



## Service Expectations – Specialized Long-Term Care

Specialized Homes and Support Services is a suite of services within the ministry's broader system of care. It is comprised of four distinct service types: Emergency Care; Low-Barrier Short-Term Stabilization Care; Respite Care; and Specialized Long-Term Care. Each of the Specialized Homes and Support Services has, within its care type: consistent service expectations, deliverables, and intended outcomes across the province. In accordance with legislative requirements, placement priorities and best practices, Specialized Homes and Support Services are considered only after exploring less intrusive options to meet a child/youth and family's needs, such as wrap-around supports provided within the child's home, supports through extended family, community, or the Family Care Home network.

Specialized Long-Term Care provides a safe, loving, and nurturing environment for children/youth in-care requiring intense supervision and supports. This home is provided to children and youth with exceptional needs requiring a 24-hour staffed and specialized environment, and for whom all other living arrangements have been deemed unable to provide required level of support.

These homes provide a culturally safe, trauma-informed, and developmentally appropriate living environment. Children/youth are able to develop healthy attachments with a stable team of highly skilled caregivers who are equipped to meet each child's the unique day to day needs as well as support their continued growth, development and wellness. Specialized Long-Term Care also promotes attachment, emotional ties, and belonging by providing an environment where a child/youth's family, extended family, and community are welcome and engaged in their ongoing care.

## Service Recipients:

Children/youth who may benefit from Specialized Long-Term Care are:

- Children/youth in-care whose exceptional needs require highly specialized 24-hour care that cannot be provided in a less intensive setting, such as a foster home or out-of-care arrangement.

## Service Length:

This service is intended to be a stable long-term placement, in accordance with the best interests and needs of the child/youth<sup>1</sup>.

## Desired Outcomes

*How this service is supposed to benefit a child/youth/family*

Intended Outcomes	How we measure this (examples)
Progress towards child/youth's goals for community inclusion	<ul style="list-style-type: none"><li>- Child/youth participates in activities that are meaningful to them and/or improved participation in community/culture in alignment with their goals</li><li>- Progress towards their development, educational and/or treatment goals</li></ul>
Placement stability for child/youth	<ul style="list-style-type: none"><li>- No unplanned living disruptions in a 12-month period</li><li>- Consistent SHSS caregivers (staff turnover of less than 10% that year)</li><li>- Children and youth have strong, caring relationships with their SHSS caregiver(s)</li></ul>
Child/youth experience safety and improved well-being	<ul style="list-style-type: none"><li>- Progress towards identified goals for child/youth</li><li>- Child and youth wellness and emotional mental health is maintained or increased</li></ul>
Child/youth's attachment and emotional ties to family <sup>2</sup> and other supportive relationships are improved	<ul style="list-style-type: none"><li>- Self-reported feelings of belonging, positive relationship, and attachment</li><li>- Active encouragement and work towards "growing the circle" (e.g., family, home visits, other supportive relationships, and community/cultural engagement)</li></ul>
Children/youth with significant support needs (inclusive of behaviours, mental health, substance use challenges) experience improved transitions to adult care system	<ul style="list-style-type: none"><li>- Children/youth report feeling confident and prepared for their transition (e.g., having meaningful connections)</li></ul>

<sup>1</sup> Long-term placements adhere to legislative and policy requirements surrounding time frames for placement in staffed resources (Resource Work Policy 8.12(2)) and Ongoing Reassessment of Placement. The child/youth's placement will be reviewed regularly (at minimum every 6 months as per Child and Youth in Care Policy 5.6(3)), to ensure the ongoing appropriateness of the placement to continue to best meet the child/youth's needs.

<sup>2</sup> Consistent with s.17 of An Act respecting First Nations, Inuit and Métis children, youth and families; Policy 1.1 Working with Indigenous Children, Youth, Families and Communities; and other relevant sections of the Child, Family and Community Service Act

## Key Benefits of Specialized Homes and Support Services – Specialized Long-Term Care:

- A stable, loving and nurturing home that fosters attachment, individuality and growth (growth including: cognitive, emotional, physical, cultural, spiritual) and supports the child/youth's development
- Ongoing placement stability and consistent caregivers who promote attachment and belonging to family, extended family, community and culture
- A trauma-informed, developmentally, and culturally appropriate environment that cultivates feelings of acceptance, cultural connection, belonging and nurturing for children/youth and their families
- Highly skilled staff and supervisory team who have access to clinical experts and interventions that help to meet the complex and unique needs of any child/youth placed
- Professional staff who support a child/youth's care team by taking an active role in gathering the circle for ongoing support, planning, and coordination of service
- Well structured transition supports to adult services (if indicated in the Care Plan/Support Plan)
- Consistent access to cultural events and ceremonies in a child/youth's home communities
- Children and youth will benefit from being actively connected with their cultural background to the extent they desire, and the ministry will look to their voice to understand if they are meaningfully expanding their connections.

## Practice Principles:

- Best Interest of the Child (CFCSA) and Best Interests of the Indigenous Child (*An Act respecting First Nations, Inuit and Métis children, youth and families*)
- Placement Priorities as outlined in s.71 of the CFCSA and s.16 of *An Act respecting First Nations, Inuit and Métis children, youth and families*, and Ongoing Reassessment of Placement
- Culturally responsive and aligned to the [Aboriginal Policy and Practice Framework](#)
- Trauma-Informed approach (in alignment with [Healing Families, Helping Systems: A Trauma-Informed Practice Guide for Working with Children, Youth and Families](#))
- Strengths based: practice that concentrates on the inherent strengths of children, youth, families and communities
- Developmentally appropriate: practice that varies with and adapts to the age, experience, interests and abilities of individual children
- Harm reduction: practice that aims to minimize the negative health, social and legal impacts associated with health behaviours – working with people without judgement, coercion, discrimination or requiring that they extinguish the problematic health behaviours completely as a precondition of support
- Rights of the Child: Uphold the obligations outlined in s.70 (Rights of Children in Care) of the CFCSA; an indigenous child's inherent right to culture, language, and tradition; and the *Convention on the Rights of the Child* which provides a foundation for the protection of children's rights globally.

## Deliverables:

### *Physical environment:*

- Provide a safe, structured, predictable and supportive living environment with 24-hour individualized care and support to children/youth (see below for programmatic features)
- Provide a physical environment that is developmentally appropriate, culturally safe, and where the potential for further traumatization or re-traumatization is reduced
- Provide a physical environment that reflects the physical needs of the children/youth being cared for and that enables their effective care and comfort
- Provide a physical environment that supports, encourages, and safely includes family, extended family, and community

### *Programmatic features*

#### *Integrated care planning for children and youth:*

- In close collaboration with the family, social worker, and care team, provide an orientation for the child/youth to support their comfortable transition into the service prior to their arrival
- Work closely with the family, social worker and other appropriate community practitioners to facilitate a functional needs assessment of the child/youth to determine the nature of their needs and goals (physical, developmental, social-emotional, and cultural) and the current benefits and limitations of existing community supports
- Develop and implement a Service Plan (Appendix A) that is distinct from, but aligned with, the child/youth's care plan and is driven by the child/youth and their care team and built around their strengths and goals. The plan includes the required supports and approaches to address identified needs and goals, including day-to-day clinical needs, interventions, and plans for access to community supports (e.g. Child and Youth mental Health and Children and Youth with Support Needs services).
- Work with community professionals, paraprofessionals and Indigenous community members to implement the child/youth's Service Plan – meeting their physical, developmental, social-emotional, and cultural needs.
- Attend care team meetings, implement goals and ensure continued alignment of the child/youth's support plan with their care plan and other relevant planning based on their evolving needs, strengths, wishes and goals.
- Facilitate appropriate contact with family members and community, as indicated by the child/youth and/or their care team, following appropriate legislation s.17 federal act – we should call it out in the service expectations
- Continue to work with the ministry to ensure that service quality is maintained and improves over time
- Engage clinical experts and clinical consultation to meet the children and youth's needs and effective approaches for their care
- Promote/support the child/youth's engagement in personal-care routines (e.g. teeth brushing, hair brushing, bathing etc.)
- Support the child/youth to develop new skills to care for themselves
- Provide recreational, community and culturally appropriate activities
- Support the child/youth's attachment and emotional connection to family, culture, and other supportive relationships
- Facilitate regular attendance at school, in day programs, at family visits, at intervention appointments and/or recreational activities, as per care plan

- Provide healthy, nutritious meals and snacks in accordance with traditional foods and/or Health Canada's "Canada Dietary Guidelines" or the professional advice of dietary experts, where required and include the child/youths input in meal planning
- Ensure that all medical and dental needs are addressed on a regular schedule
- Administer medications, monitor and report side effects, and proactively seek medical oversight/consultation for suspected medication issues
- Develop and maintain good relationships with the neighbourhood and community in which the youth resides
- Provide opportunities/activities that encourage positive peer interaction
- Actively search for youth who have not returned to the resource and/or are involved in high-risk activities
- Involve children/youth in day-to-day household activities that include, but are not limited to: shopping, budgeting, meal preparation, household chores,
- Ensure children/youth have access to technology to support their education, recreation and social development
- Provide crisis intervention and support children/youth at all hours, both inside and outside of the resource

*Supporting transitions to permanency and age of majority:*

- Ensure that children/youth who are preparing to transition to adulthood are engaged in activities to promote their independence, as appropriate and according to their care plan/transition plan (i.e. use of public transportation, and work experience appropriate to their age and developmental level)
- In preparation for a youth reaching age 19, when the youth turns 14, coordinate with the youth's care/transition team to facilitate a supported and successful transition
- Support the youth to have an active voice in their transition planning and process

## Staffing model

1-3 Bed Resource	Staffing
<b>Residential Child/Youth Workers</b> (see appendix B for staffing expectations)	Residential Child/Youth Workers (at least one worker at the resource at all times)
<b>Night Staff</b> (see appendix B for staffing expectations)	Awake Residential Night Worker
<b>Supervision and Program management</b> (see appendix B for staffing expectations)	Residence Coordinator
	Program Manager
<p><b>Supplemental Supports</b> – additional support to meet the needs of the child/youth.</p> <p>These supports will be provided based on the child/youth’s service plan and determined/approved through collaboration with the ministry.</p> <p>Efforts will be made to leverage existing community services and supports (e.g. Ministry provided and contracted Child and Youth Mental Health and Child and Youth Support Needs services). for the purposes of:</p> <ul style="list-style-type: none"> <li>- Assessment</li> <li>- Clinical consultation</li> <li>- Intervention and therapies provision</li> <li>- Clinical care planning</li> </ul>	<p>Examples of supplemental supports include:</p> <ul style="list-style-type: none"> <li>- Additional staffing</li> <li>- Clinical consultative services</li> <li>- Clinical interventions</li> <li>- Cultural supports</li> </ul>

If required, additional on-call staff as needed to ensure sufficient staffing at all times. Subject to MCFD approval, staff may be redeployed to other programs during periods of extended vacancy.

### Qualifications:

Staff at the agency will have an appropriate level of training and experience for their position per Appendix B.

### Special Equipment:

Children/youth require universal accessibility at the facility. Reasonable access to child-specific equipment will ensure their safety, recreation, and socialization in and out of the facility (e.g. equipment augmenting inclusion, transportation supports).

## Appendix A: Examples for SHSS Service Planning

### SHSS Service Plan

An SHSS Service Plan is a document created by the service provider that supports the child's care in the home/service and includes relevant information on their needs, preferences and goals as they relate to culture, physical, cognitive, and social emotional development, and family connections and wellness. An SHSS Service Plan is created by the caregivers at the resource in partnership with the child/youth and their care team. The SHSS Service Plan mirrors and builds on the child/youth's care plan and details additional relevant goals and preferences driven by the child/youth. The plan supports local coordination of care for the child at the service between caregivers, the child/youth, their community and other supports in the community (e.g. CYSN, CYMH).

Examples of what the service plan may contemplate questions including:

- What are this child/youth's strengths and opportunities for growth? How do they see themselves and what they need?
- What are the child/youth's short- and long-term goals, in terms of relationships, interests and personal development and how can these be supported?
- Who is important to this child/youth and how can we foster these attachments?
- What are the clinical and non-clinical day-to-day needs of the child to support their growth, development, and goals? How will these supports be engaged – what is the plan for accessing community based interventions and therapies?
- What clinical oversight/training does the resource team require to meet the needs and goals of the child/families?
- Where appropriate, is this child/youth connected to an Elder or other cultural/spiritual support?
- What are the mental health, trauma, identity confirming and developmental-related supports required immediately and for their long-term wellness?
- How can the physical environment be used to support the child/youth's comfort, need for stability and support?
- What is this child/youth's current and desired network of peer support and how can we strengthen positive peer connections?
- Has the professional team previously involved with the child/youth (i.e. CYSN or CYMH supports) been engaged? What is their role moving forward
- What supports are needed for the child/youth's education?
- How can the child/youth be supported to gain a sense of personal identity and healthy risk taking?

# Appendix B: Staffing, qualifications and expectations (Examples)

Note – SDAs will populate the required position information in accordance with the populations needs and contracting requirements.

<b>Residential Child/Youth Workers</b>	
<p><b>Expectations/Potential Duties:</b></p> <ul style="list-style-type: none"> <li>• Participates in the assessment, goal setting and progress evaluation of children / youth.</li> <li>• Teaches children / youth to relate in a socially appropriate manner through the use of daily routines and activities.</li> <li>• Monitors clients in a staffed-resource setting and ensures their safety and well- being.</li> <li>• Provides trauma informed counselling (through behaviour management, attachment based, relational or other appropriate evidence informed modalities) to clients on a one-to-one and/or group basis by performing duties such as providing feedback on clients’ behavior, teaching coping techniques and adaptive behavior and providing guidance and support.</li> <li>• Provides emotional support and crisis intervention to clients which may include non-violent physical interventions.</li> <li>• Ensures communication and liaison between group home, school, family and the community.</li> <li>• Ensures that clients’ physical needs are met by performing duties such as assisting with basic personal hygiene, preparing meals, and administering medication as required in accordance with established guidelines, procedures and instructions.</li> <li>• Maintains reports such as statistics, logbooks, daily activities on residents.</li> <li>• Carries out household duties such as meal preparation and household cleaning.</li> <li>• Accompanies clients to appointments and community outings.</li> </ul>	<p><b>Qualifications:</b></p> <ul style="list-style-type: none"> <li>• Agency to use reasonable efforts to hire staff with a minimum two-year relevant diploma, or equivalent of education/experience including attachment based parenting, and relationship based interventions (trauma informed practice)</li> </ul>
<b>Awake Residential Night Worker</b>	
<p><b>Expectations/Potential Duties:</b></p> <ul style="list-style-type: none"> <li>• Monitors residents through the night and attends to any medical, emotional and behavioural needs that arise during the night.</li> <li>• Follow through on direction regarding specific residents left by the day staff.</li> <li>• Notifies staff of any major problems or emergencies. Responds to emergencies in accordance with established policies and procedures.</li> <li>• Supports residents with their morning and evening routines at the beginning and end of the shift.</li> <li>• Ensures that residents follow house rules. Monitors curfew regulations and reports to appropriate authorities as required.</li> <li>• Administers medications to residents in accordance with established policy.</li> <li>• Ensures that logbooks and other documentation such as charts and incident reports are complete.</li> </ul>	<p><b>Qualifications:</b></p> <ul style="list-style-type: none"> <li>• Agency to use reasonable efforts to hire staff with a minimum two-year relevant diploma, or equivalent of education/experience including working with children with behavioural, attachment and other needs from a trauma informed lens</li> <li>• Specific training working with children/youth with support needs.</li> </ul>

<b>Awake Residential Night Worker continued</b>	
<ul style="list-style-type: none"> <li>• Performs light housekeeping duties such as vacuuming, dusting, emptying garbage, cleaning and laundry. Performs minor building maintenance such as changing light bulbs. Reports maintenance needs to the supervisor.</li> <li>• Secures the building by arming alarms and locking doors and windows.</li> <li>• Prepares and assists residents in breakfast preparation.</li> </ul>	
<b>Asleep Residential Night Worker</b>	
<p><b>Expectations/Potential Duties:</b></p> <ul style="list-style-type: none"> <li>• Sleeps through the night hours but is required to wake in order to attend to unusual night-time needs that arise with the residents.</li> <li>• Supports residents with their morning and evening routine such as washing, brushing teeth, combing hair and assisting the residents in the preparation of their breakfast.</li> <li>• Administers medication to residents in accordance with established policy.</li> <li>• Responds to emergencies in accordance with established policies and procedures.</li> <li>• Completes related records such as logbooks, charts and incident reports.</li> <li>• Secures the building by arming alarms and locking doors and windows.</li> </ul>	<p><b>Qualifications:</b></p> <ul style="list-style-type: none"> <li>• Certificate in a related human/social service field. one-year recent related experience (or an equivalent combination of education, training, and experience)</li> </ul>
<b>Additional on-call and relief staff as needed to support the desired population</b>	
<p><b>Expectations/Potential Duties:</b></p> <ul style="list-style-type: none"> <li>• As needed</li> </ul>	<p><b>Qualifications:</b></p> <ul style="list-style-type: none"> <li>• As needed</li> </ul>
<b>Residence Coordinator</b>	
<p><b>Expectations/Potential Duties:</b></p> <ul style="list-style-type: none"> <li>• Oversees the day to day operations of a residence, provides ongoing supervision of staff, and evaluates program policies</li> <li>• Develops, implements and evaluates residence goals, objectives policies and procedures and ensures the required standards are maintained. Identifies both physical and program needs of the residence to appropriate authority. Plans with staff for changes.</li> <li>• Schedules, supervises and evaluates residence staff and monitors daily operations. Assists in recruiting and selecting of staff and provides guidance, training and orientation on policies, procedures, techniques, report preparation or other matters arising in the residence. Identifies the needs of staff for professional development.</li> <li>• Monitors, authorizes and allocates expenditures within the operating budget for the year and assists senior management in preparing the budget. Prepares and maintains related documentation.</li> <li>• Ensures the cleanliness, safety, security and maintenance of the residence in accordance with applicable licensing standards either directly or through delegation to staff.</li> <li>• Maintains the residence's inventory of supplies.</li> <li>• Works as a residence worker performing the duties as required.</li> </ul>	<p><b>Qualifications:</b></p> <ul style="list-style-type: none"> <li>• Diploma in a related human/social service field. Three years recent related experience, including one year supervisory or administrative experience (or an equivalent combination of education, training, and experience)</li> </ul>

## Program Manager

### Expectations/Potential Duties:

- Provide supervision that supports consistent quality service
- Lead the development of the support plan drawing on other experts where necessary and in collaboration with guardianship workers
- Provides leadership, guidance and participates with staff, families and others in planning and providing client plans, case conferencing, case management and the preparation of related documents and reports.
- Coordinate the care team to ensure integrated and holistic assessment and planning
- Facilitate training for staff
- Liaises with the community, government, families, officials, professionals, and organization staff and promotes community involvement in the program.

### Qualifications:

- Diploma in a related human/social service field. Three years recent related experience, including one year supervisory or administrative experience (or an equivalent combination of education, training, and experience)

Additional professional contracted under supplemental supports, including sub-contracting of resources, require approval by the ministry.