

Consolidated Notes

Re-Imaging Child Welfare: Issues, Outcomes and Reform – Workshops by Dr. Bob Lonne Edmonton - November 14 /Calgary – November 18, 2011

Chinese quote – "A journey of a thousand miles starts with a single step"

Summary:

- 180 people attended the workshops:
 - Personnel from 46 agencies and government (16 people from the Alberta Ministry/CFSA's and 1 from the Northwest Territories)
 - CEO's/ED's, senior management, supervisors and front line staff with a range of experience and knowledge of Outcomes Based Service Delivery (OBSD)
- The comments below are a consolidation of the discussions from the tables and hopefully reflect the major points raised by the participants (who had been assigned seating to enable cross discussion between agencies and ministry
- The intent was to raise issues, share knowledge and ideas and provide input into further development of a broad based strategy to support the implementation of OBSD in Alberta
- The discussions focused upon the following areas and the details are contained in the body of this paper:
 - What's Working Well
 - Better Understanding of OBSD
 - Systemic Change
 - Aboriginal Issues
 - Ethical Practice
 - Collaboration
 - Community Engagement
 - Use of Language
 - Staffing Issues
 - o Measuring Outcomes and Evaluation and
 - Fears/Concerns

Small internal and external changes; discussions at multiple levels and in many forums are some of the means to the end to create a system that will provide better outcomes for children and families.

What's Working Well?

- Initially there was much fear. It is good to see that the conversations have shifted towards examining practice
- The Ministry and CFSA's are asking for input into the development and implementation of OBSD. This is highly unusual and a huge opportunity for the sector to have influence
 - Agencies have been invited to actively participate in the process of learning and implementing
 OBSD and have a role to play in shaping the discussion around OBSD
 - Agencies are having some influence over the decision-making process
- There is an OBSD sub-committee of agency and Region 6 staff that has been meeting to discuss issues and provides a forum to "play with ideas" and look at alternate ways of doing things
- The AASCF has provided leadership hiring an OBSD staff person, setting up forums for discussion, hosting the symposium and workshops



• There is room for radical social work and political involvement (Ms. Redford was the only candidate for the Conservative leadership race who met with the Alberta College of Social Workers to discuss their Social Policy Framework)

Better Understanding of OBSD

- People need to know what OBSD is- What does it mean? For me? The agency I work in?
 - OBSD is evolving and forming
 - OBSD means different things to different people
 - OBSD allows for flexibility, can be used as a tool to refashion the service delivery system and has
 the potential to lead to fundamental change in how CFSA will go about doing their job and
 processing issues
 - The Ministry is taking a huge risk is allowing OBSD to evolve, not having a "game plan" and involving the community in defining the future
 - While it is up to the government to define the priorities, agencies are being given the opportunity to have input
 - It is a simple idea people working together to achieve better outcomes for children and families but it is a hard to implement with many challenges (structures/consistency balanced with flexibility/creativity)
 - OBSD allows for flexibility (freedom) to do things differently:
 - One of the challenges is "knowing what you do not know"
 - OBSD helps to see the family in a broader context and provides an overarching framework – as opposed to reacting to a single incident, relationships built upon trust and sensitive to the needs/issues of the family involving a participatory and collaborative process
 - Removing barriers (de-siloing) and
 - Provide forums for people to collaborate
 - Risk management shifts under OBSD. The fears of liability and responsibility are real and need to be understood and appreciated
- Agencies need to be nimble and recognize that there will be change for all. This is not the time to be sitting on the side waiting for something to happen. Agencies need to be engaged and actively participating in the process
- More forums where people can come together, ideas can be discussed, strategies formulated and used to move OBSD forward
 - Need to hear about practical experiences with OBSD. It is hard to think "outside of the box" when we have been conditioned to stay within it
 - Valuing the knowledge and expertise of the people who are currently working in the field foster parents/CFSA and agency workers
 - Discussions about how group homes/foster parents can work differently ie. parents having a role
 in parenting their children while the children are living in a group/foster setting
 - Agency and CFSA staff need venues to talk on a one to one basis about issues, values, ethical practice, underlying assumptions, practical application of ideas etc.
- There will be a continuing need for intensive services, residential care, kinship placement and family group conferencing
- OBSD requires **lots of time and resources** i.e. re-thinking how to approach issues, engaging families, connecting with extended family, building supports etc.



Systemic Change

- System change is needed at multiple levels
- Congruency between the way the Child, Youth and Family Enhancement Act is written and how it gets
 played out
 - More resources are needed (especially within the Aboriginal communities)
 - Workloads need to be manageable, to allow time to establish relationships
 - o It is easy to say how it should be when people do not know the real work done by CFSA workers
- Systemic issues need to be addressed shift the **focus to more about support** and away from "punitive means and punishment"
 - Blaming people for their plight is unfair and unrealistic
 - Martin Luther King's quote: "It's all right to tell a man to lift himself by his own bootstraps, but it is cruel jest to say to a bootless man that he ought to lift himself by his own bootstraps."
- The change process leads to **changed expectations** on the part of families better quality work, more efficiency in that families come in earlier, needing less intensive work
- **Beware of importing solutions**. New Zealand does family group conferencing well but Australia, who imported the idea, does not do it well
 - Tailoring interventions to meet the needs/issues of the family
- We do not need to wait for the system to change to make changes in how we work with families
 - Changing how we approach families engagement/collaboration/coaching all are simple solutions that can be implemented today
 - o Many of us are doing this now recognizing that some people are better at it than others
 - At the front-line we have the capacity to make change and provide the qualitative stories needed to influence the decision-makers

Aboriginal Issues:

- With over 65% Aboriginal children in care we are really addressing an Aboriginal child protection system
 - Aboriginal children and families are over represented in the system and under represented by staffing and at the forums (including these workshops)
- Working with the **Aboriginal community** is a critical cultural issue
 - In New Zealand many meetings start in the Maori language and many white people speak Maori
 - People (both Aboriginal and non-Aboriginal) working in the sector learn some of the Aboriginal language(s)
- Need to indigenize the system and gain a real understanding of the what that means
 - Cultural competence is much more than one-day staff training and needs to become embedded into the organization – understanding of world view, practice, language etc.
 - Creating "cultural safety" may be a better term to use than creating "cultural sensitivity". While
 it may not be ideal and "safety" has implications, it may be broader, more inclusive and closer to
 what we want to achieve
- There is a role to be played in (re)-building strong(er) Aboriginal communities
 - High correlation between third world living conditions (housing/water/lack of education, joblessness), poverty, social problems and involvement with child protection



 Communities and individual are still healing from the effects of colonialization, government policies and practices that resulted in major detrimental impacts on communities and individuals

Ethical Practice:

- Issues of racism and institutional racism need to be recognized and confronted. If these are not addressed the system will replicate itself
 - o Focus upon anti-oppressive practice as a foundational framework for Human Services
- It is important to articulate **service standards** and operate from the principles of justice, respect and duty (beneficence) which are in constant tension and need to be balanced
 - Equity and fairness do not necessarily look the same in every situation
 - One solution for all situations is not going to work. There is a need for creative thinking and solutions designed to meet individual, unique needs
 - Need to define what is meant by consistency and equality
 - What is meant by "ethical practice" needs to be part of the discussion
- Our values, assumptions and underlying biases need to be recognized, addressed and challenged, as they influence practice
 - o It is imperative to take the time to talk through the issues the ethical considerations, the assumptions behind the issues, our attitudes and the relational dynamics
 - The role of men/fathers; how to engage men (including those who are difficult/abusive and/or are threatening)
 - The perception of and role of parents/foster parents/other caregivers
 - Who comes to the attention of child protection services and why
- Incorporate systemic and environmental concerns as well as strengths and protective factors
 - Include parents in all aspects of the changes and working differently see the work done by Nigel Parton
- If the framework is on sustainability, the **focus will be on the family** holistic well-being and empowerment of the family
 - o Best practice will align with the needs of the family and be culturally competent
- The **relationship** with the CFSA workers is critical. It takes time, resources, money and effort to develop and build relationships; but without them the work cannot be done
 - Attitude (to OBSD and the implications) is important how will Ministry and CFSA staff "buy in"?
 - The family is a "real" partner need for dialogue with the family
 - OBSD is a **shift in power** and will threaten positions and people
 - Need time to negotiate the relationships challenging a point of view is healthy and not a personal attack (although it often feels like it)
 - There is increased accountability of everyone family/CFSA and agency workers
 - An analogy put forward was that of trying to hold a watermelon seed. The harder you try to hold it, the more it slips away. It needs to be handled gently.
 - Shared responsibility for decision making involves:
 - A shift in the use of power,
 - Discussions of the practice model,
 - Support of the family's goal(s),
 - A single service plan for the family with joint planning done as early as possible,
 - A common understanding of roles and responsibilities(including legal responsibilities)
 - Clarity as to who is responsible for what, and



- Clear communication and common understanding
- o Information is power and who holds the information, holds the power
 - OBSD allows for bringing everyone to the table and working out issues
 - In the "old world" agency staff may have wanted to bring everyone together but did not have access to the information who, how etc.

Collaboration:

- The Australian Family Relationships Clearinghouse <u>Briefing Paper on Interagency Collaboration Part A</u> states: "Collaborations are seen as most effective and appropriate in two circumstances. Firstly, to address intractable "cross-over" problems between agencies such as homelessness and poverty. Secondly, to address the needs of vulnerable and at-risk families who have multiple and complex problems."
 - Need to have the different ministries Health, Education and Justice working together as well as agencies i.e. multi-agency boards, forums for discussion
 - Move away from a model built upon competition
 - Need to remove the stigma of child welfare "good cop/bad cop" roles and perceptions.
 - Through collaboration get to the place where both CFSA and agency workers are seen as supports to the family
 - Collaboration is difficult, takes time and is costly in terms of time, energy and resources.
 - We need to be sure that it is purposeful; well resourced and the investment is worthwhile. Not all collaborative efforts are worth the time and/or energy

Community Engagement:

- Need a strategy to get the community on-side:
 - Relationship between the Ministry/CFSA and the community need to change to one that encourages and allows people to seek out assistance
 - In Australia most referrals come from the police, teachers and health care professionals.
 In Norway, over 60% of referrals (requests for assistance) come from the family
 - Families are embedded in communities and to strengthen families we need strong communities
 There is a role to build leadership/strengthen relationships within communities
 - Focus upon prevention and early intervention
- Momentum is building:
 - Institutionalize the changes small changes lead to larger change
 - Collect and distribute the "good news" stories share with the community, the good work that
 is being done within child protection
 - o Create allies the community is a powerful ally which leads to political support
 - Speak to those people who speak to the decision-makers
 - Engage those with common interests networks of people/organizations/professional associations i.e. Alberta College of Social Workers (ACSW) teachers, principals, health care professionals
 - Find out what other initiatives are happening that are similar to OBSD federal programs, within other sectors etc,
 - o The **legal system** needs to be included—lawyers and judges need to be engaged and educated



- The system is adversarial by nature but if given different ways to proceed, lawyers/judges will take it. They need the opportunity to see how things could be done differently
- Will a report from an Elder be accepted in court?
- The Public Health system has knowledge and expertise in securing and maintaining funding for preventive programming. We need to tap into their expertise and learn from them
- Look outside the sector for resources- which may include the City of Edmonton and Calgary/other agencies/prevention and early intervention services/programs/schools/ health system/politicians/services not usually thought to have a role in child protection i.e. libraries
- · Momentum is being built
 - Institutionalize the changes small changes lead to larger change

Language is important and we need to be aware of how we use it:

- Understand how words are being used (defined), their meaning and how we use the same word
 i.e. "collaboration"/ "permanency"/ "intake" etc. without realizing that it can mean very different
 things to different people
- Avoid compartmentalizing i.e. "we/they"; "
- Concepts such as "mother"/ "father"/ "carer" /"good parent"/"healthy community" need to be examined and understood
- The language we use can be quite intimidating when working with families.
 - Creating a new language:
 - May come from the Aboriginal community
 - Use of simple clear language

Staffing Issues:

- "De-silo"ing of programs requires a different type of staff, with different skill sets, attitudes and ways of working
- Need for a strong, skilled workforce
 - Staff need to be well-rounded, able to assess risk and trained to collect different kinds of information from families (different information/data will lead to different outcomes)
 - Cultural shift for workers working within an OBSD model
- OBSD is evolving and it is difficult for staff to work without having clearly defined job descriptions.
 - "Winging it" is hard and stressful in that you are not sure if you are doing the right thing and there are challenges coming from other people in the system; who may or may not be working from an OBSD model i.e. other workers, foster parents etc.
- Change the discourse and challenge the idea of "worker burn-out"

Salary

- The quality of the staff we need is high but a skilled workforce is hard to maintain- especially when the economy is good and better paying jobs are easily available
- Recruitment and retention are real issues and require a Workforce Strategy. The differential in wages is detrimental and must be addressed
 - Salaries are important but not the only consideration job satisfaction, autonomy and philanthropy are part of the reason people choose to work in the sector



- Important to lobby politically for salaries (differentials of between 30-40% between government and non-government workers) and sustainability
 - The Boland Report provides data on the sector but there is need for more action

Training

- o Staff will need different training and there will be different expectations put upon them
 - Some staff will have difficulty making the transition and will not change easily
 - Need to engage the universities/colleges, letting them know what skill sets/attributes staff will need to work and start preparing future workers for the changing reality
- o **Training needs** identified include:
 - Staff will need training in what data is needed and how to go about collecting it
 - Better listening, "letting go" of power, engagement, creating space for inclusion
 - Examine the notion of who men have been pushed out of the system and the difficulty fathers have trying to stay involved with their children
 - Recognition of the multiple systems involved and how to include the views of CFSA/agency(s)/other services/parents/children
- o Recognition and implementation of relationship-based practice and reflective supervision.
 - Positive role modelling of respectful relationships is at every level: from the manager to supervisor; supervisor to front-line worker; front-line worker to parent and parent to child.
 - Sound relational practice is about humility
 - Ethical framework and ethical practice Mean what we say and say what we mean
 - It is OK to be where the family is at. We want to work with people to make change. Change is hard and often slow. Sometimes we need to slow things down

Measuring Outcomes and Evaluation

- Evaluation is critical and both qualitative and quantitative approaches are needed
 - Engage the Universities and Research centers
 - o Track the data and identify the unexpected/unintended outcomes (both positive and negative)
 - Experiences need to be documented and collected.
 - What has been touted to be a good approach (i.e. scared straight programs, intensive family intervention etc.) may be counter-intuitive and not have the desired outcomes (i.e. the Porsch Kid)
 - We do not know enough about when, with whom and under what conditions some services/programs are effective and when, with whom and why they are not with others (i.e. Tylenol not working with all people all of the time)
 - How do we shift to measuring positive outcomes when we have a long history and experience measuring the negative?
 - A shift in thinking,
 - Identify what data needs to be collected;
 - Examine how to collect it: what are the questions we need to be asking?
 - Prevention it is hard to measure the absence of something (Public Health approaches have been successful i.e. anti-smoking, seatbelts)
 - o Input from families as to what is working
 - One of the outcome questions could be: How respected do people (clients /parents /children) feel?



- The more people feel respected, the more able they are to talk about issues and ask for help
- The outcomes of the National Outcome Matrix (NOM) are limited and focused upon intervention.
 - The discussion around outcomes needs to be broader, more inclusive and reflective of the needs and realities of family, which is rooted in community.
- The **process** is important and may be the product/desired outcome needed
 - Shared responsibility for the outcomes both positive and negative

Fears/Concerns:

- Speculation about the future which is unknown at present.
 - o Resources and/or attention will go to OBSD to the detriment of other sectors i.e. prevention.
 - It takes much time to collaborate-\$/ resources/effort needed to build and maintain collaborations/partnerships. Are they worth the effort?
 - OBSD will **cost** too much getting services for all the children in out of home care is costly.
 - What if the number of children in care does not decrease?
 - New South Wales changed the rules of engagement and the numbers are going down.
 - What will OBSD look like for children with PGO status?
 - o OBSD will not be given enough time to demonstrate the value of this approach
 - This is why we need evaluation to prove whether it is working or not. And if it is not
 when and where it doesn't work. We need a process to document both successes and
 failures (which will happen and are part of the process of learning)
 - Lead agency model:
 - Are we creating a parallel system to the ministry?
 - What will the relationship be between the lead agency and other agencies within the community?
 - Concern that staff will be recruited from other agencies- to meet the need for increased staff by the Lead agency(s)
 - o Some agencies will not **survive** in the new system and people will lose their jobs.
 - The process may allow real need to surface resulting in more or different services.
- Working under OBSD is making people/programs/agencies more accountable for the work they are doing.
 - This may be a good thing. Our own beliefs about how well we are doing may not be accurate and need to be tested.
 - How will accreditation fit with an OBSD approach? There may be clashes
- There may be unintended consequences

Final notes:

Don't under estimate the difficulties/challenges of implementing OBSD, but recognize that there are great opportunities at the same time. It took many years to create the system we have now and it will take much time and effort to create something new.