



Commission to Promote  
Sustainable Child Welfare

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Commission de promotion de la viabilité  
des services de bien-être de l'enfance

# **Jurisdictional Comparisons of Child Welfare System Design**

**WORKING PAPER NO 2**

July 2010

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# Jurisdictional Comparisons of Child Welfare System Design

## INTRODUCTION

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In preparation for *Towards Sustainable Child Welfare in Ontario: First Report of the Commission*, the Commission has produced a series of working papers to share the thinking that has informed the first phase of its work on child welfare in Ontario. These papers aim to support the Commission's principles of transparency (by sharing our thinking as it develops), and partnership (by developing a common way of thinking amongst partners).

Purpose of *Working Paper No. 2* is ...

- To present a framework for thinking about the features of a child welfare service system.
- Set out the high level options for system design in Ontario's child welfare system.
- Compare the features of child welfare systems across other jurisdictions in Canada, the US, and the UK and identify what approaches may have relevance for Ontario.
- Present the choices facing the Ontario child welfare system in the short and medium term.
- Signal the Commission's emerging conclusions which have informed its first report *Towards Sustainable Child Welfare in Ontario*.

*The Commission envisions a future in which a modernized child welfare system functions as one of many programs working together to provide integrated, child-focused services fully aligned to improve outcomes for children and youth.*

There are four tiers to the Commission's strategy, each one building on the other:

1. reconfiguration of CAS structures;
2. a new funding approach;
3. a new way of holding CASs to account; and
4. reducing administrative obstacles and streamlining processes.

*Working Paper No. 2* includes our framework for thinking about system design and comparative information obtained from other jurisdictions in Canada and the United Kingdom. A paper about the US will follow.

Section one will introduce ideas about system design, and present the framework and high-level options for designing systems for delivering child welfare services.

Section two will provide a comparative summary of the different jurisdiction's child welfare systems in terms of their governance, policy orientation, service configuration, funding, and performance measures and accountability. A fuller description of each jurisdiction is included in the appendices of the working paper.

Section three will draw some conclusions from this review and point to the directions that we think Ontario should be moving in the short and medium term.

## SECTION ONE – SYSTEM DESIGN FRAMEWORK FOR CHILD WELFARE

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System: “A group of interacting, interrelated, or interdependent elements forming a complex whole”<sup>1</sup>.

### Why Does Systems Thinking Matter?

Child Welfare services are complex. To be effective in improving children’s outcomes, services need to connect in a very personal way to the diverse and changing needs of the children they serve; they also need to work together to make the most of the child’s circumstances, and to open up new opportunities. A model of policy making that attempts to reduce such complex problems into separate, manageable components, will not shed much light on the challenges facing personal services governments provide or fund.<sup>2</sup> This is because of the increasing interactions between the various organizations and agencies involved, as well as the fact that there are a more diverse range of organizations involved in delivering services, many of them not directly under the control of government.

The combined effect of this increased complexity is to make it even more difficult to predict the outcomes of top down change, especially in service systems which do not behave in straightforward, linear ways. When individuals and families are the end users of such services, the complexity is multiplied. If this system dimension is ignored, policy risks producing unintended consequences, alienating clients and professionals involved in delivery, and long-term failure to improve overall system performance. Systems thinking refers to child welfare, and other public services, as “complex adaptive systems” because they involve human-activity; quite different from the normal linear, mechanical framework.

Plsek provides an often cited example of the difference by comparing throwing a stone with throwing a live bird. The trajectory of the stone can be calculated precisely using the laws of mechanics, and it is possible to ensure that the stone reaches a specified destination. However, it is not possible to predict the outcome of throwing the live bird in the same way, even though the same laws of physics ultimately govern the bird’s motion through the air. As Plsek points out, one approach is to tie the bird’s wings, weight it with a rock and then throw it. This will make its trajectory (nearly) as predictable as that of the stone, but in the process the capability of the bird is completely destroyed. He says that this is more or less what policy makers try to do when using a scientific management approach, based on a mechanical model, to try to control the behaviour of a complex system for which they are devising policy. A more successful strategy for getting the bird to a specified end-point might be to place a bird feeder or other source of food at the destination.

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<sup>1</sup> Oxford online dictionary.

<sup>2</sup> Chapman, Jake (2002), *Systems Failure*, published by Demos, retrieved from <http://www.demos.co.uk/files/systemfailure.pdf?1240939425> on 18<sup>th</sup> May, 2010.

Child welfare services do interact and are interdependent, but as we engaged with the different CASs and parts of MCYS, we were struck by their need to form more of a whole – a whole that is more likely to produce accessible and personalized services. So our aim is to systematically examine the existing governance, policies, structures, processes, funding approach, configuration of services, and accountability mechanisms which guide the existing child welfare system, and consider where changes may be possible to transform it into a more integrated whole. To serve children well, *some common features are required in every agency across the system, such as more equitable access to services, equivalent performance and quality of service between agencies, and enough standardized processes to enable flows of information, clients and specialised services.*

## The Particular Complexity of Children's Services

Child protection's immediate focus lies in protecting vulnerable children from neglect and abuse, but the situations that expose children to risk often stem from much broader social, economic, and political forces. Poverty has been shown to have a particularly strong correlation in cases of neglect.<sup>3,4</sup> The 2003 Canadian Incidence Study of Reported Child Abuse and Neglect found that neglect was the primary category of maltreatment in nearly one third of all substantiated maltreatment investigations.<sup>5</sup> It also found that families in substantiated neglect cases were least likely to have full-time employment and most likely to be receiving some form of social assistance. In Aboriginal communities where socioeconomic conditions are even more challenging, neglect was found to be the primary category for over half of all substantiated investigations.

The challenge of preventing the near- and long-term consequences of child abuse and neglect extends well beyond the CAS. The reality is that vulnerable children live in vulnerable families. Without more equal opportunities, and in the absence of more positive interventions and service availability for vulnerable families and children, demands on the child welfare system increase – bringing corresponding questions regarding its long-term sustainability. Because of the impact of social and economic factors on children and families, it is important to think about child welfare in a broader spectrum of children's services.

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<sup>3</sup> Leschied, A.W., Chiodo, M.A., Whitehead, P.C., & Hurley, D. (2003). *The Association of Poverty with Child Welfare Service and Child and Family Clinical Outcomes*. Community, Work & Family, Volume 9, Issue 1 February 2006, pages 29 – 46.

<sup>4</sup> Leschied, A.W., Whitehead, P.C., Hurley, D., & Chiodo, M.A. (2003). *Protecting Children is Everybody's Business: Investigating the Increasing Demand for Service at the Children's Aid Society of London and Middlesex*. United Way of London and Middlesex and the Children's Aid Society of London and Middlesex.

<sup>5</sup> Trocme, N., Fallon, B. et al (2003), Canadian Incidence Study of Reported Child Abuse and Neglect, CECW.

Vulnerable families should not find themselves attempting to access services organized in separately delivered programs, each with their own mandates, access criteria, and institutional obstacles. Moreover, the universal services that are in place to meet the needs of all Ontarians – education, healthcare, and others – should meet the needs of our most vulnerable citizens. Children without a family doctor, left out of school, without mental health treatment, too often drift towards chronic unemployment, homelessness, the criminal justice system, and at worst, suicides and other premature deaths. So to improve outcomes for the most vulnerable children, we must make some important choices about how the system is best designed to encourage collaboration between its parts.

International organizations are recognizing the importance of a systems approach to strengthen child protection, and overcome the inefficiencies and gaps associated with their traditional focus on single issues. Research commissioned by UNICEF has yielded a working paper *Adapting a Systems Approach to Child Welfare*<sup>6</sup>, which places the systems approach to child protection within the broader context of system theory in order to identify the key elements of any system and the underlying tensions and processes that determine a system's ultimate dynamics. Building on this foundation, the paper outlines a set of characteristics or features commonly used by stakeholders to define and make choices about the role of a child protection system generally. Their review found enormous variation in what stakeholders perceived as appropriate activities for a child protection system and in the degree to which responsibility for such activities were shared with other community and governmental entities. Ultimately, how these choices are defined and resolved are of central interest to those constructing a specific child protection system.

Approaching systems thinking and design as reflected in the UNICEF research, has much in common with the way that the Commission has developed the concepts and framework for reviewing child welfare systems in other jurisdictions. Our remit for a single jurisdiction – Ontario – and the scope of our review within the Anglo-American sphere, allowed adoption of more middle –level ‘system features’ than UNICEF’s global focus, but parallels can nevertheless be drawn.

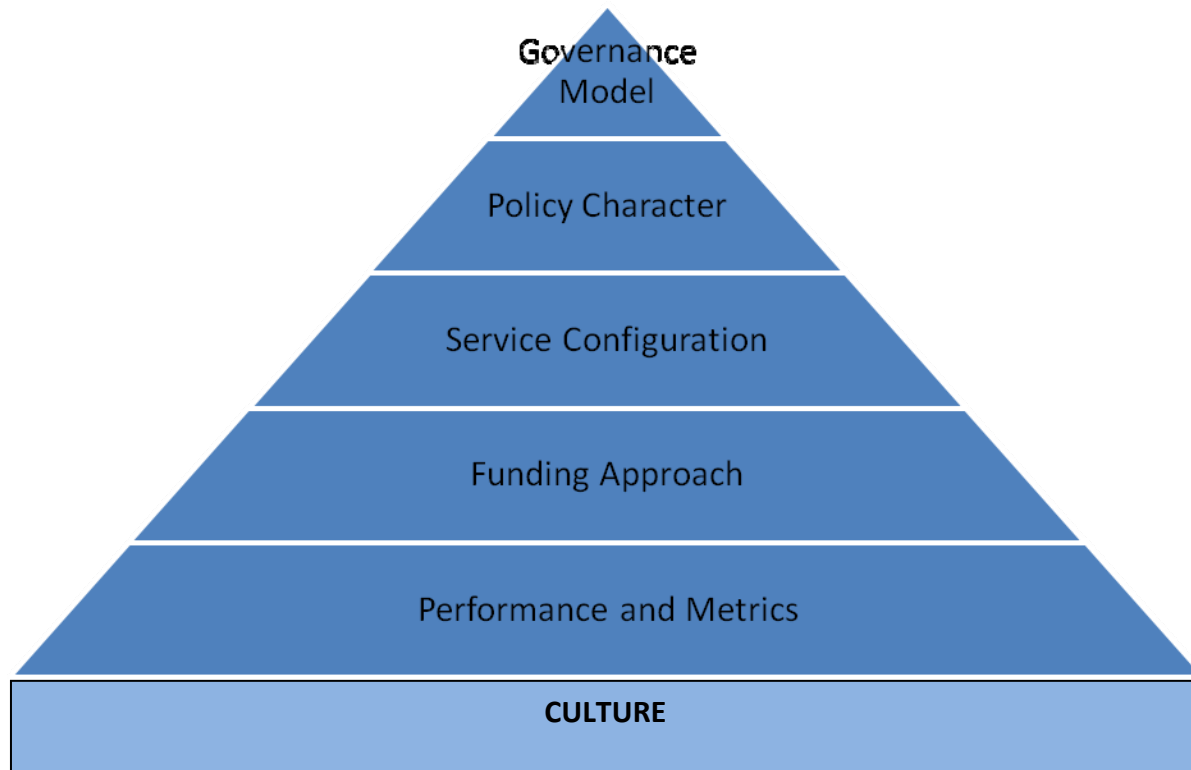
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<sup>6</sup> Wulczyn, F., Daro, D., Fluke, J., Feldman, S., Glodek, C., Lafinda, K., (January 2010) , *Adapting a Systems Approach to Child Protection: Key Concepts and Considerations*, Working paper, United Nations Children’s Fund, New York



## Features of System Design

To provide a framework for our thinking, we have identified five features of systems design. These five features provide a lens through which to examine the current system and allow it to be compared to systems in other jurisdictions. These features also provide a way of thinking about what should be retained and what should change in order to realize sustainable child welfare.



Within this framework, strategic choices face child welfare services in Ontario and have concerned the Commission in its early work.

- 1) Governance – Should child welfare services continue to be delivered through independent organizations, each with their own board?
- 2) Policy Character – Is the Transformation agenda the right approach?
- 3) Program & Service Configuration – Should there be changes to the way programs are defined and services structured and delivered? Is 53 the right number of CAS?
- 4) Funding Approach – What approach to funding services will encourage equity between agencies and value for children and communities?
- 5) Systems of Accountability – What systems of accountability will best deliver results, for children as well as government ministers? How do we ensure that we know how the system is performing and what kind of outcomes it is producing?

## Definitions of Terms and High-Level Options

To develop a common understanding is an important starting point, so this next section includes the meaning we attach to each of the 5 features, and some high-level choices to be considered.

**Culture** – is about organizational as well as professional cultures, roughly translated – the particular history, beliefs, lived values and working ideologies that guide ‘how we do things here.’ While culture may not be formally part of the system features – though often tough to change - it is a soft quality and may require first hand appreciation of how people do things and the meanings they attach to what they do. Culture pervades every dimension of the system and will have a powerful impact on how the governance, policy, services, and accountability frameworks work in practice, on the ground.

For example, in a system with many years of working with targets, standards, and transparent accountability, a performance-oriented culture might be expected. Where funding has been distributed through a real or quasi-market, there may be greater awareness of what things cost, and an appreciation of the difference between ‘needs’ and ‘services.’ Where there are many independent agencies, with a distinct identity and long history, many local distinct cultures are likely to have developed with a loyalty to their local community and the unique character of their agency. If a system has had a long history of separate and/or unmanaged organizational components, it may not have a single culture but many cultures.

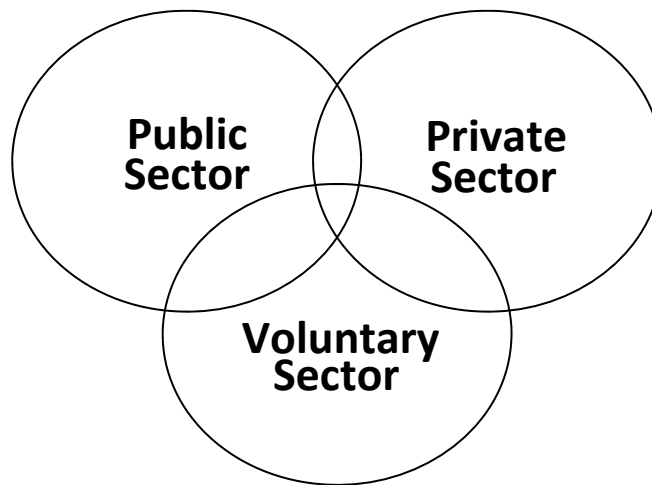
To appreciate the distinctive cultures operating in different jurisdictions would require a more intimate knowledge than it has been possible for the Commission to acquire in the course of its work. So we acknowledge that whatever the structures and policies in the different jurisdictions and localities described in this paper, local culture will play an important part in the outcomes they achieve.

### **Governance Models**

For our purposes, Governance is defined as *“the activity of governing. It relates to decisions that define expectations, grant power, or verify performance.”*<sup>7</sup> It can apply to different scales – national or local government, commercial corporations, *local* communities, and nonprofit organizations.

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<sup>7</sup> Entry on “Governance”, Wikipedia. Retrieved <http://en.wikipedia.org/wiki/Governance>



From a high-level systems perspective, there are 3 alternative models of governance:

- 1) Public Sector – is governed by the institutions of government and subject to democratic accountability ultimately to ministers. In general, it is an integrated part of government, staffed by public servants responsible for the setting of policy, financing, and directly providing services. Public services, and the public servants employed in them, are directly accountable to the Minister up the line and not to a separate board or elected tier of local government. The public sector is usually funded by taxation (possibly topped up by user fees or philanthropy). In Ontario, the operation of youth justice facilities is an example of this kind of governance model.
- 2) Private Sector – is governed by independent owners or boards managing services that are subject to competitive markets, and may contract with government to provide services at a price. In theory, competitive pressure on costs keeps prices low, and the “customer” has the benefit of greater choice and the power of exit (to go somewhere else). Some public services may operate in real markets, where customers pay personally for the services they use, but in a mandated service like child welfare, this has not proved practical even where it may have been seen as desirable. More common, are arrangements where the private sector receives public funds to provide public services, which are then free or subsidized at the point of use. There are several examples of this model in Ontario: laboratory services for community-based health care; purchasing of homecare and long-term care; and some private home daycare.
- 3) Voluntary Sector – non-profit incorporated bodies, governed by a constitution containing purpose and bylaws which include the election of a board of directors who exercise the governance of the non-profit (which may also be a charity, with another set of legal requirements). Examples in Ontario include child welfare (delivered through CASs) and most health care (delivered through hospitals, community health centres, community care access centres, etc.).

In the aftermath of ‘new public management,’ the boundaries between sectors are increasingly blurred and hybrids of various kinds are common, where public servants, hired by government, work for community boards; or private companies funded by government provide free services. The composition of the boards and the way their members are elected may be determined by statute rather than by the constitution of a private or non-profit organization. In these mixed governance models, accountability may be more difficult to determine.

### ***Policy Character***

Systems of child and family welfare that fall within the Anglo-American tradition operate with a dual mandate of ‘care’ and ‘control’ – and show a tendency to swing like a pendulum from one extreme end of the mandate to the other<sup>8</sup>. Some high-level policy choices span this spectrum – from a narrow focus on investigation and care for only those children subject to abuse or neglect, to a broader focus on children and family support. Similarly, there are varying levels of child risk/state involvement on a spectrum from low risk/high involvement to high risk/low involvement. Whether it is to prevent children from experiencing abuse or neglect, or detect whether it may be taking place, engaging families with some level of care and support will be required. Nevertheless, each of these policy choices presents trade-offs and consequences for the sustainability of child protection and the system as a whole.

Contemporary child welfare policy in North America and much of Europe tends to be preoccupied not so much with the direction or objectives of policy but with mechanisms for their delivery - in particular, with the role of child welfare vis-à-vis other children’s and social services (which is addressed in the following section on “Service and Program Configuration”), and implementation through regulations and prescribed procedures, and standards (addressed in the section on “Accountability, Performance and Outcomes”).

### ***Service and Program Configuration***

With a growing consensus in English-speaking countries about the direction of child welfare policy, greater attention is being given to the way that agencies, programs, and services are ‘configured.’

### **System Focus**

In part these are decisions about the focus, for example, and whether the system is to be configured around:

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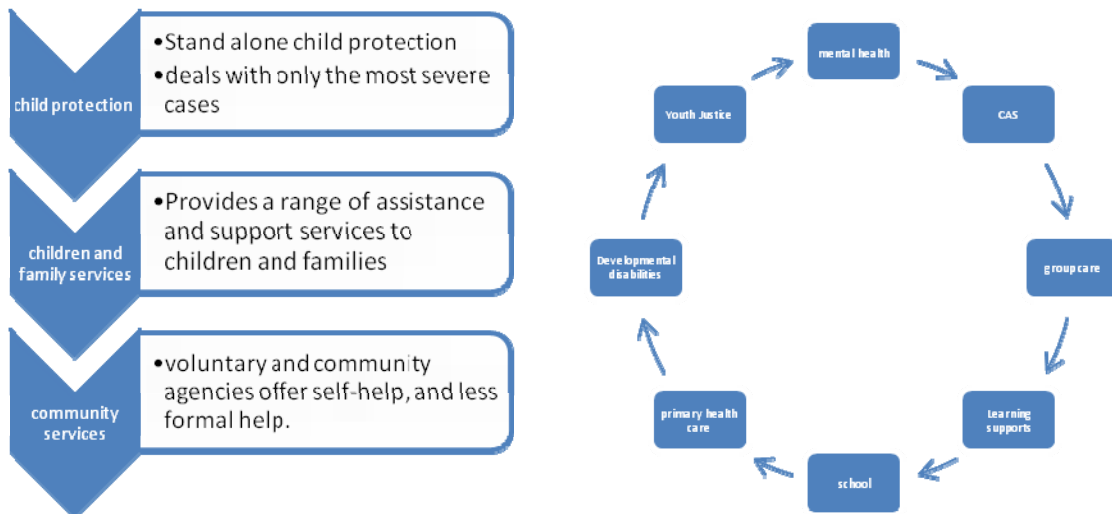
<sup>8</sup> Dumbrill, G. C., & Maiter, S. (1994). Foster Parents and Natural Parents; Establishing a Powerful Working Alliance. *The Ontario Association of Children’s Aid Societies Journal*, 38(3), 12-15).

- Institutions - then the system is primarily concerned about size, number, location, and catchment areas for institutional structures.
- Program - then the system is concerned with aligning services behind the policy objectives, often across institutional boundaries.
- Children and families – then the system is concerned with making children and families the centre of the system, and seeking ways to reducing the ‘silo’ effect of institutions and programs.

### Relationships Between Services

Another set of questions about the logic and form of the configuration concern the relationship of services, one to another. For example,

- Are services configured in a hierarchy? – With child welfare a tertiary or last resort service, a standalone agency, with a clear protection role, providing services accessed only by referral and after the required risk threshold is satisfied, following assessment against eligibility criteria drawn from the program logic.



- Are services configured as a horizontal continuum? – With child welfare one of a range of community services working together to develop a flexible service response to the particular needs of children and families. Child protection may be part of the same organization as a range of other children’s services, or working in a formalized partnership with other independent agencies.

Whether our focus is primarily about institutions or programs or children will have consequences for the alignment of the system as a whole. Size, scale, and population served will make a difference to the proximity of services to local communities, travel times, and economies of scale, for example. The program scope and scale will determine the relative

importance that gate keeping and assessment plays in managing the system's boundaries with other systems, for example, whereas a more 'personalized' child and family focus will require special efforts to satisfy departmental demarcations for policy and funding streams.

Choices about service and program configuration - institutional, program focus or child focus – present tradeoffs between the specialism and single focus of child protection/welfare and the service continuum.

All of these considerations have bearing on many fundamental questions for child welfare in Ontario – the number and role of CASs and the relationship to other services for vulnerable children and families.

### ***Funding Approach***

Funding approach is the term we are using to describe the basis on which agencies are funded; and the 3 high-level alternatives we've identified are population-based, institution-based, or case/service-based.



**Population-Based:** funds calculated on per capita basis within populations in designated service catchment areas, often weighted to reflect child pop and/or weighted for factors associated with "need" (poverty, density, scarcity, aboriginal population) and variable regional/local costs of services and labour.



**Agency-Based:** funds are transferred through block grants to cover the costs agencies incur to deliver mandated services. Costs are most commonly built incrementally from historical baselines, but can be tied to aggregate service activity. This most reflects the current funding approach.



**Fees for Service:** fees are paid to independent agencies for the services provided to individuals, within a framework of what's deemed admissible to an assessed level of needs (set at different thresholds). Requires a 'purchasing' or 'commissioning' role in the system such as insurers in the HMO models in the US, or the Children's Trusts in the UK.

Again, in practice one can expect to see many variations and hybrids which combine elements of these different models, so there may be a formula that reflect variable costs of variable volumes, adjusted by local differences in the costs of delivery (i.e. remoteness), and fees for service that represent only the marginal costs paid in addition to an agency's core grant. Choices about the funding approach will make a major impact on the system – publicly funded services operate in what has been termed 'an allocations' economy – and show incredible ability to produce the activity or results that are rewarded with funding.

### *A side note on 'commissioning'*

Closely related to decisions about the approach employed to determine the level and distribution of funding, are decisions about how funds should be used to leverage the desired services and outcomes. Traditionally, government allocates funding to the institutions and professionals that provide services.

But there is criticism that funding in the hands of service providers and institutions does not always respond to children's needs and requirements – there are many examples where children are 'made to fit' into the services and places that institutions have available, rather than have a service 'tailored made' to fit their needs and requirements. It also is the case that no matter what the level of funding, resources are 'tied up' in paying for existing facilities, and it is rarely possible for funds to be 'freed up' to spend on something that an individual child happens to particularly need, or to invest in a new service to meet a new need.

To address these criticisms and challenges, funding is allocated to a 'purchasing or commissioning' body. This body is accountable for assessing the needs of a designated population (rather than providing services), and then purchasing (where services exist), or commissioning (where new services have to be created), the services required by their local population. These functions have more recently been introduced to Canadian systems of public service funding allocations - and where they have been established have required a new array of institutions, 'pricing' and regulatory arrangements. In child welfare, moving to a commissioning model from where the system stands now, would require major change that would need to be planned on a phased basis. But commissioning does offer a set of incentives for the system to serve individual requirements and be rewarded for personal, as well as organizational, results.

### ***Systems of Accountability – Performance and Metrics***

Child welfare systems have become very preoccupied with establishing standardized approaches to individual assessment, protection, and case management, sometimes in response to the deaths of children in care or at risk in the community. Alongside this concern with quality of services, are concerns about policy results, outcomes, and organizational effectiveness.

### Accountability for what?

- **Quality of Service Transactions** – what compliance is there to standards?
- **'Policy Results'** - what results has Transformation delivered? e.g. diverted more of the right children from protection, placed more children in customary care, more permanency for more children, etc.
- **'Children's Outcomes'** – how do outcomes for children in care benefit from CAS services?
- **'Organizational Effectiveness'** - is the organization well-led, managing its people and resources to best effect?

This 'accountability' dimension, therefore, includes many options about 'what' CASs should be accountable for – the consistency of its internal processes and transactions, policy results, outcomes for children, and an effective organization – are all a possible focus. It also includes choices about the mechanisms to exercise accountability which address the question of 'how.' Here is list of a number of ways that government can use to hold others (and perhaps itself) to account:

- **Plans** – require agencies to produce plans for how they are going to do what is required;
- **Targets** – set local agencies quantitative targets for the policy results that, in aggregate, are expected to be delivered nationally;
- **Standards** – prescribe the standards to be met – coverage can be applied to micro (client-focused service) through to macro (agency or system focused) transactions at local level. The % of compliance to standards may be considered an indicator of consistency.
- **Comparison** - enables comparison of performance across the system, revealing differences that provide a focus for further analysis and intervention.
- **Outcome Indicators** - record how children are doing on key life skills/milestones.
- **Procedures** – codify the procedures to be followed, often standards are about procedures.
- **Incentive Funding** –reward desired activity and punish undesired activity financially.



- Expenditure Control – scrutinize each expenditure head and control any outliers from the average or fixed levels. May include unit costs, with the ‘unit’ defined with variable sophistication.
- Establishment Control – set limits for grade and number of staff; may include workload measurement and norms.
- External review – like the auditor general.
- Inspection – on site assessment of an organisation’s services and capacity by independent body.
- Customer Complaints – establish independent review of complaints, equipped with powers to determine remedies for those that are substantiated, and prescribe standardised processes for local managing complaints.
- Morale and attitudes to work

Public service systems tend to incrementally add rules, standards, plans, reporting, and external reviews, on an ad hoc basis over many years, so that it may be difficult to discern a coherent ‘system.’ In examining systems in Ontario and other jurisdictions, we have asked - Is government clear about the results it expects, and where responsibility rests for delivery? Does government have a coherent set of mechanisms to exercise accountability – for its actions and that of local agencies? Is there a single point of accountability at central and local level, with a focused span of communication and knowledge about performance across the system? Are measures set which are reported on regularly; is the data accurate, timely and reliable; and are there the systems for collecting and validating data. Are there clear reporting requirements and consequences for results?

System performance will be better understood and improved with the right focus of accountability, exercised through the right mechanisms, and well-executed. Our interest in this paper is with systems, rather than individual agencies, services, or cases.

## **A Framework for Analysis and Comparison**

This section argues the benefits of taking a systems perspective to the question of sustainable child welfare in Ontario, and sets out 5 features to examine system design – their governance, policy character, service and program configuration, funding approach, and accountability.

This framework is applied to our examination of child welfare systems in other jurisdictions in Canada and the UK, which is summarized in section two.

## SECTION TWO – FEATURES OF CHILD WELFARE SYSTEMS IN OTHER JURISDICTIONS

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### Introduction

The five features of system design provide the lens through which children welfare systems from other jurisdictions are compared in this section: governance, policy approach, service configuration, funding, performance and outcomes. Examining the different ways in which child welfare policy is framed, services are provided, programs are governed and financed and effectiveness is measured, encourages thinking outside the Ontario ‘box’. Placing potentially promising design features within a whole system perspective is consistent with our argument about the importance of approaching comparison within a systemic framework. The focus is at the level of systems design, rather than an in-depth review of every aspect of child welfare in these jurisdictions.

The jurisdictional focus of this paper is:

1. Canadian provinces ;
2. Aboriginal child welfare ; and
3. The United Kingdom (mainly England).

A companion paper on the US child welfare system will be published in the coming weeks.

### Part One: Canada

Four Canadian jurisdictions have been reviewed for this paper: Alberta, British Columbia, Manitoba, and Nova Scotia. These provinces were chosen because of the Commission’s interest in one or more features of system design or change: they have unique organizational structures (Manitoba), have recently undergone significant system re-organization (British Columbia and, Nova Scotia), have well developed systems of measuring outcomes (Alberta and British Columbia), or offer alternative design features worthy of review. The child populations across these six jurisdictions vary widely. British Columbia serves the largest child population outside of Ontario (nearly 920,000 eligible children) while Nova Scotia serves the smallest (approximately 159,000 eligible children). Manitoba has the highest proportion of children living in substitute care (3.11% of eligible children).

The information in the following pages has been gathered from a variety of sources:

- *Published government documents*: including a review of provincial government annual reports, business plans, and strategic plans, as well as reports from Ombudsmen, Auditor Generals, and Children’s Advocates (or their equivalent). The documents reviewed, and linked to them are found in the appendices.

- *Structured interviews* with key Department and/or Ministry staff ensured that the most current information has been included in this summary. Information on funding practices was gathered through interviews with Ministry staff, as it is not publicly available. The structured interview questions are presented in Appendix A.
- *Published research*: The last appendix is a partial bibliography of book chapters and additional documents that informed the paper as a whole.

The *Canada Act* of 1982, and its predecessor, the *British North America Act* (1867) lay out the distribution of powers between the provinces and the federal government. The federal government has jurisdiction over trade and commerce, currency, national defense, banking, copyright, Indians and Indian reserves, criminal law and interprovincial business. Provincial governments have jurisdiction over municipalities, school boards, hospitals, property and civil rights, administration of civil and criminal justice and social welfare.

The long history of the division of powers has influenced the manner in which child welfare services have developed in Canada over the last century and a half. Unlike Britain and the United States, the federal government has no role in child welfare policy nor does it fund child welfare services in Canada with the exception of children normally living on a First Nations reserve. Child welfare services in Canada are the sole responsibility of the provincial and territorial governments.

Formal child welfare services began in Canada in the late nineteenth century when the Children's Aid Society of Toronto was formed. Shortly after that the first law to protect children was enacted. Over the next decades, child welfare services expanded. Services were provided on a piecemeal basis, to the local community by church organized agencies, municipal or county organizations and numerous charities. The initial focus of child welfare services in Canada was child neglect. Parents who neglected their children were viewed as flawed and services were provided in order to teach parents how to properly raise their children, or children were removed from the home. It was not until much later in the 20<sup>th</sup> century that physical (and still later sexual abuse) was also prioritized by the child welfare system.

Child welfare services across the country share a number of similarities in their mandates, compliance measure, and the level of external oversight that exists. These similarities and the differences in governance structures, funding, and policy character will be explored in the next section.

## **Governance**

Responsibility for child welfare is vested in the Minister responsible; in each of the four jurisdictions examined, this function forms part of a government department alongside other functions. In each of the provinces a Director of Child Protection (or equivalent) is appointed to whom the Minister delegates responsibilities that may include policy and funding advice, and oversight of the organization and management of service provision. In Ontario, these functions are distributed across 'policy' and 'operations,' and supported by other divisions responsible for strategy and research.

Nova Scotia and British Columbia are line departments where protection workers are members of the public service, who report to the Minister through managers and directors.

Alberta and Manitoba have legislated independent Child and Family Services Authorities (CFSA) to organize and manage child welfare services. Alberta's Child and Family Service Authorities have broad powers to organize services and hire staff, although staff members are of the provincial public service. The Boards of Directors of Alberta's CFSA are appointed by the Minister, the Executive Director has dual reporting responsibility, reporting to the Deputy Minister and to the CFSA Board.

The composition of the Boards of Manitoba's CSFAs is determined by statute, and their representatives are elected by constituencies which are mandated by legislation. Manitoba's CSFAs have the power to delegate non-profit, independent agencies to provide protection services. These mandated agencies are governed by independent Boards. One CFSA in Manitoba uses a mixed model to ensure services are provided to communities in the far north. The General Authority mandates four independent agencies across the province and governs services provided by five public service offices.

### **Implications for Ontario**

*This review highlights the unique character of Ontario's system of independent voluntary organizations (Children's Aid Societies) exercising the statutory mandate under the Ontario Children and Family Services Act. Manitoba is the province which involves independent voluntary organizations, but does so through the CSFAs which originate in statute. Though independent voluntary organizations have played a major role historically in many provinces, in most jurisdictions, arrangements have been introduced to integrate the function more closely into the department of the minister responsible, or to delegate the function to stand alone structures created for this purpose. In this respect, Ontario is an outlier from other Canadian jurisdictions.*

## ***Policy***

Efforts to balance the dual mandates of child protection and child well-being are evident in all four jurisdictions. Responding to maltreatment remains the dominant organizing principle in all jurisdictions while strengthening families and supporting child development are important but secondary services. Key priorities listed in each Ministry's vision include safety, permanency, and measurable outcomes.

The relative emphasis that a province places on the safety of a child or the primacy of the family is reflected in the preamble and in the general principles outlined in their respective legislation. Alberta recognizes the family as the basic unit of society which should be supported and preserved. Manitoba's legislation first recognizes that the security and safety of children is society's responsibility, and secondly recognizes the importance of the family, and the need to support and preserve the family.

There are many similarities in the wording of the four province's child welfare legislations. For example, all of the legislation includes a duty to report clause that requires professionals with suspicions of child maltreatment to file a report with the child welfare system. The grounds for finding a child in need of protection (or intervention) include physical abuse, sexual abuse and emotional maltreatment and/or the failure to protect from the above, and/or the risk of the above.

But there are also some regional differences in policy. For example, Manitoba includes children who are beyond the control of the person caring for them; Alberta, British Columbia and Manitoba include situations where a parent's conduct endangers a child's well-being. Only Nova Scotia, like Ontario, includes exposure to domestic violence as a reason for finding a child in need of protection.

Each of the four provinces has recognized that the intervention taken should be the least intrusive or least disruptive way of assisting the parent to look after the child. Children should be removed from their families as a last resort and always with consideration of the child's best interests. British Columbia and Alberta have developed and adopted Differential Response models that respond to lower risk situations in a more supportive and less intrusive manner, however, this is typically after the need for protection services has been ruled out. Manitoba is exploring the use of several Differential Response models through pilot testing in five locations. Nova Scotia does not use a Differential Response model as the Department of Community Services has a deep and longstanding belief that families should not obtain services through the child welfare system unless the child is at risk from abuse and/or neglect. Services to support families and minimize the risk of maltreatment are provided through the Family and Youth

Services division of the Department, complimenting the services provided through the Child Welfare division.<sup>9</sup>

### **Reasons for Protection or Intervention**

	BC	AB	MB	ON	NS
Risk of / inflicted physical harm	X	X	X	X	X
Risk of / sexual harm	X	X	X	X	X
Sexual exploitation / prostitution / pornography	X		X	X	
Risk of / emotional harm	X			X	X
Risk / exposure to family violence					X
Child under 12 commit serious acts				X	X
Untreated psychological condition	X	X	X	X	X
Child with substance abuse issues & parent unable / unwilling to treat					
Untreated medical condition	X	X	X		X
Malnutrition					
Abandoned / orphaned without adequate provision for care		X	X	X	X
Parent unable, unwilling or unavailable to care for the child	X	X	X	X	
Neglect causing physical harm or risk of		X		X	X
Past parenting has put child at significant risk of above					
Child is beyond the control of the person caring for them			X	X	
Caregiver's conduct endangers child's wellbeing		X	X		
Educational neglect					
Duty to report	X	X	X	X	X

### **Implications for Ontario**

*Ontario's policy character, as expressed in the Transformation agenda, has much in common with that in place in other Canadian jurisdictions; it joins Alberta, and B.C. in adopting a model of "differential response" and N.S. in including exposure to domestic violence as a reason for*

<sup>9</sup> This information was provided during the interview of the Child Protection Coordinator in Nova Scotia. The interview was held on April 30, 2010.

*finding a child in need of protection. Only N.S. advocates a sharp delineation between child protection and supportive children and family policy.*

### ***Service Configuration***

At the Ministry level, most jurisdictions include a more or less broad continuum of child-oriented programs and services; headed by a policy lead responsible for child welfare, and non-protection services to children and youth. In some places, it has not been easy to gain a clear picture of the structures operating centrally and even more difficult to represent the picture locally. What follows is a brief summary of what strikes us as some of the more salient elements.

The Department/Ministry with responsibility for child welfare in each of the four jurisdictions also oversees child-care licensing. These service areas are distinct, but are viewed as interdependent to the extent that available quality early child-care is important to minimizing risk of maltreatment. Three of the provinces have grouped their Family Violence (Domestic Violence) program into the Ministry responsible for child welfare services, while family violence programs in British Columbia are managed separately by the Ministry of Community Services.

Alberta and Manitoba have cross-department initiatives designed to support children's early development, physical and mental health and educational achievement. Manitoba's program facilitates a community development approach for the well being of Manitoba's children, families and communities, particularly during the prenatal through preschool years.

British Columbia's Ministry of Children and Family Development has the broadest range of children's programs within its jurisdiction; directly providing and/or purchasing youth custody/probation supervision, child and youth mental health services, early childhood development services, services for special needs children and youth in addition to child protection, differential response and parenting support, and counseling programs.

Child welfare services, including screening, investigation and ongoing cases are managed by the department in British Columbia and in Nova Scotia and by the CFSAs in Alberta. Mandated Agencies, under the governance of the CFSAs, complete the screening, investigation, and ongoing case services in Manitoba. Each of the provinces provides and purchases substitute care services, depending on the availability of resources, and the need for specialized programs.

Parent education, counselling, and other support services that are necessary to reduce the risk to children are either bought through contracts (as in Manitoba and Alberta) or are provided by a separate division of the department (as in Nova Scotia). Support services, counselling and parenting programs are arranged through referrals to these separate entities.

Manitoba's child welfare services system has some unique features that do not exist elsewhere in Canada. Agencies that provide direct child protection service are mandated by one authority, under regulations of the CFSA Act. The General Authority has a mixed model of service provision with four private agencies providing services and five departmental offices. The Métis authority has one agency that provides services to all Métis families in the province. The Northern Authority provides services through six independent agencies with offices in their respective communities and Winnipeg. The Southern Authority provides child protection services through ten mandated agencies.

Intake services are structured in such a way that the four authorities jointly appoint a Designated Intake Agency (DIA), although the agency remains under the management of its own Authority<sup>10</sup>. For example, intake services in Winnipeg are provided by a joint intake unit known as the All Nations Coordinated Response Network (ANCR), which acts as a first point of contact for most families who are referred for services in the city of Winnipeg. The designated intake agency will answer questions, screen the family for services, and provide immediate response if necessary. The designated intake agency uses the Authority Determination Protocol to assist the family in selecting which authority is most appropriate to deliver further services. The family is encouraged to choose the most culturally appropriate authority, but the family is free to choose another authority if they wish.

The Authorities, along with their agencies, have "concurrent jurisdiction," a change from the previous system. In the past, child and family service agencies had responsibility only within a fixed geography. Currently, each Aboriginal agency is mandated to provide services for its clients living on reserve or off reserve, across the province. As a result, all Aboriginal agencies have offices in Winnipeg as well as in their reserve communities. In addition, the Authorities have service agreements with each other so that services can be provided to a family even if the family's selected authority does not have a mandated agency in the immediate community. For example, a family who selected the Métis authority during the Authority Determination Protocol, but lives in northern Manitoba would receive services from a Northern Authority agency in their area under agreement between the two Authorities.

As part of the current Transformation process in British Columbia, the Ministry is implementing a developmental, strengths-based approach to child and family development entitled Child and Family Support, Assessment, Planning and Practice (CAPP)<sup>11</sup>.

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<sup>10</sup>Regulations of the Child and Family Services Authorities Act. (section 3) <http://web2.gov.mb.ca/laws/regs/pdf/c090-186.03.pdf>

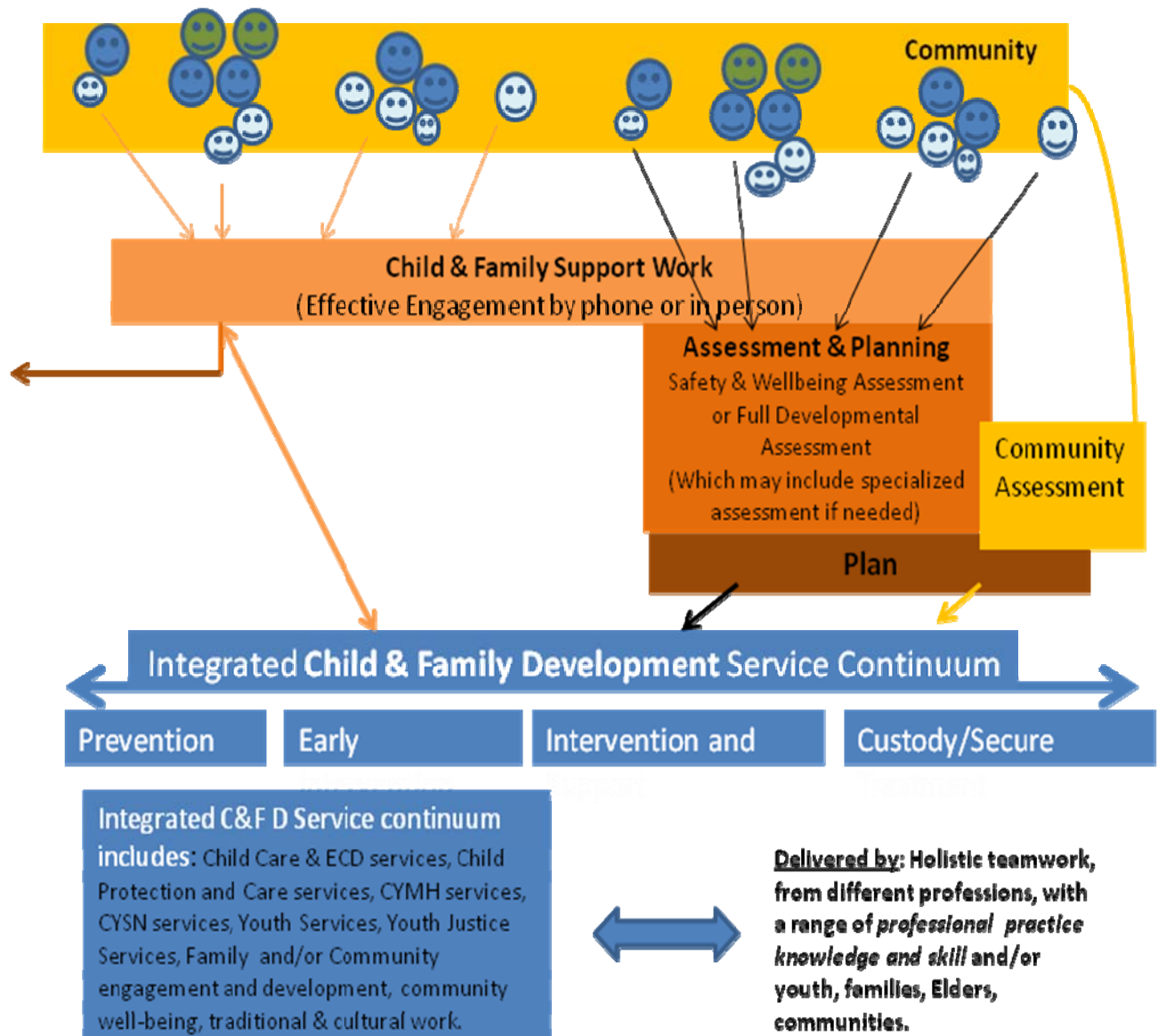
<sup>11</sup> Child and Family Support, Assessment, Planning and Practice CAPP. Discussion Paper Draft June 1/2010.



Set within an integrated vision for children's services, CAPP is a service delivery model designed to foster better outcomes for children, youth, and families, by providing staff with a consistent developmental approach to practice. CAPP will incorporate all the components that are necessary to support the development of children and families including child care, early child development, addiction services, services to children with special needs, youth and child mental health services, youth justice services, and child protection. Programs will no longer be offered in silos, and their focus will be on providing a combination of supports and interventions to meet the needs of "this child, this family, and this community." Supports and interventions will be drawn from services offered by both the Ministry and through a strong cross-government approach.

At its core, the developmental approach underlying CAPP places confidence in professional capacity and decision making, utilizing good supervision, an emphasis on participation of the child and family, and collaborative team work across and between professionals in different disciplines. Different professions and practices will be drawn upon to create a holistic service for *THE* child and *THE* family based on *THEIR* needs. Those that are drawn upon to contribute to achieving the goals in the plan *form the team for that particular child and family*. There is also an intention to take *away program silos* and create an integrated service system. Dollars will then support an integrated system, rather than a series of stand-alone service streams. For example, a young person who is arrested would not have to be diagnosed with a mental illness to access the skill and knowledge of a mental health professional. The Ministry has depicted the integrated and holistic nature of B.C.'s CAPP in the illustration found on the following page.

**British Columbia's developmental, strengths-based approach to child & family development:  
Child and Family Support, Assessment, Planning and Practice (CAPP)**



### Implications for Ontario

*In comparison to other provinces we have examined, Ontario's configuration of 53 CASs is exceptional in a number of ways. It has retained its historical link to local communities and county boundaries; as a result the agencies vary very significantly in scale and size of population served. The agencies have evolved over time, rather than being a creature of statute, and have developed a diverse set of services and internal organizational arrangements. The Ministry has introduced detailed standards for activities seen as important to ensure acceptable levels of differences, (some good and some perhaps not so good), continue. There also seems to be more evidence of conscious system design and management in these jurisdictions – with efforts to secure a place for a range of supportive services, as well as to introduce inter-organizational arrangements between different children's services. The most extensive approach is being developed in B.C., but Alberta's and Manitoba's Authorities appear to have capacity to involve a wide range of services through their powers of delegation and purchasing. Strengthening these systemic features will be an integral part of sustainable child welfare in Ontario.*

### **Funding Approach**

The approach to child welfare funding in these jurisdictions takes on two main forms:

1. a strict and detailed funding formula; and
2. Historical patterns with increases as required and available.

Nova Scotia and British Columbia provide funds to their departmental offices based on historical spending, previous caseload size, and available dollars.

Manitoba provides block funding to its Authorities for operating costs of non-custodial services. The Authorities then distribute the funding according to negotiated purchase of service agreements between themselves and their delegated agencies. The purchase of service agreements may be standardized, although it is not required.

Alberta uses a detailed funding formula to calculate the block funding that is provided to its Child and Family Services Authorities. The formula includes calculations based on child population factors, caseload factors, geographic character of the area, and some measure of community need and/or impoverishment. (See Appendix D for further details).

The costs of substitute care for Aboriginal children in care in Manitoba and Nova Scotia are paid either by the province or the federal government, depending on whether the child normally resides on reserve. In Manitoba, this is equivalent to approximately 30% of children in care.

### Implications for Ontario

*As options for a new funding approach are examined for Ontario, Alberta's weighted population-based approach is worthy of a closer look as is Manitoba's approach of purchasing Service Agreements. However, both these provinces have established relatively few 'Authorities' and assigned them higher strategic functions than the more numerous Ontario CASSs. They also serve a smaller population which includes a relatively high proportion of Aboriginal people whose children are disproportionately represented amongst children in care. A challenge for Ontario will be in determining the funding approach that is more equitable across the province, (which suggests a population approach), and can provide sufficient scale to sustain a robust institutional and service structure.*

### **Accountability and Performance Measures**

There are many similarities in accountability practices in the four jurisdictions examined. Accountability practices may include compliance audits, independent child injury and death reviews, case audits, accreditation strategies, and "report cards." Each of these areas will be considered separately. Additional jurisdictions are included in the profiles of performance measures table as the information was readily available.

Compliance reviews are performed in all jurisdictions, some are internal to the agency/office and periodically they are conducted by each ministry/department. In Nova Scotia and British Columbia arms-length bodies will also conduct compliance reviews. Manitoba is revising its provincial-level quality assurance process, while the four CFSAs must ensure that their mandated agencies meet the provincial standards. The following list outlines the bodies that conduct compliance reviews in each of the jurisdictions:

- Nova Scotia - Child Welfare Audit program, and Office of the Ombudsmen, Youth Services
- Manitoba – is developing a Quality Assurance process
- British Columbia - Representative for Children and Youth, & Quality Assurance teams, Case Practice Audits
- Alberta - compliance review process, also part of performance measures process

In addition to compliance reviews and case audits, financial audits of child welfare services have been conducted by Auditor Generals in Alberta, Manitoba, British Columbia, and Nova Scotia.

Complaints are processed in each jurisdiction by arms length bodies. The following list outlines the bodies that review complaints and/or child deaths and serious injuries, and make recommendations:

- Alberta - Office of the Child and Youth Advocate
- Manitoba - Office of the Children's Advocate
- Nova Scotia - Office of the Ombudsmen, Youth Services
- British Columbia - Representative for Children and Youth

Accreditation of service providers and agencies is a relatively new process in child welfare. British Columbia requires that agencies receiving more than \$500,000 in contracts be accredited. Currently 99% of required service providers in British Columbia have achieved accreditation. Alberta encourages the accreditation of childcare agencies and requires substitute care facilities such as foster care, group homes, and residential care facilities, be accredited and licensed.

Alberta and British Columbia have implemented performance review processes in which they set targets and compare achieved results or compare results year over year. Many of the selected performance measures focus on children in care; the measures may examine:

- the number of children placed in permanent homes;
- the number of moves over a given time period;
- the closeness and connection to family;
- educational progress/achievement; etc...

There are few measures to indicate performance in cases where children remain in the family home. Alberta has completed exit surveys of families using shelters, foster care, and child care subsidies. These appear to be somewhat limited measures of satisfaction and don't speak to the benefits of the program or the improvements in the family's safety or well-being.

Recidivism of maltreatment for children not in care is being measured in Alberta and British Columbia.

There are unique measures being considered or in place in other jurisdictions. These include:

- Rates of retention for foster carers (Australia)
- Rates of retention for child protection workers (Australia)
- Comparisons of Aboriginal and non-Aboriginal substantiation and out of home care rates (Australia)

- Percentage of Albertans who have information to better help in situations of family violence and bullying (Alberta)
- Percentage of families accessing Ministry programs that indicate positive impacts for their children (Alberta)
- Timely social worker visit with child (California)
- No maltreatment in foster care (California)
- Re-entry following re-unification (California)
- Percent of children in care with health screenings completed, including dental exams and immunizations (California)
- Degree to which children in care stay in their community (Manitoba)

Measures		Nova Scotia <sup>^</sup>	Ontario	Manitoba	Alberta	British Columbia	Illinois**	California*	Florida~	US National Standard CFSRs	US NSCAW	Australia <sup>^</sup>
Child pop. eligible for protection		158,935	2,382,035	276,940	775,175	918,944	3,215,244	9,992,333	4,197,287			
Est. proportion of children in care		1.30%	0.78%	3.11%	1.10%	0.99%	0.55%	0.59%	0.47%			
Safety	Recurrence after receiving services				X	X	X	X		X		X
	Inquiry / abuse / death while in foster care or receiving services				X	X		X		X	X	
	Rate of protection reports and or substantiations					X	X	X	X	X		X
	Timeliness in starting / completing investigations						X	X	X			X
Permanency	Timeliness of adoption or permanency order	X	X		X	X	X	X	X	X		
	Number of placement settings over a given time					X	X	X		X		
Well Being	Percentage of at risk children / families accessing support services				X	X				X	X	X
	Licensed or subsidized child care spaces	X	X		X	X	X		X			X
	Child living where there is intimate partner violence										X	X
Well Being	CIC connection with family or community						X	X		X	X	
	Age / grade accomplishment for CIC	X				X	X				X	X
	School completion for children in care											X
Aboriginal / Indigenous / Black / Hispanic	Ethnic / racial analysis of substantiation rates									X		
	Ethnic / racial analysis of out of home care rates											X
	Ethnic match in foster care: Aboriginal child in Aboriginal foster home, Black child in Black foster home		X		X	X		X				

<sup>^</sup>Measures are not necessarily in place but are formally planned

<sup>\*\*</sup>The Illinois Child Well-Being Study, Year One Final Report, June 2006 Revised, and Auditor General Reports 2007

<sup>\*</sup>California Outcomes measures are reported online at [http://cssr.berkeley.edu/ucb\\_childwelfare/Cfsr.aspx](http://cssr.berkeley.edu/ucb_childwelfare/Cfsr.aspx)

<sup>~</sup>DCF Long Range Program Fiscal Years 2009-2010 Exhibit III - Performance Measures, September 2008, Information provided for Illinois, California and Florida is separate from information that is collected and reported federally.

### Implications for Ontario

*In the table on the preceding page, a comparison of the measures for which data is available in the different jurisdictions shows Ontario ranks as one of the most data-deprived jurisdictions, along with Nova Scotia and Manitoba. This will come as no surprise for everyone in the sector, who have long advocated for a better system for using performance measures to inform improvement. This effort has been daunted by the many different information systems operating in different CASSs, and the delay in the implementation of a province-wide child welfare information system. There are efforts to address this gap, for example the Outcomes Advisory Group has produced a high level outcomes framework, CPIN, which requires substantial investment and is under consideration for provincial government funding.*

*In the meantime, Ontario relies upon the performance reported in the annual Crown Ward review<sup>12</sup>, which covers a small proportion of the Children in Care and an even smaller proportion of families served by CASSs. Individual CASSs have moved forward with performance measurements systems, however, and we have seen a number of excellent approaches being used to manage individual agencies. Of course, without a common approach there is very limited capacity to compare one CAS with another and identify what is being done well, and what would be necessary to replicate it system-wide.*

### **Conclusion**

In this section we have reviewed 5 features of the child welfare systems in 4 Canadian provinces, and highlighted the possible implications for sustainable child welfare in Ontario.

The absence of a federal role or interest in child welfare has been credited with the relatively uneven development of the sector, but there are opportunities for collaboration in different parts of the country through regular meetings of the provincial Directors of Child Welfare, the Child Welfare League of Canada, and initiatives such as the National Outcome Measures, initiated by the Centre of Excellence on Child Well-being and other research programs. Though not the primary purpose of the Commission's interest in other jurisdictions, the potential for more sharing of information, research and best practice across Canada is striking.

For Ontario, this review contributes additional insights into our thinking about designing a sustainable child welfare system – in terms of its governance, policy character, service configuration, funding and accountability and performance measures.

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<sup>12</sup> The most recent Crown Ward review was published in September 2007, retrieved at: <http://www.afterfostercare.ca/pdf/newsletter/vol1iss1.pdf>



## Part Two: Aboriginal Child Welfare Across Canadian Jurisdictions<sup>13</sup>

The well-being of Aboriginal children is an important factor to think carefully about in designing any child welfare system in Canada. Children represent the future, and Aboriginal children represent an increasing proportion of people living in Canada. Today, Aboriginal children continue to represent a far greater proportion of children in care than do non-Aboriginal children; and the damaging legacy of the residential schools and the ‘sixties’ scoop’ are a painful reminder of injustices inflicted on Aboriginal families and communities. The following is not an exhaustive discussion of the many important issues facing Aboriginal child welfare; rather, it’s a discussion to highlight specific system design considerations.

Canada is home to 633 recognized Aboriginal communities. These communities have many diverse languages, cultures, resources, structures, beliefs, and social practices, however they share some common features that are not reflected by mainstream child welfare systems. For example, Aboriginal people assess child wellbeing within more expansive concepts of time, assessing the impact of intervention on the child across their lifetime and possible impacts for future generations as well. Similarly, environmental, community, family and children’s interests cannot be separated from each other in Aboriginal belief systems as they are interconnected. Mainstream child welfare systems, which are structured to meet the “best interests of the child,” upset the necessary connection and balance between the child, their family, and their community. Given these different understandings, and the structural risk factors of poverty, social isolation, and poor housing; Aboriginal communities continue their long efforts to build child welfare services that can better meet their needs.

Child welfare services to Aboriginal (First Nations, Métis, and Inuit) children and families in Canada are provided through one of three mechanisms:

1. delegated Aboriginal child welfare agencies which deliver a full range of child welfare services;
2. non-mandated (also known as partially delegated) which deliver a partial range of child welfare services often excluding child protection investigations and removals; and
3. Mainstream child welfare which provides services to Aboriginal children in the absence of an Aboriginal agency.

The role of the provinces/territories and federal government in Aboriginal child welfare delivery is guided by the *Indian Act* which defines eligibility for Indian Status (for First Nations only), the

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<sup>13</sup> We would like to acknowledge the invaluable contribution of Cindy Blackstock to this discussion of Aboriginal Child Welfare and hope that it accurately respects her advice. We have also benefited from the information we read on the websites of First Nations Child and Family Caring Society of Canada (<http://www.fncfcs.com/about/staffinformation.html>) and the Canadian Child Welfare Research Portal, formally the Centre for Excellence on Child Welfare (<http://www.cecw-cepb.ca/>).

creation of Indian Reserves, which are Crown lands set aside for the use of Indians, and a host of other requirements touching almost every aspect of First Nations life such as governance, housing, economic development, and wills and estates. The federal government thus has a specific responsibility in child welfare for First Nations. The federal government is not involved in child welfare for Métis or Inuit children.

Provincial/territorial child welfare laws and standards apply to both Aboriginal and mainstream child welfare agencies serving children on and off reserves except where Aboriginal self-government agreements apply.

There are a growing number of Métis and First Nations agencies serving Métis and First Nations peoples residing off reserve (particularly in Manitoba). In addition, there are several urban Aboriginal agencies providing child welfare services to Aboriginal peoples of diverse cultures. There are currently no Inuit child and family service agencies although services by the Nunavut Government are intended to respond to the unique cultural and contextual needs of Inuit peoples in that region. Mainstream child welfare programs serve many First Nations, Métis and Inuit children, in spite of the growth in the number of Aboriginal agencies.

There are also variations in the delivery of services on reserve. For example, partially delegated First Nations agencies exist in British Columbia, Ontario, and New Brunswick, providing support services for families and guardianship for children in care. These agencies work in partnership with mainstream child welfare, which conducts the child protection investigations and interventions. Fully delegated First Nations agencies providing the full range of child protection services under the respective provincial/territorial child welfare laws operate in every province except Prince Edward Island.

The Spallumcheen First Nation in British Columbia enacted a by-law under the Indian Act recognizing the authority of the First Nations people in child welfare matters. The Indian Act requires band by-laws to be signed by the Minister of Indian and Northern Affairs before taking effect and once this is done, the community is then in a position to act on the basis of its own child welfare authority outside of provincial legislation. The province has recognized the system and the Spallumcheen First Nation became the only First Nation in Canada to have sole jurisdiction over child and family services on reserve.

Other First Nations are working on their own child welfare laws, which will take effect under the auspices of self-government agreements or other legal instruments signed with the provinces/territories and, in the case of First Nations, with the federal government.

Another model is the tri-partite agreement used by the Sechelt First Nation in British Columbia that delegates the provincial child welfare law making authority to the First Nation to facilitate the development and implementation of tribal based child welfare services. Sechelt is currently

operating under the partially delegated model pending full implementation of the tri-partite model. A number of First Nations children on reserves continue to receive services exclusively from mainstream child welfare programs as the First Nation has either chosen to not create a child and family service agency or is unable to do so due to federal funding guidelines related to child population and other factors.

The funding of child welfare services for Aboriginal people is a complex process. The provinces/territories fund child welfare off reserve for all Aboriginal and non-Aboriginal peoples. The federal government funds the services on reserve for First Nations children. To complicate things even further, the federal government uses a variety of funding arrangements across the country. Although, as the Auditor General of Canada points out, none of these funding arrangements are tied to the needs of the children or the provincial/territorial child welfare laws.<sup>14</sup> Provincial/territorial funding for Aboriginal child welfare also varies.

The Department of Indian and Northern Affairs Canada (INAC), representing the federal government, First Nations organizations, and provincial governments, has been working for over a decade to revise the outdated federal funding mechanism for child welfare known as Directive 20-1, which has been in place since 1990. Directive 20-1 was the mechanism of funding operating costs for on reserve protection services and the maintenance costs of children in care who would normally reside on reserve. For two decades the formula behind Directive 20-1 has been critiqued as too inflexible to reflect shifts in practice and too limited to properly provide prevention and support services. It continues to be applied in British Columbia, Manitoba, and New Brunswick.

In five provinces, respective First Nations organizations, the Province, and INAC have signed new tri-partite agreements, known as *Enhanced Prevention Funding*, that strive to meet the goal of bringing best prevention practices onto reserves, while enhancing the financial support for adoption subsidies, permanency planning, and kinship care. The first enhanced prevention funding agreement reflecting these goals was signed in Alberta in 2007. Saskatchewan and Nova Scotia followed in 2008 while Quebec and PEI signed Enhanced Prevention Focused tri-partite agreements in 2009.

Although *Enhanced Prevention Funding* provides some improvement in funding over Directive 20-1, the Auditor General of Canada notes that it fails to address some of the fundamental flaws of Directive 20-1. Specifically, none of these funding arrangements are tied to the needs

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<sup>14</sup> Report of the Auditor General of Canada to the House of Commons, Chapter 4: First Nations Child and Family Services Program – Indian and Northern Affairs Canada, May 2008, retrieved from: [http://www.oag-bvg.gc.ca/internet/English/parl\\_oag\\_200805\\_04\\_e\\_30700.html](http://www.oag-bvg.gc.ca/internet/English/parl_oag_200805_04_e_30700.html)

of the children or the provincial/territorial child welfare laws. The Auditor General of Canada has also deemed the funding as inequitable.

Ontario remains an exception to these two federal funding frameworks. Child welfare funding for First Nations children and families who are living on reserves in Ontario is subject to the 1965 *Indian Welfare Agreement*. Under this arrangement, the Ministry in Ontario provides the funding for First Nations child welfare services and a portion of these costs are reimbursed by INAC. First Nations child and family service agencies and other experts such as the Advocate for Children and Youth in Ontario maintain that the 1965 Indian Welfare Agreement does not fully take account of the costs related to service delivery in remote communities or the unique needs of First Nations children.

Many experts link the inadequacy of funding with the growing numbers of Aboriginal children in care. The Canadian Incidence Study on Reported Child Abuse and Neglect has repeatedly found that First Nations children are investigated and their investigations are substantiated at higher rates than non-Aboriginal children. First Nations children are more likely to receive ongoing services after a substantiated investigation than non-Aboriginal children and First Nations children are more likely to be removed from their home than non-Aboriginal children. The Mesnmimk Wasatek report concludes that the significant over-representation of First Nations children in substantiated investigations and in child welfare placements can be clearly correlated to the high level of caregiver, household, and community risk factors (poverty, substance abuse, domestic violence, poor housing conditions). If adequate funding was provided, structured in ways that support Aboriginal child welfare providers to target these risks, then there would be some promise of addressing the over-representation of Aboriginal children.

In light of the over-representation of First Nations children in out-of-home care, the First Nations Child and Family Caring Society and the Assembly of First Nations filed a complaint under the Canadian Human Rights Act. This complaint came after the completion of multiple audits confirming the complex, rigid, and inadequate funding of First Nations child welfare (by Auditor General of Canada, Standing Committee on Public Accounts, Ontario Provincial Advocate for Children and Youth and the New Brunswick Ombudsman), and two protracted but failed attempts to jointly revise the funding of First Nation child welfare.

The complaint alleges that Canada is racially discriminating against First Nations children by providing less child welfare funding, and thus benefit, on reserves. The federal government has twice applied to the Federal Court to dismiss the proceedings on the grounds that the Tribunal does not have jurisdiction. The Federal Court has stayed the application until the Tribunal hears the case. Subsequently, the government has filed a motion with the Tribunal asking that it dismiss the complaint on the same grounds the Federal Court had issued the stay. The Tribunal

has not made a judgment on that application. Amnesty International, the Chiefs of Ontario, and the Canadian Human Rights Commission, joined the Assembly of First Nations and the First Nation Child and Family Caring society in advocating for this case to be heard fully and publicly on its merits.

### **Part 3: United Kingdom – England and Wales**

The third part of our jurisdictional review covers the United Kingdom, in particular local authority children's care services. Though sharing much common history, in fact the political context for public services in the UK is different from Canada in many respects. The last twenty years have seen major changes in the expectations and delivery of local services, with far-reaching reforms introduced by the Conservative government from 1979 to 1997, followed by the Labour government from 1997 to 2010. The results of the May 2010 election led to Britain's first Conservative-Liberal Democrat coalition government. The Queen's speech and budget have signalled policy change and major reductions in public expenditure. This part of our Jurisdictional review highlights some features of the UK delivery system that have informed our thinking about child welfare in Ontario. Recent announcements have also been noted, where there are developments worth watching (particularly its high profile efforts to reduce administrative burden.<sup>15</sup>)

#### ***Governance and Policy***

In England, child protection is the responsibility of elected local authorities which hold a general power of 'well-being' for their communities, including responsibility for a wide range of local services such as education, safeguarding children, leisure, environment, housing, social services and social care. There are 150 unitary<sup>16</sup> and upper tier local authorities responsible for children's services, most of which have a local cabinet style governance (leader or mayor plus local cabinet) as determined by the Local Government Act 2000.

Emphasis has been placed on 'joining up' children's services – centrally under the Secretary of State responsible for Children, Families and Schools<sup>17</sup> - to encourage prevention, early intervention and collaboration across programs from early years, special needs programs, safeguarding, looked after children, youth offenders, through to elementary and secondary education. This collaboration is governed locally through Children's Trusts and children and young people's partnerships, which are addressed under policy and legislation, and service configuration.

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<sup>15</sup> See the video launch of the "Your Freedom" program from No 10 Downing street, retrieved on 2<sup>nd</sup> July, 2010 from <http://www.number10.gov.uk/>

<sup>16</sup> The actual number of unitary authorities is somewhat uncertain at the moment, since the program of local government reorganization merging district and county councils, has been suspended by the incoming government.

<sup>17</sup> The new Coalition government has renamed it the Dept of Education, but its broad range of functions remains as before.

### Implications for Ontario

*Central-local relations in the United Kingdom are very different than in Canada. Though local authorities are seen to have had their powers eroded in the UK., they continue to have jurisdiction over services that in Canada are the responsibility of the provinces such as education and training, social services, housing, and benefits administration, as well as recreation, planning and environmental services. Councils also have tax and other revenue generating powers, which allow them to determine levels of services in response to local needs and preferences. Directly elected authorities, responsible for a range of functions, and with a general power of well-being, have also provided the leadership to facilitate partnerships on a range of subjects, across the public, private and community sectors.*

*Population size and densities are also very different in Ontario than England. With approximately 11.6 million children under 16, England's more than 150 children's services departments each serve an average of 77,000 children, compared to the 44,000 children served by each Ontario CAS. But as in Ontario, the size and scale of authorities vary enormously, with the largest covering a population of over 1 million (Birmingham), the smallest covering a population of 165,000 (the London Borough of Hammersmith and Fulham), and the most sparsely populated county (Northumberland) sharing some of the challenges experienced in Ontario's northwest. Local areas have therefore found a range of structures to address the particular demography and geography of their areas.*

*Therefore, it is the UK's various approaches to 'joining up' different functions around a common purpose (centrally and locally) as well as its local partnerships and children's trusts that are of interest to designing child welfare service systems in Ontario.*

### **Policy and Legislation**

The current child protection system is based on the *Children Act 1989*<sup>18</sup>, which was introduced in an effort to reform and clarify the existing plethora of laws affecting children. It enshrined a number of principles: The paramountcy principle means that a child's welfare is paramount when making any decisions about a child's upbringing. The court must also ascertain the wishes and feelings of the child and shall not make an Order unless this is better for the child than making no Order at all. Every effort should be made to preserve the child's home and family links. It introduced the concept of parental responsibility which sets out the rights, duties, powers and responsibilities of the parent or carer of a child. It requires local authorities to

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<sup>18</sup> *Children Act 1989: chapter 41*. London: Her Majesty's Stationery Office (HMSO), 1989  
ISBN: 0105441899, [http://www.hmso.gov.uk/acts/acts1989/Ukpga\\_19890041\\_en\\_1.htm](http://www.hmso.gov.uk/acts/acts1989/Ukpga_19890041_en_1.htm)

identify criteria for determining ‘children in need’ in their community, and their responsibilities for “Looked After Children.”

The *Children Act 1989* sets out in detail what local authorities and the courts should do to protect the welfare of children. It charged local authorities with the “duty to investigate ... if they have reasonable cause to suspect that a child who lives, or is found, in their area is suffering, or is likely to suffer, significant harm” (section 47). Local authorities were also charged with a duty to provide “services for children in need, their families and others” (section 17). The Act defines “harm” as ill-treatment (including sexual abuse and non-physical forms of ill-treatment) or the impairment of health (physical or mental) or development (physical, intellectual, emotional, social or behavioural).

Since the *Children Act 1989* was introduced, many new laws have been passed which have amended but not replaced it. The most important has been the *Every Child Matters* programme, which in turn led to the *Children Act 2004*; the Government’s response to the 2002 Victoria Climbié Inquiry report (the first Laming report). The *Children Act 2004* builds on the *Children Act 1989*, setting out the process for integrating services to children so that every child can achieve the five outcomes laid out in the national framework - *Every Child Matters: Change for Children*<sup>19</sup>.

As well as creating the post of Children's Commissioner for England, the *Children Act 2004*<sup>20</sup> places a duty on local authorities to appoint a director of children’s services and an elected lead member for children’s services, who are ultimately accountable for the delivery of services. It places a duty on local authorities and their partners (including the police, schools, health service providers and the youth justice system) to co-operate in promoting the wellbeing of children and young people and to make arrangements to safeguard and promote the welfare of children. It puts the Local Safeguarding Children Boards on a statutory footing (replacing the non-statutory Area Child Protection Committees) and paves the way for the setting up of information sharing databases.

The system is organized around delivery of **five outcomes**, across all services which are responsible for serving children – the outcomes have become popularized for the classroom in posters and teaching resources which are depicted as SHEEP.



<sup>19</sup> Every Child Matters: Change for Children. Her Majesty’s Government (HMSO), 2005.



The definition of “safeguarding” children has thus developed since the *Children Act 1989* was introduced. At that time, many services saw safeguarding as commensurate with child protection. Since then, there has been a discernible shift to a wider view of safeguarding and of the role of public services in promoting the welfare of children and young people. The term ‘safeguarding children’ is defined as:

‘The process of protecting children from abuse or neglect, preventing impairment of their health and development, and ensuring they are growing up in circumstances consistent with the provision of safe and effective care that enables children to have optimum life chances and enter adulthood successfully.’<sup>21</sup>

Improving the care system for children and young people in England is the subject of the Children and Young Person Act.<sup>22</sup> Amongst its provisions, the Act aims to increase the transparency and quality of care planning, strengthen the role of Independent Reviewing Officers, improves the stability of placements, ensures young people (up to age 18) are not forced to move out of care before they are ready, extends the entitlement to a Personal Adviser to age 25 (for those who resume an education and training pathway), provides an entitlement to a £2,000 bursary for care leavers who go onto higher education and makes the role of the designated teacher statutory.

With the change in government, more change is anticipated. In June 2010, the Secretary of State for Education, Michael Gove, has commissioned Professor Eileen Munro to conduct an independent review of child protection practices<sup>23</sup>, which is to be guided by three principles:

- early intervention;
- trusting professionals so they can spend more of their time on the front line;
- Greater transparency and accountability.

This review is part of a wide-ranging Government program “Your Freedom”, but also a response to the increased numbers of children coming into the care in the wake of the baby Peter Connelly case. According to the Local Government Association (LGA), an estimated 61,000

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<sup>21</sup> Working together to safeguard children, revised edition, HM Government, 2006.

<sup>22</sup> Children and Young Person’s Act 2008, retrieved from <http://www.dcsf.gov.uk/everychildmatters/publications/childrenyoungpersonsact2008/>; The Act also provides the necessary legislative support for the “Care Matters” programme

<sup>23</sup> The Munro Review was announced on 10<sup>th</sup> June, 2010 and is due to report in spring 2011; the website is at <http://www.education.gov.uk/munroreview/>. Though the Commission’s strategy shares some emphasis with this review, the Munro review was announced well after the Commission’s strategy was first made public (7<sup>th</sup> June, OACAS conference).

children will come into the care system in England in the next two years.<sup>24</sup> Research by the National Foundation for the Educational Research (NFER) has shown that the recent increase in child protection referrals could lead to an increase of nearly 35 per cent in the number of children starting to be looked after in 2011/12 compared to 2007/8.<sup>25</sup>

The LGA has previously argued that a reduction in bureaucracy is needed to allow social workers to spend more time with the children they are working to protect. On average, its members estimate that only 13 per cent of the time taken to complete an initial assessment is spent with the child or family but 87 per cent is spent on paperwork and process.

### Implications for Ontario

*There are 3 policy developments of interest to child welfare in Ontario -*

- 1) the legal framework for integrating services around delivery of 5 outcomes (SHEEP) outlined in the Children's Act 2004, including the designation of the statutory Children's Director and lead member, the duty to collaborate placed upon a wide range of public services (including health and police), and the Children's Trusts;*
- 2) the Care Matters provisions for children in care*
- 3) ideas for increasing direct service time arising from the Munro review of child protection, due to report in April 2011.*

### **Program and Service Configuration**

*Every Child Matters* envisaged that improved outcomes would require radical change in the whole system of children's services, including:

- the improvement and integration of universal services – in early years settings, schools and the health service;
- more specialised help to promote opportunity, prevent problems and act early and effectively if and when problems arise;
- the reconfiguration of services around the child and family in one place, for example, children's centres, extended schools and the bringing together of professionals in multi-disciplinary teams;

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<sup>24</sup> Local Government Assn, media release, *Review of Child Protection Bureaucracy Vital in the Face of Rising Demand*, retrieved on 2<sup>nd</sup> July, 2010 from <http://www.lga.gov.uk/lga/core/page.do?pageId=11772369>

<sup>25</sup> NFER (2010), *The Impact of baby Peter on the Applications for Care Orders*, retrieved on 2 July, 2010 from <http://www.lga.gov.uk/lga/aio/11775128>

- dedicated and enterprising leadership at all levels of the system;
- the development of a shared sense of responsibility across agencies for safeguarding children and protecting them from harm (Safeguarding Boards); and
- listening to children, young people and their families when assessing and planning service provision, as well as in face-to-face delivery.<sup>26</sup>

Considerable national effort has been invested in supporting local change to deliver the desired outcomes, from the development of interdisciplinary practice tools such as the Common Assessment Framework (CAF) and “lead professional”, formalizing inter-agency case conferences into Safeguarding Children Boards, to interagency alignment of strategy at a population level through joint Children’s Plans, and Children’s Trusts.

The CAF provides a mechanism for interagency working at the ‘case’ level’. It is a process for undertaking a holistic common assessment, designed to help practitioners gather information about the needs and strengths of a child at an early stage. The standard form enables help practitioners from different disciplines and agencies to record and, share with others the findings from the assessment. It is intended to provide swift and easy access to a wide range of specialist services.

The Children’s Trusts, led by top tier (Counties) or unitary authorities, are a partnership of local organizations with a statutory duty of co-operation; this requires local authority, police authorities, National Health Service, schools, and other partners to work together to improve the well-being of children, driven by and reflected in their Children and Young People’s Plan. Below is an illustration of Kent CC’s Children’s Trust<sup>27</sup>, and its strategy for aligning all agencies plans – from multi-agency assessment of needs, to planning outcomes, defining partnership priorities and resources, commissioning services, delivering through locally integrated services, through to monitoring performance and outcomes.

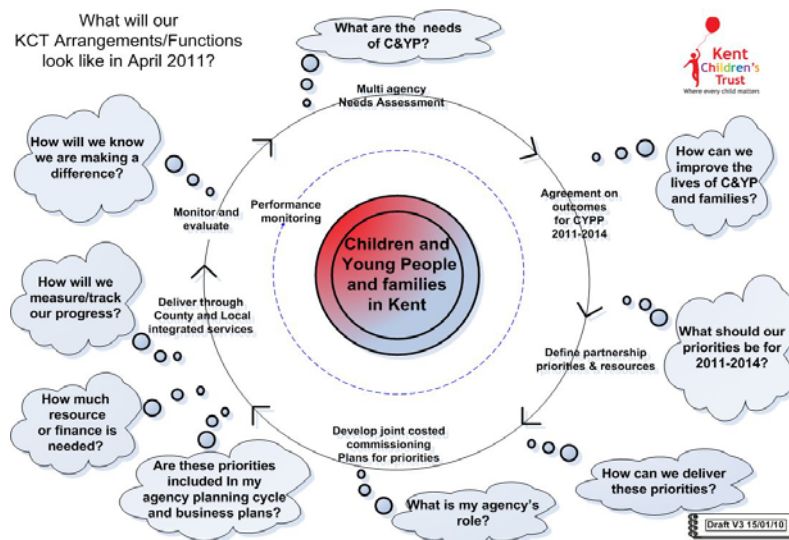
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<sup>26</sup> P. 5, Every Child Matters, 2005. HMSO, London

<sup>27</sup> Kent’s Children’s Trust, retrieved on 2 June, 2010 from [http://www.kenttrustweb.org.uk/Children/kct\\_change\\_for\\_children.cfm](http://www.kenttrustweb.org.uk/Children/kct_change_for_children.cfm)

Kent is a County Council in a prosperous area in the south of England with a population of over 1.4 m; according to the 2007 deprivation index it scores 104 out of 150 local authorities in England.

[http://www.kent.gov.uk/your\\_council/kent\\_facts\\_and\\_figures/deprivation.aspx](http://www.kent.gov.uk/your_council/kent_facts_and_figures/deprivation.aspx). Its prosperity and proximity to London, according to the County, has made it an attractive destination for London authorities to place its children in care.



Children's Trusts are the vehicles for the joint **commissioning of services** for children and young people. One of the key roles of the Children's Trust is to commission jointly and to co-ordinate commissioning among the partners to deliver a better range of services responsive to local needs. Trusts provide the structure and focus for partnerships working to deliver improved outcomes and enable collaboration considered important to success. It serves as the central focus for joint commissioning and alignment of resources.

There are different levels of commissioning:

- Regional – involving 2 or more children's Trusts, for services with low incidence and high cost, such as secure units, placements for looked-after children, residential support for children with disabilities, services for those with forensic mental health problems;
- Strategic – at Children Trust Board level, for universal services – such as schools, childcare services for three- and four-year-olds, and recreational and leisure services, targeted or specialist services that the Children's Trust has not delegated to operational level.
- Operational - focuses on a particular locality or group of children within a Children's Trust, for example those with special educational needs or at risk of offending.
- Individual - involves buying services to produce an individually tailored package of support.

### Implications for Ontario

*Research has shown that better outcomes are related to coordination between child welfare agencies and other service providers.<sup>28</sup> Experience with interagency tools in the UK can be*

<sup>28</sup> For example, see Bai, Y., Wells, R., & Hillemeiera, M. M. (2009). Coordination between child welfare agencies and mental health service providers, children's service use, and outcomes. *Child Abuse & Neglect*, 33(6), 372–381.

*drawn upon to strengthen such collaboration from the assessment of ‘cases’, to lead professionals within teams, to the assessment of population needs, planning and assessments.*

*Some local areas in Ontario have developed agencies that deliver a range of family and children’s services to local areas, and some of these agencies have developed common screening and intake functions. Other areas have developed ‘planning council’s’, which have brought together different agencies to develop plans for their localities. However, these local arrangements are different from those established in the UK in that they do not have the following:*

- *‘Joined-up’ structures at provincial level, such as the UK Department;*
- *Designated statutory officer, such as the Director of Children’s services and Lead member;*
- *Statutory ‘duty to collaborate’ between local agencies, and the range of agencies is more limited (generally excluding juvenile justice, health, and education)*
- *Funding to incentivize collaboration, and facilitate ‘pooling’ of resources.*

*A form of commissioning has been introduced in other service sectors in Ontario, but it is at an early stage of development and has not yet been introduced in children’s services.*

### ***Funding Approach***<sup>29</sup>

The main central government funding for ‘safeguarding’ children is allocated to unitary or top tier local authorities. The “duty to cooperate” places an expectation on other agencies to invest in improving children’s outcomes, and rewards such actions with financial and performance incentives provided through the Local Area Agreements.<sup>30</sup> The full continuum of children’s services is held to account through accountability mechanisms, which will be described in the next section.

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<sup>29</sup> Local government finance is notoriously complex, and we have not attempted to provide a comprehensive account of its many intricacies in this short paper. Our focus is on the way that grant is distributed between Councils for providing children’s services – this is through the Relative Needs Formula.

We are grateful to the Dept of Communities and Local Government for its reports on : *The Local Government Finance Settlement*, November 2009, retrieved on 2<sup>nd</sup> July, 2010, from <http://www.local.odpm.gov.uk/finance/0910/simpguid.pdf> ; *Methodological Guide to the Area Cost Adjustment 2008/9 to 2010/11* retrieved on 2<sup>nd</sup> July 2010 from <http://www.local.odpm.gov.uk/finance/0809/methaca.pdf>; and

*Methodological Guide to the Children’s Social Care Relative Needs Formula*, retrieved on 2<sup>nd</sup> July, 2010 from <http://www.local.odpm.gov.uk/finance/0809/methkid.pdf>

<sup>30</sup> Local Area Agreements (LAAs) set out the priorities for a local area agreed between central government and a local area (the local authority and Local Strategic Partnership) and other key partners at the local level.

LAAs simplify some central funding, help join up public services more effectively and allow greater flexibility for local solutions to local circumstances. From 2006, Local Area Agreements incorporated a reward element. Retrieved from website of communities and local government <http://www.communities.gov.uk/localgovernment/performanceframeworkpartnerships/localareaagreements/>

Central government grants constitute a significant proportion of total local authority spending in England; the most relevant for our purposes, is the “Formula Grant” which supports revenue spending on pay and other program costs, and is paid in three main forms:

1. Revenue Support Grant or RSG: the Government's main block grant to local authorities;
2. Redistributed income from the uniform business rate (UBR, also known as the National Non-Domestic Rate or NNDR); plus
3. Special Grants and Specific Grants: Government grants paid for a specific purpose.

The sum of these grants is known as Aggregate External Finance (AEF).

Formula Grant is distributed among the different councils using the “Relative Needs Formulae” (RNFs) “the Relative Resource Amount”<sup>31</sup>, the “central allocation” (an amount per head)<sup>32</sup> and the “floor damping scheme”<sup>33</sup>. Our interest is primarily with the Relative Needs Formula because CASS do not have property or other tax generating powers. However, there may be interest in the idea of a floor damping scheme, to avoid year to year decreases in grant.

Relative Needs Formula’s (RNF’s) are mathematical formulae which make use of information reflecting the demographic, physical and social characteristics of each area. Separate formulae cover the major services which local authorities provide in order to take account of the different factors influencing spending each service area. The Children’s Services block is composed of Youth and Community services, Local Education Authority Central Functions and Children’s Social Care (including foster and residential care).

RNFs are designed to reflect the relative needs of individual authorities in providing services. They are not intended to measure the actual amount needed by any authority to provide local services, but to simply recognize the various factors which affect local authorities’ costs locally. The formula for each specific service area is built on a basic amount per capita, plus additional top ups to reflect local circumstances. The top ups take account of a number of local factors which affect service costs, but the biggest factors are deprivation and area costs. Because the RNFs are only intended to reflect the relative differences in the cost of providing services in different areas, they are expressed as a proportion – or ratio – of the total relative needs.

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<sup>31</sup> The Relative Resource Amount is a negative figure intended to take account of the fact that areas that can raise more income locally require less support from Government to provide services. The negative Relative Resource Amount is balanced against the positive Relative Needs Amount calculated for each authority.

<sup>32</sup> The amount of money left in the overall grant pot after taking account of the Relative Needs and Relative Resources of local is shared out on a per head basis based on the appropriate minimums for each authority already calculated for the needs and resources blocks.

<sup>33</sup> The aim of setting “floor levels” is to give the fairest distribution of the money available, and to ensure that all authorities receive a formula grant increase.

### Implications for Ontario

*Although there are many differences between the financing of local authorities in the UK and child welfare services in Ontario – such as their tax raising powers, their scale and their democratic accountability - there are a few principles and technical approaches that may be relevant. For example, the wish to deliver services of an equivalent quality across a disparate series of localities; and the commitment to finding fair and equitable mechanisms for distributing available resources. Guided by these principles, the UK has extensive experience with a population-based approach to funding local services, with the depth of technical expertise and data sources necessary to develop econometric models.*

*The UK also demonstrates experience of allocating funding to authorities which are responsible for commissioning rather than directly providing services, and this facilitates a very different perspective on thinking about form and function.*

### **Accountability (Performance and Outcomes)**

All authorities are required to report jointly on the 5 outcomes, which are further divided into 24, and illustrated in the following table.





Be Healthy	Physically healthy Mentally and emotionally healthy Sexually healthy Healthy lifestyles Choose not to take illegal drugs <i>Parents, carers and families promote healthy choices</i>
Be Safe	Safe from maltreatment, neglect, violence and sexual exploitation Safe from accidental injury and death Safe from bullying and discrimination Safe from crime and anti-social behaviour in and out of school Have security, stability and are cared for <i>Parents, carers and families provide safe homes and stability</i>
Enjoy and Achieve	Ready for school Attend and enjoy school Achieve stretching national educational standards at primary school Achieve personal and social development and enjoy recreation Achieve stretching national educational standards at secondary school <i>Parents, carers and families support learning</i>
Make a Positive contribution	Engage in decision-making and support the community and environment Engage in law-abiding and positive behaviour in and out of school Develop positive relationships and choose not to bully and discriminate Develop self-confidence and successfully deal with significant life changes and challenges Develop enterprising behaviour <i>Parents, carers and families promote positive behaviour</i>

Achieve Economic Well-being	Engage in further education, employment or training on leaving school Ready for employment Live in decent homes and sustainable communities Access to transport and material goods Live in households free from low income <i>Parents, carers and families are supported to be economically active</i>
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### Performance Measurement

In addition to the every child matters outcomes, each children's policy area presents a set of performance indicators, which are reported to the public annually (or more frequently, if there is cause for concern). Some targets in priority areas are set as part of the government's Public Spending Agreements<sup>34</sup>; others as part of the ongoing series held by the Audit Commission.<sup>35</sup> The last set of PSAs agreed for the Department for Children, Schools and Families were in the 2007 Comprehensive Spending Reviews; these indicators continue to be the subject of regular reporting and inspection.<sup>36</sup> Local authorities' performance on these indicators is the subject of public reporting.

Below is an example of the report on the performance of Children's Services at Kent County Council.<sup>37</sup>

NI 070 Hospital admissions caused by injuries to children and young people per 10,000 population	127.1	 Improving	
NI 065 Percentage of children becoming the subject of a child protection plan for a second or subsequent time	15%	 Improving	



















<sup>34</sup> HM Treasury, Public Service Agreements, [http://webarchive.nationalarchives.gov.uk/20100407010852/http://www.hm-treasury.gov.uk/pbr\\_csr07\\_psaindex.htm](http://webarchive.nationalarchives.gov.uk/20100407010852/http://www.hm-treasury.gov.uk/pbr_csr07_psaindex.htm)

<sup>35</sup> Audit Commission, National Indicator set, retrieved at <http://www.audit-commission.gov.uk/localgov/audit/nis/pages/niguidancesearch.aspx>

<sup>36</sup> The DCSF set of indicators reflected in their Strategic Plan can be found at <http://webarchive.nationalarchives.gov.uk/20100407010852/http://www.dcsf.gov.uk/dsoindicators/downloads/DSO-Indicators-March2009.pdf>

<sup>37</sup> Kent County Council. Council Performance, retrieved from [http://www.kent.gov.uk/your\\_council/how\\_the\\_council\\_works/council\\_performance.aspx](http://www.kent.gov.uk/your_council/how_the_council_works/council_performance.aspx)



NI 064 Child Protection Plans lasting 2 years or more	10%	 Deteriorating	 In the worst 20%
NI 58 Emotional and behavioural health of looked after children	16	Not calculated	 In the worst 20%
NI 066 Looked after children cases which were reviewed within required timescales	93.2%	 Deteriorating	 Average
NI 068 Percentage of referrals to children's social care going on to initial assessment	47%	 Decrease	 In the lowest 20%
NI 059 Percentage of initial assessments for children's social care carried out within 7 working days of referral	72%	 Deteriorating	 Average
NI 060 Percentage of core assessments for children's social care that were carried out within 35 working days of their commencement	81%	 Deteriorating	 Average
NI 062 Stability of placements of looked after children: number of placements	9.8%	 Deteriorating	 Average
NI 63 Stability of placements of looked after children: length of placement	63.8%	 Deteriorating	 In the worst third
NI 061 Timeliness of placements of looked after children for adoption following an agency decision that the child should be placed for adoption	85.7%	 Improving	 In the best 25%
NI 067 Percentage of child protection cases which were reviewed within required timescales	99%	 Deteriorating	

## Inspections

Inspection arrangements apply to particular children's services, as well as across organizational boundaries in whole localities. Regardless of the scale of the inspection focus, the reviews undertaken by most inspections in the UK include two features:

- 1) How good is the Strategic Partnership, trust, council, services?  
A snapshot of the performance of the body under review.
- 2) What are its prospects for improvement?  
An assessment of the capacity of the unit to improve.

Inspections in the UK are reported publicly using a simple 'star rating' system of 0 to 3 stars; derived from a combined score of these features of 'service quality' and 'capacity to improve'. Accountability is tied to consequences, based on the idea of 'earned autonomy' and a belief that central government intervention should be in inverse proportion to risk. As a result, zero star rating results in closer scrutiny, advice and 'support', with senior managers often leaving their posts. Three star rating, results in 'inspection freedoms', opportunities to promote 'best practices' more widely, and some flexibilities in use of resources and powers.



Comprehensive Area Assessments looked at how well local public services were delivering results for people in the area.<sup>38</sup> It includes the combined views of six inspectorates on public services including health and social care for adults, care and education for children and young people, community safety and environmental services. Joint chief inspectors' review of arrangements to safeguard children are led by Ofsted on behalf of the eight inspectorates<sup>39</sup> involved in regulating and inspecting services for children and young people.

This review looks at arrangements for safeguarding children and young people in four key areas:

- the effectiveness of existing safeguarding systems and frameworks
- the wider safeguarding role of public services
- how well vulnerable groups of children and young people are safeguarded, including asylum-seeking children, children in secure settings, looked after children and children treated by health services
- how well the relevant agencies deal with child protection concerns.

Joint reports are produced every 3 years, the most recent one is 2008.<sup>40</sup>

Annual Children's services assessments were established in response to the report from Lord Laming,<sup>41</sup> commissioned by the SoS as a response to the public furor over the brutal killing of Baby Peter Connelly. In December 2009 Ofsted published the first annual children's services assessments, which looked at the outcomes for children and young people in every local authority Area, is based on the evidence from inspections. It provides an overview of each council's performance in relation to children's services for which they have strategic or operational responsibilities (either alone or in partnership with other agencies) and the difference they are making to children's lives.

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<sup>38</sup> The Comprehensive Area Assessments were abolished in the May 2010 Queen Speech by the recently formed Conservative-Liberal Coalition. Published reports of completed CAAs can be found on the Onsite website at <http://oneplace.direct.gov.uk/Pages/default.aspx>, retrieved on 14 June, 2010.

<sup>39</sup> Health Care Commission, Commission for Social Care Inspection, Chief Inspector of Constabulary, Crown Prosecutor Service Inspectorate, Chief Inspector of Court Administration, Chief Inspector of Prisons, Chief Inspector of Probation.

<sup>40</sup> *Safeguarding Children 2008, the Third joint chief inspectors report on arrangements for safeguarding children*; retrieved on 5 June, 2010 from <http://www.safeguardingchildren.org.uk/Safeguarding-Children/2008-report/Download-the-report>

<sup>41</sup> Lord Laming (March 2009), *The Protection of Children in England, A Progress Report*, HMSO, London. <http://publications.everychildmatters.gov.uk/eOrderingDownload/HC-330.pdf>; this was Laming's third report, the first produced in response to the death of another child, Victoria Climbié. Both deaths occurred in the London Borough of Haringey.

At a smallest end of the inspection focus, a range of services are inspected by Ofsted which are considered “Children’s Social Care.” The frequency is determined by statute, and in proportion to the judgments made at past inspections about the quality of care provided. For example, the law currently requires that children’s homes be inspected a minimum of twice a year, and that residential family centres, boarding schools, local authority adoption and fostering services be inspected once a year, and that independent fostering agencies and adoption support agencies be inspected once every three years.

### Implications for Ontario

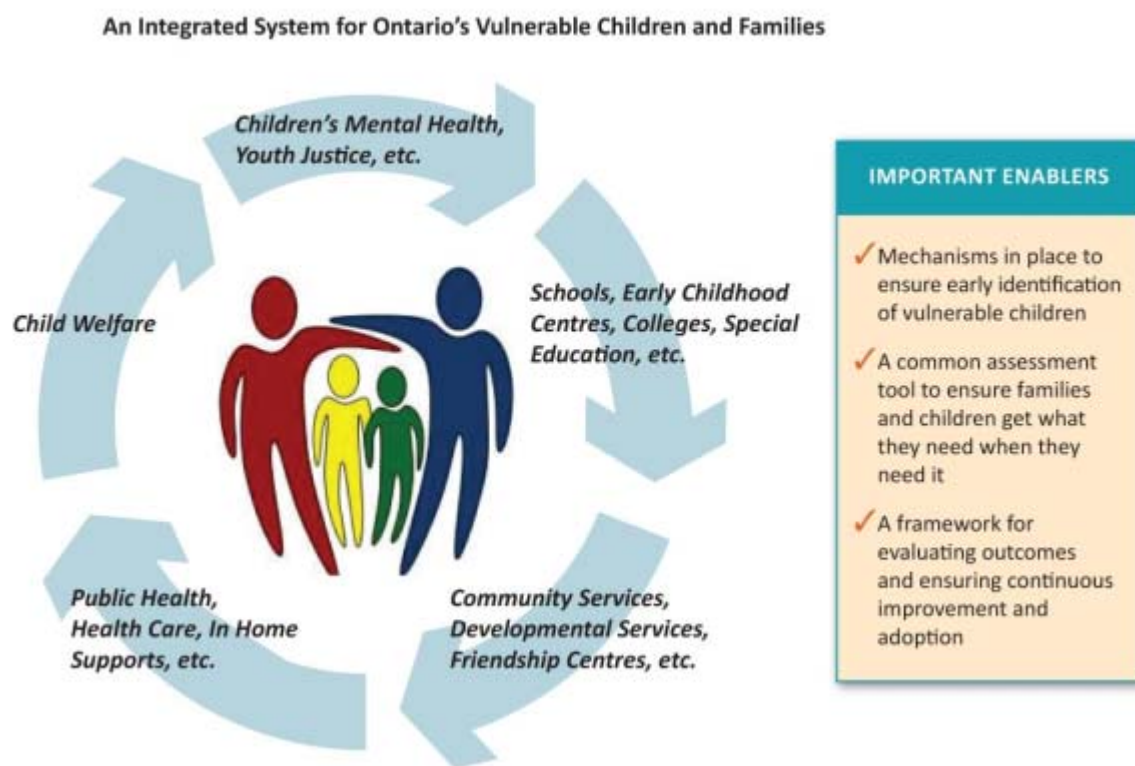
*The UK has made accountability for service performance a priority for many years, and as a result has extensive experience of developing performance measures, collecting and using data to improve services. This experience has enabled cross-agency accountability for outcomes to be established in law, which are monitored through independent inspections and assessments and enforced through a system of rewards and sanctions. More recent assessments have been conducted at a broader community scale, in order to encourage the inter-agency collaboration necessary to achieve higher order outcomes.*

### **Summary**

This section examines systemic features of ‘safeguarding’ children, and integrated children’s services in England. While there are major important differences between the UK and Ontario, several ideas have been highlighted that have shaped the Commission’s thinking about overall system design such as mechanisms for strengthening inter-organizational collaboration, funding approaches, the role of single and multi-agency commissioning, and accountability mechanisms. There have also been programs to reduce administrative burden, which are expected to gain even greater importance under the 2010 coalition government.

## SECTION THREE – AN INTEGRATED SYSTEM OF SERVICES

Turning now to Ontario child welfare, and having considered other jurisdictions in a systematic way, we have concluded that the systems serving vulnerable children and their families need to be very different from what exists today. We need to create an integrated system of services that has the capacity to identify vulnerable children and families early, assess what services they need most, and ensure that they get the services they need, when they need them and in the form that will be the most helpful.



The vision depicted here may appear to be simple common sense. It is much more difficult to deliver; but this paper takes a step by recognizing the elements that together make up the 'whole system,' and the choices to be made about how a system is governed, inspired, funded, and held to account.

### Summary of Current System Design

What we have learned about Ontario's child welfare system – from extensive briefings, meetings with CASs, Aboriginal groups, foster families, residential providers, and other

stakeholders - as well as this review of other jurisdictions, has informed our critique of the current system which is summarized in the Table below.

#### Summary of Current System Design

Child-focused culture		
All organizations, staff, and boards demonstrate significant intent to be child-focused but individual organizations and sectors function too much as silos. Children and families do not experience an integrated array of services responsive to their needs.		
Feature	Status	Comments
1. Governance model	Retain	Ontario's independent governance model differs from most of Canada. However, its roots in the community are a great social asset and should be retained. Better province-wide system design and effective accountability relationships will ensure more consistent services and outcomes.
2. Policy character	Retain	The balance established by the Transformation Agenda between child protection and family preservation is appropriate. However, the policy directions from Transformation have not been fully or consistently realized across the province – which is essential for sustainable child welfare.
3. Service configuration	Change	Opportunities exist to enhance consistency and quality of services through service reconfiguration including: shared services at the regional and provincial levels; agency amalgamation; and in some circumstances, amalgamation with other agencies serving children and families. Moreover, greater integration of services within and beyond the child welfare sector is required.
4. Funding approach	Change	New approach to funding is required that is more fully aligned with current system goals and accountabilities, more reflective of local community needs, and more adaptive to changing fiscal realities.
5. System of accountability	Change	Shift is required from current compliance focus to more outcomes and performance focus. Enhanced and transparent system-wide performance and outcomes information required at agency and system level.

From this understanding and our vision for a child-centered system of supportive services, we have developed a four tiered strategy for change. The following section elaborates aspects of this strategy as it affects the design of the system features of service configuration, funding, and accountability.

### Service Configuration

Our view is that service reconfiguration is necessary in order to achieve a more sustainable child welfare system. Section one, outlined some of the choices to be made in determining the shape, size, number and location of agencies, as well as their relationship to other children's

services. Section two identified the configuration of children's services in other jurisdiction. Here we address some of these issues more closely.

### ***A Practical Strategy, With our Sights on the Bigger Picture***

Our view is that children and families should be the primary organizing *focus* for configuring the system, rather than institutions or programs, per se. As a result, we need to anticipate the broader system configuration that this vision would require, at the same time as we propose immediate changes that are necessary at an institutional (CAS) and program (child welfare) level.

From an institutional focus, the current configuration of 53 CASs is not sustainable; and would present a daunting challenge to shape into an integrated system which is greater than the sum of its parts. Similar conclusions were made in the recent review of child welfare in Nova Scotia<sup>42</sup> which resulted in fewer structures.

But the institutional reconfiguration needs to be done with a keen appreciation of the necessary interdependent relationships between a range of community services and child welfare, including its priceless community connection; therefore agency reconfiguration, as well as other system features, will need to be designed to encourage collaboration between institutions in support of overall program delivery.

In section one, we also set out two alternative models for configuring the *relationships* between services:

1. **Hierarchical**: similar to the way that health care designs a patient pathway that moves from universal to more specialist medical care through primary, secondary, tertiary, through to quaternary care; and
2. **Horizontal**: similar to the idea of a community-based one stop shop, where a range of general and specialist services are accessed through a single door and common assessment.

Our preference is for a *community-based model*, rather than one where child welfare is placed at the tertiary or "last chance" end of a service hierarchy. There are a number of reasons for our preference. We have been impressed with the CASs who are working with this community

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<sup>42</sup> Nova Scotia, Community Services (undated), Improving Services for Children and families, the report of the Child Welfare Steering Committee, retrieved from:

[http://www.gov.ns.ca/coms/departement/documents/Child\\_Welfare\\_Committee\\_Report.pdf](http://www.gov.ns.ca/coms/departement/documents/Child_Welfare_Committee_Report.pdf), on 18<sup>th</sup> June, 2010.

Nova Scotia Community Services (2004), Review of Child Welfare Services, Governance and Business Models, Final Report, retrieved on 18<sup>th</sup> June 2010, from

[http://www.gov.ns.ca/coms/departement/documents/Review\\_of\\_ChildWelfareServices\\_Governance\\_and\\_Business\\_Model\\_Final\\_Report.pdf](http://www.gov.ns.ca/coms/departement/documents/Review_of_ChildWelfareServices_Governance_and_Business_Model_Final_Report.pdf),



model now, who are acting as one of a range of community services working together to develop a flexible service response to the particular needs of children and families. Child protection may be part of the same organization as a range of other children's services, as it is in multi-service agencies, or working in a formalized partnership with other independent agencies. Where this is working well, we have seen positive cultures and working arrangements that deliver positive results; encouraging access to supportive services, preventing the need for admission to protection services, building up the range of community resources available, and minimizing the number and length of time children remain in care. We are conscious of the threat to some stakeholders that CASs may 'crowd out' the development of other community-based services for children, but we believe this threat is better managed through a positive strategy of developing a range of "frontline" responses to families, rather than forcibly creating a higher wall around a smaller CAS institution.

Choices about the ultimate *focus* of reconfiguration, and the *relationship* between the parts of the system, will have consequences for the alignment of the system as a whole. Within this framework, decisions about the number of CASs and their configuration will be guided by judgments about a range of factors, such as:

- the appropriate size and scale to achieve greater economies and capacity;
- catchment populations to be served;
- proximity of services to local communities, travel times;
- economies of scale;
- Proximity of neighbouring CASs
- Relationship to other children's services

The first tier of our strategy will begin the process of reconfiguration, on a phased basis starting with CASs and, where there are opportunities which are consistent with our broader vision, related children's services.

## **Funding Approach**

The current funding approach in Ontario is neither fit to deliver the next phase of the Transformation agenda, nor to enable the system to adapt to the financial limits the Ontario government has indicated will be required in the coming years. We have concluded that:

- Too much of the accountability framework is being invested in this funding approach;
- It is too complicated to be broadly understood;
- It rewards volume increases rather than results;

- It doesn't recognize the cost of keeping children out of care, as well as maintaining them in care;
- It destabilizes the sector with highly variable annual funding increases and reductions; and
- It is neither affordable nor sustainable.

There are alternatives to be considered, including examples from other jurisdictions (in Canada Alberta and Manitoba, and the SSAs grants in the UK).

In devising a funding approach, these factors are important to consider:

- Greater resource equity from one community to another;
- Free up resources to respond to changing client needs;
- Minimize the perverse incentives associated with funding transactional activity; and
- Enable the system to adapt to fixed cash limits and away from being driven by volume increases.

These aims may be achieved with a funding approach that starts with the population to be served (rather than the agency's costs), weighted by factors associated with a 'need to spend on child welfare,' variations in local cost drivers (such as remoteness), and historic patterns of service usage. There appear to be serious limitations to funding agencies on an historical basis (as is done in some Canadian provinces), with annual adjustments for inflation and fiscal constraint. And to introduce a 'fee for service' approach on any extensive basis would require two pre-conditions:

1. the institutional foundation to be put in place (after a second phase of reconfiguration of the current array of children's services in Ontario), and
2. much better information about population needs, services, and unit costs.

To test out this thinking, modelling will be done to plot current CAS funding patterns against local populations; weighted by factors indicating incidence of children 'in need' and 'local costs of delivery.'

We have no illusions about discovering the 'perfect' funding solution. All approaches will present limitations: some will encourage the activities rewarded and discourage others; agencies may be expected to engage in "gaming" the numbers;<sup>43</sup> and invite players to find various ways to portray increased costs for more volume and/or acuity. And we acknowledge the body of research which shows that whatever the funding approach or accountability

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<sup>43</sup> See works by Christopher Hood for treatment of the 'gaming' by public servants and professionals, in response to targets and incentives, for example, C. Hood, "Gaming in Targetworld: The Targets Approach to Managing British Public Services", *Public Administration Review*, July/August 2006 66(4) 515-520; and C. Hood, and C. Hood & G Boyne, Editorial: "Incentives: New Research on an Old Problem", *Journal of Public Administration Research and Theory* 20 (Suppl 2): i77-i80, July 2010

mechanisms, internal institutional cultures and working arrangements of agencies will have a greater impact on service levels and costs than external factors related to social need or client demands. In any case, it will be necessary to take account of the practical limits set by the availability of demographic information, agency's historical trends, and other factors.

### **A Weighted Population-Based Approach to Funding?**

<b>Pros</b>	<b>Cons</b>
Allocates funds on the basis of population needs, rather than historical institutional and service patterns, thereby incentivizing response to changing circumstances.	Debate about the factors to be taken into account and the extent of their weighting – no 'uncontested' science.
Enables agencies to fulfill their CW service mandate, in response to needs and preferences of local population.	Requires other mechanisms to direct agency policy & assess agency performance.
Maintains population equity of allocations, whatever the size of the \$ funding for the sector.	No central control of case costs or volumes, just allocate the cash.
Allows local CASs to merge with other CASs or other children's services, with clear basis of their pop's 'funding' entitlement.	A big(gish) change but one that can be introduced incrementally.

Whatever the funding approach, implementation from the existing system to a new one will need to be done in a phased process. Changes in agency configuration, together with funding reallocations to address existing inequities and imbalances, will require a carefully staged approach. This phased approach must avoid the creation of annual variations that agencies would find unmanageable. A Transitional funding paper will be necessary to facilitate the shift from existing to future funding basis. There may need to be a different funding approach for Aboriginal child welfare services, given the dispersed urban Aboriginal families, and the conditions facing Aboriginal people living on reserve.

## Commissioning – A Medium Term Prospect

In section one, the concept of ‘commissioning’ was outlined briefly. This approach is in marked contrast to the way that child welfare is funded in other Canadian provinces, but there is experience from which to draw from the Local Health Information Networks,<sup>44</sup> the Community Care Access Centres<sup>45</sup> in Ontario, and from children’s services trusts in the UK. It is evident that the current child welfare system in Ontario is neither sufficiently sustainable nor appropriately configured to consider putting in place any commissioning arrangements for the short term. Many questions would need to be addressed, and changes made, before the system could move from allocating funds to service providers to pay for their costs, towards a commissioning model where funds would be allocated to authorities responsible for assessing population needs and securing services from a range of providers. Making such changes is not in the strategy we have set out for the coming months.

## Accountability and Performance Metrics

The third tier of our strategy is to improve accountability through information about agency performance and child outcomes. Our rationale is that an effective system of accountability will be even more important, in a system we envisage having independent (albeit fewer) CASs, consistent policy direction, a newly configured system, and a different funding approach. Despite the considerable time and resources currently invested in standards, documentation, reporting, and reviews, CASs tell us that they do not feel that there is either clarity about desired results, nor adequate information about performance and outcomes. Similarly, Ministry and government officials have frequently lamented the lack of clarity on overall system performance and outcomes. Moreover, there is very little information to demonstrate to the public that the sector is making a positive difference for vulnerable children. This paucity of outcomes and performance information handicaps efforts to build public trust and confidence in children’s aid societies – an asset that is vital to optimizing their role on behalf of all Ontarians.

We have concluded that a shift is required from:

- The current accountability for compliance with case-level operating standards and procedures, towards a richer information focus on child outcomes and agency as well as system performance;

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<sup>44</sup> For a description of the LHINs, see [http://www.health.gov.on.ca/transformation/lhin/lhin\\_history.html](http://www.health.gov.on.ca/transformation/lhin/lhin_history.html), retrieved on 18<sup>th</sup> June, 2010.

<sup>45</sup> For a description of the Community Care Access Centres, see [http://www.health.gov.on.ca/transformation/lhin/lhin\\_history.html](http://www.health.gov.on.ca/transformation/lhin/lhin_history.html) retrieved on 18th June, 2010

- Reliance on the funding formula, towards more attention on Value for Money;
- Concern with routine case-level activity, to development of system and organizational capacity;
- A multi-year time horizon for beginning the collection of performance and outcomes, and contingent on the full roll out of CPIN, towards more of a 'let's just do it' attitude that delivers comparative performance measures for all CASs from 2011/12.

### ***Assessing Performance and Capacity***

Having reviewed the various arrangements for assessing or accrediting child welfare agencies across several jurisdictions, we are drawn to the approach adopted for reviews of local services in the UK, including reviews of communities' delivery of the 5 outcomes outlined in the 'Every Child Matters.'

The scope and focus of inspection could range from individual services, to local and central institutions, to whole area strategic partnerships, so it is quite adaptable, but judgements about two simple questions are included in each case:

How good are their services for children?	What is their capacity to improve?
Based on snapshot in time	Based on capacity assessments
(site visit) + performance measures	(self-study + site visit)

There are several benefits to assessing both services and capacity to improve. Because child welfare is a 'complex adaptive system,' it makes sense to assess its capacity to adapt and improve; a dynamic rather than static snapshot reveals more about both the present and future performance. Service quality and results will be related to capacity in the system to lead and manage a strategy, financial and human resources, services, and partnerships with other ministries and child-related community services.

In this tier of our strategy, our first priority will be to propose arrangements for child welfare services to have system-wide performance information that can begin to answer the question "How good are our services for children?" To achieve this will involve a common set of measures being agreed, and ensuring that these measures are collected and reported in a

systematic way. It is important that this be done for the coming year. Many CAS board members and staff have shown us the monitoring reports and data they produce for their agency's use and urged us to make early progress on obtaining more information across the system. We agree that this is what should be done.

Then we will turn our attention to what information is necessary to answer the second question - What is the capacity across the system to improve? A method of introducing this approach and common criteria for assessing capacity at different levels will both need to be agreed upon.

For there to be meaningful accountability, there needs to be:

- Transparency about the overall performance of the system and its constituent parts. Public reporting contributes to such transparency;
- Comparison between similar units and organizations, enables exceptional performance or circumstances to be identified and further investigated to shed light on underlying dynamics;
- Consequences associated with reported results, in order for measurement to be taken seriously and contribute to improvement; and
- Knowledge management systems to systematically collect information about services and capacity, and bring together province-wide reports on themes and issues.

## **Conclusion – Towards a Sustainable Child Welfare System**

The Commission's first months have involved intensive learning about child welfare, in Ontario and elsewhere. Before long, we will publish a short paper on child welfare in the US which will provide more high-level insights into 'system' dynamics, particularly in a decentralized federal structure. In this working paper, we have reached some initial views about the design of the system needed to serve vulnerable children and families well, and identified promising practices that will be examined more closely in the coming months. These conclusions are reflected in our First Report: *Towards Sustainable Child Welfare System in Ontario*.