

Special Report of the Office of the Child and Youth Advocate

A report examining the policies and procedures in place to ensure the safety and well-being of children and youth in receipt of protective intervention services where a report of child sexual abuse or exploitation is received

Executive Summary



Office of the Child and Youth Advocate
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CHILDREN
& YOUTH
NEWFOUNDLAND
& LABRADOR

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Background

This report was requested by the Lieutenant-Governor in Council pursuant to section 16 of the (SNL2001). Order in Council 2024-159 directed the Child and Youth Advocate to "...review, investigate and report on the policies and procedures in place to ensure the safety and well-being of children and youth in receipt of protective intervention services where a report is received alleging that a child or youth has been sexually abused or exploited". This directive came at a time of increased concern for the safety and well-being of children and youth of this province who reported being victims of child sexual abuse (CSA) and/or exploitation.

To fulfill the requirements of this directive, child protection referral (CPR) documents and relevant policy and legislation was requested from the Department of Families and Affordability (FAMA). Departmental correspondence including copies of memos and e-mails discussing child sexual abuse policies and procedures were also received. The period examined was January 2007 to December 2024. It must be noted that this review did not include an examination of police policies, practices or analysis of any individual files as such a review was beyond the scope of the referral to this office.

Part I: History and Context

Canada ratified the **United Nations Convention on the Rights of the Child (UNCRC)** in 1991 with written endorsement and support from all provinces and territories. Articles 19 and 34 of the UNCRC are specific to CSA and exploitation.

Statistics about CSA and exploitation are separated in the literature by incidence and prevalence. Most recent Canadian numbers indicated that CSA makes up approximately 3% of all maltreatment cases. This is consistent with FAMA's statistics where CSA rates are typically between 2% and 4%. In the literature, prevalence of CSA is higher for girls than boys. Risk further increases if the child is not living with both biological parents or is living with one biological parent and their live-in partner.

Three relevant pieces of legislation existed during the period examined: **Child Youth and Family Services Act (1998)**, **Children and Youth Care and Protection Act (2010)**, and **Children, Youth and Families Act (2018)**. The Department has also undergone several structural changes and a timeline outlining key dates is available in Appendix B of the final report

There have been multiple versions of policy manuals that accompany the legislation: the **Child Youth and Family Services Standards & Policy** (versions from 2007 to 2010), the **Protection and In Care Policy and Procedure** (versions from 2011 to 2018) and the **Protection and In Care Policy and Procedure** (versions from 2019 to 2024).

Three different decision-making models were in use during the period examined: the Risk Management System (from 2003 to June 2013), the Risk Management Decision-Making model (from June 2013 to March 2018), and the Structured Decision-Making model (March 2018 to present).

Two records management systems were in use during the period of examination. The Client and Referral Management System (CRMS) was used until 2018 when the Integrated Service Management (ISM) system was introduced.

Child welfare and policing in this province have a decades-long relationship of collaboration. A Memorandum of Understanding (MOU) was signed between the department responsible for child welfare and both police forces in 1993. The Child Abuse Investigative Training Project (CAITP) started that same year. The most recent MOUs with the RNC and RCMP are dated 2015 and 2016, respectively.

There have been many changes over the years in the name, structure, and professionals involved with the project and its accompanying Steering Committee, but the spirit of collaboration has remained the same. When issues arise, the Steering Committee meetings are an avenue for the multidisciplinary professionals involved in decision making to come together to discuss.

For the forensic interviewing of children, the Step-Wise and the National Institute of Child Health and Human Development (NICHD) Interviewing Protocols are most used by police and social workers. The NICHD protocol is preferred and is taught in the joint child abuse investigative training. It is currently not possible to have the same interviewing standard across the province due to differing training of police officers.

The Department's training schedules for frontline social workers were examined, with a focus on trainings with content about CSA. The Collaborative Child Abuse Investigations Training course is offered multiple times per year to approximately 10 social workers and 10 police officers (five from each force) at a time. The Steering Committee recommends training be offered four times a year (twice in St. John's, once in Central/Western and once in Labrador) where possible.

The following partnerships, stakeholders, and collaborators are relevant to this review and are expanded on in the full report. The North Star Child and Youth Advocacy Centre (CYAC) was highlighted as a valuable resource in the St. John's area that is no longer available for child victims and their families. This provided a central hub for professionals to meet the child and their family in a trauma-informed and child-friendly environment. Other important partnerships are discussed including the Janeway Children's Hospital which completes child medicals. The Department of Justice and Public Safety also provides relevant services including but not limited to policing, agency notifications, victims' services, and prosecutorial services.

Provincial community organizations that work with families impacted by CSA include Miles for Smiles, the Sexual Assault Nurse Examiner program, End Sexual Violence Newfoundland and Labrador, First Light, the Journey Project, and the Coalition Against the Sexual Exploitation of Youth. Nationally, Kids Help Phone and the Canadian Centre for Child Protection (including Cybertip.ca) are widely accessed for their resources.

Part 2: Analysis of Child Protection Referrals and Investigations of Placement Resources

The review determined that while the legislation section numbers and wording may have changed over the years, the steps taken when a child is in need of protective intervention have remained consistent.

Protection Intervention Program Referrals

In total, 174 screened-in referrals and 43 screened-out referrals from the Protective Intervention Program (PIP) were randomly selected and reviewed. There was a representative sample from each geographical region, and these regions are outlined in Appendix C of the full report. Each referral was examined based on the legislation, policies, and decision-making model in use when they were generated. Key areas examined were documentation, response time, supervisory approvals, police involvement, and the completion of safety and risk assessments.

Appropriate paperwork was available for almost all PIP referrals examined, but accuracy of completion was not always consistent. The level of detail varied widely and was specific to the social worker assigned and not attributed to regional differences.

The Structured Decision-Making (SDM) model paperwork was clearer and easier to navigate due to better defined categories and inclusion of tick boxes and circles rather than open text boxes. Compliance to policy increased after 2018 when SDM and the ISM were introduced. For example, supervisory sign off was not always present on documentation from the previous record keeping system and older decision-making models. Once ISM and SDM were introduced, there were no instances of blank supervisory sign-off fields.

Documentation of police involvement on referral forms was not consistent. There was no clear way for social workers to document consultations with police. It was also unclear whether the social workers who completed the forms were referring to new police referrals, current police investigations, or past police investigations. This was particularly the case for screened-out referrals prior to 2018. The SDM forms ask more explicit questions including if a referral is required, if it was sent, and how it was sent.

In keeping with the MOUs and Police Involvement policy, all referrals in which there is reason to believe a child is being sexually abused or is at risk of being sexually abused should be reported to the police. However, for the screened-in referrals reviewed, nearly a quarter had no indication of consultation or involvement from police. It is possible that consult did occur and was recorded outside of the documents reviewed. Without examination of full files this cannot be determined.

The review of the CPRs also showed an increase in police declining to investigate referrals sent by the child protection social workers as the years progressed. Departmental correspondence reviewed confirmed this, noting that police resources have been a concern on several occasions in recent years, including delays in completing joint interviews. There were also concerns expressed regarding the large volumes of referrals sent by the Department that police may not need to action, such as in the case of some screened-out CPRs. Practice changes around what should be referred were discussed and considered but ultimately did not change.

Safety Assessment (SA) documentation was reviewed. For these SAs, most children were seen or interviewed by the child protection social worker in the required amount of time based on the response time the referral was assigned. There were only three cases where safety plans were missing, but investigation summary information showed that planning had still occurred. Although contact was made, completion of documentation was delayed in many cases.

Family Risk Assessments (FRAs) were examined for SDM files only, as in previous decision-making models they were not required within the first 30 days. Based on the dates on the completed FRAs, over half were not completed within the required time frame. This was concerning as contact standards for the PIP do not begin until the decision is made whether to transfer to ongoing protection.

Overall, communication and consultations were highlighted as a strength. There were many documented consults interdepartmentally between frontline workers, supervisors, managers, and policy development specialists when questions and concerns arose.

Service Provider Referrals

A randomly selected sample of 15 service provider referrals from 2018 to 2024 were reviewed. These included investigations of foster homes, kinship homes, family-based care homes and staffed residential placements. Compliance to each program's respective policies was reported.

Five foster home investigations were reviewed. All investigations included a same day assessment of maltreatment information and caregivers were notified of the decision to investigate on the same day the information was received. Only one investigation did not refer the information to the police on the same day as the information was received. One investigation was missing an Alternate Care Provider Safety Assessment (ACPSA). Four of the investigations did not have final decisions or documentation completed within the time frame outlined in policy.

Three kinship home investigations were reviewed. All investigations included an assessment of maltreatment information within 24 hours. In all cases referrals were sent to the police and they were consulted prior to investigating. All children, youth and caregivers were seen on the same day the investigation was assigned, and face-to-face ACPSAs were completed. One investigation surpassed the investigation time frame outlined in policy.

One family-based care placement resource investigation was reviewed. The policy was followed in all respects, except for the investigation length and documentation completion, which exceeded the specified time frame. Information received was assessed and police referrals were made on the same day the information was received.

Six staffed residential placement investigations were reviewed including group homes and individualized living arrangements (ILAs). All six investigations were actioned on the same day the information was received. Police referrals were made on the same day in all cases. One investigation did not state whether the parents were informed, although such notification was required. All six investigations significantly surpassed the completion and documentation time frame in policy.

It is clear from reviewing the 15 investigations that when concerning information is received about sexual maltreatment for children in out-of-home placements, action by the Department is immediate and thorough. Children and youth are being seen and interviewed quickly, and police referrals are being made immediately.

Additional Topics

This review also examined additional variables or factors including whether the alleged perpetrator is a third-party, the child victim's age, and the child's current care arrangement.

Third Party Sexual Maltreatment

The Department does not have a legislative requirement to intervene in cases where children are sexually abused or exploited by persons other than their parents. That is, unless the parent is not acting protectively. Parental protectiveness is currently assessed under SDM Practice

Third Party Referrals

Upon the commencement of this review, FAMA participated in their own intradepartmental review to strengthen policy and practice. As of July 3rd, 2025, the Department introduced Policy 7.4: Reporting Third-Party Child/Youth Maltreatment of a Criminal Nature to the Police. This policy outlines new documentation and police reporting requirements when information is received regarding a child or youth being maltreated or at risk of being maltreated by a third-party. Information received by social workers will now be documented on a CPR as well as reported to police using a custom form called Third-Party Maltreatment of a Criminal Nature: Information for Police. This policy creates standardized reporting and documentation across all the Department's program areas. It also ensures reporting of information whether the child or youth is involved with the Department or not. This may also enable the Department to extract statistics in areas where they were previously unable to do so.

Youth

Youth 16 and older are a group requiring special consideration. They are particularly vulnerable as perpetrators may take advantage of the circumstances in which they live. It is a balancing act to ensure their right to protection from abuse and exploitation is upheld while acknowledging their right to privacy and evolving capacity to participate and consent in matters affecting them.

The **CYFA** (2018) saw the inclusion of 16- and 17-year-olds in the Duty to Report, and the Department assesses a youth's service eligibility and need for protective intervention. The process is different for youth than for children under 16. Youth determined to be in need of protective intervention are eligible for services under the Youth Services Program, but their participation is voluntary.

Critically important is that many of the gaps initially identified regarding youth impacted by third-party maltreatment have been addressed through the creation of Policy 7.4. The policy states that information may be reported to the police regardless of the youth's agreed participation. There are several exception clauses where the youth's physical and emotional safety, ability to cope, proximity to the offender, and further risk of harm are considered. It is crucial that youth be included in every step of the process if they so choose. Empowering youth to have agency in how their experience is handled is a strong predictor of positive outcomes later in life.

Children in Care

When children and youth are in the care of FAMA, the Department is considered their parent. Therefore, it is expected that they act protectively to ensure the children in their care are protected from all forms of harm. This is the same expectation that is placed on any parent under the existing legislation and further emphasized in the United Nations Guidelines for the Alternative Care of Children (2009).

FAMA has previously identified significant concerns for children and youth in their care who reside in level 4 placements. These youth are at an elevated risk of sexual exploitation as well as substance use addiction and overdose, criminal behavior including drug trafficking, and threats of violence.

Departmental correspondence as recent as 2024 shows communication regarding the potential use of sections of the **CYFA** where a child or youth in care is frequenting a home where they are at risk of sexual exploitation. This includes section 18 "Order to prohibit contact" and sections 98-101 which make up Part XI: Offenses Against Children. Conversations around the application of these sections is ongoing.

Key Considerations

The following areas are recommended for further consideration and potential action:

- The re-establishment of the Child and Youth Advocacy Centre as a central access point for child victims and their families to receive trauma-informed services and resources.
- The review and potential clarification of Policy 1.5: Police Involvement. This policy may need to include clearly defined criteria around what should and should not be referred. The language should also be updated to include youth as well as children.
- An evaluation of investigation timeframes outlined in the Protection and In Care Policy and Procedure Manual, particularly for investigations on placement resources as they are taking a considerable amount of time.
- A quality review as it relates to the timely completion of SDM: Family Risk Assessments.
- Revision of the current CPR form to clearly reflect the nature of police involvement. This should include a section to indicate whether police involvement was past or present, and/or if any consultations occurred and to what extent. It should also continue to include the date of referral and method used to send it.
- An in-depth examination of the police policies, procedures, and response where a report is received alleging that a child or youth has been sexually abused or exploited by a third party.
- Renewed MOUs between the Department and both policing agencies to make current and affirm the partnership.
- Continued examination of how the **Children Youth and Families Act** could be used to further protect and ensure safety of children and youth in care from potential abuse or exploitation.
- Refinement of Policy 7.4: Reporting Third-Party Child/Youth Maltreatment of a Criminal Nature to the Police to reflect the process of discussing and achieving consent.

Conclusion

Generally, the child protection legislation and policies dictating the jurisdiction, investigative processes, and case management of child sexual abuse matters have been well-established for many years and are prioritized appropriately. This is also the case for the supporting processes and collaborative partnerships in place that ensure effective implementation. The Department has shown its continued capacity to respond to emerging challenges and adapt to changing circumstances.

There are areas that have been identified for considered improvements. We acknowledge that the Department is currently undergoing a legislative review that will provide further opportunities for refinement and finetuning, particularly as it relates to the execution of the policy in a standardized manner.

Office of the Child and Youth Advocate

20 Crosbie Place, St. John's, NL A1B 4J6

Telephone: (709) 753-3888 | Toll Free: 1-877-753-3888

Email: office@ocya.nl.ca | Fax:(709) 753-3988

<https://www.childandyouthadvocate.nl.ca/>

