

COMPLIANCE DETERMINATION

Boys Report – Recommendation 1

Recommendation Summary: Implement evidence-based, culturally safe interventions for caregivers with substance use disorders.

Primary Public Body: Manitoba Families

1. Collaborate to implement evidence-based and culturally safe interventions for parents with substance use disorders.

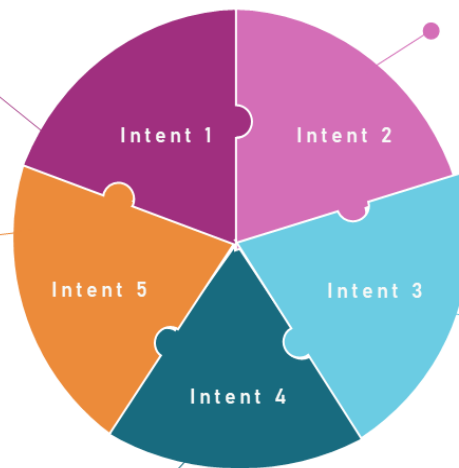
The new roadmap for that department is cited as providing overarching direction and coordination of work in this area. The department stated that “These services are not delivered under the department of Families.”

5. Prioritize supports to CFS agencies in northern Manitoba.

Manitoba Families stated that “addictions funding is not provided through child welfare, and is not part of Single Envelope Funding.”

4. Consider the essential role of Elders and Knowledge Keepers in providing supports for families facing substance use concerns.

The department’s response to this intent includes an explanation of how Indigenous partnership and wellness is one of the strategic focus areas of the Mental Health and Community Wellness roadmap.



2. Develop information sharing protocols across Health, Mental Wellness and Families.

Manitoba Families identified that information sharing is enabled by *The Protecting and Supporting Children Information Sharing Act*, and that training takes place across service providers.

3. Fund and evaluate responses to parental substance use disorders with the goal of preventing apprehensions and increasing reunification.

Manitoba Families reported that “This recommendation is not consistent with how mental health and addictions services are coordinated in Manitoba” and that “Manitoba accepts the need to enhance service delivery for adults with substance use disorders, and this is noted in the MCHW Road Map. Manitoba will focus on this aspect of service delivery, as the focus presented by MACY is not possible.”

COMPLIANCE DETERMINATION



Insufficiently Explained

Recommendation Compliance Summary

In accordance with subsection 11(1) clause (d) of *The Advocate for Children and Youth Act* (ACYA), the Advocate retains the responsibility "to monitor the implementation of recommendations included in reports made under section 27 (investigation) or special reports made under section 31."

This form details the assessment of implementation of compliance made under the referenced subsection of the ACYA. MACY assesses implementation of compliance with recommendations once a year but receives updates from public bodies every six months.

1. Recommendation Information	
Special 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 One: The Manitoba Advocate for Children and Youth recommends the Department of Families cooperate with the Departments of Health and Seniors Care and Mental Health, Wellness and Recovery, along with each of the Child and Family Services authorities to implement evidence-based and culturally safe interventions for parents with substance use disorders with the goal of reducing apprehensions by enhancing substance use supports for parents and communities, in alignment with <i>Calls to Action</i> 1 and 5 of the Truth and Reconciliation Commission.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • Fund and evaluate responses to parental substance use disorders with the goal of preventing apprehensions and maintaining family, community, and cultural ties for boys in Manitoba. • Consider the essential role of Elders and Knowledge Keepers in providing supports for families faced with substance use concerns. • Develop information sharing protocols between the Department of Health and Seniors Care, the Department of Mental Health, Wellness and Recovery, and the Department of Families to improve communication and integration of wraparound supports. • Prioritize supports to Child and Family Services agencies in Manitoba's north, where about half of the 45 boys in this special report lived.
Intent(s) of Recommendation:	<p>The intents of the recommendation are to:</p> <ol style="list-style-type: none"> 1. Collaborate to implement evidence-based and culturally safe interventions for parents with substance use disorders. 2. Develop information sharing protocols across Health, Mental Wellness, and Families. 3. Fund and evaluate responses to parental substance use disorders with the goal of preventing apprehensions and increasing reunification. 4. Consider the essential role of Elders and Knowledge Keepers in providing supports for families facing substance use concerns. 5. Prioritize supports to CFS agencies in northern Manitoba.
Issue:	Parental Substance Use and Apprehensions

Primary Department:	Manitoba Families
Dates of Previous Official Updates from Public Body:	June 30, 2022
6. Compliance Determination	
Insufficiently Explained 0.0	Information provided does not include sufficient justification for inaction and/nor evidence for meeting the intent of the recommendation
Self-Assessment	Fully Compliant
7. Rationale for Determination <i>(How did you reach this compliance determination)</i>	
<p>Intent 1: Collaborate to implement evidence-based and culturally safe interventions for parents with substance use disorders.</p> <p>2022</p> <ul style="list-style-type: none"> • Manitoba Families identified that programming for adults with substance use disorders takes place under the oversight of the Department of Mental Health and Community Wellness. The new Roadmap for that department is cited as providing overarching direction and coordination of work in this area. Manitoba Families stated that “These services are not delivered under the department of Families.” • Recent investments announced by Mental Health and Community Wellness are referenced, including: <ul style="list-style-type: none"> ○ Investing \$250K annually to expand Rapid Access to Addictions Medicine (RAAM) services and open a sixth RAAM clinic in Southern Health, as well as \$450K annually for a centralized RAAM hub. RAAM clinics provide short-term, low-barrier access to service and referrals for continuing care for adults experiencing substance use and addictions (SU/A) issues. Services available at RAAM clinics include immediate counselling, prescription of appropriate addiction medication, and a connection to community treatment programs and primary care physicians for ongoing care. ○ Providing \$389K annually for the development and operation of 100 supportive housing units, including on-site SU/A support services. Supportive recovery housing provides a stable environment for adults who have completed primary addictions treatment, reducing the likelihood of a recurrence of substance use. This initiative includes an investment in the creation of the Phoenix House for Women, a 12-unit supportive recovery housing program for women in Thompson through Men Are Part of the Solution Inc. ○ A one-time investment of \$3.5M toward the capital construction costs at Bruce Oake Recovery Centre to enhance access to mental health and SU/A treatment. The Bruce Oake Recovery Centre offers a 16-week residential treatment program, utilizing a bio-psycho-social-spiritual-cultural approach. ○ Investing \$700K annually through a five-year partnership with Bell Let's Talk (Bell Let's Talk provides \$100K and the Government of Manitoba provides \$600K), in the implementation and expansion of Strongest Families Institute, providing technology-based mental health services for children, youth, adults, and families across Manitoba. ○ Investing \$985K annually to add an additional 16 addiction treatment beds for women at the Addictions Foundation of Manitoba and the Behavioural Health Foundation. ○ As MACY is aware, parents undergoing residential treatment at the Behavioural Health Foundation are able to have children living with them in the facility. 	

- Investing \$395K annually to expand Withdrawal Management and Stabilization (WMS) at Main Street Project to receive referrals from RAAM clinics. WMS provides an immediate safe space, addictions support, medication management, and primary care to individuals over the age of 18 who are withdrawing from substances.
- Investing \$447K annually to provide mobile WMS on a voluntary basis to individuals who require a low to moderate level of support to withdraw from substances. This investment enables Clinic Community Health to offer mobile WMS services in Winnipeg, where individuals receive support from the mobile WMS team in their home or another safe location for up to 30 days. Services include assessments by an addictions physician, education, and information about and referrals to longer-term treatment.
- While it is accepted that other departments bear the responsibility for the development and funding of programming for substance use disorders, there is a missing link in the response to demonstrate where Families has collaborated, or shown evidence of collaboration, for ensuring the families it serves have the resources available, and are accessing the resources available, to address substance use concerns that bring families into contact with the Child and Family Services system.

**Intent 2: Develop information sharing protocols across Health, Mental Wellness, and Families
2022**

- Manitoba Families identifies that information sharing is enabled by *The Protecting and Supporting Children (Information Sharing) Act* and training takes place across service providers.
- In addition, other structures facilitate cross system information sharing such as Youth Hub models, and Justice-Social Service-Community Hubs.
- Amendments were also introduced for the CFS Act, in order to ensure sharing of information with Indigenous Governing Bodies.
- The response further states that there is no consideration at this time for additional changes to legislation protecting the privacy rights of adults.
- As the focus of this recommendation was on the reduction of apprehension, as related to the availability of substance use treatment/services, it would be helpful to know how information is shared between systems providing substance use services and those providing child and family services. While it is likely that these protocols and agreements are in place, and information sharing is occurring, further clarity on how it is working in day-to-day scenarios would be beneficial.

Intent 3: Fund and evaluate responses to parental substance use disorders with the goal of preventing apprehensions and increasing reunification.

2022

- The response to this intent describes that mental health and addictions services are centred on evidence-based approaches, community-led initiatives, and Indigenous-led initiatives. Initiatives arising from the federal mental health and addictions bilateral funding agreement included external evaluation of the initiatives.
- The Mental Health and Community Wellness Roadmap is identified as an additional tool to ensure coordination of existing and new services where “service delivery will not focus solely on CFS involved families.”

- A Recent pilot of Community Addictions Response Teams (CART) from the Metis Authority is described, indicating that review of outcomes from that pilot will determine if the Authority will continue to fund the project under Single Envelope Funding.
- Response indicates MACY may want to ask CFS Authorities directly if there are partnerships or initiatives occurring in this area.
- The response to this intent ends with the following statements: “This recommendation is not consistent with how mental health and addictions services are coordinated in Manitoba. This was shared with MACY during consultation prior to the report release” and “Manitoba accepts the need to enhance service delivery for adults with substance use disorders, and this is noted in the MCHW Road Map. Manitoba will focus on this aspect of service delivery, as the focus presented by MACY is not possible.”

Intent 4: Consider the essential role of Elders and Knowledge Keepers in providing supports for families facing substance use concerns.

2022

- Response to this intent includes an explanation of how Indigenous partnership and wellness is one of the strategic focus areas of the Mental Health and Community Wellness Roadmap.

Intent 5: Prioritize supports to CFS agencies in northern Manitoba.

2022

- In response to this intent Manitoba Families states, “addictions funding is not provided through child welfare, and is not part of Single Envelope Funding. This funding is focused on provision of services under The CFS Act.”
 - The deference of responsibility for services that reduce apprehension because they are related to substance use is not consistent with the elements of the CFS Act that focus on prevention. As an example, In the Declaration of Principles of the CFS Act, principle 7 states “Families are entitled to receive preventive and supportive services directed to preserving the family unit.”
 - Additionally, the following parts under section 7(1) of the CFS Act (Duties of Agencies), relate to the responsibility to provide services for preventive or protective reasons:
 - (a) work with other human service systems to resolve problems in the social and community environment likely to place children and families at risk;
 - (b) provide family counselling, guidance and other services to families for the prevention of circumstances requiring the placement of children in protective care or in treatment programs;
 - (c) provide family guidance, counselling, supervision and other services to families for the protection of children;
 - (f) develop and provide services which will assist families in re-establishing their ability to care for their children.
 - In this report, it was identified that 28 of the 45 boys were documented to have lived with a caregiver with a substance use disorder. Further, of the 31 boys who experienced apprehension in their lifetime, nine of them experienced their first apprehension due to the cited reason of parental substance misuse. If parental substance misuse remains a reason for apprehension, and a reason for continued Child and Family Services involvement, programs and services addressing this issue are within the best interests of children, and should therefore be readily available for families to access.

- The response indicates this intent is not achievable as written, as there is no plan for the government to embed addictions programming in CFS agencies, and related programming will continue to be led through the department of Mental Health and Community Wellness.

Analysis Summary: Overall, Manitoba Families assessed their progress for each of the five intents of this recommendation at varying levels, including the non-acceptance of Intent 5 specifically. While there is an understanding that the new department of Mental Health and Community Wellness bears a responsibility for the funding, development, and implementation of initiatives in the area of substance use services, the response as provided to this recommendation implies that Manitoba Families, specifically the Child and Youth Services Division, bears no responsibility for the provision of, or even collaboration on, the provision of substance use services. The recommendation does not call on Manitoba Families alone to create addictions programming. It does, however, call for a collaborative effort with the department of Mental Health and Community Wellness, the department of Health, and child welfare Authorities to implement evidence-based and culturally safe interventions for parents with substance use disorders with the goal of reducing apprehensions by enhancing substance use supports for parents and communities, in alignment with *Calls to Action* 1 and 5 of the Truth and Reconciliation Commission. Information that is more aligned with this goal will be needed to move this recommendation up the compliance scale. As such, at this time, this recommendation is considered insufficiently explained.