonizing and trauma-informed approaches so that our sector can live into BC's commitment to UNDRIP.

### Background

- [BC Legislation, Declaration on the Rights of Indigenous Peoples Act Bill 41-2019](#)
- [BC government amendments to the Child, Family and Community Service Act \(CFCSA\) \(Bill 26\)](#)
- [Recognition & Reconciliation Protocol on First Nations Child, Youth & Families](#)
- [Aboriginal Policy and Practice Framework \(APPF\)](#)
- [BC Representative for Children and Youth Report, Detained: Rights of children and youth under the Mental Health Act](#)
- [BC Representative for Children and Youth's statement on birth alerts \(Jan 2021\)](#)
- [Illuminating Service Experience: A Descriptive Analysis of Injury and Death Reports for First Nations Children and Youth in B.C., 2015 to 2017](#)
- [A Way to Cope – Exploring non-suicidal self-injuries in B.C. youth](#)
- [Métis child and youth injuries and deaths focus of new collaborative report](#)

### Current/Considerations

- **MCFD mandate letter includes:** Continue to work with Indigenous partners and the federal government to reform the child welfare system, including implementing the new federal Act respecting First Nations, Inuit and Métis children, youth and families and the principles of the Declaration on the Rights of Indigenous Peoples Act, and continuing to reduce the overrepresentation of Indigenous children in care.

## MULTI-DISCIPLINARY TEAMS: PRIVACY AND SHARING INFORMATION

### Introduction

Federation members support individuals and families facing complex issues. With this complexity often comes the need to work in multi-disciplinary teams. But this can get tricky when there are conflicting rules and practices around information sharing and privacy. Managing personal and sensitive information in a mindful and respectful manner is vital to good service delivery, but so too is the ability to work across teams and organizations. Many Federation members have been discussing how this affects services for young people in care. Some families feel they don't receive adequate information about the health needs of young adults in their lives who are engaged in risky behaviours. These issues, combined with the emphasis on multi-disciplinary teams in *Pathways to Hope*, it seems time to reconsider how privacy and information sharing can work hand in hand with a multi-disciplinary team approach to service delivery.

### Background

- [Ministry of Mental Health and Addictions: Pathways to Hope](#)

### Current Considerations

- Legislation as it relates to privacy and information sharing (BC has some of the most stringent legislation in this regard); and professional roles and responsibilities.
- **MMHA Mandate letter includes:** (1) With support from the Minister of Public Safety and Solicitor General, lead work to invest more in community-based mental health and social services so there are more trained front-line workers to help people in crisis, and free up police to focus on more serious crimes; (2) Support communities in addressing street disorder and public safety concerns by expanding mental health intervention teams like the six new Assertive Community Treatment (ACT) teams recently announced for communities experiencing increased challenges with vulnerable residents; (3) With support from the Attorney General and Minister responsible for Housing and the Minister of Health, lead work to provide an increased level of support—including more access to nurses and psychiatrists—for BC's most vulnerable who need more intensive care than supportive housing provides by developing Complex Care housing.
- **Ministry of Education mandate letter includes:** Support the work of the Minister of Mental Health and Addictions to provide dedicated mental health teams in school districts.
- **Ministry for Public Safety and Solicitor General mandate letter includes:** (1) Support the Minister of Mental Health and Addictions to invest in community-based mental health and





social services so there are more trained front-line workers to help people in crisis, and free up police to focus on more serious crimes; (2) Work with the Minister of Mental Health and Addictions and interested municipalities to expand the successful 'situation table' model that connects front-line workers from different health, safety, and social service sectors to identify and help vulnerable people; (3) Support the work of the Parliamentary Secretary for Seniors' Services and Long-Term Care to work with community groups and the BC Seniors Advocate to develop a made-in-BC Silver Alert system to help assist first responders in locating missing seniors, particularly those with dementia and Alzheimer's disease.

## COMMUNITY-BASED MENTAL HEALTH SUPPORT

### Introduction

When it comes to substance use challenges, BC has struggled to provide services to children and youth that are accessible (when needed, in their communities) and appropriate (culturally safe, trauma-informed, family-centred). The Ministry of Mental Health and Addictions' *Pathways to Hope* report currently guides BC's approach to mental health and addictions. But community social service organizations play a key role in the delivery of these supports. Can a one-model delivery system serve the entire province? Is there too heavy a focus on increasing school-based service provision and primary care units? How might we enhance existing community-based services?

### Background

- [COVID-19 and the Impact on Children's Mental Health](#)
- [A Way to Cope: Exploring non-suicidal self injury in B.C. youth](#)
- [Children and Youth Mental Health Pathways to Hope](#)

### Current Considerations

- Mandates Letters of both Ministers of MMHA and MCFD direct them to work together (in alignment with the work of MMHA) "to continue addressing mental health concerns early by rolling out new mental health and addictions care initiatives for children and youth."
- **MCFD mandate letter includes:** Continue to work with Indigenous partners and the federal government to reform the child welfare system, including implementing the new federal Act respecting First Nations, Inuit and Métis children, youth and families and the principles of the Declaration on the Rights of Indigenous Peoples Act, and continuing to reduce the overrepresentation of Indigenous children in care.
- **Minister of Mental Health and Addictions mandate letter includes:** (1) With support from the Minister of Public Safety and Solicitor General, lead work to invest more in community-based mental health and social services so there are more trained front-line workers to help people in crisis, and free up police to focus on more serious crimes; (2) Support communities in addressing street disorder and public safety concerns by expanding mental health intervention teams like the six new Assertive Community Treatment (ACT) teams recently announced for communities experiencing increased challenges with vulnerable residents.
- **Minister of Education Mandate letter includes:** (1) Support the work of the Minister of Mental Health and Addictions to provide dedicated mental health teams in school districts; (2) Build on investments into mental health supports for students and staff to better support children and youth with special needs and their families.