



Manitoba Advocate for Children and Youth

Supplemental Content

Summary Assessment of 57 Recommendations

Manitoba Advocate for Children and Youth

February 2024

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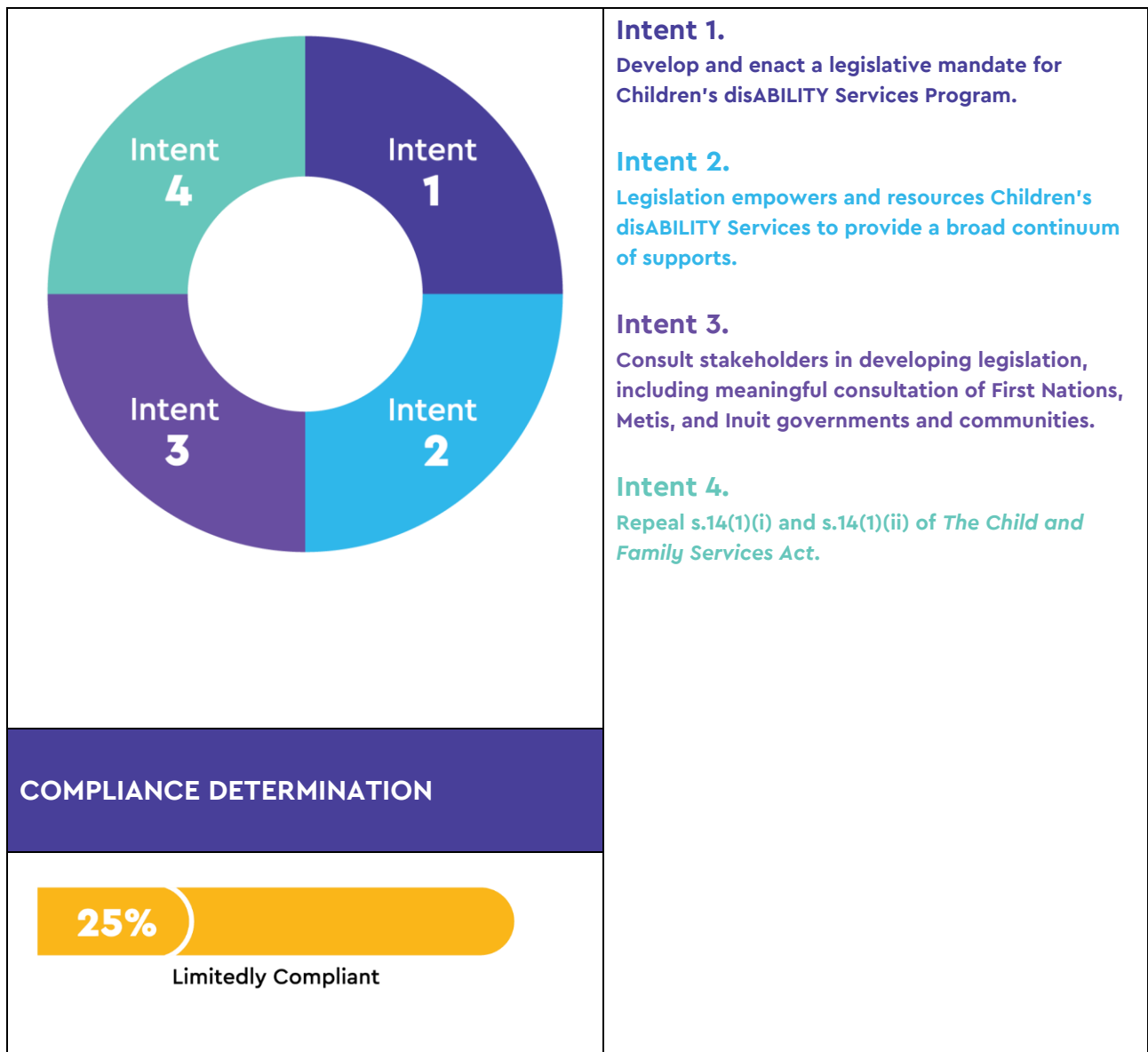
SECTION 1: Government of Manitoba

COMPLIANCE DETERMINATION

Disability – Recommendation 1

Recommendation Summary: Enact new legislation to govern services for children with disabilities.

Primary Public Body: Government of Manitoba



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Bridging the Gaps: Achieving Substantive Equality for Children with Disabilities in Manitoba
Date Released:	3/25/2021
Full Recommendation: (including details)	Recommendation One: The Manitoba Advocate for Children and Youth recommends the Government of Manitoba develop and enact a legislative mandate for the Children's disABILITY Services Program, similar to Alberta's <i>Family Support for Children with Disabilities Act</i> , that empowers and resources Children's disABILITY Services to provide a broad continuum of supports for children living with disabilities and their families.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Develop and enact a legislative mandate for Children's disABILITY Services Program. 2. Legislation empowers and resources Children's disABILITY Services to provide a broad continuum of supports. 3. Consult stakeholders in developing legislation, including meaningful consultation of First Nations, Metis, and Inuit governments and communities. 4. Repeal s.14(1)(i) and s.14(1)(ii) of <i>The Child and Family Services Act</i>.
Issue:	Disabilities
Public Body	Government of Manitoba
Dates of Previous Official Updates from Public Body:	May 31, 2023 June 30, 2022
2. Compliance Determination	
Limitedly Compliant 0.25	Actions taken only implement a small part of the recommendation, requirements are only fulfilled to a limited degree by actions taken, resulting in significant deficiency in implementation.
Self-Assessment	Limitedly Compliant
Previous Compliance Determination	Limitedly Compliant
3. Rationale for Determination	

(How did you reach this compliance determination)

Intent 1: Develop and enact a legislative mandate for Children's disABILITY Services Program.

2023

- Manitoba Families, through Children's disABILITY Services (CdS), has reported that the department has focused on significant changes to service delivery for children with disabilities, including the transfer of case management services for children with autism to St. Amant, and two CdS respite projects.
- The department continues to explore legislative options.

2022

- Manitoba Families reported that the department is exploring legislative options.
- The department reported that a jurisdictional scan of other provinces has been completed and that the department intends to consult provinces that have introduced legislation to learn about the impacts of these legislations. MACY has requested a copy of the jurisdictional scan.
- The department also reported that it has reviewed legislation within Manitoba which directly or indirectly addresses or impacts the rights of children with disabilities.

Intent 2: Legislation empowers and resources Children's disABILITY Services to provide a broad continuum of supports.

2023

- Manitoba families, through CdS, reported that CdS is committed to providing a range of supports for children with disabilities and their families. Through initiatives mentioned in intent 1, CdS is expanding the continuum of supports.

2022

- Manitoba Families reported that the department is exploring legislative options.

Intent 3: Consult stakeholders in developing legislation, including meaningful consultation of First Nations, Metis, and Inuit governments and communities.

2023

- The department continues to explore legislative options.

2022

- Manitoba Families reported that this is "to be initiated."

Intent 4: Repeal s.14(1)(i) and s.14(1)(ii) of *The Child and Family Services Act*.

2023

- The department continues to explore legislative options.

2022

- Manitoba Families reported that this is "to be initiated."

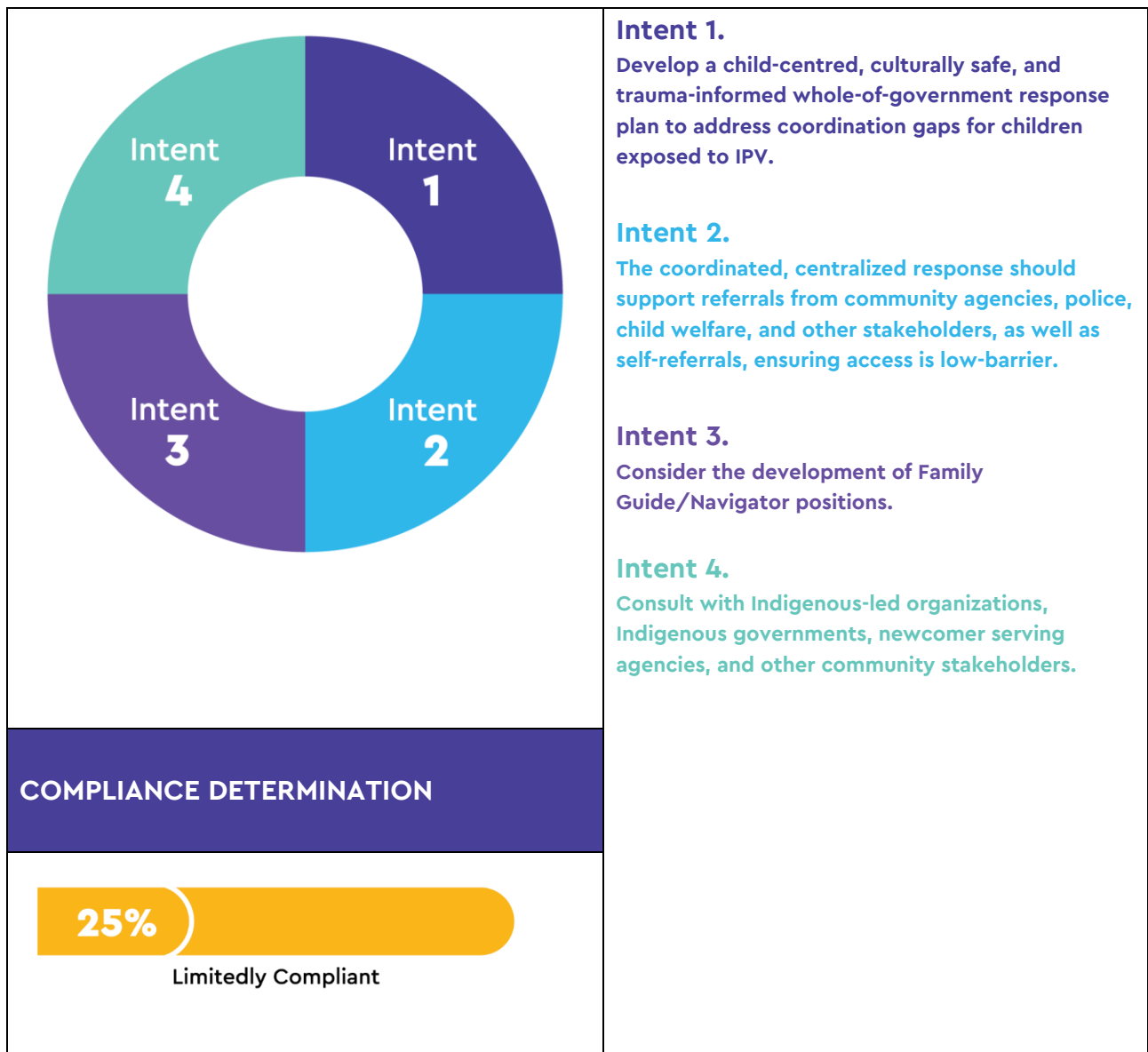
Analysis Summary: MACY recognizes that legislative enactments take time. While changes to the services available in Children's disABILITY Services have been reported, no action has been taken towards the intent of this recommendation. As such, this recommendation remains Limitedly Compliant.

COMPLIANCE DETERMINATION

IPV – Recommendation 4

Recommendation Summary: Development of whole-of-GOM response plan to children exposed to IPV.

Primary Public Body: Government of Manitoba (MACY-RAP)



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Every Two Hours: A Special Report on Children and Youth Exposed to Intimate Partner Violence in Manitoba
Date Released:	6/22/2022
Full Recommendation: (including details)	<p>Recommendation Four: The Manitoba Advocate for Children and Youth recommends that the Deputy Ministers responsible for the Manitoba Advocate for Children and Youth Recommendations Action Planning (MACY-RAP) Committee lead the development of a whole-of-government response plan to address the coordination gaps for children exposed to intimate partner violence (IPV), with the goal of ensuring a child-centred, culturally safe, and trauma-informed service response for all children known to be exposed to IPV in Manitoba.</p> <p>DETAILS: These activities should include:</p> <ul style="list-style-type: none"> • Service response and coordination needs include: centralized assessment of referrals for children exposed to IPV and their families, family navigation services with warm referrals and follow-up supports. • This coordinated response should support referrals from community agencies, police, child welfare, and other stakeholders that have contact with children exposed to IPV and their families and develop a response appropriate to the level of need. • Consider the development of child/youth-centred and specialized Family Guide/Navigator position(s) to ensure IPV survivors and their children are connected to available services at the earliest opportunity. • Consult with Indigenous-led organizations, Indigenous governments, newcomer serving agencies, and other community stakeholders in the development of this response. • Ensure low-barrier access by allowing self-referrals and through a broad eligibility criteria that is not based on whether criminal charges are laid.

Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Develop a child-centred, culturally safe, and trauma-informed whole-of-government response plan to address coordination gaps for children exposed to IPV. 2. The coordinated, centralized response should support referrals from community agencies, police, child welfare, and other stakeholders, as well as self-referrals, ensuring access is low-barrier. 3. Consider the development of Family Guide/Navigator positions. 4. Consult with Indigenous-led organizations, Indigenous governments, newcomer serving agencies, and other community stakeholders.
Issue:	Intimate Partner Violence
Public Body	Government of Manitoba (MACY-RAP)
Dates of Previous Official Updates from Public Body:	May 31, 2023
2. Compliance Determination	
Limitedly Compliant 0.25	Actions taken only implement a small part of the recommendation, requirements are only fulfilled to a limited degree by actions taken, resulting in significant deficiency in implementation.
Self-Assessment	Limitedly Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
<p>Intent 1: Develop a child-centred, culturally safe, and trauma-informed whole-of-government response plan to address coordination gaps for children exposed to IPV.</p> <p>2023</p> <ul style="list-style-type: none"> • Information provided under intent 4. <p>Intent 2: The coordinated, centralized response should support referrals from community agencies, police, child welfare, and other stakeholders, as well as self-referrals, ensuring access is low-barrier.</p> <p>2023</p> <ul style="list-style-type: none"> • Information provided under intent 4. 	

Intent 3: Consider the development of Family Guide/Navigator positions.

2023

- Information provided under intent 4.

Intent 4: Consult with Indigenous-led organizations, Indigenous governments, newcomer serving agencies, and other community stakeholders.

2023

- The MACY-RAP committee reported that in February 2023, they were instructed to form a working group to engage with community partners to address coordination gaps for children exposed to intimate partner violence (IPV).
- The IPV Interdepartmental Working Group had its Terms of Reference approved on March 10, 2023, and subsequently held meetings through April and May. The working group has been tasked with connecting with stakeholders around what coordination gaps exist for children exposed to IPV, and what specialized resources are needed to support those children. This included an exploration of programs for young men to address violence normalization and intergenerational violence.
 - The feedback gained through engagement efforts will reportedly be used as the foundational information for addressing this recommendation.
 - A joint briefing note with amalgamated findings is expected as a first output of the working group.
 - The briefing note will be utilized by the Department of Mental Health and Community Wellness as a starting point to determine how financial resources are best directed.

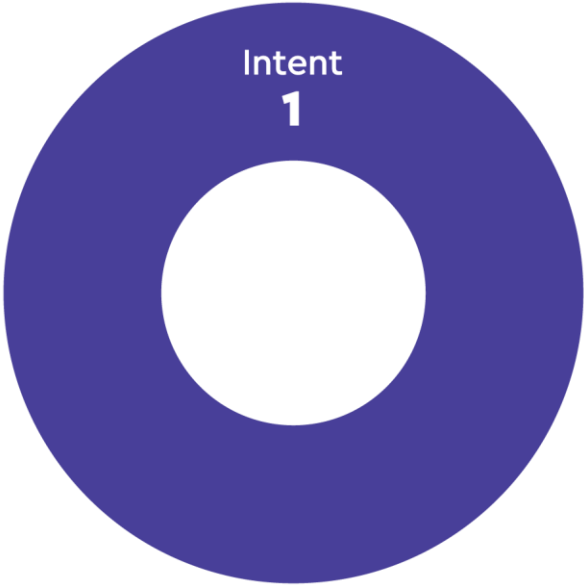

Analysis Summary: The development of the Interdepartmental Working Group through the MACY-RAP subcommittee signals a strong commitment to fulfilling this recommendation. The work and outputs of the working group are in the early stages, with a more long-term timeline of projects expected to be provided in future responses to this recommendation. As the information provided suggests a strong starting point towards fulfillment, this recommendation is considered Limitedly Compliant.

COMPLIANCE DETERMINATION

Matthew – Recommendation 6

Recommendation Summary: Create a long-term residential mental health treatment centre for youth.

Primary Public Body: Government of Manitoba

	<p>Intent 1. Create a long-term residential treatment centre for youth who are in the top tier of mental health care needs.</p>
<p>COMPLIANCE DETERMINATION</p>	
	

Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	The Slow Disappearance of Matthew: A Family's Fight for Youth Mental Health Care in the Wake of Bullying and Mental Illness
Date Released:	2/27/2020
Full Recommendation: (including details)	Recommendation Six: Long-term residential mental health treatment for youth. The Manitoba Advocate for Children and Youth recommends that the Government of Manitoba, through the Department of Health, Seniors and Active Living create a long-term, residential treatment centre for youth who are in the top tier of mental health care needs and for whom less intensive options have been ineffective.
Intent(s) of Recommendation:	1. Create a long-term residential treatment centre for youth who are in the top tier of mental health care needs.
Issue:	Mental Health and Addictions
Public Body	Government of Manitoba
Dates of Previous Official Updates from Public Body:	September 6, 2023
	July 21, 2023
	June 30, 2022
	July 13, 2021
2. Compliance Determination	
Limitedly Compliant 0.25	Actions taken only implement a small part of the recommendation, requirements are only fulfilled to a limited degree by actions taken, resulting in significant deficiency in implementation.
Self-Assessment	Limitedly Compliant
Previous Compliance Determination	Limitedly Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
Intent 1: Create a long-term residential treatment centre for youth who are in the top tier of mental health care needs.	
2023	
<ul style="list-style-type: none"> The Department of Mental Health repeated its request for a literature review in support of this recommendation to demonstrate that it is evidence-based, and 	

claimed that the establishment of a long-term residential program for youth is not clearly supported by research.

- Mental Health reported that it continues to gather evidence-informed data on treatment options and approaches to supporting youth who are at the top tier of mental health care needs.
- Mental Health reported that work to implement the youth healing lodge in Thompson is still in the early stages, but progressing.
- Mental Health explained that the healing lodge will:
 - Provide an opportunity to appropriately source youth IPDA beds, add transitional housing options for at-risk youth, and in the later phases, provide a "one-stop-shop" for youth to get support if they are struggling with addictions, mental health, and/or housing issues.
 - Serve as a place of support for youth at risk of involvement with the criminal justice system.
- Mental Health clarified that phase 1 of the healing lodge project focuses on youth involved with Justice, while phases 2 and 3 will see an expansion to community access.
- It remains unclear whether or not this will be a long-term residential treatment centre.
- When asked if there were any additional facilities being considered at this time, Mental Health reported that to best serve youth, evidence-informed, community integrated services are required in rural communities. It was explained that the Department continues to actively gather evidence-informed data, evaluate, and explore options for expanding areas of service and decreasing barriers for youth.

2022

- Manitoba Mental Health reported a recent investment in a youth healing lodge in Thompson. The lodge will be run by Manitoba Keewatinowi Okimakanak, in collaboration with Manitoba Justice. Although it is not clear whether this will be a long-term residential treatment centre, it is nevertheless a contribution to ensuring the availability of mental health services to youth.
- The proposed lodge will be a one stop resource centre, and will provide substance use and mental health supports for all youth involved in the justice system.
- The first phase of the healing lodge will include open-custody and *Intoxicated Persons Detentions Act* (IPDA) beds. Phase Two and Three will include the healing lodge, housing supports, employment and skills training, increased mental health and addictions resources, and community justice resources.
- Implementation of the first phase is 2022/23.

2021

- Discussions and planning are underway with national leaders regarding the development of a child and youth Needs Based Planning (NBP) framework. NBP is reportedly informed by best practices. According to Manitoba Health and Seniors Care (MHSC), many of the recommendations assigned to MHSC can be addressed through this process. This includes engaging with Shared Health to expand mental health assessment and treatment services for children and youth at Health Sciences Centre (HSC) in Winnipeg. As physical space is at a premium in HSC, this initiative is being implemented in a phased manner. Phase One of this initiative was implemented in 2020, it included:
 - Improving quality of care in the Children's Hospital Emergency Department (CHED) by providing relief coverage for child and adolescent Psychiatric Emergency Nurses (PENs) who are away due to illness or vacation. The PENs assess children and youth who present in the CHED and facilitate referral to appropriate outpatient resources.
 - Increasing individual and group psychotherapy capacity in Intensive Child and Adolescent Treatment Services (ICATS), a 12-week multi-disciplinary crisis treatment resource.
 - Increasing capacity in the Outpatient Mental Health Service (OMHS).
 - Improving access to group therapy and reduced wait times for Anxiety Disorders Services for Children and Youth (ADSCY).
- Phase Two (Stage One) of this initiative will include:
 - Increased capacity in the Child and Adolescent Rapid Assessment Clinic (CARAC) for additional children and youth to be able to receive a rapid psychiatric assessment. This will improve flow from, and wait times in, the CHED. This will also improve capacity to provide urgent consultation to staff in rural and remote areas regarding direct care of patients, thus reducing transfers to CHED.
 - Further increased group therapy capacity and reduced wait times in the ICATS.
 - Further increased capacity and reduced wait times in the OMHS.
 - Further increased capacity and reduced wait times in the ADSCY.
 - Shared Health has advised that they are currently interviewing for positions to enable capacity enhancement in these areas. These services were implemented early in 2021.
- Phase Two (Stage Two) of this initiative requires additional office and treatment space in HSC. Shared Health has submitted a plan for renovations in the 2021/22 Regional Health Plan. MHSC reported that additional service enhancements will be planned once a timeline is solidified for any renovations that may occur.
- Manitoba Adolescent Treatment Centre (MATC) continues to have an Intensive Treatment Service Inpatient Service, which is a hospital-based service that

provides inpatient assessment, treatment, and/or stabilization for youth with persistent and serious mental health disorders.

- The Manitoba government has invested \$800,000 in 2019/20, and \$1.5 million in 2020/21 to enable Neecheewam Inc. to expand its Winnipeg facility, and improve access to Indigenous-led healing, care and treatment services to sexually exploited youth. Neecheewam operates the Strong Hearted Buffalo Women Crisis Stabilization Unit, a four-bed crisis intervention program for female and transgender youth who are at high risk of sexual exploitation. With this provincial funding, Neecheewam will undergo renovations to pilot a new, longer-term four-bed addition to its treatment facility. It is expecting to open its doors in June, 2021. In the meantime, staff have been hired and training is underway. Staff are doing outreach/relationship building with the SEY youth and community resources. The funding for Neecheewam addresses recommendations in the VIRGO report on mental health and addictions.

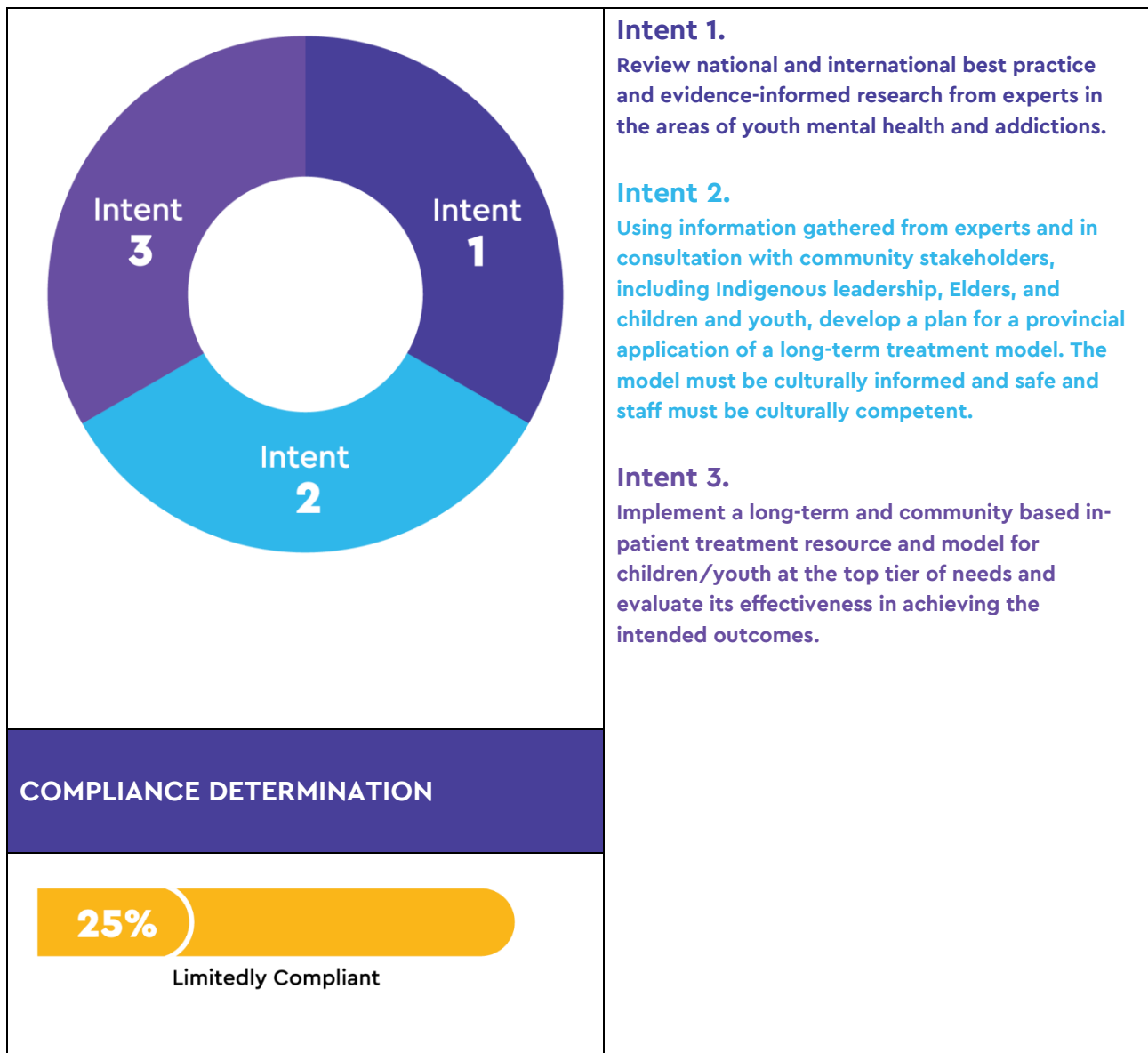
Analysis Summary: Work to implement this recommendation is still in the early stages. The completion of the healing lodge in Thompson, along with an evaluation of its effectiveness and the cultural appropriateness of the services it provides, will be an important step in meeting the requirements for this recommendation. There is a need to ensure that any long-term residential treatment centre is an accessible option for all children and youth in Manitoba who may want or need this kind of service, and to expand areas of service to ensure coverage, if required. Until this can be evidenced and more progress is made, the status determination for this recommendation will remain Limitedly Compliant.

COMPLIANCE DETERMINATION

Suicide Aggregate – Recommendation 7

Recommendation Summary: Create long-term treatment for youth with the highest needs.

Primary Public Body: Government of Manitoba



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	"Stop Giving Me a Number and Start Giving Me a Person": How 22 Girls Illuminate the Cracks in the Manitoba Youth Mental Health and Addiction System
Date Released:	5/7/2020
Full Recommendation: (including details)	Recommendation Seven: The Manitoba Advocate for Children and Youth recommends that the Government of Manitoba develop an inpatient or community-based long-term treatment resource that offers stabilization, assessment, treatment, and aftercare for youth who are at the top tier of mental health and addictions care needs, and for whom less intensive options have been ineffective.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Review national and international best practice and evidence-informed research from experts in the areas of youth mental health and addictions. 2. Using information gathered from experts and in consultation with community stakeholders, including Indigenous leadership, Elders, and children and youth, develop a plan for a provincial application of a long-term treatment model. The model must be culturally informed and safe and staff must be culturally competent. 3. Implement a long-term and community based in-patient treatment resource and model for children/youth at the top tier of needs and evaluate its effectiveness in achieving the intended outcomes.
Issue:	Mental Health and Addictions
Public Body	Government of Manitoba
Dates of Previous Official Updates from Public Body:	September 6, 2023
	July 21, 2023
	June 30, 2022
	July 13, 2021
2. Compliance Determination	
Limitedly Compliant 0.25	Actions taken only implement a small part of the recommendation, requirements are only fulfilled to a limited degree by actions taken, resulting in significant deficiency in

	implementation.
Self-Assessment	Largely Compliant
Previous Compliance Determination	Limitedly Compliant
3. Rationale for Determination	
<i>(How did you reach this compliance determination)</i>	
Intent 1: Review national and international best practice and evidence-informed research from experts in the areas of youth mental health and addictions.	
2023	
<ul style="list-style-type: none"> • Mental Health again reported on the inventory of services undertaken by Stepped Care Solutions (SCS), who produced a report with provincial and regional models of mental health, substance use, and addictions services that demonstrate where there are gaps or redundancies in services. MACY's request for a copy of this report, or a summary of findings, was denied. • Mental Health shared an Interim Evaluation Report on the Manitoba Mental Health and Addiction (MHA) Funding Initiative, produced by VIRGO Planning and Evaluation Consultants Inc. on March 31, 2022. • This Interim Evaluation Report includes a 16-page literature review of best practices from Canada and around the world in the area of youth mental health and addictions. Notably absent from this part of the literature review is any sort of analysis of harm reduction services, which is disappointing considering the large body of evidence demonstrating that these are practical, feasible, effective, safe, and cost-effective in diverse social, cultural, and economic settings. 	
2022	
<ul style="list-style-type: none"> • Manitoba Mental Health reported that a report (not shared with MACY) has been produced by Stepped Care Solutions which identifies gaps or redundancies in provincial and regional models of mental health, substance use, and addictions services. Planning is still underway to validate the information gathered in this report. • Appendix C was shared with MACY but it only contains an inventory of stepped services available to youth and young persons. There is no information in Appendix C on gaps and redundancies, or a literature review. • There is no evidence that a review of national and international best practices and evidence-informed research has been conducted. 	
2021	
<ul style="list-style-type: none"> • Manitoba Health and Seniors Care (MHSC) reported that discussions and planning are underway with national leaders regarding the development of a child and 	

youth Needs Based Planning (NBP) framework, and indicated that many of the recommendations assigned to them can be addressed through this process. At this time, the intent of this recommendation is being put on hold until a national Need Based Planning Framework is complete.

Intent 2: Using information gathered from experts and in consultation with community stakeholders, including Indigenous leadership, Elders, and children and youth, develop a plan for a provincial application of a long-term treatment model. The model must be culturally informed and safe and staff must be culturally competent.

2023

- Mental Health again cited the engagement process underpinning the "Roadmap for Manitoba" plan, which included consultations with Indigenous communities and leaders, children and youth, and individuals with lived experiences.
- Mental Health also cited the Virgo Interim Evaluation Report, which undertook comprehensive consultations and provided recommendations for enhancing non-residential community-based long-term treatment resources. Mental Health reported that it continues to make progress to address these recommendations.
- Mental Health explained that seven of the 31 initiatives funded through the bilateral agreement are Indigenous-led and/or incorporate culturally-informed and safe values and/or practices, although no details were provided as to what this entails.
- In terms of assessing the cultural appropriateness of existing services, it would be helpful to see a description of what culturally-informed and safe service provision for youth looks like in practice, as well as a list of training provided to staff to ensure cultural competence.
- There is no evidence that steps are being taken towards developing a long-term treatment "model".

2022

- There is no evidence of information gathering or consultation, per this intent.

2021

- MHWR is leading an engagement process, including a series of consultations, to inform an integrated, whole of government 5-year roadmap. MACY participated in the recent consultation for the MHWR Departmental Roadmap held on August 23, 2021. MHWR's engagement process will guide the work of the department, and is aligned with the department's mission to provide access to mental health and addictions support and treatment to improve the life outcomes for Manitobans in their journey through recovery and healing. This will include services and systems for children and youth.

- MHWR is in the process of hiring a consultant to conduct a mapping of mental health and addictions services and systems in Manitoba, which will inform the development of a Stepped-Care model. Clarification on the role and responsibility of the consultant may help meet this intent of the recommendation, if the consultation process includes meaningful engagement with community stakeholders and Indigenous leadership, Elders, children, and youth.

Intent 3: Implement a long-term and community based in-patient treatment resource and model for children/youth at the top tier of needs and evaluate its effectiveness in achieving the intended outcomes.

2023

- Mental Health sought clarification as to whether this recommendation is asking for a singular, new residential program to be established.
- Mental Health reported that there are currently various long-term treatment resources that offer stabilization, assessment, treatment, and aftercare to top tier youth, as the recommendation requires (e.g., Marymount, YASU, Compass, Hope North). There are also a variety of community-based outreach and support programs (e.g., StreetReach, Ata Chiminis Mikisiw).
- Mental Health reported that each of the initiatives funded through the bilateral agreement have been evaluated by an external contractor (Virgo Consultants) and shared the Interim Report.
- MACY has reviewed this Interim Report and notes that the evaluation therein assesses value for money, rather than impact on the well-being of children and youth.
- While essential in their own right, the services listed by Mental Health remain limited and are temporary rather than long-term. As such, they do not provide the type of service envisioned in this recommendation.

2022

- There is no evidence of plans to create a long-term treatment model, whether residential or not.

2021

- MHSC has engaged Shared Health to expand mental health assessment and treatment services for children and youth at Health Sciences Centre (HSC) in Winnipeg. As physical space is at a premium in HSC, this initiative is being implemented in a phased manner. Phase One of this initiative was implemented in 2020, it included:
 - Improving quality of care in the Children's Hospital Emergency Department (CHED) by providing relief coverage for child and adolescent Psychiatric

Emergency Nurses (PENs) who are away due to illness or vacation. The PENs assess children and youth who present in the CHED and facilitate referral to appropriate outpatient resources.

- Increased individual and group psychotherapy capacity in the Intensive Child and Adolescent Treatment Services (ICATS), a 12-week multi-disciplinary crisis treatment resource.
- Increased capacity in the Outpatient Mental Health Service (OMHS).
- Improved access to group therapy and reduced wait times for the Anxiety Disorders Services for Children and Youth (ADSCY).
- Phase Two (Stage One) of this initiative will include:
 - Increased capacity in the Child and Adolescent Rapid Assessment Clinic (CARAC) for additional children and youth to be able to receive a rapid psychiatric assessment. This will improve flow from, and wait times in, the CHED. This will also improve capacity to provide urgent consultation to staff in rural and remote areas regarding direct care of patients, thus reducing transfers to CHED.
 - Further increased group therapy capacity and reduced wait times in the ICATS.
 - Further increased capacity and reduced wait times in the OMHS.
 - Further increased capacity and reduced wait times in the ADSCY.
 - Shared Health has advised that they are currently interviewing for positions to enable capacity enhancement in these areas. These services were implemented early in 2021.
- MHSC reported that Phase Two (Stage Two) of this initiative requires additional office and treatment space in HSC. Shared Health has submitted a plan for renovations in the 2021/22 Regional Health Plan. Additional service enhancements will be planned once a timeline is solidified for any renovations that may occur.
- Community Emergency Department Violence Intervention Program (CEDVIP) assists youth and young adults aged 14-29 who present with violence-related injuries to the HSC Adult and Child Emergency Departments. The goal of the initiative is to decrease future incidences of violence by addressing issues that put youth and young adults at risk. Individuals who accept CEDVIP services receive wraparound care in the community for approximately one year. CEDVIP is an expansion of the former Emergency Department Violence Intervention Program. The CEDVIP team provides 24/7 on-call coverage by seven community support workers who meet youth at HSC and offer wrap around support in community. The Clinical Team (2.4 social workers, clinical team coordinator) provides 24/7 on-call clinical support and working alone protocol support.
- Manitoba Adolescent Treatment Centre (MATC) continues to have an Intensive Treatment Service Inpatient Service, which is a hospital-based services that

provides inpatient assessment, treatment, and/or stabilization for youth with persistent and serious mental health disorders.

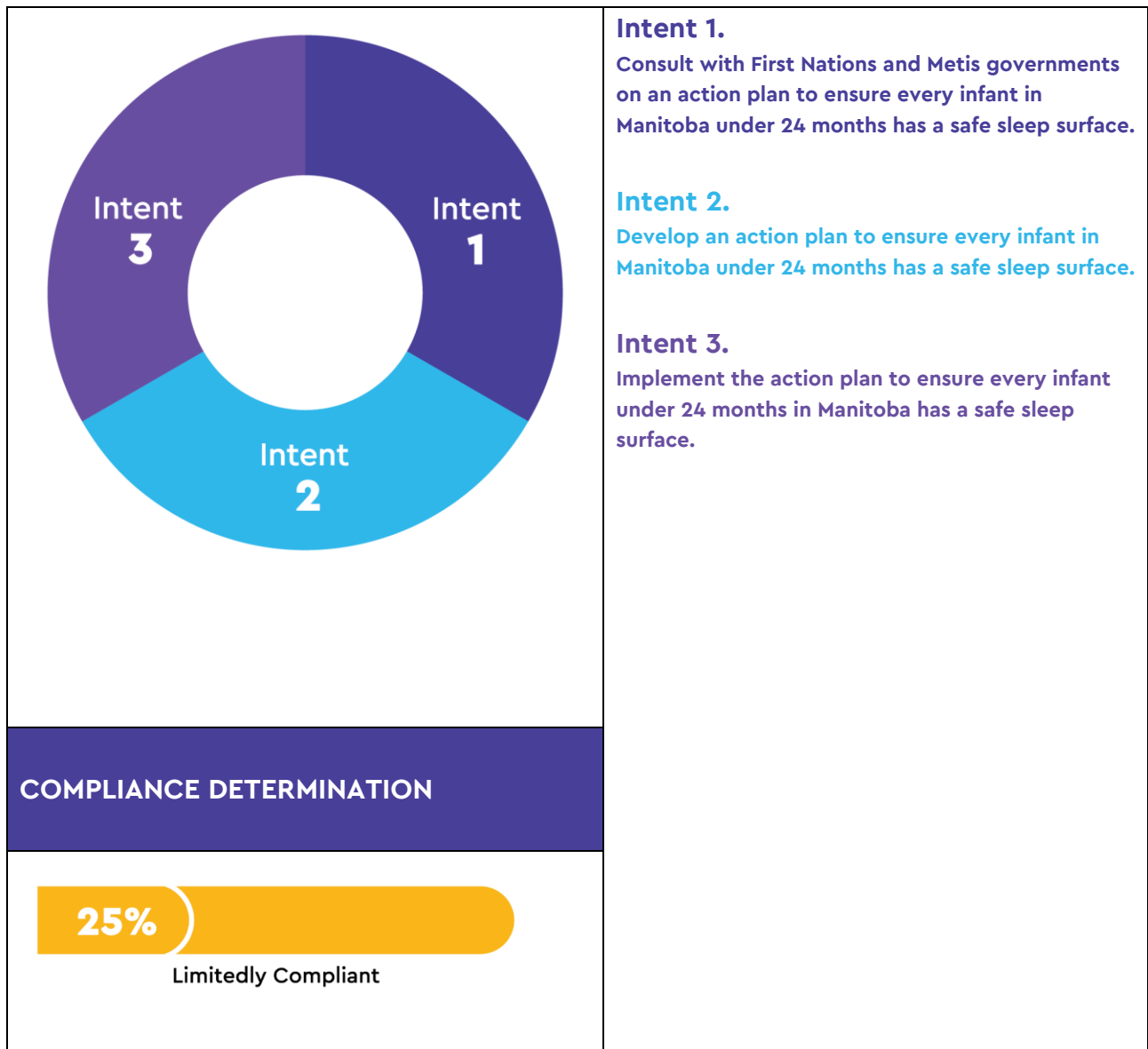
Analysis Summary: This recommendation is closely linked to *Matthew* recommendation 6. While there are some excellent mental health and addictions services available to children and youth in the province (mostly in Winnipeg), these remain limited and mostly temporary, and therefore do not currently provide the type of long-term model/service envisioned in this recommendation. The youth healing lodge in Thompson, when it is fully operational, may serve to meet some of the intents of this recommendation. This hinges however, on evidence that it provides an accessible long-term treatment option, as well as on an evaluation of its effectiveness and the cultural appropriateness of its services. With all this being considered, the status determination for this recommendation remains Limitedly Compliant.

COMPLIANCE DETERMINATION

Safe Sleep – Recommendation 1

Recommendation Summary: Develop an action plan to ensure every infant in Manitoba has a safe sleep surface (crib, bassinette, or culturally appropriate safe alternative).

Primary Public Body: Government of Manitoba



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Safe and Sound: A Special Report on the Unexpected Sleep-Related Deaths of 145 Manitoba Infants
Date Released:	3/13/2020
Full Recommendation: (including details)	<p>Recommendation One:</p> <p>The Manitoba Advocate for Children and Youth recommends that the Government of Manitoba develop and implement an action plan, in consultation with First Nations and Metis governments, to ensure that every infant in Manitoba under 24 months has a safe sleep surface (crib, bassinette, or culturally appropriate safe alternative) in which to sleep. The action plan ought to be targeted to both expectant parents and caregivers of infants under 24 months who cannot afford to purchase a safe sleep surface. The action plan will be designed and delivered based on the child-first and substantive equality principles.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • An action plan will prioritize the rights of children over jurisdictional or administrative barriers (child-first principle) and achievement of true equality in outcomes (substantive equality). • The action plan will explore recycling and loan programs, and other cost-effective and innovative approaches. • Parents or caregivers living with low incomes and needing a safe sleep surface will be identified through multiple systems including the health care system, Employment and Income Assistance, the Manitoba Prenatal Benefit Program, and Child and Family Services. • Parents or caregivers in need of a safe sleep surface will be able to self-identify. • As per the principle of non-discrimination detailed in the UNCRC, eligibility criteria will ensure that there is no discrimination of any kind, including national or social origins, or on the basis of race, or residence in a rural or remote community.

	<ul style="list-style-type: none"> Existing governmental policies in the child welfare and social assistance programs that relate to the distribution of safe sleep surfaces will be reviewed and revised if they do not comply with the child-first principle. Barriers to accessing cribs will be identified and mitigated. <p>IMPACT:</p> <ul style="list-style-type: none"> All infants in Manitoba will have a safe sleep surface as is necessary to realize their inherent rights to the highest attainable standard of health and to live and thrive (UNCRC, Art. 24, 6). The Government of Manitoba will ensure that caregivers have the financial and physical resources they need to support child health and wellbeing (UNCRC, Article 27).
Intent(s) of Recommendation:	<ol style="list-style-type: none"> Consult with First Nations and Metis governments on an action plan to ensure every infant in Manitoba under 24 months has a safe sleep surface. Develop an action plan to ensure every infant in Manitoba under 24 months has a safe sleep surface. Implement the action plan to ensure every infant under 24 months in Manitoba has a safe sleep surface.
Issue:	Safe Sleep
Public Body	Government of Manitoba
Dates of Previous Official Updates from Public Body:	May 31, 2023
	June 30, 2022
	May 31, 2021
2. Compliance Determination	
Limitedly Compliant 0.25	Actions taken only implement a small part of the recommendation, requirements are only fulfilled to a limited degree by actions taken, resulting in significant deficiency in implementation.
Self-Assessment	Partially Compliant
Previous Compliance Determination	Non-Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
Intent 1: Consult with First Nations and Metis governments on an action plan to ensure every infant in Manitoba under 24 months has a safe sleep surface.	
2023	
<ul style="list-style-type: none"> Further detail was provided on last year's response, where it is identified that there 	

is Indigenous representation on the joint work being led by Public Health on the recommendations in this report.

2022

- The response from the Government of Manitoba states, "Indigenous representation is included in the working group addressing Public Health responses."

2021

- No actions have been reported about reaching out to Indigenous governments as the Government of Manitoba is still determining next best steps internally before reaching out to external stakeholders beyond its jurisdiction.

Intent 2: Develop an action plan to ensure every infant in Manitoba under 24 months has a safe sleep surface.

2023

- The Government of Manitoba has reported initial steps on work related to the development of an action plan for ensuring access to safe sleep surfaces.
 - A working group has been established that includes, Dr. Lynne Warda, and representatives from Public Health, the Child and Youth Services Division, Employment and Income Assistance, Manitoba Status of Women, Healthy Baby Benefit, and WRHA Injury Prevention. As the first steps in the work of this group, information is being shared about what services each provides to support parents accessing sleep surfaces, past work on what has been successful and what has not, identified priority areas, and potential areas under consideration. Manitoba identifies that this work is in early stages, and additional information will be shared as further work is undertaken.
- In addition to the development of the working group, information was provided under this intent regarding the reiteration of the programming/supports identified in the 2022 response.
- Information is also provided identifying the standards that exist for both Public Health Nurses and CFS staff. Public Health Nurses standards include the requirement to assist families in obtaining a safe sleep surface if they cannot on their own. CFS standards have been amended to include safe sleep surfaces in safety assessments when working/planning with expectant parents.
- Information provided regarding the Child and Youth Services Division identified that staff have recently participated in a Safer Sleep webinar, with plans to develop an e-learning module based on the content of the webinar. Additionally, at their request, MACY provided the CYSD with additional information/analysis on the cases included in the Safe Sleep report where CFS involvement was identified.

This will aid in further review and prioritization of efforts to address information found in that analysis.

- The Department of Indigenous Reconciliation and Northern Relations is noted to have provided funding to MKO's Thompson Urban Aboriginal Strategy Baby Basket Program. This program collaborates with Thompson hospital to provide a maternity package tailored to expectant parents/mothers. It is anticipated to support 150-200 mothers and newborns in 2023.
- The Government of Manitoba reiterated a sentiment found in the 2022 response, that there are a number of ways work in the province is already addressing this need, that were not previously examined by MACY.
 - Through this sentiment, MACY notes the need for further discussion with the Government of Manitoba on the purpose of making this recommendation. To recommend an action plan for ensuring access to safe sleep surfaces is not to insinuate that no resources exist for providing access to safe sleep surfaces for Manitoba families. As indicated in the development of the working group of experts and relevant collaborators, the work towards an action plan is rooted in understanding what is available, what may be improved, prioritizing next actions, and improving how that information is disseminated to the individuals and families who require it.

2022

- The response from the Government of Manitoba states, "This report identified that approximately 75% of infants whose deaths were included in the research had a safe sleeping surface available in their home. The report had individual examples but no analysis of the issue of access to safe sleeping surface for the remaining 25%, did not include information or analysis of existing support in Manitoba to assist low income families in obtaining safe sleeping surfaces, or analysis showing issues related to access to these programs. The report did not include peer reviewed medical studies correlating outcomes for children over 12 months of age related to sleep surfaces."
 - The above statement is followed by a statement supporting the position that a safe sleep surface is best for infants as related to ages newborn to 12 months, as supported by best practice data.
- MACY accepts that no analysis was taken on the 25% of infants and their families on the issue of access to safe sleep surfaces. The implication of 1 in 4 infants dying without a safe sleep surface available in their home was deemed sufficient to recommend the government have a suitable action plan in place to ensure that all Manitoba families have access to a safe sleep surface, or at minimum have easy access to the information that supports families in knowing how to financially access safe sleep surfaces if needed. In addition, while the implications of safe

sleep practices change as infants age, families may still need to access cribs for infants in the 12-24-month age range – the data shows that infants in that age range have still died with safe sleep risk factors present.

- The responses additionally discuss that the work of public health nurses, EIA staff, CFS case workers, and hospital social workers includes assisting families identifying economic barriers to obtaining safe sleep surfaces. The resources identified as being utilized include;
 - EIA funding for infant needs can be used to purchase safe sleep surfaces. The funding provided is \$250 for first child, \$75 for subsequent (https://www.gov.mb.ca/fs/eia_manual/21.html).
 - Healthy Baby Prenatal Benefit is paid to low income expectant parents and can be used towards any cost at the discretion of the expectant parents, including purchasing a safe sleep surface (https://web2.gov.mb.ca/laws/regs/current/_pdf-regs.php?reg=89/2001).
 - Care providers to children who have low incomes but do not receive EIA benefits are eligible for the Manitoba Child Benefit, which can be used for purchases at the discretion of the care provider (<https://www.gov.mb.ca/fs/eia/mcb.html>).
 - Other community-based resources which support providing families with safe sleeping surfaces include community agencies and organizations such as You Can't Spoil A Baby (<https://youcantspoilababy.org/donate/what-to-donate/>).
 - Community second hand and thrift stores.
- The response further includes a statement on how a purchased crib is not required to have a safe sleep environment, and if a parent chooses not to have one, alternatives such as dresser drawers or laundry basket can provide safe environment for newborns and young babies (<https://healthyparentingwinnipeg.ca/safe-sleep-and-your-baby/>). Public health is identified as available to help parents learn about alternatives, as discussed in their most recent Safe Sleep pamphlet. The pamphlet includes reference for parents to contact public health if they need assistance in setting up an alternative safe sleep environment, but it does not include reference to how parents can get financial support for a safe sleep surface if needed (<https://healthyparentingwinnipeg.ca/safe-sleep-and-your-baby/>).
- An action plan to ensure families in Manitoba have access to safe sleep surfaces is not found in this response. Proper evidence is not provided that the Government of Manitoba understands the need for financial support for safe sleep surfaces, or that the available resources adequately cover the financial realities of accessing necessities for newborns. Many of the benefits and financial resources identified above are intended to cover a wide range of expenses experienced by parents.

The reality of inflation in Manitoba and Canada requires a more detailed understanding on how parents are utilizing these benefits, and whether they are appropriate for covering necessities for newborns.

2021

- No actions have been reported on the development of an action plan as the Government of Manitoba is still reviewing what is required for this recommendation, including how to proceed on analyzing pre-existing programs in Manitoba that support families in accessing safe infant sleep surfaces.

Intent 3: Implement the action plan to ensure every infant under 24 months in Manitoba has a safe sleep surface.

2023

- See response under intent 2.

2022

- The response from the Government of Manitoba referred to their response to Intent 2. No action plan appears to have been developed or implemented.

2021

- An action plan has not been developed yet that can be implemented.

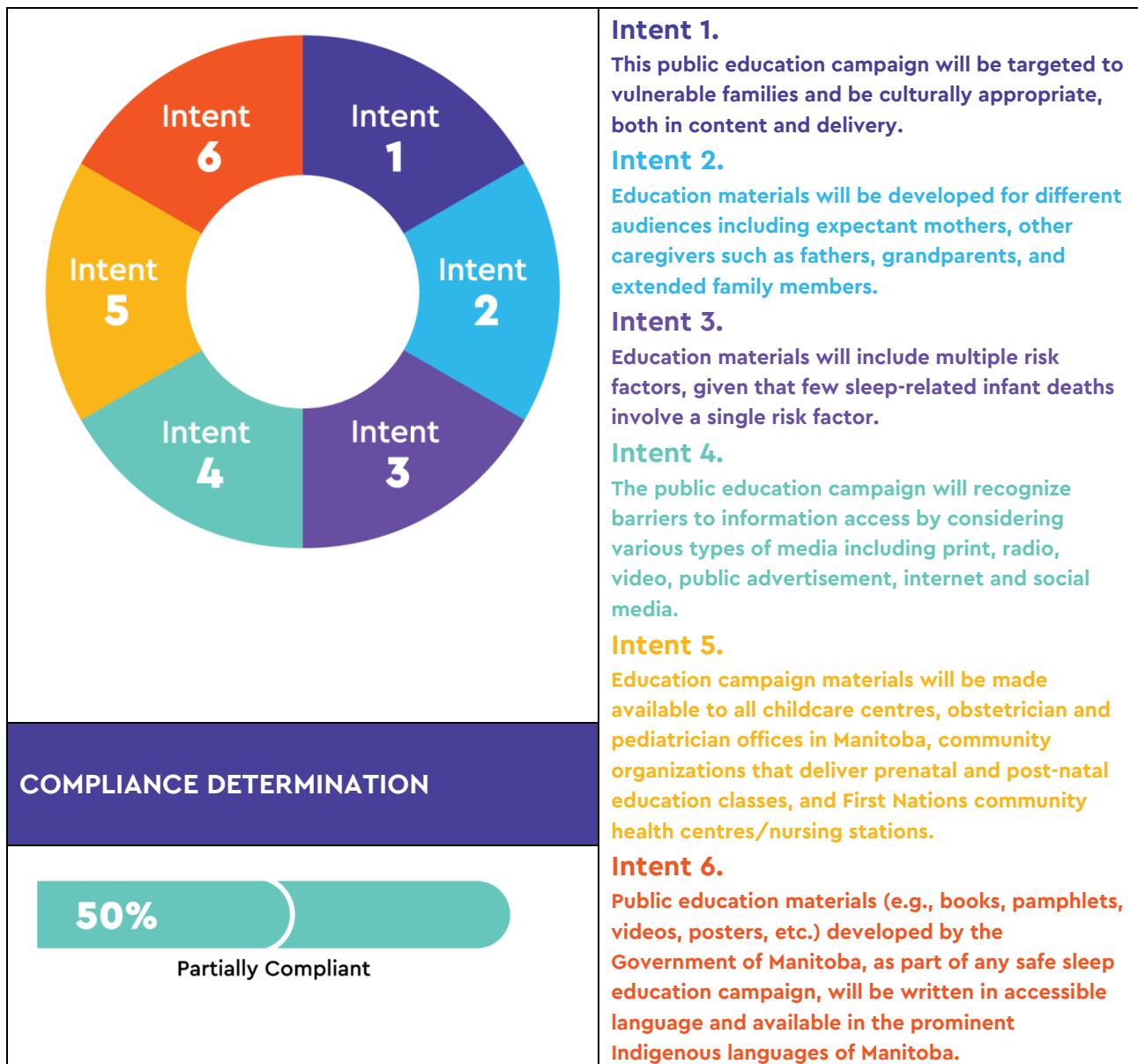
Analysis Summary: Through the responses provided to this recommendation in both 2022 and 2023, there is an expressed need for further collaboration and understanding between MACY and the Government of Manitoba, on what the purpose of an action plan for ensuring access to safe sleep surfaces encompasses, and how the important work already in action across the province can contribute to that action plan. There are noted important developments towards implementing this recommendation such as the development of the working group described under intent 2, as well as the increased emphasis on standards followed by public health nurses, and Child and Family Services staff for assisting families in accessing safe sleep surfaces. As the information provided begins to align with the purpose and intents of this recommendation, it is now considered Limitedly Compliant.

COMPLIANCE DETERMINATION

Safe Sleep – Recommendation 5

Recommendation Summary: Any public education materials must be written in accessible language and available in the prominent Indigenous languages.

Primary Public Body: Government of Manitoba



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Safe and Sound: A Special Report on the Unexpected Sleep-Related Deaths of 145 Manitoba Infants
Date Released:	3/13/2020
Full Recommendation: (including details)	<p>Recommendation Five:</p> <p>The Manitoba Advocate recommends that public education materials (e.g., books, pamphlets, videos, posters, etc.) developed by the Government of Manitoba, as part of any safe sleep education campaign, be written in accessible language and available in the prominent Indigenous languages of Manitoba.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • This public education campaign will be targeted to vulnerable families and be culturally appropriate, both in content and delivery. • Education materials will be developed for different audiences including expectant mothers, other caregivers such as fathers, grandparents, and extended family members. • Education materials will include multiple risk factors, given that few sleep-related infant deaths involve a single risk factor. • The public education campaign will recognize barriers to information access by considering various types of media including print, radio, video, public advertisement, internet and social media. In particular, radio has been successfully used by the Sacred Babies program to reach remote communities. • Education campaign materials will be distributed to families during prenatal care, in hospital, at The Birth Centre, and by Public Health Nurses post-partum public health visits. Materials will also be made available to all childcare centres, obstetrician and pediatrician offices in Manitoba, community organizations that deliver prenatal and post-natal education classes, and First Nations community health centres/nursing stations.

<p>Intent(s) of Recommendation:</p>	<ol style="list-style-type: none"> 1. This public education campaign will be targeted to vulnerable families and be culturally appropriate, both in content and delivery. 2. Education materials will be developed for different audiences including expectant mothers, other caregivers such as fathers, grandparents, and extended family members. 3. Education materials will include multiple risk factors, given that few sleep-related infant deaths involve a single risk factor. 4. The public education campaign will recognize barriers to information access by considering various types of media including print, radio, video, public advertisement, internet and social media. In particular, radio has been successfully used by the Sacred Babies program to reach remote communities. 5. Education campaign materials will be distributed to families during prenatal care, in hospital, at The Birth Centre, and by Public Health Nurses post-partum public health visits. Materials will also be made available to all childcare centres, obstetrician and pediatrician offices in Manitoba, community organizations that deliver prenatal and post-natal education classes, and First Nations community health centres/nursing stations. 6. Public education materials (e.g., books, pamphlets, videos, posters, etc.) developed by the Government of Manitoba, as part of any safe sleep education campaign, will be written in accessible language and available in the prominent Indigenous languages of Manitoba.
<p>Issue:</p>	<p>Safe Sleep</p>
<p>Public Body</p>	<p>Government of Manitoba</p>
<p>Dates of Previous Official Updates from Public Body:</p>	<p>July 21, 2023</p>
	<p>May 19, 2023</p>
	<p>June 30, 2022</p>
	<p>July 13, 2021</p>
<p>2. Compliance Determination</p>	
<p>Partially Compliant 0.50</p>	<p>Actions taken only implement part of the recommendation. Important requirements have been met and the recommendation is acted upon, however, deficiencies remain.</p>
<p>Self-Assessment</p>	<p>Largely Compliant</p>

Previous Compliance Determination	Limitedly Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
Intent 1: Launch a public education campaign targeted towards vulnerable families and ensure it is culturally appropriate both in content and delivery.	
2023	
<ul style="list-style-type: none"> • The Department of Health reported the Safe Sleep Committee was coordinated to address MACY recommendations, with further detail noted in the compliance determination form for Safe Sleep recommendation 3. • As detailed in recommendations 3 and 4, the Department utilizes <i>Safe Sleeping for Your Baby</i> (provided handout dated October 15, 2021 to MACY). Related to this recommendation, the Department contracted Vincent Design, consulted with Indigenous knowledge around traditional sleep practices, and utilized focus groups. The resource includes information on cradle boxes and moss bags, and has pictures representative of Manitoba families. • Manitoba Health reported the committee has engaged in discussions about alternative strategies for educational materials for diverse populations, which include Indigenous groups, newcomers, and all infant caregivers. Options such as messaging on crib sheets, songs, and books were highlighted, with a plan to explore the strategies this year. The committee intends to consider the feedback from the Nurse Advisor from Strengthening Families/Maternal Child Health (FNHSSM) and The Clinical Nurse Specialist/Indigenous Health Promotion Specialist regarding educational messaging. The Department recognized further consultation and collaboration with community partners and groups is required. 	
2022	
<ul style="list-style-type: none"> • A committee has been established to address this recommendation. The committee will utilize the "Safe Sleeping for Your Baby" resource (WRHA, 2021) in its work. • The resource was developed in consultation with WHRA Nursing Practice Council, FF Practice Council, Postpartum Child Health Program, FNHSSM, Provincial Obstetrical Working Group, Child and Family Services Healthy Start, College of Physicians and Surgeons of Manitoba, Child Health Standards Committee, and focus group of new/expectant parents. • The creators of the resource used an Indigenous design firm (Vincent Design) and consulted with Indigenous Knowledge Keepers around traditional sleep practices. • A project manager was hired to lead this work, starting on October 14, 2022. • A series of social media posts were released throughout the month of October 	

through Government of Manitoba channels. The topics covered include safe sleep, planning baby's safe sleep space, baby's safe sleep space, sharing a room but not a bed, firm sleep space without extra bedding, back to sleep, overheating, keeping baby smoke free, breastfeeding, and grandparents/other caregivers.

- Our understanding is that Manitoba Health is advocating for the proclamation of Safe Sleep Awareness Month in Manitoba, which would make Manitoba the first Canadian province to participate in this monthly campaign.
- In addition, it was reported that Manitoba Government Communications intends on connecting with relevant stakeholders to share the department's core messaging.

2021

- As stated in the response from Manitoba Health, and Seniors Care: "The Public Health Branch has been committed to responding to the current pandemic and will be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes."

Intent 2: Develop education materials (pamphlets, webpages, etc.) for different audiences including expectant mothers, other caregivers such as fathers, grandparents, and extended family members.

2023

- In 2023, the Safe Sleep resource was updated to include messaging for all infant caregivers, using the following text: "Share this information with grandparents, childcare, and anyone else who takes care of your baby." The Department reported the resources will be available for distribution in English and French this year.
- The Department reported it uses Facebook and Twitter posts designed to reach multiple infant caregivers. For instance, its March 2023 social media campaign included messaging for grandparents, and its summer campaign included messaging for all infant caregivers related to safe sleep surfaces when traveling (with links to the Government of Canada's "Safe Sleep on the Go" page).
- An intent to explore the creation and development of a Safe Sleep Kit for the Healthy Baby Program, targeting pregnant women and new families was reported. This plan was reportedly deferred due to time constraints, though the Department shared plans to explore the development and partners for the initiative this year.
- The Department reported the Safe Sleep poster QR code linking to its website as a means to connect with multiple caregivers. The roll-out of the posters (to be available in health care offices, birthing centres, and health care facilities) is to coincide with the release and implementation of the health care training module

this year.

- Manitoba Health reported an updated bilingual Safe Sleep handout is in production that includes messaging for all caregivers and multiple risk factors.
- At this time, there is no evidence of information made available in written Indigenous languages.

2022

- Manitoba Health reported that the "[Safe Sleeping for Your Baby](#)" resource (WRHA, 2021) will be adopted for the public education campaign.
- The department acknowledged that the resource is currently not suitable for different audiences.
- The committee has decided to modify the language to make it applicable to all caregivers.
- There are plans to engage in a media campaign where it will be reinforced that the information is for all who care for infants.

2021

- As stated in the response from Manitoba Health, and Seniors Care: "The Public Health Branch has been committed to responding to the current pandemic and will be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes."

Intent 3: Include multiple risk factors, given that few sleep-related infant deaths involve a single risk factor.

2023

- The Department continues to include multiple risk factors in their educational materials and associated posts, including sleeping surfaces, swaddling, overheating, sleep position, objects in the sleep environment, bedsharing, and smoking. Behavioural modification information includes smoking cessation, safer swaddling, choosing safe sleep sacks, alternate safe sleep options, and safer bedsharing.
- At this time, there is no evidence of risk factors being communicated in Indigenous languages.

2022

- Manitoba Health reported that multiple risk factors are included in the adopted resource "[Safe Sleeping for Your Baby.](#)"
- Bed sharing information continues to be included in the resource.

2021

- As stated in the response from Manitoba Health, and Seniors Care: "The Public Health Branch has been committed to responding to the current pandemic and will be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes."

Intent 4: Make education materials (pamphlets, webpages, etc.) available via various forms of media.**2023**

- Manitoba Health reported its educational materials are available in print format, online, and through social media channels.
- The Department reported the creation of Safe Sleep posters with a QR code (to be posted in birthing centres and health care facilities) will occur this year.
- The Department reported other formats are being considered by its partner organization FNSSHM, who has consulted with Indigenous communities. Findings are that oral traditions should be supported in addition to (or in place of) written material, so the creation of short videos and other non-print resources to address this need was reported. A timeline is unknown.
- Manitoba Health reported the committee has continued discussions of alternative strategies for educational materials. Creative options such as messaging on crib sheets, songs, and books were highlighted, with a plan to be explore the strategies further this year.
- The Department reported the committee members agree that further consultation and collaboration with community partners, front-line workers, Indigenous groups, newcomers and vulnerable families is important to gather information about effective and preferred communication for safe sleep education. Ideas shared include radio, podcast, posters, video, and infographics. Further planning will be ongoing at future committee meetings regarding the consultation process and groups. A consultation plan will be outlined this year.

2022

- Manitoba Health reported that there are plans to engage in a media campaign.

2021

- As stated in the response from Manitoba Health, and Seniors Care: "The Public Health Branch has been committed to responding to the current pandemic and will be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes."

Intent 5: Distribution list for education materials (pamphlets, webpages, etc.).

2023

- The Department reported its plan, beginning in January of 2023, to distribute the Safe Sleeping for Your Baby resource to also include birthing centres, prenatal providers, funded community health clinics, and resource centres.
- The Department reported that its October 2021 launch list included: FNHSSM, community offices, Health Sciences Centre, St. Boniface General Hospital, Regional Health Authorities, Doctors Manitoba (prenatal and pediatricians), Birthing Centre, Child and Family Services (shared with their network), and related health faculties (medicine, nursing, and occupational therapy).
- Manitoba Health reported a provincial fan-out of the updated resource will occur via e-mail to the above noted contacts. The resource is available on the Healthy Parenting Winnipeg website and is downloadable/printable.

2022

- No list was provided.

2021

- As stated in the response from Manitoba Health, and Seniors Care: "The Public Health Branch has been committed to responding to the current pandemic and will be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes."

Intent 6: Translate educational materials to Indigenous languages.

2023

- The Department reported recognition of this intent. It noted that guided by the principles of the Truth and Reconciliation Commission, Indigenous communities have an inherent right to self-determination. Accordingly, the Safe Sleep Committee recommends further engagement with Indigenous communities on the creation of a safe sleep resource in a way that is culturally safe and reaches families whose infants are at higher risk for sleep-related deaths. At this time, the Department does not have a specific timeline for the translation of the Safe Sleeping for Your Baby resource.
- Manitoba Health indicated purposeful discussion has been given to this recommendation. The Department's Safe Sleep Committee heard from FNHSSM – the organization that is revising the Sacred Baby Curriculum – that there are Indigenous youth who understand and speak the language of their communities,

but may not be fluent in reading the written word. The Department noted accessing printed resources in both English and Indigenous languages should be available; however, the message should not be printed in one language without a translation into English.

- The Department reported an intent to pursue additional modes of communication, such as infographics, video, etc., which may help reaching Indigenous families. Manitoba Health advised it will continue to support its Indigenous partners in addressing gaps with regular meetings and ongoing consultation, in addition to working with MACY.
- Notes from a May 2023 committee meeting indicate the decision to not pursue translation of a Safe Sleep handout is based on the notion Indigenous peoples are not a homogenous group, in addition to feedback from front line staff, community partners, and the community engagement with the Sacred Baby resource, that there is preference for oral vs. printed material. Manitoba Health reported further consultation and community engagement with Indigenous groups to assess barriers to information, and on the creation of a safe sleep resource in a way that is culturally safe, is under-way.

2022

- Manitoba Health reported that a committee was set up in January 2022 to address MACY recommendations for safe sleep.
- The committee has decided not to translate to Indigenous languages, despite this service being available through GOM Communications.
- The committee's position is that a translated resource may not provide accessibility given the word/action dynamic of Indigenous languages.
- Manitoba Health reported that the committee is exploring alternative ways to engage with Indigenous communities that reflect the oral tradition, elders, and community knowledge. In the past, this has been in the form of radio ads, posters, in-person discussions, and Sacred Babies curriculum.

2021

- As stated in the response from Manitoba Health, and Seniors Care: "The Public Health Branch has been committed to responding to the current pandemic and will be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes."

Analysis Summary: At this time, while discussions continue on means to ensure information is accessible and communicated, there does not appear to be any substantial movement towards pursuing written educational materials in prominent Indigenous languages. Other forms of accessible communication (e.g., bilingual safe sleep handout,

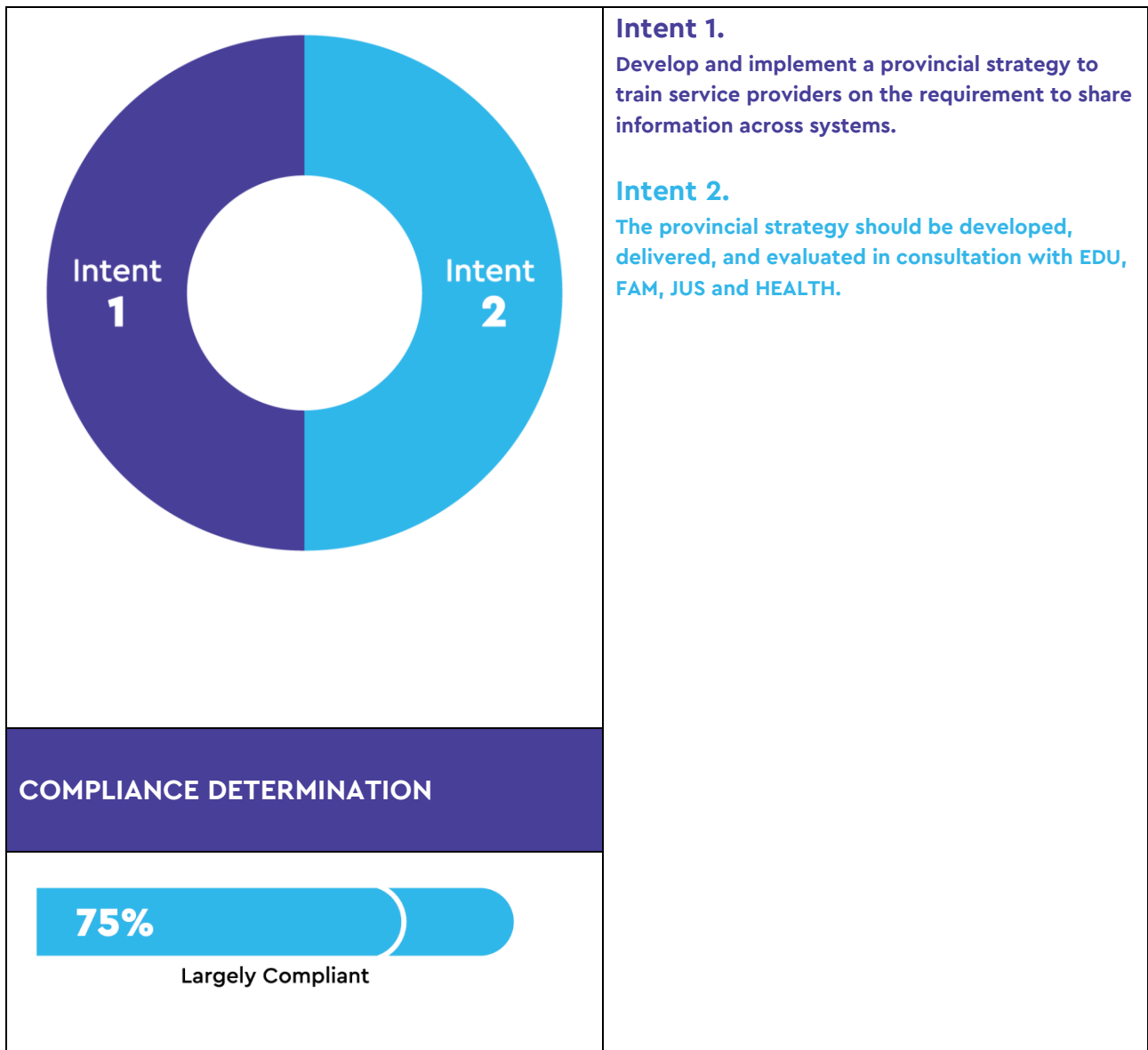
infographics, video, etc.) were reported as being discussed, though evidence of implementation was not available during this review period. The proposal to expand the means of information distribution is an optimistic find, and MACY will continue to request updates as developments continue. The status determination for this recommendation focused on public education materials (e.g., books, pamphlets, videos, posters, etc.) written in accessible language and available in prominent Indigenous languages of Manitoba is, therefore, Partially Compliant.

COMPLIANCE DETERMINATION

Circling Star – Recommendation 1

Recommendation Summary: Develop and implement a provincial strategy to train service providers on information sharing, and develop, deliver, and evaluate strategy in consultation with other GOM departments.

Primary Public Body: Government of Manitoba



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Documenting the Decline: The Dangerous Space Between Good Intentions and Meaningful Interventions
Date Released:	10/19/2018
Full Recommendation: (including details)	<p>Recommendation One:</p> <p>The Manitoba Advocate for Children and Youth recommends that the Province of Manitoba respond to the persistent lack of coordination between services for children and youth by developing and implementing a provincial strategy to train service providers on the requirement to share information across systems and ensure children and youth are at the centre of all service provision. This is to be developed, delivered, and evaluated in consultation with Manitoba Education and Training, Manitoba Families, Manitoba Justice, and Manitoba Health, Seniors and Active Living.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • In line with <i>The Protecting Children (Information Sharing) Act</i>, this training needs to be provided to all relevant service providers in Manitoba. • As part of this strategy, an inter-ministerial working group at the director, manager, and staff levels is needed to identify and address barriers to collaborative sharing of information and ensure oversight of quality assurance protocols related to case management across service providers.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Develop and implement a provincial strategy to train service providers on the requirement to share information across systems. 2. The provincial strategy should be developed, delivered, and evaluated in consultation with EDU, FAM, JUS and HEALTH.
Issue:	Coordination
Public Body	Government of Manitoba
Dates of Previous	May 31, 2023

Official Updates from Public Body:	June 30, 2022
	May 26, 2021
	June 30, 2020
	December 31, 2019
	June 27, 2019
	April 23, 2019

2. Compliance Determination

Largely Compliant 0.75	Actions taken meet the majority of requirements for implementation, only negligible requirements remain.
Self-Assessment	Largely Compliant
Previous Compliance Determination	Largely Compliant

3. Rationale for Determination
(How did you reach this compliance determination)

Intent 1: Develop and implement a provincial strategy to train service providers on the requirement to share information across systems.

2023

- No new information specific to this intent was provided.
- As general information, it was reported that the development of Indigenous Child and Family services law has changed the landscape for information-sharing regarding children in Manitoba. The Government of Manitoba reported that the Department of Families is focusing on supporting the implementation of Indigenous law in Manitoba, and this includes developing material to ensure information sharing provisions are understood. Future work on *The Protecting and Supporting Children (Information Sharing) Act (PASCA)* will be informed by changes in the CFS system.
- This will require an update to PASCA training videos and the previously developed PowerPoint following any amendments. An implementation plan for training across sectors will follow any changes and updates.

2022

- The final stages of the training plan for service providers are being implemented, including the production and release of a training video on the previously developed PASCA training. This video will be available via the Department of Families website.
- The cross-departmental working group continues to oversee the ongoing professional development of service providers in this area.
- A formal written strategy on the work reported since 2019 has not yet been provided.

2021

- The information provided in the most recent and previous responses, identifies that staff are being trained, and there is a plan for wider distribution and availability of training materials. Responses have indicated that inter-departmental coordination has resulted in both the operationalization of providing training on PASCA to employees of all government departments, and making the information available for non-government service providers. The provided information suggests this operationalization is not temporary, and would therefore continue beyond the monitoring of this recommendation. In order to deem this recommendation fully compliant, however, activities need to be fully completed and summarized within a document that addresses the sustainability of activities. This written document should include timelines to provide evidence of sustainability of activities following a fully compliant assessment.
- The information provided in this response indicates that a strategy is in place, but a written description of the strategy has not yet been provided. The strategy, as identified in the response to our recommendation, is as follows: training on PASCA (formerly PISCA) is coordinated by an inter-departmental working group with this group providing updates and information to the MACY-RAP subcommittee. The interdepartmental working group has developed training on PASCA with a train the trainer approach. Representatives from all government departments complete the 'train the trainer', and the trainers then relay that information back to their respective workplaces. Trainers are expected to complete a survey to provide feedback to the working group on how workplaces are incorporating the training materials. In order to reach a wider audience, both internal and external to government, the training materials are going to be made public through the Manitoba Families website, and a training video will be made as part of the materials. In this response, a PowerPoint presentation that will be the basis of the training video was provided. It covers all relevant information for service providers on PASCA, including how information sharing decisions can be made.
- Manitoba Education, on behalf of the interdepartmental team, identified an additional train the trainer workshop that occurred in November 2020. This workshop had 48 participants across Families, Health, Justice, and Education – including some First Nations agencies. This was in addition to a number of training workshops previously reported in 2019.
- Additional information provided suggests the training video will be filmed this fall following delays due to the pandemic. The video is the last remaining training material to be produced. The video and materials will be hosted on the Manitoba Families webpage, but all other government department pages will contain information and links.

2020

- Activities taken indicate that addressees have implemented training to service providers on the requirement to share information across the system. A strategy, however, has not been developed.

Intent 2: The provincial strategy should be developed, delivered, and evaluated in consultation with EDU, FAM, JUS and HEALTH.

2023

- Intent previously met in 2020.

2022

- Intent previously met in 2020.

2021

- The existence of the interdepartmental working group overseen by MACY-RAP indicates this strategy has been a cross-departmental effort.
- A survey has been developed for trainers who have completed the train the trainer workshops. The survey has not yet been provided to participants due to the realities of the pandemic. Training opportunities have been limited, and therefore the survey would not yield the amount of feedback the group would like to receive. The intention is to roll-out the survey at a time when a significant amount of information can be gathered to identify whether the training is making a difference on the understanding and utilization of PASCA.

2020

- Activities presented demonstrate consultation and involvement of all departments, meeting most requirements of this intent. Manitoba Families is playing a leading role in the development and delivery of training materials. Intent reported as met in 2020.

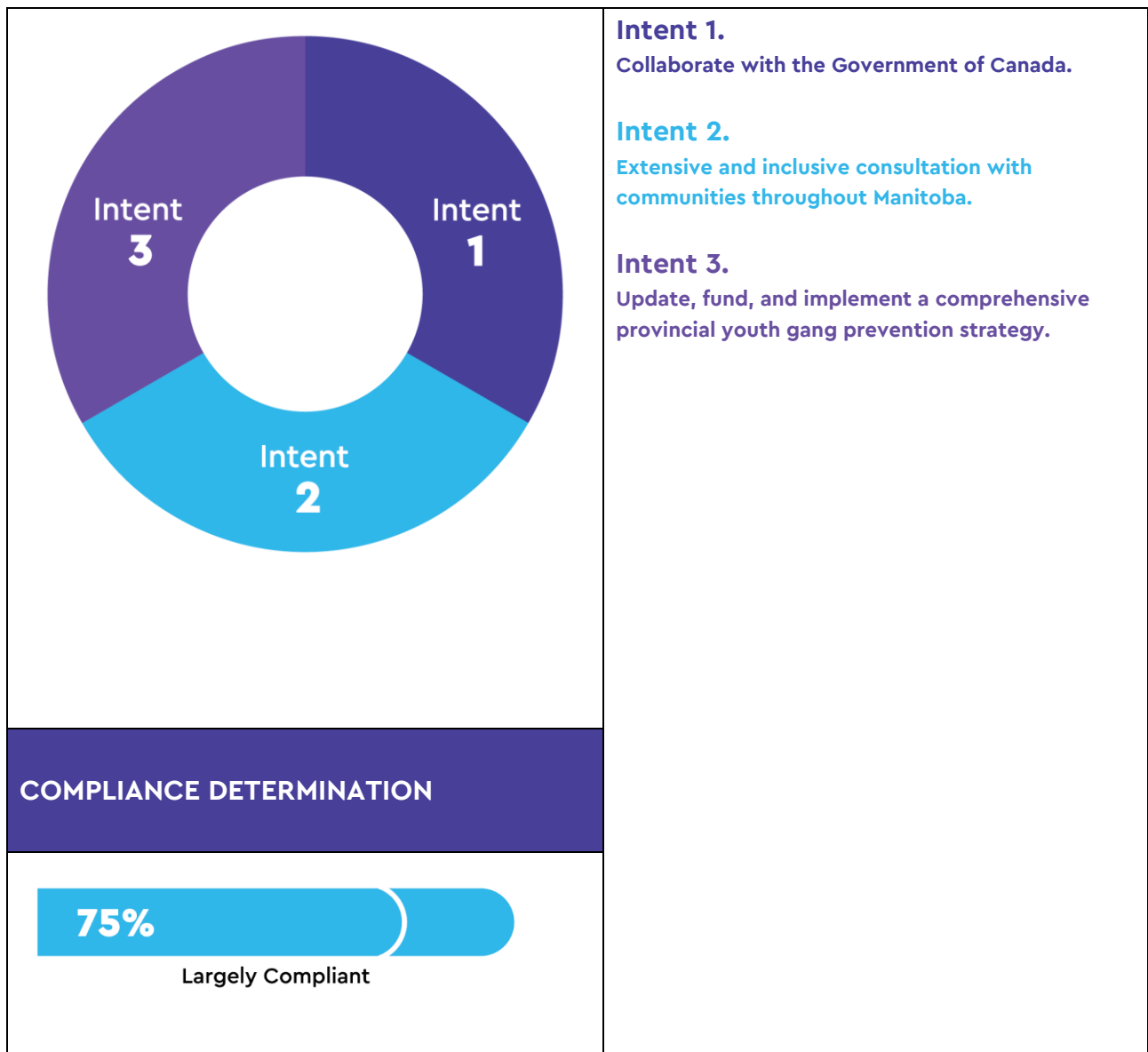
Analysis Summary: As previously identified, significant work has been put towards fulfilling the intents of this recommendation, as outlined in past responses. As of 2022, this recommendation was awaiting finalization of a training strategy to demonstrate its longevity. In the most recent update, the finalization has been put on hold due to the changing landscape of the child and family services system, and the impact this will have on information sharing under PASCA. As there are continued updates to information sharing, and how service providers are trained on the requirements for sharing information, this recommendation will remain Largely Compliant.

COMPLIANCE DETERMINATION

Boys Report – Recommendation 4

Recommendation Summary: Fund a comprehensive provincial youth gang prevention strategy.

Primary Public Body: Government of Manitoba



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Finding the Way Back: An Aggregate Investigation of 45 Boys who Died by Suicide or Homicide in Manitoba
Date Released:	11/4/2021
Full Recommendation: (including details)	<p>Recommendation Four:</p> <p>The Manitoba Advocate for Children and Youth recommends the Government of Manitoba, in collaboration with the Government of Canada, extensively and inclusively consult with communities throughout Manitoba to update, fund, and implement a comprehensive provincial youth gang prevention strategy.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • Employ a community-led and informed by a whole-of-government approach, including stakeholder involvement from across the province with a particular focus on Indigenous and newcomer communities doing work related to rural, remote, and urban gang activity. • Include a provincial funding commitment for youth gang prevention initiatives on an annual basis determined by a needs-based assessment, with particular attention to Indigenous and newcomer communities. • Address gang prevention for youth through adequate supports tailored to the needs of boys from various backgrounds to help them transition to adulthood. This includes accessing basic needs and navigating through various systems such as housing, employment, and education. • Respond to the needs of gang-involved boys based on gender identity to ensure services are more welcoming and accessible to boys. • Incorporate prevention via recreation and cultural activities, including sports and art. This should include funding and supports for Elders and Knowledge Keepers in recognition of their essential and traditional role in supporting young people.

	<ul style="list-style-type: none"> • Include trauma-informed, youth-centred therapeutic interventions for boys at all stages. • Include gang prevention as a priority within the Government of Manitoba's review of the current youth justice system in Manitoba and its connections to the child welfare system. • Consider the unique risk and protective factors for newcomer youth.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Collaborate with the Government of Canada. 2. Extensive and inclusive consultation with communities throughout Manitoba. 3. Update, fund, and implement a comprehensive provincial youth gang prevention strategy.
Issue:	Gang Prevention
Public Body	Government of Manitoba
Dates of Previous Official Updates from Public Body:	May 31, 2023
	August 18, 2023
	June 30, 2022
2. Compliance Determination	
Largely Compliant 0.75	Actions taken meet the majority of requirements for implementation, only negligible requirements remain.
Self-Assessment	Fully Compliant
Previous Compliance Determination	Partially Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
Intent 1: Collaborate with the Government of Canada.	
2023	
<ul style="list-style-type: none"> • Reports of collaboration from 2022 remain the same, whereby the Public Safety Division collaborates with Public Safety Canada on an ongoing basis through the Guns and Gangs Suppression Strategy and the delivery of Guns and Gangs funding, including support for crime/gang prevention initiatives. The Department confirmed the aims of the strategy meetings are to collaborate and exchange information to decrease risk and opportunity for youth recruitment and/or involvement in gangs. • Regarding collaboration with Public Safety Canada for Manitoba-based applications for the Crime Prevention Action Fund and National Crime Prevention Strategy cited last year, the Department reported this funding supports multi-sectoral, community-driven, and direct intervention projects for an identified 	

priority youth population.

- The Department reports continued federal, provincial, and territorial Crime Prevention Working Group representation, and confirmed the meetings continue to occur quarterly.

2022

- The Government of Manitoba reported that the Public Safety Division collaborates with Public Safety Canada on an ongoing basis through the Gangs and Gangs Suppression Strategy and the delivery of Guns and Gangs funding and support for crime/gang prevention initiatives.
- The department further reported that the Policing Services and Public Safety Branch collaborates with Public Safety Canada and provides feedback and recommendations on Manitoba-based applicants for the Crime Prevention Action Fund and National Crime Prevention Strategy.
- Manitoba Justice sits on the Federal, Provincial, and Territorial Crime Prevention Working Group which provides a platform to share information and align provincial and national priorities within the National Crime Prevention Strategy. These meetings take place 3-4 times annually.

Intent 2: Extensive and inclusive consultation with communities throughout Manitoba.

2023

- The Government of Manitoba maintained enhancing and expanding the 14 Community Mobilization initiatives across Manitoba is ongoing. Some communities include Steinbach, Portage la Prairie, Dauphin, Selkirk, Swan River, and The Pas, with funding supporting pilot projects in six First Nations communities across Manitoba. The government cited recognizing communities are best positioned to identify their own needs and develop solutions, while offering programming in consultation with the communities delivering services to youth.
- The Community Safety and Wellbeing (CSWB) Pilot Project referenced last year continues to have a reported completion over the 2022-23 and 2023-24 fiscal years. The Department reported CSWB planning supports a collaborative approach to addressing local priority risks to safety and well-being through the implementation of programs and strategies in four planning areas: social development, prevention, risk intervention, and incident response. The Department advised that involved communities work with a consultant to assist/guide the development of a community safety plan, which identifies needs specific to each community. The multi-sectoral collaboration table then designs a plan to enhance the safety and well-being of their respective communities. The Department added the referenced multi-sectoral tables have youth, First Nations, and newcomer populations represented. The Department indicated solutions are

different, community specific, and community-driven. The evaluation component will examine the process and overall project, and identify challenges the communities may have encountered during the development phase to assist with future planning.

- To highlight specific aims, Manitoba Justice advised it supported the City of Thompson to establish a multi-sectoral Public Safety Advisory Committee to complete a CSWB plan. Through this process, the community identified six priority areas, including the Youth Involved Crime and Harm priority area which focuses on resources to develop programs and strategies to create opportunities for at-risk youth. The Department clarified these cited initiatives are focused on positively engaging youth and fostering relationships so youth have an expanded community network. Goals include connecting with family members or individuals youth have identified as significant in their lives through activities to strengthen relationships and promote/encourage healthy pathways. Some examples of engagement/activities include: paint nights/murals with an Indigenous artist, the purchase of life size games at Thompson Recreation Centre, family nights with feasts, a movie night, camping, Paint Lake trips, supporting youth attendance at Treaty Days, and bowling. The overarching goal is creating opportunities for youth to feel connected, and gain a sense of belonging within their community.
- For this intent, Manitoba Justice reported engagement and consultation with First Nations/regional Indigenous organizations. Specific to newcomer youth, Justice provides funding to the N.E.E.D.S. Program (which enhances integration of immigrant and refugee youth through social programming and life skills), as well as to the Immigrant and Refugee Community Organization of Manitoba (IRCOM) to empower newcomer families through housing, programs, and services.
- The Government of Manitoba indicated the 2023 budget included additional investment for several initiatives related to community safety, including an expansion of community safety and well-being planning and community mobilization. Further details on which additional communities will be supported was said to be announced in the coming months.

2022

- The Government of Manitoba reported that Manitoba's Policing and Public Safety Strategy identifies enhancing and expanding Community Mobilization as a priority area.
- Community Mobilization is a locally driven community-led, multi-sector/whole of government (approach to addressing risk and enhancing community safety and wellbeing. There are 14 community mobilization initiatives in Manitoba working to connect multi-barriered children, youth, and families to appropriate services and supports, with the aim of reducing involvement in the justice and child welfare systems. This includes working with justice-involved, youth and addressing

community-level issues such as gang prevention.

- On April 29, 2022, Manitoba Justice announced the Community Safety and Wellbeing (CSWB) Pilot Project, which will include 14 communities throughout Manitoba, including rural, urban and First Nation Communities. This process will work with local government, community stakeholders, community members, law enforcement, and government departments (Justice, Health, Education, Mental Health, Families, etc.).

Intent 3: Update, fund, and implement a comprehensive provincial youth gang prevention strategy.

2023

- The Government of Manitoba reiterated that its findings from consultations and engagement with community stakeholders and former gang-involved individuals, indicate there is not a 'one size fits all' approach to support gang-involved or at-risk individuals. Programs and initiatives which are supported to address youth gang prevention/intervention were cited, repeating some of those presented in 2022 (e.g., Lighthouse, Turnabout, community mobilization, and The Link). Manitoba Justice further advised it can share statistics and demographic information on the youth/families served by Lighthouse and Turnabout with MACY once made available.
- The Department continues to support restorative justice and diversion programs to support youth before they enter, or become entrenched in, the Criminal Justice System. Manitoba Justice indicated the number of young people going through diversion is growing. To demonstrate, it advised 286 youth were diverted through community-based restorative justice centres during the 2021-22 fiscal year.
- The Government of Manitoba also reported supporting Indigenous policing initiatives in 18 First Nations communities for the delivery of effective and culturally sensitive policing.
- The Department cited the Block by Block Community Safety and Wellbeing initiative (aka Thunderwing), a provincially-led initiative that draws on the expertise of various partner agencies and provides a platform to address systemic barriers. Thunderwing aims to increase community safety and improve individual/family well-being in the North End of Winnipeg. Increasing community safety, enhancing well-being of families through belonging, mastery, independence, and generosity, improving relationships between families and service providers, and improving coordination of services are the initiative's aims. Manitoba Justice advised of an evaluation which occurred between 2014-2017, and cited the following participant outcomes: 39 of 67 participants had reduced calls for police service; 95% of participants agreed that due to their involvement with a Thunderwing Support Team, they had improved relationships with the agencies involved in their lives;

and 18 of 159 children were returned to parental care. Additional investments were announced in May of 2023 to enhance the project, which has been transitioned to Mount Carmel Clinic to administer.

- Manitoba Justice advised of their partnership with Manitoba Keewatinowi Okimakanak (MKO) for the creation and operation of a youth Healing Lodge in Thompson intended to provide culturally-led justice resources in the north, reduce youth recidivism rates, and decrease the use of Thompson's RCMP cells for youth detained under *The Intoxicated Persons Detention Act* (IPDA). The first phase will provide open-custody correctional services closer to home for northern youth, while phases two and three will see an expansion to include a healing lodge, enhanced mental health and addiction supports, employment/skills training, and community justice resources. Manitoba Justice confirmed Elders and Knowledge Keepers will be staffed in the Healing Lodge.
- The Department also cited the Reducing Youth Justice Social Impact Bond, delivered in partnership with MKO, which provides culturally safe, wraparound programming for youth involved in the justice system with the goal of reducing their number of days in custody. This program is in both Winnipeg and Thompson. Manitoba Justice noted this initiative blends Indigenous knowledge, wisdom, and healing practices together with western treatment modalities to support a child centred, individual, and holistic approach to wellness and healing.

2022

- The Government of Manitoba reported that the Crime Prevention Branch continues to explore how to better meet the needs of the community and implement evidence-based programming to help prevent individuals from being victimized or coming into contact with the law as offenders.
- It further reported certain crime prevention programs and initiatives as part of a comprehensive approach to address youth gang prevention and intervention. They include Turnabout, Lighthouses, community mobilization, mentorship programs such as Kistesimaw (Ka Ni Kanichihk), Ototema, Big Brothers Big Sisters Winnipeg, the Crime Prevention Branch, Community Alternatives to Detention, and SOURCE (Supporting Opportunities for youth Utilizing Recreation, Community and Education) through Broadway Neighborhood Centre.
- While these programs and initiatives point to positive steps taken towards crime and gang prevention, there is no indication of a comprehensive provincial strategy being developed or adopted.
- No report was given on efforts to fund a comprehensive prevention strategy.

Analysis Summary: There is evidence of collaboration with the Government of Canada on gang prevention. The Government of Manitoba reported a number of efforts to consult and collaborate with communities throughout the province. Community mobilization

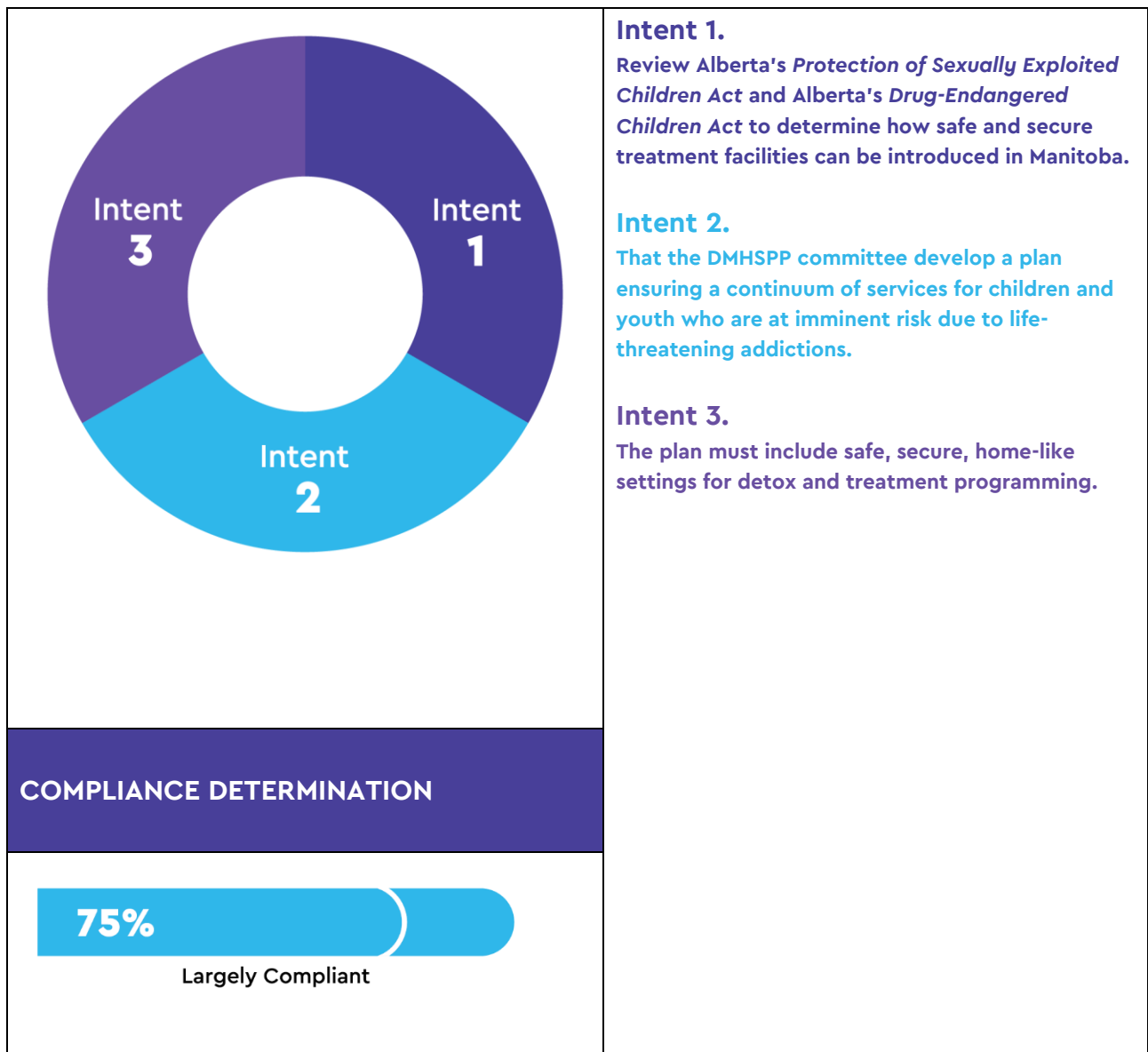
initiatives cited reflect recognition that communities themselves are best suited to identify and address their own unique needs. Strides have been made to increase programming availability and culturally appropriate services in line with the Department's assertion there is not a singular approach to gang prevention, and cited resources have been expanded to include rural and northern locations. Although there is no formal gang prevention strategy per se, there is demonstrated recognition that each child has unique needs and requires tailored interventions – a reality MACY recognizes considering the diverse reasons youth become involved with gangs in the first place. The cited interventions, programs, and different types of mediations presented can help mitigate the risks of becoming involved or entrenched in street gangs. The aims taken by the Government of Manitoba and ongoing actions of Manitoba Justice cited herein, with the anticipated opening of the Thompson Youth Healing Lodge, increase and will continue to expand resourcing which may aid in youth gang prevention. As such, this recommendation is now considered Largely Compliant.

COMPLIANCE DETERMINATION

Tina Fontaine – Recommendation 4

Recommendation Summary: Analyze Alberta's legislation and evaluate how safe and secure facilities can be introduced in Manitoba.

Primary Public Body: Government of Manitoba



Recommendation Compliance Summary

This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.



1. Recommendation Information	
Report Name:	A Place Where It Feels Like Home: The Story of Tina Fontaine
Date Released:	3/12/2019
Full Recommendation: (including details)	<p>Recommendation Four:</p> <p>The Manitoba Advocate for Children and Youth recommends that the Manitoba government, through its Deputy Ministers of Health and Social Policy and Priorities (DMHSPP) committee, work with the government's Legislation and Strategic Policy Branch to analyze the province of Alberta's <i>Protection of Sexually Exploited Children Act</i> and Alberta's <i>Drug-Endangered Children Act</i> to determine how safe and secure treatment facilities can be introduced in Manitoba. It is further recommended that the DMHSPP committee develop a plan to ensure the continuum of services for children and youth includes safe, secure, home-like settings for treatment and programming when children and youth are at imminent risk of harm or death.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • The continuum of services plan developed by the DMHSPP committee must define imminent risk, ensuring the definition contemplates issues of homelessness, addiction, and sexual exploitation. • The development of a plan for safe and secure treatment facilities must include consultation with subject matter experts, persons with lived experience, and community stakeholders to ensure the treatment settings are safe, secure, therapeutic, effective, and culturally informed.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Review Alberta's <i>Protection of Sexually Exploited Children Act</i> and Alberta's <i>Drug-Endangered Children Act</i> to determine how safe and secure treatment facilities can be introduced in Manitoba. 2. That the DMHSPP committee develop a plan ensuring a continuum of services for children and youth who are at imminent risk due to life-threatening addictions. 3. The plan must include safe, secure, home-like settings for

	detox and treatment programming.
Issue:	Mental Health and Addictions
Public Body	Government of Manitoba
Dates of Previous Official Updates from Public Body:	May 31, 2023
	June 30, 2022
	May 31, 2021
	June 30, 2020
	December 31, 2019
	June 30, 2019
2. Compliance Determination	
Largely Compliant 0.75	Actions taken meet the majority of requirements for implementation, only negligible requirements remain.
Self-Assessment	Largely Compliant
Previous Compliance Determination	Limitedly Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
Intent 1: Review Alberta's <i>Protection of Sexually Exploited Children Act</i> and Alberta's <i>Drug Endangered Children Act</i> to determine how safe and secure treatment facilities can be introduced in Manitoba	
2023	
<ul style="list-style-type: none"> • In regards to a review of the above-mentioned legislation, the following information was provided in elaboration of the response from 2022: <ul style="list-style-type: none"> ○ Alberta's <i>Drug Endangered Children Act</i> was reviewed in response to both this recommendation, and recommendation 6 from <i>Angel's Story</i>. No amendments to Manitoba legislation are being recommended or made in light of this review. ○ For Alberta's <i>Protection of Sexually Exploited Children Act</i> (PSECA), it is explained that the intent of this legislation is to provide front-line staff with the ability to apprehend and use specialized placements. Similar provisions are already included under Manitoba's <i>Child and Family Services Act</i> which lists sexual exploitation as a form of abuse from which agencies must protect children and can result in mandated agency involvement, which may result in a need for apprehension. • Further, the utilization of the Indigenous-led semi-secure crisis stabilization unit, Strongheart is identified as addressing the same needs found in the PSECA from Alberta. Work is currently identified as occurring on a review of the model to consider potential ways to expand the services provided by Strongheart CSU. This work is being led by the Child and Youth Services Division in collaboration with 	

community service providers.

2022

- In the current response, a review of the legislation is considered as complete, in terms of how looking at the legislation was considered, but the stance remains that no legislative amendments will be made in Manitoba to be similar to the Alberta legislation mentioned.

2021

- No evidence was provided that indicates that Alberta's legislation has been reviewed, which is consistent with MACY's 2020 compliance determination.

2020

- There are discrepancies reported by the public body as to the review of Alberta's legislation. The Department of Families reported in June 2019 that a review was completed. In June 2020, however, the Department of Families indicated that "work continues" on the review of the Alberta legislation. Results and analysis of this review were not provided. It is not clear how the review is considering the use of safe and secure treatment facilities for youth in Manitoba.

Intent 2: That the DMHSPP committee develop a plan ensuring a continuum of services for children and youth who are at imminent risk due to life-threatening addictions.

2023

- The Government of Manitoba reported on the November 15, 2022 Throne Speech, which identified strengthening and expanding services in mental health and addictions in its vision and priorities for the coming year. There was also a commitment to building on the existing five-year roadmap for mental health to complete and implement a provincially coordinated strategy for suicide prevention, focusing on youth and at-risk communities.
- Work regarding the expansion of the youth hub model (Huddle) was identified.
- In 2022-23, StreetReach and the Child and Youth Services Division entered a partnership with the WRHA for a Mental Health Clinician and Nurse Practitioner. A mental health clinician was hired in February 2023, and has been connecting with clients in an outreach capacity to provide mental health services and bridge the gap to other community resources. The Division is identified as remaining engaged to develop this partnership and new opportunities for collaborative work.
 - A positive development identified through this partnership is for youth aging out of the StreetReach program, and the capacity of the Mental Health Clinician to refer and make connections to CEDVIP (where

previously this program was only accessible through emergency room presentation).

- The hiring of a nurse practitioner is identified as a next step in the partnership.

2022

- The current response continues to list developments and initiatives occurring in the province as related to mental health and addictions services available to children and youth. The response specifically references:
 - The release of the Mental Health and Community Wellness Roadmap which provides overarching principles and direction in regards to service delivery for children and youth.
 - One aspect of a continuum of services is the expanded Youth Hubs (Huddle), which have six locations, include Indigenous-led work, and mental health and addictions supports.
 - There has been increased investment in a mindfulness-based cognitive behavioural therapy program to expand access and improve programming (aim to train 100 new facilitators, and have 1,000 new participants). The programming is being adapted for adolescents aged 14-17, when previously it was only available to those 18+.
- The response to this intent of the recommendation identifies that work is ongoing to reach a full continuum of services and is not yet complete.

2021

- MACY-RAP reported on Ata Chiminis Mikisiw (Eagle Embracing You), Project Neecheewam Inc.'s voluntary new specialized treatment facility for high-risk youth. At the time of reporting, the facility was not open. Other activities reported include enhancements of StreetReach in Thompson, additional in-person MATC clinician supports in Thompson to connect youth with mental health and addictions to local resources, the development of Indigenous-led healing resources by Clan Mothers Healing Village, and work to review placement options.
- The new Department of Mental Health, Wellness and Recovery is currently preparing to undertake broad consultation to develop an integrated, whole-of-government action plan for mental health, substance use, wellness, and health promotion services in Manitoba. The consultation and development of an action plan indicate that early actions are being taken to develop a plan to ensure a continuum of services for children and youth who are at imminent risk due to life-threatening addictions.
- Although there are many activities reported, there remains no plan to ensure the continuum of services for children and youth who are at imminent risk due to life threatening addictions. Furthermore, Neecheewam's new Ata Chiminis Mikisiw

program, StreetReach enhancements, and Clan Mothers' work are targeted solely to female youth. The work, therefore, does not extend to ensuring a continuum of services for all children who are at imminent risk due to like-threatening addictions.

2020

- MACY-RAP reported that the Manitoba's Clinical and Preventive Services Plan (MCPSP) is a project within Manitoba's Health System Transformation and the Virgo Recommendations that has been incorporated within the broader health care system (December 31, 2019 update). Rationale was not provided on how the plan addresses the needs of children and youth that are at imminent risk due to life-threatening addictions.
- A review of Manitoba's Clinical and Preventive Services Plan by Shared Health from November 18, 2019 does not mention addiction treatment for youth. A PowerPoint available online on MCPSP does not address the specific service needs for children and youth with life-threatening addictions, nor the development of a continuum of services for this population.
- In the December 2019 synopsis, it was reported that Manitoba will adopt a Stepped Care Model in which mental health and addictions treatment and recover support services are aligned to five tiers of complexity. There is no evidence provided that the model is targeted to youth services as opposed to the larger public.
- According to the December 2019 report, the current focus is on making short-term changes and implementing initiatives that will have an immediate impact. There is, however, no clear continuum of services plan developed by the DMHSPP committee that defines imminent risk, and ensures the definition contemplates issues of homelessness, addiction, and sexual exploitation.

Intent 3: The plan must include safe, secure, home-like settings for detox and treatment programming. The development of safe and secure treatment settings must include consultation with experts, persons with lived experience, and community stakeholders.

2021

- Intent 3 was assessed as being met in 2020.

2020

- Information was not provided on how Manitoba's Clinical and Preventive Services Plan includes safe, secure, and home-like settings to address the detox and treatment programming needs of children and youth with life-threatening addictions.
- Manitoba Families announced in November 2019, that Neecheewam Inc. will

receive \$3.8 million to create a facility to provide Indigenous-led healing for youth in Manitoba who are using substances and who are sexually exploited. According to the June 2020 report, the facility is expected to begin operations in summer of 2020. This facility will not be secure, it will be voluntary.

- In support of this alternative to the recommendation, the addressee stated: "The placement will not be locked, in keeping with feedback received from community and youths, and in keeping with the temporary use of a non-locked facility for Strong Hearts. The open nature of the placement is considered essential in developing the needed trust relationships to increase successful treatment, required flexibility of admission, and in reflection of the long history of colonization, residential schools and ongoing racism faced by most of the youths involved with StreetReach and their families. Youth will be able to self-refer to the locked Crisis Stabilization Unit located in the same building. Family, community supports and positive connections to support an individual's healing journey will have access to the youth in the facility." While the facility is not secure, it meets the intent of the recommendation, in particular the requirement stated in the details for consultation with experts, persons with lived experience, and community stakeholders who advised against a secure facility. The addressee has sufficiently justified deviation from the original letter of the recommendation while providing evidence of meeting the intent of the recommendation.

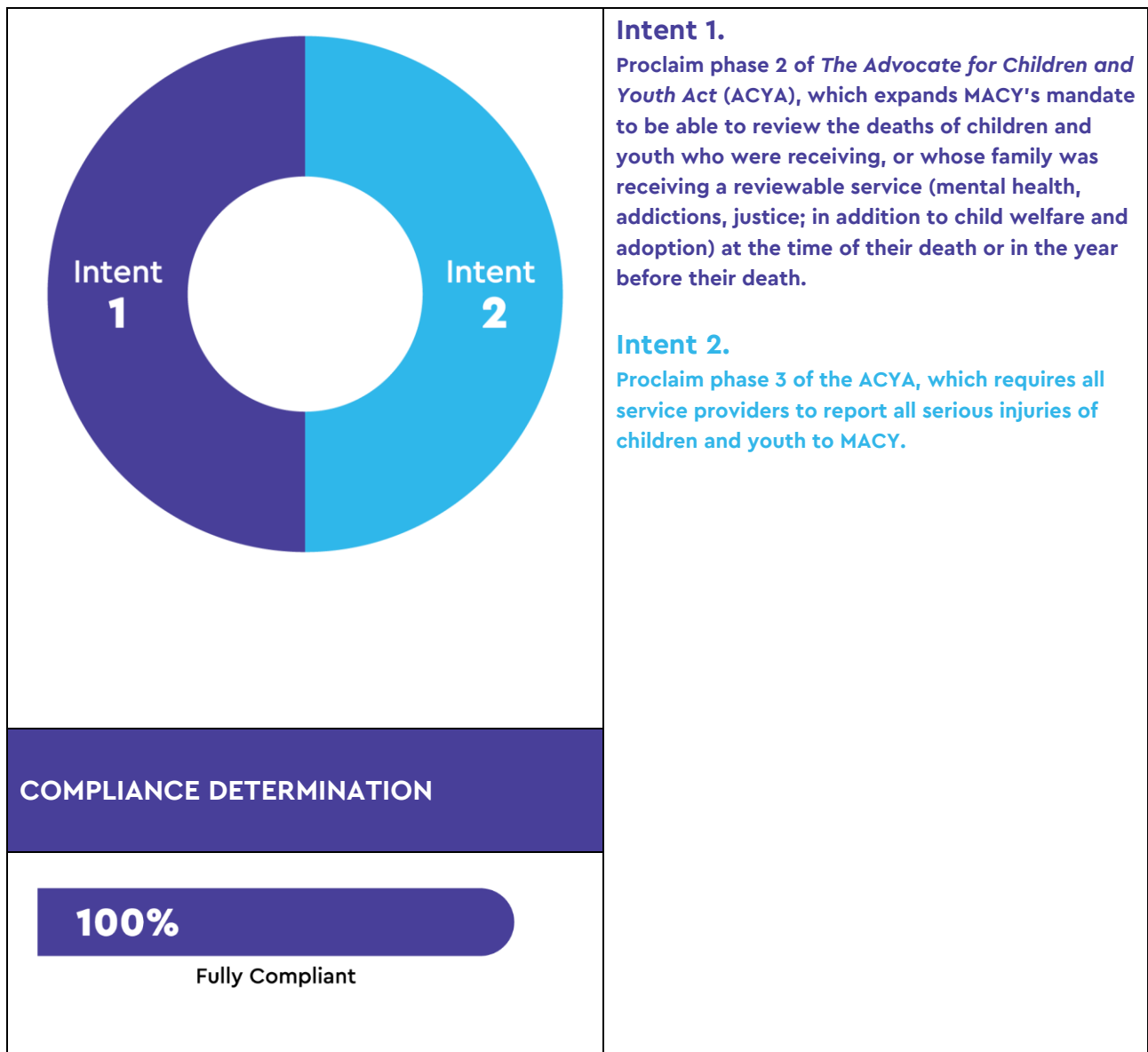
Analysis Summary: The Government of Manitoba continues to identify ongoing work towards the intents of this recommendation. In regards to intent 1, the Manitoba government considers this intent met, as their initial consultations regarding the Alberta legislation mentioned, led to its determination that no legislative amendments would be made in Manitoba similar to the provisions of the mentioned Alberta examples. Information was provided on the review of legislation, and potential redundancies to introducing legislative amendments in Manitoba. We previously assessed intent 3 as complete. Work remains under intent 2 to ensure there is a full continuum of services for children and youth struggling with addictions. While there continues to be investment in services in alignment with the Mental Health and Community Wellness RoadMap, a full continuum of needed services for youth is not yet realized. As such, this recommendation is Largely Compliant.

COMPLIANCE DETERMINATION

Matthew – Recommendation 8

Recommendation Summary: Proclaim the outstanding sections of *The Advocate for Children and Youth Act*.

Primary Public Body: Government of Manitoba



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	The Slow Disappearance of Matthew: A Family's Fight for Youth Mental Health Care in the Wake of Bullying and Mental Illness
Date Released:	2/27/2020
Full Recommendation: (including details)	Recommendation Eight: Proclaim the outstanding sections of the ACYA. The Manitoba Advocate for Children and Youth recommends that the Government of Manitoba set a proclamation date for the remaining portions of <i>The Advocate for Children and Youth Act</i> in the spring of 2020.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Proclaim phase 2 of <i>The Advocate for Children and Youth Act</i> (ACYA), which expands MACY's mandate to be able to review the deaths of children and youth who were receiving, or whose family was receiving a reviewable service (mental health, addictions, justice; in addition to child welfare and adoption) at the time of their death or in the year before their death. 2. Proclaim phase 3 of the ACYA, which requires all service providers to report all serious injuries of children and youth to MACY.
Issue:	Legal
Public Body	Government of Manitoba
Dates of Previous Official Updates from Public Body:	May 31, 2023 June 30, 2022 May 31, 2021
3. Compliance Determination	
Fully Compliant 1.0	Actions taken fully implement the recommendation.
Self-Assessment	Fully Compliant
Previous Compliance Determination	Largely Compliant
4. Rationale for Determination	
<i>(How did you reach this compliance determination)</i>	
Intent 1: Proclaim phase 2 of <i>The Advocate for Children and Youth Act</i> (ACYA).	

2021

- With phase 2 being proclaimed on June 1, 2021, Intent 1 of this recommendation has been fully achieved.

Intent 2: Proclaim phase 3 of the ACYA**2023**

- The intent to proclaim section 21 of the ACYA was published online as of the submission of the response to this recommendation.
- The section came into force as of July 1, 2023.

2022

- Final details towards the establishment of the regulations for phase 3 are underway.

2021

- Although a date has yet to be set for the proclamation of phase 3 of the ACYA, interdepartmental work has begun, including the development of regulations on reporting mechanisms for service providers to use. The formation of the interdepartmental working group involving both government actors as well as MACY, and the group's scope of work are actions reported which demonstrate work is ongoing to fulfil Intent 2.

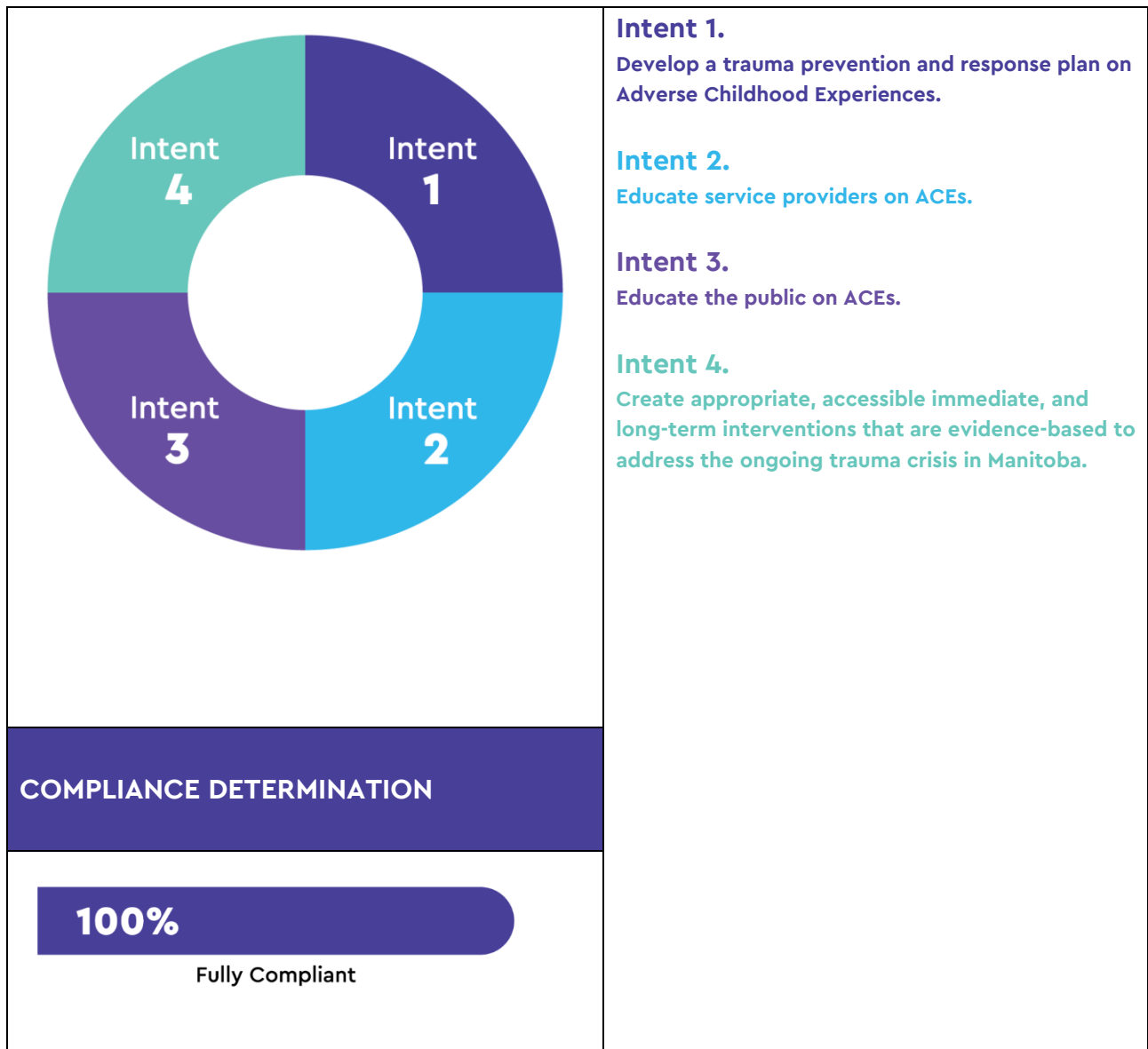
Analysis Summary: With both intents of this recommendation now fulfilled, this recommendation is considered Fully Compliant.

COMPLIANCE DETERMINATION

Angel – Recommendation 1

Recommendation Summary: Develop trauma prevention and response on adverse childhood experiences (ACEs), educate service providers and public, and create interventions.

Primary Public Body: Government of Manitoba



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	In Need of Protection: Angel's Story
Date Released:	12/13/2018
Full Recommendation: (including details)	Recommendation One: The Manitoba Advocate for Children and Youth recommends that Manitoba Education and Training, Manitoba Families, Manitoba Justice, and Manitoba Health, Seniors and Active Living engage with experts in childhood trauma and Adverse Childhood Experiences (ACEs) in order to develop a trauma prevention and response plan of action to (a) educate service providers and the public on ACEs, and (b) create appropriate, accessible, immediate and long-term evidence informed interventions to address the trauma crisis that is ongoing in Manitoba.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Develop a trauma prevention and response plan on Adverse Childhood Experiences. 2. Educate service providers on ACEs. 3. Educate the public on ACEs. 4. Create appropriate, accessible, immediate, and long-term interventions that are evidence-based to address the ongoing trauma crisis in Manitoba.
Issue:	Mental Health and Addictions
Public Body	Government of Manitoba
Dates of Previous Official Updates from Public Body:	May 31, 2023
	June 30, 2022
	May 31, 2021
	June 30, 2020
	December 31, 2019
	June 27, 2019
2. Compliance Determination	
Fully Compliant 1.0	Actions taken fully implement the recommendation.
Self-Assessment	Fully Compliant
Previous Compliance Determination	Largely Compliant
3. Rationale for Determination	
<i>(How did you reach this compliance determination)</i>	

Intent 1: Develop a trauma prevention and response plan on Adverse Childhood Experiences.

2023

- This intent was met in 2022.

2022

- The Department of Mental Health and Community Wellness released their roadmap in early 2022.
- The roadmap speaks to the need to include and address trauma, and has trauma-informed as a principle to prioritize and guide decisions and actions.
- Priority actions under the Strategic Focus Area of Mental Well-Being and Chronic Disease Prevention include promoting mental well-being (build a provincially coordinated strategy for the prevention of suicide) and support and invest in child and youth development (more mental health programming in school system, expand the availability of school-based services).
- In our previous analysis, we noted that a trauma prevention and response plan should be central to the Department of Mental Health and Community Wellness. It is evident that the roadmap addresses the importance of trauma-informed services and practice, and that prevention is central to making improvements in mental health and wellness. This intent can be considered met through the roadmap, but more specific initiatives regarding improvements to training, services, and interventions will be monitored through the remaining intents of this recommendation.

2021

- Manitoba Families reported the Mental Health and Addictions cross-departmental working group provides whole-of-government oversight and attention to the mental health and addictions needs of Manitobans, including 'upstream supports' like Thrival Kits, Granny's House (aimed at preventing further trauma for children and families), an \$810,000 investment to expand Granny's House for a second location and for a second year, and supports specifically designed to address urgent needs like additional mental health and addictions clinicians working with StreetReach Winnipeg.
- The province is providing \$1,279,000 for mental health and addictions supports, which include:
 - \$810,000 to Blue Thunderbird Family Care Inc. to extend the Granny's House community respite pilot project for a second year and expand it to a second location.
 - \$200,000 to the Manitoba Adolescent Treatment Centre for clinician assessment and referral services in Thompson.

- \$60,000 for Community Living disABILITY Services clients for Naloxone kits.
- \$123,000 to the Mount Carmel Clinic for its Super Dads Program and other services.
- \$35,000 to the Clan Mothers Healing Village for its public education campaign against sexual exploitation.
- \$30,000 to the Manitoba Association of Women's Shelters for a virtual staff training curriculum.
- \$21,000 to the Canadian Mental Health Association for Thrival Kits (virtual component).
- The creation of a new Department of Mental Health, Wellness and Recovery was evidenced as the prioritization of mental health in Manitoba. The new Department provides leadership, coordination, and collaboration to a whole-of-government approach to mental health policy and programs. Its mission is "to provide access to mental health and addictions supports and treatment that improve life outcomes for Manitobans in their journey through recovery and healing."
- Although Manitoba Families highlighted activities and investments towards mental health undertaken by the Mental Health and Addictions cross-departmental working group, there was no evidence provided to indicate that a trauma prevention and response plan on ACEs is being developed. Given the creation of a new Department of Mental Health, Wellness and Recovery, a prevention and response plan to address ACEs should be central to the work of such a department.

2020

- There has been no evidence provided to indicate that a trauma prevention and response plan on ACEs has been developed.

Intent 2: Educate service providers on ACEs.

2023

- Training opportunities and resources were reported across the Departments of Families, Justice, and Education and Early Childhood Learning.
 - Manitoba Families reported over 3,000 attendees across four different trauma-related training opportunities.
 - Manitoba Justice reported the funding of a Trauma Informed Workshop & Training for Community Corrections staff, with 30 attendees across the province. Four staff additionally participated in 'train the trainer' opportunities for certification in providing ongoing and refresher training to additional staff.
 - Manitoba Education and Early Childhood Learning reported the launch of

the Elders and Knowledge Keepers in Schools initiative; providing additional resources for students and staff.

2022

- The government continues to provide information on the various trauma (and therefore ACE's, in their opinion) training available in various departments.
- While it is promising that departments continue to offer and develop new training opportunities for service providers in this area, MACY will continue to monitor the training and learning opportunities that arise from the implementation of the Mental Health and Community Wellness roadmap that are relevant to this recommendation.

2021

- Manitoba Justice's Road to Mental Readiness is a training program for staff that promotes mental health resilience and a greater understanding of mental health challenges. This would support staff in youth correctional facilities, by providing greater understanding of the causes of mental health challenges, including trauma. It is noted that staff in positions such as probations would have received this training in their qualifications prior to being hired.
- Manitoba Education shares information with school divisions about professional development opportunities including trauma-informed support. For example, the link to a trauma-sensitive education webinar was shared with school divisions. Manitoba Education does not directly offer any trainings to education professionals, as trainings are offered through the school divisions. Therefore, Manitoba Education can currently share training resources but cannot determine the number of teachers trained in ACEs.
- Manitoba Families' Trauma and Resilience Training has trained 568 employees (to date) from program areas such as Early Learning and Child Care, Employment and Income Assistance, Child and Family Services, Rural and Northern Services, and MB Housing. Working with Refugees is a free two-day training for staff provided by Manitoba Families. To date, 274 participants have completed this training.
- Due to the COVID-19 pandemic, in-person training was paused and both the Trauma and Resilience and Working with Refugees trainings are being converted to a virtual platform, with the expectation that Manitoba Families will be able to train a greater number of staff.
- As noted above, Manitoba Families announced funding for \$30,000 to the Manitoba Association of Women's Shelters. They advised this funding is to develop specialized online training for front-line staff on mental health and addictions, with the outcome of better supporting women and children who have experienced trauma.
- Manitoba Families and Manitoba Justice did not provide evidence that the trainings

contain content on Adverse Childhood Experiences, as the training descriptions provided generally highlight the training as trauma-related. Although Manitoba Education does not develop or deliver training to professionals, as the discretion to do so lies with school divisions, it is important to understand what trainings are available to education professionals on ACEs. Manitoba Health has not provided any information regarding trainings it offers for service providers on ACEs. Therefore, this intent remains unmet.

2020

- Manitoba Health, Seniors and Active Living (now Health and Seniors Care) reported initiatives including the Newcomer Trauma-Focused services and funding to Prairie Mountain Health to provide Trauma-Focused Cognitive Behavioural Therapy for Children and Adolescents training to 15 staff. While the training is consistent with the intent of the recommendation, the training is limited in geography and reach to a small proportion of service providers.
- Manitoba Families indicated that Trauma and Resilience Training, designed in 2017, provides staff with appropriate and effective ways to support clients struggling with the effects of trauma and the tools to implement trauma- and resilience-informed approaches. This training became mandatory for some branches in the Employment and Income Assistance program. As of March 2020, 506 employees received the training from the following program areas: Early Learning and Child Care, Employment and Income Assistance, Child and Family Services, Centralized Services and Resources, Family Conciliation, and Manitoba Housing. Manitoba Families also indicated that the issue of trauma is addressed in its two-day working with refugees training.
- Manitoba Justice has identified implementing Road to Mental Readiness training. It is not clear, however, how this training relates to ACEs.
- Some activities have been undertaken which meet the requirement to educate service providers, but this is limited to Manitoba Families and Health, Seniors and Active Living (now Health and Seniors Care). More information is required to assess implementation in the Departments of Justice and Education.

Intent 3: Educate the public on ACEs.

2023

- Education of the public continues to be reported through various initiatives found across government departments.
 - The Elders and Knowledge Keepers in Schools program, along with the work starting under the Poverty and Education Task Force report release, supports education of school communities on trauma and trauma prevention.
 - The launch of the MHCW roadmap provided public education on the issue.

- The continued funding of access to the Science of Early Childhood Development textbook through RRC Polytech was again identified.
- The Government of Manitoba supported the MyBaby pilot, which provides free regular emails/text message to new parents, providing guidance on meeting the needs of infants and their development.
- Various public announcements regarding free mental health supports, as well as announcements related to Canada's history of colonialism, racism, and residential schools, are also considered public education on trauma.

2022

- The Government of Manitoba has provided funding for all Manitobans to access the Science of Early Childhood Development textbook in coordination with Red River College (RRC) Polytech. Included in the textbook material is information on the effect of traumatic events and stress events on child and brain development. At the site where the textbook is accessed, there are also topic guides and directed learning resources. Third parties can also access additional training and workshops for a fee. Access to the site has been promoted by RRC Polytech, including in a mail-out to the Early Learning and Child Care sector.
- Additional public education in this area is considered as being achieved through the promotion of the Mental Health and Community Wellness Roadmap, news releases regarding Youth Hubs, and other related government announcements.
- Evidence of the need for a general public campaign in this area was consulted, and determined to not be best practice.

2021

- No specific activities were reported under this intent of the recommendation. Manitoba Families, however, did highlight that a number of mental health and addictions initiatives were launched. This intent remains unmet.

2020

- One public education initiative was reported. In 2018-2019, Manitoba Education and Justice granted \$63,900 to the Winnipeg Police Service to create a video series regarding complex trauma for presentation to children in Grades 7-12. The goal was to educate youth about trauma and how it can lead to substance use, gang involvement, and exploitation. The project was intended to be evaluated.

Intent 4: Create appropriate, accessible, immediate, and long-term interventions that are evidence-based to address the ongoing trauma crisis in Manitoba.

2023

- Work to expand prevention and intervention related to trauma for both

children/youth and adults is exemplified in a number of funding announcements over the last year;

- Huddle Selkirk, led by Peguis First Nation, opened in January 2023.
- In March 2023, MHCW released a Request for Expressions of Interest for the Community Addictions Treatment Capacity Expansion (CATE) initiative. This initiative will enable up to 1,000 treatment spaces (people served) to receive substance use/addictions services. The categories of treatment spaces in this Expression of Interest include intensive day programs, short and longer stay bed-based programs, supportive recovery housing, and withdrawal management services. It was reported that the intensive day program includes supporting the service provider to include child care in the program model.
- \$4.5 million in matching funds to support 24 family resource centres through the For Every Family Initiative – coordinated and prioritized through community representation at the United Way of Winnipeg
- Expansion of Huddle Norwest, the Child and Youth Mental Health Services Initiative at Health Sciences Centre, and the Strongest Families Institute.
- A new site for the Abecedarian child care model in Winnipeg, with four additional northern/rural sites.
- Additional funding was announced in the areas of Indigenous-led crisis response, sexual assault crisis response and healing programs, child care spaces and access, family violence prevention, integrated child abuse response, and increased funding to TOBA Centre.
- The mix of adult and children/youth services are included because of the importance of supports for adults in the prevention of trauma and ACEs for children and youth.

2022

- The Mental Health and Community Wellness Roadmap is laying the groundwork for the development of holistic responses to prevention and responding to trauma.
- The current response provided by the government builds on the announcement of Youth Hubs from 2021, adding one additional HUB, and discussing the re-brand and launch of the website <https://huddlemanitoba.ca>.
- Additional investment announcements were made in the past year as related to trauma and healing, including: Clan Mothers healing village, Indigenous youth healing centre in Thompson, and expansion of services with Toba Centre for Children and Youth.
- It is clear from the current and previous responses that investments are being made in interventions to address the ongoing trauma crisis
- As the response to this recommendation relies on the Mental Health and Community Wellness Roadmap as laying the groundwork for the development of

new responses, MACY will continue to monitor initiatives presented under the roadmap in order to fulfil this intent of the recommendation.

2021

- Manitoba Families reported on expansion of existing services such as:
 - Additional supports include 200k in funding to work with MATC to provide in-person mental health and addictions assessments and service coordination for high risk youth in Thompson.
 - On March 18, 2021, the province announced the creation of five new youth hubs to support Manitoba youth. Two of the hubs will be Indigenous-led. One will be in Westman and one in Interlake:
[Province of Manitoba | News Releases | Province Creates Five New Youth Hub Sites to Expand Co-ordinated Access to Mental Health, Addiction Services to Protect Young Manitobans \(gov.mb.ca\)](#)
 - On March 24, 2021, the Province announced 500k for the Boldness Project, which works with community to develop innovative programs and initiatives to promote wellness for children and families:
[Province of Manitoba | News Releases | Province Provides \\$500,000 to Winnipeg Boldness Project to Help Protect Vulnerable Families \(gov.mb.ca\)](#)
 - On April 23, 2021, the Department of Education announced new funding to expand mental health supports in school:
[Province of Manitoba | News Releases | Province Announces Additional Funding for Mental Health Programs for Teachers, Staff, Students Dealing with the Impacts of COVID-19 Pandemic \(gov.mb.ca\)](#)
 - On May 7, 2021, the province announced new funding for case management and mental health supports for youth with RAY:
[Province of Manitoba | News Releases | Manitoba Government Protects Youth, Supports Continued Safe Housing](#)
- The activities reported are a promising commitment to create appropriate, accessible, immediate and long-term interventions. This recommendation was met during the 2020 reporting period.

2020

- On November 4, 2019, Manitoba Families announced the expansion of existing services and creation of new initiatives to address trauma for youth in Manitoba including:
 - Expanding Klinik Community Health Centre's drop-in counselling program by eight hours each week, expanding access to more than 600 additional Manitobans per year. This drop-in counselling is for anyone aged 13 or older.

This expansion increases accessibility to immediate trauma intervention.

- Creating a seven-day-a-week centralized trauma intake and referral service at Klinik, available to all ages, genders, and background. This new program meets the accessibility and immediacy requirements of this recommendation.
- Expanding Klinik's longer-term trauma counselling program, allowing for about 80 additional clients to be helped annually. MACY contacted Klinik about the eligibility criteria for Klinik's longer-term trauma counselling program which is cited as 18 years of age and over. The program remains promising for youth 18-21, however a youth such as Angel who was under the age of 18, would have been unable to access long-term trauma interventions through this program.
- Two additional initiatives were cited as indirectly related to the recommendation, including the Newcomer Trauma-Focused Services and the Community Emergency Department Violence Intervention Program (CEDVIP).
- The Newcomer Trauma-Focused Services was described by Manitoba Health, Seniors and Active Living (now Health and Seniors Care), in response to this recommendation. Given that this initiative is directed to newcomers, the eligibility criteria for this program would likely exclude an Indigenous youth like Angel. Nevertheless, the program creates supports for children and families who have experienced trauma.
- Manitoba Health, Seniors and Active Living (now Health and Seniors Care) provided an update regarding CEDVIP. The program serves youth and young adults who present to emergency rooms following an injury due to a violent incident. The information provided, however, does not contextualize what violence-related injuries are or whether youth such as Angel who were sexually exploited would be able to access the program. The CEDVIP is a promising program as youth and young adults are provided with wraparound care involving housing, employment, and Indigenous ceremony.
- Information provided demonstrates the development of new and expansion of existing programs that are accessible, are both immediate and long-term, and address the trauma crisis in Manitoba, meeting the requirements of this section of the recommendation.

Analysis Summary: Over four reporting periods, the actions reported under this recommendation have increasingly worked towards meeting its intents. As discussed in 2022, the Department considers the Mental Health and Community Wellness Roadmap to be an essential guiding document for initiatives responding to and preventing trauma in Manitoba. Information provided in the most recent response builds upon previously identified supports, and continues to highlight a dedication to ensuring service providers

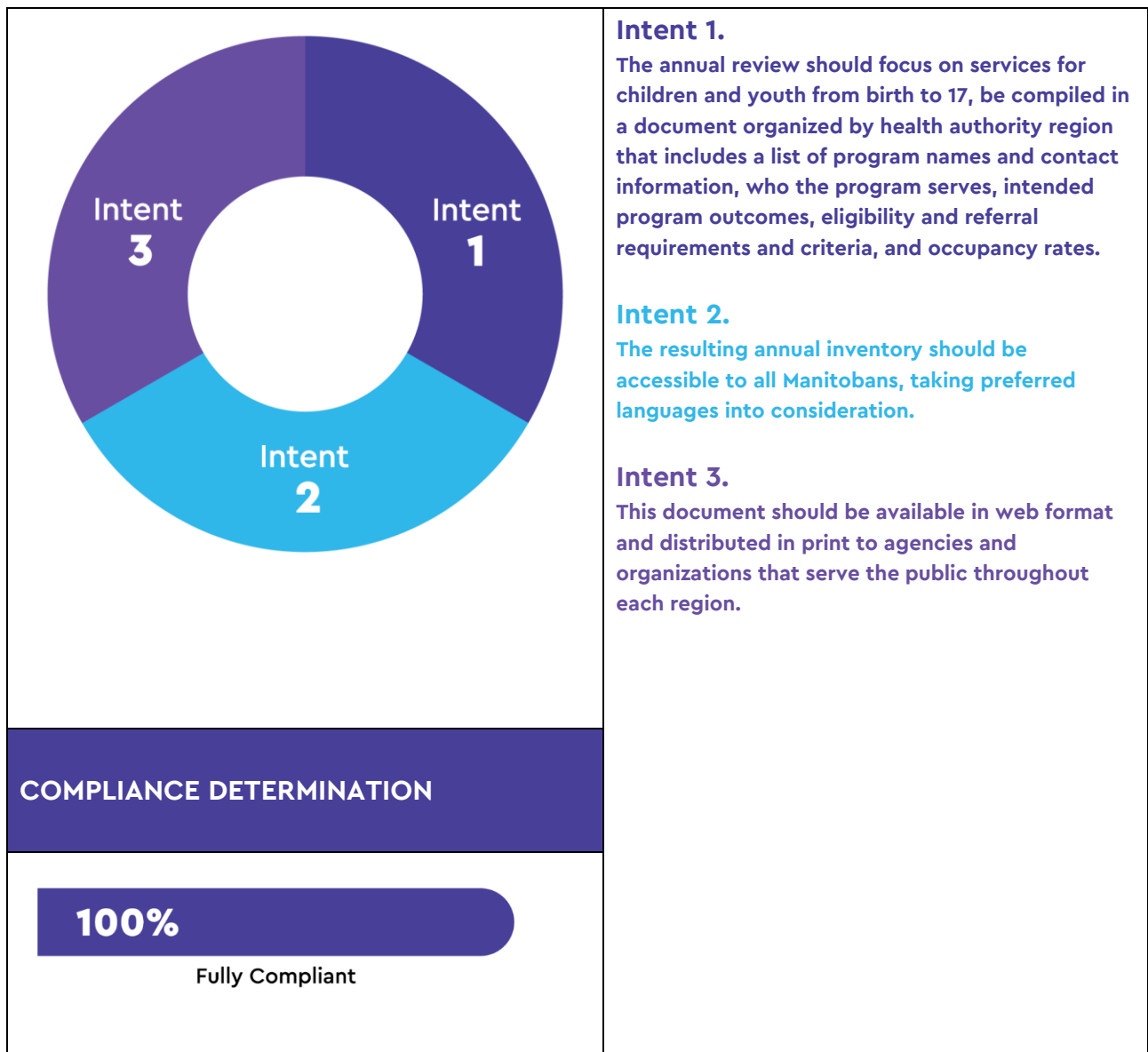
and the public are educated on trauma, and the importance of addressing trauma as early as possible. The combination of the existence of the Mental Health and Community Wellness Roadmap, and the initiatives announced under its umbrella, along with the continued commitment to educating service providers and the public indicates that this work will continue to expand in the future. As such, this recommendation is now considered Fully Compliant.

COMPLIANCE DETERMINATION

Suicide Aggregate – Recommendation 4

Recommendation Summary: Create and maintain an inventory of mental health resources for the public.

Primary Public Body: Government of Manitoba



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	"Stop Giving Me a Number and Start Giving Me a Person": How 22 Girls Illuminate the Cracks in the Manitoba Youth Mental Health and Addiction System
Date Released:	5/7/2020
Full Recommendation: (including details)	Recommendation Four: In line with Article 24 of the <i>United Nations Convention on the Rights of the Child</i> , the Manitoba Advocate for Children and Youth recommends that the Government of Manitoba conduct an annual review of what therapeutic trauma interventions are available to children and youth in Manitoba and create an inventory of resources, whether the resources require formal referrals from service providers or are open for self-referrals, any associated eligibility criteria (age, location, care status, etc.) and promote the annual inventory and its findings in the public.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. The annual review should focus on services for children and youth from birth to 17, be compiled in a document organized by health authority region that includes a list of program names and contact information, who the program serves, intended program outcomes, eligibility and referral requirements and criteria, and occupancy rates. 2. The resulting annual inventory should be accessible to all Manitobans, taking preferred languages into consideration. 3. This document should be available in web format and distributed in print to agencies and organizations that serve the public throughout each region.
Issue:	Mental Health and Addictions
Public Body	Government of Manitoba
Dates of Previous Official Updates from Public Body:	May 31, 2023
	June 30, 2022
	July 13, 2021
2. Compliance Determination	
Fully Compliant 1.0	Actions taken fully implement the recommendation

Self-Assessment	Fully Compliant
Previous Compliance Determination	Largely Compliant

3. Rationale for Determination
(How did you reach this compliance determination)

Intent 1: The annual review should focus on services for children and youth from birth to 17, be compiled in a document organized by health authority region that includes a list of program names and contact information, who the program serves, intended program outcomes, eligibility and referral requirements and criteria, and occupancy rates.

2023

- In addition to the information previously provided about 211 Manitoba, the current response outlines some additional details such as:
 - 211 Manitoba is affiliated with nationwide 211 services that are administered by United Way Centraide Canada. Provinces across Canada have 211 lines, making it nationally recognizable for the service it provides.
 - Information about organizations on 211 Manitoba is obtained directly from those organizations. Submitted information is reviewed by 211 to ensure it meets its inclusion criteria, and, if so, will be added to the database.
- Since the 2022 response was provided, Manitoba Health, along with liaisons from United Way Winnipeg and MACY, have been working together to address previously identified concerns regarding whether the information on 211 is reviewed annually. To address this piece of the recommendation, Manitoba Health provided the following information:
 - The process involves 211 Manitoba reaching out to all service providers/organizations contained in the database on an annual basis to verify that their information is correct. United Way Winnipeg also encourages service providers/organization to take an active role in ensuring their information is continuously updated.
 - Links for service providers to update their information can be found on the 211 website at <https://mb.211.ca/for-service-providers/>
 - The 211 website additionally contains tip-sheets for service providers preparing their information for listing their services on 211.
 - <https://mb.211.ca/wp-content/uploads/2023/02/Preparing-to-Update-Your-211-MB-Records-Worksheet.pdf>
 - <https://mb.211.ca/wp-content/uploads/2023/02/Tips-for-Writing-Agency-Site-or-Program-Descriptions.pdf>
- Manitoba Health additionally provided supplemental information regarding the advertising of 211 Manitoba to government employees and service providers.

Information about 211 Manitoba is contained in a Government of Manitoba internally distributed newsletter, which reaches all Manitoba civil servants.

- Manitoba Health has also developed an agreement with Manitoba Families to coordinate the drafting of a memo between Deputy Ministers about the importance of entries being up to date on 211 Manitoba for government frontline services and funded external providers.

2022

- No new information was provided.

2021

- 211 Manitoba is a free, confidential, 24/7 service that connects individuals to government, health, and social services that are available across the province. In addition to searching on the 211 Manitoba website, individuals can call 2-1-1 to talk with trained professionals to help find and navigate the services they need. Services are grouped together into categories that include food and clothing, housing and homelessness, health, mental health, employment, newcomers, children and parenting, and youth. Under the mental health and addictions section of the 211 Manitoba website, there is a specific youth mental health section. Users can employ the search function to look up trauma interventions for youth. Service organizations provide their program criteria and eligibility.
- 211 Manitoba is managed collaboratively between the United Way Winnipeg and Volunteer Manitoba. Development is further enhanced by a province-wide advisory committee, the Province of Manitoba, the Winnipeg Regional Health Authority, United Ways in Manitoba, 211 Canada, and funding partners and donors. The information about an organization and its services is obtained directly from information provided by that organization. Organizations suggest information about their agency and its services to 211 Manitoba and if this meets 211's inclusion criteria, it will be added to the database. On an annual basis, 211 Manitoba sends an update form to each organization to ensure that all information is still accurate and current. Because of this, the site is continually growing and improving.

Intent 2: The resulting annual inventory should be accessible to all Manitobans, taking preferred languages into consideration.

2022

- No additional information was provided.

2021

- The 211 Manitoba website offers both official languages, French and English. 211 information and referral specialists are also trained to support diverse populations

and the 211 Manitoba phone line is available in over 150 languages, including a number of Indigenous languages.

Intent 3: This document should be available in web format and distributed in print to agencies and organizations that serve the public throughout each region.

2022

- No additional information was provided.

2021

- 211 Manitoba is a free, website that is also available by phone and/or in print. Print copies can be requested for a nominal fee but these are expected to be ordered by local community groups, community health offices, and/or nursing stations as a resource.

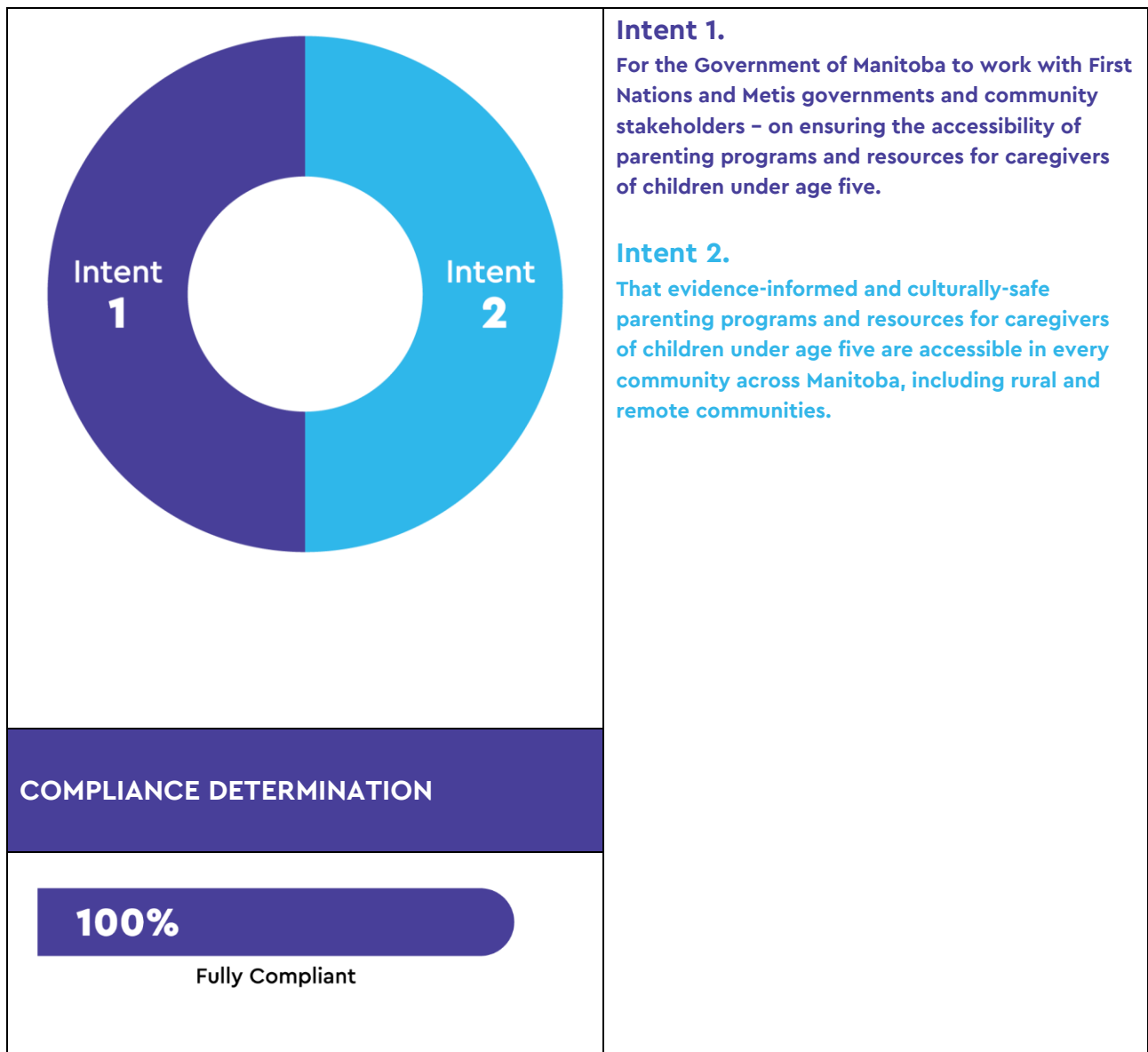
Analysis Summary: The 211 Manitoba service has fulfilled the majority of intents of this recommendation, since its first reporting cycle with MACY in 2021. The features of 211 serve as an ongoing, continuously updated inventory of government, health, and social services available in Manitoba. 211 is available in Manitoba's official languages, English and French, and in both phone and web versions. Additionally, the referral specialists are trained to support diverse populations, with the phone line available in over 150 languages. The content of 211 Manitoba is available in a variety of formats, including print versions. United Way Winnipeg includes mechanisms for the review of the information contained on its website, and while each individual entry is not reviewed by a specific person annually, organizations with information contained on 211 are notified on an annual basis to ensure their information is correct and up to date. Manitoba Health has also coordinated a number of initiatives internal to the Government of Manitoba, to ensure that government service providers are aware of 211 Manitoba, and the importance of ensuring their information is up to date. The initiatives described by Manitoba Health help formulate a suitable alternative to the original conception of an annual review of services. As all intents of the recommendation have now been met, this recommendation is considered Fully Compliant.

COMPLIANCE DETERMINATION

Maltreatment – Recommendation 2

Recommendation Summary: Fund parenting programs and resources in Manitoba communities.

Primary Public Body: Government of Manitoba



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Still Waiting: Investigating Child Maltreatment after the Phoenix Sinclair Inquiry
Date Released:	3/11/2021
Full Recommendation: (including details)	<p>Recommendation Two: Consistent with <i>Call to Action 5</i> of the Truth and Reconciliation Commission, the Manitoba Advocate for Children and Youth recommends that the Government of Manitoba work with First Nations and Metis governments and community stakeholders to ensure access to evidence-informed and culturally-safe parenting programs and resources for caregivers of children under the age of five in every community across Manitoba, with attention to rural and remote communities.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • Assess available parenting resources in Manitoba for children under the age of five. • Identify geographic gaps in resources and/or areas where existing resources can be improved. • Develop and/or enhance resource supports for caregivers. • Integrate parenting resources within existing community infrastructure (schools, community resource centres, etc.), where possible. • Create and implement a strategy that ensures the ongoing dissemination of information regarding available parenting resources to caregivers of young children across Manitoba.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. For the Government of Manitoba to work with First Nations and Metis governments and community stakeholders – on ensuring the accessibility of parenting programs and resources for caregivers of children under age five. 2. That evidence-informed and culturally-safe parenting programs and resources for caregivers of children under age five are accessible in every community across Manitoba, including rural and remote communities.

Issue:	Parent Treatment/Resources
Public Body	Government of Manitoba
Dates of Previous Official Updates from Public Body:	May 31, 2023 June 30, 2022 Government of Manitoba
2. Compliance Determination	
Fully Compliant 1.0	Actions taken fully implement the recommendation
Self-Assessment	Fully Compliant
Previous Compliance Determination	Largely Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
<p>Intent 1: For the Government of Manitoba to work with First Nations and Metis governments and community stakeholders – on ensuring the accessibility of parenting programs and resources for caregivers of children under age five.</p> <p>2023</p> <ul style="list-style-type: none"> • The Government of Manitoba has reported additional information to supplement its submissions from 2021 and 2022, including: the provision of annual core funding from Indigenous Reconciliation and Northern Relations to the Manitoba Association of Friendship Centres for the Child Parent programming delivered by individual friendship centres across Manitoba. Funding is also provided through this department to the MKO Thompson Urban Aboriginal Strategy for their Baby Basket Program. • Manitoba Education and Early Childhood Learning (MEECL) recently announced the Ready to Move (RTM) Child Care Initiative with First Nation Communities as targeted partners for the purpose of providing 1,600 new child care spaces. The RTM child care project is a partnership between the governments of Canada, Manitoba, municipal governments, and First Nations communities to develop new child-care facilities in less than a year in areas with demonstrated need for spaces. • As detailed in other recommendation responses, MEECL has additionally brought Indigenous-led supports into the school system through the expansion of the Elders and Knowledge Keepers in Schools initiative. This initiative will impact children aged four and five attending schools, as well as their families. <p>2022</p> <ul style="list-style-type: none"> • A response was first provided to this recommendation in 2021, but it was not included in the 2021 compliance process due to the report release occurring less than 6 months before the reporting deadline. 	

- The 2021 response included: The Department of Families is focused on providing community-driven and community-based parent-child early childhood development and parenting education programs as identified in diverse communities throughout Manitoba. The model specifics are still being developed in consultation with community. There is a staff position in the Child and Youth Services Division, however, which is dedicated to supporting and moving this work forward, including the connections to other Families' funded programming that has direct links (e.g., Healthy baby and ELCC).
- In addition, the 2021 response discussed a collaborative project between Manitoba and the National Collaborating Centre for Indigenous Health (NCCIH), to launch four resources for First Nation and Metis parents. These four parenting booklets are available online as of 2017, and cover the topic areas of: Growing Up Healthy, Family Connections, Parents as First Teachers, and Fatherhood is Forever. Hard copies of the booklets can also be ordered.
- The NCCIH partnership with Manitoba continued with the development and launch of a parenting resource that focused on children ages 6-12 years. In 2021 this resource was in final stages of editing and addressing feedback.
- The response provided in 2022 explains the parenting resources first launched in 2017 were re-launched in 2021, and the final booklet for ages 6-12 was launched in November 2021.
- Across Manitoba, the work of parent support programs has leadership from Parent Child Coalitions. The coalitions are provincially funded and have the responsibility of identifying local parent support needs, and coordinating local responses.
 - There are currently 14 Parent Child Coalitions: six in Winnipeg and eight outside of Winnipeg (each provincial region is represented by at least one coalition). Each coalition either directly runs programming or provides funding/coordination to related programming.
- There is evidence within this response of collaboration regarding parenting resources. The discussion of parenting resources and programming seems well coordinated, with resources being discussed and developed for both targeted and universal accessibility in Manitoba.

Intent 2: That evidence-informed and culturally-safe parenting programs and resources for caregivers of children under age five are accessible in every community across Manitoba, including rural and remote communities.

2023

- The programming and funding announcements identified under intent 1 are also applicable to this intent of the recommendation, as they concern regional availability of parenting programs and resources for Manitoba families.
- Further examples of funding expansion are found with the matching funds provided to the For Every Family Initiative through United Way of Winnipeg, and the \$25 million provided through the Building Sustainable Communities program to upgrade facilities and resources in communities across Manitoba.
- Numerous changes through the child care partnership with the federal government are noted, including making the cost of child care more accessible (\$10/day), expanding child-care spaces, and improving salaries and staff retention. Discussions are underway for the expansion of sites of the Abecedarian model of early childhood learning with northern and rural considerations.

2022

- In Both 2021 and 2022, examples of parenting programs available in Manitoba were provided. The list from both years includes:
 - public health nurses Families First: a voluntary home-visiting program focused on healthy parenting and child development
 - Granny's House: a pilot project to provide 24/7 temporary, culturally-safe respite care to families who are experiencing challenges
 - Villa Rosa: residential peri- and post-natal services
 - Indigenous Women's Healing Centre: residential programs for women and children with a history of victimization, including family violence and addictions
 - InSight Mentor Program: connecting women with mentors in an evidence-based program to prevent FASD, deal with underlying addictions issues, and improve overall health and wellness
 - Healthy Baby Community Support Program: providing expectant and new parents with practical information on maternal and child health issues
 - Healthy Baby Manitoba Prenatal Benefit: financial support to help lower-income women ensure they can afford the higher nutritional costs associated with pregnancy
 - Family Resource Centres: located throughout the province, with a wide range of supports and services to families
 - Parenting Student Support Program: works with students who have children or are pregnant and want to stay in or return to school

- The Mothering Project: culturally safe wrap around supports to expectant and new mothers who are struggling with addiction
- Indigenous-led, Restoring the Sacred Bond Program: providing wrap around doula supports for expectant mothers (this is a Social Impact Bond with the Southern First Nation Network of Care)
- Two new Indigenous-led Community Helper Programs: in home supports to families to prevent child apprehensions and family breakdown
- Community Addictions Response Team (CART): a new pilot program with Metis Child, Family and Community Services and Michif CFS, which provide intensive supports to families struggling with addictions and mental health to prevent family breakdown
- Early learning and child care programming across the province
- 22 Parent Child Coalitions across the province (including 11 outside of Winnipeg): quality programming for families with children under the age of 5 years
- The Adolescent Parent Interagency Network (APIN): comprised of agencies, individuals, and professionals in Manitoba who collaborate to assist teens who are pregnant and teens who have children, whether or not they are primary caregivers
- The For Every Family Initiative: a partnership between the United Way Winnipeg and Manitoba that aims to enhance preventative and community-based programming in 24 family resource centres across Winnipeg
- Other community-based supports to parents include: Ma Mawi Wi Chi Itata Centre, Family Dynamics, and New Directions.
- Funding to 211 service to assist families accessing appropriate supports across Manitoba
- Website: manitobaparentzone.ca
- Paid access for all those in Manitoba to the *Science of Early Childhood Development Living* Textbook
- Pilot of My-baby parenting support program (my-baby.ca) for high risk expectant and new parents developed by RRC Polytech, and being distributed through the CFS authorities via Joint Training Team for authority and agency staff (initial feedback is being sought from service providers and then roll out will start with parents)
- Expansion of access to affordable child care through bilateral partnership with federal government

Analysis Summary: Evidence has been provided of action towards both intents of this recommendation, demonstrating the Government of Manitoba's commitment to enhancing the availability of programming, supports, and resources for Manitoba families with children under the age of five. Funding is noted to be distributed to regionally variable communities specifically for the provision of parenting programs, and with this is demonstration of partnership with First Nation communities for the provision of services. The numerous announcements that have arisen from the partnership with the federal government regarding child-care demonstrate the commitment to distributing resources for child-care across Manitoba communities and to making it more affordable and accessible. The information provided towards meeting the intents of this recommendation over 2021, 2022, and 2023 demonstrates the prioritization of the development of parenting resources for Manitobans. As such, this recommendation is considered Fully Compliant.

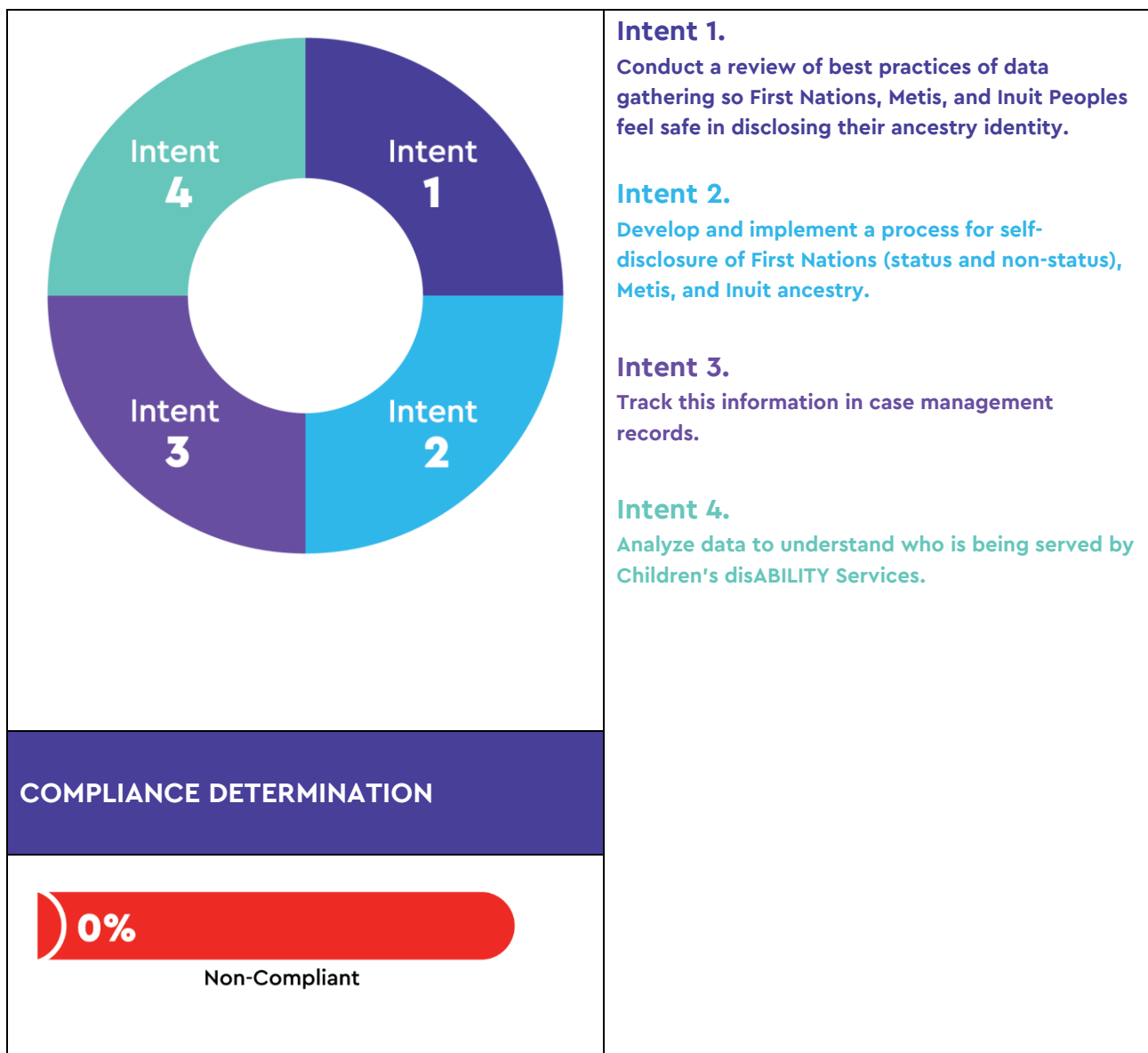
SECTION 2: Manitoba Families

COMPLIANCE DETERMINATION

Disability – Recommendation 6

Recommendation Summary: More accurate information about First Nation, Metis, and Inuit ancestry.

Primary Public Body: Manitoba Families.



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Bridging the Gaps: Achieving Substantive Equality for Children with Disabilities in Manitoba
Date Released:	3/25/2021
Full Recommendation: (including details)	Recommendation Six: The Manitoba Advocate for Children and Youth recommends that Children's disABILITY Services, in consultation with Indigenous experts in Manitoba, develop and implement a process for self-disclosure of First Nations (status and non-status), Metis, and Inuit ancestry, and track this information in case management records.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Conduct a review of best practices of data gathering so First Nations, Metis, and Inuit Peoples feel safe in disclosing their ancestry identity. 2. Develop and implement a process for self-disclosure of First Nations (status and non-status), Metis, and Inuit ancestry. 3. Track this information in case management records. 4. Analyze data to understand who is being served by Children's disABILITY Services.
Issue:	Disabilities
Public Body	Manitoba Families
Dates of Previous Official Updates from Public Body:	May 31, 2023
	June 30, 2022
2. Compliance Determination	
Non-Compliant 0.0	None or almost none of the requirements have been met; even if steps have been taken towards implementation, actions taken are not in line with the nature and intent of the recommendation, or no actions have been taken.
Self-Assessment	Non-Compliant
Previous Compliance Determination	Non-Compliant
3. Rationale for Determination	
<i>(How did you reach this compliance determination)</i>	

Intent 1: Conduct a review of best practices of data gathering so First Nations, Metis, and Inuit Peoples feel safe in disclosing their ancestry identity.

2023

- Manitoba Families reports that CdS continues to consider options for this activity.

2022

- Manitoba Families reported that the department is in the process of initializing this recommendation.

Intent 2: Develop and implement a process for self-disclosure of First Nations (status and non-status), Metis, and Inuit ancestry.

2023

- Manitoba Families, through CdS has reported that department staff are developing options for the Minister of Families to consider with respect to the collection of information regarding self-disclosure of First Nations, Metis, and Inuit ancestry, and tracking this information in case management records.

2022

- Manitoba Families reported that the department is in the process of initializing this recommendation.

Intent 3: Track this information in case management records.

2023

- See response under intents 1 and 2.

2022

- Manitoba Families reported that the department is in the process of initializing this recommendation.

Intent 4: Analyze data to understand who is being served by Children's disABILITY Services.

2023

- See response under intents 1 and 2.

2022

- Manitoba Families reported that the department is in the process of initializing this recommendation.

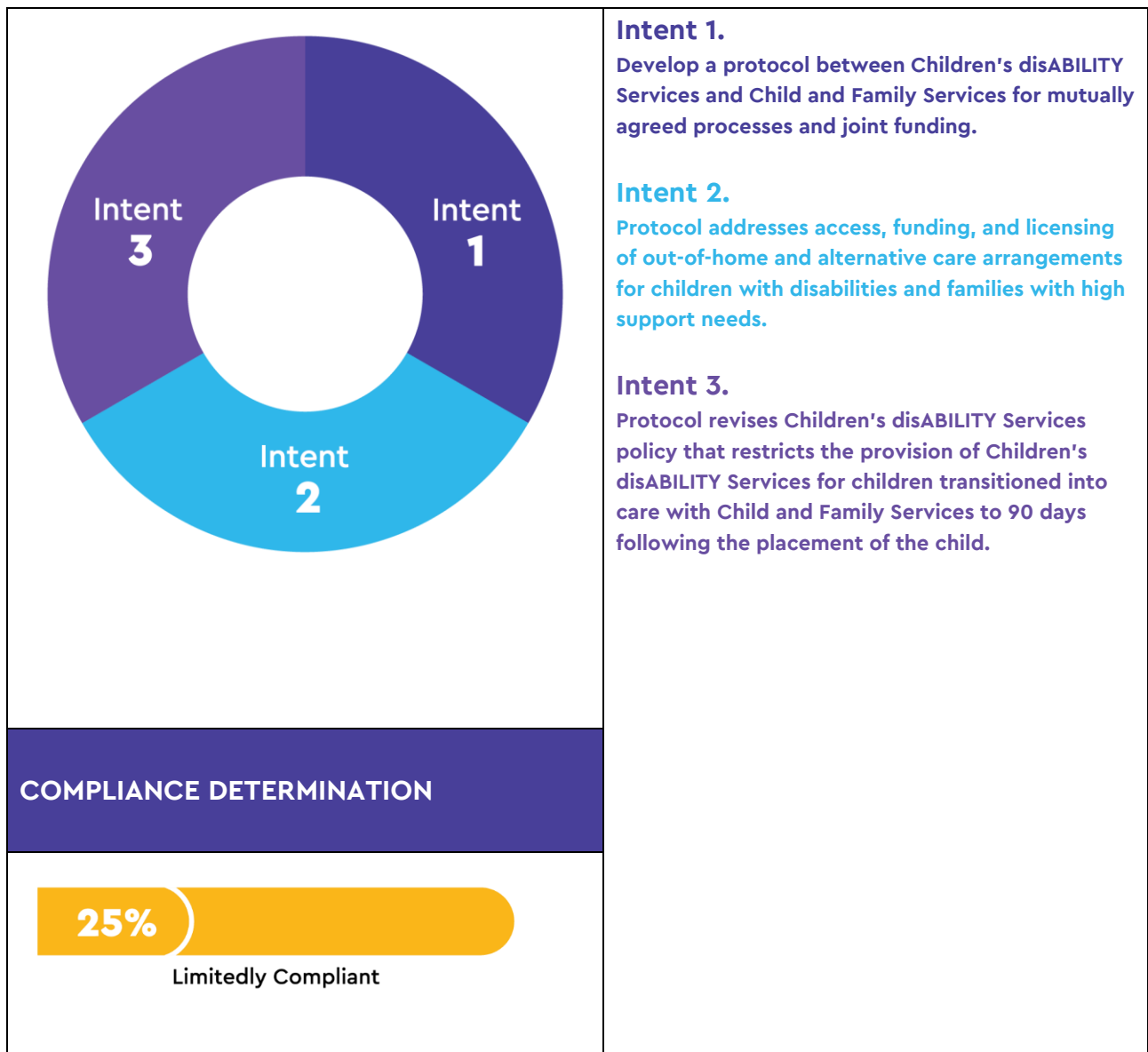
Analysis Summary: Manitoba Families, through CdS, continues to report no tangible action taken towards this recommendation, but has indicated that the Department is working towards the development of options for the Minister of Families to consider. MACY is encouraged by the commitment presented towards developing options for implementing this recommendation. As sufficient tangible actions continue to be missing from this response, this recommendation remains Non-Compliant.

COMPLIANCE DETERMINATION

Disability – Recommendation 2

Recommendation Summary: Develop a protocol that coordinates services between child welfare and Children's disABILITY Services.

Primary Public Body: Manitoba Families



Recommendation Compliance Summary



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1. Recommendation Information	
Report Name:	Bridging the Gaps: Achieving Substantive Equality for Children with Disabilities in Manitoba
Date Released:	3/25/2021
Full Recommendation: (including details)	Recommendation Two: The Manitoba Advocate for Children and Youth recommends that a protocol be developed between Children's disABILITY Services and Child and Family Services that clearly outlines mutually agreed upon processes for serving and jointly funding services for high needs children with disabilities and caregivers that receive services from both programs.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Develop a protocol between Children's disABILITY Services and Child and Family Services for mutually agreed processes and joint funding. 2. Protocol addresses access, funding, and licensing of out-of-home and alternative care arrangements for children with disabilities and families with high support needs. 3. Protocol revises Children's disABILITY Services policy that restricts the provision of Children's disABILITY Services for children transitioned into care with Child and Family Services to 90 days following the placement of the child.
Issue:	Disabilities
Public Body	Manitoba Families
Dates of Previous Official Updates from Public Body:	May 31, 2023 June 30, 2022
2. Compliance Determination	
Limitedly Compliant 0.25	Actions taken only implement a small part of the recommendation, requirements are only fulfilled to a limited degree by actions taken, resulting in significant deficiency in implementation.
Self-Assessment	Partially Compliant
Previous Compliance Determination	Limitedly Compliant
3. Rationale for Determination	

(How did you reach this compliance determination)

Intent 1: Develop a protocol between Children's disABILITY Services and Child and Family Services for mutually agreed processes and joint funding.

2023

- Manitoba Families reports that working relationships between Children's disABILITY Services (CdS) and Child and Youth Services (CYS) at the divisional level have been strengthened through recent collaboration on joint projects. Work continues on the joint presentation identified in the 2022 response that will inform each system of the scope and parameters of responsibility.
- The development of a protocol detailing how the systems can better work together to support families is to follow the development of the presentation. Through this work there is opportunity to identify gaps or barriers to be addressed.
- CdS additionally reports that it is exploring the development of a database profile for children who have been placed into care.
- Work is also being explored regarding the transitional planning for children and youth, with the goal of reducing the number of late referrals to adult services in CLdS. CdS, CYS, and CLdS have begun to meet regularly to identify children in care nearing age of majority to improve their transition to adult resources.

2022

- Manitoba Families reported that a joint presentation is being developed for field staff in both programs which will clarify eligibility criteria, supports to children and families, and how the programs will work together.
- Elements of this presentation and perspectives of the field will be used to develop a protocol to stipulate the roles and responsibilities of each program and a pathway for working together.

Intent 2: Protocol addresses access, funding, and licensing of out-of-home and alternative care arrangements for children with disabilities and families with high support needs.

2023

- Manitoba Families has identified that expanded out-of-home respite services continue to be provided through pilot projects. An additional home was launched under the Bridge Pilot in March 2023 with a capacity for four individuals. This is part of the short-stay model, with the goal of preventing family breakdowns.
- With the remainder of Bridge Pilot funding, transitional homes for youth whose families can no longer meet their needs are being developed. There are three homes planned, one to open summer 2023, a second projected for fall 2023, and a

third in early planning stages.

2022

- Manitoba Families reported that in August 2021, the Out-of-Home Overnight Respite pilot was announced. Under this program, one three-bed facility has been opened in Winnipeg and another three-bed facility will be opened in Brandon.
- Manitoba Families also reported in March 2022 Manitoba announced the Bridge Program Pilot Project. This program will support families who are no longer able to provide full time care due to the complexity of their child's exceptional care requirements. This is a two-year pilot program.

Intent 3: Protocol revises Children's disABILITY Services policy that restricts the provision of Children's disABILITY Services for children transitioned into care with Child and Family Services to 90 days following the placement of the child.

2023

- Similar to the 2022 response, the Department reports it is reviewing current policies and exploring options, using a family-centred, client-focused lens. It is identified that CdS continues to strengthen relationships with CFS agencies to increase awareness of disability-related programs and services.
- While a new protocol has not yet been developed, CdS reported that the 90-day restriction of services is no longer in place.

2022

- Manitoba Families reported that the department is reviewing current policies and exploring options, using a family centred and client-focused lens.

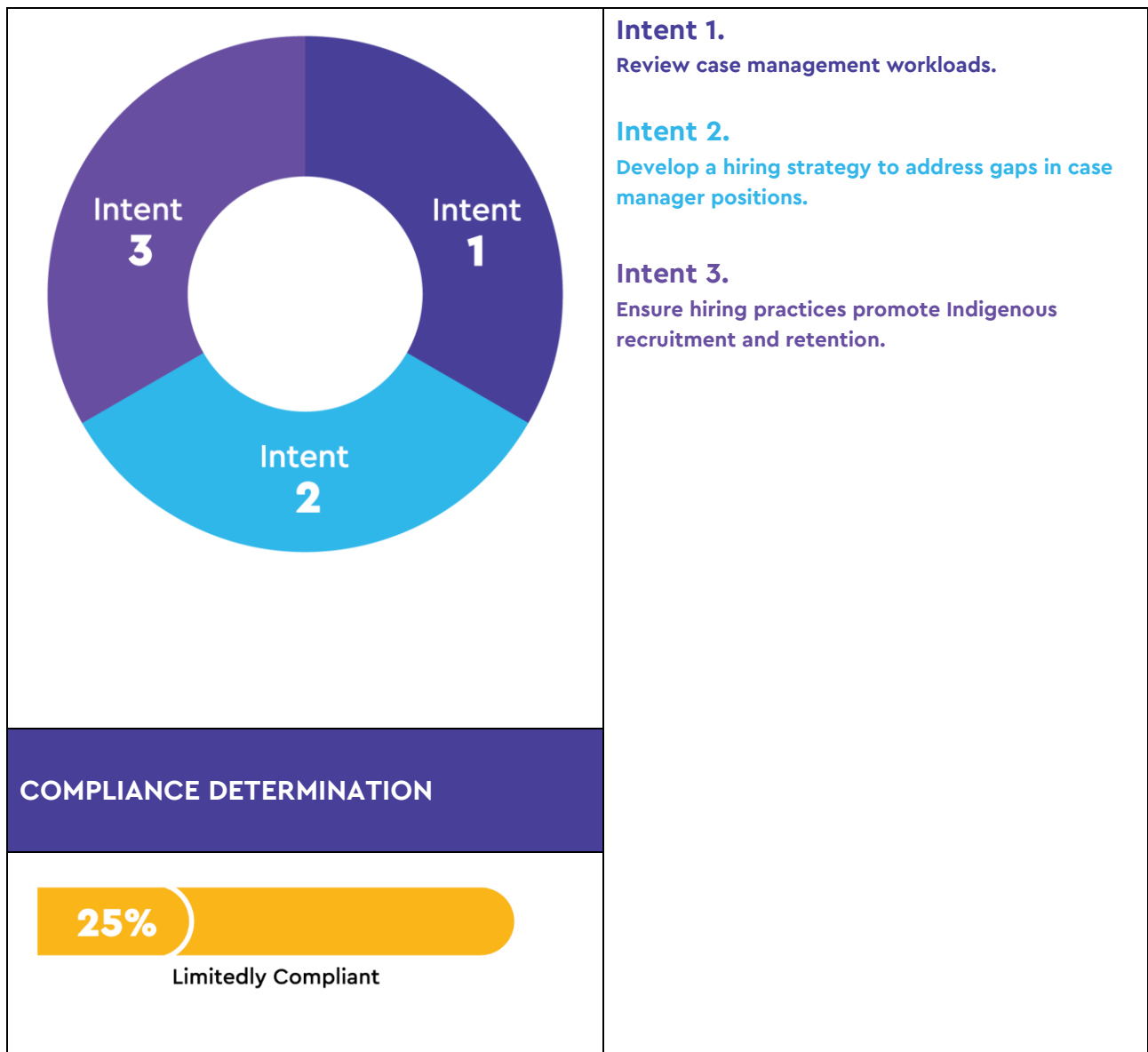
Analysis Summary: The response to this recommendation highlights that work is ongoing to strengthen the relationship between the CdS and CFS systems. The information provided identifies that there are a variety of avenues where collaboration between the departments is occurring, and has had a positive impact on the services provided to children, youth, and families. When looking at progress on the development of a protocol, and the inclusion of important details in that protocol, work has not progressed since the first response to this recommendation was provided in 2022. The development of the presentation, to be followed by the protocol is still in progress. Without the development of the protocol, both intents 2 and 3 can only be assessed to a limited degree. As the intents of this recommendation focus on the development of the protocol, and the included details of that protocol, this recommendation remains Limitedly Compliant.

COMPLIANCE DETERMINATION

Disability – Recommendation 5

Recommendation Summary: Review and analysis of CdS case management workload and caseloads.

Primary Public Body: Manitoba Families



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Bridging the Gaps: Achieving Substantive Equality for Children with Disabilities in Manitoba
Date Released:	3/25/2021
Full Recommendation: (including details)	Recommendation Five: The Manitoba Advocate for Children and Youth recommends that Manitoba Families and Children's disABILITY Services review and address case management workloads to ensure case managers are able to implement internal standards and provide services that align with a family-centered service model.
Intent(s) of Recommendation:	The intents of the recommendation are to: <ol style="list-style-type: none"> 1. Review case management workloads. 2. Develop a hiring strategy to address gaps in case manager positions. 3. Ensure hiring practices promote Indigenous recruitment and retention.
Issue:	Disabilities
Public Body	Manitoba Families
Dates of Previous Official Updates from Public Body:	June 30, 2022
2. Compliance Determination	
Limitedly Compliant 0.25	Actions taken only implement a small part of the recommendation, requirements are only fulfilled to a limited degree by actions taken, resulting in significant deficiency in implementation.
Self-Assessment	Partially-Compliant
Previous Compliance Determination	Limitedly Compliant
3. Rationale for Determination (How did you reach this compliance determination)	
Intent 1: Review case management workloads.	
2023	
<ul style="list-style-type: none"> • The response provided references a funding announcement – also included in the 	

2022 response to this recommendation – for the allocation of \$5 Million to Children's disABILITY Services (CdS), of which \$2.5 Million was allocated for the transfer of case management services for children with autism to St. Amant.

- Manitoba Families reports that cases are in the process of being transferred to St. Amant, following the hiring of case workers in the Winnipeg and Western regions. The initial focus of case transfers was on families who did not yet have a case manager. As of May 2023, nearly 800 cases had been transferred to St. Amant, of which over 500 had been waiting for case manager assignment.
- The response identifies that the department is committed to ensuring that every family who wants to have a case manager is able to receive that service.

2022

- Manitoba Families reported that there is a commitment to review and analyze workloads within Children's disABILITY Services (CdS) case management structure.
- Caseload reviews are to occur in each region on a regular basis and the department reported an expectation that CdS program managers meet with community services workers regularly to review their caseloads, and at a minimum every three months. This expectation is included in the workload tool standards document.
- Manitoba Families reported that many workload reviews are conducted monthly and that the department promotes best practices using a family-centred approach. More information is needed about how this is translating into manageable caseloads.

Intent 2: Develop a hiring strategy to address gaps in case manager positions.

2023

- Response provided under intent 1.

2022

- Manitoba Families reported that the Government of Manitoba announced an additional \$5million dollars in funding committed to CdS to improve access to services for families in Manitoba.
- This increased funding will provide support to St. Amant to deliver case management services for children will autism as well as build additional capacity within the CdS service sector for child specific therapies.

Intent 3: Ensure hiring practices promote Indigenous recruitment and retention.

2023

- The response referenced the Government of Manitoba's Diversity and Inclusion

Strategy, and the employment equity policy which targets the designated groups of women, Indigenous persons, persons with a disability, and visible minorities.

2022

- Manitoba Families reported that it is committed to working with the Public Service Commission to increase Indigenous recruitment and retention through the employment equity process, including designating some positions as 'Indigenous preferred' and/or 'consideration given to Indigenous people'.

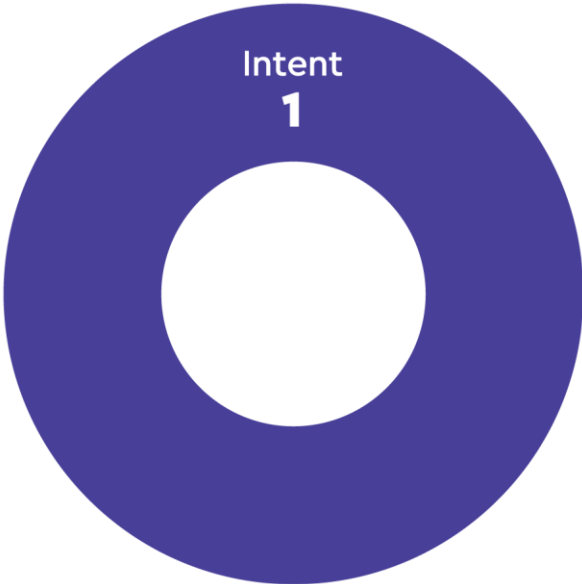

Analysis Summary: While the additional information provided in the 2023 response about the number of cases transferred to St. Amant for autism services is welcomed and beneficial, more information is still needed on the nature of the commitment referred to with respect to the intent to review case management workload, and the extent to which that commitment has been carried out to ensure caseloads are manageable for CdS workers across Manitoba. Specifically, more information is needed about the impact the transfer of cases had on caseloads within CdS, how the 800 cases transferred to St. Amant are distributed, and whether that distribution constitutes a manageable caseload for workers. There continues to be limited understanding from this response on what a manageable caseload looks like within CdS, and whether steps are needed under intent 2 to ensure there are no gaps in case manager positions. As limited additional information has been provided with this response, this recommendation remains Limitedly Compliant.

COMPLIANCE DETERMINATION

Safe Sleep – Recommendation 13

Recommendation Summary: Develop a provincial standard requiring CFS providers to assess infant sleep environment in face to face contact.

Primary Public Body: Manitoba Families

	<p>Intent 1. Manitoba Families and Child and Family Services Authorities to develop a provincial standard requiring all Child and Family Services providers to assess infants' sleep environments as part of prescribed face-to-face contact with anyone receiving child welfare services, including all infants who are not in care (who may receive child welfare services directly or whose families receive child welfare services).</p>
<p>COMPLIANCE DETERMINATION</p>	
	

Recommendation Compliance Summary



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1. Recommendation Information	
Report Name:	Safe and Sound: A Special Report on the Unexpected Sleep-Related Deaths of 145 Manitoba Infants
Date Released:	3/13/2020
Full Recommendation: (including details)	<p>Recommendation Thirteen:</p> <p>The Manitoba Advocate for Children and Youth recommends that Manitoba Families work with child and family services authorities to develop a provincial standard that requires all child and family service providers to assess infants' sleep environments as part of prescribed face-to-face contact with anyone receiving child welfare services, including all infants who are not in care.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • Child services professionals will assess the safety of infant sleep environments. • Families receiving child welfare services and requiring resources and/or information on safe sleep practices will be identified. • Families will be resourced with a crib or other safe sleep surface, if none is available.
Intent(s) of Recommendation:	<p>1. Manitoba Families and Child and Family Services Authorities to develop a provincial standard requiring all Child and Family Services providers to assess infants' sleep environments as part of prescribed face-to-face contact with anyone receiving child welfare services, including all infants who are not in care (who may receive child welfare services directly or whose families receive child welfare services).</p>
Issue:	Safe Sleep
Public Body	Manitoba Families
Dates of Previous Official Updates from Public Body:	May 31, 2023
	June 30, 2022
	May 31, 2021
2. Compliance Determination	
Limitedly Compliant	Actions taken only implement a small part of the

0.25	recommendation, requirements are only fulfilled to a limited degree by actions taken, resulting in significant deficiency in implementation.
Self-Assessment	Limitedly Compliant
Previous Compliance Determination	Limitedly Compliant

3. Rationale for Determination

(How did you reach this compliance determination)

Intent 1: Manitoba Families and Child and Family Services Authorities to develop a provincial standard requiring all Child and Family Services providers to assess infants' sleep environments as part of prescribed face-to-face contact with anyone receiving child welfare services, including all infants who are not in care (who may receive child welfare services directly or whose families receive child welfare services).

2023

- Manitoba Families reported the work required to support the implementation of Bill 32 has delayed the initiation of Phase 3 of Standards Modernization. The information that was relayed in the 2022 response remains current, aside from the previously reported timelines.

2022

- In the current response, Manitoba Families details that this recommendation will be addressed under Stage 3 of the Standards Modernization Project, as detailed under Recommendation 4 of Angel's Story. The timelines provided suggests engagement will begin in late 2022 and early 2023.
The inclusion of a Standard for assessment of sleep environment will have a focus on engagement with families to provide an appropriate context for discussion of assessment of infant sleep environments that are culturally safe and carefully balance infant safety and parental choice.

2021

- Manitoba Families reported that the best way to address the intent of this recommendation is underway, and a more thorough progress update will be provided during the next reporting cycle. An important consideration for a change to Standards is to avoid the implication that parental choice about infant sleep environments alone would be a protection concern because this would disproportionately impact families living in poverty and cultures where communal sleeping is practiced.
- Manitoba Families believes the Standards, as they currently are, do not exclude case workers from assessing the sleep environment for infants, although there is

also nothing that explicitly informs the case worker to assess the sleep environment. There are some Authorities and agencies that have an existing practice to assess sleep environments, however, it is unknown how common this practice is implemented across the province.

- Manitoba Families reported having discussed planning for this work at the Standing Committee as of May 19, 2021 in addition to regular meetings with the Child and Family Services Authorities. Furthermore, as of March 24, 2021, the Standing Committee along with Authorities have discussed this recommendation and developed a work plan which includes:
 - Taking an inventory of all public education materials on safe sleep environments. Packages will be shared with the Authorities to utilize as educational resources.
 - A new Foundational Standard will be introduced which focuses on the requirement to assess for a safe sleep environment at Intake and Assessment. This will include consideration of differing cultural practices and other factors as per the various Authorities. The safe sleep assessment will include the provision of education to the care provider. Assessment tools, templates, and resources are to be shared at the discretion of the Authorities and agencies.
 - A reference value in the Service Planning Window will be added to the Child and Family Services Information System (CFSIS). This means that an "assessment type drop down box will be [sic] now include 'Safe Sleep Education/Assessment' and will allow agencies to document completion and uploading their agency/Authority specific assessment information."

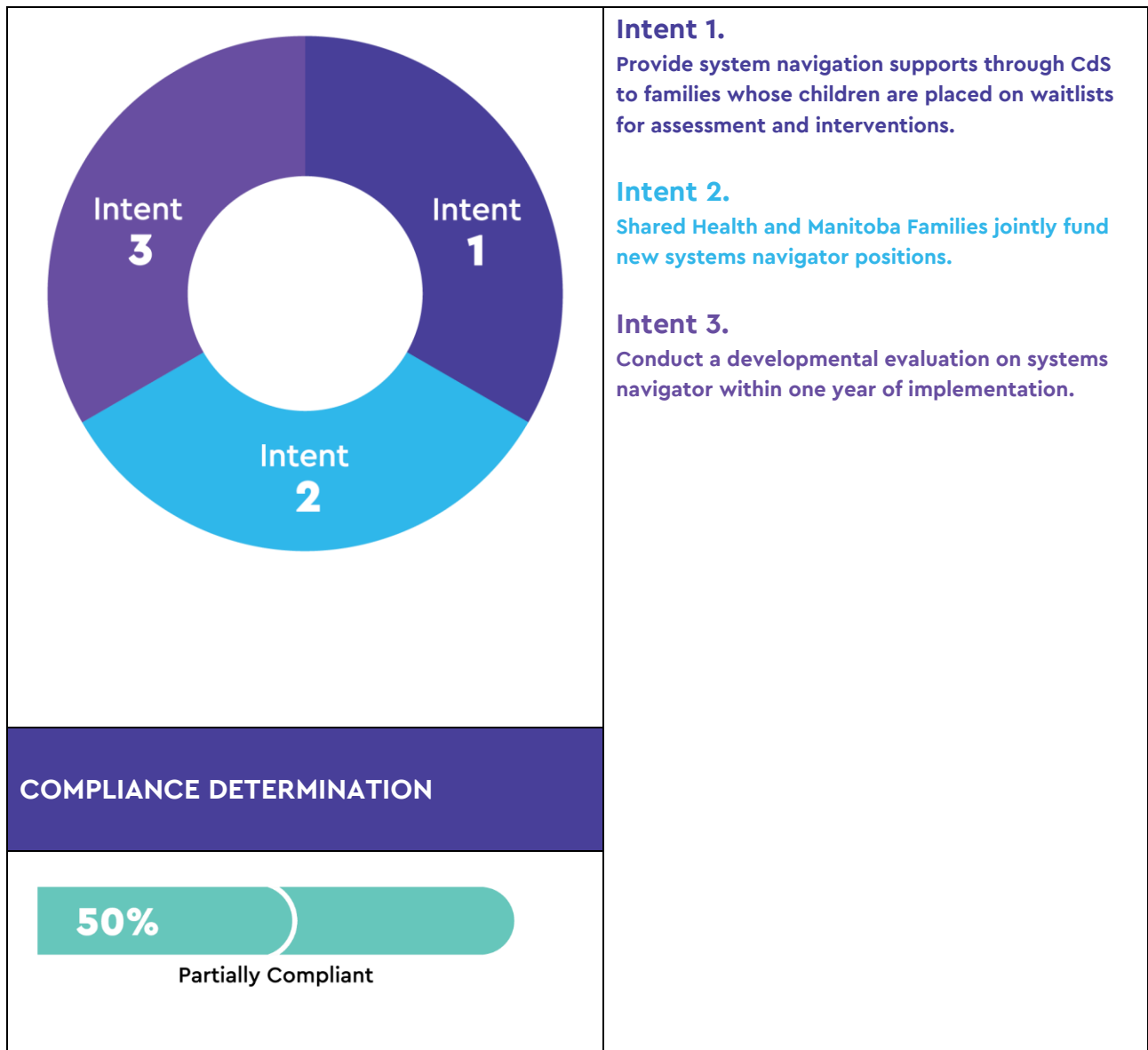
Analysis Summary: The development of the Standard requested by this recommendation is part of Phase 3 of Standards Modernization by Manitoba Families. Delays related to Phase 2 of the Standards Modernization project, along with resources needed for the implementation of Bill 32 have changed the timelines of this project. As Manitoba Families continues to show commitment to implementing this recommendation, but identified actions are upcoming and not complete, this recommendation remains Limitedly Compliant.

COMPLIANCE DETERMINATION

Disability – Recommendation 4

Recommendation Summary: Establish system navigation supports for families.

Primary Public Body: Manitoba Families



Recommendation Compliance Summary



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1. Recommendation Information	
Report Name:	Bridging the Gaps: Achieving Substantive Equality for Children with Disabilities in Manitoba
Date Released:	3/25/2021
Full Recommendation: (including details)	Recommendation Four: The Manitoba Advocate for Children and Youth recommends that Manitoba Families, Manitoba Health and Seniors Care (now Manitoba Health), and Shared Health ensure that families whose children are placed on waitlists for assessments and interventions for disabilities receive system navigation supports through the Children's disABILITY Services Program while they wait.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Provide system navigation supports through CdS to families whose children are placed on waitlists for assessment and interventions. 2. Shared Health and Manitoba Families jointly fund new systems navigator positions. 3. Conduct a developmental evaluation on systems navigator within one year of implementation.
Issue:	Disabilities
Public Body	Manitoba Families
Dates of Previous Official Updates from Public Body:	May 31, 2023 June 30, 2022
2. Compliance Determination	
Partially Compliant 0.50	Actions taken only implement part of the recommendation. Important requirements have been met and the recommendation is acted upon, however, deficiencies remain.
Self-Assessment	Largely Compliant - Towards Alternate Solution
Previous Compliance Determination	Non-Compliant
3. Rationale for Determination	
<i>(How did you reach this compliance determination)</i>	
Intent 1: Provide system navigation supports through CdS to families whose children are placed on waitlists for assessment and interventions.	

2023

- Both the Departments of Families and Health are recommending an alternate solution to this recommendation with the following details:
 - The departments are focusing resources on recommendation 3 from this report, referring to the elimination of waitlists for timely assessment, diagnosis, and referrals to specialized services. By focusing on providing timely assessments and diagnoses, there is opportunity for the identification of specific needs and appropriate follow-up services. With the elimination of waitlists, there will not be a need for navigation at this stage. The department reports that many children who are referred for an assessment are ultimately not assessed as having a diagnosis or service needs, or may be assessed as having health-based needs which are not eligible for CdS. Assessment and diagnosis inform best practice follow-up services, which would not be available during waitlist navigation services.
 - In addition to focusing on eliminating the waitlist, the departments report actions for increasing awareness and referrals to the Children's Therapy Network of Manitoba (CTNM). CTNM is delivered in partnership through the departments of Health, Education and Early Childhood Learning, and Families. CTNM provides occupational therapy, physiotherapy, speech language pathology, and audiology services to children who are not meeting developmental milestones. According to the response, these services provide information and strategies for parents to use to facilitate their child's development. There is currently a large-scale modernization of CTNM underway, including the launch of a new website with resources, and a \$2.5 million funding increase for children's therapy services from the Department of Families.
- The proposed alternate solution encompasses a combination of focusing resources on the implementation of recommendation 3, and increasing awareness and availability of therapy services for children and their families without a formal diagnosis.

2022

- Manitoba Families reported that service navigation begins once a family has been referred for a specific service and the child's needs have been identified. Until the child has been assessed and their needs identified, they are not eligible for CdS or may only be eligible for health-based services.
- For children with developmental delays, therapy services are available without assessment.
- Manitoba Families has given no evidence of efforts to provide system navigation support prior to assessment.
- Manitoba Families recommends focusing on reducing/improving wait times.

Intent 2: Shared Health and Manitoba Families jointly fund new systems navigator positions.

2023

- Response provided under intent 1.

2022

- No information was provided on efforts to comply with this intent.

Intent 3: Conduct a developmental evaluation on systems navigator within one year of implementation.

2023

- Response provided under intent 1.

2022

- No information was provided on efforts to comply with this intent.

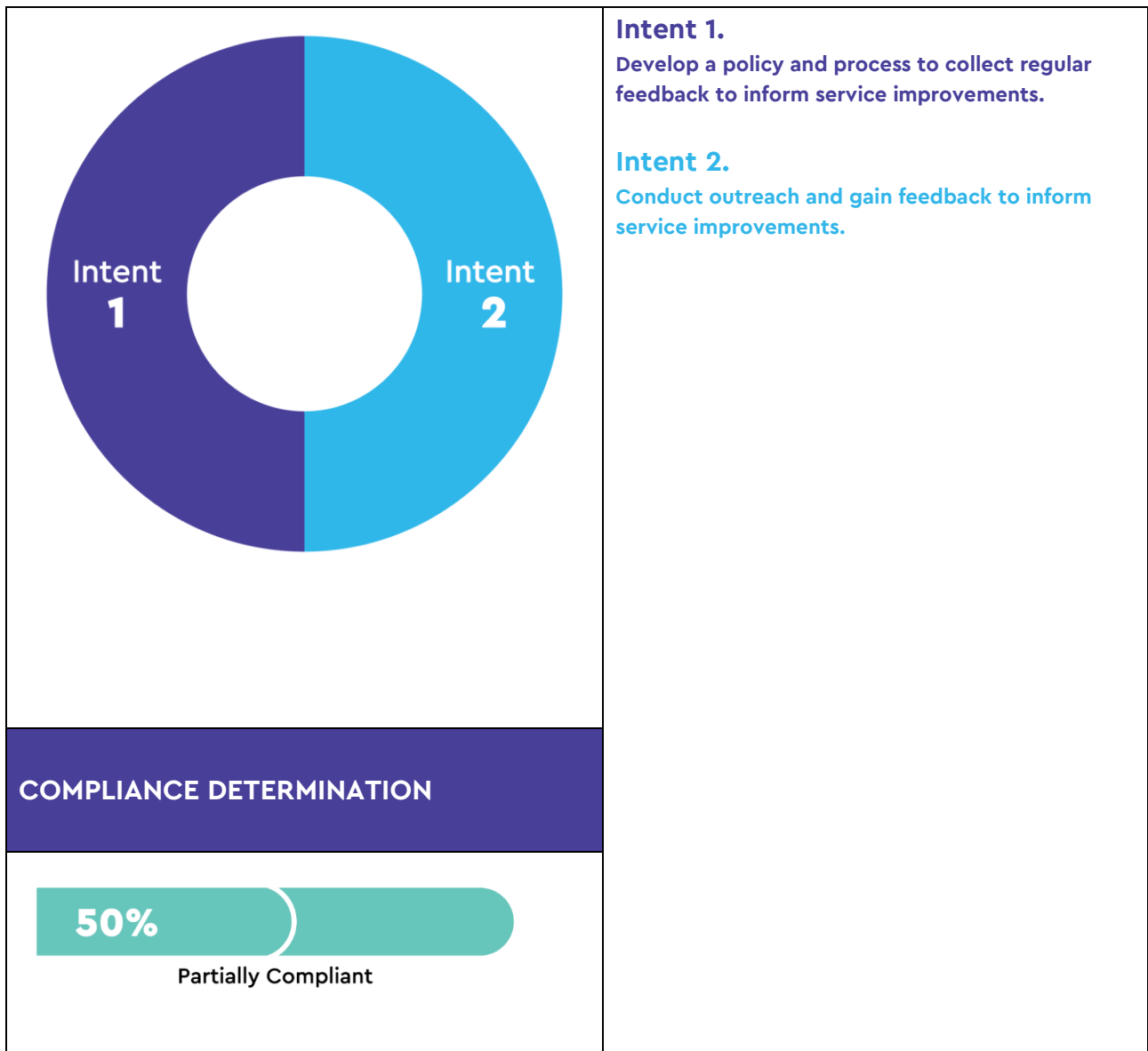
Analysis Summary: Based on the proposed alternate solution, resources for implementing this recommendation are more suitably directed to the elimination of waitlists for assessment and diagnosis, rather than developing resources for assisting families in navigating waitlists. In the interim, Manitoba Families reported that waitlists will further be mitigated by the increased awareness and availability of related therapy services in the areas of occupational therapy, physiotherapy, speech language pathology, and audiology services. The increase in utilization of those services would theoretically assist in the decrease in numbers of children on waitlists who would not ultimately be assessed and diagnosed as eligible for disability services. In order to accept the proposed alternate solutions, further information will be needed on the utilization of the Children's Therapy Network of Manitoba, the specific actions taken to increasing awareness of the available services, and whether access to those services has been impacted. In addition, the utilization of fulfilling recommendation 3 as an alternate to this recommendation necessitates that this recommendation is not able to be deemed Fully Compliant, until that recommendation is also Fully Compliant. Therefore, this recommendation is deemed Partially Compliant with further information needed on the progress and impact of the proposed alternatives.

COMPLIANCE DETERMINATION

Disability – Recommendation 7

Recommendation Summary: Develop processes to gather regular feedback.

Primary Public Body: Manitoba Families



Recommendation Compliance Summary



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1. Recommendation Information	
Report Name:	Bridging the Gaps: Achieving Substantive Equality for Children with Disabilities in Manitoba
Date Released:	3/25/2021
Full Recommendation: (including details)	Recommendation Seven: The Manitoba Advocate for Children and Youth recommends that Children's disABILITY Services develop a policy and process to collect regular feedback from the children with disabilities and the families it serves to inform service improvements.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Develop a policy and process to collect regular feedback to inform service improvements. 2. Conduct outreach and gain feedback to inform service improvements.
Issue:	Disabilities
Public Body	Manitoba Families
Dates of Previous Official Updates from Public Body:	May 31, 2023
	June 30, 2022
2. Compliance Determination	
Partially Compliant 0.50	Actions taken only implement part of the recommendation. Important requirements have been met and the recommendation is acted upon, however, deficiencies remain.
Self-Assessment	Partially Compliant
Previous Compliance Determination	Partially Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
<p>Intent 1: Develop a policy and process to collect regular feedback to inform service improvements.</p> <p>2023</p> <ul style="list-style-type: none"> • Manitoba Families, through CdS, reported that it is currently developing an engagement framework that encompasses a range of ways to receive feedback regarding CdS services. 	

2022

- Manitoba Families reported that CdS will be working with Community Living disABILITY Services (CLdS) to develop a plan for on-going engagement with people with disabilities and their families.
- No information was provided on the timeline for developing and executing this plan.

Intent 2: Conduct outreach and gain feedback to inform service improvements.**2023**

- Building on information provided in 2022, CdS and CLdS continue to meet with the Family Advocacy Network (FAN) on a bi-monthly basis. The purpose of these meetings is to learn more about families' experiences raising children with a disability. The consultation occurring in these meetings reportedly allows for family perspectives on the self-managed respite guide.
- Manitoba Families also reported a Complaint/Compliment Form is currently under development for the Disability and Specialized Services Branch (CdS and CLdS). The intention of the form is to allow families and individuals to provide feedback on their services and those who provide services. Processes will be developed to facilitate responses to feedback received and inform system improvements.
- CdS identified that it continues to receive feedback from collaterals and service partners through ongoing meetings about how CdS services are impacting families, and how CdS intersects with other services.

2022

- Manitoba Families reported that a survey has already been jointly sent by CdS, CLdS, and the Family Advocacy Network requesting feedback "from community." More information is needed on the scope of the survey and how the information will be used to improve services.
- Ongoing bi-monthly meetings with Family Advocacy Network to learn more about families' experiences raising children with disabilities.

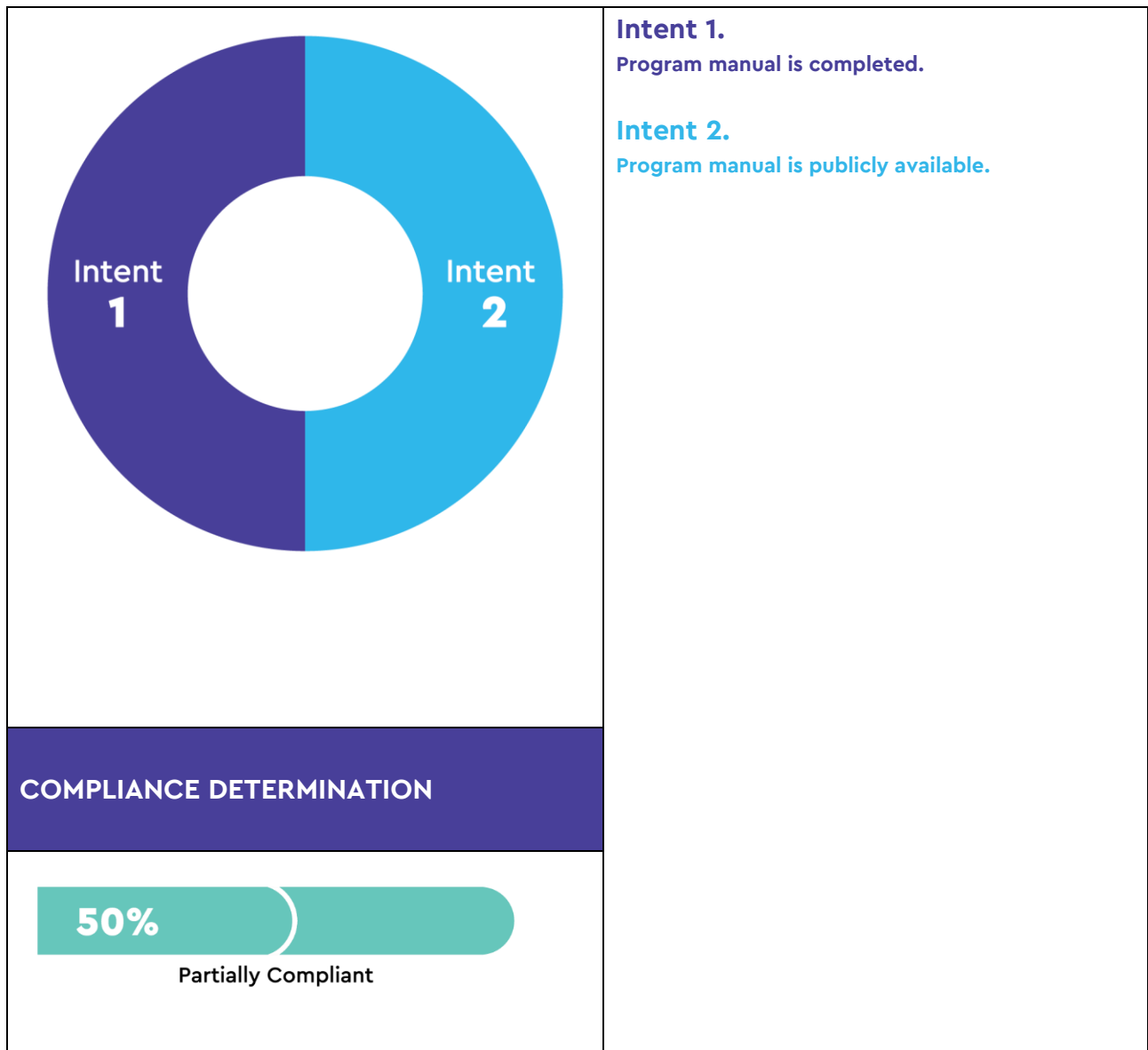
Analysis Summary: Manitoba Families, through Children's disABILITY services, continues to strengthen its plans for engagement with the children and families it serves. This year's response provided some additional information on engagement activities already occurring or under development, and reiterated plans for developing an overarching engagement framework. While the new information provided is promising, plans have not moved forward significantly since the 2022 response. As such, this recommendation remains Partially Compliant.

COMPLIANCE DETERMINATION

Disability – Recommendation 8

Recommendation Summary: Make all CdS policies and procedures public.

Primary Public Body: Manitoba Families



Recommendation Compliance Summary



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1. Recommendation Information	
Report Name:	Bridging the Gaps: Achieving Substantive Equality for Children with Disabilities in Manitoba
Date Released:	3/25/2021
Full Recommendation: (including details)	Recommendation Eight: The Manitoba Advocate for Children and Youth recommends that Children's disABILITY Services complete a program manual and make this publicly available.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Program manual is completed. 2. Program manual is publicly available.
Issue:	Disabilities
Public Body	Manitoba Families
Dates of Previous Official Updates from Public Body:	May 31, 2023
	June 30, 2022
2. Compliance Determination	
Partially Compliant 0.50	Actions taken only implement a small part of the recommendation, requirements are only fulfilled to a limited degree by actions taken, resulting in significant deficiency in implementation.
Self-Assessment	Partially Compliant
Previous Compliance Determination	Partially Compliant
3. Rationale for Determination	
<i>(How did you reach this compliance determination)</i>	
Intent 1: Program manual is completed.	
2023	
<ul style="list-style-type: none"> • Manitoba Families, through CdS, reported that CdS continues to develop and update policies and standards. The following have been updated since 2022: <ul style="list-style-type: none"> ○ Self-Managed Overnight Respite Policy (new) ○ Agency-Delivered Out-of-Home Overnight Respite Pilot Policy (new) ○ CdS Case Recording Standards-Household Members and Service Plans (update) ○ Comprehensive Family Assessment (CFA) Long and Short Form (update) 	

- CdS Self-Managed Respite Rate Assessment Guidelines (update)
- As discussed in the 2022 response, information was reiterated on the issuing of the Case Management Service Standards in 2021-22. These standards describe the minimum service standards expected under normal business constraints for case management services from intake to case closure. The standards are accompanied by resources lists for finding relevant policies and procedural guides, as well as standardized templates and forms.
- Work is identified as continuing on bringing all policies and standards into a manual-style format.

2022

- Manitoba Families reported that the following have been newly developed or revised:
 - Eligibility Policy (revised)
 - CdS Service Assessment Guidelines (new)
 - CdS Provincial Rate Assessment Guidelines (new)
 - Disability-Related Assessment Guide (new)
 - Introduction to CdS (reconciliation statement) (revised)
 - Case Management Service Standards
- Manitoba Families reported that these standards define how case management services are delivered to ensure consistency, accountability, and quality of service across Manitoba.
- These documents are available to department staff via the CdS intranet website. Planning is underway to bring these policies and standards into a manual-style format that will be accessible to the general public.

Intent 2: Program manual is publicly available.

2023

- The publicly available policies, as identified in the 2022 response, were reiterated.
- The manual discussed under intent 1 is intended to be available internally and externally.

2022

- Manitoba Families reported that the following policies are publicly available:
 - Eligibility Policy
 - Autism Outreach Policy
 - Child Development Policy
 - Equipment Policy
 - Home Modification Policy
 - Respite Policy

- Security Checks Policy
- Summer Skill Maintenance Policy
- Supplies Policy
- Transportation Assistance Policy
- Vehicle Modification Policy

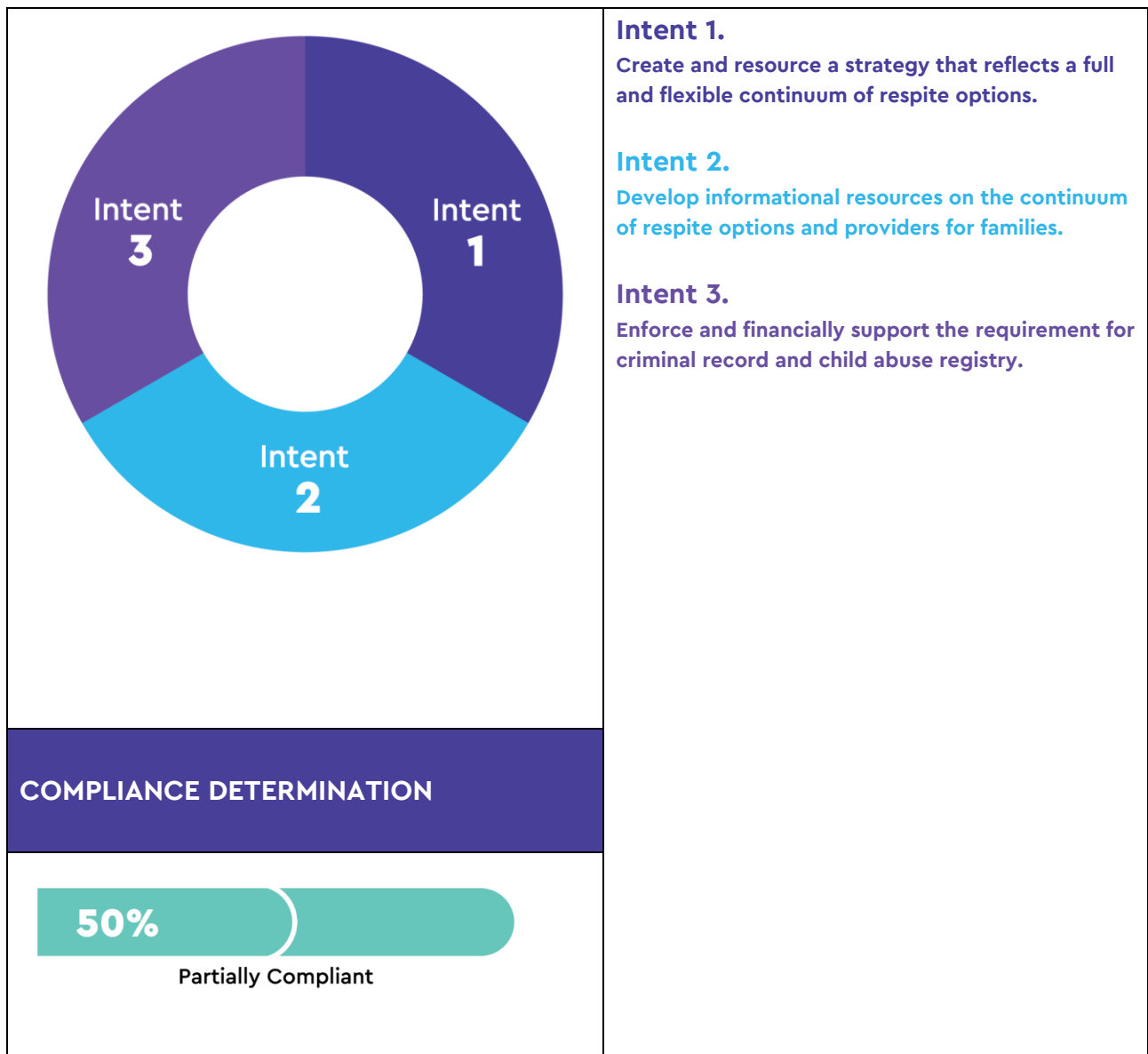
Analysis Summary: Manitoba Families, through Children's disABILITY Services, continues to report work on the development, revision and/or updating of internal policies, procedures, and standards. It is promising for CdS to identify the continued commitment to updating internal policies. As specific progress on creating a program manual, and making it available publicly is limitedly discussed in the response and these actions remain outstanding, this recommendation remains Partially Compliant.

COMPLIANCE DETERMINATION

Disability – Recommendation 9

Recommendation Summary: Develop and resource a full continuum of flexible respite support.

Primary Public Body: Manitoba Families



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Bridging the Gaps: Achieving Substantive Equality for Children with Disabilities in Manitoba
Date Released:	3/25/2021
Full Recommendation: (including details)	Recommendation Nine: The Manitoba Advocate for Children and Youth recommends that Manitoba Families and Children's disABILITY Services create and resource a strategy that reflects a full and flexible continuum of respite options from at-home respite to alternative care outside the home.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Create and resource a strategy that reflects a full and flexible continuum of respite options. 2. Develop informational resources on the continuum of respite options and providers for families. 3. Enforce and financially support the requirement for criminal record and child abuse registry.
Issue:	Disabilities
Public Body	Manitoba Families
Dates of Previous Official Updates from Public Body:	June 30, 2022
	May 31, 2023
2. Compliance Determination	
Partially Compliant 0.50	Actions taken only implement part of the recommendation. Important requirements have been met and the recommendation is acted upon, however, deficiencies remain.
Self-Assessment	Partially Compliant
Previous Compliance Determination	Partially Compliant
3. Rationale for Determination	
<i>(How did you reach this compliance determination)</i>	
Intent 1: Create and resource a strategy that reflects a full and flexible continuum of respite options.	
2023	
<ul style="list-style-type: none"> • Manitoba Families, through CdS, added some additional information to the 	

resources discussed in the 2022 response.

- Wage rates through the Self-Managed Respite Guidelines were increased to \$19.00 per hour to help families recruit and retain qualified staff.
- The overnight respite homes pilot through St. Amant had its Winnipeg home opening in February 2022, and Brandon home opening in May 2022. An evaluation of the first year of services under this pilot is underway.
- New Directions for Children, Youth, Adults and Families was chosen as the service provider for the Bridge Program for Children and Youth with Disabilities Pilot Project. The first home opened under this project follows the 7-day model, with three additional homes planned that will provide longer-term transitional supports for youth who are expected to be supported under CLdS once reaching age of majority.

2022

- Manitoba Families reported work to create a full and flexible continuum of respite options available – hourly, on evenings and weekends, 24-hours a day.
- Manitoba Families reported that the Self-Managed Respite Guidelines were issued in 2021 to assist CdS staff when assessing respite needs with families and children.
- The government also announced a two-year pilot in partnership with St. Amant to create two overnight respite homes (one in Winnipeg, one in Brandon).
- These facilities will offer proactive services outside of the formal child welfare system that are aimed at preventing children with disabilities from entering CFS care.
- The government has also announced the Bridge Program for Children and Youth with Disabilities Pilot Project which will provide out-of-home residential supports and in-home family supports for families who are no longer able to provide care because of the ongoing complexity of their children's care requirements. This program will provide stays of up to seven days at a time.
- A self-managed respite guide for families is in the latter stages of development.

Intent 2: Develop informational resources on the continuum of respite options and providers for families.

2023

- The guide identified in the 2022 response is expected to be released in June 2023. The parent-led, Family Advocacy Network, was consulted during the development of this resource.

2022

- Manitoba Families reported that a guide is currently in the final stages of design and development.

Intent 3: Enforce and financially support the requirement for criminal record and child abuse registry.

2023

- To further elaborate on the 2022 response, CdS reported that the Department changed the Self-Managed Services Funding Agreement and Processes in December 2021. The agreement between families and the Department now includes details regarding expectations for personal references, a criminal reference check, and child and adult abuse registry checks. Self-managed services are not initiated until both parties sign the agreement. In addition, the agreement details the contractual obligations of both the family and CdS for self-managed services.

2022

- Manitoba Families reported on the development of a legal agreement between families and the department. The requirements under the agreement include personal references, a criminal reference check, and child and adult abuse registry checks.

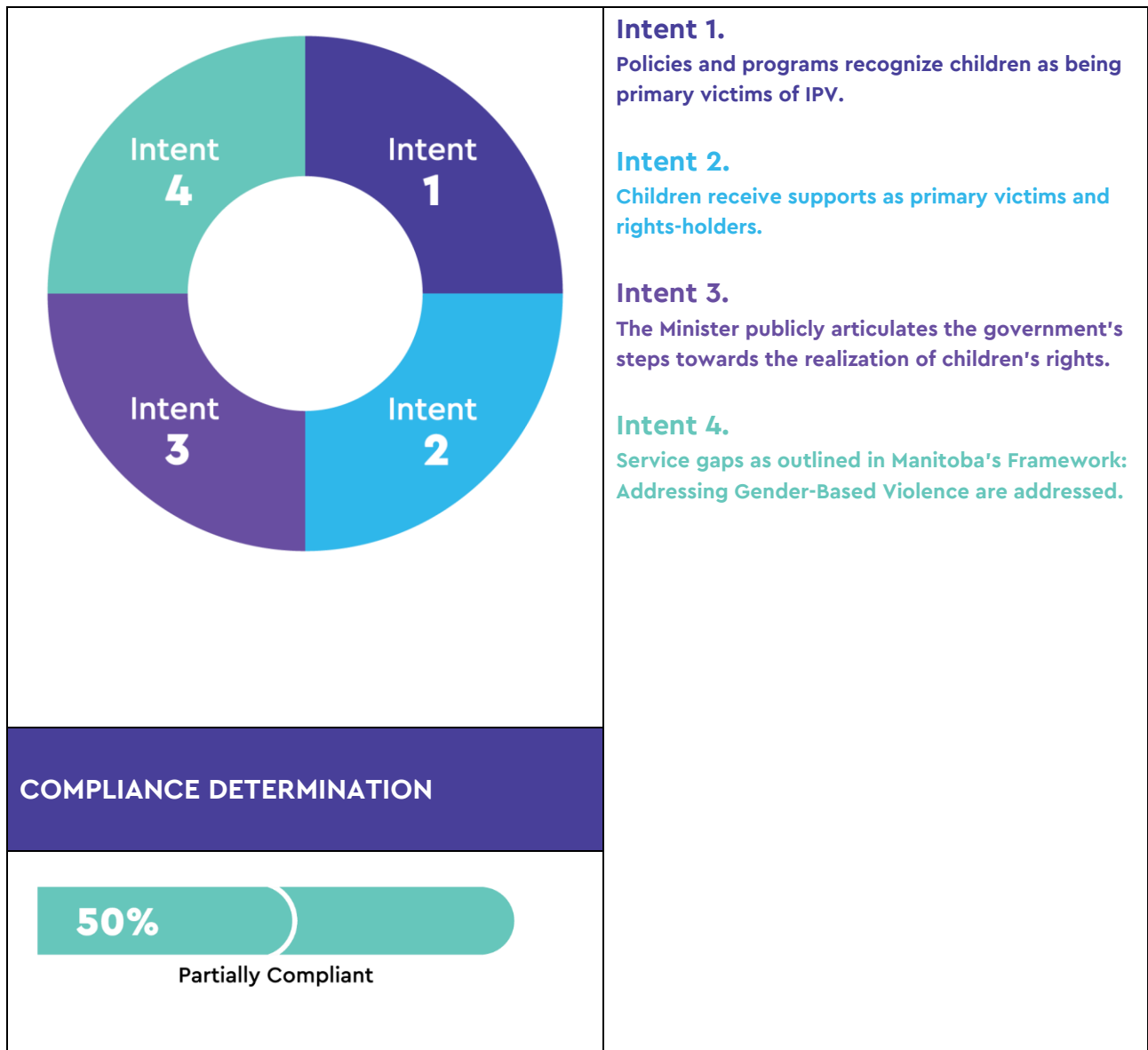
Analysis Summary: The 2023 response from Manitoba Families, through Children's disABILITY Services, reinforces steps taken towards implementing this recommendation as reported in 2022. Evaluating the pilot projects, as well as finalizing the informational resources on respite options, will assist in moving this recommendation further towards completion. As further work is needed on the intents of this recommendation, it remains Partially Compliant.

COMPLIANCE DETERMINATION

IPV – Recommendation 1

Recommendation Summary: Recognize children who witness IPV as victims of IPV.

Primary Public Body: Manitoba Families



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Every Two Hours: A Special Report on Children and Youth Exposed to Intimate Partner Violence in Manitoba
Date Released:	6/22/2022
Full Recommendation: (including details)	<p>Recommendation One:</p> <p>The Manitoba Advocate for Children and Youth recommends that the Ministers of the Gender-Based Violence Committee of Cabinet publicly recognize children exposed to intimate partner violence (IPV) as primary victims and rights-holders under the <i>United Nations Convention on the Rights of the Child</i> who are entitled to supports.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • The public recognition should articulate steps the government will take towards the realization of the right of children exposed to IPV to receive supports to heal from trauma (article 39, UNCRC) • Address the gap in Manitoba's Framework: Addressing Gender-Based Violence regarding services to children and youth exposed to IPV in Manitoba.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Policies and programs recognize children as being primary victims of IPV. 2. Children receive supports as primary victims and rights-holders. 3. The Minister publicly articulates the government's steps towards the realization of children's rights. 4. Service gaps as outlined in Manitoba's Framework: Addressing Gender-Based Violence are addressed.
Issue:	Intimate Partner Violence
Public Body	Manitoba Families
Dates of Previous Official Updates from Public Body:	May 31, 2023
2. Compliance Determination	

Partially Compliant 0.50	Actions taken only implement part of the recommendation. Important requirements have been met and the recommendation is acted upon, however, deficiencies remain.
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Self-Assessment	Partially Compliant
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3. Rationale for Determination
(How did you reach this compliance determination)

Intent 1: Policies and programs recognize children as being primary victims of IPV.

2023

- Manitoba Families reported the following actions towards meeting this intent:
 - A review and update of the Family Violence Prevention Program (FVPP) standards manual is currently underway. The update will include a recognition of children and youth exposed to intimate partner violence as being primary victims.
 - A review and update of the Service Purchase Agreements for family violence shelters, second-stage programs, women's resource centres, and specialized programs funded through FVPP is currently underway. The update will also include recognition of children and youth exposed to intimate partner violence as primary victims.
 - The Gender Based Violence Committee of Cabinet (GBVCC) accepted the recommendations of this report, and a commitment to update Manitoba's Framework: Addressing Gender-Based Violence was included in the Speech from the Throne delivered on November 15, 2022. A progress report of actions taken since the release of the framework in December 2020 is in development, and will inform updates to the overall framework document. The update will include recognition of children and youth exposed to intimate partner violence (IPV) as primary victims.

Intent 2: Children receive supports as primary victims and rights-holders.

2023

- It is identified that a review of services available to children, a gap analysis, and a plan to address gaps in services is to be undertaken in 2023-24 with implementation of the plan to begin in 2024-25.
- An IPV Interdepartmental Working Group has been established and is engaging with organizations in a variety of sectors regarding service and coordination gaps for children exposed to IPV, services that could fill these gaps, and ways to address violence normalization among boys and young men.

Intent 3: The Minister publicly articulates the government's steps towards the realization of children's rights.

2023

- Following the work identified under intent 1, next steps will include identifying the best way to increase awareness of the work conducted and the related changes.

Intent 4: Service gaps as outlined in Manitoba's Framework: Addressing Gender-Based Violence are addressed.

2023

- As mentioned under intent 1, work is underway to update the framework.
- Following updates to the framework, work will occur with relevant organizations to determine which actions to prioritize for the purposes of the framework.

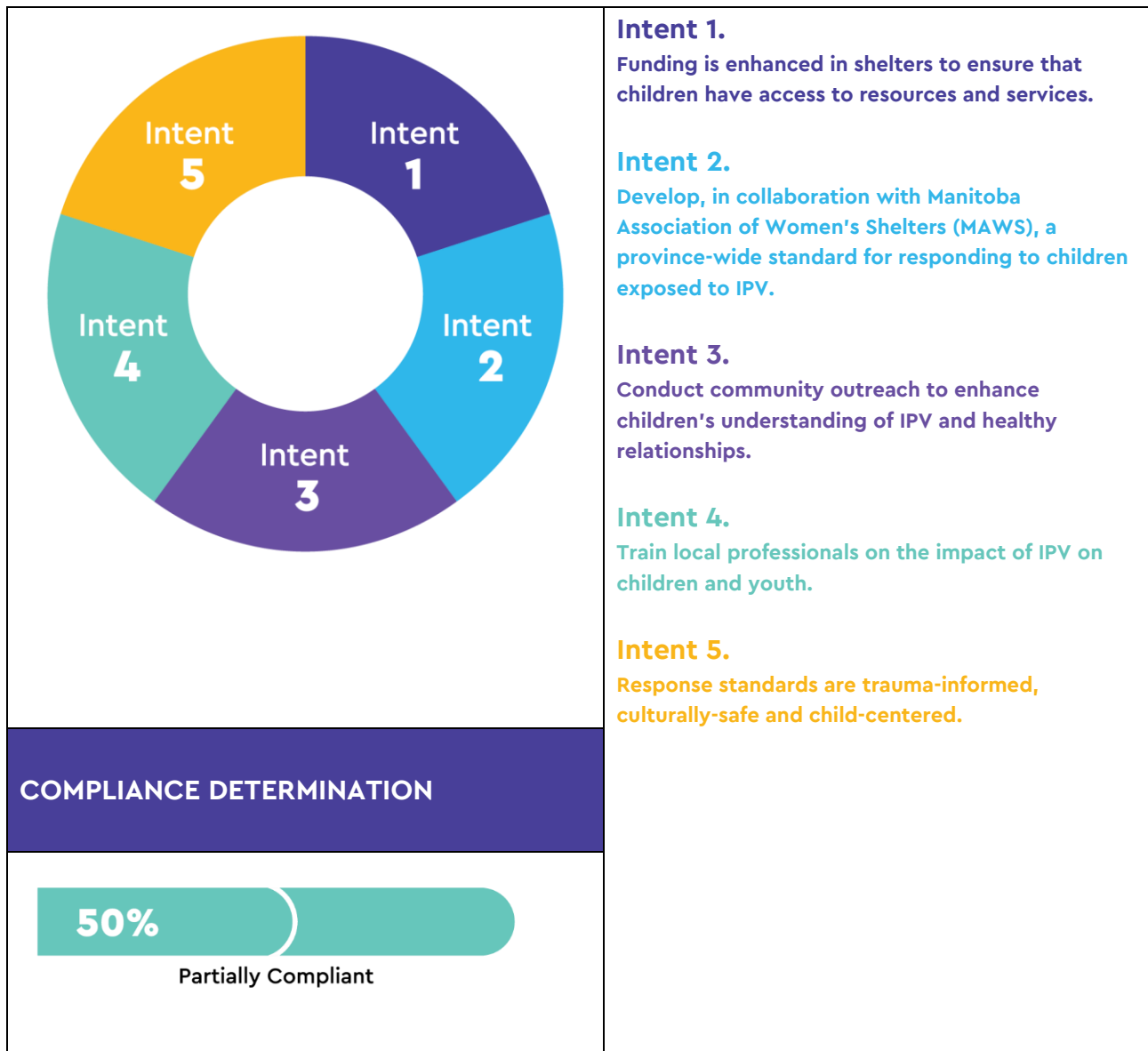
Analysis Summary: The information provided in response to this recommendation reflects a commitment to its fulfillment. Work has been identified as in progress under each of the intents of this recommendation, with timelines provided for next steps and finalization of implementation. As such, this recommendation is considered Partially Compliant.

COMPLIANCE DETERMINATION

IPV – Recommendation 6

Recommendation Summary: Fund family shelters.

Primary Public Body: Manitoba Families



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Every Two Hours: A Special Report on Children and Youth Exposed to Intimate Partner Violence in Manitoba
Date Released:	6/22/2022
Full Recommendation: (including details)	<p>Recommendation Six:</p> <p>The Manitoba Advocate for Children and Youth recommends that the Minister responsible for the Manitoba Status of Women Secretariat, enhance funding to each of the ten family violence shelters in Manitoba to ensure employment of a child-focused trauma specialist.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • This position would support children in shelter and connect them to resources and services. • Conduct community outreach to enhance understanding of IPV and health relationships for children and young people, particularly in rural communities. • Conduct training in the community and for local professionals about the impact of exposure to IPV on children and youth. • Work with the Manitoba Association of Women’s Shelters to develop a province-wide standard to respond to children exposed to IPV in shelters with trauma-informed, culturally safe, and child-centred approaches.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Funding is enhanced in shelters to ensure that children have access to resources and services. 2. Develop, in collaboration with Manitoba Association of Women’s Shelters (MAWS), a province-wide standard for responding to children exposed to IPV. 3. Conduct community outreach to enhance children’s understanding of IPV and healthy relationships. 4. Train local professionals on the impact of IPV on children and youth. 5. Response standards are trauma-informed, culturally-safe and child-centred.

Issue:	Intimate Partner Violence
Public Body	Manitoba Families
Dates of Previous Official Updates from Public Body:	May 31, 2023
2. Compliance Determination	
Partially Compliant 0.50	Actions taken only implement part of the recommendation. Important requirements have been met and the recommendation is acted upon, however, deficiencies remain.
Self-Assessment	Partially Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
<p>Intent 1: Funding is enhanced in shelters to ensure that children have access to resources and services.</p> <p>2023</p> <ul style="list-style-type: none"> Manitoba Families reported that in April 2022, Manitoba announced the development and implementation of an improved funding model for shelters. Within the framework for the improved funding model was the inclusion of funding to support child-specific resources for shelters, as needed. All ten Family Violence Prevention Program shelters have increased annual operational funding through the new funding model. The response further detailed that Manitoba Status of Women (MSW) is in the process of exploring funding options to support the provision of child trauma specialists in shelters. This is in addition to MSW's plans to perform a gap analysis of services available to children exposed to IPV within the Manitoba gender-based violence sector. <p>Intent 2: Develop, in collaboration with Manitoba Association of Women's Shelters (MAWS), a province-wide standard for responding to children exposed to IPV.</p> <p>2023</p> <ul style="list-style-type: none"> Manitoba Families reported that the Family Violence Prevention Program (FVPP) is in the process of updating the standards manual for shelters, second-stage programs, and women's resource centres to include standards for responding to children who have experienced or been exposed to IPV. This work is being done in collaboration with MAWS and agencies across the sector. <p>Intent 3: Conduct community outreach to enhance children's understanding of IPV and healthy relationships.</p>	

2023

- As mentioned under intent 1, the new funding model includes funding to support child-specific resources for children, as needed, including through community outreach.

Intent 4: Train local professionals on the impact of IPV on children and youth.**2023**

- The funding identified under intent 1, was accompanied by additional funding announcements in March 2023 for an improved funding model for FVPP-funded women's resource centres and second-stage programs in Manitoba. This funding model included funding to support training initiatives across the sector.

Intent 5: Response standards are trauma-informed, culturally-safe, and child-centred.**2023**

- Standards are in the process of being updated, as outlined under intent 2.

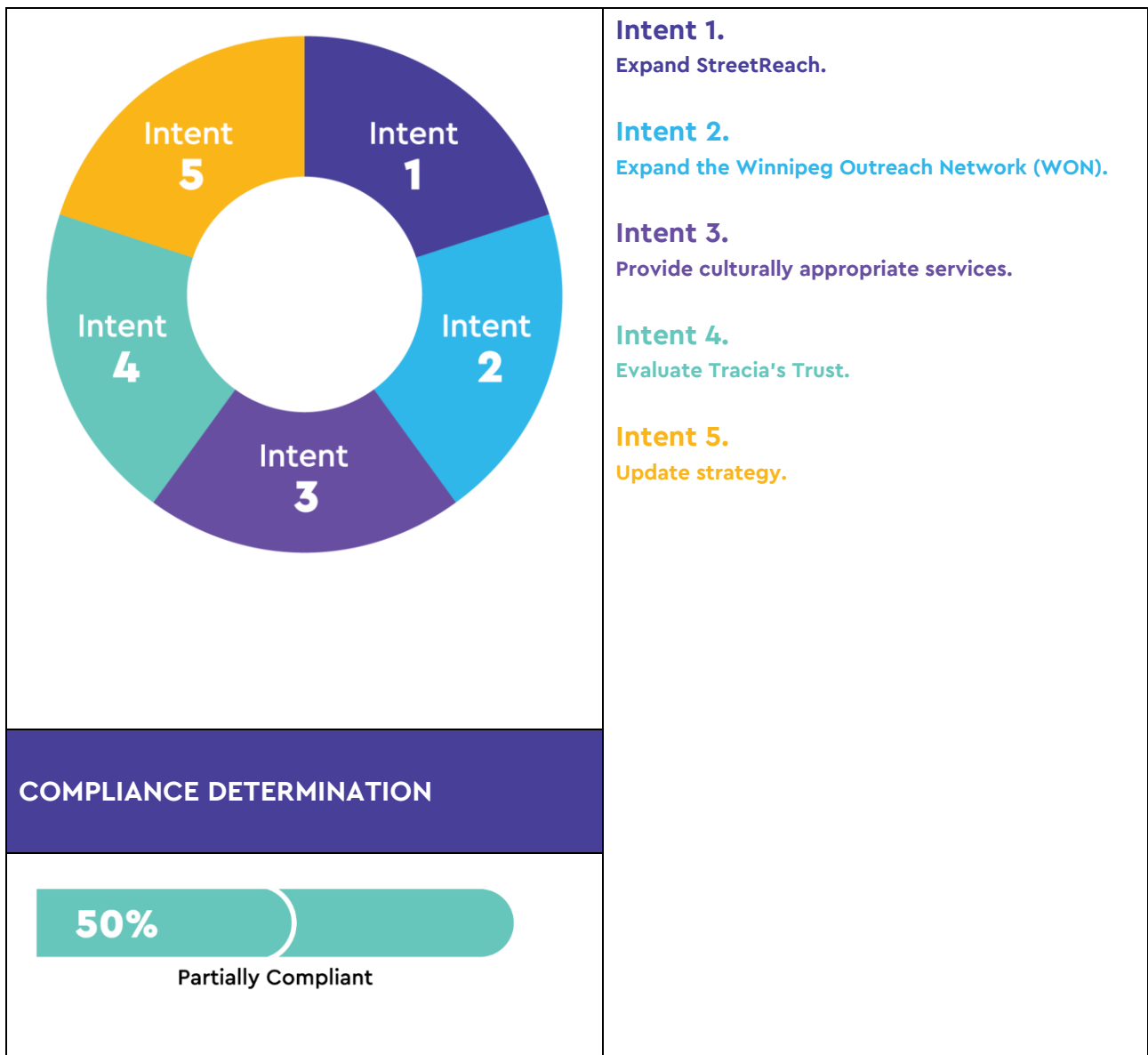
Analysis Summary: Manitoba Families, through the Manitoba Status of Women Secretariat has reported a commitment to and progress under each of the intents of this recommendation. The improved funding models, and the identification of exploring the inclusion of child-trauma specialists in shelters, is promising work towards fulfillment of the recommendation. Positive steps towards implementation have also been identified in the creation of standards for responding to children who have experienced or been exposed to IPV. As steps have been taken towards implementation, with identified work to come, this recommendation is considered Partially Compliant.

COMPLIANCE DETERMINATION

Angel – Recommendation 2

Recommendation Summary: Expansion of SEY services and evaluation of Tracia's Trust.

Primary Public Body: Manitoba Families



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	In Need of Protection: Angel's Story
Date Released:	12/13/2018
<p>Full Recommendation: (including details)</p>	<p>Recommendation Two:</p> <p>The Manitoba Advocate for Children and Youth recommends that the Department of Families, in collaboration with Manitoba Education and Training, Manitoba Justice, and Manitoba Health, Seniors and Active Living, in consultation with Manitoba Status of Women, Indigenous and Northern Relations, the Winnipeg Police Service and the Royal Canadian Mounted Police, (1) expand Street Reach, Winnipeg Outreach Network (WON), and culturally appropriate services in First Nations and rural and remote communities; and (2) independently evaluate and then update Tracia's Trust: Manitoba's Sexual Exploitation Strategy.</p> <p>DETAILS: These activities should include:</p> <ul style="list-style-type: none"> • The release of the Department of Families' research entitled, <i>Collaboration and Best Practices to End Human Trafficking and Sexual Exploitation in Manitoba</i>; • Ongoing data collection to inform clear performance measurements reflected in service purchase agreements (SPAs); • An independent third-party external evaluation of the outcomes and outputs of the Strategy to be published upon completion. This evaluation should utilize the Department of Families' research and specifically include analysis of existing: <ul style="list-style-type: none"> ○ specialized group and foster care placements for sexually exploited youth; ○ crisis stabilization support for sexually exploited youth; ○ sexual exploitation investigations; ○ regional teams funded by Tracia's Trust; ○ provincial training on the sexual exploitation of children and youth;

	<ul style="list-style-type: none"> ○ the effectiveness of the Strategy for children and youth who are not in care; and ○ the effectiveness of the Strategy in Indigenous communities as per Indigenous methods of evaluation. <ul style="list-style-type: none"> • A pilot of TERF's Sexual Exploitation Risk Assessment Tool across the four Child and Family Services Authorities; • The development of a continuum of care informed by youth consultation and collaboration with Indigenous partners (e.g., Manitoba Keewatinowi Okimakanak and Southern Chiefs' Organization) to create/reform service programs to address the co-occurring needs of sexually exploited youth (e.g., mental health, addictions, justice, and education); and • An expansion of StreetReach (including youth who are not in care), the Winnipeg Outreach Network (WON), and services for youth who are sexually exploited in First Nations and remote and rural communities. The expansion of each of these services should be paired with continuous quality improvement tracking tools to monitor outcomes, track progress towards service delivery goals, and respond to the evolving needs of sexually exploited youth.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Expand StreetReach. 2. Expand the Winnipeg Outreach Network (WON). 3. Provide culturally appropriate services. 4. Evaluate Tricia's Trust. 5. Update strategy.
Issue:	Sexual Exploitation
Public Body	Manitoba Families
Dates of Previous Official Updates from Public Body:	May 31, 2023
	June 30, 2022
	May 31, 2020
	June 30, 2020
	December 31, 2019
	June 27, 2019
2. Compliance Determination	
Partially Compliant 0.50	Actions taken only implement part of the recommendation. Important requirements have been met and the recommendation is acted upon, however, deficiencies remain.
Self-Assessment	Fully Compliant

Previous Compliance Determination	Partially Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
<p>Intent 1: Expand StreetReach.</p> <p>2023</p> <ul style="list-style-type: none"> • Met in previous responses. <p>2022</p> <ul style="list-style-type: none"> • Met in previous responses. <p>2021</p> <ul style="list-style-type: none"> • The expansion of StreetReach Thompson is noted as a full-service delivery model. The intent of this recommendation was met. <p>2020</p> <ul style="list-style-type: none"> • The Proceeds of Crime Funds were used to provide bi-monthly work by StreetReach with RCMP in Thompson (Dec 2019 response synopsis). The province also made enhancements to the existing StreetReach Winnipeg services to include specialized mental health, addictions, and spiritual care/elder supports. This intent of the recommendation was met. <p>Intent 2: Expand the Winnipeg Outreach Network (WON).</p> <p>2023</p> <ul style="list-style-type: none"> • This intent was met through previous responses. Manitoba Families continues to reference the funding and support provided to Clan Mothers. <p>2022</p> <ul style="list-style-type: none"> • In discussion meetings with Manitoba Families between the 2021 and 2022 responses, the alternative to funding Indigenous-led community organizations other than WON was agreed upon. • Based on the information provided in 2021, as well as the updated information on work occurring with the Clan Mothers organization, this intent of the recommendation is now met. • Recent Clan Mother's initiatives include: <ul style="list-style-type: none"> ○ The excellent four-part series on teachings and ceremonies for sexually exploited youth referenced in the 2021 submission is complete and have 	

been distributed. They are available to all Manitobans and can be accessed at no cost on the Tracia's Trust website:

<https://www.gov.mb.ca/fs/traciustrust/empowerment.html>.

- The above also provides the introduction to the Indigenous language awareness campaign about online sexual exploitation, developed by Clan Mothers and funded by the province, which is now available and is in place. The messages in various languages can also be found on the Clan Mother's website: <https://www.gov.mb.ca/fs/traciustrust/empowerment.html>.
- They continue to receive annual funding to lead land-based healing and teachings with sexually exploited youth.
- On December 14, 2021, Manitoba announced \$3M funding for Clan Mothers to develop the healing village site for at risk women and girls: <https://news.gov.mb.ca/news/index.html?item=52857&posted=2021-12-14>.
- Other funding provided to Clan Mothers to support development of the healing village includes: \$300,000 – May/22, Building Stronger Communities grant, Municipal Relations; \$298,000 – Apr/21 for fiscal years 2021/22 to 2023/24, JUS (Victims of Crime funding); \$75,000 – 2021/22, Building Stronger Communities grant, Municipal Relations.

2021

- The Department of Families reported that a decision to expand WON funding has not been made. In part, this was due to WON explicitly stating that they wish to remain outside of government funding.
- There have been additional new enhancements to services for sexually exploited youth (SEY):
 - Project Neecheewam Inc.'s spiritual advisory support for StreetReach in 2019 provided services and support to youth through a referral process led by StreetReach staff.
 - The new Ata Chiminis Mikisiw Indigenous-led treatment facility is reportedly under way.
 - Clan Mothers Healing Village received new funding to develop land-based healing, teachings, and ceremonies. This initiative is a pilot project for March 2020 to March 2022 through a collaborative partnership with Manitoba's Tracia's Trust Strategy. It is meant to deliver bimonthly opportunities for healing to predetermined groups of youth and their identified supports. The goal is to build cultural reconnection for youth through Indigenous land-based teachings. Activities include:
 - Four dates were set to meet with youth who wanted to sit with Elders between August 26, 2020 and September 16, 2020. Clan Mothers Elders were to share Indigenous traditional teachings and help youth make an Indigenous

story mask, followed by a celebratory ceremony and feast with family, mentors, and friends. StreetReach staff indicated that their contact with clientele was impacted due to COVID.

- A second teaching module consisted of a 13 session youth art series led by a local Indigenous artist (Jackie Traverse) from November 2020 to February 2021. StreetReach involved youth were encouraged to engage with Elders to receive teachings while creating art. StreetReach identified difficulty engaging youth and getting them to attend sessions due to increasing COVID-19 provincial restrictions, leading to limited participation and eventually a pause to the series.
- On January 7, 2021, CMHV revised their proposal to the province, instead suggesting to use remaining funding to develop online modules/curriculum (videos, teachings, etc.) featuring Elders and community leaders. The developed modules are to be shared with agencies supporting SEY temporarily until lockdown measures are eased.
 - Videos are filmed by local Indigenous youth and include a teaching guide and questionnaire for service providers to facilitate with clients.
 - Guide allows CMHV to collect data about the number of youth and agencies served.
 - One video of the four-part video series was released on Tracia's Trust website during the annual "Stop child sexual exploitation awareness week" in March 2021. Two videos were completed with a May 2021 launch date. The final video was to be launched and shared with service providers in June 2021.
 - Videos are to be distributed by CMHV and StreetReach to Strong Hearts CSU, Youth Addiction Stabilization Unit, specialized placements, and specialized foster homes.
- According to Manitoba Families, WON has stated that it desires to remain outside of government funding, the new and expanded services reported in progress show a lot of promise to meet this intent to expand community-led supports. Evidence of WON's continued position to remain outside government funding is needed as is information about the outcomes of the funded initiatives listed above.

2020

- No evidence was provided regarding an expansion of the Winnipeg Outreach Network. No alternative was provided to indicate how supports for street outreach services for children and youth in Winnipeg have been enhanced.

Intent 3: Provide culturally appropriate services.**2023**

- This intent was met through previous responses.

2022

- The current response refers back to the funding of Clan Mothers and the related work as noted in the 2021 and 2022 responses to Intent 2.
- In regards to the Indigenous lens Group Care Logic Model first reported in 2021, the most recent response adds, "The logic model is used to inform reporting requirements respecting contact for children and families, and involvement of children in community and cultural events."
- Information in responses provided to this recommendation since 2019 have indicated a commitment to providing culturally appropriate services, as seen in the responses to Intents 1 and 2. Funding has been provided to Indigenous-led organizations, and the Group Care Logic Model ensures that community care providers are reporting relevant information back to the CYSD.

2021

- The Child and Youth Services Division (CYSD) is working in collaboration with community care organizations on the development of a continuum of care model to address the need for specialized placements. The new model utilizes an Indigenous lens for a group care logic model. The group care logic model was developed in 2019 by CYSD's Placement Resources Unit and policy staff from Strategic Initiatives. The Community Care Providers (CCPs) offered input and feedback on the logic model. The model was presented to CFS Standing Committee for their information and feedback. In May 2019 the Group Care Logic Model was approved by the Department of Families' Deputy Minister. The logic model was used to develop a standard Group Care Schedule that is to be included in Service Purchase Agreements (SPAs) with CCPs delivering group care programs. Manitoba Families cites that using the logic model in this way establishes a consistent, system-wide approach to care for children and youth residing in group homes. It also establishes that care for a child or youth centres on well-being. The work remains underway.
- Neecheewam's new Ata Chiminis Mikisiw facility opened in June 2021. The facility has four beds which are designated for female or female-identifying youth. With

respect to the CYSD's Group Care Logic Model, there is insufficient evidence to demonstrate that a standard Group Care Schedule, although included in SPAs, translates to the daily practice of group care facilities to provide culturally appropriate services.

- The activities reported indicate a commitment to provide culturally appropriate services. Additional information, however, specifically pertaining to how the Group Care Schedule is being implemented in CCPs day-to-day operations is required.

2020

- Manitoba Families reported a delay in the full opening of Neecheewam's Safe Access for Everyone, a culturally appropriate program, to summer 2020 due to building renovations. Activities that were completed by the department included hiring two staff to begin relationship building with youth involved in StreetReach Winnipeg and who are staying in Stronghearts Crisis Stabilization Unit before being transferred to the Neechewam facility. Individualized case plans were developed with their guardians and other service providers involved. The placement is being developed in consultation with Indigenous community organizations and youth. This resource is not yet operational.

Intent 4: Evaluate Tracia's Trust.

2023

- Manitoba Families continues to reference the movement of the Tracia's Trust strategy under the oversight of the Gender Based Violence Committee of Cabinet (GBVCC).
 - They report this ensures oversight of the strategy is not looked at from an isolated viewpoint, and ensures its consistency with the national plan and priorities.
 - They further report that a different approach is needed for reviewing the programming under the strategy, as the strategy itself must be kept within the national lens, and is the responsibility of the GBVCC.
 - Manitoba Status of Women is working with specialists in the department to establish a working group which will review the Tracia's Trust Strategy and work, share ideas, facilitate collaboration, and ensure responsiveness.
 - Families reports that they envision the working group and its activities as an alternative to the recommendation of an external evaluation.
- In addition, Manitoba Families reported that work continues in the areas that were included in the details of the recommendation for evaluation, and provided the following information:
 - Specialized group and foster care placements, crisis stabilization support for SEY: the current model is being reviewed to consider potential ways to

expand the services provided by Strongheart CSU as well as reviewing the continuum of placement options. This work is being led by the Child and Youth Services Division in collaboration with community service providers.

- Sexual exploitation investigations – see details under training below for work to develop training to be rolled out later in 2023-24.
- Regional teams – a strategic plan is being developed this year to explore next steps.
- Provincial training on sexual exploitation: The Child and Youth Services Division Sexual Exploitation Prevention Specialist (SEPS) has been involved in a number of SEY training initiatives this year:
 - SEPS has led the development of a Sexual Exploitation training specific for Main Street Project in partnership with Sex Workers of Winnipeg Action Coalition (SWACC) to address the issue of youth at risk of, or experiencing, sexual exploitation presenting at adult shelters for support. SEPS presents on the youth sexual exploitation components (risk factors, signs, safety issues, appropriate response, and age-appropriate resources) while SWACC focuses on adults only and differentiates between adult exploitation and sex work. This training is anticipated to be offered to other adult shelters in the community during the 2023-24 fiscal year and can be adapted for other organizations seeing SEY youth presenting at their doors who are wanting to learn and do more.
 - SEPS has partnered with the Department of Families Training Unit for the development of a generalist Child Sexual Exploitation training that is currently under final content review, likely to be rolled out within the 2023-24 fiscal year.
 - CYSD continues to fund the New Directions/TERF Working with Children and Youth Who Are Sexually Exploited training. This training was provided to the regional teams, and trainers are being sought for northern Manitoba. Funding has been provided to revise and update the curriculum and for inclusion in the overall training strategic plan.
- The effectiveness of the strategy for children and youth not in care falls under the oversight of the working group.
- The national action plan includes consultation with Indigenous leadership which will support reviewing the effectiveness of the strategy in Indigenous communities.
- Additional information was provided by the Department of Families which continues to highlight its commitment to improving services for sexually exploited youth including:
 - a program review of StreetReach conducted by the Social Innovation office

with recommendations and outputs to come;

- a review of the SEY training curriculum which will include delivery of training falling under an Indigenous-led organization; and
- a proposal for reinstatement of an Advisory Council to oversee the Tracia's Trust Strategy.

2022

- There is reference in the current response back to 2021, where Manitoba Families indicated that the Gender Based Violence Committee of Cabinet (GBVCC) now leads a whole of government approach to oversight of the Tracia's Trust Strategy. The priorities of the Gender Based Violence Framework, as developed by the GBVCC, can be found online. Some examples of the action items related to sexual exploitation found under the objective of Support include:
 - 6.1 Engage in a coordinated response through a three-year action plan based on feedback from community and survivors. Continue to strengthen the commitment to survivor-led responses and support for grassroots, local responses to sexual exploitation.
 - 6.2 Provide funding to support community and survivor-led activities.
 - 6.3 Support holistic, Indigenous-led mental health and addictions healing programs for sexually exploited female and transgender youth.
 - 6.4 Strengthen the Tracia's Trust Strategy through interdepartmental partnerships.
 - 6.5 Support regional responses to human trafficking.
 - 6.6 Improve the emergency assessment, treatment, and mental health walk-in service for high risk, sexually-exploited youth.
 - 6.7 Work with women's emergency shelters to ensure services are provided to all women, including those experiencing homelessness and those who are victims of human trafficking.
 - 7.3 Support Indigenous-led, culturally-safe and responsive healing programs and initiatives that work with individuals and communities (e.g., Indigenous-led healing for women who have experienced sexual violence, sexual exploitation and human trafficking; Indigenous-led addictions and mental health healing programs).
- The response further describes that the work of the GBVCC is often confidential as it provides advice to cabinet.
- A February 2022 announcement of consultation to be undertaken with Indigenous Leadership regarding a National Action Plan to address Gender Based Violence is also cited as work towards this intent.
- Manitoba Families has indicated that the "oversight and coordination with other government work as well as national work and priorities addresses the intent of an evaluation of the strategy."
- More information is needed on how these action items meet the intent of an independent third-party external evaluation of the outcomes and outputs of

the Strategy to be published upon completion, which will specifically include analysis of existing:

- specialized group and foster care placements for sexually exploited youth;
- crisis stabilization support for sexually exploited youth;
- sexual exploitation investigations;
- regional teams funded by Tracia's Trust;
- provincial training on the sexual exploitation of children and youth;
- the effectiveness of the Strategy for children and youth who are not in care; and
- the effectiveness of the Strategy in Indigenous communities as per Indigenous methods of evaluation.

2021

- Manitoba Families indicated that the Tracia's Trust Research, released in 2019, includes a review and assessment from community that addresses this intent.
- According to Manitoba Families, there was an attempt to seek consensus with community about external evaluation, but no consensus was achieved. Therefore, the strategy is moved to consideration by the interdepartmental Gender Violence Committee of Cabinet which applies a whole-of-government approach as well as continued engagement of community, that is to be used to guide next steps and developments for the Tracia's Trust Strategy.
- The 2019 release of research on Tracia's Trust, titled *Collaboration and Best Practices to End Human Trafficking and Sexual Exploitation in Manitoba*, does not constitute an evaluation of the strategy. The lack of consensus of an external evaluation of the Tracia's Trust is concerning due to the considerable financial contribution being made towards Tracia's Trust. Despite the move of Tracia's Trust to the Gender Violence Committee of Cabinet, there is no evidence provided that this committee will evaluate the strategy. Outstanding information and activities remain in order to meet the intent of this recommendation.

2020

- FAM indicated that evaluation of the StreetReach enhancements, land-based healing through Clan Mothers, and Neecheewam will be part of a larger evaluation of services provided through the bi-lateral funding agreement. Programs have been participating in the design of the evaluation. Neecheewam will also undertake an internal evaluation of its treatment facility named Safe Access for Everyone (SAFE). Expansion of services after 2021/22 will be determined in the future.
- The response indicates a commitment to the evaluation of programs that fall under the Tracia's Trust Strategy but it remains unclear whether Tracia's Trust Strategy will be evaluated. Further information is needed on the evaluations and how they

will inform and contribute to the updating of the Tracia's Trust Strategy.

Intent 5: Update strategy.

2023

- Information provided under response to intent 4.

2022

- Manitoba Families identifies that the updating of the strategy will be ensured through work occurring under intent 4.

2021

- The Department of Families reported that this intent is in development and is now being considered by the Gender Violence Committee of Cabinet, which will engage with stakeholders and guide developments on Tracia's Trust.

2020

- There has been no evidence submitted as to the update of the Tracia's Trust Strategy.

Analysis Summary: Based on the responses provided to this recommendation since 2019, intents 1 through 3 regarding the expansion of StreetReach, and other culturally appropriate services have been identified as previously met. In regards to intents 4 and 5, Manitoba Families is proposing an alternate solution, due to the oversight of the Tracia's Trust Strategy currently falling under the Gender Based Violence Committee of Cabinet. The Framework for Addressing Gender-Based Violence does include specific action items regarding sexual exploitation responses in Manitoba, and the Tracia's Trust Strategy, but these metrics are very general and lack specificity. The Department of Families continues to report work in the area of services for sexually exploited youth; and has additionally reported the creation of a working group tasked with reviewing the work found under the Tracia's Trust Strategy. We are aware that an interdepartmental working group used to exist that has not been in operation for some time. While the information presented is encouraging, and continues to highlight a commitment to the effective delivery of services for sexually exploited youth, MACY continues to be concerned about the substantive gaps in existing services available for sexually exploited youth in Manitoba. As outlined in the Manitoba Advocate's statement of concern last March, no proactive strategy exists, with clear prevention and intervention targets based on the Manitoba context. Other provinces have strategies in place given each provincial context is unique. For reference, Manitoba's last formal Tracia's Trust strategy was launched in 2011. In other words, no program logic model or strategy reflecting new realities over the past 12 years

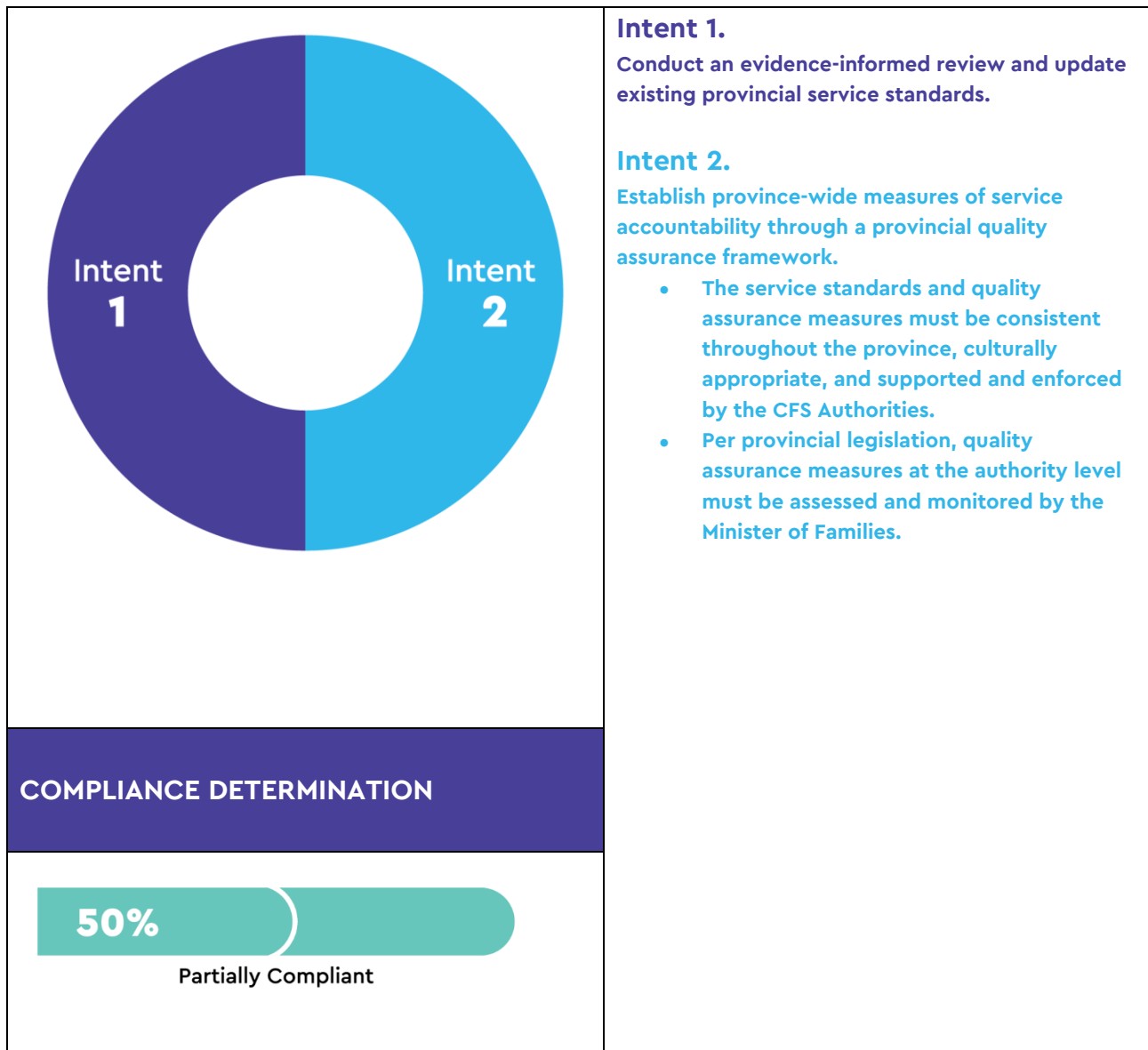
based on co-occurring struggles for sexually exploited youth are in place. For more information about the Advocate's concerns, please read the [full statement](#). Recognizing that the tasks asked for through this recommendation are extensive, MACY seeks to conduct further consultation and engagement with service providers, in order to understand how the requirements of this recommendation can be implemented most effectively to meet the needs of service providers and sexually exploited youth in Manitoba. This includes engagement related to public transparency and collaboration across departments. As there is not yet enough information to determine the final two intents of this recommendation as fulfilled, this recommendation remains as Partially Compliant.

COMPLIANCE DETERMINATION

Angel – Recommendation 4

Recommendation Summary: Conduct review, update existing CFS minimum standards, and establish province-wide quality assurance measures and framework.

Primary Public Body: Manitoba Families



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	In Need of Protection: Angel's Story
Date Released:	12/13/2018
Full Recommendation: (including details)	<p>Recommendation Four:</p> <p>The Manitoba Advocate for Children and Youth recommends that the Minister of Families, through the Child and Family Services Division (CFSD), in collaboration with the four child and family services Authorities, (1) conduct an evidence-informed review and update of existing provincial service standards, and (2) establish province-wide measures of service accountability through a provincial quality assurance framework. Both the service standards and the quality assurance measures must be consistent throughout the province, culturally appropriate, and supported and enforced by the governing child and family services Authorities within their child and family services agencies. As per provincial legislation, quality assurance measures at the authority level must then be assessed and monitored by the Minister of Families.</p> <p>DETAILS:</p> <p>This province-wide quality assurance framework should include:</p> <ul style="list-style-type: none"> • An evidence-informed review and update of existing Child and Family Service standards. • That the updated standards reflect a requirement that service models being used in the CFS system move away from an apprehension model and toward service models that require meaningful engagement of family, extended family, and community, which is in the best interests of children.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Conduct an evidence-informed review and update existing provincial service standards. 2. Establish province-wide measures of service accountability through a provincial quality assurance framework. <ul style="list-style-type: none"> • The service standards and quality assurance measures

	<p>must be consistent throughout the province, culturally appropriate, and supported and enforced by the CFS Authorities.</p> <ul style="list-style-type: none"> Per provincial legislation, quality assurance measures at the authority level must be assessed and monitored by the Minister of Families.
Issue:	Training CFS Minimum Standards
Public Body	Manitoba Families
Dates of Previous Official Updates from Public Body:	May 31, 2023
	June 30, 2022
	May 31, 2021
	June 30, 2020
	December 31, 2019
	June 27, 2019
2. Compliance Determination	
Partially Compliant 0.50	The most important requirements have been met; certain deficiencies affect the adequacy of the implementation, but without resulting in a situation where the given recommendation has not been acted upon.
Self-Assessment	Partially Compliant
Previous Compliance Determination	Partially Compliant
3. Rationale for Determination	
<i>(How did you reach this compliance determination)</i>	
Intent 1: Conduct an evidence-informed review and update existing provincial service standards.	
2023	
<ul style="list-style-type: none"> As reported in 2022, Phase 2 of Standards Modernization is complete, with the posting of updated standards occurring in summer 2023. <ul style="list-style-type: none"> Phase 2 is to be followed by the development of virtual standards training modules. Phase 3 of Standards Modernization has been delayed following the completion of ensuring the current standards are in alignment with Bill 32. Standards will have to address requirements about placement priority, family support agreements, kinship care, customary care, and voluntary care agreements. Phase 3 will contain the same work as identified in 2022. 	

2022

- Manitoba Families reports in this response that they are in phase 2 of Standards modernization, which has included a review and update of the existing Standards.
- The following details were provided on what the update of existing Standards included:
 - Standards Modernization Meetings involving representation from CYSD and each of the four Authorities were held between May and June 2021 and between September 2021 to February 2022. During that time the following chapters were redlined:
Chapter 1: Case Management
Chapter 2: Services to Families
Chapter 3: Child Protection
Chapter 4: Children in Care
Chapter 5: Foster Homes
Chapter 7: Service Administration
Chapter 8: Agency Operations
 - In May and June 2021 there were five meetings with the Authorities group and one meeting with ANCR.
 - From September 2021 to February 2022 there were 19 meetings with the Authorities group.
 - March 2022 – Phase 2 – redlining was completed following active participation of all four Authorities and CYSD. During this phase, redundancies and outdated information were removed from the current Standards and some information was updated. Current Standards have been condensed.
- Phase 2 of modernization will be completed with the following activities:
 - May 2022: re-share completed condensed Standards for final authority review.
 - September 2022: condensed Standards to be posted online and will replace current Standards with a single-source document option. This will result in easier use and accessibility online. Posting of condensed Standards is an interim measure and an important step to set the stage for modernization of the Standards as a whole.
 - September 2022: communication from CYSD to the Authorities announcing publicly posting of the condensed Standards and their effective date in the field.
- Phase 3 of Standards modernization is upcoming and will include work such as:
- Complete rework of the Standards with the plan to have them:
 - reflect an engagement rather than apprehension approach to working with families (will address PSI recommendations 1, 6, 9, 57).
 - make them more user friendly; currently they are a mix of legislation, policy,

- procedure, information sharing, and standards.
 - define roles of the branch, CFS Authority, and agency.
 - reduce administrative burden.
 - address coordination of federal and provincial child welfare legislation.
- Preparatory steps:
 - CYSD request for feedback on engagement/collaboration process to authority representatives and Standing Committee has taken place. CYSD will attend Authority Relations tables in September 2022 to engage CFS agencies in the development of a modernization plan and identification of potential working groups.
- Engagement/collaboration sessions with Authorities/agencies projected to take place into the fall of 2022.
- Determination of format and structure of modernized Standards with input from authority representatives and approval by Standing Committee in fall of 2022.
- Terms of Reference established in fall 2022.
- Drafting of modernized Standards projected to begin January 2023.
- Potential challenges to progress:
 - Authorities are focused on federal legislation (C24).
 - Transition of Indigenous Governing Bodies (IGBs) to having their own legislation is also requiring the time and attention of CYSD staff.

2021

- Manitoba Families reported that work on standards, priorities, and modernization remains underway. The Standing Committee approved the standards modernization project and CYSD is beginning the collaborative work. To this end, Authorities identified representatives and the first meeting occurred in May 2021. The Standards revision work is aiming to shift away from an apprehension model towards an engagement with family model. The new high-risk expectant parent standard is an example of this shift, as it replaces the practice of birth alerts through voluntary engagement, assessment, and planning with expectant parents who are assessed as being high-risk prior to the birth of the child. The high-risk expectant parent standard aims to reduce apprehensions at birth and when apprehension is not avoidable, to increase the likelihood that the child is placed with extended family and community. The Department of Families reported that the new overall approach (engagement with family model) was provided to all CFS Authorities and Agencies by the province under the CFS Transformation including the move to Single Envelope Funding.
- Additional information was provided, which indicates that the implementation of the federal legislation, *An Act Respecting First Nations, Inuit and Métis Children, Youth and Families*, will have significant implications on Manitoba's existing child welfare legislation because Indigenous governing bodies will begin to exercise

jurisdiction through their own laws. As Manitoba Families works to support the implementation of the federal act, a more staggered approach to legislative changes based on priority needs is being used.

- Promising early steps are being taken to update existing provincial service standards, including the development of a working group established to shift away from an apprehension model. That said, however, neither a review nor an update of the provincial service standards have taken place.

2020

- Manitoba Families plans to conduct a review and update of *The Child and Family Services Act* (CFSA) based on *An Act Respecting First Nations, Inuit and Métis Children, Youth and Families* (the Act) and recommendations from The Child Welfare Legislative Review Committee. Manitoba Families stated that it is pursuing the process of legislative modernization, while remaining cognizant that updates to the Provincial Standards need to align with a legislative and regulatory framework for the child welfare transformation.
- Manitoba Families indicated that while large scale work is planned, updates to Standards has been ongoing. Most recently, changes to Standards 1.5.6 (Removing Foster Children), 1.3.4 (Provincial Child Abuse Investigations), 1.2.2 (Voluntary Family Services), and 1.3.1 (Child Protection) were made between April 2019 and June 2020.
- There are three Standards priority areas being reviewed in advance of the larger systemic review and redrafting of Standards. Priority areas include:
 - Child Sexual Exploitation in connection with 1.4.7 (Absent and Missing Children): a working group is to be established to identify updates to the Standard, with a focus on federal legislation, agency role, role of enhanced StreetReach in Winnipeg and expanded StreetReach North in Thompson.
 - 1.4.7 (Absent and Missing Children): The Department of Families will include case specific responses to support practice decisions and connect to case planning requirements for children in care.
 - 1.3.4 (Provincial Child Abuse Investigations): The Department of Families is outlining the process for foster home abuse investigations, to address areas of responsibility, safety assessments, and decision-making respecting change of placement.
- While some changes to above indicated standards have taken place, a larger and more comprehensive review is underway. The activities reported indicate early steps are being taken to address the recommendation including a systemic review and re-drafting of the standards, but none of the requirements have been met yet.

Intent 2: Establish province-wide measures of service accountability through a provincial quality assurance framework.

2023

- Manitoba Families continues to stress the importance of oversight of the CFS Authorities being done in a collaborative way with the full input and respect of the Authorities' rights and responsibilities. This continues to be in line with their suggested alternate solution for fulfilling this intent as identified in 2022.
- The impacts of Bill 32, and the continued work towards the establishment of CFS agencies under Indigenous Governing Bodies (IGB) will highly impact the approach to this intent, as agencies under IGBs do not fall under provincial legislation or standards.
- Manitoba Families further reported that the importance of reconciliation in relationships with Authorities and IGBs means that work must occur in collaborative ways with shared decision making about areas for qualitative reviews. This work will continue through mutual discussion at Standing Committee and with individual Authorities.

2022

- Manitoba Families reports that its interpretation of this intent is an alternative solution, as the reality of the relationship between the department and CFS Authorities is changing and guided by the importance of reconciliation and self-governance.
 - As has been outlined in previous submissions, the role of the province in oversight of the Authorities has always been done in a collaborative way, with their full input and respectful of the Authorities' rights and responsibilities.
 - The Department of Families does quality assurance work only in cooperation with the Authorities in keeping with commitment to self-determination and governance, supported by child welfare transformation. Single Envelope Funding is an example of this shift in relationship. The development of Indigenous Governing Bodies under federal legislation removes this role completely from Manitoba. A significant number of communities have identified a plan to move under federal legislation, with a number of changes in progress. Manitoba supports this change.
 - In light of this shifting in relationships and the importance of reconciliation to be shown in removal of paternalistic relationships with Authorities and Indigenous Governance Bodies, the province must work in a collaborative way with Authorities and look at shared decision making about areas for qualitative reviews. This will continue to take place as is the current practice, in mutual discussions through Standing Committee and with

individual Authorities.

2021

- Manitoba Families reported on the development of a Standards training plan, in collaboration with Authorities. The training plan is cited as an example of consistency in practice. For example, a working group, including the CYSD and representation from all four Authorities, was established to track and monitor the implementation of the new high-risk expectant parent standard. The working group has terms of reference and a quality assurance framework.
- Manitoba Families indicated that overall quality assurance work will be consistent with the legislated responsibilities of the Division, to monitor and assess Authority quality assurance activities. The approach is said to be issues- and priority-driven and additionally requires the cooperation of Authorities in sharing quality assurance results.
- Although Manitoba Families has demonstrated that a quality assurance process for the implementation of the new standard on high-risk expectant parents exists, there is no demonstrable exercise of this practice extending to an overarching quality assurance framework.

2020

- Manitoba Families stated that two major developments have affected action and compliance with this recommendation, including the anticipated legislation change from The Child Welfare Legislative Review Committee Recommendations and the new federal legislation *An Act Respecting First Nations, Inuit and Métis Children, Youth and Families*. Manitoba Families stated that some changes under the new federal legislation are clear but others are uncertain regarding the interaction between federal and provincial jurisdiction and Indigenous governance structures.
- Manitoba Families has indicated that the review into the roles and responsibilities of Agencies', Authorities', and the Department of Families' quality assurance oversight is a first step into establishing a province-wide quality assurance framework, but there has been no commitment from the Department of Families to create a framework.
- The Minister, Director, and Authorities have an ongoing legal responsibility to ensure quality of child welfare services as articulated in the legislation that was proclaimed in 2003, *The Child and Family Services Authorities Act* (CFSA). The CFSA states that CFS Authorities have a duty to ensure that agencies follow the practices and procedures in accordance to culturally appropriate standards (S.19.(e)), and ensure that those standards are consistent with provincial standards (S.19.(d)). In turn, the Minister of Families is responsible for monitoring and assessing how Authorities carry out their responsibilities (S.24.(c)).

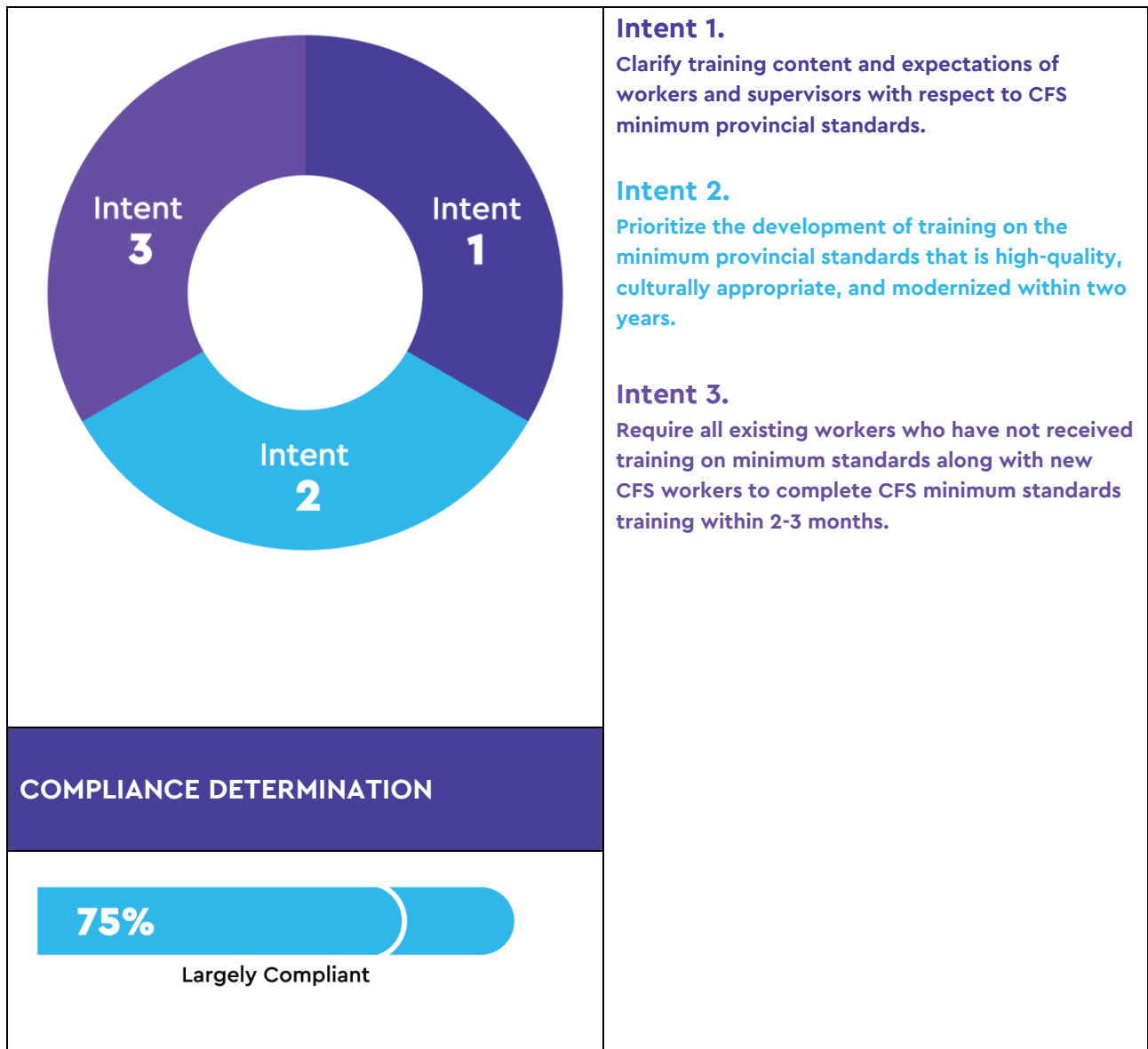
Analysis Summary: Over the last two reporting periods, detailed information has been provided on the Standards Modernization project and the intended outcomes of each phase. As the project progresses, a number of factors are impacting how standards modernization moves forward, including the proclamation of Bill 32, as well as the continued development of CFS agencies under Indigenous Governing Bodies. While work continues on Standards Modernization, delays in reaching Phase 3 are preventing this recommendation from moving forward at this time. As such, this recommendation remains Partially Compliant.

COMPLIANCE DETERMINATION

Circling Star – Recommendation 6

Recommendation Summary: Clarify training content and expectations of CFS minimum standards, prioritize development of training on minimum standards, train existing and new workers.

Primary Public Body: Manitoba Families



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Documenting the Decline: The Dangerous Space Between Good Intentions and Meaningful Interventions
Date Released:	10/19/2018
Full Recommendation: (including details)	<p>Recommendation Six:</p> <p>The Manitoba Advocate for Children and Youth recommends that the Department of Families in partnership with the Child and Family Services (CFS) Authorities: (1) clarify training content and expectations of workers and supervisors with respect to CFS minimum provincial standards, and (2) prioritize the development of high quality, culturally appropriate, modernized, and accessible training on the minimum provincial service standards within two years. The Advocate further recommends that all existing workers who have not received training on minimum standards and all new CFS workers be required to complete this training within three to six months.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • That the Department of Families work with the four CFS authorities to clearly define training content, timelines, and requirement for CFS workers and supervisors per s.1.3.1 of the minimum standards manual. • That the CFS authorities ensure that their CFS agencies adhere to standard 1.8.1 <i>Workforce Qualifications</i> and that clear education and training plans are developed and monitored for staff who do not meet this standard.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Clarify training content and expectations of workers and supervisors with respect to CFS minimum provincial standards. 2. Prioritize the development of training on the minimum provincial standards that is high-quality, culturally appropriate, and modernized within two years. 3. Require all existing workers who have not received training on minimum standards along with new CFS workers to complete CFS minimum standards training within 2-3 months.

Issue:	Training CFS Minimum Standards
Public Body	Manitoba Families
Dates of Previous Official Updates from Public Body:	May 31, 2023
	June 30, 2022
	May 31, 2021
	June 30, 2020
	December 31, 2019
	June 27, 2019
	April 23, 2019

2. Compliance Determination

Largely Compliant 0.75	Actions taken meet the majority of requirements for implementation, only negligible requirements remain.
Self-Assessment	Largely Compliant
Previous Compliance Determination	Partially Compliant

3. Rationale for Determination
(How did you reach this compliance determination)

Intent 1: Clarify training content and expectations of workers and supervisors with respect to CFS minimum provincial standards.

2023

- The updating of Standards through Phase 2 of Standards Modernization is nearing finalization with their posting in Summer 2023.
- Manitoba Families reported the Standards training modules will be developed following this posting and are part of this year's provincial strategic training plan.
- Standards, and therefore training, may continue to be updated in the wake of changes made regarding the implementation of Bill 32, and further anticipated changes in the child and family services system regarding CFS agencies under Indigenous Governing Bodies.
- As this training is being developed, training continues to be provided by the Authorities.
- A clinical supervision e-learning module was launched in November 2022, with 18 participants to date.

2022

- Work on developing training content and expectations is occurring in conjunction with the modernization of CFS Provincial Standards. Online training standards will not be rolled out until the finalization of Standards modernization in order to avoid training becoming outdated in a short period of time.
- Authorities have been involved in this decision through Standing Committee and

will continue to lead their own training on standards until the new curriculum is available.

2021

- The Child and Youth Services Division (CYSD) is working with the four Child and Family Service (CFS) Authorities to modernize standards. The Standing Committee has discussed and approved the project in principle, as well as identified Authority representatives. The project work group was scheduled to begin in May 2021. The Department of Families indicates that the outcome of standards modernization will be reflected in further module development for virtual training.
- Pilot virtual training is being developed by the Child and Youth Services Division (CYSD). The first virtual training will begin with CFS Authority training, which is currently reported as underway. Manitoba Families reported that a significant success of the virtual training is its ability to reduce the waitlist and increase capacity. The training is designed to be self-guided, thus there will be no waitlist.
- In November 2020, the Standing Committee supported a project for online Provincial Standards training which includes on-boarding new staff and a refresher for existing staff or staff moving into different roles. A draft of the Standing Committee's workplan was submitted as evidence under this intent of the recommendation.
- No actions have been reported towards clarifying the content and expectations of workers and supervisors with respect to existing CFS provincial standards.

2020

- The Department of Families reported that there are a number of amendments to the CFS Minimum Provincial Standards that are preventing action on this requirement of the recommendation. *An Act Respecting First Nations, Inuit and Métis Children, Youth and Families* came into effect on January 1, 2020. Section 12(1) of the legislation requires the CFS agency to provide notice to an Indigenous child's parent, caregiver, or relevant Indigenous governing body before service providers take any significant measure regarding the provision of CFS to the child. The Department of Families will respond to the new law through updates to CFS Standards to reflect new responsibilities. The four CFS Authorities will establish protocols and materials to support CFS agencies with the requirements for notification under Section 12. Each Authority will be responsible for compliance with Section 12 and First Nations communities will work with their CFS agency.
- Furthermore, The Child Welfare Legislative Review Committee's Recommendations to the Province in 2018 included recommended changes to *The Child and Family Services Act* (CFSA), which are under review. With changes to the CFSA, changes will also need to be made to the CFS Authority Regulations and CFS Standards.

- No actions have been reported towards clarifying the content and expectations of workers and supervisors with respect to existing CFS provincial standards. Justification for inaction is that the CFSA and recommendations from The Child Welfare Legislative Review Committee in 2018 will lead to changes in the CFSA, Regulations, and CFS Standards which are currently being reviewed and incorporated. According to the Department of Families, an update to communication and training materials will follow.

Intent 2: Prioritize the development of training on the minimum provincial standards that is high quality, culturally appropriate, and modernized within two years.

2023

- See response to intent 1.

2022

- See response to intent 1.

2021

- On March 9, 2021, the province announced a contract with Technology for Learning Group to develop the online Standards Training. The first module on case management standards is projected to be in place for fall 2021 and fully implemented for winter 2022. When fully operational, the online training will provide the capacity to collect high level data, including participation by agency and Authority, and length of practice of participants (over and under two years of practice).
- The shift towards online standards training is a good step towards making the training more accessible to Authorities and agencies, as is the tracking of participation data. More information is needed about how the training is modernized, of high quality, and culturally appropriate as well as about the implementation of the training when it does take place in fall 2021.

2020

- In a meeting of the Standing Committee (comprised of CEOs of Authorities and the Director of Child and Family Services) in September 2020, the Department of Families indicated that training gaps were identified in abuse investigations training, standards, regulations, legislation and funding, clinical supervision, and others. A Child Abuse Training pilot was proposed which introduces abuse investigations and skills training. Intake Module and the Child and Family Services Information System (CFSIS) training was identified as a need. This training is based on Provincial Minimum Standards. In October, online CFSIS training will be piloted

with the goal of making it a sustainable and accessible learning tool.

- At the same time, the Department of Families reported that CORE competency training, which includes training on Minimum Provincial Standards, had been suspended indefinitely as of April 2020 because "it does not meet the needs of consumers."
- Actions reported indicate that early steps have been taken to prioritize training on select modules of the Minimum Provincial Standards. Plans to create online tools are promising strategies to modernize the training. Still, plans are considered pilots and no timelines were provided. Also, no documentation was provided to ensure the sustainability of training on Minimum Standards for employees of the child welfare system, given the cancellation of existing CORE competency training.

Intent 3: Require all existing workers who have not received training on minimum standards along with new CFS workers to complete CFS minimum standards training within 2-3 months.

2023

- See response under intent 1.

2022

- The department does not hold agency employment information, and previously submitted a request to Authorities to provide training information to MACY. *The Child and Family Services Authorities Act* gives duty to the Authorities to ensure agencies are providing training, and following standards, practices, and procedures.
- As the focus is on the modernization of standards, and the creation of an online curriculum, there is no further information to provide towards this intent.

2021

- The new virtual training model is reported to feature tracking capabilities which Manitoba Families contends can be used in conjunction with agency hiring data to measure training participation.
- Manitoba Families reported that the new online training has the capacity to track participants by length of time in position. Manitoba Families suggested that MACY can use this data, alongside data MACY requests from Authorities, regarding the number of new hires and prior experience. After consultation with the Joint Training Team (JTT), Manitoba Families will have access to pull the data which distinguish worker registration and module completions by Authority and agency and the data can be shared with Authorities. Data extractions can also include the length of time a worker has been in their positions. Manitoba Families noted that Authorities will need to respond as to how they will use the data.

- Although the development of the virtual training platform is promising, it remains unknown how the Department of Families or Authorities will identify which workers have not received training on Minimum Standards. MACY inquired into the provision of training of Provincial Standards for new staff and staff transitioning to new positions between September 2020 and Spring 2021. Manitoba Families reported that no Standards training was offered through the Branch, but Authorities had been completing some Standards training. Further information regarding this issue is needed from Manitoba Families and the JTT.
- The work occurring on a virtual training model is a promising step towards meeting the intent of this recommendation. Particularly since there will be capacity for Manitoba Families to collect data regarding staff training as per the ongoing legal responsibility of the Minister to ensure the quality of child welfare services.

2020

- In previous updates, the Department of Families has indicated that existing and new workers are required to complete CFS Minimum Standards training. Upon request of additional information from the Authorities and Department of Families, no one reported CFS Minimum Standards training within three months and only one Authority was able to report on case management training for new staff within one year of their start date.
- Further information was requested from the four Authorities, three of which responded to MACY follow up questions. These Authorities include:
 - Southern First Nations Network of Care (responded to questions but did not submit further information prior to finalization of this compliance assessment).
 - Metis Child and Family (submitted information).
 - General Child and Family Services (submitted information after the deadline).
- The General Child and Family Services Authority reported that at least 95% of new employees across their service system have received training on case management standards within one year of employment. Responses from the Metis Child and Family Authority and Southern First Nations Network of Care indicate that they are not collecting data from agencies on the number and percentage of new employees receiving training within two to three months of their start date or the number of existing employees who received training since this recommendation was made. The rationale provided was that the agencies are responsible for training and the Authority does not have information related to when an employee has been hired or when they receive training.
- The Department of Families' Child and Youth Services Division (CYSD) recognized there is no current process to measure training on Minimum Standards for current and new employees within the timelines required by Section 1.8.3 ([Training and](#)

Development) which states that all agency field staff must receive training within 12 months of the start date or Section 1.3.1 (Child Protection Services) which states that within three months of start date all workers and supervisors received information about *The Child and Family Services Act*. The Department of Families made two commitments:

- To formally follow up with the four Authorities on the provision of standards training that is culturally safe and appropriate related to CFS Minimum Standards for supervisors and workers and formally ask for more detailed reporting data from the Authority partners.
- To follow up with Authorities respecting the collection of up-to-date data on staff participation in Standards training including data on staff trained within 2-3 months on CFS minimum standards.
- The Minister, Director, and Authorities have an ongoing legal responsibility to ensure the quality of child welfare services, as articulated in the legislation that *The Child and Family Services Authorities Act* (CFSA) proclaimed in 2003. The CFSA states that CFS Authorities have a duty to ensure that agencies follow the practices and procedures in accordance to culturally appropriate standards (S.19.(e)), and that those standards are consistent with Provincial Standards, including training discussed above (S.19.(d)). In turn, the Minister of Families is responsible for monitoring and assessing how Authorities carry out their responsibilities, including their responsibility to ensure training occurs (S.24.(c)).
- The legal responsibilities of the Minister, Director, and Authorities have been ongoing since 2003 but information provided by the Department of Families and the Authorities indicates that there is a lack of engagement with their legislated roles to ensure that standards are met in relation to staff training, specifically evidenced by the lack of data collection on staff who have completed CFS Minimum Standards Training within three months or at all, and overall monitoring of this issue as per S.24(c) of the CFSA. Furthermore, with the cancellation of CORE competency training, no alternative trainings on CFS Minimum Standards were reported.

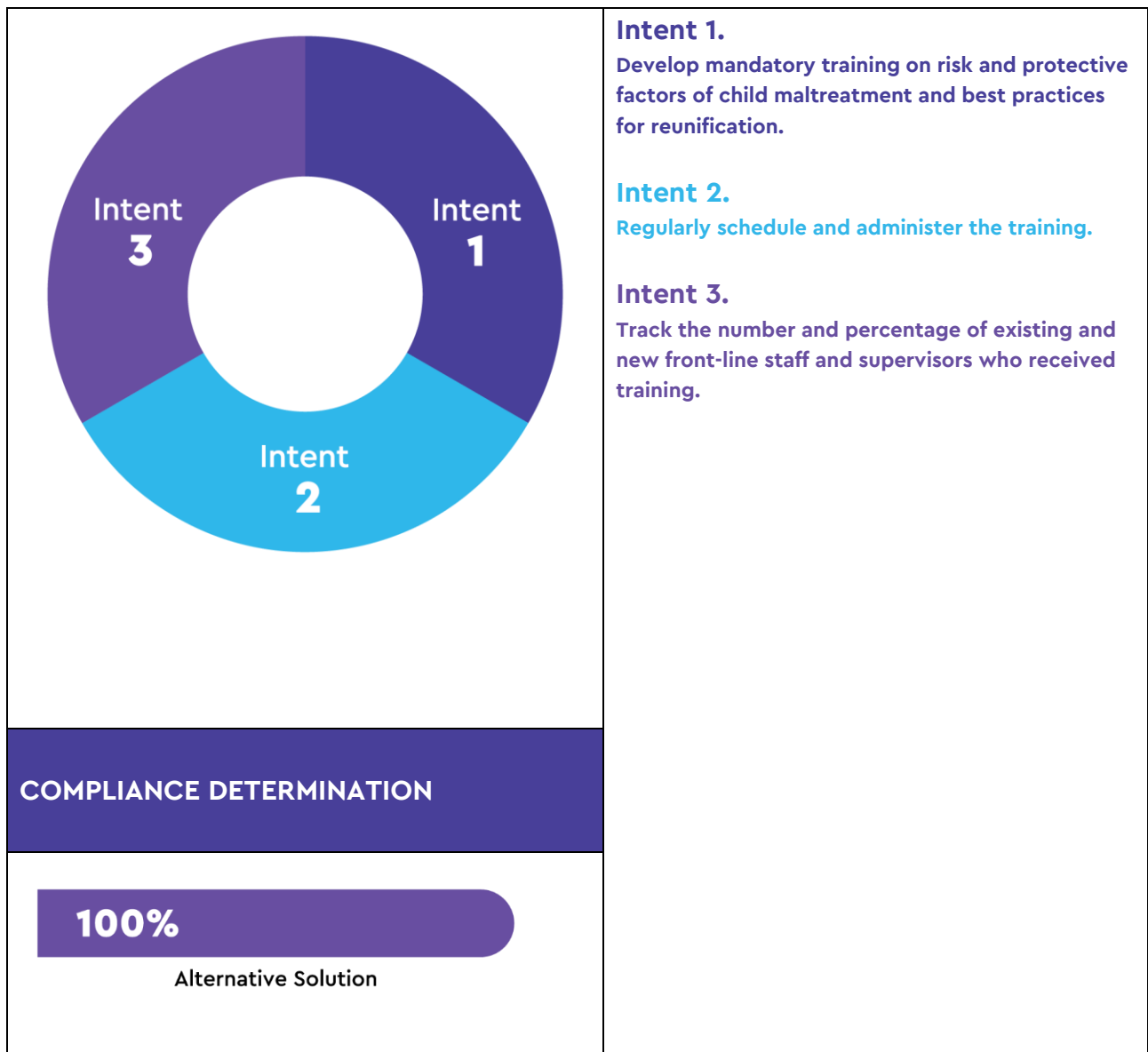
Analysis Summary: Development of new standards training that contains the updates developed in Phase 2 of Standards Modernization is underway. The continued impact of changes in the child and family services system requires the recognition that training content, along with standards, will need to be updated regularly, culminating in the completion of Phase 3 of Standards Modernization as detailed in the response to *Angel's Story* recommendation 4. As this work has progressed to the step of awaiting the release of new standards training modules to be available in online e-module courses, this recommendation is considered Largely Compliant.

COMPLIANCE DETERMINATION

Maltreatment – Recommendation 5

Recommendation Summary: Train social workers on child maltreatment and reunification best practices.

Primary Public Body: Manitoba Families



Intent 1.

Develop mandatory training on risk and protective factors of child maltreatment and best practices for reunification.

Intent 2.

Regularly schedule and administer the training.

Intent 3.

Track the number and percentage of existing and new front-line staff and supervisors who received training.

Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Still Waiting: Investigating Child Maltreatment after the Phoenix Sinclair Inquiry
Date Released:	3/11/2021
Full Recommendation: (including details)	<p>Recommendation Five: The Manitoba Advocate recommends that the Department of Families, through the Joint Training Team, develop and administer mandatory training for front line workers and supervisors on the risk and protective factors of child maltreatment and best practices for reunification.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • Develop training on the risk and protective factors of child maltreatment and best practices for reunification. • Schedule and administer the training regularly. • Track the number and percentage of existing and new front-line staff and supervisors who have received the training.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Develop mandatory training on risk and protective factors of child maltreatment and best practices for reunification. 2. Regularly schedule and administer the training. 3. Track the number and percentage of existing and new front-line staff and supervisors who received training.
Issue:	Child Welfare Training
Public Body	Manitoba Families
Dates of Previous Official Updates from Public Body:	May 31, 2023 June 30, 2022
2. Compliance Determination	
Alternate Solution 1.0	The recommendation was not acted upon as written but a complete and well-reasoned explanation for the lack of implementation of the recommendation has been provided, and a different action has been proposed which meets the intent of the recommendation.

Self-Assessment	Fully Compliant
Previous Compliance Determination	Limitedly Compliant

3. Rationale for Determination
(How did you reach this compliance determination)

Intent 1: Develop mandatory training on risk and protective factors of child maltreatment and best practices for reunification.

2023

- Manitoba Families reiterated the information provided in 2021 and 2022 regarding the development, provision, and content of the Abuse Investigations Training Pilot Project.
- The previously identified evaluation of the pilot is still underway, but there has been acknowledgement of the benefits of the content. Plans have been made to offer the training on an ongoing basis in collaboration with Toba Centre for Children and Youth through 2023 and 2024.
- In relation to specific training on best practices for reunification, Manitoba Families re-stated their previously provided information regarding the CFS Authorities' identification of their preference to provide their own reunification training. This preference has been identified due to the importance of culturally appropriate and safe services regarding reunification.
 - This stance is reinforced through the ongoing implementation of Bill 32 which will continue to bring new culturally-based care agreements that require new approaches to reunification plans with the need to be responsive to specific community needs.
- Manitoba Families has identified that through their communication with the CFS Authorities, the CFS Authorities have identified that MACY should contact them directly regarding their work in this area.

2022

- Responses were provided to this recommendation in 2021 and 2022; the 2021 response was not included in the compliance process due to report release occurring less than 6 months before the reporting deadline. Both 2021 and 2022 responses will be discussed.
- In 2021, Manitoba Families provided detail on the funding and development of new abuse investigation training, and its content.
 - The Abuse Investigations training includes risk assessments and case planning respecting child maltreatment. The training consists of four modules (Introduction to Abuse Investigations, Forensic Interview, Risk

Assessment for Violence/Sexual Offending, and Interviewing Offender/Adult Witness).

- The pilot of the Abuse Investigations training was launched in March 2021, and is currently in the third and final round. The training programs facilitate a progression of knowledge development, combined with mentoring and support. The goal of the pilot is to build internal capacity within agencies, by developing in-house subject matter experts. An evaluation of the pilot is currently underway.
- The Department of Families also offers the Introduction to Child Abuse Investigations course regularly, or on request, and has a future project to develop an online self-guided introductory course to maltreatment.
- In regards to specific training on reunification, the CFS Authorities determined this type of training was best undertaken individually by CFS Authorities, not centrally by the province. This is based on the importance of reunification work being culturally safe, and recognizing the impact of colonization and historic unjust practices. Regarding reunification training, the Department offered the suggestion that MACY connect and collaborate with each of the CFS Authorities directly.

Intent 2: Regularly schedule and administer the training.

2023

- Abuse investigation training will be offered on a regular basis beginning in 2023-24.

2022

- Details were provided on the Abuse Investigation training pilot, including the number of participants for each module and cohort.
- The evaluation of the pilot currently underway will determine the future state and availability of the training program.

Intent 3: Track the number and percentage of existing and new front-line staff and supervisors who received training.

2023

- 68 Staff have received abuse investigation training, with more to come following its offering through 2023-24.

2022

- See response under Intent 2.

Analysis Summary: Manitoba Families has reported over the last two years on the development, provision, and content of the Abuse Investigation Training Pilot. The pilot was considered successful, and covered topic areas relevant to the understanding, and

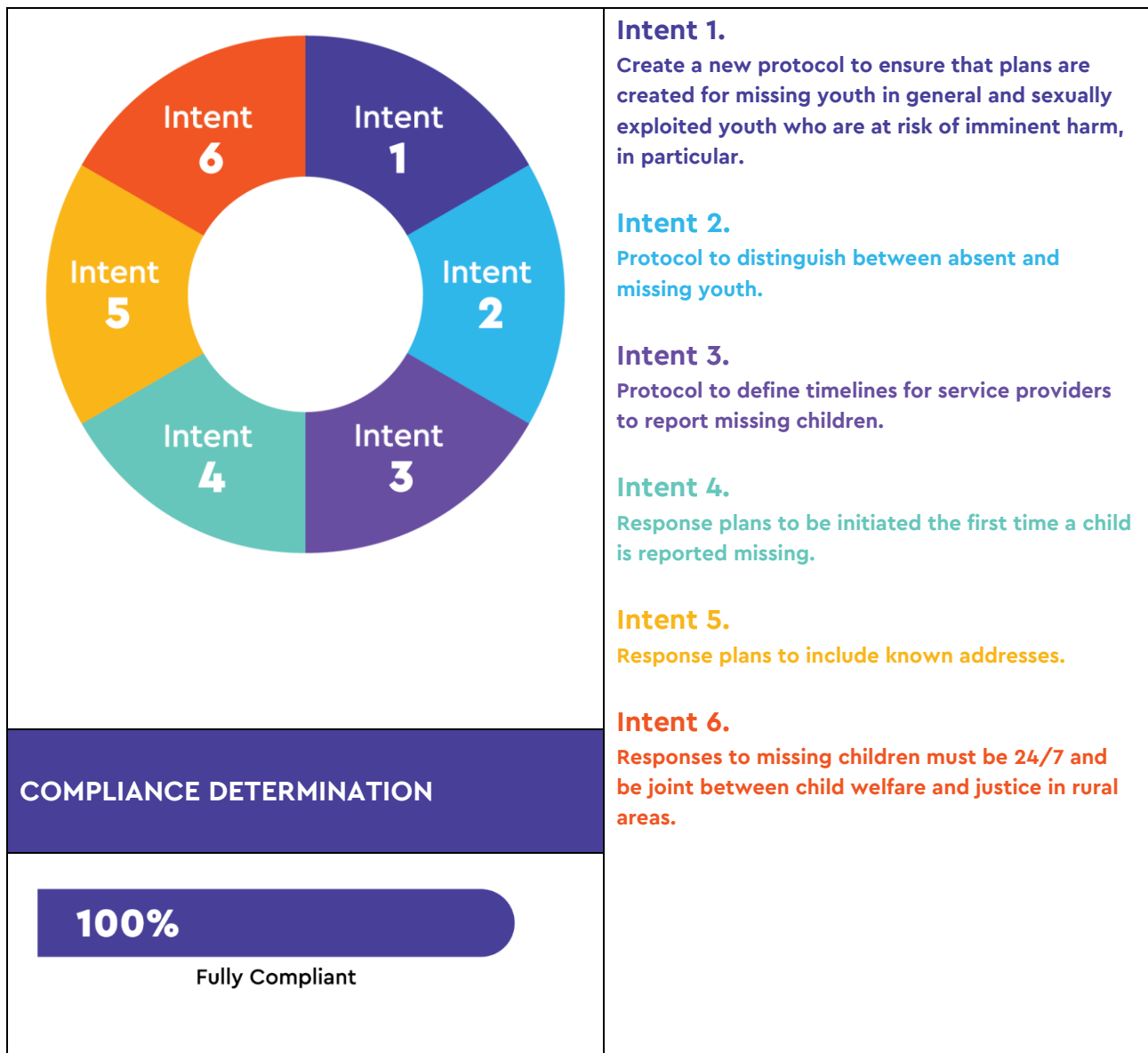
identification of child maltreatment. Plans have been made to offer the training in collaboration with Toba Centre on an ongoing basis. Since Manitoba Families provided its first response to this recommendation in 2021, it has communicated the stance of the CFS Authorities regarding the importance of providing their own training on best practices for reunification. Due to the importance of reunification practices being culturally appropriate and safe, this stance has been maintained by the CFS Authorities, with MACY being requested to speak to them directly regarding the provision of training. The nuance of the provision of the training, as requested in the original wording of the recommendation, makes it difficult to fulfill as written. While Manitoba Families is not able to fulfill the intents of this recommendation as originally written, it has provided an appropriate alternative that addresses a training gap in the area of recognizing child maltreatment. This recommendation, therefore, is considered complete via an Alternate Solution.

COMPLIANCE DETERMINATION

Tina Fontaine – Recommendation 5

Recommendation Summary: Protocol to ensure that response plans are created for missing youth receiving child welfare services, and SEY in particular.

Primary Public Body: Manitoba Families



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	A Place Where It Feels Like Home: The Story of Tina Fontaine
Date Released:	3/12/2019
Full Recommendation: (including details)	<p>Recommendation Five:</p> <p>The Manitoba Advocate for Children and Youth recommends that Manitoba Families, in consultation with other government departments and relevant stakeholders, create a new protocol to ensure that response plans are created for missing youth in general, and sexually exploited youth in particular who are at risk of imminent harm.</p> <p>DETAILS: Manitoba Families to ensure that this protocol:</p> <ul style="list-style-type: none"> • Distinguishes between absent and missing youth. • Require that plans are initiated the first time a child goes missing, and that there is a further requirement to ensure the response plan is consistently reflective of the harm and dangers that are present in the individual child's life. • Provide timelines for when service providers must report missing children and act to locate them as quickly as possible, including when their whereabouts are known, when and how to report their absence to police. • Include clear components for response plans and include any known addresses where the youth may be located or is known to frequent. • Include 24/7 provisions for a joint child welfare and justice response in Winnipeg and ongoing capacity for a joint child welfare and justice response for missing and sexually exploited youth in rural areas. • Includes consultation with persons with lived experience, community members, and relevant stakeholders.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Create a new protocol to ensure that plans are created for missing youth in general and sexually exploited youth who are at risk of imminent harm, in particular. 2. Protocol to distinguish between absent and missing youth.

	<p>3. Protocol to define timelines for service providers to report missing children.</p> <p>4. Response plans to be initiated the first time a child is reported missing.</p> <p>5. Response plans to include known addresses.</p> <p>6. Responses to missing children must be 24/7 and be joint between child welfare and justice in rural areas.</p>
Issue:	Sexual Exploitation
Public Body	Manitoba Families
Dates of Previous Official Updates from Public Body:	May 31, 2023
	June 30, 2022
	May 31, 2021
	June 30, 2020
	December 31, 2019
	June 30, 2019
2. Compliance Determination	
Fully Compliant 1.0	Actions taken fully implement the recommendation.
Self-Assessment	Fully Compliant
Previous Compliance Determination	Largely Compliant
3. Rationale for Determination	
<i>(How did you reach this compliance determination)</i>	
<p>Intent 1: Create a new protocol to ensure that plans are created for missing youth generally and sexually exploited youth who are at risk of imminent harm, in particular.</p> <p>2022</p> <ul style="list-style-type: none"> Intent met in 2021 response. <p>2021</p> <ul style="list-style-type: none"> The Child and Youth Services Division (CYSD) led the creation of a missing child in care (CIC) protocol and response plan form. Community stakeholders were engaged in its creation and a final draft of the CIC protocol was presented to Standing Committee and approved. The CIC protocol is applicable to all children in care. Per this protocol, a Missing CIC Response Plan is created for children over the age of 12, reviewed every 90 days, posted on the Child and Family Services Information System (CFSIS), and shared with law enforcement. The CIC protocol meets the intent of this recommendation. 	

2020

- No action was reported on the creation of a new protocol to ensure plans are created for missing youth in general (youth involved in child welfare). The Department of Families indicated that StreetReach watches for youth who are unknown to the program and frequent the missing person's list. StreetReach will reach out to the youth's legal guardian to advise of the program and encourage a referral by which they can get involved and mitigate risk as best as possible. This process is not followed for all missing youth, and no definition of a frequently missing youth was provided. No protocol outlining the process of identifying frequently missing youth was provided.
- For sexually exploited youth, the Department of Families indicated that a High-Risk Response Plan is coordinated by StreetReach when a youth is deemed a high-risk victim for sexual exploitation in coordination with Winnipeg Police Services (WPS). The process includes biannual response meetings with collaterals to create a plan for the missing youth. The response indicates that for all youth deemed high-risk victims and attached to StreetReach, the case managers are continuously engaged in the systems planning meeting. It remains unclear, however, how the protocol in the recommendation engages youth who are categorized as levels 2-4 in their risk assessment (i.e., transitioning, entrenched, and transitioning away from the sex trade) and who are not actively attached to StreetReach.
- There is currently no protocol or policy to create plans for missing children or youth. There is no protocol to produce response plans for missing children or youth in general. Once a youth is deemed a high-risk victim for sexual exploitation, response plans are created. StreetReach only serves high-risk victims in Winnipeg with some services also available in Thompson. The Department of Families has demonstrated that response plans are created for high-risk youth in StreetReach and those in group care facilities but not for youth in foster care.

Intent 2: Protocol to distinguish between absent and missing youth.**2021**

- This intent was met as per the 2020 compliance determination.

2020

- The Department of Families noted that the Facility Standard on Absences was updated in 2017. Facilities Standards 2.4.3 distinguish between absent and missing youth. Absences are defined as planned or unplanned, and they do not automatically require a report to local law enforcement Missing Person Units. An Endangered Missing Person is defined as someone with a physical or mental disability or someone who is very young, someone dependent on prescription 3

medication, or someone who is unfamiliar with the city, it also includes youth with violent behaviours or those "engaged in a high-risk lifestyle."

- In addition, Agency Standards 1.4.7 further details that an unplanned absence may pose an immediate risk to the safety and health of the child, including dangerous environments such as open water, severe weather, and nightfall, appropriateness of dress for weather conditions, and any high-risk indicators which includes the definition of Endangered Missing Person. From the information and evidence provided, a protocol currently exists which distinguishes between absent and missing youth.

Intent 3: Protocol to define timelines for service providers to report missing children.

2022

- Intent met in 2021 response.

2021

- Manitoba Families provided a final *Missing CIC Procedure*. According to the procedure, reporting a child missing is based on a concern for a child's whereabouts. *The Missing CIC Procedure* outlines responses for care providers and agency workers when contact with a child is lost or a child does not return from school or day program, adhering to a care plan and concerns about a child's whereabouts. Importantly, the procedure clarifies and stresses that "it is not necessary to wait 24 hours before reporting a missing child to law enforcement." Therefore, the *Missing CIC Procedure* meets the intent of the recommendation.

2020

- The Department of Families indicated that training is provided by the department to group care providers on incident reporting which includes protocol for calling in youth who are absent from placement and which is described in the Facility Standards. The Facility Standard 2.4.3, Section 3: Absences, however, does not clearly outline timelines for service providers to report missing children. For children whose whereabouts are unknown or who are believed to be at high or immediate danger, it states that "a call to local law enforcement Missing Persons Unit may be required."
- Agency Standards 1.4.7 Section 7: Absent and Missing Children, states that "should an unplanned absence pose an immediate risk to the safety and health of the child the care provider or agency worker must call law enforcement immediately." Immediate risk is defined in the Standard. Inconsistencies between the Agency Standards 1.4.7 and Facility Standard 2.4.3 introduce ambiguity to the timelines required for service providers to report missing children.

Intent 4: Response plans to be initiated the first time a child is reported missing.

2023

- Manitoba Families provided further information on the roll-out of this protocol, as requested in our 2022 analysis summary.
- The department reported that work is underway for prioritizing the highest risk youth for ensuring a response plan is created and on file.
 - StreetReach staff are ensuring a response plan is created for every referral to their program.
 - Ten training sessions on the protocol have been offered, with caseworkers completing response plans in real time while participating in the training.
 - Staff situated in the new Integrated Missing Person Unit will be able to flag and ensure response plans are completed for children and youth reported missing.

2022

- Intent met in 2021 response.

2021

- Manitoba Families reported a finalized Missing *CIC Procedure and Missing CIC Response Plan* form completed for all children in care over the ages of 12. The procedure calls for the plan to be reviewed every 90 days or quarterly at a minimum, or following a change in placement and/or as required.
- The *Missing CIC Procedure and Missing CIC Response Plan* indicates that response plans will be initiated for all children in care regardless of whether they have been missing. The work reported related to this recommendation meets this intent of the recommendation.

2020

- There is evidence that response plans are developed in group care facilities and known as the Unplanned Absence/ Whereabouts Unknown Plan. These plans are developed jointly by the group care facility and guardian agency and describe the action to be taken when a youth is absent.
- According to the Manitoba Families Annual Report from 2019-2020, 6, 853 children or youth were placed in foster homes, 2,385 in places of safety, 354 in group care facilities, 146 in other care, and 111 in independent living. There is no indication that response plans are being initiated the first time a child or youth is reported missing in other placements such as foster homes, place of safety, other care, or independent living. There is ambiguity as to whether unplanned absences from foster homes have a similar Unplanned Absence/ Whereabouts Unknown Plan as that in group care facilities.

- Furthermore, the response indicates that there are internal guidelines in place which prioritize when youth are away from placement, such as following a daily missing persons list from WPS, to track the frequency and length of time a youth is missing and subsequently connecting with social workers regarding communication they may have had with the missing youth. Although in an excerpt from the Winnipeg Police Missing Persons Unit found in Facility Standard 2.4.3, a risk assessment is conducted on every reported missing person and if the assessment dictates, a uniform car will be dispatched, there is no mention of a response plan.

Intent 5: Response plans to include known addresses.

2023

- Intent met in 2022 response.

2022

- The *CIC Unplanned Absence Form* includes the requirement for the inclusion of any known addresses of the CIC.

2021

- The *Missing CIC Procedure* submitted as evidence for this recommendation indicates that all children in care should have a completed a *CIC Unplanned Absence Form*.
- The procedure and unplanned absence forms are both finalized. Implementation will be carried out in a phased approach, whereby high-risk youth that are frequently reported missing will have a CIC Response plan developed first. Next, youth in group care facilities must have a completed response plan. Lastly, all remaining response plans for youth in care will be developed, ensuring children over the age of 12 will have a CIC response plan completed by February 28, 2022.

2020

- In general, children and youth that are missing do not have response plans. Response plans are developed for youth deemed high-risk victims (HRV). For HRVs, response plans include known addresses.
- The Unplanned Absence/Whereabouts Unknown Plan for use in group care facilities, includes a section on known addresses.

Intent 6: Responses to missing children must be 24/7 and be joint between child welfare and justice in rural areas.

2023

- The protocol was identified as including this component in both the 2022 and 2021 responses.
- Since the development and the release of the protocol requested through this recommendation, two additional projects have been initiated with the goal of improving safety and well-being of youth.
 - Safe Ride pilot – this project has reportedly had a successful launch with over 881 requests for rides received in the first five months of operation. ANCR is reported to have adjusted the hours of operations to meet the times that are identified as high volume for this service.
 - On March 20, 2023, the province announced \$2.1 million to establish a Manitoba Integrated Missing Person Response unit. This unit will include dedicated CFS resources to allow a collaborative response and ensure appropriate plans and responses are in place for children and youth who are missing.

2022

- As indicated in previous responses to this recommendation, as well as in the *Missing Child in Care Protocol*, it is clearly identified that response plans must include care provider and agency worker responsibilities in responding to a missing or absent child in care. The protocol indicates a variety of generalized situations such as losing contact with a child or children not returning from school, and indicates the type of response that should occur in those situations. All response plans must indicate under what circumstances police are to be contacted. The protocol reiterates that you do not have to wait 24 hours to report a child missing to police, and also includes a note that contacting with police does not relieve care providers and agency workers of the responsibility to continue searching for a child.
- The response from Manitoba Families identifies that the protocol came into effect in November 2021. A webinar was hosted on the protocol with over 200 participants. The webinar was recorded and disbursed to CFS Agencies and Community Care Providers.
- Information on the protocol was also released to the Manitoba Association of Chiefs of Police, with law enforcement representation noted at the original webinar release.
- CFSIS was updated to account for the attachment of the missing youth response plans, so that all DIA's have afterhours access to the response plans. Law Enforcement is able to request the plan through a DIA 24/7.
- The Department advised that response plans have not yet been completed for all eligible missing youth at risk of imminent harm, and that further work is in progress to improve the roll out of this initiative.

2021

- StreetReach Thompson, which was developed alongside RCMP, Thompson's mayor, and other local programs, is operational full-time. Manitoba Families reported that youth have provided positive feedback about the program.
- Interventions, such as a recent announcement of a Youth Hub, were started in Brandon and have continued. The Brandon Youth Hub is led by Westman Youth for Christ in partnership with the Brandon Friendship Centre, Career and Employment Youth Services (C.E.Y.S Brandon), and the Addictions Foundation of Manitoba.
- StreetReach Thompson's development indicates service availability within Thompson. Furthermore, the Brandon Youth Hub referenced is meant to provide integrated youth services, including counselling and peer support, addictions support, Indigenous cultural services, immigration services, and others. Both the StreetReach expansion and new Youth Hubs are examples of work underway to improve service coordination.
- Additional information provided by Manitoba Families indicates that a policy to respond to children missing in rural areas is finalized. The policy applies across the province. Manitoba Families has consulted with a number of stakeholders, including the RCMP, Winnipeg Police Service, Provincial Licensing, experiential persons, Youth Probations, and CFS Authorities and agencies. The policy, as implemented, includes all law enforcement agencies in the province to ensure coordinated responses between child welfare and local law enforcement. That said, however, it is not clear if the 24/7 responses to missing children are to be joint between child welfare and local law enforcement agencies. Information to confirm this is needed to move this recommendation to fully compliant.

2020

- The Department of Families indicated that enhancement and expansion of services to Thompson is in the early stages of development and StreetReach Winnipeg will coordinate with RCMP and Brandon Police Service if a missing child is believed to be in Winnipeg. There is no inclusion of 24/7 provisions for a joint child welfare and justice response in Winnipeg nor ongoing capacity for a joint child welfare and justice response for missing and sexually exploited youth in rural areas.
- The Department of Families on the community response to StreetReach North in Thompson reported the following statistics: 167 returns of children/youth to placements or place of safety; 261 address checks were conducted; 733 relationship building contacts with youth (this number includes multiple points of contact with a single youth); and 3 transport assists.

Analysis Summary: As all intents of this recommendation have been fulfilled, along with the addition of training and support for the roll-out of this protocol, there is no further

work required on this recommendation. Additional projects such as Safe Ride and the Manitoba Integrated Missing Person Response unit, are further supporting the work to ensure the safety of children and youth in Manitoba who are reported missing. Given the significant work done towards the implementation of this recommendation, it is now considered Fully Compliant.

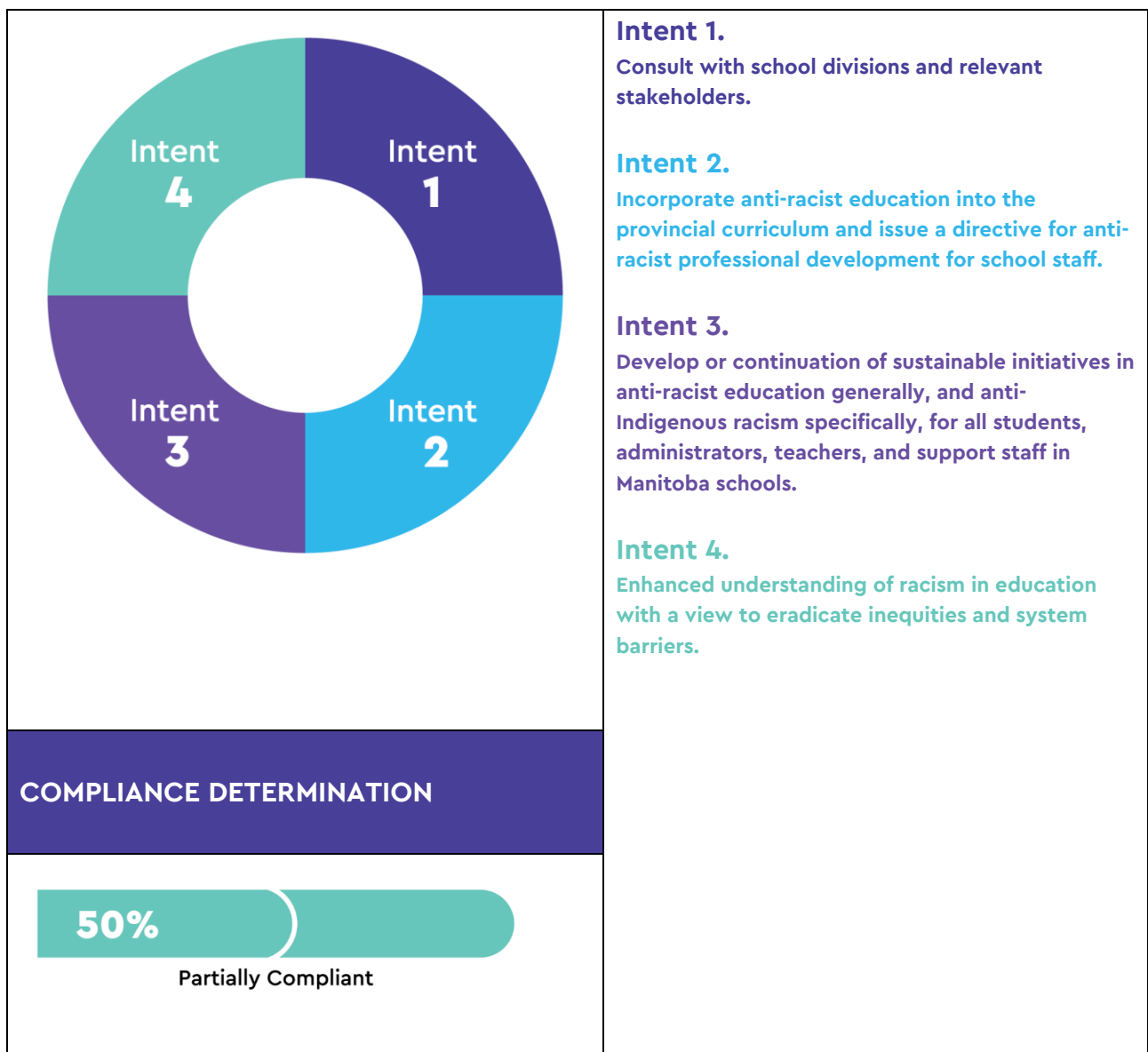
SECTION 3: Manitoba Education and Early Childhood Training

COMPLIANCE DETERMINATION

Boys Report – Recommendation 3

Recommendation Summary: Develop anti-racist education initiatives in schools for students and staff.

Primary Public Body: Manitoba Education



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Finding the Way Back: An Aggregate Investigation of 45 Boys Who Died by Suicide or Homicide in Manitoba
Date Released:	11/4/2021
Full Recommendation: (including details)	<p>Recommendation Three:</p> <p>The Manitoba Advocate for Children and Youth recommends the Department of Education (now Manitoba Education and Early Childhood Learning), in consultation with school divisions and relevant stakeholders, demonstrate the development or continuation of sustainable initiatives in anti-racist education generally, and anti-Indigenous racism specifically, for all students, administrators, teachers, and support staff in Manitoba schools to enhance understanding of racism in education with a view to eradicate inequities and system barriers.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • Incorporate anti-racist education into the provincial curriculum, empowered by section 3(1) (c.1) of <i>The Education Administration Act</i>. • Issue a directive for anti-racist professional development for school staff, pursuant to section 2 of <i>The Education Administration Act</i>. • Initiatives will be deemed sustainable if there is a long-term plan to implement training that targets both students and staff. • In recognition of the Department of Education's leadership and oversight role, school divisions should annually report on the anti-racist educational initiatives and programs being delivered across Manitoba, including information on when each initiative or program began, if there is intent to renew/include the program over multiple years, who the target populations are, and data reporting how many individuals (students and/or educators) have been reached.

	<ul style="list-style-type: none"> Consider a longitudinal evaluation plan of initiatives to examine their effectiveness and social impact.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> Consult with school divisions and relevant stakeholders. Incorporate anti-racist education into the provincial curriculum and issue a directive for anti-racist professional development for school staff. Develop or continuation of sustainable initiatives in anti-racist education generally, and anti-Indigenous racism specifically, for all students, administrators, teachers, and support staff in Manitoba schools. Enhanced understanding of racism in education with a view to eradicate inequities and system barriers.
Issue:	Anti-Racism in Schools
Public Body	Manitoba Education
Dates of Previous Official Updates from Public Body:	May 31, 2023
	June 30, 2022
2. Compliance Determination	
Partially Compliant 0.50	Actions taken only implement part of the recommendation. Important requirements have been met and the recommendation is acted upon, however, deficiencies remain.
Self-Assessment	Largely Compliant
Previous Compliance Determination	Partially Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
Intent 1: Consult with school divisions and relevant stakeholders.	
2023	
<ul style="list-style-type: none"> Work continues towards building the foundation for the development, release, and implementation of a provincial policy directive that complements and aligns with Manitoba Education and Early Childhood Learning's (MEECL) ongoing efforts to ensure anti-racism efforts throughout the K to 12 Education system. This work is connected to the K to 12 Education Action Plan, and intends to incorporate the context from two recently released inter-connected policy directives and reports: The Final Report of Poverty and Education Task Force (2023) and Safe and Caring Schools: A Policy Direction and Action Plan to Enhance Student Presence and Engagement (2023). Further focused consultation and engagement to build on and fill gaps from previous consultations is underway. 	

2022

- A steering committee for a provincial anti-racism policy is in place, which has developed a project charter and timeline. Part of the project work plan is to identify 12-15 intersectional champions of anti-racism and intersectional issues in Manitoba to assist in development of a draft policy and action plan.

Intent 2: Incorporate anti-racist education into the provincial curriculum and issue a directive for anti-racist professional development for school staff.**2023**

- MEECL identified that implementation of Manitoba's Framework for Learning has been initiated, with the intention to ensure that all subject area curricula and assessments are inclusive and rigorous, reflect the diversity of Manitoba's peoples, and promote human rights and responsible citizenship with a focus on Indigenous perspectives, inclusive practices, gender diversity, and anti-racism.
- Refinement of the new curriculum structure continues with educator and stakeholder feedback.
- Liaisons were nominated by school divisions and independent schools to engage in a series of focused implementation sessions to prepare them to lead and champion the implementation of the Framework for Learning in their respective school divisions/schools.

2022

- The provincial curriculum is currently under review in line with the *K-12 Education Action Plan*. It is intended that the Global Competencies framework will be embedded in the curriculum, which has anti-racism as a concept in the Global Competency definitions.
 - Global Competencies are an overarching set of attitudes, skills, knowledge, and values that include: Critical Thinking and Problem Solving, Innovation, Creativity and Entrepreneurship, Learning to Learn, Collaboration, Communication, Global Citizenship, and Sustainability.

Intent 3: Develop or continuation of sustainable initiatives in anti-racist education generally, and anti-Indigenous racism specifically, for all students, administrators, teachers, and support staff in Manitoba schools.**2023**

- The Framework for Learning has been aligned with the principles of Mamàhtawisiwin: The wonder we are Born With – An Indigenous Education Policy Framework.

- Provincially-led implementation and information sessions have been held regarding Mamàhtawisiwin, resulting in the gaining of momentum for its implementation in schools and school divisions due to its clear articulation of roles and responsibilities for students, teachers, school leaders, school division leaders, and the department.
- Mamàhtawisiwin tools for self-reflection were released in spring 2023, and the expansion of the Elders and Knowledge Keepers in Schools Initiative with Guidelines was also announced in 2023.

2022

- It is the intention for the steering committee to issue a policy directive and action plan. The work plan identifies a tentative release of this directive in Fall 2023. Similar to other policy directives issues by Manitoba Education and Early Childhood Learning, school divisions and individual schools will have to revise or develop policies/resources/initiatives to be in line with the directive. This will be in conjunction with curriculum development and the professional learning to teachers, administrators, and support staff that will accompany new curriculum outcomes.

Intent 4: Enhanced understanding of racism in education with a view to eradicate inequities and system barriers.

2023

- This intent included a reiteration of the information provided in intents 1 through 3.

2022

- Along with the activities of the steering committee, the response identified the department's work with Dr. Jerome Cranston to develop an equity statement. This statement accompanies engagement letters used in the formation of committees to ensure representation from equity deserving communities.

Analysis Summary: As occurred in 2022, the 2023 response to this recommendation indicates a strong commitment to the fulfillment of the intents. Along with the early initial steps reported in 2022, MEECL has released additional reports and frameworks that confirm the commitment to actions found under each intent. The finalization of the mentioned policy directive, and the full development and release of new curriculum outcomes, along with evidence of the implementation of MEECL's own report recommendations on anti-racist education are needed in order for this recommendation to reach full compliance. The information provided indicates the extensiveness of the work MEECL is in the midst of implementing in order to build an inclusive and anti-racist foundation to Manitoba's education system. Due to the development of the policy

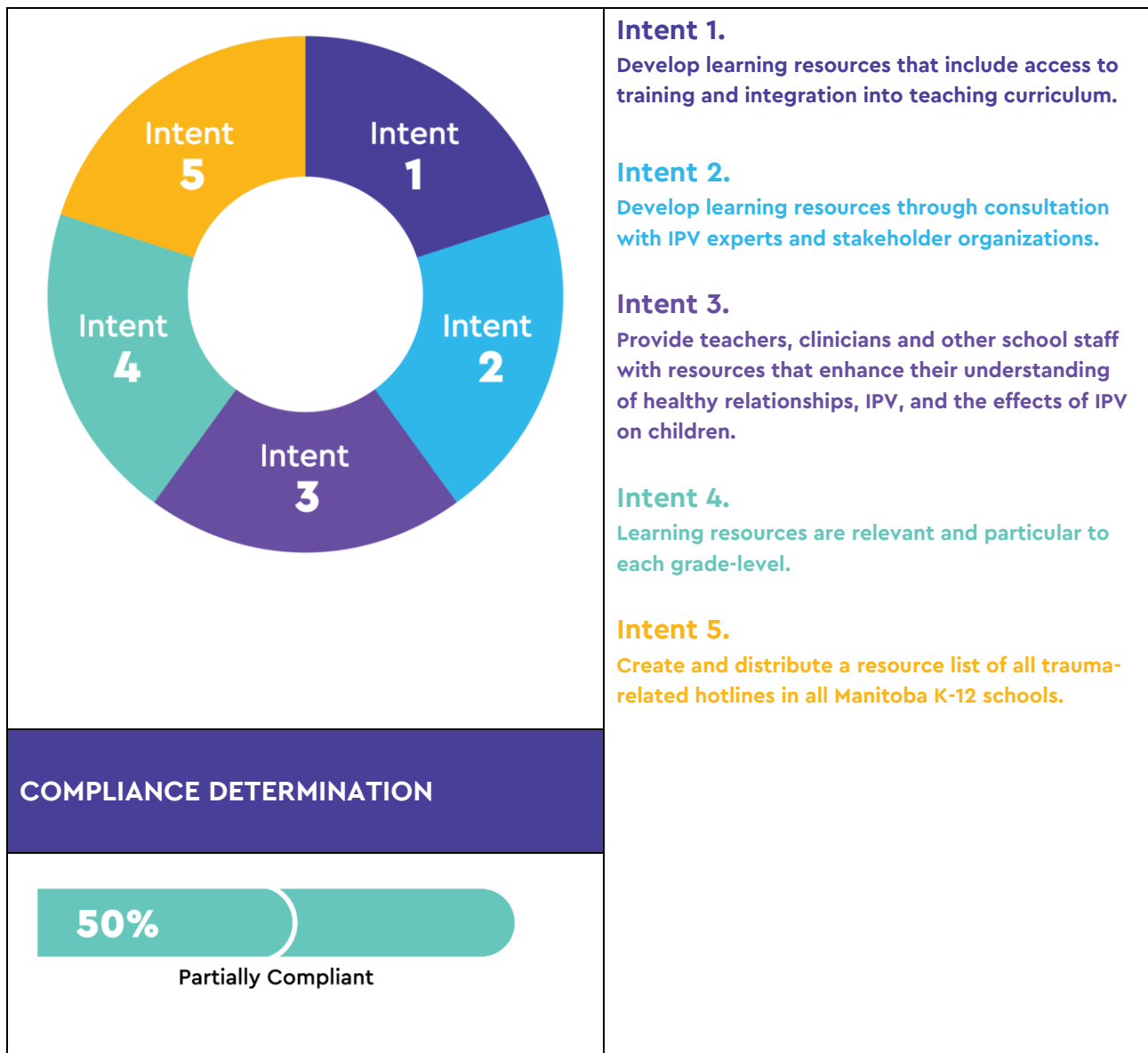
directive remaining in early stages, and curriculum updates not yet fully incorporated into the education system, this recommendation remains Partially Compliant.

COMPLIANCE DETERMINATION

IPV – Recommendation 7

Recommendation Summary: Teach healthy relationships and effects of IPV in schools.

Primary Public Body: Manitoba Education



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Every Two Hours: A Special Report on Children and Youth Exposed to Intimate Partner Violence in Manitoba
Date Released:	6/22/2022
Full Recommendation: (including details)	<p>Recommendation Seven:</p> <p>The Manitoba Advocate for Children and Youth recommends That Manitoba Education (now Manitoba Education and Early Childhood Learning) develop and distribute learning resources for teachers, school clinicians, and other school staff on teaching healthy relationships for each grade-level, and understanding the effect of IPV exposure on children and youth.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • In collaboration with other departments, a resource list of 24/7 phone lines available in Manitoba, including Kids Help Phone, the Family Violence Prevention hotlines, and others should be created and posted in all Manitoba K-12 schools. • Learning resources to include access to training, tips for integration into health curriculum, and information to support teachable moments within any classroom. • Learning resources to be developed through consultation with IPV experts, including experiential children/youth, newcomer organizations, and Indigenous leadership/organizations. • Learning resources should not only support the dissemination of the provincial health curriculum, but be able to provide all teachers, clinicians, and other school staff with an understanding of healthy relationships, IPV, and the effects of IPV on children. • Learning resources are made available to all Manitoba Educators through a system such as MAPLE (Manitoba Professional Learning Environment).
Intent(s) of Recommendation:	1. Develop learning resources that include access to training and integration into teaching curriculum.

	<ol style="list-style-type: none"> 2. Develop learning resources through consultation with IPV experts and stakeholder organizations. 3. Provide teachers, clinicians, and other school staff with resources that enhance their understanding of healthy relationships, IPV, and the effects of IPV on children. 4. Learning resources are relevant and particular to each grade-level. 5. Create and distribute a resource list of all trauma-related hotlines in all Manitoba K-12 schools.
Issue:	Intimate Partner Violence
Public Body	Manitoba Education
Dates of Previous Official Updates from Public Body:	May 31, 2023
2. Compliance Determination	
Partially Compliant 0.50	Actions taken only implement part of the recommendation. Important requirements have been met and the recommendation is acted upon, however, deficiencies remain.
Self-Assessment	Partially Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
<p>Intent 1: Develop learning resources that include access to training and integration into teaching curriculum.</p> <p>2023</p> <ul style="list-style-type: none"> • Manitoba Education and Early Childhood Learning (MEECL) reports that work is ongoing for the redevelopment of the K-12 Physical Education/Health Education curriculum. The new curriculum is reported to feature comprehensive learning outcomes related to IPV/GBV topics such as healthy relationships and communication, boundaries and consent, sexual health, online and media safety, and sexual exploitation and abuse. • The new curriculum will require implementation guidelines and resources to be created, along with professional development for educators. • While the curriculum is being updated, a resource is also under development for educators and education stakeholders for IPV/GBV knowledge and understanding. <p>Intent 2: Develop learning resources through consultation with IPV experts and stakeholder organizations.</p>	

2023

- MEECL identifies that an interdepartmental IPV/GBV working group is engaging with experts and stakeholders. One of the questions raised to experts and stakeholders asked "what programming should be made available to youth and young adults to address violence normalization and intergenerational violence?"
- Feedback based on consultation and stakeholder engagement will further inform the resources educators will require in this area.
- Programming and resource development will be trauma informed, and also consider the experiences of boys and men as victims of IPV/GBV.

Intent 3: Provide teachers, clinicians and other school staff with resources that enhance their understanding of healthy relationships, IPV and the effects of IPV on children.

2023

- Along with the information provided in intents 1 and 2, MEECL identified that the inclusion of external programs such as Project 11, Thrival Kits, Sources of Strength, and Kids Help Phone's Counsellor in the Classroom also enhance educator and student understanding of healthy relationships, bullying, and abuse. These resources are integrated into classroom instruction to help achieve curriculum outcomes.

Intent 4: Learning resources are relevant and particular to each grade-level.

2023

- Curriculum redevelopment is to be informed by research and consultation to ensure that learning experiences and resources are age appropriate for K-12 students.
- The Sex Information and Education Council of Canada (SIECCAN) recently released GBV Guidelines and Benchmarks within School-Based Comprehensive Sexual Health Education to inform curriculum development, and assists teachers to better understand where, when, and how to teach topics related to GBV to K-12 students.

Intent 5: Create and distribute a resource list of all trauma-related hotlines in all Manitoba K-12 schools.

2023

- MEECL identifies that a resource list of all trauma-related hotlines will be included in the new IPV/GBV resource under development.

Analysis Summary: The information provided in this response represents a strong commitment from MEECL to the development and distribution of learning outcomes and resources on IPV and GBV for Manitoba's students and educators. Under each intent, MEECL was able to identify work underway, or relate their response to relevant information that will impact and enhance the availability of information on IPV available to both students and educators. The finalization of curriculum development, and the distribution of noted resources is needed for this recommendation to reach full compliance. As steps remain in implementation, this recommendation is considered Partially Compliant.

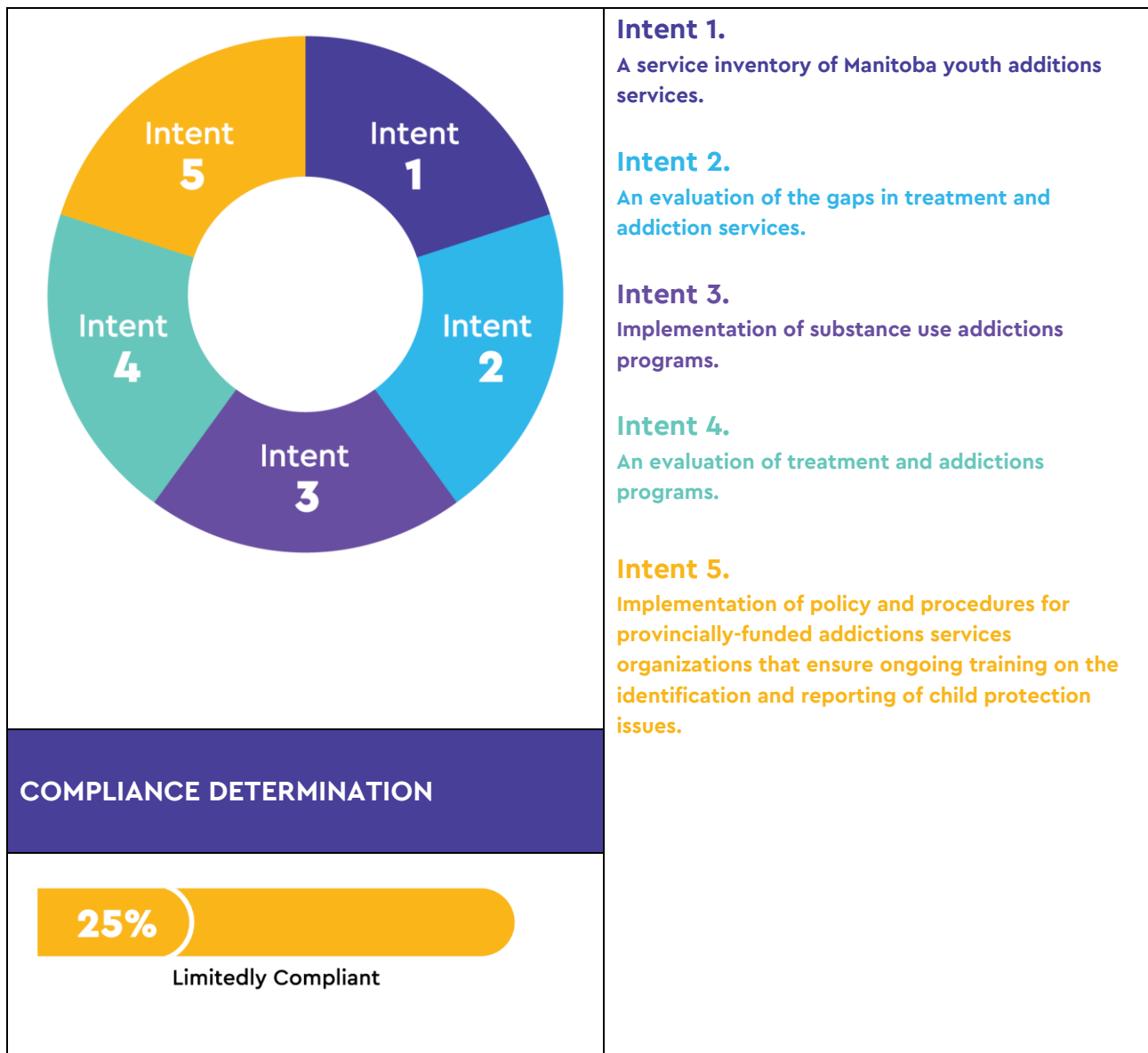
SECTION 4: Manitoba Mental Health and Community Wellness

COMPLIANCE DETERMINATION

Circling Star – Recommendation 4

Recommendation Summary: Develop a youth addictions action strategy.

Primary Public Body: Manitoba Mental Health and Community Wellness



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Documenting the Decline: The Dangerous Space Between Good Intentions and Meaningful Interventions
Date Released:	10/19/2018
Full Recommendation: (including details)	<p>Recommendation Four:</p> <p>The Manitoba Advocate for Children and Youth recommends that the Department of Health, Seniors and Active Living, together with front-line addiction service providers in Manitoba, Healthy Child Manitoba (now Social Innovation Office), Indigenous communities, and subject matter experts on addictions, immediately respond to the lack of effective substance use treatment services for youth by prioritizing the development and implementation of a youth addiction action strategy. This strategy should be based on best practice evidence with the objective of ensuring that children and youth across Manitoba can exercise their right to the highest attainable standards of health.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • That the Department of Health, Seniors and Active Living (now Manitoba Health), go beyond the VIRGO analysis and conduct a service inventory of all child and youth addiction services in Manitoba, their locations, target populations, philosophies, eligibility criteria, utilization rates, and occupancy rates. • That the Department of Health, Seniors and Active Living (now Manitoba Health) expand upon the VIRGO analysis to evaluate existing gaps in substance use treatment and addiction services available to children and youth, including recommendations as to how existing services could be repurposed. • That the Manitoba's Mental Health and Addictions Strategy developed by the Department of Health, Seniors and Active Living (now Manitoba Health) include a plan that ensures implementation of evidence-informed family-centred substance use and addiction programs. • That the Department of Health, Seniors and Active Living

	<p>(now Manitoba Health) oversee regular performance monitoring and program evaluations to ensure that all publicly-funded and provincially-mandated agencies are accountable to provide evidence-informed addiction services and programs for children and youth.</p> <ul style="list-style-type: none"> • That all provincially-funded addiction service providers working with children and youth implement policies and procedures for ongoing training on the identification and reporting of cases where a child is in need of protection as outlined in <i>The Child and Family Services Act</i>.
Intent(s) of Recommendation:	<p>Implement a youth addictions action strategy that includes:</p> <ol style="list-style-type: none"> 1. A service inventory of Manitoba youth addictions services. 2. An evaluation of the gaps in treatment and addiction services. 3. Implementation of substance use addictions programs. 4. An evaluation of treatment and addictions programs. 5. Implementation of policy and procedures for provincially-funded addictions services organizations that ensure ongoing training on the identification and reporting of child protection issues.
Issue:	Mental Health and Addictions
Public Body	Manitoba Mental Health and Community Wellness
Dates of Previous Official Updates from Public Body:	September 6, 2023
	July 21, 2023
	June 30, 2022
	July 13, 2021
	June 30, 2020
	December 31, 2019
	June 26, 2019
2. Compliance Determination	
Limitedly Compliant 0.25	Actions taken only implement a small part of the recommendation, requirements are only fulfilled to a limited degree by actions taken, resulting in significant deficiency in implementation.
Self-Assessed	Limitedly Compliant
Prior Assessment	Limitedly Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
Intent 1: Implement a youth addictions action strategy that includes: a service inventory of Manitoba youth addictions services.	

2023

- Mental Health reported that the first phase of the "Stepped Care" project was completed in May 2022, and included developing a comprehensive service inventory of all mental health and addiction services available in the province.
- The Stepped Care project also included outlining the most common services used by adults and youth provincially, and in each regional health authority, with special consideration given to children-, youth-, and First Nations-focused services.
- Mental Health reported a plan is being developed to use this information to ensure Manitobans have improved access to services and can more easily navigate the system. The final report and results will be externally released once a comprehensive validation process is complete.
- MACY requested any additional information on the Stepped Care project in order to effectively assess intents 1 and 2, but Mental Health reported it was unable to release any results or summaries from this report at this time.

2022

- Although Mental Health reported the released of A Path to Mental Health and Community Wellness: A Roadmap for Manitoba (Roadmap), this cannot replace a youth-specific strategy plan. While there are references to children and youth in the document, it contains only one heading dedicated to children and youth.

2021

- Manitoba Health and Seniors Care (MHSC) reported that planning is underway with national leaders regarding the development of a child and youth Needs Based Planning (NBP) framework. External stakeholders have cautioned against an individual provincial approach to developing provincial frameworks as there are risks to doing this work in isolation. Stakeholders have advised that developing benchmarks that are consistent on a national level is recommended.

2020

- No action, evidence, or justification for inaction reported in this requirement.

Intent 2: Implement a youth addictions action strategy that includes: an evaluation of the gaps in treatment and addiction services.**2023**

- Mental Health reported that the completion of the first phase of the "Stepped Care" project resulted in a report that included a number of service and system level recommendations.

- Mental Health reported that a school-based mental health services scan is currently underway.
- Mental Health also reported that "Enhancing Access" received one-time funding of \$1.5 million in the 2022-23 fiscal year. This project aims to: (1) release a framework and plan for transforming the youth mental health and addictions system through the development and implementation of a youth addiction action strategy ensuring equitable access; (2) direct core service investment for services that have the most complex mental health support needs; and (3) enhance access to mental health, substance use, and addiction services for children and youth in Manitoba (Tiers 3-5).

2022

- Mental Health reported that an inventory has been done based on a contract with Stepped Care Solutions. This meets this part of the intent to the extent that an inventory of services has been done, and existing gaps have been reported.
- MACY was provided with a copy of a presentation done about the report produced by Stepped Care Solutions.
- There is, however, no evidence of commitment to regular program evaluation.

2021

- Adhering to external stakeholder advice and recognizing that work on a national level will take one to two years, the MHSC reported it will work to fill critical gaps identified in the VIRGO report for the purpose of making services more accessible for children and youth, until a national framework is created for child and youth services.

2020

- No action, evidence, or justification for inaction reported associated with this requirement.

Intent 3: Implement a youth addictions action strategy that includes: implementation of substance use programs cited by MHSC:

2023

- Mental Health reported that since 2019, the Government of Manitoba has announced more than 54 initiatives valued at more than \$66 million to improve mental health and addictions services, many of which have been focused on children and youth and are responsive to recommendations made in public reports (e.g. Virgo, MACY reports, and the Illicit Drug Task Force report).
- While this is not an update on specific programs for children and youth, information provided for other intents/recommendations demonstrates that some

progress continues to be made in this regard, including plans to expand the youth Huddles to the Northern and Southern RHAs.

2022

- Five new youth hubs were opened in 2022. While five core areas of service have been recognized, not all of these hubs are currently operating at full capacity due to lack of necessary staff and resources.

2021

- Five new Youth Hubs that will provide mental health and addiction services, primary health care, and other social services have been selected. These are located in Winnipeg, Brandon, and Selkirk (also serving Peguis First Nations). More information is needed in regards to the services being delivered and the programming criteria intended to address youth mental health and addictions.

2020

- Community Emergency Department Violence Intervention Program.
- Expansion of NorWest Youth Hub and trauma services expansion (The Laurel Centre and Klinik).

2019

- Expanding Neechewam's Winnipeg Facility (News Release, December 2019).
- Provincial investment of \$4.4 million to enhance access to mental health and addictions supports in school (News Release, December 2019).

Intent 4: Implement a youth addictions action strategy that includes: an evaluation of substance use treatment programs.

2023

- Mental Health reported that this is being done in collaboration with Manitoba Families and Justice, and that discussions have begun as to how government might operationalize this intent.
- Mental Health reported it discussed the definition of tiers and services with Families and Justice before formally issuing a request for departments to submit an inventory of supports, including: short descriptions of the programs, funding sources, licensing applications, eligibility criteria, and tier of service provided.

2022

- Mental Health reported that an inventory has been done based on a contract with Stepped Care Solutions, but more information is needed about the evaluation

component. It would be helpful for MACY to have a copy of this report.

2021

- Work on this part of the intent will also be on hold until a National Framework is developed.

2020

- One service provider, the Addictions Foundation of Manitoba (AFM), has undertaken an internal review of its youth programs that has resulted in increased occupancy at Compass as well as moving youth addiction counsellors into community organizations to improve accessibility of youth services. No actions were reported on evaluations of programs not implemented through AFM.

Intent 5: Implement a youth addictions action strategy that includes: implementation of policy and procedures for provincially-funded addictions services organizations that ensure ongoing training on the identification and reporting of child protection issues.

2023

- For intent 5, Mental Health provided the same information as for intent 4. Specifically, as with intent 4, Mental Health reported that this is being done in collaboration with Manitoba Families and Justice, and that discussions have begun as to how government might operationalize this intent. Further, Mental Health reported that it discussed the definition of tiers and services with both departments before formally issuing a request for departments to submit an inventory of supports, including: short descriptions of the programs, funding sources, licensing applications, eligibility criteria, and tier of service provided.

2022

- No evidence of developing and implementing a policy and procedures for training staff on identifying and reporting a child in need of protection.

2021

- The actions taken in the last year to implement this recommendation include:
- Meeting with external stakeholders to initiate discussions of a National Needs Based Planning Framework. While this work is endorsed and recommended by experts on the subject matter, it seems that in relation to this recommendation, work for intents 1, 2, and 4 will be put on hold until this National Framework is developed.
- On March 18, 2021, the Government of Manitoba announced the creation of five new Youth Hubs that will provide mental health and addiction services, primary health care, and other social services.

<https://news.gov.mb.ca/news/index.html?item=51010>

- Update provided October 13: activities currently underway include:
- Developing a needs-based provincial model.
- Quarterly Needs Based Planning Advisory Committee meetings.
- Prairie Mountain Health Authority participated as a pilot site, in the development and refinement of the needs-based planning model.
- MHWR has begun to track service coverage of core services, according to the NBP model, as outlined in the VIRGO Report gap analysis. As investments are made, gaps outlined in the NBP model and the VIRGO Report are being monitored for progress towards meeting the appropriate level of service coverage. MHWR also uses the model to preliminarily measure the impact investments are having on service coverage.
- Developing an action plan/roadmap.
- MHWR is leading an engagement process, including a series of consultations, to inform an integrated, whole-of-government five-year roadmap. This will guide the work of the department, and is aligned with the department's mission to provide access to mental health and addictions support and treatment to improve the life outcomes for Manitobans in their journey through recovery and healing. This will include services and systems for children and youth.
- MHWR is in the process of hiring a consultant to conduct a system-mapping of mental health and addictions services and systems in Manitoba, which will inform the development of a Stepped-Care model.

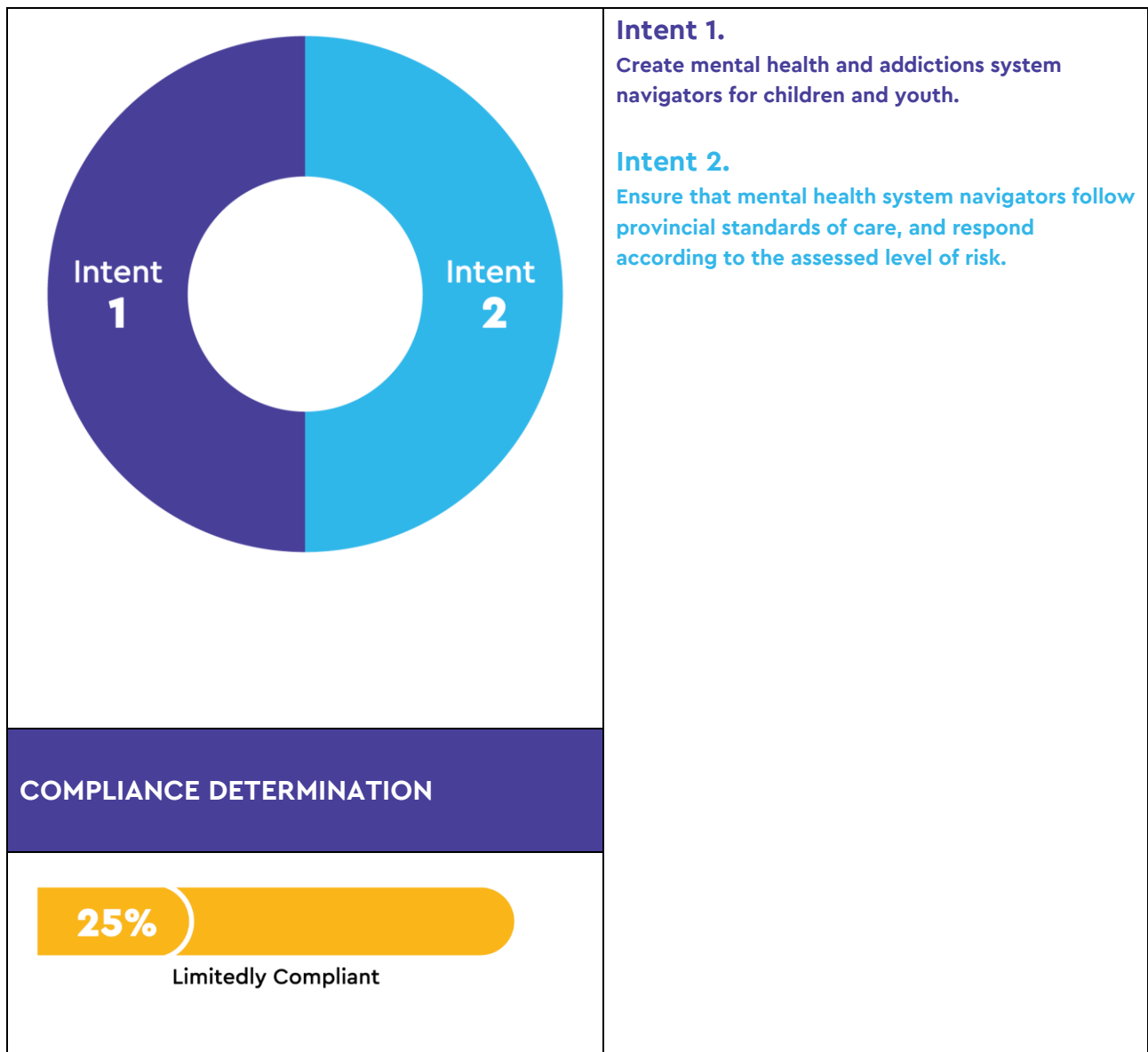
Analysis Summary: It is clear that efforts have been made to undertake an inventory of children and youth services, and identify existing gaps, particularly through the Stepped Care project. A request for a brief summary of findings was denied, however, making it difficult to effectively assess intents 1 and 2. Funding for the "Enhancing Access" project is an important step towards developing a youth addiction action strategy and improve quality and access to services for children and youth. As reported by Mental Health, while action is underway, the size of these projects translates to slow progress and the operationalization of some intents are only beginning to be discussed. As such, this recommendation remains Limitedly Compliant.

COMPLIANCE DETERMINATION

Matthew – Recommendation 5

Recommendation Summary: Create mental health system Navigators to help children and youth.

Primary Public Body: Manitoba Mental Health and Community Wellness



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	The Slow Disappearance of Matthew: A Family's Fight for Youth Mental Health Care in the Wake of Bullying and Mental Illness
Date Released:	2/27/2020
Full Recommendation: (including details)	<p>Recommendation Five:</p> <p>Create mental health system Navigators to help children and youth. The Manitoba Advocate for Children and Youth recommends that Manitoba Health, Seniors and Active Living develop, implement and fund mental health and addictions system Navigators, who act as case managers for children and youth who are accessing the upper tiers of the youth mental health and addiction system, similar to Ontario's model. These Navigators should be knowledgeable and well-trained and offer case coordination and rapid response services to ensure children and youth know their health care plan, can access appropriate services, and ensure case reviews are initiated when services are not effective. Further, much like the requirement for child and family services workers, mental health and addictions Navigators should provide services in accordance with provincial standards of care that change in their intensity and frequency according to the assessed levels of risk to a child or youth.</p>
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Create mental health and addictions system navigators for children and youth. 2. Ensure that mental health system navigators follow provincial standards of care, and respond according to the assessed level of risk.
Issue:	Mental Health and Addictions
Public Body	Manitoba Mental Health and Community Wellness
Dates of Previous Official Updates from Public Body:	September 6, 2023
	July 21, 2023
	June 30, 2022
	July 13, 2021
2. Compliance Determination	
Limitedly Compliant 0.25	Actions taken only implement a small part of the recommendation. Requirements have only been fulfilled to a

	limited degree by the actions taken, resulting in a significant deficiency in the implementation.
Self-Assessment	Partially Compliant
Previous Compliance Determination	Insufficiently Explained
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
Intent 1: Create mental health and addictions system navigators for children and youth.	
2023	
<ul style="list-style-type: none"> • Mental Health emphasized its significant investment in the scale up of the Huddle Integrated Youth Services (HIYS) model throughout Manitoba, and proposed the Service Navigation Specialist Pilot in Winnipeg as an alternate solution. • Specifically, Mental Health reported that United Way Winnipeg and the Winnipeg School Division (WSD) just finished piloting the Service Navigation Specialists initiative in the four Winnipeg Huddle hubs. • The Service Navigation Specialists offer WSD schools a direct link to the supports available at Huddle sites across Winnipeg. • The role of the Service Navigation Specialists includes (but is not limited to) the following: <ul style="list-style-type: none"> ○ Supporting school communities and caregivers to access supports for youth. ○ Working collaboratively to identify needs, co-create supports, and eliminate barriers. ○ Directly linking Huddle services with WSD school support teams. ○ Collecting data and participating in evaluating the impact of the pilot program. • The Pilot ended in July 2023 and is currently being assessed by MHCW for possible opportunities to address recommendations. • Mental Health clarified that the Service Navigation Specialists did not have a specific case coordination focus. They functioned as a bridge between the school community and the Winnipeg Huddle sites. As such, there was no built-in training for case coordination/rapid response services specific to this role. Mental Health clarified that once a student is connected to Huddle services, Huddle staff provide a level of case coordination for the range of services available. • Mental Health reported that, when fully mature, the Huddle/WSD service navigation model will support youth with mental health and addiction services from prevention through to high-need clinical intervention. • While this is an important initiative and a step in the right direction, the Service Navigation Specialists do not help with navigation of services and supports outside 	

of those provided in the Huddles, and more importantly do not address the need for individual case management/coordination and rapid response services. For these reasons, it cannot be considered an adequate alternative solution.

- Furthermore, the Huddle/WSD service navigation model currently excludes children and youth who are not enrolled in school, as well as those attending school outside of the WSD, and therefore does not meet human rights standards for equality and non-discrimination. Of note, Mental Health clarified that once evaluation of the pilot is complete, expansion opportunities may be explored.

2022

- Manitoba Mental Health reported the release of its A Path to Mental Health and Community Wellness: A Roadmap for Manitoba and indicated that one of its strategic areas of focus is access and coordination of mental health services across Manitoba. Nothing in this strategic focus, however, as seen in the roadmap, mentions the creation of mental health systems Navigators or case managers for children, their funding, or their training.
- Manitoba Mental Health asked for a literature review supporting this recommendation. The department claims that the majority of youth already have access to case management services and the Navigator position would be an unnecessary duplication.
- The creation of the position of Manager of Mental Health and Addictions Intake, Coordination and Crisis Services, the Access Intake Assessment Coordination (AIAC) Advisory Committee, and the Steering Committee under Shared Health, are offered as alternatives to the creation of Navigators or case managers. While this is a step in the right direction, it is unlikely that one manager and two committees are able to serve the case management needs of the whole province. More information is needed to understand how children and youth will be provided with system navigation support.

2021

- Manitoba Health and Seniors Care (MHSC) reported that the Community Emergency Department Violence Intervention Program (CEDVIP) assists youth and adults aged 14-29 who present with violence-related injuries to the HSC Adult and Child Emergency Departments. CEDVIP provides 24/7 on call coverage by seven Community Support Workers who meet youth at HSC and offer wrap around support in community. Program implementation began in March, 2020. Due to COVID, full implementation was delayed until May, 2020.
- Integrated Youth Services Youth Hubs provide mental health and addictions services, primary health care, and other social services.
- Through the Department of Families, the Government of Manitoba provided \$510,000 to United Way to support 211. The Manitoba 211 phone service is a free,

confidential information navigation and referral service that connects Manitobans to government and community-based health and social services in their communities (July 2021).

Intent 2: Ensure that mental health system navigators follow provincial standards of care, and respond according to the assessed level of risk.

2023

- Mental Health reported that Navigators are assigned to Huddle services, which follow provincial standards of care and respond to assessed levels of risk.
- Nevertheless, this does not negate the fact that the piloting and possible roll out of Service Navigation Specialists does not fulfil intent 1 of this recommendation.

2022

- Manitoba Mental Health indicated nothing to report, instead referring to its response to Intent 1 as sufficient.
- There is no indication of how existing staff are trained or of a process to ensure they follow provincial standards of care.

2021

- The 211 call centres are accredited and staff work toward certification. They are trained in suicide prevention and mental health recognition and response. They provide referrals to appropriate mental health and/or addiction services (July 2021).

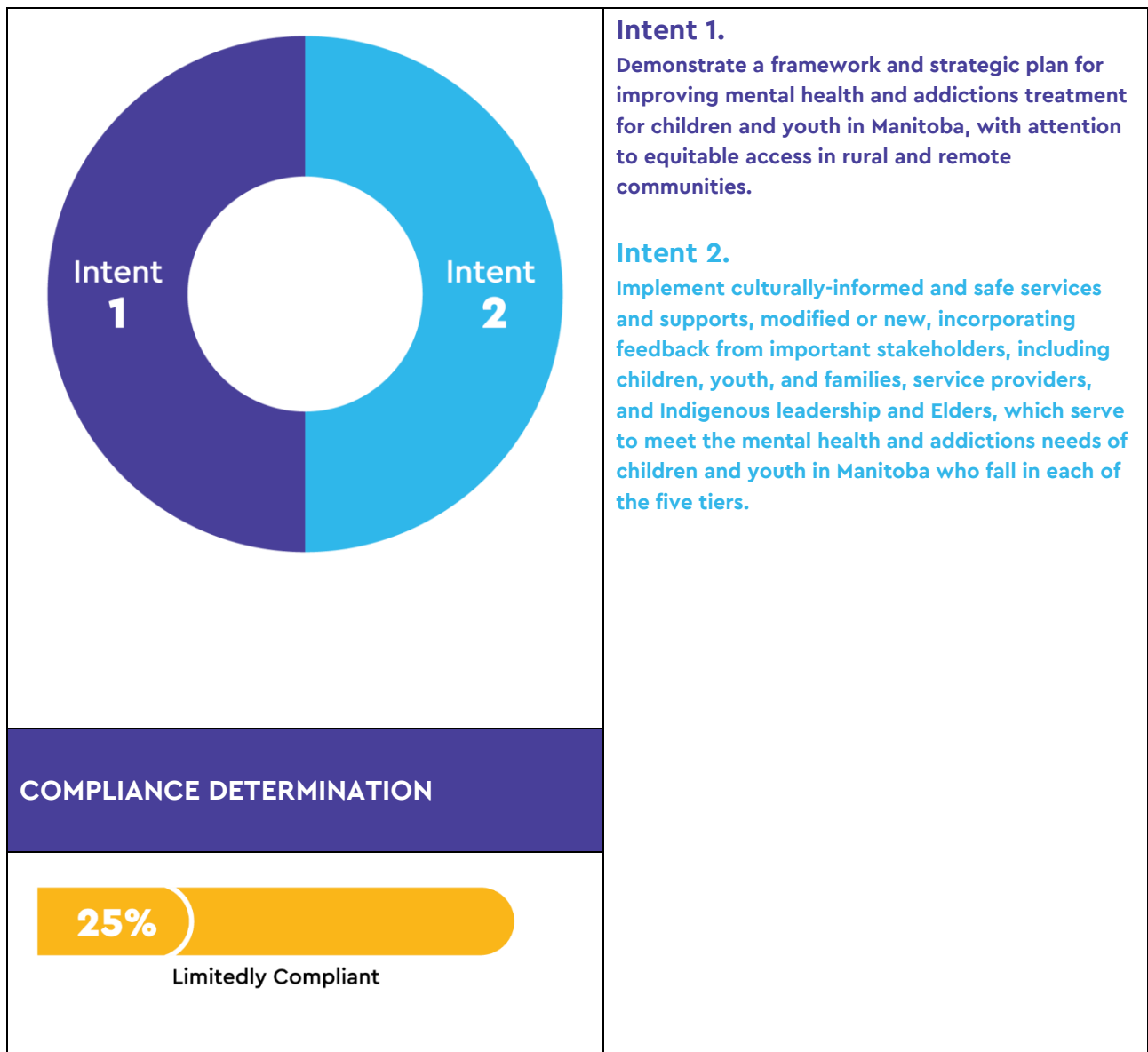
Analysis Summary: While an excellent initiative in its own right, the alternate solution proposed in the form of the Huddle/Winnipeg School Division service navigation model cannot be considered an adequate alternative solution for the purposes of fulfilling this recommendation. This is because it does not address the specific need for case management and coordination, and rapid response services for children and youth who are accessing the upper tiers of the youth mental health and addictions system. Furthermore, there are human rights concerns about equitable access that need to be addressed. The Huddle/Winnipeg School Division initiative remains, however, an important resource to help youth navigate some mental health services and is a step in the right direction. As such, the compliance determination for this recommendation has been moved up to Limitedly Compliant.

COMPLIANCE DETERMINATION

Suicide Aggregate – Recommendation 2

Recommendation Summary: Demonstrate equitable access to mental health and addiction systems.

Primary Public Body: Manitoba Mental Health and Community Wellness



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	"Stop Giving Me a Number and Start Giving Me a Person": How 22 Girls Illuminate the Cracks in the Manitoba Youth Mental Health and Addiction System
Date Released:	5/7/2020
Full Recommendation: (including details)	Recommendation Two: The Manitoba Advocate for Children and Youth recommends that the Department of Health, Seniors and Active Living (now Manitoba Health) demonstrates its framework and strategic plan for transformation of the youth mental health and addictions systems in Manitoba ensures equitable access to services across all areas of Manitoba, which are tailored to the unique needs of children and youth in our province.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Demonstrate a framework and strategic plan for improving mental health and addictions treatment for children and youth in Manitoba, with attention to equitable access in rural and remote communities. 2. Implement culturally-informed and safe services and supports, modified or new, incorporating feedback from important stakeholders, including children, youth, and families, service providers, and Indigenous leadership and Elders, which serve to meet the mental health and addictions needs of children and youth in Manitoba who fall in each of the five tiers.
Issue:	Mental Health and Addictions
Public Body	Manitoba Mental Health and Community Wellness
Dates of Previous Official Updates from Public Body:	September 6, 2023
	July 21, 2023
	June 30, 2022
	July 13, 2021
2. Compliance Determination	
Limitedly Compliant 0.25	Actions taken only implement a small part of the recommendation, requirements are only fulfilled to a limited degree by actions taken, resulting in significant deficiency in implementation.

Self-Assessment	Fully Compliant
Previous Compliance Determination	Limitedly Compliant

3. Rationale for Determination

(How did you reach this compliance determination)

Intent 1: Demonstrate a framework and strategic plan for improving the mental health and addictions treatment for children and youth in Manitoba, with attention to equitable access in rural and remote communities.

2023

- Mental Health again cited the recent release of the Roadmap and the comprehensive consultations that underpinned it.
- The Department emphasized that the Roadmap represents a framework for all Manitobans, including children and youth, and people living in rural and northern communities.
- Mental Health explained that, for these reasons, a youth-specific framework or action plan will not be developed or released in isolation from other populations or services at this time, despite what was reported under intent 2 about the "Enhancing Access" program, which aims to release a framework and plan for a youth specific addiction action strategy.

2022

- Manitoba Mental Health cited the release of A Path to Mental Health and Community Wellness: A Roadmap for Manitoba in support of its compliance with Intent 1 of this recommendation.
- While one of the focus areas of this roadmap is Equitable Access and Coordination, more information is needed on specific steps taken/to be taken to improve mental health and addictions treatment and equitable access to such treatments for children and youth.

2021

- Manitoba Health and Seniors Care (MHSC) reported that discussions and planning are underway with national leaders regarding the development of a child and youth Needs Based Planning (NBP) framework. They further reported that many of the recommendations assigned to MHSAL can be addressed through this process.
- The overall goal of Needs-Based Planning has been to develop a quantitative model that key decision-makers in health planning jurisdictions across Canada can use to estimate the resources required to address the needs for services and supports relating to substance use/mental health problems in their populations.
- MHSC has participated on the NBP Advisory Committee since 2010, and was a pilot

site in 2018, with results of the pilot feeding into the gap analysis that informed the VIRGO Report.

- Child and Youth NBP Process/Objectives include understanding the full distribution of need; identifying core services/tiered framework; estimating required level of service; and determining planning requirements.
- In summary, knowing this work will take one to two years, MHSC and other provincial government departments will continue working together to fill critical gaps identified in the VIRGO Report in order to make services more accessible for children and youth until a national framework is created for child and youth services.
- Update provided October 13: activities currently underway include:
 - Developing a needs-based provincial model.
 - Quarterly Needs Based Planning Advisory Committee meetings.
 - Prairie Mountain Health Authority participated as a pilot site, in the development and refinement of the needs-based planning model.
 - The newly created Mental Health, Wellness, and Recovery (MHWR) Department has begun to track service coverage of core services, according to the NBP model, as outlined in the VIRGO Report gap analysis. As investments are made, gaps outlined in the NBP model and the VIRGO Report are being monitored for progress towards meeting the appropriate level of service coverage. MHWR also uses the model to preliminarily measure the impact investments are having on service coverage.
 - MHWR is developing an action plan/roadmap.
 - MHWR is leading an engagement process, including a series of consultations, to inform an integrated, whole-of-government five-year roadmap. This will guide the work of the department, and is aligned with the department's mission to provide access to mental health and addictions support and treatment to improve the life outcomes for Manitobans in their journey through recovery and healing. This will include services and systems for children and youth.
 - MHWR is in the process of hiring a consultant to conduct a system-mapping of mental health and addictions services and systems in Manitoba, which will inform the development of a Stepped-Care model.

Intent 2: Implement culturally-informed and safe services and supports, modified or new, incorporating feedback from important stakeholders, including children, youth, and families, service providers, and Indigenous leadership and Elders, which serve to meet the mental health and addictions needs of children and youth in Manitoba who fall in each of the five tiers.

2023

- Manitoba Health reported that the "Enhancing Access" program received one-time funding of \$1.5 million in the 2022-23 fiscal year and aims to:
 - Release a framework and plan for transforming the youth mental health and addictions system through the development and implementation of a youth addiction strategy ensuring equitable access.
 - Direct core service investments for services that have the most complex mental health support needs.
 - Enhance access to mental health, substance use, and addictions services for children and youth in Manitoba.
- The Department also reported that seven of the 31 initiatives funded through this bilateral agreement are Indigenous-led and/or incorporate culturally-informed and safe values and/or practices, representing 23% of initiatives funded through this agreement.
- Initiatives to ensure culturally safe services for Indigenous populations in which the government has invested include:
 - PAX Dream makers, Land-Based Healing, Community Helpers, Ata Chiminis Mikisiw (Neecheewam Inc), and Granny's House.
- More information is needed to clarify whether these are old, new, or modified initiatives, what makes them culturally safe, and what their impact on equitable access in rural and remote communities has been.
- Mental Health once again shared details about the reportedly comprehensive engagement that underpinned the Roadmap, including consultation with 106 Indigenous people and 36 youth, as well as two engagement sessions with Indigenous leadership (MMF, AMC, SCO, MKO, MIA, and Urban Indigenous Leadership), and a feedback and engagement session with Indigenous leaders as part of the Roadmap launch activities.
- Mental health reported that recent core service investments have been made, including Cognitive Behavioural Therapy with Mindfulness (CBTm), additional provincial psychology position (location TBD), and the increase of RAAM counselors for Portage La Prairie and Thompson.

2022

- Manitoba Mental Health reported a number of Indigenous stakeholders involved in providing services to meet the mental health and addictions needs of children and youth in Manitoba.
They include Ata Chiminis Mikisiw (Project Neecheewam Inc.), Granny 's House, Anish Corporation, the Aboriginal Health & Wellness Centre of Winnipeg, and Ma Mawi Wi Chi Itata Centre. The response, however, did not provide any evidence or information about how programs or services have been modified or are new, or of meeting with them to get and incorporate their feedback.

- Manitoba Mental Health also reported on a range of Indigenous stakeholders consulted in preparation of the roadmap: 12% of survey participants for the roadmap were Indigenous.

2021

- MHSAL reported an Integrated Youth Services (Youth Hubs) expansion, as each Hub is informed by engagement with youth, families, service providers and community members.
- Youth Hubs provide an accessible one-stop service where youth (aged 12 to 29) and their families can access required supports including primary health care, mental health, and addiction supports, employment training supports, and other social services. Culturally safe services will be an integral part of each Youth Hub. As well, Youth Hubs are designed to meet the needs of youth using a stepped care approach.
- The NorWest Youth Hub in Winnipeg has been expanded, and five additional sites have been identified.

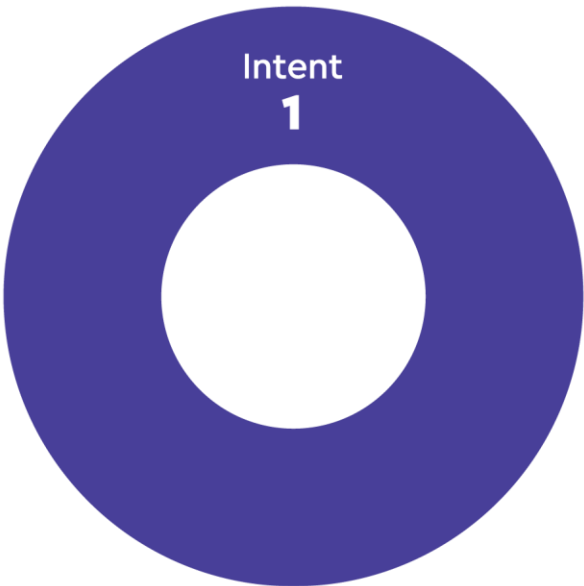

Analysis Summary: This recommendation requires a framework and strategic plan for improving mental health and addictions services that are specific to children and youth, and evidence that these ensure equitable access to services across Manitoba. The recently released Roadmap, and the reportedly comprehensive consultations with Indigenous communities that informed it, do not on their own meet the requirements for this recommendation as they are not youth specific and do not demonstrate impact. The funding provided to the "Enhancing Access" program, however, is an important step towards developing a distinct framework and plan for a child and youth specific addiction strategy. To improve compliance with this recommendation, concrete steps need to be taken to progressively move the development and implementation of this strategy along. Information will also need to be shared about how feedback from Indigenous stakeholders and the reportedly comprehensive consultations is being integrated into this and other relevant strategies. Finally, the impact of initiatives on equitable access to services across the province should be assessed using disaggregated data to identify disparities and gaps. Until these steps are taken, this recommendation will remain Limitedly Compliant.

COMPLIANCE DETERMINATION

Circling Star – Recommendation 3

Recommendation Summary: Establish a concerted cross-sectoral process to reduce perceived and real jurisdictional boundaries that prevent access and coordination of services.

Primary Public Body: Manitoba Mental Health and Community Wellness

 <p>Intent 1</p>	<p>Intent 1. Implement Virgo recommendation 5.4: establish a concerted cross-sectoral process to reduce perceived and real jurisdictional boundaries that prevent access and coordination of services.</p>
<p>COMPLIANCE DETERMINATION</p>	
 <p>50% Partially Compliant</p>	

Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Documenting the Decline: The Dangerous Space Between Good Intentions and Meaningful Interventions
Date Released:	10/19/2018
Full Recommendation: (including details)	<p>Recommendation Three:</p> <p>The Manitoba Advocate for Children and Youth recommends the Department of Health, Seniors and Active Living implement, in full, recommendation 5.4, per the Virgo report, as follows: "Establish a concerted cross-sectoral process to reduce perceived and real jurisdictional boundaries that challenge access to, and coordination of, services. The process of developing this [Manitoba's Mental Health and Addictions] Strategy, as well as any new opportunities and resources for working together (e.g., through Jordan's Principle), should be viewed as an accelerator of a new period of trust and collaboration based on shared beliefs and strengths among all partners, and should include an interest in wellness, hope and families/community health."</p> <p>DETAILS:</p> <p>Specifically, provisions in the following areas are needed within Manitoba's Mental Health and Addictions Strategy:</p> <ul style="list-style-type: none"> • Post-discharge supports for children and youth who have experienced mental health concerns, including addictions issues; • A continuum of services, reflective of culturally-safe and trauma-informed approaches, for all of Manitoba's children and youth, including Indigenous children and youth, and those who live in First Nations communities; and • A continuity of care model that ensures equitable standards of service when First Nations children and youth return to their home communities.
Intent(s) of Recommendation:	<p>The intent of the recommendation is to:</p> <ol style="list-style-type: none"> 1. Implement Virgo recommendation 5.4: establish a concerted cross-sectoral process to reduce perceived

	and real jurisdictional boundaries that prevent access and coordination of services.
Issue:	Mental Health and Addictions
Public Body	Manitoba Mental Health and Community Wellness
Dates of Previous Official Updates from Public Body:	September 6, 2023
	July 21, 2023
	June 30, 2022
	July 13, 2021
	June 30, 2020
	December 31, 2019
June 30, 2019	
2. Compliance Determination	
Partially Compliant 0.50	Actions taken only implement part of the recommendation. Important requirements have been met and the recommendation is acted upon, however, deficiencies remain.
Self-Assessment	Largely Compliant
Previous Compliance Determination	Partially Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
Intent 1: Implement Virgo recommendation 5.4: establish a concerted cross-sectoral process to reduce perceived and real jurisdictional boundaries that prevent access and coordination of services.	
2023	
<ul style="list-style-type: none"> • Mental Health reported the establishment of two new committees under Shared Health: the Access Intake Assessment Coordination (AIAC) Advisory Committee and Steering Committee. While the creation of these new committees is not specifically designed for youth and no precise details were provided, it is reported that work is underway within this portfolio to improve access and coordination of mental health and addictions services across Manitoba. • Mental Health reiterated the proposed expansion of Huddle Manitoba to the Northern and Southern Region Health Authorities, which would create two additional integrated youth services hubs (for a total of eight). It was reported last year that a soft launch was planned for 2022-23 and a formal launch in 2023-24, however, no updates were provided. • Mental Health reported that as of March 31, 2022, telepsychiatry services opened to all rural, northern health centres and nursing stations in Manitoba to make services more accessible. It was explained that, through Jordan's Principle, the Rural and Northern Telehealth Service provides consultation, assessment, and 	

treatment services to First Nations children and youth ages 5 to 18 who are experiencing emotional difficulties.

- Mental Health further reported a planned RAAM hub expansion: virtual RAAM services to serve rural communities in Prairie Mountain Health (serving Swan River, Killarney, and Russell), which will be accessible to eligible youth over 15 years of age. Details about access, referrals, and specialized services for youth are still under development.
- Mental Health also reported that the Strongest Families Institute (SFI) offers ongoing virtual support programs to any youth experiencing mental health challenges.

2022

- Mental Health reported the Huddle Manitoba Expansion: an investment of \$1.05M annually which will create five additional integrated youth services hubs. It reported this effort is to ensure mental health services are accessible within jurisdictions with no or limited accessibility prior to the establishment of these hubs. The additional jurisdictions to be reached include Selkirk, Swan River, Killarney, and Russell.
- Four of the five new hubs are operational as of May 2022, and the Selkirk location is in a soft-launch phase and set to launch later in 2022.
- Two additional hubs will be launched later in 2022.
- One will be located in the Northern Region Health Authority and the other in Southern Health-Sante Sud. With these additions, all RHAs will be covered. A soft-launch is scheduled for 2022/23 and formal launch for 2023/24.
- Mental Health reported additional funding of \$342K for the provision of emergency psychiatry assessments to rural and First Nations communities which currently lack access. Like the Huddle Manitoba Expansion, this initiative seeks to reduce jurisdictional barriers to access mental health services. These initiatives, however, are not specifically designed for children and youth.
- Mental Health reported that there is now a new portfolio under the Shared Health program. It reported that the new position, Manager of Mental Health and Addictions Intake, will improve coordination of child and youth intake.

2021

- Manitoba Health and Seniors Care (MHSC) reported the new department of Mental Health, Wellness and Recovery was established in January 2021.

2020

- Jordan's Principle Working Group continued to meet in the early part of 2020.
- A meeting with federal officials to get an update on the implementation of Jordan's

Principle occurred in January 2020.

2019

- Letter to the Prime Minister inviting the Manitoba and federal governments to participate in a tripartite Jordan's Principle Equity Roundtable. This letter was responded to by Minister Clarke who welcomed further discussion.
- The development of the Jordan's Principle working group and the efforts made to meet with federal officials, including the Prime Minister, demonstrate that activities are occurring to assess the coordination of services and the reduction of jurisdictional boundaries. It remains unclear, however, what the specific goals of the Jordan's Principle working group entail and how this work will help improve access to and coordination of services.

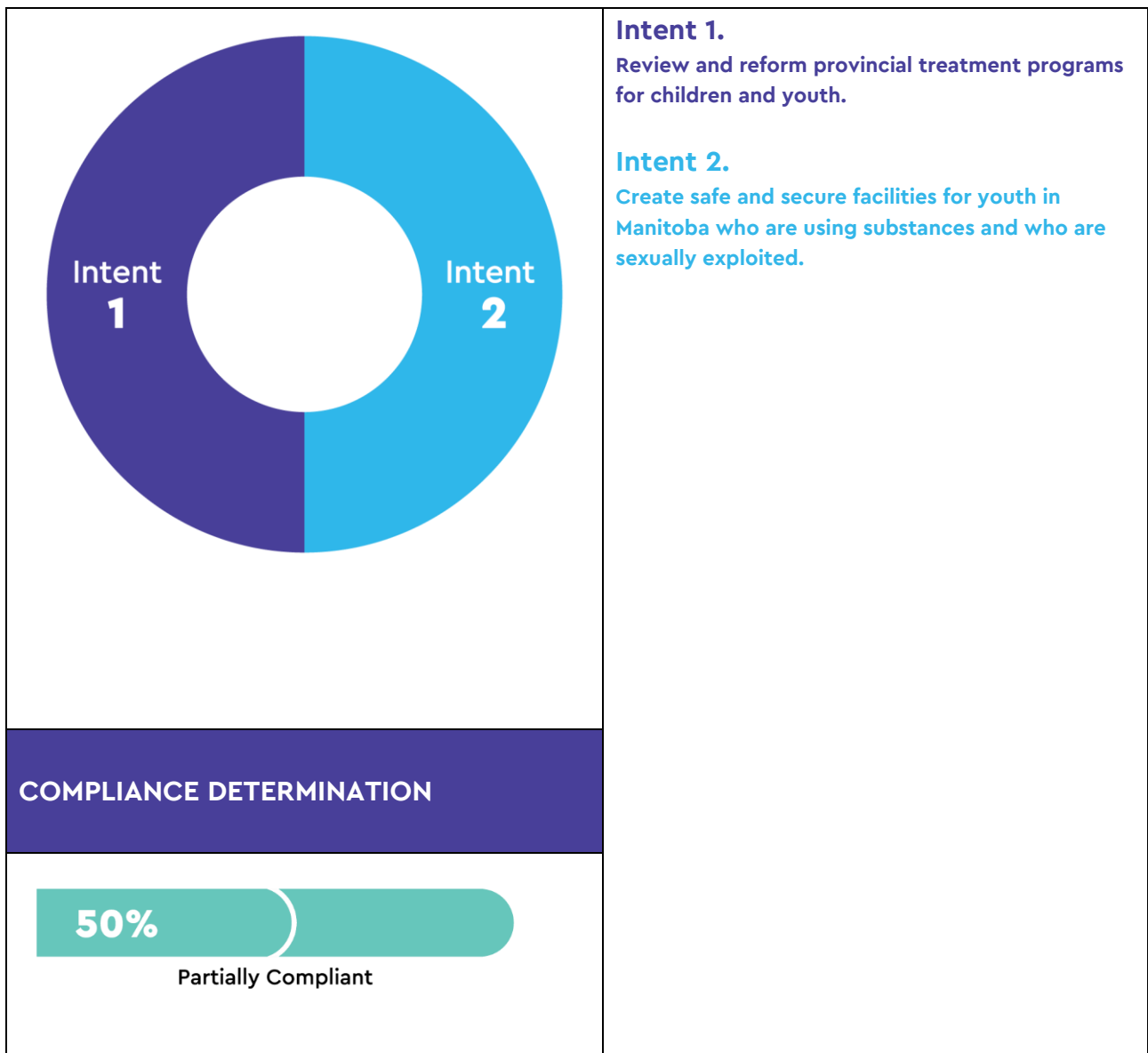
Analysis Summary: Overall, clear steps towards the implementation of the recommendation continue to be taken, including the creation of two new committees to improve access and coordination, the development of virtual mental health and addictions services to make services more accessible to rural and remote communities, and a further North and South Huddle expansion. While this is important progress, it is not immediately clear if or how jurisdictional boundaries are being addressed. As there is still considerable work to be done, this recommendation remains Partially Compliant.

COMPLIANCE DETERMINATION

Angel – Recommendation 5

Recommendation Summary: Review and reform addiction treatment programs, and create a safe and secure facility for sexually exploited youth (SEY).

Primary Public Body: Manitoba Mental Health and Community Wellness



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	In Need of Protection: Angel's Story
Date Released:	12/13/2018
Full Recommendation: (including details)	<p>Recommendation Five:</p> <p>The Manitoba Advocate for Children and Youth recommends that the Department of Health, Seniors and Active Living and Department of Families, in collaboration with the Addictions Foundation of Manitoba, (1) review and reform the province's treatment programs for children and youth and (2) create safe and secure facilities for youth in Manitoba who are sexually exploited and harmfully involved in substance misuse.</p> <p>DETAILS: This should</p> <ul style="list-style-type: none"> • Involve community organizations. • Address the limitations, barriers, and occupancy rate concerns of existing resources (e.g., Compass, YASU). • Include a harm reduction policy specific to children and youth. • Recognize that "secure facilities" do not need to be institutions, but can be secured via adequate staffing, geographic locations, and can further be holistic and culturally-based home-like settings. • Involve youth, experiential, and Indigenous stakeholders. • Address accessibility challenges related to addiction and mental health treatment services. • Be informed by a scan of jurisdictions who successfully incorporate short- and long-term safe and secure settings in their continuum of care models for youth who are sexually exploited. • Be included in the Provincial Mental Health and Addictions Strategy.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Review and reform provincial treatment programs for children and youth. 2. Create safe and secure facilities for youth in Manitoba

	who are using substances and who are sexually exploited.
Issue:	Mental Health and Addictions
Public Body	Manitoba Mental Health and Community Wellness
Dates of Previous Official Updates from Public Body:	May 31, 2023
	June 30, 2022
	July 13, 2021
	June 30, 2020
	December 31, 2019
	June 30, 2019
2. Compliance Determination	
Partially Compliant 0.50	Actions taken only implement part of the recommendation. Important requirements have been met, deficiencies remain yet the recommendation has been acted upon.
Self-Assessment:	Fully Compliant
Prior Assessment:	Partially Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
Intent 1: Review and reform provincial treatment programs for children and youth.	
2023	
<ul style="list-style-type: none"> • Manitoba Mental Health and Community Wellness (MHCW) reported that the first phase of the Stepped Care project was completed in May 2022, and included developing a comprehensive service inventory of all mental health and addictions services available in the province. It additionally outlines the most commonly used services by Regional Health Authority, as well as provincially. Special consideration was reportedly given to services for children and youth as well as Indigenous services. <ul style="list-style-type: none"> ○ The Stepped Care project resulted in a report with service and system level recommendations. ○ The information from the project is intended to be used to improve access to services, and navigation of the mental health and addiction system for Manitobans. ○ Delays to the final stages of the project occurred in late 2022 and a validation process is still underway to occur prior to its release. 	
2022	
<ul style="list-style-type: none"> • Internal evaluation of the Compass program has been conducted. • Planning is underway by the NBP national research team for a model which will include mental health, substance use, and addictions core services for youth and 	

young adults aged 15 and older.

- MHCW has initiated a project to develop and define core services for children and youth, as well as a qualitative gap analysis to determine where gaps in core services may exist for children and youth. It is expected to be complete in September 2022.

2021

- Planning is underway to develop a National Needs Based Planning framework.

2020

- AFM has done their own internal review of their youth programs and, although it did not share any documentation of this, it reported occupancy levels have improved since this review took place. In addition, AFM made the decision to embed its youth counsellors into community-based organizations to better serve youth where they are at.

2019

- The Addictions Foundation of Manitoba (AFM) has conducted an internal review to address occupancy challenges.

Intent 2: Create safe and secure facilities for youth in Manitoba who are using substances and who are sexually exploited.

2023

- MHCW continues to report on the full operationalization of Eagle Embracing You.
- MHCW continues to request reconsideration of this recommendation, and consultation with MACY regarding the definition of 'safe and secure'.

2022

- Manitoba Mental Health reported that Eagle Embracing You, by Neecheewam Inc., has become fully operational since August 31, 2021.
- There is no evidence of the creation of other safe and secure facilities for youth in Manitoba who are using substances and who are sexually exploited.
- On the use of 'safe and secure facilities', Manitoba Mental Health indicates that this may be contrary to Indigenous practice, but offers no alternative on how Indigenous practices will be used to inform the provision of care facilities.

2021

- The Manitoba government has invested \$800,000 in 2019/20, and \$1.5 million in 2020/21 to enable Project Neecheewam Inc. to expand its Winnipeg facility, and

improve access to Indigenous-led healing, care, and treatment services to sexually exploited youth. This provincial funding will allow Neecheewam to undergo renovations to pilot a new, longer-term four-bed addition to its treatment facility. Staff have been hired, and are currently being trained. Neecheewam Inc. is expected to open in June 2021.

2020

- The Community Emergency Department Violence Program provides support and services to sexually exploited youth who have experienced violence-related injuries by a multi-disciplinary team that uses a harm reduction, trauma-informed approach to care.
- Newcomer Trauma-Focused Services are provided to newcomer youth who struggle with post-traumatic stress disorder and other mental illnesses that often make them more vulnerable to sexual exploitation. They can access long-term mental health services in the community with linkages to the formal health care system.

2019

- Neecheewam Inc. is developing a new residential treatment facility. Upon development, a four-bed unit will be offered to youth who are using substances and who are being sexually exploited, to provide specialized mental health and addictions treatment.

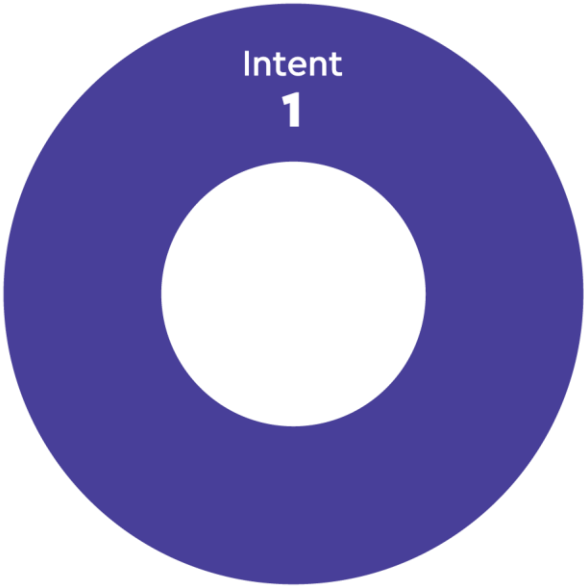

Analysis Summary: As with numerous other recommendations regarding the Mental Health and Addictions system, MHCW continues to reference the Stepped Care project as fulfilling the intent of reviewing, identifying gaps, and creating an inventory of the mental health and addictions services available in Manitoba. MACY's request to review a summary of this project, however, was denied. With the release of the final products of the Stepped Care project and the mentioned recommendations, intent 1 of this recommendation will be closer to reaching fulfillment. Presently, this recommendation is partially compliant.

COMPLIANCE DETERMINATION

Tina Fontaine – Recommendation 2

Recommendation Summary: Release a plan to implement the child and youth specific recommendations in the Virgo Report.

Primary Public Body: Manitoba Mental Health and Community Wellness

	<p>Intent 1. Release a plan to address the child and youth specific Virgo recommendations.</p>
<p>COMPLIANCE DETERMINATION</p>	
	

Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	A Place Where It Feels Like Home: The Story of Tina Fontaine
Date Released:	3/12/2019
Full Recommendation: (including details)	<p>Recommendation Two:</p> <p>The Manitoba Advocate for Children and Youth recommends that Manitoba Health, Seniors and Active Living expedite the public release of a clear implementation plan to address the child and youth-specific recommendations contained in the report on Improving Access and Coordination of Mental Health and Addiction Services: A Provincial Strategy for all Manitobans ("Virgo Report").</p> <p>DETAILS:</p> <ul style="list-style-type: none"> Manitoba Health, Seniors and Active Living's plan must ensure that resources are prioritized in rural and remote locations to ensure equitable service levels for children and youth regardless of where they are living. The implementation plan must reflect the client populations who require them and must, therefore, be culturally-informed, and be developed in ways that reflect the voices and preferences of Indigenous health experts, Indigenous leadership, children and youth, and others with lived experiences.
Intent(s) of Recommendation:	1. Release a plan to address the child and youth specific Virgo recommendations.
Issue:	Mental Health and Addictions Mental Health and Addictions
Public Body	Manitoba Mental Health and Community Wellness
Dates of Previous Official Updates from Public Body:	September 6, 2023
	July 21, 2023
	June 30, 2022
	July 13, 2021
	June 30, 2020
	December 31, 2019
	June 30, 2019
2. Compliance Determination	

Partially Compliant 0.50	Actions taken only implement part of the recommendation. Important requirements have been met and the recommendation is acted upon, however, deficiencies remain.
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Self-Assessment	Fully Compliant
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Prior Assessment	Partially Compliant
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3. Rationale for Determination
(How did you reach this compliance determination)

Intent 1: A plan to address the child and youth specific Virgo recommendations.

2023

- Mental Health again reported the release of the Roadmap, which it explained is highly responsive to the Virgo report.
- Mental Health reported that it previously shared the Child and Youth Virgo recommendations outline in Appendix E of last year's report.
- Mental Health shared an updated youth-specific Virgo tracker, which identifies seven out of 21 recommendations as being "addressed" (Rec # 2.15, 4.1, 4.2, 4.3, 4.8, 4.9 and 7.2), 10 as being "partially addressed," and the remaining four as being "not addressed".
- The tracker also lists the initiatives justifying these determinations and some very basic plans, including forecasting "cross-departmental conversations," to address the remaining recommendations.
- While this does demonstrate some progress and provides evidence that there has been some planning for the implementation and evaluation of child and youth Virgo recommendations, important gaps remain and a more comprehensive, long-term plan must be developed and made public. This plan should include clear timelines.
- Mental Health proposed that the release and ongoing implementation of the Roadmap be considered an alternate solution to this recommendation.

2022

- Manitoba Mental Health reported the release of A Path to Mental Health and Community Wellness: A Roadmap for Manitoba. This is a broad document, however, with no indication of specific provisions to address the child and youth-focused recommendations of the Virgo Report.
- Manitoba Mental Health also submitted an outline of child and youth-specific Virgo recommendations and its efforts to achieve these recommendations, most of which are still at the planning and foundational stages, not yet launched or completed.
- For rec 1.6 of the Virgo report, the department indicated that the roadmap includes a plan to develop a coordinated provincial response to the prevention of

suicide for children, youth, and adults, with special consideration for at-risk communities and populations, and outlines the roadmap as a partial fulfillment of rec 1.6.

- The department lists the Newcomer Trauma Initiative, the Integrated Youth Services, and the roadmap as initiatives partially addressing rec 1.9.
- The department indicates an investment of \$600K was made to Addictions Foundation of Manitoba to double the number of treatment beds for women, and an investment of \$3.8M to Neechewan to improve access to Indigenous-led healing, care, and treatment services for youth experiencing sexual exploitation as actions taken to partially implement rec 2.15.
- The department admits that rec 3.1 has not been addressed.
- The department mentions the decentralization of AFM services, expansion of NorWest Youth Hub, investment of \$1.55M for IYS Expansion, and an investment of \$7.7M to establish Hope North Recovery Centre for Youth in Thompson, as actions taken in partial fulfillment of rec 3.2.
- The department acknowledges that no action has been taken to address rec 3.6.
- The department outlines an investment of \$1M in Strong Families Institute, the expansion of NorWest Youth Hub, IYS Expansion, investment of \$2.1M in StreetReach in Thomson, \$370K investment in StreetReach Winnipeg, an investment of \$1.4M in Thrival Kits, investment of \$675K in PAX Dream Makers, investment of \$1.6M for expanding Community Schools Program, and an investment of \$400K to launch Granny's House, as partial fulfillment of rec 4.1.
- The department acknowledges that rec 4.11 has not been addressed.
- It is unclear whether these initiatives are pre-existing, new, or modified.

2021

- Actions taken in the last year to implement this recommendation include discussions and planning with national leaders to develop a child and youth National Needs Based Planning Framework. While this work is endorsed and recommended by experts on the subject matter, Manitoba Health and Seniors Care advised this recommendation will be put on hold until this National Framework is developed.

2020

- Manitoba Health, Seniors and Active Living provided a summary chart outlining the recommendations it had determined as being 'complete' or 'partially complete' along with the associated activities completed thus far. While the summary chart provided in 2020 was helpful in determining the activities that have occurred in association to 10 of the youth-specific recommendations named in the report, questions remain regarding the strategy to implement the remaining 29

recommendations. Further, clarification around whether the projects and initiatives named in the chart are long-term projects or pilot projects is required.

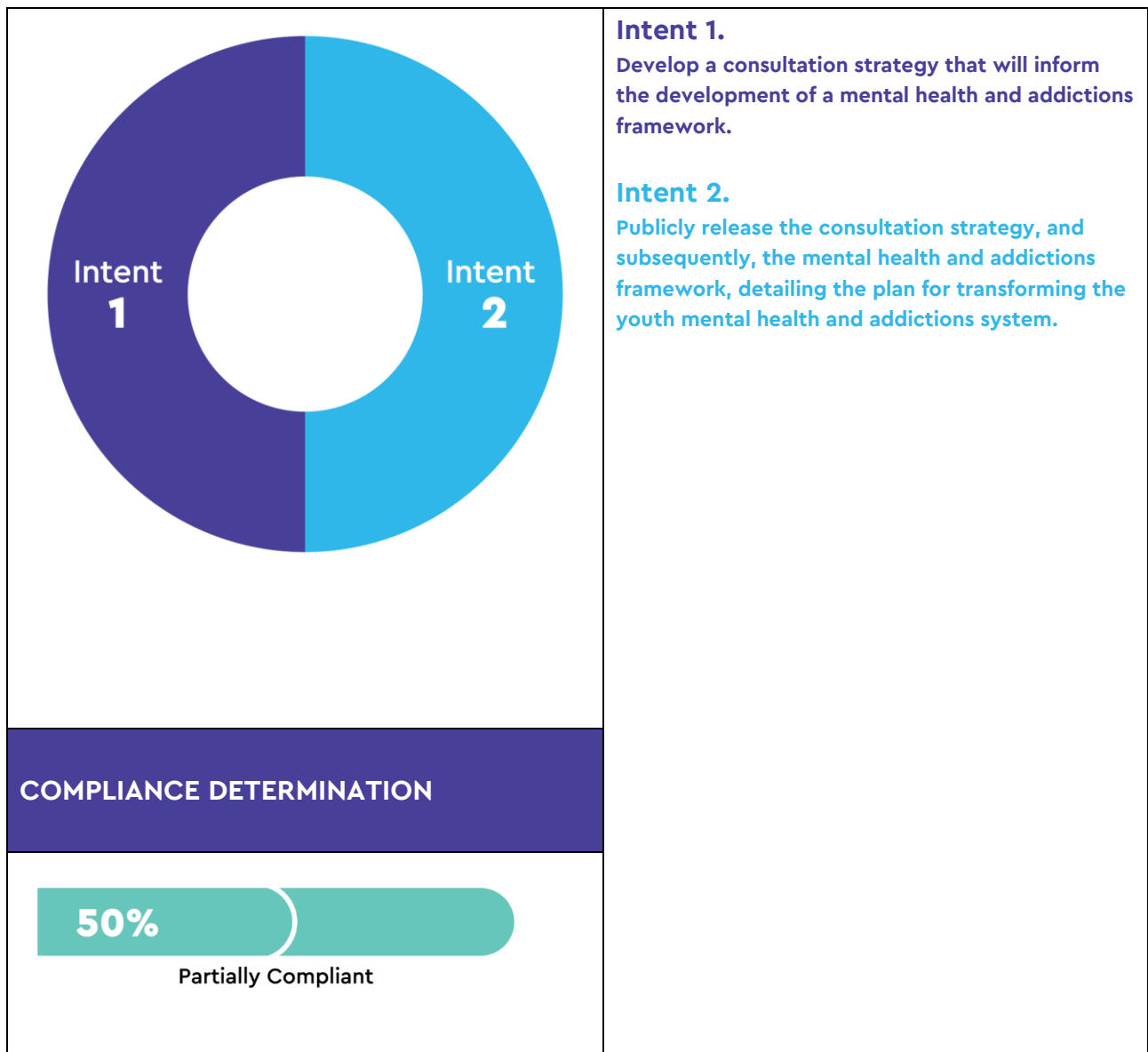
Analysis Summary: While some progress has been made, the current efforts communicated are not sufficient to meet the requirements of this recommendation. The release of the Roadmap and its ongoing implementation, while important steps in the right direction, cannot be considered an alternate solution as the Roadmap framework is broad and does not include specific provisions to address the child- and youth-focused recommendations of the Virgo report. This recommendation requires the development and release of a specific, comprehensive, and long-term implementation plan, inclusive of timelines, to address each youth-focused Virgo recommendation. The plan must ensure the prioritization of resources in rural and remote locations, and must be culturally-informed. Until concrete steps are taken in this regard, this recommendation will remain Partially Compliant.

COMPLIANCE DETERMINATION

Matthew – Recommendation 7

Recommendation Summary: Publicly Release a framework for child and youth mental health and addictions health system transformation.

Primary Public Body: Manitoba Mental Health and Community Wellness



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	The Slow Disappearance of Matthew: A Family's Fight for Youth Mental Health Care in the Wake of Bullying and Mental Illness
Date Released:	2/27/2020
Full Recommendation: (including details)	Recommendation Seven: A transparent framework for child and youth mental health and addictions health system transformation. The Manitoba Advocate for Children and Youth recommends that in a commitment to transparency and accountability, Manitoba Health, Seniors and Active Living publicly release its framework and plan for transforming the youth mental health and addictions system in Manitoba so recent and anticipated investments and announcements can be understood by Manitobans not as one-off announcements, but as part of an overall tiered strategy for improving access, coordination, content, and capacity of the child and youth health care system in the province.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Develop a consultation strategy that will inform the development of a mental health and addictions framework. 2. Publicly release the consultation strategy, and subsequently, the mental health and addictions framework, detailing the plan for transforming the youth mental health and addictions system.
Issue:	Mental Health and Addictions
Public Body	Manitoba Mental Health and Community Wellness
Dates of Previous Official Updates from Public Body:	September 6, 2023
	July 21, 2023
	June 30, 2022
	July 13, 2021
2. Compliance Determination	
Partially Compliant 0.50	Actions taken only implement part of the recommendation. Important requirements have been met and the recommendation is acted upon, however, deficiencies remain.
Self-Assessment	Partially Compliant
Previous Compliance	Partially Compliant

Determination	
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
<p>Intent 1: Develop a consultation strategy that will inform the development of a mental health and addictions framework.</p> <p>2023</p> <ul style="list-style-type: none"> • Mental Health referred to the broad consultations it undertook to inform the five year "Roadmap for Manitoba", and explained that this represents a framework for all Manitobans, including children and youth. • No new steps have been taken towards fulfilling this intent. • Previous analysis by MACY relating to the ambiguity around how the Roadmap will transform the youth mental health and addictions system and improve access, coordination, content, and capacity of the child and youth health care system in Manitoba remain relevant. • Mental Health presumably recognized this issue and reported that an alternate solution is currently being explored. <p>2022</p> <ul style="list-style-type: none"> • In response to our request for more information, Manitoba Mental Health provided a list of focus groups, interviews, and tours that were held as part of the consultation for the development of the roadmap. • The list included a wide range of stakeholders: 12% identified as Indigenous and one of the focus groups was a Children and Youth Focus Group representing approximately 2% of the total number of focus groups. • It is necessary to note that this consultation was for the roadmap, and not a youth-specific mental health and addictions framework. <p>2021</p> <ul style="list-style-type: none"> • According to Manitoba Health and Seniors Care (MHSC), discussions and planning are underway with national leaders regarding the development of a child and youth Needs Based Planning (NBP) framework. • The new Department of Mental Health, Wellness and Recovery is currently preparing to undertake broad consultation to develop an integrated, whole-of-government action plan for mental health, substance use, wellness, and health promotion services in Manitoba. The consultation and development of an action plan indicate that early actions are being taken to develop a plan to ensure a continuum of services for children and youth who are at imminent risk due to life-threatening addictions. 	

- MHWR is leading an engagement process, including a series of consultations, to inform an integrated, whole of government five-year roadmap. MACY participated in the recent consultation for the MHWR Departmental Roadmap held on August 23, 2021. MHWR's engagement process will guide the work of the department, and is aligned with the department's mission to provide access to mental health and addictions support and treatment to improve the life outcomes for Manitobans in their journey through recovery and healing. This will include services and systems for children and youth.

Intent 2: Publicly release the consultation strategy, and subsequently, the mental health and addictions framework, detailing the plan for transforming the youth mental health and addictions system.

2023

- Mental Health reported that Optimus SBR has been contracted to oversee the Roadmap process and assessment. They have ongoing reporting duties to leadership on Roadmap initiatives.
- No new steps have been taken towards fulfilling this intent.

2022

- Manitoba Mental Health reported the release of A Path to Mental Health and Community Wellness: A Roadmap for Manitoba along with a \$17 million investment to support the plan.
- While this roadmap is helpful in defining the overall framework for mental health services in Manitoba, it does not contain any specific or detailed plan designed for youth mental health and addiction. It is unclear how this general framework will transform the youth mental health and addictions system and improve access, coordination, content, and capacity of the child and youth health care system in Manitoba.

2021

- The Department of Mental Health, Wellness and Recovery reported that consultations will be concluded by the end of 2021 and that a plan is expected to be implemented in 2022-23. No information was provided as to whether this plan will be public.

Analysis Summary: While the Roadmap signifies an important step in the right direction, it continues to fall short of meeting the spirit and intents of this recommendation. Compliance with this recommendation requires the collaborative development of a transparent framework and plan for transforming the mental health and addictions system

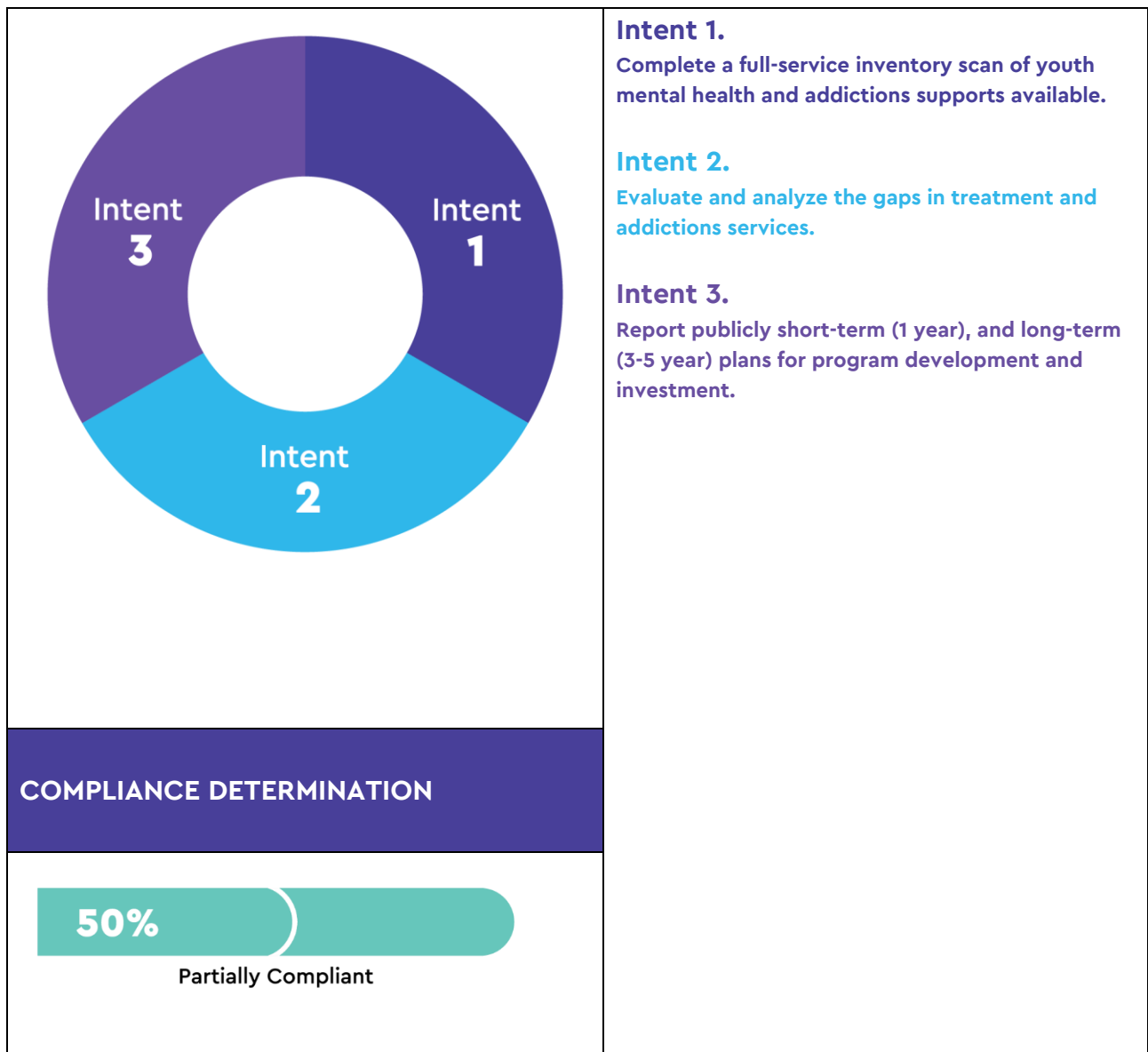
that is specific to children and youth, because they have distinct needs and rights. Until concrete steps are taken in this regard, or until an adequate alternate solution is identified, this recommendation will remain Partially Compliant.

COMPLIANCE DETERMINATION

Suicide Aggregate – Recommendation 1

Recommendation Summary: Conduct a gap analysis of the youth mental health and addictions system.

Primary Public Body: Manitoba Mental Health and Community Wellness



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	"Stop Giving Me a Number and Start Giving Me a Person": How 22 Girls Illuminate the Cracks in the Manitoba Youth Mental Health and Addiction System
Date Released:	5/7/2020
Full Recommendation: (including details)	<p>Recommendation One:</p> <p>The Manitoba Advocate for Children and Youth recommends that the Department of Health, Seniors and Active Living conduct a gap analysis of the youth mental health and addictions system, based on the tiered model proposed in the Virgo Report. The gap analysis ought to speak to the overall transformation framework and strategic plan for child and youth mental health and addictions services. Further, the Manitoba Advocate recommends the gap analysis, framework, and strategic plan is released publicly to Manitobans.</p> <p>OUTCOMES:</p> <ul style="list-style-type: none"> • Conduct a jurisdictional scan to complete a full-service inventory of youth mental health and addictions services and supports available at each of the five tiers, ranging from prevention initiatives to those designed to meet the highest needs. • Conduct a gap analysis using the inventory of services and a needs-based assessment of children and youth in Manitoba, taking into consideration what current services in the inventory can be modified or adapted (i.e., increase capacity, needs modification to enhance functioning, or based on new evidence or evaluation, etc.) to better meet needs of children and youth. • Provide to the public the short-term (1 year) and long-term (3-5 year) vision and strategic plan for program development and investment to guide system enhancement.
Intent(s) of Recommendation:	1. Complete a full-service inventory scan of youth mental health and addictions supports available.

	<p>2. Evaluate and analyze the gaps in treatment and addictions services.</p> <p>3. Report publicly short-term (1 year) and long-term (3-5 year) plans for program development and investment.</p>
Issue:	Mental Health and Addictions
Public Body	Manitoba Mental Health and Community Wellness
Dates of Previous Official Updates from Public Body:	September 6, 2023
	July 21, 2023
	June 30, 2022
	July 13, 2021
2. Compliance Determination	
Partially Compliant 0.50	Actions taken only implement part of the recommendation. Important requirements have been met and the recommendation is acted upon, however, deficiencies remain.
Self-Assessment	Largely Compliant
Previous Compliance Determination	Limitedly Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
<p>Intent 1: Complete a full-service inventory scan of youth mental health and addictions supports available.</p> <p>2023</p> <ul style="list-style-type: none"> • Mental Health once again reported on the “Stepped Care” project, the first phase of which was completed in May 2022 and included: (1) developing a comprehensive service inventory of all mental health and addiction services available in the province; and (2) outlining the most common services used by adults and youth provincially, and in each regional health authority, with special consideration given to children-, youth-, and First Nations-focused services. • A plan is reportedly being developed to use this information to ensure Manitobans have improved access to services and can more easily navigate the system. The final report and results will be externally released once a comprehensive validation process is complete. • Mental Health explained that they were unable to share any preliminary results or summary of findings from this report at this time, precluding an assessment of this intent. <p>2022</p> <ul style="list-style-type: none"> • Manitoba Mental Health reported that (under contract with Stepped Care Solutions) an inventory of provincial and regional models of mental health, 	

substance use, and addictions services outlining the gaps and redundancies was produced.

- Appendix C was shared with MACY and it contains the Stepped Care Model for youth and young persons.

2021

- Quarterly Needs Based Planning meetings are underway with national leaders regarding the development of a child and youth Needs Based Planning (NBP) framework. An external stakeholder cautioned against an individual provincial approach to developing provincial frameworks as there are risks to doing this work in isolation. It was further advised that developing benchmarks that are consistent on a national level is recommended.

Intent 2: Evaluate and analyze the gaps in treatment and addiction services.

2023

- Mental Health again reported on the "Roadmap" that is meant to represent a framework for all Manitobans, including children and youth, and which was based on broad consultations across the province.
- Mental Health reported that the "Enhancing Access" project received one-time funding of \$1.5 million in the 2022-23 fiscal year. This project aims to: (1) release a framework and plan for transforming the youth mental health and addictions system through the development and implementation of a youth addiction action strategy ensuring equitable access; (2) direct core service investment for services that have the most complex mental health support needs; and (3) enhance access to mental health, substance use, and addiction services for children and youth in Manitoba (Tiers 3-5).
- Mental Health offered clarification on the different tiers:
 - Tier 1 services are focused on health promotion and prevention and aim to improve the health of the entire population;
 - Tier 2 services are designed and delivered to support individuals with lower mental health and addictions service needs, including self-guided resources;
 - Tier 3 services support individuals with moderate mental health and addictions service needs, and are short-term interventions that can be delivered in community and clinical settings;
 - Tier 4 services support individuals with moderate to severe needs, providing specialized and intensive support, including short-term intensive care; and
 - Tier 5 services support individuals with severe or complex needs and are highly specialized and intensive services, including long-term intensive care.

- Mental Health further clarified that as part of the "Enhancing Access" project, a cross-branch MHCW team continues to hold regular meetings, evaluate enhancements available, and develop a strategy for enhancing access to child and youth services. Due to the election, holds are expected, but preliminary initiatives are expected before the 2024-25 fiscal year.

2022

- Manitoba Mental Health reported that the report produced under the contract with Stepped Care Solutions demonstrates where there are gaps and redundancies in services, and the evaluation of the report is underway as they "continue validating the information collected."
- Appendix C shared with MACY did not include any gaps, it only listed the supports available across various steps for a youth or young person.

2021

- Mental Health, Wellness and Recovery (MHWR) has begun to track service coverage of core services, according to the NBP model, as outlined in the VIRGO Report gap analysis. As investments are made, gaps outlined in the NBP model and the VIRGO Report are being monitored for progress towards meeting the appropriate level of service coverage. MHWR also uses the model to preliminarily measure the impact investments are having on service coverage.
- Adhering to stakeholder advice and recognizing that work on a national level will take 1-2 years, MHSAL reported it will work together to fill critical gaps identified in the VIRGO report for the purpose of making services more accessible for children and youth, until a national framework is created for child and youth services.

Intent 3: Report publicly short-term (1 year) and long-term (3-5 year) plans for program development and investment.

2023

- Mental Health again reported on the Government of Manitoba's announcement of 54 initiatives, many of which have been focused on children and youth, valued at more than \$66 million, to improve mental health and addictions services since 2019.
- Mental Health listed several initiatives that have been implemented that align with the Roadmap and Stepped Care Report, and provided funding plans for each, as requested:
 - Huddle Manitoba (ongoing funding, with additional one-time expansion funding, led by MHCW)
 - Child and Youth Mental Health Assessment Enhancement at HSC (one-time funding, led by MHCW)

- PAX Dream Makers (ongoing funding, led by MHCW)
- CEDVIP (ongoing funding, led by MHCW)
- StreetReach Winnipeg (annual funding, with additional one-time expansion funding, led by FAM)
- StreetReach Thompson (annual funding, with additional one-time expansion funding, led by FAM)
- Land-Based Healing (one-time funding, led by FAM)
- Eagle Embracing You (one-time funding, led by FAM)
- School-Based Mental Health and Addictions Support (annual funding, with an additional one-time funded pilot project, led by MHCW and EECL)
- While this provides some useful insight into the sustainability of these initiatives, more information is required on program development and long-term funding. In addition, this information about program development and funding should be made public.

2022

- No action, evidence, or justification for inaction was reported for this requirement.

2021

- No action, evidence, or justification for inaction was reported for this requirement.

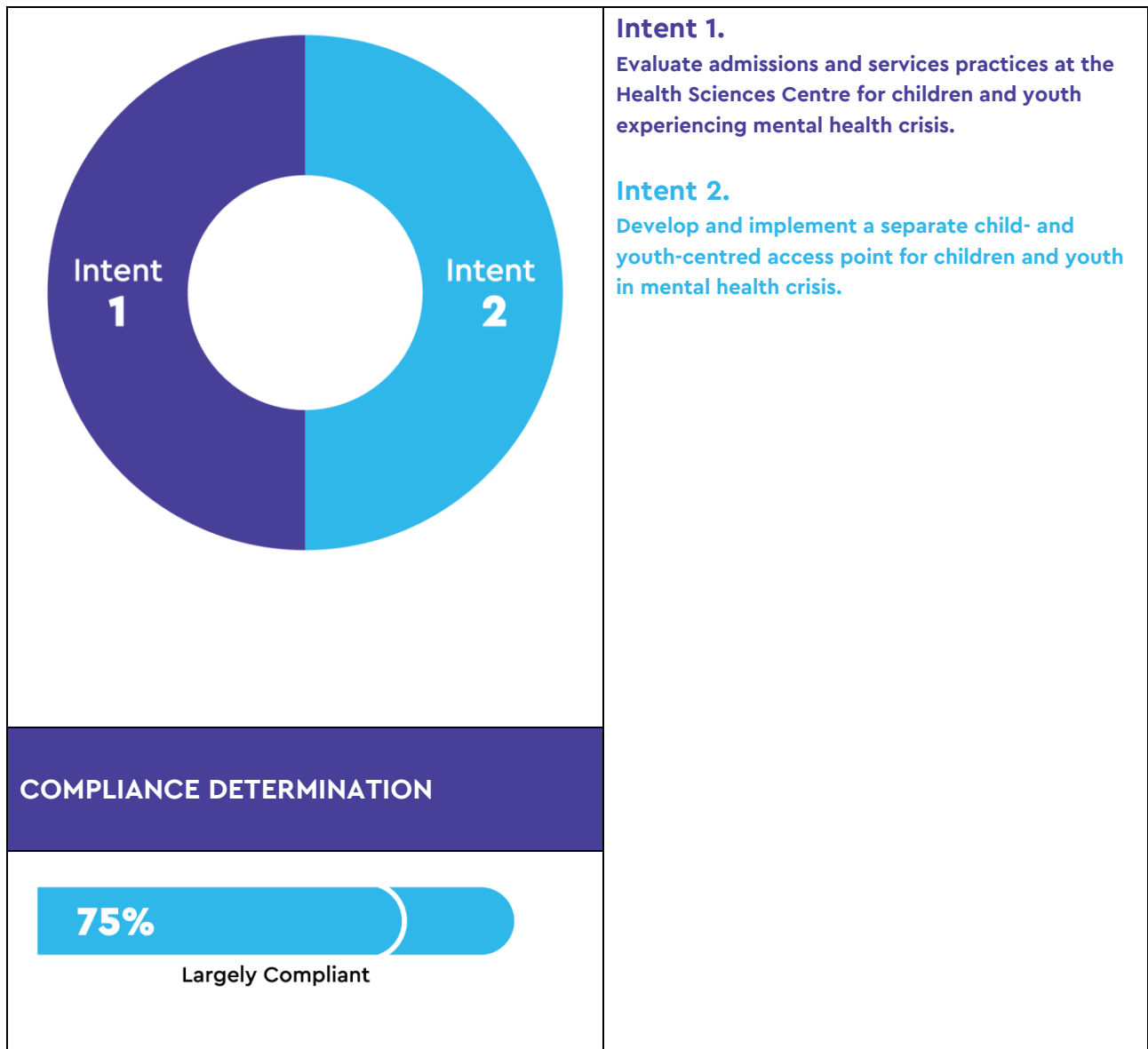
Analysis Summary: This recommendation is closely tied to *Circling Star* recommendation 4, and important steps have been taken over the years towards fulfilling it. Efforts have been made to undertake an inventory of child and youth services, to begin identifying existing gaps, and to provide some information on the short-term funding of relevant programs. Furthermore, the provision of funding for the Enhancing Access project is an important step towards developing an addiction strategy that is youth specific. While significant action is underway, more information and transparency are needed about the gaps identified – ideally in the form of a gap analysis, as per the recommendation – and long-term strategic plans for program development and investment. As a result, this recommendation has been moved up to Partially Compliant.

COMPLIANCE DETERMINATION

Matthew – Recommendation 4

Recommendation Summary: Evaluate existing mental health access points and implement a child- and youth-centred specialized access point that meets the needs of children and youth.

Primary Public Body: Manitoba Mental Health and Community Wellness



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	The Slow Disappearance of Matthew: A Family's Fight for Youth Mental Health Care in the Wake of Bullying and Mental Illness
Date Released:	2/27/2020
Full Recommendation: (including details)	Recommendation Four: Improve access points for children and youth experiencing a mental health crisis. The Manitoba Advocate for Children and Youth recommends that Manitoba Health, Seniors and Active Living, along with representatives from Shared Health, children's emergency staff and child and adolescent psychiatry – in accordance with their master plan overview of Health Sciences Centre – evaluate practices at the Health Sciences Centre – Children's Hospital Emergency Room, with the intent of developing and implementing a child and youth-centred, separate and specialized access point that meets the needs of children and youth who are experiencing a mental health crisis.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Evaluate admissions and services practices at the Health Sciences Centre for children and youth experiencing mental health crisis. 2. Develop and implement a separate child- and youth-centred access point for children and youth in mental health crisis.
Issue:	Mental Health and Addictions
Public Body	Manitoba Mental Health and Community Wellness
Dates of Previous Official Updates from Public Body:	September 6, 2023
	July 21, 2023
	June 30, 2022
	July 13, 2021
2. Compliance Determination	
Largely Compliant 0.75	Actions taken meet the majority of requirements for implementation, only negligible requirements remain.
Self-Assessment	Largely Compliant
Previous Compliance Determination	Largely Compliant
3. Rationale for Determination	

Intent 1: Evaluate admissions and services practices at the Health Sciences Centre for children and youth experiencing mental health crisis.

2023

- Mental Health reported that the initiative to enhance child and adolescent mental health services at the Health Sciences Centre (HSC) continues to be underway. Specific updates since 2022 include:
 - The Child and Adolescent Mental Health Program hired eight new staff in 2022.
 - Renovations for additional office and treatment space are still underway as of March 2023.
- Mental Health also reported the following data to demonstrate improved access:
 - Since January 2022, median wait times have been reduced by 42.5 days in the Intensive Child and Adolescent Treatment Centre (ICATS), 721 days in Anxiety Disorders Services for Children and Youth (ADSCY), and 335 days in Outpatient Mental Health Service (OMHS).
 - Number of urgent consultations to staff in rural and remote areas regarding direct care of patients has increased by 26 since January 2021.
 - Number of children and adolescents receiving group therapy at ICATS has increased by 114 since January 2021.
 - Number of children and adolescents receiving group therapy through ADSCY has increased by 130 since January 2021.
 - Number of children and adolescents receiving individual therapy through CAPSS has increased by 5 since January 2021.
- Mental Health reported that the Access Intake Assessment Coordination (AIAC) Advisory Committee and Steering Committee are continuously working to evaluate current practice and improve access and coordination. It was explained that enhancement proposals and ongoing projects are being conducted through these committees.
- In order to effectively assess compliance with this intent, it would be useful for MACY to be provided with the details of the AIAC Committees' work, including any evaluations, enhancement proposals, and ongoing projects.
- Mental Health confirmed that a formal project structure proposal on the new mental health and addictions structure from HSC reported on last year is pending.

2022

- Manitoba Mental Health reported that a new mental health and addictions structure has been established, and a Manager of Mental Health and Addictions Intake, Coordination and Crisis Services has been employed to improved admission services and practices for children and youth.

2021

- Manitoba Health and Seniors Care (MHSC) has engaged Shared Health to review and expand mental health assessment and treatment services for children and youth at Health Sciences Centre (HSC) in Winnipeg. The review of the admission and services practices led to the development of the expansion of services plan (July 2021).

Intent 2: Develop and implement a separate child- and youth-centred specialized access point for children and youth in mental health crisis.**2023**

- Mental Health reported that the Community Emergency Department Violence Intervention Program (CEDVIP) has been implemented as an additional access point and continues to work with children and youth who present with violence-related injuries to HSC Adult and Children's Emergency Departments.
- Mental Health also reported that an announcement regarding the [Pathminder](#) initiative, which will address access point enhancement, is coming in late July. It appears this initiative will not be child specific.

2022

- Manitoba Mental Health has reported that while Stage One of the initiatives to enhance child and adolescent mental health services at the Health Sciences Centre was implemented in 2021, Stage Two is still underway.
- It is unclear if the parts of the response referred to in Intent 2 are parts of the initiative to be implemented or parts of the initiative already implemented.

2021

- Expansion of services is being implemented in a phased manner. MHSAL reported that Phase One was implemented in 2020, and included:
 - Improving quality of care in the Children's Hospital Emergency Department (CHED) by providing relief coverage for child and adolescent Psychiatric Emergency Nurses (PENS). PENS assess children and youth who present in the CHED and facilitate referral to appropriate outpatient resources.
 - Increased individual and group psychotherapy capacity in the Intensive Child and Adolescent Treatment Centre (ICATS), a 12-week multi-disciplinary crisis treatment resource.
 - Increased capacity in the Outpatient Mental Health Service (OMHS).
 - Improved access to group therapy and reduced wait times for the Anxiety Disorders Services for Children and Youth (ADSCY).
- MHSC reported that Phase Two will require additional office and treatment space in HSC. Shared Health has submitted a plan for renovations in the 2021/22 Regional

Health Plan. Phase two includes:

- Increased capacity in the Child and Adolescent Rapid Assessment Clinic (CARAC) for additional children and youth to be able to receive a rapid psychiatric assessment. This will improve flow from, and wait times in, the CHED. This will also improve capacity to provide urgent consultation to staff in rural and remote areas regarding direct care of patients, thus reducing transfers to CHED.
- Further increased group therapy capacity and reduced wait times in ICATS.
- Further increased capacity and reduced wait times in OMHS.
- Further increased capacity and reduced wait times in ADSCY.
- Shared health has advised that they are currently interviewing for positions to enable capacity enhancement in these areas. These services were implemented in April 2021 (July 2021).
- Additionally, the Community Emergency Department Violence Intervention Program (CEDVIP) assists youth and young adults aged 14-29 who present with violence-related injuries to the HSC Adult and Child Emergency Departments. The CEDVIP team provides 24/7 on call coverage by seven Community Support Workers who meet youth at HSC and offer wrap around support in community. Program implementation began in March, 2020. Due to COVID, full implementation was delayed until May, 2020 (July 2021).

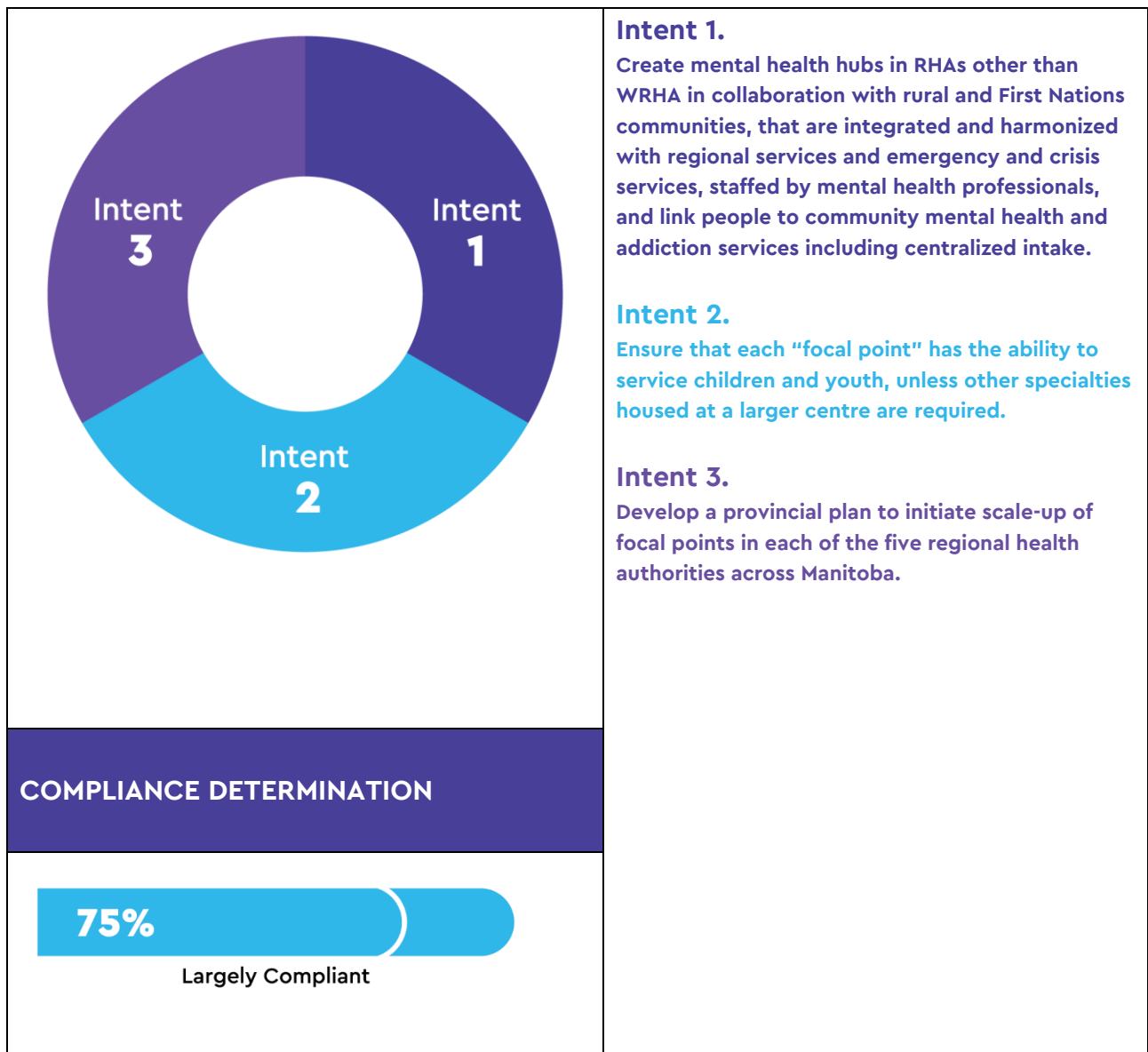
Analysis Summary: Progress continues to be made towards the implementation of this recommendation, including the creation of new positions, treatment and office spaces, and an additional access point (CEDVIP) for children and youth who present with violence-related injuries at the HSC's Emergency Departments. While some evidence of enhanced access for children and youth was provided, it would still be useful to undertake a full evaluation of admissions and services available, prioritizing the collection of disaggregated data to identify disparities, and for the results to be made public. In addition, there remains a need to develop and implement a separate child- and youth-centred specialized access point for children and youth in mental health crisis. As such, this recommendation remains Largely Compliant.

COMPLIANCE DETERMINATION

Suicide Aggregate – Recommendation 6

Recommendation Summary: Create mental health focal points outside of Winnipeg.

Primary Public Body: Manitoba Mental Health and Community Wellness



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	"Stop Giving Me a Number and Start Giving Me a Person": How 22 Girls Illuminate the Cracks in the Manitoba Youth Mental Health and Addiction System
Date Released:	5/7/2020
Full Recommendation: (including details)	<p>Recommendation Six:</p> <p>The Manitoba Advocate for Children and Youth recommends that the Department of Health, Seniors and Active Living, in collaboration with rural and First Nations communities in Manitoba, and the federal government, where applicable, implement recommendation 2.11 of the Virgo Report, as summarized below: In the RHAs other than the WRHA, create mental health hubs (as identified in the Peachey report), with a view to: (a) developing these as integrated regional mental health and substance use/addictions (SUA) "focal points", and (b) harmonizing a core set of regional services and supports to the hospital emergency departments and crisis services including: Screening, assessment, and support for SUA. 24/7 access to psychiatric consultation and acute assessment/treatment services. A core set of professionals in addition to psychiatrists with capacity in SUA support – e.g., clinical psychologists and psychiatric emergency nurses, Cross-trained mental health and addiction liaison workers co-located in hospital emergency departments/other hospital programs. Infrastructure and staffing to ensure safety and security of patients and staff. Links to community mental health and addictions services, including centralized intake (Virgo Planning, 2018; full wording may be found at p. 225).</p>
Intent(s) of Recommendation:	<p>1. Create mental health hubs in RHAs other than WRHA in collaboration with rural and First Nations communities, that are integrated and harmonized with regional services and emergency and crisis services, staffed by mental health professionals, and link people to community mental health and addiction services including centralized intake.</p>

	<p>2. Ensure that each “focal point” has the ability to service children and youth, unless other specialties housed at a larger centre are required.</p> <p>3. Develop a provincial plan to initiate scale-up of focal points in each of the five regional health authorities across Manitoba.</p>
Issue:	Mental Health and Addictions
Public Body	Manitoba Mental Health and Community Wellness
Dates of Previous Official Updates from Public Body:	September 6, 2023
	July 21, 2023
	June 30, 2022
	July 13, 2021
2. Compliance Determination	
Largely Compliant 0.75	The requirements have been met almost entirely and only negligible requirements remain to be implemented.
Self-Assessment	Fully Compliant
Previous Compliance Determination	Largely Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
<p>Intent 1: Create mental health hubs in RHAs other than WRHA in collaboration with rural and First Nations communities, that are integrated and harmonized with regional services and emergency and crisis services, staffed by mental health professionals, and link people to community mental health and addiction services including centralized intake.</p> <p>2023</p> <ul style="list-style-type: none"> • Mental Health reported on the Huddle youth hubs expansion. There are currently six Huddles in operation, two of which are located outside of Winnipeg (in Brandon and Selkirk). • Mental Health confirmed that eligibility for Huddles includes youth aged 12 to 29. • The Department also reported evidence of collaboration with local communities in the development of the Huddle model, including “in policies and procedures for the harmonization of regional emergency and crisis services.” • Another example of collaboration included the use of a Youth Advisory Council (YAC), and the engagement of over 100 youth in the Huddle branding process. 	

2022

- Manitoba Mental Health reported the opening of five new Huddle youth hubs. These hubs are staffed with various services for children and youth, including five core service delivery components: mental health counselling, substance use and addictions treatment and counselling, primary care, peer support, and other social services.
- One of these hubs is an Indigenous-led youth hub serving the Centennial and Point Douglas neighbourhoods, located at and led by Ka Ni Kanichihk, in Winnipeg.
- The second is a downtown-based youth hub located in the West Broadway neighbourhood of Winnipeg, led by the Canadian Mental Health Association. Primary partners include the Assembly of Manitoba Chiefs' Eagle Urban Transition Centre, Youth Employment Services, Family Dynamics, and the University of Winnipeg's Community Renewal Corporation.
- The third is a Westman region youth hub in downtown Brandon, led by the Westman Youth for Christ in partnership with the Brandon Friendship Centre, Career and Employment Youth Services (C.E.Y.S. Brandon), and the Addictions Foundation of Manitoba and supported by Prairie Mountain Health. The hub will continue to establish key partnerships driven by youth input, as well the Centre for Critical Studies of Rural Mental Health at Brandon University will support ongoing youth-centered evaluation of the hub.
- The fourth is a youth hub in downtown Selkirk serving Indigenous and non-Indigenous youth from Selkirk, Peguis First Nation and other Interlake communities, created by Peguis First Nation. Primary partners include the Interlake-Eastern Regional Health Authority, the Lord Selkirk School Division, the START Program, and the Royal Canadian Mounted Police.
- The fifth is a youth hub for families in St. Boniface/St. Vital neighbourhoods in Winnipeg, including francophone, newcomer, and Indigenous youth, led by Youville Clinic. Primary partners include Centre de santé de St. Boniface, Aulneau Renewal Centre, Marymound, Sara Riel, and Teen Stop Jeunesse.
- These hubs, however, do not cover all the five RHAs in Manitoba, and not all of these hubs are currently running all of the core services. Work is still underway with partners to secure necessary staff and resources for some of these services in some hubs. Until this is done, this intent cannot be said to have been fully met.
- The hubs work in partnership with various community services such as the Manitoba Adolescent Treatment Centre and the Addictions Foundation of Manitoba.

2021

- On March 18, 2021, the Manitoba government announced five new youth hub sites had been chosen through a call for proposals process. The original intent was to identify three new sites but because of the strength of the proposals received and

the high need for this type of model, two additional sites were selected. Both government and private donors contributed additional dollars to these two additional sites. Information on the five sites can be found here:

<https://news.gov.mb.ca/news/index.html?item=51010>.

- These hubs will serve to further expand a hub model for integrated youth services (IYS), including mental health and addiction services for youth and young adults. Manitoba's first youth hub providing integrated services was established at NorWest Co-Op Community Health in Winnipeg in 2017. The youth hubs will bring together mental health care, addiction services, primary care, peer support, and other social services in a way that provides access to integrated services for young people and their families in a youth-friendly, 'one-stop-shop' model.
- Of the five current hubs, only two are located outside of Winnipeg, with one in Selkirk and one in Brandon. This leaves the vast majority of children and youth in remote and rural locations without access to a hub and does not meet the criteria to have focal points in each of the five Regional Health Authorities (RHAs).

Intent 2: Ensure that each "focal point" has the ability to service children and youth, unless other specialties housed at a larger center are required.

2023

- Mental Health reported the Huddle expansion once again, with six Huddles currently in operation, two of which are led by Indigenous organizations and two of which are located outside of Winnipeg.
- Mental Health explained the Huddles include five core service delivery components: mental health counselling; substance use, addictions treatment, and counselling; primary care; peer support; and other social services, including education and employment support. They are reportedly staffed accordingly to deliver these services.
- Mental health reported that the Huddle is a partnership-based model, with various organizations and services coming together to deliver co-located services, which includes access to both community and formalized services, such as central intake.
- While it is clear what services each Huddle is meant to offer, no information was shared to help determine if these are actually operating as planned. It would be useful to see a breakdown of resources available (including staff) for each Huddle and some analysis as to whether these are sufficient to provide all the services with a high standard of care, and to see a long-term plan to ensure sustainability.
- When asked for more information in this regard, Mental Health noted that Huddle services vary between each hub and respond to community needs.
- Mental Health did clarify that ongoing opportunities for expansion and evaluation continue to be monitored. In 2023, the Huddles' reporting requirements were expanded in order to best evaluate each one's strengths and gaps in service. As

hubs continue reporting, Mental Health confirmed that youth needs in individual regions and opportunities for expansion will be continuously evaluated.

2022

- The hubs are planned to operate in five core service areas. Currently, not all the hubs are equipped with the necessary staff and resources to operate as planned.
- More information is needed about plans/timelines to bring these hubs to full functionality.

2021

- Shared Health, Inc. was mandated to develop Manitoba's Clinical and Preventive Services Plan (CPSP), the province's first five-year plan. This was created in collaboration with clinical providers and health system leaders to improve the delivery of health care across the province.
- The Integrated Network Model links local, district, intermediate, and provincial hubs and provides common service standards, capabilities and pathways for patients, providers, and health system managers in the province. According to Manitoba Health and Seniors Care (MHSC), the model will reconfigure care to improve the health and well-being of all Manitobans through provincial standards that elevate care and innovative approaches to ensure equitable care delivery. The key to success will be the development of appropriate, sustainable capacity at the local level and standardized pathways that streamline how patients and providers navigate the system. Provincial clinical governance will guide the development and monitoring of standards and pathways. By leading in connected care, MHSAL reported it will optimize a hybrid digital and in-person care experience for everyone. The network model is intended to facilitate the relationship between providers and the flow of patients in the province. It is not intended to create barriers or "gates" in the system. According to MHSAL, it will be used to create transparency and certainty of capabilities. MHSAL provided the following definitions:

Local Area Hub: Integrated network for prevention and screening, transitional care, community-based support and rehab, and primary and community care.

District Health Hub: Integrated network for low-moderate acuity, variable volume general medicine/surgery interventions/procedures, post acute treatment, and emergency services.

Intermediate Referral Hub: Integrated network for moderate acuity/complexity medicine, surgery, critical care, and emergency services.

Provincial Referral Hub: Provincial integrated network for high-acuity, highly complex medicine, surgery, critical care, and emergency services.

Intent 3: Develop a provincial plan to initiate scale-up of focal points in each of the five regional health authorities across Manitoba.

2023

- Mental Health confirmed the expansion of the Youth Huddle initiative to two new sites: one in the Northern region and one in the Southern region (for a total of eight sites).
- Mental Health clarified that although this project has experienced significant delays, the North and South Hubs initiative is still in progress.
- It would be useful to see the plans and timelines for the North and South Hub expansions.
- Once these two new hubs are fully operational, all five RHAs will have Huddle coverage.

2022

- Manitoba Mental Health reported that the Government of Manitoba will be investing startup funding in 2022/23 for two new Huddle youth hubs: one in the Northern Regional Health Authority and one in Southern Health-Sante Sud. These hubs, in addition to the five other hubs, would help scale-up focal points in the five regional health authorities across Manitoba.

2021

- On November 4, 2020, the Manitoba government announced that it would be investing \$1.55 million to expand services, with \$2.65 million in additional funding coming from the philanthropic partners to create new youth hub sites across the province: https://news.gov.mb.ca/news/print_index.html?item=49574. The youth hubs will bring together mental health care, addiction services, primary care, peer support and other social services in a way that provides access to integrated services for young people and their families in a youth-friendly, 'one-stop-shop' model.
- This scale up, however, only represents two (Winnipeg and Prairie Mountain Health) of the five RHAs.

Analysis Summary: Important steps continue to be taken to fulfill this recommendation. Six youth hubs are now operational, two of which are currently outside of Winnipeg. Although there have been delays, plans are still underway to create two additional hubs to cover the Northern and Southern Regional Health Authorities. Once there is evidence that (1) all eight youth hubs are adequately staffed, resourced, and functioning in all five core service areas, and (2) providing suitable coverage in all the Regional Health

Authorities in Manitoba, this intent will be fully met. Until then, the status determination of this recommendation remains Largely Compliant.

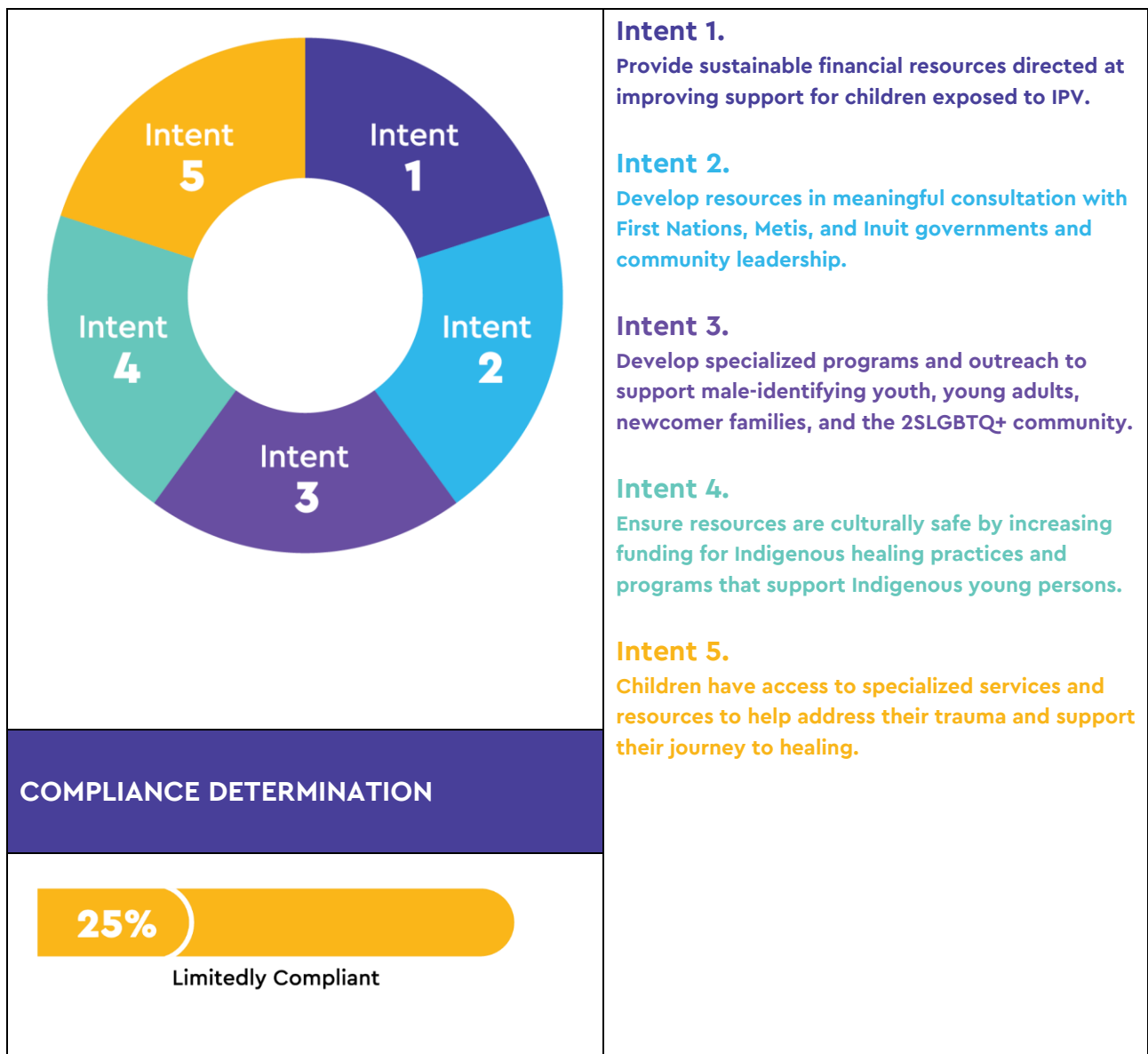
SECTION 5: Manitoba Health

COMPLIANCE DETERMINATION

IPV – Recommendation 5

Recommendation Summary: Wraparound supports for children exposed to intimate partner violence (IPV).

Primary Public Body: Manitoba Health



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Every Two Hours: A Special Report on Children and Youth Exposed to Intimate Partner Violence in Manitoba
Date Released:	6/22/2022
Full Recommendation: (including details)	<p>Recommendation Five: The Manitoba Advocate for Children and Youth recommends that the Minister of Health, in collaboration with the Ministers of Mental Health and Community Wellness, Families, and Justice, fund specialized resource(s) that provide culturally safe therapeutic supports for children exposed to intimate partner violence (IPV) to address their trauma and support their journey to healing, consistent with Article 39 of the <i>United Nations Convention on the Rights of the Child</i>.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • Resource development should follow meaningful consultation with First Nations, Metis, and Inuit governments and community leadership. • Resource(s) may be funded/located in a community-based organization. • Resource(s) will act as a point of referral for community agencies, Victim Services, CFS, and domestic violence shelters to provide specialized care to children exposed to IPV. • Include a continuum of supports that address various levels of acuity and consider both immediate and long-term supports. • Services include funding to Indigenous healing practices, including Elders and Knowledge Keepers, as well as programs that support Indigenous young people through land-based learning and healing. • Access should be barrier-free and avoid time limitations for children and youth who were exposed to IPV in their earlier child/youth years.

	<ul style="list-style-type: none"> Enhance specialized programming for male-identifying youth and young adults to address violence normalization and intergenerational violence. Promote services with specific outreach responses to newcomer families and the 2SLGBTQ+ community. Funding for services must be sustainable and any contracts/agreements with service providers should be multi-year and renewable to ensure consistency of services for young people.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Provide sustainable financial resources directed at improving support for children exposed to IPV. 2. Develop resources in meaningful consultation with First Nations, Metis, and Inuit governments and community leadership. 3. Develop specialized programs and outreach to support male-identifying youth, young adults, newcomer families, and the 2SLGBTQ+ community. 4. Ensure resources are culturally safe, by increasing funding for Indigenous healing practices and programs that support Indigenous young persons. 5. Children have access to specialized services and resources to help address their trauma and support their journey to healing.
Issue:	Intimate Partner Violence
Public Body	Manitoba Health
Dates of Previous Official Updates from Public Body:	May 31, 2023
2. Compliance Determination	
Limitedly Compliant 0.25	Actions taken only implement a small part of the recommendation, requirements are only fulfilled to a limited degree by actions taken, resulting in significant deficiency in implementation.
Self-Assessment	Partially Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
Intent 1: Provide sustainable financial resources directed at improving support for children exposed to IPV.	

2023

- In response to this recommendation, Manitoba Health included the same working group development information as provided in the response to recommendation 4 of this report. The working group is tasked with addressing both recommendations 4 and 5. The information is as follows:
 - The MACY-RAP committee reported that in February 2023, they were instructed to form a working group to engage with community partners to address coordination gaps for children exposed to intimate partner violence (IPV).
 - The IPV Interdepartmental Working Group had its Terms of Reference, (about which MACY provided feedback), approved on March 10, 2023, and subsequently held meetings through April and May. The working group has been tasked with connecting with stakeholders around what coordination gaps exist for children exposed to IPV, and what specialized resources are needed to support those children. This included an exploration of programs for young men to address violence normalization and intergenerational violence.
 - The feedback gained through engagement efforts will reportedly be used as the foundational information for addressing this recommendation.
 - A joint briefing note with amalgamated findings is expected as a first output of the working group.
 - The briefing note will be utilized by the Department of Mental Health and Community Wellness as a starting point to determine how financial resources are best directed.
 - The determination of resource allocation will require a planning assessment phase that will reportedly include a fulsome analysis, implementation planning, and funding approval.
- In addition to the working group information, Manitoba Health provided information on resources funded in 2023.
 - Joint funding through the Departments of Health, Justice, and Families was approved to be provided to Toba Centre for Children & Youth. Toba Centre is a charitable organization that coordinates a collaborative approach to child abuse response, including interviewing children who are victims of abuse or have witnessed violent crimes and providing support, advocacy, and coordination for children and their care providers. The funding is to be used to support current operations, and to support engagement with Indigenous communities and other stakeholders to develop a new model of community-based care.
 - An additional funding commitment from the Government of Manitoba was made towards Toba Centre's WE WILL capital campaign.

- Budget 2023 provided a funding commitment to policing resources for the establishment of a provincial-level integrated child abuse response. That investigative team will reportedly have police operational resources to investigate and address issues such as child abuse and children witnessing violence.
- It was also reported that Gender Equity Manitoba (GEM) entered into a bilateral agreement with the Government of Canada for the National Action Plan to End Gender-Based Violence, as of July 2023. Part of GEM's implementation plan for the first year of funding included \$300,000 focused on improving child-centred services for children and youth who have experienced or witnessed gender-based violence. This work is underway, including working with community organizations (Indigenous-led and newcomer serving) to co-design future work supported by this funding. GEM has been in the early stages of this work, including building relationships with partners doing work in this space, and scanning available services to prevent duplication.
- Overall, the working group and GEM are actively involved in the planning phase of the work to implement this recommendation in full.

Intent 2: Develop resources in meaningful consultation with First Nations, Metis, and Inuit governments and community leadership.

2023

- Towards this intent, Manitoba Health reiterated the information regarding the development of the IPV Interdepartmental Working Group.
- In addition, the following funding information was provided:
 - As part of a whole-of-government approach to address gender-based violence, the Government of Manitoba is providing \$600,000 from the Indigenous Reconciliation Initiatives Fund to Ma Mawi Wi Chi Itata to support two projects: "Empower Men Project" and the Manitoba MMIWG2S+ Partnership Implementation.
 - The goal of the Empower Men project is to educate men and boys about the demand side of sexual exploitation and its harms.
 - The Manitoba MMIWG2S+ Partnership Implementation Plan is an Indigenous-led project that will work to strategically implement the inquiry's MMIWG's *Calls for Justice* in a culturally relevant way. This is to be guided by a traditional Indigenous matriarchal governing body.

Intent 3: Develop specialized programs and outreach to support male-identifying youth, young adults, newcomer families, and the 2SLGBTQ+ community.

2023

- Same information as provided under intent 2.

Intent 4: Ensure resources are culturally safe, by increasing funding for Indigenous healing practices and programs that support Indigenous young persons.

2023

- Same information as provided under intent 2.

Intent 5: Children have access to specialized services and resources to help address their trauma and support their journey to healing.

2023

- Same information as provided under intent 1.

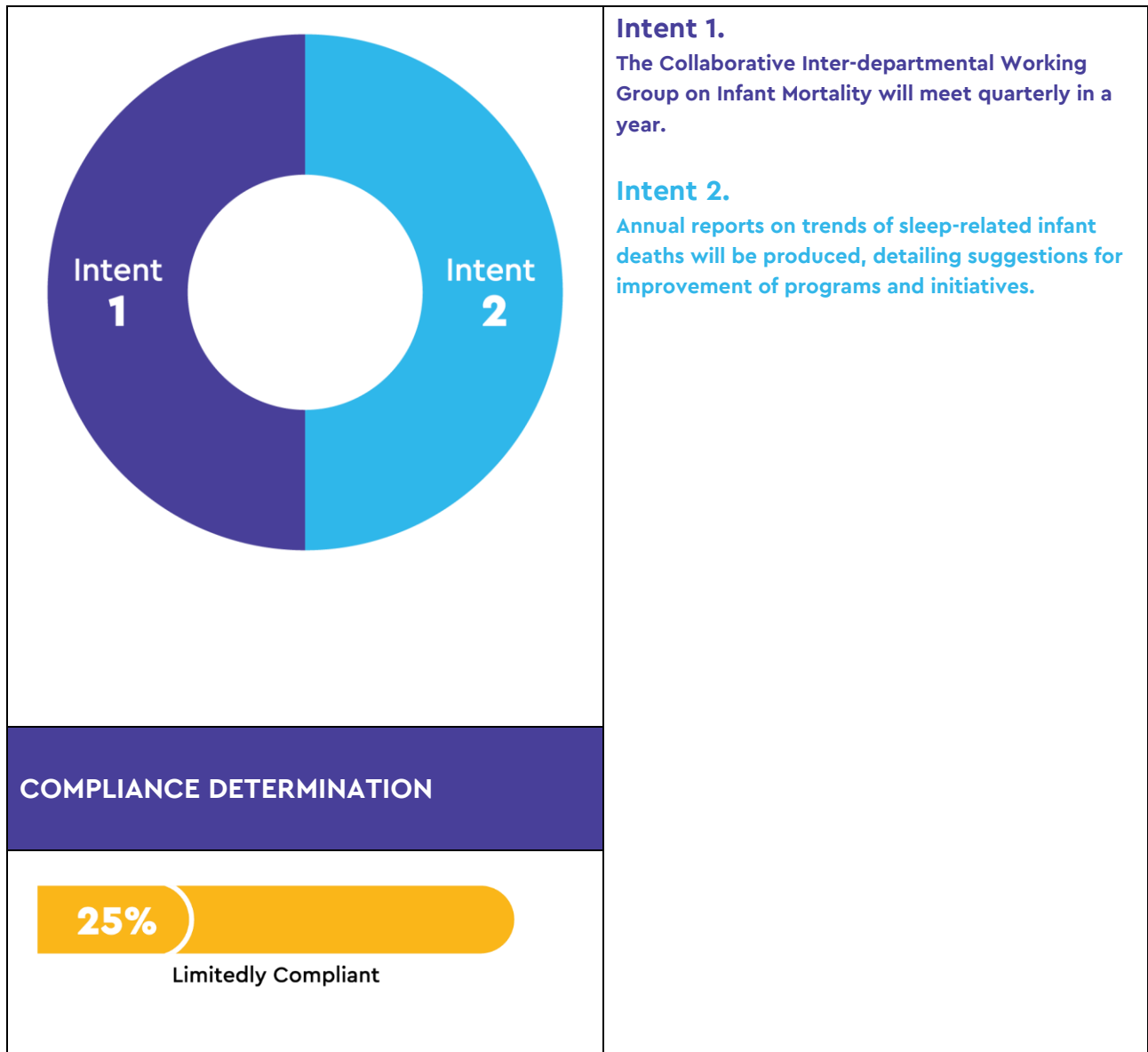
Analysis Summary: As indicated in the response to recommendation 4 of *Every Two Hours*, the development of the IPV Interdepartmental Working Group represents a strong commitment to the fulfillment of this recommendation. The working group has engaged in consultation and continues to work towards building relationships in order to fulfil the service gaps which inspired this recommendation. The additional funding put towards services for children and youth through Gender Equity Manitoba also indicates a positive step to increasing services for children and youth impacted by IPV. While the funding announcements provided as additional information with this recommendation response represent a commitment to relevant organizations and initiatives, there is not yet enough variety of funded programs and/or information to consider the intents of this recommendation as met. As indicated in the information provided by Manitoba Health, the work of both the IPV Working Group and GEM, is in the early planning stages. The work of the IPV Interdepartmental Working Group will be influential on future responses to this recommendation, and in identifying the necessary sustainable resource funding to bring this recommendation to completion. MACY is encouraged by the positive reception of this recommendation and the progress to come in future reporting periods. As there are many stages of planning and implementation to come, this recommendation is considered Limitedly Compliant.

COMPLIANCE DETERMINATION

Safe Sleep – Recommendation 11

Recommendation Summary: Reinstate the Collaborative Inter-Departmental Working Group on Infant Mortality.

Primary Public Body: Manitoba Health



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Safe and Sound: A Special Report on the Unexpected Sleep-Related Deaths of 145 Manitoba Infants
Date Released:	3/13/2020
Full Recommendation: (including details)	<p>Recommendation 11: The Manitoba Advocate for Children and Youth recommends that the Collaborative Inter-departmental Working Group on Infant Mortality be reinstated and review cases of sleep-related infant deaths quarterly to look at trends and leverage this information to create and implement interventions to prevent future deaths.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • The Collaborative Inter-departmental Working Group on Infant Mortality will meet quarterly in a year. • Annual reports on trends of sleep-related infant deaths will be produced, detailing suggestions for improvement of programs and initiatives.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. The Collaborative Inter-departmental Working Group on Infant Mortality will meet quarterly in a year. 2. Annual reports on trends of sleep-related infant deaths will be produced, detailing suggestions for improvement of programs and initiatives.
Issue:	Safe Sleep
Public Body	Manitoba Health
Dates of Previous Official Updates from Public Body:	July 21, 2023
	May 19, 2023
	June 30, 2022
	July 13, 2021
2. Compliance Determination	
Limitedly Compliant 0.25	Actions taken only implement a small part of the recommendation, requirements are only fulfilled to a limited degree by actions taken, resulting in significant deficiency in implementation.
Self-Assessment	Limitedly Compliant
Previous Compliance	Non-Compliant

Determination	
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
<p>Intent 1: The Collaborative Inter-departmental Working Group on Infant Mortality will meet quarterly in a year.</p> <p>2023</p> <ul style="list-style-type: none"> • The Department reported the Collaborative Inter-Departmental Working Group on Infant Mortality was paused in 2018 during health system transformation. A new Infant Mortality Advisory Group (IMAG) has been proposed to review infant mortality data/trends, and to recommend strategies to reduce infant mortality. • Manitoba Health reported the child and maternal death review processes are being transitioned from the College of Physicians and Surgeons of Manitoba to Shared Health, with a briefing note currently under review for ongoing funding of this work. Manitoba Health advised death review processes were significantly impacted by the pandemic and will be resumed once the new structures are in place. • The Department advised all infant deaths will be reviewed by the Child Health Standards Morbidity and Mortality Committee (CHSMM) with reporting of findings and recommendations to the Child Health and Women's Health Provincial Clinical Teams (PCTs). This committee will collaborate with relevant government and external stakeholders to review mortality reports and propose recommendations for the health system, as well as broader recommendations to other government departments to prevent future deaths. Collaborative advisory groups will be created for key priority issues, which include infant mortality. Once funding has been approved, these processes will be implemented, anticipated to start in the third and fourth quarter of 2023. The new IMAG will reportedly be created as an advisory group of the CHSMM committee. Invited members will include medical experts and stakeholders representing the life course approach to infant mortality (reflecting preconception, prenatal, and postpartum risk factors and strategies). The work of the previous Collaborative Interdepartmental Working Group will be refreshed, including requesting new data and finalizing the report drafted. • The Department reported it is anticipating a Terms of Reference for the advisory group, including reporting timelines, will be determined once the new Mortality Advisory Group is established. Work will reportedly start once funded and the new patient safety and quality structures are in place. <p>2022</p> <ul style="list-style-type: none"> • Manitoba Health reported that a committee has been set up to address this recommendation. • No further detail on compliance of this intent was provided. 	

2021

- As stated in the response from Manitoba Health and Seniors Care: "The Public Health Branch has been committed to responding to the current pandemic and will be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes."

Intent 2: Annual reports on trends of sleep-related infant deaths will be produced, detailing suggestions for improvement of programs and initiatives.

2023

- See details presented under intent 1 as it relates to the status of the working group. There is no substantive information to report at this time considering the group has yet to be finalized.

2022

- Manitoba Health reported that a committee has been set up to address this recommendation.
- No further detail on compliance of this intent was provided.

2021

- As stated in the response from Manitoba Health and Seniors Care: "The Public Health Branch has been committed to responding to the current pandemic and will be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes."

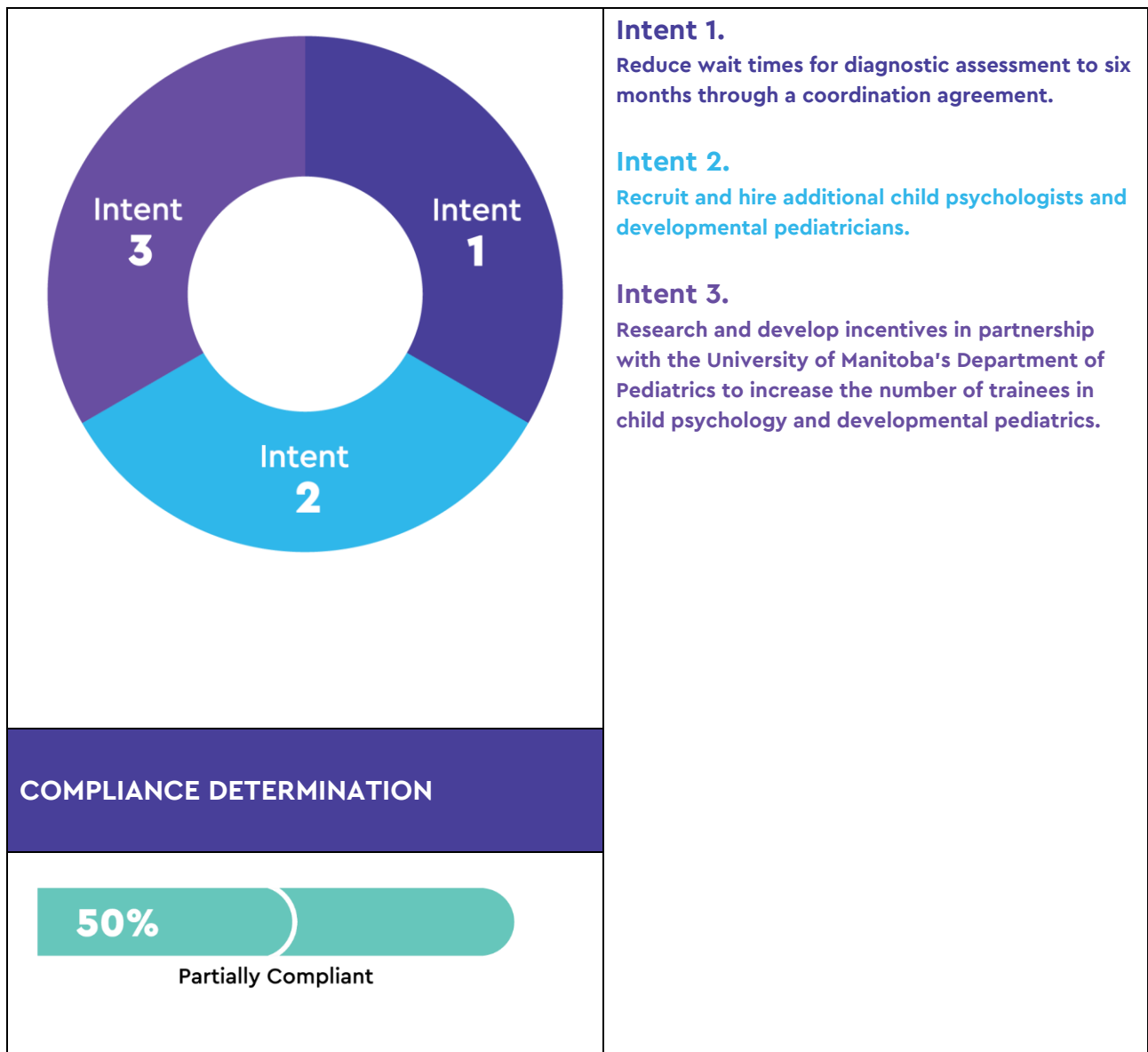
Analysis Summary: The Department reports a new Infant Mortality Advisory Group (IMAG) has been proposed to review infant mortality data/trends, and to recommend strategies to reduce infant mortality. A briefing note is currently under review and further developments are pending. Given some consideration has been given to this recommendation, improvements are noted since last year. As there is yet to be a finalized group and associated outputs, however, this recommendation is Limitedly Compliant.

COMPLIANCE DETERMINATION

Disability – Recommendation 3

Recommendation Summary: Reduce wait times for diagnostic assessments with a strategy to recruit and hire.

Primary Public Body: Manitoba Health



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Bridging the Gaps: Achieving Substantive Equality for Children with Disabilities in Manitoba
Date Released:	3/25/2021
Full Recommendation: (including details)	Recommendation Three: The Manitoba Advocate for Children and Youth recommends that Manitoba Health and Seniors Care, Shared Health Manitoba, and Regional Health Authorities work together to create and resource a financially sustainable coordination agreement to reduce wait-times for diagnostic assessment for children suspected of having a disability, with the goal of wait-times less than six months between referral and diagnosis.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Reduce wait times for diagnostic assessment to six months through a coordination agreement. 2. Recruit and hire additional child psychologists and developmental pediatricians. 3. Research and develop incentives in partnership with the University of Manitoba's Department of Pediatrics to increase the number of trainees in child psychology and developmental pediatrics.
Issue:	Disabilities
Public Body	Manitoba Health
Dates of Previous Official Updates from Public Body:	May 31, 2023
	June 30, 2022
2. Compliance Determination	
Partially Compliant 0.50	Actions taken only implement part of the recommendation. Important requirements have been met and the recommendation is acted upon, however, deficiencies remain.
Self-Assessment	Partially Compliant
Previous Compliance Determination	Limitedly Compliant
3. Rationale for Determination	
<i>(How did you reach this compliance determination)</i>	

Intent 1: Reduce wait times for diagnostic assessment to six months through a coordination agreement.

2023

- Manitoba Health reported that addressing the reduction of wait times for diagnostic assessments began with the establishment of the Diagnostic and Surgical Recovery Task Force in 2021 – created in response to addressing the diagnostic and surgical backlogs affected by the Covid-19 pandemic. Budget 2022 provided a commitment of \$110 million to address surgical and diagnostic waitlists. The commitment was further expanded by \$50 million in June 2022.
- This was then followed by the approval for funding for the Neurodevelopmental Services at the Rehabilitation Centre for Children in November 2022. The funding is for 18 months to be shared between the Child Development Clinic (CDC) and the Manitoba FASD Centre.
 - According to Manitoba Health: "This funding is intended to specifically address the current backlogs that create diagnostic assessment wait lists and as such, will serve to address the current wait times for children's diagnostic assessments. Since this funding was allotted, CDC has hired: 1.0 EFT Social Worker, 1.0 EFT secretary, 0.6 EFT Occupational Therapist, and plans to hire 2 Child Psychologists by Sept are in place. In addition, 0.4 EFT Occupational Therapist, 0.6 EFT Social Worker, casual SLP, and a 0.5 Follow-up Occupational Therapist, have been hired to support the reduction of the FASD wait times, and recently recruited a General Practitioner with specialized training in FASD. CDC also plans to recruit 0.6 EFT Clinic Assistant to support the team's work and increase in the number of appointments."
- The CDC has identified that, as of February 2023, wait times are approximately 14-17 months, with children identified as priority, or able to accept short notice appointments having wait times around 11 months. The number of children referred for assessments has increased year over year, which continues to impact the ability to address waitlists.
- They report it is their expectation that the investment identified in November 2022 will have a demonstrable impact on wait-times over the long term, but understandably that it has been difficult to see impact in the short-term.

2022

- Manitoba Health reported that there has been an upward trend in the number of children and youth being attended to.
- Manitoba Health reported that this increase means that measures taken may not reduce wait times but only imply that more children can be taken care of due to the increase in demand.

- Proposal for additional funding has been submitted.

Intent 2: Recruit and hire additional child psychologists and developmental pediatricians.

2023

- Manitoba Health reported the recent announcement of the [Health Human Resource Action Plan](#), which is intended to build upon ongoing strategies aimed at retaining, training, and recruiting health care providers across Manitoba. The action plan includes an investment of \$200 million to support the human resource needs of the healthcare sector through retaining staff, and adding 2,000 health-care providers to the public health system. This is to include child psychologists and developmental pediatricians.

2022

- No information was provided about efforts or actions put in place to comply with this intent.

Intent 3: Research and develop incentives in partnership with the University of Manitoba's Department of Pediatrics to increase the number of trainees in child psychology and developmental pediatrics.

2023

- Information found under response to intent 2.

2022

- No information was provided about efforts or actions put in place to comply with this intent.

Analysis Summary: Manitoba Health reported progress towards the implementation of the intents of this recommendation since 2022. Most significant is the provision of funding through the Diagnostic and Surgical Recovery Task Force to the Children's Development Clinic and Manitoba FASD Centre specifically for addressing diagnostic wait-times through those services. Funding has already been used towards the hiring of staff to address the current reported wait-times at CDC. In addition, a human resource funding strategy has been announced, which will include funding for the recruitment and retention of child psychologists and developmental pediatricians. There is acknowledgement of the significant work to come to reduce diagnostic wait-lists to the recommended level of this report. Further information on the impact of these announcements on wait-lists and the increase in availability of child psychologists and developmental pediatricians will be

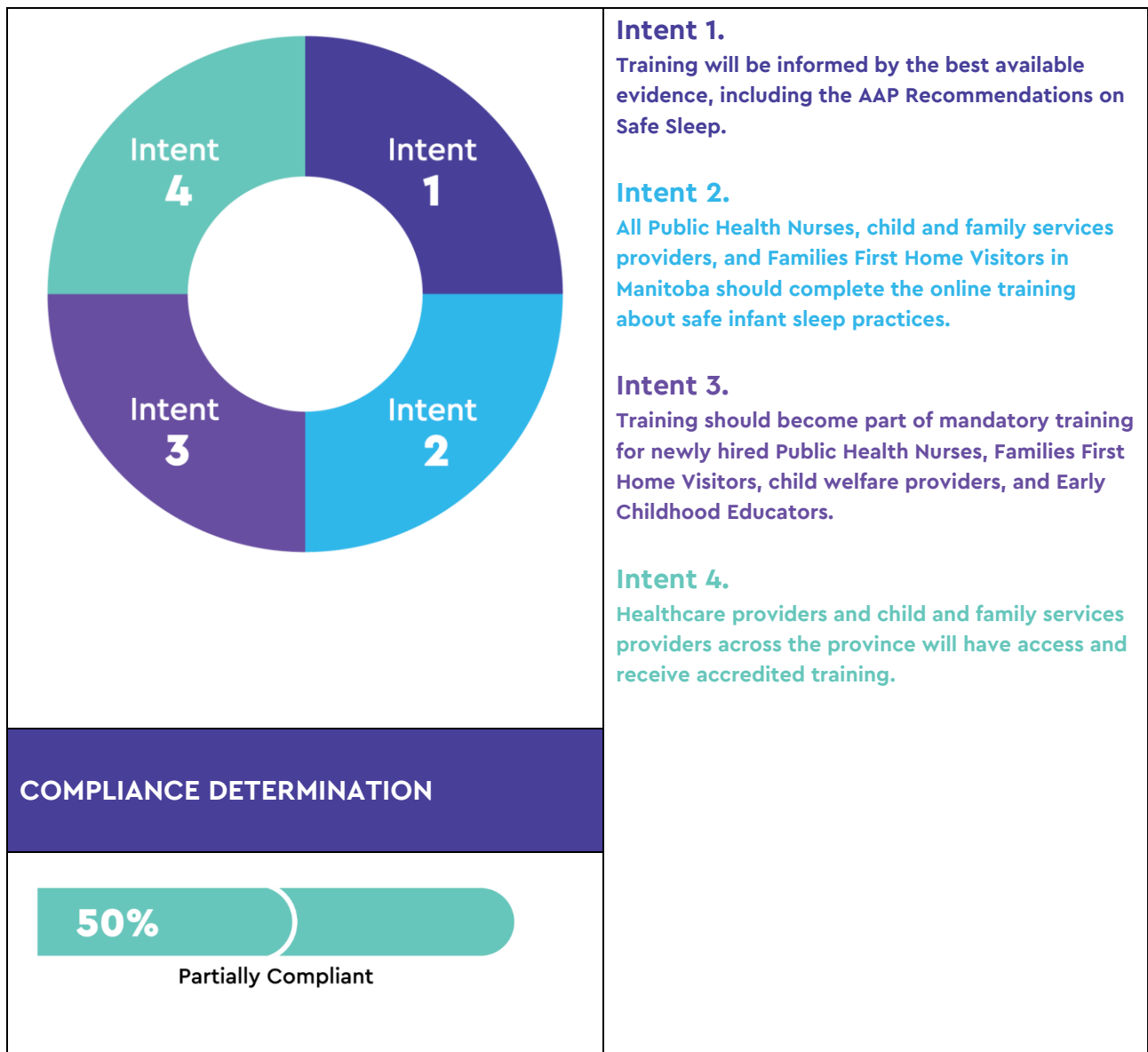
imperative moving forward. As important steps have been taken towards implementation, this recommendation is considered Partially Compliant.

COMPLIANCE DETERMINATION

Safe Sleep – Recommendation 6

Recommendation Summary: Develop an accredited online training module on safe infant sleep practices.

Primary Public Body: Manitoba Health.



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Safe and Sound: A Special Report on the Unexpected Sleep-Related Deaths of 145 Manitoba Infants
Date Released:	3/13/2020
Full Recommendation: (including details)	<p>Recommendation Six:</p> <p>The Manitoba Advocate for Children and Youth recommends that Manitoba Health, Seniors and Active Living, in partnership with the Assembly of Manitoba Chiefs' First Nations Health and Social Secretariat of Manitoba, develop an accredited online training module on safe infant sleep practices, accessible through the Shared Health Learning Management System (LMS).</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • Training will be informed by the best available evidence, including the AAP Recommendations on Safe Sleep. • All Public Health Nurses, child and family services providers, and Families First Home Visitors in Manitoba should complete the online training about safe infant sleep practices. • Training should become part of mandatory training for newly hired Public Health Nurses, Families First Home Visitors, child welfare providers, and Early Childhood Educators. • Healthcare providers and child and family services providers across the province will have access and receive accredited training.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Training will be informed by the best available evidence, including the AAP Recommendations on Safe Sleep. 2. All Public Health Nurses, child and family services providers, and Families First Home Visitors in Manitoba should complete the online training about safe infant sleep practices. 3. Training should become part of mandatory training for newly hired Public Health Nurses, Families First Home Visitors, child welfare providers, and Early Childhood

	<p>Educators.</p> <p>4. Healthcare providers and child and family services providers across the province will have access and receive accredited training.</p>
Issue:	Safe Sleep
Public Body	Manitoba Health
Dates of Previous Official Updates from Public Body:	May 19 2023
	June 30, 2022
	July 13, 2021
2. Compliance Determination	
Partially Compliant 0.50	Actions taken only implement part of the recommendation. Important requirements have been met and the recommendation is acted upon, however, deficiencies remain.
Self-Assessment	Partially Compliant
Previous Compliance Determination	Non-Compliant
3. Rationale for Determination	
<i>(How did you reach this compliance determination)</i>	
<p>Intent 1: Training will be informed by the best available evidence, including the AAP Recommendations on Safe Sleep.</p> <p>2023</p> <ul style="list-style-type: none"> The Department reported the Provincial Injury Prevention Team developed an educational webinar: "Safer Sleep for Infants - Introductory Webinar for Community Settings." A copy of this training material (via Microsoft PowerPoint) was provided to MACY for this assessment. Objectives of the webinar include: understanding the sudden infant death review process in Manitoba, the burden of Sudden Unexpected Infant Death, the social determinants that increase risk, sleep-related risk factors and prevention measures, and the role of the helping professional. The Department advised the webinar is informed by AAP recommendations and a Health Canada/CPS joint statement on Safe Sleep. The webinar was presented to Child and Family Services (CFS) providers as requested by the Department of Families/Government of Manitoba in November 2022. Following this presentation, the Department of Families consulted with the Injury Prevention Team and requested permission to utilize and adapt the webinar content to build an e-learning training module for CFS staff (with an aim to track who has completed the training). Consultation and collaboration occurred interdepartmentally with the input and expertise of the Injury Prevention Team, and an e-learning module was created by the Department of Families. The e-learning module was vetted through the Clinical Nurse Specialist on the Injury 	

Prevention Team, the Clinical Nurse Specialist/Indigenous Health Promotion Specialist, and Nurse Advisor from Strengthening Families/Maternal Child Health (FNHSSM), and feedback and considerations were received and shared.

- The Injury Prevention Teams made a request to the Department of Families in April 2023 to utilize the e-learning module as a Safe Sleep 101 e-learning course for health care providers and child care providers. The aim of the module is to provide foundational information for helping professions working with infants and families. Manitoba Health is currently awaiting approval from the Department of Families and vendor. Once approved, the content will be uploaded to the Learn Flex System (LMS) on Shared Health and promoted to relevant health care providers across the province.
- The Injury Prevention Coordinator presented to the WRHA Educators Council on March 22, 2023 to share an update on safe sleep initiatives and raise awareness about upcoming plans for education and helping professional training.

2022

- Manitoba Health reported that a committee has been set up to address this recommendation.
- There are discussions to adapt an existing safe sleep module.
- No information was provided about the module to be adapted, or whether a final decision has been taken on its adoption.

2021

- No information provided.

Intent 2: All Public Health Nurses, child and family services providers, and Families First Home Visitors in Manitoba should complete the online training about safe infant sleep practices.

2023

- As reported by the Department, all Public Health Nurses and Families First Home Visitors currently receive basic safe sleep education as part of their orientation and on-going training.
- The creation of a core safe sleep module was developed to standardize and update safe sleep training across the province. The first version of this module was created for the Department of Families and is being adapted for health care providers. As elaborated under intent 1, the Injury Prevention Teams made a request to the Department of Families in April 2023 to utilize the e-learning module as a Safe Sleep 101 e-learning course. Manitoba Health reported they are awaiting approval from the Department of Families and vendor. Once approved, Manitoba Health will obtain the course in a SCORM file format and post on the Learn Flex

System (LMS) to allow accessibility to provincial health care staff. The course would also be offered to the Community Health Faculties at the University of Manitoba and Red River Polytechnic for their use with health care and early childhood education students.

- In addition to the Safe Sleep 101 training course, subsequent modules are being developed for Public Health Nurses (PHNs), Families First Home Visitors (FFHVs) and Early Childhood Educators (daycare setting). The timeline for completion of the modules is to occur by the end of the first quarter for Public Health Nurses, nurses working in healthcare settings where infants sleep, and by the end of the second quarter for Families First Home Visitors and Early Childhood Educators.
- Direction and tracking of completion would come from the respective departments (e.g., Manitoba Health provides direction to Public Health Nurses and Families First Home Visitors). The Safer Sleep for Infants e-learning course is available on the CFS Learning Manitoba Website.

2022

- Manitoba Health reported that a committee has been set up to address this recommendation.
- There are discussions to adapt an existing safe sleep module.
- No information was provided about the module to be adapted, or whether a final decision has been taken on its adoption.

2021

- As identified in the Manitoba Health and Seniors Care response, training on safe sleep practices is currently provided to all Public Health Nurses and Families First Home Visitors.

Intent 3: Training should become part of mandatory training for newly hired Public Health Nurses, Families First Home Visitors, child welfare providers, and Early Childhood Educators.

2023

- Manitoba Health reported on June 8, 2023, that the Injury Prevention Team will present an update on safe sleep initiatives and resources at the Regional Directors Meeting. The team plans to recommend mandatory training for Public Health Nurses and Family First Home Visitors. The Department advised having the opportunity to present to leadership will facilitate the discussion at a provincial level regarding mandatory training and policy development. In addition, it will facilitate the identification and sharing of regional contacts in a community of practice. Rural and remote input will be received and connections established.

2022

- No information was provided on any new work being conducted in compliance of this intent.

2021

- Although no new work has been conducted on this recommendation, the response indicates a framework exists for standards of the work of Public Health Nurses through the utilization of the Provincial Public Health Nursing Standards since 2015.

Intent 4: Healthcare providers and child and family services providers across the province will have access and receive accredited training.**2023**

- Manitoba Health reported that, upon the finalization of the course, the Department will obtain the course in a SCORM file format and post it on the Learn Flex System (LMS) to make it accessible for provincial health care staff. The course would also be offered to the Community Health Faculties at the University of Manitoba and Red River Polytechnic for their use with health care and early childhood education students.
- The Department reported consultation with Organizational and Staff Development (OSD) and eHealth, as well as educational institutions, regarding platforms. The timeline for access reported is by the end of the second quarter.
- The Safer Sleep for Infants e-learning course is available on the CFS Learning Manitoba Website. Updates in this area did not come from Manitoba Health as it is outside of its scope.

2022

- No information was provided on any new work being conducted in compliance of this intent.

2021

- Although no new work has been conducted on this recommendation, the response indicates a framework exists for standards of the work of Public Health Nurses through the utilization of the Provincial Public Health Nursing Standards since 2015.
- As stated in the response from Manitoba Health and Seniors Care: "The Public Health Branch has been committed to responding to the current pandemic and will be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes."

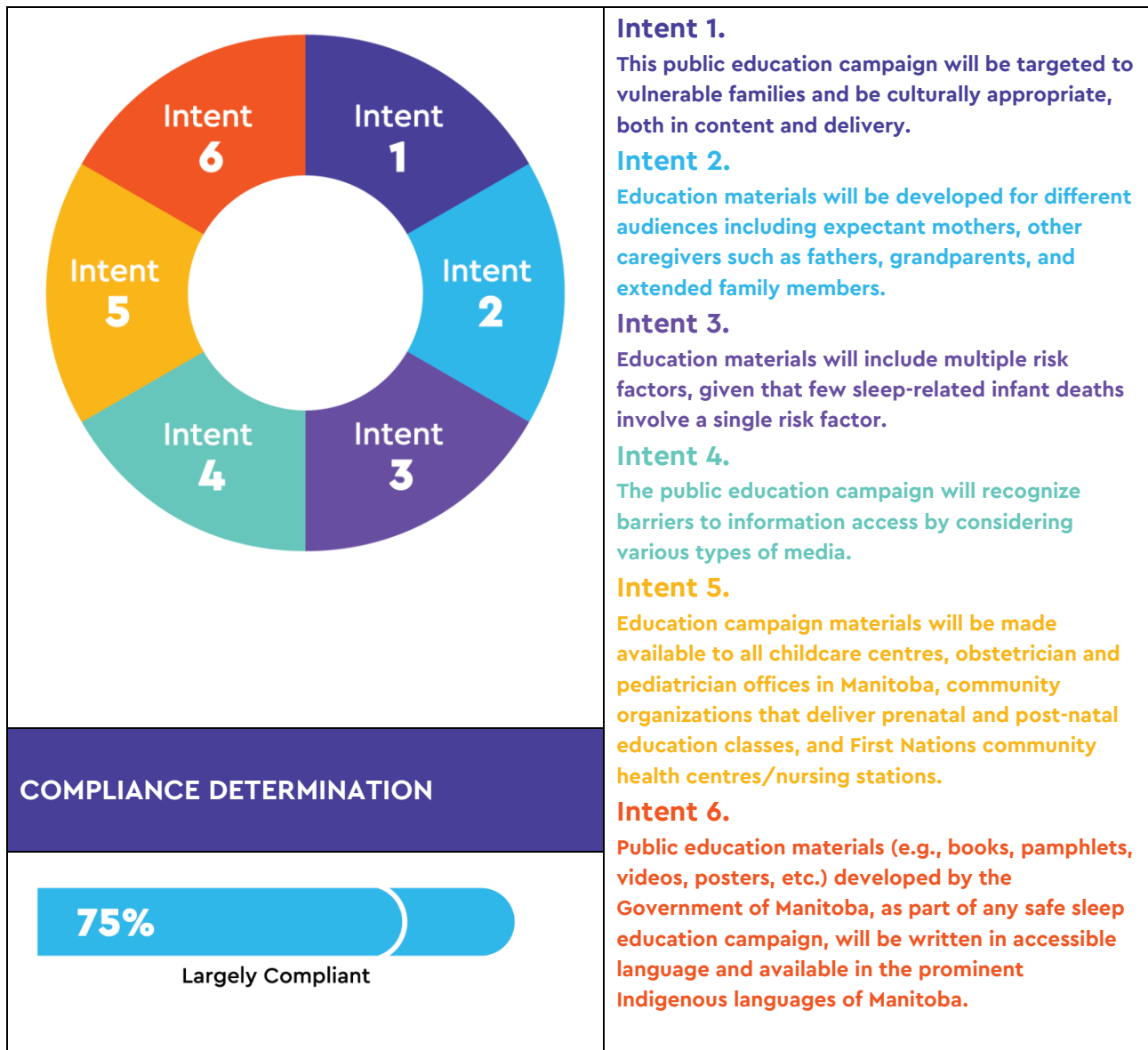
Analysis Summary: A core Safe Sleep e-learning module, informed by AAP recommendations, was developed. Currently, Manitoba Health is awaiting approval from the vendor and Department of Families to utilize the modules, promoting standardization of information across the province. Timelines for the completion of supplemental modules for Public Health Nurses, Nurses working in health care facilities where infants sleep, Families First Home Visitors, and Early Childhood Educators are established. Roll-out for helping professionals training is pending approval. Given training has been developed and the Department is in the process of making this available for staff learning, the compliance determination is assessed as Partially Compliant.

COMPLIANCE DETERMINATION

Safe Sleep – Recommendation 3

Recommendation Summary: Develop, implement, and evaluate a new public education campaign to raise awareness of the risk factors of sleep-related infant deaths.

Primary Public Body: Manitoba Health



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Safe and Sound: A Special Report on the Unexpected Sleep-Related Deaths of 145 Manitoba Infants
Date Released:	3/13/2020
Full Recommendation: (including details)	<p>Recommendation Three:</p> <p>The Manitoba Advocate for Children and Youth recommends that Manitoba Health, Seniors and Active Living, in partnership with the Assembly of Manitoba Chiefs' First Nations Health and Social Secretariat of Manitoba, and First Nations and Metis governments develop, carry out, and subsequently evaluate, a new public education campaign that raises awareness of the known risk factors associated with sleep-related infant deaths.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • This public education campaign will be targeted to vulnerable families and be culturally appropriate, both in content and delivery. • Education materials will be developed for different audiences including expectant mothers, other caregivers such as fathers, grandparents, and extended family members. • Education materials will include multiple risk factors, given that few sleep-related infant deaths involve a single risk factor. • The public education campaign will recognize barriers to information access by considering various types of media including print, radio, video, public advertisement, internet and social media. In particular, radio has been successfully used by the Sacred Babies program to reach remote communities. • Education campaign materials will be distributed to families during prenatal care, in hospital, at The Birth Centre, and by Public Health Nurses post-partum public health visits. Materials will also be made available to all childcare centres, obstetrician and pediatrician offices

	in Manitoba, community organizations that deliver prenatal and post-natal education classes, and First Nations community health centres/nursing stations.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. This public education campaign will be targeted to vulnerable families and be culturally appropriate, both in content and delivery. 2. Education materials will be developed for different audiences including expectant mothers, other caregivers such as fathers, grandparents, and extended family members. 3. Education materials will include multiple risk factors, given that few sleep-related infant deaths involve a single risk factor. 4. The public education campaign will recognize barriers to information access by considering various types of media including print, radio, video, public advertisement, internet and social media. In particular, radio has been successfully used by the Sacred Babies program to reach remote communities. 5. Education campaign materials will be distributed to families during prenatal care, in hospital, at The Birth Centre, and by Public Health Nurses post-partum public health visits. Materials will also be made available to all childcare centres, obstetrician and pediatrician offices in Manitoba, community organizations that deliver prenatal and post-natal education classes, and First Nations community health centres/nursing stations. 6. Public education materials (e.g., books, pamphlets, videos, posters, etc.) developed by the Government of Manitoba, as part of any safe sleep education campaign, will be written in accessible language and available in the prominent Indigenous languages of Manitoba.
Issue:	Safe Sleep
Public Body	Manitoba Health
Dates of Previous Official Updates from Public Body:	July 21, 2023
	May 19, 2023
	June 30, 2022
	July 13, 2021
2. Compliance Determination	
Largely Compliant	Requirements have been met almost entirely and only negligible

0.75	requirements remain to be implemented.
Self-Assessment	Largely Compliant
Previous Compliance Determination	Partially Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
Intent 1: Launch a public education campaign targeted towards vulnerable families and ensure it is culturally appropriate both in content and delivery.	
2023	
<ul style="list-style-type: none"> • As reported last year, a Project Manager was hired to coordinate the Safe Sleep Committee to address MACY recommendations concerning Safe Sleep. Committee minutes for 2023 meetings were shared with MACY, in addition to the Terms of Reference established/approved. The first meeting was held February 10, 2023, and evidence of follow-up meetings and associated agenda items were relayed. The committee is chaired by the Project Manager with membership including the following experts and specialists: Pediatric Medical Consultant for Injury Prevention, Healthy Families, Child Health; Medical Officer of Health, Government of Manitoba; Injury Prevention Specialists, Clinical Nurse Specialist/Indigenous Health Promotion Specialist, Nurse Advisor from Strengthening Families/Maternal Child Health (FNHSSM), Government of Manitoba Communications. New members include: Acting Provincial Director of Program and Policy – Population and Public Health Branch; Planning Analyst Manitoba Health, and Clinical Nurse Specialist, Injury Prevention Team. Effective May 15, 2023 the Coordinator for Healthy Parenting and Early Childhood Development will be joining the committee. • The Department utilizes <i>Safe Sleeping for Your Baby</i> (provided handout dated October 15, 2021). As previously shared with MACY in 2022, the resource was created in consultation with: WRHA Nursing Practice Council, FF Practice Council, Child Health Program, FNHSSM, Provincial Obstetrical Working Group, CFS, Healthy Start, College of Physicians and Surgeons of MB Child Health Standards Committee, and focus group of new/expectant parents. The Department contracted an Indigenous design firm (Vincent Design), consulted with Indigenous knowledge around traditional sleep practices, and utilized focus groups. The resource includes information on cradle boxes and moss bags, and has pictures representative of Manitoba families. • A social media campaign through the Government of Manitoba was released in March, 2023 for Safe Sleep Week to coincide with national partners in Safe Sleep education (Baby's Breath/Health Canada). These posts reinforced previous social media messaging (released October 2021, October 2022) with refreshed images and national partners. X (formerly Twitter) and Facebook are the social media 	

platforms used, and posts include links to information through the Healthy Parenting Winnipeg website. The Department reported the posts were designed to reach multiple infant care givers. The next social media campaign is ready for posting during June to September and includes information on safe sleep practices and summer travel. These posts will be re-posted during popular travel times.

- A short article on safe sleep for the Provincial Child Care Association Newsletter was written in October to promote awareness among providers at childcare facilities across Manitoba.
- The Committee reports plans to pursue a request to the Government of Manitoba to proclaim either a Manitoba Safe Sleep Awareness Week in March (to coincide with Canadian national organizations such as Health Canada, Parachute Canada, Baby's Breath Canada) or a Safe Sleep Month in October (to coincide with the USA and Australia's safe sleep campaigns). It was agreed a request will be submitted to Health Canada, Parachute Canada, and Baby's Breath Canada to consider Safe Sleep Awareness Month in October. If October is not preferred by national organizations, the Committee agreed with the plan to follow the direction of Canadian organizations and pursue Safe Sleep Week in March. An advisory note will be submitted once a decision is reached regarding Safe Sleep Month versus Safe Sleep Week.
- The Department advised public education will be evaluated on an on-going basis as resources and training are implemented. At present, evaluation of helping professional training in safe sleep will help demonstrate the potential reach of families. Ultimately, the evaluation including sleep-related infant deaths will require a provincial child death review process to be resumed. Briefing notes regarding funding of a new death review process are pending approval.
- Manitoba Health reported the Committee has continued discussions of alternative strategies for educational materials and raising awareness amongst diverse populations through creative messaging forums (e.g., messaging on crib sheets, songs, and books). The Committee feels strongly when looking at the development of educational materials, that it consider the feedback shared by the Nurse Advisor from Strengthening Families/Maternal Child Health (FNHSSM) and the Clinical Nurse Specialist/Indigenous Health Promotion Specialist. Further consultation and collaboration with community partners and groups is required.

2022

- A committee has been established to address this recommendation. The committee will utilize the "[Safe Sleeping for Your Baby](#)" resource (WRHA, 2021) in its work.
- The resource was developed in consultation with WHRA Nursing Practice Council, FF Practice Council, Postpartum Child Health Program, FNHSSM, Provincial Obstetrical Working Group, Child and Family Services Healthy Start, College of

Physicians and Surgeons of Manitoba, Child Health Standards Committee, and a focus group of new/expectant parents.

- The creators of the resource used an Indigenous design firm (Vincent Design) and consulted with Indigenous Knowledge Keepers around traditional sleep practices.
- A project manager was hired to lead this work, starting on October 14, 2022.
- A series of social media posts were released throughout the month of October through Government of Manitoba channels. The topics covered include safe sleep, planning baby's safe sleep space, baby's safe sleep space, sharing a room but not a bed, firm sleep space without extra bedding, back to sleep, overheating, keeping baby smoke free, breastfeeding, and grandparents/other caregivers.
- Our understanding is that Manitoba Health is advocating for the proclamation of Safe Sleep Awareness Month in Manitoba, which would make Manitoba the first Canadian province to participate in this monthly campaign.
- In addition, it was reported that Manitoba Government Communications intends on connecting with relevant stakeholders to share the department's core messaging.

2021

- As stated in the response from Manitoba Health, and Seniors Care: "The Public Health Branch has been committed to responding to the current pandemic and will be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes."

Intent 2: Develop education materials (pamphlets, webpages, etc.) for different audiences including expectant mothers, other caregivers such as fathers, grandparents, and extended family members.

2023

- As was reported in 2022, the Safe Sleeping for Your Baby resource is utilized to raise awareness, and is available on the Healthy Parenting Winnipeg website and through print format. The Department reports the Manitoba Government website meets current accessibility guidelines (includes alt-tags).
- In 2023, the resource was updated to include messaging for all infant caregivers, using the following text: "Share this information with grandparents, childcare, and anyone else who takes care of your baby." The Department reported the resources will be available for distribution in English and French this year.
- Facebook and X (formerly Twitter) posts referenced in intent 1 were designed to reach multiple infant caregivers. For instance, the March 2023 social media campaign included messaging awareness to grandparents, and the summer campaign included messaging for all infant caregivers related to safe sleep

surfaces when traveling (with links to the Government of Canada "Safe Sleep on the Go" page).

- Discussions are ongoing to explore the creation and development of a Safe Sleep Kit for the Healthy Baby Program targeting pregnant women and new families. This plan was deferred due to time constraints, though the Department reported plans to explore the development and partners for the initiative this year.
- The Department reported the creation of Safe Sleep posters with a QR code linking its website as a means to connect with multiple caregivers. The roll-out of the posters, to be available in health care offices, birthing centres, and health care facilities, is to coincide with the release and implementation of the health care training module this year.
- See intent 1 details regarding discussions for alternative strategies for educational materials, which would include multiple caregivers/audiences.
- Manitoba Health reported an updated bilingual Safe Sleep handout is in production that includes messaging for all caregivers, includes multiple risk factors, and will be provincially distributed and accessible in a variety of settings.

2022

- Manitoba Health reported that the "[Safe Sleeping for Your Baby](#)" resource (WRHA, 2021) will be adopted for the public education campaign.
- The department acknowledged that the resource is currently not suitable for different audiences.
- The committee has decided to modify the language to make it applicable to all caregivers.
- There are plans to engage in a media campaign where it will be reinforced that the information is for all who care for infants.

2021

- As stated in the response from Manitoba Health, and Seniors Care: "The Public Health Branch has been committed to responding to the current pandemic and will be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes."

Intent 3: Include multiple risk factors, given that few sleep-related infant deaths involve a single risk factor.

2023

- The Department continues to include multiple risk factors in their educational materials and associated posts, including sleep surface, swaddling, overheating, sleep position, objects in the sleep environment, bed sharing, and smoking.

2022

- Manitoba Health reported that multiple risk factors are included in the adopted resource "[Safe Sleeping for Your Baby](#)".
- Bed sharing information continues to be included in the resource.

2021

- As stated in the response from Manitoba Health, and Seniors Care: "The Public Health Branch has been committed to responding to the current pandemic and will be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes."

Intent 4: Make education materials (pamphlets, webpages, etc.) available via various forms of media.**2023**

- Manitoba Health reported its educational materials are available in print format, online, and through social media channels.
- The Department reported the creation of Safe Sleep posters with a QR code (to be posted in birthing centres and health care facilities) will occur this year.
- The Department reported other formats are being considered by its partner organization FNSSHM, who has consulted with Indigenous communities. Findings are that oral traditions should be supported, in addition to or in lieu of written material, so the creation of short videos and other non-print resources to address this need was reported.
- Manitoba Health reported the Committee has continued discussions of alternative strategies for educational materials, as noted in other intents.
- The Department reported the Committee members agree further consultation and collaboration with community partners, front-line workers, Indigenous groups, newcomers, and vulnerable families is important to gather information about effective and preferred communication for safe sleep education. Ideas shared include radio, podcast, posters, video, and info graphics. Further planning is required and will be ongoing at future committee meetings regarding the consultation process and groups.

2022

- Manitoba Health reported that there are plans to engage in a media campaign.

2021

- As stated in the response from Manitoba Health, and Seniors Care: "The Public Health Branch has been committed to responding to the current pandemic and will

be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes."

Intent 5: Distribution list for education materials (pamphlets, webpages, etc.).

2023

- Beginning in January of 2023, the Department reported its plan to distribute the "Safe Sleeping for Your Baby" resource to also include birthing centres, prenatal health providers, funded community health clinics, and resource centres.
- The Department reported the October 2021 launch list included: FNHSSM, community offices, Health Sciences Centre, St. Boniface General Hospital, Regional Health Authorities, Doctors Manitoba (prenatal and pediatricians), The Birthing Centre, Child and Family Services (shared with their network), and related health faculties (medicine, nursing, and occupational therapy). Manitoba Health reported a provincial fan-out of the updated resource will occur via e-mail to these contacts. The resource is available on the Healthy Parenting Winnipeg website, and is downloadable/printable.

2022

- No list was provided.

2021

- As stated in the response from Manitoba Health, and Seniors Care: "The Public Health Branch has been committed to responding to the current pandemic and will be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes."

Intent 6: Translate educational materials to Indigenous languages.

2023

- The Department reported recognition of this intent, though the Committee recommends further engagement with Indigenous communities on the creation of a safe sleep resource in a way that is culturally safe and reaches families whose infants are at higher risk for sleep-related deaths is needed. At this time, the Department does not have a specific timeline for the translation of the *Safe Sleeping for Your Baby* resource.
- Manitoba Health indicated purposeful discussion has been given to this recommendation. The Committee heard from FNHSSM that there are Indigenous youth who understand and speak the language of their communities, but may not

be fluent in reading the written word. It noted accessing printed resources in both English and Indigenous languages should be available, however, the message should not be printed in one language without a translation into English provided on the same resource.

- The Department reported an intent to pursue additional modes of communication, such as infographics, video, etc., which may help reach Indigenous families. Manitoba Health advised it will continue to support their Indigenous partners in addressing gaps with regular meetings and ongoing consultation, in addition to working with MACY.
- Manitoba Health reported further consultation and community engagement with Indigenous groups to assess barriers to information and on the creation of a safe sleep resource in a way that is culturally safe is underway.

2022

- Manitoba Health reported that a committee was set up in January 2022 to address MACY recommendations for safe sleep.
- The committee has decided not to translate to Indigenous languages, despite this service being available through GOM Communications.
- The committee's position is that a translated resource may not provide accessibility given the word/action dynamic of Indigenous languages.
- Manitoba Health reported that the committee is exploring alternative ways to engage with Indigenous communities that reflect the oral tradition, elders, and community knowledge. In the past, this has been in the form of radio ads, posters, in-person discussions, and Sacred Babies curriculum.

2021

- As stated in the response from Manitoba Health, and Seniors Care: "The Public Health Branch has been committed to responding to the current pandemic and will be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes."

Analysis Summary: As with last year, a committee has been established, and a project manager hired to lead public education work, with evidence of meetings and collaboration provided to MACY. Public education materials are expanding in their messaging and mediums. It is noteworthy the provided Safe Sleeping for Your Baby handout referenced does not include any information on how to access this material via social media channels, and the QR code at present brings users to a general 'Healthy Parenting Winnipeg' site. It is strongly encouraged the Department consider these modifications to increase accessibility. For intent 2, while primarily targeting immediate caregivers, the educational materials can be applicable to different audiences, and the

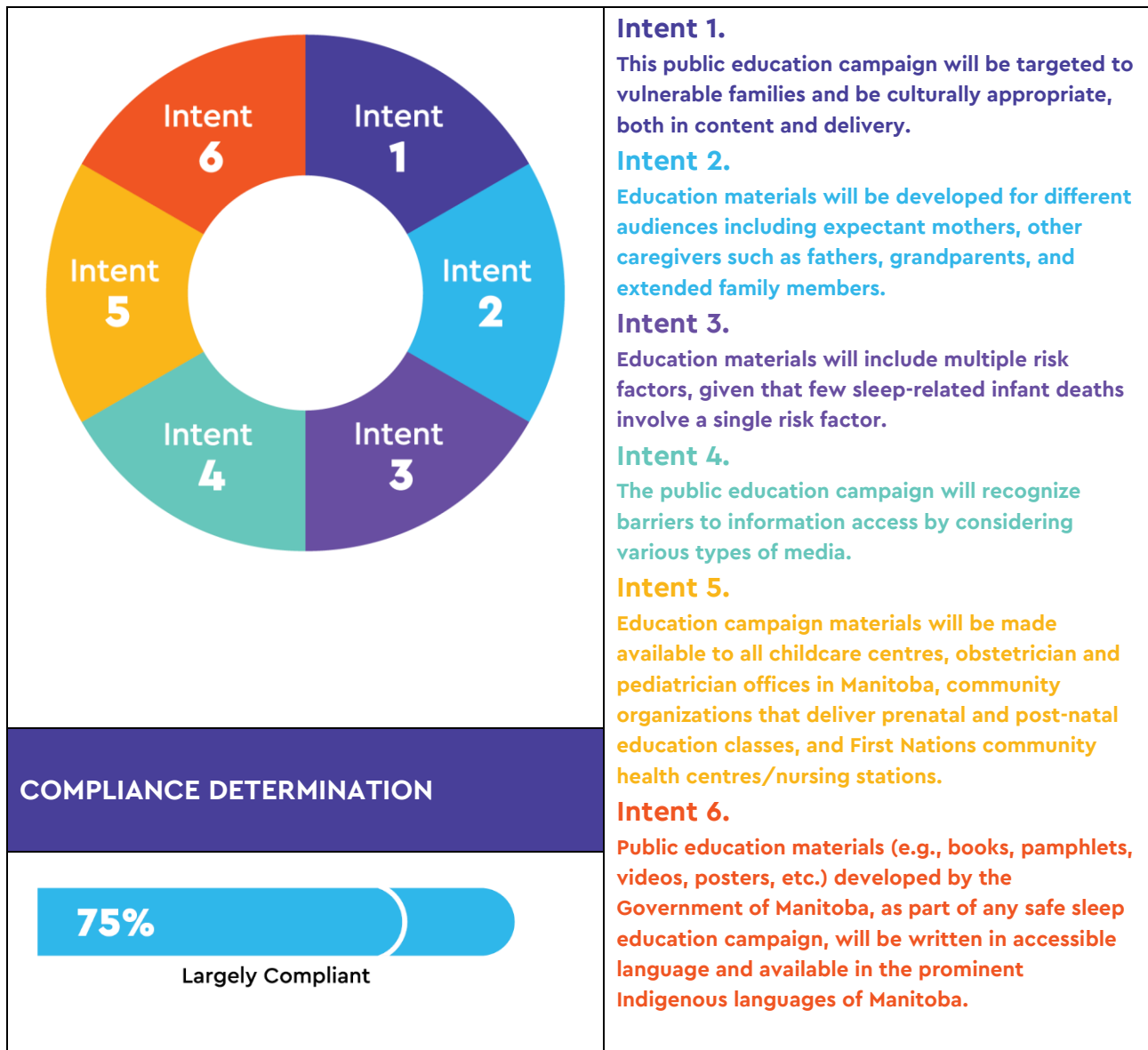
Department reports an updated (bilingual) handout is in production which includes messaging for all caregivers. MACY awaits confirmation of updated resources, though is encouraged by the progress. Multiple risk factors continue to be listed in the materials, meeting the intent of recommendation 3. Enhanced media forums are reported topics of discussion for the Committee. It is encouraged social media be more widely utilized through continual posts and increased use of applications to reach wider audiences who may not use Facebook and X (formerly Twitter). The recipients of the distribution list were provided this year, with anticipated expansion reported, serving to enhance compliance with intent 5. There is evidence of progress in the past year, and information indicates actions on the part of the Committee continue to increase, with expanding collaborative efforts. Further consultation and engagement with Indigenous groups is a reported intention of the Department, which may result in increased compliance with the outstanding recommendation 6, though the Department does not have a timeline of when translation may occur. The developments reported this year, and anticipated intentions relayed by the Department to continue to fulfill the intents of this recommendation, have resulted in an assessment of Largely Compliant.

COMPLIANCE DETERMINATION

Safe Sleep – Recommendation 4

Recommendation Summary: The new public education campaign must be informed by data and evidence on effective risk communication and behaviour modification.

Primary Public Body: Manitoba Health



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Safe and Sound: A Special Report on the Unexpected Sleep-Related Deaths of 145 Manitoba Infants
Date Released:	3/13/2020
Full Recommendation: (including details)	<p>Recommendation Four:</p> <p>The Manitoba Advocate for Children and Youth recommends that the public education campaign be informed by data presented in this report and by evidence on effective risk communication and behaviour modification.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • This public education campaign will be targeted to vulnerable families and be culturally appropriate, both in content and delivery. • Education materials will be developed for different audiences including expectant mothers, other caregivers such as fathers, grandparents, and extended family members. • Education materials will include multiple risk factors, given that few sleep-related infant deaths involve a single risk factor. • The public education campaign will recognize barriers to information access by considering various types of media including print, radio, video, public advertisement, internet and social media. In particular, radio has been successfully used by the Sacred Babies program to reach remote communities. • Education campaign materials will be distributed to families during prenatal care, in hospital, at The Birth Centre, and by Public Health Nurses post-partum public health visits. Materials will also be made available to all childcare centres, obstetrician and pediatrician offices in Manitoba, community organizations that deliver prenatal and post-natal education classes, and First Nations community health centres/nursing stations.
Intent(s) of	1. This public education campaign will be targeted to

Recommendation:	<p>vulnerable families and be culturally appropriate, both in content and delivery.</p> <ol style="list-style-type: none"> 2. Education materials will be developed for different audiences including expectant mothers, other caregivers such as fathers, grandparents, and extended family members. 3. Education materials will include multiple risk factors, given that few sleep-related infant deaths involve a single risk factor. 4. The public education campaign will recognize barriers to information access by considering various types of media including print, radio, video, public advertisement, internet and social media. In particular, radio has been successfully used by the Sacred Babies program to reach remote communities. 5. Education campaign materials will be distributed to families during prenatal care, in hospital, at The Birth Centre, and by Public Health Nurses post-partum public health visits. Materials will also be made available to all childcare centres, obstetrician and pediatrician offices in Manitoba, community organizations that deliver prenatal and post-natal education classes, and First Nations community health centres/nursing stations. 6. Public education materials (e.g., books, pamphlets, videos, posters, etc.) developed by the Government of Manitoba, as part of any safe sleep education campaign, will be written in accessible language and available in the prominent Indigenous languages of Manitoba.
Issue:	Safe Sleep
Public Body	Manitoba Health
Dates of Previous Official Updates from Public Body:	July 21, 2023
	May 19, 2023
	June 30, 2022
	July 13, 2021
2. Compliance Determination	
Largely Compliant 0.75	Requirements have been met almost entirely and only negligible requirements remain to be implemented.
Self-Assessment	Largely Compliant
Previous Compliance Determination	Partially Compliant

3. Rationale for Determination

(How did you reach this compliance determination)

Intent 1: Launch a public education campaign targeted towards vulnerable families and ensure it is culturally appropriate both in content and delivery.

2023

- The Department reported the Safe Sleep Committee was coordinated to address MACY recommendations concerning safe sleep. Further detail on specifics is noted in the compliance determination form for recommendation 3.
- The Committee utilizes the *Safe Sleeping for Your Baby* resource, which communicates the risks of unsafe sleep and offers varied alternatives to ensure safe sleeping habits. Content is presented in written and picture formats. The resource was created in consultation with experts including WRHA Nursing Practice Council, FF Practice Council, Child Health Program, FNHSSM, Provincial Obstetrical Working Group, CFS, Healthy Start, College of Physicians and Surgeons of MB Child Health Standards Committee, and a focus group of new/expectant parents.
- The educational material presents an array of varied safe sleep options which may mitigate risks for families with fewer resources (e.g., conversion of a drawer, basket, box, etc., into a safe sleep space). A summer campaign was reported which includes messaging for caregivers to utilize when travelling away from their primary sleep location.

2022

- A committee has been established to address this recommendation. The committee will utilize the "[Safe Sleeping for Your Baby](#)" resource (WRHA, 2021) in its work.
- The resource was developed in consultation with WHRA Nursing Practice Council, FF Practice Council, Postpartum Child Health Program, FNHSSM, Provincial Obstetrical Working Group, Child and Family Services Healthy Start, College of Physicians and Surgeons of Manitoba, Child Health Standards Committee, and a focus group of new/expectant parents.
- The creators of the resource contracted an Indigenous design firm (Vincent Design) and consulted with Indigenous Knowledge Keepers around traditional sleep practices.
- A project manager was hired to lead this work, starting on October 14, 2022.
- A series of social media posts were released throughout the month of October through Government of Manitoba channels. The topics covered include safe sleep, planning baby's safe sleep space, baby's safe sleep space, sharing a room but not a bed, firm sleep space without extra bedding, back to sleep, overheating, keeping baby smoke free, breastfeeding, and grandparents/other caregivers.

- Our understanding is that Manitoba Health is advocating for the proclamation of Safe Sleep Awareness Month in Manitoba, which would make Manitoba the first Canadian province to participate in this monthly campaign.
- In addition, it was reported that Manitoba Government Communications intends on connecting with relevant stakeholders to share the department's core messaging.

2021

- As stated in the response from Manitoba Health, and Seniors Care: "The Public Health Branch has been committed to responding to the current pandemic and will be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes."

Intent 2: Develop education materials (pamphlets, webpages, etc.) for different audiences including expectant mothers, other caregivers such as fathers, grandparents, and extended family members.

2023

- The Department reported it modified their resource to include the following text: "Share this information with grandparents, childcare, and anyone else who takes care of your baby." Of note, a link to ensure this updated content is publicly available online, and/or physical copies of print resources, is required to confirm.
- Additional details are noted in the compliance determination form for recommendation 3.
- The Department reports continued discussions are required for alternative strategies for educational materials and raising awareness among diverse populations, including all infant caregivers.

2022

- Manitoba Health reported that the "[Safe Sleeping for Your Baby](#)" resource (WRHA, 2021) will be adopted for the public education campaign.
- The department acknowledged that the resource is currently not suitable for different audiences.
- The committee has decided to modify the language to make it applicable to all caregivers.
- There are plans to engage in a media campaign where it will be reinforced that the information is for all who care for infants.

2021

- As stated in the response from Manitoba Health, and Seniors Care: "The Public Health Branch has been committed to responding to the current pandemic and will

be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes.”

Intent 3: Include multiple risk factors, given that few sleep-related infant deaths involve a single risk factor.

2023

- The Department continues to include multiple risk factors in its educational materials and associated posts, including sleep surface, swaddling, overheating, sleep position, objects in the sleep environment, bed sharing, and smoking. Behavioural modification information includes smoking cessation, safer swaddling, choosing safe sleep sacks, alternate safe sleep options, and safer bed-sharing.

2022

- Manitoba Health reported that multiple risk factors are included in the adopted resource "[Safe Sleeping for Your Baby](#)".
- Bed sharing information continues to be included in the resource.

2021

- As stated in the response from Manitoba Health, and Seniors Care: “The Public Health Branch has been committed to responding to the current pandemic and will be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes.”

Intent 4: Make education materials (pamphlets, webpages, etc.) available via various forms of media.

2023

- Manitoba Health reported its educational materials are available in print format, online, and through social media channels. Additional specifics and reported plans are outlined in the compliance determination form for recommendation 3.

2022

- Manitoba Health reported that there are plans to engage in a media campaign.

2021

- As stated in the response from Manitoba Health, and Seniors Care: “The Public Health Branch has been committed to responding to the current pandemic and will be able to return to regular and routine work such as responding to these

recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes."

Intent 5: Distribution list for education materials (pamphlets, webpages, etc.).

2023

- The Department reported the October 2021 launch list included: FNHSSM, community offices, Health Sciences Centre, St. Boniface General Hospital, Regional Health Authorities, Doctors Manitoba (prenatal and pediatricians), The Birthing Centre, Child and Family Services (shared with their network), and related health faculties (medicine, nursing and occupational therapy). Manitoba Health reported a provincial fan-out of the updated resource will occur via e-mail to these contacts.

2022

- No list was provided.

2021

- As stated in the response from Manitoba Health, and Seniors Care: "The Public Health Branch has been committed to responding to the current pandemic and will be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes."

Intent 6: Translate educational materials to Indigenous languages.

2023

- At this time, there is no reported timeline to translate existing resources into any Indigenous languages. See information provided in the analysis sheets for recommendations 3 and 5 for further detail on this intent.

2022

- Manitoba Health reported that a committee was set up in January 2022 to address MACY recommendations for safe sleep.
- The committee has decided not to translate to Indigenous languages, despite this service being available through GOM Communications.
- The committee's position is that a translated resource may not provide accessibility given the word/action dynamic of Indigenous languages.
- Manitoba Health reported that the committee is exploring alternative ways to engage with Indigenous communities that reflect the oral tradition, elders, and community knowledge. In the past, this has been in the form of radio ads, posters, in-person discussions, and Sacred Babies curriculum.

2021

- As stated in the response from Manitoba Health, and Seniors Care: "The Public Health Branch has been committed to responding to the current pandemic and will be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes."

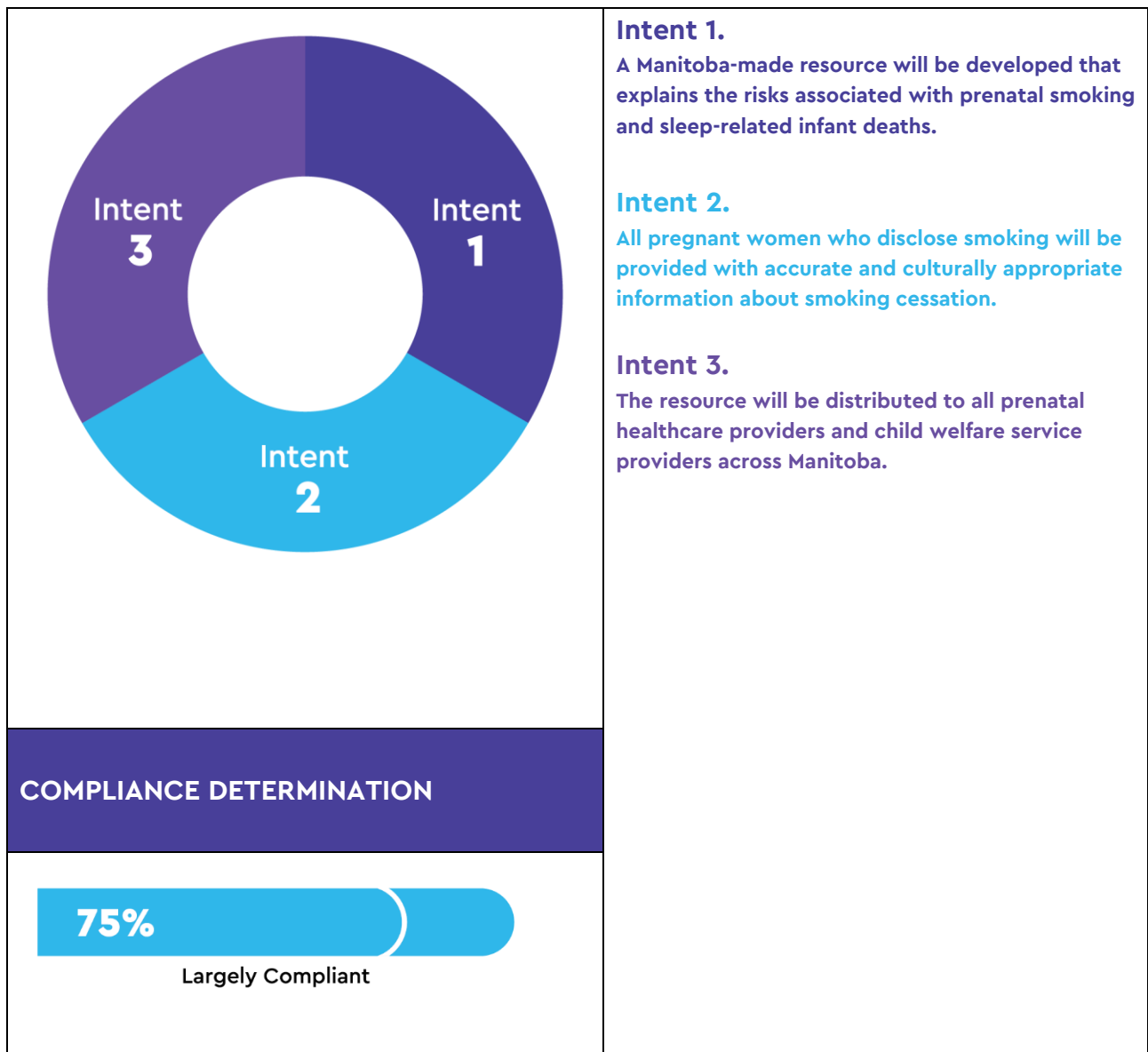
Analysis Summary: A Safe Sleep Committee has been established, and a project manager hired to lead public education work, with evidence of meetings and collaboration provided to MACY. Members of the Committee come from diverse areas of expertise, and there is evidence of consultations and evidence-informed content comprising the published materials. Public education materials are expanding in their messaging and mediums. While primarily targeting immediate caregivers, the educational materials are applicable to different audiences, and the department reports an updated (bilingual) handout is in production which includes messaging for all caregivers. Multiple risk factors are communicated and options for behavioural modifications are listed in the materials. Enhanced media forums have been established with more mediums in the process of development through committee discussions. The recipients of the distribution list were provided this year, with anticipated expansion reported. There is evidence of progress in the past year, and information indicates actions by the Committee continue to increase, with expanding collaborative efforts. Further consultations and engagement with Indigenous groups is a reported intention of the Department, which may result in increased compliance with recommendation 6. The developments reported this year, and anticipated intentions relayed by the Department to continue to fulfill the intents of this recommendation, have resulted in an assessment of Largely Compliant.

COMPLIANCE DETERMINATION

Safe Sleep – Recommendation 7

Recommendation Summary: Develop a smoking cessation resource for expectant mothers.

Primary Public Body: Manitoba Health



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Safe and Sound: A Special Report on the Unexpected Sleep-Related Deaths of 145 Manitoba Infants
Date Released:	3/13/2020
Full Recommendation: (including details)	<p>Recommendation Seven:</p> <p>The Manitoba Advocate for Children and Youth recommends that Manitoba Health, Seniors and Active Living, in consultation with the Assembly of Manitoba Chiefs' First Nations Health and Social Secretariat of Manitoba, develop a smoking cessation resource that prenatal healthcare providers and child welfare service providers can make available to expectant mothers.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • A Manitoba-made resource will be developed that explains the risks associated with prenatal smoking and sleep-related infant deaths. • All pregnant women who disclose smoking will be provided with accurate and culturally appropriate information about smoking cessation. • The resource will be distributed to all prenatal healthcare providers and child welfare service providers across Manitoba.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. A Manitoba-made resource will be developed that explains the risks associated with prenatal smoking and sleep-related infant deaths. 2. All pregnant women who disclose smoking will be provided with accurate and culturally appropriate information about smoking cessation. 3. The resource will be distributed to all prenatal healthcare providers and child welfare service providers across Manitoba.
Issue:	Safe Sleep
Public Body	Manitoba Health
Dates of Previous	July 21, 2023

Official Updates from Public Body:	May 19, 2023
	June 30, 2022
	July 13, 2021
2. Compliance Determination	
Largely Compliant 0.75	Actions taken meet the majority of requirements for implementation, only negligible requirements remain.
Self-Assessment	Largely Compliant
Previous Compliance Determination	Limitedly Compliant
3. Rationale for Determination (How did you reach this compliance determination)	
Intent 1: A Manitoba-made resource will be developed that explains the risks associated with prenatal smoking and sleep-related infant deaths.	
2023	
<ul style="list-style-type: none"> • The Department maintains its Committee views the 'Keep Baby Smoke-free Before and After Birth' portion of the <i>Safe Sleeping for Your Baby</i> resource as meeting this need, rendering it unnecessary to create an additional resource. The cited resource includes information on remaining smoke-free before and after birth, and directs the reader to contact their healthcare provider or the Smoker's Helpline for assistance. Also contained is information on how to reduce the risk for those who are smokers, which includes smoking outside, washing hands, and changing clothes before holding a baby. • Manitoba Health cited the existing <i>Smoking and Pregnancy</i> resource published by the Healthy Baby program/Manitoba Health; at present, however, there is nothing in this resource which directly cites the relationship between smoking and sleep-related infant deaths. The Department reported an intention to add one or two bullets about the relationship between smoking and SIDS to this resource, and use the same language in the helping professionals core training module. Completion of this update is planned for this year. • Manitoba Health will promote the updated and rebranded resource via email to all listed on their distribution list (which includes FNHSSM Strengthening Families Maternal Child Health, Community offices, Health Sciences Centre, St. Boniface General Hospital, Regional Health Authorities, Doctors Manitoba [prenatal and pediatricians], The Birthing Centre, Child and Family Services [shared with their network], and related health faculties [medicine, nursing, and occupational therapy]). The email will include information noting changes to the resource and directions on how to order materials. A draft letter template is under development. • The Department reported at the May 5, 2023 Committee meeting, it was suggested to explore the creation and development of a Safe Sleep Kit for the 	

Healthy Baby Program targeting pregnant women and new families throughout the province. Sleep-related risk factors and prevention measures, including smoking, will reportedly be included. In addition, the plan is to explore the development of the initiative and to establish initiative partners by the end of the second quarter.

- Of note, at the May 5, 2023 Safe Sleep Committee meeting, members reflected on the importance of considering other contaminants outside of smoking such as chemicals in the home, vaping, air control, wood stoves, and cannabis. There is discussion to review the literature and to consider the inclusion of these items in future safe sleep education by the fourth quarter.

2022

- Manitoba Health reported that a committee has been set up to address this recommendation.
- The "Keep Baby Smoke-free Before and After Birth" section of the "[Safe Sleeping for Your Baby](#)" resource (WRHA, 2021) was offered as an alternative that meets this need.
- More information and/or evidence of action taken by the committee to update existing resources in furtherance of this intent and about the proposed alternate solution are needed.

2021

- No information provided.

Intent 2: All pregnant women who disclose smoking will be provided with accurate and culturally appropriate information about smoking cessation.

2023

- Manitoba Health indicated smoking cessation support and resources are routinely provided by health care providers in a variety of settings and across the province as an important aspect of healthy pregnancy and prenatal care. There are standards of practice for different providers to include smoking cessation coaching and health behaviour change.
- The Safe Sleep Committee summarized the following additional considerations as they pertain to this intent: a) There are higher rates of smoking among Indigenous populations, and findings indicate smoking cessation resources are generally ineffective for these groups; b) Smoking is strongly related to the social determinants of health, and paper resources place the burden on the individual and are not considered best practice; c) Any caregiver may smoke (not just the mother), and a resource designated specifically for the mother does not suffice; d) There are many smoking cessation resources that currently exist in Manitoba; e)

The safe sleep resource includes information on remaining smoke-free before and after birth, and distribution includes prenatal healthcare providers and child welfare service providers as recommended by MACY; and, f) The Safe Sleep and Smoke Free Home joint campaign (2011, though the committee may revisit this campaign for the future) was designed for Public Health Nurses and Families First Home Visitors, who provided a booklet and a magnet/door tag during discussions about smoking and safe sleep.

- The Department's described Sleep 101 e-learning course for professionals working with infants/families includes information about smoking and how this is a factor in sleep-related infant deaths. This includes information professionals can share with their clients regarding how smoke exposure (pre- and/or post-birth) is related to increased risks. Professionals are encouraged to share information with parents, initiate referrals to smoking cessation programs, and if applicable, encourage harm reduction approaches. The roll-out of the training is to occur by the end of the first quarter for Public Health Nurses, and by the end of the second quarter for Families First Home Visitors and Early Childhood Educators.
- Additionally, at the May 5, 2023 committee meeting, it was suggested to explore the creation and development of a Safe Sleep Kit for the Healthy Baby Program targeting pregnant women and new families throughout the province. Sleep-related risk factors and prevention measures, including smoking, will be included. The plan is to explore development and establish partners in the initiative this year.

2022

- No information was provided on efforts to comply with this intent.

2021

- Through the Provincial Public Health Nursing Standards, Manitoba's Public Health nurses are currently provided materials to discuss the use of tobacco with patients.

Intent 3: The resource will be distributed to all prenatal healthcare providers and child welfare service providers across Manitoba.

2023

- For refined material distribution, Manitoba Health reported the same plan for distribution will be utilized as when the *Safe Sleeping for Your Baby* resource was initially launched in October, 2021. The distribution list includes: FNHSSM, community offices, Health Sciences Centre, St. Boniface General Hospital, Regional Health Authorities, Doctors Manitoba (prenatal and pediatricians), The Birthing Centre, Child and Family Services (shared with their network), and related health faculties (medicine, nursing, and occupational therapy). The resource is also available on the Healthy Parenting Winnipeg website, and the existing *Smoking*

and Pregnancy information is also available online.

2022

- Manitoba Health reported that work is underway to brand and distribute the "Safe Sleeping for Your Baby" resource with additional modifications (according to *Safe Sleep* recommendations 3, 4 and 5).
- No information was provided with respect to timeline.

2021

- No information provided.
- As stated in the response from Manitoba Health and Seniors Care: "The Public Health Branch has been committed to responding to the current pandemic and will be able to return to regular and routine work such as responding to these recommendations once the COVID-19 vaccination campaign has been completed and has moved into the universal on-going public health systems and processes."

Analysis Summary: Increased efforts are apparent to move forward on the implementation of this recommendation. If the department deems the existing resources are sufficient, what remains outstanding at this stage is increased risk awareness information to be explicitly stated in the 'Safe Sleeping for Your Baby' resource. Information connecting smoking with sleep-related infant deaths is available within the Sleep 101 e-learning course, and can be found on websites (e.g., 'Keep Baby Smoke-free Before and After Birth' section 6, and *Tobacco Use: Know the Facts*); however, it is encouraged smoking risks be more explicitly stated and detailed within the primary resource so all caregivers, or those parties with access to infants, can be made more easily aware of risks. It is anticipated this, adding to the existing *Smoking and Pregnancy* resource, and finalizing the Safe Sleep Kit which includes smoking information, will meet the requirements for intent 1. Associated distribution of updated resources once finalized will meet intent 3. MACY accepts the justifications reported in intent 2, and acknowledges the submissions made by the Department which opt against placing increased emphasis on pregnant individuals, and instead focusing on a range of information sharing which is situation/person dependent. It is anticipated the roll out of provincial training as cited in intent 2, in addition to the additional considerations referenced, will ensure the spirit of this intent is fulfilled. It is encouraged finalizing these noted points will meet this recommendation in full. As such, the actions reported increase the status of this recommendation to Largely Compliant.

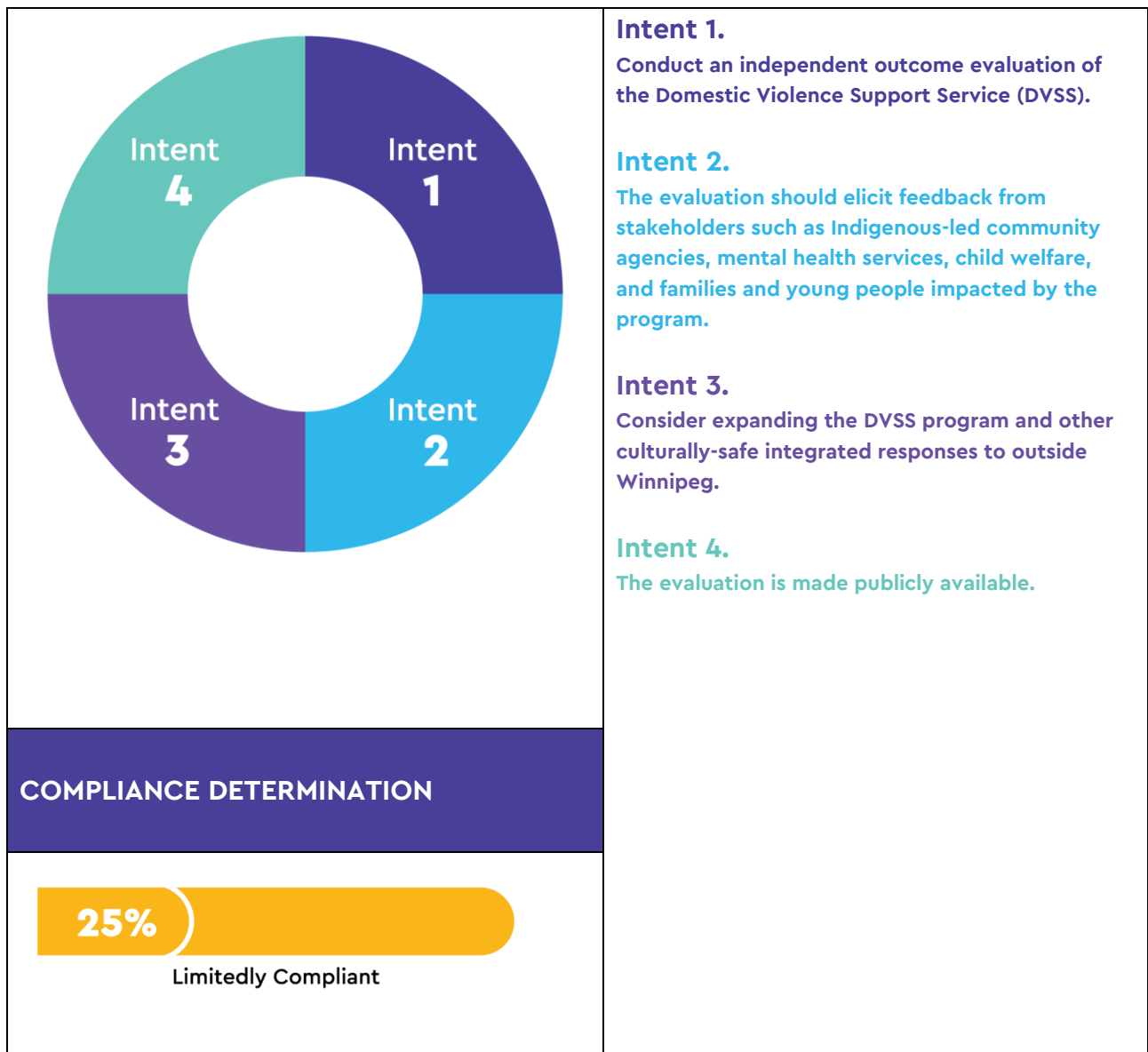
SECTION 6: Manitoba Justice

COMPLIANCE DETERMINATION

IPV – Recommendation 3

Recommendation Summary: Evaluation of DVSS pilot project.

Primary Public Body: Manitoba Justice



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Every Two Hours: A Special Report on Children and Youth Exposed to Intimate Partner Violence in Manitoba
Date Released:	6/22/2022
Full Recommendation: (including details)	<p>Recommendation Three: The Manitoba Advocate for Children and Youth recommends that the Minister of Justice conduct an independent outcome evaluation of the Winnipeg Police Service and Manitoba Justice's Domestic Violence Support Service (DVSS) Pilot program that provides an integrated response to incidents of intimate partner violence (IPV).</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • Elicit feedback from relevant stakeholders including Indigenous-led community agencies, mental health services, child welfare, and the families and young people impacted by the program. • Include a formative evaluation that considers expansion of the program or other culturally-safe integrated responses to jurisdictions outside of Winnipeg, following consultations with Indigenous governments. • Make the results of the evaluation publicly available.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Conduct an independent outcome evaluation of the Domestic Violence Support Service (DVSS). 2. The evaluation should elicit feedback from stakeholders such as Indigenous-led community agencies, mental health services, child welfare, and families and young people impacted by the program. 3. Consider expanding the DVSS program and other culturally-safe integrated responses to outside Winnipeg. 4. The evaluation is made publicly available.
Issue:	IPV
Public Body	Manitoba Justice
Dates of Previous Official Updates from	May 31, 2023

Public Body:	
2. Compliance Determination	
Limitedly Compliant 0.25	Actions taken only implement a small part of the recommendation, requirements are only fulfilled to a limited degree by actions taken, resulting in significant deficiency in implementation.
Self-Assessment	Alternate Solution
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
Intent 1: Conduct an independent outcome evaluation of the Domestic Violence Support Service (DVSS).	
2023	
<ul style="list-style-type: none"> • A public announcement was made May 25, 2023 that the DVSS pilot project was proven effective and will be implemented permanently, because the partnership with Victim Services and Winnipeg Police Service (WPS) was shown to permit a compassionate and timely response to calls for service. • The release reported the DVSS program, through its two-year operation, demonstrated success by way of reduced delays for callers requesting support (on average, callers received responses within a few hours of contact), serving to support individuals, and preventing future domestic incidents. The pilot involved the co-location of three Manitoba Justice Victim Services staff at the WPS headquarters, permitting better integration between officers and Victim Services to collaboratively determine the most appropriate outreach requirements for families making police calls for non-criminal domestic incidents. Approximately 12,000 annual calls were noted in the release. Information indicated this streamlined process reduced Victim Services referrals requiring follow-up, which previously, were often provided days after an incident occurred. Noted benefits of the program include quicker response times, improved support, increased access to resources, and enhanced collaboration among service providers. Victim Services reported this resulted in better utilization of staff, reduced siloed responses, and the Department assessed this is an improved means to streamline their efforts. The release information indicated the program increased capacity to provide a trauma-informed approach to families in need. • The Department's response did not, however, offer clarity on whether the project was formally evaluated. Information publicly reported upon reasonably suggests the overall assessment of program effectiveness occurred internally. Specific data or more detailed findings relied upon to assess effectiveness were not provided in this assessment period. 	

Intent 2: The evaluation should elicit feedback from stakeholders such as Indigenous-led community agencies, mental health services, child welfare, and families and young people impacted by the program.

2023

- As with intent 1, no information was provided to indicate an evaluation was conducted, or what specific data/findings were relied upon to assess the success which warranted the permanency of the program. Manitoba Justice reported commitments from its own department (i.e., Victim Services) regarding ongoing engagement with other relevant organizations to best meet victim needs.
- Manitoba Justice provided further information on collaborative initiatives in the Victim Services space, such as its work with Toba Centre, specifically as related to the enhancement of supports for victims of child abuse, and families impacted by violence.
- Additionally, Manitoba Justice reported ongoing engagement with Regional Indigenous organizations to enhance capacity for services in regions of the province.

Intent 3: Consider expanding the DVSS program and other culturally-safe integrated responses to outside Winnipeg.

2023

- Manitoba Justice reported piloting the program in Winnipeg was in response to the large volume of referrals in Winnipeg, adding the same program may not meet the unique needs of other communities. The Department suggested a fraction of the number of referrals that come to communities may be best supported by engagement with existing resources to meet the needs of children and youth exposed to IPV.
- Manitoba Justice reports the DVSS program is still early in its roll out and was specifically designed with the WPS and, therefore, may not be possible to expand to other policing agencies in the same way without their partnership and agreement.
- The Department advised engagement with policing agencies would need to take place to determine if this is a model that can work in other policing platforms. They further shared that engagement with Regional Indigenous Organizations would need to transpire prior to any expansion into regional or First Nations communities. Again, in consideration of expanding, Manitoba Justice noted regional service areas do not have the same volume of intakes.
- Further information was provided by Manitoba Justice on the funding provided to Victim Services programs operating through Brandon Police and Pembina Valley (Winkler, Morden, Altona). The programs are reported to work collaboratively with

the Victim Services Branch to provide appropriate referrals, and fill service gaps in jurisdictions.

Intent 4: The evaluation is made publicly available.

2023

- Manitoba Justice indicated an informal and early review of the program demonstrates the pilot phase has shown success in providing early intervention through tandem response with Victim Services and WPS, as well as streamlining services and reducing the wait time to connect to a Victim Services worker.
- As noted in other intents, a public announcement was made on May 25, 2023, whereby it was stated the pilot was proven effective and would be implemented permanently.
- Manitoba Justice identified that the Winnipeg Police Service publishes business plans and quarterly reports that highlight the Domestic Violence Intervention Unit's progress. These publicly available reports identify measures such as number of low risk events closed by the team, number of child custody dispute calls addressed, and number of callers who spoke with a Victim Services Worker.

Analysis Summary: The responses from Manitoba Justice and reference to the noted news release announcing the DVSS pilot project's permanency indicate an independent evaluation has not occurred; however, internal successes were reported by those tasked with responding to public requests for supports. Victim Services' assessment of effectiveness was relayed, which included increased collaboration, a reduction in wait times, and more targeted responses. The reported permanency of the program is presented as an alternative solution to formal evaluation. Increased clarity on the numbers, data, and documented outcomes/findings relied upon to justify success would be helpful to warrant an alternate solution to a formal evaluation. Manitoba Justice reported Victim Services is in ongoing engagement with other relevant organizations to best meet victim needs. Information was provided regarding collaboration with Toba Centre and other regional Victim Services units attached to police services in Manitoba. This collaboration is related to intent 2, but falls outside of its purpose, as there is no evidence of community consultation or voice in the permanency decision for the pilot program. For intent 3, as noted, in May of 2023 the program was announced as going to be made permanent in Winnipeg. No information was provided, however, referring to established plans/intentions to engage in discussions to potentially expand outside of the city. Consideration, or evidence of conversations to explore similar models to communities outside of Winnipeg would be beneficial to fulfil this intent. As for intent 4, provided there is no evidence a formal evaluation occurred, MACY does not anticipate this intent to be met as was originally written; however, the public announcement speaking to DVSS success is an optimistic stride, as is the publicly available information on

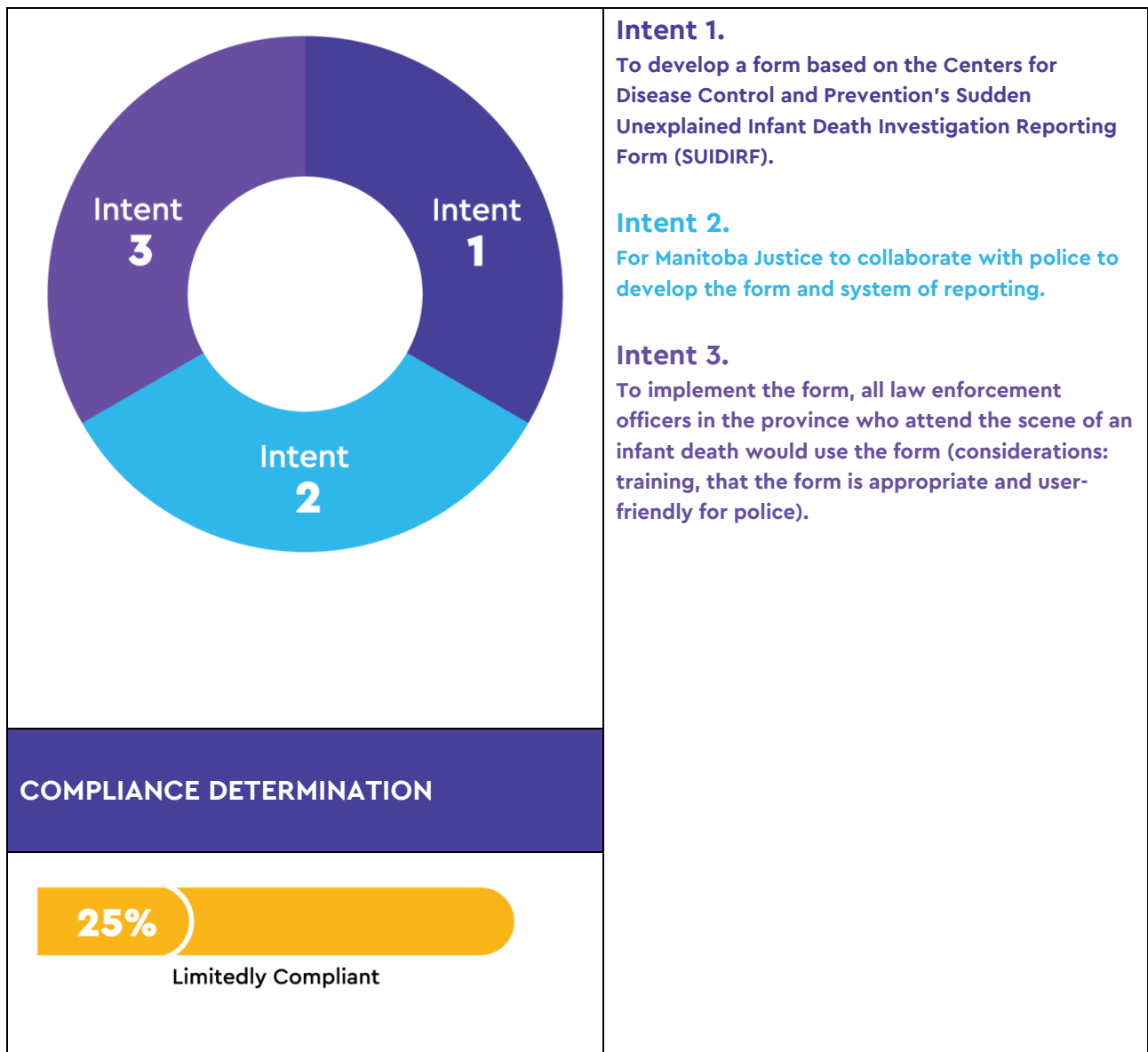
the program/unit metrics. In order to fulfil this recommendation as an alternative solution, more detailed evidence regarding the decision to make the pilot project a permanent unit is sought. In addition, evidence of feedback from stakeholders impacted by the pilot project/unit would be a meaningful contribution to the alternative solution sought through this response. Due to the limited information available at this time, this recommendation is considered Limitedly Compliant.

COMPLIANCE DETERMINATION

Safe Sleep – Recommendation 9

Recommendation Summary: Develop and implement a new data collection form to investigate the scene of an infant death.

Primary Public Body: Manitoba Justice



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Safe and Sound: A Special Report on the Unexpected Sleep-Related Deaths of 145 Manitoba Infants
Date Released:	3/13/2020
Full Recommendation: (including details)	<p>Recommendation Nine:</p> <p>The Manitoba Advocate for Children and Youth recommends that Manitoba Justice and the Office of the Chief Medical Examiner work with RCMP and police services across the province to develop (if necessary) and implement a form based on the CDC's SUIDIRF data collection form, to be used by all law enforcement officers in the province who attend the scene of an infant death.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • A form that is appropriate and user friendly to police and RCMP for use during infant death investigations. • Officers will be trained in the use of this form. <p>IMPACT:</p> <ul style="list-style-type: none"> • Through the systematic collection and analysis of data, gaps in healthcare will be identified to inform and evaluate interventions that reduce infant mortality, in partial fulfillment of the Truth and Reconciliation <i>Call to Action</i> No. 19.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. To develop a form based on the Centers for Disease Control and Prevention's Sudden Unexplained Infant Death Investigation Reporting Form (SUIDIRF). 2. For Manitoba Justice to collaborate with police to develop the form and system of reporting. 3. To implement the form, all law enforcement officers in the province who attend the scene of an infant death would use the form (considerations: training, that the form is appropriate and user-friendly for police).
Issue:	Safe Sleep
Public Body	Manitoba Justice Office of the Chief Medical Examiner

Dates of Previous Official Updates from Public Body:	May 31, 2023
	June 30, 2022
	May 31, 2021
2. Compliance Determination	
Limitedly Compliant 0.25	Actions taken only implement a small part of the recommendation, requirements are only fulfilled to a limited degree by actions taken, resulting in significant deficiency in implementation.
Self-Assessment	Alternate Solution
Previous Compliance Determination	Limitedly Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
<p>Intent 1: To develop a form based on the Centers for Disease Control and Prevention's Sudden Unexplained Infant Death Investigation Reporting Form (SUIDIRF).</p> <p>2023</p> <ul style="list-style-type: none"> Manitoba Justice reported RCMP have an existing form, and have established a process for investigating deaths, for which officers are trained. The Department noted First Nations Policing and most municipal policing agencies would seek the support of RCMP in conducting investigations of this nature. The Department indicated Winnipeg Police Service and Brandon Police Service have implemented a form and developed guidelines and training around these investigations, and, therefore, would not create something new given the established/existing protocols which are reported to meet the intent. The forms referenced were not provided to MACY to be able to conduct an assessment in time for this review period; however, MACY has asked Justice to request the forms from the respective police services to be then provided to MACY. Manitoba Justice maintained while there is extensive police collaboration, Manitoba Justice is not in a position to direct specific forms, policies or procedures, but rather, require overarching guidelines; however, there is no evidence guidelines of this nature have been established. <p>2022</p> <ul style="list-style-type: none"> Manitoba Justice reported that a new form is being used. The copy of the form shared with MACY is dated 2015, suggesting it is not new and that it is not based on the Centers for Disease Control and Prevention's Sudden Unexplained Infant Death Investigation Reporting Form, as called for by this recommendation 	

2021

- Manitoba Justice has presented the concept of a form to law enforcement officials, and it is being reviewed and will be looked at as part of *The Police Services Act Review*. There is no indication, however, whether the form in theory has been accepted, or is being implemented by WPS, RCMP, or other provincial police departments.
- Manitoba Justice reported that the RCMP currently use their own form to collect information when attending the scene of an infant death, and shared a copy of the RCMP form with MACY as evidence.

Intent 2: For Manitoba Justice to collaborate with police to develop the form and system of reporting.**2023**

- Manitoba Justice expressed the Department is committed to creating a Policing Standard requiring law enforcement to have a policy and procedure related to this type of case. Manitoba Justice reported engagement in ongoing meetings with the Manitoba Association of Chiefs of Police (MACP) in addition to participation in working groups with representation from policing services in co-developing standards to ensure communication and collaboration. MACY requested increased clarification on this point and further information on referenced meetings, though supplemental information requests were not responded to within this assessment period.
- Information provided by the Department does not indicate or provide evidence of collaboration between Manitoba Justice and police for the development of a form and associated system of reporting.

2022

- No update was provided on collaboration with police to develop the new form and system of reporting.

2021

- There is no update on Intent 2, as a presentation and exploration have only occurred. Next steps regarding the development of the form and a system of reporting will be determined as part of *The Police Services Act Review*.

Intent 3: To implement the form, all law enforcement officers in the province who attend the scene of an infant death would use the form (considerations: training, that the form is appropriate and user-friendly for police).

2023

- Manitoba Justice reported Winnipeg and Brandon Police Services have established protocols and training that guide the process for investigation of sleep-related infant deaths that follow the Sudden Unexpected Infant Death Investigation Report Form (SUIDIRF) created by the Centers for Disease Control and Prevention (CDC). The RCMP have a form and are called to lead investigations for sleep-related infant deaths on behalf of most Municipal and First Nations Policing Agencies. As such, Manitoba Justice maintained those agencies do not require this type of process.
- While referenced protocols were shared, no evidence of protocols, training, forms, or their implementation and use, were provided during this assessment period. Requests for information on whether a form is being used, or if current police training based around the content within the SUIDIRF form includes a requisite to use a form, were not responded to. At this time, it is unclear if a form is being consistently utilized across the province by all law enforcement officers during investigations of this nature.

2022

- The department reported that RCMP are using a form, but it is not clear if this is the form reported to be in use in 2021, which was not a new form.
- The department further reported that WPS will not use the form, and that it is "unnecessary for Municipal and First Nation Policing, [because] if there is a SUIDIRF they will contact RCMP for support." Further information is needed to understand why WPS is not using the form, to confirm that municipal and First Nation police (other than Brandon and WPS) are not using it given they call in RCMP for these types of investigations, and to understand if any additional work relevant to this intent is being done as part of *The Police Services Act* review in progress.

2021

- There is also no update on Intent 3, as presentation has only occurred. Next steps regarding implementation of the form by officers attending the scene of an infant death will be determined as part of *The Police Services Act* Review.
- MACY acknowledges Manitoba Justice's limitation in not having the authority to direct police.

Analysis Summary: It is not clear if the form in use by the RCMP during infant death investigations meets this recommendation, and movement on the form's implementation throughout police forces remains unclear. MACY acknowledges Manitoba Justice is limited in its ability to influence the Winnipeg Police Service, Brandon Police Service, the RCMP, etc., on how forms and reporting mechanisms by police are developed, and thus collaboration and movement of this recommendation may be limited. Guidelines and training established around sleep-related death investigations are a step in the right

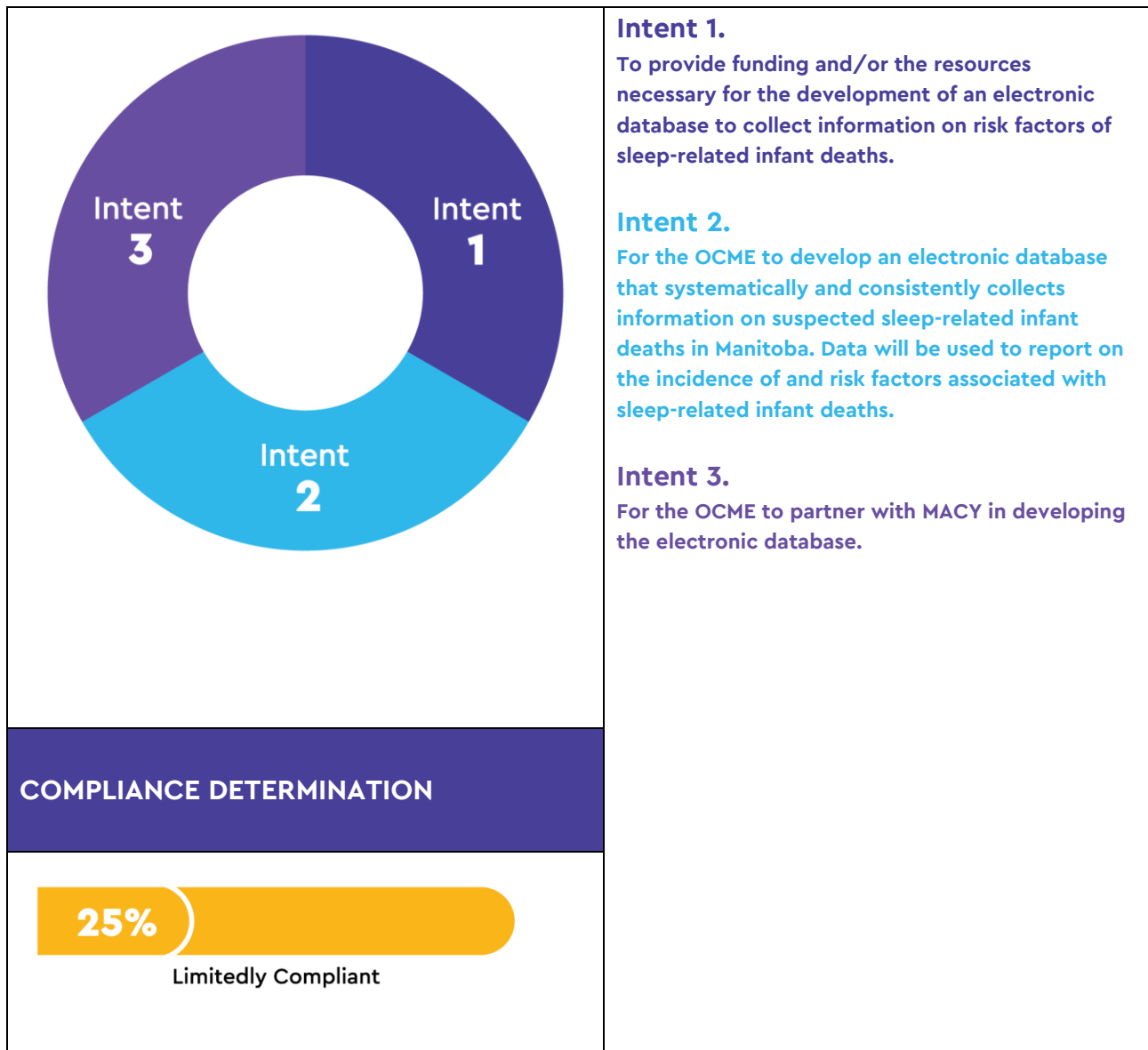
direction, but the spirit of the recommendation is to ensure consistent collection and reporting of data on the part of police to ensure known risk variables are consistently and easily identified. Manitoba Justice proposed an alternate solution for this recommendation, noting while it is able to make overarching standards, there is independence on the part of specific agencies to implement internal policies. It is unclear if Manitoba Justice has formally written an overarching standard requiring police departments to develop and implement a form. Pending review of the existing forms cited by Manitoba Justice and receipt of clarifying information requested to conduct a fully informed assessment, this recommendation remains Limitedly Compliant.

COMPLIANCE DETERMINATION

Safe Sleep – Recommendation 10

Recommendation Summary: Resource the Office of the Chef Medical Examiner (OCME) to develop an electronic database to collect information on suspected sleep-related infant deaths.

Primary Public Body: Manitoba Justice



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Safe and Sound: A Special Report on the Unexpected Sleep-Related Deaths of 145 Manitoba Infants
Date Released:	3/13/2020
Full Recommendation: (including details)	<p>Recommendation Ten:</p> <p>The Manitoba Advocate for Children and Youth recommends that Manitoba Justice provide the resources necessary for the Office of the Chief Medical Examiner to develop an electronic database, in partnership with the Manitoba Advocate for Children and Youth, to collect and report on the incidence of and risk factors associated with all suspected sleep-related infant deaths in Manitoba.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> Data collected in suspected sleep-related infant deaths will be systematically and consistently collected in a database. <p>IMPACT:</p> <ul style="list-style-type: none"> Through the systematic collection and analysis of data, gaps in healthcare will be identified to inform and evaluate interventions that reduce infant mortality, in partial fulfillment of the Truth and Reconciliation <i>Call to Action</i> No. 19.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> To provide funding and/or the resources necessary for the development of an electronic database to collect information on risk factors of sleep-related infant deaths. For the OCME to develop an electronic database that systematically and consistently collects information on suspected sleep-related infant deaths in Manitoba. Data will be used to report on the incidence of and risk factors associated with sleep-related infant deaths. For the OCME to partner with MACY in developing the electronic database.
Issue:	Safe Sleep
Public Body	Manitoba Justice

	Office of the Chief Medical Examiner
Dates of Previous Official Updates from Public Body:	August 18, 2023
	May 31, 2023
	June 30, 2022
	May 31, 2021
2. Compliance Determination	
Limitedly Compliant 0.25	Actions taken only implement a small part of the recommendation, requirements are only fulfilled to a limited degree by actions taken, resulting in significant deficiency in implementation.
Self-Assessment	Partially Compliant
Previous Compliance Determination	Limitedly Compliant
3. Rationale for Determination	
<i>(How did you reach this compliance determination)</i>	
Intent 1: To provide funding and/or the resources necessary for the development of an electronic database to collect information on risk factors of sleep-related infant deaths.	
2023	
<ul style="list-style-type: none"> Manitoba Justice reported the Office of the Chief Medical Examiner (OCME) acknowledges the importance, and recognizes the benefits of having an updated database. The OCME's continued commitment to completing this was noted. Last year the Department advised funding and resources have been committed and allocated to this aim. At this time, Manitoba Justice reports it is working through the process of selecting a vendor and database development. 	
2022	
<ul style="list-style-type: none"> Manitoba Justice reported a scoping project underway to develop a new database that is expected to be completed in January 2023. The department further reported that "Funding and resources have been committed and allocated as the OCME has begun to review their database. Improvements, including the addition of data collection on risk factors of sleep-related infant deaths, and testing will take months." No information or evidence, however, were provided about improvements in progress, including the addition of data collection on risk factors of sleep-related infant deaths, specific funding approvals or investments, or resources dedicated to meeting this intent. Confirmation that resourced work ensures integration of risk factor data collection is needed. 	

2021

- Intent 1 is almost complete based on Manitoba Justice's report in 2020 that an update of the OCME's current database is underway and resources have been allocated. Limited information was provided, however, on the current status of the database development and whether updates to the database will include data points that collect information on risk factors.
- In October 2021, Manitoba Justice clarified that it is "close to updating an old build of the database, which is the first necessary step to implement this recommendation."
- The department also clarified that funding approvals have yet to be sought for the development of a new database.

Intent 2: For the OCME to develop an electronic database that systematically and consistently collects information on suspected sleep-related infant deaths in Manitoba. Data will be used to report on the incidence of risk factors associated with sleep-related infant deaths.

2023

- Manitoba Justice reported the OCME Scoping Project is underway to assist with the development of the database. The Department has experienced some challenges moving forward in seeking the Request for Proposal of Service, citing unexpected and uncontrollable delays in completion. The database will eventually capture information on suspected sleep-related infant deaths in the province. The Department advised the OCME is working through the logistics to ensure successful completion. Anticipated completion was cited as Spring of 2024.

2022

- Manitoba Justice reported that "The OCME has begun to review their database. Improvements, including the addition of data collection on risk factors of sleep-related infant deaths, and testing will take months" and shared that the OCME will connect with MACY as the new/revamped database is developed.
- No information beyond this was provided about the OCME's review of the database or on how data will be used to report on the incidence of risk factors associated with sleep-related infant deaths. As such, confirmation is needed that the variables listed in the report are integrated into the database.

2021

- The OCME's database is currently being updated and the OCME is aware of this recommendation and intends to integrate sleep-related death information as part of the data it collects. A review is needed to confirm whether the database updates are in line with what needs to be collected.

- The implementation of this recommendation is largely contingent on the implementation of *Safe and Sound* recommendation 9: to develop a form that police can use to collect information on what may have contributed to a sleep-related infant death. MACY will also ask Manitoba Justice what information police are currently collecting and providing to the OCME when attending the scene of an infant death.
- Manitoba Justice stated that funding approval for the development of a new database has not occurred yet since an update of the old build of the database needs to be completed first.

Intent 3: For the OCME to partner with MACY in developing the electronic database.

2023

- Manitoba Justice expressed understanding the OCME has met with MACY.
- At this time, there has not been collaborative development of an electronic database given the above two aforementioned stalled intents.

2022

- Work in collaboration with MACY in developing the electronic database is anticipated to occur in late fall/early winter 2022.

2021

- In lieu of 'partnering', Manitoba Justice has suggested that MACY be consulted as the OCME develops/updates their database.
- The process for how communication between the Manitoba Advocate, the OCME, and Manitoba Justice should occur in order to collaborate on this intent is still in development.

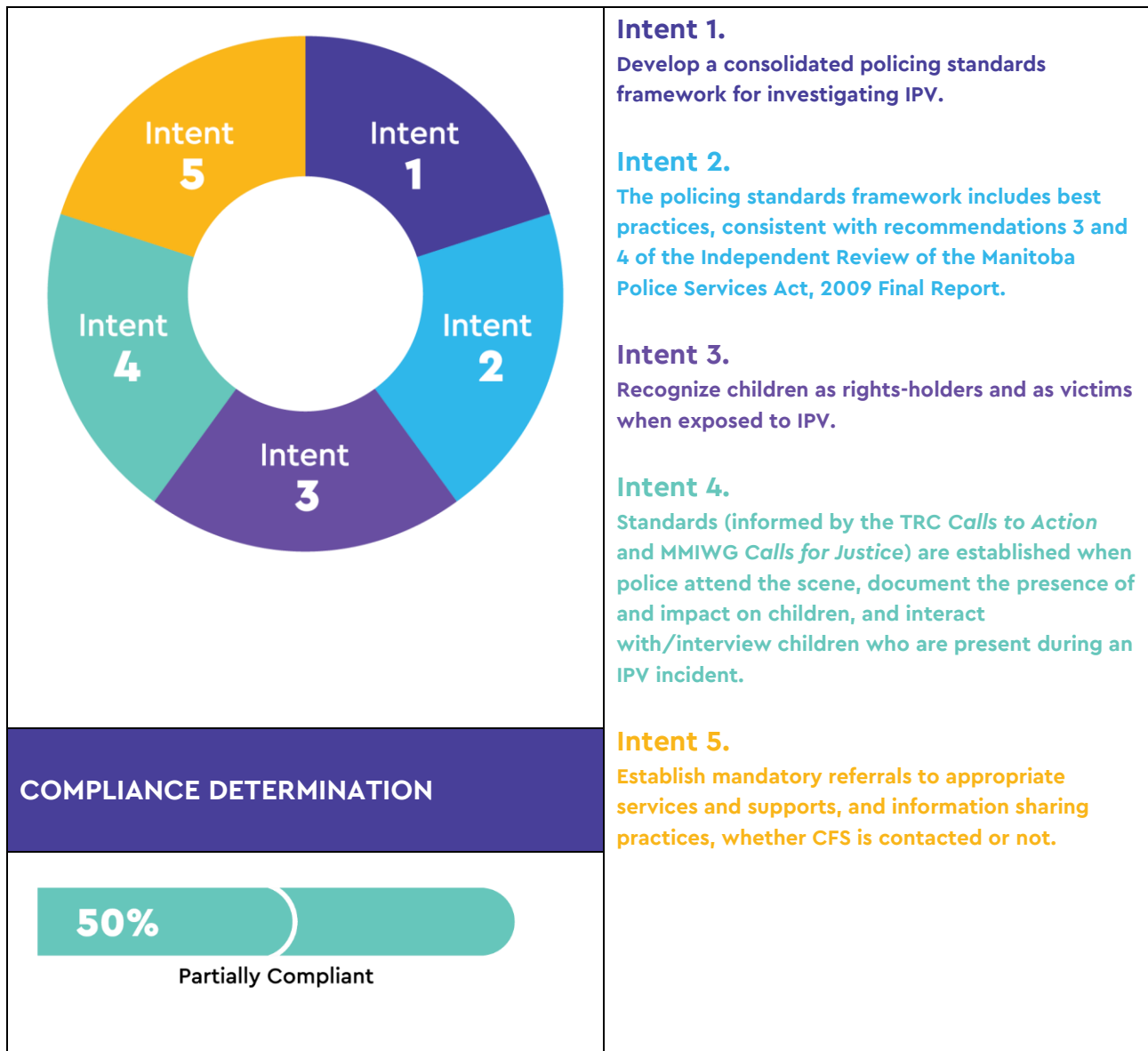
Analysis Summary: Since last year, minimal progress has occurred across all three intents. MACY is encouraged by the maintained commitments reported on the part of the Department; however, as nothing substantive has occurred, this recommendation remains Limitedly Compliant.

COMPLIANCE DETERMINATION

IPV – Recommendation 2

Recommendation Summary: Policing standards framework for investigating IPV.

Primary Public Body: Manitoba Justice



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Every Two Hours: A Special Report on Children and Youth Exposed to Intimate Partner Violence in Manitoba
Date Released:	6/22/2022
Full Recommendation: (including details)	<p>Recommendation Two:</p> <p>The Manitoba Advocate for Children and Youth recommends that the Minister of Justice develop a consolidated policing standards framework for investigating intimate partner violence (IPV) that includes best practices for responding to children exposed to IPV in Manitoba, consistent with recommendations 3 and 4 of the Independent Review of the Manitoba Police Services Act, 2009 Final Report.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • Recognize children as right-holders under the <i>United Nations Convention on the Rights of the Child</i>. • Include clear language that designates children exposed to IPV as victims. • Clearly define children exposed to IPV and when a child is considered 'present' in the residence. • Document the presence of children in the residence at the time and the immediate effects of IPV on the child. • Establish age-appropriate, trauma-informed, and culturally/linguistically appropriate standards for speaking to children who are present during an IPV incident. • If there is an immediate protection concern, CFS should be contacted. Establish mandatory referrals to appropriate services and supports by officers when children are identified in IPV incident but are not referred to CFS. • Include a requirement to document referrals and reasons for referrals. • Include information sharing practices that connect police forces to Victim Services to ensure follow-up for all cases, similar to the existing arrangements between WPS and Victim Services.

	<ul style="list-style-type: none"> Consider provisions for officers attending to the scene of IPV incidents be partnered with civilians who have an expertise in IPV and trauma-informed practices in interviewing children (e.g., social workers, Victim Service workers), where appropriate. Align with the <i>Calls to Action</i> 36 and 40 of the TRC and the <i>Calls for Justice</i> 1.1 to 1.13 of the MMIWG Inquiry.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> Develop a consolidated policing standards framework for investigating IPV. The policing standards framework includes best practices, consistent with recommendations 3 and 4 of the Independent Review of the Manitoba Police Services Act, 2009 Final Report. Recognize children as rights-holders and as victims when exposed to IPV. Standards (informed by the TRC <i>Calls to Action</i> and MMIWG <i>Calls for Justice</i>) are established when police attend the scene, document the presence of and impact on children, and interact with/interview children who are present during an IPV incident. Establish mandatory referrals to appropriate services and supports, and information sharing practices, whether CFS is contacted or not.
Issue:	IPV
Public Body	Manitoba Justice
Dates of Previous Official Updates from Public Body:	May 31, 2023
2. Compliance Determination	
Partially Compliant 0.5	Actions taken only implement part of the recommendation. Important requirements have been met and the recommendation is acted upon, however, deficiencies remain.
Self-Assessment	Largely Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
Intent 1: Develop a consolidated policing standards framework for investigating IPV.	
2023	
<ul style="list-style-type: none"> Manitoba Justice reported Policing Standards are in development, which will 	

include the creation of an Investigative Guide on IPV. The Department anticipates this work will be complete by the end of the 2023-24 fiscal year.

- Manitoba Justice indicated drafting standards are one component of this work, and an implementation phase will follow to allow for changes to policy and training to meet the needs of each policing agency.

Intent 2: The policing standards framework includes best practices, consistent with recommendations 3 and 4 of the Independent Review of the Manitoba Police Services Act, 2009 Final Report.

2023

- The Department reported police are often trained in trauma-informed practices and approaches to interact with victims. Manitoba Justice continues to work with law enforcement partners to emphasize best practices related to inter-agency collaboration.
- Manitoba Justice advised policing standards will include guidelines to ensure victims of IPV are supported throughout the process, including interviews and investigation, to ensure proper resources and services are available.

Intent 3: Recognize children as rights-holders and as victims when exposed to IPV.

2023

- Manitoba Justice reported policing standards and the framework around IPV recognizes children as rights holders, with attention to wraparound and supportive services to reduce the impact of IPV.

Intent 4: Standards (informed by the TRC *Calls to Action* and MMIWG *Calls for Justice*) are established when police attend the scene, document the presence of and impact on children, and interact with/interview children who are present during an IPV incident.

2023

- Manitoba Justice reiterated policing standards are in development, which will include an Investigative Guide on IPV. The Department indicated standards will include child-centred and wraparound supports and services for children who are exposed (both directly and indirectly) to violence. These standards are anticipated to be complete by the end of the 2023-24 fiscal year.

Intent 5: Establish mandatory referrals to appropriate services and supports, and information sharing practices, whether CFS is contacted or not.

2023

- The Department reports there is extensive police collaboration involved in creating policing standards. Guidelines related to IPV will be included, mandating a referral to Child and Family Services where children are present when responding to matters related to IPV, and for all suspected injuries. Standards will include ensuring supports and services are available during the involvement of law enforcement.
- Manitoba Justice maintains it is not in a position to direct specific policies or procedures, but can simply require a framework.

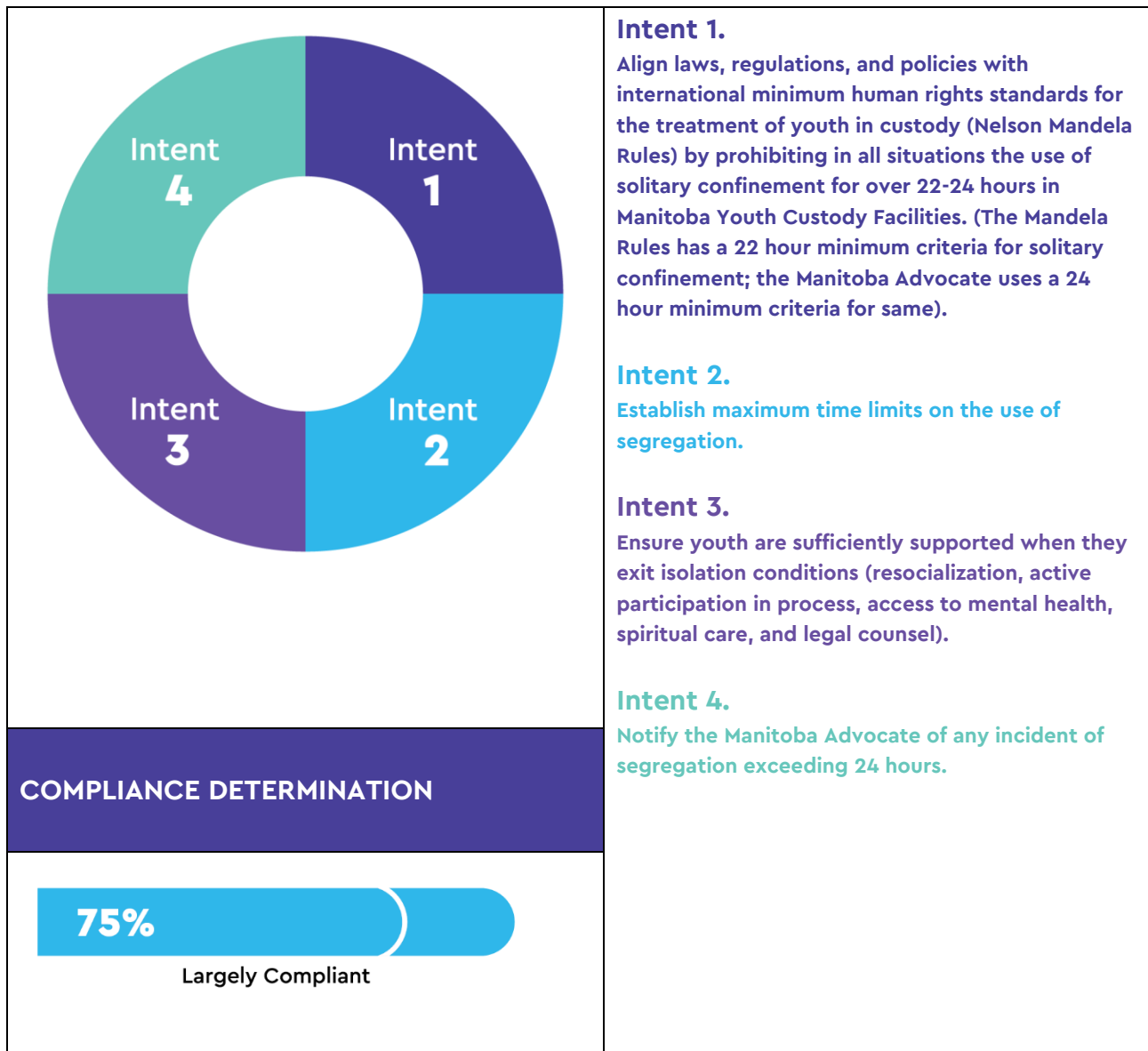
Analysis Summary: Manitoba Justice advised policing standards are in development, and it anticipates completion within the 2023-24 fiscal year. The Department reported the standards include the creation of an Investigative Guide on IPV, which references child-centred considerations and ensures responses occur when children are directly and indirectly exposed to IPV. MACY's requests for additional detail on what the standards may include (i.e., increased detail anticipated to be taken into consideration as it relates to the noted Reports in the wording of intents 2 and 4, reflections of age-appropriate interventions, what supports and services are being referred to in the justification of intent 5, whether civilian partnership is being considered, whether children will explicitly be referenced as rights holders/victims, and documentation requisites) were not responded to within this assessment period. It is recognized, however, that the clarity of this information is preliminary, provided the standards are in development. Without further information on the standards, it is difficult to wholly assess degrees of compliance as is written within the intents of this recommendation. The notion policing standards will be finalized within the next year, with acknowledgement of the requisites relayed, is an optimistic finding. Provided movement to develop standards and recognition of the intents of this recommendation are acknowledged, MACY deems this recommendation Partially Compliant.

COMPLIANCE DETERMINATION

Mandela – Recommendation 1

Recommendation Summary: Prohibit the use of segregation over 24 hours.

Primary Public Body: Manitoba Justice



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Learning from Nelson Mandela: A Report on the Use of Solitary Confinement and Pepper Spray in Manitoba Youth Custody Facilities
Date Released:	2/21/2019
Full Recommendation: (including details)	<p>Recommendation One: The Manitoba Advocate for Children and Youth recommends that the Manitoba government and Manitoba Justice amend <i>The Correctional Services Act</i> to prohibit the solitary confinement of youth for a period exceeding 24 hours, per the Nelson Mandela Rules.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • That Manitoba Justice establish a maximum time limit on the use of segregation of 24 hours without exception, thereby prohibiting solitary confinement by amending <i>The Correctional Services Act</i>. • That Manitoba Justice immediately identify all youth that are currently in solitary confinement conditions and develop a youth-centred and trauma-informed transitional process to ensure they successfully exit from the conditions of solitary confinement. This shall include: <ol style="list-style-type: none"> 1. Engaging a team of licensed mental health professionals to conduct and document a comprehensive mental health re-evaluation of all youth held in solitary confinement, including a confidential face-to-face out of cell interview by a licensed mental health professional; 2. A plan for substantial re-socialization of youth in a group setting; 3. Offering and documenting regular mental health counseling and culturally appropriate spiritual care, if requested, to assist in the transition; and 4. Including the participation of youth in the process and, if requested, the youth's legal counsel and/or a

	<p>representative of the Manitoba Advocate for Children and Youth in the development of this transition plan.</p> <ul style="list-style-type: none"> As per the practices of other Canadian provinces, and until the above recommendation is fully implemented to ban the practice, Manitoba Justice notify the Manitoba Advocate for Children and Youth of any incident of segregation extending over 24 hours and collaborate with the Manitoba Advocate on the development of a plan to address such incidents going forward. This measure should begin immediately. That Manitoba Justice conduct consultations with relevant stakeholders, including the Manitoba Advocate for Children and Youth, in preparation for amending <i>The Correctional Services Act</i>.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> Align laws, regulations, and policies with international minimum human rights standards for the treatment of youth in custody (Nelson Mandela Rules) by prohibiting in all situations the use of solitary confinement for over 22-24 hours in Manitoba Youth Custody Facilities. (The Mandela Rules has a 22 hour minimum criteria for solitary confinement; the Manitoba Advocate uses a 24 hour minimum criteria for same). Establish maximum time limits on the use of segregation. Ensure youth are sufficiently supported when they exit isolation conditions (resocialization, active participation in process, access to mental health, spiritual care, and legal counsel). Notify the Manitoba Advocate of any incident of segregation exceeding 24 hours.
Issue:	Solitary Confinement
Public Body	Manitoba Justice
Dates of Previous Official Updates from Public Body:	May 31, 2023
	June 30, 2022
	May 31, 2021
	June 30, 2020
	December 31, 2019
	June 26, 2019
2. Compliance Determination	
Largely Compliant 0.75	Actions taken meet the majority of requirements for implementation, only negligible requirements remain.
Self-Assessment	Complete through Alternate Solution

Previous Compliance Determination	Limitedly Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
Intent 1: Align laws, regulations, and policies with international minimum human rights standards (Nelson Mandela Rules) by prohibiting the use of solitary confinement for over 22-24 hours in Manitoba Youth Custody Facilities. (The Mandela Rules has a 22 hour minimum criteria for solitary confinement; the Manitoba Advocate uses a 24 hour minimum criteria for same).	
<p>2023</p> <ul style="list-style-type: none"> • Of note, Agassiz Youth Centre (AYC) closed in July 2022, so findings as originally reported in <i>Mandela</i> related to AYC are no longer applicable for consideration. • The Department reported collaboration between MACY and the new Executive Director and Director of the Youth Justice Branch commenced in August 2022 to come to an understanding of how actions in practice are not accurately reflected in the definitions utilized in the <i>Mandela</i> report. • To this aim, Manitoba Justice reiterates solitary confinement need not be prohibited as it is not a current practice at the Manitoba Youth Centre (MYC). The Department reported it is necessary to highlight the inconsistencies in language, definition, and understanding of terms used, with equal importance placed on ensuring context and awareness of the current processes with youth housed at MYC. The Department maintains the use of the term 'observation' is not interchangeable with the terms defined in the <i>Mandela</i> report. Manitoba Justice maintains laws, regulations, and policies align with international minimum human rights standards for the treatment of youth in custody (Nelson Mandela Rules). The Department maintains youth are not placed in solitary confinement as intended and written in the <i>Mandela</i> report, and are not placed in administrative or punitive segregation. • Manitoba Justice reports youth are placed in the least restrictive, non-punitive environment to ensure safety and maintain overall security of the facility. During an observation period, staff continually assess circumstances to determine best plans for all youth, which include placement compatibility, safety of the individual, and staff safety. Young people are placed in observation in consideration of multiple reasons such as safety, medical requirements, admission for placement, or voluntary request by the youth. According to the Department, the restriction of meaningful human contact, which qualifies the practices of segregation/solitary confinement, does not occur as was written in the <i>Mandela</i> report. Per Manitoba Justice, while in observation, there is meaningful and continued engagement with supports including juvenile counselors, spiritual care, mental health professionals, teachers, and external supports, which is congruent with laws, policies, and 	

procedures, and aligned with international minimum human rights standards for the treatment of youth in custody (Nelson Mandela Rules).

- The Department's Standing Order dated 2019, pertaining to observation policies at MYC, was previously provided and reviewed at length by MACY. MACY's requests for clarification of policy wording/content were responded to by the Department, and demonstrate youth wellness is consistently monitored. MACY has made suggestions for policy amendments to ensure clarified/consistent understanding for staff interpreting the directives. Manitoba Justice advised suggestions from MACY have been taken under advisement with some amendments in place and others to be determined.
- At this time, documentation templates used within MYC have been requested in order to better ascertain how a youth's well-being is assessed upon release from observation in daily practice, and how meaningful human contact is required to be documented/considered. Manitoba Justice maintains staff are trained to be attuned to young people's needs and are directed to document observations/assessments/interventions accordingly.

2022

- Manitoba Justice advised, as reported last year, that "As it will take considerable time to assess the need for any regulatory or legislative change, and further time to conduct the change if needed, current focus will be on intent 3."
- The department committed to working with MACY to "determine acceptable alternatives for working with youth to help limit the need for Observation," which will guide further work on the need for changes to legislation.
- In addition, the department reported ongoing contact with youth when they are in Observation as well as therapeutic interventions upon leaving Observation.

2021

- As per discussions with the department and confirmed in their May 2021 written response, Manitoba Justice will focus on this Intent once Intents 2 and 3 have been implemented.

2020

- This recommendation calls for the amendment of *The Correctional Services Act* to prohibit the solitary confinement of youth for a period exceeding 24 hours. To date, no such amendment has been made. At the July 13, 2020 pre-assessment meeting, the department representative explained that there is no uptake within the department to change the legislation. This was further reinforced by the department on September 2, 2020: "adjustments to how observation is used can be accomplished without a change to *The Correctional Services Act*" (Confidential Information).

- Data reported under Intent 4 of this recommendation indicate that youth continue to be placed in segregation for periods exceeding 24 hours in Manitoba youth custody facilities.

Intent 2: Establish maximum time limits on the use of segregation.

2023

- Similar to the details noted under intent 1, in proposing an alternate solution, Manitoba Justice maintains the necessity to differentiate language between their current practices and those presented in the *Mandela* report. The Department advised there is not a need to establish maximum time limits on segregation, as segregation, as was defined, is not current practice in MYC. Manitoba Justice expressed time limits on observation use vary on an individual basis.
- The Department provided Divisional Policies and Facility Standing Orders to MACY, which outline and direct the need for consideration of the use of observation. The Department reported observation consideration examples, including unanticipated medical requirements, a young person's choice to remain in observation, to allow for a period of stabilization if under the extreme influence of substances, and gang entrenched youth. The Department indicated the ultimate goal is to see a youth removed from observation as soon as it is safe to do so.
- Manitoba Justice indicated there is no standardized minimum/maximum time limits, with youth being managed in the least restrictive means feasible. Within existing policy, there are stipulated time requirements where reviews of the young person's circumstances are to occur, to which Manitoba Justice maintains can also occur at any time. Length of time in observation, reasons for placement, behavioural expectations for release, the condition of youth (e.g., behaviour, eating/sleeping patterns, exercise, visits, etc.), any alternatives to observation considered viable, and plans/recommendations to facilitate/support release for observation, including interventions/activities to mitigate adverse effects of observation, are required to be documented during reviews.
- Manitoba Justice confirmed youth in observation have the same rights and privileges (e.g., phone use, gym, fresh air, recreational activity, etc.) as other youth in MYC, unless where circumstances require altered routines/restrictions.

2022

- Manitoba Justice advised, as reported last year, that "As it will take considerable time to assess the need for any regulatory or legislative change, and further time to conduct the change if needed, current focus will be on intent 3."
- The department committed to working with MACY to "determine acceptable alternatives for working with youth to help limit the need for Observation," which will guide further work on the need for changes to legislation. Meetings have taken

place and this work is in progress.

2021

- As per discussions with the department and confirmed in their May 2021 response, Manitoba Justice will focus on this Intent once Intent 3 has been implemented.

2020

- Both Standing Order 03-965 and Standing Order 997 were provided and reviewed. They demonstrate that Manitoba Justice does not have a maximum time limit on the use of segregation:
 - The Youth Observation Policy for both youth custody facilities allows for youth to be "secured alone in a cell for 18 hours or more each day." While there is a minimum time for observation (18 hours), the policy is not explicit about the maximum time a youth can be secured alone in a cell (i.e., it does not give a maximum time for observation as 24 hours). Thus, segregation for more than 24 hours can – and does – still occur.
 - Section 3 of the policy, on Observation Reviews and Appeals, outlines that reviews may occur at 7-day intervals after a youth is placed in observation.
 - Section 5 of the policy, on Alternatives to Observation, outlines that "[r]estrictions that extend beyond 24 hours will transition to observation."
- The standing orders do not meet the intent of the recommendation. Both policies continue to allow for the use of solitary confinement, which is being alone in a cell for a period exceeding 22 hours, in youth custody facilities.
- Using a child-centred approach, the Manitoba Advocate interprets "meaningful human contact" as determined or assessed by the youth. Conversely, Manitoba Justice, as provided in its responses to MACY's June 2020 questions and confirmed at the July 13, 2020 pre-assessment meeting, asserts that youth might not consider when staff are talking to them as meaningful, even if staff have been trained in effective communication skills to ensure meaningful interactions with youth.

Intent 3: Ensure youth are sufficiently supported when they exit isolation conditions (resocialization, active participation in process, access to mental health, spiritual care, and legal counsel).

2023

- Manitoba Justice reported youth in MYC are held in the least restrictive environment possible to ensure their and others safety, and to maintain security of the facility. MYC utilizes its resources available internally (which include Juvenile Counselors, Program Facilitators, Mental Health Professionals, Spiritual Care Providers), and consults/collaborates with internal and external agencies. These practices are to best support youth in relation to addressing the level of risk,

meeting their needs, and ensuring areas of responsivity are met while in observation and upon exiting. The department reflected this is child/youth-centred, based on expressed needs and wishes of the youth, and their needs presented at the time.

- Manitoba Justice reported all young people admitted to MYC are advised of/provided resources upon admission, including access to legal representation and support/advocacy available through the Office of the Ombudsman and MACY. Visual reminders of these supports are available through the use of signage in living areas and common areas. MYC continues to support advocacy for youth from MACY as requested by youth or required (staff request) to enhance outcomes for youth in custody.
- As noted under intent 2, within existing policy there are stipulated time requirements after which reviews (and documentation) of the young person's circumstances are to occur when in observation, although Manitoba Justice maintains these reviews can occur at any time. In addition, the Department confirmed a supplementary incident report is required to be compiled once a youth is transitioned out of observation.
- MACY has requested the case management policy which was noted as addressing adequate youth support areas. Manitoba Justice indicated this policy is currently in revision, and can be provided once approved/finalized. This was requested as it was viewed as potentially helpful to confirm sufficient supports are consistently required to be afforded to all youth in custody, as was verbally confirmed occurs during meetings between MACY and Justice.

2022

- At the department's request, MACY provided a literature review about therapeutic alternatives for the department's consideration. The department reported that therapeutic interventions are being provided (e.g., by spiritual advisors, mental health workers, and juvenile counsellors) and its intention to participate in further work with MACY to develop options and ways to document these supports before moving on this intent.

2021

- Manitoba Justice continues to work with MACY to look into types of therapeutic programming that can be implemented to support youth when they exit observation as well as to mitigate placement in the first place.

2020

- In further information provided on September 2, 2020, Manitoba Justice described that health care professionals are involved with youth when they are placed in observation and when a plan is developed with the youth to transition out of

observation. Health care staff also follow-up as required after the youth has exited observation.

- Manitoba Justice is open to discussing with the Manitoba Advocate types of therapeutic alternatives that can be applied for youth once they are released from observation after 22 hours, in lieu of keeping them in observation past that time.
- The department is working with MACY to look into types of therapeutic programming that can be implemented to support youth when they exit observation as well as to mitigate placement in the first place.

Intent 4: Notify the Manitoba Advocate of any incident of segregation exceeding 24 hours.

2023

- Manitoba Justice provides quarterly reports (i.e., three months' worth of data four times per year) of observation incidents which are 24+ hours.
- Manitoba Justice and the Manitoba Advocate have collaborated on the creation of a data spreadsheet to track the use of observation, which is to include demographics, supports provided to, and reasoning for youth observation use. Since a refined spreadsheet was created, it has been utilized for the 2023 year. January to March data contained within were assessed as meeting this intent in full; however, the information provided for April-June is deemed insufficient as Manitoba Justice has since opted to remove the names of the young people involved in observation incidents. While the act of notification continues, simply being advised observation is occurring does not benefit youth, or MACY's overarching aim of ensuring right fulfillment. The removal of names within the notification form inhibits MACY's ability to track patterns and follow-up with young people, if deemed necessary. Further meetings are anticipated to occur between MACY and Manitoba Justice to offer explanation for this recent shift in practice.

2022

- Complete. The department continues to provide monthly/quarterly reporting of segregation. Work is underway with MACY to improve quality assurance of this data.

2021

- No new information was provided, as the department is complying with this intent.

2020

- Manitoba Justice has reported incidents of segregation, including incidents of segregation exceeding 24 hours, on a quarterly basis. Upon request, the department has increased its reporting to monthly beginning in June 2020.

Manitoba Justice is complying with Intent 4.

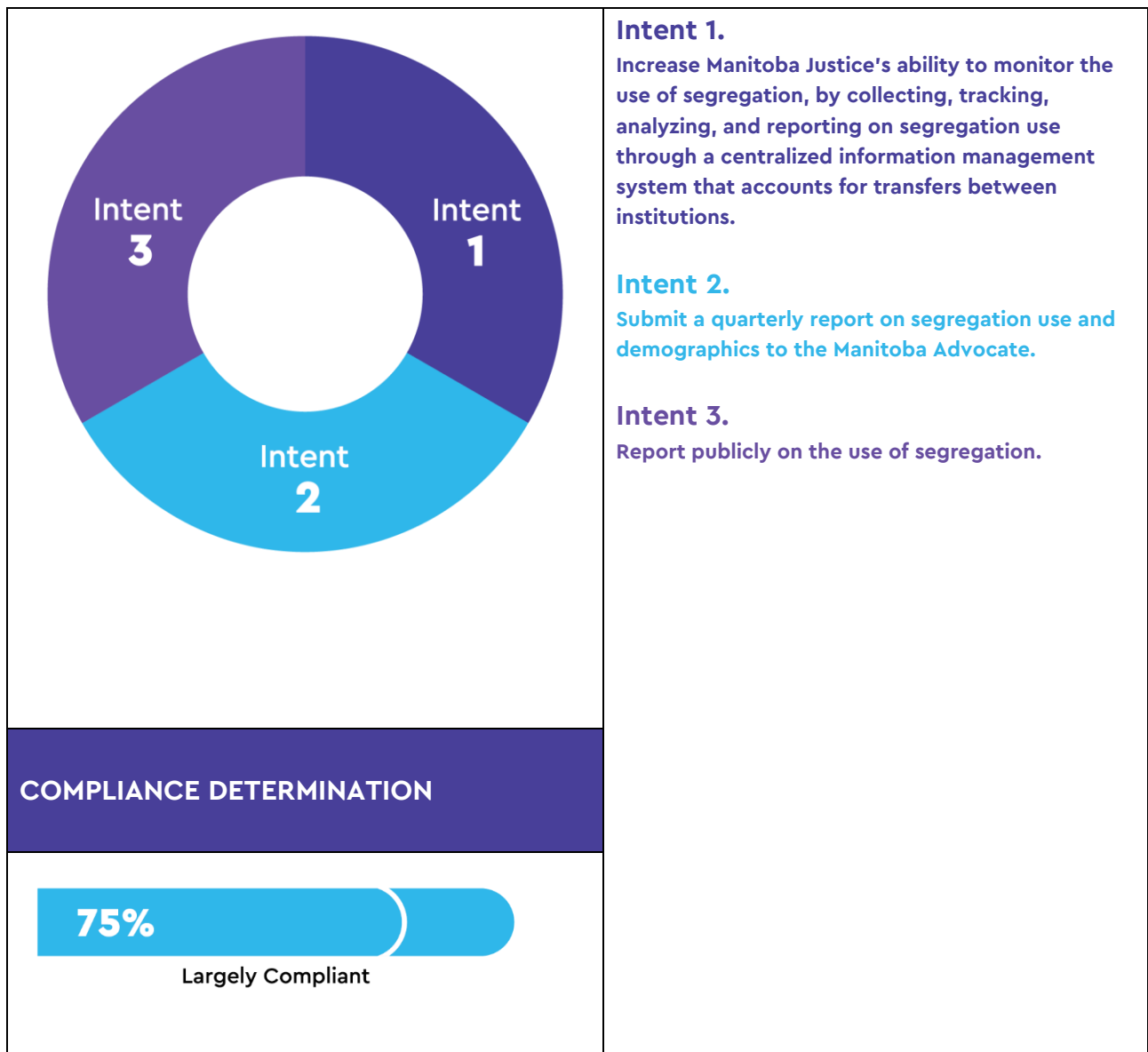
Analysis Summary: MACY is open to Manitoba Justice's submission of an alternate solution, as it is recognized the language utilized within the *Mandela* report is not reflective of current practice. As such, the wording of the recommendation and associated intents as they are written require discretion and larger consideration of ultimate aims in order to conduct a fulsome assessment of compliance. Within meetings between MACY and Manitoba Justice, context has been verbally described, ample information has been shared, and staff practices summarized. Together, it is deemed intents 1, 2, and 3 are met. This stance is due to the notion segregation as defined in *Mandela* is not practiced, so there is no need to prohibit it, establish maximum standards, or require (existing 'isolation') supports beyond what are already afforded to all youth in MYC. It is notable a detailed review of the existing observation policy has been conducted by MACY, and there are suggested points the Department is encouraged to refine, which would further lend MACY to deeming this recommendation fulfilled. Intent 4 (now understood as 'incident of observation'), which has been previously met, has since been downgraded due to the removal of youth names from the provided spreadsheets. Notification in and of itself is redundant without a youth-centred understanding of the circumstances and identification of young people actually impacted by observation. As has been relayed, youth warranting observation conditions have a multitude of varied needs. In order to meet this intent, all incidents of observation use exceeding 24 hours will be required ongoing, which is to include the names of youth. This will permit MACY to identify any youth who may require advocacy supports, as is the responsibility of the Manitoba Advocate per *The Advocate for Children and Youth Act*. Discussions are to occur to determine whether the quarterly notifications are sufficient, or if notification should occur shortly after a youth's observation period has exceeded 24 hours. In sum, and until Manitoba Justice provides the additional information required, this recommendation is deemed Largely Compliant.

COMPLIANCE DETERMINATION

Mandela – Recommendation 3

Recommendation Summary: Collect, track, analyze, and publish reports of segregation incidents.

Primary Public Body: Manitoba Justice



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Learning from Nelson Mandela: A Report on the Use of Solitary Confinement and Pepper Spray in Manitoba Youth Custody Facilities
Date Released:	2/21/2019
Full Recommendation: (including details)	<p>Recommendation Three: The Manitoba Advocate for Children and Youth recommends that Manitoba Justice collect, track, analyze, and report on incidents of segregation across youth custody facilities to ensure transparency and accountability.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • That Manitoba Justice invest in the development of a centralized information management system to implement a process to aggregate data and analyze trends on the use of segregation by youth, reflecting transfers between institutions. • That Manitoba Justice submit a report quarterly to the Manitoba Advocate for Children and Youth on the number of youth placed in any form of segregation; the length of time each youth was in segregation; the race, ethnicity, age, and gender of each youth; facility staffing levels at the time of confinement; the reason each youth was placed in segregation; any knowledge of mental health (illness or cognitive vulnerability); and services provided while in confinement. • That Manitoba Justice report publicly on aggregated data of the use of segregation practices in youth custody facilities through their Annual Report.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Increase Manitoba Justice's ability to monitor the use of segregation, by collecting, tracking, analyzing, and reporting on segregation use through a centralized information management system that accounts for transfers between institutions. 2. Submit a quarterly report on segregation use and

	demographics to the Manitoba Advocate. 3. Report publicly on the use of segregation.
Issue:	Solitary Confinement
Public Body	Manitoba Justice
Dates of Previous Official Updates from Public Body:	May 31, 2023
	June 30, 2022
	May 31, 2021
	June 30, 2020
	December 31, 2019
2. Compliance Determination	
Largely Compliant 0.75	Actions taken meet the majority of requirements for implementation, only negligible requirements remain.
Self-Assessment	Alternate Solution
Previous Compliance Determination	Partially Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
<p>Intent 1: Increase Manitoba Justice's ability to monitor the use of segregation, by collecting, tracking, analyzing, and reporting on segregation use through a centralized information management system that accounts for transfers between institutions.</p> <p>2023</p> <ul style="list-style-type: none"> Given the closure of Agassiz Youth Centre (AYC) in July 2022, information pertaining to youth transfers between institutions is no longer relevant. Since August 2022, observation incidents have been analyzed and vetted through the Youth Justice Branch. With MACY, Manitoba Justice has co-developed and implemented a spreadsheet to track observation use incidents (24+ hours) for youths ages 12-17. Observation information will be collected and analyzed by Justice monthly to prepare for quarterly reports and (if necessary) meetings with MACY. As reported by the Department, Manitoba Justice will continue to track information to better support MYC in meeting the needs of young people. Manitoba Justice advised its own internal tracking has been helpful in identifying how the Youth Justice Branch can support themes from a strategic lens. <p>2022</p> <ul style="list-style-type: none"> Manitoba Justice reported that it "tracks this data monthly but does not use a centralized management system." No further actions have been taken to do this work in-house or to integrate tracking into existing databases. 	

- In light of the closing of Agassiz Youth Centre (AYC), leaving only the Manitoba Youth Centre (MYC) in operation, MACY recognizes accounting for transfers between institutions is no longer needed.
- Work is underway with MACY to improve quality assurance of Observation data and to address differences in language with the goal of clarifying terms and definitions when a youth is separated from the general population.

2021

- As of May 2021, there has been no progress on Manitoba Justice's capacity to track, analyze, and report on segregation data in-house, other than to centralize/combine the spreadsheets from the two youth custody facilities into one. The department continues to collect and share said data with MACY, who subsequently track, monitor, and conduct analyses. MACY has also released a special report update in June 2021, summarizing findings from the spreadsheets Manitoba Justice has shared.

2020

- While Manitoba Justice reports the tracking form is "in use at both" youth custody facilities, there are inconsistencies between the two facilities' tracking forms and, as a result, inconsistencies in the data the department provides to MACY. Significant data cleaning is currently required to ensure that transfers of the same individual between segregation units at both facilities are accounted for, and it is difficult to see through current tracking mechanisms how many times and for how long a youth is placed in segregation.
- Storage and tracking of segregation data using a centralized information management system would allow Manitoba Justice to have a better understanding of the use of segregation per youth in custody, instead of per facility, and to identify cases of overuse. The department has not provided any indication that it will integrate the tracking form into their current centralized information management system, COMS, or develop an alternative centralized information management system.
- The recommendation calls for Manitoba Justice to track and analyze segregation data. At present, however, Manitoba Justice collects, tracks, and reports on segregation incidents on a quarterly basis to MACY (increased to monthly since the onset of the COVID-19 pandemic), and MACY Quality Assurance and Research staff subsequently analyze this data.

Intent 2: Submit a quarterly report on segregation use and demographics to the Manitoba Advocate.

2023

- MACY and Manitoba Justice's engagement in ongoing meetings allowed the opportunity for a joint understanding of what observation means, compared to the term segregation used to describe practices in the *Mandela* report.
- The agreed upon definition, communicated by the Manitoba Advocate to Manitoba Justice representatives on February 22, 2023 is as follows: *"Observation is the act of closely monitoring and assessing a youth, separate from the general population. Observation allows institutional staff the opportunity to identify potential risks or changes in behaviour. This includes preventative security measures such as placement on admission and threat identification, as well as investigating incidents of assault, medical isolation, suicide ideation, and youth self-requests/behaviour plans. Observation also involves identifying anomalies that may require further investigation or aid in risk prevention, such as potential contagion due to transmittable diseases or youth who request time away from their peer group. Timing in observation is individualized and continually assessed pending the originating circumstances. Observation requires close attention and analysis in order to ensure the safety of youth, peers and staff, and to provide the best possible care and support. In some cases, observation may involve the implementation of preventative measures such as one-to-one staffing for suicidal ideation or proactive emotional regulation for youth. Ultimately, observation is an essential component in providing quality care and ensuring the safety of all involved. The correctional center provides additional supports to youth who are in observation for more than 18 hours, depending on the youth's individual needs. The Manitoba Advocate for Children and Youth (MACY) are contacted for all youth who meet this time threshold, to ensure that the youth feels supported and that all necessary provincially funded services and supports are provided."* This recognition guides the rationale for assessing compliance with relevant intents.
- Since last year, observation data had been provided on a monthly basis to MACY, but the data has been provided to MACY on a quarterly basis beginning April 2023.
- This intent was previously deemed met; however, fulfillment has since been downgraded as of April 2023. Since the refined spreadsheet referenced above was created, it has been utilized for the 2023 year. January to March data were assessed as meeting this intent in full; however, the information provided for April through June is deemed insufficient as Manitoba Justice has since opted to remove the names of the young people involved in observation incidents.

2022

- Manitoba Justice's actions continue to meet this intent and work is underway to improve quality assurance of this data.

2021

- As of May 2021, Manitoba Justice continues to submit spreadsheets on segregation use and demographics to MACY on a monthly basis, meeting this intent in full.

2020

- Manitoba Justice has been reporting quarterly on the use of segregation in Manitoba youth custody facilities to the Manitoba Advocate. Due to COVID-19 restrictions, the Manitoba Advocate requested monthly reports, and Manitoba Justice has complied with the request for more frequent reporting.
- Manitoba Justice segregation data submitted to MACY include the length of time each youth was in segregation, the Indigenous status, age, and gender of each youth, the reason each youth was placed in segregation, and any knowledge of mental health (illness or cognitive vulnerability). Manitoba Justice has not been reporting on the facility staffing levels at the time of confinement or services provided to youth while in confinement.
- In the early stages of Manitoba Justice sharing its segregation data with MACY, some of the variables that this recommendation outlined as essential to be tracked had not been integrated into the department's tracking tool (e.g., Indigenous status, knowledge of mental health, gender). This was later corrected and updated. In addition, some of the columns in the data shared by Manitoba Justice contain many blank cells. Manitoba Justice has been working with MACY to rectify this and ensure any missing pieces are included in the quarterly/monthly submissions.

Intent 3: Report publicly on the use of segregation.**2023**

- Manitoba Justice is not exploring options to publicly report on observation statistics. Manitoba Justice indicated since the *Mandela* report used the terms solitary confinement and segregation – which have different meanings to practices undertaken – the Department views it not appropriate to share statistics which may be misconstrued by the general public.

2022

- MACY acknowledges that there is a tension between Manitoba Justice and MACY around what is understood as segregation.
- The department reported that it "understands the intent is to be able to track and analyze data in-house, and report publicly," but will not be reporting publicly on this data and has concerns about misconceptions that may result.
- Work will occur this year with MACY to address these concerns about misconceptions and to address differences in language with the goal of clarifying

terms and definitions when a youth is separated from the general population, and the department making data public, as called for by MACY, to ensure transparency and accountability.

2021

- As of May 2021, Manitoba Justice still has not reported publicly on segregation use.
- Previous updates did not indicate any progress on this intent.

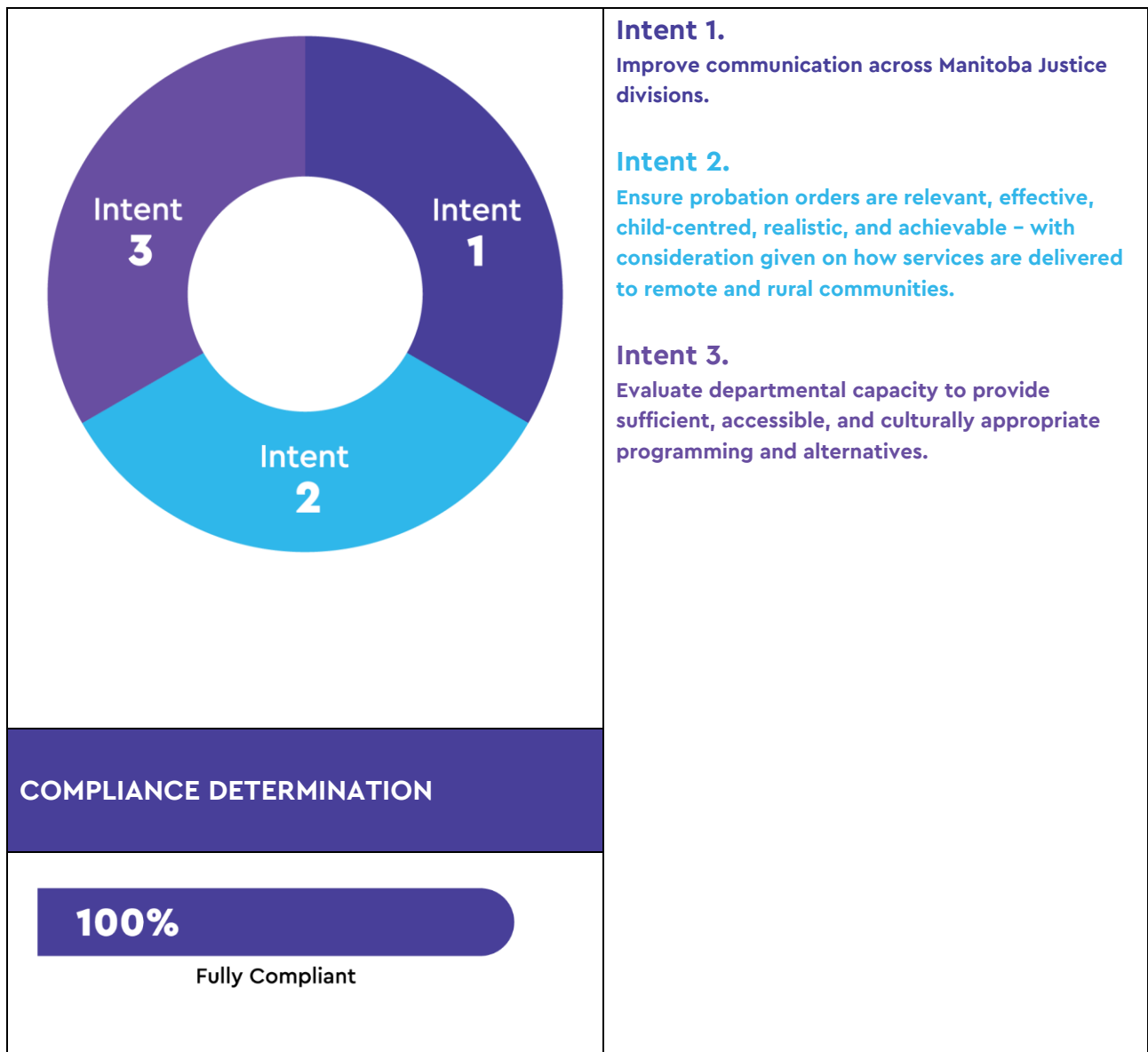
Analysis Summary: Given the closure of AYC, intent 1 for the present purpose is met provided Manitoba Justice's reported intention to continue internal monitoring and tracking of youth in observation. MACY recognizes the rationale for not publicly reporting as originally recommended in intent 3, and agrees the nuances and varied circumstances which occur for youth held in observation may be misconstrued by the general public provided the original language utilized in the *Mandela* report. The difference between observation and solitary confinement/segregation has been recognized by MACY during ongoing meetings between departments, MYC visits from MACY, and the contextual details of observation situations reported by the Department. In order for Manitoba Justice to be fully compliant with intent 2, it is imperative the Department returns to reporting practices which occurred from January-March 2023, as this ensured MACY was appraised of both aggregate and individual themes within the institution. While the act of notification continues, simply being advised observation is occurring with associated general demographic information does not benefit youth, or MACY's overarching aim of ensuring right fulfillment. The removal of names from the data collected and sent to MACY inhibits MACY's ability to track patterns and follow-up with young people, if deemed necessary. It is noteworthy the requisite for follow-up advocacy, if deemed applicable, was presented to Manitoba Justice by the Manitoba Advocate on February 22, 2023, as insinuated by the agreed upon understanding of what observation is and how it is defined, and why MACY continues to take interest in understanding how often it occurs: *"to ensure that the youth feels supported and that all necessary provincially funded services and supports are provided."* As such, this recommendation is deemed Largely Compliant. The inclusion of names and continual quarterly observation reports are required to both obtain and retain completion status.

COMPLIANCE DETERMINATION

Circling Star – Recommendation 5

Recommendation Summary: Improve communication across Manitoba Justice and improve probation orders.

Primary Public Body: Manitoba Justice



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Documenting the Decline: The Dangerous Space Between Good Intentions and Meaningful Interventions
Date Released:	10/19/2018
Full Recommendation: (including details)	<p>Recommendation Five:</p> <p>The Manitoba Advocate for Children and Youth recommends that the Department of Justice improve communication across the divisions within its department, including probation services, victim services, and prosecution services, as well as with the legal community (e.g., legal aid), and the courts to ensure that probation orders are relevant, effective, child-centred, realistic (given limitations in remote and rural communities), and achievable. The Advocate further recommends that the Department of Justice evaluate their capacity to provide the programming for youth to meet their probation conditions and determine whether or not existing programs and services are sufficient and accessible to youth living in rural and remote locations. When gaps are identified, strategies for culturally appropriate alternatives and program delivery need to be developed.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • The Advocate recognizes that it does not have jurisdiction over the courts. Following this report, we recommend that the Department of Justice initiate a process of improved communication and dialogue within its department, with the courts, and other key stakeholders to ensure that probation orders are relevant, effective, child-centred, realistic, and achievable. • The Department of Justice's evaluation of existing capacity to provide programming for youth to meet their probation conditions should contain an overview of existing accountability data and analysis of the effectiveness and accessibility of current services and programming delivered to youth in Manitoba.

	<ul style="list-style-type: none"> A plan is needed for situations when probation services do not have the capacity to provide ongoing supervision, monitoring, or formal programming such that collaboration and partnership with local communities occurs to devise a strategy to deliver these services.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Improve communication across Manitoba Justice divisions. 2. Ensure probation orders are relevant, effective, child-centred, realistic, and achievable – with consideration given on how services are delivered to remote and rural communities. 3. Evaluate departmental capacity to provide sufficient, accessible, and culturally appropriate programming and alternatives.
Issue:	Probation
Public Body	Manitoba Justice
Dates of Previous Official Updates from Public Body:	August 18, 2023
	May 31, 2023
	Oct 17, 2022
	May 31, 2022
	May 31, 2021
	June 30, 2020
	December 31, 2019
	June 26, 2019
2. Compliance Determination	
Fully Compliant 1	Actions taken fully implement the recommendation.
Self-Assessment	Largely Compliant
Previous Compliance Determination	Largely Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
Intent 1: Improve communication across Manitoba Justice divisions.	
2023	
<ul style="list-style-type: none"> No updates, this intent has been fulfilled previously. 	
2022	
<ul style="list-style-type: none"> Manitoba Justice reported Crown/Probation meetings to be ongoing and judge liaison meetings to be scheduled as needed. Probation Officers consult with Crown Attorneys prior to submitting allegations of non-compliance. There is opportunity 	

through pre-sentence reports, bail, and sentencing conferences to communicate and share relevant information for sentencing considerations.

- They further reported that the Judicial Conferencing Coordinator is also a pathway for communication between the Division and Judges.
- Probation Officers, Area Directors, and Senior Management of Probation Services frequently speak with Crown Attorneys on specific cases.
- Through the FASD Justice Program, Program Coordinators provide diagnostic information to the judge, crown, and defence. The Program Coordinator is able to speak directly to the judge in the FASD Docket to advocate for appropriate conditions that reflect the youth's abilities. This is an alternative sentencing model that promotes equitable sentencing for youth.
- Manitoba Justice also reported improvements to communication with judges and a new pilot project focused on reducing youth breaches that involves consultation with Crowns.
- As such, this intent has been met.

2021

- No new initiatives have been developed.
- Current ongoing processes exist to improve communication. Judge liaison meetings have been put on hold during COVID-19, but Crown/Probation meetings continue.

2020

- There has been movement to improve communication across Manitoba Justice Departments, including Judge liaison meetings, that include representatives from the Crown Attorneys (provincial and federal, and the Director of Regional Prosecutions), Defense, Custody, Probation (Executive Director of Probation Services), and the Executive Director of Policing.
- The objective of these meetings was to "continue building and improving upon the communication and sharing of information." Initiatives taken to enhance communication are largely compliant with intent 1 of this recommendation.

Intent 2: Ensure probation orders are relevant, effective, child-centred, realistic, and achievable – with consideration given on how services are delivered to remote and rural communities.

2023

- No updates, this intent has been fulfilled previously.

2022

- Manitoba Justice reported that ongoing communication to ensure probation orders are achievable and to ensure groups involved are working in the best interests of youth is occurring. This includes ongoing work with probation staff in rural and remote areas to ensure child-centred service delivery, including where there are not high enough concentrations of youth on probation to allow for group programming.
- If probation conditions prove to be unattainable, the Probation Officer and Area Director have the capacity to advocate for a variance on any condition. Indeed, Probation Orders now trend with more general conditions that provide the Probation Officer with flexibility in directing the youth toward programming that is available and a youth's assessed stage of change and their abilities are factored into program decisions.
- Manitoba Justice highlighted how correctional and community services are inherently child-centred through the case management tools they use, sharing new information. Manitoba Justice reported that case management, in both correctional and community services is guided by the outcome of a structured and standardized assessment tool, the Youth Level of Service Case Management Inventory (Y/LSCMI). The Y/LSCMI reportedly entails engaging with the youth and all of their supports in comprehensive interviews which helps case managers to understand and respond to the youth's past and present circumstances which may have led them to be justice-involved. The outcome of the Y/LSCMI determines a youth's risk to recidivism, criminogenic needs, and level of supervision required in the community, which ultimately inform what resources are provided to the youth.
- Probation officers assess a youth's readiness for change through the Stages of Change model and base their intervention on what the youth is ready for. Further, once risk and needs are identified, services and interventions are based on the individual's unique characteristics (i.e., responsivity factors) such as gender, age, ethnicity, learning style, motivation to change, cognitive abilities, and mental health.
- Based on the youth's stage of change, Probation Officers support youth to set SMART goals toward reducing their risk level and promote involvement in pro-social activities. Youth are supported to reach these goals through motivational interviewing. Further, Probation Officers receive a level of training in Cognitive Behaviour Therapy (CBT) which promotes a youth's agency to change by helping youth to see the connection between their thoughts, feelings, and actions.
- There is the ability to return to Court to amend supervision orders if conditions are not realistic/achievable and so youth are not criminalized as a result.
- In addition, PSR's/bail conferences/sentencing conferences ensure sentences are child-centred and relevant through engagement with child/youth's support system to coordinate planning.

- Correctional Services Divisional policy outlines the Assessment/Recommendation section of Pre-Sentence Reports, which link assessed risk factors, the unique background of the youth, systemic factors and explores the part they play in bringing the youth before the Court. This section includes culturally appropriate community resources to address those factors linked to criminal activity, and presents conditions that would support the young person in the community. This section also identifies culturally appropriate resources available inside or outside the community; family, community members or Elders willing to support the young person; and specific programming and how that would address the underlying issues.
- In addition, case management in remote and rural communities reflects the resources in that community. For example, a youth may be permitted to report by phone or at an alternative interval depending when the PO is in the community.
- As such, this intent has been met.

2021

- Both the Reclaiming Our Identity program and the Fetal Alcohol Spectrum Disorder docket were cited again as examples in the department's May 2021 response.

2020

- The Reclaiming Our Identity program continues to be offered in communities. This program, however, is not specifically for children or youth, and according to reports, there is not much uptake at present in light of the pandemic and the lack of critical mass for youth-only group sessions.
- The Fetal Alcohol Spectrum Disorder docket has been established, and is now being expanded to include youth. This is a promising initiative that could lead to more relevant, effective, child-centred, and realistic probation orders. No information/evidence, however, was provided on how the FASD docket for youth has specifically improved probation orders, as per the intent of the recommendation. The department explained that while probation staff have input on probation orders if pre-sentence reports are requested, probation orders are created by a Judge.
- Judge liaison meetings and Crown/Probation meetings which allow for communication between groups to work together, also assist in ensuring probation orders that a Judge develops are appropriate.

Intent 3: Evaluate departmental capacity to provide sufficient, accessible, and culturally appropriate programming and alternatives.

2023

- The Youth Justice Branch is currently developing an action plan to guide a Youth Justice Strategy. The framework is expected to be completed in Fall 2023. While there is no formal evaluation component, Manitoba Justice confirmed the plan is informed by a wealth of previously released public documents (e.g., TRC and MMIWG reports) which reinforce the array of social factors that contribute to youth justice involvement. This analysis will inform youth interventions undertaken by the Department going forward.
- Manitoba Justice reported on the development of the Youth Healing Lodge in Thompson, led by Manitoba Keewatinowi Okimakanak (MKO), and indicated this will provide supports to justice-involved youth in northern communities. Provided information notes this development ensures accessible justice resources are available to support sentenced youth with a focus on early intervention and prevention through traditional teachings, ceremony, and cultural activities.
- The Department referenced the Reducing Youth Justice Social Impact Bond, delivered in partnership with MKO. The cited Reducing Youth Justice Involvement Initiative (named, Kakiskinawtahitonan – We Will Show You the Way) blends Indigenous knowledge, wisdom, and healing practices together with western treatment modalities (CBT and high-fidelity wraparound) to support a child-centred, individual, and holistic approach to wellness and healing. The Department's cited research suggests approaches leveraging culturally relevant components with conventional principles are the best ways to reduce justice involvement. Manitoba Justice confirmed Kakiskinawtahitonan has an evaluation component.
- For youth on probation and also housed at the Manitoba Youth Centre (MYC), Manitoba Justice provided MACY with a list of all programs available. The programs include those which serve to address criminogenic needs (e.g., substance use, family/relationships, etc.), and those which encourage healing through traditional practices (e.g., full moon ceremonies, sweats, Elder guidance, beading, soap stone carving, etc.). The Department also holds special events, and collaborates with external agencies who attend the facility to offer programs/information to the youth (e.g., Project Choices, Sexuality Education Resource Centre, Inner City Youth Alive, etc.). Manitoba Justice reported working on increasing its programming opportunities and agencies of collaboration on an ongoing basis.

2022

- Manitoba Justice reported that the youth justice review and ongoing evaluation are strategic priorities for the department. The youth justice review remains in early stages and more information about how the department will carry out ongoing evaluation has been requested.
- New initiatives have been launched to provide sufficient, accessible, and culturally

appropriate programming alternatives, including a healing lodge in Thompson, the Zaagiwe Oshkinawe Inaakonigewin Program through Marymound, and the Restoring Our Identity program.

- Manitoba Justice reported adapting services to ensure optimal delivery in each area, including one-to-one work with probation staff in rural and remote areas where there are not high enough concentrations of youth on probation to allow for group programming. It would be helpful for MACY to receive supporting documentation of this work.

2021

- In its May 2021 response, the department provided an update on the youth justice review, reporting that it was delayed due to the COVID-19 pandemic.
- The department also explained that in rural and remote areas where there is not a high enough concentration of youth on probation to allow for group programs, the same work is done one-to-one with probation staff.

2020

- Manitoba Justice reported that a review of the current youth justice system in Manitoba is underway, and includes the evaluation of departmental capacity to provide culturally appropriate and accessible programming.
- This review will consider the child welfare system and has the intended goal of increasing supports for youth, reducing re-offending, and reducing reliance on incarceration of youth.
- Manitoba Justice reported the youth justice review, which includes the evaluation of departmental capacity to provide programming and alternatives, is not yet complete.

Analysis Summary: Intents 1 and 2 of this recommendation remain met, regarding continued communication across Manitoba Justice divisions and child-centred Probation Orders that are relevant, effective, and achievable, including in remote and rural communities. The Department has self-assessed its progress on this recommendation as largely compliant, with outstanding requirements being evaluating departmental capacity with respect to programming and alternatives. Manitoba Justice reported this is to be assessed by the Youth Justice Review/Strategy in progress (anticipated to be finalized in Fall of 2023). It is noteworthy it was later clarified there is no formal evaluative component to this process. Clarification from the Department indicates this review is informed by a range of considerations on social factors/systemic failures which increase youth propensity to engage in criminal activity/become involved in the justice system. Partnership with MKO demonstrates recognition of culturally appropriate collaboration for alternatives to traditional justice interventions. The ongoing actions of considering said factors, and implementing the noted resources served to mitigate risks, serve to meet the

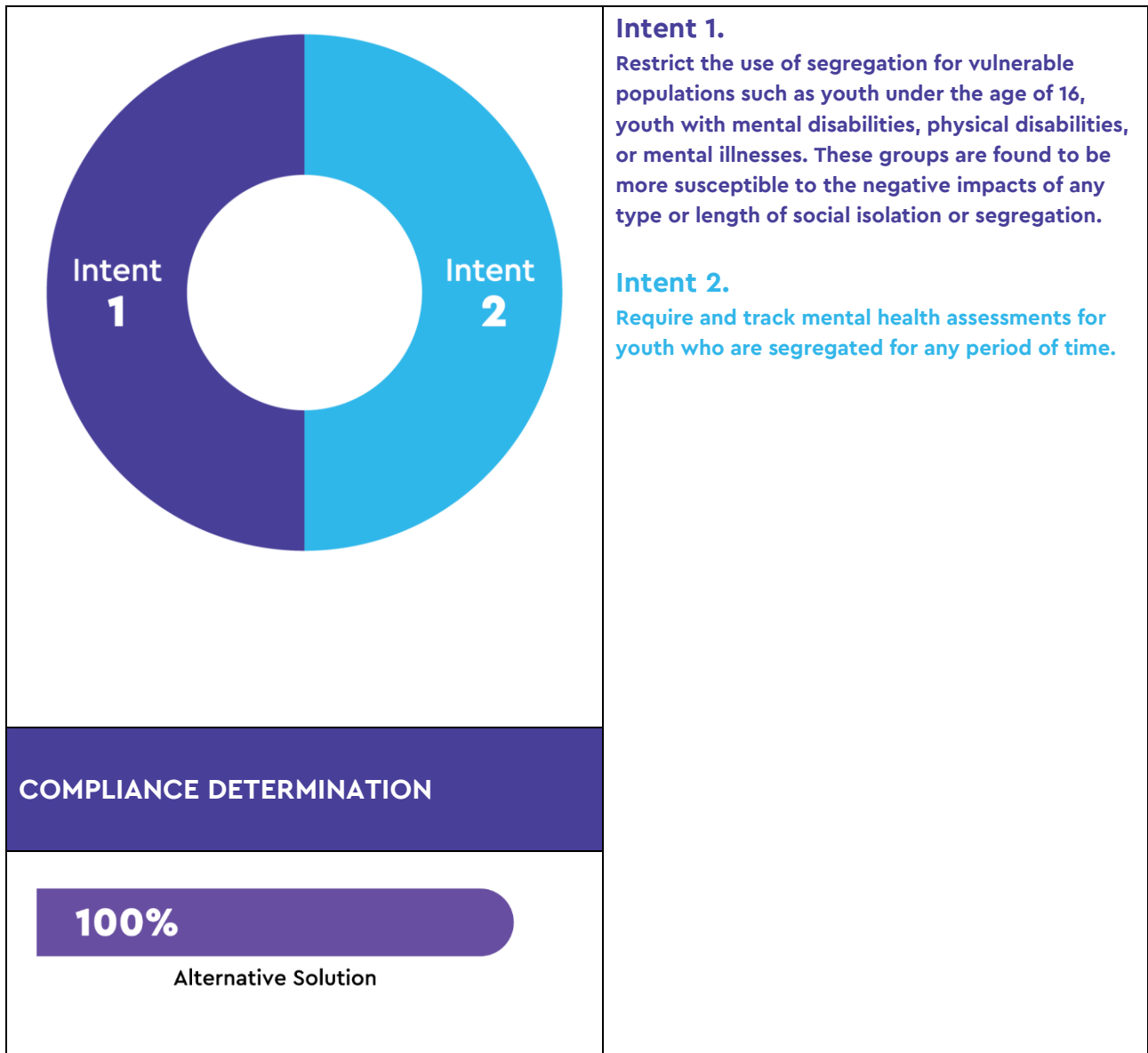
spirit of intent 3 which requires the department to assess their own capacity to provide services. Overall, the ongoing demonstrated improvements and efforts on the part of Manitoba Justice together serve to meet the overarching aim of this recommendation, which strives to improve communication, child-centredness, and accessible/culturally appropriate programming/alternatives. To retain ongoing compliance with this recommendation, it is encouraged the Youth Justice Review/Strategy findings be shared with MACY upon completion.

COMPLIANCE DETERMINATION

Mandela – Recommendation 2

Recommendation Summary: Restrict the use of segregation under 24 hours for vulnerable populations.

Primary Public Body: Manitoba Justice



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Learning from Nelson Mandela: A Report on the Use of Solitary Confinement and Pepper Spray in Manitoba Youth Custody Facilities
Date Released:	2/21/2019
Full Recommendation: (including details)	<p>Recommendation Two: The Manitoba Advocate for Children and Youth recommends that the Manitoba government and Manitoba Justice restrict the use of any form of segregation under 24 hours in youth custody facilities through an amendment to <i>The Correctional Services Regulation</i>.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • That Manitoba Justice restrict the use of any form of segregation for the purposes of discipline, punishment, coercion, convenience, or retaliation. • That Manitoba Justice restrict the use of segregation by legislating maximum time limitations for these vulnerable populations and communicate clear expectations of what is required from the youth to be removed from segregation. • That Manitoba Justice track and require comprehensive mental health assessments for youth subjected to any period of segregation. • That Manitoba Justice conduct consultations with relevant stakeholders, including the Manitoba Advocate for Children and Youth, in preparation for amending <i>The Correctional Services Regulation</i>.
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. Restrict the use of segregation for vulnerable populations such as youth under the age of 16, youth with mental disabilities, physical disabilities, or mental illnesses. These groups are found to be more susceptible to the negative impacts of any type or length of social isolation or segregation. 2. Require and track mental health assessments for youth who are segregated for any period of time.
Issue:	Solitary Confinement

Public Body	Manitoba Justice
Dates of Previous Official Updates from Public Body:	May 31, 2023
	June 30, 2022
	May 31, 2021
	June 30, 2020
	December 31, 2019
	June 26, 2019

2. Compliance Determination

Alternate Solution 1	Recommendation was not completed, but an alternative solution which met the intent of the recommendation was provided with sufficient justification and evidence for meeting the intent of the recommendation.
Self-Assessment	Alternate Solution
Previous Compliance Determination	Partially Compliant

3. Rationale for Determination

(How did you reach this compliance determination)

Intent 1: Restrict the use of segregation for vulnerable populations (youth under the age of 16, youth with mental or physical disabilities, youth with mental illness), who are more susceptible to the negative impacts of social isolation or segregation.

2023

- Manitoba Justice maintains and reiterates it does not use any form of segregation for the purposes of discipline, punishment, coercion, convenience, or retaliation, for any youth, including vulnerable youth in custody. The Department advised youth are placed in observation conditions for multiple reasons, with their mental health and wellness at the forefront of all interventions and placement locations.
- The Department maintains the terminology and definitions contained within its observation policy align with international minimum human rights standards for the treatment of youth in custody (Nelson Mandela Rules).
- The Department stated observation is used for a period of time to engage, monitor, ensure safety, and well-being. Manitoba Justice indicated observation can be used as an option for youth who do not feel safe, and/or for youth who have threatened/assaulted youth/staff, serving as a means to ensure their own safety within an institutional setting. The Department indicated use of observation is guided in principles for the best interest of all young people. They reported there is consideration for safety of all to guide appropriate placement, assessment, and intervention.
- In assessing vulnerability (alongside risk, need, responsivity), Manitoba Justice reports a holistic view and understanding of the young person is collected from all

relevant collaterals. For instance, the Department offered an example where medical staff assess and communicate with institutional staff on what is best required to work with a youth provided their known medical diagnoses. Manitoba Justice reported ensuring continued support and collaboration with mental health and spiritual care, as well as other supports with whom the youth feels well connected, is best practice. The Department maintains all youth have unique and individualized needs and come with varying complexities, and it takes time to unpack what is possible without placing a youth at greater risk.

- As it relates to policy restrictions for certain populations, the Department reported individualized needs are complex and multi-faceted. Manitoba Justice indicated it is difficult to create one frame of reference when emphasis is placed on the need to be child-centred and create individualized plans within a secure setting. A young person's needs may vary during their time at MYC, requiring fluid and adaptable responses, thus ongoing/consistent assessments are a foundation for caring for youth in custody. As an example provided by the Department, for a youth who struggles with emotional regulation, anxiety, and fear, being returned to general population may have a negative impact on their wellness, so placement in observation with the necessary and appropriate supports they need may have a more positive impact on the overall well-being of the respective young person.

2022

- Manitoba Justice has implemented a procedure requiring that management review and approve all Observation stays over 18 hours to ensure use of Observation is in accordance with their policies. This new procedure limits the use of Observation over 24 hours that falls outside the scope of their policies. Excluding COVID-19 related protocols requiring isolation per health guidelines, rates of segregation under 24 hours have decreased since 2019.
- In addition, Manitoba Justice reported that divisional policies (shared with MACY) are reviewed regularly and training is regularly conducted with staff about vulnerable youth in custody.
- The department also advised that Standing Orders will be reviewed within a period of one year, to include provisions/considerations for vulnerable populations.

2021

- In discussions over December 2020 and January 2021, Manitoba Justice has agreed to review and update its Standing Orders over the next year to include provisions that limit the use of segregation with vulnerable populations. Because no amended policies were provided for review, the intent remains limitedly compliant.

2020

- Section 5 of the Youth Observation Policy on Alternatives to Observation, specifically subsection a. on Temporary Placements/Restrictions, outlines when and how youth can be segregated under 24 hours. When a young person is in a Quiet Room for longer than 24 hours, that restriction "transition[s] to observation."
- There is nothing in the Youth Observation Policy that refers to vulnerable populations, nor does the policy restrict the use of segregation (e.g., maximum time limitations) on vulnerable populations. Rather, the use of observation is defined by a minimum time period of "18 or more hours." There is no consideration to vulnerable youth, including youth with mental illnesses, in the use of observation/segregation.

Intent 2: Require and track mental health assessments for youth who are segregated for any period of time.

2023

- Manitoba Justice maintained ongoing assessments of all youth, with or without known mental health diagnoses, are continual. Legal guardian contact is the starting point for all information that assists and guides the development of plans to support youth in custody, in addition to relationship building with the young person. Staff are in direct and daily interaction with youth within the facility. Through relationship building and ongoing dialogue with the youth and their applicable community-based/institutional supports, staff are able to observe where a youth is at, changes to behaviour, and work to address what arises. Staff continually assess and observe behaviours the young people in the facility exhibit, and seek ongoing consultations with both MYC professionals and community-based supports.
- Mental health as generally conceptualized may not always be clear and simple, with an example provided that aggression may be a substitute for expressing emotions related to trauma. The Department maintains not all youth who are placed in observation require a mental health assessment while there. The Department indicated some youth are already connected and continue to meet with mental health professionals. For some, consultations commence while in observation, and, for others, referrals are made and the young person sees a professional once settled in a general unit. Of note, Manitoba Justice also noted that mental health assessments require voluntariness on the part of the youth.
- As reported by Manitoba Justice, referrals are submitted to mental health and/or spiritual care as requested, and as staff observe changes which may warrant consultation. If youth are unwilling to meet with a mental health professional, Juvenile Counsellors (JCs) will engage with who is deemed as having a relationship

with the youth (at that time) to best provide for well-being. Trust and relationship forming with the young person is the first tool in collaboration with supports.

- Manitoba Justice advised all mental health assessments conducted are tracked by the Health Services Department at MYC with follow up by Registered Psychiatric Nurses, Psychology, and a Psychiatrist as is appropriate. These professionals follow youth in (and out of) observation as required and provide guidance to unit staff.
- As previously reported, MYC requires the MAYSI-2 be administered as soon as possible within 24 to 48 hours post admission to MYC for all youth, and not to exceed 72 hours. The Department confirmed with the MYC Health Services Department that medical and mental health nurses administer the MAYSI-2 upon a youth's admission, refer for additional consultations as needed, and share relevant information with unit staff to best address needs and safely manage youth. Assessments are maintained in the Health Services files. This tool is utilized in part to assess and appreciate the current mental health needs of a young person.

2022

- Manitoba Justice reported that assessments are being completed and are used to inform case planning.
- Work is underway in collaboration with MACY to better understand how mental health assessments are defined, by whom they are carried out, and to track them as well as daily check-ins more systematically.
- The department reported its recent purchase of an endoscope to ensure youth are safe when a visual is not able to be attained.

2021

- Manitoba Justice is still in the process of ascertaining what would need to be involved for a comprehensive mental health assessment when youth are segregated in order to meet the intent of this recommendation. The department has engaged in discussions with MACY regarding what is expected to occur in such assessments.

2020

- According to the Youth Observation Policy, medical attention/visitation/review will take place in the form of a nurse on a daily basis, a medical supervisor on a weekly basis, or a psychologist after a young person is in observation for three consecutive days.
- According to the responses provided by the department to MACY's June 2020 questions, mental health nurses assess youth in observation a minimum of once a day. Mental health visitation by a psychologist occurs after a young person has been in observation for three days.
- As per the responses provided by the department at the July 13, 2020 pre-

assessment meeting, the Massachusetts Youth Screening Instrument-Version 2 (MAYSI-2) is the screening instrument that is used to conduct a comprehensive mental health assessment on youth placed in observation. This tool was designed for youth 12 to 17 years of age with a primary use in juvenile corrections. It is a self-report inventory of 52 yes/no questions measuring various scales including: alcohol/drug use, anger, depression, anxiety, somatic complaints, suicide ideation, thought disturbances, and traumatic experiences.

- There is no indication that these assessments are being tracked systematically; they are kept in individual files.

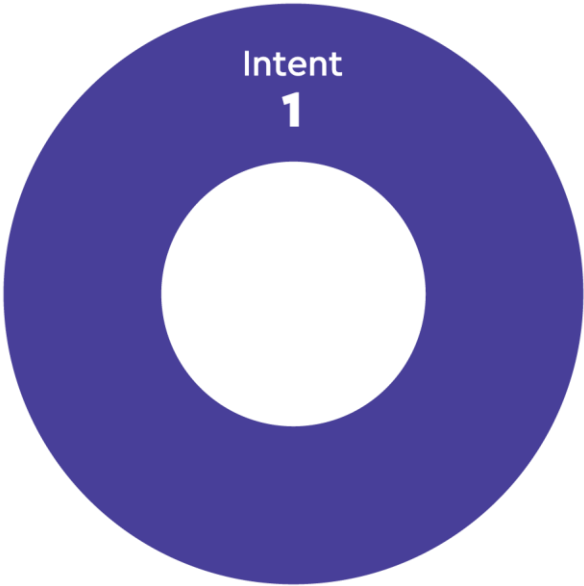
Analysis Summary: MACY accepts Manitoba Justice's submission of an alternate solution, provided the distinctions between how the recommendation was worded and what occurs through observation, and the contextual realities of working with young people in a youth correctional facility. MACY accepts the justifications which explain the rationale for not being able to clearly restrict observation for certain populations, particularly considering observation is often used as a means to protect said vulnerable populations. MACY further accepts the justifications for why not all youth in observation require a formalized mental health assessment. Assessments of diverse formalities continually occur, and not all youth may want to engage in a mental health assessment as this recommendation requires. MACY accepts the justifications Manitoba Justice practices a youth-centred approach to care, recognizing all youth have different and continually changing needs. Ultimately, this serves to meet the overall spirit of this recommendation which requires the department take careful consideration regarding treatment of vulnerable populations. As such, an Alternate Solution is agreed upon, warranting this recommendation to be accepted as met.

COMPLIANCE DETERMINATION

Mandela – Recommendation 5

Recommendation Summary: Enhance therapeutic behaviour management alternatives in youth custody facilities.

Primary Public Body: Manitoba Justice

	<p>Intent 1. Develop an action plan with Manitoba Health, Seniors and Active Living (now Manitoba Health), and Manitoba Families to implement evidence informed and culturally safe therapeutic behavioural management programs.</p>
<p>COMPLIANCE DETERMINATION</p>	
<p>100% Fully Compliant</p>	

Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Learning from Nelson Mandela: A Report on the Use of Solitary Confinement and Pepper Spray in Manitoba Youth Custody Facilities
Date Released:	2/21/2019
Full Recommendation: (including details)	Recommendation Five: The Manitoba Advocate for Children and Youth recommends that Manitoba Justice respond to the overrepresentation of youth with mental illnesses, cognitive vulnerabilities, and childhood trauma by developing an action plan with Manitoba Health, Seniors and Active Living and Manitoba Families for the implementation of evidence informed and culturally-safe therapeutic behavioural management alternatives to solitary confinement and pepper spray, with the goals of enhancing the rehabilitation and successful reintegration of youth in Manitoba communities, reducing recidivism, and improving the public safety of all Manitobans.
Intent(s) of Recommendation:	1. Develop an action plan with Manitoba Health, Seniors and Active Living (now Manitoba Health), and Manitoba Families to implement evidence informed and culturally safe therapeutic behavioural management programs.
Issue:	Solitary Confinement
Public Body	Manitoba Justice
Dates of Previous Official Updates from Public Body:	August 31, 2023
	August 18, 2023
	May 31, 2023
	June 30, 2022
	May 31, 2021
	June 30, 2020
	December 31, 2019
	June 26, 2019
2. Compliance Determination	
Fully Compliant 1	Actions taken fully implement the recommendation.
Self-Assessment	Fully Compliant
Previous Compliance	Limitedly Compliant

Determination	
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3. Rationale for Determination

(How did you reach this compliance determination)

Intent 1: For Manitoba Justice to develop an action plan with Manitoba Health, Seniors and Active Living (now Manitoba Health), and Manitoba Families to implement evidence informed and culturally safe therapeutic behavioural management programs.

2023

- The Youth Justice Branch reports participation on the Mental Health and Addiction cross-departmental working group, which has representation from Families. These meetings, which occur bi-monthly, serve as a forum for cross-departmental planning to advance and strategize work with linked initiatives related to mental health, addiction, and wellness priorities. Information on progression of meetings has been requested.
- Manitoba Justice reported culturally safe and therapeutic programming is available for youth within the Manitoba Youth Centre (MYC). Manitoba Justice provided MACY with a list of all programs available. The range of programs include those which serve to address criminogenic needs (e.g., substance use, family/relationships, etc.), and those based around traditional practices (e.g., full moon ceremonies, sweats, Elder guidance, beading, soap stone carving, etc.). The Department holds special events and collaborates with external agencies who attend the facility to offer programs/information to the youth (e.g., Project Choices, Sexuality Education Resource Centre, Inner City Youth Alive, etc.). Manitoba Justice reported working on increasing its programming opportunities and agencies of collaboration.
- MYC is deemed a mental health facility and is considered a hospital under *The Mental Health Act*. MYC employs health care staff including Registered Nurses, Psychiatric Nurses, and a Psychologist. Youth have access to other programs and supports such as the FASD Justice Program (if applicable) and Spiritual Care. Institutional staff are trained in Trauma Informed Care, Mental Health First Aid, and Case Management principles of risk/need/responsivity. Risk/need/responsivity principles were referenced in the *Mandela* report as being those considered best practices, as they consider the unique qualities of each youth in case planning. The Department also trains staff in recognizing and working with individuals impacted by FASD, and FASD Youth Justice Program staff are available for ongoing consultations, referrals, and intervention for those youth connected with the program.
- The Department reported the Reducing Youth Justice Involvement Social Impact Bond, delivered in collaboration with Manitoba Keewatinowi Okimakanak (MKO). Named Kakiskinawtahitonan, it blends Indigenous knowledge, wisdom, and healing practices with western treatment modalities (CBT and high-fidelity wraparound) to

support a child-centred, individual, and holistic approach to wellness and healing. The program will provide services to a minimum of 45 youth (30 in Winnipeg and 15 in Thompson). Per Manitoba Justice, this ensures program delivery is rooted in Indigenous worldviews, and teachings will provide holistic and healing supports to Indigenous youth involved in the justice system. Led by Elders and Indigenous leadership, the validated High-Fidelity Wraparound model has been modified into an Indigenous framework, identifying this program as a "Two-Eyed Seeing" approach that is grounded in Indigenous research and knowledge.

- Manitoba Justice advised development of the Youth Healing Lodge in Thompson in partnership with MKO will ensure healing and justice resources are available in northern Manitoba. The lodge will support access to land and culturally based healing, knowledge, and cultural practices to youth from across Manitoba. The open custody beds will allow some sentenced youth to remain in their home community, within a healing environment.
- Of note, the Department no longer utilizes the Manitoba Youth Centre for youth held under *The Intoxicated Persons Detention Act* (IPDA). Funding was provided to Marymount Inc. to retrofit beds at the Youth Addictions Stabilization Unit to provide for care and safety of youth and avoid criminalization of addiction. This work was completed in May 2022.

2022

- Manitoba Justice advised that "An action plan will be completed following the Youth Justice Review which is in the beginning stages."
- The department further advised that the Youth Justice Review is a priority for the department, but has been delayed due to COVID and the need to fill the position of Executive Director of Youth Justice under whose portfolio this work falls.
- Group programming, that was not possible during the height of the pandemic due to the need for social distancing, has resumed.
- The position of Executive Director of Youth Justice has now been filled, and Manitoba Justice reported its intention to increase understanding of departments through cross-departmental meetings and participation in cross-departmental working groups, which is promising for next year.

2021

- The Youth Justice Branch within Manitoba Justice was created in early 2021 to lead the Youth Justice Review.
- In addition to the discussions Manitoba Justice is having with MACY regarding therapeutic supports, minimal progress on the Youth Justice Review includes work being done to establish a review engagement strategy. It was reiterated that the Youth Justice Review has been delayed due to the COVID-19 pandemic.
- It was reported by Manitoba Justice that there is a lack of clarity regarding the

difference in scope between Manitoba Health and Seniors Care and the newly formed department, Manitoba Mental Health, Wellness and Recovery, which has additionally contributed to the delay in implementing this recommendation.

2020

- The partnership between the ADMs of the Community Safety Division and Youth Justice Branch (Manitoba Justice) and Manitoba Families on the Youth Justice Review for youth involved in both justice and child welfare is a promising one, and addresses one portion of the recommendation. On September 2, 2020, Manitoba Justice confirmed that Manitoba Health, Seniors and Active Living has been engaged with the Youth Justice Review to bring expertise in mental health and therapeutic supports.
- The focus of the Youth Justice Review on increasing supports for youth and reducing reliance of incarceration is in line with the intent of the recommendation to reinforce rehabilitative and therapeutic approaches. Given the early stages of the Youth Justice Review, however, not enough information was provided on whether a plan has been developed to increase therapeutic and rehabilitative supports for youth in custody. Although no information has been provided on concrete changes made to current services in Manitoba youth custody facilities, the department noted that the recent decreases in the number of youth being held in custody yet no decreases in the number or availability of health care professionals, "has resulted in the possibility of more time being available for youth in need of this type of assistance."
- It is also not clear how this review will impact youth in custody who are not involved in the child welfare system.
- The department's June 30, 2020 MACY-RAP submission, as well as its responses to MACY's June 2020 questions, provided substantial information on existing therapeutic supports for MACY QA to assess whether services are evidence-informed and culturally appropriate. It remains unclear whether services have been enhanced since the issuance of this recommendation or were pre-existing, and how many youth actually access these programs.

Analysis Summary: Based on the information and justifications provided by Manitoba Justice, MACY recognizes there are evidence informed and culturally-safe therapeutic behavioural management alternatives to solitary confinement and pepper spray which enhance rehabilitation and reintegration. Employing professionals, including a Psychologist, FASD Justice Coordinators, and Elders, ensures MYC has staff available to respond to youth with mental illnesses, cognitive vulnerabilities, and childhood trauma. While not an action plan by definition, the Youth Justice Branch reports participation on the Mental Health and Addiction cross-departmental working group, which has representation from the Department of Families, to serve as a forum for cross-

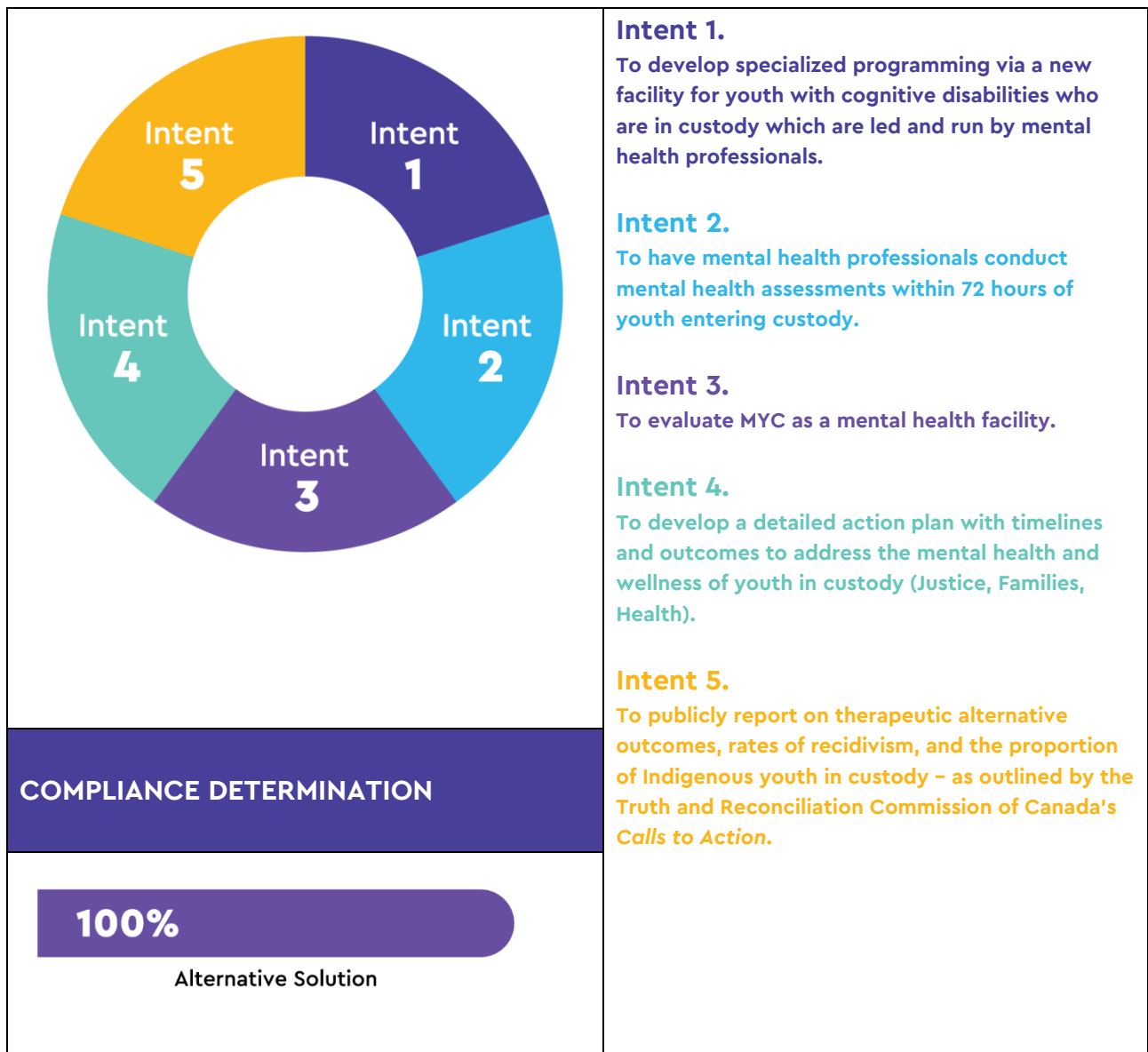
departmental planning to advance and strategize on work with linked initiatives related to mental health, addiction, and wellness priorities. MACY is encouraged by the Department's reported information regarding the Reducing Youth Justice Involvement Social Impact Bond (Kakiskinawtahitonan) delivered in collaboration with MKO, which ensures program delivery is rooted in Indigenous worldviews and teachings. This partnership and anticipated programming meet both the evidence-informed and culturally safe qualifiers required of this recommendation. It is anticipated the completion of the Youth Justice Strategy/Review (Fall 2023), in addition to the formal opening of the Youth Healing Lodge in Thompson, will ensure continued completion of this recommendation.

COMPLIANCE DETERMINATION

Mandela – Recommendation 6

Recommendation Summary: Create a specialized facility for youth in custody with cognitive vulnerability and mental illness, run by health professionals.

Primary Public Body: Manitoba Justice



Recommendation Compliance Summary



This form details the assessment of compliance with recommendations made under Section 27 and Section 31 of *The Advocate for Children and Youth Act*. MACY assesses recommendations for compliance once a year but receives updates from the public bodies every six months.

1. Recommendation Information	
Report Name:	Learning from Nelson Mandela: A Report on the Use of Solitary Confinement and Pepper Spray in Manitoba Youth Custody Facilities
Date Released:	2/21/2019
Full Recommendation: (including details)	<p>Recommendation Six: The Manitoba Advocate for Children and Youth recommends that Manitoba Justice and Manitoba Health, Seniors and Active Living immediately embark on the development of a specialized health facility led and run by mental health professionals to provide evidence-informed programming for youth with mental illnesses or cognitive vulnerabilities in custody, including youth who are found not criminally responsible.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • That Manitoba Justice conduct comprehensive mental health assessments, followed by ongoing treatment and assessments by mental health professionals within 72 hours of youth entering custody. • That Manitoba Health, Seniors and Active Living, with the full cooperation of Manitoba Justice, evaluate the ability and capacity for the Manitoba Youth Centre to serve as a mental health facility as provided by <i>Facilities Designation Regulation</i> for the purposes of <i>The Mental Health Act</i>. • That Manitoba Justice collaborate with Manitoba Families, Manitoba Health, Seniors and Active Living, youth with lived and living experience in correctional facilities, subject-matter experts, correctional officers, and Indigenous Knowledge Keepers, as well as representatives with critical perspectives from the juvenile justice, health care, advocacy, and legislative arenas, in the development of a detailed action plan with timelines and measurable outcomes to address the mental health and wellness of youth in custody. • That Manitoba Justice identify, measure, and publicly report on the therapeutic alternative outcomes of the action plan

	annually, including rates of recidivism and the proportion of Indigenous youth in custody as outlined by the Truth and Reconciliation Commission of Canada's <i>Calls to Action</i> .
Intent(s) of Recommendation:	<ol style="list-style-type: none"> 1. To develop specialized programming via a new facility for youth with cognitive disabilities who are in custody which are led and run by mental health professionals. 2. To have mental health professionals conduct mental health assessments within 72 hours of youth entering custody. 3. To evaluate MYC as a mental health facility. 4. To develop a detailed action plan with timelines and outcomes to address the mental health and wellness of youth in custody (Justice, Families, Health). 5. To publicly report on therapeutic alternative outcomes, rates of recidivism, and the proportion of Indigenous youth in custody – as outlined by the Truth and Reconciliation Commission of Canada's <i>Calls to Action</i>.
Issue:	Solitary Confinement
Public Body	Manitoba Justice
Dates of Previous Official Updates from Public Body:	August 18, 2023
	May 31, 2023
	June 30, 2022
	May 31, 2021
	June 30, 2020
	December 31, 2019
	June 26, 2019
2. Compliance Determination	
Alternate Solution 1	Recommendation was not completed, but an alternative solution which met the intent of the recommendation was provided with sufficient justification and evidence for meeting the intent of the recommendation.
Self-Assessment	Largely Compliant
Previous Compliance Determination	Partially Compliant
3. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
Intent 1: To develop specialized programming via a new facility for youth with cognitive disabilities who are in custody which are led and run by mental health professionals.	

2023

- The Department highlights MYC is a youth correctional facility. Empowered by *The Youth Criminal Justice Act (YCJA)*, young people on remand and/or sentenced status are held in MYC.
- Manitoba Justice maintains the circumstances that contribute to a youth's incarceration are multifaceted and complex. The Department advised not all programming at MYC is led by mental health professionals, as this is not viewed by the Department as best practice. For example, music therapy, art therapy, cultural activities, and traditional teachings would not be delivered by a mental health professional. Teachers provide education and work with young people on their credit attainment, and also aid in identifying a youth's ability to comprehend content and collaborate accordingly with other professionals in the facility (e.g., to refer for assessments as required).
- Manitoba Justice maintains it is difficult to create one frame or style of programming when individualized youth circumstances evolve, while ensuring safety and security within an institutional setting. Manitoba Justice cited MYC staff training and mental health consultation opportunities, while asserting the ongoing efforts made to forge therapeutic bonds among youth and varied institutional professionals.
- Manitoba Justice provided MACY with a list of all programs available, information contained within other relevant recommendation assessments. Per the Department's report, some programs have been evaluated, and core programming quality assurance is maintained through the Divisional Program Coordinator.
- As noted in previous years, employed Juvenile Counsellors (JCs) receive basic core training prior to employment, and receive additional peer guidance and training on site. An overview of child/adolescent development is provided by a Psychologist. JCs are assigned as Case Managers to youth, and their interventions are overseen by their unit manager for guidance, quality assurance, and general oversight. Case Managers assigned can make appropriate referrals to other professionals.
- Regarding cognitive disability specialized programming, Manitoba Justice reports being among the leaders in Canada for fetal alcohol spectrum disorder (FASD) prevention/intervention initiatives, citing the FASD Court Docket and the FASD Youth Justice Program (and adult pilot project).
- As it relates to the FASD Justice program, the Department indicated since 2004 there have been approximately 1,740 referrals (ages 12-25), approximately 500 youth assessments completed, and the FASD Justice Program has assisted approximately 500 individuals transition into adult support services. Through a client-centred and strength-based approach, the goal is to ensure individuals impacted by FASD receive multidisciplinary assessments, appropriate judicial dispositions, and collaborative case management. This includes focused advocacy in custodial centres, the Court, and community, while linking participants with

suitable resources to maximize success while transitioning from youth to adult services. The FASD Justice Program can also accept referrals for individuals ages 12-25 who have been previously diagnosed with FASD to receive case management follow up services. The FASD Justice Program works alongside the FASD Court Docket, Canada's first provincial court docket designed specifically for individuals diagnosed with FASD. The overall objective of the Court is to consider how FASD impacts the offending person's degree of responsibility while exploring a meaningful sentence that ensures participants are supported in the community. Related to FASD interventions, the Starfish program (specialized addictions programming for youth with FASD with two full time staffed positions) is supported, in addition to department FASD training, and interdepartmental committee work. FASD Coordinators reportedly attend national conferences and engage in continued training to maintain knowledge of best practices. In 2023-24, the FASD Justice Program will design and deliver a one-two day training course that builds upon the FASD training already provided to staff (custody and probation) to gain further knowledge and enhance understanding of FASD to utilize in their daily roles.

- Manitoba Justice reported the federal Intensive Rehabilitative Custody and Supervision (IRCS) program. This is a contribution program, with all provinces and territories, for the delivery of specialized therapeutic programs and services for youth with mental health needs who are convicted of a serious violent offence. For specific youth connected to IRCS, additional professional resources (which may include psychology, occupational therapy, action therapy, music/art therapy, etc.) are contracted by the province for youth in custody and on community supervision.
- As reported within other intents and recommendations, Manitoba Justice noted the opening of the Youth Healing Lodge in Thompson, which will offer additional varied supports to youth involved in the Justice System.

2022

- Manitoba Justice reported that all Juvenile Counsellors are now trained in best practices to work with youth with cognitive disabilities, including trauma-informed care, mental health first aid, and case management principles of risk, need, and responsibility.
- In addition, the Manitoba Youth Centre (MYC) employs registered and licensed practical nurses, psychiatric nurses, and a psychologist.
- Youth have access to the FASD Justice Program, spiritual care providers, and community-based supports while in custody to strengthen and maintain relationships, and services to help transition back into the community.
- In light of this, Manitoba Justice advised it "Will not be actioning this Recommendation further," recommending it be removed, citing that the Manitoba

Youth Centre (MYC) is deemed a mental health facility and is considered a hospital under the *Mental Health Act*, that juvenile counsellors are trained to work with persons with cognitive disabilities, and that youth have access to other programs and supports, including the FASD Justice Program, spiritual care providers, mental health professionals, psychologists, and psychiatrists.

- The fact that MYC is deemed a mental health facility as provided by *Facilities Designation Regulation* for the purposes of *The Mental Health Act*, was noted in the report and is the basis for Intent 3 of this recommendation (see below).
- More information is needed on how these existing programs meet the criteria of developing specialized programming and a space that is run and led by mental health professionals, as called for by this intent.
- The role of Manitoba Mental Health and Community Wellness in implementing this intent remains unclear.

2021

- As of May 2021, Manitoba Justice has questioned the relevancy of this recommendation in light of the decrease in numbers of youth in custody since the *Mandela* report was released.
- The department has also cited "the [current] mental health supports available and the formation of the Department of Mental Health, Wellness and Recovery" as additional rationale for the irrelevancy of this recommendation. While the new department's formation is a legitimate reason for the delay of Intent 1, limited information was provided as to the quality of current mental health supports available for youth in custody. Service providers at the Manitoba Youth Centre (MYC) and Agassiz Youth Centre (AYC) identified the need for more specialized mental health supports in June 2021 (Manitoba Advocate for Children and Youth. 2021. *Breaking the cycle: An update on the use of segregation and solitary confinement in Manitoba youth custody facilities*, p. 16)

2020

- The numerous investments referenced in the Update on the Youth Justice Review dated June 16, 2020 speak to supporting positive outcomes for youth, reducing justice involvement in the area of mental health and addictions, which will support children and youth with complex multi-system needs (Confidential Information).
- There is no indication, however, whether a specialized facility run by mental health professionals is being considered as one of the specialized programming (Confidential Information).

Intent 2: To have mental health professionals conduct mental health assessments within 72 hours of youth entering custody.

2023

- This intent has been previously assessed as met. Manitoba Justice confirmed continued use of the MAYSI-2 within 24-48 hours of admission, not to exceed 72 hours.
- Once a young person is admitted to MYC, further collateral collaboration occurs between custody staff and the youth's support network. Initial contact to the youth's guardian begins the process of ongoing assessment of needs, other involved applicable systems, etc.

2022

- Given its closure, evidence that the MAYSI-2 is being done for every Agassiz Youth Centre (AYC) admission is no longer needed.
- The Department advised that "trained Juvenile Counsellors consistently assess the need for Mental Health referrals for youth to be assessed by psychiatric nurses."
- Further, the Youth Justice Review, which will include information and analysis about this recommendation in its purview, remains in progress.

2021

- As of October 1, 2021, Manitoba Justice began using the Massachusetts Youth Screening Instrument-Version 2 (MAYSI-2) tool for all youth admitted to MYC.
- In response to MACY following-up with the department to see if a snapshot of admissions during a specific time period could be provided to demonstrate that this process is indeed being followed for every single admission, Manitoba Justice sent MACY data of two weeks of admissions to the Manitoba Youth Centre (MYC) which showed a MAYSI-2 was completed every time.
- Evidence that the MAYSI-2 is being done for every Agassiz Youth Centre (AYC) admission is needed.
- As of May 2021, the Youth Justice Review, which would have provided information on mental health professionals conducting mental health assessments in youth custody facilities, has yet to be released due to the COVID-19 pandemic. In October 2021, the department additionally shared that the Youth Justice Branch was created in early 2021 to lead the review and that a review engagement strategy for the review would soon be established.

2020

- Upon admission, Manitoba Justice reported that all youth meet with a Correctional Psychiatric Nurse (CPN) for a suicide assessment and safety plan, and an assessment of risk within the facility. The risk assessment that is utilized is the (Y)LS/CMI. This is done at MYC within 24 hours and at AYC within 72 hours of a youth being admitted.
- Within 24 hours of youth being placed in observation, a mental health nurse uses

the mental health assessment MAYSI-2 to identify signs of potential mental, emotional, and behavioural concerns, and assess mental health and cognitive capacity. Actions reported comply with the intent of this recommendation.

- Other than Manitoba Justice's response noting mental health assessments are conducted by a mental health nurse within 24 hours of a youth being admitted at MYC, and on the same day or within 72 hours of a youth being admitted at AYC, as of May 2021, no specific evidence was provided to prove this occurs. Assessments entail an initial greeting, orientation to assessing services, and an evaluation for any immediate needs. Assessments are documented within the youth's COMS record. Mental health nurses at each facility communicate with each other on any recommendations.

Intent 3: To evaluate MYC as a mental health facility.

2023

- The Department indicated it is not currently considering evaluating MYC as a mental health facility given it is a youth correctional facility. Intersections of mental health and criminality are acknowledged, though ultimately the operations of MYC are governed by *The Youth Criminal Justice Act* (YCJA). Consistent with earlier responses and additional information provided to justify other intents, varied programming and mental health related services are available to young people housed in MYC.
- As noted in previous years, MYC is considered a hospital under *The Mental Health Act*. Psychiatrists, Psychologists, and Psychiatric Nurses work within the facility to care for the mental and medical health needs of youth. Should a youth's medical needs exceed what can be internally provided/treated, youth may be brought to larger hospitals.

2022

- Manitoba Justice advised this intent will involve collaborative work with Mental Health and Community Wellness.
- It further reported a mental health and addictions cross-departmental working group, being guided by best practices, mental health professionals, and their intent to do ongoing evaluation.
- The department also reported that "MYC is part of regular operations for the Justice department, and is considered a hospital under the Mental Health Act. Psychiatrists, psychologists and psychiatric nurses work within the facility to care for the mental health needs of the youth."

2021

- In May 2021, and confirmed in October 2021, Manitoba Justice reported that Intent

3 is on pause until the new Department of Mental Health, Wellness and Recovery is able to assist in reviewing this recommendation and provide feedback as to further action on evaluation of the Manitoba Youth Centre. COVID-19 has also contributed to the delay.

2020

- There is no indication in any of the documents provided by Manitoba Justice of a plan to evaluate the ability and capacity of MYC to serve as a mental health facility.

Intent 4: To develop a detailed action plan with timelines and outcomes to address the mental health and wellness of youth in custody (Justice, Families, and Health).

2023

- Manitoba Justice reports it will continue to work internally and collaboratively across departments, and in consultation with communities, to ensure programming, services, and resources are available to youth at MYC.
- The Reducing Youth Justice Initiative Social Impact Bond and development of the Youth Healing Lodge in Thompson (detailed in other recommendations) were noted as examples demonstrating therapeutic developments.
- In August 2022, the vacant position of the Executive Director of Youth Justice was filled and an additional position, Director of Youth Justice, was created. Youth programming/initiatives are under review in relation to existing public reports to guide improved outcomes for youth. As the Youth Justice Branch develops, greater emphasis will be placed on highlighting youth initiatives through the creation of a Youth Justice Strategy. The framework is expected to be completed in the Fall of 2023.
- As noted in the details of other recommendations, there is evidence of cross-departmental collaboration to meet needs youth involved in the justice system present.

2022

- Manitoba Justice reported that "An action plan will be completed following the Youth Justice Review which is in the beginning stages. The Youth Justice Review, is a priority for the department however it has been delayed due to COVID."

2021

- As of May 2021, the Youth Justice Review, which would have resulted in the development of an action plan on the mental health and wellness of youth in custody, has yet to be released due to the COVID-19 pandemic.

2020

- The Youth Justice Review appears to be promising in fulfilling the development of a detailed action plan to address the mental health and wellness of youth in custody. Although on September 2, 2020 Manitoba Justice confirmed Manitoba Health, Seniors and Active Living has been engaged with the Youth Justice Review, no timelines for the completion of the action plan have been provided (Confidential Information).

Intent 5: To publicly report on therapeutic alternative outcomes, rates of recidivism, and the proportion of Indigenous youth in custody – as outlined by the Truth and Reconciliation Commission of Canada's *Calls to Action*.

2023

- Manitoba Justice publicly reports on recidivism rates; however, it did not advise of intents to report on proportion of Indigenous youth in custody, or other forms of youth-specific data related to youth corrections. Manitoba Justice cited reports authored by Justice Canada which highlight the overrepresentation of Indigenous youth.
- Manitoba Justice indicated that as the Youth Justice Branch develops, greater emphasis will be placed on highlighting youth initiatives through the creation of a Youth Justice Strategy, a framework expected to be completed in the Fall of 2023. In addition, they reported that the Government website will include enhancements to highlight Youth Justice initiatives.
- According to them, Government news releases offer context on new initiatives, with an example being the [announcement](#) of the Youth Healing Lodge made in March of 2022.

2022

- The department did not achieve this intent within the past year, as projected in 2021 (see below).
- That said, Manitoba Justice has culturally safe programming guided by Elders and Knowledge Keepers, has a sweat lodge on site, is developing a Healing Lodge in Thompson, has launched a new program with Marymount to provide culturally safe and supportive programming aimed at reducing Indigenous youth involvement in the justice system, and has started the development of an outdoor therapeutic space at MYC.
- The department advised that it currently reports some of this information, such as recidivism rates, and is in discussion with MACY on what is required in order to

meet this intent.

2021

- In their May 2021 MACY-RAP response, Manitoba Justice has committed to publicly reporting these statistics within one year, and is in communication with MACY regarding what is required.

2020

- The department reports publicly on recidivism rates and these statistics are available on the Manitoba government website. The department also annually submits data on the proportion of Indigenous youth in custody (if a youth self-reports as Indigenous) to the Canadian Centre for Justice Statistics, a division of Statistics Canada, and these statistics are made public on the latter's website. There is no indication in the documents provided that the department plans to report publicly on therapeutic alternative outcomes.

Analysis Summary: Progress, completion, and considerations of the varied actions taken for the intents of this recommendation are assessed as fulfilled through an Alternate Solution. For intent 1, MACY recognizes not all programming must be run by mental health professionals, and accepts the justification provided by the Department citing a range of professionals from diverse backgrounds. It is notable that specialized facilities which serve to respond to the needs of youth (with needs including addictions and mental health) continue to be advocated for through other existing recommendations. Intent 2 has been met previously, and evidence shared this year is sufficient. Regarding intent 3, MACY acknowledges the domain differences between correctional facilities and mental health facilities. For intent 4, while there is no evidence of a formal action plan, justifications provided (for this, and other recommendations released by the *Mandela* report) prove sufficient, as there is evidence of cross-departmental and external collaboration (e.g., MKO partnerships) to address the needs of youth in custody. As for intent 5, MACY recognizes ongoing deficiencies remain concerning the proportion of Indigenous youth housed in MYC being publicly reported upon, as outlined in the TRC *Calls to Action* (which MACY supports). In saying this, ultimately this aim can be continually advocated for through public statements, future reports, public education campaigns, etc. It is the assessment of MACY that publicly reporting on youth Indigenous incarceration rates, while related, is a larger issue beyond this recommendation – which was initially released in the hopes of creating a specialized facility for incarcerated youth led and run by mental health professionals. Through ongoing monitoring of other recommendations and retaining youth justice as a designated/reviewable service, issues specific to youth mental health in custody can be continually advocated for as required.