

**A CRITICAL ANALYSIS OF ONTARIO'S CROWN WARD REVIEW**

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## **ABSTRACT**

Today, performance measurements have become a part of the dominant discourse across public, private, and voluntary sectors. Ontario's child welfare system is one sector that has been influenced and impacted, with sometimes unintended consequences, by this institutionalized process of performance measurements. One of the measurements is Ontario's Crown Ward Review (Audit) conducted by the Ministry of Children and Youth Services. Annually, ministry officials who make up the Crown Ward Review Unit (CWRU) audit fifty-three child welfare agencies in Ontario, which take care of approximately 5400 Crown Wards (Ministry of Children and Youth Services, 2011). According to the Ministry of Children and Youth Services (2011), the goal of the Crown Ward Review is "to determine that an adequate plan of care [has been] developed for each Crown Ward and is intended to stimulate improvement in the overall service delivery to children" (Ministry of Children and Youth Services, 2011). It appears to not only be about the welfare for Crown Wards, but also about organizational goals. In other words, measuring accountability, effectiveness, and efficiency, as well as to provide transparency of its services appears to be a priority. This research project examines how the performance measurements of the Crown Ward Review have impacted case management for Crown Ward workers and Crown Wards in care.

A critical analysis of performance measurements reveals that, for the most part, they have created numerous unintended consequences for Crown Wards, workers, supervisors, managers, Children's Aid Societies, and the child welfare system as a whole.

Overall, the study supports that a more comprehensive, clear, and coherent review process needs to be established and implemented across Ontario's child welfare system.

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## **CHAPTER ONE: INTRODUCTION**

By analyzing the evaluation methods of the last thirty years of Ontario's child welfare system, it is evident that the use of performance measurements has increased. They have become a part of the dominant discourse and practice for workers, supervisors, and senior managers. Specifically within Ontario's child welfare system, one of the performance measurements, as it relates to children in care, is the Crown Ward Review (Audit). It is an annual audit completed by the Ministry of Children and Youth Services, serving its goal to "determine that an adequate plan of care [has been] developed for each Crown Ward, and is intended to stimulate improvement in the overall service delivery to children" (Ministry of Children and Youth Services, 2011). From the outside, the performance measurements involved in the Crown Ward Review appear to be a positive tool for workers and agencies to measure their accountability, effectiveness, and efficiency, as well as provide transparency of their services. However, by critically analyzing, it becomes evident that they are not neutral or technical indicators of performance. Rather, they are a reflection of value judgements and encompass the purpose, power, and interests of those creating the measurements.

For the past three years, I was employed as a Children's Service Worker in the Crown Ward Unit of a child welfare agency in south-western Ontario. As I navigated the child welfare system, I realized that it was fragmented. I felt my work comprised of an unmanageable caseload and procedural timelines. In order to meet the performance

measurements set in place by the Ministry of Children and Youth Services, my day consisted of spending more time behind the computer than developing relationships with the children on my caseload. As Monro (2004) describes, I developed a general “antipathy and hostility” towards the process of performance measurements (p. 26). I became keenly aware of the “underlying sources of social control, power relations, and inequality” (Neuman, 2011, p. 109). At times, I felt that I had been rendered useless and ultimately defeated by the process of performance measurements in the Crown Ward Unit, especially when several of my Crown Wards would express their frustration that they did not see me nearly enough. They were extremely upset when they could not reach me because I was completing paperwork: their paperwork. On several occasions, I tried explaining to them that I had an enormous amount of paperwork to complete, such as case notes and plans of care. In my opinion, they were short-changed and this raised ethical questions for me. Did I even want them to know that at specific intervals, I wrote about the private conversations we had together and that they had with others, such as their foster parents, teachers, and other community members? Did I want them to know that a person from the Ministry of Children and Youth Services, once a year, comes into our office and reads about their life: their life that I have interpreted and placed on paper? I knew my Crown Wards could not begin to understand, and I was fearful of the possible consequences of their knowing. Would they even continue to communicate with me, let alone confide in me? Did they really believe that I had their best interest in mind and that this paperwork was part of it? As time went on, I began to question the use,

effectiveness, and efficiency that these performance measurements had on developing better outcomes for children in care. Furthermore, I questioned my purpose and role as a social worker, and the possibility of improving the lives of the children and families whom I serviced.

Consequently, this study's goal is to find out how these performance measurements impact a Crown Ward worker's ability to effectively case manage, as well as how they ultimately impact the lives of Crown Wards. In the following chapters, I will critically review the literature on performance measurements. Using the method of a critical discourse analysis, I will look at how performance measurements have impacted case management of Crown Wards in Ontario's child welfare system.

## **CHAPTER TWO: A CRITICAL ANALYSIS OF THE LITERATURE**

Today, performance measurements have become firmly incorporated into routine activities of all levels of government throughout the world, into the operations of the private and voluntary sectors, and into public discussion around social issues and programs. The term ‘performance measurement’ is a relatively recent term; however, its premise is not. Even as early as the sixteenth century, “Thomas Hobbes and his contemporaries tried to calculate numerical measures to assess social conditions and then identify the cause of mortality, morbidity, and social disorganization” (Rossi, Freeman, & Lipsey, 1999, p. 2). In later times, specifically after World War II, “with the implementation of many new, large-scale, and costly programs in the [public sector, there were increasing]...demands that these programs be evaluated” (Courtney, Needell, Wulczyn, 2004, p. 1142). By the 1950’s, performance measurements were being used in Canada and other countries, such as the United States and the United Kingdom (Rossi & Freeman, 1982, p. 22; Courtney, Needell, Wulczyn, 2004, p 1142). However, it was not until the 1960’s and 1970’s that the theory and practice of performance measurements were primarily developed by Joseph Wholey, a senior advisor at the United States federal government level. Contributors like Wholey, along with others such as Harry Hatry and Kathryn Newcomer, developed and implemented performance measurements in response to governments, policy makers, and the public at large, pressuring public, private, and voluntary sectors to be more accountable, transparent, effective and efficient in their

delivery of services. Consequently, they have become an increasing part of policy making, planning, and administration.

There are numerous descriptive definitions of the term ‘performance measurement’. First, performance measurement is “an institutionalized, routine process whereby the assessment of programmatic results can be undertaken in an ongoing fashion” (Newcomer, 1997a, p. 1). Second, it is “the label typically given many efforts undertaken within governments and in the non-profit sector to meet the new demand for documentation of results” (Newcomer, 1997b, p. 5). Finally, it is “a fairly inclusive term that may refer to the routine measurement of program inputs, outputs, intermediate outcomes, or end outcomes” (Newcomer, 1997b, p. 7). It “is essentially a form of internal (vs. external) and continuous (vs. episodic) program monitoring” (Rossi et al, 1999, p. 1).

According to the literature, it appears that performance measurements have two major functions: budgeting and providing data in order to adjust programs. First, performance measurements, which are outcome or result-oriented, impact budgets. They have become major contributors to budget formulation and execution. They help organizations and/or programs to be cost-effective, but also to be accountable and transparent to the public by demonstrating that there is good cause to sustain the funding for the specific programs. Second, performance measurements provide data in order to adjust programs. By obtaining raw data, governments, organizations, and programs can analyze if the program is doing well or poorly. It can also help determine how to improve

the performance. Basically, it aids in the area of programs being effective and efficient in the public's eye. In addition, Flynn, Lemay, Ghazal, and Hébert (2000) further state that performance measurements can also provide

a clear focus on intended program outcomes, the establishment of baseline levels of achievement that can guide future targets, a means of monitoring whether corrective action has, in fact, led to program improvement, a way of motivating staff by allowing them to see the progress of their clients in a more visible and objective manner, a mechanism for promoting one's agency as a successful contributor to the community, and a way of increasing financial resources and volunteer support (p. 1-2).

From this perspective, the use of performance measurements appears to be a positive tool for organizations and/or programs. Such measures allow a focus on the purpose and intended program outcomes of the organization or program and demonstrate whether or not effective, positive outcomes are being achieved. They are also seen as a means for governments and/or organizations to manage their resources. They aid in the transparency and accountability to individuals, such as citizens and groups, as these public, private, and voluntary sectors are carefully monitored through the use of performance measurements. Performance measurements shift data gathering from "budget allocations ('inputs')" to "outputs and outcomes" (Tilbury, 2004, p. 226). Overall, they allow organizations and/or programs to assess their outcomes, in order to measure effectiveness and efficiency, and also to be accountable and transparent to governments, communities, and stake holders.

This description of performance measurements embodies a perspective that they are a neutral device, of unbiased performance information. It gives the impression that

they do not provide directionality or reflect the values of the organizations and/or people who have designed them. Moreover, the definitions of the term ‘performance measurement’ appear to be technical and instrumental and fail to ask deeper questions about purpose, power, and interests. According to Tilbury (2004), “from a broader critical policy perspective, the way that [performance measurements] are conceptualized and implemented can have major consequences for service delivery” (p. 226).

“Performance indicators are not neutral or merely technical,” but are a part of a “subjective process, because notions of ‘good performance’ are in the eyes of the beholder” (p. 226). Performance measurements are a reflection of the value judgements of those creating the measurements. They frame social problems from the perspective of the “beholder.” In addition, they serve as proxies for complicated social processes, which can create potential issues for numerous reasons. First, is it possible to use a single measure to analyze a complex social process or activity? Second, it may be probable for those who are creating the measurement to get the proxy wrong. Finally, it is appealing to look for an uncomplicated and simple measure, which results in the use of outcomes that are easily measured. For example, in the health care and child welfare system, quality of life is often measured. However, this raises several questions. How does one measure “quality of life”? Who defines what quality is? Quality of life is a broad, subjective term that differs according to a person’s social position, gender, health, age, and interaction with political factors. The above example demonstrates that often outputs cannot always be systematically measured or counted. As some notions are difficult to

measure, quite often organizations or programs choose to use outcomes that can be easily measured, such as how many times has an individual been readmitted into an inpatient unit at the hospital or has a child in care received an annual medical or dental appointment or has the worker had annual contact with the child's school.

It is problematic when a complicated social process is reduced to a numerical measurement. As mentioned, in Ontario's child welfare system, a case worker needs to have a private visit with a Crown Ward every ninety days. If contact has been made, then the formalized performance measurement has been met. However, it does not take into account factors such as the quality of the contact. Did the caseworker simply walk the child from a volunteer driver's car to their visit, speaking for only two minutes or was their significant quality time spent with the child, asking numerous questions, exploring various areas of his or her life? Consequently, the contact outcome does not measure the quality or effectiveness of the contact. Important factors regarding a child's well-being are unmeasured. Rather, the relationship with the child is simplified into a numerical measure, as it is straight forward to measure if a caseworker has had contact with the child.

As seen, today, across the public, private, and voluntary sectors, performance measurements are a part of the dominant discourse and practice. Performance measurements embody a particular definition of a social problem and when left unexamined, the larger purpose that they are serving remains hidden (S. Baker Collins, personal communication, April 3, 2012). When a performance measurement is defined, it

involves a prior act of determining what the problem to be defined is, and moreover, who is deciding what a good performance measurement is. This is particularly troubling because performance measurements influence “where resources are placed, what types of services are funded, and how outcomes are conceptualized and dealt with,” and when the underlying issues of definitions and decision making are left unexamined, it can result in unintended consequences for the program and/or organization (Tilbury, 2004 p. 226). Consequently, governments, policy makers, researchers, agencies, and the public need to understand the opportunities and consequences that performance measurements provide, and acknowledge that performance measurements are a reflection of public policy. They are linked with the political agenda that a government, organization, or a program has set for itself. Performance measurements are not neutral and technical. Rather, they are complex, and should not be defined by or use a simple set of prescriptive procedures.

Within Canada, specifically in the province of Ontario, performance measurements are taking on an increasingly important role within public, private, and non-profit voluntary social service sectors. One of the non-profit voluntary sectors that has been influenced and impacted, with sometimes unintended consequences, by this institutionalized process of performance measurements is Ontario’s child welfare system. In the last twenty years, there has been a steady declining support for publically funded child welfare agencies and growing criticism of their ability to achieve better outcomes for children in care (Courtney, Needell, Wulczyn, 2004, p. 1142; OACAS, 2010, p. 4). Polls have shown that the public has lost confidence in child welfare agencies (Schorr,

1994, p. 3). The general public has appeared to be reluctant to allow child welfare agencies to be self-regulating or to assume that social workers will necessarily act in their clients' interests (Monro, 2004, p. 5).

Moreover, child welfare agencies are provincially funded by the Ontario government. In 2010/2011, it was estimated that child welfare agencies would spend \$1.4 billion dollars (Commission to Promote Sustainable Child Welfare, 2010, p. 1). Some agencies would spend approximately \$5 million, while larger agencies would spend close to \$160 million (Commission to Promote Sustainable Child Welfare, 2011, p. 25). Consequently, child welfare agencies are a part of a large spending process for the Ontario government (Tilbury, 2004, p. 228). As a result, there has been a demand for greater accountability and transparency, with a demonstration of effective and efficient results through the use of performance measurements as mandated by the Ministry of Children and Youth Services (Monro, 2004, p. 2, 5; Schorr, 1994, p. 7; Tilbury, 2004, p. 225).

By analyzing evaluation methods over the last thirty years of Ontario's child welfare system, it is evident that the use of performance measurements has increased. In the 1980's, the child welfare system experienced a "wave of administrative and organizational changes which, when taken together, emphasized the need for public accountability and fairness in dealing with issues relating to children's well-being" and services to children in care (Lessard, 2001, p. 735). The undercurrent of this wave of change was a feature of neo-liberal public policy, which emphasized "fiscal restraint" as

the taxpayers started to “expect a direct return on any investment in social spending” (Lessard, 2001, p. 743). The priorities became “cost-effectiveness, monitoring, and financial accountability” (Lessard, 2001, p. 758). The influence was especially seen in 1985, when the Ministry of Community and Social Services introduced the Child in Care Manual, containing standards and procedures which set out expectations for all service activities pertaining to children in care as outlined by the *Child and Family Services Act (1984)*, specifically around “planning, admission requirements, record maintenance, documentation, and ongoing care” (OACAS, 2010, p. 1). From the exterior, the public requesting information from the government on their spending does not appear to be an unreasonable request. However, it will be argued below that although the push for accountability is not harmful, it has caused harm by the way the use of performance measurements has been adopted in child welfare.

In 1998, the Ministry of Child and Youth Services “launched a new Child Welfare Reform Agenda...partly as a response to [highly publicized] reports from six coroners’ inquests and the Ontario Child Mortality Task Force into the deaths of children served by the child welfare system” (Flynn et al., 2000, p. 2). These publicized cases fuelled calls for further child-welfare reforms in Ontario. There were two phases to this reform: the introduction of a risk-assessment system and the implementation of Ontario Looking at Children’s Assessment and Action Record (ONLAC AAR) (Flynn et al., 2000, p. 2). In 2006, the Child Welfare Transformation Agenda was rolled out into child welfare. Within this agenda, twenty-seven new service directives were given, fifteen of which

were in regards to services provided for children in care. The new directives created standards and procedures around “ONLAC, SAFE, PRIDE, Kinship service, education funding investment, financial skills development, food and nutrition, and cultural competency” (OACAS, 2010, p. 1). As mentioned, what underpinned these reforms was a demand for Ontario’s child welfare system to be more accountable and transparent, demonstrating effective and efficient results.

Consequently, today, performance measurements have become a means for the government to manage and control resources and ensure the safety and permanency of children (Tilbury, 2004, p. 228; Allen & Bissell, 2004, p. 65). They have also become a means to address the growing concerns around public expenditures (Tilbury, 2004, p. 226, 228; Schorr, 1994, p. 4; Casey Foundation, 1998, p. 10; Monro, 2004, p. 25). Taxpayers and governments are increasingly placing pressure on these publically funded agencies to “assess and report on the outcomes of services they offer” (Mordock, 2002, p. 32). They want to see and are requesting observable results (Tilbury, 2004, p. 226). According to the literature, there appears to be a general consensus that performance measurements help “monitor the efficiency and effectiveness of the [programs], strategies...and services” (Tilbury, 2004, p. 228) of welfare agencies (Wells & Johnson, 1998, p. 4). In addition, it is believed that they advance child welfare research to develop or adapt further measurements (Wells & Johnson, 1998, p. 4-5).

Within Ontario’s child welfare system, one of the performance measurements, as it relates to children in care, is the Crown Ward Review. The Ministry of Children and

Youth Services, under the umbrella of the Ontario Provincial Government, utilizes this process of a Crown Ward Review to measure accountability, effectiveness, and efficiency, as well as to provide transparency of its services. Annually, ministry officials who make up the Crown Ward Review Unit (CWRU) audit fifty-three child welfare agencies in Ontario, which take care of approximately 5400 Crown Wards (Ministry of Children and Youth Services, 2011). They are empowered by Ontario's *Child and Family Services Act* (1990) Section 17(4) and (15) that gives the Director authority to ensure that Children's Aid Societies follow the standard of service set by the Ministry (Service Ontario, 1990). The minimum requirement is that the file of "each child or youth who has been a Crown Ward for two years is reviewed and then reviewed every year thereafter unless there is a status review before the court or the child/youth turns 18 years old when the review is taking place" (OACAS, 2010, p. 3). According to the Ministry of Children and Youth Services (2011), the goal of the Crown Ward Review is "to determine that an adequate plan of care [has been] developed for each Crown Ward and is intended to stimulate improvement in the overall service delivery to children" (Ministry of Children and Youth Services, 2011, p. 8).

The Ministry has outlined seven objectives of the review. First, the review monitors "compliance with the legislation, regulations, and directives in relation to the care of each Crown Ward" (p. 9). Second, it looks for "adequate assessment of needs, suitable placement, supporting services, and realistic planning for and with the Crown Ward" (p. 9). Third, after the review is completed, caseworkers receive "directives

regarding non-compliance or where the review indicates that other actions would be in the child's best interest" (p. 9). Fourth, "recommendations about particular cases [are made] and [the Ministry] monitors their implementation" (p. 9). Fifth, Crown Wards who are competent/able are given "an opportunity, through questionnaire and interviews, to comment on the care they are receiving, contacts with their biological families, case plans and current circumstances" (p. 10). Sixth, the Ministry provides "information on useful methods employed in other societies and jurisdictions, [and finally] using a strength-based approach, [identifies] and [conveys] to societies the strengths of service delivery (p. 10).

Within the Crown Ward Review, the domains of safety, permanency (placement and access), and well-being (child's special needs, education, caseworker contact, plan of care, social history, medical and dental care) are measured. They appear to be not only central to the general understanding of effectiveness in the Ontario Crown Ward Review, but also in child welfare more generally. According to the literature in Canada, the United Kingdom, and United States of America, it appears that these three areas, in addition to worker satisfaction and skill, are the main measurements within child welfare (Wells & Johnson, 1998, p. 5; Courtney et al., 2004, p. 1142; Casey Foundation, 1998, p. 14). First, child safety appears to be the most common measurement in performance measurements as it is foundational to child welfare (OACAS, 2010, p. 11). This measure looks at whether or not children are protected from abuse and neglect, and safely maintained in their foster homes (OACAS, 2010, p. 11; Courtney et al., 2004, p. 1144).

In Ontario, safety is conceptualized as injuries of children in care, either accidental or due to maltreatment, or child death. Second, children's permanency and stability of their living situation, and their relationships with family (if possible) while in care, are measured (Courtney et al., 2004, p. 1144; OACAS, 2010, p. 13). According to Tilbury (2004), "placement stability is used on the rationale that a stable placement is more likely to meet a child's needs for attachment and security" (p. 235). The Ministry of Children and Youth Services reviews the number of moves a child has in care, lasting reunification that Crown Wards experience, and other measures such as out of home placement rates per general child population (OACAS, 2010, p. 13). Third, there are numerous performance measurements regarding child well-being, checking whether agencies are meeting children's physical, mental, and educational needs (Courtney et al., 2004, p. 1144; OACAS, 2010, p. 18-19). It would appear comparing other child welfare systems in Canada, the United Kingdom, and the United States of America that Ontario's Crown Ward Review has successfully conceptualized performance measurements.

While the Crown Ward Review appears to adequately measure safety, permanency, and well-being, one important aspect of effectiveness that is not measured in the Crown Ward Review highlighted by Trotter (2002), and by Glisson and Hemmelgarn (1998) is the importance of measuring worker satisfaction and skill. Trotter (2002) suggests that specific worker skills lead to better outcomes for children in care. He interviews clients and workers to determine the extent to which child protection workers' use of certain skills would lead to improved outcomes. His findings suggest that effective

child welfare workers tend to make use of collaborative problem-solving processes, such as working with the clients' definition of their problem rather than their own (Trotter, 2002, p. 39). In his research, these effective workers are perceived by their clients as "fair, open, respectful, punctual, and reliable" (p. 40). Glisson and Hemmelgarn (1998), in addition, suggest that organizational climate leads to better outcomes for children in care. In order to be an effective worker, there needs to be positive organizational factors (p. 405, 416). Workers need to experience job satisfaction and role clarity, not unmanageable caseloads and procedural timelines (Glisson & Hemmelgarn, 1998, p. 405, 416; Strolin-Goltzman, 2010, p. 1388; Allen & Bissell, 2004, p. 64; Monro, 2004, p. 27). If there are positive organizational factors, the research suggest that workers would be able to provide quality service and obtain positive client outcomes (Glisson & Hemmelgarn, 1998, p. 405, 416; Strolin-Goltzman, 2000, p. 1388; Allen & Bissell, 2004, p. 64; Monro, 2004, p. 27). Glisson and Hemmelgarn (1998) go so far as to say that future research should focus on organizational climate rather than examining service configuration as the cause of poor service outcomes (p. 419). Overall, the Ministry of Children and Youth Services believes that by focusing primarily on child safety, permanency, and child well-being, and using performance measurements to monitor, better outcomes for children in care will be achieved. However, it is evident that the Crown Ward Review reflects a particular take on effectiveness. It leaves out important issues such as worker satisfaction and skill. It is not being suggested here that the Crown Ward Review should begin to measure worker satisfaction and skill, such as reviewing

the issue of unmanageable caseloads and procedural timelines, so that there is a benefit to the Crown Ward worker, organization, and/or other persons in the child welfare field. It is recognized that by the very nature of the position that these persons hold, they have dominance and social control over children in care. However, what is being suggested is that, as outlined by the research, when engaged in “effective practice skills...outcomes [are] generally positive” (Trotter, 2002, p. 48). Crown Wards will do better when workers use effective practice skills and are not overwhelmed. As stated by Trotter (2002), “workers can make a difference” (p. 48).

In conclusion, historically, audits were based on budgeting and providing data in order to adjust programs, as well as seen later, a demand for accountability and fiscal restraint to determine if agencies were meeting standards of practices and to demonstrate cost-effectiveness. Today, Crown Ward Review auditors are making judgements on efficiency of agencies and finances. I believe that they are concerned about “policy results, outcomes, and organizational effectiveness” (Commission to Support Sustainable Child Welfare, 2010, p. 12). They are using performance measurements that are not neutral or merely technical, and fail to ask deeper questions about purpose, power, and interests. Consequently, throughout the remainder of this paper, I will critically examine the Crown Ward Review. I will analyze what is measured, how the performance measurements are conceptualized, and more importantly, what is not measured. My hope is that I will gain an understanding on how to enhance the current review system, and ultimately, provide ways to improve outcomes for Crown Wards.

### **CHAPTER THREE: STATEMENT OF THE RESEARCH PROBLEM**

It is important to have an understanding of present performance measurements of the services provided to children in care in Ontario. One of the performance measurements, as it relates to children in care, is the Crown Ward Review (Audit). The Ministry of Children and Youth Services, under the umbrella of the Ontario Provincial Government, utilizes the process of a Crown Ward Review to measure the accountability, effectiveness, and efficiency, as well as to provide transparency of its services. Within the Crown Ward Review, the domains of safety, permanency, and well-being (child's special needs, education, caseworker contact, plan of care, social history, medical and dental care) are measured. Some of the measurement tools are timelines for the completion of plans of care, procurement of a supervisor's signature, documentation on annual contact with the child's school, doctor, and dentist, and caseworker contact with the child. It is believed that these measurement tools will be used to establish better outcomes for children in care.

However, as a former children's service worker, I am not convinced that performance measurements are benefiting workers and the children whom they service. Many workers like myself felt weary because of the "bureaucracy, paperwork, and targets" set by the Ministry of Children and Youth Services (Monro, 2004, p. 27). My experience was that I spent more time completing paperwork, in order to meet the

performance measurements set in place, than direct service time with the children on my caseload. Moreover, I did not feel that some of the performance measurements adequately measured or reflected my casework practice or outcomes for my Crown Wards. For example, as mentioned, one of the performance measurements is for supervisors to review a plan of care before its due date. However, if my supervisor did not review the document in a timely manner, I was told that my file was in noncompliance. I questioned how this designation did anything to achieve better outcomes for my Crown Ward. Also, I asked myself if it was fair to hold me accountable for both the process and the outcome.

Consequently, my M.S.W research study will focus on the question of how performance measurements, specifically the Crown Ward Review, impact good case management in Ontario's child welfare system. I want to measure how the Crown Ward Review conceptualizes good case management, what is measured in the Review, and what is left out. I want to gain a further understanding of how performance measurements impact Crown Wards and workers by analyzing specific measurements and their effects. In addition, my hope is to provide an alternative discourse on performance measurements and solutions on how to achieve better outcomes for children in care, which could be implemented in the system. Ultimately, my goal is that this research project will be of use to Ontario's child welfare system.

#### **CHAPTER FOUR: THEORETICAL PERSPECTIVE**

In the last six months, while no longer working in the Crown Ward Unit in Ontario, as I moved to the Alberta child welfare system, I have been able to journey further down the path of critical self-reflection. I have realized that there are avenues to engage in emancipatory social work. There is a role for social workers, and surprisingly, a role for performance measurements. Through the journey I have now realized that Ontario's child welfare system needs to find alternative spaces to look at the use of performance measurements, in order to increase transparency, accountability, efficiency, and effectiveness of child welfare agencies.

As a social worker and researcher, acknowledging that Ontario's child welfare system is fragmented and that I was complicit in its powerful system, I feel obliged to engage in critical research and empower the individuals and families who find themselves caught up in the system's services. I realize that I have numerous questions about the use and effectiveness of performance measurements. Consequently, in order to answer these questions, examine, and critique the use of performance measurements, specifically the Crown Ward Review, in Ontario's child welfare system, I will use a critical social science theoretical perspective.

According to Neuman (2011), critical social science is “a critical process of inquiry that goes beyond surface illusions to uncover the real structures in the material world in order to help people change conditions and build a better world for themselves”

(p. 108). In other words, its primary purpose is to change systems and help empower people to improve their lives (p. 108-109). It analyzes and acknowledges that individuals and/or the social problem being researched are constructed by historical and socio-political contexts. It helps researchers, organizations, and/or people being studied to understand their experiences, and ultimately, positively impact their programs or lives.

A critical social science theoretical perspective also allows the researcher to focus on questions of discourse, specifically around power, social control, domination, and/or inequality (Finn & Jacobson, 2003, p. 165; Neuman, 2011, p. 109). This approach reveals ways of knowing and how truths are defined. Discourse, which is historical and contextual, produces knowledge. It is this knowledge that influences social work practice and ultimately impacts people. For example, Leslie Margolin (1998) writes about the power of recordkeeping, specifically social workers writing about clients. He describes it as the “mechanism that assures the differential distribution of power” (Margolin, 1998, p. 37). In my own practice, I came to understand this distribution of power. Through performance measurements, such as the social histories and narrative sections in the plans of care, I was creating powerful stories, from my perspective, about the children whom I served. I was uneasy with this process, but felt helpless to address it due to the demands placed by my child welfare agency and the Ministry of Children and Youth Services.

In addition, according to Neuman (2011), using a critical social science perspective helps the researcher to move towards action (p. 114). In other words, it insists that good research is taking responsibility for action and improving social

conditions (S. Baker Collins, personal communication, July 11, 2012). It allows the researcher to understand the problem and then facilitate or make the necessary changes to improve the current condition or system. Consequently, my aim of this research project is to provide a discussion on how knowledge is produced and transferred, exposing power, dominance, and social inequality in the child welfare system with implications for society at large. It is also my hope that by providing an alternative discourse and practice on performance measurements, solutions for better outcomes for children in care will be achieved. It is my desire that this research project will be of use to Ontario's child welfare system and that it will help enhance the lives of Crown Wards.

## CHAPTER FIVE: METHODOLOGY

### *Epistemology and Methodology*

Epistemology investigates the nature of knowledge. It asks the questions about “how we know the world around us or what makes a claim about it true” (Neuman, 2011, p. 93). In other words, it is a theory about how we derive knowledge, and how, as researchers, we come to understand what we believe as knowledge and truth.

Epistemology and methodology are closely connected. It is our epistemology that shapes our methodology. Methodology has its own set of philosophical assumptions that provide a rationale for what the researcher is trying to achieve (Neuman, 1997, p. 60; Greene, 28 September 2011). It has an important role, as it influences whose knowledge is being created and valued. The approach used will also determine whose voice is being heard and how it is being heard (Greene, 28 September 2011). It will create, maintain, and/or address varying power imbalances within the study. It will either allow participants to become empowered or it will create a disempowering process (Greene, 5 October 2011).

Critical social science approach provides a normative foundation for researchers. It recognizes that researchers have a specific position from which their critique is developed and the way in which inequality and social power are addressed. While one’s epistemological viewpoint can be fluid, as experiences are “constructed from the outcomes of a constant process of actions and interpretations that take place in particular

locations and times” (p. 93), critical social science states that “our observations and experiences with empirical reality are not pure, neutral, and unmediated; rather, ideas, beliefs, and interpretations colour or influence what and how we observe” (Neuman, 2011, p. 110).

In this research study, my epistemological position comes from a critical social science perspective. Critical discourse analysis naturally flows from this perspective. Both of these perspectives are rooted in a critical perspective, which as stated assumes a normative stance. Moreover, they assume philosophical assumptions behind their methodology.

### *Critical Discourse Analysis*

Since the late 1980’s, Critical Discourse Analysis (CDA) has been emerging as a prominent way to approach and think about social issues as seen through text and talk. It became known because of scholars such as Van Dijk, Fairclough, and Wodak. CDA is not seen as a specific methodology; rather, it uses an interdisciplinary approach.

According to Van Dijk (2008), critical discourse analysis, whose roots are primarily found in the theoretical framework of critical social science,

is a type of discourse analytical research that primarily studies the way social powers, abuse, dominance, and inequality are enacted, reproduced and resisted by text and talk in the social and political context. With such dissident research, critical discourse analysts take an explicit position and thus want to understand, expose, and ultimately resist social inequality. (p. 85)

The targets are the power elites who “enact, sustain, legitimate, condone or ignore social inequality and injustice” (Van Dijk, 1993, p. 252). According to Van Dijk, there are three areas where CDA focuses: power and dominance, discourse and access, and finally social cognition. First, the overarching focus is on “the role of discourse in the (re)production and challenge of the idea of dominance” and social power (p. 249). Throughout society, dominance and social power, which are “usually organized and institutionalized”, are evident (p. 255). CDA is particularly interested in the hierarchy of this dominance and social power. Certain individuals, groups, and/or organizations have privileged access, due to their race, gender, age, wealth, education, force, group membership, or position (p. 254). Organizations, in particular, have a “special role in planning, decision-making and control over the relations and processes of the enactment of power” (p. 255). Consequently, the victims are usually the public, “clients, subjects, the audience, [who] are dependent on institutional and organizational power” (Van Dijk, 2001, p. 363).

Second, CDA is also interested in the notion of discourse and access. Discourse “means anything from a historical monument, *a lieu de memoire*, a policy, a political strategy, narratives in a restricted or broad sense of the term, text, talk, a speech, topic-related conversations, to language per se” (Wodak & Meyer, 2009, p 2-3). Fairclough defines discourse as a “social practice” or “mode of action” and states that it is neither simply words to be read, nor is it shaped by historical and/or social factors, but it is also “socially shaping” (p. 55). CDA scholars, like Wodak, Fairclough, and Van Dijk, have

placed an “emphasis on the role of language in how we come to know our world, interact with it, are shaped by it and shape it” (Richardson, 2011, p. 21). CDA asserts that privileged individuals, groups, and/or organizations hold power, which involves control over the other groups, as well as “control over (access to) discourse” (Van Dijk, 1993, p. 257). For example, in child welfare, the Ministry officials, members of the CAS’ boards of directors, and senior managers have access to and are involved in boardroom meetings, where discourse and decision-making processes take place (p. 256).

Finally, CDA acknowledges that “‘modern’ power has a major cognitive dimension” (Van Dijk, 1993, p. 257). Social cognition is defined as “the system of mental representations and process of group members” (p. 18). Moreover, “ideologies....are the overall, abstract mental systems that organize...socially shared attitudes” and “indirectly influence the personal cognition of group members” (p. 18-19). Unlike Fairclough and Wodak, Van Dijk places emphasis on the socio-cognition and states that mental representation is “often articulated along us versus them dimension, in which speakers of one group will generally tend to present themselves or their group in positive terms, and other groups in negative terms” (p. 22). This notion of us versus them is prevalent in child welfare, especially worker versus client.

The methods used with CDA can widely vary, as “there is no accepted canon of data collection” (Wodak & Meyer, 2009, p. 32). For the purpose of my research study, I am choosing to use Van Dijk’s method. He states that the first task is to thoroughly study textually and contextually dominance and social power, in order to explain it (Van Dijk,

1993, p. 270). He then states that the analysis begins with the “various properties of content, such as access patterns, setting and participants, and then examines the properties of the ‘text’ ...such as its topics, local meanings, style and rhetoric” (p. 270). In his later writings, Van Dijk (1998) provides the following method to analyze discourse, highlighting that it is important to make transparent the dichotomy of us versus them. First, as researchers, we need to “examine the context of the discourse”, the “historical, political, or social background of a conflict, its main participants, the grounds of the conflict, and preceding positions and arguments” (Van Dijk, 1998, p. 61-62). Second, an analysis of the “groups, power relations, and conflicts... involved” should be completed (p. 61). Third, the researcher must identify the “positive and negative opinions about us and them” (p. 61). Fourth, the “presupposed and the implied” needs to be spelled out, and finally, there should be an examination of “all formal structures, [such as the lexical choice and syntactic structure, in a way that helps to] (de)emphasize polarized group opinions” (p. 61).

Critical discourse analysis challenges the status quo, “by highlighting concerns related to power” (Wodak & Meyer, 2009, p. 5-6). It creates spaces of engagement and emancipatory work to expose how powerful structures in society and dominant discourses influence people’s perceptions and understandings. It allows researchers to make suggestions for change and recommend “corrections to particular discourse” (Toolan cited in Blommaert & Bulcaen, 2000, p. 450). The hope for my research study is that CDA methodology will allow me to open up spaces of engagement and provide

alternative discourse around performance measurements in order to help find solutions to achieve better outcomes for Crown Wards.

In order to achieve this, as a researcher, I need to be aware of the political motivations behind my own position and interpretations (Stubbs, 1997, p. 102). Researchers who are engaged in the method of CDA must be aware that they are motivated by socio-political factors. As Fairclough states (as cited in Henderson, 2005, p. 19) “what one “sees” in a text, what one regards as worth describing, and what one chooses to emphasize in a description, are all dependent on how one interprets a text.” When critically interpreting, there is the potential for bias or diverse interpretation and assumptions that are not value-free and objective (Cui, 2010, p. 18, Rahimi & Riasati, 2011, p. 109; Henderson, 2005, p. 13). However, critical social science and CDA assert that science cannot be value-free. Consequently, as a researcher, I need to be aware of my own values, interpretations, and assumptions, so that I am not blinded to findings that contradict or challenge my own stance. I do need to be open to these contradictory findings, which is different from the notion of value-free interpretations, and report on what does or does not contradict my assumption. I need to assume a stance of solidarity with respondents, acknowledging that it may allow only certain voices to be heard (Antaki, Billig, Edwards, & Potter, 2003, p. 16). Basically, when engaging in CDA, it “implies [that researchers must have] specific ethical standards...an intention to make their position, research interests and values explicit and their criteria transparent as

possible without feeling the need to apologize for the critical stance of their work” (Van Leeuwen, 2006, 293 cited in Wodak & Meyer, 2009, p. 7).

In Van Dijk’s research, he makes it clear that critical discourse analysis is not “neutral,” and that the point is that, as researchers, we “take a position” (Van Dijk, 1993, p. 270). At the beginning of my research, this impenitent notion was uncomfortable. However, as I examined my own epistemology and methodology, I realized that this notion fit with my analysis of performance measurements in Ontario’s child welfare system. As mentioned earlier, as a worker, it became increasingly apparent that the ongoing emergence of performance measurements had become a disempowering experience. I felt that performance measurements created inequality and affected my ability (and that of my colleagues) to meet the needs of children and families whom we serviced. I recognized that I had a personal connection to this research topic. Consequently, as I move forward with my chosen methodology of a critical discourse analysis, I realize that I need to be mindful of my social location. I need to be aware of my viewpoint and reflect on the fact that I will bring my lived experiences and specific understandings about performance measurements into my critical discourse analysis (Finlay, 2002, p. 534). However, in this area of critically reflecting, there appears to be a gap in Van Dijk’s research. He fails to acknowledge the power of the researcher and the importance of critical reflexivity.

As I have been researching, I have felt that critical reflection fits with my critical social science approach and critical discourse analysis, even though Van Dijk does not

acknowledge it. Consequently, I have needed to acknowledge that after leaving child welfare, I was weary, especially because of the “bureaucracy, paperwork, and targets” set by the Ministry of Children and Youth Services (Monro, 2004, p. 27). As mentioned, I spent more time completing paperwork, in order to meet the performance measurements set in place, than direct service time with the children on my caseload. Hertz (as cited in Finlay, 2002, p. 536), states

through personal accounting, researchers must become more aware of how their own positions and interests are imposed at all stages of the research process—from the questions they ask to those they ignore, from who they study to who they ignore, from problem formulation to analysis, representation, and writing—in order to produce less distorted accounts of the social world.

Consequently, I feel it is important to make sure that what I am interpreting in the text is accurate and true. As Pillow (2003) states, I have to “get it right” (p. 187). I must recognize and reflect on my position and be released from the potential “weight of (mis)representation” (p. 187). I must focus on the potential of misinterpreting the text(s) around performance measurements. I must allow the text(s) to speak, so that I am able to produce “better, less distorted research accounts,” and ultimately provide an alternative discourse on performance measurements and solutions how to achieve better outcomes for Crown Wards (p. 179).

Critical reflexivity can be defined as “thoughtful, conscious self-awareness. Reflexive analysis in research encompasses continual evaluation of subjective responses, inter-subjective dynamics, and the research process itself” (Finlay, 2002, p. 532). In other

words, researchers gain insight into their own experiences and then take steps to question how their knowledge is produced, by having a political awareness and using self-analysis (Finlay, 2002, p. 532). They actively construct their knowledge, which ultimately impacts their research.

According to Pillow (2003), one of the most noticeable trends to come out of the use of reflexivity is increased attention to researcher subjectivity in the research process (p. 176). In her article, she highlights various foci, which will be used for the purpose of this research study: how does who I am, who I have been, and how I feel affect my methodological approach (p. 176)?

My first focus is how does who I am affect my methodological approach. It is important to understand how my own social and historical positioning, such as my gender, race, religion, ethnicity, class, sexuality, and age can affect my research, specifically while conducting a critical discourse analysis. As a white, Canadian, Christian, middle-class, heterosexual, educated, and almost thirty female, I have been afforded many privileges in society. My beliefs and values, as well as my experiences growing up, have shaped who I am. I have developed assumptions and experiences that are specific to my social and historical locations. In other words, I have developed an ontological perspective. These values, beliefs, assumptions, and experiences, which I have learned from the minute I was born, inform my critical discourse analysis (Greene, 21 September 2011). They either help or hinder me to understand the narrative, grammar, and language of the text, because I may impose a framework from my specific social and

historical locations that is insensitive to other social locations and histories.

Consequently, I need to reflect and understand how I relate to people from other social locations and how they relate to me. When interpreting, because of my social location, I need to be careful to not show partiality towards the text, either because I identify with a specific experience or group or because I do not. I must be conscious of the social power, dominance, and inequality that I enact and reproduce (Van Dijk, 2008, p. 85). At times, due to my dominant location, I have not always been aware of the dominance and inequality in society. Therefore, I have been exposed to, and reproduced, directly or indirectly, the power dynamics found within the groups with which I identify. This can pose a problem when interpreting a text, as I may not see what I, a person who finds herself in a dominant group, will take for granted. Moreover, if I do not understand the power dynamics in society and how I contribute to them, then I am not going to be able to engage in critical social work by empowering others to speak from their own social location. Consequently, it is important that as an interpreter, I am able to critically reflect on my social location, so that I am able to acknowledge the influences and perspectives that I will bring to my research as I engage in a critical discourse analysis. By doing this, I will be able to produce “better, less distorted research accounts” (Pillow, 2003, p. 179).

My second focus of critical reflexivity is how does who I have been affect my methodological approach. In the past three years, I was working for a child welfare agency in south-western Ontario, specifically as a Children’s Service Worker in the Crown Ward Unit. On a daily basis, performance measurements were a part of my

practice. It seemed that each March, the tension would rise amongst workers as we prepared for government officials from the Ministry of Children and Youth Services to come to our agency to audit our work and reflect on the performance measurements to which we adhered. As Monro (2004) states, it seems that there was a general “antipathy and hostility” towards this process, by front-line workers, like myself, and supervisors (p. 26). I have asked myself questions such as: Is it fair to hold me accountable for both the process and the outcomes? If my supervisor does not sign a document in a timely manner, thus giving me a penalty for noncompliance, does that have any effect on my work in achieving a better outcome for a child in care? It is clear that my lived experience as a social worker in an Ontario child welfare agency has created a judgement about the use, effectiveness, and efficiency that these performance measurements have on developing better outcomes for children in care. I know that I have developed strong opinions regarding whether or not these measurements make agencies more transparent and accountable for their services. In my mind, much like Monro (2004), the Crown Ward Review is a tool which reflects the opinions of a government official who is only there to enhance the credibility of my agency because of the confidence that the government and public place on performance measurements (p. 7). In light of these judgements, I must reflect on the fact that I will bring my own lived experiences and specific understandings about performance measurements into my critical discourse analysis (Finlay, 2002, p. 534). Without critically reflecting about my own involvement in my research area, it will skew my ability to objectively interpret the text.

Finally, critical reflexivity needs to take place regarding how does how I feel affect my methodology. This final area of how I am feeling strongly resonates with me. In my last week working as a social worker at my specific child welfare agency, I was asked by my colleagues if I would return to the child welfare field. I realized then that I was unsure. I left child welfare feeling weary, especially because of the “bureaucracy, paperwork, and targets” set by the Ministry of Children and Youth Services (Monro, 2004, p. 27). In the last year, I found myself navigating the political waters at my specific child welfare agency. I spent more time completing paperwork, in order to meet the performance measurements set in place, than direct service time with the children on my caseload. I also, unfortunately, felt my hand forced by senior management, whose main concern appeared to be to meet the Ministry standard of not wanting to move a child who has been in a specific foster home for more than two years. I had no choice but to leave children in foster homes that clearly did not meet their needs. In my opinion, performance measurements negatively impacted my work and the lives of the children whom I have serviced. As I found myself in this weary position, I now need to critically reflect how this would impact my critical discourse analysis.

By focusing on critical reflection on how does who I am, who I have been, and how I feel affect my methodological approach, my hope is that I will be able to provide an accurate discussion on how knowledge is produced and transferred, causing power, dominance, and social inequality in the child welfare system and society at large.

Engagement in a critical discourse analysis, underpinned by some tenants of the critical

social science approach, is a complex process. However, my hope is that providing an alternative discourse on these measurements will result in better outcomes for Crown Wards.

## CHAPTER SIX: FINDINGS AND DISCUSSION

In the first section of this chapter, this study will critically look at how the Crown Ward Review conceptualizes good case management by analyzing what is measured. The following section will look at what is not measured in the Crown Ward Review, and consequently, what needs to be changed in order to allow workers to be engaged in effective case management.

### What Is Measured in the Crown Ward Review

In Ontario, the Crown Ward Review (Audit) is a complex process for agencies, supervisors, workers, and even Crown Wards. As noted earlier, ministry officials who make up the Crown Ward Review Unit (CWRU) annually audit fifty-three child welfare agencies in Ontario, which take care of approximately 5400 Crown Wards (Ministry of Children and Youth Services, 2011). They are empowered by Ontario's *Child and Family Services Act* (1990) Section 17(4) and (15) that gives the Director authority to ensure that Children's Aid Societies follow the standard of service set by the Ministry (Service Ontario, 1990). The minimum requirement is that "each child or youth who has been a crown ward for two years is reviewed and then reviewed every year thereafter unless there is a status review before the court or the child/youth turns 18 years old when the review is taking place" (OACAS, 2010, p. 3). Once a year, the CWRU would physically go to the agencies and review the appropriate files. For my agency in south-

western Ontario, the reviewers usually arrived near the end of March and would stay approximately one week. Depending on the number of Crown Ward files, they could be there for a shorter or longer period of time. As workers, we had very limited access to the Crown Ward reviewers. Our supervisors and managers would partake in an entry meeting; in addition they would be called to help them if they needed any answers or other documentation. In my experience, there were only two occasions that front-line workers would have contact with the reviewers. First, each Crown Ward is given a confidential questionnaire to fill out, which is submitted to the reviewers. At the end of the questionnaire, they are given the option to speak with a reviewer. The majority of the Crown Wards in our Unit would opt not to speak to a reviewer. However, those who decided otherwise would sometimes ask their worker to accompany them to the meeting. It was under this circumstance that as workers we would have an opportunity to speak directly with a reviewer. Second, at the end of the week, the reviewers would meet for an exit meeting to review our results. For my agency, Crown Ward workers, supervisors, and managers were present for this meeting.

Overall, there are nine categories of child in care performance measurements that are reflected in the Crown Ward Review. The first category concerns First Nations children in care. It looks at various performance measurements such as if the child's band was notified once a child has been removed from a foster home or if consultation with the Band has taken place at all stages of the planning and/or interventions. The second category involves admission, such as whether a worker has privately seen a child within

seven days of placement, if the child's rights have been reviewed or if an admission medical has been completed. The third category looks at the thirty days post admission, reviewing performance measurements such as if a worker saw the child within thirty days or was a plan of care developed. The fourth covers change of placement, and tasks such as a seven-day and thirty-day visits are monitored. The fifth reviews the six months post placement mark, where reviewers check that an initial social history has been completed. The sixth checks the plan of care at the three month post admission. The seventh includes numerous annual performance measurements, such as did the child receive medical and dental examinations, did the worker have contact with the school, was the child seen every ninety days, was a social history updated, was an Assessment and Action Record (AAR) completed, and was a plan of care completed every six months. In the eighth category, there are several additional considerations that are assessed, such as if the Crown Ward order, serious occurrences, and travel letters are in the child's file, in addition to incident reports and complaints regarding the foster parents. In the final category, there are two post placement performance measurements that are reviewed. They include whether or not a post placement interview with the child was conducted and if there was contact with the foster family.

Within the review, it is a checklist as to whether or not the task has been completed. For example, did a Crown Ward receive an annual medical examination? Yes or no? If yes, then the file will be in compliance in that area. If no, a directive will be given, the file will be out of compliance, and the worker will have a certain period of

time to address the situation and report back to the Ministry that the task has been completed.

### Critical Analysis of What Is Measured

At a first glance, it appears that the Crown Ward Review is a thorough process in order to make sure that Crown Wards are receiving the best possible care. Numerous areas, such as replacement of Crown Wards, various required documents, and specific standards are measured in the audit. However, through careful analysis, it becomes evident that, while there are strengths of the audit, there are many limitations and unintended consequences with this audit process.

### *Admission and Replacement of a Child in Care/Crown Ward*

At the child's admission, one of the child in care standards is that the placing agency is required to have the child placed by a person known to them. This standard appears to be supported by the Child and Family Services Act (CFSA) (R.R.O.1990), Regulation (Reg). 70, Section (S). 114 (1) that states:

every licensee or placing agency that places a child in foster care shall, (a) arrange for a person known to the child to accompany the child to the foster home on the date of the actual placement; and (b) ensure that the foster parents receive the health, medical and dental data necessary for the care of the child, including specifications of any medical disorders, handicaps, allergies, or limitations on activities.

While it is best practice that a child is placed by a person known to them, it may not always be an achievable standard. The reality of child welfare is that for various reasons, children are removed from their current placement at varying times during the day or night. When a child is placed in foster care as an after-hour emergency or perhaps when the child's worker is sick or on vacation, it may not be possible for the child to be placed by someone they know. The CFSA (R.R.O. 1990) does address this situation, by stating in the following subsection that "clause (1) (a) does not apply where the licensee, placing agency or a person designated by the licensee or placing agency approves an adult other than one known to the child to accompany the child" Reg. 70, S. 114, (2). What is problematic with this standard is that the emphasis appears to be on clause (1) (a). In a focus group conducted by the OACAS (2010), it was noted that "considerable effort goes into documenting this [standard]. Agencies have established elaborate systems to achieve documentation" (p. 67). Within my agency, it was undeniably best practice and the norm to place the child by someone known to him or her. Consequently, from my experience and relying on the expressed comments of the focus group, the question is raised as to whether or not a performance measurement of placing a child by a person known to the child should have been created. Is it necessary to create elaborate systems based on documentation, when the CFSA allows for exceptions? In other words, the Crown Ward Review has created precedence on this issue. While the CFSA appears to allow for departures, the impression of workers is that the Crown Ward Review does not take into account these exemptions. Rather, they have created inconsistencies in the process,

which has further produced power and social control by the reviewers, and overall inequalities in the system. The reviewers are not adhering to the legislation and appear to have formulated their own regulations concerning this issue. It is a powerful position that the reviewers have created for themselves, to determine and, at times, incorrectly apply the legislation to the Crown Ward Review. Consequently, this performance measurement should be eliminated, and the emphasis should be placed on best practice for admission, as well as replacement of Crown Wards.

*Documentation – Reviewing the Rights of the Child, Plans of Care, and Social Histories*

As a Crown Ward worker, perhaps, one of the most daunting tasks is successfully completing the various plans of care on time, according to Ministry standards. When a Crown Ward is placed in or replaced from a kin home, foster home, group home, or another placement, there are six major administrative tasks that need to be completed: reviewing rights and responsibilities with the child, a 7 day visit, 30 day plan of care, 90 day plan of care, subsequent 6 month plan of care, and a social history written within sixty days.

The CFSA (R.R.O. 1990) Chapter C. 11, S. 103, 104, 105, 107, and 108 outlines the rights of the child. At each change of placement, the CFSA (R.R.O. 1990) Reg. 70, S. 83 addresses how a Crown Ward is able to “express concerns or complaints while a resident.” In order to accomplish this task, as a worker, it involves explaining the child’s rights to him or her, particularly section 107, the child’s “right to be heard.” However, in

regards to reviewing these rights, it appears that there are varying interpretations of the requirements. As a Crown Ward worker, I was given guidance that I needed to complete my children's rights twice a year. It was supported not by the CFSA, but by the Foster Care Licensing regulations, specifically 0202-09 and 0202-10 that highlight that rights are reviewed at the "first plan of care, and at least every six months thereafter" (Ministry of Community and Social Services (MCSS), 1994). The CFSA contradicts the Foster Care Licensing Regulations, as it appears the emphasis is on reviewing the rights at the time of admission or replacement. If a child moves to five different placements in the course of one year, does the worker need to ensure that the rights are reviewed five or the usual two times? Due to these contradictions, Crown Ward workers are left with a misunderstanding as to when and how often they should be reviewing the rights of the child. If a worker were to follow the CFSA of reviewing the rights at admission or replacement, the worker may be surprised when he or she is issued a directive by the reviewers as he or she did not follow the standards as set out by the Foster Care Licensing regulations. As highlighted in the previous section, these inconsistencies are creating issues for Crown Ward workers and agencies. Workers are being held accountable for meeting a standard on which there are conflicting differences between the various pieces of legislation. The direct implication of this is that the responsibility for the lack of clarity is placed on workers and not on the Ministry of Children and Youth Services or policy makers. It has created undue power and social control amongst the Crown Ward reviewers. By not clarifying the expectations, or in other words, what is being "graded"

in the review, reviewers are able to control the process. They are able to decide if the worker has met the performance measurement, based on their own understanding and interpretation of the legislation, and ultimately provide recommendations and directives. In other words, the Crown Ward Review is reproducing dominance and social control. It appears that too much discretion is given to reviewers to interpret the various pieces of legislations and decide which piece they will follow in their decision making process. Consequently, clarification needs to be given by the Crown Ward reviewers so that workers are aware as to how often they need to review the rights with the children on their caseload.

In addition to the fact that clarification needs to be given, the question arises as to “is this truly in the best interest of the child” to review as frequently as outlined in the Foster Care Licensing regulations necessary? In a focus group conducted by the OACAS, it was noted that “children are reluctant to engage in meetings such as reviewing rights where the focus is on their child in care status rather than on who they are” (OACAS, 2010, p. 79). This comment is in keeping with my experience as a Crown Ward worker. It seemed when placing my older Crown Wards in Outside Paid Resources, such as group homes, the majority of service providers would either hand out a sheet of paper to the youth outlining their rights or would directly ask them what are their rights and responsibilities. As they had to meet their own specific performance measurements, it seemed impossible to use imaginative ways to review rights in a process that was meaningful for the child. When I had to inform my Crown Wards of their rights, I would

try to do it in a way that was child friendly and suitable to their level of understanding, striving to not just simply reviewing their rights in the meeting but rather weaving them into my visit. However, the language of “rights” would still emerge, and when it did, my Crown Wards would often roll their eyes, complain, and ask why we have to keep reviewing their rights and responsibilities, or at times, even refuse to answer citing that they know them. For example, if a child becomes a Crown Ward at the age of six, has resided in the same foster home since being placed, and is now sixteen years old, is it necessary (if the worker is following the standard as set out by the Foster Care Licensing Regulations to review a minimum of six months) to review the child’s rights at least 20 times, if not more? It appears to be redundant and unhelpful to the child. It can also deskill and deprive workers and service providers of the imagination and initiative needed to work with Crown Wards.

The current discourse on children’s rights acknowledges the importance of Crown Wards knowing what their rights are, but it appears to be more about the interests of the Ministry of Children and Youth Services assuring that children’s rights are addressed. In 1991, Canada ratified the United Nations’ Conventions on the Rights of the Child, which requires Canada to implement legislation that protects the rights and best interests of children. The Ministry of Children and Youth Services is one sector of government that has the responsibility to implement these rights. However, in analyzing the CFSA (R.R.O. 1990), it only addresses that a child or young person is “informed of the procedures that exist for a resident to express concerns or complaints while a resident”

(Reg. 70, S. 83) “in a language suitable for the child’s level of understanding” (Chapter C. 11, S. 108). In my judgement, the current children’s rights’ discourse does not support the process or outcomes to assure that Crown Wards are receiving the best possible care. Rather, it is simply about whether or not the child has been informed and understands his or her rights. It places the responsibility on the child, by inquiring if the rights and responsibilities of the child have been reviewed and if he or she knows the procedure to file a complaint. In my experience, the feeling amongst Crown Ward workers is that it does not place the onus on the worker to ensure that the rights are being upheld, which can be documented in case notes when visiting and meeting privately with the child. The Crown Ward Review does not provide a section for the workers to state whether or not the child’s rights are being upheld. Rather, it is simply a checkbox in the Crown Ward Review: did the worker review the child’s right? Yes or no? To elaborate further, it is evident that the Crown Ward Review is organized to provide a cursory impression that this standard of reviewing the rights with a child is met in a way that is easy for reviewers to check a box. It gives the impression of accountability. However, as noted, it appears to place the onus on the Crown Ward and does not account for whether or not a child’s rights are being met.

In regards to plans of care, according to the CFSA (R.R.O. 1990), “every licensee shall develop or participate in the development of a written plan of care for each resident admitted to a residence operated by the licensee within thirty days of admission to the resident” (Reg. 70, S. 86 (1)). In addition, the Reg. 70, S. 115 (1) (2) states:

(1) every licensee shall review and if necessary amend the foster plan of care for each child it places in foster care; and (2) The review referred to in subsection (1) shall be carried out with the involvement of the licensee, the placing agency where the placing agency is not the licensee, the child where the child is 12 years of age or over, the foster parents and, where appropriate, the child's parents, (a) three months after placement, six months after placement and at least every six months thereafter; or (b) earlier than the timeframes referenced in clause (a) if, (i) there is a material change in circumstances which necessitates a review of the plan; or(ii) there is a change in the child's placement.

There appears to be further discrepancies, especially around practicality, and also language used by the CFSA which is then interpreted and implemented in the Crown Ward Review. Practically, workers are often struggling to meet the requirements concerning documentation. When a child is placed or replaced, there is an enormous amount of paperwork that is required by the worker and supervisor to complete the 7-day visit, 30 day plan of care, 90 day plan of care, and 6 month plan of care. The plan of care is a tedious, long document that focuses on what has transpired during that period of time in the child's life. Depending on the worker and the complexity of the child's case, it may take a worker several hours or even several days to complete it. It covers seven domains: health, education, identity, relationships, social presentation, emotional and behavioural development, and life skills.

There were several issues with the plans of care that were consistently raised by workers in my agency and by the OACAS. First, as a worker, I felt that it was a cumbersome and repetitive document. If a child was replaced on January 1, 2012, the seven day visit documentation would need to be completed by January 7, 2012, the 30

day plan of care, by January 30, 2012, the ninety day plan of care by March 30, 2012, and the six month plan of care by June 30, 2012. In the ninety day plan of care, what was already recorded in the thirty day plan of care would have to be repeated, as the ninety day plan also covers the first thirty days and the subsequent sixty days that follow. This became a frustrating task for my colleagues and me. In my agency's electronic system, the information of the thirty day plan of care was not brought forward into the ninety day plan of care. It resulted in some of my colleagues, including myself, cutting and pasting the text from the thirty day plan of care into the ninety-day. It seemed to speed the process of completing the paperwork, compared to those colleagues who opted to start anew; however, there always seemed to be a little reworking of the grammar and context that would take additional time.

Second, it was also felt that what was being measured at the review did not reflect the work and outcomes that were being achieved for Crown Wards. First, it appeared that the reviewers' expectation was that there ought to be goals and tasks for each one of the seven domains. But, the OACAS (2010) noted that "too many goals in a plan can overwhelm foster parents" and the children in care, especially adolescents (p. 91). This raises questions around why the Ministry of Children and Youth Services would want each section filled out. For example, if the worker is stating in the health narrative section that there are no health concerns, as outlined by the child's doctor, foster parent, and the child, why does a goal in the health section need to be created? What is the Ministry's purpose and interest here? As noted in the literature review, outcomes are often difficult

to measure. So often, as seen in this case, the Ministry of Children and Youth Services is choosing to use outcomes that can be easily measured. Relating back to the health section example, in order to meet the requirements of the Crown Ward Review, workers are creating goals such as “[insert Crown Ward’s name here] will be in good health” and outlining the tasks as, “foster parent will take [insert Crown Ward’s name here] for an annual medical examination.” By analyzing the process, it is easier for a reviewer to check that the task of completing an annual medical has been completed than reviewing and measuring the actual health of the Crown Ward or the quality of care that the child is receiving to address any potential health concerns. In more technical terms, the Ministry is demonstrating that it is easier to use a single indicator to measure a complex social situation. By using a single indicator, it appears to be an exercise of dominance by the reviewers. It does not take into account the specific needs or, even more so, the progress of the child. It also does not allow room to acknowledge the progress of the Crown Ward or the good work that the worker has accomplished. It also has taken away power from the Crown Ward and discretion from the workers. If my Crown Ward or I did not feel that there were any specific health goals to address in the upcoming recording period. We would not create one simply for the purpose of one being created. However, in my experience, this could not be the case. A goal needed to be created. It was particularly frustrating and disempowering for my adolescent youth, who would question me why I needed to create goals when they were clearly outlining that they felt they did not need to have a goal in a particular domain. Overall, it appears that this process has created goals

to become “directive and prescriptive” (p. 91). The plan of care should be developed to achieve goals that are significant for the child’s life, not to make it easy for the Ministry to check the outcome or meet its interests.

Finally, often directives and recommendations are given by Crown Ward reviewers for late plans of care. One example by the OACAS highlights the reviewers’ rigidity. At an unnamed CAS, a directive was issued by the Crown Ward Review auditors for non-compliance when a worker submitted the ninety day plan of care on the ninety-first day (p. 87). Across the province, workers are struggling to submit plans of care on time. For example, when the ninety day plan of care is due, it needs to encompass a summary of events that have transpired within the ninety days. Writing from experience, when working with a complex adolescent Crown Ward, numerous events can unfold within a two week period. Therefore, as a worker, I was consequently left with a small duration of time to initiate and complete the plan of care. In most cases, I would start writing the plan of care a week before it was due, submitting it to my supervisor only several days before the due date. Unfortunately, an unexpected circumstance may have arisen for my supervisor or me, when dealing with other children on my colleague’s or my caseloads, not allowing for a successful submission before the ninety day timeline.

According to the Crown Ward reviewers, in 2009, the lowest level of compliance with the Crown Ward Review was for the Supervisory Review of the Plan of Care (p. 30). When a worker completes a plan of care, it is a requirement by the Crown Ward Review

that the supervisor reads and signs the document by the date that the plan of care is due. As a worker, I struggled with this requirement for several reasons. First, it is a difficult requirement to achieve considering workers' heavy caseloads. As mentioned above, if a plan of care is due by April 30, 2012, the worker will need to write, review, and send it to his or her supervisor before that date, as the supervisor needs to sign off that he or she has reviewed it by April 30, 2012. Second, this task does not appear to relate to outcomes and it is a documentation requirement that is clearly not being achieved, most likely due to supervisory workload issues. In other words, how does my supervisor not signing a document in a timely manner affect my work in achieving better outcomes for my Crown Ward? Third, it holds the wrong person responsible. Fourth, it does not relate to any standards in the CFSA. In other words, the requirement of supervisory review of the plan of care is not a standard, but has only been made a requirement by the Crown Ward Review Unit. Finally, it carries the same weight as much more important issues, such as seeing and developing relationships with Crown Wards.

This issue of supervisory review appears to be designed to meet the purpose of accountability and transparency. However, a closer look reveals that "transparency" is actually hiding important implications. First, it appears to be a reflection of the values and assumptions of the Ministry of Children and Youth Services that a proxy for good case management is a supervisor reviewing a worker's plan of care. Instead of focusing on supervisors reviewing plans of care, in best practice, supervisors should be actively engaging with their workers on an ongoing basis, recording in 'supervision notes' the

decisions and directions by the worker, supervisor, and, sometimes, managers. In other words, there should be no “surprises” to the supervisors in the plans of care, as they should be kept informed and involved in the ongoing decision making process. Second, in order to demonstrate “transparency” and “accountability” of its services, the Ministry has also determined that it is an appropriate check and balance to make sure that Crown Ward workers are completing the necessary documentation. These two statements speak to the power and interest that the Ministry has and the impact that its decisions have on the effective case management of Crown Ward workers.

Another issue arises regarding the language used in the CFSA and interpreted by the Crown Ward reviewers. The CFSA (R.R.O. 1990) Reg. 70, S. 115 (1) (2) (b) (i) (ii) states that the plan of care should be “reviewed and if necessary amended” if “there is a material change in circumstances which necessitates a review of the plan” or “there is a change in the child’s placement.” First, although the CFSA outlines that the plan of care only needs to be reviewed, and if necessary amended, what appears to have been interpreted by the workers is that the plan of care has to be recreated and submitted, as numerous directives, as will be described below, had been issued. Consequently, several questions have arisen. First, what constitutes a material change in circumstances? I am aware of one situation within my agency where a Crown Ward experienced a worker change. In the eyes of that specific Crown Ward reviewer, it was a significant material change in the child’s life. Consequently, at the Crown Ward Review, a directive was issued as a new plan of care had not been created, and the file was seen as out of

compliance. In contrast, for another Crown Ward who experienced a worker change, a directive was not issued to the new worker. It resulted in workers, within my agency, being confused and uncertain as to what constitutes a material change in circumstances, as there were no guidelines.

In regards to subsection (ii), workers are also often left with the question: what is considered a placement change? When a child is arrested and placed in a custody facility, even for a period of more than six months, in my experience, it is not considered a placement change. When the child is replaced from the custody facility back into the community, then it is considered a replacement. However, perhaps for another worker with a different reviewer, their interpretation may be different, as it may have been looked upon as a placement change. The discretion of Crown Ward reviewers and the ambiguity for workers and agencies are extremely problematic. Due to their group membership as Crown Ward reviewers in the Ministry of Children and Youth Services, they have been afforded certain privileges. The Ministry has placed them in a position of dominance and social power. They have been given a role where they have “decision-making and control” over the Crown Ward Review process (Van Dijk, 1993, p. 255). For agencies and workers, this discretion and ambiguity are extremely unhelpful and disempowering. The ambiguity created increases the power of the reviewer. Reviewers not only decide whether or not a file is in compliance, but they also create their own categories for what is compliance in these situations of ambiguity. It is no wonder that often my colleagues spoke about feeling that we are at the mercy of the reviewers.

Finally, another major piece of documentation is the completion of a Crown Ward's social history. According to the CFSA (R.R.O. 1990),

(7) every placing agency shall initiate a social history of each child that it places in foster care within 60 days after the child is placed and shall update it annually thereafter; (8) The social history of a child shall include, (a) identifying information; (b) admission information; (c) family history; (d) birth history; (e) developmental history; (f) health history; (g) academic history; (h) history of court involvement; (i) experiences of separation; (j) personality and behaviour; and (k) aptitudes and abilities. (Reg. 70, S. 111 (1) (7) (8)).

Social history is an important document to establish and create for any Crown Ward.

According to the Child in Care Manual (1985), Section 0205-02, "a social history is a comprehensive report on the child and family, which contains much of the information on which decisions about the child's future will be made." From my experience, this was not the case. Typically, the majority of my Crown Wards has been in care for approximately two years before becoming a Crown Ward. During that time, it was the expectation of the ongoing worker to initiate and complete the social history.

Unfortunately, I often received files containing social histories that were sparse. It must be noted that this experience may be different from other social workers in the province of Ontario, as I am aware that other child welfare agencies employ social history writers who have the skills and resources to meet with the children, parents, family members, and other people significant in the child's life to write a comprehensive social history.

However, this was not my experience. Rather, I was left with social histories with little to no information, receiving a directive from the Ministry to "enhance my social history."

In addition, I found that once the child became a Crown Ward, biological parents became

unreceptive to discuss their children's history. Consequently, the social history became a document highlighting what the child had accomplished that specific year. My colleagues and I relied on the plans of care to help with case management and planning decisions. The overall impression within my Crown Ward Unit was that it was a time consuming, repetitive document.

In light of these concerns, several recommendations should be considered by the Ministry of Children and Youth Services. First, in regards to reviewing the rights with a child, the language and requirements of agencies, supervisors, and Crown Ward workers are vague and appear to be open to individual interpretation. Consequently, there needs to be uniformity between the CFSA, Foster Care Licensing Regulations, and the Child in Care Manual. In addition, with regard to the requirement of a new plan of care with changes in material circumstances, the language and requirements need to be firmed, eliminating the subjectivity, and made more transparent by supplying agencies with a list of circumstances that constitute significant material changes and/or placement changes.

I believe that significant changes need to be made regarding completing the seven day visit and the 30 day, 90 day, and six month plans of care. First, I agree with the OACAS's recommendation in their July 2010 report that (1) the worker should see the child at seven days, one month, and two months when first placed or replaced, (2) there should be a two month plan of care; and finally (3) workers should complete a six month plan of care and one every six months thereafter (OACAS, 2010, p. 77). In regards to time frames for the plans of care, I would recommend that there continues to be a seven

day visit case note, 60 day plan of care, and six month plan of care, but that workers are able to submit the plan of care within seven working days after the 7 day, 60 day, or 6 month due date. If the plan of care has not been submitted within seven working days, then it needs to become a compliance issue resulting in a directive from the Ministry.

I would also add that there should be changes to the supervisory review of the plan of care, in that supervisors should review the file every six months and sign off on their review accordingly. As noted earlier, the performance measurements in the Crown Ward Review should be concerned about stimulating better outcomes and improvements in the overall service delivery to children. While I am recommending replacing one set of measurements with ones that are not so burdensome to workers, I acknowledge that workers and child welfare organizations hold an enormous amount of power and control over Crown Wards. The overarching goal is not to make the social worker's "life easier," but rather, I feel that these recommendations will support the ongoing contact between the worker and child. The recommendations would help to eliminate the administrative burden on workers and supervisors, so that they can focus on spending time with the child rather than on the paperwork needed to be completed. The research is clear that children in care are expressing that they have the need to spend time with their workers. Workers need to be able to meet their Crown Wards' needs.

Finally, I believe that the process around social history should be strengthened. Social histories should help inform workers to make decisions about the child's future. However, the work needs to start as soon as the child enters into care, not when the child

is finally made a Crown Ward. Workers should continue to actively gather all the information required for the social history during the first sixty days of the child first entering in care, and continue to update annually to reflect what has transpired in the child's life. Agencies should find more comprehensive ways to obtain the necessary information. The social history is potentially able, like the ONLAC AAR, to inform the plan of care.

However, I feel that there needs to be changes regarding the requirements of the social history. As noted, according to the CFSA (R.R.O. 1990), the social history should include, “(a) identifying information; (b) admission information; (c) family history; (d) birth history; (e) developmental history; (f) health history; (g) academic history; (h) history of court involvement; (i) experiences of separation; (j) personality and behaviour; and (k) aptitudes and abilities” (Reg. 70, S. 111 (1) (7) (8)). As a result of these requirements, there are numerous duplications between the plans of care, ONLAC AAR, and social histories. Within my agency, I was aware that the common practice amongst the Crown Ward workers was to cut and paste information from our plans of care into the social histories. We had a motto in our agency: “Why reinvent the wheel?” In other words, why create more work for ourselves? I believe that a social history should still be a required piece of documentation. However, subsections (f), (g), (h), (i), (j), and (k) can be found in the plans of care. In order to reduce the repetitiveness, social histories should perhaps only address subsections (a), (b), (c), (d), and (e).

*Annual Standards – Medical and Dental Examinations*

Another performance measurement reviewed by the Crown Ward Review auditors is that a Crown Ward receives annual medical and dental examinations. It is guided by the CFSA (R.R.O. 1990) Reg. 70, S. 105 (2)(d) “a child has a right to receive medical and dental care, subject to section 106, at regular intervals and whenever required, in a community setting whenever possible.” Whereas it is best practice for a Crown Ward to receive annual medical care, the audit does not allow any departure from this standard or take into consideration various factors. First, it does not take into account that Crown Wards may refuse medical treatment, especially adolescent youth on independent living. They may cite that they are healthy and do not need to have an annual visit to a doctor. Second, various regions in Ontario are struggling to find community physicians who are willing to serve the medical needs of children in care. Particularly in rural areas, stretched over tens of thousands of square kilometres, where they are only accessible by air or by car during certain seasons, and where there are limited or virtually no community resources, such as doctors, nurses, and mental health providers, Crown Ward workers are having difficulties achieving the annual medical standard. Moreover, in other rural and urban areas throughout the province of Ontario, Crown Ward workers are also having to access medical drop-in health care clinics due to a lack of physicians who are willing to take on children in care, as they often have complex needs requiring extra attention on the part of the physician. This is extremely problematic because these drop-

in clinics are unable to provide the follow-up care that is required for children in care, especially for those who have complex needs.

Finally, as noted by the OACAS (2010), another systematic issue concerns the “timing gap between OHIP funding rules and Child in Care standards” set in place by the Ministry of Children and Youth Services (p. 24). OHIP funds one physical examination once every twelve months. However, when a Crown Ward changes placement, it is a requirement by the Ministry of Children and Youth Services for the child to receive an admission medical, which OHIP views as a routine physical examinations. However, numerous Crown Wards experience several placement changes each year. Consequently, this creates a systemic barrier as physicians will not see a child in care as they will not be compensated for their services.

It is interesting to note that the Ministry of Children and Youth Services seems to ignore these issues concerning medical and dental examinations in the Crown Ward Review. They are systemic issues facing other ministries within the province of Ontario, such as the Ministry of Health and Long-Term Care. As they are ministerial issues that can only be addressed at that level, it would be in the interest of the Ministry to ignore these concerns as each Ministry has control over and access to their decision making processes. Addressing this issue would also take a commitment of further resources. In addition, it is also in the Ministry’s interest to adhere and enforce a measurement that is seen as a right of a child, not only in the CFSA but also in the United Nation’s Convention on the Rights of a Child. As a worker, it felt as though the Ministry was

stating that it is not its problem that there is a lack of physicians or that there are issues with OHIP funding rules. It also seemed that it was placing the issue on workers, stating that it is their problem. The Ministry, and its reviewers, are perpetuating the illusion that this is a standard that can be met for every child in care. This relates back to the discourse around power, dominance, and inequality. In circumstances described above, these requirements are often unachievable. If a doctor refuses to treat Crown Wards, and there may be only one doctor in a rural setting who is willing to work with children, as workers we are left with next to no options. It is unfair to hold workers for a process over which they do not have control. In addition, some of my Crown Wards who experience frequent placement changes, have expressed that they do not wish to continually go for doctor's appointments, when three months previous, for example, they were deemed to be in good health. Basically, the power elites, the Ministry of Children and Youth Services, are sustaining and ignoring social inequality and injustice (Van Dijk, 1993, p. 252). On a similar note, Crown Wards, as articulated by the CFSA and the UN's Convention on the Rights of a Child, do have the right to medical care. However, they also have the right to be heard. As outlined in the CFSA (R.S.O. 1990) "a child in care has a right to be consulted and to express his or her views, to the extent that is practical given the child's level of understanding, whenever significant decisions concerning the child are made, including decisions with respect to medical treatment..." (c. C.11, s. 107). Children, especially young persons, have the right to refuse medical treatment.

Consequently, while an annual medical is best practice and should continue to be a performance measurement that a child receives annual dental and medical examination, the practice of admission medicals when a child is replaced to an ‘outside-paid resource’ (OPR) needs to be changed. The Crown Ward reviewers need to allow for departures from this performance measurement, taking into consideration a child’s specific situation, especially a young person who refuses medical treatment, as well as the issue regarding lack of physicians.

### *Compliance Rating*

At the end of the Crown Ward Review, a compliance score is given to each file. Historically, an overall agency score was given. However, after the fall of 2011, the Crown Ward Review was changed and today, compliance scores are provided according to ranges of ratings (high, moderate, and low), and in three areas: by requirement, summary, and outcomes. A detailed outline of the ranges is given in the next section. What is troublesome about this compliance rating scale is that if a file is out of compliance in one area, such as the annual medical was completed two weeks after its due date, recommendations and directives are issued, and the whole file is deemed out of compliance. This situation is problematic, as the Crown Ward Review appears to focus on what has not been adequately completed. While it does answer “yes” in its checkboxes to show what was completed and the reviewers have opportunities in the ‘overall comments’ section to provide positive feedback, my experience and that of my

colleagues was that emphasis was on how many recommendations and directives were issued, and on the importance of notifying the Ministry that they would be addressed by the worker or supervisor. In other words, the good work of the worker and the progress of the Crown Ward are unnoticed or not mentioned. For example, I had an illiterate adolescent youth on my caseload, whose potentially identifying features will be changed in order to maintain confidentiality. When walking into McDonalds, this youth, being unable to read, would rely on the pictures of the food and pick a meal based on recognition of the number. I knew this youth was high-risk, engaged in numerous illegal activities, and in a period of two and a half years, experienced twenty-one placement changes, ranging from foster homes, group homes, and specialized treatment facilities. In one school year, there were four school placements, primarily because of refusing to step foot into a high school, knowing the hindrance of the learning disability, and the fear of repercussions from peers laughing at the fact of being unable to read or write. This youth was incarcerated, when I became the social worker. Fortunately, with a new change in worker, there was more ease in communicating. Upon release, the youth was placed in a group home, where a strong connection with the Director was developed, and as a result, I started to see change. Over the next two years, this youth resided at this group home. Relationships were being reconciled with the biological family, and more importantly, the criminal activity and behaviours deescalated. The youth no longer ran away or had temper tantrums like a six year old, spitting at people and throwing furniture, and after a while, when upset, learned how to control emotions, and started to use words to express

frustration and anger. By no means was anything perfect, especially when compared to what society would deem “normal” behaviour, but for my youth, it was a vast improvement. Unfortunately, there was consistent refusal to step foot into a high school. As I was the social worker, I felt that it was not in my youth’s best interest. Consequently, with help from the Ontario Child Benefit Equivalent Fund (OCBE), I was able to secure a private one-on-one tutor who started to teach my youth how to read and write. The tutor started to report small gains in reading and writing. I felt there would be more success with a private tutor than forcing school enrollment and attendance. Unfortunately, what are measured in the Crown Ward Review, specifically in the education domain, are areas such as: (1) Is the child registered in a school program? (2) Has the child been assessed as having special educational needs, such as does the child have an individual education plan or has the child been identified? (3) Has the child been suspended in the previous 12 months? (4) Has the child changed schools in the previous 12 months? (5) Is the child attending school? (6) In regards to the educational progress of the child, how many credits have been attempted and earned? It is evident that my at-risk adolescent would not score well in this section. Consequently, as a worker, I often received recommendations and directives, highlighting that my youth was at risk. I did not receive positive feedback about what I felt was great progress for this particular youth. Rather, it was pointed out that my youth was not achieving a secondary education. In moments like these, I found myself to be in disbelief as to what I was reading. I knew my youth was high risk, and the reality of this youth’s life was that a secondary education

was never going to be achieved. I just wanted my youth to be able to read, so that when entering establishments, such as McDonalds that the menu could be read and a “Big Mac” ordered. This whole experience was disempowering. The immense progress of my Crown Ward was not reflected in the review. Rather, it focussed on what I was not accomplishing on this list. Consequently, it raises questions about how what was not being accomplished was being defined. In the Crown Ward Review, progress is narrowly and rigidly defined. If a Crown Ward makes progress outside the narrow definition of progress, as set out by the Crown Ward Review, it does not count as progress. Rather, it appears to be viewed as a “mistake.” This situation places enormous power in the hands of the reviewer, as well as creates further inequalities. In the case of the above youth, while there may be progress, if it is not by the provincial standards, such as attending secondary school, then the youth is deemed to not be doing well. The Crown Ward Review is doing a disservice to those youth who have come a long way to address the challenges that they have faced in their lives. By only looking at tick boxes and not accessing/reviewing the specific needs and progress of the Crown Ward, the goal of the Crown Ward Review, that of determining “that an adequate plan of care [has been] developed for each Crown Ward and [to] stimulate improvement in the overall service delivery to children” is unfortunately lost (Ministry of Children and Youth Services, 2011, p. 8).

### What is Not Measured and What Needs to be Changed in the Crown Ward Review

It is evident what is measured in the Crown Ward Review. What requires a deeper critical analysis is what is not measured and what needs to change. There are several areas that are not taken into account by the Crown Ward Review, which impact the overall case management given by agencies and workers to Crown Wards in Ontario's child welfare system. These areas include regional and agency contextual issues, inconsistencies created by the audit, the quality of contact, progress and change, and finally, the link between the review and better outcomes for Crown Wards.

#### *Regional and Agency Contextual Issues*

The Crown Ward Review does not take into account regional and agency contexts. Regionally, there are various contextual and systematic issues that are not factored into the Crown Ward Review process. Ontario, Canada's second largest province has a population of over 12 million people and covers more than one million square kilometres (Attractions Ontario, 2012). Overall, fifty-three child welfare agencies serve 5400 Crown Wards who are spread across this vast province. There are numerous differences between each town, city, county, and region. The City of Toronto, in South-western Ontario, has a population of approximately 5.5 million people, who reside over 5,905 square kilometres (population density of 945.5 persons) (Statistics Canada, 2012b). However, in Toronto, there are four separate children's aid societies that service its population: Children's Aid Society of Toronto, Catholic Children's Aid Society of

Toronto, Jewish Family and Child Services, and Native Child and Family Services of Toronto. In comparison, in the region of Thunder Bay, in North-western Ontario, serviced only by the Children's Aid Society of the District of Thunder Bay, 5,909 people reside over 97,007 square kilometres (population density of 0.1 persons) (Statistics Canada, 2012a). By looking at the regional contexts, it is apparent that they will impact the performance measurements that each Children's Aid Society is trying to achieve. For example, as mentioned above regarding the annual medical contact, many rural communities, that are only accessible by air or by car during certain seasons, are struggling to find community physicians who are willing to serve the medical needs of children in care. It leaves Crown Ward workers facing difficulties achieving the annual medical performance measurement.

Within agencies, there are also various contextual issues that are unaccounted-for when standardizing performance measurements. First, the Crown Ward Review fails to look at the contextual issue regarding the size of agencies and how this impacts the overall compliance of the Crown Ward Review. At the end of each review, a child welfare agency is provided with its compliance results. Up until the fall of 2011, the Crown Ward reviewers would provide each agency with an overall compliance score. In 2009, the provincial average was 69.06%, as agencies' scores ranged from 41.30% to 92.30% (OACAS, 2010, p. 30). However, after the fall of 2011, the Crown Ward Review was changed. Rather than providing an overall agency score, compliance scores would be provided according to ranges of ratings, and in three areas: by requirement, summary,

and outcomes. The ranges of rating are: full compliance is 100%, high compliance rates range from 75-99%, moderate compliance 51-74%, and low compliance 0-50%. An example of agency compliance performance *by requirement* would be a case worker completing their first face-to-face visit with the child within seven days or whether or not the case worker took into account the child's Indian or native culture, heritage, and traditions. The *summary* page provides data on the percentage of total requirements reached, outlining how many individual cases reached either full, high, moderate, or low compliance. For example, 34% of all individual cases could be in full compliance, 53% could have reached high compliance, 11% moderate compliance, and 2% low compliance. Finally, the *outcomes* page outlines the total percentage of files that are in compliance, breaking them down into the safety, permanency, and well-being domains. The Ministry of Children and Youth Services stated that they revised the process in order to “determine society compliance by legislative requirement versus individual file” (Ministry of Children and Youth Services, 2011, p. 6). By critically looking at the revised process, it appears to have been an improvement over the former system by not providing an overall agency compliance score, but rather rating each file either full, high, moderate, or low level compliance. However, this system of rating still needs improvements. For example, agencies, such as Sarnia Lambton Children's Aid Society, who in 2010/2011, only serviced 236 children in care, has a smaller pool to draw upon compared to an agency such as the Children's Aid Society of Toronto, who serviced 2416 children in care in 2010/2011 (Sarnia Lambton Children's Aid Society, 2011, p. 11;

Children's Aid Society of Toronto, 2011, p. 3). Consequently, while the ratings have changed, the underlying measure to reach full/high compliance has not changed. Workers are still required to achieve perfection in their files, not just good or best practice.

Second, a standardized measure does not take into consideration agencies who may have potential complex caseloads, such as youth having various mental health issues. From my experience, the children on my caseload who had complex mental health issues, such as FASD, schizophrenia, self-harming behaviours, and oppositional defiance disorder (ODD), required additional time, as well as financial assistance from the agency in order to be assessed and/or to access specialized treatment centres. I knew my caseload was unique, even compared to other workers within my Crown Ward unit. I had a high number of youth with complex mental health issues. Consequently, it is evident that the complexity of caseloads may also vary from one Children's Aid Society to another, as every city and region have their own predominant social issues. For example, according to the Child and Youth Mental Health Service Records, the severity of mental health disorders is the highest in children aged 6 to 17 years in Toronto at >30%, compared to the North-East at >10%. Ontario's overall average was 18.2% (CAFAS in Ontario, 2010, p. 18). This statistic shows that Crown Ward workers in one of the four Toronto based Children's Aid Societies may be more likely to have a higher caseload of children and adolescents with mental health issues, resulting in more direct clinical time with the children and service providers compared to an agency such as Renfrew Family and Child Services in North-eastern Ontario. It is the combination of direct clinical time

and the complexities that are often associated with mental health that creates issues for Crown Ward workers. Typically, children with mental health issues struggle to maintain placements. They often experience several placement changes, resulting in an administrative nightmare for many workers. As noted earlier, when a Crown Ward is replaced, workers are required to complete a seven day visit, followed by a thirty day plan of care, ninety day plan of care, and subsequently every six months another plan of care. Often workers will speak about the conflict between spending time working with the child or completing performance measurements, such as plans of care. Often the pressing needs of the Crown Ward will take precedence over completing the plans of care on time, resulting in a directive being issued by the Crown Ward reviewers, which then causes a lower compliance rating for the agency. Due to this domino effect, overall, it appears that these cookie-cutter standards do not take into account the needs of children in care and the subsequent complexities that are created for workers when a child is replaced.

#### *Power of the Crown Ward Reviewers*

Three of the objectives of the Crown Ward Review are to “monitor compliance with the legislations, regulations, and directives,” “issue directives regarding non-compliance,” and to “make recommendations about particular cases” (Ministry of Children and Youth Services, 2011, p. 9). In analyzing this text, it is evident that in the Crown Ward Review, the reviewers are the power elites, as they are able to “enact, sustain, legitimate” certain aspects of this process (Van Dijk, 1993, p. 252). In other

words, they have given power and control over the entire Crown Ward Review process, which is established by people who have power over the reviewers, such as policy makers, managers, and the Minister of Children and Youth Services. Reviewers are in a position of social power in order to be able to determine what constitutes non-compliance and also make recommendations and issue directives. As seen below, this power of the reviewers has created issues for Crown Ward workers, supervisors, and agencies.

By analyzing the first objective, from a caseworker perspective, it is difficult to be in compliance when there are inconsistencies with the standards, regulations, and directives. As noted in previous sections, there are numerous inconsistencies between various pieces of legislations, which make it difficult for workers to know what the requirements are to be in compliance. Crown Ward workers, supervisors, and managers are not provided with notice regarding the requirements of the review. Workers have used various terms such as “the flavour of the year,” citing what will be focused on that year by the reviewers. The issue is not whether a specific standard is focused on during that year. What has become problematic is that it appears the reviewers are focusing on insignificant issues. For example, in 2011, the impression amongst my Crown Ward Unit was that there was a specific focus on the medical compliance, such as a record of a child’s height and weight, whereas in other years, this area was often overlooked. In 2010, I did not receive directives when a child’s height and weight were not recorded in his or her file, but in 2011, I did.

In regards to the second and third objectives of the Crown Ward Review, they have also become problematic. In my experience, I found that the child's file was subjected to the opinion and interpretation of the specific reviewer auditing the file. Crown Ward reviewers would make recommendations and issue directives, as they felt appropriate. The educational and clinical backgrounds of the reviewers varied, and at times, my supervisor and I did not clinically agree with the recommendations being offered. What was problematic was that it was the Ministry who was making the recommendations, resulting in a mandatory follow-through on my part. As a worker, I felt that I could not disagree with the reviewer's recommendation, but rather had to address them. This whole situation highlighted the specific power that reviewers had regarding the entire Crown Ward Review process. It became frustrating as individuals, who are only reading texts about my Crown Wards' lives, who have never met or spent time with them, and who may have less clinical education and experience than the worker or supervisor, are making clinical recommendations that may or may not be appropriate. It also felt as though they were calling into question our professional judgement.

In addition, another problem with making recommendations and issuing directives, as highlighted by the OACAS (2010) is that some reviewers use case notes to obtain their data from the child's file, whereas other reviewers solely rely on paper documents, such as plans of care (p. 29). For example, in regards to the above example of obtaining the child's weight and height, the data may be recorded in a case note during a face-to-face contact between the doctor and child, or a telephone case note from the

group or foster home. However, reviewers who do not access the case notes, but simply the plan of care, may issue a directive for non-compliance as they did not see the data. From the outside, it may be questioned as to why there is not a section in the plan of care to record the height and weight. However, it must be noted that the format of plans of care vary by agency. In Ontario, there is not a standardized form with specific check boxes. Moreover, the Ministry of Children and Youth Services has not issued a standardized form outlining what will be audited. Overall, it has created inconsistencies amongst reviewers, agencies and regions. However, what is more important is that there are “underlying sources of social control, power relations, and inequality” in the process (Neuman, 2011, p. 109). The power and control held by the reviewers have led to the creation of a negative social cognition amongst workers, in how the reviewers are viewed and how workers viewed themselves. While I am able to boast that in my agency, we Crown Ward workers worked tirelessly to meet the needs of Crown Wards on our caseloads, going above and beyond what was often expected, nevertheless, we also struggled with and were quite concerned about meeting the performance measurements for the Crown Ward Review, some of which we felt went against what was best practice when working with a Crown Ward. It often resulted in the feeling that the Crown Ward Review was preventing best practice. We often felt that we were viewed by the reviewers as a “less-than” worker, as our agency often received overall compliance scores that were lower than the surrounding child welfare agencies. We perceived this to also be the thinking of senior management, who I am sure were never impressed with our low scores.

Overall, it created an “us versus them” notion, which further created a negative working environment. As noted earlier, there was a general “antipathy and hostility” towards the process of performance measurements (Monro, 2044, p. 26). If possible, workers would entirely avoid the Crown Ward Review week. For the most part, we viewed the reviewers as “merciless” persons auditing our files. Moreover, in my specific agency, the Crown Ward Review was seen as an unhelpful process, and frankly, a waste of time. My immediate supervisors were aware of this situation, as they often arranged a luncheon at the end of the review week in order to uplift our low spirits. Overall, I feel that the Crown Ward reviewers and agencies need to address this unhealthy situation. The goal of the review, according to the Ministry, is “to determine that an adequate plan of care [has been] developed for each Crown Ward and is intended to stimulate improvement in the overall service delivery to children” (Ministry of Children and Youth Services, 2011, p. 8). In its current form, it is not stimulating improvements, but creating frustration and further hostility.

Another separate point, which further highlights the power of the reviewers, reverts to the description of the type of access by workers to the reviewers. As mentioned previously, there are typically only two occasions that front-line workers would have contact with the reviewers: partaking in the optional interview between the reviewer and Crown Ward, and the exit meeting. Crown Ward workers have limited personal contact, if any. In my experience, I never once spoke to a reviewer, as none of the children on my caseload wished to speak to a reviewer and there was next to no time to speak in the exit

meeting. It was a meeting that revolved around sharing the results of the review, not to ask questions about specific directives or recommendations given. Access to the reviewers is controlled in such a way that only managers, supervisors, and Crown Wards who wish to partake in the interviews, have opportunities to dialogue with the reviewers. Workers are excluded. This is problematic, as it is the Crown Ward workers and their ability to meet the performance measurements who appear to be under review. As workers, we felt that the compliance score was a reflection of our ability to effectively do our job. I felt that we were placed in an unfair position. However, in analyzing this discourse, specifically around the scope of access, it is evident the Crown Ward Review is reproducing dominance and social control. The Ministry has dictated who is allowed to be present in the meeting and able to speak to them. Consequently, inequalities throughout the process have been created.

### *Quality of Contact*

There is significant evidence regarding the unintended negative impacts that performance measurements have on the quality of contact between workers and Crown Wards. Schmeid and Walsh (2010) have studied effective case management practice, specifically with adolescents. They state child welfare workers describe their key role as “having to establish and maintain a relationship, and to collaborate or work in partnership with the young person” (p. 171). In fact, according to these researchers, and further supported by Hammond (2005), Hill (1999), and Jones (1987), the central focus of

workers should be on developing “*meaningful* [emphasis added] relationships,” as they are “key factors that predict change in adolescents” (p. 171). However, in analyzing the literature and key documents from the OACAS and the Ministry of Children and Youth Services, it is evident that the demand to meet performance measurements has negatively impacted case management. Smith and Donovan (2003) state that the demand to meet performance measurements is a significant factor in workers not being able to engage in sufficient clinical practice. Moreover, in reviewing two Master’s of Social Work theses from fellow peers at McMaster University, their overall findings support this premise. In Crystal Sitzer’s (2004) grounded theory qualitative master’s of social work thesis, *The Impact of Child Welfare Reform on Intake Practice: Social Work by Numbers*, she highlights her participants’ (six child welfare protection workers who held a minimum of a bachelor in social work) concerns that workers are becoming “‘technicians’, people who are ticking boxes and are compliance driven, rather than social workers,” citing that questions are raised about “the loss of clinical skills” (p. 60). In her findings, she notes that her participants state that they have felt rushed in order to complete the necessary standards and timelines. In this “rushing,” workers are left feeling that there has been a “disservice to clients since there [was] little time to engage [them] and there was worry as expressed by one informant, “that people don't get the feeling that you really care, when you really do”” (p. 61).

In Carmen Thivierge’s (2009) qualitative master’s of social work thesis, *Clinical Social Work Practice in a Child Welfare Setting: Barriers and Possibilities*, she

interviews five child welfare supervisors from four agencies in Southern Ontario, four of whom have M.S.W. qualifications and the other a B.S.W. degree (p. 19). In particular, she interviews one supervisor from a Crown Ward Unit who speaks about the challenges of documentation of performance measurements, in that it “[takes] away from time needed to engage in clinical practice” (p. 33). The supervisor states:

[My workers] have anywhere from 17 to 19 [cases] which doesn't sound a lot but the other aspect of workload which I should address is the recording piece. The amount of recording and documentation you have to do based on the contact ... is so daunting that it's almost like a 60:40 equation where 60 per cent of your time is recording and 40 per cent of your time is with ... actual people. I would even say it's more 70:30 (p. 33).

Within Ontario's child welfare system, there appears to be an acknowledgement even at the highest levels of senior management that there are challenges with performance measurements and how they negatively impact case management. As noted throughout this thesis, in 2010, the Ontario Association of Children's Aid Societies completed a report on the Children in Care Standards and the Relevant Foster Care Licensing Regulations and their impact on achieving better outcomes for children in care. The project was lead by Rocco Gizzarelli, who is the Director of Services at the Catholic Children's Aid Society of Hamilton. Other project members, such as Helene Fournier, Service Director at Integra for Children and Adults of Prescott-Russell and Gail Quirion, Manager of Residential Services at The Children's Aid Society of the District of Thunder Bay, were all in positions of senior management at their local children's aid societies. The conclusion within their report is that “messages from the field inform that the

administrative burden and the burden of redundant standards negatively impact worker's relationships with children in care and foster parents" (OACAS, 2010, p. 30-31). It appears that within the Ontario child welfare field, there is an understanding that the drive for compliance is replacing good clinical case management.

In my experience, balancing compliance with performance measurements and time spent with my Crown Wards was always the most difficult and frustrating aspect of my work. According to Ministry standards, as a worker, I was required to see my Crown Wards once every ninety days. However, my particular agency recognized that this was not enough time spent with a child. Consequently, an internal agency standard was created requiring me to see my Crown Wards once a month. However, in practice, the majority of my Crown Wards would often request to see me more often. Typically, I saw the majority of my Crown Wards several times a month, especially those who required more time and work due to their complex needs. I will always remember one sixteen year old girl on my caseload. She was in a stable foster home, but had her challenges regarding attachment and unrealistic expectations around my role as her social worker. She would express to me that since she was a Crown Ward, the agency was her "parent," and thus, I was her "mother." On several occasions, I would provide role clarification for her around my position as her social worker and that of her foster mother's. When work became increasingly busy with completing plans of care, social histories, and other documentation, I was unable to see her as frequently as I wanted or she needed. On three occasions that I can remember, one at school, at the agency, and in the foster home, this

Crown Ward would enter into hysterics, crying, yelling, and threatening suicide because I was not seeing her as much as she wanted/needed. She informed me a couple of times that she was going to become a “bad kid,” citing that I spent more time with the “bad kids” than the “good kids.” I found it a difficult task to explain to this youth the expectations placed on me, as a social worker, and that I could not see her once a week. She could not understand why I had to sit in my office for twenty or more hours a week completing paperwork. She did not comprehend that I had timeframes and needed to meet them. She would describe me as a “bad worker.” I wanted to help this young lady. I felt conflicted. If I saw her every week, making me a “good worker” in her eyes, I would then become a “bad worker” in the eyes of Ministry, since I would not be able to meet many of the performance measurements due to insufficient time at my computer desk completing documentation such as plans of care, social histories, referral for services, and/or case notes. Within my specific Crown Ward Unit, my struggle was also that of my colleagues. Our two supervisors also verbally recognized our challenge. However, as workers, we felt powerless to address this situation and, in the end, recognized that it was about performance measurements and compliance and not the needs of our Crown Wards. In analyzing this discourse, it highlights the inequality that the Crown Ward Review has created for supervisors, workers, and more importantly, Crown Wards. The Review has created dominance over workers, by exercising control over the choices that workers are making. As stated, workers feel obligated to meet the required performance measurements. In doing so, they are meeting the interests of the

Crown Ward Review, to demonstrate accountability, effectiveness, and transparency of its services, rather than the interest of the Crown Wards, which is clearly to spend quality time with their workers. The effect of the Crown Ward Review exercising control over supervisors, workers, and Crown Wards has placed greater importance on compliance than good practice, and in my opinion, has negatively impacted good case management by workers.

The Ministry of Children and Youth Services has acknowledged the impact of performance measurements on the quality of contact between Crown Wards and workers, and the overall case management of files. It has made concrete recommendations, as will be seen below, to change the audit process in order to help the administrative burden felt by workers and ultimately by Crown Wards. However, what is unfortunate is that there has been little to no change within the Ministry to implement its proposed recommendations. In October 2004, the Ministry of Children and Youth Services released to the public a discussion paper on accountability entitled *Finding the Right Balance*. It provides an overview of the accountability and review mechanisms within the Ministry, one being the Crown Ward Review, and gives program evaluation recommendations. In October 2005, the Ministry of Children and Youth Services released the second part of its discussion paper, entitled *Achieving a Better Balance*. One of the purposes of the paper is to “seek further input on specific new proposals and options to further rationalize existing accountability and review mechanism” (Ministry of Children and Youth Services, 2005, p. 2). In addition, one of the goals is to “reduce

unproductive process monitoring” (p. 3). Throughout the paper, the discussion focuses on how the Ministry of Children and Youth Services should be more concerned with measuring outcomes, be less focused on compliance at the case level, and do a better job of analyzing and sharing information between its four levels of accountability. Within the paper, it specifically provides comments regarding the Crown Ward Review, such as:

while this review is labour intensive, it is seen as relevant and should be expanded to include all children served by a Society; a comprehensive review could be conducted cyclically to ensure that every child is reviewed on a predetermined schedule; at a minimum, conducting these reviews in their current format every other year rather than annually would be more reasonable and a better use of resources; *and the review is heavily weighted on compliance and documentation, and does not reflect best practice or measurable outcomes of services* [emphasis added] (p. 18).

The Ministry provides three options, which would not require changes to Ontario’s *Child and Family Services Act*. The first option is to move the review from annually to bi-annually, with the Ministry focusing on outcomes related to the child’s status, safety, permanency, and well-being (p. 18). For example, in regards to the safety of the child, the reviewers would check whether the child experienced abuse in his/her placement, during access visits with biological parents or relatives, or in the community, as well as noting the worker and agencies’ response to the abuse (p. 18). In regards to permanency, the reviewers would look for the answer to the question of what the plan is for the Crown Ward and how it is being executed (p. 18). In reviewing the well-being of the child, areas such as the child’s progress at school, planning for the child, placement stability, and whether or not the plan of care reflects the child’s specific needs would be reviewed (p.

18). The second option proposed by the Ministry is to only review annually a “core set of Crown wards,” which includes “those...being reviewed for the first time, [and] children identified by the Society as high risk” (p. 18). The key wording that should be noted is “*by* [emphasis added] the Society.” Currently, the Society is unable to select which files will be reviewed for the Crown Ward Review. As noted earlier, all children who have been Crown Wards for over two years are annually reviewed. The Ministry stated that with this option, the audit would focus on the outcomes as cited in option number one. The final option presented by the Ministry of Children and Youth Services is an annual self-audit, completed by each Children’s Aid Society. After the self-audit is conducted, each CAS would submit “individual reports to the Ministry for a review of the results, supplemented by either: 3a) a Ministry review of a sample of files annually; or 3b) a Ministry review of all files every three years” (p. 18).

As far as what option would best serve the needs of Crown Wards and their workers and agencies to improve outcomes, further research by the Ministry of Children and Youth Services, the Ontario Association of Children’s Aid Society, or an external researcher would need to be completed. It is unfortunate is that this October (2012) will mark eight years since the first discussion paper was released. It appears from analyzing the review, and as noted throughout this thesis, that the performance measurements have increased. The audit is more about numbers than outcomes. More regrettable, it is the Crown Wards, themselves, who are losing out as their workers have to spend more time completing the necessary documentation than spending quality time with them.

*Progress of and Change in Crown Wards and Achieving Better Outcomes*

One of the fundamental issues with the Crown Ward Review is that it neither records the progress of and changes in Crown Wards, nor establishes better outcomes for them. It does not measure improvements, such as progress at school, positive changes in relationships, placements, and/or progress in therapeutic settings. For example, on my caseload, I had a young man who was sixteen when I left my place of employment. From thirteen to fifteen years of age, he experienced twenty-one placement changes. However, in the fall of 2009, he was placed in a group home and remained there for two and a half years, with only a few periods of time in custody, until he moved out into independent living. As his worker, I felt that this was an accomplishment for this young man as we were able to achieve placement stability and work on permanency. However, under the current form of the Crown Ward Review, this young man's permanency would never be measured, either at the case or organizational level. In other words, there is no outcome measurement. The review only measures "yes" and "no" checkboxes. They include: (1) Does the child's permanency plan address continuity of the child's placement and relationships? (2) Does the child have any significant enduring relationships in his or her life? (3) Does the permanency plan reflect the needs of the Crown Ward and is there an exploration of permanency options: adoption; custody order; or customary care? (4) Has the child experienced a breakdown with legal custody prior to admission? (Ministry of Children and Youth Services, 2012). Consequently, in the above young man example, as

his worker and for my agency that has the responsibility to meet his needs, is the review able to show me whether his life has improved? Has my work with him been effective? The audit does not answer these questions. There is no evidence, from the audit, that progress or change has happened and that as his “parents” we have made a positive contribution to his life.

Across Ontario, as a child welfare field, we do not know how we are performing. Although the audit reviews every Children’s Aid Society across the province, regional or provincial trends are not tracked. The OACAS make a valuable statement regarding this issue, stating that there “is not a mechanism to easily move regional issues or inter-ministerial issues to the Ministry level where inter-ministerial issues can be addressed” (p. 29). This seems counterintuitive to the Ministry of Children and Youth Services’ levels of accountability framework. It has four levels of accountability, which ultimately should be sharing analysis and information in order to improve the quality of service by Children’s Aid Societies (Ministry of Children and Youth Services, 2005, p. 9). First, at the bottom is case level accountability, which involves the Crown Ward Review. Second, there is agency level accountability, which includes such areas as agency based quality assurance and accreditation. Third, there is system level accountability, which involves service system management. Finally, at the top is public level accountability, which releases a report card to the public. With all these levels of accountability working together, the goal is that safety, permanency, and better outcomes will be created for children in care, such as Crown Wards. However, there is a systemic disconnect. If

outcomes are not adequately measured and there is no tracking of agency, regional, and/or provincial performance measurements, the Ministry of Children and Youth Services cannot move forward in order to provide effective services. In addition, lessons from the field cannot be learned and applied to future policy decision-making. It appears from their 2005 report that the Ministry recognizes this issue, as it recommends replacing the Crown Ward Review, as well as other reviews with a “comprehensive and robust system of accreditation...a single information system...[to] make information available in usable form,” as well as reduce redundancy (p. 9).

As outlined throughout this research paper, the Crown Ward Review has developed into a task-oriented checklist for Crown Ward workers, predominately based on documentation completed. It is not concerned with outcomes or the process and can be construed as punitive. For example, on the compliance “checklist,” every task should be completed within the required timeframe, such as plans of care, social histories, medical and dental examinations, child rights reviewed, and the worker having contact with the child’s school. However, if one task is not completed within the required timeframe, such as the supervisor did not review the plan of care, then the whole child’s file is deemed out of compliance. In addition, according to the OACAS (2010), the Crown Ward Review is predominately concerned with child safety, rather than achieving child permanency or well-being (p. 30). While safety is key in any child welfare context, the focus of our Crown Ward Unit has tended to be more towards permanency or well-being, as the majority of the children with whom we work with will grow-up in foster care. It is vital

that our Crown Wards are connected with family, community, and their culture.

Consequently, the Ministry of Children and Youth Services needs to revisit its reports from 2004 and 2005. It appears that it created solid recommendations in order to improve their service delivery and that of Children's Aid Societies across the province of Ontario. Moreover, there is clear evidence in the research that the audit process should focus on outcomes performance measurements, rather than numerical ones. It appears that in the child welfare system that Crown Ward workers, supervisors, and senior management, as seen in the 2010 OACAS report, are ready for change. Now, it will require, on the part of the Ministry of Children and Youth Services, a keen desire and hard work to change the current system, specifically relating to the Crown Ward Review.

## **CHAPTER SEVEN: IMPLICATIONS FOR SOCIAL WORK AND CONCLUSION**

As a Crown Ward worker in Ontario's child welfare system, it is inevitable that performance measurements will be a part of daily work. The overall premise and use of performance measurements can be a positive tool. For the Ministry of Children and Youth Services and Children's Aid Societies, they can provide a clear focus, measure accountability, effectiveness, and efficiency, as well as provide transparency of their services. More importantly, they can also guide recommendations to improve service delivery to children in care.

However, as evident throughout this research paper, performance measurements as they relate to the Crown Ward Review have created numerous unintended consequences for Crown Wards, workers, supervisors, managers, Children's Aid Societies, and the child welfare system as a whole. The Ontario Association of Children's Aid Societies is keenly aware of the challenges that performance measurements have created. Moreover, it appears that the Ministry of Children and Youth Services is also aware that its current review system is fragmented, as outlined in its 2004 and 2005 discussion papers. However, in the last eight years, little has been done to address this issue.

As noted in the 2005 discussion paper, a vast overhaul of the current Crown Ward Review system could be completed without having to make legislative changes to the

*Child and Family Services Act*. The three feasible options presented by the Ministry should be further explored in order to determine which would adequately address the current concerns and provide the best review system to meet the Ministry's goal of "[determining] that an adequate plan of care [has been] developed for each Crown Ward and...improvements in the overall service delivery to children [have been stimulated]" (Ministry of Children and Youth Services, 2011). As far as what option would best serve the needs of Crown Wards and their workers and agencies to improve outcomes, further research by the Ministry of Children and Youth Services, the Ontario Association of Children's Aid Society, or an external researcher would need to be completed.

In the meantime, it is evident that a more comprehensive, clear, and coherent review process needs to be established by the Ministry of Children and Youth Services and implemented across Ontario's child welfare system. Several recommendations should be considered:

1. Supervisors and workers should be given flexibility to make decisions, in consultation with the Crown Ward, that are in the best interests of the Crown Ward.
2. The Ministry of Children and Youth Services needs to allow for departures. There should be recognition that there are numerous regional, agency-specific contextual, and systemic issues, such as a lack of physicians, which may result in departures being granted.

3. The issue of documentation of performance measurements must be addressed. As has been seen in the research, workers, supervisors, and the OACAS recognize that documentations are depriving Crown Wards of time spent with workers. Meaningful relationships require time in order to develop the trust that would effect change in children in care. Consequently, there needs to be a streamlining to reduce the repetitiveness of documents, and revision regarding the unmanageable time lines for plans of care, social histories, and other documentations.
4. The inconsistencies with the current review should be immediately changed. The Crown Ward Review uses various references. Standards have been developed from these references, but as the wording of the references is contradictory, confusion has been created as workers are unsure which reference to use. Further to this, there is not a clear delineation between standards and best practice. It will require changes to the original legislation of the CFSA, Foster Care Licensing Regulations, and the Child in Care Manual, which will require time and energy at various levels of government and organizations. However, in the meantime, the Ministry needs to review this area and provide the OACAS and agencies with an understandable set of standards that can be achieved, highlighting which standard will be drawn from which piece of legislation or regulations.
5. The performance measurements used should not be reduced to numerical measurements. Rather, they need to be outcome measurements. There should

also be a tracking system across agencies, regions, and the province. With effective outcome measurements and a comprehensive information system, the child welfare field will know how it is performing. Once results are gathered and critically analyzed, it is only then that improvements to the delivery of services can be made, hopefully resulting in a positive impact on the lives of Crown Wards.

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## APPENDIX

## Child in Care Standards and Relevant Foster Care Licensing Regulations

<b>Category</b>	<b>Standard</b>
<b>Admission</b>	Child placed by person known to the child
	7 day private visit
	Review Rights with the child at admission
	Fire escape review
	Admission medical and dental
<b>30 Days Post Admission</b>	Child's background information to foster parents
	Contact with foster parents at 7 days
	30 day private visit with the child
	Develop plan of care
<b>60 days post placement</b>	30 day visit with foster family
<b>90 days post admission</b>	Initial Social History
<b>Change of Placement</b>	Review Plan of Care
	7 day private visit with the child
	30 day private visit with the child
	Plan of care reviewed and changed
<b>Post Placement</b>	Review child's rights with the child
	Post placement interview with the child
<b>Annual</b>	Post placement contact with the foster family
	90 days, private contact with the child
	90 days, contact with the foster parents
	Quarterly, contact with the school
	Every 6 months, review plan of care
	Every 6 months, review child's rights with the child
	Medical, Dental, Eye (bi-annual)
	Supervisor approval
	Update social history
	ONLAC AAR completed
	Cultural Competency
Life Book	
<b>First Nation Children in Care</b>	Consultation with the Band at all planning points and intervention

	Use of Alternative Dispute Resolution Options
	Customary Care
	Annual participation in cultural activities
	Notify Band if removal of child from foster home
<b>Additional Considerations</b>	Crown Ward Order in file
	Serious Occurrence reports in file
	Incident reports and complaints (re: foster parents) in file
	Nutritional standards
	Record checks of adults in the home
	Travel letter
	Registered Education Savings Plan
	SAFE (Structured Analysis Family Evaluation)
	PRIDE (Parent Resource Information for Development and Education)

Adapted from “An Analysis of the Children in Care Standards and the Relevant Foster Care Licensing Regulations in Achieving Better Outcomes for Children” by the Ontario Association of Children’s Aid Societies, July 2010.