

Child Welfare Service Performance Indicators – Family & Children’s Services County of Renfrew Permanency Outcome – The Days of Care, by Placement Type

Definition:

For all children admitted to the care of a Children’s Aid Society, the days of care provided in the fiscal year, by placement type (i.e., family-based care versus non-family-based care).

Why is this Measure Important?

Family-based care is the preferred placement setting for the majority of children in care. Children placed in family settings have greater opportunities to form a connection with consistent caregivers and to experience the benefits associated with membership in a family. The research tells us that children placed in family-based care are more likely to achieve permanency when they exit care, i.e., be discharged to parents or family including adoptive families or legal custody arrangements, compared to children in group care.

Limitations of the Data

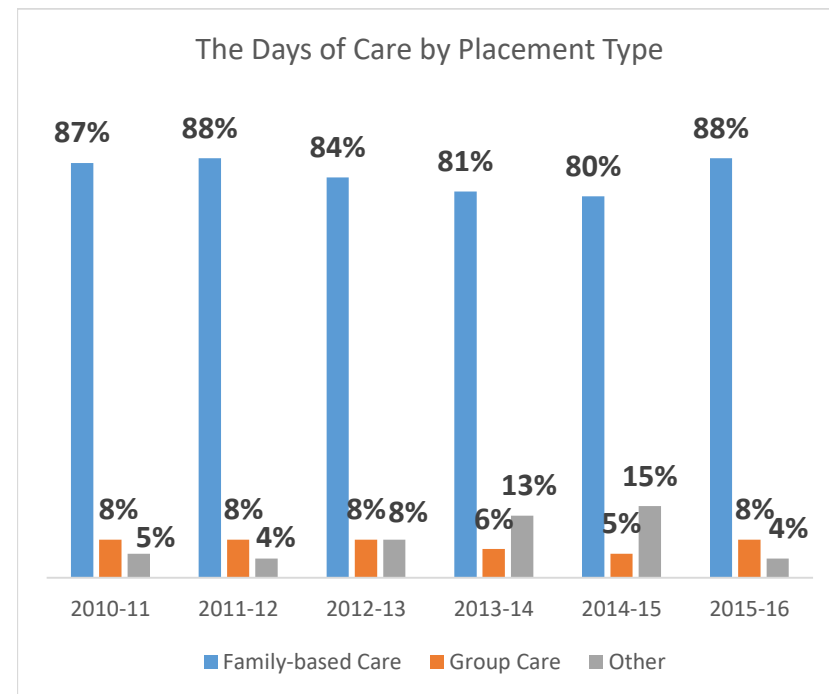
Data illustrate the number of days of care provided by a Children’s Aid Society rather than the proportion of children by placement type. There are variations across Societies in how placement types are classified (i.e., as family versus non-family based care).

Context:

The focus of Children’s Aid Societies is to keep children safe in their home of origin with necessary supports for their family. When a child cannot remain safely in their home of origin, a Children’s Aid Society provides an alternative quality of care such as living with Kin or Foster Care. There are approximately 10% fewer children coming into care today than there were five years ago. On any given day in Ontario, there are approximately 14,500 children and youth in the care of the Province’s Children’s Aid Societies. A prominent focus of the Ministry of Children & Youth Services Transformation Agenda was to expand family-based care options for children to include and value the participation of extended family members and significant individuals in the child’s community.

Key Considerations:

While a high rate of family-based care is desirable, selection of a placement setting should be first and foremost influenced by the needs of the child and the fit to the placement. Given the mandate of a Children’s Aid Society, and the nature of the challenges experienced by some children and youth, it can be difficult for agencies to recruit and train quality alternative care through Kin arrangements or Foster Parents.



Results:

Family & Children’s Services County of Renfrew provide between 80-88% days of care that are family-based in each of the years under review.

These data are compiled and analyzed by the Ontario Association of Children’s Aid Societies through the Ministry Quarterly Reports.

“Other” includes days of care provided for young people who are in care but living independently; or days of care provided through institutions such as hospitals, children’s mental health centers or youth justice facilities.

Child Welfare Service Performance Indicators - Family & Children's Services County of Renfrew

Permanency Outcome – The Time to Permanency

Definition:

For all children admitted to the care of a Children's Aid Society during the fiscal year, the cumulative percentage discharged within a specific time period (i.e., 12 months, 24 months and 36 months since admission).

Why is this Measure Important?

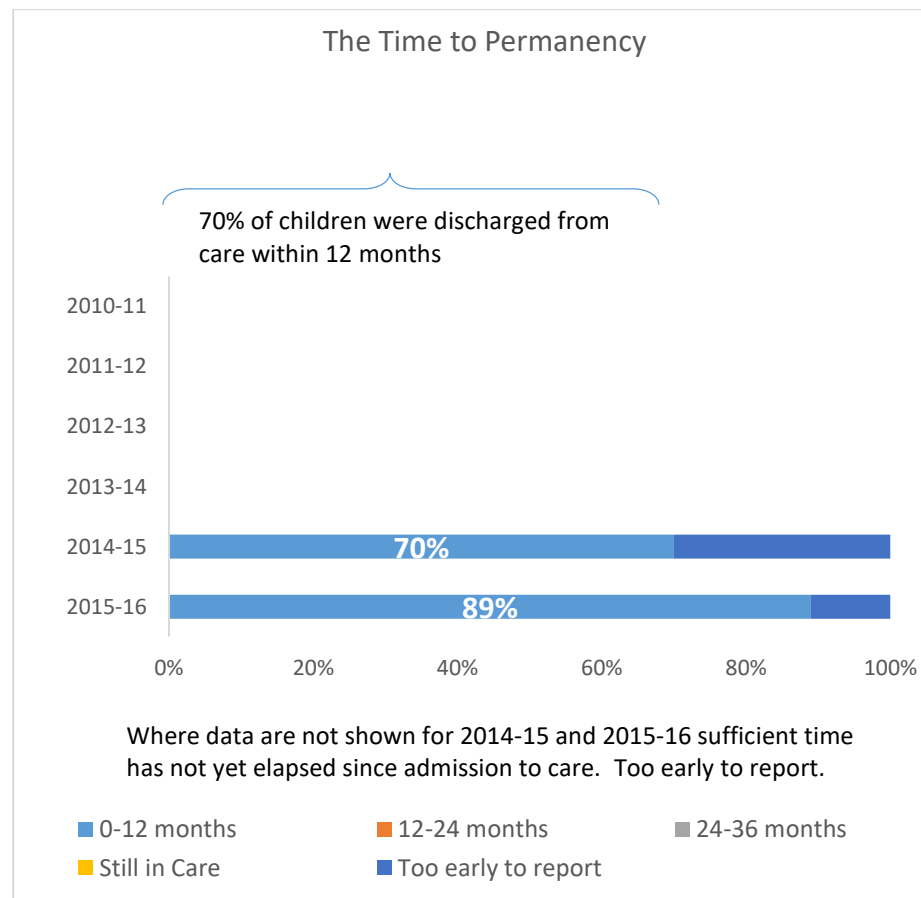
Providing children with permanency in their care promotes healthy development, encourages continuity in relationships, a sense of community and identity. However, for some children reunification with their family of origin is not possible and stable alternatives must be pursued. The child welfare system in Ontario has multiple options through which permanency can be achieved (e.g., reunification with parents, legal custody, and adoption). Permanency planning is a significant focus for children in care, whose permanency status, both legally and psychologically, is uncertain.

Limitations of the Data:

Not all discharges represent permanency achieved; however, this measure is considered a good proxy * for permanency. To understand permanent versus non-permanent exits from care, data by discharge type are required. Customary care (culturally appropriate care arrangements for Aboriginal children) is not included in these data at this time.

Key Considerations:

The timing and nature of permanency may look different for every child depending on the child's needs, family circumstances, court processes, and availability of community service providers. A key factor that influences time to permanency is the child's age at admission. Children who enter care at a young age are more likely to be discharged to certain types of permanency (e.g., adoption) compared to older children. Young children often achieve permanency within shorter timeframes, supported by legislation that limits the allowable cumulative time in short-term care for children under 6 years of age compared to older children. An additional factor that impacts time to permanency is the needs of the child, with more complex needs associated with longer timeframes to achieving permanency. *A proxy measure is an indirect measure that approximates or represents a phenomenon in the absence of a direct measure.



Results:

Data shown above illustrate that of all children admitted into care with the Family & Children's Services of County of Renfrew in 2014-15 and 2015-16, 70-89% exit care within 12 months post-admission as shown by the blue bars. It is too early to report 24 months post-admission and 36 months post-admission.

Child Welfare Service Performance Indicators – Family & Children’s Services County of Renfrew

Well-being Outcome: The Quality of the Caregiver and Youth Relationship

Definition:

The average score for children in care (aged 10-17) from a standard scale that measures a young person’s perception of the quality of the relationship with his or her primary caregiver. The scale measures the child in care’s response to the following four items:

Thinking of your caregiver (female or male):

1. How well do you feel he/she understands you?
2. How much fairness do you receive from him/her?
3. How much affection do you receive from him/her?
4. Overall, how would you describe your relationship with him/her?

Each of these four items is rated from 0 to 2, yielding a composite score with a minimum of 0, and a maximum of 8.

Why Is This Measure Important?

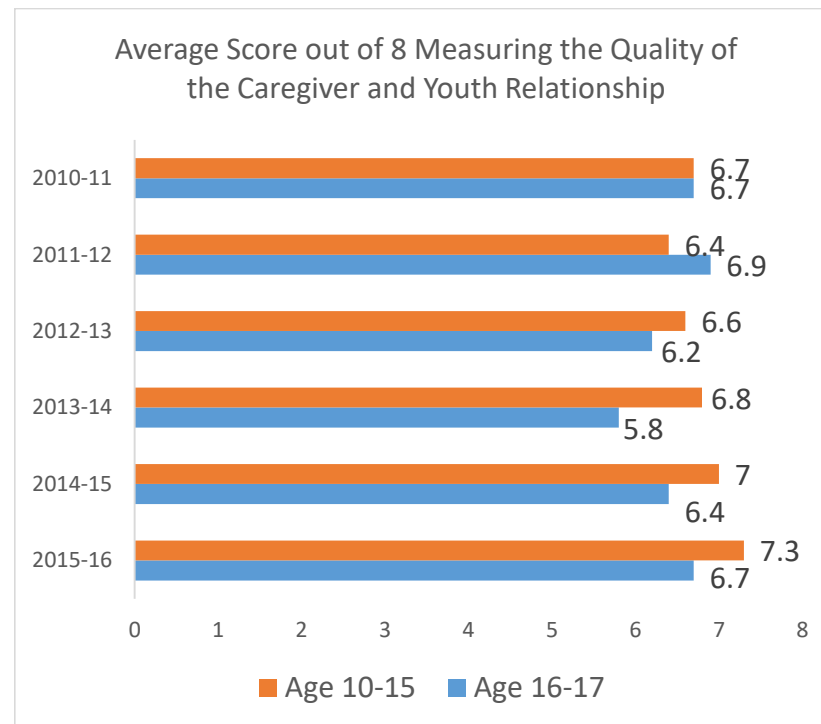
The quality of the caregiver-youth relationship is at the heart of service to children in care. Research demonstrates that a young person’s perception of the quality of his/her relationship with his/her caregiver predicts the following: current happiness; self-esteem; positive behaviour; and placement satisfaction and stability. As scores increase on the quality of the caregiver relationship scale, so do positive outcomes across each of these areas (e.g. higher self-esteem).

Limitations of the Data:

These data form part of the Ontario Looking After Children assessment, which is completed annually for all children who have been in the care of a Children’s Aid Society for at least one year. A very small number of children who should have completed this assessment are not assessed within the required timeframes. Therefore, their data are not included in these results. Child protection workers ask children to provide responses verbally with the caregiver present and the child’s responses may be influenced by this approach. Children usually respond to the 4 questions based on how they are feeling that day not necessarily how they have felt over the past year.

Key Considerations:

The key influencing factors in measuring the quality of the caregiver and youth relationship include; the age of the youth, the type of placement, gender and the length of the placement.



Results:

Children in care between the ages of 10 to 15 years old have scored the quality of their relationship with their caregiver 6.4-7.3 out of 8 based on the answers to the questions and the youth age 16 and 17 scored the quality of their relationship with their caregiver between 5.8-6.9 out of 8.

These data are compiled and analyzed by the University of Ottawa, Centre for Research and Community Services.