



CHILD & FAMILY ALL NATIONS
COORDINATED RESPONSE NETWORK

ANNUAL REPORT

April 1, 2013 – March 31, 2014

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Our Mission and Vision

Mission

To promote and support the safety and well being of children and families by providing culturally appropriate, strength based child and family intake services.

Vision

- Our community is strong and diverse, honours all cultures, and is free from systemic barriers
- Families are healthy, supported and empowered
- Children are valued, respected and safe.

ANCR Background

The Child and Family All Nations Coordinated Response Network (ANCR) became a mandated agency on February 3, 2007, and assumed responsibility for all intake and emergency child and family services in Winnipeg, Headingley, and East and West St. Paul, Manitoba. This designated intake agency was one element of larger systemic reforms resulting from the Aboriginal Justice Inquiry Child Welfare Initiative.

ANCR operates as a private agency mandated under the Southern First Nations Network of Care, governed by a Board of Directors and managed by an Executive Director and a Senior Management team. The mandate includes providing culturally appropriate, high quality services by a qualified and skilled staff team.



Report from the Board Chair

Anin, Tansi, Hello!

I am honored to have this opportunity to address you as the Board Chair for ANCR. I took on this responsibility in the fall of 2013 after sitting as an ANCR board member on behalf of the Southern Authority since June 2010.

As a board we would like to thank Dave Rundle for his contribution as board chair over the last year. We would also like to take this time to remember Richard Benoit a former board member whom we lost over the last year. As life goes, we must continue moving forward and on that note would like to introduce our new board members. Don Fuchs and Lisa Champagne for General Authority, Sherry Smith and Tanis Kolisnyk for Métis Authority, and our recent addition of Jerry Primrose for Northern Authority. We are getting to know one another and have similar aspirations when it comes to the governance of ANCR, which makes for a pleasant work environment in our continued support of ANCR in achieving it's objectives.

With the recent changes to our board membership, we have been very busy in continuing the work that has been identified though our Vision and Mission. We've taken necessary steps such as revising our by-laws to reflect that 50% of the sitting board members constitute a quorum as opposed to the former one member from each authority. We have also revamped our governance structure and modified our policies to make them more user friendly and less rigid. We continue to work closely with our Executive Director to ensure that the mandate of ANCR remains focused and direct. We appreciate and value the feedback we have been given by our staff in making ANCR an employer of choice. This all enables ANCR to effectively and compassionately carry out our mandate in supporting families & children. New programs like the Newcomer Initiative Partnership of which Don Fuchs, one of our board members has taken an active role, to staff lead events like the Dragon Boat races to raise money for cancer research, has given a positive face to ANCR as an agency that is here to help and is an agency to be trusted. These types of commitments and contributions by ANCR staff, gives us all a great sense of pride. ANCR continues with maintaining stability and growth as an agency, through the expansion of our human resources systems, labor relation's capacity, as well as strengthening our service processes and tools. The board continues with its commitment to nurturing workplace wellness and providing culturally appropriate service.

I would like to thank ANCR's formal members, the four CFS Authorities, our agency partners and community partners for their investment in working together for the wellbeing of children and families. I would like to thank all of the staff at ANCR, the managers and particularly our Executive Director, Sandie Stoker, for another year of growth and achievement.

Respectfully,

Robert Maytwayashing
Chair



Introducing the Board of Directors

ROBERT MAYTWAYASHING is Anishinaabe from the Lake Manitoba Treaty 2 First Nation. His diverse career has included First Nations governance and leadership, traditional knowledge and ceremony, health, economic development, child care, and administration. He is the Aboriginal Human Resources Development Officer for the Interlake Eastern Regional Health Authority. Robert took on the role of Board Chair in Fall 2013.

REV. DEACON TANIS KOLISNYK works full-time at the University of Winnipeg in the area of Student Life as an Academic advisor, while also focusing on students in the Youth in Care Tuition Waiver program. As a Métis woman, she is an active in community member who sits on the Louis Riel Institute Board, Kinew Métis Local, and serves as an ordained clergy/organist at St. Philip's Anglican Church. Her diaconal chaplaincy work includes meeting with women at the Women's Correction Centre. Tanis is currently completing her Master of Arts in Theology.

DON FUCHS is a professor at the Faculty of Social Work, University of Manitoba. He has served as a practitioner, supervisor, researcher and teacher in the area of child welfare. He is a founding member of the Prairie Child Welfare Consortium. His current research interests include strengthening the social network and social support resources for children and families.

DAVE RUNDLE is a member of Ebb & Flow First Nations and is now retired from work in child welfare. He has served more than 25 years, most recently in the capacity of Executive Director at Southeast, Anishinaabe and Animikii Child & Family Services. (Dave resigned from the board in December 2013)

WILLIAM LATHLIN is from the Opaskwayak Cree Nation (OCN) and has a strong voice within the community and he has dedicated many years leading our community in politics. He has also served on numerous Committees and Boards for many years. Over the years of leading and learning William now shares his knowledge throughout the schools in OCN and at many other community functions.

LISA CHAMPAGNE has worked for many years in the area of child and family services in a leadership capacity in both public and private agencies, as well as serving on many boards and committees tasked with providing child welfare and other social services. Currently, she is employed with the City of Winnipeg as the Aboriginal Community Projects and Initiatives Coordinator. Lisa graduated from the University of Manitoba with a Masters of Social Work (Social Planning, Policy and Administration).



SHERRY SMITH from the Southwest Region of Manitoba is a proud Métis woman residing in Winnipeg. Obtaining a diploma in Business Administration with a management concentration, Sherry is the Operations Manager of the Treaty Relations Commission of Manitoba (TRCM). Overseeing multiple projects in which the TRCM is currently engaged. Her goals are to create awareness and support to strengthen the health and well-being of Métis families and communities throughout Manitoba.



Report from the Executive Director

On behalf of the Child and Family All Nations Coordinated Response Network (ANCR), I am pleased to present the 2013/14 Annual Report. This report will provide you with an overview of ANCR's growth and development as we work towards being an employer of choice while providing exemplary Child and Family Intake Services. You will also find information on all of the programs and services ANCR provides and service statistics for each program.

It is ANCR's goal to work in collaboration with the community to ensure the safety of children by strengthening and supporting families. We are committed to working in partnership with families, community, collaterals and stakeholders to ensure the health and well-being of our children. This is achieved by embracing the principles of the Aboriginal Justice Inquiry-Child Welfare Initiative and continuing to make strides towards providing culturally appropriate services by a culturally representative workforce.

ANCR has worked diligently on expanding and promoting early intervention services and cultural programs. We continue to build upon best practice through the development of a new service model and more effective intake assessment tools. As an agency that is mandated to provide service to all nations, we focus on culture and diversity strategies in service delivery and in human resources. One of our major achievements this year was the creation of a new Vision and Mission which more accurately reflects who we are and what we are here to achieve. We are now working towards using the Seven Sacred Teachings to assist us in the development of agency value statements. These will be used to guide how we treat ourselves, each other, our partners and most importantly the children and families we all work for.

The provision of excellent intake services and continual growth would not have been possible without the commitment and perseverance of our staff team. ANCR recognizes our employees as our most valuable asset and I would like to thank each and every ANCR staff member.

I would also like to thank the ANCR Board of Directors for their dedication, guidance and support. ANCR continues to develop due to their support and commitment. The Southern First Nations Network of Care, as our mandating authority, and ANCR's Joint Management Group, the four Chief Executive Officers of the four Child and Family Services Authorities, deserve our appreciation for their leadership and guidance.

Thank you,

Sandie Stoker
Executive Director



ANCR – Growth & Development

ANCR continues to work towards the goals set during the three year change management process (2010-13) to:

- ⊕ Build a stronger, more vibrant organization
- ⊕ Provide significantly improved child and family intake services, and
- ⊕ Build a great place to work

The ANCR Service Model Review (SMR), jointly conducted by the Southern First Nations Network of Care and the (then) Department of Family Services and Housing, Child Protection Branch in 2009 acts as a guide in informing the necessary changes that need to occur to build on the exemplary intake services we currently offer.

ANCR continues to report significant success in terms of its internal capacity to manage the process of change. The agency has taken significant strides this year in both organizational and service model development.

Organizational Developments

Culture and Diversity

Culture and Diversity Framework

ANCR is developing an overall framework that links our various strategies with a common philosophy and a common set of objectives. The framework will be founded on the inter-related objectives of cultural competence and safety and will shape both service and organization objectives:

Our service model must reflect our mandate and the service assumptions under which we are mandated. The principles in the *Child and Family Services Act* illustrate that part of ensuring safety for children is respecting their right to culturally appropriate service. The culture and diversity framework will identify the need to examine our service model and to assess our tools and methods to develop promising practices that ensure cultural safety for children and families.

In order to further an environment of **cultural safety**, the children and families we serve need to see themselves reflected in their service providers. This will be accomplished by hiring employees with direct cultural knowledge and experience in common with the children and families we serve: their needs, wants, identity, struggles, desires and concerns. This will contribute to an experience of cultural safety and to systemic change.

Our employees need every opportunity to develop **cultural competence**. By building in all of our employees an understanding and appreciation of the diversity among the children and families ANCR serves and establishing a capacity to provide resilient, flexible, responsive, consistent and respectful services, we increase cultural safety for staff and service recipients alike.



The framework will also create cohesion among the multiple strategies that ANCR is initiating to address the requirement of culturally appropriate service. These strategies include: The Aboriginal Employment Strategy, partnership in the General Authority Newcomer Initiative, a French Language Services Strategy, acknowledgement of culture and diversity priorities in the ANCR collective agreement and anti-harassment and discrimination strategies.

To assist in the development of the strategy and framework, ANCR has established a Culture and Diversity sub-committee consisting of a group of ANCR staff volunteers. The committee is set to start meeting in the spring of 2014.

Aboriginal Recruitment and Retention

In order to assist in the development of an Aboriginal recruitment and retention strategy ANCR has established a data gathering cycle related to the cultural diversity of the children and families we serve, as well as the cultural diversity of our employees based on self declaration voluntarily provided at time of hire. According to an analysis of the culture of origin of the primary caregivers on all ANCR intakes, 60% identify as First Nations, 27% are non-Aboriginal and 13% identify as Métis. In regards to ANCR staff, 34% of ANCR employees have self-declared to be Aboriginal. This data informs the agency that a long-term goal is to have a representative staff of 73% Aboriginal employees.

At the invitation of the Human Resource Department, a group of Aboriginal employees has formed a committee to guide the agency in the development of the strategy. The strategy will include a variety of recruitment and retention approaches, supporting the objective of an increasingly representative staff team. The committee met with a representative from the Manitoba Aboriginal Human Resource Strategies group who provided ANCR with a template for the development of a strategy. The committee is now working on a draft strategy to present to the ANCR Senior Management team and eventually the ANCR Board of Directors.

One strategy that is being explored is a preferential hiring strategy. This strategy is relatively unique as we are proposing what is known by the Manitoba Human Rights Commission as a Special Program. Our hiring objectives will be based on a workforce that is representative of the culture of clients served (73% Aboriginal) as compared to the provincial equity standard (around 12%). The proposal was tested with the Manitoba Human Rights Commission and amended based on the feedback.

The development of an Aboriginal recruitment and retention strategy is also embedded in the collective agreement in two Memoranda of Agreement. The retention strategy benefits from the inclusion of cultural and ceremonial leave days in the collective agreement. In 2013-14, ANCR received 55 requests for Ceremonial, Cultural and Religious Leave (30 for cultural events, 9 for ceremonial purposes and 16 for religious celebrations). Fifty of those requests were approved. The two most common leave requests were for Aboriginal Day and for Ukrainian Christmas.

Newcomer Initiative

Over the past year ANCR has continued to be an active partner with the Child & Family Services General Authority in the development of initiatives related to better service for new Canadian immigrants and refugees.



The products of this partnership have included development of public relations and educational print resources, a number of consultation and partnership development processes and development of a DVD resource which was rolled out in June 2013. ANCR also participated in another video project, sponsored by the Premier's Advisory Council on Immigration, to share the model being used by the initiative to partner with newcomers. The video will also be used as a learning tool internally between government departments.

ANCR staff further participated in the development of resources (in the form of "fact sheets") to support awareness and understanding of child and family services system among newcomer communities.

French Language Services

ANCR, in partnership with the Southern First Nations Network of Care, completed our French Language Services Plan which was approved in December 2013. This plan is a requirement under French Language Services legislation. The plan addresses: French designated positions, signage, active offer training, interpretation and translation. Several ANCR staff were also trained in the "active offer" of French language services in November 2013.

Wellness

Workplace Safety and Health Policies and Program

A key foundation for wellness in the workplace is a Workplace Safety and Health program, compliant with provincial legislation. ANCR Human Resources has worked with labour to finalize a complete set of Workplace Safety and Health policies, and has begun the next phase of implementation which includes development of safe work procedures and associated training for all staff and supervisors. The WSH Committee has been very active, training their members, conducting workplace inspections and working with the Operations Manager to resolve identified workplace safety issues.

Workplace Wellness Survey

ANCR continues to be committed to receiving feedback from our employees about the agency's organizational wellness. A staff survey, designed jointly by labour and management with the assistance of an objective contractor has been delivered twice to date. The next staff survey is scheduled to be delivered in the 2014-15 year. The information gathered has helped us to celebrate our successes as well as to refine and reprioritize the strategies underway at ANCR for workplace wellness.

In October, ANCR held three focus groups in follow up to the results from the Workplace Wellness Survey that was delivered in the previous year. The focus groups examined issues around staff mentorship, development and wellness. The results were shared with the Labour Management Committee and the Senior Management team to assist them in the agency's development.



Communication, Engagement and Participation

Participatory Management

Staff development days are one example of the integration of Participatory Management principles into leadership practices at ANCR. Another example is the process of creating updated Mission, Vision and Values statements. The lens of participatory management is being applied in the development of the ANCR 5 year Strategic Service Plan this year.

Mission, Vision and Values process

ANCR's original Mission and Vision statements were developed prior to ANCR "go live" within the context of the Joint Intake Response Unit. In September 2012 ANCR held a Vision, Mission and Values Development Fair where all staff were invited to participate and give feedback in the development of ANCR's new Vision, Mission, and Values. From that process a committee of staff was struck to work on crafting the Vision and Mission as well as creating a process for ANCR to establish organizational values.

In October 2013 the ANCR Board of Directors approved the new Vision and Mission statements:

ANCR's Vision:

- Our community is strong and diverse, honours all cultures, and is free from systemic barriers
- Families are healthy, supported and empowered
- Children are valued, respected and safe.

ANCR's Mission:

To promote and support the safety and well being of children and families by providing culturally appropriate, strength based child and family intake services.

The next step in the process is to develop agency value statements. The committee, Senior Management and the ANCR Board of Directors jointly decided that the Seven Sacred Teachings will be the foundation to guide our values statement development. The seven sacred teachings are an Aboriginal framework for universal values that will strengthen and support the service we provide to children and families. In order to integrate these values into our day to day work, the entire agency has been engaged in a process of reflection and dialogue on the teachings and how they connect ANCR's work since January 2014. It is ANCR's goal to have the agency value statements finalized within the 2014-15 year.

Staff Development Days

As a designated intake agency delivering service 24 hours a day, every day, it can be challenging for ANCR to find opportunities to gather all staff together. Annual Staff Development Days are a mechanism to bring all staff together with a focus on training and development. The 3rd Annual Staff Development Day occurred on June 13, 2013. ANCR staff had the opportunity to participate in training sessions on: Gang Awareness, Harm Reduction, the Effects of Domestic Violence on children, Child Exploitation, Interpersonal Violence and Technology,



Emotional Intelligence, Aboriginal Social Work, Newcomers and the Child Welfare System, and Holistic Healing Approaches.

Human Resources

The ANCR Human Resources department continues to work diligently on the development of its services. This year ANCR Human Resource Policies and Workplace Safety and Health Policies were drafted and finalized. Work also began to develop the safety and health practices and procedures related to field safety and emergency procedures.

A new tool for orientation is currently in development; the employee handbook will summarize information received in the organizational orientation session, key information from ANCR policies and will outline key and consistent processes employees will undergo in order to be fully oriented to the organization and its program and services.

Harassment Prevention and Respectful Workplace Policies and Training

ANCR has developed policies to prevent and address harassment and violence in the workplace. Training has been developed specific to ANCR's policies and context and was delivered to all ANCR staff. The training has also been incorporated into ANCR's mandatory training program for all new staff.

Labour Relations

Joint Labour Management committee

The Labour/Management Committee is an advisory group that allows for meaningful consultation and dialogue between the parties on an ongoing basis. The Labour/Management Committee provides a meaningful forum for both union and management to meet, have free and open exchanges and to ensure a better understanding of the key issues and developments within ANCR. The members of the Labour/Management Committee work together to find workable solutions and resolve differences on workplace issues, recognizing that they may need to agree to disagree at times.

The ANCR Labour Management committee continued to meet during the year to discuss ANCR service and employee issues. The Child and Family All Nations Coordinated Response Network (ANCR) and the Manitoba Government Employees Union (MGEU) jointly recognize the importance of good management/union relations. We have a shared interest in working together to support a healthy and productive workplace and to ensure that the children, families and communities ANCR support receive quality service.



ANCR Service Model Developments

Differential Response/Structured Decision Making

ANCR in partnership with the Children’s Research Center, the Southern First Nations Network of Care and the General Child and Family Service Authority developed the new Manitoba Safety Assessment. All ANCR staff will be trained and the new tool will be fully implemented by July 2014.

Increased Phone Capacity

ANCR continues to make public access a priority. Two additional social work phone screeners have been permanently added to the Crisis Response Program. Indications are that ANCR is achieving above industry standards with current phone capacity averaging 96%.

ANCR Service Model Development

As was recommended in the Service Model Review, all ANCR program manuals were revised and updated to reflect current ANCR service policies and practices. The ANCR Abuse Investigation Program in partnership with all four authorities revised and updated the Abuse Investigation criteria which have been forwarded to the Child and Family Services Standing Committee for approval.

To date, 33 of 53 Service model recommendations have been completed, with 11 in progress, 1 pending other progress and 7 forwarded to the appropriate authority.

ANCR has worked diligently to ensure that service policies are in place to support service delivery. The following service policies were drafted and approved this year: Client Contact, Places of Safety, Private Arrangements, Case Recording and Documentation, Inquiry and Complaint, and Response Times.

The next great chapter in ANCR’s development process will take us through to 2015. Having successfully implemented the structured decision making tools and made some critical additions and amendments to the current service structure, the attention of the organization has turned to developing a service model that truly takes advantage of the tools. While we are confident that there is no model currently in use which exactly reflects ANCR’s requirements, Program Directors have taken the lead in researching existing models which most closely resemble the elements of best practice we expect to integrate into our agency. The Program Directors of ANCR services along with the Associate Executive Director of Service and the Director of Strategy and Policy have been working diligently on drafting a new Service Model. The first draft was presented to the Executive Director for feedback in September. The team is working towards the completion of a second draft by late spring 2014.

Aboriginal Cultural Competency and Safety Training

ANCR has been working on the development of a training curriculum based on the resource, “Working with First Nations, Inuit and Métis Families who have experienced Family Violence: A Practice Guide for Child Welfare Professionals”. An outline of the basic objectives of the curriculum was created and a search for a professional educator to develop the curriculum was conducted. ANCR will be working with professional Aboriginal educators in the upcoming year on the curriculum development and delivery of the training.



Quality Assurance and Compliance

During this reporting period, the Director of Quality Assurance and Compliance completed an audit on ANCR's use of Places of Safety. The results will be released in summer of 2014. A quality assurance audit was also conducted on ANCR's compliance with the agency's Client Contact policy. This work entailed developing the terms of reference, establishing variables to be measured and reviewing a random sample of 10% of the intakes ANCR concluded in the 2012-13 year. In total, 1,075 concluded intakes were reviewed to gather the needed data. The data is in the process of being analyzed and summarized.

Cultural Activities, Events and Services

ANCR cultural activities, events and services are open to the families that ANCR provides service to and families from our sister agencies.

Snowbird Lodge hosted celebrations for all four seasonal solstices. Each solstice was celebrated with a feast and a teaching. The event was open for ANCR staff to attend.

The ANCR Elders held eleven sweat lodges throughout the year including one for youth and one for ANCR staff. Families had the opportunity to access other cultural ceremonies and outings including a Sundance, medicine picking and bundling, and a woman's gathering.

On an ongoing basis, families have access to Elder Services at both Snowbird Lodge and the All Nations Family Resource Centre. Multiple sharing circles are also held monthly at Snowbird Lodge.

Traditional Teachings were provided at the resource centres throughout the year including: Hand Drum teaching, Who is Métis?, Medicine teachings, Women's teachings and Pow Wow teachings.



ANCR Service Reports

Abuse Investigation Program (AIP)

In accordance with the *Joint Intake and Emergency Services by Designated Agencies Regulation, 186/2003*, Section 8(b), pursuant to the Child and Family Services Authorities Act, the Child and Family All Nations Coordinated Response Network, Abuse Investigations Program (AIP) investigates and assesses all allegations of child abuse on behalf of all child and family services (CFS) agencies in Winnipeg, Headingley, and East and West St. Paul. This responsibility includes abuse investigations involving interfamilial, third party, position of trust (including day care and school division settings) and foster home allegations. This responsibility shapes an Abuse Investigations Program with highly dedicated staff, a strong investment in training, and a commitment to strong partnerships with community and collateral groups. The AIP coordinates Child Abuse Committees on behalf of each of the four authorities, providing a review of all child abuse investigations conducted by ANCR. The Child Abuse Committee also oversees decision making related to the Child Abuse registration process.

There are thirty three staff positions in the Abuse Investigations Program. This includes a Program Director, three Supervisors, twenty two Abuse Investigators, two Child Exploitation Investigators and four Administrative workers. One Child Abuse Committee Coordinator is responsible for the functions in support of the four Child Abuse Committees. The AIP is comprised of three staff Units. All new referrals are assigned according to culture of origin data. Families affiliated with the General Authority and Métis Authority are assigned to the General/Métis Abuse Unit. Families affiliated with the First Nations Northern Authority or First Nations Southern Authority are assigned to the FNN/FNS Abuse Unit. The third unit, our All Nations Abuse Unit offers auxiliary services and accepts all referrals from Child Welfare Agency partners where abuse is alleged to have occurred on their open cases.

The AIP is responsible to ensure that families receive appropriate and timely services including protection services related to abuse of child. The function of the AIP is to investigate allegations of child abuse and formulate conclusions to indicate the outcome of investigations. The AIP is also responsible to ensure that children and families requiring ongoing services are transferred to a mandated CFS agency.

The Province of Manitoba maintains a provincial child abuse registry. Its primary purpose is to protect children. Under certain circumstances, organizations and employers can access the registry to determine whether persons who will have the care of children or have unsupervised access to children are known to have been involved in the abuse of a child. The AIP Child Abuse Committee Coordinator, acts in accordance with The Child and Family Services Act to coordinate four Child Abuse Committees. The Committees review all cases of suspected abuse of a child. They advise what actions, if any, may be required to protect the child and other children. They form an opinion on whether the accused individual abused the child and determine whether their name should be placed on the Child Abuse Registry.



ANCR provides auxiliary abuse investigation services in partnership with child and family service agencies according to our mandate. This requires strong partnership and communication between AIP Investigators and social workers/supervisors at the agencies on behalf of whom they provide service. The All Nations Unit is assigned to complete these investigations. The All Nations Unit, participates in partnership meetings, information sharing sessions, case reviews, systems meetings and training to enhance and strengthen these relationships. They complete foster home investigations on behalf of external Child Welfare Agencies and are required to be responsive to the needs of both children and foster parents impacted by an abuse investigation.

The AIP has many established partnerships with community collaterals and organizations involved in responding to the abuse of children. Here are some of the key partnerships that the AIP has fostered and maintained over the past year:

- **The Manitoba Street Reach Initiative** - This provincial government sponsored initiative is mandated to identify and connect with children and youth in need of protection from sexual exploitation, to reduce and eliminate the sexual exploitation of children and youth and to identify and investigate individuals alleged to be sexually exploiting children and youth in the sex trade. Through this initiative the AIP has two child exploitation investigators who receive referrals to investigate children and youth who are at risk of being sexually exploited. These two AIP investigators also work as part of the multi-disciplinary Street Reach Team in the coordination of services to this highly vulnerable and exploited population.
- **The Winnipeg Police Service Child Abuse Unit** – Coordination and Collaboration is critical to ensuring protecting the safety of children in Winnipeg. This partnership benefits the safety of children by enhancing risk assessment and expediting decision making regarding safety plans. ANCR also engages with other Law Enforcement Agencies including RCMP and other Winnipeg Police Service departments when mutual child abuse cases are investigated.
- **Manitoba Early Learning and Childcare** – The AIP completes abuse investigations when daycare providers in home daycares or daycare facilities within ANCR jurisdiction are alleged to have abused a child. Key partnerships have been established with the provincial delegates that share responsibility over daycare licensing and authority, in order to ensure prompt effective communication and decision making in relation to persons in positions of trust.
- **The Winnipeg Child Advocacy Centre, Snowflake Centre for Children and Youth** - The centre opened in January of 2013 offering a child-focused hub in which representatives from all relevant disciplines, i.e. police, child protection, justice and health, work together, conducting joint forensic interviews and making team decisions about the investigation, treatment and management of child abuse cases.
- The primary goal of a Child Advocacy Centre is to ensure that children are not further victimized by the intervention systems designed to protect them. This includes providing abuse investigation services in a child-friendly facility, preventing further trauma to children caused by multiple contacts with different professionals and providing linkages and access to treatment and support services.



- **The Canadian Centre for Child Protection** - Cybertip is Canada's national tip line for reporting the online sexual exploitation of children through the Centre for Missing and Exploited Children. Cybertip analyzes a child pornographic referral report and, on concluding that the representation, material or recording is potentially illegal, reports the matter to law enforcement and child welfare in the appropriate jurisdiction. Cybertip and ANCR share a network portal to communicate data regarding Manitoba based alleged offenders and victims. These referrals are received and managed by the AIP if the alleged offender or victim is identified to reside within ANCR jurisdiction.

Service statistics for Abuse Investigation can be found in Appendix A.

Crisis Response Program (CRP)

The Crisis Response Program is the entry point to the services of ANCR and the wider system. The CRP is the first to respond to all new requests for service and all child protection referrals during normal working hours (Monday to Friday, 8:30am to 4:30pm). Screening and initial assessment occurs on all requests for service. Where an emergency response is warranted, the matter remains with CRP, with the exception of abuse matters which are promptly referred to the Abuse Investigations Program for response. The team addresses the most urgent and immediate concerns for child safety and well being, so that further assessment, planning and stabilization can occur.

Once CRP has assessed the service request, determined that a CFS response is warranted, and responded to any emergencies, an intake case is opened and referred to the appropriate ANCR program for further assessment or service. If the assessment indicates that further services are not required, CRP will complete the necessary follow up and close the file.

The Program consists of nineteen staff members, including the Director of CRP and AHP, two Supervisors, two units of seven Social Workers (which include two dedicated phone screeners), a Medical Liaison Social Worker, and an Administrative Support Worker.

Within the CRP the implementation of Structured Decision Making (SDM) tools has resulted in greater internal consistency. CRP completes a safety assessment on every allegation of abuse or neglect and completes the initial safety plan if required.

During this reporting period the Program has maintained an average phone capacity of 97%. This means that 97% of the calls forwarded to the CRP are immediately answered by a social worker.

The CRP has continued its partnership with Corrections Canada to take preventative steps in supporting children and families when adults are leaving the institutions to resume their lives in the community. The program works with parolees in the pre-release period to provide assessments which lead to improved planning and service provision for families. In addition the CRP has established a partnership with the Women's



Correctional Centre to support the establishment of the Mother-Child program. The program was established to support women in the centre being able to parent their new born infants if assessed as safe to do so.

Service statistics for Crisis Response can be found in Appendix B.

Medical Liaison Social Worker

The Medical Liaison Social Worker is a unique position within ANCR. It was created by the Child and Women's Health and Child and Family Services working group to build bridges and resolve service issues between the medical and child welfare systems, to benefit our shared clientele. The medical liaison is a member of the working group. The working group continues to offer a series of lunch and learn opportunities that have increased knowledge and awareness between the two systems.

The Medical Liaison Social Worker consults on child welfare matters through the Social Work department at the Health Sciences Centre. The liaison is connected to Women's Hospital, Children's Hospital, the Emergency departments, Child and Adolescent Mental Health and Medicine and Surgery. The liaison social worker has been working very closely with the Children's Hospital Emergency Department (CHED) to facilitate a more collaborative relationship between CHED and CFS agencies to enhance service to those children identified who frequently present at the CHED.

As child welfare matters encountered at the hospital often extend beyond ANCR's immediate scope, the liaison role requires engagement with child welfare agencies throughout the province from all four Authorities. The liaison position has been very effective at assisting in bridging service gaps and problem solving challenges between the systems for the benefit of children and families.

After Hours Program (AHP)

ANCR is mandated to provide emergency child welfare services outside of regular business hours (from 4:30 p.m. to 8:30 a.m. Monday to Friday, 24 hours a day on Saturday and Sunday, and all statutory holidays) on behalf of all agencies in our jurisdiction. The AHP responds to new requests for service and all child protection referrals. Additionally CFS agencies may make requests for the After Hours Program to provide urgent service on open cases. The majority of work completed by the AHP is on behalf of our partner agencies.

The program works closely with the Crisis Response Program to integrate dayside and afterhours functions. The program's success depends upon maintaining good communication and strong working relationships with other ANCR programs and with our partner agencies. It is our goal to deliver seamless services 24 hours a day to children and families.

The After Hours Program consists of 20.8 staff positions which include two Supervisors, an Administrative Assistant, two Case Aides, and both full and part time Social Work staff. In addition, the AHP also utilizes a roster of casual staff.



Afterhours continues to meet with our partner agencies to discuss our emergency services and to provide a forum for feedback to increase the quality of service we provide.

Service statistics for After Hours can be found in Appendix B.

Intake Program

The Intake Program is the second level of intake within ANCR, responsible to assess whether children and families are eligible for services as indicated in Part II of the *Child and Family Services Act*, and whether children are in need of protection as defined in Part III of the *Child and Family Services Act*. The Intake Program is also responsible to determine the appropriate mandated Child and Family Services agency to provide ongoing service where necessary, and to conduct the transfer of the family to that agency.

The Intake Program receives referrals from the ANCR Crisis Response Program, the After Hours Program, the Family Enhancement Program and the Abuse Investigations Program, where other issues in addition to abuse have been identified in an open case.

The main objectives and key functions of the Intake Program include:

- Providing intervention and crisis stabilization services to families
- Completing safety assessments, safety plans and risk assessment on all allegations of Abuse or neglect
- Completing thorough assessments and investigations of child protection issues, including an assessment of the families and Child(ren) Strengths and Needs
- Case management activities on new ANCR Intakes
- Providing referrals internal and external to ANCR
- Transferring families for ongoing services to 20 mandated child and family service agencies

The Intake Program consists of forty-three staff members including: one Program Director, five Supervisors, thirty Intake Workers, five Administrative Support Workers, one Case Aide and one Legal Clerk. Each Supervisor manages a team of six Intake Workers for a total of five Intake teams. Each Administrative Support Worker provides support to one Intake team.

The Intake Program has seen a decrease in the number of referrals to the program and a decrease in the number of families transferred to receive on-going child welfare services. For the year April 1, 2013 to March 31, 2014, the number of referrals to the Intake Program decreased from 3,127 to 2,725. The number of families transferred for further CFS services decreased from 2,030 to 1452. The number of children in care increased from 568 to 576. Although the number of Family Service files shows a decrease in the past year, the number of children in care has increased. Overall, the Intake Program remains to be a busy program with a more robust



and thorough assessment process since the introduction of the Structured Decision Making tools and case recordings for transfers and closings.

Service statistics for Intake can be found in Appendix C.

Early Intervention Program (EIP)

Early Intervention Program (EIP)

The Early Intervention Program's (EIP) services broaden the spectrum of child and family services. The program emphasis is placed on prevention and early intervention to support families to care for their children at home. Early intervention and prevention services assist families with staying together while ensuring that children are safe and protected. These services provide families with timely supports that can help them to address problems before they develop into crises. In this way, early intervention and prevention services promote healthier family relationships. Using a strength-based model, EIP seeks to reduce or eliminate the need for protection services among families at risk. EIP receives referrals from ANCR and all mandated CFS agencies and provides holistic, wrap-around, culturally appropriate, supportive services for families to assist them in building their family's strengths and resource network.

The EIP Service Teams and Family Resource Centres work in harmony to provide services and resources for families. There are two Service Units, one serving First Nations families and another primarily serving the Métis and General population. The two resource centres, All Nations Family Resource Centre and Waa Pina Kosiis Miiki Waahp Resource Centre (also known as Snowbird Lodge) provide the continuum of services that are culturally based.

The Service Units consist of 2 supervisors and 12 social workers. Each social worker provides concentrated supportive services to a maximum of 20 families for up to 90 days. The goal of the Service Units is to provide intensive and culturally relevant programs and services to support families to decrease the risk to their children and prevent them from requiring further involvement with the Child and Family Services system.

Service teams use the Structured Decision Making (SDM) tools to assess risk and develop a case plan with the family's participation. The SDM model provides workers with a set of tools and decision guidelines designed to provide a higher level of consistency and validity in the assessment and decision making processes and a method for guiding their response in order to focus on resources for families and the children at greatest risk of further harm. The workers are responsible for identifying and assessing family's needs, development and coordination of plans, strategies and referrals to address the well-being of families and children.

The Family Resource Centers' staff work with the Services teams by providing holistic and wrap around community based services to ANCR's Service Teams' that refer families, external agency referrals and self -



referrals. The programs are developed and delivered based on the strengths and needs of families. The services at the Family Resource Centers are delivered through supportive prevention and intervention focused group and individual programs.

Snowbird Lodge Family Resource Centre staff includes a supervisor, 2 elders, 2 elders' helpers, 3 social workers and 1 administrative assistant. Programs are developed by the Centre's social workers and cultural program staff to meet the needs of families requesting specific programming to address their families' needs ensuring all programming is delivered within a culturally framework. Traditional teachings, Pow Wow and Drum teachings, cultural events and ceremonies are made accessible to families as well as to all of ANCR's staff.

The All Nations Family Resource Centre staff is composed of a supervisor, 4 social workers, 1 clinical nurse and 1 administrative assistant. Programs are developed and delivered to families referred through the same three streams, working closely with the Métis – General Family Services Team to provide supportive prevention and intervention focused programs. The Medical Clinic/Nurse holds clinics to provide services to children in the care of the Four Authorities.

Service statistics for Early Intervention can be found in Appendix D.



Human Resources

The Human Resources team is responsible for supporting the recruitment of employees, classification of staff positions, labour relations, employee development and employment equity functions within the organization.

ANCR is a human services organization and our workforce is our foundation. Our strategic focus in this past year and going forward includes the professional development of a highly skilled workforce, able to meet the challenge of supporting diverse communities and partners in the field of child welfare. Increasing the Aboriginal representativeness of our workforce is of primary importance to ANCR and critical to the provision of culturally appropriate service to our clients.

Staff Complement (FTE)	March 31, 2014	<i>March 31, 2013</i>	<i>March 31, 2012</i>
Senior Management	10	11	11
Human Resources	3	3	4
Finance & IT	5	5	5
After Hours Program	21.8	22.3	23.3
Crisis Response Program	17	17	20
Intake Program	34	34	35
Abuse Investigation Program	32	32	37
Early Intervention Program	31.7	32.7	34.7
Differential Response	8.5	8.5	9.5
Administration and Reception	3	8.5	8.5
Agency Resources	2	2	2
Emergency Placement Resources	22	22	22
Total ANCR Staff Complement	190	198	212

	March 31, 2014	<i>March 31, 2013</i>	<i>March 31, 2012</i>
Vacancies	18.11	13.41	22.5



Cultural Representativeness		March 31, 2014		<i>March 31, 2013</i>		<i>March 31, 2012</i>	
Total Workforce	Non Aboriginal	119	66%	130	67%	131	65%
	Aboriginal	60	34%	64	33%	71	35%

Appendices

Appendix A – Abuse Investigations Service Statistics

Number of Abuse referrals assigned at the Abuse Investigations Program								
	First Nations Team	GA/Métis Team	All Nations Team	Sexually Exploited Youth Unit	Total 2013/14	Total 2012/13	Total 2011/12	Total 2010/11
# internal ANCR referrals	439	635	61	10	1145	1266	1,280	1,434
# external agency referrals	17	10	336	45	408	465	471	447
Total Abuse Referrals received	456	645	397	55	1553	1731	1,751	1,881

Number of maltreatment investigations completed on referrals received (note that more than one investigation can occur within referral received)				
First Nation Team	GA/Metis Team	All Nations Team	Other ANCR Programs	Totals
414	598	423	236	1731

Number of external referrals assigned at ANCR (distribution by CFS Authority)				
General Authority	Métis Authority	Southern Authority	Northern Authority	Total
125	50	183	50	408

Number of external referrals received not requiring ANCR Abuse Investigation services (distribution by CFS Authority)				
General Authority	Métis Authority	Southern Authority	Northern Authority	Total
26	8	36	17	87

Type of Abuse referrals received by AIP teams					
	First Nations Abuse Team	GA/Métis Abuse Team	All Nations Abuse Team	Sexually Exploited Youth Unit	Total
Physical Abuse	273	377	200	3	853
Sexual Abuse	178	255	190	52	675
Sexual /Physical	5	13	7	0	25
					1553

Number of Closings and Abuse Findings Determined PER CASE OPENED (note that more than one abuse investigation may have been completed in an open case)					
	First Nations Abuse Team	GA/Métis Abuse Team	All Nations Abuse Team	Sexually Exploited Youth Unit	Total
# of Closings	465	351	410	31	1257

Abuse Findings	First Nations Abuse Team	GA/Métis Abuse Team	All Nations Abuse Team	Sexually Exploited Youth Unit	Total
Inconclusive	52	40	65	6	163
Unsubstantiated; did not occur	189	137	151	18	495
Unsubstantiated; inappropriate discipline	178	156	97	2	433
Substantiated	69	55	52	3	179
Case transferred pending conclusion being determined	11	0	0	0	11



Appendix B – Crisis Response and After Hours Service Statistics

Reception – All calls received	2013/14	2012/13	2011/12
Service calls received dayside	31,460	37,979	39,208
Service calls received evenings/weekends	36,799	43,350	41,327
Other calls received	22,406	19,267	17,256
Total calls received at reception	90,665	100,596	97,791

Calls forwarded to the Crisis Response Program and After Hours Program - 2013/14				
Program	Total calls forwarded	Calls answered	Hang-ups, disconnects, lost calls	Call capacity
CRP	7,158	6,938	220	97%
AHP	38,343	36,689	1,654	96%

Referrals Received - 2013/14	Crisis Response Program	After Hours Program	Programs Combined
Screened out – not a child welfare matter	2,829	497	3,326
Screened in – new referral	3,322	563	3,885
Referral on existing case	132	8,370	8,502
Total Referrals	6,283	9,430	15,713

Intakes Closed by CRP and AHP				
Crisis Response Program	After Hours Program	Total Intakes concluded 2013/14	Total Intakes concluded 2012/13	Total Intakes concluded 2011/12
1,548	7,246	8,794	11,829	8,362



Appendix C - Intake Service Statistics

Intake Referrals and Closings			
	2013/14	2012/13	2011/12
Total Number of Referrals to the Intake Program	2,859	3,127	2,755
Intakes closed (no further services required from another Program or Agency)	1,093	1,141	596

ANCR Transfers to CFS Agencies							
	Southern Authority	Northern Authority	Métis Authority	General Authority	Total 2013/14	Total 2012/13	Total 2011/12
Family transfers to CFS agencies for ongoing service	418	190	242	835	1,685	2,030	1,444
Child in Care transfers to CFS agencies for ongoing service	185	166	82	143	576	568	480



Appendix D – Early Intervention Service Statistics

Services Teams

Team Case Load Breakdown for April 1, 2013 to March 31, 2014

	# Files Open	# Files Closed	# Files Transferred
First Nations Family Services	111	148	58
Métis/General Family Services	336	169	63

Parent Teen Series

Program	# of Participants	#'s of Sessions
Parent Teen Program	598 (387 Adults)(92 Children)(119 Youth)	139 Sessions (10 series)

Resource Centre Intakes – 4 Authorities

	Northern	Southern	Métis	General	Total
SBL	41	155	21	14	231
ANFRC	69	232	132	216	649
Total	110	387	153	230	880

Health Care (on-site nurse) – 2,425 children

Respite Services to EIP Families

Programs	# of referrals
EIP Service Teams:	119
SBL	76
ANFRC	107



DR Initiatives/Family Activities	# of Participants	# of Sessions
EIP Service Teams		
Fun Fabulous Fridays, Tinker town, Popcorn & free movie at Assiniboine Park	106	5
Snowbird Lodge Family Resource Centre		
Camp Manitou, fish derby, puppet making, Christmas Family Party	80	4
Workshops		
Bullying, Gang Awareness, Mental Health Awareness	26	3
All Nations Family Resource Centre		
Corn Maze, Hay Ride, Tinker Town, Dream Catcher making & Manitoba Museum for Children	125	5
Workshops		
Parent Communication, Expectant Parent, Stress Management, Mental Health, How to Communicate Better with your CFS worker, Four Medicine Teachings & Who is Métis?	35	9

Snowbird Lodge Family Resource Centre

April 1, 2013 to March 31, 2014

Elders & Social Worker Support Services	# of participants	# of sessions
Elders' Consultations	196	On-going
Workers' Outreach	340	On-going
On site family visits	40 (15 Adults & 25 CIC)	14
Drop in (Visits, Program Information, On-site Activities, Research, Phone, Fax, Coffee)	1,079	On-going
Self Care & Parenting Programs	# Registered	# Completed
Managing your Anger	150	56
Men's Wellness	18	10
Women's Wellness	5	3
Parents with CIC	16	4
Family Harmony	216	79
Reclaiming Women's Self	79	48
Parent/Teen Communication	13	7
Parenting Teen	45	21
Relapse Prevention Program	96	44
Triple P	265	124
Teen Anger Management	12	3
Total	915	399



Cultural Programs	# of Participants
Annual Christmas Family Party	68
Feasts & Pipe Ceremony (equinox and solstice)	129
Grandfather picking	4
Hand drum teaching	7
Language Class	9
Medicine picking	36
Pow Wow Teachings	22 (16 Adults & 6 Children)
Rebuilding of sweat lodge	10
Sharing Circles	248 (236 adults & 12Children)
Sundance Teachings	8 (6 Adults & 2 Children)
Skirt Making	6
Sweat Lodge (children, youth, men, women, ANCR staff)	84 (62 Adults & 22 Children)
Traditional Arts & Crafts	4
Total	661

All Nations Family Resource Centre

April 1, 2013 to March 31, 2014

Elders & Social Worker Support Services	#of participants	# of sessions
Elders' Consultations *(new to the centre)	14	6
Workers' Outreach	168	On-going
Drop in (Visits, Program Information, On-site Activities, Research, Phone, Fax, Coffee)	137	On-going
Community Computer	350	On-going



Self Care & Parenting Programs	# Registered	# Completed
Managing Your Anger (Day)	99	49
Managing Your Anger (Eve)	123	67
Domestic Violence	42	18
General Parenting/Family Harmony (Day)	53	39
General Parenting/Family Harmony (Eve)	32	23
Healthy Relationships	30	10
Healthy Relationships for Young Moms	9	8
Life Skills	20	12
Men's Domestic Violence	6	2
Men's group	12	5
Nobody's Perfect	82	44
Parent Teen Communication	45	16
Positive Discipline	20	8
Self-Care/Self-Worth (Day/Eve)	107	52
Summer Youth Program	7	3
Triple P (Day)	141	65
Triple P (Eve)	149	75
Triple P Somalia (Day)	5	5
Women's Domestic Violence	28	7
Wiggle Giggle & Munch	32	6
Total	1,042	516



Appendix E – Culture of Origin Service Statistics

ANCR – April 1, 2013 – March 31, 2014

Culture of Origin on Intake Case Reference on closed ANCR Intakes

Culture of Origin of Case Reference	Number of Intakes Closed	Total Percentage
Treaty	6084	55.3
Non-Status	502	4.6
Metis	1402	12.7
Inuit	37	0.3
Non-Aboriginal	2978	27.1
Total	11003	100

Crisis Response Program

Culture of Origin of Case Reference	Number of Intakes Closed	Percentage
Treaty	612	53.4
Non-Status	38	3.3
Metis	137	11.9
Inuit	4	0.3
Non-Aboriginal	356	31.0
Total	1147	100.0

After Hours Program

Culture of Origin of Case Reference	Number of Intakes Closed	Percentage
Treaty	4368	62.5
Non-Status	381	5.4
Metis	920	13.2
Inuit	12	0.2
Non-Aboriginal	1310	18.7
Total	6991	100.0

Intake Program

Culture of Origin of Case Reference	Number of Intakes Closed	Percentage
Treaty	872	41.0
Non-Status	68	3.2
Metis	260	12.2
Inuit	18	0.8
Non-Aboriginal	910	42.8
Total	2128	100

Abuse Investigation Program

Culture of Origin of Case Reference	Number of Intakes Closed	Percentage
Treaty	175	33.9
Non-Status	11	2.1
Metis	55	10.7
Inuit	2	0.4
Non-Aboriginal	273	52.9
Total	516	100

Family Enhancement Program

Culture of Origin of Case Reference	Number of Intakes Closed	Percentage
Treaty	52	23.3
Non-Status	11	4.9
Metis	30	13.5
Inuit	1	0.4
Non-Aboriginal	129	57.8
Total	223	100



A COPY OF ANCR'S AUDITED FINANCIAL STATEMENTS
CAN BE OBTAINED BY CONTACTING OUR FINANCIAL DEPARTMENT

CHILD AND FAMILY ALL NATIONS

COORDINATED RESPONSE NETWORK

835 Portage Avenue, Winnipeg, MB, R3G 0N6

(204) 944-4200 / 1-866-945-2627

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Child and Family All Nations Coordinated Response Network

835 Portage Avenue, Winnipeg, MB, R3G 0N6

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Metis Child and Family
Services Authority



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