

QUESTIONNAIRE FOR FNCFS AGENCIES

You are invited to complete this questionnaire on behalf of your FNCFS agency, to share information and practices to help inform the long-term reform of the FNCFS program.

Your participation in this questionnaire is voluntary. If at any time you wish to withdraw your participation, contact helaina.gaspard@ifsd.ca and your data will be destroyed.

Definitions

Child and family services: programs, resources, tools or supports that support the healthy social development of children and families, with a focus on building resiliency.

Prevention services: programs, resources, tools, or supports that aim to limit exposure or re-exposure to the child protection system.

Protection services: services to promote child safety, often by removing the child and placing them in care.

Child in care: a child of the First Nation that is in protective services, whether they are in care in the First Nation or outside of the community.

Fiscal year 2021–22: the period from April 1, 2021 to March 31, 2022.

First Nations-led secretariat: proposed national organization with regional connections to support data analysis and programming for First Nations by First Nations.

Post-majority supports: programs and services for youth ageing out of the care system.

Customary care and kinship adoptions: placement and/or adoption of children in care with family members.

Full-time equivalent (FTE): the number of employees that work a full-time work schedule.

Part-time equivalent (PTE): the number of employees that work less than a full-time work schedule.

Agency name:

Contact name:

E-mail:

Phone:

Communities served

1. How many First Nations does your agency serve?

2. How many people does your agency serve?

3. Approximately what percentage of the people served are:

a. In community (on-reserve)

b. Elsewhere (off-reserve)

Programs and services

4. What services does your agency provide? Select all that apply.

- Protection services
- Post-majority care services
- Prevention services
 - Family violence prevention
 - Healthy child development
 - Maternal-child health and development
 - After school programming and supports
 - Poverty alleviation
 - Family preservation
 - Parenting supports and resources
 - Healthy eating
 - Healthy active lifestyle
 - Land-based programming for children, youth, and families
 - Safe homes for transition and/or respite
 - Group homes for youth
 - Community housing or transition housing
 - Respite services
 - Mental health services
 - Early learning and childhood development

Special needs services

Other (please specify):

5. Do you offer post-majority care services?

Yes No

a. If **yes**, describe your programs and services.

b. Are there any changes you would like to make? Please specify.

6. Do you have policies or practices in place for customary adoption and kinship care?

Yes No

a. If **yes**, describe your policies and practices.

b. Are there any changes you would like to make? Please specify.

7. Does your agency provide legal services for parents and families?

Yes No

a. If **yes**, describe services.

b. Are there any changes you would like to make? Please specify.

8. Does your agency provide mediation services for parents and families?

Yes No

a. If **yes**, describe services.

b. Are there any changes you would like to make? Please specify.

9. Where does your agency provide most of their services:

In community (on-reserve)

Elsewhere (off-reserve)

Other (please specify):

10. If your agency provides protection services, how many children are in-care?

a. Please specify how many of the children in care are:

First Nations (on-reserve)

First Nations (off-reserve)

Indigenous (on-reserve)

Indigenous (off-reserve)

Programming considerations

11. How many full-time equivalent staff do you have to deliver services?

a. What are their titles?

12. How many part-time equivalent staff do you have to deliver services?

a. What are their titles?

13. Do you have any difficulty attracting qualified staff?

Yes No

a. If **yes**, what are some reasons why?

14. Do you have any difficulty retaining qualified staff?

Yes No

a. If **yes**, what are some reasons why?

15. Are there programs or services you would like to offer but cannot?

Yes No

a. If **yes**, what are the limitations? Select all that apply.

Funding

Staff

Programming space or tools

Limited time for planning

Funding or authority rests with another department or entity in the First Nation, e.g., education, health

Program design

Program implementation/delivery

Program evaluation

Other (please describe):

16. What programs and services would you like to offer?

- Family violence prevention
- Healthy child development
- Maternal-child health and development
- After school programming and supports
- Poverty alleviation
- Family preservation
- Parenting supports and resources
- Healthy eating
- Healthy active lifestyle
- Land-based programming for children, youth, and families
- Safe homes for transition and/or respite
- Group homes for youth
- Community housing or transition housing
- Respite services
- Mental health services
- Early learning and childhood development
- Special needs services
- Other (please specify):

17. Do you have existing sources of support for programming design and delivery, data analysis, operations, etc.?

- Yes No

a. If **yes**, please specify the sources of support, e.g., regional organization, community of practice, etc.

18. How could a national First Nations-led secretariat for FNCFS support your agency's mandate? Select all that apply.

- Program design and delivery
- Data collection
- Data analysis
- Operational supports
- Other (please specify):

Financial information

19. What were your FNCFS agency's total expenditures for fiscal year 2021–22?

\$

20. What were your FNCFS agency's total revenues for fiscal year 2021–22?

\$

21. What were your FNCFS agency's sources of funds for fiscal year 2021–22? Select all that apply.

- Federal—ISC
- Federal—Other
- Provincial—Social services/children
- Provincial—Other
- Other (please describe):

22. What is the source of most of your funding? Select one.

- Federal—ISC
- Federal—Other
- Provincial—Social services/children
- Provincial—Other
- Other (please specify):

23. Approximately what percentage of your funding comes from each source selected in question #19?

Federal—ISC

Federal—Other

Provincial—Social services/children

Provincial—Other

Other (please describe):

24. Did your agency request CHRT funding (i.e., prevention, actuals) in fiscal year 2021-22? (If no, proceed to question #27).

Yes No

25. Why did you request the funding?

- Capital
- Prevention services and/or programming
- Information technology (IT)
- Cultural programming
- Salaries and benefits
- Other (please describe):

26. Were the requested funds received?

- Yes, all requested funds were received
- Yes, some requested funds were received
- No
- Other (please describe):

27. Did your agency request funding through Jordan's Principle?

Yes No

a. If **yes**, did you receive the requested funds? Yes No

b. Were the funds requested for a: Individual Group

c. Were the funds requested for a child in care? Yes No

28. If you were to deliver your desired set of services for your First Nation, what would you estimate it would cost for one year? Consider for instance, the costs of personnel (salaries and benefits), program development, capital expenditures, etc. You can think of this as an estimated total budget for one fiscal year.

\$

Capital needs

29. Where do you host your programming? Select all that apply.

Agency's space (owned)

Agency's space (leased)

First Nation's community centre

First Nation's gymnasium

First Nation's school

First Nation's health centre

First Nation's social services centre

Other (please describe):

30. Do you have the space you need to deliver your programming?

Yes No

a. If **no**, what programming space is needed?

31. Do your programming spaces meet applicable building codes (e.g., technical specifications or regulations that help to ensure building safety and accessibility)?

Yes No

32. Could your programming space be improved?

- Yes No

a. If **yes**, how could the programming space be improved?

33. Do you have the office space you need for your staff?

- Yes No

a. If **no**, what office space is needed?

34. Does your office space meet applicable building codes (e.g., technical specifications or regulations that help to ensure building safety and accessibility)?

- Yes No

35. Could your office space be improved?

- Yes No

a. If **yes**, how could your office space be improved?

36. Do you have the necessary technology to do your work?

- Yes No

a. If **no**, what technologies do you require?

- Faster internet connection
 Updated computer
 Additional software
 Tablet
 Mobile phone
 Data collection tools
 Data analysis tools
 Other (please specify):

37. Do you have assets (other than technology)? (An item is considered an asset when it is intended for use on a continued basis and is typically repaired, not replaced when damaged, and typically, has a useful life of more than one year).

Yes No

a. What assets do you need? Select all that apply.

Vehicles

Cultural and language programming tools

Canoes, kayaks, paddle boards

Other (please specify):

Community well-being

38. How would you express your agency's vision of holistic well-being?

39. Does your agency capture its own information on the well-being of children and families in community?

Yes No

a. If **yes**, what information is captured?

Number of children in care

Rates of family reunification

Number of children accessing services

Number of families accessing services

Outcomes for children in care

Outcomes for children accessing services

Outcomes for families accessing services

Community health outcomes

Family violence incidents

Languages spoken in First Nations served

Community engagement in agency activities

Community participation in cultural activities

Other (please specify):

40. What data would be required to help advance your mandate?

- Number of children in care
- Rates of family reunification
- Number of children accessing services
- Number of families accessing services
- Outcomes for children in care
- Outcomes for children accessing services
- Outcomes for families accessing services
- Community health outcomes
- Family violence incidents
- Languages spoken in First Nations served
- Community engagement in agency activities
- Community participation in cultural activities
- Other (please specify):

41. Do you have the capacity to collect data necessary for:

- Program design: Yes No
- Budgeting: Yes No
- Assessing well-being: Yes No
- Long-term planning: Yes No

a. If you answered **no**, what are your capacity challenges or needs?

- Funding
- Technical expertise to analyze data
- Data governance policy
- OCAP policies
- Other (please specify):

42. Would you like to share examples of initiatives, programs, or tools developed or used in your agency to support First Nations children and families?

43. Are there other considerations about child and family services and prevention that you wish to share with IFSD?

44. May IFSD contact you to follow-up on this questionnaire?

Yes No

Thank you for your participation

Completed questionnaires can be sent to **helaina.gaspard@ifsd.ca**