

# WORKING TOGETHER Peel Protocol for Investigations Involving Child Care Providers



### Acknowledgements

The following community members have contributed to the creation and implementation of the Peel Protocol for Investigations Involving Child Care Providers:

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### Signatories

This protocol is endorsed by:

Ministry of Education, Child Care Quality Assurance and Licensing Branch

The Children's Aid Society of the Region of Peel (Peel CAS)

The Region of Peel, Public Health

The Region of Peel, Early Years System Division

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The Ministry of Education, Peel Children's Aid and the Region of Peel have a shared and mutual interest in providing a coordinated, seamless response to reported concerns in licensed and unlicensed child care settings. This protocol has been developed to improve the service response to our shared stakeholders which will be characterized by timely and transparent communication, standardized information sharing practices and clarifications of roles, responsibilities and mandates. This protocol will highlight the manner in which our respective organizations will work together in a coordinated and collaborative manner, expectations and processes when investigations occur and the steps for conflict resolution when disagreements arise.



# B Statement of Principles

- 1. The safety of children is the ultimate goal of this Protocol and always the priority for all actions and decisions. This Protocol functions concurrently with the multi-agency Region of Peel Community Commitment to Children and Family Wellness; Child Abuse Investigation Protocol (2013/14).
- 2. Reporting of child abuse to a Children's Aid Society is both a legislative requirement and the foundation of a successful multi-agency child protection system. All information of suspected child abuse is to be reported to the Children's Aid Society.
- 3. Multi-agency and multi-directional communication and information sharing to the extent permissible by law throughout a joint/parallel investigation process are encouraged. Timely and transparent communications are critical components to ensuring a coordinated multi-agency response.
- 4. Community collaboration embraces the principles of child protection as a shared responsibility in the Peel region. All signatory agencies, respecting different mandates, roles and responsibilities, are committed to the provision and coordination of child abuse investigations and service to ensure a child friendly and child centered protection and service system.
- 5. Together with children and families, our community partners and other stakeholders we seek to understand and promote equity, diversity and inclusion while ensuring respect of all peoples.
- 6. We are committed to cultivating a positive working relationship among all signatory agencies while remaining accountable to our individual mandates. We respect the requirement of all signatory agencies to operate within their respective legislative mandates and organizational policies and procedures.



# Roles and Responsibilities

### Children's Aid Society of the Region of Peel (Peel CAS)

Peel CAS has the primary responsibility, under the *Child*. Youth and Family Services Act, to investigate child abuse and child protection allegations and thereafter to support children and families. Peel CAS aims to promote safety, wellbeing and permanency for children, in collaboration with their families and community organizations.

### Ministry of Education, Child Care Quality Assurance and Licensing Branch

The role and function of the Ministry of Education is to assess compliance and enforce the requirements under the *Child Care and Early Years Act, 2014* (CCEYA) which includes licensing and inspection under the CCEYA and investigating and responding to complaints and serious occurrences in licensed child care and complaints in unlicensed child care centres.

### Region of Peel, Early Years and Child Care

EYS is responsible for early years system planning for children 0 – 12 years providing system and business planning tools, financial supports and service delivery oversight to the licensed child-care sector through collaborative community partnerships, support to parents, caregivers, children and professionals. Supports to families include fee subsidies for eligible families and supports to children with special needs.

### Peel Public Health, Health Protection Division

The Health Protection Division of Peel Public Health is responsible for programs related to food safety, drinking and recreational water safety, immunization screening, enteric, rabies and vector-borne disease prevention, health hazard investigation, infection prevention and control in licensed child care centres and personal services settings, and tobacco enforcement.

### Peel Regional Police

The police have the mandate to enforce the Criminal Code of Canada, as well as other federal, provincial and municipal legislation. The police have the primary responsibility for conducting law enforcement and criminal investigations pertaining to allegations of child abuse.



### Identification and Report of Protection Concerns

When a child care provider, community member or professional identifies a potential child protection concern, the party identifying the potential child protection concern takes measures, where possible, to ensure the immediate safety of the child, seeking help immediately if the child requires immediate medical treatment and/or attention.

 The child care provider, community member or professional follows their duty to report (*Child*, *Youth* and *Family Services Act, Section 72 – CYFSA*) and immediately reports the child protection concern to Peel CAS. Peel CAS is available to provide consultation to assist in identifying whether a child protection report is required. If, on the recommendation of the Peel CAS Screener, a referral is deemed eligible for service, the child care provider, community member or professional will provide the family's identifying information and the referral details immediately. Consultation or referral may be made twenty four (24) hours a day (7) days a week. Peel CAS may provide direction regarding next steps to address immediate child safety.



- The following information will be requested when a report is made to Peel CAS. A report to Peel CAS can still be made even if the reporter does not have all the information listed:
  - Name of child
  - Date of birth
  - Religion and language, race and ethnicity if known
  - Address and phone number of the child care program
  - Contact information for the owner/operator of the child care program
  - Names of parent/guardian and contact information if possible
  - Names and ages of other children in the child care program and their parent/guardian
  - Specific information about the referral
  - Names of staff members involved in alleged incident
  - Any other relevant information to assist the team to conduct a customized response to the allegations, i.e. historical concerns regarding the child care program, any licensing issues etc.
- 3. If no child protection investigation is required:
  - a. Peel CAS contacts the Ministry of Education to determine if a serious occurrence has been submitted, and where a serious occurrence has not been submitted, provide information of concerns related to a licensed child care program and non-identifying information related the child(ren). The Ministry of Education subsequently determines if it is necessary to investigate, contact and/or refer to municipal authorities.
  - **b.** Peel CAS reports to the Ministry of Education to provide non-identifying information of concerns related to an unlicensed child care provider.

# Coordination of Assessment and Investigation

- i. Conducting the Investigation
- If the decision is to complete a child protection investigation, Peel CAS coordinates the child protection investigation.
- 2. Peel CAS consults with the police to determine if a joint police investigation is required.
- Peel CAS discusses concerns with the Ministry of Education for licensed child care programs or for unlicensed child care providers, to determine if a joint investigation is required.
- Peel CAS collaboratively determines the joint investigation team, which may include the Police, the Ministry of Education, the Region of Peel and/or other relevant municipal authorities such as Peel Public Health.
- 5. Once the joint investigation participants are identified, the participants share current and historical information relevant to the investigation. The following information is shared amongst the joint investigation team:
  - a) Identification of the provider;
  - b) Alleged perpetrator;
  - c) Potential child victim(s); and,
  - d) Information relevant to the investigation from the joint investigation team's records.

- 6. If the decision is to complete a joint investigation, the joint investigation team formulates the joint investigation plan based on the assessment of risk to the child, the child's age, gender, relationship, development, and timing of the interview and the nature of the allegation. The formulated plan includes the following:
  - a) Time and place of investigative interviews;
  - b) Participants in investigation;
  - c) Roles and responsibilities including who conducts the interviews; and,
  - d) Obtaining of consents to interview the identified child victim(s).
- 7. The joint investigation plan is flexible. Generally the investigative interviews occur in the following priority order:
  - a) Criminal matters investigated by police, with police taking the lead;
  - b) Child protection matters investigated by Peel CAS, with Peel CAS taking the lead;
  - c) CCEYA regulatory and legislative matter investigated by the Ministry of Education; and,
  - d) Municipally enforced by-laws and provincial legislation and other matters investigated by municipal authorities such as the Region of Peel and Peel Public Health.



- 8. The joint investigation team develops the joint investigation plan. There is flexibility in the development of the joint investigation plan, but generally:
  - a) Abuse investigations involving the police have priority for investigation by the police and Peel CAS;
  - b) Investigation by Peel CAS and other joint investigation team members subsequently follows;
  - c) Protection investigations with no police involvement are completed with Peel CAS and other joint investigation team members.
- 9. The intent of the criminal investigation completed by the police is to determine if there is a criminal component. The following are key messages and/or components:
  - a) Interview of the alleged victim occurs first and only once;
  - b) Interview of the reporter and witnesses follows;
  - c) Interview of the alleged perpetrator occurs last; and,
  - d) Police solely make the decision regarding the laying of criminal charges.

- 10. The intent of child protection investigations completed by a Children's Aid Society is the safety of the child(ren). The following are key messages and/or components:
  - a) Interview with relevant persons and key participants;
  - b) Observation of the environment such as the child care facility; and,
  - c)Decision-making around child safety.
- 11. The intent of investigations completed by the Ministry of Education is regarding adherence to CCEYA regulatory and legislative requirements for licensed child care programs and unlicensed child care facilities. The key message and/or component is to assess compliance with legislation such as compliance with staff/child ratios, physical environment, staff qualifications, prohibited practices, and children's health and wellbeing.
- 12. The intent of investigations completed by municipal authorities is regarding adherence to municipally enforced by-laws and provincial legislation such as environmental, health and dietary issues. The key message and/or component are to assess compliance with legislation such as those related to health, fire, building, zoning, and by-law requirements.



- ii. Investigation Outcome Communication
- 1. The Peel CAS worker provides notification of the outcome of the investigation. The worker completes the following:
  - a) Advises the child alleged to be in need of protection and/or the child's parent/caregiver (unless the child is a Crown ward without access) of the outcome of the investigation within fourteen (14) days of its completion;
  - b) Provides notification to the person alleged to have caused the need for protection verbally and in writing within fourteen (14) days following completion of the investigation which contains non-identifying information including details of the allegation and the verification decision and rationale; and,
  - c) Provides notification to the facility administrator in writing within fourteen (14) days following completion of the investigation which contains non-identifying information including the details of the allegation and the verification decision and rationale.
- 2. The Peel CAS worker provides the joint investigation team verbal notification of the outcome of the investigation. The worker is only able to provide information pertaining to the outcome of criminal investigations conducted by police, including criminal charges laid, upon consultation and obtaining of consent by the police. The worker does not share information related to any bail conditions.
- 3. The Peel CAS worker and Team leader consider during the verification conference whether a joint meeting with the joint investigation team is required to discuss the outcome of the investigation. Peel CAS leads coordination of the meeting, but other parties may request a meeting. The decision is discretionary and takes into consideration information such as the following:
  - a) If there are number of concerns and/or a pattern of historical concerns identified;
  - b) The seriousness of the concerns; and,
  - c) The accountability and acknowledgement of the facility administrator.

- iii. Management of Recommendations
- Upon completion of the child protection investigation, Peel CAS closes its involvement. Peel CAS may offer recommendations to improve/address conditions which lead to the child safety concerns.
- 2. Any additional follow-up to recommendations or requirements is determined and managed by the relevant stakeholders such as the Ministry of Education or the Region of Peel. It is the licensee's responsibility to address any requirements or recommendations within the established timeline.
- All parties who are signatories to the Protocol for Joint Investigations on Child Care Providers (2016) continue to have the Duty to Report. If any new concerns are identified, the above procedures are followed.



## Protocol Management

#### i. Orientation

The signatory organizations of this Protocol will commit to embrace the principles and the practice of this protocol and will develop means to share this protocol with their staff through staff training. It is a desired outcome of this protocol that through building capacity there will be improved working relationships amongst all signatory organizations.

### ii. Resolving Differences

While every effort should be made to work cooperatively and collaboratively to ultimately benefit service to children, families and child care programs in our region, there may be times where there are differences amongst the organizations. Issues and concerns are to be resolved in the following ways:

- Staff of the organizations involved will contact each other directly regarding issues/concerns to work toward resolution, considering case conferencing as an option.
- If staff of the organizations involved cannot resolve the issue, they will notify their respective managers.

- Managers of the organizations involved will contact each other directly regarding the issues/concerns and will work collaboratively to develop a plan towards resolution of the matter with all parties involved. This also may include case conferencing with the respective staff of the organizations involved to establish resolution to the issues.
- In cases where the above steps have been followed and the matter has still not been resolved, involvement of senior managers of the organizations involved may be necessary to facilitate an agreement.
- Differences of opinions are seen to be opportunities for learning and process improvement and in situations where a process occurs to resolve differences, a nonidentifying summary of the issue and resolution will be submitted to the Liaison Group to support continuous improvement.

### iii. Continuous Improvement and Protocol Review

The signatory organizations will appoint a representative(s) to form a Liaison Group for the purposes of conflict resolution, consultation, continuous improvement and future protocol review. The Liaison Group meets a minimum of 2 times a year.

This protocol will be reviewed at least every three (3) years or as required by new legislation or regulations set out by the Province of Ontario.



### i. How to Make a Referral to Peel Children's Aid

Calls to Peel CAS are answered by a trained child protection worker. These "front-line" workers are part customer service representative, part counselor and their role is to listen carefully so they can understand how to help. After hours, several teams work together to provide services 24/7 to the Peel community.

To make a referral to Peel Children's Aid: Phone: 905-363-6131 Fax: 905-363-6133 Toll free: 888-700-0996 24 hours a day, 7 days a week

25 Capston Drive Mississauga, ON, L5W 0H3

### ii. Duty to Report: CFSA Section 72

CYFSA s.72(1) Despite the provisions of any other Act, if a person, including a person who performs professional or official duties with respect to children, has reasonable grounds to suspect one of the following, the person shall forthwith report the suspicion and the information on which it is based to a society:

- The child has suffered physical harm, inflicted by the person having charge of the child or caused by or resulting from that person's,
  - i. Failure to adequately care for, provide for, supervise or protect the child, or
  - ii. Pattern of neglect in caring for, providing for, supervising or protecting the child.

- There is a risk that the child is likely to suffer physical harm inflicted by the person having charge of the child or caused by or resulting from that person's,
  - i. Failure to adequately care for, provide for, supervise or protect the child, or
  - ii. Pattern of neglect in caring for, providing for, supervising or protecting the child.
- 3. The child has been sexually molested or sexually exploited, by the person having charge of the child or by another person where the person having charge of the child knows or should know of the possibility of sexual molestation or sexual exploitation and fails to protect the child.
- There is a risk that the child is likely to be sexually molested or sexually exploited as described in paragraph 3.
- 5. The child requires medical treatment to cure, prevent or alleviate physical harm or suffering and the child's parent or the person having charge of the child does not provide, or refuses or is unavailable or unable to consent to, the treatment.
- 6. The child has suffered emotional harm, demonstrated by serious,
  - i. Anxiety,
  - ii. Depression,
  - iii. Withdrawal,
  - iv. Self-destructive or aggressive behavior, or
  - v. Delayed development,

And there are reasonable grounds to believe that the emotional harm suffered by the child results from the actions, failure to act or pattern of neglect on the part of the child's parent or the person having charge of the child.

- 7. The child has suffered emotional harm of the kind described in subparagraph i, ii, iii, iv or v of paragraph 6 and the child's parent or the person having charge of the child does not provide, or refuses or is unavailable or unable to consent to, services or treatment to remedy or alleviate the harm.
- 8. There is a risk that the child is likely to suffer emotional harm of the kind described in subparagraph i, ii, iii, iv or v of paragraph 6 resulting from the actions, failure to act or pattern of neglect on the part of the child's parent or the person having charge of the child.
- 9. There is a risk that the child is likely to suffer emotional harm of the kind described in subparagraph i, ii, iii, iv or v of paragraph 6 and that the child's parent or the person having charge of the child does not provide, or refuses or is unavailable or unable to consent to, services or treatment to prevent the harm.
- 10. The child suffers from a mental, emotional or developmental condition that, if not remedied, could seriously impair the child's development and the child's parent or the person having charge of the child does not provide, or refuses or is unavailable or unable to consent to, treatment to remedy or alleviate the condition.

- 11. The child has been abandoned, the child's parent has died or is unavailable to exercise his or her custodial rights over the child and has not made adequate provision for the child's care and custody, or the child is in a residential placement and the parent refuses or is unable or unwilling to resume the child's care and custody.
- 12. The child is less than 12 years old and has killed or seriously injured another person or caused serious damage to another person's property, services or treatment are necessary to prevent a recurrence and the child's parent or the person having charge of the child does not provide or refuses or is unavailable or unable to consent to, those services or treatment.
- 13. The child is less than 12 years old and has on more than one occasion injured another person or caused loss or damage to another person's property, with the encouragement of the person having charge of the child or because of that person's failure or inability to supervise the child adequately.



iii. Ministry of Education, Early Years Division, Child Care Quality Assurance and Licensing Branch (CCQALB)

### Licensed Child Care

Licensed child care programs must meet and maintain specific provincial standards set out in <u>Ontario Regulation</u> <u>137/15 General</u>. These standards address items that affect quality in licensed child care programs, such as staff/ child ratios, physical environment, staff qualifications, and children's health and wellbeing. These standards provide for the health and safety, and quality experiences of children.

#### Licensing Requirement

A person who operates a child care centre with six (6) or more children under the age of thirteen (13) is required to obtain a licence.

A licensed home child care provider can care for a maximum of 6 children under the age of 13 years.

Staff at the Ministry of Education make unannounced inspections of all licensed child care programs to:

- Make sure that provincial standards are being met,
- Issue and renew licences,
- Investigate complaints, and
- Monitor licensees who are having difficulty meeting licensing standards.

Categories of requirements include:

- Ratios and Group Size
- Building, Equipment and Playground
- Health and Medical supervision
- Nutrition
- Program for Children
- Staff Qualifications
- Staff Screening Measures
- Emergency Preparedness
- Administrative Matters/Records

There are two types of licensed child care programs in Ontario: child care centres and home child care agencies.

Information on licensed child care programs in Ontario can be found on the Ministry of Education's Licensed Child Care website:

http://www.edu.gov.on.ca/childcare/

### The Role of Licensed Child Care Licensee:

Licensees have responsibility for the operation and management of the child care centre or home child care agency, including its program, finances and personnel administration and maintaining compliance with provincial legislation, ministry policy and all other requirements (see Section 6 in O. Reg. 137/15)

Licensees are required to achieve and maintain compliance with the requirements set out under the CCEYA at all times.

Licensing inspection summaries for all licensed child care programs are available on the licensed child care website.

### Unlicensed Child Care (Informal Care)

Ministry investigators conduct inspections and investigations at unlicensed child care centres to ensure compliance with the Child Care and Early Years Act, 2014 and its regulations. Unlicensed providers may provide care for no more than five children under the age of thirteen (13), with no more than two (2) children under the age of two. In addition, the Ministry may also issue protection orders where there is imminent threat to health, safety or welfare of any children for whom child care is provided. Inspections or investigations which result in a compliance order, protection orders, administrative penalty or prosecutions are posted on the Ministry's website.

#### Information about unlicensed child care in Ontario can be found on the Ministry of Education's Unlicensed Child Care website:

http://www.edu.gov.on.ca/childcare/unlicensed.html



**iv.** Peel Public Health, Health Protection Division The Health Protection Division of Peel Public Health is responsible for programs related to food safety, drinking and recreational water safety, immunization screening, enteric, rabies and vector-borne disease prevention, personal services settings and tobacco enforcement, and infection prevention and control in licensed child care centres.

**Food Safety** – regularly scheduled inspections at food premises where meals are provided for more than 9 people. Inspections are also conducted in response to complaints and issues of noncompliance. Public health inspectors check for compliance with the Ontario Food Premises regulation and the Health Protection and Promotion Act.

**Recreational Water and Drinking Water** – regular inspections of public swimming pools, spas and enforcement of the Public Pools regulation and Public Spa regulation under the Health Protection and Promotion Act. Public Health also follows up with a childcare centre when a lead exceedance is identified by the Ministry of the Environment and Climate Change.

Immunization Screening – there are a number of mandatory immunizations required under the Immunizations of School Pupils Act. For more information see <u>www.peelregion/health/</u> immunization. **Health hazard complaints** – any complaint about a health hazard is addressed by Health Protection staff, either through investigation, by providing information, or by referral to another agency.

**Smoke-free Ontario Act** – response to complaints about smoking on the property of a child care centre.

Rabies Prevention – follow-up on all reported exposures where rabies could be transmitted. Post-exposure treatment is stocked and available to health care providers should it be considered necessary.

Infection Prevention and Control in Day Nurseries – public health inspectors conduct annual infection control inspections of licensed child care centres. Inspections are also conducted for compliance with Ontario's Food Premises Regulation and the Region of Peel's Food Safety Disclosure By-law. Operators of child care centres and other retail food premises in the Region of Peel are required to post a public health food safety inspection summary sign at the entrance to the establishment. The results of food safety inspections are also available on the Region of Peel web site. Inspections may be also done in response to complaints pertaining to health hazards, infection control, outbreaks, food safety, water safety and emergency situations such as a fire or flood.



v. Contacts Peel Children's Aid (Peel CAS) Phone: 905-363-6131 Fax: 905-363-6133 Toll free: 1-888-700-0996 24 hours a day, 7 days a week

www.peelcas.org

#### Ministry of Education

Information on licensed child care programs or to report a concern: Phone: 1-877-510-5333 Email: childcare\_ontario@ontario.ca http://www.edu.gov.on.ca/childcare/

For information about, or to report unlicensed child care: Phone: 1-844-516-6263 Email: UCCV@Ontario.ca http://www.edu.gov.on.ca/childcare/unlicensed.html

Region of Peel Phone: 905-791-7800 www.peelregion.ca

Peel Regional Police Phone: 905-453-3311 www.peelpolice.on.ca

