

SECTION III: SERVICE DELIVERY

Subsection: FRAMEWORK FOR SERVICE DELIVERY

Policy Title: Inclusive Service Provision

Policy Number: III, 1.7

Initial Date of President and CEO Approval: 2023-11-15

Last Review/Revision Date: 2026-05-15

Purpose

To provide direct service staff with expectations and guidance regarding inclusion and cultural safety in their service delivery to ensure that our diverse population of clients/families receive service that is respectful of and compatible with their needs.

Application

All direct service staff and management, students, volunteers and contractors.

Definitions

Inclusive services – Services that are non-discriminatory, in an environment that considers many factors including citizenship, race, place of origin, ethnic origin, skin colour, religion, language, ancestry, history and politics, physical and mental disability/ability, age, creed, sex (including pregnancy and breastfeeding), family status, marital status, sexual orientation, gender identity, gender expression, record of offences, political affiliation or socio-economic status.

Cultural safety – Fostering an organizational climate where the unique history of a cultural group is recognized and respected; people feel listened to and comfortable expressing their cultural identity and needs; where possible, there is access to culturally specific supports and resources.

Policy

Strides Toronto (the Organization) and its direct service staff, students and volunteers will respond respectfully and effectively to diversity in a manner that recognizes, affirms, and values the worth of individuals, families, and communities, and protects and preserves the dignity of each person.

The Organization will make every effort to ensure that its services and programs are accessible to our community and that:

- services and programs are responsive to the needs of clients, and families in the community,
- individuals and groups that access services are encouraged to fully participate in decisions that affect them,
- barriers that individuals or groups may encounter to full participation in our programs are identified and addressed,
- staff, students, and volunteers reflect the diversity of our community,
- the work and service environment are free from discrimination,
- the views and values of the diversity of the community are proactively included in the decision-making of the Organization,
- there is access to culturally specific supports and resources, either by providing these services directly or by facilitating access to them, and

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- the knowledge and capacity of staff, students and volunteers related to equity and inclusion is continuously enhanced.

Procedures

1. Management will use this policy to guide recruitment and hiring of staff.
2. All staff, students and volunteers will be oriented to this policy within 30 days of commencement of employment and will participate in any scheduled related mandatory training.
3. The policy will be posted on the website and at each site in a visible location for clients/families, employees, and the public to see.
4. All staff, students and volunteers who are responsible for any aspect of service will ensure the respectful adherence to the individual's identifying characteristics and/or unique needs with respect to their citizenship, race, place of origin, ethnic origin, skin colour, religion, language, ancestry, history and politics, physical and mental disability/ability, age, creed, sex (including pregnancy and breastfeeding), family status, marital status, sexual orientation, gender identity, gender expression, political affiliation, or socio-economic status.
5. The client and, where applicable, parent(s)/guardians, are informed that they can provide additional details about the child/youth's care at any time during service and are invited to share information they would like considered in service planning to support responsive, identity and culturally-affirming care. This includes decisions in relation to the child/youth's identity when considering Indigenous regional differences, such as the fact that the child/youth may have lived in a region that is different from the region in which the services may be provided to the child/youth, (e.g., First Nation, Inuk, or Metis etc.). The client/youth and, where possible, their parent(s)/guardian will be asked about the child/youth's culture, heritages, traditions, and connection to the community. Staff will work collaboratively with the client and, where applicable, parent(s)/guardian to understand their concept of extended family, which aspects of their culture, heritage, etc. they wish to have considered, and how they want their cultural information to be taken into account for their service planning.
6. As part of the service planning process, staff will inform the child/youth and their parent(s)/guardian about the Organization's obligation to take into account identify characteristics of the child/youth including regional differences that materially affect or are likely to materially affect the service plan recommendations. Information about identity characteristics, including those previously unknown to the Organization, will be included in decision-making for service planning and documented in the client's file.
7. If the child/youth or family member is unable to provide information in relation to the child/youth's identity characteristics, reasonable efforts will be taken to examine the case record and/or reach out to a relative (with express permission) that may have this information.
8. During the service delivery process (including intake, assessment, ongoing service delivery and the discharge process), interpretation or translation services will be made available as necessary or as requested.
9. Locations and facilities where programs are offered are welcoming and appropriate for the diversity of persons served, including cultural backgrounds, age, gender identity, sexual orientation, and developmental levels.
10. Services and supports are provided, to the greatest extent possible, in the preferred language and/or

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delivery mode for the person(s)/population served.

11. Where a client record is kept, there will be documentation as to how staff have worked with the client to identify and address their needs related to diversity.
12. Client feedback processes will be used to obtain input from clients and families about the extent to which Strides Toronto services are seen as inclusive and culturally safe at every stage of service.

Procedures Specific to Live-in Treatment

(Live-in Treatment will adhere to the above procedures in addition to the specific procedures below per Ministry of Children, Community and Social Services' directive.)

1. The Live-in Treatment teams recognize the diversity of the community and will be committed to ensuring that the Live-in Treatment programs meet the demonstrated needs of all clients and their families in a manner that respects differences and uniqueness and creates access to services such that all can participate fully and benefit from the services provided. This includes the provision of services under the French Language Services Act.
2. Clients and their families are assisted in preserving their unique cultural identity and maintaining positive contact, involvement and participation with their First Nations, Métis and Inuit heritage and community, to assist in taking into account the child's culture, heritage, traditions and connection to the community and the concept of extended family. Clients and families are made aware of this upon admission, and direct service staff support the client and family accordingly as a team during treatment.
3. The rights and responsibilities of the child/youth (including their cultural needs) are discussed at orientation and every six months thereafter.
4. Direct service staff will develop programming to ensure that every client has access to their culture, religion, language, and/or their community. When geographic isolation from home and family is present, every possible effort will be made to ensure regular communication is maintained and visits are arranged when reasonably feasible.
5. Clients and families/guardians will be asked if they have any preferences for a resource person (i.e. a person who can support the client by helping Strides Toronto staff to better understand one or more identity characteristics of the client) to participate in their treatment. The resource person chosen by the client is voluntary and will participate in helping the program and client during treatment to consider the one or more areas for which they have been identified as the resource person. The resource person will be included in the treatment process as per the client's wishes. Participation can include but is not limited to conferences or decisions that would or would be likely to materially affect the client's interests.
6. If the client or family decides they no longer wish to have this resource person involved, the program will stop communicating with this resource person. The same is true if the resource person no longer wishes to be involved. The client and family will be asked if they wish to have another resource person participate.
7. When clients permit, the name of the religious/cultural provider will be documented. If the client has religious or cultural needs, this will be documented in their plan of care, and voluntary requests for religious instruction may be arranged as requested by the child/youth or their parent/guardian. Staff must not seek or engage in conversations that proselytize and/or criticize faith groups.

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8. The Live-in Treatment team is committed to obtaining the requisite knowledge and understanding of all relevant aspects of each client's identity such as race, religion, ethnic origin, gender identity, gender expression, sexual orientation, etc.
9. This will be accomplished by actively seeking out the views and concerns of consumers of the service, and where appropriate, offering support and direction to access relevant services/supports including the services offered by specialized service providers/organizations (e.g., specific ethno-cultural organizations). Such organizations will also be approached for the purposes of shared consultation, training, and collaborative service development where necessary and appropriate. Translators and therapists with appropriate knowledge, skills and experience will be accessed as needed.
10. Access to appropriate religious and/or social groups will also be facilitated (e.g. First Nations/Métis/Inuk heritage events) along with opportunities to enjoy familiar food in the context of the cooking/life-skills aspects of normal residential routines. Youth who wish to follow religious diets and fasts can do so in the program. Adjustments are made to make accommodations when necessary (e.g., youth waking up early to eat before sunrise).
11. The Live-in Treatment Program will also ensure the accommodation of any gender-specific needs of its residents. Clients, families and/or guardians will be asked about their ideas, recommendations, and preferences for all identifying characteristic activities.
12. The volunteer program will be used to match clients with appropriate mentors where this is deemed both possible and appropriate.
13. The Live-in Treatment team will work with clients and families to connect clients to First Nations, Métis and Inuit programming. The agency will look for complementary services that could support clients, either across the city, or if possible, with their direct community over alternative methods such as Zoom (e.g., their Band or First Nation, Métis, Inuit communities, or from an agency working with the Band or First Nation, Métis or Inuit community that is closely linked to their culture, heritage and traditions).
14. Staff within the program will be provided training for identity characteristics, regional differences, and First Nations, Inuit and Métis cultures, heritages, traditions, connection to community and the concept of the extended family. Staff who are not already trained will be provided the training within eight months of hire. Continued training and learning opportunities regarding identity characteristics will be part of the continued learning plan.
15. In addition to Live-in Treatment staff's orientation to this policy and procedures within 30 days of employment, staff will review this policy annually thereafter.

Cross References

[Advocacy Guidelines](#)

[Policy I, 2.5 Quality and Continuous Quality Improvement](#)

[Policy I, 2.6 Feedback and Formal Complaints](#)

Appendices

N/A