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Beyond Compliance: Exploring Quality In-Person Private Visits with Children and Youth in Care

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Abstract

This research was developed in response to child welfare audits published by the Ministry of Children and Family Development (MCFD) which found that Children and Youth in Care (CYiC) were not always seen by workers in accordance with policy guidelines. The study was grounded in Maslow’s Hierarchy of Needs to consider the function of worker visits with CYiC and how this contributes to their needs being met. A literature review was conducted to examine existing research on both quantity and quality of home visits with CYiC. This informed the following research questions, (1) What are the indicators of quality in-person private visits with children and youth in care that yield good outcomes? (2) What are the factors contributing to in-person private visits with children and youth in care not being completed as per policy requirements? (3) What can aid workers in the completion and documentation of in-person private visits? This explanatory and inductive research used a mixed-method approach collecting qualitative and quantitative data via an online survey. The eligibility criteria for participation included MCFD workers who currently hold guardianship responsibilities, which refers to workers who are accountable for children and youth in government care. The researchers conducted univariate and bivariate analysis to analyze the quantitative data which produced three key areas for examination - policy compliance, quality of visits, and documentation. The researchers also used codebook thematic analysis to analyze the qualitative data that resulted in the emergence of four themes including building connection, assessing well-being: ensuring safety, logistics, and building trust amidst trauma. The research found that although workers indicated they were completing visits with CYiC as per policy, they encountered significant barriers that challenged their ability to do so. The research also found that workers believed seeing CYiC once every 90 days was insufficient to assess safety or build meaningful relationships. Based on this research process, there are five encouraged considerations including (1) implementing flexibility in visit locations, (2) ensuring workers hold one job title, (3) integrating quality of visits into policy, (4) allocating funding for visits, and (5) streamlining documentation. To contribute further to this area of study, research should explore a child and youth centered lens, and examine this topic with Indigenous Child and Family Services (ICFS) Agencies. This research contributes knowledge to MCFD that may inform future revisions of *Chapter 5: Child and Youth in Care Policy*.

Keywords: Child and Youth in Care; private visits; Child, Family and Community Service Act (CFCSA); policy; quality assurance

The conclusions, interpretations and views expressed in these articles belong to the author(s) as individuals and may not represent the ultimate position of the Ministry of Children and Family Development.



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Introduction

The Ministry of Children and Family Development (MCFD) is the government body in British Columbia (BC) responsible for child welfare across nine unique Service Delivery Areas (SDA), based on the geographical location in the province. MCFD is bound by the *Child, Family, and Community Service Act* (CFCSA) to ensure the safety and well-being of children and families across the province. When children and youth are legally removed from their caregivers and placed in foster care, a specific worker is assigned to the child or youth and acts as their legal guardian. MCFD has a policy in place to ensure the overall well-being of all children and youth in these placements, known as the *Children and Youth in Care Policies - Chapter 5*. This research study focused on this policy in relation to the standard for conducting in-person private visits with Children and Youth in Care (CYiC), and sought to gain insight into the quality of visits between workers and CYiC that are being conducted.

This research study was created in response to audit reports which determined that the requirement for workers to see CYiC as policy intended is frequently not met by workers across the province of BC (Ministry of Children and Family Development Quality Assurance [MCFDQA], 2020). This is an important topic, as in-person private visits are completed to assess safety and wellbeing, ensure CYiC involvement in decision making, and provide support. If these visits are not being completed as per policy requirement, this could lead to a deficit in the care of CYiC.

This study will contribute to existing research as it provides an explanation as to why in-person private visits with CYiC are not happening as intended. The purpose of this research study was to gather the perspectives of front-line workers and use this data to present considerations to MCFD regarding in-person private visits with CYiC.

Literature Review

Limited research has been conducted on the purpose, relationship and requirement for workers to visit and establish relationships with CYiC. The literature review consisted of reviewing policy within BC, and other provinces, and looked at empirical research regarding

relationships between workers and CYiC.

Ministry of Children and Family Development Policy

Children and Youth in Care Policies - Chapter 5 (MCFD, 2023a) provides guidance to workers acting as guardians for CYiC. Section 5.3 of the policy mandates minimum contact between the worker and the CYiC that they are responsible for. The policy states that a worker must have an in-person and private visit with the child or youth, at least once every 90 days, and more frequently whenever possible (MCFD, 2023a). In addition to this requirement, the policy also recommends various circumstances where the worker should meet with the child or youth whenever possible, such as “on the day of placement; within 7 days of placement; when there is a significant change in the child/youth’s circumstances, care plan or family; when there is a change in the child/youth’s worker; on or near the child/youth’s birthday and other special occasions” (MCFD, 2023a, p.24). As stated in the policy, the intent behind the recommended frequency of visits is to establish and develop meaningful and quality relationships between the worker and the child (MCFD, 2023a).

Through interprovincial policy analysis (see Appendix A), it was identified that Saskatchewan and Manitoba mandate in-person private visits once per month while Alberta has the same 90-day policy as BC but also requires phone contact once every 30 days (Ministry of Children and Family Service, 2023; Ministry of Families, 2022; Ministry of Social Services, 2023).

Compliance

MCFD audit reports show that across many SDAs in BC, the practice standard of 90-day visits with children in foster care placements was not met (MCFDQA, 2020; The Auditor General of British Columbia, 2019). The reasons for the lack of policy compliance were not provided. In 2019, the Representative for Children and Youth (RCY) conducted a review of the death of a youth who was involved in the child welfare systems in both British Columbia and Alberta and died of an opioid overdose while in government care. Among the many complex findings for this specific case, one identified issue was the lack of face-to-face visits between the MCFD worker and the youth (RCY, 2019). They also found that the residential resource the youth was

placed in was inappropriate for this youth and was not meeting their safety or physiological needs (RCY, 2019). Evidently, ensuring that these visits happen is important for relationship development and for overseeing the safety and well-being of CYiC.

Quality Visits

Research has determined that CYiC experience improved outcomes when they share a positive (Husby et al., 2019; McLeod, 2010), stable (McLeod, 2010; The Representative for Children and Youth [RCY], 2021), healthy (RCY, 2021), trustful (Lindahl and Bruhn, 2017), and consistent (Sanders et al., 2017) relationship with their worker. The relationship between CYiC and workers may result in improved experiences at school, healthy relationships with others, and increased likelihood to overcome adversity (RCY, 2021). On the contrary, studies have found that for CYiC that do not experience this positive therapeutic relationship, they are less likely to experience those same outcomes (McLeod, 2010).

Across the literature, the concepts of time and availability were critical points in determining a positive or negative outlook on the worker by the CYiC (Lindahl and Bruhn, 2017). CYiC reported positive experiences of relationships when their worker was engaging with them on an ongoing, routine, and regular basis (Bell, 2002; de Montigny, 2018). CYiC requested that their workers have visits often for informal check-ins (de Montigny, 2018) and disliked when workers only visited when there was bad news or significant care plan changes (Hultman & Wisso, 2023). CYiC appreciated it when their worker attended significant life events, like a graduation (de Montigny, 2018). CYiC identified that they needed regular and frequent visits with their worker and expected their worker to arrive on time (McLeod, 2010). de Montigny (2018) and Lindahl and Bruhn (2017) concluded that CYiC need meetings with their worker more than once a month, as CYiC need time to develop meaningful and trusting relationships with their workers.

Barriers

One barrier to completing in-person private visits with CYiC is low staffing (British Columbia Representative for Children and Youth [BCRCY], 2014). MCFD workers reported challenges in balancing the

number of children and families they were supporting with documentation requirements, resulting in one matter being prioritized over the other (BCRCY, 2015). Workers identified the complexity of their work, prioritizing urgent and safety-related situations, high caseloads, staff that are undelegated or untrained, and overall staff retention challenges as some of the reasons for policy non-compliance (BCRYC, 2015). MCFD workers can also be affected by secondary traumatic stress (Gough, 2011). This stress can result in workers lacking the energy and capacity to meet the needs of their clients and contributes to the cycle of staff turnover and retention (BCRCY, 2015). Research recognizes the impact of organizational limitations on workers being able to spend time building positive relationships with CYiC and recommends the development of sustainable working conditions to address retention challenges (Hultman & Wisso, 2023).

Other barriers include both documentation and the lack of standard requirements for the quality and content expectations of visits (Hultman & Wisso, 2023; The Auditor General of British Columbia, 2019). The *Children and Youth in Care Policies* states that a caseworker should document the visit in the child or youth's file, including the content of the discussion (MCFD, 2023a). MCFD's practice standard document states that all attempts at visits, missed visits, and canceled visits should be documented with a rationale and any consultation with a supervisor if the standard cannot be met due to this reason (Oliver, 2014), reflecting a quantity rather than quality-driven practice. The Ministry of Children and Family Development Quality Assurance (2020) determined that one reason why it may appear that in-person private visits are not being completed as per policy requirements is because the visits are not being documented. de Montigny (2018) highlights the importance of comprehensive documentation and record keeping of the CYiC life stories, and to depart from documentation as a tool to monitor staff compliance. The literature demonstrates that policy emphasizes the importance of quantity of visits and does not expand on the quality and/or purpose behind the visits.

Limitations of Literature Review

A limitation of this review is that audit reports show

instances where policy is not being met. No literature was identified that examined the times when policy is followed and what supported workers in being able to achieve this. Other limitations of this literature review include a lack of available local research studies. The research primarily came from European countries and as such did not contain a range of diverse cultural perspectives, and specifically Canadian Indigenous perspectives. Indigenous people in British Columbia make up 5% of the population yet represent 55-60% of BC's current CYiC (British Columbia, 2023; Statistics Canada, 2022). The literature did not specify parameters of frequent and regular contact in relation to quality of visits.

Theoretical Framework

Maslow first introduced the Hierarchy of Needs in 1943, based in Motivational Theory (Maslow, 1943). Maslow proposed that there is a 5-tier-hierarchy of human needs including deficiency needs and growth needs. The hierarchy includes immediate physiological needs (food, shelter, clothing), safety and security needs (physical protection), love needs (association and belonging with others), esteem needs (respect and acknowledgment from others), and self-actualization needs (desire to leave behind a legacy) (Ihensekien & Joel, 2023). Originally, Maslow (1943) asserted that the most prepotent need will dominate an individual and all other needs become insignificant until the most prepotent need is gratified which permits the emergence of the next set of needs. However, this has since been criticized for its apparent rigidity, as individuals have different priorities and it may not be true that needs progress in a rigid hierarchy (Ihensekien & Joel, 2023). In this research study, the Hierarchy of Needs is used to consider the role of worker visits with CYiC and how this supports their needs being met and, through this, their overall development.

Conceptual Framework

For the purposes of this study, the researchers grounded the understanding of child and youth in MCFD's definition of a person who is under the age of 19 (Ministry of Children and Family Development [MCFD], 2023a). In BC, when a child or youth is removed

from their legal guardian's care, MCFD can grant temporary guardianship to suitable kin, this is known as an out-of-care placement. The alternative is that MCFD becomes the legal guardian of the child or youth, and they are placed in foster care, otherwise known as being in-care. For this research project's purposes, student researchers examined policies and practices relating to children and youth in-care (MCFD, 2023b). The researchers also grounded understanding of foster care as children placed with families that have no kinship connection to the child, and that enroll with the government, go through training, and get paid contractually to provide care to the child (MCFD, 2023c). In this study the researchers refer to workers who hold Child Service files as workers with guardianship responsibilities.

Objective

The objective of this research was to gain insight from workers into the process and completion of in-person private visits with CYiC. More specifically, the research examined the quality of visits, compliance with policy regarding visit frequency and documentation of visits. The aim was to make informed considerations to MCFD, that may impact policy and mitigate implications of missed visits. In order to help inform the research objective, this study sought to answer the following questions; 1) What are the indicators of quality in-person private visits with CYiC that yield good outcomes? 2) What are the factors contributing to in-person private visits with CYiC not being completed as per policy requirements? 3) What can aid workers in the completion and documentation of in-person private visits?

Methodology

Research Design

This research study was completed by three student researchers at the University of British Columbia School of Social Work in collaboration with MCFD sponsors and instructors of the course. This study was a project-based component of the course SOWK 554C: Qualitative Methods in Social Work Research: Research and Evaluation in Child, Youth, and Family Services. The research study was approved by MCFD Research Ethics

and UBC Ethics Review.

This was an explanatory and inductive research study which applied a concurrent mixed-method approach collecting both quantitative and qualitative data. Both the quantitative and qualitative data held equal roles in addressing the identified research questions, and the study was interactive in nature, with the two methods merging during various stages of the study. Using a mixed-methods approach for this research project highlighted quantitative or positivist paradigms which demonstrated an understanding of what the compliance rate to policy is, and qualitative or interpretive approaches which accounted for the unique and dynamic experiences of MCFD workers (Wasti et al., 2023).

Sampling Strategy

This research study used non-probability and purposive sampling. The desired sample included any current MCFD workers who have guardianship responsibilities. The desired sample excluded workers with historic guardianship experience as policies and practices have changed, thus, including the historic perspective could have led to inaccurate data. The desired sample also excluded workers whose experience was with an Indigenous Child and Family Service (ICFS) Agency, as the policy pertaining to visits with CYIC within these agencies differs from that of the MCFD.

Recruitment

A recruitment poster was emailed to the MCFD sponsors who facilitated having the survey advertised on an internal government website which is accessible to all MCFD employees. The MCFD sponsors also distributed the poster via government email to various managers within the MCFD. The first and third authors work for MCFD and emailed this poster to their respective Executive Directors for circulation.

Data Collection

The researchers developed a survey through the UBC Qualtrics survey platform. The survey consisted of 38 questions, including multiple choice, Likert scale, and open-ended text entry response. A link to the survey was included in the poster used for recruitment. Prior to commencing the survey, participants were asked to consent to the survey through a forced response

question. The survey opened with demographic related questions, which determined participant's eligibility to take part.

Data Analysis

The researchers excluded responses that answered quantitative and qualitative data that were less than approximately 75% complete. Upon the closing of the survey on March 1st, 2024, the researchers had collected a total of 72 responses over the course of one month while the survey was accessible to MCFD staff. Of the total 72 responses, it was found that 37 responses met the inclusion criteria and were therefore eligible for the data analysis process.

The researchers analyzed quantitative responses through univariate and bivariate analysis and interpreted the quantitative and qualitative data together to make connections and associations between two different data sets (Bertani et al., 2018). The researchers used the SPSS platform to run descriptive and frequency statistics to analyze quantitative data results. The researchers conducted a bivariate analysis to look at the relationship between two independent variables. Bivariate regression was used to see how variation in one variable explains or predicts another (Bertani et al., 2018).

The researchers used codebook thematic analysis for the qualitative responses that drew on recurring themes that arose in data collection, specifically when analyzing participant's experiences, knowledge, and opinions (Braun & Clarke, 2021). The researchers began by coding the qualitative data inductively using process and values coding, before moving on to second-cycle coding which was done via focused coding (Saldaña, 2013). The researchers then reviewed this coding to identify common themes across the responses (Braun & Clarke, 2021).

Findings

The quantitative and qualitative data findings of this research project will be presented separately. The quantitative data produced three key areas of interest including policy compliance, quality of visits, and documentation.

Quantitative Data

Demographics. Of the 37 respondents, the largest group

group work in the North/East Fraser region (n = 10, 27%), while the regions with the least participants were Central Interior/East Kootenay, Okanagan West Kootenay, North Central/Peace and North Coast/Bulkley Nechako with three or fewer participants (8.1-2.7%) respectively. The majority of participants have worked for MCFD for seven years or longer (59.5%, n = 22), with the next largest group working for between 1-2 years (16.2%, n = 6). Nearly two-thirds of participants have 6 or more years with guardianship responsibilities (62.2%, n = 23), with the next largest group having between 1-2 years of experience (13.5%, n = 5). Most participants in this study were full-time employees (94.5%, n = 35). In addition, 29.7% (n=11) of participants exclusively hold guardianship responsibilities. Of note, the average caseload size for participants was 22, and the average number of CYiC a worker was responsible for visiting is 8. The 26 workers who do not exclusively hold child service files were allocated a total of 196 CYiC, with an average of 7.5 children per caseload. Child service files

Figure 1. Demographic Table

	n	%
Service Delivery Area		
North / East Fraser	10	27.0
South Fraser	8	21.6
Vancouver Island	6	16.2
Vancouver Coastal	5	13.5
Central Interior East Kootenay	3	8.1
Okanagan West Kootenay	2	5.4
North Central / Peace Region	2	5.4
North Coast / Bulkley-Nechako	1	2.7
Length of Employment at MCFD		
0-6 Months	2	5.4
7-12 Months	1	2.7
1-2 years	6	16.2
3 Years	2	5.4
4 Years	0	0
5 Years	2	5.4
6 Years	2	5.4
7 Years+	22	59.5
Experience in Guardianship at MCFD		
0-3 Months	2	5.4
4-6 Months	0	0
7-9 Months	1	2.7
10-12 Months	0	0
1-2 Years	5	13.5
2 Years	1	2.7
3 Years	2	5.4
4 Years	1	2.7
5 Years	2	5.4
6 Years+	23	62.2
Weekly Working Hours		
Full Time	35	94.6
Part Time	2	5.4
Exclusively Working in Guardianship		
Yes	11	29.7
No	26	70.3

made up between 2.9-100% of these caseloads (M = 33%). The 11 workers with exclusively guardianship responsibilities were allocated a total of 96 CYiC, with an average of 8.4 children per caseload. Child service files made up between 12.5-100% of these caseloads (M = 66.9%). The range for both types of worker was 1-21 CYiC with a median of 12. However, the mode for the workers with exclusive guardianship responsibilities was 10 children, while non-exclusive workers had a bimodal distribution of 1 and 5 children.

Figure 2. Caseload Analysis by Worker Type

	Worker type	
	Exclusive CS (n = 11)	Non-exclusive CS (n = 26)
CYiC Total	96	196
CYiC per worker		
Range	1-21	1-21
Mean (SD)	8.4 (6.2)	7.5 (6.1)
Median	12	12
Mode	10	1, 5
CYiC per caseload		
Range %	12.5-100	2.9-100
Mean %	66.9%	33%

Policy Compliance. All participants stated that they were aware of MCFD's policy requiring workers to visit CYiC once every 90 days. The largest proportion of participants stated that they visit CYiC once every 90 days (n = 10, 27%) with the second largest proportion of participants indicating that they see CYiC once every 30 days (n = 8, 22%) (see Figure 3). Approximately half the participants, (n = 19, 51.4%) shared that they have had to reschedule visits beyond the 90-day period due to challenges which will be discussed below in the qualitative data findings. Majority of participants (n = 22, 59 %) indicated that they strongly agree that they always see CYiC in compliance with the 90-day policy (see Figure 4).

Figure 3. Average of Visiting Frequency

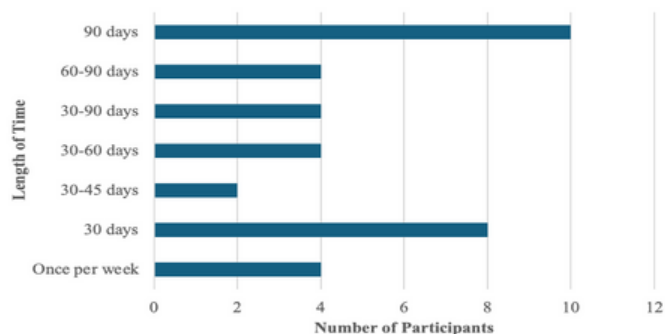
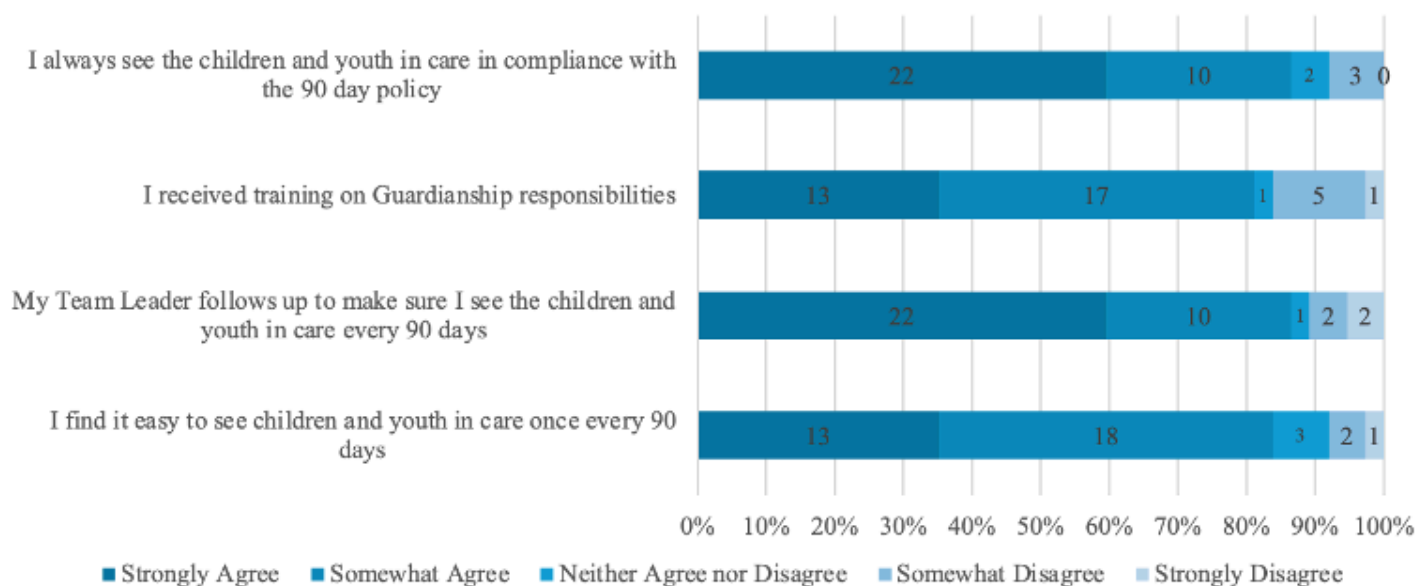


Figure 4. Policy Compliance



Participants were asked about training, supervision, and policy. In regard to training on guardianship responsibilities, 17 participants stated that they somewhat agree that they received training and 5 participants indicated that they somewhat disagree. Majority of participants (n=22) strongly agreed that their Team Leader follows up to ensure the policy is met. The majority of participants 54.1 % (n=20) report not knowing if there is a policy that informs what information to gather when visiting with CYiC, with 32.4% (n=12) reporting they were aware of a policy, and 13.5% (n=5) stating there was not a policy.

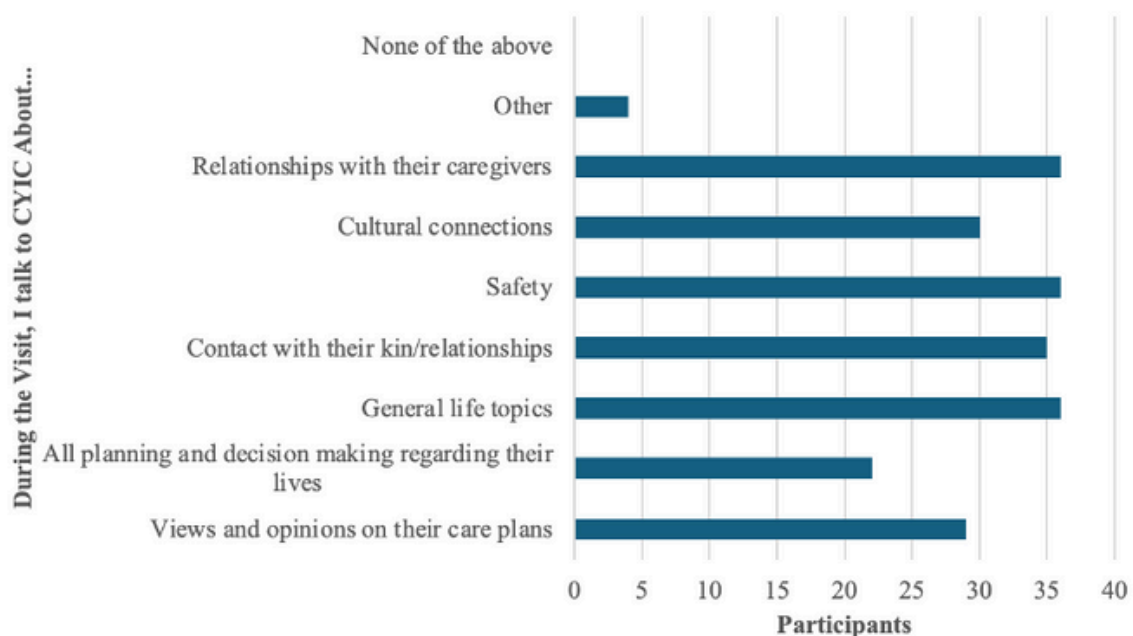
Quality of Visits. Nearly two-thirds of participants believe that seeing CYiC once every 90 days is insufficient to assess safety (n = 24, 64.9%) and 89.2% (n=33) of participants reported that they do not feel seeing CYiC once every 90 days is sufficient to build meaningful relationships. Out of these participants 63.6% (n=21) suggest a minimum visit interval of at least once per month, with the next largest group 15.1% (n=5) suggesting at least once every 45 days. Of note, 83.8% (n=31) of participants reported encountering challenges in conducting a quality visit with CYiC which will be discussed below in the qualitative data findings. Participants were asked about the conversations they have with CYiC during visits, and the majority of

participants indicated that they discuss relationships with caregivers, safety, and general life topics (see Figure 5).

Documentation. The majority 86.5% (n=32) of participants reported being aware of policy regarding documentation of CYiC visits. Notably, 62.2% (n=23) of participants reported not having challenges documenting visits with CYiC, while 35.1% (n=13) reported encountering challenges which will be expanded upon in the discussion.

Multivariate Analysis. A hierarchical multiple regression was run to determine if the addition of guardianship experience, training, and then caseload variables (both overall number of all cases, and the percentage of caseload that are Child Service files) improved the prediction of 'ease of visiting within 90 days' over and above guardianship experience alone. The full model of experience, training and caseload variables statistically did not significantly predict ease of visiting. Guardianship experience alone predicted 10.2% of the variance in 'ease of visiting' and was nearly statistically significant at the .05 level ($F(1, 35) = 3.987, p = 0.54$) and guardianship training predicted an additional 8.3% of the variance, making Model 2 statistically significant ($F(2, 34) = 3.871, p = .031$) and explaining 18.5% of the variance in total.

Figure 5. Conversations with CYiC



Qualitative Data

Four themes were developed from the qualitative data. Two themes of ‘building connection’ and ‘creating safety’ addressed the research question pertaining to the quality of visits with CYiC, and two themes of ‘logistics’ and ‘barriers to relationship building’ addressed the research question pertaining to barriers to policy compliance.

Theme 1: Building Connection. Building connection is comprised of three subcategories including making visits fun, building relationship, and amplifying CYiC voices. Workers identified that being able to have flexibility in the location of the visit with CYiC impacts the quality of the visit, as being able to take CYiC for a treat, or to do a fun activity result in better visit outcomes. Participants highlighted the importance of supporting CYiC’s passions as an indicator for a quality visit. This means not just checking the box that a visit has been completed, but rather engaging in the lives of children and youth and attending their special events and activities. As one participant noted, “[workers] should be encouraged and supported by MCFD to attend kids basketball games, local pow wow, science fair, Friendship Centre Event... as a way to connect with the [CYiC] they are responsible for”. The data also demonstrates a need to increase the amount of allocated funding as represented by the following

quote:

Most youth and kids in care are not going to form a relationship sitting in their room, or in an office with a social worker, yet there is very little opportunity for a social worker to buy lunch and do an activity together.

Workers identified familiarity as being a crucial component in the relationship building process with CYiC. This includes being a consistent presence in a CYiC’s life, scheduling visits often and offering predictability and reliability in their lives. As one participant stated that it is important to “prove to the young people that you will show up for them, and you will be present and reliable when needed”. This process of building rapport with CYiC was considered a critical step in developing a strong relationship with the CYiC.

Workers place importance on knowing “the child’s views on their lives, dreams, wishes, reality, relationships, education, cultural engagement” in order to build connections with CYiC. Workers can then amplify the voice of the children and youth they work with in care planning, decision making and visit planning as well as informing CYiC of their rights while they are in care.

Theme 2: Assessing Well-Being: Ensuring Safety. Assessing well-being and ensuring safety is comprised of two subcategories including creating safe spaces and

observation. Participants identified that it is helpful to visit CYiC in-person to ensure meetings are in fact private. This facilitates the creation of safe spaces founded on trust where CYiC can ask questions, discuss needs, and disclose concerns. If there is no established relationship between the worker and CYiC, then the CYiC may not share information with their worker. Having these visits ensures that CYiC can discuss the circumstances of their placement and speak freely without external influences. As stated by one participant “it is difficult (if not impossible) for a child/youth to speak freely with a caregiver/family member present. It is often in these 1:1 private chats that a child/youth is more apt to share or disclose.”

Participants identified that visits with CYiC allow the worker to assess the overall safety of the CYiC. The data reflects that workers assess physical safety and development by making observations about the CYiC being at a healthy weight and having no physical marks. Additionally, participants shared that visits allow workers to observe if the caregiver is providing the CYiC with their basic needs including hygiene, clean clothing, appropriate shoes, and outerwear. The worker is able to observe living arrangements and complete a more comprehensive assessment of the CYiC’s situations. Some information can be missed virtually and CYiC may minimize concerns in the home over text or phone call.

The data found that when conducting visits, workers should witness the CYiC relationships and interactions with caregivers, dynamics in the home, as well as observe their behaviors and comfort in the foster home. In summary, one participant identified that the visits allow workers “To check on [the] condition of [the] home, condition of [the] child-dressed/fed to community standards. Check on their well being including emotional well being”.

Theme 3: Logistics. Logistics consists of three subcategories such as scheduling challenges, documentation requirements, and staffing challenges. The location of where CYiC are placed can impact the workers ability to visit as frequently as required. Participants noted coordinating schedules with caregivers as a significant challenge to completing visits as per policy requirements. Participants indicated that an additional challenge to scheduling visits with

caregivers includes the amount and variety of workers with conflicting schedules that need to see or complete visits at the home, such as resource workers, roots workers, and the assigned worker.

Participants considered that documentation requirements for visits are excessive, as workers are required to document in multiple places which can become confusing and thus, easily missed. Participants felt that an increase in requirements for workers to complete administrative tasks such as documentation, referrals, care plans, and court documents have decreased the amount of time workers can spend visiting CYiC. One participant stated “with such an increase in expectations of documentation, ICM notes, reports, etc, there is less and less time Social Workers spend away from their desks”.

The data reflects that challenges associated with staffing impact their ability to visit CYiC as policy requires. Of note, workers share that not having enough workers and support staff results in increased work requirements. Participants also noted that staff turnover is an issue as new staff require the support of senior staff to attend to the families that they support, which affects the senior workers' ability to complete their own work requirements.

Participants shared that having a large caseload impacts the workers ability to prioritize seeing CYiC as per policy requirements. The data also indicated that competing job responsibilities and individual workers holding multiple job titles, posed challenges in visiting as per policy. Participants shared that having different job roles was challenging as they had to support new child protection matters, parents, families, foster parents, and children in care. In contrast, one participant stated, “I am now on a high risk team, so my caseload is much much smaller, making it easier to see youth. I have more time to see them and connect with them on a regular basis.”

Participants noted that crises often arise that take priority over seeing CYiC. Crises include child protection concerns, court related matters, and those responsibilities that are time sensitive. One participant explained the impact of this by saying that when workers become “overwhelmed with other important things on [your] caseload... you get burnt out and do not

attend to your caseload.”

Theme 4: Building Trust Amidst Trauma. Participants identified that a systemic and emotional barrier towards them building relationships with CYiC included the idea that many CYiC hold general mistrust towards the child welfare system as a whole, as well as towards individual workers. This was due to past negative experiences with the system, intergenerational trauma, or mistrusting adults in positions of authority. Relationship building was particularly difficult when workers felt that CYiC were uncomfortable with their presence, especially in the context of completing in-person and private visits. One participant shared “Unfortunately, we are not always seen as a safe person to many kids. We are the ones that move them, separate them from their families, their siblings, their schools.” The data indicated that workers experienced feelings of reluctance on part of the CYiC, due to generally being unwilling to talk with their worker, and not seeing the value in connecting with their worker.

Highlighted was the presence of trauma which made it more difficult for workers to build relationships with CYiC, mainly due to workers eliciting trauma responses from the CYiC. As exemplified by one participant:

Having any social worker show up on a monthly basis can create a trauma response for the child (trigger of removal or moves between foster homes without preparation); I have had families say children act out and have smaller windows of tolerance due to a visit by a social worker.

The data suggested that workers often had to consider the individual developmental factors of the CYiC which could potentially hinder their ability to conduct a quality visit. Some of the factors identified were age, high medical needs, and mental health diagnoses. The data revealed that when building relationships specifically with youth, factors such as mental health or substance use made it difficult to both conduct the visits and connect with the youth during those visits as they may not have been sober.

Discussion

The majority of participants indicated that seeing CYiC once every 90 days was not adequate in building a meaningful relationship and instead shared that visiting

once per month would be more sufficient. Participants highlighted that building genuine connections with CYiC contributes to the overall quality of visits but felt that their ability to do this was stifled as a result of visits needing to be in the foster care placement, and a lack of available funding to be able to do community activities with CYiC. Other indicators of quality visits include creating both a physical and emotional safe space for CYiC. Participants shared that this is done by being reliable, consistent, and building trust which is supported by requiring workers to visit more frequently with CYiC.

While the majority of participants indicated that they see CYiC in accordance with policy, challenges in doing so were reported. About half of the participants indicated that they have had to cancel visits with CYiC due to challenges with logistics. Identified challenges for the MCFD worker included caseload size, staffing, scheduling, and documentation. While other challenges were indicated with the caregiver and CYiC such as limits around relationships, conflicting schedules, and engagement in visitation.

Multivariate Analysis

The researchers expected the data to show that participants who selected that they exclusively held guardianship responsibilities should only carry Child Services Files. However, multivariate data analysis showed that they did not. The researchers have queried that this may be due to complicated survey questions, and workers holding more job responsibilities than intended.

Of note, caseload size was not statistically significant in predicting ease of visiting within 90 days. However, guardianship experience was nearly statistically significant in predicting ease of visiting within 90 days, and guardianship training was determined to be statistically significant in predicting ease of visiting.

Despite the multivariate analysis indicating that caseload size was not a significant predictor of ease of visiting, the qualitative data reflected that workers saw large caseload sizes as a contributing factor to their inability to visit as per policy intended. This could be due to the participants of this study having a small caseload size with an average of 12 child service files at the time of the study. Given this, participants may have

experienced challenges in the past where having a large caseload size impacted their ability to see CYiC in compliance with policy, despite this not being an indicator at this time. This is similar to the findings that while participants of this study completed visits within the 90-day policy, more than half still shared facing challenges doing so.

Ministry of Children and Family Development Policy

The findings of this study reflected that all participants were aware that there is a policy which outlines visiting requirements, and the participants knew what the visiting requirement was. This corroborates the literature review which examined MCFD policy pertaining to the interval of time between in-person and private visits with CYiC being once every 90 days.

The majority of participants stated they did not know if there was a policy which informs what information to gather when visiting with CYiC and how to conduct a quality visit. If participants stated that they did know of a policy, they cited their own resources, indicating the need for clearer guidelines in this area. This is consistent with the literature review findings, as it was indicated that there is a lack of standard requirements for the quality and discussion expectations of visits (Hultman & Wisso, 2023; The Auditor General of British Columbia, 2019). This is supported by the finding that there is no policy in the MCFD pertaining to content discussed during visits, and indicators of quality in a visit.

Quality of Visits

The study findings identified that building connection was an overarching theme pertaining to the quality of visits with CYiC. Workers found it to be helpful when CYiC were familiar with them, which is congruent with the idea of consistency in relationships. Additionally, it was noted that when workers took the time to build rapport with the CYiC it led to higher quality visits, which is consistent with the idea of availability and time for visits. Also of note, was the importance placed on visiting informally with CYiC, making efforts to make visits more fun, and doing enjoyable activities together. The literature review results were found to be consistent with the research data, and further expanded on many of the ideas presented. The literature called attention to many aspects of a quality visit with CYiC, being the need for trusting (Lindahl and Bruhn, 2017)

and consistent (Sander et al., 2017) relationships, availability (Lindahl and Bruhn, 2017) and having sufficient time for visits, routine and regular check ins, as well as visiting informally with CYiC (Bell, 2002, de Montigny, 2018).

Barriers

This study found that logistical issues around managing a heavy caseload, not having enough staff or untrained staff, and prioritizing responsibilities based on urgency all contributed to overall barriers for workers visiting with CYiC as per policy requirements. While the literature review did not specifically pertain to the completion of in-person private visits with CYiC, it did highlight barriers for general policy compliance within MCFD. The barriers listed were categorized by staffing challenges and documentation requirements. Of that, staffing challenges included having undelegated staff, staff retention, staff burnout, and prioritization of immediate safety needs (BCRYC, 2015). Documentation challenges listed the extensive amount of administrative tasks along with managing heavy caseloads (BCRYC, 2015).

Comparing to Interprovincial Policy

A key finding was that participants indicated a need to see CYiC more often to support having quality visits and assess safety. The majority of participants who indicated that the 90-day interval was insufficient suggested that the interval be increased to once every 30 days - which is in line with the requirements of the other provinces. This is comparable to the literature review which examined policy regarding the interval of time between visits with CYiC across three provinces; Alberta, Saskatchewan, and Manitoba. The findings of that review highlighted that in Saskatchewan and Manitoba, the requirement to visit CYiC was once per calendar month, while Alberta mandates an in-person private visit once every 90 days, in addition to phone contact once every 30 days (Ministry of Children and Family Service, 2023; Ministry of Families, 2022; Ministry of Social Services, 2023).

Contradictory Findings

The literature review of MCFD audit reports indicated that in-person visits were not being completed as per the 90-day interval requirement. Notably, one report highlighted that none of the 43 files contained

documentation indicating that the standard interval of no more than 90-days between visits had been maintained (MCFDQA, 2020). This contradicted what was found through this research, as it determined that the majority of participants were always seeing CYiC in accordance with the 90-day visit requirement.

This contradiction could be due to several factors - firstly, the data from the literature review noted that the compliance rate was determined based on reading the worker's visit documentation. As cited in the literature review, documentation can be a challenge to complete due to time constraints and caseload size (BCRCY, 2015). The audit reports could reflect incorrect data based on the visits being completed but not documented correctly or not at all, while this study asked workers directly. Second, the audit reports reviewed were from 2020, since then, there may have been an increase in prioritization of visits happening by Team Leaders and upper management due to recognizing that visits were not happening. Lastly, there could be a reactive effect which will be discussed in the limitations section below.

Theoretical Framework

The current research study examined the indicators of quality visits between workers and CYiC and factors contributing to MCFD workers completing in-person private visits with CYiC every 90-days as per policy requirements. The interpretation of data was grounded in Maslow's Hierarchy of Needs. The Hierarchy of Needs was used as a means of understanding that caregivers are responsible for providing CYiC with their basic physiological and safety needs. MCFD workers use visits to assess and confirm that these needs are being met (and identify any gaps), thereby reinforcing the CYiC's sense of safety and, through this and relationship building, promote belonging, trust and self-esteem.

Limitations

While the collected data was robust and offered critical insight into the completion of in-person private visits with CYiC, the overall sample size was small when compared to the total number of front-line workers with guardianship responsibilities across BC. In considering this, the researchers cannot make conclusions or generalize the data.

The first and the third Researchers used their current roles within the MCFD to distribute the survey directly to their respective SDA's. Similarly, the MCFD sponsors distributed the survey among the managers of the Vancouver Coastal SDA. The intention was to increase the survey response rate, although this may have led to higher response rates from specific SDA's or geographic regions, thus creating a selection bias. In addition, it was anticipated that the nature of the topic and the survey being about compliance with mandated policy could have resulted in participants choosing to respond in a way that presented themselves in a favorable manner causing a reactive effect. This could influence the outcome of survey responses and affect the validity of the data.

The survey had more questions than necessary to address the research questions, and some were too similar, resulting in conflicting or not addressing the specific question. This was observed when asking respondents for their understanding of the importance of in-person, in-private, and in placement visits, as three separate questions, which yielded similar answers.

This study did not consider children and youth in out-of-care placements, such as children and youth on Voluntary Care Agreements, Extended Family Agreements, Youth Agreements, and/or other placements with family. In addition, this research study did not examine the experience of workers from an ICFS Agency, as there is a different policy which requires visits with CYiC to be completed every 30 days in-person and privately. Of note, the survey received some responses from ICFS Agency workers that were screened out.

Implications for Policy and Practice

Considerations for Ministry of Children and Family Development

Participants identified that although they met the policy requirement to visit with CYiC every 90 days, workers want to challenge systemic issues and overcome barriers by building better relationships, but they need more support to do so. The data reflects that the majority of research participants want to spend time with CYiC to build relationships and create a sense of safety. This may be accomplished by increasing

flexibility of visits locations, ensuring workers only hold one job title, allocating more funding towards supporting visits with CYiC, integrating quality of visits into policy, and streamlining documentation.

Implement Flexibility of Visit Location. There is an identified need for flexibility of location for in-person private visits. While the policy currently indicates that visits should be conducted in the child's placement, the data reflected that this is a barrier to completing visits as per policy requirements due to geographical distance and scheduling challenges with caregivers. The data indicated that other community members, and MCFD workers (such as resource workers) are regularly seeing the placement, and therefore workers with guardianship responsibilities should be able to visit with CYiC outside of the home. This is corroborated by having fun and enjoyable visit activities as indicators of quality visits.

The researchers encourage consideration that the MCFD make changes to *Chapter 5: Child Youth in Care Policies*, to update the requirement of visits being in the placement, to allow for visit location to be determined at the discretion of the worker with guardianship responsibilities, as long as an MCFD worker has seen the home within the 90-day period. This would allow workers to spend meaningful time with CYiC, while also increasing the frequency a worker is able to meet with CYiC.

Ensuring Workers Hold One Job Title. As evidenced by the data, competing job responsibilities and holding multiple job titles are barriers to completing visits with CYiC as per policy. The data indicated that while the majority of participants want to spend more time with CYiC, this is challenged by the increase in requirements for workers to complete administrative tasks such as documentation, referrals, care plans, and court documents took away time from seeing CYiC.

The researchers encourage consideration that the MCFD supports workers to hold only one job title, rather than multiple job titles. Implementing this would contribute to workers being able to allocate more time to visiting and building relationships with CYiC, while lessening the amount of administrative tasks on their workload.

Allocate More Fundings Towards Visits. The data demonstrates that quality visits with CYiC are indicated by building relationships and making the visits fun and enjoyable. Participants shared that visits should be less clinical, moving away from having visits in the office or foster home and instead doing fun activities that CYiC are passionate about, or that are special to that CYiC. The data also indicates that there is little available financial support for workers to use for these activities.

The researchers encourage consideration that the MCFD prioritizes allocating more funds towards supporting visits with CYiC, and ensuring that the funds are easily accessible to workers. These funds could go towards taking a CYiC out for a meal or to do a fun activity in the community.

Integrating Quality of Visits into Policy. The data showed that participants were unaware of whether a policy which guides how to complete a quality visit with CYiC and what to discuss during visits is available to workers. Even so, many participants noted that conducting a quality visit was an important factor that contributes to being able to build rapport with CYiC. This finding was supported through the literature review which determined that there is no policy in the MCFD pertaining to content discussed during visits, and indicators of quality in a visit.

The researchers encourage consideration that the MCFD make changes to *Chapter 5: Child Youth in Care Policies*, to include standards and guidelines which instruct workers on what to ask during visits and how to conduct a quality visit. In this policy update, a list of questions to ask CYiC during the visits and different indicators of a quality visit could be included.

Streamline Documentation. Participants identified that current documentation practices are excessive, and administrative tasks result in workers having less time in community visiting CYiC. The data also indicated that the location of where workers are meant to record their visits with CYiC is confusing and easily missed, which may result in visits not being documented or tracked.

The researchers encourage consideration that the MCFD streamline all documentation requirements of CYiC visits, into one accessible and comprehensive place

which could limit the duplication of documentation and minimize the current excessive requirements.

Considerations for Future Research

Child and Youth Centered Research. Further research in this area should gather the views of CYiC on their perspective and understanding of what constitutes a quality visit with their worker. Existing research with MCFD staff could inform new research with CYiC, thereby offering different perspectives and strengthening the validity of future findings in this area.

Indigenous Child Family Service (ICFS) Agencies. This research project was focused on in-person private visits with CYiC by MCFD workers. This project did not examine policy compliance by ICFS Agencies as they have different policy requirements regarding visits, as well as what ICFS Agency staff might suggest are indicators of the quality of visits. Further research might explore compliance rates of in-person private visits with CYiC at these agencies and barriers of practice to further understand the experiences of workers within a different policy context and service demographic.

Conclusion

This research study examined the indicators of quality visits between workers and CYiC, and factors contributing to MCFD workers completing in-person private visits with CYiC every 90 days as per policy requirements. The findings of this study demonstrated that the majority of participants indicated that seeing CYiC once every 90 days was insufficient in order to build meaningful relationships and that visiting once per month would be more sufficient. Participants highlighted that building genuine connections with CYiC contributes to the overall quality of visits. The research found that while visits were being completed as per policy requirements, challenges were encountered. This included issues with staffing, caseload size, scheduling, documentation, and relational barriers.

The researchers encourage consideration of implementing flexibility in visit locations, ensuring workers hold one job title, integrating quality of visits into policy, allocating funding for visits, and streamlining documentation. Future research may include a child and youth centered lens, and exploring this topic with ICFS Agencies. This research contributes knowledge to MCFD

that may inform future revisions to *Chapter 5: Child and Youth in Care Policies*.

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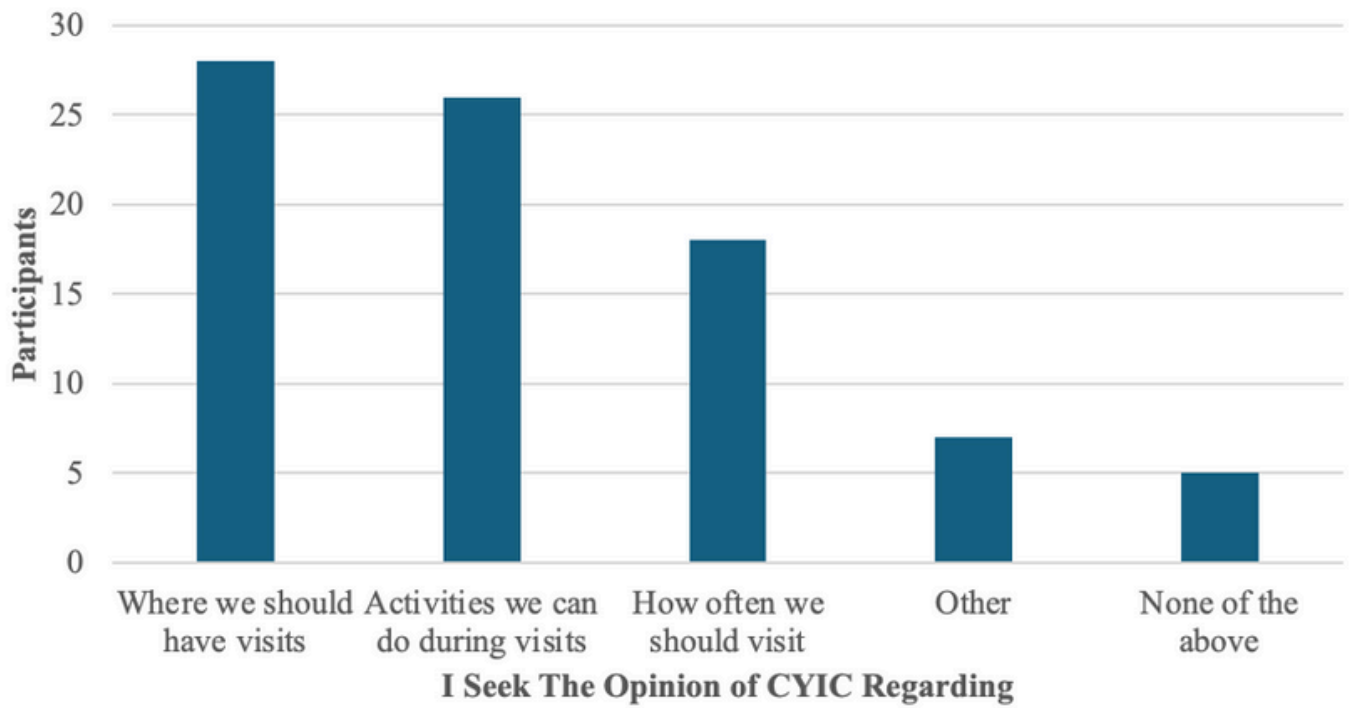
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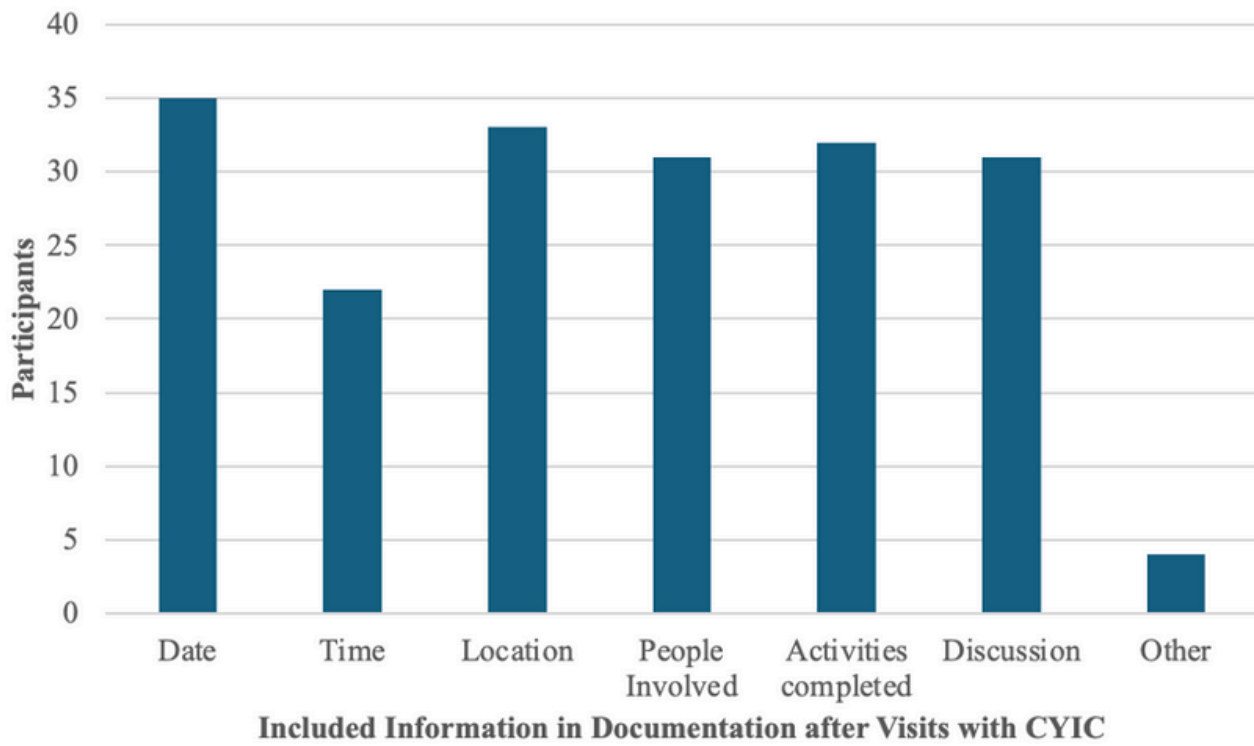
Appendix A: Table of Provincial Policy

	Interval of Visits	Policy on Documentation	Policy on Intention Behind Visits
British Columbia (Ministry of Children and family development, 2023c)	In-person contact once every 90 days	No	Yes
Alberta (Ministry of Children and Family Services, 2023)	In-person contact once every 90-days and one phone contact once per month	Yes	Yes
Saskatchewan (Ministry of Social Services, 2023)	In-person contact once per month	No	Yes
Manitoba (Ministry of Families, 2022)	In-person contact once per month	No	No

Appendix B: Seeking CYIC Opinion on Visits



Appendix C: Documentation



Appendix D: Frequency and Quality of Visits

