

Nova Scotia



**Department of
Community Services**

**Planning Document in Response
to the
Management Audit**

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DEPARTMENT OF COMMUNITY SERVICES

Planning Document In Response To Management Audit

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EXECUTIVE SUMMARY

After careful review, the Department has decided to act upon 84% of the recommendations contained in the Management Audit report. By combining these viable recommendations with the ongoing restructuring plans and the principles of re-engineering, the Department of Community Services has developed a new management and delivery model which will permit it to deal effectively with the many challenges ahead.

In the new structure, services will be delivered via a fully regionalized model which will maximize the principles of layering and staff decision-making. Regional boundaries will be co-terminous with those previously adopted by Government, resulting in a decrease in Regional Administrators from seven to four. Regional Administrators will be relieved of client program management responsibilities and will be accountable for the development and administration of regional funding envelopes, program delivery, community agency support and intra-agency cooperation and coordination.

A significantly realigned and rationalized Head Office will provide improved strategic leadership, program support and consultation and strengthen program evaluation services. Department divisions will be reduced from six to four and divisional heads, in concert with Regional Administrators, will serve as the senior management team of the Department.

All programs will be aligned on rationalized service continua and the prime focus of all programs will be in the preventive and/or least intrusive elements of service. Both field and Head Office managers will be held accountable for regional services integration and planning with agencies and/or other Departments of Government. Increased community input will be developed with the formation of regional advisory councils.

By June 30, 1997, a combination of restructuring and de-institutionalization will result in a 38.5% decrease in the staff complement of the Department of Community Services from 1,084 to 667. These savings will be largely predicated upon structural changes in Head Office, de-institutionalization initiatives and the transfer of Young Offenders and Court Services to the Department of Justice. Significant changes in the field complement will occur only after the full impact of the provincial/municipal exchange of services is implemented.

Each divisional outline contains a detailed implementation plan and anticipated time line. Accompanying the Implementation Plan is a suggested communications and staff education strategy.

CHAPTER 1

A VISION FOR THE REST OF THE DECADE

Background

The mandate of the Department of Community Services is to provide income support to Nova Scotians who for a variety of reasons are unable to provide basic necessities such as food, shelter and clothing for themselves, to provide services and programs for disadvantaged, disabled or dysfunctional families, individuals and children and to protect vulnerable populations at risk (eg., children) when necessary. This has been the mandate of the Department since its inception and remains so today. Through the years, the constancy of the mandate has resulted in only minor changes in the vision of program and service delivery espoused for the Department at any given time. Most of the changes have related to adjustments in focus or a change of priority in terms of program and service delivery. The Management Audit has presented an opportunity for major, substantive change and re-engineering which will be greater and more far reaching than anything the Department has known since it was first established as the Department of Welfare in the 1930's.

The culture of the Department is one which rests on a commitment to service to vulnerable, socially and economically disadvantaged Nova Scotians, whether they are children or adults. It has a sense of urgency in meeting need and a distinct action orientation. When services are sought by or on behalf of citizens, the Department must respond within its' legislated mandate and responsibilities. Its services and programs are for many children, families and individuals the last resort.

The new VISION for the Department must retain that commitment while refocusing and redirecting a greater amount of its energy to prevention and rebuilding for better service to Nova Scotians.

A dynamic for action exists. Now, we must move forward.

The Vision

It is the Department's intention to create a renewed and energized structure which retains some elements of central oversight and control while empowering and expanding the managerial and decision-making base in the community and ensuring its legislated responsibilities are met. **The vision for renewal of the Department is the development of a streamlined and efficient head office and community based delivery structure which provides programs and services that foster independence amongst its clients, where and whenever possible, and affords protection for vulnerable adults and children, and strives to prevent the occurrence or reoccurrence of social problems.**

Principles for the Reform

In considering the extent and type of reform to be undertaken, the Departmental members of the Implementation Committee developed a set of principles to guide them in their deliberations. These principles evolved from the many discussions members of the team had with staff during the process of developing a Mission Statement and Operating Principles and during the Management Audit itself.

The principles constituted measurements or guidelines against which all restructuring of its programs, services, delivery system and organization would be evaluated to determine whether or not they fit within the vision. They are presented here as the basic principles upon which the reform is based.

- a. Provision of services by non-profit agencies where possible
- b. Decentralization of decision making
- c. Community-based orientation of program and service delivery
- d. Purchase of service rather than direct delivery
- e. Rationalization of service delivery based on a continuum of care concept in each program
- f. Comprehensive assessment processes integral to all program structures
- g. Philosophy of minimal intervention to underpin all programs
- h. Emphasis on prevention

In addition to the principles outlined, there were many other factors considered such as the need to ensure that there are clear measurable standards for programs and services, the efficiency of operation and the ability to ensure accountability for the use of public funds and the quality of service to clients. These will be integral parts of the building process.

Implementing The Vision

The Management Audit recommends several changes in both the Head Office and the delivery structure. Those recommendations have been taken into consideration in the response to the audit; however, they have not been totally accepted in those instances where they were considered to be of minimal or no assistance. One such example is the reorganization of the Family and Children's Services system. The auditors' perception of the significance, role and function of the community-based children's services agencies was not accurate and the recommendations were not in line with the current philosophy and thinking in relation to community empowerment and community-based services.

Implementing the Vision means major changes throughout the Department and in some of its related agencies. When the process has been completed the Department will:

1. **have a streamlined Head Office structure** with two fewer divisions than it has currently;
2. **have a functionally different Head Office.** Staff will become responsible primarily for monitoring, control, budget, evaluation, standard setting, program review, cost-sharing, audit, policy development, strategic planning, operational planning;
3. **have fewer regions than it does now.** The number of regions will be reduced from the current seven to four. The Management Audit recommends the regions for the Department be realigned to be coterminous with the regions established for the Department of Transportation and Communications.
4. **enhance the role, function and responsibility of the field manager(s).** Management of the new regions will rest with a senior manager who will have overall responsibility for the total operation of the region including negotiating budget and other matters with the agencies and organizations within the region that receive funding from the Department;

Realigning the management configuration in the regions may result in a reconfiguration of staff in each region, offices, etc.

The Department of Community Services has a vision for the future. It is creating a healthy atmosphere for change and is committed to moving forward. With these elements in place the bias for action will ensure that this vision becomes reality.

CHAPTER 2

THE CLIMATE FOR CHANGE IN COMMUNITY SERVICES

Background

The need for profound change across all programs is not a new concept to staff in the Department of Community Services. Over the past several years it has become clear that the major demands placed upon the cumbersome two-tier income assistance delivery system and the increasing need for complex and costly interventions with children, families and mentally handicapped adults can only be addressed by a fundamental restructuring of program options and service delivery mechanisms. Without such wide-sweeping reform the current system will be unable to address either the legitimate needs of Nova Scotians or access the resources necessary to provide sustainable services.

As a first step in the reform process, the Department embarked upon a major exercise with all staff to determine whether the Department's mission was consistent with contemporary needs. The resulting Mission Statement (Appendix A) which was completed in 1992 has formed the philosophical basis for all subsequent reform initiatives. During the same period, wide-ranging internal consultations were held to develop a proposed organizational structure which would reflect the refocused mission of the Department. Both the provincial Auditor-General and the recent Management Audit acknowledged the considerable work which had been done on reorganization and recommended that the Department proceed to implement a version of the plan.

In the same period, a number of significant program reform and re-engineering proposals were developed, particularly in the income assistance area, but none were ever adopted by Government. Had some of these initiatives been implemented, many of the challenging and costly anomalies which will be part of comprehensive social security reform in Nova Scotia would have already been clarified. As a response to what was perceived as a lack of focus on these significant issues, staff began in the spring of 1993 to develop several strategic planning exercises with a view to providing Government with a series of key options in areas as diverse as income assistance reform, provision of holistic services to children and adolescents and community-living options for seniors and the mentally handicapped. About fifty staff in the Department were involved in the first phase of this exercise. Subsequent phases of the process were put on hold pending the outcome of the Management Audit.

As part of the initial program scan which was undertaken to support the strategic planning process, staff identified the need to develop a set of clear Operating Principles which would flow from the already completed Mission Statement and which would serve to underpin the restructuring process. These Principles were workshopped throughout the Department and received considerable input from staff at every level. Final work on this project was completed in the spring of 1994. See Appendix B.

In this climate which was singularly supportive of profound change, the announcement of the joint Management Audit process for the Departments of Health and Community Services was greeted with enthusiasm. Staff worked closely during the audit process and at critical stages during the audit, program and field managers met to discuss possible implications and recommendations. In so far as it was possible, every attempt was made to inform staff about the progress of the audit team and to communicate with them about what they could expect. This process worked well and was followed by a comprehensive internal and external communications strategy which ensured that all staff and agencies received copies of the final report within 24 hours of its release and that within that time frame, staff meetings were held in every office and facility of the Department to begin the feedback process. By written invitation staff were encouraged to communicate their reactions and thoughts on the audit directly to the Deputy Minister and to date over fifty responses have been received from line staff alone.

Departmental Objectives

Given the need for major and timely reform within the social services system, the Department immediately launched an exercise to review the Management Audit recommendations. This exercise, however, had the much broader objective of marrying the Audit recommendations with the other change initiatives which were already underway. At the same time, the objectives of the Expenditure Control Plan and the Early Retirement Incentive Program have combined to constrain both human and fiscal resources, thus challenging the Department to rationalize and restructure in a more compressed time frame. The results of all these endeavours will be a much more comprehensive reform than that originally envisioned in the Management Audit.

It is therefore the Department's intention to create a detailed strategic and operational blueprint which can meet Government cost containment objectives while it also serves as a basis for the provision of sustainable services to Nova Scotians in need.

Process

As part of the implementation process, a small internal committee was formed which consisted of Bessie Harris, Administrator, Research, Planning and MIS; George Hudson, Acting Administrator, Finance and Administration; Frank Capstick, Regional Administrator, Cape Breton Region and the Deputy Minister. This group met weekly from the public release of the Audit report and met approximately every two weeks with representatives from Priorities and Planning. In addition, the committee consulted with a number of senior staff as appropriate and met on several occasions with the Minister, Dr. Jim Smith.

On at least two occasions, full day meetings were held with all senior program and field staff within the Department to review the recommendations contained in the audit report and to discuss options for broadening the exercise as outlined above. During the process, discussions about specific recommendations and ideas for changing departmental services were held with the following groups: the Deputy's Committee on Children's Services (representative stakeholders from the community), municipal social services providers in Metro Halifax and Industrial Cape Breton and an ad hoc committee of Presidents of Family and Children's Services agencies. Meetings to review the audit document specifically were also held with a number of individual stakeholder agencies including the Nova Scotia Association of Social Workers. In addition the draft Plan was discussed with an independent children's services consultant from out of province.

In late July all staff within the Department received a written update on the work of the Implementation Committee. Utilizing a process similar to that adopted for the quick dissemination of the original Management Audit report, it is the Department's intention to develop a comprehensive communications strategy to unveil the "new look" of Community Services once the proposal has been approved by Priorities and Planning. In this way, staff hope to foster a high degree of enthusiasm and support for the profound changes which will begin to occur thereafter. As an initial step in the transformation, the Department intends to provide all staff and interested stakeholder agencies the opportunity to join in a process for choosing a new name reflective of the Department's new vision.

EXISTING PROGRAM AND SERVICE DELIVERY PROFILE

In order to context the "new look" of the future vision for the Department of Community Services it is important to review the existing program and service structures which govern, and in many ways dictate, the scope and process of current operations. While existing program parameters have served the Department well in the past, it is clear that they no longer provide the most efficient or cost-effective framework on which to base structural reform. Although the points outlined below are by no means intended to provide an exhaustive guide to the nature of current operations within Community Services, the key issues raised are illustrative of the challenges facing the implementation of the Department's vision.

Structure of Program Continua

- At present, no full continuum of service/program models exist other than in the Department of Community Services Young Offender's Program.
- Access to service continua exist both internally (i.e., non-integrated programming for children with special needs) and externally (i.e., mental health services for children reside with the Department of Health).

Service Delivery Mechanisms

- A wide range of delivery models are currently in place ranging from fully privatized to non-profits (Children's Aid Societies) through to direct delivery (Family Benefits).
- Municipal social service departments are fully autonomous in rate structure and staffing, although a number (36) contract with Department of Community Services or a Children's Aid Society to provide service according to municipally directed policy standards.
- Many services and programs are contracted out to the private sector (counselling, etc.).
- A mix of private-for-profit, private non-profit and public sector agencies provide services in child care, vocational rehabilitation and residential services.

Reporting Structures

- Reporting structures are complex and diverse:
 - institutions report via program heads
 - some staff such as those in the Family Benefits Program report directly to Supervisors in field offices and are located there
 - programs such as Adult Protection and Parent Resource Workers report directly to Head Office Program Staff although they are regionally located.
- Within Head Office several anomalies exist including separation of Personnel from Financial Services (Payroll) and placement of Vocational Assessment Services in the Field Services and Personnel Division.

Decision-Making

- Although decision-making is decentralized to the regional and district level in many core programs, some retain a strong Head Office direct management component.
- Unlike their counterparts in municipal social services, Family Benefits field staff (caseworkers) do not have direct decision-making authority. In other programs--e.g., child welfare--the Department operates, staff at the caseworker level have direct decision-making authority.
- All major decisions relating to program change, budget and strategic direction are made collaboratively by Senior Management.

Program Review and Evaluation

- Most programs utilize their own tools for program review and evaluation; there is no departmental standard guideline and/or protocol to coordinate these efforts.

Policy Standards

- Most programs possess formal standards and/or protocols for key elements of service delivery.
- Municipalities apply a total of 34 different policies and standards in the provision of social assistance. While these are submitted to the Minister for review, there is at present no formal mechanism to achieve consistency in either content or application.

Caseload Standards

- Other than in the areas of child welfare and vocational rehabilitation, solid research on optimum program caseload size does not exist as it does in some jurisdictions. "Standards" are largely based on the "historical" or experience gained over the years regarding caseload size.

Deinstitutionalization

- No approved policy is in place, though the Department of Community Services has taken a number of significant and controversial moves to limit admissions, downsize capacity and close facilities (C.T.C.s in Digby and Pictou and Mary's Hill A.R.C.).
- Further initiatives are on hold pending the budget process and resolution of public issues surrounding the integrity of the process used by the Minister's Advisory Committee on Services to Children with a Mental Handicap.

From the points outlined above, it is clear that in its current configuration, the Department of Community Services is burdened by a complicated array of delivery mechanisms and anomalous reporting structures which make the creation of genuine service continua an objective which is difficult to achieve. There are however a number of encouraging characteristics -- strong tradition of working with private sector and community groups and decentralized decision-making in several major programs -- upon which the newly-reconfigured Department can rely to build more holistic models of operations. Building upon and enhancing these proven strengths while at the same time creating new service paradigms, where none had existed before, was a major focus for the Implementation Committee.

APPENDIX "A"
MISSION STATEMENT



MISSION STATEMENT

The Mission of the **Department of Community Services** is to develop, administer and deliver social services and income maintenance programs to Nova Scotia's people and communities.

We recognize cultural and racial differences between people and respect their desire to decide their own futures. We believe that they are responsible for helping to ensure their own well-being.

We encourage and help people to become independent and to achieve their full potential.

We provide support and financial maintenance to children and adults who are physically or mentally challenged or both, or to those who can not become fully independent.

We work towards partnerships with people and communities to address social needs and to prevent social problems.

APPENDIX "B"
OPERATING PRINCIPLES



OPERATING PRINCIPLES

The **Department of Community Services** is committed to these Operating Principles, which are based on our Mission Statement.

Our primary responsibility is to meet the basic needs of individuals and families. The foundation of our planning and evaluation is a philosophy of prevention.

The family in its many forms remains the single most important unit in our society. Our programs and services help families accept responsibility for their members.

The department has a legal responsibility to provide support and care for children that considers the needs of individual children and their families.

The department seeks to develop and support programs that help people in need realize their capabilities and maintain their independence.

The department gives priority to cost effective programs that allow elderly and disabled persons within its mandate to stay in their own homes and communities.

The department ensures a high quality of service by setting standards for and evaluating its programs and by developing and training its staff.

CHAPTER 3

THE IMPACT OF RE-ENGINEERING STRATEGIES

The long-standing commitment to reform and restructuring within the Department has been complimented by Government's commitment to the principles of re-engineering. The application of these principles has resulted in a proposed organizational structure which can best be characterized by the following hallmarks:

■ **Commitment to Function, not Program**

Wherever possible, the Implementation Team has attempted to identify service continua which focus on function, not existing programs, and management structures. This has resulted in the elimination of duplicate functions in areas such as claiming, community supports to children, intake/assessment in employment programs, etc.

■ **Commitment to Decentralized Delivery Model**

Once the proposed Implementation Plan has been approved, the Department will take immediate steps which will result in the full decentralization of all services by April 1, 1995. Programs with management currently vested in Head Office will be regionalized; i.e., In-Home Support for Children, Vocational Rehabilitation Services, Vocational Assessment Services, Adoption Services, Parent Support Programs, etc.

■ **Commitment to Bridging the Silo Mentality**

Virtually all programs offered by the Department of Community Services can be viewed as having important crossovers with services offered across the departmental spectrum. The new model focuses on finding common solutions, development of real working protocols and challenges both Head Office and field managers to develop new partnerships and improved collaborative strategies.

■ **Commitment to Delaying and Line Staff Decision-making**

Wherever possible, decision-making will rest with field staff who will have on-line file access and authorization to determine eligibility, request services and assessment, stream clients and manage caseloads. As a result, some Head Office supervisory and administrative positions will become redundant.

■ Commitment to Community/Stakeholder Consultation

In the fully decentralized model, Regional Advisory Councils will provide input and support to regional management staff and will assist in developing program priorities and/or special initiatives. Further, many service agencies such as Children's Aid Societies already have community based boards and these will continue to be an integral part of the service spectrum.

■ Commitment to New Balance of Head Office/Field Responsibilities

A streamlined Head Office will shift from a **directive** to a **supportive** or consultative role for the field. Regional Administrators will assume true budget management responsibility and will be responsible for the provision of effective and efficient programs in the field. Head Office will provide program support, consultation and program review functions.

■ Commitment to Improved Accountability and Quality of Services

The restructured division of Strategic Planning and Policy will ensure improved accountability in the following ways:

- ▶ assume responsibility for field consultation and monitoring
- ▶ develop and deliver staff training services to meet needs
- ▶ assume responsibility for program evaluation and for leadership of program review process

■ Commitment to Improved Financial, Personnel and Technological Support

The new Finance and Administration division will provide additional or improved services to support the various administrative requirements from the new and dynamic decentralized model. These improvements will be accomplished by:

- ▶ merging personnel/payroll/financial services and MIS into one division
- ▶ providing more service using the latest technology to the field offices

■ **Commitment to Long-range Planning and Strategic Vision**

An expanded and enhanced strategic planning branch will be created in the Strategic Planning and Policy Division by reallocating and training existing personnel. The new division will be aligned with the Deputy Minister's Office to assure the highest possible level of corporate commitment.

■ **Commitment to Improved Strategic Use of Technology**

Pushing decision-making to the lowest possible staff level will necessitate development of new technologies and program applications. While this focus will be most visible in the Income and Employment Support Programs, other applications will be developed to support programs such as Residential Services, In-Home support for Children, etc.

CHAPTER 4

RESPONSE TO THE RECOMMENDATIONS OF THE MANAGEMENT AUDIT

The Management Audit has two sets of recommendations most of which are the same but some of which differ. Volume One contains one set of recommendations and Volume Two contains a second set. In addition to the confusion in trying to interpret recommendations which are not exactly the same, there are some recommendations which appear only in one volume or the other and for which there is no explanation or no sufficient explanation available in the text in either volume.

In order to facilitate the review and address all the recommendations contained in the two volumes of the Management Audit, the recommendations section at the end of Volume Two has been used as the primary point of reference and note made of variations in other parts of the Report. Like recommendations on the same subject have not been grouped together in the Audit. So that the reader may more easily refer to the original text, if he/she so wishes, the like recommendations have not been grouped together in this Report either. The reader will find they are, therefore, scattered and repetitive thus reflecting the original document.

Overall the Department accepted 87% of the auditors recommendations.

**Continuum of Services and Access
Prevention and Community Action**

RECOMMENDATION:

The Department of Health and Community Services should develop a model to integrate their prevention, community and health promotion programs which gives the lead to the Department of Community Services with direction and resources coming from both Departments.

Consideration should be given to expanding the services to those in other Departments with resources and their representation on the Steering Group or other formal governance structure.

RESPONSE:

Disagree. The Department of Health is undergoing major changes as part of health reform and intends to move much of the responsibility for health promotion and prevention to regional and local health boards along with the funding for all programs and services, including promotion and prevention. The Department of Community Services is also experiencing major changes which will address the need for a greater emphasis on prevention. This recommendation is not considered appropriate to the restructuring taking place in either department.

1. Continua of Care

**1. Income Support and Employment
Organization**

RECOMMENDATION:

Combine the Employment and Training Programs of Vocational Rehabilitation with Family Benefits in a new Division. This would reflect a priority for the Vocational Counselling Program toward the potential Family Benefits recipients.

RESPONSE:

Agree. The Department of Community Services intends to address this recommendation with the creation of a new division of Income and Employment Support which will incorporate the existing provincial and municipal income assistance programs with the services and programs related to rehabilitation and employment and community support services for adults now vested in the current Rehabilitation and Community Services Division.

TIME FRAME:

September 30, 1994.

Job Creation

RECOMMENDATION:

The Department should develop a strategy and plan for a job creation program, preferably for Family Benefits recipients.

The Department should make arrangements with other programs to employ recipients to the extent possible.

RESPONSE:

Agree. The Department of Community Services has a history of creating employment for its recipients through its Vocational Rehabilitation Programs including Career Counselling for Single Parents, SARS Initiatives and Employment Resource Centres. It also brokers employment initiatives through funded agencies such as workshops and municipalities. The Department has successfully completed negotiations with the Federal Government for the funding of an employment program targeted at social assistance recipients which will operate over a three-year period. This program, COMPASS, was announced by the government in the recent Speech From the Throne and a joint Federal/Provincial announcement of Federal Support was made by the Honourable Dr. Jim Smith and the Honourable Lloyd Arsenault on June 23 in Halifax.

Under re-structuring, the Department will take a more pro-active role in identifying Income Assistance clients who have potential for employment.

TIME FRAME:

Start-up for COMPASS will be October, 1994.

1. Intake /Assessment

RECOMMENDATION:

The intake/assessment function should be modified in ways that allow for:

- classification and screening into employment programs; and,
- varying levels of involvement of people on Family Benefits.

RESPONSE:

Agree. The Department is developing a new intake and assessment system to readily stream individuals into employment initiatives and to divert them from the social welfare system where possible.

TIME FRAME:

Phase One: September 1, 1994

Phase Two: April 1, 1995 following the takeover of municipal social assistance

**2. Child Protection and Care
Organization**

RECOMMENDATION:

Transfer services for mentally disabled and handicapped children from Vocational and Rehabilitation Services to Family and Children's Services.

RESPONSE:

Agree. Under re-organization services for children will not be determined by category but rather by need. It is our intention to act on this recommendation and de-centralize services for all children on a regional basis.

TIME FRAME:

September/ October, 1994.

Assessment and Classification

RECOMMENDATION:

The Department should implement a formalized assessment function to determine the needs of clients in terms of the type of placement and other related services required.

RESPONSE:

Agree. The Department intends to strengthen the assessment process at the front-end for all its programs.

TIME FRAME:

This work is already underway and will be completed by January 1, 1995

Residential Assessment/Crisis Centres

RECOMMENDATION:

The Department should reduce the use of emergency classification centres by up to 50% by using other placement options for emergency placements and arranging for the most appropriate assessment, which need not be linked to the length of emergency placement.

RESPONSE:

Disagree. The Management Audit shows a lack of understanding of the current system and the place of emergency placement centres in it. There are currently four such centres with a total of twenty emergency beds. The system is inadequate in terms of responding to need. Reducing an already under-resourced system further will create chaos and hurt the children who require the service. (For further explanation of this issue, see Appendix C, Chapter 7)

TIME FRAME: N/A

Young Offenders and Family Court

RECOMMENDATION:

All Young Offender programs should be incorporated under a single authority.

Since the Province is moving toward the implementation of a Unified Family Court as a Division of the Supreme Court of Nova Scotia and given that the Department of Justice already handles a portion of the YOA, it is recommended that Young Offenders administration be transferred to the Department of Justice.

Clearly, Family Court will be transferred to the Department of Justice under the Unified Family Court. Even in the absence of the UFC, there are advantages in assimilating the Family Court with other provincial court services. It is, therefore, recommended that Family Court be transferred to the Department of Justice.

RESPONSE:

Agree. The transfer process is already underway with the Department of Justice. The effective date for the transfer of Young Offender and Court Services is August 1, 1994.

TIME FRAME:

August 1, 1994

Private Adoption

RECOMMENDATION:

Eliminate private adoption work by child welfare workers. (This recommendation is not in Volume One)

RESPONSE:

Agree. Changes will be made to create four regional specialized adoption services. While this restructuring is being undertaken, the issue of relative versus non-relative third party adoptions will be addressed. The Minister of Community Services has just recently received a report from a Committee he appointed to study Adoption Services. Its recommendations must be considered. (For more information see Appendix B, Chapter 7)

TIME FRAME:

November 30, 1994 at the earliest.

CTCs and NSYTC

RECOMMENDATION:

Place NSYTC (and CTCs) under the responsibility of Family and Children's Services, consistent with the continuum of care for child protection and care.

Closure of NSYTC should proceed ahead of CTCs.

RESPONSE:

Agree. The Department has undertaken an initiative to develop a comprehensive plan for the development of services for those children currently being served in the NSYTC and the CTCs and the community. It is agreed that these services be re-situated in the Family & Children's Service Division. A close-out schedule for these institutions has been announced and, consistent with the Auditor's report, the NSYTC will be first to be closed.

TIME FRAME:

June 30, 1996 (NSYTC) March, 1997 (Dartmouth CTC) - (Dates for Evergreen and CTC Sydney are to be decided.)

Child Welfare Delivery

RECOMMENDATION:

Develop a plan for reducing the number of Children's Aid Societies and District child welfare offices so that there is one per region, plus the Micmac Agency. Changes in the delivery structure for child welfare services should incorporate the results of in-depth consultations with delivery agencies.

The Department should investigate additional opportunities for rationalization of other services on a regional basis.

RESPONSE:

Disagree. These services are community based and operated by local community boards. In the shift toward greater decentralization, the empowerment of communities and local decision-making the current system is viewed as an asset. To centralize such services is contrary to the direction being taken. (For further details, see Chapter 7)

TIME FRAME: N/A

Adoption

RECOMMENDATION:

Centralize adoption services in Halifax and reduce the number of workers so that a standard caseload ratio of approximately 15 cases per worker is maintained. While in excess of the standard recommended by CWLA, this caseload will be carried by workers specializing in adoptions, with no private adoption or other case responsibilities.

RESPONSE:

Disagree. The Management Audit incorrectly identified the number of staff currently delivering this Program and failed to recognize the workload activity its delivery entails. Furthermore, the Audit underestimated the mandate of the placement agency's responsibility to find permanent homes for children within their care. Again, centralization would be an inappropriate manner to respond to children—particularly those that are multi-challenged and difficult to place. Centralization of services/resources will result in less accessible services for clients. The Department proposes an alternative which will save money while preserving an adequate level of service to clients. (See Appendix B, Chapter 7)

TIME FRAME: N/A

Protection and Care

RECOMMENDATION: (This recommendation is contained only in Volume Two)

Child welfare staffing levels in District offices and agencies should be adjusted to make caseloads per staff more equitable on a province-wide basis.

RESPONSE:

Agree. The Department's strategic plan would be to allocate resources on a uniform and consistent basis, taking into consideration the unique requirements based on geographics, demographics, cultural and social diversities of the clients served by the various child welfare agencies across the Province.

TIME FRAME:

September/1994

Purchased Counselling

RECOMMENDATION:

Family and Children's Services should:

- purchase, to the fullest extent possible, mental health services from local mental health clinics and institutions
- in conjunction with the Mental Health Services Division, develop a consistent set of standards for delivery of services by all clinics and institutions to F&CS

The provision of services to Family and Children's Services Division by mental health clinics should be governed by purchase of service contracts which clearly identify the types of services (both at outpatient and institutional levels) which will be provided and the cost of these services.

RESPONSE:

Agree to the extent the Management Audit addressed the matter. In fact, contracts are now in existence with some mental health clinics. Some years ago, the Task Force on Family and Children's Services, 1987, tried to overcome the systemic problems between the two philosophically, legislatively, culturally and operationally different systems of Health and Community Services by recommending the appointment of two Co-Directors of Child and Adolescent Services; one in Health and one in Community Services. Their mandate was to make the two systems work collaboratively and more effectively to meet the needs of children, specifically those children within the child welfare system. After almost six years of work, there is very little change in the way in which the mental health system responds to the needs of the thousands of children and families who enter the children and family services system each year. More radical action is required to create real change. The Implementation Committee has made recommendations for change in Chapter 7 of this Report.

In terms of purchased counselling because of the inflexibility of the mental health system and its inability to respond, the Department of Community Services purchases the major portion of its assessment and counselling services for children from private community practitioners.

TIME FRAME:

Currently underway

3. Adult Protection and Care

RECOMMENDATION: (Not in Volume One)

The Adult Protection continuum of care should be the primary responsibility of the Department of Health and should be implemented at the regional health authority level with a central support group closely associated with the Co-ordinated Home Care support group of the Department of Health.

Small option homes should be licensed by the Province or through approved agencies against standards which reflect a rate structure.

RESPONSE:

Agree. Approximately one-third of referrals to Adult Protection are received from health agency personnel and services required are primarily offered through Department of Health funded agencies. Transferring of this Program to the Department of Health would allow for easier access to support services such as Home Care, In-Home Support and Homes For Special Care. It further provides for opportunities to standardize the assessment and classification of individuals requiring this type of service.

Agree. Small Option homes are expanding to meet the need for community-type placements for the mentally challenged and the mentally disabled as well as for seniors unable to remain in their own homes. Service providers and Municipal Social Service Departments are monitoring by means of informal guidelines the operation of these homes. There is an expressed view for the need for more formal regulations and controls. A special committee is reviewing this issue and will report its recommendations to the Minister.

TIME FRAME:

See Chapter 12 - 3.

4. Long Term Care

RECOMMENDATION:

Establish a unified assessment/case management function which has responsibility for care planning decisions on the full range of long-term care services. A standardized long-term care assessment tool should be developed/selected and implemented across the province. Staff responsible for delivering home care and in-home support services should be involved in any decision to place a client in an institutional setting to ensure that all non-institutional options are exhausted first.

The Department of Health should have the lead responsibility for long-term care.

Responsibility for any Residential Care Facilities serving the elderly and physically disabled should be transferred to the Department of Health.

RESPONSE:

Disagree. This set of recommendations is extremely confusing in terms of the auditors' use of the term long-term care. The mentally handicapped and mentally challenged should, according to the auditors, remain in Community Services. The responsibility for the one facility serving the physically disabled will be transferred to Health. The responsibility for the elderly in Homes for Aged and Nursing Homes and Home Care was transferred to the Department of Health in 1994. There are no Residential Care Facilities designated for or serving only the elderly.

TIME FRAME:

- **Assessment/Case Management for Community Services clients and an assessment tool were explored and recommended in the Report on Long Term Care released by the Department in 1994. The recommendations will be acted upon within one year of the restructuring of the Department.**
- **Only one private non-profit facility serves solely the physically disabled. Responsibility for it will be transferred to Health by September, 1994.**

5. Mental Health

RECOMMENDATION:

Understandings should be developed between the Mental Health Division and the Divisions in Community Services regarding co-operation to meet client needs. Mental Health Division should be accountable for providing appropriate services through a provider/buyer relationship, similar to the arrangement made by the Young Offender Program.

RESPONSE:

Agree. Please see the response to Purchased Counselling. This recommendation is similar to the one on Purchased Counselling.

TIME FRAME:

Understandings and contracts already exist and will continue to be expanded, as appropriate.

6. De-institutionalization

RECOMMENDATION:

In order to fully benefit from de-institutionalization, it will be necessary for both Departments to:

Establish targets for the number of in-patient beds for all services, including children in institutions; mentally and physically disabled adults and children; the elderly; and, young offenders. Targets for acute care and psychiatric beds have already been established.

Develop a policy and implementation plan which takes into account alternative services to institutions.

Develop strategic plans which incorporate the targets for institutional beds in light of other Departmental priorities and plans.

RESPONSE:

Agree. The Department of Community Services has undertaken a number of major reviews under the auspices of regional "Officials Committees" and a Minister's Committee to evaluate the future use of CTCs and the Youth Training Centre, as well as institutions for adults. In every case, the principle of de-institutionalization has gained wide-spread endorsement. It is the Department's plan to continue to adopt the recommendations of these committees with respect to community based placements as well as establishing a minimum requirement for in-patient beds for the identified population. A draft policy on deinstitutionalization has been developed and will be completed and presented to Government within the next two months. Announced closures of institutions have already been made and the Minister currently has a committee in place examining the interim needs related to the Children's Training Centres. A committee has also been established to look at the future use of the Nova Scotia Youth Training Centre.

TIME FRAME:

To be completed within the next twelve months.

Capacity of Institutions

RECOMMENDATION: (Not in Volume One)

Develop a plan to maximize the benefits in the form of economies and efficiencies of de-institutionalization (acute hospitals and other facilities) by addressing the capacity issue (i.e. declining occupancy currently in many facilities which will grow with further deinstitutionalization) through:

- . merger of facilities
- . integration of programs
- . closure of institutions

Ensure that the issue of institutional capacity is incorporated as a key element in the plan for de-institutionalization.

RESPONSE:

Agree. As responded to under previous recommendations, the measures suggested are currently being implemented.

TIME FRAME:

Current

Fit with Mandate

RECOMMENDATION:

There is a requirement to determine the appropriateness of the location for the following:

- . Housing related services in Community Services
- . Family Court
- . Young Offenders

Family Court and Young Offenders are addressed as part of the continuum for child protection and care.

RESPONSE:

Agree. The Family Court and Young Offenders Programs are to be transferred to the Department of Justice, effective August 1, 1994.

It is the Department's intention to integrate its Social Housing and Community Service Programs into a newly created Income and Employment Support Division. This Program Division will engage in primary prevention and provide essential support services as well as community and economic development initiatives. The Department has already developed an expertise in delivering housing programs for SARS clients and is seen as well-positioned to respond to the anticipated Federal re-allocation of resources to the Provinces.

TIME FRAME:

Spring, 1995

Support to Education

RECOMMENDATION:

Undertake "needs assessment" study as a first step in the determination of a strategy for accommodating (or other options) for the various types of special needs children within the school system.

The Deputy Ministers of Education, Community Services and Health should establish a clear plan of action for resolution of this issue within a three-month period.

RESPONSE:

Agree. The Management Audit failed to take into consideration the current linkages between the Departments of Education and Community Services. This structure provides the opportunity for senior officials to develop an inventory of all outstanding concerns. With regard for financial constraints, the Deputies for both Departments have prioritized issues to be addressed and are developing protocols for action. (See Appendix D, Chapter 7)

TIME FRAME:

Currently underway.

Organization

Decision Making-Role of Information Technology

RECOMMENDATION: (Differs from Volume One)

MIS group should explore Executive Information Systems (EIS) commercial packages.

MIS should explore, with greater emphasis, ways of providing improved report generation of major systems in support of decision-making.

MIS should give priority to examining key systems deficiencies with regard to report generation and data outputs in support of decision-making, including preparation of an action plan.

Greater emphasis should be given to upgrading, development of MIS systems.

Explore commercial software packages to provide reporting and ongoing capabilities.

RESPONSE:

Agree. These recommendations are part of the overall planning underway for MIS.

TIME FRAME: Current.

Organization: Departmental Integration

RECOMMENDATION:

The continua of care which have been identified are intended to address inter-departmental integration from a service delivery perspective. It is, therefore, recommended that more complete integration of the two Departments is not appropriate at the present time, given the nature and intent of other, significant changes (regionalization, de-institutionalization, municipal reform, welfare reform) in organization to which the departments are committed in the short to medium term.

RESPONSE: Agree.

TIME FRAME: N/A

Planning Research and Evaluation

RECOMMENDATION:

Establish a centralized program evaluation unit with a clearly defined mandate and reporting relationships, in the planning, policy, research divisions of each Department.

Strengthen the planning, research and program evaluation resources of each Department. The recommendation is particularly relevant for the Department of Health in view of the future role of the Department as a policy, monitoring and support organization for the Regional Health Authorities.

RESPONSE: Agree.

TIME FRAME:

Will be implemented with the restructuring and creation of a new division in the Fall of 1994.

Program Review/Audit

RECOMMENDATION: (Not in Volume One)

Program review functions should be centrally co-ordinated within the program evaluation unit of the policy, planning research divisions of both Departments.

RESPONSE: Agree.

TIME FRAME: Fall, 1994.

Licensing

RECOMMENDATION: (Not in Volume One)

Leave licensing functions as currently constituted in each Department.

RESPONSE:

Disagree. Currently, the Department of Community Services does licensing for both its own and Health's long-term care facilities. This was an agreed upon temporary arrangement which was originally scheduled to conclude July 31, 1994 and is currently under review by the Deputy Ministers.

TIME FRAME: Ongoing.

Financial Services and Field Services and Personnel Divisions

RECOMMENDATION:

Merge financial, field services, personnel and staff training functions in one division, as soon as appropriate.

Review the role and function of the field services (in the new division) in light of re-alignment of program divisions.

RESPONSE:

Agree. A new division is currently being structured, called Finance and Administration to merge financial services and field services and personnel. Staff training will be incorporated in a new Strategic Planning and Management Support Services Division.

TIME FRAME: Fall, 1994

Impact of Changes in Continuum of Care

RECOMMENDATION:

Recommended changes are detailed under Continuum of Services and Access in Chapter 2.0.

RESPONSE:

See other sections where this issue has been addressed.

Regionalization

RECOMMENDATION:

Requirements identified to address this issue included:

- . a review of the feasibility of having the same regions for both departments to facilitate integrated planning and service delivery
- . development of a plan for regionalization, consistent with above

RESPONSE:

Agree. The Department of Community Services regions will be restructured along the regional plan (for regions) adopted by the Department of Transportation and Communications. Plans for regionalization have been developed.

TIME FRAME:

The process has begun as the initial realignment of regions is already complete. For additional details and time-frames for regional management re-structuring see details in Chapter 11.

4.0 Management Practices

Strategic Planning

RECOMMENDATION:

Develop formal, detailed strategic plans for each Department.

In conjunction with the development of departmental strategic plans, there is a need to establish within each Department formal responsibility for carrying out an on-going strategic planning process. Organizational options to be considered:

- section within Planning Division
- small, high level committee
- staff function, in DM office

Review mechanisms for stakeholders involvement in the strategic planning process.

Ensure that linkage between strategic planning and annual budget processes are effectively retained in light of re-organization initiatives.

RESPONSE:

Agree. Other responses to previous recommendations have addressed this set of recommendations.

TIME FRAME: Fall, 1994.

Operational Planning

RECOMMENDATION: (Differs from Volume One)

Divisional operating plans should be developed, including clearly detailed statements of:

- goals and objectives
- operation forecasts
- performance measures
- reporting procedures
- financial budgets
- evaluation programs

Within the context of a strategic planning process, operational plans for divisions should be coordinated and priorities established on a department wide basis.

Divisional operational plans should include performance measure and variance analysis.

Procedures and guidelines should be developed for carrying out the operational planning process at the divisional level in both departments.

Formal procedures should be established to ensure that appropriate information for control and evaluation of divisional operating performance is collected and used to evaluate outcomes.

RESPONSE:

Agree. Work has already begun on these recommendations. A draft of guidelines for reviews has been completed.

TIME FRAME: Fall, 1994.

Program Evaluation

RECOMMENDATION:

Each department should develop a policy for program evaluation and a department-wide evaluation plan which identifies the programs which will be evaluated within a three year time frame.

Formal policies should be developed in each department for managing the program evaluation process, including:

- mandate for program evaluation function
- organization structure, including responsibility
- guidelines and methodology for the conduct of program evaluations, including measurement criteria
- reporting procedures for program evaluation reports
- relationship of the program evaluation, strategic planning and budget processes.

Each Department should develop a corporate evaluation group to undertake evaluation studies of interest to the Deputy Minister and the Government as well as to assist Divisions in the conduct of evaluations for their management requirements.

RESPONSE:

Agree. See new structure, Chapter 8

TIME FRAME: Fall, 1994.

**Information Technology Management
Department of Community Services**

RECOMMENDATION:

Develop a comprehensive cost benefit framework for better priority setting of projects. The cost should include expected operational expenses and maintenance.

Embark on a study to look at long term alternatives for Family Benefits and other mainframe systems.

Embark on a strategy for migrating or re-developing the Family Benefits system. As part of the above recommendation, incorporate planned needs for absorption of municipal responsibilities, recently announced.

Within the next three months complete the implementation of the remaining sites for the Family Court Maintenance Enforcement system.

Consider transferring budget responsibility for systems to the divisions. This would include operational computer costs, production support costs, enhancement and potentially development costs.

Take steps to receive detailed cost information for the mainframe by system.

Explore with DSS opportunities to implement automated telephone applications for Family Benefits and Family and Children's Services.

Strengthen project management resources in the organization.

RESPONSE:

Agree. See previous response to similar recommendations.

TIME FRAME: Currently underway.

Authorities

RECOMMENDATION: (Not in Volume One)

The Departments should revise authorities with municipalities and providers to give authority to refer and admit clients for services.

RESPONSE:

The meaning of this recommendation is unclear. There is, however, a total municipal reform process underway which may address this recommendation. The first step in social service reform will be implemented on April 1, 1995.

TIME FRAME: 1995-1998

Federal Cost Sharing

RECOMMENDATION: (Not in Volume One)

Existing organizational arrangement for negotiating cost-sharing programs seems appropriate all the present time but warrants monitoring. There appears to be little benefit in centralizing negotiating functions of these three departments at the present time, as the informal arrangements for negotiations are working effectively.

Priority should be given to the creation of a computerized database of cost shared services, programs and agencies.

RESPONSE: Agree.

TIME FRAME: April, 1995

Standards

RECOMMENDATION:

Where required, standards should be developed according to the above-noted system and well documented. It is essential that these standards, where appropriate, recognize and incorporate overlaps with other programs in other divisions of departments.

A standardized, compatible system for developing standards and monitoring their achievement be established within each department.

Family Benefits should:

- . continue to use and expand the applications of standards in monitoring and control
- . continue to improve the quality of standards data available

RESPONSE:

Agree. The issue of standards will be addressed as the new divisions are put in place and operationalized.

TIME FRAME: Spring, 1995.

Municipal/Provincial Interface

RECOMMENDATION: (Not in Volume One)

The appropriate course of action to address inefficiencies in the General Assistance claims processing system will depend on policy decisions affecting service delivery.

Automate the claims processing system for Homes for Special Care.

RESPONSE:

This will be addressed with Municipal social services/assistance reform.

TIME FRAME: 1995-1998

CHAPTER 5

MODEL FOR THE NEW STRUCTURE - HEAD OFFICE

Rationale for Restructuring

As outlined in the introductory chapters of this report, the move to a fully regionalized model of service delivery will entail some major changes in both the structure and the orientation of Head Office operations. The following four chapters outline the specific changes which will occur in each Head Office division and suggest an implementation timetable for those changes; however it is important to sketch an overview of the new look for Head Office operations in order to see precisely how the new structure will support the regionalized model of service delivery.

The move to regionalized decision-making will require program devices to reform their efforts from direct program delivery and care management to standard-setting and program evaluation. In order to support this new role, the following steps will occur:

- program continua will be established along functional lines. This will result in the restructuring of program devices which accurately reflect functionality.
- all operations will adopt a regional locus of service delivery. This change will result in the reassignment/transfer of some Head Office staff who currently carry program responsibility.
- the focus on program consultation and evaluation will require the retraining and reorientation of key program staff. In those areas where vacancies exist, recruitment will centre on candidates with specialized skill sets.
- service divisions (Finance and Administration, and Strategic Planning and Policy) will be realigned to more appropriately support program divisions and field operations.

When these steps are completed, the Head Office of the Department of Community Services will consist of two program divisions: Income and Employment Support, and Family and Children's Services; two support divisions: Finance and Administration, and Strategic Planning and Policy, plus Audit Services. The Senior Management team of the Department will consist of the Administrators of the four divisions, the four Regional Administrators and the Deputy Minister. This group will meet bi-weekly to set priorities and to serve as the locus of corporate decision-making, (see Organizational Chart, Chapter 5 - 3).

Office of the Minister and Deputy

In its current configuration, the Office of the Minister and Deputy consists of three components:

support staff to the Minister	2
support staff to Deputy	9
office of the Coordinator of Appeals	2.5

This structure needs to be updated and streamlined to better reflect the Department 's commitment to a new look Head Office. Over the course of the next twelve months, the total staff complement of the Office will decrease from 13 FTE's to 9 FTE's. This decrease will be accomplished by automation of the office of the Coordinator of Appeals, ERIP, position deletion and position transfer.

In order to ensure that the Office of the Minister and Deputy has access to policy and program evaluation consultation, an internal move will be undertaken to move Strategic Planning and Policy closer to the office of the Minister and Deputy. Similarly it is expected that the Administrator of this division will serve as Acting Deputy in the absence of the Deputy Minister and the position description will be adjusted to reflect that accountability.

The individual chapters which follow, outline the detail of the moves which are required to restructure Head Office. With the timely implementation of the recommendations contained in these chapters, the Department of Community Services will be in a stronger position to support and manage major program change and to assess accurately its impact. Most importantly the new look Head Office will provide the Department with a more professional and specialized strategic planning capability which will allow for planned and managed change in the decade ahead.

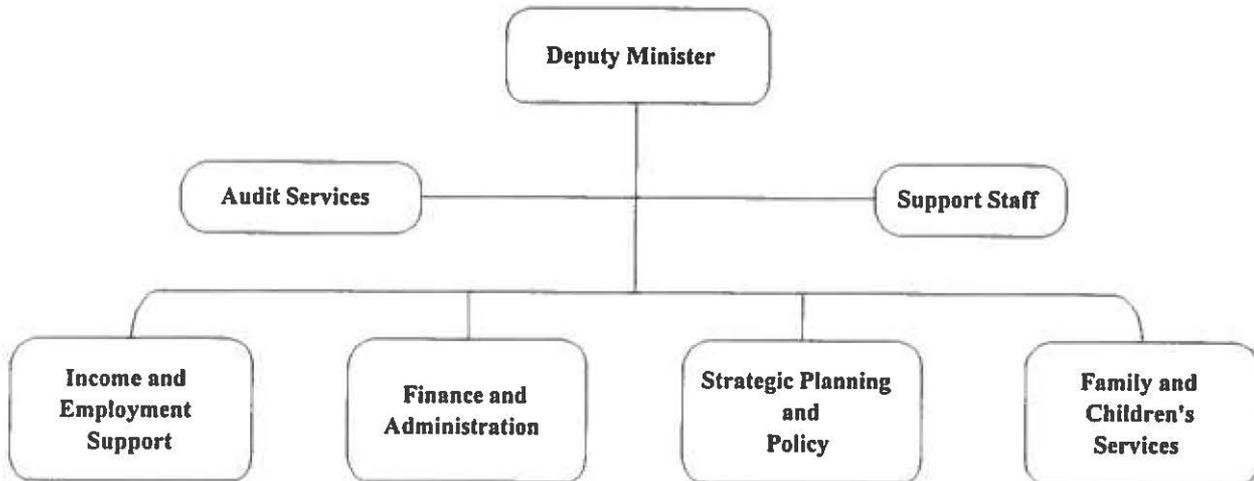
Staff Impact:

ERIP	2
Transfers to other divisions	3
Vacant delete	<u>1</u>
Net change	<u>6</u>

Summary:

Present Complement	13.5
Complement after restructuring	<u>7.5</u>
Change in complement	<u>(6)</u>

ORGANIZATIONAL STRUCTURE



SENIOR MANAGEMENT TEAM:

- Deputy Minister
- Administrator, Income and Employment Support
- Administrator, Finance and Administration
- Administrator, Strategic Planning and Policy
- Administrator, Family and Children's Services
- Regional Administrator, Halifax
- Regional Administrator, Eastern Region
- Regional Administrator, Western Region
- Regional Administrator, Northern Region

CHAPTER 6

INCOME AND EMPLOYMENT SUPPORT DIVISION

MANAGEMENT AUDIT

The Management Audit recommends the Department "Combine the Employment and Training Programs of Vocational Rehabilitation with Family Benefits in a new Division". This recommendation is consistent with the direction in which the Department was positioning itself to move prior to the Management Audit and involves not only internal restructuring but the total overhaul and redesign of the social assistance system at both the provincial and municipal levels.

Other recommended changes relate to assessment and the continuum of service. These components are addressed in the audit and highlighted in terms of their importance. The restructuring will include them.

Although not addressed in the Management Audit in relation to income assistance and employment support, an essential part of the overall restructuring relates to long-term support services to physically disabled adults and adults who are mentally handicapped and/or disabled. Currently, the latter group constitutes 40 percent of the Family Benefits caseload and an equally significant proportion of municipal social assistance caseloads. The Management Audit does leave long-term care of the mentally handicapped and/or disabled adults with the Department. In light of the cross-over of this population with income assistance, this is appropriate.

RATIONALE FOR RESTRUCTURING

In the existing system, there are a number of barriers which do not allow clients to move smoothly along the income support-training-job readiness continuum. By merging all income assistance and employment support services into a new division, the Department will be able to create a system which can more readily assess and identify client potential so that those who require the least support are moved to the labour market by means of appropriate skill development and training programs. Those requiring longer term supports will be streamed according to need. That group of individuals which has minimal prospects for future labour market attachment will be channelled into a more static stream requiring fewer staff resources.

The point of access to services and programs for mentally handicapped and/or disabled persons is through the income assistance system because they require both financial support and services. They face even more barriers than the able-bodied unemployed. These are barriers which prevent them from developing work-related skills or entering the labour market and perhaps more importantly for many, the barriers prevent their return to the community through deinstitutionalization. Rationalized deinstitutionalization and integration in the community and work settings is the desired outcome for the vast majority of mentally handicapped and/or disabled adults.

The Department's vision is to provide these individuals with opportunities for independence and the experience of community mainstreaming.

CONTINUUM OF SERVICES - FIELD DELIVERY MODEL

Developing a continuum of services for clients of the income support system involves not only reform and restructuring at the provincial level but the complete integration and restructuring of municipal social assistance programs as well. The Implementation Committee had many discussions on the development of the continuum with senior program and field staff. It has created a schematic of the continuum and flow of services (Field Delivery Model of Service) which is contained in Appendix "A" of this chapter. The creation of this continuum is the goal of restructuring.

Beginning at the point of intake, the schematic shows how the client will move through the service system to either an exit point or a service component. Assessment is built in early in the process or service flow to determine the client's initial service need and/or the longer term service need. If the client requires more than short-term or emergency assistance, then a caseworker is assigned and a more thorough assessment is undertaken to identify the client's needs and develop an action plan.

Based upon the assessment, clients will be streamed according to their individual needs as follow:

- STREAM I** - Clients who have skills and are job ready. They may go directly to employment or take short-term training, upgrading or on-the-job training.
- STREAM II** - Clients requiring further preparation of, from six months to two years duration, before entering employment. For them, several options are available such as upgrading, education and on-the-job training.
- STREAM III** - Clients requiring long-term assistance and services due to a physical and/or mental handicap. Many will enter various forms of sheltered employment and with training and skill development may enter the general labour market.

For clients in all three streams, the objective is employment and either full or partial independence. As the service delivery model indicates, the delivery structure is not static but represents a flow of service with clients moving from one stream to another according to their needs and abilities. **All clients enter the continuum at the same point and regardless of whether they are or are not physically and/or mentally disabled or handicapped; they all have the potential to access services on the same continuum. This service delivery model is a scenario for investing in people and maximizing their potential.**

Realization of the totality of the model is interwoven with the integration of the provincial and municipal systems. There are, however, steps which can begin immediately in preparation for that occurrence. These are explained in the following sections of this chapter along with a closer examination of Community Support Services for Adults and the integration of municipal and provincial social assistance.

RESTRUCTURING - HEAD OFFICE

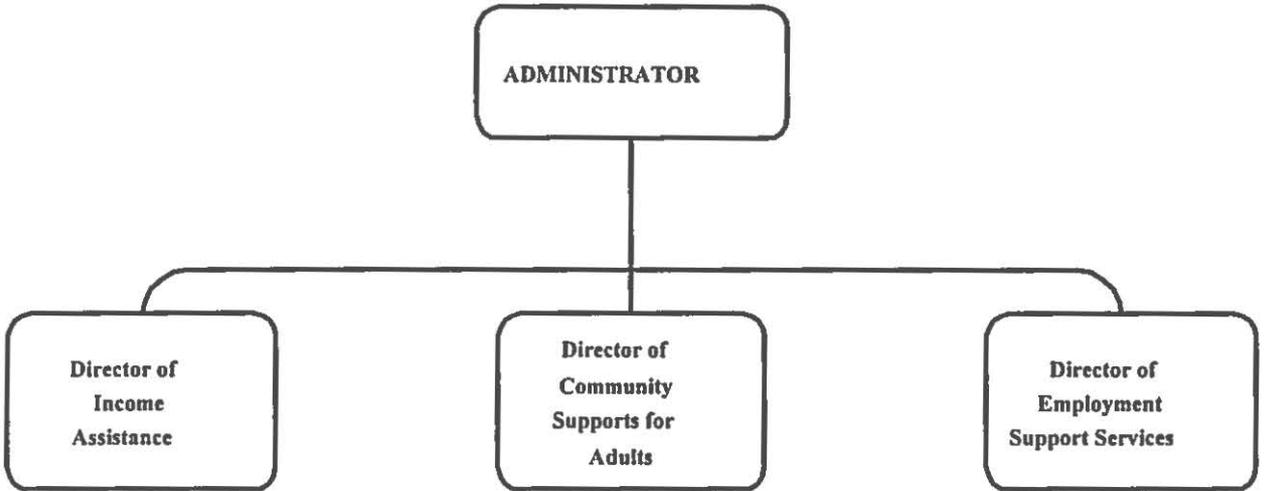
The objective in Head Office restructuring is to create one Division, Income and Employment Support, which contains all the elements necessary to make the Field Delivery Model of Service work. This means major changes for several existing divisions.

Developmental and Vocational Assessment Services are currently part of the Field Services and Personnel Division. These services are provided to all institutions, divisions and field offices, as requested. A major portion of the time of the Supervisor and the three assessment technicians is already directed to vocational assessments, thus making it most appropriate to transfer the service to the new division.

The long-term provincial assistance program - Family Benefits - will also be incorporated in the new division along with all programs currently within the Rehabilitation and Community Services Division, with the exception of summer programs and services to mentally handicapped children which will be transferred to the Family and Children's Services Division.

When the Head Office restructuring has been completed, one division containing all the elements to effect the Field Service Delivery Model will have been created.

The chart on the following page illustrates the Senior Management structure for the new division and outlines its functional components.



- Assistance (Short & Long-Term)
- Pharmacare
- Special Services
- Emergency Assistance

- Adult Residential Centres
- Regional Rehabilitation Centres
- Residential Care Facilities
- Small Options
- Group Homes
- Developmental Residences
- Supervised Apartments
- Transition Planning

- Assessment/Vocational Rehabilitation
- Career Planning
- Employment Resource Centres
- Community Services/Housing
- Work Activity Programs
- Adult Service Centres
- Employability Programs for Social Assistance Recipients

RESTRUCTURING - FIELD DELIVERY

The ultimate goal in restructuring is to develop the Field Service Delivery Model in Appendix "A". In order to achieve this goal, municipal social assistance and service programs must be transferred and a new one-tier social assistance program developed which integrates emergency, short-term and long-term assistance and services. As with Head Office restructuring, there are, however, some interim steps which can be taken. They relate to the general organization of the field delivery system and structure discussed in Chapter 11 of this Report.

Very briefly, the initial steps involve the collapse of the existing seven department regions to four regions and the development of a new regional management structure. Within that structure, the position of Income and Employment Support Specialist will be created in each of the four regional offices. This position, along with the Regional Administrator and the Head Office program division, will plan and develop the new income assistance and related service delivery structure for the region.

On an interim basis, until the transfer, the municipal social service program and Family Benefits program will continue to be delivered separately. After April 1, 1995, the programs will be integrated and delivered by each departmental office in a region. The program design and delivery will be based on a number of broad principles, including the following:

- an investment in clients to assist them in achieving independence
- assessment and streaming of clients, based on each individual's skills, abilities and needs
- a family, as well as, an individual orientation which recognizes the need to invest in children to ensure their health and well-being
- recognition that some clients require long-term assistance and related services.

At the regional level, in addition to the Income and Employment Support Specialist, there will be a position designated as a community support service specialist for the adult mentally disabled and/or handicapped. The four positions will be developed utilizing existing regional and Head Office staff who have expertise in this area. They, along with the income and employment support specialists, will work together to ensure maximum opportunities to achieve independence are available to this population.

Community Support Services for Adults is a poorly understood service/program area. In an effort to clarify the current situation and proposed Head Office and program delivery structure, an overview is contained in Appendix "B" of this chapter.

PROCESS

The timetable for reform of Nova Scotia's income assistance programs is complicated by two factors; the forthcoming provincial/municipal service exchange scheduled to take place on April 1, 1995, and the Federal social security reform process launched by the Hon. Lloyd Axworthy. Although this process does not yet have a defined implementation schedule, the proposed changes will have a profound impact on both the resources and the scope of programs available within the Province. The Federal legislative package will not be introduced before the end of the calendar year 1994. Clearly, substantive restructuring of provincial Income Assistance Programs will be hampered somewhat until such time as Federal intentions become clearer.

Despite these complications, there are a number of administrative reforms, pilot initiatives and program reconfigurations which can and must occur in the interim period. These changes will not only provide cost savings in operational expenditures but will provide a test measurement of new program delivery options prior to province-wide implementations.

PREPARATORY ACTIONS - Pilot Initiatives/Administrative Reform

A number of administrative and program reform initiatives are already being launched to effect cost savings and to provide measurable indicators of new delivery mechanisms. These thrusts include:

- expansion of Family Benefits Eligibility Review Project
- pilot project to delegate decision-making in Family Benefits (North Sydney Office)
- creation of an inactive caseload stream to manage long-term disabled clients with minimal service needs
- expansion of Transitions Career Program for single parents
- federal-provincial strategic initiative on job training and employment support
- single parents initiatives
- Metro joint intake project

PHASE ONE: CREATION OF A NEW DIVISION

In this phase, all existing and planned program components will be merged into a single division with an integrated management structure. The new division will consist of the following components:

- existing Family Benefits Programs
- existing municipal assistance programs
- Vocational Rehabilitation Services
- Career Planning Programs
- Work Activity Programs
- Employment Programs for Social Assistance Recipients
- Employment Resource Centres
- Developmental and Vocational Assessment Services
- Adult Service Centres - workshops
- Work Activity Programs
- Programs and facilities for the adult mentally handicapped and/or disabled
- social housing community services program

In keeping with the Department's vision, all services will have a regional delivery profile and will move to a field level decision-making model. Assessment will be an essential component of case management from intake onwards and clients will be streamed to reflect individual need.

TIMEFRAME:

- (1) Head Office components can be melded into a new division by October 1, 1994, depending on the timely approval of new job specifications and the hiring process.
- (2) The integration of municipal social assistance, at both the Head Office and field level, can not occur until after the Municipal service exchange scheduled for April 1, 1995.

PHASE TWO: DEVELOPMENT OF A NEW SECTION OF COMMUNITY SUPPORT SERVICES FOR ADULTS WITHIN THE INCOME AND EMPLOYMENT SUPPORT DIVISION

This new section will encompass the following components:

- existing services to the adult mentally and/or disabled handicapped (primarily residential)
- existing provincial components of the Municipal Social Services program - i.e., assessment, licensing, classification, inspection
- municipal components related to services to mentally handicapped and/or disabled adults (after the April 1, 1995 municipal service exchange)

TIME FRAME: October 30, 1995

PHASE THREE:

- (1) Articulation of a clear policy on deinstitutionalization with defined targets and timeframes for community out placements.
- (2) Development of a licensing and regulatory protocol for small options and residential care facilities.

TIME FRAME: (1) A policy paper on deinstitutionalization is already in the preparatory stage within the Department. The paper should be ready for release by October 15, 1994.

(2) A draft discussion paper on small options will be prepared for public release in mid-November, 1994.

PHASE FOUR:

In concert with all facilities, develop complementary out-placement and integration plans which are consistent with the goals of the deinstitutionalization policy.

1. Via the comprehensive strategic planning process now underway with Municipal Officials Committees, Adult Residential Centres and Regional Rehabilitation Centres, this initiative is now underway.

TIME FRAME: The planning phase should be completed by April 1, 1995.

PHASE FIVE: ASSUMPTION OF MUNICIPAL SOCIAL SERVICES PROGRAMS

On April 1, 1995, the Province will assume responsibility for all existing municipal social services including Homes for Special Care and General Assistance. The terms of this transfer will occur as per the recommendations of the Minister's Committee on Interim Policy Arrangements (See Appendix "C").

TIME FRAME: The Minister's Committee will be reporting to Cabinet by September 30, 1994 with options on effecting a vanilla program transfer on April 1, 1995. It is anticipated that while there will likely be cost savings in administrative arrangements, major staff shifts will not occur immediately.

PHASE SIX: Creation of an Integrated Service delivery model, design of a new program and implementation of both

In this phase, major staff and service shifts will occur to support the vision of a front-ended preventive program and a new program will be designed and implemented. By the completion of this phase, the assessment continuum will be fully in place across all program elements and decision-making will be vested at the local level.

The timeframe reflects the sequential steps in the planning and implementation process.

TIMEFRAME:

- (1) Creation of an integrated service delivery model will commence on April 1, 1995 and will take approximately one year to plan. Elements of the implementation for this phase include public consultation, integration of federal-provincial reform plan and design of a new provincial income assistance program.
- (2) Implementation of a new provincial income assistance program will begin two years after the April 1, 1995 transfer. Target date for implementation is, therefore, April 1, 1997. This timeframe allows for the clarification of the Federal social security reform agenda and permits time to design the following elements:
 - development of a new computer and management information system
 - drafting of new legislation
 - development of a new human resources plan.
- (3) Rationalization of existing elements of Municipal Social Services Programs as they relate to the mentally handicapped and/or disabled and the creation of a dedicated envelope of funding for community-based services. This process has begun and will be completed by April 1, 1996, one year after the exchange of service.

STAFFING IMPACT

Determination of the staffing impact is complicated by the municipal service exchange scheduled to occur April 1, 1995. Although an examination has already begun of municipal staffing for social services programs, it will be approximately two years after the transfer date before staff is disentangled. It is anticipated, however, that staff savings will occur with the integration of municipal and provincial staff, the development of a new income assistance program and the restructuring of the service delivery system.

The staffing impact outlined below is based solely on the Head Office restructuring.

STAFF CHANGES:

E.R.I.P. delete(s)	3
Vacant positions deleted	9
Transfers out to other divisions	8
Transfers to field offices	12
Transfers in from other divisions	5
Lay-offs	5
Additional positions	<u>3</u>
Net changes	<u>(29)</u>

SUMMARY:

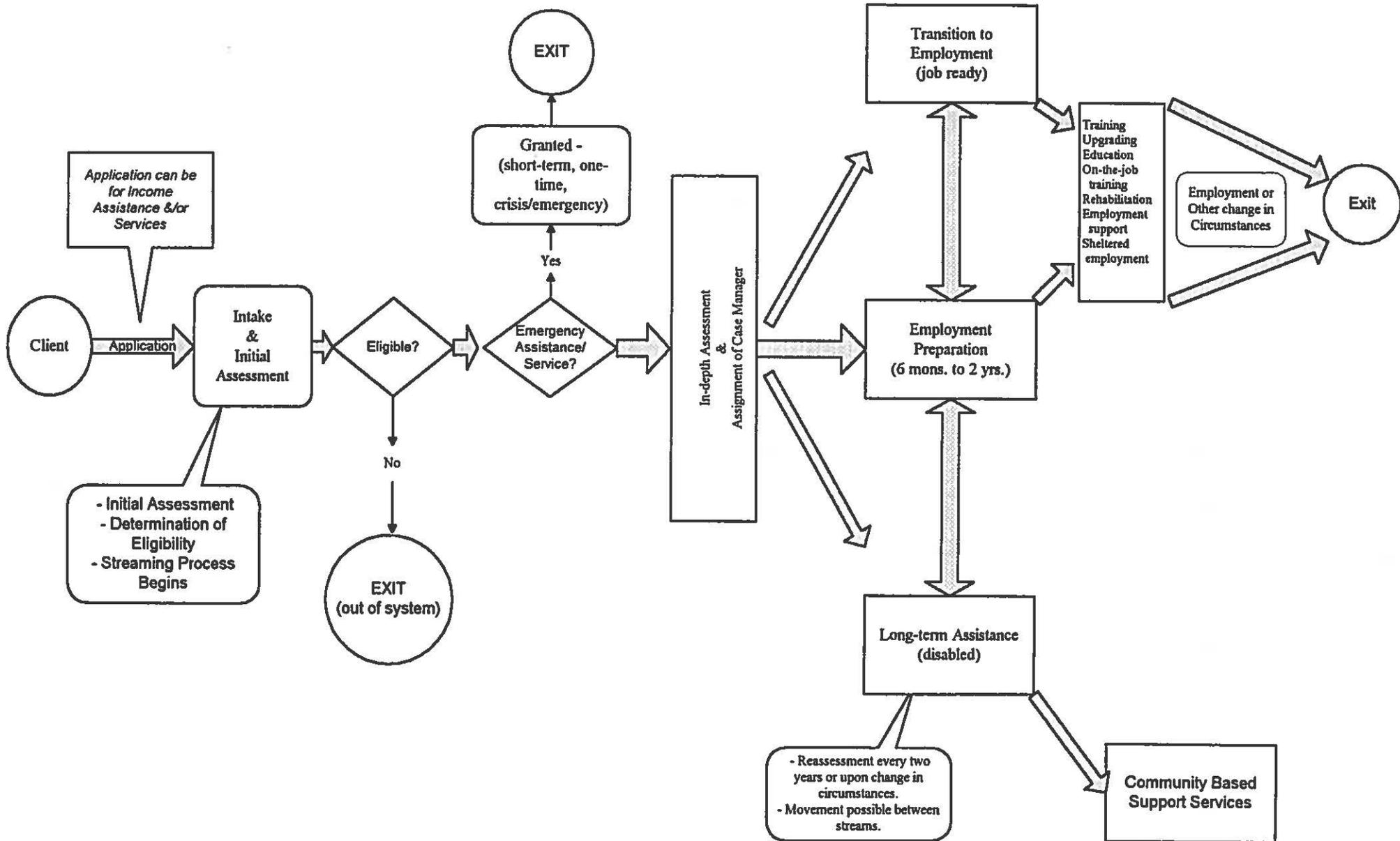
Present Complement (2 divisions)	65
Complement after restructuring	<u>36</u>
Change in complement	<u>(29)</u>

APPENDIX "A"

INCOME AND EMPLOYMENT SUPPORT PROGRAM

FIELD DELIVERY MODEL OF SERVICE

DEPARTMENT OF COMMUNITY SERVICES
Income & Employment Support Program
Field Delivery Model of Service



APPENDIX " B "

COMMUNITY SUPPORT SERVICES FOR ADULTS

BACKGROUND

Nova Scotia is one of the few remaining Provinces to lack a clearly defined policy on deinstitutionalization for the mentally handicapped and/or disabled. Notwithstanding this fact, the Department has been working aggressively for the past decade in concert with municipal units and stakeholder groups to downsize existing adult facilities. At the same time, the Department has developed considerable expertise in the development of training and out-placement services and already funds a wide range of community-based residential and employment related services. Much progress has therefore been made in the development of community living options and supports, but further movement is constrained by the lack of integrated services and the many loci of decision-making which exist within the system.

In many senses, the current facility-focused service model is already in a state of planned transition to eventual obsolescence. If the end goal is to be achieved however, the following steps must occur:

- creation of a single-tier social assistance system to remove existing funding barriers to community placement and employment options
- development of a more broadly based community services social housing program
- expansion of employment options
- better integration of community support programs at the regional level to simplify client access to services
- creation of dedicated regional funding envelopes to ensure accountability for delivery of community-based living options

PROPOSED CONTINUUM OF SERVICE

In the new configuration, clients will be able to move more smoothly between the most restrictive environments and the least restrictive, that is, those living options which are fully integrated with community settings. This will provide a smooth continuum of service which is lacking in the current structure. For this process to work smoothly, clients must be able to access the full range of day program options including workshops, work activities, job brokerage centres and adult service centres. While the development of coordinated policy initiatives will be the responsibility of the Income and Employment Support Division, accountability for integrated program delivery in the field will rest with the Regional Administrator. This process will be operationalized under the aegis of the Regional Income and Employment Support Specialist, the Community Support Service to Adults Specialist, and the Senior District Supervisor.

At the front-end of the continuum, all programs will be oriented to foster community integration of clients to the fullest extent possible. In programs which are in the transition to obsolescence, the Department will direct programming to optimize the rehabilitation of clients with a view to returning them to the community setting. These programs will be configured to set clear timeframes for out-placement and to meet the skills development need of clients in areas such as behaviour management and basic living skills. Regional Administrators will ensure that these targets are met by creating dedicated funding envelopes which will promote resource reallocation from facility-based to community-based programs.

With the creation of a single-tier social services system, all mentally handicapped and/or disabled adults will be receiving services and/or income assistance from the Province. This group, which currently constitutes approximately 40% of the existing long-term disabled Family Benefits caseload, requires assistance with housing, training and sheltered work options. Of this group, approximately 25% require community residential programs ranging from minimum supervision to intensive programming. Newly designed intake and assessment processes which will underpin the regional service delivery model will serve as the springboard for assisting this client population in achieving the maximum level of independence which is possible. By helping clients gain a measure of economic independence, this approach will also help to break the current scenario in which clients are identified as long-term assistance recipients and are therefore not encouraged to move to normalized community experience.

The continuum of services for the mentally handicapped and/or disabled begins at the same point of intake as that for income assistance recipients. In the current scheme, however, the client who is mentally handicapped and/or disabled could be directed toward institutional care in a large, long-term congregate care facility such as an Adult Residential Centre or a Regional Rehabilitation Centre. In the restructured service continuum, such institutions will be phased out in favour of in-home supports and community living options. Based on their abilities and needs, all clients will be directed toward an employment related option, as well, whether they remain in the community or return to the community.

Following is an outline of service options available for the mentally handicapped and/or disabled:

<u>COMMUNITY LIVING ARRANGEMENT</u>	<u>SUPPORT SERVICES</u>	<u>WORK-RELATED SERVICES</u>
<ul style="list-style-type: none">● Own Home● Foster Care● Community Based Residential Facilities<ul style="list-style-type: none">● Group Homes● Small Options● Developmental Residences● Supervised Apartments● Residential Care Facilities	<ul style="list-style-type: none">● In-Home Supports● Respite Care● Specialist Services● Camping Programs	<ul style="list-style-type: none">● Adult Service Centres● Supported Work● Training Programs● Employment

RELATIONSHIP WITH THE DEPARTMENT OF HEALTH

The mentally challenged and mentally handicapped are suffering from chronic conditions: e.g., mental retardation, post-mental illness, which impair their functioning but do not require continuous medical intervention or treatment. The post-mentally ill may periodically require acute care and may be on maintenance doses of medication which require them to see a physician or psychiatrist on a regular out-patient basis.

For both groups, the major difficulties they face are due not to their specific health needs, but rather to the barriers presented by a "normal" society which is unaccepting of individuals who are different. The continuum of services and programs they require are, therefore, primarily of a social nature: e.g., community living situations, opportunities to maximize their potential in work settings, opportunities for integrations and normalization.

Services required of the Department of Health are the provision of acute care in psychiatric settings when that is necessary or oversight and monitoring of sustaining medication. These are services open to any citizen who needs them and ought not to form the focal point of service delivery.

From the standpoint of the mentally challenged, being labelled as somehow requiring health services because of their disability is repugnant. Unlike seniors in Homes for the Aged or Nursing Homes or persons needing health home care services, they are not ill or, for the most part, physically unable to care for themselves. The Management Audit did recognize this important distinction and therefore endorsed the community-based model of delivery.

The Management Audit did, however, suggest that residential services for the physically handicapped should be transferred to the Department of Health. There is one such facility located in Halifax which is operated by a private community organization. This is a small community-based residential facility for which responsibility can be transferred expeditiously whenever the Department of Health is ready to accept it.

APPENDIX " C "

MINISTER'S COMMITTEE ON INTERIM POLICY AGREEMENT

- Terms of Reference - Minister's Committee on Interim Social Policy Arrangements
- Terms of Reference - Working Group on Policy Development
- Terms of Reference - Working Group on Administrative Arrangements

MINISTERS COMMITTEE ON INTERIM SOCIAL POLICY ARRANGEMENT

On December 17, 1993, the Honourable Sandra Jolly, Minister of Municipal Affairs, announced that the previously proposed provincial/municipal service exchange was targeted for implementation by April 1, 1995.

The "Ministers Committee on Interim Social Policy Arrangement" has been established with a primary mandate to co-ordinate the development of a Provincial Social Assistance Policy to replace current municipal policies until such time as a new income maintenance policy can be implemented.

In fulfilling its mandate, the Committee will consider and make recommendations with regard to the following:

- A standard determination of eligibility
- Standard rates of assistance
- A Unified Special Needs Policy
- A standard policy for the provision of community residential care
- A standard policy for the provision of maintenance assistance for persons in Homes for Special Care
- Administrative issues and options associated with the provincial assumption of responsibilities in the interim period

The Committee will need to examine the social and financial impact of various policy options in its recommendations to government for the interim arrangement.

To assist the Committee in the completion of its tasks, two Working Groups will be established which will include Department of Community Services staff and representatives of other key stakeholders in the service system. The recommended Terms of Reference for each of these Working Groups follows.

WORKING GROUP ON POLICY DEVELOPMENT

On December 17, 1993, the Honourable Sandra Jolly, Minister of Municipal Affairs, announced that the previously proposed provincial/municipal service exchange was targeted for implementation by April 1/95.

A "Ministers Committee on Interim Social Policy Arrangement" has been established to co-ordinate the development of a Provincial Social Assistance policy to replace current municipal policies until such time as a new income maintenance policy can be implemented.

Two working groups have been appointed by the Minister of Community Services to assist the committee with its task. They are:

1. A Working Group on Policy Development; and
2. A Working Group on Administrative Arrangements.

The primary mandate of the Working Group on Policy Development will be to provide support to the Ministers Committee on Interim Social Policy Arrangement through research, data collection, the development of policy options and recommended approaches including detailed cost estimates.

In fulfilling its mandate, the task of the Working Group will include, but not be limited to the following:

1. The development of options related to a standard determination of eligibility for specifically identified categories of applicants/ recipients;
2. The development of options with respect to standardization of rates of assistance including a regional approach, adoption of Family Benefits rates, new provincial standards;
3. The development of recommendations related to a unified Special Needs policy;
4. The development of recommendations regarding the creation of a standard policy for the provision of community residential care, including community residence, small options and in-home support programs;
5. The development of a recommended standard policy for the provision of maintenance assistance for persons in Homes for Special Care;
6. The identification of any legislative or regulatory changes that will be required to implement any of the above-mentioned policy recommendations.

The Working Group may wish to address these issues by establishing sub-committees to address specific tasks.

WORKING GROUP ON POLICY DEVELOPMENT

While the agenda of the Ministers Committee may dictate deadlines, the Working Group is asked to develop a tentative work schedule utilizing the attached format for submission to the Deputy Minister within three weeks after the initial meeting of the group.

The Working Group should consider October 1, 1994 as the target date for the submission of its final report and recommendations to the Ministers Committee.

WORKING GROUP ON ADMINISTRATIVE ARRANGEMENTS

On December 17, 1993, the Honourable Sandra Jolly, Minister of Municipal Affairs, announced that the previously proposed provincial/municipal service exchange was targeted for implementation by April 1, 1995.

A "Ministers Committee on Interim Social Policy Arrangement" has been established to co-ordinate the development of a Provincial Social Assistance policy to replace current municipal policies until such time as a new income maintenance policy can be implemented.

Two working groups have been appointed by the Minister of Community Services to assist the committee with its task. They are:

1. A Working Group on Policy Development; and
2. A Working Group on Administrative Arrangements.

The primary mandate of the Working Group on Administrative Arrangements will be to gather, analyze and interpret data related to all aspects of the municipal social services delivery system, identifying the pros and cons of optional approaches for consideration by the Ministers committee.

In fulfilling its mandate, the task of the Working Group will include, but not be limited to, the following:

1. Carry out an in-depth analysis of the current municipal social services staffing arrangements including: a breakdown of staffing by administrative/supervisory, clerical support and caseworker categories; a breakdown of caseworker staff by type of caseload (e.g. General Assistance, Homes for Special Care (Aged and Nursing); and/or Homes for Special Care (other categories); salary specifics, union contract information, current employer status and other specifics as designated by the Working Group as required.
2. Develop a means to refine the information base of the General Assistance program in order to more accurately separate sub-program data on small options, community residence, in-home support and other categories, noting policy issues related to these programs for consideration by the Working Group on Policy Development.
3. Assuming that the Province has 100% financial responsibility for the program as of April 1, 1995, and that standard policies have been developed by that date, provide optional approaches in addressing administrative issues related to: communication, management information systems, reporting relationships, budget approval and control, central office staffing implications and other related issues.

WORKING GROUP ON ADMINISTRATIVE ARRANGEMENTS

4. Determine what administrative procedures will need to be in place to respond to recommended interim policy changes and determine what, if any, legislative or regulatory changes are required to implement the proposed interim administrative structure(s).
5. Propose how long the interim administrative structure should be in place and rationale for same.
6. Carry out an "Office Space/Equipment and Furnishing Inventory" both for long term purposes and to determine whether any cost efficient consolidations should be recommended during the interim period.
7. Provide a cost analysis on the various policy options developed by the Working Group on Policy Development.

While the agenda of the Minister's Committee may dictate deadlines, the Working Group is requested to develop a tentative work schedule based on the attached format for submission to the Deputy Minister within three weeks after the initial meeting of the groups.

The Working Group should consider October 1, 1994 as the target date for the submission of its final report to the Ministers Committee.

CHAPTER 7

FAMILY AND CHILDREN'S SERVICES DIVISION

THE MANAGEMENT AUDIT

The Management Audit addresses only some components of the Family and Children's Services System such as Adoption and Residential Crisis/Assessment Centres and it does so in a superficial manner. It also remarks on the need for and makes recommendations related to the continuum of care and the role of Children's Aid Societies in the delivery of services. There is, however, no holistic approach taken to an examination of the Family and Children's Services System. The Implementation Committee has utilized the Auditors' comments and has reviewed, analyzed and, where appropriate, fitted them into the larger framework for Family and Children's Services in order to create the enhanced continuum of programs and services the auditors recommended.

CONTINUUM OF SERVICES/PROGRAMS

Services to families and children encompass not only those programs and services provided by the Department of Community Services but a myriad of services provided by Justice, Health, Education, Housing and many community agencies and organizations. They are interconnected in that many of them touch or serve the same families and children and they all form part of the continuum of care. The system of Family and Children's Services which is the primary responsibility of the Department of Community Services is distinct from the others in that it has a unique legislated responsibility to protect children who are at risk or are being abused and/or neglected even to the extent of removing them from situations of neglect and/or abuse. It is also a system which cannot be selective about the clients it serves. Its legislated responsibilities mean that it must assess the children and families who seek and/or need help and provide services and programs to meet those needs.

The Children and Family Services Act, 1991, broadened the mandate of the Department of Community Services to prevent family breakdown and preserve the family unit. Thus, within the Department of Community Services, the current mandate of family and children's services is not only for the protection of children but for the provision of a full range of services and programs, from prevention to protection, to children and families. The focus is on preventing the breakdown of the family unit, preserving it where and whenever possible when it is dysfunctional. Only in the most severe situations do children's services agencies act to remove children from their families.

In the traditional system of services to families and children, both legislatively and otherwise, the emphasis was on protective services and to a lesser extent, remedial/supportive services. Prevention was not viewed as the major mandate of the system, and although often sought as a goal, primary prevention was not attained.

There are three broad streams which form the continuum of services in the Family and Children's Services System. These three streams are: Preventive Services, Remedial/ Supportive Services and Protective Services.

In practice, the services and programs on the continuum are not mutually exclusive. In other words, a single element - e. g. day care - may be utilized as a part of a preventive service, a remedial or supportive service or even a protective service depending on who is the identified client (child, family, individual, adult), the client need and/or the nature of the service.

For ease of reference, the programs and services which are encompassed within the three streams are illustrated on the chart contained in Appendix "A". Remembering the flow of each service or program across the three streams, the starting point or major thrust for each can be seen, as well as, the complex array of services/programs which are part of the system. As the chart also illustrates, there are three elements - Education, Mental Health and Treatment Services - common to all streams which are not part of the Family and Children's Services system.

As has been noted previously, the Children and Family Services Act of 1991 shifted the primary focus to prevention. This has meant a major readjustment and restructuring of the family and children's services system which is still underway. The central challenge in what is truly the re-engineering of the total Family and Children's Services System, is the development of primary prevention services/programs while maintaining other necessary programs and services in a time of scarce resources.

THE RATIONALE FOR RESTRUCTURING

A. Department of Community Services - Internal (Head Office)

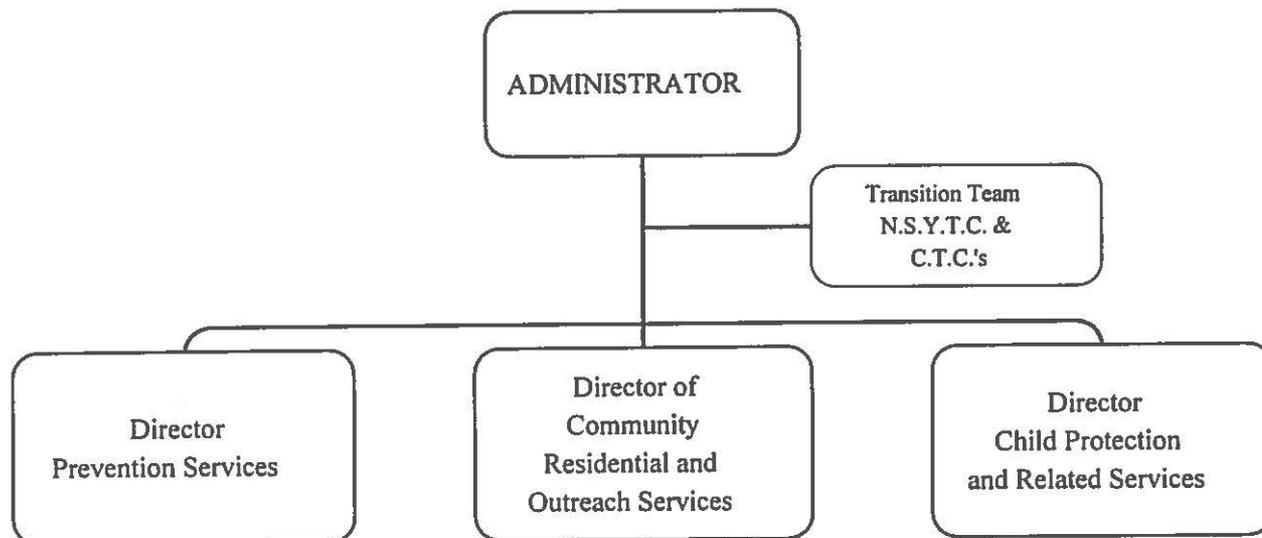
Not all services/programs for family and children's services which are the responsibility of the Department of Community Services are located within the Family and Children's Services Division. Services and programs for mentally handicapped children such as foster care, in-home supports, respite care and residential care are part of Rehabilitation and Community Services Division. With the current philosophy of integration of mentally handicapped children into the mainstream, these services and programs must be combined with similar programs/services which now exist for other children within the Family and Children's Services Division. This move will place all in-home support, foster care and residential services for children in one Division and enable change to occur.

Another program with a child and youth focus is a summer camping program which is also within the Rehabilitation and Community Services Division. This program will be transferred to the Family and Children's Services Division where it will be restructured and expanded to provide much needed year round services and programs for children. The new program which will be known as the Children and Youth Challenge Program will be designed to assist troubled children and youth to develop a positive sense of self-worth, responsibility, respect for themselves and others by providing such things as adventure programs, camping and wilderness programs which challenge them to change.

Structurally, the Family and Children's Services Division will undergo change to position itself to deliver the appropriate support to the field delivery system. Its functions will be primarily standard setting, overall budget development and control, monitoring of service and programs for adherence to legislation and program standards, program review and program consultation. Regionalization and decentralization of services and programs will result in the movement of a significant portion of the current functions performed by Head Office to the Field, along with staff. Reporting structures will be adjusted to enhance regional operations.

Young Offender and Family Court Services now part of the Family and Children's Services Division, in line with the Audit recommendations will transfer to Justice, effective August 1, 1994. The Chart on the following page illustrates the new organizational look for the Family and Children's Services Division. The services/programs listed under the positions are not all inclusive but intended to provide a sampling of the responsibilities of the three restructured Director-level positions. They equate to the Chart in Appendix "A".

HEAD OFFICE PROPOSED ORGANIZATIONAL STRUCTURE



- Day care
- Early Childhood Intervention
- In-Home Supports
- Parent Resource Centres
- Counselling Services
- Public Awareness and Education Program

- Community Residential Facilities
- Specialist Services Mentally Handicapped Children
- Outreach Programming
- Children & Youth Challenge Programs
- Services to Families and Children with Emotional/Behaviour Problems

- Child Protection
- Child Abuse Register
- Transition Houses
- Men's Treatment Programs
- Adoption and Post-Adoption Services
- Foster Care

STAFFING IMPACT:

E.R.I.P. deletes	5
Transfers to the field	1
Transfers to the Dep't. of Justice	7
Transfers to family and children's services from other divisions	4 permanent 2 temporary
Lay-offs due to restructuring	6
Additional Positions	6

SUMMARY:

Present complement	38
Complement after restructuring	<u>29</u>
Change in complement	<u>(9)</u>

B. Delivery Structure

The Family and Children's Services system is an amalgam of the private and public sectors. By far the greater proportion of services and programs are provided by private agencies and organizations such as the Children's Aid Societies/Family and Children's Services Agencies. Only five Department of Community Services offices - Dartmouth, Sackville, Digby, Antigonish and Guysborough - provide family and child welfare services. From the establishment of the first CAS in 1906, the private non-profit sector has been the major purveyor of services and programs while the public sector has been the funder.

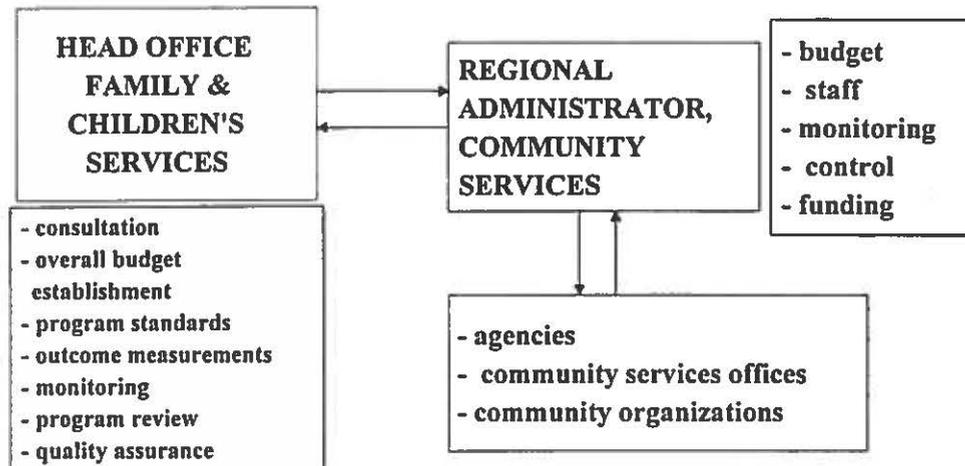
Unique to the system has been the concept of "joint service" where the private agency and the public service (community services) share one administrative head. Currently, only the CAS of Halifax and the CAS of Cape Breton, the two largest Children's Aid Societies have their own full-time administrator. In the restructured system, Regional Administrators will no longer serve as joint administrators, however, their replacements at the district office level will continue this practice in those instances where the agencies are agreeable to doing so.

The Management Audit recommends the reduction of the number of Children's Aid Societies. Given the dual administrative structure and their community base, there would be only minor dollar savings in following this recommendation. Further, the destruction of a long-established community base would be diametrically opposite to the direction the Department wishes to take in decentralizing and empowering the community to a greater extent.

In the current service system all major funding and management decisions, budget allocation and control are vested in the Head Office, Family and Children's Services Division.

Regional and District Offices relate directly to the Head Office for budget, allocation of human resources, management, program review and monitoring, as well as all other aspects of administration, management and service delivery.

The restructuring will create a different scenario. The new system will look as follows:



In the new delivery system, the Regional Administrator will have control and responsibility for the delivery of services and programs within his/her region. Within the dollar envelope for family and children's services, adjustments can be made to reflect or meet the particular needs of the region. The function of the Head Office division becomes one of oversight, standard setting, quality assurance, and support to the Regional Managers. Community organizations and agencies will no longer go to Head Office for budget, etc. but will relate to the new regional structure and authority.

C. Adoption Services

The Management Audit specifically recommends a change in the delivery structure for adoption services. The Implementation Team has considered the recommendation and has suggested a more acceptable approach would be to designate four regions for the delivery of adoption services (See Appendix "B" for detail) consistent with the new regional structure of the Department. This will enable each region to manage its own adoption services.

D. Crisis Assessment/Emergency Placement

One of the recommendations of the Management Audit the Implementation Team does not accept relates to a decrease by fifty percent of crisis assessment/emergency placement beds.

In recent years, the Family and Children's Services system has been besieged by requests for emergency placements and assessments. Many of the children and youth who are clients are troubled and act out in their families, school and their communities in unacceptable ways. They require interventions away from their homes and increasingly the family and children's services system is pressured to respond quickly to a need it cannot meet. Only four crisis/assessment centres with a total of twenty beds exist. It is unrealistic to decrease the twenty beds to ten. (For further detail see Appendix "C".)

E. Relationship with Other Divisions

Children who live in poverty are at a far greater risk of experiencing both physical and mental illness, poor educational achievement and continuing poverty throughout their lives, than children who do not live in poverty.

The Nova Scotia study, Mothers and Children: Additional Analysis, completed in 1994, shows that 10-year old children of poor families have fallen behind in most areas of intellectual development. In addition to lower overall scores, children in poor families had lower scores in vocabulary, verbal comprehension, math and reading. The study which was funded by National Welfare Grants began in 1978 and is the only longitudinal study of families in North America. The researchers felt that there was enough evidence to predict that as the children progressed in school, the differences would manifest themselves in difficulties in learning which would hamper, if not totally prevent, most of them from completing school, and that intensive intervention would be required to change the high risk factors already facing these children.

We know from other studies conducted both in the United States and Canada that there is an intergenerational cycle of poverty. As Lizabeth Schoor noted in her book, Within Our Reach, the youngsters who live in poverty are in the greatest need of intensive interventions if the cycle of poverty is to be broken, the incidence of poverty lessened and the risk of long-term damage as a result of poverty decreased. Canadian studies such as the Ontario Child Health Study contribute to the growing body of literature which shows Canadian children living in poverty are no different than their counterparts in other countries.

In Nova Scotia, there are 128,475 children between the ages of birth and nineteen years of age. Of that number, some 31% live in the poorest families; those who are on social assistance, either at a provincial or municipal level. For those 40,083 children, the future is not a very promising prospect.

In order to ensure a brighter future for the children in these poorest families linkages must be made between the social assistance and family and children's services systems since both systems have many clients in common. For example, a review of Family Benefits and Child Welfare Agencies in September, 1993 revealed that 4472 families and their children were being served by both Family Benefits and Family and Children's Services. (Young Offenders Services were not included in the count).

Within its new structure, the Department of Community Services will provide further opportunities to enhance and direct energy and resources to bridging the gap between income assistance programs and family and children's services. An attempt will be made to decompartmentalize the families and their children who are in both programs and develop a service strategy for the whole family which prevents and/or ameliorates the ravages of poverty.

F. Relationship with Other Departments

The Audit discusses the relationship of the Departments of Community Services and Health vis-à-vis mental health services for children. It recommends continuation and expansion of current contractual arrangements and a closer liaison between the two departments. Contractual arrangements work reasonably well but they do not even begin to meet the needs of the children and families who are clients of the Family and Children's Services System. There are not enough child specialists in such fields as psychiatry and psychology to meet the need. Efforts at the development of a more comprehensive, better resourced children's mental health system have failed to date. Work is now underway to try to address the needs with the development of such systems as Tri-facilities in the Metropolitan area of Halifax. These efforts, however, are not expected to achieve any major outcomes which will result in better, more accessible services for another one to two years at a minimum. Even more uncertainty has been added to the scenario with Health reform and the decentralization of budgets and control to Regional Health Boards. Where will mental health services for children fit in this scenario? Each Health Board will determine its own priorities and services for children may not be one of them.

The Department of Community Services has the children and families who desperately need the services. Aside from contracts with the Department of Health, the option the Department has used in the past to provide services such as assessment, counselling and treatment for those who are most in need has been to purchase from the private sector, both within and outside the province, often having to accept a lesser level of services than is required because that is all that is available. In 1993/94 fiscal year, the Department of Community Services spent approximately \$750,000 for contracted services. Approximately, another \$600,000 was spent on out-of-province treatment for children.

The Department is committed to providing a continuum of services and programs for the children and families it serves. To do so, it must enhance and build to an adequate level its ability to provide services and programs for children with emotional and behavioral problems and dysfunctional families who are clients of the family and children's services system. While continuing to use contractual services as the Audit recommended, the Department through a combination of reallocation and expansion will develop its own special services for families and children.

G. Education

The Management Audit discusses the need for protocols between the departments of Education and Community Services. Currently a joint Deputy Ministers and Senior Officials Committee exists, which is working diligently on the systemic problems between the two systems and developing protocols.

A simplistic view of the real problem is taken by the Management Audit. In order to resolve the existing difficulties, the very basic philosophical question of who has responsibility for the provision of education and what responsibility other service providers have for supporting the educational system must be settled. All departments are suffering under financial and resource constraints. Off-loading from one to the other will not solve the problem Department of Education is experiencing. (For further explanation, see Appendix "D").

H. The Solution

The Implementation Committee is cognizant of the fact that the Management Audit directs attention to the symptoms and not necessarily the underlying causes of tension and frustration being expressed amongst the three large departments - Community Services, Health and Education - who have some clients in common. Not one of the three departments has the resources or expertise required to provide the services and programs necessary to assist all the families and children who need their help. A solution suggested by some proponents of change is to form a super department for services to children and/or families. If this direction were taken, problems might well be exacerbated.

Development and clear articulation of a family policy by Government would set a tone for all service providers. Leadership from the Cabinet level would further enhance and ensure that positive, collaborative approaches are taken to the problems families and children are experiencing. The best of a super Ministry can be achieved without the disadvantages of an enormously weighty structure.

It is the Implementation Committee's recommendation that Government undertake the following steps to create an integrated service alliance for families and children:

- 1) development of a government policy on the family which all departments must follow;
- 2) establish a Cabinet Committee to guide and direct policy and service development for families and children
 - This Committee should be supported by a deputy minister level committee comprised of the deputy minister from each department.
- 3) direct the departments of Community Services, Health and Education to develop a common service language, compatible financial and information systems and policies, and geographic boundaries

PROCESS

PHASE I: Development of a job specification for the position of Administrator, followed by advertising of the position and the selection and hiring.

TIME FRAME

October 31, 1994 or sooner depending upon how quickly the approval process is facilitated by central agencies.

PHASE 2: Restructuring of the Head Office, Family and Children's Services Division to create three new director positions and realign programs and staff.

New job descriptions for the directors and other staff must be prepared, approved and the selection process completed.

TIME FRAME

January 1, 1995 is the target date.

PHASE 3: Staff and programs must be moved from the Rehabilitation and Community Services Division and new position specifications put in place.

TIME FRAME

These moves - Services for Mentally Handicapped Children and Summer Programs - should be able to be undertaken and completed in January, 1995, if not earlier. The move hinges on getting the three directors in place.

PHASE 4: Transfer of staff to regions will be done in conjunction with other changes.

TIME FRAME

January-February, 1995, depending on the speed with which Phases One and Two are done.

PHASE 5: Regionalization of Adoption Services will involve negotiations with current service providers, the transfer and consolidation of staff and the development of new policies. In addition, the recommendations of the Minister's Committee must be reviewed and analyzed.

TIME FRAME

The earliest these changes can be made is November 30, 1994, which will be the target date. The date may have to be adjusted depending on the response to the Report of the Minister's Committee.

PHASE 6: Complete reorganization of the Head Office, Family and Children's Services and reallocation of budget and related responsibilities to the Regional Administrators.

TIME FRAME

Everything will be in place for the beginning of fiscal year, April 1, 1995.

APPENDIX "A"

**FAMILY AND CHILDREN'S SERVICES
MAJOR SERVICES/PROGRAM STREAMS**

FAMILY AND CHILDREN'S SERVICES DIVISION
MAJOR SERVICES/PROGRAM STREAMS *

Chapter 7 - 14
APPENDIX "A"

PREVENTIVE (non-intrusive & voluntary)	REMEDIAL/ SUPPORTIVE (voluntary, can be somewhat intrusive)	PROTECTIVE (tend to be non-voluntary and the most intrusive)
Parent Resource Centres	Voluntary Care Services/Programs	Child Protection Services
Brighter Futures Initiatives	In-Home Supports	Foster Care
Parent Resource Specialists - parenting skills, etc.	Transition Houses	
Early Intervention Services & Programs	Outreach Services e.g., - transition houses	Community-Based Residential Programs
Day Care	Services to Mentally Handicapped Children	Treatment Programs and Services
Public Awareness, Education & Information Programs	Family Support Worker Services	Permanent Care and Custody
Family Violence Prevention Initiative	Men's Treatment Programs	Adoption Services
Counselling		Mediation
Child Abuse Register (Employee Focus)	Services to Mentally Handicapped Children	Child Abuse Register (client focus)
Summer Programs		
Respite Services	Post-Adoption Services	

<-----Education----->

<-----Mental Health Services----->

<-----Treatment Services----->

Common to All Streams

* Service streams are not mutually exclusive

APPENDIX "B"
ADOPTION SERVICES
DEPARTMENT OF COMMUNITY SERVICES

Overview

Currently, adoption services are provided throughout the province by 14 children's aid societies including the Mi'kmaq Family and Children's Services, five district offices of the Department of Community Services and two child placing agencies operated under the auspices of the Roman Catholic dioceses of Halifax and Antigonish. The Department of Community Services also operates a central Adoption Exchange where information concerning special needs children requiring adoption homes may be circulated to children's services agencies throughout the Province, as well as, a passive Adoption Reunion Register. The Register allows adult adoptees, adoptive parents and birth family members to register their wishes for adoption information and/or personal contact with an adoption principle.

Few of the staff in these agencies or offices are devoted full-time to the adoption function. In other words, staff carry responsibility for more than one program. In the 1992/93 fiscal year, approximately 8.4 full-time equivalent (F.T.E.) staff were allocated to adoption services which include recruitment, assessment and selection of prospective adoptive parents, the matching of children to parents and the facilitation and supervision of the adoption placements, adoption inquiry and search (post-adoption services), and international adoptions. The 8.4 F.T.E.'s represent a reduction in staffing from the 13.5 allocated to and used by the agencies until the last few years when they were forced to meet demands in other program areas such as child protection, where the increased service demands were overwhelming, by drawing resources away from adoption services. The agencies and offices where there are full-time adoption staff are the Dartmouth District Office and the Family and Children's Services of Lunenburg County. During the 1992/93 fiscal year, 281 adoptions were completed and 855 inquiries made on the Adoption Reunion Register. The majority of the adoptions occurred in the Halifax/Dartmouth Metropolitan area and Cape Breton. Of the adoptions completed, 216 or 77% were private and 65 were agency adoptions (23%).

Management Audit

The Management Audit recommends that private adoption work be eliminated from the caseloads of child welfare workers. In addition, it recommends that adoption services be centralized in Halifax and the number of workers be reduced from 7.7 person years to four person years with approximately 15 workers specializing in adoption. As can be seen from the statistics which follow, if accepted, the recommendations of the Management Audit would result in caseloads which would far exceed its recommended 15 cases per worker.

The Management Audit staffing figure is obviously incorrect since there are 8.4 and not 7.7 full time equivalent staff in adoption services throughout the province. In addition, the Management Audit only dealt with adoptions completed through the Court which means it did not recognize all the other duties and responsibilities inherent in the adoption program. The following figures provide an overview of some of the activities the Management Audit did not consider which represent a major portion of the workload of adoption staff.

COMPARATIVE STATISTICS, 1992-93, 1991-92

- these statistics better reflect the workload/caseload of adoption workers

	<u>1992-93</u>	<u>1991-92</u>
Inquiries	543	634
Applications approved	21	58
Homes approved and waiting	160	167
First Reports Completed	113	239
Second Reports Completed	139	323
Re-Evaluations	28	16
Subsidized Adoptions	87	80
(please note - these are ongoing cumulative cases)		
International Adoptions	Inquiries 98	Inquiries 88
Homes approved	27	25
Adoption Disclosure Registry (statistics not available)		cases.. 656

Individual agencies have also been facilitating ongoing contact between adoption principles since 1989. At present, including all agencies, there are approximately 150 cases of facilitation being undertaken with agency assistance.

Current Activities

Prior to the Management Audit, the Department of Community Services had begun to re-examine the structure and delivery of adoption services. A committee appointed by the deputy minister consisting of representatives of Head Office Management and both management and field workers in agencies chaired by the Coordinator of Adoption Services has been addressing the issues related to adoption services. The Committee recommended that these services be delivered on a regional basis. The Department has deferred the recommendations of the Committee and, in light of the Management Audit, is re-examining the structure of adoption services internally.

Vision

Development of an Adoption Service which is delivered throughout the Province from four strategically-placed locations; one in the Halifax/Dartmouth Metropolitan area serving this area and one serving the North Shore and eastern part of the mainland; a third in Sydney serving Cape Breton Island and a fourth in Kentville serving Western Nova Scotia. All adoptions services, excluding private third-party adoptions, would be done from these four locations.

With regard to private adoptions, the Implementation Team does not agree completely with the recommendation to eliminate agency involvement. Private relative adoptions may be less risky than non-relative third party adoptions. One of the primary mandates of family and children's services is protection of children at risk and third party non-relative adoption has the potential for abuse, if solely left to the private-for-profit sector. It is in this type of adoption where children are vulnerable to being used as tools for monetary gain by unscrupulous practitioners. Therefore, the Implementation Committee does agree with the privatization of third party adoptions.

The question of private adoptions, post-adoption services and other adoption related issues have been addressed in the Report of the Ministerial Committee on the Release of Adoption Information which was released May 4, 1994. The recommendations of this Committee's Report will have to receive a response and that response may alter the configuration of the adoption program to be offered by the four regions.

Impact

The wait for service should remain at a reasonable level. With staff who are specialized in adoptions providing the service, the quality will not diminish and may improve since the same standard of service will be applied throughout the Province.

Implementation

The recommended changes can be undertaken and completed in fiscal year 1994/95.

APPENDIX "C"

CRISIS ASSESSMENT/EMERGENCY PLACEMENT

MANAGEMENT AUDIT

The Management Audit refers to the matter of crisis residential centres for children briefly when discussing classification and assessment. It views the use of such facilities as limiting "the use of other forms of residential emergency care (ie., other forms of placement such as specialized foster homes) and the flexibility in the types of assessments conducted (including assessments on an out-patient basis)". The Audit goes on to recommend **"that the Department of Community Services reduce the use of emergency placement centres by up to 50% by using other placement options for emergency placements and arranging for the most appropriate assessments, which need not be linked to the length or type of emergency placement"**.

BACKGROUND

The development of crisis/assessment centres in Nova Scotia has a relatively recent history which has as its starting point the release of The Task Force Report on Family and Children's Services in 1987. A prevalent concern expressed by those who submitted Briefs to the Task Force was the provision of services to adolescents who had a multitude of problems. For the most part, the Task Force found not only child welfare agencies but schools and the health system, were desperate in trying to respond appropriately to the needs of these youngsters. The lack of comprehensive assessment services was seen as the primary need by the Task Force.

The 1987 Task Force report recommended **"that the Departments of Social Services and Health jointly establish and operate three regionally-based crisis/assessment centres for adolescents and other children in care"**. The Task Force saw these facilities as small eight bed units staffed by a highly trained and skilled multidisciplinary team which would provide a comprehensive assessment of the child within a thirty day time-frame.

Since 1987 four crisis/assessment centres have been developed by the Department of Community Services.

CURRENT SITUATION

1. Crisis/Assessment Centres

a. Bairncroft - September, 1989

Located in Cape Breton. This facility was developed by converting an existing facility and has 10 beds. Of those beds, 8 are designated for emergency placements. The average length of stay for a youngster at Bairncroft was twenty-five days in 1993. During the fiscal year 1993/94, there were 63 admissions to the facility.

The Bairncroft Adolescent Centre is operated by the Children's Aid Society of Cape Breton which is a non-profit community Board operated agency.

b. Pictou - November, 1989

This facility which is located in New Glasgow is operated by the Children's Aid Society of Pictou County. This facility has 7 beds of which one is for emergency placements. The average length of stay in 1993 was eight weeks or 56 days. During the fiscal year 1993/94, there were 38 admissions to the facility.

c. Brenton House - June 1990

Operated by a community based non-profit group known as the Association for the Development of Children's Residential Facilities, this facility is located in Halifax. It has a total of 12 beds of which 10 are for emergency placements. The average length of stay for children in Brenton House during 1993 was twenty-one days. During the fiscal year 1993/94, there were 165 admissions to Brenton House.

d. Oak Tree - November, 1992

This facility is located in Wolfville and is operated by the Family and Children's Services of Kings County. It has a bed capacity of 7 of which one bed is designated for emergency use. The average length of stay for 1993 was six weeks or 42 days. During the fiscal year 1993/94, there were 63 admissions to the facility.

2. Health and Community Services

In 1988 and 1989, the Departments of Community Services and Health each appointed a Co-Director of Child and Adolescent Services in an attempt to bring the health and community services systems closer together and create cohesiveness in the provision of services and programs to children and adolescents. To a large extent, this mechanism has been successful. All of the crisis/assessment centres have been developed with a close liaison with health services and/or facilities. For example, Brenton House has a contract with the Atlantic Child Guidance Centre to provide the full-time services of a psychologist in the facility.

A pilot assessment service project has been operating for two years at the Atlantic Child Guidance Centre in Halifax. The project is jointly sponsored and funded by the departments of Health and Community Services and is testing a model for comprehensive assessment services to clients of the child welfare and Court systems. A Steering Committee comprised of representatives of the two departments, community agencies and the Court are overseeing the project which provides services throughout the Halifax/Dartmouth metropolitan area. Just recently, the pilot project has undergone an evaluation.

Treatment programs at the Nova Scotia Residential Centre in Truro have been enhanced and work is underway in the metropolitan area to combine the services now provided by the children's psychiatric units at the Izaak Walton Killam Hospital for Children, the Nova Scotia Hospital and the Atlantic Child Guidance Centre into one tri-facility system; a sort of one stop shopping centre for assessment and treatment services.

3. Community Services

Within the Community Services system itself, a number of service and program elements must be recognized.

- a. The Family and Children's Services system served approximately 3,000 children and adolescents during 1993/94. Of that number, only 329 were admitted to crisis/assessment centres. This is less than eleven per cent of the children being served.
- b. The primary mode of care for children who are in voluntary care or are in permanent care and custody is foster care in a foster home; not residential care.
- c. Parent Counsellor Model programs are being operated in Colchester County and Halifax which offer specialized services in foster homes with highly trained and skilled foster parents. These programs are directed toward severely emotionally disturbed children and are an attempt to provide therapeutic non-institutional community based services in the community the child comes from.
- d. By far the majority of assessment services are provided to children on an out-patient basis either by a mental health clinic or more often by a private practitioner. For the 1993/94 fiscal year, the Department of Community Services spent approximately \$1M for such services.

RESPONSE TO THE MANAGEMENT AUDIT

The Management Audit completely misrepresents the present situation with regard to the assessment of children and crisis/emergency placement vis-à-vis the crisis/assessment centres. To decrease the number of beds by 50% would mean that a severely under resourced system would suffer even more and so would the children it is intended to serve. The recommendation of the Management Audit is viewed by the Department as unacceptable.

APPENDIX "D"
SUPPORT TO EDUCATION

BACKGROUND

The Management Audit Report did not adequately address the depth of concerns surrounding the Department of Community Services/Department of Education interface. The recommendation that the respective Deputy Ministers resolve outstanding issues within a three month period took into account neither the existing mechanisms for linkage between the two departments nor the comprehensiveness of the issues - mainly in the funding area - which have yet to be addressed. As articulated, the recommendation also failed to address the issues surrounding the mutual support which Department of Education provides to Department of Community Services.

In the development of holistic continua for both children and SARS, the relationship between Department of Education and Department of Community Services is critical to the satisfactory provision of comprehensive community-based services. Improved access of SARS to community-college placements, the responsibility for the provision of services to special needs children during the deinstitutionalization process and the responsibility of school boards for the provision of services to students whose families are in crises are all issues which must be addressed. The recent protocol which allows for the use of Department of Community Services funds in the transition to community living for CTC residents was a first step in the clarification process; however, it is essential that in future planning, the responsibility for the provision of genuinely educational services not become blurred with support issues (the recent Department of Community Services and Department of Health protocol on the support to children in the community is a model in this area.)

Clearly, the Management Auditors did not fully understand either the scope of the task or the potential financial impact of program change.

SUGGESTED COURSE OF ACTION

Using the existing mechanism of the joint Deputy Minister's Committee on Community Services and Education, the Deputy Ministers should task senior officials to develop an inventory of all outstanding concerns. Given the reality of financial constraints, the deputies should prioritize this inventory and direct staff to develop draft protocols with accurate costing implications so that areas of joint priority such as the review of training to SARS and the development of appropriate services to special needs children are addressed as quickly as possible. The fundamental starting point for this process should centre on agreement over the definitions of service which each department can be expected to provide and a clear understanding of the fiscal implications of expending non CAP - shareable dollars.

CHAPTER 8

STRATEGIC PLANNING AND POLICY DIVISION

RATIONALE FOR RESTRUCTURING

The Management Audit made a number of recommendations related to the strengthening of the Department's strategic and operational planning capabilities, program evaluation and review, as well as, the development of measurable operational indicators or outcomes and the establishment of program standards. In order to implement these recommendations, it was suggested by the Auditors that greater resources be focussed within the Research, Planning and Evaluation Division.

The Department of Community Services recognizes the value of the Audit recommendations. Restructuring is necessary to address them fully. The Department will create an entirely new Division, the Strategic Planning and Policy Division, which will replace and incorporate many of the present components of the Research, Planning and Management Information Services Division and have a much strengthened capacity for strategic and operational planning and program evaluation and review. The transfer of staff from the Family Benefits Division, the Rehabilitation and Community Services Division, Field Services and Personnel Division, and the Office of the Deputy Minister will provide additional resources for these purposes. The new Division will also assume some of the responsibilities related to management consultation and support now vested in the Office of the Deputy Minister and in the current Field Services and Personnel Division with the transfer of staff from those areas. Further, in line with the Audit recommendations the computer and management information systems unit of the present Research, Planning and Management Information Services Division will be transferred to the newly created Finance and Administration Division.

OBJECTIVES

The new Strategic Planning and Policy Division will create a structure which will ensure the existence of a co-ordinated, comprehensive and cohesive response to the development of policy, strategic and operational plans, and program evaluation and review based on measurable standards and operational indicators linked together with support to management and program delivery and human resource development. Aside from the specific services of finance and personnel, the Division will encompass all other support services to program divisions and to the Field.

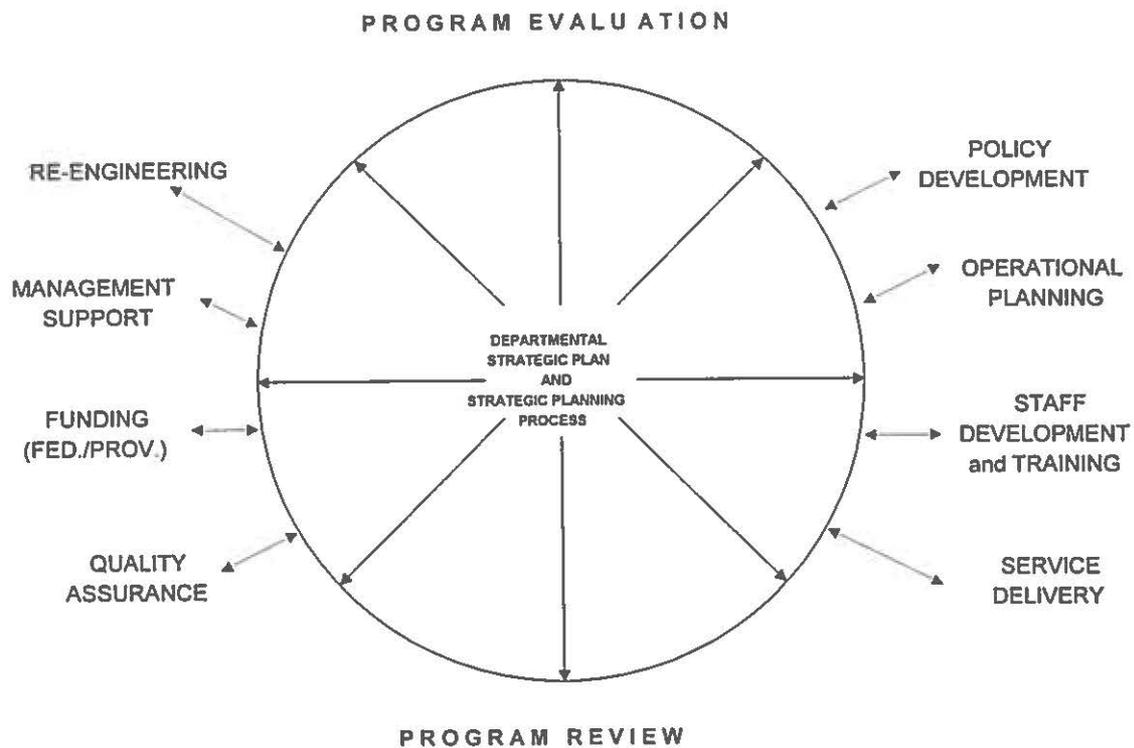
The Administrator of the Strategic Planning and Policy Division together with the Administrator of the Finance and Administration Division will be responsible for co-ordinating the strategic and operational planning process with the budget process by sorting out priorities which lead to fundamental changes in policy and program design and may impact upon the cost-effective operation of the Department.

THE CONTINUUM

The services within the new Division will form a dynamic continuum of quality control and support services to other Head Office divisions, the Minister and Deputy Minister and Field operations. Each component will contribute to the overall operationalization of the Department's goals and objectives and is part of an internal quality assurance system. At any given time, it should be able to measure how well the Department is doing achieving its goals and objectives.

The Departmental Strategic Plan is at the apex of the planning process. All other services and/or planning and review components support, enhance or effect change in the Strategic Plan. The planning, program review and evaluation processes are interactive with one either supporting or influencing the other and resulting in adjustments in such areas as policy, service delivery, structure and program. Quality service to clients and effective, efficient use of human and financial resources require all these elements to work in a coherent, congruent manner.

As the following schematic illustrates, there is a flow in and out of the wheel and a continuous flow either building upon, changing or responding to the Strategic Plan.



THE NEW DIVISION - STRATEGIC PLANNING AND POLICY

Three units will be created which will differ significantly from the current operational configuration within the Division. Functionally, the three units will create a synergy for excellence in program and services delivery, and will complement each other. An overview of each Unit follows:

1. Evaluation, Program Review and Research

These three functions fit together because they serve a similar purpose (program review and evaluation) or use similar methodologies (evaluation and research). There is also a relationship between evaluation, program review and program audit. At present, the department does not have a clear definition of each. This will be a necessary first step in the formation of an evaluation policy. Evaluation is the most comprehensive form of program review and involves an examination of how programs work, their impact and cost effectiveness. Evaluation questions are related to program objectives. Program reviews are less comprehensive and are usually designed to address specific questions that arise from problems with a program. Program audits are a means of monitoring programs and are usually focussed on determining if standards are being met. Both program reviews and audits may contain elements of program evaluation. e.g, client feedback.

The evaluation section of the department will be involved in all of the above functions. In particular, the unit will take the lead in standardizing the program audit process. This has begun with the development of a Program Audit Manual which will be followed by training and assistance in developing instruments for program audits. Assistance will also be provided in maintaining the standards established in the manual.

Program Review and Evaluation will both be the direct responsibility of the unit. The management auditors raised the need for objectivity and this can best be achieved if the functions are outside program divisions. However, stakeholders will be involved through evaluation steering committees.

2. Strategic and Operational Planning and Policy Development

The Strategic and Operational Planning and Policy functions must be further developed. Preparations have begun to develop staff expertise in relation to strategic planning so the process is already underway for the development of a stronger Strategic Planning process within the Department.

In relation to policy development, most of the current policy work in the department is done through committees which have representatives from all divisions that are affected by the specific policy issue. This works very well but there is a need for the capability to undertake such things as more quantitative analysis, e.g., the impact of changes to federal programs, such as UI on provincial programs and the cost implications when changes are made to department programs. With the increasing number of agreements to exchange information with federal departments, the Department now has data from federal programs that, given the resources, can be combined with its own program data so that it will be less reliant on federal impact studies. This involves establishing databases, monitoring these to identify normal fluctuations and becoming familiar with a variety of computer models.

The role of the policy function in the division will be clearly defined to avoid confusion with any overlap with the work in the program and financial services divisions. For example, staff in the program divisions currently do some of the work related to the impacts of program changes. The new unit will have the capability of doing more sophisticated analysis and will work with the other divisions to enhance the overall impact analysis. Similarly, the financial analysts in financial services have detailed financial data for many of the programs but this has yet to be incorporated into longitudinal databases that are necessary for more indepth analyses.

Operational Planning feeds into and evolves from the Strategic Plan and related process. It is a dynamic, fluid short-term process which coalesces with the budget cycle and results in the adjustment of programs and targets to meet changing requirements, goals and objectives. It is, therefore, most appropriately located in this Unit.

Although not mentioned in the Unit's title, several other functions will be within its mandate - Federal/Provincial/Territorial Relations and Negotiations, Information Services, Special Projects such as the testing of new operational structures and/or programs and coordination of interdepartmental committees at the Deputy or Minister level and coordination of Councils and Commissions reporting to the Minister. In one way or another, these are all functions which contribute to or impinge upon the development/change of policy and strategic or operational plans.

3. Staff and Management Support Services

This unit is designed to bring together disparate services which provide a support function and are currently in different areas of the Department., Staff training and development, the library, consultation services, management evaluation and review functions will be moved to the new Unit. This unit will work in a co-operative manner with Finance and Administration to provide strengthened support services to the Field and Head Office.

It will have the capability to ensure new program/policy or major program and policy changes are addressed with all staff through the training mechanism and is, therefore, the part of the Division which will operationalize what the other two units do.

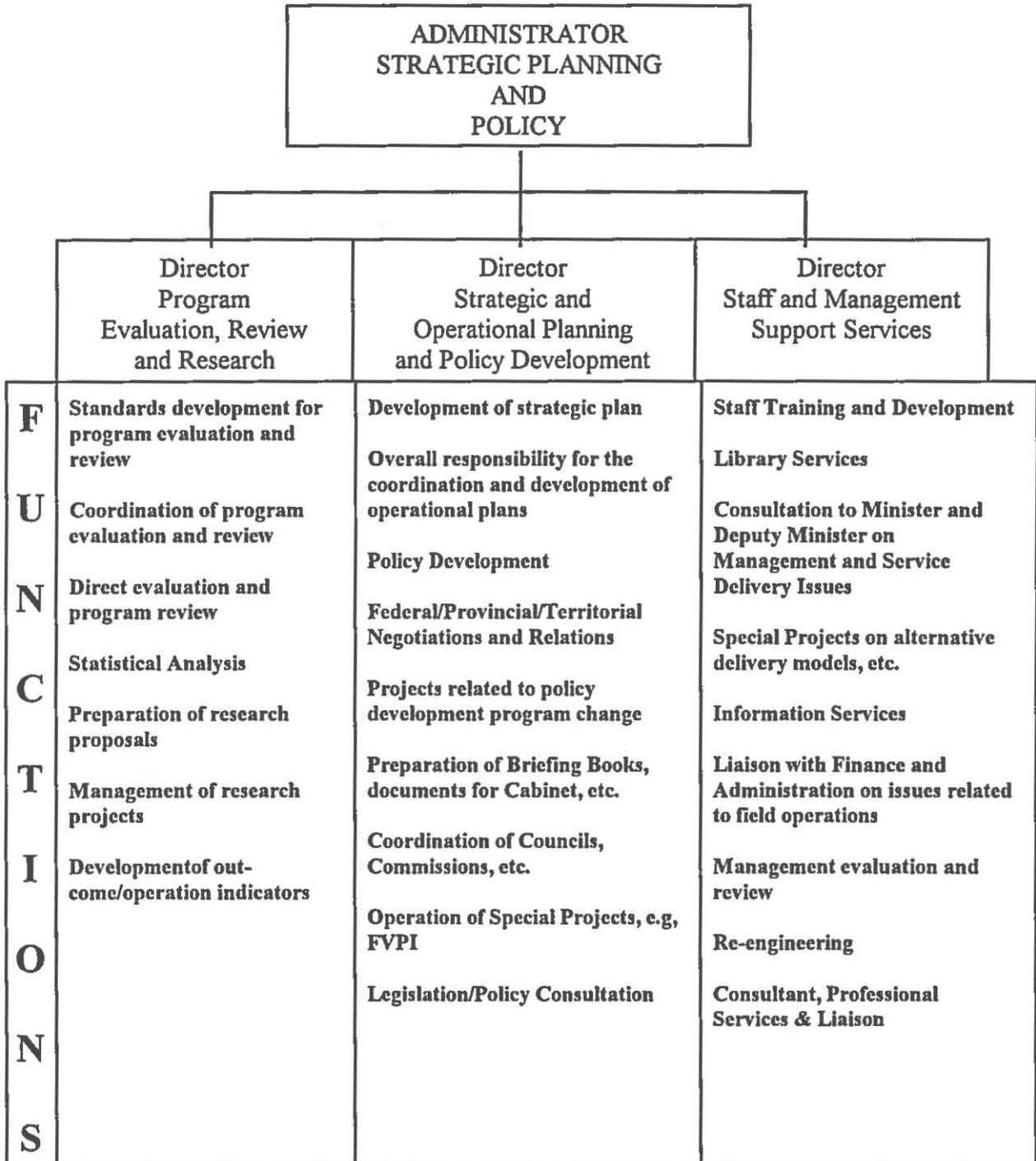
The Culture for the New Division

When the restructuring has been completed, the Strategic Planning and Management Support Services Division will have a culture in which service and support to the total operation of the Department in the best interests of its clients will be the cornerstone. Its mandate will be:

- to provide services and support to enable delivery of the Department's programs and services with a skilled, knowledgeable staff based upon
- clearly enunciated policies
- well developed strategic and operational plans
- measurable standards and outcome indicators
- maximum usage of funding arrangements
- excellent, well-structured evaluation and program review standards and practices
- a creative and quality producing human resources development system

ORGANIZATIONAL CHART

The chart on the following page illustrates the structure for the new division and the functional configuration of each unit within it.



STAFFING IMPACT:

E.R.I.P. deletes	1
Vacant positions deleted	2
Transfers to other divisions	21
Transfers in from other divisions	<u>9</u>
Net change	<u>(15)</u>

SUMMARY:

Present complement	38
Complement after restructuring	<u>23</u>
Change in complement	<u>(15)</u>

PROCESS

The timetable for creating the new Division and having it fully operational will depend on the speed with which approvals for the proposed changes are received from central agencies and the alacrity with which restructuring occurs in other parts of the Department. If all matters related to the changes move smoothly, the new Division can be fully operational between four to six months from start to finish.

PHASE ONE: Preparation for the restructuring of the Division

- Preparation of job descriptions to reflect new positions and/or changed job responsibilities
- Internal divisional realignment of staff

TIME FRAME: September, 1994

PHASE TWO: Transfers related to restructuring

- A series of transfers in and out of the Division are planned to establish the three units. They are as follows:
 1. Transfer of the Management Information and Computer Services section to Finance and Administration.
 2. Transfer in -
 - 2 positions from the existing Field Services and Personnel Divisions
 - 2 positions from the existing Rehabilitation and Community Services Division
 - 2 positions from the current Family Benefits Division
 - 2 positions from the Office of the Deputy Minister

TIME FRAME: December 31, 1994

PHASE THREE: Filling of Existing Vacancies

- The development of a job specification, advertising of the position and the selection/hiring process will be started in Phase One to fill an existing vacant position for a research and statistical officer for the new Program Evaluation, Review and Research Unit.

TIME FRAME: October 15, 1994

PHASE FOUR: Incorporation of the Library into the Staff Training and Development Unit.

TIME FRAME: October 15, 1994

CHAPTER 9

FINANCE AND ADMINISTRATION DIVISION

RATIONALE FOR RESTRUCTURING

Unlike most departments of Government, Community Services has maintained a somewhat arbitrary split between its financial services and personnel programs. Additionally, the existing model of Field Services delivery has all program staff reporting to the Director of Field Services and Personnel. This is a cumbersome and dated model which does not allow for fully regionalized decision-making.

The need to reform this system was clearly identified in the Management Audit, although the recommendation addressed neither the issue of program delivery in the field nor the issue of uniform delivery assessment mechanisms. Although the Department strongly agrees with the recommendation to merge the two existing divisions, restructuring must go beyond that initial stage to ensure that reporting structures, program measurements and delivery models are fully clarified.

EXISTING SERVICES

The two existing divisions consist of the following components:

Field Services & Personnel	Financial Services
- Personnel Services	- Budget Planning
- Field Delivery	- Claiming
- Field Consultation	- Accounting & Reporting
- Vocational Assessment Services	- Revenue & Disbursements
	- Administrative Support

As outlined elsewhere in this report, the Department intends to restructure Vocational Assessment Services so that the training-related assessment component of the program will be merged into the Income and Employment Support Division. Responsibility for Field Services Consultation will be transferred to the Strategic Planning and Management Support Division where responsibility for departmental programs, evaluation, standard-setting and program review will rest.

As recommended in the management audit the MIS section of the current division Policy Planning and MIS will be transferred into this Division

Once the restructuring has been effected, the Division will consist of the following components:

I. Accounting, Claiming, Revenue and Disbursements:

- All of the traditional accounting functions in the Department's dealings with other levels of government, funded agencies and individuals, supplies, staff, etc.
- All cash receipts, cheque requisition preparation and related accounting and recording keeping.
- Maintenance and improvement of systems to ensure that the information critical to proper decision-making is readily available in a useful and reliable form.

II. Budgets and Financial Results:

- Preparation and support services to staff for the Department's and funded agencies' budgets.
- Monitoring and analysis of reported results against budget and identifying the causes for trouble-spots.

III. Other Administrative Services:

- Space and facilities management support.
- Purchasing and other resource acquisition support.

IV. Personnel:

- Personnel and payroll services that are delivered under the general categories of:
 - Human resource acquisition
 - Labour relations
 - Maintenance of HRMS data

V. Technology (MIS):

- All technological support systems to ensure that the Department is able to employ the latest cost-efficient techniques and resources to support a streamlined decentralized service. This includes communications; computerized systems, case management and management information and other technological advances to provide maximum support to Department staff to help them in coping with constrained resources on all fronts.
- Computer systems (programs) development; e.g., new income assistance programs.

PROCESS**PHASE ONE**

This phase will see the combination of the two existing divisions--Financial Services and Field Services and Personnel. Components will include:

- Combine the responsibilities of the positions of Director of Financial Services and Director of Field Services and Personnel into one position--Administrator of Finance and Administration. Fill the position on an interim basis to accomplish implementation of the major parts of the plan.
- Perform preliminary systems, procedures and policy analysis to effect realignment of job functions to balance workloads and compensate for position losses and new service responsibilities.
- Reprofile staff workload so that program divisions receive improved budget monitoring assistance on a consistent basis.
- Create new and/or updated positions, job titles and specifications to reflect the changes suggested by the systems analysis.
- Transfer the staff of the Developmental and Vocational Assessment Services Section to the new Income and Employment Support Division.
- Reduce the number of regions from the current seven to four and have the four remaining Regional Administrators reporting directly to the Deputy Minister.

PHASE ONE (CON'T)

- Transfer the Senior Consultant to the Strategic Planning Division to restructure his responsibilities to focus exclusively on management support to the field.

TIMEFRAME: Some of this work is already underway. With timely approvals of the plan, **PHASE ONE** can be completed by October, 1994.

PHASE TWO

Once the existing components of the Division have been amalgamated, Management Information Services will be transferred from the Strategic Planning Division.

PHASE TWO will also see the creation of a discrete claims processing unit within the accounting section. This unit will process claims to and from all levels of government (CAP claims, municipal claims) as well as handling day care subsidy claims and travel claims.

The detail of the organizational structure of the Division will be refined in **PHASE TWO**.

TIMEFRAME: **PHASE TWO** can be initiated as soon as the merger of existing service divisions has successfully begun. Completion of **PHASE TWO** will occur in late fall of 1994.

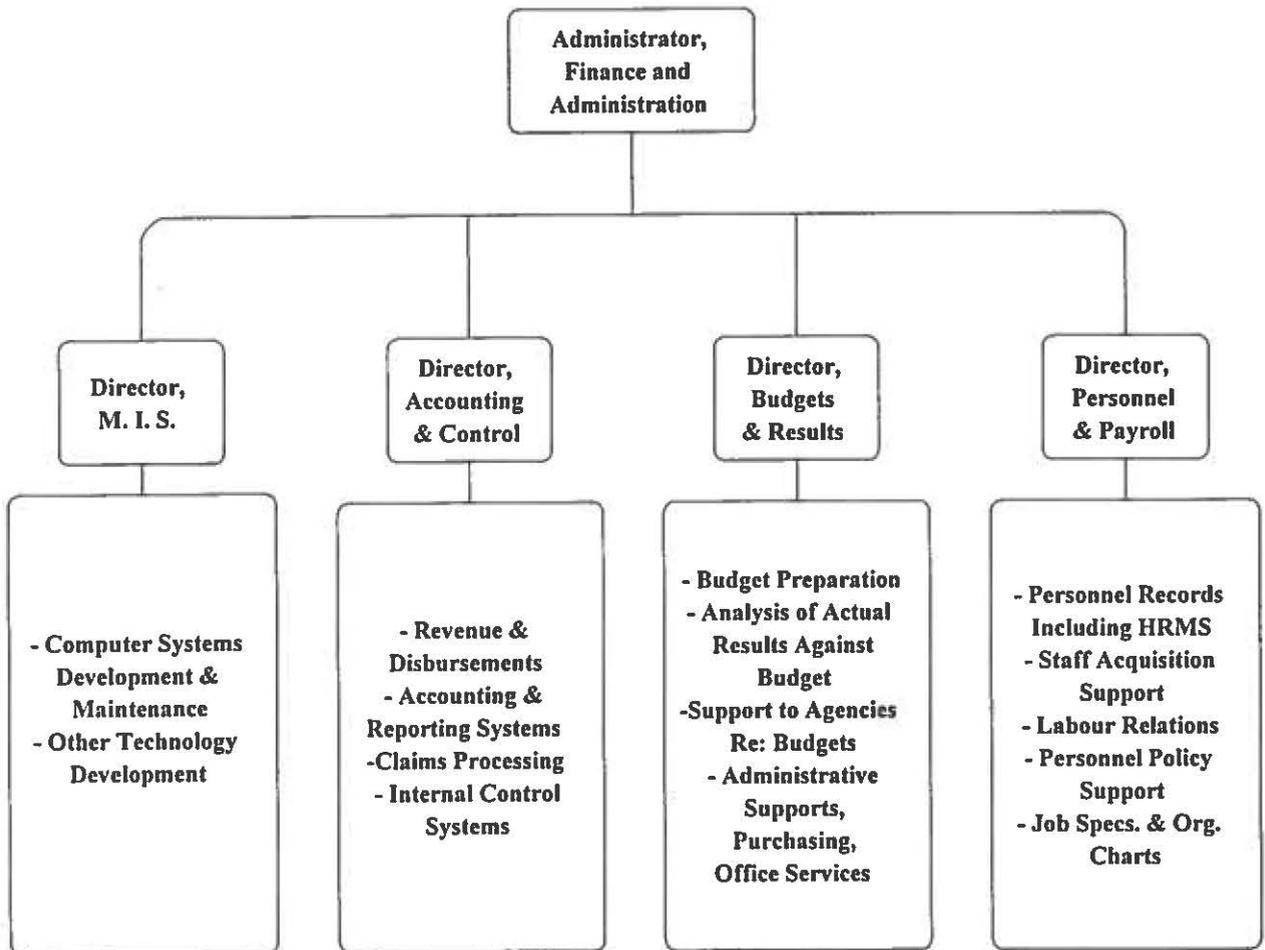
PHASE THREE

In this phase, emphasis will be placed on developing a series of quality "deliverables" to support a fully regionalized operation. These include:

- Monthly financial reports which are timely and user friendly
- Advice on developing trends
- Improved budget monitoring
- Delivery of accounting and budget analysis functions in field settings
- Completed job descriptions for staff
- Improved Communications Plan and systems.

TIMEFRAME: Measurable improvements in all of the above will be achieved by March 31, 1995. Further refinements will continue into fiscal 1995-96

**ORGANIZATIONAL
STRUCTURE**



STAFFING IMPACT:

E.R.I.P. delete(s)	5
Vacant positions deleted	1
Lay-offs due to restructuring	2
Transfers out to other divisions	7
Transfers in from other divisions	<u>21</u>
Net change	<u><u>6</u></u>

SUMMARY:

Present Complement (2 divisions)	42
Complement after restructuring	<u>48</u>
Change in complement	<u><u>6</u></u>

CHAPTER 10

Each of the major chapters outlining restructuring initiatives for head office divisions contains a short staffing impact analysis. This analysis illustrates by division the number of positions which have been identified for transfer, lay-off or ERIP deletion. While the net result of the implementation of this report will therefore occasion some significant staffing reconfiguration, it must be stressed that these changes represent only the first phase of other staff shifts which will occur from implementation date to March of 1997. In order to highlight some of these changes (a number of which have already been publicly announced) this chapter will itemize all staff changes which have been identified and which go beyond the specific impacts which have been calculated for head office programs.

Program Transfers

As outlined in chapter 12, two major programs are slated to be transferred from the Department of Community Services in order to achieve required program rationalization and service delivery. On August 1, 1994, all Family Court and Young Offender Services will transfer to the Department of Justice, thereby reducing the Department of Community Services FTE complement by 218.5 positions. This transfer process is well underway and both departments have begun an intensive communication strategy to assist staff with the change.

Once the recommendations of this report are approved, the department will initiate a transfer process with the Department of Health to begin the decentralization of the 10.5 FTE staff who provide Adult Protection Services. As outlined in chapter 12, this process will take approximately four months to complete and an important component of the move will be an orientation and communications process similar to that employed in the Family Court/Young Offenders transfer.

Deinstitutionalization

In the spring of 1994 the Department of Community Services, as part of its commitment to the mainstreaming of children, announced the planned deinstitutionalization of facilities for children with a mental handicap. Target dates have been established for two of the three institutions and the Department has already launched an outplacement process to assist both staff and families of those children which will be affected by the closure.

Although a firm closure date has not yet been fixed for the Sydney Children's Training Centre, closure of the Dartmouth CTC and the Nova Scotia Youth Training Centre will have the following impact on the staff complement:

- June, 1996 closure of NSYTC: 118 positions
- March, 1997 closure of Dartmouth CTC: 35 positions

The remainder of the field configuration will be minimally affected by the rest of the recommendations of this report. However, as part of the municipal/provincial exchange process staff configurations, numbers of administrative and delivery personnel may be expected to change considerably.

It is important to note that this announcement has already resulted in a number of interim arrangements to minimize ERIP refills wherever possible by employing co-management strategies at NSYTC and NSRC in Truro and by back-filling necessary positions on a term basis only. In conjunction with the Department of Human Resources the Department of Community Services has already launched some significant support initiatives designed to assist staff at NSYTC to cope with the closure process and to identify possible career options.

Field Office Restructuring/Transfer of Municipal Social Services

As outlined in earlier chapters, those staff positions required to support the new field delivery model have been identified through head office restructuring. It is however anticipated that once the new model of service delivery becomes operational, a further 20 positions which currently support the Family Benefits program will be redundant in their current configuration. It is however premature to determine whether all of these positions would be eligible for deletion, since the impact of the transfer of responsibility for municipal social services is as yet unknown.

When responsibility for the provision of municipal social services transfers to the Province on April 1, 1995, there are approximately 314 staff who will be affected by the change. The Ministers' Committee on Interim Policy arrangement which is preparing for the transfer is currently exploring a number of options to determine the most efficient and cost-effective way to staff the program between the April 1, 1995 date and the complete reconfiguration of all income assistance programs. Although the Ministers' Committee has not yet indicated a preference for any one option, it can be anticipated that there will be administrative and clerical efficiencies which can be made after April 1, 1995 and that within twelve months of that date all additional staff rationalizations will be identified.

NOTE: one area of concern in the municipal transfer relates to those staff at the municipal level who currently provide homemaker and community placement services (255 FTE's). These functions now largely fall within the ambit of the Department of Health however restructuring in that department may render these positions redundant in their current configurations and a decision will have to be made how best to address any lay-offs and/or deletions in this area prior to April 1, 1995.

Conclusion

In 1994/95, the funded staff complement of the Department of Community Services was 1,084 FTE's. As a result of restructuring and deinstitutionalization, this number will be reduced to 667 by June 30, 1997. Although the assumption or responsibility for municipal program may increase that total substantially, the careful implementation of a new income assistance program can and will do much to minimize staff increases and to make sure that no opportunity for administrative rationalization is overlooked.

CHAPTER 11

MODEL FOR DELIVERY OF SERVICES IN THE FIELD

REGIONAL RE-STRUCTURING

In keeping with the Department's vision of a better rationalized fully integrated and completely regionalized model of service delivery, existing field structures within the Department will have to be reconfigured in order to meet the objectives of decentralized decision making. As recommended in the Management Audit, the Department recognizes the need for all Government Departments to move to co-terminus boundaries. The Department of Community Services is thus adopting the four region model put forward by the Department of Transportation.

A major change for the Department will be the fact that the Regional Administrators will become regional managers with minimal staff support and no direct responsibility for the provision of child welfare or income assistance services. In this new structure, the Regional Manager will ultimately be supported by a small group of professional staff including a child welfare specialist and a financial services officer and will be accountable for the regional support envelope for all Community Services-supported programs in the region.

Each of the major offices in the regions will be managed by a District Supervisor who will be responsible for the provision of joint services and on an interim basis, for the administration of municipal contracts where appropriate. While the Regional Administrator will have no designated management support per se, one District Supervisor in each region will serve as senior district supervisor and will provide management backup in the absence of the Regional Administrator. The Senior District Supervisor in the region will have the responsibility of coordinating a number of regional services including In-Home Support, Parent Resource Programs and Day Care. It is important to note that in the restructuring model, responsibility for all facilities and agencies within a particular region will fall to the Regional Administrator and that Head Office accountability for direct program delivery will cease. As noted elsewhere in the Report, this important change will mean that several anomalous programs, such as the Parent Support Worker Program, will be regionally and not centrally managed.

Within six months of the implementation of the new structure, Regional Advisory Councils will be put in place to provide a higher level of community input into the decentralized decision making process. These regional councils will consist of representatives from the region and will meet at least quarterly to discuss priority setting and regional program needs. Provision for the creation of these regional councils already exists within current legislation.

In the Federal system in both the Departments of Health and Human Resources Development, Regional Directors generally report directly to the Deputy Minister and form a management council team with program Administrators in Ottawa. This group meets bi-weekly and in both Departments is collectively responsible for senior decision making and priority setting. With the consolidation of the current seven Community Services regions into four, this approach would become viable for Nova Scotia and would reflect a more classically regionalized process for management decision making.

It is important to stress that while all regional configurations will meet the articulated vision of the Department, structures will have to be flexible enough to account for differences in a geographic, historical and service delivery structures.

PROCESS

PHASE 1 - RECONFIGURED REGIONAL STRUCTURES

As a result of the ERIP rationalization plan, the Department of Community Services now has a restructured model of field service delivery based upon four rather than seven regions. While this plan requires refinement, with both community agencies and staff input, the delineation of the general direction has been agreed upon and the general outlines of staff redeployment have been set.

A new job description for the Regional Administrator positions must be prepared and approved.

Time Frame

The plan for restructuring has been completed and the reconfiguration of the regions will be in place by the Fall of 1994. Throughout the months of July and August, consultations with family and children's services agencies will take place in or order to produce the fine detail required in the first phase of regional restructuring.

PHASE 2 - RESTRUCTURING OF DISTRICT SUPERVISOR POSITIONS

As soon as the Regional Administrators are in place, work can begin on the restructuring of accountability for District Supervisors within the Department. This will entail the drafting of new job descriptions, the designation of one senior District Supervisor per region and the re-assignment of personnel to provide District Supervisor coverage in those regions where Regional Administrators currently carry responsibility for the provision of service.

Time Frame

Some work has already begun on this process through the ERIP regionalization plan. However, it is anticipated that the new District Supervisor structure can be in place by January 1, 1995

PHASE 3 - CREATION OF REGIONAL SOCIAL SERVICES COUNCILS

The creation of regional councils to encourage greater consumer and stakeholder input into decision making is a critical component of the restructuring process. Legislation already exists which allows for the creation of these regional vehicles.

Time Frame

Within six months of the implementation of the regional restructuring plan, Regional Advisory Councils can be operationalized.

PHASE 4 - RECONFIGURATION OF STAFF SUPPORT

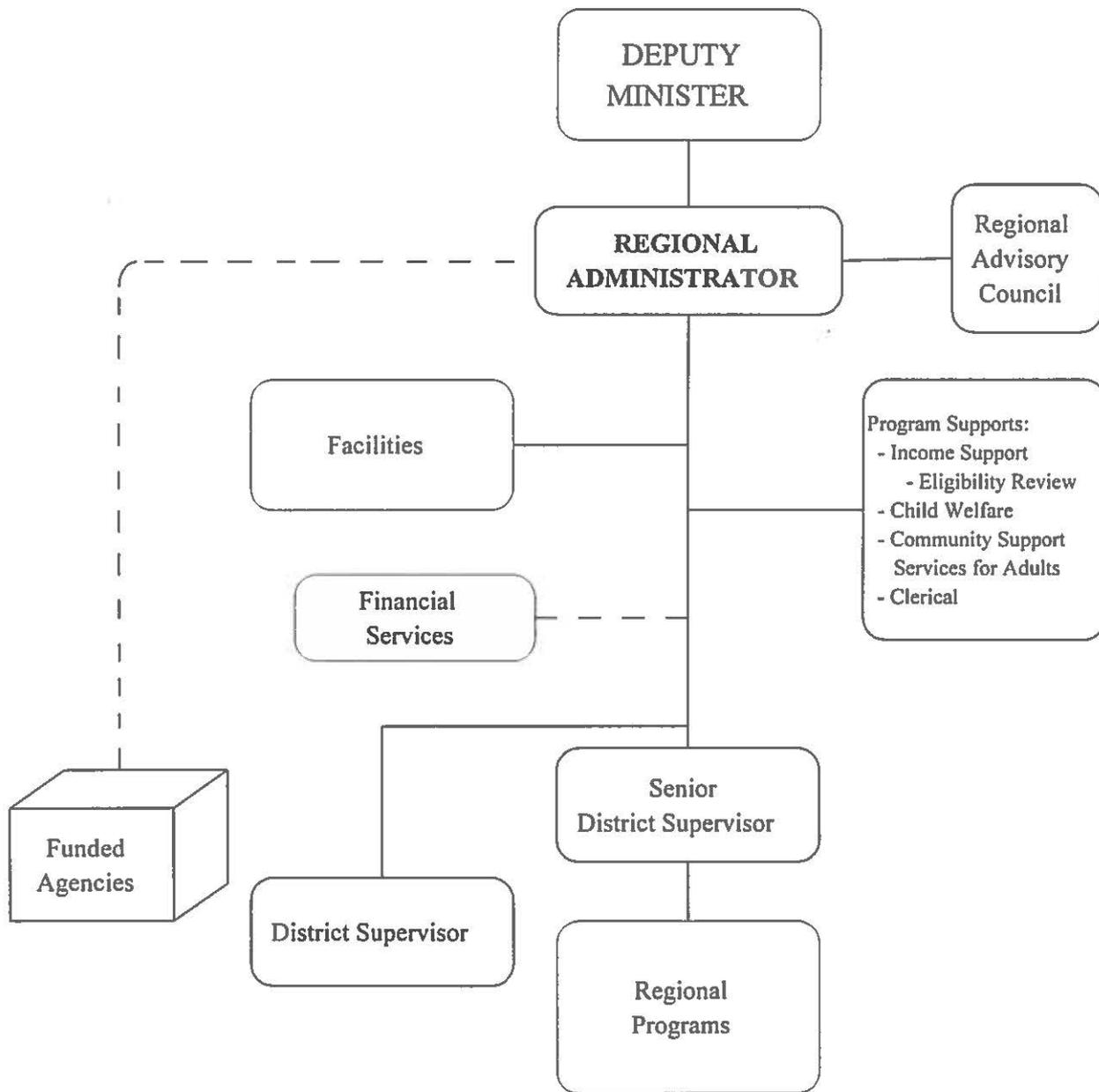
In order to support the management work of the Regional Administrators, child welfare, income assistance community supports for adults and financial services personnel will have to be identified and assigned to work in specific regions. In addition, staff who currently report through to Head Office Program Managers will have to be re-assigned to regional offices.

Time Frame

The identification and reassignment of staff is a three step process:

- (1) Those staff who currently report to Head Office program managers can be assigned to the field as soon as the Regional Administrators are in place.
- (2) As part of the ERIP and Head Office restructuring plans, financial services support staff can be identified and made available to support the work of the Regional Administrator. This process should be completed by the late Fall of 1994.
- (3) Identification of specialist resources for child welfare consultation, community supports for adults and income assistance support services. With regard to income assistance, it is not anticipated that it will be possible to reconfigure positions to supply this direct support until such time as the transfer of Municipal Social Services has occurred. The time frame for implementing this phase of the plan is therefore contingent upon the April 1, 1995 proposed date of transfer. In relation to the other specialist positions, transfers of personnel can be made to create these positions by March 31, 1995.

ORGANIZATIONAL STRUCTURE



CHAPTER 12

The Management Audit identified two specific programs--Young Offenders and Court Services and Adult Protection--which should be transferred out of the Department of Community Services.

RATIONALE

1. Young Offender and Court Services

Since the release of the Charles Task Force Report on Court Reform, the Province has been working toward the creation of a Unified Court Structure. Nova Scotia is currently one of only two provinces which maintain split jurisdictions for young offender programs and it was widely recognized that once jurisdiction for the Family Court was transferred to the Department of Justice, all young offender services would eventually follow.

The specific program components to be transferred are itemized in Appendix A.

2. Adult Protection

Given the restructuring of all services and programs within the Department of Community Services, all programs must be reviewed to determine whether they conform to mandates and are part of an identified continuum of care. With the transfer of responsibility of the Homes for the Aged and Nursing Homes, and Home Care to the Department of Health, the possibility exists to create a seamless continuum of in-home to institutionalized services which can be buttressed by a strong Adult Protection service to assist clients in crisis.

As outlined in Appendix B, the current makeshift staffing arrangements for this program are problematic and a desired outcome would be the deployment of staff trained in assessment procedures (i.e. Home Care assessors, etc.) instead of Family Benefits staff who provide emergency back-up on a volunteer basis with minimal training in this field.

Specific issues relating to the transfers are itemized in more detail in the appendices which follow.

- TIMEFRAME:**
1. Young Offender and Court Services will transfer on August 1, 1994.
 2. It is anticipated that it will take approximately four months to complete the Adult Protection move.

APPENDIX A

YOUNG OFFENDERS AND COURT SERVICES

YOUNG OFFENDER AND COURT SERVICES**APPENDIX "A"**

The Management Audit recommends the transfer of Young Offender programs and the Family Court to the Department of Justice. According to the auditors, this would include probation services, residential placement, custody and assessment services, diversion programs and the operation of the Shelburne Youth Centre, as well as, all services of the Family Court.

Time-Frame for the Transfer

The transfer of responsibility will occur on August 1, 1994.

Process

The work necessary for the transfer has already begun within both the Department of Community Services and the Department of Justice. The transition team is currently working to address the following issues:

1. Personnel
 - All staff to be transferred must be identified as to classification, salary, travel (option and otherwise), home base by location - i.e. Court site, Office, Institution
 - Vacancies and early retirements must be identified
 - Judges and their related salaries, travel, etc. must be identified, as well as, their home base and circuit court routes
 - Arrangements must be made for the transfer of the personnel files
2. Budget
 - All costs, including grants to agencies, must be identified
 - Federal funding issues
3. Inventory
 - Furniture and equipment to be transferred must be listed

YOUNG OFFENDERS AND COURT SERVICES

APPENDIX "A"

4. Space

- Current space occupied, both in departmental offices and separate Court sites, must be identified and space arrangements addressed such as rent, leases
- Department of Supply and Services to be informed of the transfer and impact on space

5. Documents

- All Head Office and Field Office/Court files must be prepared for transfer and arrangements made to do the actual transfer.

6. Legal

- The Act(s) and Regulations pertaining to Family Court must be reviewed for any needed changes in relation to the jurisdictional change.

7. Technological

- The departments of Community Services and Justice currently share the JOIS system; however, this is not true of the enforcement system in the Family Court. Arrangements will have to be made for the transfer of the maintenance enforcement system.

8. Preparation of a joint Memorandum to Cabinet regarding the transfer.

9. Meetings with the Amalgamation Committee and the Technological Change Committee.

YOUNG OFFENDER AND COURT SERVICES**APPENDIX "A"****Issues**

1. There is a cross-over with the children 12-16 years old between the Young Offender system and the child welfare system. Many of these young children flow back and forth and are the exclusive jurisdiction of neither. With both these systems under the aegis of one department communications, the flow of information and case management were easier. Some mechanism will have to be put in place to ensure these children do not fall in a gap between the two departments because of the transfer.
2. A similar cross-over currently exists between the Family Benefits program and the Maintenance Enforcement program. Some mechanisms will have to be put in place to ensure that information sharing between the two departments will occur on a timely basis in order to maximize program resources.
3. A new Family Maintenance Act is currently under preparation. The two departments have already identified a separate process for the smooth transfer of this program and its related development.

APPENDIX B
ADULT PROTECTION

MANAGEMENT AUDIT

Based on the perception that "the majority of adult protection cases require the types of intervention most commonly provided through the Department of Health", the Management Audit recommended "that the responsibility for adult protection services be transferred to the Department of Health and that delivery of these services be carried out through the Regional Health Authorities".

Given that as the Audit points out many of the services and programs required by clients of the Adult Protection Program are of a health/medical nature, the Department of Community Services concurs with the recommendation to move the Adult Protection Program to the Department of Health.

BACKGROUND

In the early 1980's, a need for a program to protect elderly Nova Scotians from abuse was identified. Government responded to the need by introducing the Adult Protection Act in 1985 which was designed not only to protect the elderly but younger adults, as well. The purpose of the Act is "to provide a means whereby adults who lack the ability to care and fend adequately for themselves can be protected from abuse and neglect by providing them with access to services which will enhance their ability to care and fend for themselves or which will protect them from abuse or neglect" (1985, c.2.s.2).

The Adult Protection Program is a crisis oriented service. Most of the referrals made to the program require immediate action and response. It also acts as a referral service directing clients to needed homemaker or in-home support services, institutional services and a variety of other programs and services.

For the year ending March 31, 1994, the program handled a total caseload of 2,860 clients or some 26% more than the previous year. Approximately 75% of the referrals were related to allegations of neglect and the other 25% were allegations of abuse. Sixty-one percent of the alleged victims were female. Of the total caseload, some 77% required at least one home assessment and 14% required Court intervention.

STAFF RESOURCES

The Adult Protection Program has ten full-time staff allocated to it in both the Head Office and the Field. A Co-ordinator and Secretary are located in the Head Office, three field staff work from the Halifax Regional Office, one from the Western Regional Office, one from the Valley Regional Office, one from each of the Central Regional, North Shore Regional and Cape Breton Regional offices.

Since there are not sufficient full-time staff to operate the program on a seven day a week, twenty-four hour a day basis, the Department has requested and received volunteers who carry full-time responsibilities in other programs, but who provide service and back-up to full-time staff beyond the normal work hours. Some 42 departmental employees from the Regional and District offices have been trained as designates in Adult Protection. Only in one office, Cape Breton Regional, has other than a full-time adult protection worker been designated to spend 40% of his/her time on adult protection work. Those staff who act as designates can be granted time off or overtime pay for the hours outside their regular work hours spent on adult protection.

ISSUES/CONCERNS

In any transfer which takes place, the staffing for the program must be a major consideration. The ten full-time staff cannot cope with the volume and demands of this program. The staff who assist them now as designates, with the exception of one, have full-time jobs in other programs and will remain in those jobs. As faulty as the current system may be in terms of lacking full-time resources, it does maximize what is available in this regard and is very cost efficient. Additional staff resources are likely to be required when the program moves to the Department of Health, although it may be very possible to integrate the program with Home Care to minimize or perhaps negate such a requirement.

The Adult Protection Act as it is currently structured designates the Minister of Community Services as the Minister responsible for the general administration of the Act. This designation would have to be changed with the transfer of the program. In addition, the Adult Protection Act is ambiguous in many instances and it is imperative that the Act be significantly amended to clarify its applications and to mesh it more carefully with other related pieces of provincial legislation. The need for this review and subsequent amendment is urgent and ought to begin as soon as possible.

SUGGESTED PROCESS

Both the parameters and the impact of the Adult Protection legislation are to a large extent unknown to Department of Health staff. In order to help clarify these and other issues, the Deputy Ministers of Community Services and Health met in early July to determine the most appropriate course of action as per the Management Audit recommendations. At that meeting, the following process was developed:

- a small interdepartmental team would be established to review Adult Protection issues and to make further recommendations to the Deputy Ministers re staffing, etc. This review should take no longer than eight weeks.
- Community Services should begin at once the legislative review process required to support significant amendments to the Adult Protection Act. Staff from the Department of Health will be part of this process.

TIMETABLE FOR TRANSFER

Although the program is small in terms of staff resources, because of the way in which the staffing crisis has been handled, it will take quite a bit of work to untangle it and put the necessary resources in place in the receiving department. This effort should take about four months from the date agreement is reached on the actual time for the transfer.

CHAPTER 13

The major service delivery and administrative changes outlined in the Report of the Implementation Committee will require a strategically managed communications plan if staff and community stakeholders are to buy in quickly to the process. Prior to the release of the Management Audit Report, the Department prepared a comprehensive communications strategy which worked well and which saw all community stakeholders receive the report and accompanying letter of explanation within 48 hours. In the case of departmental staff, everyone received a letter from the Deputy Minister and a copy of the Executive Summary at the same time that the Minister made the document public. This package of information was supplemented by a series of staff meetings which occurred within 24 hours of the release. Several days following the release, the Minister wrote personally to all staff outlining his commitment to change and encouraging staff to share both their reactions to the document and any recommendations which might be of value to the Implementation Committee.

This approach worked reasonably well and allowed staff to feel that they were part of the information loop, thereby minimizing stress in the workplace. Although the task facing the Department is much more ambitious because many long-standing service structures will be significantly altered or even disbanded, it is anticipated that a variation of the February process will meet the Department's communication needs for the Implementation Committee Report. The steps of the proposed plan are detailed below:

Phase One - Pre-release Planning

Once the Executive Council has approved the completed draft of the Report, the following steps must occur:

1. Document must be duplicated.
2. Information Officer must be fully briefed and begin preparation of release, draft letters to staff and stakeholders, etc.
3. Resources must be identified within the Department and in Human Resources Development to begin the implementation process.
4. All tasks and timelines need to be transferred to the master implementation schedule.

Phase Two^A - Internal Communications

Following the model employed during the release of the Management Audit Report, the internal communications plan will unfold as follows:

1. Senior Managers will meet both individually and collectively with the Deputy Minister one day prior to release.
2. On release date, all staff will receive information package and letter from the Deputy Minister.
3. Staff affected by lay-off, transfer or demotion process will meet in private with Deputy Minister and/or supervisor.
4. Within 24 hours, all staff will meet in groups with senior managers and members of the Implementation Committee to review report.
5. Meetings will be followed up with letter from the Minister (within one week) and subsequent edition of the Departmental Newsletter.

Phase Two^B - External Communication

Stakeholders, community groups and other Government Departments must be informed about the change process and given a chance to react to the plan. This process will unfold as follows:

1. Report and letter from the Minister will be sent to Mayors and Wardens, Community Agencies and stakeholder groups on release date. This letter will invite agencies to meet with officials to review report.
2. Deputy Minister to make presentation to the Deputy Ministers Committee.
3. Special meetings of all departmental committees with community representation will be held to review report. (These committees include: Children's Aid Societies Presidents Committee, Associated Homes for Special Care Liaison Committee, Ad Hoc Committee on Children's Services, etc.)
4. Agencies will be informed that Implementation Committee members are available to attend meetings to review document in detail.

Phase Three - Follow-up

As outlined in the Implementation Committee Report, some of the tasks involved in the restructuring process will take up to 24 months to complete. In order to keep both staff and stakeholder groups current on progress, the Department will issue six update bulletins outlining changes, staff appointments, etc.

NOTE: The communications strategy for the release of the Implementation Committee Report is ambitious. To oversee its development, a small ad hoc committee has been formed. This committee is composed of the Deputy Minister, the Communications Officer, the Senior Consultant - Field Services, and the Regional Administrator of Halifax. and a member of the original Implementation Committee.

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