PURPOSE

The purpose of this paper is to further develop the role of child welfare in the redesign of the children's services system in Ontario. This paper is for discussion at the provincial consultation session scheduled for November 6, 1997.

The paper will assume:

1. That the child welfare field is committed to the restructuring of child welfare in the context of the community as outlined in our submission to the Ministry of Community and Social Services on May 26, 1996

2. That the Making Services Work for People Policy is a community-based restructuring strategy (p. 5 MSWP)

3. That the stated vision of child welfare reflects our commitment to a community-based child welfare delivery system

4. That the purpose statement for child protection be amended to reflect our commitment to an integrated community-based child welfare delivery system (May 26, 1996 OACAS paper)

5. That this amendment might read:

"We share with the community the responsibility for protecting children and strengthening families."

"We will work in collaboration with the community to achieve this purpose."
INTRODUCTION

In Ontario, not so long ago, the mandate of child welfare services was fairly narrow in focus, that of the protection and apprehension of children.

The placement of children was a more common response to child maltreatment than it is today. The CFSA which was proclaimed in 1985, shifted the focus of child protection and included a specific mandate to focus on prevention. Ontario’s legislation does attempt to balance the rights of parents and the child. Nonetheless, it is constructed to make it virtually impossible to remove a child, unless the CAS has demonstrated that services have been offered and have failed, or that parents refuse service and the child must be protected, or that services would not provide the required protection. Many critics of the present legislation argue that there is no onus on the parents to demonstrate their capacity to parent, only an onus on the CAS to prove they cannot.

Although this legislation was designed to ensure families have access to needed services, the system is not funded to ensure the supports required are indeed available.

Moreover, the Ministry of Community and Social Services has not defined the child welfare role with any clarity and has funded the present child welfare system inconsistently across the province. This is sometimes, though not always, a function of the availability of other resources in the community. Ministry differences about the role issue are reflected in their local relationships with individual CASs.

In general, the system has developed, over the years, a wide range of resources for early intervention and intensive family support. Some agencies have a wide range of internal residential supports, others are entirely reliant on basic foster care services. This paper will concentrate primarily on the protection function of child welfare.

Despite a dramatic increase in reported maltreatment cases in the 80s due to the discovery of sexual abuse, the imposition of new standards and new professional reporting requirements, the child welfare system was able to cope, because of improved training and specialization in the investigative techniques, the development of
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protocols with key partners such as police, the development of family support resources and new funding. Although the family service caseload was increasing, the number of children in care was steadily going down.

Many agencies provided in care services with a focus on the family to ensure a return home wherever possible.

During this period, debates about the prevention versus protection role including the dual role of the protection worker were less strident. For the most part, child welfare agencies felt that they successfully carried this dual mandate and several agencies developed multi-functional programming which strengthened the service response to protection clients.

With the 90s came budget cuts, a climate of constraint, an erosion of many community-based services, chronic high unemployment and a steady increase in the number of marginal families with children. Many child welfare risk factors were on the rise such as psychiatric illness, substance abuse and domestic violence. This led to an increase in the child welfare caseload at a time when resources were shrinking. The system responded by cutting support services for families, repatriating children from expensive treatment resources, and narrowing the eligibility criteria for protective services and reducing the length of time services were provided.

These changes were largely driven by the need to restrain costs and to keep the system from becoming overwhelmed. Now in the late 90s, we are faced with exploding caseloads due to an intense scrutiny of the system through child death enquiries.

These pressures have led once again to the debate about prevention versus protection despite much evidence that the roles are not incompatible. This debate must be addressed because the pressure on public resources is not likely to cease altogether and the demand for more public accountability will grow. The child mortality issue has also fuelled another more specific debate about how to strengthen the assessment role so that we can better discriminate which clients need which kinds of interventions.
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In an effort to respond to these mounting pressures, the Ontario Association of Children's Aid Societies and its members began some time ago to articulate a vision of child welfare services for the future:

**A VISION of the future**

**For Children**
- children will be healthy in a safe, nurturing environment with a permanent family
- children will have their basic needs met including food, shelter, clothing, health care and education
- children will be free to be children, to play, have fun, take risks and have experiences
- children will have a strong sense of self and family to allow them to change and cope in times of rapid change
- children will develop to their full potential through continuing opportunities for accomplishment and successful outcomes within a context of interdependent relationships
- children will have a positive anticipation of the future
- children will have a place in their community and an investment in their community

**For Families**
- families are seen as the basic unit and foundation of communities and are respected and valued for their uniqueness, history and traditions, and are the ones to raise their children
- families will provide a value base for their children based on respect for self, others and the environment
- families will be contributing partners in a supporting, caring community and will be able to seek help without stigma
- families will have the spiritual, cultural and economic resources necessary to realize their full potential
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For Communities
- the community will realize that services to families and children are an investment in the future
- the community will be responsible and invested in the success of all of its families
- the community will have a shared identity with agreed upon goals for protecting the health and well-being of children and families
- the community will provide neighbourhood-based and culturally responsive resources to maximize their families’ potential

Concurrently, the Ministry of Community and Social Services embarked upon policy development to guide restructuring of community-based children’s services. While intended to remove access to service barriers for mandatory service clients, the MCSS policy paper entitled *Making Services Work for People* does not directly address the centrality of child safety and the role of child welfare and young offender services in achieving this outcome.

In our earlier restructuring paper (May 1996), OACAS defined a goal of CFSA restructuring which focussed on integration of CFSA services and links with mainstream services.

This paper proposes that community-based child welfare services mean the broader community bears the responsibility for protecting children. At the heart of this improved system is a community safety partnership for child protection.

A community partnership model that extends ‘who’s responsible’ for child safety as well as ensuring the provision of more rapid, intensive and effective responses when a child is in danger of being abused or neglected.
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To reflect this emphasis, a restated purpose of child protection services is necessary:

We strive to support a healthy, nurturing, permanent family for every child when children are at risk or are abused, neglected, or abandoned. Child welfare services have an overriding statutory responsibility to ensure their safety and when necessary to secure temporary or permanent alternative care. We share with the community the responsibility for protecting children and strengthening families. We will work in collaboration with the community to achieve this purpose.

An outline of a community partnership approach is as follows:

To promote children's safety, the child protection system should broaden the responsibility for child protection beyond the child welfare agency. We must enlist parents, neighbours, schools, health providers, child care facilities, law enforcement, substance abuse treatment providers, businesses and many other community stakeholders as partners and must make available an array of in-home and out-of-home interventions.

Such a system is able to safeguard children in many ways to prevent maltreatment before it occurs, to identify and respond to diverse cases of child abuse and neglect, to respond to the risk of maltreatment flexibly and comprehensively and to effectively prosecute child maltreatment.

We are likely to be far better prepared to use increasingly scarce public resources if we seize the opportunity to design the type of system that meets the child safety needs, rather than react to crisis events and have a system designed by crisis.

Fundamental to establishing a broader public responsibility for child protection must be a formal community safety partnership of multiple partners mobilized within a specific geographic area, acting together and sharing responsibilities in new ways to assure that the four core functions of child protection:

- case identification and system entry
- investigation and assessment
- service provision
- substitute care and adoption

are well performed
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To achieve this goal, the role of child welfare must shift from viewing itself as the provider of all child protective services and, instead, begin to catalyse, organize and in a variety of ways, provide leadership to the development and sustenance of community partnerships for child protection and neighbourhood-based systems of service delivery that achieve the result of child safety.

The core functions of child protection that are carried out in the community and service delivery may be shared by other partners with the child welfare agency developing and maintaining standards for community partners that ensure child safety.

The child welfare agency is the safety consultant that contracts with neighbourhood networks of supportive services and provides initial assessments, protective supervision, intensive services, substitute care and/or adoption services in cases where families cannot or will not assure a child's safety.

The centrality of the safety consultant role for child welfare ensures that child welfare then has the capacity operationally and concurrent with existing legislation, to ensure the outcome of child safety.

This role must be supported by MCSS Policy that places child safety and child welfare at the centre of the community restructuring process.
The following Figure I summarizes the most important differences between the vision of child welfare and the current approach.

**Figure I**  
**Characteristics of the Current and Proposed Approaches to Child Protection**

<table>
<thead>
<tr>
<th>Child Protection 1. Case Entry/Case Funding</th>
<th>Current Approach</th>
<th>Community Partnership Approach</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Little or no preventive assistance is offered, so reporting is often the only option</td>
<td>Mandated reports to CW agency are more appropriate because community alternatives exist to which many families can be referred</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Targeted interventions for families likely to become CW referrals are available before families are referred or reported</td>
</tr>
<tr>
<td>2. Assessment/Investigation</td>
<td>Incident driven investigation</td>
<td>CW agencies can respond in several ways, based on needs and the severity of reported abuse/neglect</td>
</tr>
<tr>
<td></td>
<td>Investigations may not include comprehensive family assessment</td>
<td>All cases receive comprehensive family assessment, after initial screening</td>
</tr>
<tr>
<td></td>
<td>Law enforcement inconsistently involved with little likelihood of eventual prosecution of even serious offenders</td>
<td>Law enforcement systematically involved in all investigations of serious physical and sexual abuse; more frequent prosecution for serious offenders</td>
</tr>
</tbody>
</table>
### 3. Service Provision
- Few services available, even when the investigation is complete; capacity to customize services to a family’s individualized needs is limited
- Links to substance abuse, domestic violence and other key services are inconsistently made
- Natural helping networks (friends, neighbours, etc.) have little role with CW, and are often hostile to it
- Services are usually short term regardless of need
- The community partnership ensures families have access to a customized array of services, supports and opportunities, health care providers, child care providers, child care resources, schools and other community institutions are sentinels to detect risk
- Substance abuse, domestic violence, and other key services are expanded, better coordinated and accessible
- The community partnership involves community supports and natural helping networks extensively, including family, extended family, neighbours and other helpers
- The community partnership promotes and implements neighbourhood based service delivery
- Service continues as long as necessary

### 4. Substitute Parental Care
- Placements are too often made without the option first for in-home services
- Children often linger in substitute care while family’s appropriateness for providing on-going parenting is determined
- Triggered only after intensive in-home services have been tried where appropriate
- Emphasis is on timely, fair and safety oriented decisions about reunification or movement toward adoption or other permanent placement; criteria is child safety
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<table>
<thead>
<tr>
<th>Responsibility &amp; Accountability</th>
<th>The public CW agency is the only agency responsible and accountable for child protection</th>
<th>The CW agency retains legal responsibility for protective interventions for specific children and is central to developing a community-wide plan for child safety. The community partnership is responsible for engaging parents and many community agencies in child protection, and performance of many service delivery responsibilities.</th>
<th>Each community safety partnership is organized around province-wide child welfare outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthy Development of Children</td>
<td>Few communities have explicit community goals and strategies to promote children's and families' well being</td>
<td>Communities adopt clear goals to improve outcomes for children and families</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Many communities have too few services, services are inequitably distributed across communities</td>
<td>Communities have a comprehensive array of community supports, particularly early family supports</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Program funding interferes with service provision</td>
<td>Financing is more flexibly available to meet individual needs, and is linked to achieving outcomes</td>
<td></td>
</tr>
</tbody>
</table>

The reward for communities that persevere will be the capacity to move promptly and aggressively when a child's safety is threatened and in the long run, reduce the likelihood that children will be maltreated at all.

Furthermore, this course of action does not need to be completed all at once; rather, it is a staged process that will permit individual communities to engage over time recognizing that each community will have different starting points.
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This approach is generally consistent with both the goals of Making Services Work for People and the Reinvestment Strategy for Children and Youth. It differs from these policy statements in that the explicit goal of this approach is child safety rather than a systems design characterized by functions and features that allude to the goal of child safety and the role of child welfare.

Achieving a community child safety partnership requires the following:

1. Creating consensus on the direction for change

2. Ministry policy support

3. Enrolling new partners and forming contractual relationships

4. Creating differential response to the varied needs of families for child protection

5. Developing comprehensive neighbourhood based supports and services that:
   - provide services to current caseloads
   - intervene earlier with targeted families
   - make initial contact with reported child welfare cases and provide broad based family support

6. Transforming child welfare agency services

7. Shifting intake and protection services for lower risk cases to a community-based system

CREATING A CONSENSUS ON DIRECTION FOR CHANGE

The challenge in creating consensus for change is to reconcile the motivations of the many publics who may have differing views regarding protective services and the need for change. To reconcile these motivations, we need to articulate a coherent, consistent direction. This is best accomplished through public debate, at the provincial
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level, and at the community level about "how the goal of child safety can best be met".

This debate will take place in several forums over the next few months:

- the Expert Panel on Legislation
- the Accountability Framework Project
- the Child Welfare Funding Framework Project
- the Community Restructuring Process (Making Services Work for People)

ENROLLING NEW PARTNERS

We should invite discussion with MCSS and other provincial stakeholders on this goal as well as conduct debate at the local level with community stakeholders, consumer parents and youth in care.

The partnership participants will commit their energies and resources to "child safety" and assume new clearly defined roles as characterized by contract and protocol that ensure access in the community system for child protection.

The purpose of a child safety community partnership model grounded on a neighbourhood-based approach is to deliver a wide array of services focused upon the most vulnerable and to guarantee access of the most vulnerable to the most needed services without the child welfare agency having to develop and maintain the full array of services.

At a minimum, the community partnership should engage the following participants:

- police
- public health
- probation/after care services
- children's mental health services
- domestic violence programs
- substance abuse programs
- neighbourhood level partnerships (which may vary)

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The following Figure II outlines the model for the child safety system.

Figure II
Characteristics of the Current and Proposed Approaches to Child Protection

**PROVINCIAL LEVEL**
- Provincial Ministries
- Health
- Education
- Employment
- Law Enforcement/Courts

**LOCAL LEVEL**
- Members:
  - Community Agencies
  - Faith Communities
  - Health Providers
  - Child Care Providers
  - Schools
  - Police
  - Courts
  - Civic Leaders
  - Substance Abuse Providers
  - Employment and Training Agencies

**NEIGHBOURHOOD LEVEL**
- Members:
  - Community Agencies
  - Faith Communities
  - Parents
  - Health Care Providers
  - Child Care Providers
  - Schools
  - Police
  - Courts
  - Civic Leaders
  - Substance Abuse Providers
  - Employment and Training Agencies

**RESPONSIBILITIES**
- Province wide legislation/standards
- Provide adequate funding to local systems, province wide
- Provide technical assistance
- Oversee protective interventions, province wide
- Hold local systems accountable for outcomes

**RESPONSIBILITIES**
- Establish community goals
- Administer differential response system and assessment (Single Point Access)
- Develop neighbourhood-based delivery system
- Assure adequate funding
- Engage community and disseminate information (Single Information Point)
- Link to broader government and service entities (Protocols, contracts)
- Protective, intensive services

**RESPONSIBILITIES**
- Provide prevention, early intervention and intensive services
CREATING DIFFERENTIAL RESPONSE TO THE VARIED NEEDS OF FAMILIES FOR CHILD PROTECTION

This partnership base then permits child welfare agencies to develop differential responses to the children's needs for safety, degree of risk present and the family's needs for support or services.

Where abuse and neglect cases require investigation, risk cases are assigned to an investigative response with a comprehensive assessment. However, where the problem falls below the intervention line for child protective services (Eligibility Spectrum) they may be assigned to a second service track that emphasizes family strengths and needs.

In short, it is not a "one size fits all response".

Comprehensive assessments will become the norm as the system's orientation shifts from just determining whether abuse occurred to ensuring a child's safety through services. The comprehensive assessment approach also increases awareness of factors threatening a child's safety. The partnerships allow for the community, under the norm of child safety, to respond more thoroughly on issues of safety, hence the possibility of real customized "wraparound" services to those who need it most.

Essentially, this approach mirrors a single intake point which screens on the priority of child safety, which track will be pursued - investigation, monitoring and intensive services or voluntary community-based services based upon a comprehensive assessment. Concurrent with a differential response must be a strengthening of neighbourhood based supports and services. Examples of these in Ontario include: Better Beginnings CAPC pilot, Parent Resource Centres, and School Social Worker Programs. The long term aim is to have the neighbourhood-based delivery system be a viable alternative to direct provision of Child Welfare Agency services for many families. The most effective interventive post protection service is an accessible array of social supports that mitigate the cumulative effects of multiple stress factors and the likelihood of repeated contacts with child protective services.
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The MCSS Reinvestment Strategy for Children/Youth provides the vehicle for linking these approaches to the neglected/at risk child welfare population.

DEVELOPING COMPREHENSIVE NEIGHBOURHOOD-BASED SUPPORTS AND SERVICES

The concept of community has many faces. Community could be determined as a geographical area such as a neighbourhood or by groups of people with similar cultural or linguistic affiliations. For purposes of this discussion, we are focussing on the geographical use of the term and in particular on neighbourhoods but emphasize that in a partnership model, broader communities of interest must be engaged and can offer supports to families.

Although neighbourhoods offer the richest potential for creating community support, geographical boundaries should not be rigid. Planning boundaries should be co-terminous with other major system boundaries.

A neighbourhood based services system plays several important roles for child welfare.

a) Neighbourhood-based services assist child welfare agencies in the provision of services to current caseloads especially those regarded as lower risk. Child welfare partnerships at the neighbourhood level help build trust, respect and mutual understanding between these parts of the service system. This has the effect of creating "child safe neighbourhoods" and community "ownership" of its child welfare services.

b) Neighbourhood based services create an effective early warning, early response system that identifies and responds to families at risk of abuse and neglect before maltreatment occurs.

c) Neighbourhood based services provide the continuity of response from intake through to service provision. Communities having visible, accessible staff for more than investigation are often more communicative and trusting towards the child welfare coercive role when it is required.
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d) Neighbourhoods that begin to experience personal successes create empowered organizations that effectively tackle social problems and access resources not accessible to individual clients.

Partnerships that are rooted in neighbourhoods have the potential to make substantial progress toward ensuring that the four core functions of child welfare - case reporting and system entry, assessment, service provision, and substitute care - are well performed. This potential can be most effectively employed when it is organized for the goal of child safety and as a direct reflection of that goal.

You will find attached in Appendix I, an illustration of a neighbourhood-based service system from the state of Iowa.

TRANSFORMING CHILD WELFARE AGENCY SERVICES

If we were to proceed with this community safety partnership/neighbourhood-based service delivery system, we would find our practice being transformed from a traditional office-based investigation and protection service to one that has a community development approach, that puts more focus on comprehensive assessment, engagement and inclusive case planning and service delivery than is now evident.

Workers would engage communities and families in safety planning. They might be stationed in schools or neighbourhood centres as parts of teams with other professionals and consumers.

It would also reinforce the role as "safety consultant" in the communities that CASs serve. This approach would require that child welfare administration exercise leadership in the building of partnerships at the local and neighbourhood levels. The model also enables the child protection agency to focus its services on specific cases that require intensive intervention and/or court involvement.
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A community safety partnership/neighbourhood-based service delivery model offers child welfare the opportunity to exercise the community-based vision of protection services we have articulated through our representations to MCSS. It affords child welfare agencies the possibilities to maximize existing resources as well as those within the children’s services system and with the other human services sectors. The model offers the potential for greater integration if the current restructuring processes articulate explicitly the goal of child safety. It ensures the central role of child welfare in pursuing the partnerships required that prioritize and order the service delivery system to achieve the desired outcome.

SHIFTING INTAKE OF LOWER RISK CASES TO A COMMUNITY-BASED SYSTEM

Provided that there is in place a Single Point of Intake that is focused upon assessing child safety, families where lower levels of risk are presenting, and who are prepared to receive services, may be directed into community-based programs that have guaranteed access provisions and monitoring capabilities that may have the effect of diverting these families from the formal child welfare caseload.

This will further enhance the capability of the child welfare agency to focus more intensive services on moderate to high risk cases.

It also holds the potential structurally to operationalize the community responsibility for child safety, if

all cases requiring services are screened in by a central community intake process that has guaranteed access to a targeted array of services

as envisaged by the Reinvestment Strategy Policy.

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Pursuing a goal of child safety with child protection central to the community intake risk assessment point will effectively establish that child protection is a collective responsibility of a network of community resource partners.

The child welfare agency (authority) retains the formal legal responsibility for the protection of specific children when the level of risk requires the monitoring and intensive services of the child protection agency.

The community partnership should support an emphasis on investment in the early years, but also preventive approaches targeted to each stage of child development. Family support must be available through formal and informal networks at the earliest possible stage for children. ‘Healthy Babies Ontario’ is an example of a formal program which will begin with paediatric screening at birth and in home visitation.

There has been considerable research into family support programs for at risk cases as well as primary prevention efforts. There is a surprisingly high level of agreement about the effective features of successful programs. Dr. Gary Cameron refers to the following lessons in sustaining families and protecting children through situations of high stress:

- traditional supports such as counselling and skill-building can prevent abuse/neglect and prevent unnecessary placements provided there is sufficient intensity and frequency of contact with clients
- the effect of interventions is enhanced if multiple supports are provided and professional interventions are accompanied by other ways of helping
- comprehensive program supports are the most beneficial
- informal supports are a powerful tool in addressing social integration needs
- informal support networks can sustain clients after formal program involvement
- rapid response and crisis support are essential when needed
- programs should focus on strengths and competence as well as dysfunction
- mutual aid and support can be powerful tools during and after the formal program support stage
- long term involvement often produces superior outcomes
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- accessibility, availability of program supports means outreach to high risk clients including transporting when necessary to service locations

**Family preservation services** are distinguished from family support services by their highly intense nature. Workers carry a very small number of cases, work intensely for a relatively short time with a family in their home and provide both counselling services as well as any concrete crisis service necessary to stabilize the family and prevent placement. The success of these programs depends on the appropriate selection of clients (many cannot or will not respond to supports) and appropriate follow up services.

The child protection agency requires program supports in order to fulfill the mandate of the legislation:

- a range of flexible home-based family support programs such as parent mutual aide and family preservation programs
- investigation/case management/assessment services
- family foster care
- therapeutic foster care
- resource support
- group homes
- emergency/assessment resources
- residential treatment
- other specialized resources
- legal services
- community development
- adoption services
- voluntary services
- the child protection agency also requires a capacity to sustain a continuum of relationships with families which range from voluntary to involuntary

A direct capacity to provide intensive counselling/crisis programming for high risk clients is necessary for child welfare agencies. But a wider range of family/community supports and specialized services is also essential and can be negotiated through the contractual arrangements of each community child safety partnership.
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If the child welfare agency is multi-functional in nature, the integration of some of these broader supports will be greater still.

BROADENING COMMUNITY GOVERNANCE AND ACCOUNTABILITY FOR PROTECTING CHILDREN

Currently child welfare is seen as having primary responsibility for assessment and investigation and for providing services once a report is investigated. As community partnerships develop, changes related to the responsibilities for service provision may occur.

As communities reorder the focus of single intake points on a child safety criteria, and following upon a screening and risk assessment, service assessments and service delivery can be supported by other agencies according to standards developed on child safety criteria.

The accountability for service provision in this shared framework needs to be addressed through common outcome measures and a common information system that embraces the partnership contracts, either with the local child welfare agency or with MCSS directly. The comprehensive child welfare interactive database must be designed with this community partnership model in mind.

Further, what must also characterize this model is the clear accountability of child welfare agencies and clear expectations for service delivery by partnership agencies.
SUMMARY AND CONCLUSIONS

In this model, the stated vision of child welfare is shared broadly between the child welfare agency, the community and neighbourhood. All partners work together to keep children safe and to strengthen families.

1. It provides a vehicle through which child welfare, public and private agencies, neighbourhood service providers, parents and natural networks work together to prevent families from requiring intrusive safety net services and to address maltreatment immediately and effectively when it occurs.

2. Under the leadership and direction of child welfare, networks of formal and informal services and supports are organized to assure each child's safety. Within the partnership structure, the local child welfare agency provides leadership in a variety of ways. It oversees the initial response to maltreatment reports, provides protective and intensive services for highest risk cases, and provides or supervises substitute care and adoption services. It is guaranteed through contractual arrangements access to services for lower risk cases and prevention and early intervention services but may not necessarily deliver them.

3. The system of child safety is nested in the broader commitment of provincial and community levels to support families as they raise their children to be healthy, safe and successful at school.

4. The Ministry would set provincial outcomes for child welfare services, community partnerships, clearly articulating the overarching goal of child safety, provide incentives and technical assistance for their development, assure adequate funding for partnerships and maintain a system of accountability to assure that the partnerships are accomplishing their goals.
BENEFITS:

The benefits to this partnership strategy among others are:

- The ordering of children's services towards a goal of child safety meets an explicit and essential public value.
- It enhances the capacity of child welfare to resource the range of services necessary to protect children and strengthen families.
- It converges with the MCSS policy strategy for a community-based integrated service system that supports investment strategies and tertiary services.
- It provides a framework (child safety) to reframe children's services as a system designed to achieve a common goal, not one designed to respond to diagnosis.
- It offers the opportunity to implement an integrated system approach to outcome measures and ensures both service delivery accountability and systems governance accountability.
- It also builds on Ontario's tradition of community-based services and enhances service responsiveness to local needs by:
  a) establishing each community's goals for child safety within parameters set by the province
  b) designing local neighbourhood systems of service delivery
  c) working with potential partners to ensure that the child safety service delivery system has adequate resources
  d) engaging the broader community with one voice in the mission of child safety
  e) tracking the performance of the community's delivery system and informing the public of threats to child safety

- It has the potential, once demonstrated capacity and capability is in place, to redirect even more cases from formal child protective services
OUTCOMES

The desired outcomes for transformation of child welfare services that were stated in the 1996 OACAS restructuring paper remain:

- decreased incidence of abuse and neglect
- increased consumer satisfaction
- increased community satisfaction
- more cost effective service
- more families able to care for their own children
- effective use of both formal and informal resources
- significant investment in support and prevention programs
- dedicated resources for evaluation, research, innovation
APPENDIX I - A Neighbourhood System for Child Protection

Cedar Rapids' (IA) approach to child protection at the neighbourhood level unites a city-wide network of family resource centres with a new approach to teaming Child Protection Services (CPS) agency staff, other professionals, and community members so that they can provide more comprehensive and customized services. The result combines the efforts of many agencies into a unified delivery system at the neighbourhood level.

The more intensive and specialized services are provided through Cedar Rapids' use of the PATCH model of service delivery. Developed initially in Great Britain (hence the term "patch", which is a British term for neighbourhood), the PATCH approach brings child protection workers and representatives from other local organizations (from social service organizations to housing inspection to community police) together in a team located in a neighbourhood centre. Together, team members are responsible for serving families in that neighbourhood and for working out, among them, the most effective use of their combined skills. While each worker maintains his/her core professional role, there is also flexibility in team members' ability to stand in for one another, to switch roles when that makes sense, and to work with families together. Workers report that they begin thinking of the team as the important resource for the family and the neighbourhood, rather than its individual members.

The PATCH approach brings specialized services to neighbourhood residents. Cedar Rapids' public and private agencies also have worked together to create family supports that they knew were necessary in order for many families to succeed. They established a Family Resource Development Association (FRDA) whose goal is to implement family resource centres in all parts of Cedar Rapids. By combining their resources, and especially using dollars "saved" through the local Decategorization Board's success in reducing expensive out-of-home placements, FRDA's plan calls for strategically located family resource centres in all Cedar Rapids neighbourhoods as well as throughout the county (Linn County). Five have been started to date (four in Cedar Rapids and one in a rural area).

These two approaches come together. PATCH teams (including CPS workers) are located at the family resource centres and the family support and more intensive services are seen as one system blending the public sector agencies and private sector resources.
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These approaches reflect the long term potential of a fully developed community-based model which has proceeded through several stages over time.


Thank you to Roy Walsh, Executive Director of the Children’s Aid Society of Brant for his assistance in the preparation of this paper.

Please note that a future draft will focus on ‘in care services’.