

**Fifth Session - Thirty-Ninth Legislature**  
**of the**  
**Legislative Assembly of Manitoba**  
**Standing Committee**  
**on**  
**Legislative Affairs**

*Chairperson*  
*Mr. Daryl Reid*  
*Constituency of Transcona*

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**Thirty-Ninth Legislature**

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**LEGISLATIVE ASSEMBLY OF MANITOBA  
THE STANDING COMMITTEE ON LEGISLATIVE AFFAIRS**

**Thursday, June 30, 2011**

**TIME – 10:30 a.m.**

**LOCATION – Winnipeg, Manitoba**

**CHAIRPERSON – Mr. Daryl Reid (Transcona)**

**VICE-CHAIRPERSON – Mr. Rob Altemeyer (Wolseley)**

**ATTENDANCE – 11 QUORUM – 6**

*Members of the Committee present:*

*Hon. Messrs. Chomiak, Mackintosh*

*Mr. Altemeyer, Ms. Blady, Messrs. Briese, Faurshou, Ms. Korzeniowski, Mrs. Mitchelson, Messrs. Reid, Saran, Mrs. Taillieu*

**APPEARING:**

*Hon. Jon Gerrard, MLA for River Heights  
Ms. Darlene MacDonald, Children's Advocate  
Ms. Bonnie Kocsis, Deputy Children's Advocate*

**MATTERS UNDER CONSIDERATION:**

*Annual Report of the Children's Advocate for the fiscal years ending March 31, 2009 and March 31, 2010 (combined report)*

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**Clerk Assistant (Ms. Monique Grenier):** Good morning. Will the Standing Committee on Legislative Affairs please come to order.

Our first business item is election of a Chairperson. Are there any nominations for this position?

**Ms. Sharon Blady (Kirkfield Park):** I'd like to nominate Mr. Reid.

**Clerk Assistant:** Mr. Reid has been nominated.

Are there any other nominations? Hearing no other nominations, Mr. Reid, will you please take the Chair.

**Mr. Chairperson:** Good morning, everyone. The next item of business is the election of a Vice-Chairperson. Are there any nominations?

**Ms. Blady:** I'd like to nominate Mr. Altemeyer.

**Mr. Chairperson:** Mr. Altemeyer has been nominated.

Are there any further nominations? Seeing none, Mr. Altemeyer has been elected as Vice-Chairperson of this Committee.

This meeting has been called to consider the combined annual report of the Children's Advocate for the fiscal years ending March 31st, 2009 and March 31st, 2010.

Before we get started, are there any suggestions from committee members as to how long we wish to sit here this morning?

**Mrs. Bonnie Mitchelson (River East):** I was wondering whether we might consider sitting till 12 o'clock and reassess things at that time depending on how the committee is going.

**Mr. Chairperson:** It's been suggested that this committee sit till 12 noon and then reassess at that point in time. Is that agreed? *[Agreed]*

Are there any suggestions as to which order we wish to consider the reports that I've previously mentioned. Even though it is a combined report, do the committee members wish to consider it in its totality or global fashion, or do you wish to have individual reports?

**Mrs. Mitchelson:** I think that if we go globally, I would ask that the committee consider, certainly, questioning around the last meeting we had with the Child Advocate which was in 2010. I know the reports were a bit behind in coming in, but if we could have global discussion including comments that were put on the record from the last meeting we had.

**Mr. Chairperson:** It has been suggested that this committee consider the reports in a global fashion. Is that agreed? *[Agreed]*

Now, does the honourable Minister responsible for the Children's Advocate wish to make an opening statement?

**Hon. Gord Mackintosh (Minister of Family Services and Consumer Affairs):** Well, first of all, and I think, very importantly, I want to welcome

the new Children's Advocate publicly. Darlene MacDonald has years of experience serving our province's children, and we are fully confident that she'll do an exemplary job, so I welcome her. I said to her we had just flipped on the air conditioning, it'll take a little while to kick in.

I also want to thank Bonnie Kocsis for acting—being an acting Children's Advocate in the interim, and her efforts are very much appreciated as well.

One of the key themes that emerged from the last meeting with the acting Children's Advocate was the need for better communications to break down the complexities in the child-welfare system. We've been developing a little plan. Our working title is called fostering fostering, but making efforts to better support foster parents.

Over the years in this position, many of us, and my office certainly has, from time to time, received concerns from foster parents about relationships. Sometimes they are broken down between agencies and foster parents, and sometimes they get broken for various reasons. And I know the critic has brought some of these to my attention, and—as well as the department, the Children's Advocate and others, so very important that we send a very clear message of support to foster parents when we ask them to open their hearts, to open their homes.

We have to be there to ensure that that is recognized as one of the great foundations of a civil and caring and safe society, and so we have to make better efforts. So, just following on the strong recommendations, and I think the punctuation mark from the last meeting, we have now put together, after some significant consultations and work, a plain language website that does, in a very pointed way, break down, I think, a lot of the barriers that are there. A lot of the questions are answered—I hope all of them are answered. And if there are improvements that should made to that website, we want to hear about it. It's called, Helping—Keep Kids Safe, and I think that the way it's set out there with the Q and A's really is accessible for Manitobans, but, particularly, for foster parents and would-be foster parents.

And I thank the office of Children's Advocate for comment on that and, of course, other partners. We also, as part of that plan, have been able to secure in this year's budget an increase to the foster rates again this year. It will be a 1 per cent increase effective September 1st at a full year cost of \$635,000, recognizing that we have to always try and keep up to the increasing cost of living and the

impact that that has on foster children. And there are some other aspects to that. We hope that we can get that posted today. I know that Communication Services is just plain-languaging some of it, but we'll—we can have that posted for foster parents to access and other stakeholders.

We also are committed to concluding a province-wide foster-care curriculum by the next fiscal year—a mentorship program and enhanced training for foster parents as well. We've also been advised by the Manitoba Foster Family Network of the advisability of having some joint sessions, training and conversations between agency workers and foster parents to ensure better communication.

But I think one of the underpinnings of the foster-care system has to be a mutual respect and a team approach to protecting our children. And I really have come to the firm conclusion that we all have to do a better job to ensure that that team approach is built into all that everyone does in the child-welfare system so that foster parents are a better part of the planning process, particularly when children have to be moved. And so that partnership is intended to be strengthened by the—several developments: First of all, the introduction of the idea of caregiving agreements so that the agency and the foster parents know what the mutual expectations are, to define that partnership and the responsibilities.

We need, I think, more foster parent associations. MFFN has said this very closely—carefully to us, and we need these associations, I think, in more local—in regions. As well I—we have been developing and put in place stronger standards and approvals and better information sharing when the children are moved. And there's also recognition that we have to strengthen the information about and the appeal process when it comes to the rights of foster parents to appeal, because I think we've seen some glitches over the years that are now being addressed.

So, this fostering fostering, if you will, plan, will, over the next couple of years, and beginning already, tackle some of those challenges that have come to our attention and to remind everyone in the child-welfare system and foster parents that their foundation is absolutely critical and their giving is critical.

\* (10:40)

And I'll just want to conclude by saying that in—as a minister, from time to time, you are particularly

struck by the heroism of Manitobans and the people you come across, but I, to this very day, am profoundly struck by the whole—not just notion, but the practice of fostering in Manitoba. I know what it's like even having company for a little while. Sometimes. Your home is your castle and I think it's absolutely amazing that people in this province, to such an extent as they have, will come forward and not just open the door to just some, you know, average child. Disproportionately, the children coming into the homes have some very complex needs and present with some very serious challenges. And it is really amazing; they are heroes.

And I wanted to end on that. Thank you very much for indulging.

**Mr. Chairperson:** I thank the honourable minister for the opening statement and for introducing the officials from the Children's Advocate who are here with us today.

And we'll ask the critic for the official opposition if she has an opening statement.

**Mrs. Mitchelson:** At the outset, I would like to welcome our new Child Advocate to the office. I know that the issues that you deal with in your office are dealing with very complex issues and children that have significant needs and it's a task that not everyone could undertake.

So, I just want to wish you well as you move forward and try to ensure that children that need protection and need care from our child and family services system, are well served. So I want to wish you well and hope that, as time progresses, we will see ever-increasing ability to identify what the issues are, where the pitfalls are and to ensure that we are moving forward in a positive way to protect children.

And I also want to say to Ms. Kocsis, thank you very much for the job that you have done in the Child Advocate's office and, you know, glad that you're there to continue to work on behalf of children and families in Manitoba.

I know that we now have this committee as a result of a lot of pressure on the government last year to try to get to the bottom of what was happening in the child and family services system. I'm glad we have this meeting. It should have happened a little sooner. I know that legislation was brought in and there were very specific rules around what that legislation should be and that would be that, from the date of proclamation, there should be a meeting called within a year. And the government did break

that. We brought it to their attention and we are sitting. So it's just a few days over a year and I'm glad that we have the opportunity to be here today.

I think that rather than talking about the state of child welfare as I might see it through my eyes, or the calls that I get, I would like to just get right into questioning, if we could, around some of the issues that the Child Advocate's office does face and what they believe the state of the child-welfare system is today, and, maybe, some constructive recommendations or solutions to what seem to be some of the issues. So, with that, I'll leave it and hopefully we'll have a chance to ask some questions.

**Mr. Chairperson:** I thank the critic for the official opposition for the opening statements.

Does the Children's Advocate have an opening statement?

**Ms. Darlene MacDonald (Children's Advocate):** Yes, I do.

**Mr. Chairperson:** Please proceed.

**Ms. MacDonald:** Okay, good morning. I'd like to thank the Standing Committee on Legislative Affairs for this audience today. Having just joined the Office of the Children's Advocate this past April, my face may be new to many of you so I thought it might be helpful to provide you with a brief introduction.

I have worked in the field of child welfare in Winnipeg for more than 25 years. Fifteen of those years are at the management level. Just prior to becoming the Children's Advocate, I was CEO of Winnipeg Child and Family Services. As well, I've held the role of president of the Canadian Association of Social Workers and also of the International Federation of Social Workers for the North American region. I was also the founding chair of the Canadian Association of Social Workers' national interest group and was recently nominated and accepted the position as board member to the Child Welfare League of Canada. I've been involved in several initiatives that aim to research and create conditions for best practice in child welfare.

I am honoured to now have the opportunity to act as the official advocate for the rights of children. I believe that this is a natural extension of the work I've been doing my entire career.

As a quick refresher, I'd like to briefly comment on the role of the Office of the Children's Advocate. Our office exists to represent the rights, interests and viewpoints of children and youth who are receiving

or entitled to receive services prescribed under The Child and Family Services Act and The Adoption Act. Our office is empowered to review, investigate and provide recommendations on matters relating to the welfare and interests of these children. Our mandate also includes a review of services after the death of a child who has or had been receiving services through the child-welfare system within one year after the date of death. This review is known as a special investigation review. The purpose of this review is to identify ways in which programs and services under review may be improved to enhance the safety and well-being of our children.

Our office recently tabled annual reports for the fiscal year 2008-2009, 2009-2010. Although I have obviously read the reports and discussed them with staff, my ability to speak to the contents in-depth is somewhat hampered by my recent arrival. Further, my understanding is that the earlier report was only partially completed by the former Child Advocate prior to her sudden departure in April 2010, leaving the acting Advocate to complete it. These circumstances account for the delay in producing the reports.

I point these circumstances out only to provide you with some context in terms of your review of the reports and the questions you may have. We will do our best to address them. Thank you for the opportunity.

**Mr. Chairperson:** Thank Ms. MacDonald for the opening statement.

The floor is now open for questions.

**Mrs. Mitchelson:** I really appreciate the overview and commend you for your commitment and dedication to children in our province that need support and service.

Just—and I did want to go back. I know that you weren't here last year when the committee sat, but there were, you know, a lot of comments put on the record and I really appreciated the forthrightness and the openness of the acting Advocate at the time when she put those comments on the record.

And I might just move into the annual reports or maybe I should just ask a general question. And I know that you've only been on the job for three months or so, but do you feel or can you indicate to us whether you feel that your office, after that review, is adequately staffed to do the work that you need to do?

**Ms. MacDonald:** I think it's probably much too early in my tenure in this position. However, I believe that the staff would tell you we're not adequately staffed and, also, we need more resources like policy analysts. I think we probably have enough people doing the legwork, but we really need to be able to firm up research and data collection.

So I would be thinking in the future we will be looking at trying to add those types of positions to our office to give us better credibility and better data collection.

**Mrs. Mitchelson:** I thank you for that answer.

You know, at the time of devolution there were about 6,629 children in care at the time, and we've seen that number balloon to over—I think it's over 9,000 children in care today. And I—and you've already indicated that, you know, upon review, that you maybe need some policy-analyst expertise in the office.

\*(10:50)

Is there, you know, just any other type of support that you might need? I look to a significant increase in the number of children in care. I look at how the office was inundated with calls and has been. I know that—I guess, last year, the comments that were put on the record from the child—from the acting Child Advocate did indicate that there was a significant issue around the increased number of calls that were coming in and that some of those calls appeared to be because families or individuals didn't know where to go. There was the devolution process which was quite different, and people were struggling trying to figure out whether they go to the authority or to the agency or come to the Advocate, and so many of those calls may have inappropriately come to the Advocate's office because people were confused on where they should go to get the supports or the answers that they needed. Are we still seeing that in the office?

**Ms. MacDonald:** I might ask Bonnie to comment on that, but I think what we would be saying in the office is that we certainly have been seeing what we would call a scope creep, and we are or have become everything to everybody, and I think, because child welfare has gone under a lot of scrutiny and upheaval, that we have taken on roles that are outside of our mandate.

I do believe, personally, that the authorities are now much better established and they are able to take on roles that we were currently doing in the past, for

instance, quality assurance and compliance, and our office is starting to push back and saying, okay, authorities, you know, you've been established to do this, you need to take on that role. And, clearly, our office would like to get back to being the voice of children, the intent for which the office was there in the first place instead of being what we feel is a complaint department.

**Mrs. Mitchelson:** And that just leads me to a question, because I was dealing with a foster family that had significant issues around permanency planning and the lack of a plan for care, and I had a significant communication with the minister's office, and as a result of that communication and as a result of his staff meeting with the family and dealing with the family, his solution was to send the case to your office for review.

Would you consider that part of your mandate, and how can you deal with that? And if there—I mean, first of all, is it appropriate for you to deal with that or should there be another vehicle for that kind of review to be done, rather than having, you know—and I know that there are backlogs in other areas—and so, I mean, this is an additional responsibility—I wonder if you believe that that is really the role of the Child Advocate's office to review work that maybe should be done somewhere else within the system.

**Ms. MacDonald:** I believe that goes back to what I was speaking of before about the scope creep, and I think in the past and currently, we are at the beck and call—when anybody decides they want an independent report done, it is given to our office. So that is my viewpoint about we have to get back and focus about the real intent of the office and where we should be going.

I am very aware of that report, and should just mention to you that it will be on my desk next week.

**Mrs. Mitchelson:** Thank you. So could I ask then just what the process is? You'll receive a report and you'll get something back to the minister with recommendations. Is that the process that's followed?

**Ms. MacDonald:** Yes, it is.

**Mrs. Mitchelson:** I know that last year when the committee met, too, there was a comment made by the acting Advocate at the time that foster parents were leaving the system as they bounced from agency to agency trying to find the support they need to care for the children placed in their home, and they're terrified that the children will be removed.

And the comment was made that there's an inconsistency in support and resources between agencies, which is very frustrating for foster parents. Is there any indication or have you gathered any data on how many foster families may have left the system since the committee met last year?

**Ms. Bonnie Kocsis (Deputy Children's Advocate):** Actually, no, we don't keep data on foster families contacting us, primarily because our customers are the children and the youth in this province, and a file is only opened under their name. So, even though we hear anecdotally about these concerns, and that's what we brought forward last year, was these are anecdotal concerns that foster parents were telling us, and, of course, you know, going to their respective members and that to also bring that forward. So we can only give you an anecdotal.

What we have seen this year is a decrease. Part of it is tightening up our scope and educating people. And I know that certainly the program manager for advocacy services has worked very diligently and very hard with her people to really, sort of, tighten up that scope and educate people at the same time. So, not to just shove people from the door, but also to respect our responsibility in educating people.

When communication happens, it happens for all of us, including our office. And so we've really focused on getting information out to foster families, getting—so when they call us, we say, okay, here's the process. Have you engaged in that process? And if things are still not working for you, here are some of the avenues that you can contact or deal with. But we don't keep actual hard stats because they're not our primary customer.

**Mrs. Mitchelson:** I really appreciate those comments because, you know, from time to time, we expect the advocate's office to be all things to all issues that arise in the child-welfare system. And I think there's been sort of an off-loading of responsibility to your office that really should have been the minister's office and the government's responsibility to deal with.

And if—I guess, I would ask whether—is there anything in writing that you might be able to share with us around the process that you would use if a foster family did call in? And I have to tell you, from time to time, when I've had foster families that are so frustrated with the system, I have from time to time said, well, maybe we should call the Child Advocate or maybe you should contact the Child Advocate's office. And I think what you're telling us today is

that's not the appropriate channel. If there are some issues that they have, they should be dealt with somewhere else within the child and family services system, so that you can focus on children.

So, I know you were saying—I guess the question would be: Do you see anything else, within the system, or anywhere else within the system that's trying to educate foster families on where to go and what process to follow? Or are you having to do that as the calls continue to come in? Is—has the government given you any indication on a contact number or anyone that you can refer foster families to?

**Ms. MacDonald:** I would say the one thing that we're very pleased with is with regards to the child and family service standards manual this past April that specifically pertains to the removal of foster children. There are now very clear guidelines around the process of removal, as well as establishing clearer dispute resolutions and appeal process, and we're hopeful that these revisions will result in improvements on how to manage the situations.

**Mrs. Mitchelson:** It's good to see that there is some clearer direction. Is there any indication, when you get calls, that those standards and protocols aren't being followed, and foster families are still experiencing frustration and still coming to you?

**Ms. MacDonald:** We still, very definitely, get the phone calls. But I think this standard has greatly improved the ability for foster parents to be able to go back to the agency with the ammunition they need to say, come on, I want this dealt with in a limited time frame.

**Mrs. Mitchelson:** So if—the onus, then, should be on the agency, the next step the authority and the next step the minister's office, if foster families aren't being well served. Would that be your recommendation?

**Ms. MacDonald:** That's correct.

**Mrs. Mitchelson:** And it's nice to see the focus and the role of the Child Advocate's office being clarified, so that people really understand what your role is. And I'm hopeful that the minister is hearing that and ensuring that he's not trying to get you to do things that he should be responsible for, out of his office, as the minister responsible for The Child and Family Services Act.

\* (11:00)

Based on the annual report of 2009, it appears that case planning remains a major issue. Do you have any suggestions that would indicate that there's been any improvement in case planning, or do you have any suggestions that you might have to ensure that there is appropriate case planning? I know that last year the acting Advocate indicated in her comments that a case plan for every child should be started at day one when they come into the system, and I seem to be hearing from more and more foster families that, in fact, there is no case plan and there is significant lack of communication between the agency and the foster parents, and then something happens pretty quickly that they have never been notified about or are aware of.

So I don't know whether you've had any opportunity to look at that issue of case planning to see whether there's been any improvement over the last year.

**Ms. MacDonald:** Case planning will always be problematic. As I said previously, I do believe the authorities are at the point where they are developing good training packages for workers and also the focus on risk assessment tools and things called structure decision making with a focus on every child coming into care to have a permanent plan and, you know, which would actually give better outcomes for children. So there has been a move in that direction, and at least now people are verbalizing it on a regular basis.

**Mrs. Mavis Taillieu (Morris):** I just noted that you had just talked about risk assessment tools. Could you elaborate on what the risk assessment tools are?

**Ms. MacDonald:** I probably can't elaborate at this point in time. There is something called Signs of Safety that workers are now going to be used on a regular basis, and it almost gives a script and an indication and is able to better assess the level of risk for children.

**Mrs. Taillieu:** And are these risk assessment tools, are they standard throughout all of the authorities and agencies?

**Ms. MacDonald:** My understanding is that most of the authorities will be using them. They have all started off as pilot projects, and my understanding is that they are proceeding to be used on a regular basis.

**Mrs. Taillieu:** Can you just outline when that began?



**Ms. MacDonald:** I could only speak from coming to—from Winnipeg Child and Family Services, and approximately a year ago, there were pilot projects set up throughout the agency with—which started with a differential response unit using these risk assessments to see the validity of them and to streamline them. So my understanding, in a number of authorities, they were using test sites across the agencies.

**Mrs. Mitchelson:** In 2010, at the last committee meeting, the statement was made that it often occurs when youth are aging out of care in a manner of weeks, when the plan—the case plan should have started years before. An extension of care plans, aging out of plans, are not in place.

Has your office seen any improvement in ensuring that youths aging out of care have plans in place since you were before the committee a year ago?

**Ms. MacDonald:** Yes, I would say that we have seen a great improvement in extensions of care for children, although we certainly would like to see a lot more work in that regards, particularly with wraparound services, with—which would take into effect housing needs, education needs, financial needs for children. So, it—planning is still ad hoc as far as we are concerned. Our office is also involved in a national study about kids aging out of care, and it's being conducted by the Child Welfare League of Canada, so we're participating in that, hoping to look at all the outcomes for children across Canada.

**Mrs. Mitchelson:** And just to follow-up on that, is there any sense that we're further ahead or further behind other provinces when it comes to providing supports for children that are aging out of care?

**Ms. MacDonald:** I would say, in some respects, we're further ahead because a number of provinces still do not give services to children over the age of 16. So, in many respects, we're far ahead.

**Mrs. Mitchelson:** Thank you for that. If I could just move on to the special investigation reviews that your office has the responsibility for. I know when the office assumed responsibility, there were 106 cases transferred from the Chief Medical Examiner's office, and by December 31st of 2010, the number of cases requiring review was 182. There were 44 completed reports that were forwarded to the minister and to the Chief Medical Examiner and the Ombudsman, and the reports contained 234 recommendations, including recommendations to

other government departments and external organizations. Can those recommendations be shared with this committee?

**Ms. MacDonald:** I believe they certainly could be. Those recommendations would have now gone to the Ombudsman's office, and my understanding is she's collecting the information and will be reporting back in her annual report.

**Mrs. Mitchelson:** So, are you indicating, then, that the recommendations can be shared, and could we receive a copy of those recommendations?

**Ms. MacDonald:** Bonnie, would you like to speak to that?

**Ms. Kocsis:** Legislatively, those recommendations that are in those reports, those reports are confidential and can only be tabled with the Ombudsman, the minister, and, of course, Dr. Balachandra, the OCME's office. However, the mechanism that was put in place legislatively is that Ms. Hamilton, the Ombudsman, will be reporting on those publicly in her report. And that's how that mechanism—we cannot share them directly with anyone other than those three that are listed in the legislation. But she will be sharing those publicly in her reports, and that's what the mechanism was that was put into place.

**Mrs. Mitchelson:** So, just for clarification on that, will she be sharing the reports and the—or the recommendations, or will she just be commenting generally on the recommendations?

**Ms. Kocsis:** I can't tell you how Ms. Hamilton will share those. I know that, you know, she can choose whichever avenue that she is going to be sharing those, including an update on progress as well.

**Mrs. Mitchelson:** If I could just ask for an update on the status of the special investigations reviews. How many are you currently working on, and how many have been completed since December of 2010?

**Ms. Kocsis:** And I know that Darlene certainly has the absolute updated stats, but I can tell you that one of the significant changes that occurred this year—there was a number of changes. We were also very well aware that there was a growing backlog. Every year we add about 50 to 52 reviewable child death reports that have to be reviewed. Those are ones that fall within the mandate. And so, even though we have a backlog and, as you noted, it has grown, it's because of the reviewable child deaths that get added to that backlog every year. Even though we're

working on the backlog, we're still adding about another 50 to 52 a year. And that number has been consistent for a number of years, even when it was at the OCME's office.

\* (11:10)

So, having said that, this year we looked very strongly at what can we do to sort of recognize some of those specialized reports that maybe don't require as full a review. And those are kids, like, medically complex needs children who, you know, never make it out of the hospital; they die within an hour of their birth, for example. Things like that. We will still do, at least, a brief review of it, and so we've started sort of piloting that this year to see what is that going to look like and can that be done. And, of course, vetting it through our legal counsel, and it does meet the criteria for a review.

The other thing that we looked at is that we are now in the process of piloting three aggregates, two suicide aggregates, meaning the aggregates are being done in certain regions because there is a high population of suicides. Because we want to know why are these young people taking their own lives and we want more answers of—maybe this is something we can look at. They're also within the same agency or organization. So we're looking a little bit more globally at what the issues are.

So we're doing two suicide aggregates at the same time and we're also doing an aggregate on one agency that has had a number of deaths and we're just looking at that, too, to see, you know, are these service issues or what's going on. So we're hoping that by grouping them together that way, too, we can also pull them off.

I can tell you that, you know—I can't give you the exact steps. I'm sure that Darlene's got them right in front of her as well, but I do know that this year there's been a significant improvement in the number of reports that have gone out. There's been, actually, quite—there's been quite an increase, almost 50 per cent increase, over the last report—annual report, somewhere in that area. Those stats aren't available to that annual report. It's going to be tabled this fall as well.

But there was a significant increase in the very comprehensive reports. But, at the same time, we're following this other process. There was a huge increase, too, in some of these child death reports that, you know, were a very short term or, for

whatever reason, you know, didn't require such an extensive review.

So those are in place and those are being carried out now. So we're really hoping to see this year—this fall's report. We're hoping to see a significant change as well into next year.

**Mrs. Mitchelson:** Maybe if I could just ask, out of the 50 or 52 reviewable cases that appear to have been fairly consistent over the years, how many of those would be the kinds of cases that were—that you explained that were the short-term cases where there might have been medical complexities at birth versus how many would be, maybe in the last year, how many would be children in care that died?

**Ms. MacDonald:** I don't have those particular stats right in front of me today. I can certainly get that for you. However, I would say a large amount of the deaths are natural deaths or, as Ms. Kocsis had said, 'fragically'—medically fragile child—children that were expected to die, unfortunately.

**Mrs. Mitchelson:** So then my question would be, are you 'priorizing' the children-in-care deaths as priorities? Can you do that? How do you determine which the priorities are for your reviews?

**Ms. MacDonald:** As you are aware, we have been doing the reviews since 2008, and our goal is to critically examine how we can move through these reviews more quickly and efficiently. So I think we're getting much better at doing that.

Yes, we are 'priorizing' the most recent deaths, and particularly for children in care, and getting our reports off in a more timely fashion. I think previous to that, we were just adding them, sort of, to our backlog. We have reversed that process with doing the more recent beginning.

**Mrs. Mitchelson:** I know that those reviews go to the minister, I believe, to the Chief Medical Examiner and the Ombudsman.

**Floor Comment:** That's correct.

**Mr. Chairperson:** Hold on, folks. You have to address your comments through the Chair, please, to allow me to give the signal to turn your microphones on and off. So, which one? Mrs. Mitchelson, did you conclude your question?

**Mrs. Mitchelson:** I was just asking and I guess the Advocate was nodding for me, so I was getting the answers that the reviews go to the minister, to the

Chief Medical Examiner, to the Ombudsman. Have I missed anyone?

**Ms. MacDonald:** No, that's correct.

**Mrs. Mitchelson:** And would it be fair to say that all of those reviews have recommendations?

**Ms. MacDonald:** I would think—what I would like to comment on is our backlog reviews. And these are situations that we've seen probably five and six years ago, that we've approached the agencies, and, if improvements have been made, they are sometimes pointless to make recommendations at that point in time.

**Mrs. Mitchelson:** And then, if improvements haven't been made, there would naturally be recommendations, I would assume.

**Ms. MacDonald:** Yes, that's correct.

**Mrs. Mitchelson:** And, given that those recommendations don't become public because they are under legislation, for the eyes only of those that are identified in the legislation, could you indicate to me whether you're having to make recommendations from cases that you're examining that might be six years old that still are not meeting the expectations that might be required.

**Ms. MacDonald:** Yes, I believe we would be still making those recommendations and have been. We are working closely, though, with the authorities in meeting together and trying to come up with appropriate recommendations because, of course, our office doesn't just want to send out a blanket recommendation and have it not followed. So we're trying to make our recommendations much more meaningful so that we can change the outcomes for children.

**Mrs. Mitchelson:** I really appreciate that answer because it takes everyone working together to try to improve the system. Do you find that openness there and are you seeing that there are practical—some practical solutions to, you know, to addressing some of the shortfalls in the system?

**Ms. MacDonald:** Yes, actually, within the first couple of weeks of coming into this position I met with the four CEOs of the authorities. I think you would say they did not have a great relationship with our office and they've indicated to me that they would like to work co-operatively and particularly around recommendations, and also looking at the office to help in particular recommendations. For an example, I would use, as they would say, we all

recognize we're all not making standards—or not meeting standards, so how can we work together to look at why that's happening, what the problems are. But I certainly would say, at this point in time, people are co-operating and really want to move forward.

**Mrs. Mitchelson:** Do you sense that there's a good working relationship between the authorities and the departmental staff in Family Services to ensure that the appropriate training is done and that the appropriate standards and protocols are being followed?

**Ms. MacDonald:** I would say that standing committee office, which includes the authorities and the Child Protection branch, are working much better together and coming up with training packages and ensuring that standards are appropriate and looked at.

**Mrs. Taillieu:** This goes back a few questions and answers now to a response given by Ms. Kocsis.

You had indicated that there was a high number of suicides, and I'm just wondering—I know that there was a spike in around 2005, there was 25, I think, indicating in my records. Anyway, that was a pretty high number in 2005, and it was also 18 in 2004, and I'm just wondering if you can comment then how many youth have died as a result of suicide in 2010 because the Chief Medical Examiner said it was 20, but the Office of the Children's Advocate said a report indicated it was 16. So we're just looking for some clarification there.

**Ms. Kocsis:** The discrepancy in the numbers—and we noted in the annual report at the bottom, you'll see that the Office of the Chief Medical Examiner does a calendar year and we do a fiscal year, and so that's where the discrepancy is. So he'll do till December 31st, whereas we go till March 31st, and so that's—and we note it in each of the annual reports. For some reason we're kind of out of sync that way and I know that the office of the provincial Ombudsman as well does a different calendar year as well so the numbers are a little bit off that way, but it's not uncommon to see those two-year spike.

I remember in 2005 I'd just joined the office when that spike had occurred and I—if I'm not mistaken, I believe it was the minister and a number of his staff and our office and a number of our staff had actually all gone up to some of the communities, you know, the communities were asking for assistance and wanted to meet with everyone and there was a response then.

\* (11:20)

It's—it does tend to come in clusters and that's the unfortunate part with suicides. So the new training packages, called the ASIST training, has been going out. And I know that, certainly, the reports that I've had in this last year is that more and more people are now suicide training, and intervention is actually the top of the training packages across the board now as a way to sort of combat that. And it tends to spike in the 13-to-15-year-old age group which, traditionally, you know, developmentally, they're still kids but they're young—sort of moving towards young adulthood. And so they go back and forth and they can be highly impulsive. So there's a lot of things we need to know about that.

The two aggregates that we're looking at, hopefully, will give us some of those answers. That's what we're looking for as well as answers. So we've got two suicide cluster aggregates going right now. And we're really hoping by looking at a group of kids within the same community, we can really look at, you know, what are some of those underpinnings to better target the training, you know, and to make recommendations around that. So we want the training, the recommendations to be a lot more specific around, you know, what can we do, what can be done on the ground today. But I do know that training has certainly—the training increased; there's over 1,100 people trained in ASIST training which is an acronym for the, you know, the suicide intervention and prevention training for the province. So that's occurred in the last year and a half, give or take.

**Mrs. Taillieu:** And so you, just to clarify, you said this has just started in the last year and a half, and there's—it's a pilot project for two specific areas. Did I understand that correctly? And can you indicate which areas that you are looking at this pilot project in?

**Ms. Kocsis:** I think there's a little bit of confusion there. The ASIST training is a training that's done by the joint training team, which is done by standing committee. So that is training that's available to anyone in the province, any of the workers in the province. So that's a separate piece from what we're doing.

The piece that we're doing is we're looking at these suicides in a group. And I can't tell you off the top of my head which ones those are. Those just started, those two aggregates just kicked off in the

last few months. About three months ago we started working towards looking at it. We started laying out the framework of what were the questions we have, what do we need to look at. So I can't give you that further information. But I'll certainly be reported on in the next annual report.

**Mrs. Mitchelson:** I think, Ms. Kocsis, you indicated that there was a certain region of the province where there were—was a higher number of suicides. And can you identify that region for us? Is that something that you can share?

**Ms. Kocsis:** I can't identify a specific region, and it tends to be a—we're looking at agencies as opposed to regions. And so agencies don't always fall within just a specific region. I do believe we're trying to do one in the north, one in the south. But I can't say for certain which areas because the agencies, a lot of the agencies, also have sub-offices in Winnipeg as well. So you can't really go by region any more.

You know, with the new fabric of child welfare, there's offices now and I think that was the intent actually, part of the intent of the AJI rollout was to have offices in peoples' communities. And so you could have a community here in Winnipeg, you could have a community in Shamattawa but you're still going to have two offices. So we're looking more at agency as opposed to region.

**Mrs. Mitchelson:** All right, and I know that we talked about communication and the whole issue of your office having to, you know, look at calls and refocus back on the true mandate of the Child Advocate's office. And you had indicated that you were communicating with people and there is a bit of a protocol on where maybe they should go for support and service. And I had—was just wondering whether the department has provided anything for you, a template of any kind. And have they given you a contact information or number that they—that people may call if, really, it isn't your prime responsibility to deal with the issue that they're raising, rather than not opening a file or whatever?

Is there any information that's been provided to you that you might give to them to call somewhere else to try to get their issues addressed?

**Ms. MacDonald:** If I'm understanding your question correctly, you know, we do a lot of community outreach too, so we would have the ability to pass on numbers or resources. We just don't leave people hanging. So we would follow that up with the appropriate resource that they should be calling.

**Mrs. Mitchelson:** I guess the question for me is because, you know, sort of under this government's watch, the mandate has increased to such an extent that you've had to take a look at refocusing what the mandate and role of your office is.

I guess my question would be, how—what is the interaction with the department as you move towards focusing on your mandate, and what are they doing to try to help you through that process?

**Ms. MacDonald:** I have regular meetings with the Child Protection branch and, as you're aware, I'm just new to this position and I've also had an opportunity to have a staff day to talk to them about where they'd like to refocus as well. So I think what's needed in our office is much more of a strategic planning exercise which we will be drawing in our stakeholders, including Child Protection branch, and refocusing and coming up particularly with a three-year plan, since my term is three years, so the office knows what's—what direction we're going in.

**Mrs. Mitchelson:** I guess I would just ask whether the department is being co-operative as you work through this process to try to ensure that they don't send cases to you, or reviews to you, that aren't appropriately a part of your mandate. Are you seeing that that has changed or are we still—are you still seeing those kinds of referrals from the department?

**Ms. MacDonald:** I think I can honestly comment that I've only seen one case sent to us in my time frame, and so I don't—I'm hoping that will not be the usual course of events. And I do think that the government will co-operate once we do have our strategic plan in place and they are understanding more clearly our role and, as I said, and our intention to get back to the voice of children and the reason for the office creation in the first place.

**Mrs. Mitchelson:** I really appreciate that.

There also was—you know, there's always the ongoing problem with the information technology and the CFSIS system and the complication of that system. Are you seeing—can you indicate, generally speaking, across the system, is CFSIS being used and is it being used appropriately? As you look into reviews, are you seeing that there has been an improvement, because I know there were some issues by your office about the appropriate information being input into CFSIS. Are we seeing an improvement on that side?

**Ms. MacDonald:** I would have to say, within the last two to three years, CFSIS ability is better able to

inform us. However, I couldn't comment on—or my comment would be, I don't think all agencies are using CFSIS, which would hamper the data collection.

**Mrs. Mitchelson:** I really appreciate that answer because I think we've heard different information from government, and we have heard from time to time that everyone is on CFSIS, and so it is important to note that that may not be the case. Is it the case that every remote community, do you know, has a hookup to CFSIS? Are you aware of whether there are any agencies that might not have that hookup from their remote communities?

**Ms. Kocsis:** Thanks for the question. There is still connectivity issues in some of the communities. That's an ongoing issue. Not everybody is on CFSIS, but what has changed is during this last year especially, the branch and our office has met regularly. We meet about every six weeks and we go over some of the issues that we're still seeing. The executive director of the branch, Ms. Ash-Ponce, has requested directly that she be directly notified if we happen to come across a child that we're working with or that we've got information on, that it be reported immediately to her office. We have done that. There has been a drop in those calls to her—that we've found children, you know, that were not on CFSIS for whatever reason.

\* (11:30)

But connectivity in some of the communities is still an issue; so is training, being able to keep staff that are trained in how to use CFSIS, because if you've ever used CFSIS, it is a nightmare to get used to, and you have to use it regularly in order to do it. And in—I know, in one community, especially, we were talking to staff and what was happening is it kept crashing because of the remoteness. And so if you don't use it on a regular basis, you lose it, and so they would have to be retrained and retrained.

So it has improved. There are still issues with it. I think there's a long way to go, and there's a lot more user-friendly windows in it now that are—like, the new medical windows are being used more, the child well-being windows are being used more and that's what we are seeing. But could it be better? Absolutely. The goal, of course, would be for that every single child and family you'd be able to sort of have a, you know, a peek right away and you'd know exactly what's happening everywhere in the province.

But, you know, that's true of—I know I've spoken to our counterparts in Ontario this last year as well and other provinces, and that's an ongoing issue for those areas, especially BC that has remote communities as well.

**Mrs. Mitchelson:** In that answer we talked about—you talked a little bit about caseloads and you talked about front-line workers, turnover in staff, and I know that that was a significant issue that was raised last year in the committee. And are we seeing, or are you seeing still, a significant turnover in staff at the agency level? And I'm just wondering if you might comment on that.

**Ms. MacDonald:** I believe it is starting to stabilize. I don't think we've seen as much of a turnover in staff. I think what has been happening is the availability of more positions, more front-line positions. So you do see, you know, it looking like—or lacking in, or social workers are changing positions, and it's not the case. They actually have increased the number of social workers who are front line. So—and I think the schools are not producing enough social workers to take those positions.

**Mrs. Mitchelson:** I'm wondering if you might be able to comment on the training and whether, you know, there is appropriate training for those that are working on the front lines in our child and family services system. Are you seeing that they are trained and able to do the very complicated case work and case planning that's required within the system?

**Ms. MacDonald:** Yes, I'm somewhat impressed and can just more or less comment about the general authority, as I was under the general authority with Winnipeg. But my understanding is the authorities have come together. The general authority has established a training plan for workers that include the much needed—they won't have a caseload right at the beginning, that there are some very basic training that they have to go through before they even pick up their caseload.

So this is a big improvement in the system, and also, there is a standardized plan—training plan for them that encompasses over a two-year period of what particular training they need to get and in what time frame. That is a big improvement from where I came from.

**Mrs. Mitchelson:** I thank you for that answer. You said with the general authority because you can speak with some experience about the general authority. Do you know whether that has been

extended to other authorities and whether that's happening in other authorities as well?

**Ms. MacDonald:** Yes, that's my understanding. I can't speak with complete confidence that the plan is as extensive, but I do know it is happening in other authorities.

**Mr. David Faurshou (Portage la Prairie):** Just picking up on my colleague for River East, a question about the progression of—through the different agencies to the Ombudsman, how many cases have, in fact, gone on to the Ombudsman that you're aware of?

**Ms. MacDonald:** I couldn't tell you how many cases have gone on, but, yes, I certainly have been in contact with Ms. Hamilton's office, and she is indicating that she is now receiving the recommendations.

**Mrs. Mitchelson:** I noted in the media today, as we're looking to get started on the Phoenix Sinclair inquiry, that there was a comment that the commissioner made that indicated that he was a bit surprised that the Child Advocate's office didn't apply for intervener status. And I wonder if you might just indicate whether there was rationale or reasoning, or what the rationale was behind that.

**Ms. MacDonald:** I had consulted with our lawyer and really felt that the reports that came out of our office were very well received and were not questioned. They were well received by the Province. The recommendations have been implemented and there was really no reason to seek standing. We're certainly waiting for the inquiry and we'll be engaged with that and hopefully following up on the recommendations. But we didn't feel we needed to have the presence of standing.

**Mr. Faurshou:** I'd like to move to the previous report, page 16, and that is entitled Youth Justice Program Review, as it involves the Agassiz Youth Centre, which is in the constituency of Portage la Prairie. I'm quite interested as to an update as to where your office is and the Department of Justice as it pertains to youth in corrections that effectively have been identified in need of special programming.

**Mr. Chairperson:** Ms. MacDonald—Ms. Kocsis.

**Ms. Kocsis:** At the time that this report was written in 2008 and '09, there was a new program that was just starting with justice. They were really starting to focus on the needs of youth in their program. And I do know that when I met with Mr. Goulet this year,

as well, and we talked a little bit about where it's progressing to, and there has been a great deal of headway made in ensuring that the rights of children and youth within the youth justice system are much better met now. And, certainly, the branch has been involved because, of course, they have—if there is any kind of incidents or concerns in the youth justice facility it has to go to the branches investigators for follow-up. And so we—even in dialogue with them, there has been an improvement.

One of the things—I'm sure, sadly with the deaths of the two youth in the last couple of years, I think that those inquiries will certainly be looking at what further needs to be done for children and youth. The biggest area that is still missing is the legal aid piece for youth automatically at the age of 12. And, of course, there's that whole section where if a youth is in the care of an agency, and is a temporary or a permanent ward, should they really be represented by the agency lawyer. You know, who is seeing their best interests?

One of the things that, certainly, we've been talking about with Legal Aid, that I've been talking about, and I actually had a conversation again with them last week, is that—and I was really pleased to hear because they were very excited that one of the authority's agencies had showed up in court, and was well prepared, and ready to go, and was there to represent a youth. And they said they're starting to see a turning of the tide. That now agencies are recognizing that the same lawyer that represents the agency may not be the lawyer that should be responsible for a youth that's going into court. And so they're working at that.

The other piece is, of course, the FASD strategy that has a lawyer right now on a three-year contract that is working specifically with youth with FASD. And so there is definitely strides being made in youth justice and—but for us, in our office, certainly the rights of the young women and men that are incarcerated for any period of time or being held in a facility, they are being investigated right away. There have been changes made. There's been recommendations that were followed up on and they're moving forward. There's a lot more programming for the youth, for example, than there used to be. So that's a very good thing to see. Unfortunately, there's still a high number of kids going in.

**Mr. Faurchou:** Your last line, in your response, absolutely no question about it, because in talking

with corrections staff, the percentage of individuals affected with FASC is, in fact, rising significantly, and the questions are being raised as to whether or not a justice facility is, in fact, the right placement for these individuals, and whether or not this couples over two-year residential care program, which you're also advocating for, and streamlining of the process to put persons into a residential care program because of those fetal alcohol effect. So do you have any comment on that?

\* (11:40)

**Mr. Chairperson:** Ms. MacDonald—Ms. Kocsis.

**Ms. Kocsis:** What is occurring in our office right now is another study that's under way around complex—youth with complex needs, and that also includes justice involvement.

FASD, Manitoba certainly leads the way in FASD research. It leads the way—it's well known internationally. It leads the way in some of the programming for FASD and the recognition of FASD. And there's certainly been huge gains made in just getting assessments done. That's the first hurdle, is to get over the assessment piece.

So those things have really come along. But what still needs to occur is that specialized—of course, anything that improves the lives of youth who are struggling with disabilities, whether it's FASD or any other disability, I think we always should be looking at different ways to approach it. Because just using corrections to house these children—if they're highly impulsive, they're going to continue to engage in criminal behaviours or behaviours that maybe bring them into conflict with the law. That's going to happen over and over because these children are handicapped. You know, they have a handicap. Not all of them. Some of them, you know—and that's why assessment is so important.

But I would—I've always said, we really should be looking at a different way to really be looking at addressing what are their needs. And there are programs in place now and there are workers in place now that are working—very concerted efforts are being put towards bringing more and more players to the table to say, okay, here's the mental health piece, here's the justice piece, here's the FASD piece. What needs to happen for these youth?

**Mr. Faurchou:** I don't want belabour this, but in Portage la Prairie, there is the Agassiz Youth Centre and, indeed, Lakewood is being used for male and female placement. But also in Portage la Prairie,

there is the Addictions Foundation of Manitoba youth program, maybe better suited—it's a residential program, maybe better suited for persons with addictions. We also have the MDC, Manitoba Developmental Centre, which, again, could be perhaps better suited for delivering a program and they have the skilled staff. Trying to make corrections officers into social workers and addictions-counselling counsellors, it really isn't the way to go, and I see that.

The other thing—and I know my other colleagues are anxious to ask more questions—is the aging out. Again, between 18 years of age—has been discussions with the government to continue through, because even persons that are in care or in foster parent care, that they are still in high school. They haven't yet reached—and so you turn 18 in January, and, all of a sudden, your last year of high school, which, essentially, is one that you should be concentrating on your studies, focused on graduation, and suddenly you're trying to see this young individual cope with the—all the readjustment that goes into living on one's own. So I wonder whether or not the government has been receptive to bring it up to 21 years of age as recommended by your report?

**Ms. MacDonald:** Yes. I mean, as I said earlier, we see a number of more extensions of kids in care, particularly around continuing in university. And there are a number of extensions to age 21 at this point in time.

**Hon. Jon Gerrard (River Heights):** I want to start by referring you to page 39. And this deals with a number of the special investigative reviews where there were children who died by homicide. There was six in this most recent year studied, and it turns out that that's six out of 13 province-wide. And so that the rate of children dying by homicide who are subject to review because they were, you know, either in care or had been in care or in some way related to the child and family services system is extraordinarily high compared to the average child. And I wonder if you would comment on the number of homicides and what, you know, your view of this situation is and what needs to be done.

**Ms. Kocsis:** We can't comment on those until we actually do the reviews, and, off the top of my head, I'm not sure—I know that some of the reviews have been done. The reviews are called even when a family is also involved with Child and Family Services, and so that falls under the legislative

mandate. So this could be a family that's struggling, and this could be just a child that was in the wrong place at the wrong time as well. So we, you know, you can't—I don't think we can really make a blanket statement based on a number of six.

However, we will certainly be looking at all of them in conjunction as well because we were very concerned as well. That was one year that there was a bit of a bump there and there was six homicides that year for young people and most of them were involved with other young people. And so that's another concern, and I know—so much to the question previous around youth justice and what they're seeing, and they're seeing more and more kids getting involved with some very, very serious behaviours that are costing them their lives. And so, you know, whether it's a gang involvement or, you know, being out where they shouldn't be, those things are happening.

So, once those reviews are done we can take a look at those recommendations. They are—there's some clusters. There are—there's some answers there for us, and certainly that's something we've been looking at as well. If we continue to see homicides we may actually decide to do an aggregate on homicides as well and say: Are there some common denominators there that we can learn from and see what can be addressed for youth?

**Mr. Gerrard:** Yes, I mean, I wonder if it's possible to share information as to whether these are mostly very young children or whether they are teenagers or they're a mixture. You know, it is pretty distressing quite frankly when, you know, you've got only, you know, 1 or 2 per cent of the kids in the province in care and yet you've got 50 per cent of the kids who died by homicide who are in some way association with Child and Family Services.

**Ms. Kocsis:** The program manager for the special investigation review team is here and she may have that information, you know, handy for her right now. So if I could get that back to you?

**Mr. Gerrard:** Yes, thank you.

Now the—let me apply a bit of the same question to the suicides. I think from your earlier statement it appears that the majority of those were teenagers. Is that right?

**Ms. Kocsis:** Yes, that's correct, between about 13 and 15 years of age.

**Mr. Gerrard:** Yes—



**Mr. Chairperson:** Ms. Kocsis, did you wish to conclude your answer?

**Ms. Kocsis:** Yes, please.

They're predominately young teens. I think the youngest is around 13 to 14 years old, and so it's all teenagers. None of the children, to our knowledge, were in care at the time, but their families were involved and so that would require a review.

**Mr. Gerrard:** And, I mean, to your knowledge although there are some of the reviews done is there any particular recommendations emerging so far in general terms?

**Ms. Kocsis:** Yes, in those cases there will be recommendations, and generally the theme is generally around intervention for many of those is, you know, earlier intervention in some cases, not all because sometimes you just—you can't account for a youth being in the wrong place at the wrong time and, you know, wrong identity or whatever. Other youth may take them to be somebody else. There's no accounting for that. But most of the recommendations generally are phased around prevention and intervention.

**Mr. Gerrard:** Now one of the things that has been pointed out was pointed out in some of the material that was presented by the Children's Advocate last year in a report I think, which you were involved with, which showed the dramatic increase in the number of children in care. And I wonder if any of the recommendations that you've been putting forward speak to, you know, measures that can be taken to reduce the number of children in care.

**Ms. MacDonald:** I believe we really need to look at our data a little bit more closely because one of the things we've seen is that a very increase in the use of family homes or kinship homes and, you know, those kids would be stabilized with families, but they're still counted as children in care. So we have to take a look at our data with respect to that as well. So we're wondering about the actual number of kids in care.

**Mr. Gerrard:** So, in terms of just recounting, is that what you're saying? Is there not other measures that could be looked at as well?

**Ms. MacDonald:** There'd definitely be other measures, but I was indicating that that was one aspect that we had given some thought to in the office, that we would look at that. I mean, there's, you know, a number of issues. You know, Manitoba has the highest poverty rate, and so it would cause

significant family stress. So we're not quite sure of all the factors for children coming into care. I mean, the media—you talk about Phoenix Sinclair. My expectation is there'll be a spike in kids coming into care, the emphasis on safety of children. All of those things could continue.

**Mr. Gerrard:** You know, one of the—you have the responsibility, I believe, as the Children's Advocate for—and, by the way, I should congratulate you on your appointment and welcome you and hope things are going well and look forward to your recommendations. One of the aspects that you're responsible for is The Adoption Act, and I wonder if you have any particular thoughts or comments related to how well or not well the adoption process is working for children.

**Ms. MacDonald:** I would not have that answer at this point in time. As a matter of fact, we've seen a reduction of adoption for children.

**Mr. Gerrard:** I wonder if you can comment further in terms of the reduction in the number of adoptions? What sort of size or scale or what—how much less is it, or what's happening?

**Ms. MacDonald:** No, I couldn't give you those numbers at this point in time.

**Mr. Gerrard:** Yes, I'm—the reason for asking that is that I'm hearing that there seems to be significant time delays and blocks in terms of children being adopted, even when the agency and the parents and so on would like this. And so I wonder if you have looked at this at all?

**Ms. MacDonald:** I think there may be some delays through the legal system, and also just the ability to place children on the adoption registry is hampered at this point in time. We would have to have permission from the aboriginal agencies to be able to have the children placed for adoption.

**Mr. Gerrard:** I was hearing that there were significant delays even where aboriginal agencies are ready to recommend the adoptions. I wonder if you can speak to why this should be occurring?

**Ms. MacDonald:** I would have no comment about that at this point in time.

**Mr. Gerrard:** Yes, what's the total number of the special investigation reviews which are still outstanding at the moment? Can you—do you know—can you provide that information?

**Ms. Kocsis:** I can't give you that right now because it's a very fluid number. Like, the number I give you right now could change by the time I get back to the office, depending on what notifications have come in. I can tell you that, you know, to date, we certainly, like I said, we can do—we've done maybe 90, in that ballpark. I can't say that for sure because our numbers—our final stat numbers are not in. But I can tell you that in—it's going to depend on how many more are coming in. As I said, every year there's about 50 to 52. That seems to be stable. We could have a spike year. We don't know, and so that's why we try not to give out those numbers until they're actually finalized and are within a time frame. Because, last week it was one number and already this week there could be a whole different number.

You know, there's quite a large number of children in Manitoba that die every year that people are not aware of. Not all of them require reviews; only about 50 to 52 of them a year require reviews. But there's well over, you know, probably around 170 a year, you know, so we can't really give you a solid number.

**Mr. Gerrard:** I wonder if you can provide, you know, a ballpark number or range in terms of the number of reviews which are outstanding and not yet completed?

**Ms. Kocsis:** I will get that for you, as soon as Shelagh gets that for me. All right, thank you.

\* (12:00)

**Mr. Gerrard:** Yes, the—we've talked a little bit about the suicide rates and the issue of suicide. It's troubling that the number of suicide rates is—continues to be as high as it is. And it's troubling that the proportion of children who have suicides among children in care or children who are part of the SIR reviews is proportionately very high, and just in terms of what recommendations you may have, in terms of what agencies can and should be doing in terms of preventing suicides among children who come into contact with Child and Family Services.

**Ms. MacDonald:** I believe suicide prevention has to start at a very early age, and my understanding is Healthy Child has done some really good education throughout kindergarten to grade 8. And I do believe the agencies have made mandatory training for their social workers and caregivers on ASIST training for suicide prevention and also mental health training. And I think that would go a long way to at least helping the situation or identifying patterns.

**Mr. Gerrard:** What is the current situation in terms of mental health, FASD screening of children who come into care or are in contact with the child and family services system?

**Mr. Chairperson:** Ms. MacDonald—Ms. Kocsis.

**Ms. Kocsis:** Could you repeat that, please?

**Mr. Gerrard:** Wondering if you could give us a current status of the screening of children who come into care or come into contact with the child and family services system for mental illnesses or FASD?

**Ms. Kocsis:** I'm not sure I understand. What do you mean by give you the current status—that we don't track how many youth every year are screened for mental health in the province. We wouldn't know that. We are a complaint-driven business in the sense that only those kids that contact our office or advocates for them, natural advocates like foster parents, for example, or parents, those are the only kids that we would know about. We don't know about all the others that go through the screening process.

**Mr. Gerrard:** For a child who comes into care, are they screened for FASD or mental illness?

**Ms. Kocsis:** I think that during the assessment phase, and my understanding is I was recently able to sit in on some of the new training tools that they're going to be using and the new assessment and screening tools and that. But I don't think front-line workers will traditionally do the screening themselves because that's not their area of expertise. What they will do is refer on to whether it's MATC or, you know, a psychiatrist or a psychologist to do that screening.

But in the same way for FASD there's—you know, not every child that comes into care in this province—it's impossible to really be doing assessments on all those. We'd need a much more robust medical system in order to be able to do that because those assessments are usually done through medical.

**Mr. Chairperson:** The hour being 12 noon, this committee agreed to reassess at this point in time for the sitting time. And I'd like to ask the committee if they wish to extend the sitting time to allow for further questioning to occur. Any suggestions from committee members?

Seeing none, then shall the combined annual report of the Children's Advocate for the fiscal years ending March 31st, 2009 and March 31st, 2010 pass?

**An Honourable Member:** What's that? Sorry.

**Mr. Chairperson:** Shall the annual report—do you wish to have the question reread?

**An Honourable Member:** Yes, please.

**Mr. Chairperson:** Shall the combined annual report of the Children's Advocate for the fiscal years ending March 31st, 2009 and March 31st, 2010 pass?

**An Honourable Member:** No.

**Some Honourable Members:** Pass.

**Mr. Chairperson:** The Chair hears a no. The report is not passed.

The hour being 12:02 p.m., what's the will of the committee?

**An Honourable Member:** Committee rise.

**Mr. Chairperson:** Committee rise.

Thank you to members of the committee for your work here today and also to our officers from the Children's Advocate for your attendance here and for your answering of the questions. Thank you for your participation.

If the committee does not require the reports that you have before you, would you please leave them for subsequent meetings. Committee rise.

**COMMITTEE ROSE AT: 12:02 p.m.**

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