

Ministry of Children's Services' Response to the Public Fatality Inquiries – DB, TDM, TCM and TMB

On April 2, 2021, Fatality Inquiry Reports were released concerning the September 21, 2017 death of 17-year-old D.B., the March 9, 2017 death of 17-year-old T.D.M, the June 11, 2017 death of 16-year-old T.C.M. and the August 24, 2017 death of 15-year-old T.M.B. The purpose of the inquiries, conducted by the Honourable Provincial Court Judge Jacqueline E. Schaffter, was to review the circumstances under which the deaths occurred and to share any recommendations for the prevention of similar deaths. The *Child, Youth and Family Enhancement Act* (CYFEA) requires a public response from Children's Services (CS) regarding recommendations made to the ministry through fatality inquiries.

The death of a child is devastating for family, friends, community, and others involved with the child and family. Our thoughts are with those who continue to grieve for D.B., T.D.M., T.C.M. and T.M.B.

The inquiry report makes three recommendations directed to CS.

CS' response includes information gathered from the following sources:

- a review of existing policies, and
- a review of current ministry initiatives, practice, and program directions related to issues identified in the report.

We welcome the recommendations laid out in these Fatality Inquiry Reports and thank the Honourable Provincial Court Judge Jacqueline E. Schaffter for working on behalf of vulnerable children, youth, and families in Alberta.



Recommendation	Ministry Response	Actions Planned or Underway
<p><i>1) Government ministries should investigate and actively facilitate the operation of early intervention services in rural areas.</i></p>	<p>Children’s Services (CS) accepts this recommendation. CS is committed to ensuring there is prevention and early intervention programming available to rural areas. To that end, the ministry established the Family Resource Network (FRN) program in 2020, whereby prevention and early intervention services are delivered through community-based agencies across the province. CS considers this recommendation met.</p>	<p>Through FRNs, a full continuum of prevention and early intervention services to children, youth, and families are available across Alberta including remote and rural areas. The 70 FRNs across the province provide universal, targeted and intensive programs, services and supports for children and youth up to age 18 and their families/caregivers. Approximately half of these FRNs serve rural communities including eight that support the Métis Settlements and two located on reserve at Siksika and Stoney Nakoda.</p> <p>Prevention and early intervention programming focuses on strengthening parenting and caregiving knowledge, social support, coping and problem-solving skills, access to community supports and resources, improving child and youth development, building resiliency and fostering well-being.</p> <p>The Early Intervention in First Nation Communities Grant Program supports the delivery of prevention, early intervention and youth support services in 14 different First Nation communities across Alberta. These programs focus on improving child development and well-being among Indigenous infants, children, youth and families.</p>
<p><i>2) Brain Development and training in the trauma informed approach should be maintained and enhanced.</i></p>	<p>CS accepts this recommendation.</p>	<p>Prevention and Early Intervention:</p>

		<p>As per the FRN grant agreement, all agencies ensure staff providing direct services to children, youth and their families have Brain Story certification offered by the Alberta Family Wellness Initiative.</p> <p>All FRN staff who provide direct services have one year to complete certification from their start date with the agency. FRN agencies track the completion rates of their staff to ensure the agency is complying with the grant agreement. CS does not track agency staff completion.</p> <p>Child Intervention:</p> <p>CS has integrated trauma-informed approaches in to many aspects of service delivery, including policy and practice guidance. Child Intervention (CI) Practitioners, caregivers and service providers receive training on trauma and brain development. All CI training is maintained and enhanced with consultation from subject matter experts.</p>
<p><i>3) Children’s Services should review the Child Youth and Family Enhancement Act or consider new legislation that would better able the state to intervene when it is the child’s substance abuse that is putting them at risk.</i></p>	<p>CS does not accept this recommendation.</p> <p>This recommendation is outside CS’ mandate to intervene when children and youth are at risk of abuse and/or neglect.</p> <p>Not all children and youth who experience addiction are in</p>	<p>The Enhancement Policy Manual provides specific guidance to front line staff on supporting children and youth receiving services using opioids, which includes:</p> <ul style="list-style-type: none"> • the signs and symptoms of an overdose; • case planning requirements, such as medical care and alerts on the data system; • direction as to how to respond after an overdose or suspected overdose; and

	<p>need of intervention by CS. Current legislation allows for intervention when a guardian is found unable or unwilling to adequately protect their child from the risks associated with substance abuse.</p> <p>Alberta Health is responsible for the <i>Protection of Children Abusing Drugs (PChAD) Act</i>, which is the legislation that allows for guardian intervention when a child's substance abuse is putting them at risk.</p>	<ul style="list-style-type: none"> links to Alberta Health Services (AHS) resources. <p>In February 2021, CI introduced mandatory Opioid and Substance Use Awareness Training for all CI staff. The intent of this training is to better equip CI staff with the tools to recognize and respond effectively when children/youth are engaging in substance abuse.</p> <p>When youth involved with CI are experiencing substance abuse issues, referrals are made to addiction experts such as AHS for formal mental health and addictions assessment, diagnosis and treatment.</p> <p>CS is aware of recent enhancements to the Alberta Health's PChAD program, and will continue to work collaboratively with AHS to support children and youth in care who are abusing substances.</p>
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