

The impact of service provider change on the protection of children¹

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The primary function of Ontario child protection agencies is to determine if children have been maltreated, or if they are at risk of maltreatment, and then to provide services to mitigate the risk in cases where child protection concerns exist. These child protection agencies across the province carry out the various components of their work in different ways. Some agencies use the *generic model* of service delivery in which one worker takes primary responsibility for a case from the investigation that follows the initial referral and throughout any ongoing services that are provided. Others use the *specialized model* in which two or more workers each assume responsibility for various components of the investigation and ongoing aspects of the services.

The practice

Since 2001, the Children's Aid Society of Simcoe County has been using both the generic and specialized models in different branches of their agency. Forty-six percent of the agency's workers practice within the generic model and 54% use the specialized model. A question for the agency has been: Which practice model offers better service to families?

The evaluation

The evaluation compared the generic and specialized models being followed by different branches of the Children's Aid Society of Simcoe County. Over a one year period, data were collected by surveying 141 primary caregivers in client families, the statistical database of the agency, and audits of compliance with standards required by

the provincial Ministry of Children and Youth Services. Key outcomes measured were: safety of the child, permanence of placement, relationship between the worker and the family, intrusiveness of the two models (ability to provide services to families in the least disruptive manner), compliance with provincial standards, and number of workers involved in each case.

Key results

Safety

Workers using the generic model had slightly fewer case re-openings (27%) when compared to workers using the specialized model (32%), suggesting that children may have been safer in the generic model.

Permanence

With the exception of children in the 6–12 age group, children were more likely to experience placement change in the generic model than in the specialized model.

Client-worker relationship

Sixty-eight percent of client families in both models indicated that they were highly satisfied with worker interactions.

Intrusiveness (ability to provide services to families in the least disruptive manner)

The specialized model had a higher percentage of children in care (23%) than the generic model (14%). This suggests that, for whatever reason, workers using the generic model were more likely to work with children in their homes than those in the specialized model.

Compliance with provincial standards

Overall, the specialized model met Ministry of Children and Youth Services protection standards slightly better than the generic model. Both models were similar in terms of meeting Ministry standards for children in care.

Number of workers per case

On average, there were 1.68 workers per on-going case in the generic model and 2.12 in the specialized model. Clients with one worker rated themselves higher in overall satisfaction (77.5%) than clients with more than one worker (57%).

Conclusion

Overall, the results indicate no clear evidence that one model of service delivery in child welfare serves families better than the other. Both models have strengths in certain areas and both seem able to provide quality services to children and their families. However, the finding that more families preferred to have one worker rather than two or more workers responsible for their case is a significant aspect of the study.

1 This report is based on information contained in: Centre of Excellence for Child Welfare. (2004). *Service model and client outcomes in child welfare*. Toronto, ON: University of Toronto, Faculty of Social Work.

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