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ALBERTA ASSOCIATION OF SERVICES FOR CHILDREN AND FAMILIES 2013 ANNUAL MEMBERSHIP SURVEY RESULTS

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Alberta Association of Services for Children and Families 2013 Membership Survey Results

The Alberta Association of Services for Children and Families (AASCF) conducts an annual membership survey to determine trends, issues and opportunities facing members and to identify needs and expectations for advocacy, training, information and support.

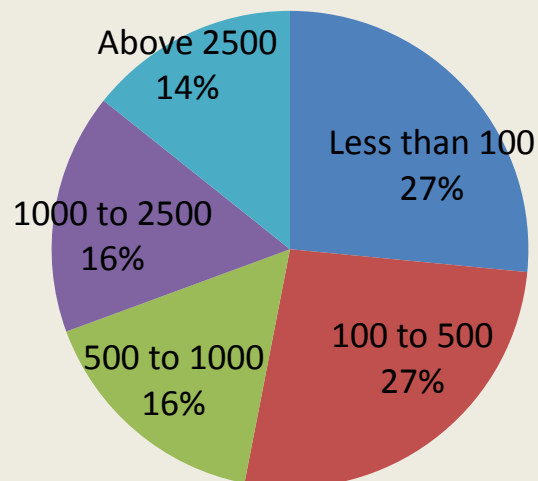
The 2013 survey results tend to confirm that AASCF membership is diverse and representative of the nongovernment sector that delivers social services to children, youth and families in Alberta. The results are presented here in a manner that will aid in making comparisons with past and future survey findings while maintaining the quantitative and qualitative balance of information evident from earlier survey reports.

Representatives of member organizations completed the on-line survey between the months of December 2012 and March 2013. 50 valid participants were identified, resulting in a response rate of approximately 45%.

Statistical Overview of Participating Organizations

The 50 participating organizations varied widely in terms of numbers of children and/or families served, employees, volunteers and board members as well as the type and dollar value of contracts with “Children and Youth Services” programs.

Number of Children/Families Served (N=50)



During the 2013 reporting period, 27% of participating organizations served less than 100 children and families while 14% served over 2,500. Collectively, they served 53,201 children and/or families (a non-unique case count). They were supported in

their efforts by 12,096 volunteers, 395 board members and 3,683 employees and were responsible for “Children and Youth Services” contracts valued at \$163 million.

Statistical Summary of Participating Organizations (N=50)					
Statistic	# Children/ Families Served	# Volunteers	# Board Members	# Total Employees	\$ of “CYS” Contract Funding
Sum Total of Organizations	53,201	12,096	395	3,683	\$163M
Average (Mean)	1,064	242	8	74	\$3.5M
Median	400	12	8	46	\$1.2M
Lowest 25% (<)	45	0	0	15	\$.5M
Highest 25% (>)	1,420	85	10	111	\$4.6M

The average number of children and/or families served by participating organizations was 1,064. The median was 400, indicating that half the organizations served less than 400 clients and half served more than 400. The number served ranged from less than 45 for the 25% lowest volume agencies to over 1,420 for the 25% highest volume agencies.

The sum total of volunteers was 12,096 and the average was 242. Half the organizations reported having less than 12 volunteers and half more than 12. The lowest reporting 25% had no volunteers and the highest 25% had more than 1,420.

The sum total of board members was 395 with an average of 8. The lowest reporting 25% had no board members and the highest 25% had more than 10.

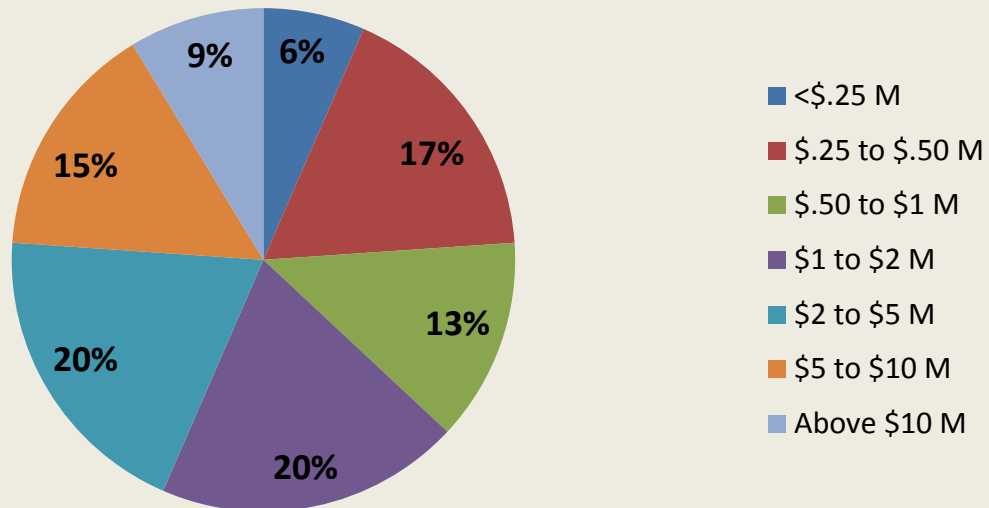
The sum total of employees across participating organizations was 3,683 and the average was 74. The median value of 46 employees indicates that half the organizations reported less than, and half reported more than, 46 employees. The lowest reporting 25% had less than 15 employees and the highest reporting 25% had more than 111.

Contract Information

Total Contract Funding “Children and Youth Services:” 47 of the 50 organizations reported a contract dollar amount. The amount ranged from less than a quarter million for 6% of organizations to more than \$10 million for 9% of organizations.

Type of Contract: The reported contract dollars were associated with an array of contract types. Organizations identified from 1 to 4 contracts for an average of 1.6 per organization. In total 77 contracts were assigned a contract type.

"What is the total amount of your contracts with C&YS?" (N=47)



"What type(s) of contract is it (i.e. FSCD, EI, child intervention, etc.)?" (N=47)

Contract Type	# of Times Identified	% of Times Identified (N=77)	% of Organizations Identifying (N=47)
Child Intervention (CI)	29	38%	62%
Early Intervention (EI)	18	23%	38%
Family Supp. for Child. w Disabilities (FSCD)	12	16%	26%
Fetal Alcohol Spectrum Disorder (FASD)	5	6%	11%
Early Childhood Development (ECD)	2	3%	4%
Group Care	3	4%	6%
Family Support	2	3%	4%
Prevent. of Fam. Violence & Bullying (PVFB)	1	1%	2%
Homeless Support	1	1%	2%
Contract Related *	4	5%	9%
Total	77	100%	>100%
N/A or Unknown	3		

*Note: "Contract Related" includes the following responses: DFNA/ CFSA/Ministry of Human Services/ Schedule A/ Fee for service.

The most prevalent contract type was for Child Intervention (CI) with 29 organizations (62%) indicating they had a CI contract. The next most prevalent was Early Intervention (EI) with 38% of 47 organizations reporting having one. 4 organizations (9%) reported a noncontract arrangement including “Fee for Service”, “CFSA/DFNA”, Funds from the Ministry”. These are reported as “contract related” in the above table.

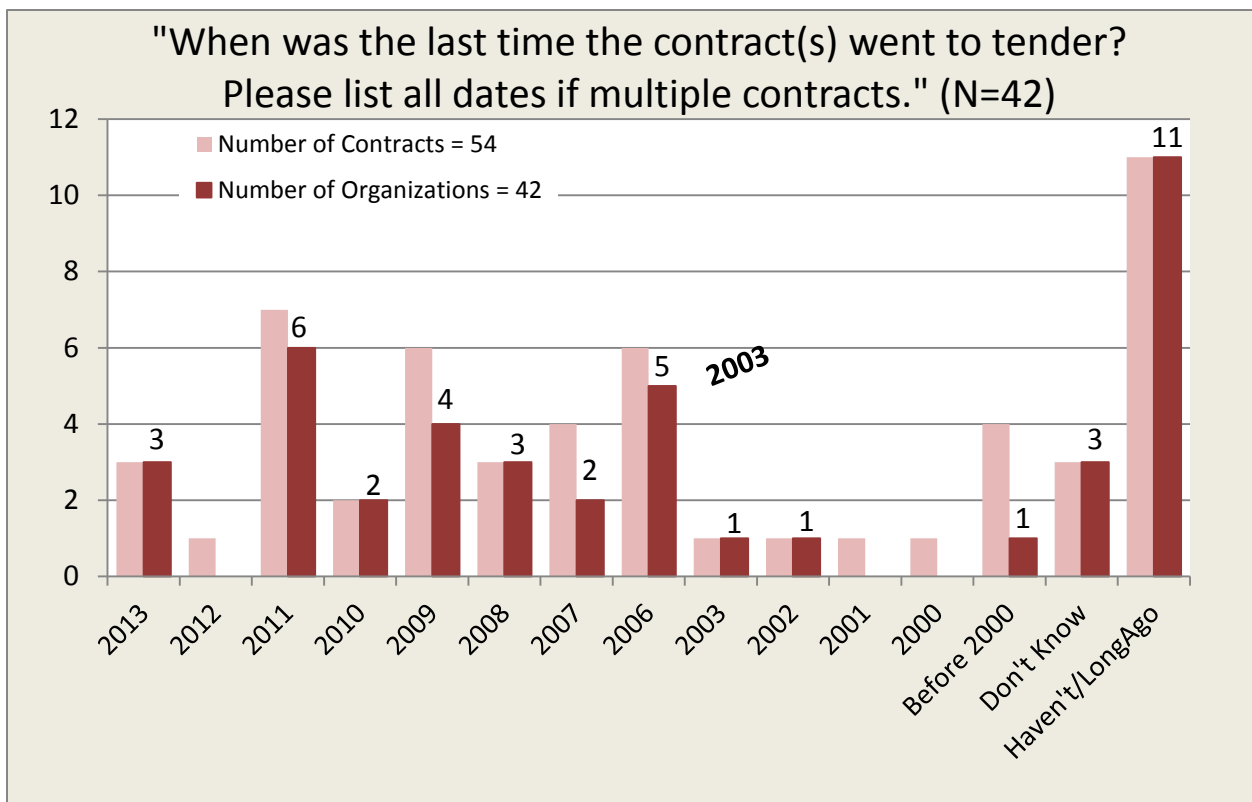
Most Recent Contract Changes: Organizations were asked to indicate when they last received increases for cost of living and operations in their contract(s). They were also asked to indicate when the contract(s) last went to tender. Where organizations had multiple contracts they were asked to identify the last tendering date of each one.

- Regarding cost of living increases, most organizations interpreted the recent wage increases as being “cost of living increases in a contract” and so the years 2013 and 2012 were identified most often. (This question may need clarification for future surveys.)
- Regarding operations increases, most organizations identified an actual date or year in which the most recent increase had occurred or identified the number of years since the last increase, allowing for a year to be calculated. Many were not able to provide accurate information and indicated that it was a long time ago, never or too long ago to remember.
 - 2 organizations identified the year 2013, 3 the year 2012, 2 the year 2011 and 1 the year 2010. This pattern of 0 to 3 organizations per year continued back 10 years to the year 2004.
 - 7 identified receiving their last operations increase in 2003 and 9 indicated they haven’t received an operations increase or that it had been a long time ago. 3 indicated they had received a partial or limited operations increase without identifying a specific year.

Year	Last Operations Increase		Last Contract Tender	
	Number of Organizations	Percent of Organizations	Number of Organizations	Percent of Organizations
2009 – 2013	10	24%	15	36%
2004 – 2008	7	17%	10	24%
Before 2004	9 - 21	20% - 50%	3 - 14	7% - 33%
Don't Know	4	10%	3	7%
Total	42	100%	42	100%

A total of 10 organizations (24%) identified an operations increase in a contract within the past 5 years (2009 to 2013 inclusive); and 7 organizations (17%) between 5 and 10 years ago (2004 to 2008 inclusive). At least 9 and potentially more than 20 (50%) may not have had an operations increase in over 10 years.

A total of 15 organizations (36%) identified having a contract go to tender in the past 5 years and 10 (24%) between 5 and 10 years ago. At least 3 and potentially more than 14 (33%) may not have had a contract go to tender in over 10 years.



Attraction and Retention

The average reported **length of employment for frontline staff** was 3.5 years and the median was 3.0 years. The 25% of organizations with the lowest length of employment reported an average of less than 1.6 years; the 25% with the highest length of employment reported an average of more than 5.0 years.

The average reported **vacancy rate** across participating organizations was 8.8% which is comparable to the formal rate of 6.8% recently calculated by Boland and Associates for AASCF. It is noteworthy that almost half the participating organizations reported a zero vacancy rate.

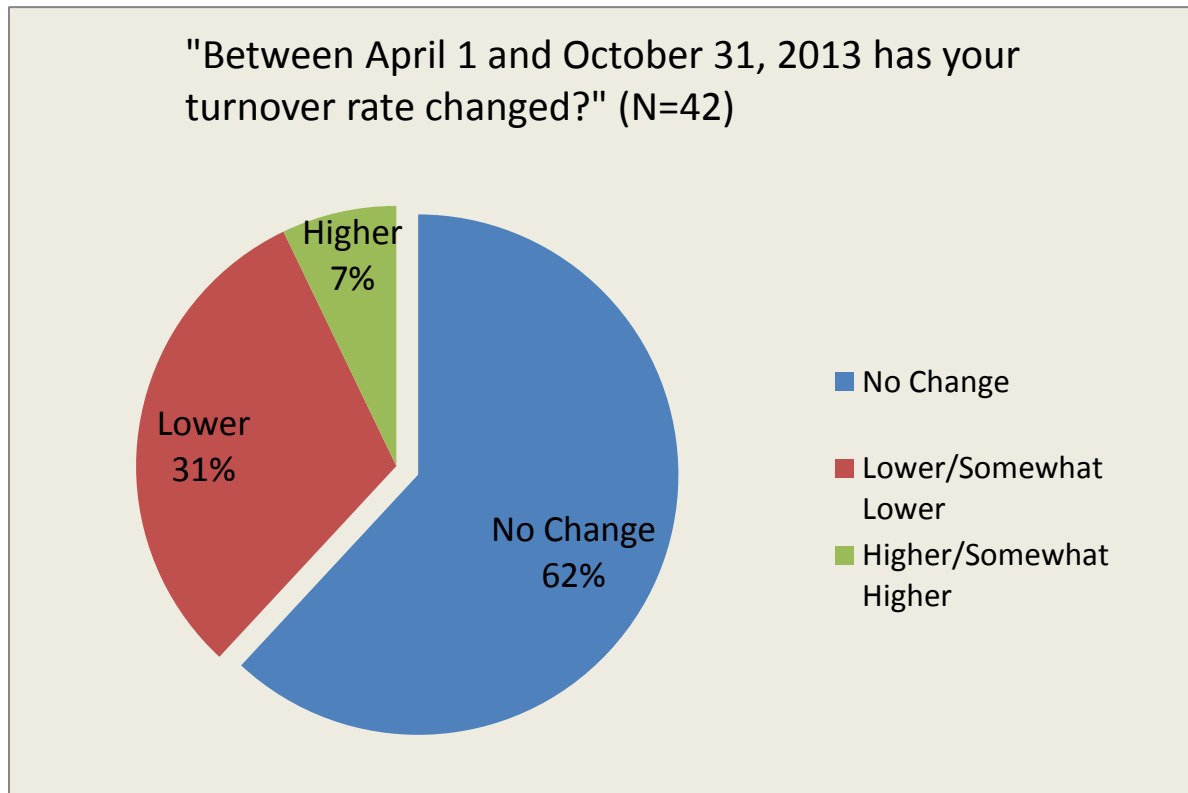
The average **overall turnover rate** (all positions) was 23.7%, considerably lower than the formal rate of 45.8% recently calculated by Boland and Associates for AASCF. Note however the sample of organizations responding to the 2013 membership survey is quite different from the sample used for the Boland calculation. The later should be viewed as the more valid and accurate figure for AASCF organizations as a group.

The survey results indicate an average rate of turnover for **frontline staff** of 30.3% with 25% of organizations identifying a rate above 42.5%.

Employee Turnover Rate Statistics of Organizations (N=50)				
Turnover Measure	Average (Mean)	Median	Lowest 25% (<)	Highest 25% (>)
Length of Employment (Years)	3.5	3.0	1.6	5.0
Vacancy Rate (%)	8.8	0.0	0.0	9.0
Overall Turnover Rate (%)	23.7	20.0	8.1	32.0
Frontline Turnover Rate (%)	30.3	24.0	6.2	42.5
Length of Turnover (Weeks)	6.6	7.0	4.0	8.0

Participating organizations estimate that it takes an average of 6.6 weeks to re-hire to a position. This **length of turnover** ranges from less than 4.0 weeks for the 25% of organizations with the lowest length of turnover to over 8 weeks for the 25% with the highest length of turnover.

Organizations were asked to indicate whether or not there had been a change in their turnover rate during the 6-month period of April 1st and October 31.st 62% indicated there had been no change while 31% indicated they experienced a lower or somewhat lower rate of turnover.



Reasons for Turnover. Organizations were asked to provide the main reasons for staff turnover. 42 organizations provided 80 responses.

"Please list the main reasons for staff turnover."
(N=42 Organizations; Responses=80)

Main Reason for Staff Turnover	Number of Responses	Percent of Responses
Pay and Benefits	21	26%
Career Advancement/Opportunity	13	16%
Further Education/School	11	14%
Other	7	9%
Challenges/Dissatisfaction with Job/Field	5	6%
Stress/Burn-out	5	6%
Gov't/Public Sector Draw	4	5%
Hours of Work/Shiftwork	4	5%
Start Family/Maternity Leave	4	5%
Family Related	3	4%
Having to Move	3	4%
Total Responses	80	100%

The most frequently stated reason for staff turnover was the lower level of pay, wages, salaries and benefits received relative to that offered by the government and private sectors (26%). The next most frequent was career advancement (16%) followed by further education or a return to school (14%). Starting a family and maternity leave as well as family related matters provided a combined 9% of main reasons for turnover. An “Other” category (9%) included a wide array of less frequent responses including retirement, personal reasons, termination, housing and geographic area. Dissatisfaction and challenges with the job or field, the position not meeting expectations, stress and hours of work or shiftwork were other reasons stated.

Emerging Staff Trends: Organizations were asked to indicate emerging staff trends over the past 6 months. Trends tended to group along the following themes: Neutral or Positive, Health and Safety Related, Recruitment and Training Related, Other.

Over the last six months, what emerging trends have you noticed with your staff, if any? (i.e. sick days, WCB claims, inexperienced supervisors)			
Staff Trend		Number of Responses	% of Responses
Neutral / Positive	• None to report	14	29%
	• Have high quality staff	1	
	• Staff feeling more supported	1	
	• Reduced burnout symptoms	1	
Health / Safety Related	• Increase in STD claims	5	44%
	• Increase in WCB claims	6	
	• WCB claims for assault/injury	2	
	• Increase in sick days	9	
	• Increase in leave of absence requests	2	
	• More health issues	2	
Recruit / Training Related	• Increase in maternity leaves	3	20%
	• Inexperienced frontline staff	2	
	• Inexperienced/untrained supervisors	3	
	• Recruitment challenges (Supervisory)	2	
	• Recruitment challenges (Frontline)	2	
Other	• Worried about future	2	7%
	• Staff struggle with high cost of living	1	
	• Less willing to work with severe youth	1	
Total		59	100%

Impact of the 2013 Wage Increase: Members were asked to indicate how the wage increase of the past year (April 2013) has impacted their agency. Responses were grouped and coded for reporting purposes. Of the 42 organizations responding, most identified a positive (36%) or somewhat positive (19%) impact including improved staff

retention and staff morale. Several tempered their positive response with comments that wages are still not competitive relative to the public and private sectors and 4 felt that given the timing of the increase it was still too soon to identify an impact.

“How has the wage increase over this last year (April 2013) impacted your agency?” (N=42)		
Type of Response	Number	Percent
Positive Impact	15	36%
Somewhat Positive Impact	8	19%
Unknown	4	10%
No Impact	9	21%
Negative Impact	3	7%
Did not Receive	3	7%
Total	42	100%

3 and possibly 4 organizations stated that the “wage increases” are having a negative impact on those programs and organizations that are non-recipients of the increases. (Some member organizations do not deliver “wage increase” recipient programs and some deliver a mix of the two.) A complete list of themes and responses appears in the table below (with minor summarization).

Theme	“How has the wage increase over this last year (April 2013) impacted your agency?” (N=42)
Positive (General)	We have been fine
	Helped
	Improved service to our clientele
Positive (Morale)	Staff appreciative of the increase; feel work is being recognized.
	Higher staff satisfaction
	Made staff feel more appreciated
	5% increase has helped staff morale
Positive (Retention)	Enables us to offer an incentive of higher rate to our staff
	Staff very pleased, less likely to pursue other work at same level.
	Combined with the increase in 2012 it appears to have impacted positively on retention - particularly in our group care programs.
	Allowed us to increase salaries across the entire agency
	Stabilized our supervision staff and increasing staff retention for those who stay longer than a year. Less resignations happening overall.
	We are more competitive
	Positive. Mothers now returning to positions following maternity leave.
	Enabled us to move towards placing staff at appropriate salaries. We are still short in terms of where they need to be on a fair market comparison.

Somewhat Positive (Retention)	Helped somewhat with retention, but based on the cost of living in Calgary, little impact on cost of living support.
	Slightly lowered turnover
Somewhat Positive (Little Impact)	Very appreciated but need to keep up to close the gap.
	Still does not compete with government positions. The government is recruiting heavily right now.
	Modest impact – the challenge is not getting increase in operations
	Nice to receive but has not made a significant impact on agency.
	Very little - only a small # of staff funded through that contract
Unknown (Too soon to tell)	Not much. Lower caseloads would have impacted much more.
	It is difficult to determine as the funds were not issued until November. The staff enjoyed the back pay for Christmas.
	Wage increase implemented in October, too soon to comment
No Impact (Still relatively low)	Unknown at this time / Not Sure
	No changes, stable / No significant change / Nothing significant
	No change
	No - still so low compared to education & health / oil/gas sector
	Continued staff turnover
	It's done nothing to assist, like a minnow swimming with whales.
No Wage Increase was Received	We had a compensation review in 2013. On average, we are increasing salaries by 10% to bring us back to par with the non-profit sector. Still about 8% under the public sector.
	We had no wage increase
	Never received
	Have continued to give yearly raises despite per diem not being adjusted.
Negative Impact	Give regular raises despite not receiving from department till this October.
	It puts non increased programs at a disadvantage
	Although staff satisfaction regarding pay has improved, there has been a negative financial impact on the organization. We have not received wage increases from other funders for some time such as United way, FCSS, CFAN, CHF and it is causing financial strain on the organization.
	We gave a 3% increase but received no wage increase in our funding as we are not CYF funded, other departments did not provide an increase.

Program and Service Closures and Openings

Program Closures:

Organizations were asked to indicate whether they are currently considering closing a program and, if so, to describe why and what type of program will be closed as well as measures being taken to prevent the closure. 7 organizations indicated they were

considering a program closure. All 7 identified the reason, the type of program and preventive measures being taken.

Are you currently considering closing a program?		
Yes	7	16%
No	37	84%
Total	44	100%
No Response/ Not Applicable	6	

“Please describe why and what type of program will be closed.” (N=7)		“Describe what measures you are taking to prevent the closure.” (N=7)
1	Tired, and getting tired of the struggle to keep our beds filled and keep the bills paid.	Right now, just trying to breathe.
2	Non funded Critical Response Team	We ran it by volunteers
3	Our project funding ends March 31 for our Marketing and Communication Program.	We have met with the Minister of Human Services, have partnered with other service providers and applied for joint funding.
4	FSCD Programs are underutilized due to fee for service funding and issues with FSCD.	New program model, staff restructuring, marketing, addressing misperceptions.
5	FSCD seems to be mistaking cost containment for cost effectiveness; a general lack of appreciation for our professional contribution, and the needs of families of children with disabilities. We as service providers are viewed with suspicion.	We studiously avoid bringing up the follies we see and vast disconnect between the spirit of FSCD policies and actual procedures.
6	While not closing a program yet we are creating a reduction/exit strategy as this will be the outcome for our 40 year program with the OBSD model as it is being presented today.	Unfortunately, OBSD direction has been made clear and unpopular opinions are not open for discussion. I believe agencies closing was a planned and known result of the model although not shared.
7	Our board has decided to close both of its group homes as of March 31, 2014. There were a number of reasons including: The Authority's failure to provide increases for non-staffing costs for the past 6 years / Having to deal with more difficult children without corresponding increases in dollars for staff / Difficulty getting the Authority to find placements for children who need more specialized placements / Difficulty finding new staff / Uncertainty regarding how OBSD will provide funding for small agencies who cannot operate without block funding.	None. It is too late, the decision has been made.

As a preventive measure one organization is running the program in question with volunteers; another is partnering with other service providers and applying for joint funding.

For 2 organizations the program closures being considered are in Child Intervention services and the primary reason given is challenges associated with the OBSD model and direction. The 2 organizations do not envision a viable preventive measure at this time. One is developing a reduction and exit strategy to transition out.

For two other organizations the program closures are in the FSCD services area and preventive measures include adjusting how they work with FSCD.

Services Closed in Past Six Months: 3 organizations reported closing services during the past six months and provided the following details about the closures. The membership survey asked them to state the type of program involved, how long the services have been closed, the reason for closure and how the closure was resolved.

“During the past six months has your agency closed services to children and families?” (N=39)		
Yes	3	8%
No	36	92%
Total	39	100%
No Response/ Not Applicable	11	

“What type of program was closed? How long was the program closed? How many children/families were affected? Describe the reason for the closure: (and) How was the closure resolved?” (N=3)

	Type of program	How long closed	Numbers affected	Reason for closure	How closure was resolved
1	Early Intervention, school based	–	30	Lack of sustainable funding.	Loss of cutting edge prevention program.
2	Facility-based Aboriginal supervised environment	4 months into the contract year	About 24 children and families in a year	Considered too expensive for too few families and children.	CFS closed it, we reopened it as a FFS program to the DFNAs surrounding Calgary
3	FASD Assessment - one year grant expired	N/A	12	End of grant period - No new funds to extend	Grant ended

Considering Opening a Program: 14 organizations indicated they are considering opening a program and provided the following descriptive information.

Are you currently considering opening a program?		
Yes	14	33%
No	28	67%
Total	42	100%
No Response/ Not Applicable	8	

“Please describe why and what type of program you will be opening.” (N=14)	
1	Trying to open a crisis program across the region
2	Day treatment program for 6-12 year olds
3	Expanding our capacity to counsel children
4	Sexual Abuse Counselling and program for hoarding.
5	Changing the focus of Group Care
6	Fee for service Family Visitation, Assessment, Diagnosis and Support Fetal Alcohol Network
7	An employment program for single mothers
8	Specialized placement for high risk/difficult to place youth
9	Intensive support services to Ministry foster homes
10	AHS - U12 Exceptional Needs
11	Self-esteem program for young women, parenting workshops, women's conference
12	To respond to demand - extension of current programming over summer and to new communities
13	Workshops and support for certification these are support programs for staff
14	Parents mentoring program utilizing seniors for low socioeconomic area, West side satellite

Services Opened in Past Six Months:

“During the past six months has your agency opened services to children and families?” (N=27)	
Yes	5
No	22
Total	27
No Response/ Not Applicable	23

5 organizations reported opening services in the last six months and provided the following information including type of program, how long the program has been open, anticipated number of children/families that will benefit and reason for opening.

“What type of program was opened? How long has the program been open? How many children and families will benefit from this opening? Describe the reason for opening:” (N=5)

	Type of program	How long open	How many will benefit?	Reason for opening:
1	Supported visitation - new tender	Since Jan 2014	Unknown	Redesign transport/driving program
2	Increased counseling hours (and staff) for children	5 months	69	Wait times too long
3	Restorative Group Conference, Metis Cultural Mentorship	1 year and 3 months	50	Need for victim counselling, partnering opp. / federal funding
4	Changed the way we work with Children and Youth age 6-13, now partner with Boys & Girls Club Big Brothers Big Sisters	Since Sept 2013	60	To provide better intensive support to youth
5	High risk and at risk youth	Since 1998	275 per year	Ran on unstable fund since 1998, Region funding now

Outcome Based Service Delivery (OBSD)

Information:

Participating organizations were asked to indicate whether they have enough information on OBSD, and if not to indicate what additional training is required. 9 of 42 organizations felt they did not have enough information. Two expressed a need for information and training of a general nature, one expressed a need for related foster parent training and information, 3 identified concerns pertaining to implementation and funding regarding OBSD. Two expressed the need to know more about the role for Early Intervention contracts and services.

Do you feel that you have enough information on OBSD?		
Yes	33	79%
No	9	21%
Total	42	100%
No Response/ Not Applicable	8	

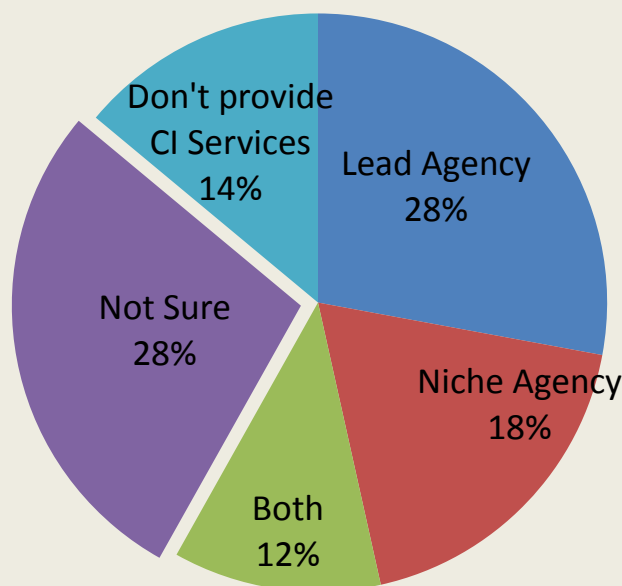
"If you answered no, please identify what additional training you require." (N=9)

- 1 Foster parent training, whether they can foster with agency /How will intake work?
- 2 Information needed, regarding the questions that were at the start.
- 3 General training
- 4 Understanding of how Early Intervention will fit in
- 5 OBSD for Early Intervention contracts.
- 6 How the Authority will fund small agencies that require block funding to exist
- 7 For us, our (FASD) services seem to focus in other areas
- 8 Concerned with implementation of OBSD.
- 9 Not sure government understands OBSD

The 9 organizations reporting a need for additional OBSD information and training identified their agency's anticipated OBSD role as that of a "Niche Agency" or stated that they were "Not Sure" of the role at this time.

Anticipated OBSD Role: Participating organizations were asked to indicate the role they think they will play in Outcome Based Service Delivery by checking one or more of the following: "Lead Agency", "Niche Agency (subcontractor to lead)", "Both", "Not Sure" or "Not delivering child intervention services at this time." 28% indicated they were not sure of the role their organization would play.

"What role do you think your agency will play in Outcome Based Service Delivery?" (N=43)



AASCF Role and Support to Members

Advocacy Activity:

Organizations were asked if AASCF had advocated on their behalf in the past year and if their organization had participated in the advocacy process during the past year.

“Has the AASCF advocated for your needs during the previous year?” (N=38)		
Yes	26	68%
No	12	32%
Total	38	100%
No Response / Not Applicable	12	

The majority of responding organizations (68%) indicated that AASCF had advocated for their needs in the past year. 65% indicated their organization had participated in the advocacy process with some identifying writing letters to MLAs and attending meetings and forums.

Advocacy Role Played by AASCF:

Participants were asked to describe the advocacy role AASCF has played on their behalf. 40 organizations provided 61 responses. 16 organizations identified **wages** as an advocacy role AASCF has played. This represents 26% of responses and 40% of organizations responding. Several stated their appreciation for advocacy on wages.

“Please describe the role AASCF has played in advocating on behalf of your organization.” (N=40 Organizations; Number of role responses=61)			
Advocacy Role	Number of Responses	% of Responses	% of Organizations
Wages	16	26%	40%
Government Relations	10	16%	25%
Not our agency directly	7	11%	18%
Workforce Alliance	5	8%	13%
OBSD	3	5%	8%
Information/Meetings	3	5%	8%
FSCD	2	3%	5%
Advocacy in general	2	3%	5%
Other	2	3%	5%
Total	61	100%	>100%
<i>Additional one-time single responses included: Planning / Provincial Foster Committee / Conferences and Resources / Courses / Operations funding / Shelters / Contracts / Funding / Represent members / Support in general / Profiling agency needs.</i>			

The breadth of responses, including those that were single one-time responses, tends to suggest that organizations view much of the work of AASCF as contributing to advocacy.

One organization recommended AASCF focus more effort beyond Outcome Based Service Delivery, and another, more effort beyond larger organizations.

Information: Organizations were asked if they receive adequate information from AASCF and to comment accordingly. It is noteworthy that 100% of those responding said they received adequate information.

“Do you receive adequate information in terms of updates, events, current actions, etc. from the AASCF?” Please comment. (N=40)		
Yes	40	100%
No	0	0%
Total	40	100%
No Response/ Not Applicable	10	

The following comments were provided regarding adequate information:

- Fantastic / E-mails, newsletter fantastic
- Good information sharing, well communicated
- Great website / Website up to date
- Great information, happy with it
- Is worth the membership fee
- Very thorough
- Often not of interest to our agency or travel barriers exist in attending.

Training: 30 organizations indicated they or their staff had participated in training or conferences offered by AASCF in the past year while 11 indicated they had not. 9 organizations did not respond to the question.

“Have you or some of your staff participated in any training or conferences offered by AASCF over the last year?” (N=41)		
Yes	30	73%
No	11	27%
Total	41	100%
No Response/ Not Applicable	9	

Organizations were asked to identify any additional training opportunities they would be interested in AASCF providing. 41 organizations responded with most indicating they were not able to identify training items at this time or were not sure of what items to recommend. 4 organizations indicated that the training currently being offered is good and that AASCF seems to be offering the right amount. (One organization noted that some of their staff had intended to attend a training session that was cancelled.)

Several topics for additional training were identified, the most popular being leadership training, Signs of Safety and Vicarious trauma/workplace conflict resolution.

“Please identify any additional training opportunities you would be interested in AASCF offering.” (N=41)	Number of Responses
None or nothing at this time, not sure	19
What is now being offered is good / right amount	4
Signs of Safety	5
Leadership training including emotional intelligence and governance / training for managers/senior managers	5
Vicarious trauma and conflict resolution in the workplace	4
<i>Other Related Training:</i> 10 Principles of Wraparound / OBSD on Becoming a lead agency / Child care / More related to FASD / Respond to sexual abuse, battering / Life-long disability planning / Aboriginal needs and practices / Family services training and updates / Working with multi-problem families.	

The AASCF Website:

Organizations were asked to indicate what they saw as the most useful parts of the AASCF website by checking from the list below. The parts are ranked in order of number of times they were identified as being most useful.

“What are the most useful parts of the AASCF website? (Check all that apply)”		
Rank Order	Part of Website	Number Responding
1 st	Updates	34
2 nd	General Information	33
3 rd	Training	29
4 th	Job Postings	14
	Other (please specify):	7
	Funding resource list / Fundraising and grant opportunities / Government updates / Policy changes	

Additional Activities or Information & Areas to Improve:

Regarding activities or information AASCF could provide to assist members, or improvements AASCF could make, most (27 organizations) indicated they had no suggestions at this time. Some expressed a need for more activities in the area of Early Intervention or more beyond the main program/contract areas. 2 organizations expressed concerns pertaining to OBSD, one critical of current OBSD direction and the process for providing input. 3 organizations made specific unique suggestions of a training and collaborative nature, and 2 identified ‘housekeeping-related’ items that included frequency of AASCF meetings and the membership list.

“Are there any activities or information that the AASCF could be offering that would assist your agency or chapter area? Any areas where we could improve?” (N=39)	
Wages and Operations Cost (2 responses)	Advocate for wage and operational increases for Non CFS as well.
	Desperately need increase to operational budget and need to have costs associated with evaluation covered - additional 3% for evaluation and data management systems.
Early Intervention (3 responses)	More promotion and active involvement with early intervention sector.
	More on the Early Intervention side of things, there is change afoot
	Better advocacy/coordination/training on Early Intervention services
OBSD Related (2 responses)	More about the impact of OBSD on non CYS Organizations as will most likely affect all areas and who our service partners will be.
	<p>Many in the service delivery area are truly concerned yet when we attend training events or OBSD round table talks we are told that the concerns simply aren't accurate. I cannot get in home support for families more than 1 hr. per week, can't get drives to therapy, families complain it took them advocating for themselves over a year to get therapy etc. Drive companies that have existed for years are not getting requests, yet clients are missing appointments because their lead agency has no drivers. This is one of many examples.</p> <p>Having lead agencies trying to orchestrate and deliver most of the services has failed to meet the goal of more expedited, appropriate and supportive service delivery. They have not reached out and investigated the services they can partner with.</p> <p>I would like to see AASCF look at these concerns rather than only educating agencies on why OBSD is good, should be asking for concerns we are seeing. I have attended 2 discussion and working groups and when these concerns and many others were raised, we were told the discussions and input would help address concerns and improve the overall OBSD delivery, but nothing has improved.</p>
Training / Information / Collaboration (3 responses)	Would like to see AASCF have a larger public presence. I think the public at large is uninformed of the many significant issues we are constantly facing.
	Training on how to advocate with local politicians
	Collaborate in Family Violence work / tie to Social Policy Framework
Other (2 responses)	Meetings seem to be losing steam, attendance dropping; maybe consider having them every 2 months.
	Membership list.
No Suggestions with Positive Comments (7 responses)	No, very responsive and helpful
	I know who to contact if I need to access information
	No, we find value in our membership
	No, it's great / Great support/ Keep up the great work
No Suggestions (20 responses)	Not that I can think of, thanks
	Can't think of anything /Not sure of any areas for improvement Nothing at this time / Not Sure / No Opinion

Workforce Alliance: The final question of the 2013 survey asked members if they are aware of the work of AASCF on Workforce Alliance (WFA) and if they need more information on this initiative.

“Are you aware of the work of AASCF on Workforce Alliance? Do you need more information on WFA?” (N=39)		
Yes	29	74%
No	8	21%
Somewhat	2	5%
Total	39	100%
No Response / Not Applicable	10	

Of the 39 organizations responding, 74% indicated they are aware and 5% somewhat aware of the work of ASSCF on Workforce Alliance. 9 (23%) indicated a need for more information and 13 (33%) stated they did not need additional information.

APPENDIX I

2013 AASCF Membership Survey Questions	
1	The total number of children and/or families served?
2	The number of board members in the organization?
3	The number of full time employees in the organization?
4	Of the full-time employees how many are service delivery staff (not administrative staff)?
5	The number of part-time employees in the organization?
6	Of the part-time staff how many are service delivery employees (not administrative)?
7	The number of volunteers in the organization?
8	Total number of employees within the organization (including those associated with Child & Youth Services)?
9	What is the total amount of your contracts with C&YS?
10	What type(s) of contract is it (i.e. FSCD, EI, child intervention, etc.)?
11	When did you last receive a cost of living increase in your contract(s)?
12	When did you last receive an operations increase in your contract(s)?
13	When was the last time the contract(s) went to tender? Please list all dates if multiple contracts.
14	What is your current vacancy rate?
15	What is your current turnover rate?
16	What is your average length of turnover (i.e. how long does it take for you to replace staff)?
17(a)	Please list the turnover percentage in the following workforce areas: Frontline
17(b)	Supervisory
17(c)	Management
18	What is the average length of employment for frontline/direct staff?
19	Please list the main reasons for staff turnover?
20	Between April 1 and October 31, 2013 has your turnover rate changed?
21	Over the last six months, what emerging trends have you noticed with your staff, if any? (i.e. sick days, WCB claims, inexperienced supervisors)
22	How has the wage increase over this last year (April 2013) impacted your agency?
23	Are you currently considering closing a program?
24	Please describe why and what type of program will be closed:
25	Describe what measures you are taking to prevent the closure:
26	During the past six months has your agency closed services to children and families (check one):
27	What type of program was closed (i.e. Group care, residential treatment, foster care, family intervention, etc.)?
28	How long was the program closed?

29	How many children/families were affected by this closure?
30	Describe the reason for the closure:
31	How was the closure resolved?
32	Are you currently considering opening a program?
33	Please describe why and what type of program you will be opening:
34	During the past six months has your agency opened services to children and families (check one):
35	What type of program was opened (i.e. Group care, residential treatment, foster care, family intervention, FCSD, etc.)?
36	How long has the program been open?
37	How many children and families will benefit from this opening?
38	Describe the reason for opening:
39	Do you feel that you have enough information on OBSD?
40	If you answered no, please identify what additional training you require.
41(a)	What role do you think your agency will play in Outcome Based Service Delivery? (Check all that are applicable) Lead Agency
41(b)	Niche Agency (subcontractor to lead)
41(c)	Both
41(d)	Not Sure
41(e)	Not providing Child Intervention Services at this time
42	Has the AASCF advocated for your needs during the previous year?
43	In the last year have you participated in the advocacy process (i.e. writing letters to your MLA, attending meetings, participating in agenda forums, etc.)?
44	Please describe the role AASCF has played in advocating on behalf of your organization:
45	Do you receive adequate information in terms of updates, events, current actions, etc. from the AASCF? Please comment.
46	Have you or some of your staff participated in any training or conferences offered by AASCF over the last year?
47	Please identify any additional training opportunities you would be interested in AASCF offering.
48(a)	What are the most useful parts of the AASCF website? (Check all that apply.) Updates
48(b)	Training
48(c)	Job Postings
48(d)	General Information
48(e)	Other
48(f)	Other (please specify)
49	Are there any activities or information that the AASCF could be offering that would assist your agency or chapter area? Any areas where we could improve?
50	Are you aware of the work of AASCF on Workforce Alliance? Do you need more information on WFA?