REGIONALIZATION OF

THE CHILDREN'S AID SOCIETY

OF WINNIPEG:

THE TRANSFER OF

CASES AND SERVICES

A PRACTICUM REPORT

SUBMITTED TO

THE FACULTY OF GRADUATE STUDIES

IN PARTIAL FULFILLMENT

OF THE REQUIREMENTS

FOR THE DEGREE

MASTER OF SOCIAL WORK

BY

CARLA DROZNAK

© JULY, 1987

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A practicum submitted to the Faculty of Graduate Studies
of the University of Manitoba in partial fulfillment of the
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ө   1987

ACKNOWLEDGMENTS

TABLE OF CONTENTS

INTRODUCTION

The goal of this practicum was to acquire, develop and refine a theoretical and practical understanding of the skills required to function effectively as an administrator in a human service organization, particulary during times of change. Specifically, these skills included: planning, organizing, directing, monitoring/ controlling and evaluating.

As a member of the "Transition Team" with the responsibilty for case and service transfer, my objective was to develop, facilitate and co-ordinate a process by which cases and services previously provided by the Children's Aid Society of Winnipeg were transferred to appropriate workers in accordance with the regionalization of the Winnipeg Child Welfare System in the spring of 1985.

The duration of my involvement with members of the Transition Team was from September 1984 to May 1985. Members of this team were seasoned professionals with many and varied experiences in the child welfare system. This afforded me the opportunity to learn both by observation and by means of "hands-on" experience.

Administration has long been recognized as a method of
social work intervention (Skidmore, 1983; Miringoff, 1980;
Trecker, 1977; Kadushin, 1976; Warham, 1975). As Lauffer
(1978) notes, "intervention" implies a mediation, a coming
between parties or between what is and what is intended. In
this situation both circumstances existed. Parties
included the six new Executive Directors, Children's Aid of
Winnipeg staff, Child and Family Directorate, and the
agency's lawyers, while what was, was the delivery of
service based on case type, while what was intended was a
community based delivery system.

The Planning Manual (Manitoba Corrections and Community
Services, 1983) states that one of the tasks related to the
development of the new service delivery model was "to
conduct an orderly secure transfer of caseloads from
existing services to the new system with minimal disruption
to clients." (Appendix L, p. 8) For the purposes of this
practicum, administration is the intervention and the means
by which social policy such as this is tranformed into
social service. This has implications for the client as it
has been demonstrated that the way work, in this case the
transfer of cases and services, is organized and structured
is a major determinant of the kinds and quality of services
that are eventually provided. (Finch, 1977; Trecker, 1976;)

Further, it was expected that the procedures developed to accomplish this task might very well have implications for the policies established as to how transfers would be carried out once the new system was functioning should a family move from one region to another.

This report is presented in five chapters. The introduction provides an outline of the objectives and the rationale of the practicum. As this was an administrative practicum involving the implementation of a major government policy, a review of selected literature pertaining to organizational goals and policy implementation, the role of the social work manager and the skill requirements of the social work manager is provided in Chapters I and II. The practicum experience, including a discription of the setting, the personnel involved, and the procedures used to implement and record the activities of the practicum are located in Chapter III. Chapter IV describes the tranfer of cases and services from the Children's Aid Society of Winnipeg to the new regions and Chapter V provides an evaluation of the entire experience.

Chapter I

REVIEW OF SELECTED LITERATURE:

ORGANIZATIONAL GOALS AND POLICY IMPLEMENTATION

While much human service policy is formulated at a legislative level, be it federal, provincial or civic, it is often the task of large-scale, complex, formal organizations (government departments or private agencies) to implement these policies. Such was the case with the restructuring of child welfare services in Winnipeg.

1.1 Definition of Terms

Upon review of the definitions of the terms policy and organization, the trend is to make reference to the concept of "goals " or "objectives", terms which are often used interchangeably. Trecker (1977) defines policy as " a stated course of conduct, a statement of intentions" (p.170). Perrow (1970) states that "organizations are established to do something, they perform work directed toward some end"(p.133), while Warham (1967) defines an organization as "an instrument used in working towards objectives" (p.326), and Selznik (as cited by Warham, 1967) contends that a formal organization is "a rationally ordered instrument for the achievement of stated goals"(p.30).

The preceding definitions of the term "organization" come
from what is generally called the 'scientific' or
'rational' school of management theory. Organizational
theory has also been formulated from a human relations
perspective, as well as from a school of thought known as
the action theory of the New Public Administration Movement
(Wilson, 1982).

A fourth recognized approach is that of systems theory. It
is this perspective which I have employed for this
practicum. Gross (1976) uses this approach in his
comprehensive definition of an organization:

> "A formal organization (whether a business enterprise
> or a government agency) is
>   1) a man-resource system in space and time,
>   2) open, with various transactions between it and
>   its environment,
>   3) characterized by internal and external relations
>   of conflict as well as cooperation,
>   4) a system for developing and using power, with
>   varying degrees of authority and responsibility,
>   both within the organization and in the
>   external environment,
>   5) a "feedback" system, with information on results
>   of past performance activities feeding back
>   through multiple channels to influence future
>   performance,
>   6) changing, with static concepts derived from
>   dynamic concepts rather than serving as a
>   preliminary to them,
>   7) complex, that is containing many subsystems,
>   being contained in larger systems, and being
>   criss-crossed by overlapping systems,

8) loose, with many components that may be imperfectly coordinated, partially autonomous and only partially controllable,

9) only partially knowable with many areas of uncertainty, with "black regions" as well as "black boxes" and with many variables that cannot be clearly defined and must be described in qualitative terms, and

10) subject to considerable uncertainty with respect to current information, future and environmental conditions, and the consequences of its own actions." (p.323)

The term "goal" is often defined in generalities, such as, 'desired outcome' or an object of effort' (Rossi, 1982; Pattie,1983). Binstock (1966) defines a goal as a solution to a problem. He later adds that goals are also:

> "composite products of personal, professional and institutional values; identified dissatsfactions; motives for seeking changes; diagnosis of social problems; and information of varying qualities and quantities. These are guides used by planners for decisions and actions ..." (p.180).

Many service organizations have been criticized for the discrepancies between their stated goals and their actual performance. In recognition of this problem, a process of further defining the term "goal" has taken place. Perrow, (1960) in his works on organization behavior, talks about official and operative goals:

"Official goals are the general purposes of the
organization as put forth in the charter, annual
reports, public statements by key executives and
authorative pronouncements, ... Operative goals
designate the ends sought through the actual
operating policies of the organization; they tell
us what the organization actually is trying to do,
regardless of what the official goals say are the
aims" (p.215-216).

Hasenfeld (1983) states that official goals generally serve
as a mechanisim of an organization. Their purpose is to
elicit legitimation and support from a broad range of
social groups. In human service organizations they also
provide post facto justification and rationale for those
activities of the organization which might be challenged or
questioned. Official goals may also serve as a buffer
between the organization and its environment. The
organization's actual commitment of resources is reflected
by the operative goals. The studying of these goals and
the processes by which thay are designed, enables one to
identify the preferences and choices made by those who have
power and control over the organization's resources. It
also allows one to predict the technology that most likely
will be employed by the organization to achieve its goals.

Mohr (as cited by Hasenfeld, 1983) distinguishes between
transitive and reflexive goals:

"Transitive goals refer to the primary projected
impact of the organizational outputs upon the
environment .... Mohr further proposes that every
organization also has a general reflexive goal -
namely 'that inducements will be sufficient to
evoke adequate contributions from all members of
the organizational coalition' ... Inducements may
be related to salaries and wages, working
conditions, status, power and privileges"
(p.93-94).

Traditionally there have been two positions regarding the

benefits of using goals to analyze organizational behavior.

One position highlights the importance of using goals. The

outgrowth of this position has been programs such as

Management By Objectives and goal-based evaluations. At the

other extreme, the second position contends that goals in

the human services are impossible to identify and so really

are of no use. The proponents of the latter position defend

it by pointing out that programs often have competing goals,

many of which are vague and diverse, and that this,

compounded by poor measurements of output and obscure

implementation directives, makes it difficult to establish

success (Edwards et al, 1978). Hannan and Freeman (as cited

by Hasenfeld, 1983) conclude that "organization goals are

multidimensional, difficult to specify, unstable and often

indeterminate"(p.92). White (as cited by Hasenfeld)

contends that an organization is nothing more than a:

"formally constituted collective which uses
resources ... A statement of organization goals,
therefore, is nothing more that an agreement on the
range of allocations that will be tolerated by the
members participating in its formation" (p.92).

On the opposite side, are those who strongly uphold the
need for clear, concise goals and who feel that the
determination of organization goals is the single most
important factor in analyzing organizations and subsequent
policy implementation. Warham (1967) states that all
organizations are predominately oriented towards specific
objectives, i.e., making profit or giving service, and that
these goals serve three main functions: 1) to justify the
organization's existence, 2) to provide a focus for
activities, 3) to provide standards for assessing its
efficiency. The goals may be written, legislated or appear
in the form of a charter. Hasenfeld (1983) contends that
by identifying the gaps and incongruities between official
and operative goals, one can assess the effectiveness of
policy or legislation. Secondly, since official goals
indicate an organization's value choices and normative
commitments, a study of these goals will allow one to
determine the approach the organizaiton will take in
providing service. Finally, if an organization does not
measure up to its official goals, social reformers can
challenge the organization's legitimacy by pointing to its
failures in implementation.

1.2 Organizational Goals and Conflict

> "The most important issues in social policy concern
> its social purposes and hence there are no final
> solutions which enable men to choose among social
> aims all of which are desireable and most of which
> are in conflict" (Rein, 1970, p.250).

Human service organizations are tools or instruments

required to implement policy that has evolved through a

complex, political process in an attempt to meet social

need. In view of the fact that most human services policy

is legislated and the organizations providing the services

are mandated to meet social need (a term wide open to

interpretation), the potential for conflict of organization

goals is high.

Gross' general systems approach to formal organizations

also acknowledges the presence of conflict within the

system; i.e.:

> "3) characterized by internal and external
> relations of conflict as well as cooperation", as
> well as the potential for conflict; i,.e., 4)
> developing and using power...within the
> organization and in the external
> environment,...6)changing...7)complex...many
> subsystems... 8)loose...components...imperfectly
> coordinated, partially autonomous and partially
> controllable, 9)...partially knowable...cannot be
> clearly defined...and 10)...considerable
> uncertainty..." (p.323).

Perhaps the single most significant factor in the creation

of conflict within a human services organization is the
nature of the policy by which the organization is mandated
to provide service, i.e. to meet social need. "Social
need" is a construct, extremely difficult to define and
subject to individual interpretation according to one's
value base. While groups may agree to a general statement
of goals such as "provision of community-based child
welfare services', the operationalization of such
constructs may be as diverse as the indiviuals, groups and
organizations that define this concept as social need:

> "The goals adopted by human service organizations
> reinforce a certain set of values and beliefs over
> which there is no clear consensus in a pluralistic
> society, and thus they are likely to be challenged
> by those social groups who hold opposing or
> different belief systems"(Hasenfeld,1983,p.85).

Even when there might exist a general consensus as to the
meaning of the constructs, conflict can arise over the
allocation of resources:

> "Policy makers can agree easily enough on a general
> goal of trying harder to alleviate the welfare
> problem by spending more money, but agreement on
> the instrumental question of who will pay for the
> increased costs is harder to come
> by"(Wildavsky,1979,p.99).

Not only can the question be asked of who will pay
(resources), but also, in what manner will the policy be
implemented (program) and who will receive the service
(consumer)?

As noted earlier, human service policy is generally legislated and the official goals are determined by a complex legislative process. Human service organizations, however, are the programmatic manifestation of this legislation (Hasenfled, 1983). Those who implement this policy are in many ways independent of their nominal supervisors who made the policy decisions . As such, it is possible for this group to foil the intentions of the decision-makers by the use of selective perception of instructions, i.e., ignoring at least some of the directives. Implementers often like to feel that they know best and therefore there is a strong liklihood of opposition. Also, it is difficult to execute orders with which one does not agree and this can result in slippage between policy decisions and performance (Edwards et al, 1978).

Bardach (1977) and Sarri (1978) note that organizations are essentially a collectivity of individuals providing service to another group of individuals, each with his own set of values, beliefs and goals, and therein lies another source of conflict. Not only does each individual possess his own set of values, he also has needs of his own personality, established habits and possibly commitments to outside groups.

Kadushin (1976) presents a rather optismistic view of the legislative process asserting that since human service organization goals reflect the need, desires and goals of the community (since they are mandated by the legislative process), it is the organization's duty to see that these goals are carried out by the individuals employed by the organization. To ensure that this actually occurs, Kadushin suggests that there are five types of power which may be employed by the administrative staff:

1) reward - promotions, raises, commendation, etc.

2) coercive - punishment, demotion, dismissal

3) legitimate or positional - inherent in the
                                    administrative position

4) referent - must have source in a positive
              relationship

5) expert - special knowledge and skills of the
            administrator.

To counter-balance these powers, employees may unionize or establish their own coalitions, and using the techniques of persuasion, lobbying, negotiation, attempt to influence those that control the organization's resources or the policymakers themselves and society at large.

Gross (1976) suggests that a number of different parties may be influential in determining organization goals:

1) the people who wrote the law under which the
organization operates; 2) the holders of formal authority
over the organization; 3) the members of the organization;
4) the organization's specialized planning people and 5)
the organization's top managers. Added to this list could
be consumers of service. Each group can identify its own
goals and these may be and often are in conflict one with
the other.

Hasenfield (1983) supports this thesis and develops the
argument further by presenting a political economy
perspective which he uses to describe the process by which
organization goals are determined. This process focuses on
the interplay of power, the goals of power wielders and the
interactions between the demand and supply of
organizational services:

> "Polity refers to ' the whole web of groups and
> individuals, internal or external to the
> organization, that possesses resources to sanction
> decisions.'...Economy focuses on 'the internal
> allocation of men, money and facilites and on the
> external supply of resources and clients.'..."
> (p.95).

Both polity and economy are critical determinants of
organization goals since decisions about the allocation of
resources are made in view of those who control the
resources and those who are consumers of the organization's
services.

Interest groups as identified by Gross (1976) and Hasenfeld
(1983), tend to negotiate among themselves in order to
achieve their goals. This typically results in various
coalitions, the most powerful being the dominant coalition.
The dominant coalition then determines the nature of the
organization goals as it determines the allocation and
distribution of the resources controlled by its members.
"Such political and economic processes inevitably give rise
to multiple and conflicting goals, and are only as stable
as the dominant coalition" (Hasenfeld, p.96).

Rein (1970) concurs that such power conflicts are resolved
in a political/economic arena and are reconciled by a
strategy of bargaining that seeks tradeoffs among the
various aims of different interest groups. He defines two
types of goals: goals of change, which are characterized by
many acceptable solutions to perceived problems
(pluralism), and goals of integration, which are
characterized by conformance to accepted solutions and
common values (homogeneity). He contends that simultaneous
pursuit leads to conflict. The type of goals that an
organization favours will determine the processes it
employs to resolve conflict.

Organizations favouring goals of integration tend to search

for unity and common values. When a choice must be made, however, strategies of competition, compromise and bargaining are used to set goals to which all parties agree. In theory, all persons who have a stake in the decision outcome are involved, usually by establishing a committee. In practice, however, Rein (1970) contends that important issues are decided outside the committee and agreement is usually reached by selective and discriminative use of communication. The committee is not a working group but a platform on which decisions that are arrived at in private are publically reaffirmed and legitimized. In this process, goals are never questioned because of their inherent "rightness'.

Organizations favouring goals of change emphasize pluralistic values and the inherent legitimacy of each unique and special objective. In time of conflict, it is assumed that the organization knows exactly what it wants and therefore has a "stake" in the decision. To maximize this stake, the organization attempts to influence those who control the decisions. The key is to convince others that it is in their best interest to favour the decision of the particular group in question. To this end, persuasion coercion and, at times, coalition are employed. The latter, however, is "generally temporary, unstable, means-

oriented alliances among groups with varying goals" (Rein, 1970,p.185)

Perrow (1961) prefers to employ the terms 'control' and 'dominance' in his discussion on power and authority as he feels they signify a more persuasive phenomenom. He contends that every organization has four tasks to accomplish:

> "1) secure inputs in the form of capital sufficient
> to establish itself, operate and expand as the need
> arises, 2) secure acceptance in the form of basic
> legitimation of activity, 3) marshall the necessary
> skills, and 4) cordinate the activities of its
> members, and the relations of the organization with
> other organizations and with clients or consumers"
> (p.218).

He suggests that the operative goals will reflect what is considered to be the most imperative task area and will be shaped by the dominant group.

The concepts of power and resources, as defined by Hasenfeld's (1983) political/economy perspective, are tightly entwined. Warham (1967) states that:

> "to achieve its objectives, an organization does
> work of a kind which individuals alone cannot
> provide... The resources of an organization are
> human ...material..., and money as a resource is
> basic to all of these" (p.32).

Power can be defined in terms of control over resources

Coalitions, which have formed to influence decision-making, pool their resources in order to achieve dominance. "The relative power of each coalition is determined by the total amount of resources needed by the organization that it can control and mobilize" (Hasenfeld,1983,p.96).

The manner in which human service organizations allocate, or are themselves allocated resources reflects the values to which the organization, society in general, is committed (Jones,1977; Gil,1973). Implementation reflects the availibility of these resources. "It is clear, and should be a truism, that goal-setting, policy making, planning and program development cannot be effective without taking into account available resources" (Alexander,1976,p.189). If the availability of resources is not taken into account during the process of goal setting and subsequent implementation, it is possible that one will 'shoot too high' which could result in failure of the program, discrediting the original goals of the policy and giving ammunition to those who oppose it. Those who control the resources then have the most power to influence which policies will be implemented, in what manner they will be implemented, and thus which goals will become attainable.(Doern et al.,1973; Levy,1983; Weatherly, 1983)

The discrepancies between offical and operative goals are indicative of the fact that human service organizations must deal with issues of survival, inadequate resource bases and pressures to accommodate multiple interests:

> "In all public policy and action, there is a
> multitude of motives and goals as actors join to
> promote or compromise program. With many unknowns
> in the equation, participants are often unable to
> anticipate fully what they have wrought or to
> perceive the functions discharged" (Kahn, 1973).

1.3 Organizational Goals and Decision-making

"Decisions.... are "correct" if they select the 'means appropriate to reach designated ends'(Simon, 1961). Effective decision-making presupposes the greatest possible clarity about what the organization's goals are." (Warham,1967,p.5)

Traditionally there are three schools of thought as to how decisions are made: Rational Approach, Incrementalism and Mixed-Scanning.

The Rational (Comprehensive) Model (Doern et al, 1973) suggests that decisions are made in the following way: 1) 1) recognition of the problem, 2) definition of the problem 3) presentation of alternative solutions, 4) ranking of priorities, 5) predictions regarding risks and consequences of alternatives, and 6) making a final decision.

This model was expanded upon by Gergen (as cited by Hurle, 1981) who suggested that each of these steps represented leverage points to which various interest groups have an opportunity for input. However, access becomes limited as the process progresses and eventually is available only to experts, professionals or government authorities. This would suggest that although goals may be clearly defined at the outset of the process, the chances of their being modified or even replaced by the time an actual decision is made is quite possible.

Rational analysis or scientific decision-making, which is often applied on a cost/benefit basis, involves clarity of aims and measures of performance, benefits and costs. Rein (1970) states that this method fails to recognize the difficulty of reducing some goals to quantitative measure or to a common monetary standard that is meaningful. It tends to neglect the administrative feasibility and the fact that some goals may not have economic value but definitely can be justified for their consumptive value and their contribution to the improvememt of the value of life. Also, he notes that this model tends to ignore political costs and benefits.

The Incremental Model (Disjointed Incrementalism) suggests

that those responsible for decisions are thought to
"muddle-through" a number of similar alternatives with
little evaluation of possible consequences. Decisions
prescribe changes in small increments and the focus is on
the increments, i.e., on the difference between the
proposed policy change and the status quo.(Edwards et al,
1978) This model appears to suggest that all parties'
goals are equally represented and that goals are subject to
very little change. It also implies that it would be
difficult to introduce a completely new program even if it
were in keeping with the original goals. It would seem,
according to this model, that upon discovery of an
acceptable option, decision-makers would stop their search
for alternatives. Etzioni (1967) criticizes this model for
not taking into account the power of central institutions
within society to influence policy.

As an alternative, Etzioni proposes the Mixed-Scanning
Model which can be described as a synthesis of the Rational
and Incremental Models. This model:

> "provides a particular procedure for the collection
> of informatiuon..."scanning", ...a strategy about
> the allocation of resources...and... guidelines for
> the relations between the two. The strategy
> combines a detailed ("rationalistic') examination
> of some sectors...with a "truncated" review of
> other sectors." (p.388-389)

Keeping in mind Gross' general-systems approach to defining

an organization, Mixed-Scanning takes into account the

reality of many varied components operating at one time,

interacting with each other and the environment, and

recognizes that detailed examination on an ongoing basis of

each component is unrealistic and unfeasible. It also

recognizes that strategy is usually determined "by the

position of, and the power relations among decision-makers"

(Etzioni,1967,p.391). This model suggest that an

organization may have more control in meeting its goals

than does Incrementalism.

Etzioni's model also acknowledges that, although democratic

societies (and organizations) must accept a relatively high

degree of incrementalism, fundamental changes do occur,

usually in time of crisis. The scanning mechanism of the

model suggests these crises and subsequent changes can be

foreseen and preparations be made.

Edwards and Sharkansky (1978) contend that for

non-incremental policies to attain success, resources and

political commitment are indivisible. These policy changes

tend to occur either in a state of rapid growth or rapid

decay. They require strong public commitment to reach

their productive threshold. There is a tendency for

officials to oversell policies to gain public support. This
results in an "all-or-nothing"commitment which inhibits
incremental adjustments. Fundamental changes are often
associated with political party turnover or, in the case of
an organization, with the appointment of a new
administrator.

Mixed-Scanning provides a means of explaining why disparity
may occur between the goals of the original policy, by
which an organization has been mandated, and the resulting
policy implementation in its programmatic manifestation.
Goal adaptation and goal displacement can be said to be a
result of an organization "scanning" its environment and
"seeing" that in order to maintain itself, it must make
changes, usually by incrementalism. However, fundamental
changes may occur as a result of a shift in power or a
drastic change in society's values and ideologies. Those
organizations which do not "scan" on a frequent basis their
environment, as well as their own components, are in danger
of not foreseeing potential "upsets" and risk losing their
power base as represented by community support,
legitimation and their resource pools.

1.4 Implications for Policy Implementation

Perrow (1970) summarizes the importance of examining an

organization's goals in relationship to policy

implementation as follows:

> "Goals are multiple, conflicting pursued in
> sequence, open to group bargaining, and in general,
> problematic, rather than obvious and given. Not
> only are they not obvious and given, they provide
> the best single clue to the distinctive "character"
> of an organization. For both the social scientist
> and the management trainee, the most complete
> understanding of an organization will come through
> an analysis of its goals and basic strategies"
> (p.180).

As indicated above, goals often are difficult to ascertain,

except perhaps in very vague, general terms. This

phenomenom often can be traced back to the policymakers

themselves and usually results in organizations providing

broad aim programs, eg. community-based child welfare

services. Chelimsky (1979) asserts that these type of

programs generally are created in face of a major political

issue. The resulting vague and general goals for these

programs may be due to the fact that the isssue, which the

program hopes to address, is itself a complex multi-faceted

one; or, there may be a lack of political or social

consensus with no agreement on specific aims; or, possibly

knowledge about causes are inadequate and it is hoped that

the program may provide a solution or new information, or

at the very least, new information about the problem. The programs tend to be large-scale as they are intended to achieve political objectives in response to political pressure.

Chelimsky further contends that these large-scale programs increase an organization's chances for survival and buys time for political parties. Hasenfeld (1983) asserts that the presence of vague, ambivalent goals allows an organization "to justify conflicting courses of action and to accommodate the multiple demands made on its resources."(p.102)

The discussion of broad aim programs highlights several issues. Since problems defined as "social need" are so broad in nature, the planning for one set of problems creates an impact on another set of issues. This results in potential for conflict. It also results in the need for more policy and more program, a never-ending process. Secondly, often more than one organization is involved in actually implementing a policy. Each has its own set of values, goals, etc., and its own view of the policy in question, and there are no guarantees that they will be the same or even complement each other.

Another issue is addressed by Fairweather (1976) who
asserts that policy as a mechanism for social change has
become more and more bureacratic and less and less aimed at
the corrective changes that are essential for improving the
quality of life. He contends that policymakers and
organizations place too much emphasis on the search and
maintenance of political and economic power; that society
in general lives with a myth that problems can be
legislated away, i.e., create a law and provide money; and
that organizations perpetuate themselves.

In summary, organization goals serve as directives for the
formulation and implementation of programs and services.
Once an organization makes a commitment to a set of goals,
a monitoring system can be set in place and the
organization can be held accountable. Since these goals
reflect the ideology of the dominant coalition and so may
or may not be representative of the goals set by the
legislative process, it is possible to identify the power
bases and make some predicitons as to the direction future
programs will take. Goals of an organization are multiple
and tend to be conflicting which can result in incongruent
service delivery. They may be viewed as a communication
aid and as a vehicle for negotiation between separate
viewpoints (Kiresuk & Lund, 1978). Goals may undergo

changes due to shifts in the dominant coalitions, need for additional or new resources, ideological and value shifts, and environmental changes.

Finally, the relationship between organizational goals and policy implementation cannot be examined without a clear understanding of the political process by which policies are determined; the nature by which organizations are created; and the political, economic, often conflicting environment within which the organization must function in order to implement the policy.

Chapter II

REVIEW OF SELECTED LITERATURE:

THE SOCIAL WORK MANAGER

2.1 The Role of the Social Work Manager

Generally, there is a tendency to think of a manager as an individual who is in charge of a formal organization or one of its subunits (Mintzberg,1976). However, Drucker's (1973) definition more closely fits the role accorded to me during the duration of this practicum. His first criterion in identifying management responsibility is not command over people but rather responsibility for contribution, i.e., function rather than power. According to Drucker, managers are "people who are management, in the sense of being responsible for contribution to and results of the enterprise"(p.391). They may not be bosses nor are they necessarily responsible for the work of other people. However, they do have an impact on the organization's direction and performance. Drucker describes situations where a manger is "junior" to other members of a team or task force. He sees the roles of the manager as being those of planning, organizing, integrating and measuring.

When viewing organizations by means of a systems perspective, the role of the administrator becomes one of

managing the complex system of interdependencies which both

support and challenge the organization. It is an

administrative responsibility to organize and allocate

resources to get work done (Rowbottom et al,1974;

Warham,1975).

Provision of leadership is a role that administrators/

managers perform in social welfare agencies. According to

Skidmore (1983), leadership may be defined as both a

position and an ability:

> "As a position, it means a person is responsible
> for the control of certain situations and is in a
> directing or guiding position...Leadership ability
> refers to the capacity or skill to influence
> relationships with others so that they will follow
> the path taken by the leader" (p.130).

Mintzberg (1976) notes that the leadership role demands

that the manager bring together the needs of his

subordinates and those of the organization to create a

milieu in which they will work effectively. Gray and

Starke (1980) point out that two important dimensions of

leadership behavior are consistently identified in current

research: concern for people and concern for task, and that

these two behaviors are important factors in leadership

success.

Mintzberg proceeds to define several other managerial/
administrative roles. The liaison role focuses on the
manager's dealings with people outside her own
organizational unit. He posits that much time is spent in
developing and maintaining a network of contacts. Through
this role and the leadership role, the manager gains access
to much information and may emerge as a "nerve centre" of
the organization and/or and the organization's information
generalist.

In the monitor role, the manager constantly "seeks and
receives internal and external information from a variety
of sources to develop a thorough knowledge of (her)
milieu." (p.645). In the role of disseminator, the manager
transmits some of this knowledge to those with whom she is
working.

Both Mintzberg (1976) and Thompsom (et al, 1958) note that
the role of management often enters into the realm of
public relations. They perceive the manager as a "seller
of ideas" where winning the support of an idea is as
important as foreseeing the benefits of a new idea.

Meenaghan et al (1982) have developed an administrative
model based upon the systems approach to organization. They

posit that there may be as many as six functions that an administrator must carry out at varying levels of intensity and that in each of these functions six administrative processes are understood to be operational. The functions that specifically pertain to this practicum are planning, organizing, directing, controlling and evaluating. The six processes are: problem solving, decision making, information processing, planning, forecasting and leadership.

Planning - Meenaghan (1982) differentiates between social planning, with its focus on unmet need, and administrative planning which is primarily geared toward the intrasystem and program implementation. Lauffer (1978) views planning as "a method of social intervention, because it aims at influencing or modifying a social course of events, a social process or a social structure." (p.71). Alexander (1982) speaks of planning and administration as functions of a management methodology designed to deal with social organizations.

Organizing -

> "Organizing ... must necessarily be done in the
> context of the most efficient and most effective
> use of current and potential human resources in
> juxtaposition to the needs of the client population
> that the agency purports to serve." (Meenaghan et
> al., 1982, p.44)

Directing -

>"The motivation, guiding, supervision, overseeing,
>and instructing of people in order to move them
>toward the accomplishment of organizational
>goals..... Measuring clear lines of communication;
>included in this is the reporting function,
>informing all concerned about organization
>activities and process." (Vail, 1976 as cited by
>Meenaghan et al., p.45).

In this function, the administrator must creatively arrange
and coordinate diverse personal activities into unified and
coherent attempts to facilitate maximum goal realization.
Sufficient resources must be made availble to those
expected to accomplish the task. Staff must be oriented to
the new procedures. (Finch, 1977; Kadushin, 1976; Warham,
1975).

Controlling - This is ensuring that the activities of all
involved are in conformance with the achievement of planned
goals. This involves the setting of standards against
which performance may be measured, measuring performance
and taking corrective action where and when necessary
(Meenaghan et al., 1982). Lauffer (1978) suggests that
this requires the designing of a feedback system, an
ongoing analysis of results of the change as they are
occurring and the specification of adjustments as required.

Evaluation - Evaluation is concerned with measuring the
achievement of goals and objectives and their effectiveness
according to the standards established in the controlling
function.(Meenaghan et al.,1982)

2.2 Skill Requirements of the Social Work Manager

To effectively carry out the role and all the many and
varied tasks of the social work manager, the literature
pertaining to the administration of human service
organizations suggests numerous skills are required:

- a systems perspective necessitates the ability to work
with people in different settings; on a one-to-one basis,
in small groups, within and between the complex subsytems
of the agency, and ultimately extending to the agency's
environment. (Mintzberg,1976; Skidmore,1983; Zander,1982)

- the possession of technical skills and the
understanding of the nature of the organization as well as
a good working knowledge of the law as it pertains to the
agency and the service it is providing (Warham, 1975).

- leadership qualities and the ability to motivate workers
to develop commitments both to the organization and its

tasks (Whittington, 1975).

- the ability to communicate effectively verbally and in writing. Mitchell (1978) defines interpersonal communication as the transmission of information between people. Mintzberg's (1976) research found that management spent an inordinate amount of time in verbal contacts and that these contacts occurred in a multidimensional sociopolitical atmosphere. An administrator's power is often a function of her information vantage point and the ways that are chosen to utilize this information can enhance or limit her functioning abilities. Due to her "mid-position", the administrator can be a key figure in upward, downward and horizontal flows of information; information that is required by decision-makers to make effective decisions and policies, and information required by workers to understand and interpret the rationale behind new policies. As such, the administrator can be viewed as a "link" between management and the different units of the operational level. (Wolk et al, 1982; Pettes, 1979; Finch, 1977).

This link is critical, as those who implement policy are in many ways independent of those who make the decisions. As such, it is possible for this group to foil the

intentions of the decision-makers. As noted earlier,

implementers often like to feel that they know best and it

is difficult to execute orders with which one does not

agree. This can result in slippage between policy

decisions and actual performance.   It also suggests that a

close monitoring of the entire process is essential.

-ability to engage in organizational politics (Ball,1978;

Googins et al.,1983). Finch (1982) notes that in times of

organizational change or cutbacks, managers require greater

political skills:

> "A central feature of political decision-making is
> its explicit recognition of conflict as a normal
> part of organizational life, and the provisions it
> makes for transforming potentially disruptive
> conflicts into negotiated settlements" (Gummer et
> al,1985,p.13).

A study conducted by Files in 1981 found that human service

administrators spent 26% of their time in negotiation

activities, an amount only exceeded by planning (as cited

by Popple,1984). Murdach (1980) contends that an

individual in conflict situations requires the skills of

keen powers of observation, a degree of detachment in tense

circumstances, the ability to bargain convincingly and

practical ability in the powers of persuasion.

> "Most professionals prefer to leave such skills as
> bargaining and persuasion to used car salesmen and
> political candidates. However recent studies
> indicate that these skills can be legitimate
> components of the helping process" (p.460).

-ability to effectively use the computer system. According to Broskowsky (1979), a management information system of a human service organization can be defined "as a systematic method to collect, process, store, retrieve and transmit the selective information on clients, staff activities, and fiscal transactions that some specific functions of management require." (p.147)

-ethics. The manager's unique personality traits, skills , knowledge and values are integral parts of how she will carry out her role (Sheriff,1968 as cited by Russel et al., 1984). Levy (1979) states "professional ethics implies skills and competence in implementing ethical choices." (p.282) Whatever, by way of ethical conduct, is expected of social workers in their relationships to clients must be expected of administrators in their work with administrative groups.

Finally, Lauffer (1978) stresses throughout his book on community planning that planners/administrators are not free agents. "The range of their activities and their choices are severely limited by the structures within which they function. The limits of their mandates are not always clear at the start and must be tested in practice itself."

(p.19). Gross' open systems perspective and Meenaghan's administrative model, which I have chosen to use for the purposes of this practicum, address the issue that all functions of administration are ongoing and interactive, with one function influencing the direction and the emphasis placed on the next. The decisions made about the planning and controlling of one task have implications for other tasks within the overall process.

In summary, Chapters I and II have reviewed some of the literature pertaining to 1) organizations, i.e., organizational goals and the conflict these goals may generate, organizational goals and decision-making, and the implication of these concepts for policy implementation; 2) the role of the social work manager; and 3) the skills required by the social work manager.

The following concepts, arising from the literature, are significant to this practicum:

- the perspective of "organization" as an open system.

- determination of organization goals is an important factor in analyzing organizations and subsequent policy implementation.

- human service organizations are instruments required to implement policy that has evolved through complex, political processes in an attempt to meet social need.

- the presence of conflict within the system of any organization due to the very nature of the system itself.

- both polity and economy are critical determinants of organization goals.

- the existance of a dominant coalition.

- Mixed-scanning as the model by which decisions are made.

- child welfare as a "broad-aim" program.

- manager as a person who has an impact on the organization's direction and performance, and whose roles include: leadership, liaison, information generalist, monitor, public relations, planner, organizer, director, controller and evaluator. Any number of these roles may be simultaneously required of the social work manager.

- the following managerial skills are required: ability to work with people in different settings, technical skills, ability to facilitate the development of commitment both to the organization and its tasks, communication skills, ability to engage in organizational politics, ability to access the Management Information System, and the awareness to perform one's duties ethically.

- planners and administrators are not free agents.

Chapter III

THE PRACTICUM EXPERIENCE

3.1 Setting

> "It is a basic assumption that society helps
> children best by strengthening their primary
> support systems: the family, the school and the
> neighbourhood. As a potential facilitator for all
> these systems, child welfare services should be
> located and should operate in the neighbourhood."
> (Brown et al.,p.16)

This practicum experience took place at the Children's Aid

Society of Winnipeg from October 1984 - May 30, 1985. This

time span represented the last six months of the

dismantling of this agency and restructuring of Child &

Family Services in Winnipeg, and the first two months of

operation of the new agencies. This restructuring resulted

in the creation of six private agencies with a mandate to

provide child welfare services to the City of Winnipeg.

Figure 3-1 illustrates the original geographic boundaries

of these new agencies.

Any social policy is a reflection of changing ideological

stances and these stances are influenced by social

conditions and events (Levy, 1983). Ryant (1975), in his

review of child welfare policies and programs in Manitoba

notes that this program is politically sensitive and highly

**WINNIPEG
CHILD AND FAMILY
SERVICES AGENCIES**

4 Northeast Winnipeg Family and
Child Extended Social Services
1100 Concordia Avenue
R2K 4B8

3 Northwest Child and Family
Services Agency
1386 Main Street
R2W 3V1

2 Child and Family Services
of Winnipeg West
2367 Ness Avenue
Moray Village Shopping Centre
R3J 1A5

1 Child and Family Services
of Central Winnipeg
294 William Avenue
R3B 0R1

5 Child and Family Services
of Eastern Manitoba
123B Marion Street
(St. Boniface, St. Vital)
R2H 0T3

6 Winnipeg South Child and
Family Services
897 Corydon Avenue
R3M 0W7 :

Figure 3-1   Geographic boundaries of Child and Family
Service Agencies, Winnipeg, Manitoba

vulnerable to the community.   It is this sensitivity and
vulnerability, that led to the restructuring of child
welfare services in Winnipeg.

In his 1975 review, Ryant's committee put forth a strong
recommendation for regionalized delivery of services in
Manitoba.   Subsequent to this report, Carr (1982)
recommended that the Children's Aid Society of Winnipeg,
the largest of the child welfare agencies in Manitoba, be
decentralized as he felt smaller agencies would have a
greater success in establishing a working relationship with
its community.   The Kimelman Commission, established in
1983, too, encouraged the establishment of six
community-based agencies to "ensure the participation of
citizens of the private sector" (as cited by Manitoba
Community Services and Corrections, 1983, p.II-58).   At
this time, Native organizations and groups became highly
visible in their demands for better provision of child
welfare services and more self-control of these services.
The Children's Aid Society of Winnipeg was also
experiencing staff/management unrest and there had been a
request made by the staff for an external review of
management practices.

In July 1983, the Minister of Community Services and

Corrections announced the intentions of the government to restructure the child and family service system in Winnipeg and regionalize the system. After a series of reviews by several committees, the target date for the new system to be operational was set for April 1, 1985. During the change, services to clients were to be maintained at their "usual" level of effectiveness.

These services included:
- protecting children
- investigating allegations or evidence of child abuse or neglect
- provision of counselling and other services to families in their own homes to prevent circumstances requiring protective placement of children
- carrying out guardianship responsibilities for children in care
- adoption (placement and post-legal service)
- assisting expectant and single parents
- recruiting and maintaining foster homes

More important than the physical setting of this practicum, however, was the "atmosphere" or environment in which it was carried out. As in any time of change, there was a great deal of uncertainty and confusion. When the

restructuring of the system was announced, staff were told that their jobs were not in jeopardy and all would be deployed to the new agencies. However, it was not until November 1984, that the supervisors were deployed and it was still another month before line staff and clerical personnel were informed as to which agency they were being assigned. The deployment of staff was a frightening and very painful experience for many of these employees.

Once deployment had actually occurred, lines of authority were not always clear and staff began developing loyalties to their new regions. The executive directors of the new regional agencies became very much involved in the on-going activity, but until April 1, 1985 it was the executive of the Children's Aid Society of Winnipeg that maintained authority and responsibility for service delivery.

Conflict throughout the system was rampant. While there were many supporters of the government's plan to restructure the system, and these parties were the ones with the resources, power and authority to ensure that it occurred, there were many opponents. These individuals fought the concept, many refusing to accept that it was actually going to happen, and many predicting dire consequences to the community's children if it did. These

opponents represented all parts of the system - Government,
the Directorate, medical services, schools - but
particularly, the staff of the old agency.

The Children's Aid Society of Winnipeg had become highly
specialized in its delivery of service. There were family
service workers, children's service workers, abuse workers,
foster home workers, intake workers, adoption workers,
perinatal workers and independent living workers.
Government, in restructuring the system, proposed a
"generic" delivery of service. "Generic" was never clearly
operationalized and each of the new agencies interpreted it
somewhat differently. However, while the proponents of
community-based generic service argued among themselves as
to the meaning of 'generic", to most of the workers and
management staff, accustomed to specialized caseloads, it
was a frightening prospect in any form and was bitterly
opposed by almost everyone.

3.2 Personnel

Members of the Transition Team were the people with whom I
worked the closest. These included Dave Schellenberg,
Co-ordinator of the team and Assistant Executive Director
of the Children's Aid Society of Winnipeg; and the six
executive directors of the new agencies - Jenny Boyko,

Winnipeg West; Alan Finkel, Northeast Winnipeg; Robert

Knight, Winnipeg Central; Tim Maloney, Northwest Winnipeg;

George Penwarden - Winnipeg South; Dave Waters - Eastern

Manitoba. Other contacts included Tim Sale, who had been

seconded from the Social Planning Council to orchestrate

the regionalization process, his assistant, Debra Handler,

Peter Borchert - computer programmer, the management staff

and social workers of the Children's Aid Society of

Winnipeg, and many staff of the Child Welfare Directorate.

The Transition Team was formed to handle the details of the

transfer of cases and services from the Children's Aid

Society to the new agencies, the building of formal budgets

for 1985-86, the development of accounting systems and the

final development of the Management Information System for

the six new agencies (Sale, Memo, November 2, 1984). The

secondment of several staff to the team to ensure an

orderly transition was endorsed by the Interim Board of the

Children's Aid Society. The team met weekly reporting

through Tim Sale to the Implementation Working Group.

The Implementation Working Group (IWG) was the driving

force of Regionalization. It consisted of government

personnel, such as the Assistant Deputy Minister of

Community Services, the Director of Child Welfare and the

Regional Director of Winnipeg West; the Executive Directors
of the six new agencies and their Board Presidents; and the
Acting Executive Director and the Interim Board President
of the Children's Aid Society.   Tim Sale was also a member
of this group.

The Implementation Working Group (IWG) and the Transition
Team formed the dominant coalition. The members of these
groups represented many different organizations and
interest groups but they all had one goal in common - the
desire to see regionalization occur - and they directed all
their power and resources to ensure the achievement of this
goal. No amount of energy or financial input was spared.

3.3 Procedures

The on-site component of this practicum occurred from
September 15, 1984 to June 3, 1985. During September and
October, my involvement was on a part-time basis but
increased to full-time in November and remained as such
until completion in June.

The majority of rational planning and decision-making
models identify step one as defining the problem (Lauffer,
1978; Doern et al, 1973). Meenaghan (1982) suggests that

some preliminary steps should be taken before planning and
its subsequent activities can actually take place. For
this practicum, it proved to be absolutely essential that I
covered all of these areas before embarking on the actual
intervention process.

These preliminary steps are:
1) Identify those parties who have an interest in the
process as well as all sources of power. Assess these in
terms of being supportive or restraining to change
activities:

    - There were a number of groups that were very concerned
about the decisions that would be made within the duration
of this practicum: The line social workers, Children's Aid
Society of Winnipeg management staff, the executive
directors of the regional agencies, clerical staff, the
Child and Family Directorate of the Provincial Department
of Community Services and Corrections and the agency's
lawyers. While many people involved realized the importance
of this activity and attempted to be cooperative, there
were many different opinions about how it should be carried
out. Also, as noted above, it was recognized that
difficulties could arise because, while the executive
directors were responsible for setting up the new systems,
it was the current executive who maintained the ultimate

authority as to what actually did occur.

2) Develop a broad understanding of the problem area;
identify the possible influences and range of current
agency/program responses.

- I attempted to accomplish this requirement by meeting
with line staff and unit supervisors, with workers
providing specialized services, with the executive
directors, with clerical staff, with the legal expert from
the Child and Family Directorate and with the agency
lawyer. Numerous issues had been raised by these parties
which influenced much of the planning process and clearly
identified several tasks which needed to be completed
within the scope of this practicum. These meetings also
gave me the opportunity to begin to establish lines of
communication. Line staff needed a clear understanding of
the purpose of the transfer process so that a commitment on
their part to this endeavor could be fostered.

3) Clarify the roles and duties of the worker and secure
sanction from the appropriate sources. - In this case,
sanction had come from two sources: originally from the
chairman of the Implementation Working Group, and
subsequently from the chairman of the "Transition Team" of
which I was a member. My specific responsibility on this

team was to develop and facilitate a process for the
transfer of cases/files and services from Children's Aid
Society of Winnipeg to the six regional agencies. Sanction
was also obtained from the members of my advisory committee
upon approval of my practicum.

3.4 Recording

Recording consisted of keeping a daily log describing each
days activities, listing any issues raised and documenting
decisions made. Numerous outlines and forms were created
for the implementation and monitoring of the transfer
process. Their formation and use will be discussed in the
following chapter which describes in detail the activities
and skills that were required to carry out the tasks
associated with this practicum.

Chapter IV

TRANSFER OF CASES AND SERVICES

Five tasks were identified as required to complete
successfully the final stage of regionalization. The first
three are included in the Planning Manual (Manitoba
Community Services and Corrections, 1983, p.VIII-15):

4.1 Develop a plan for the timing and physical transfer
    of service caseloads.

4.2 Conduct orientation sessions with staff regarding
    transfer plans.

4.3 Implement and monitor the plan.

4.4.Clarify the legal requirements of transferring orders
    and contracts from the Children's Aid Society of
    Winnipeg to the new agencies prior to April 1, 1985

4.5 Develop a plan for the timing and physical transfer of
    services, ie. medical, foster care, homemakers, court
    and intake.

Figure 4.1 outlines the timing of each of these activities
as they actually occurred. The following is a discussion
on how each of these tasks were planned, implemented and
monitored.

Figure 4:1

TIME SEQUENCING

TASK	DEC.	JAN.	FEB.	MAR.	APR.	MAY
MONTH						
I) Dev. plan re: timing & physical transfer of services & cases	X	– – X				
1.1 Dictation forms	X					
1.2 Decision rules		X				
II) Orientation of staff	X	– –	– – X			
III) Implement and monitor case transfers				X	– – – – – – – – X	
IV) Clarify legal issues re: orders & contracts	X	– –	– – –	– – –	– – X	
4.1 Meet with Child & Family rep.	X	– –	– – –	– – X		
4.2 Consult with lawyers		X	– –	– – – X		
4.3 Dev. process for transfers				X	– – X	
4.4 Implement and monitor					X	– – X
V) Transfer of Service						
5.1 Medical		X	– –	– – –	– – X	
5.2 Foster care			X	– – –	– – – –	– X
5.3 Homemakers			X	– – X		
5.4 Court			X	– – X		
5.5 Intake			X	– –	– – – X	

4.1 Case Transfers - Planning

Numerous meetings were conducted with social work staff,
individually and in teams; with management staff of the
Children's Aid Society of Winnipeg, and with the executive
directors of the new agencies. While carrying out the
preliminary steps described in the preceding chapter, it
was identified that for the transfer process to occur in as
smooth a manner as possible, three components were
necessary: 1) standard transfer summary dictation outlines
re: families and children in care; 2) decision-rules
identifying under what circumstances transfers were to take
place; and 3) a system to track the movement of cases from
one worker to another.

4.11 Transfer Summary Dictation Outlines

The development of the transfer summary dictation outlines
occurred during the month of December. The original draft
of the outline was based on dictation forms already in use
within the agemcy in an attempt, on my part, to keep the
process as simple as possible, i.e., using forms with which
the staff were already familiar. When presented to the
executive directors, they initially were wanting much more
information on each case until it was pointed out to them
that these were transfer summaries not social histories and
that the files, with all the information on the client,

would be available to the new workers. With a few minor changes, my original draft of the outlines was taken to the Children's Aid management group for their input.

The management group was much more insistent about having more information included in the summaries than the executive directors had been and suggested that a number of additional headings be added to the outlines. They also asked that the summaries be typed on coloured paper (green) and that they be attached to the previous file dictation. These recommendations were sent back to the executive directors for their consideration and approval.

At their next meeting, the executive directors gave their approval to the dictation outlines, with one or two minor changes, but basically as recommended by the management group.

Copies of the approved outlines were sent to the appropriate supervisors along with a memo requesting that they have each of their unit members complete one of each outline and evaluate it on the basis of length of time to complete, noting whether or not a dictaphone was used; the ease in completion; and whether they felt there were any gaps in necessary information or any requests for

unnecessary information. Feedback from this evaluation was generally positive and only four minor changes were recommended and subsequently made. Three units reported that it had taken three to six hours to complete a summary, while one unit reported that it had only taken one hour. No dictaphones were used.

Copies of the tranfer summary dictation outlines, one for families and one for children in care, are located in Appendix A.

4.12 Decision-Rules

In the pre-planning meetings with social work staff, numerous concerns were raised about the basis on which decisions for transferring cases would be made. Many feared that no thought would be given to their clients and that the decision to transfer would be made strictly on the basis of geographic location.

The process of developing the decision-rules was much the same as that for developing the transfer summary dictation outlines, i.e., I prepared a proposal for the executive directors, they made recommendations, and a draft with these recommendations incorporated was then presented to the management group for their input. The difference in

the process, however, was that it was lengthier and generated much more dissention so that three drafts were presented to the executive directors before one was presented to the mangement group. Secondly, when it finally was presented to the management group, three of the executive directors and the Chairman of the Implementation Working Group (IWG) were present. After much discussion, the decision-rules were accepted as presented.

In facilitating the development of these rules, I was continually aware of the staff's fears and concerns that the rules would not take into consideration the needs of their clients. The final product, I believe, did address these issues and most staff found them helpful in making a rational decision as to whether or not to transfer a case.

A copy of the decision rules is located in Appendix B.

With the development of the transfer summary dictation outlines and the decision-rules completed, the Transition Team formulated plans for the actual transfer to begin. On January 10, 1985, it was decided that workers should have 25% of their cases ready for transfer by February 8, 1985. "Ready for transfer" meant that the file would be

up-to-date and in the supervisor's possession while the
transfer summary would be written, typed and forwarded to
me by noon of this date. It was planned that every two
weeks thereafter, i.e., February 22, March 8, March 22,
another 25% of their cases would be submitted for transfer,
thereby completing the transfer process by the target date
of April 1, 1985. There was no input from either management
or line staff in the development of the timetable.
Management staff were told by their executive to inform
their unit members of this schedule and to ensure that it
was strictly adhered to.

4.13 Development of the Tracking System

To cope with the need of gathering and processing large
amounts of information, Child and Family Services attempted
to develop a management information system. Originally, it
was hoped that the system would have been developed to the
the stage where it could have been used in the planning and
the monitoring stages of this practicum. Development of
the system was slow, however, and it was only useful in the
monitoring of case and guardianship transfers.

The development of a system to monitor the transfer process
and track the movement and assignment of cases required the
distribution of computer-generated caselists (families and

children) to all workers with the request that they:

1) update the information on the lists, i.e. correct any misinformation, add any missing cases and delete any that had been closed.

2) indicate for each case whether they were planning to terminate service prior to April 1 (close), transfer or keep the case. In the case of a transfer, workers were asked to indicate to which region they planned to transfer the case.

3) return the completed lists to me by January 25, 1985.

Within a day of distributing these lists to the workers, it became apparent that at the time they were run, the Management Information System (MIS) had experienced a major indexing problem and as a result many lists were badly outdated and numerous cases were missing. Unfortunately, this only served to confirm in many staffs' minds that the MIS was useless for this or any other task. As far as they were concerned, this was the third computer system that had failed to "produce" in the manner promised by its creators.

The actual task of having all caselists returned was not accomplished until the second week in February and it required a great deal of "hounding" on my part of both the

workers and supervisors.

4.2 Case Transfers - Orientation of Staff

Orientation of staff to the transfer plans concerning cases
and services commenced in the pre-planning stage and was an
on-going process until the beginning of February. All
sessions were conducted by myself and took place either in
management meetings, unit meetings or one-to-one. It was
hoped that open communication with the staff and
participation by the staff in the planning process would
lessen the tension they were experiencing and foster some
commitment to the process. As noted earlier, staff at all
levels were particularly helpful in developing the
decision-rules.

4.3 Case Transfers - Implementation and Monitoring

The caselists completed by the line workers indicated they
had identified 1100 cases for transfer. The transferring
of cases commenced as scheduled and in the manner decided
by the Transition Team. Originally, it had been hoped that
the Management Information System would assist in the
tracking of the transfers, but because of the delays in its
development, it was necessary for me to design and
implement a manual tracking system that was both
time-consuming and tedious. It involved the following

steps:

1) a notation was made on the worker's list that the summary for a particular case had been received.

2) Case was designated for a particular region

3) Check was made for "missing pieces". If another piece was required, the summary was put aside and a memo sent to both workers involved informing them that the transfer would not take place until all parts were in.

4) Cases for transfer were recorded according to region and current worker noted.

5) On transfer days, cases were distributed to the Executive Directors who in turn distributed them to the supervisors of their neighborhood teams.

6) It was expected that cases would be reassigned within the week. The summaries were then returned to me.

7) The name of the new worker was recorded on the regional lists.

8) Summaries were returned to the supervisor of the current worker who then passed the actual file to the current supervisor of the new worker.

9) Nursing was notified of any children being transferred to the Children's Aid Society of Eastern Manitoba.

This portion of the process generally involved five people: the current worker, the new worker, the supervisor of the current worker, the new supervisor of the new worker, and the current supervisor of the new worker.

In response to the numerous requests from both workers and supervisors as to where particular cases were within the process, I compiled a list of the cases which had not been submitted for reassignment because of "missing pieces" and circulated it to all the supervisors. This occurred after each round of transfers, with the exception of the first one.

Statistics were compiled on a regional basis after each round of transfers and shared with the Executive Directors and the Children's Aid Society of Winnipeg management staff. These indicated how many transfers each worker had planned to do and how many they had actually completed.

By the end of March, five "rounds" of transfers had actually taken place - February 8, February 22, March 8, March 15, and March 22. This had resulted in 60% of the total of planned transfers being completed within this time frame. After the second round of transfers, the union

became involved. This, along with lobbying of the
Executive Directors by the management staff and myself, led
the Transition Team to agree to slow down the process and
set a goal of 75% for this same time period.

Implementation of the final portion of the transfers became
somewhat more difficult, as four of the agencies moved out
of 114 Garry St. within the first three weeks of April. The
same process was maintained, however, until the first week
in May, with couriers being used to transfer summaries and
files back and forth. After this date, transfers had to be
negotiated between the two supervisors involved.
Supposedly, my role in this process had come to an end. In
fact, as I had all the records as to where cases had been
transferred, I soon was accorded the position of
"information generalist' by parties throughout the system.

4.4 Transfer of Guardianship Orders and Contracts
Although only a paper transfer, this process became even
more time-consuming and chaotic than the actual transfer of
cases. It was a highly sensitive issue and early in the
planning stages the agency lawyer warned that if the
transfer of guardianship orders and contracts was not
handled correctly, it could result in lawyers for parents
demanding the return of their children on April 1,1985,

based on a technicality. Lawyers for the Children's Aid Society of Winnipeg recommended that the Child and Family Directorate determine which legislation they planned to use and then they would assess the proposal to determine if it was legally sound.

To this end, I met in mid-December with Mr. Ernie Hasiuk, the legal representative for the Directorate. When presented with the issues, Mr. Hasiuk noted that no-one had really given any thought to the issue and was surprised to learn that approximately 1200 cases would be involved. The only precedent for such action was when Thompson Region had transferred the guardianship orders of 150 children to Awasis. At that time each transfer had to be done on a separate form, each of which had to be then signed by the Director of Child Welfare and then by the Minister of Community Services and Corrections. A second issue was the transfer of guardianship orders of native children. Several native agencies were also being mandated effective April 1, 1985, so it was not clear to whom the orders should be transferred. Mr. Hasiuk agreed to explore both these issues at a higher level and inform me as soon as any decisions were made.

By mid-February, it became apparent that there was no

simple way to accomplish this task and that it was highly
unlikely it would be completed by April 1. It was only at
the beginning of March, that the executive directors agreed
to the guidelines as proposed by the Directorate and agency
lawyers. Transfers of guardianship orders had to occur in
the same fashion as in the Thompson-Awasis situation, i.e.,
each on an individual form with a copy of the original
order attached and each requiring the signature of the
Executive Director of the Children's Aid Society of
Winnipeg and the Minister of Community Services and
Corrections. It was possible, however, to transfer a
number of Temporary Contract Placements on one form.

Again, it was necessary to have workers complete lists,
this time indicating to which region they planned to
transfer each of their children. Lists were to be returned
by March 15, but it was not until several weeks after this
date that all were returned. Part of the problem was that
the case transfers themselves had not been completed and
workers were not always sure where a child was going to go
and/or if a particular region would be willing to accept
the child.

The issue of the native children was not resolved until
April 2, 1985, when the Assistant Executive Director

received correspondence from the Deputy Director of Child

Welfare, Mr. Ernie Hasiuk, stating:

> "Please be advised that registered Indian children who
> were apprehended off-reserve, are currently in the
> permanent care of the Children's Aid Society of
> Winnipeg, and are now residing in Winnipeg should be
> transferred to the appropriate regional agencies and
> not to the Indian agencies with jurisdiction on the
> reserve where the children are registered."

The monitoring of the transfers of guardianship orders and

contracts occurred in much the same fashion as the

monitoring of the transfers of cases. All forms passed by

me and names were checked off a master list, noting to

which region the case was being transferred and verifying

that this matched with the region of the assigned worker.

A spin-off of the transfer of the legal guardianships was

the "cleaning-up" of the child's portion of the Management

Information System. By using the information I accumulated

in tracking the transfers as they occurred, errors re:

worker names, discharges, opening, etc., were identified

and easily corrected. By the end of March, the Management

Information System had the ability to list all the children

for each region with a respectable degree of accuracy.

4.5 Transfer of Services

4.51 Medical

At the time of regionalization, 245 children were active
with the Children's Aid Society of Winnipeg Clinic, most of
whom were fairly young and/or had severe medical problems.
The nursing staff started to do medical summaries of these
children in December but were concerned that these
summaries would go on files rather than directly to the
doctor who would be providing the medical attention.

The new agencies were proposing that medical care would be
provided by a doctor of the foster parents' choice,
preferably in their own community. On the other hand the
nurses, who favoured centralized health care, were
recommending that at the very least the children be taken
to pediatricians with admitting privileges at Children's
Centre as 75% to 80% of the children were already known to
Children's; private doctors were not likely to go down to
the hospital to read charts; and the children were already
familiar with the setting.

Beyond meeting with the nurses and suggesting that they put
their concerns in writing to the Executive Directors, there
was very little else I could do as this issue had to do

with the "new" system and so was beyond the scope of this practicum.

4.52 Foster Care

This should have been one of the simplest services to transfer. Licencing regulations stipulated that foster homes had to be approved by the agency serving their geographic area. Therefore, it was clear from the beginning that the foster parents' geographic location would determine the region to which they would be transferred.

This process, however, had a shakey start due to semantics. The Executive Directors of the new agencies thought of foster homes as cases. Children's Aid staff, including myself, had never thought of foster homes as cases as government statistics did not include them in case counts. To these people, foster homes were a service. Unfortunately, neither group ever had the occasion to explain their understanding of the term until after the first round of transfers, when no foster homes had been transferred. This was understandable considering the process had always been referred to as a case transfer process. With one brief meeting including several executive directors, the supervisor of the Foster Care unit

and myself, the matter was quickly cleared up.
Subsequently, the transfer of foster homes was accomplished
with a fair amount of speed.

Tracking of the foster home transfers was carried out in
the same manner as tracking of the case transfers. However,
I was never able to obtain a master list of all the foster
homes approved by the Children's Aid Society of Winnipeg
and therefore could not monitor the number of cases being
transferred against those requiring transfer.

4.53 Homemakers

The transfer of this service occurred with only minimal
intervention from me and was completed by April 1, 1985.
The service was a relatively small one and was coordinated
by one individual. Since homemakers are free agents, it
was their decision as to which agency they wished to work
for. As the Coordinator of this service pointed out, they
would most likely want to work for the agency that would
give them the most work.

All homemakers agreed to continue working with the families
to which they had been assigned, at least until the
expiration of their current contracts. These contracts
were transferred in the same manner as the Temporary

Contract Placements. The contracts which expired in March 1985, were renewed in the name of the appropriate new agency.

4.54 Court

The transfer of legal/court services was almost entirely governed by the much larger system in which it functioned, that is, the Court of Queen's Bench and the Child Welfare Act. It was also very much a part of the transfer of guardianship orders process. Numerous parties were involved in this portion of the transfer process: the Transition Team, the Attorney General's Department, the new agencies' lawyers, judges from the Court of Queen's Bench, the court coordinator and lawyers for the Children's Aid Society of Winnipeg, and the Directorate.

Early in January, the agency's lawyer was asked to meet with the executive directors to explain the court process. Several weeks later, the executive directors met with the Queen's Bench, Family Division judges. Court docket days were set for each agency. By this time, all the agencies had retained lawyers so that the lawyers from the firm that had handled the Children's Aid Society of Winnipeg cases began to prepare transfers of all uncontested matters. It was decided that, effective March 18, 1985, all new

apprehensions would be filed in the name of the agency

which would be legally responsible after April 1, 1985.

The transfer of cases where pretrials or contested hearing

dates had been set occurred according to the following

rules:

> "1) These cases will be carried by their current workers
>   on behalf of CAS/W until the guardianship application
>   is resolved.
>
> 2) CAS/W (M. Bergman) will write to the agency which
>   will employ the current worker after April 1st
>   authorizing them to act on behalf of CAS/W pending
>   resolution of the guardianship application.
>
> 3) When guardianship is granted to the CAS/W it, and the
>   case will be transferred to the agency which will
>   thereafter be responsible for the case; this agency
>   to be identified as per the case transfer process.
>
> 4) The agency which will be responsible after the
>   guardianship application is resolved will be
>   consulted as to case planning and the application
>   before the court.
>
> 5) CAS/W legal counsel will act in these pre-trial and
>   contested cases. Legal costs will be paid by CAS/W
>   to the point of an order."
>
> (Memo, from T. Sale to Transition Team and E. Hasiuk,
> March 18, 1985)

4.55 Intake

The transfer of Intake services involved numerous meetings

with the Transition Team and the Children's Aid Society of

Winnipeg staff. The issue was complicated because while

there was an Intake Unit (commonly referred to as Big
Intake) which performed screening and crisis intervention
functions, three other units handled their own intake
functions - Abuse, Perinatal and Adoptions. In the
Perinatal and Adoption Units, intake was carried out on a
rotating basis among the workers while in the Abuse units,
two workers did only this function.

An attempt was made by the supervisors of the Abuse,
Perinatal and Adoptions units to assign cases on a regional
basis within their units, but in the case of the Perinatal
unit, none of the workers had been deployed to Northwest
and in the Abuse unit, the two Intake workers were the only
workers in their new regions with any expertise in abuse.
These regions could not afford to have their experts
"tied-up" with intake duties until April 1.

Initially, I met with the supervisor of the "Big" Intake
unit in order to gain an understanding of the function of
the unit. His recommendation was that the workers in the
unit remain until March 30, unless the Regions were willing
to each deploy one worker for the purposes of training.
This recommendation was presented to the Transition Team
serveral days later, but was rejected in its entirety. The
Team had little time to deal with the issue during that

particular meeting and the task fell to the chairman of the
Implementation Working Group (IWG) and myself to develop
protocols for the transfer of this service to be presented
to the Children's Aid Society of Winnipeg management group
and the Transition Team for their consideration and
approval. In the development of these protocols, two goals
had to be met: 1) Intake was to be regionalized by April 1,
1985 and 2) Intake staff were to be relieved of some of
their duties so that they could begin to carry generic
caseloads.

Draft #1 was completely rejected by the management group
who then asked for more imput in the development of a
second draft. Draft #2 was developed with the assistance
of the supervisors of the four units performing intake
functions, the Assistant Executive Director and myself.

Draft #2 proposed that the workers from the Intake unit be
given until March 15 to clear up the approximately 300
cases with which they were involved and that after this
date, the unit would take on a short-term screening
function i.e., crisis resolution with follow-up provided by
a regional worker. Perinatal cases would be assigned on a
regional basis and those cases belonging to Northwest would
be assigned to workers elsewhere in the agency. Abuse

intake would continue to be performed by the two specialized workers, involving regional workers whenever possible. These two workers were not to be assigned caseloads until after April 1.

When this Draft was presented to the Transition Team the following day, the recommendation for "Big Intake" was accepted with the provision that cases start to be assigned to these workers after the second round of transfers, i.e., February 22. The recommendation for the Perinatal unit was accepted as proposed. However, the transfer of the Abuse Intake function remained a contentious issue.

In an attempt to resolve this final issue, I met with the supervisor of the Abuse unit and explained to her the concerns of the Executive Directors regarding the regionalization of abuse and in particular, the intake function. She agreed to meet with the Executive Directors the following morning to discuss the issue. This meeting was a successful one, as it succeeded in clearing up a number of misunderstandings between the Executive Directors and this supervisor and a process for assigning abuse cases to the regions was agreed on.

Chapter V

EVALUATION OF THE PRACTICUM

Evaluation of this practicum occurred in three areas using formative research. The three areas included completion of tasks, my administrative skills and the utility of this practicum to both the regionalization process and myself.

Rutman (1981) defines formative research as that which aims to show the relationship between program activities and outcomes, not for the purpose of testing programs but to facilitate development. Formative research is characterized by being: discovery oriented, inductive, more flexible regarding the use of "soft measures and designs, continual feedback of information, developing required methadology, and negotiating administrative agreements. This evaluation process is also taking the form of descriptive research as it proposes to describe systematically the facts and characteristics of the program for the purposes of identifying problems and making comparisons and evaluations." (Isaac et al.,1971).

5.1 Tasks

As noted in Chapter IV, the following tasks were executed and completed:

a) Development of a plan for the timing and physical transfer of caseloads including the development of dictation outlines and formulating decision-rules.

b) Orientation sessions with staff regarding the transfer plan occurred.

c) The transfer plan was implemented and monitored.

d) The legal requirements of transfering guardianship orders and Temporary Contract Placements were clarified.

e) A plan for the timing and actual transfer of services, i.e., intake, court, foster care, homemakers and medical services was developed, implemented, and monitored.

Not only is the accomplishment of these tasks important for the evaluation process, but also whether they occurred as scheduled. The original plan had been for all these tasks to be completed by April 1, 1985. Planning and decision-making occurred on schedule, but the actual implementation of the transfer of cases and guardianship orders/contracts, while initiated on time, was a much lengthier process than the new Executive Directors had anticipated and so implementation and monitoring of these tasks were ongoing until July 15, 1985. (My involvement ended on June 3, 1985)

5.2 Administrative Skills

The instrument used for the purpose of assessing my administrative skills was a questionnaire adapted from one developed by Bonita Murphy (1983) for the evaluation of her administrative practicum. This tool was created to assess analytical, interactional and human relations skills, as well as technical skills. Fourteen items are ranked on a scale of 1 (low) to 5 (high), with room for comments after each category. A copy of this questionnaire is located in Appendix C.

The executive directors of the six new agencies, the chairperson of the Implementation Working Group (IWG), the executive and assistant executive directors, as well as all the supervisors of the Children' Aid Society of Winnipeg were approached to complete the questionnaire and return it to me in an attached self-addressed envelope. Respondents were asked to identify themselves only as: Supervisor, Executive Director or Other. The return rate was as follows: Supervisors - 11, Executive Directors - 6, and Other - 3, for a total of 20.

Table 5:1 lists the mean score and mode for each question, as well as a summary score for each category. Table 5:2 breaks these scores out on the basis of the respondent's

Table 5:1
PERFORMANCE SCORES

	Mean	Mode
UTILITY OF PRACTICUM (N=18)*	4.4	5
ANALYTICAL SLILLS		
a) understand dynamics of agency	4.6	5
b) identify pertinent problems, issues	4.5	4
c) draw meaningful conclusions/ insights	4.3	4
d) make decisions/problem solve (N=19)	4.4	4
e) learn quicky from experience/ information	4.4	4,5
Category Score	4.4	5
INTERACTIONAL and HUMAN RELATIONS SKILLS		
a) develop open, working relations	4.5	5
b) listen to and understand staff concerns	4.5	4,5
c) clearly communicate thoughts, ideas, etc.	4.0	4
d) elicit open communication	4.2	4
Category Score	4.3	4
TECHNICAL SKILLS		
a) plan and organize work-related tasks (N=19)	4.5	5
b) conduct & facilitate productive "working meetings" (N=18)	4.1	4
c) synthesize/record results of work activities (N=16)	4.2	4
d) complete designated tasks (N=17)	4.7	5
e) communicate effectively on paper (N=16)	4.2	4
Category Score	4.3	4

* Unless otherwise noted, N=20

Table 5:2
PERFORMANCE MEAN SCORES BY RESPONDENT'S STATUS

	Sup'r (N=11)	E.D. (N=6)	Other (N=3)
UTILITY OF PRACTICUM	4.4	4.3	4.7
ANALYTICAL SLILLS			
a) understand dynamics of agency	4.7	4.2	5.0
b) identify pertinent problems, issues	4.5	4.2	5.0
c) draw meaningful conclusions/ insights	4.3	4.3	4.3
d) make decisions/problem solve	4.2	4.6	5.0
e) learn quicky from experience/ information	4.3	4.2	4.9
Category Score	4.4	4.2	4.9
INTERACTIONAL and HUMAN RELATIONS SKILLS			
a) develop open, working relations	4.5	4.5	4.3
b) listen to and understand staff concerns	4.3	4.5	5.0
c) clearly communicate thoughts, ideas, etc.	4.0	4.0	4.0
d) elicit open communication	4.2	4.2	4.3
Category Score	4.2	4.3	4.4
TECHNICAL SKILLS			
a) plan and organize work-related tasks	4.5	4.5	4.3
b) conduct & facilitate productive "working meetings"	4.0	4.0	4.7
c) synthesize/record results of work activities	4.0	4.3	4.5
d) complete designated tasks	4.5	4.8	5.0
e) communicate effectively on paper	4.1	4.0	4.5
Category Score	4.2	4.4	4.7

employment status. Generally, mean scores are quite high
(4.0 - 4.7), with summary scores (Analytical - 4.4,
Interactional - 4.3 and Technical - 4.3) indicating
consistent performance/ability in all categories.

Table 5:2, "Performance Mean Scores By Respondent's
Status", indicates that those individuals comprising
"Others" rated my performance somewhat higher than did the
executive directors and supervisors. This group included
two individuals with whom I worked the closest, i.e., the
Chairman of the Implementation Working Group (IWG) and the
Assistant Executive Director of the Children's Aid Society
of Winnipeg, and so I feel their responses hold a bit more
weight.

Perhaps, more revealing than the scores, were the written
comments of the respondents:

    -"...Technical contribution excellent.
    Shortcomings and gaps related to the complex
    system division undertaken." (Executive Director)

    -"...did an excellent job in an extremely
    stressful situation and seemed to maintain her
    sanity throughout." (Executive Director)

    -"...interpersonal skills are exceptionally high
    ...was able to work effectively with many
    different people, at times under difficult
    conditions." (Executive Director)

-"...has the ability to relate extremely well to
peers, clients or collaterals...is a dependable
individual who is thorough in her approach to any
task assigned to her." (Supervisor)

-"...was impressed with her insight and
problem-solving abilities...was sensitive to
issues presented, and quickly gave one a sense of
comfort and helpfulness." (Supervisor)

-"It is difficult to deal with as many sensitive
actors, especially when all are under tremendous
pressure. Despite the shortness of tempers, Carla
managed to hold everyone together and sort out the
situation, keeping everyone calm...appears to be
very organized, efficient person who can quickly
computate the required data even under short
notice." (Supervisor)

-"The potential for chaos in this situation was
extremely high; considering this...a very
admirable job in facilitating a relatively smooth
process...co-operative and prepared to deal with
issues within her authority." (Supervisor)

-"...very strong interpersonal skills..."
(Supervisor)

-"I do not think communication was too open
initially with staff, but in the unit where I
worked, there was improvement over time. There
was a lag on occasion between information
available on paper and most current information.
This may not have been avoidable." (Supervisor)

-"...very helpful - demonstrated a high level of
competency in a situation that at times was
without any 'sense' or 'order'." (Supervisor)

-"...worked very hard to do a difficult and
unrewarding job...had a good working knowledge of
agency which greatly helped to provide a
meaningful interpretation of the agency as whole
or in part...very organized and good communication
skills." (Supervisor)

-"...superior skills (analytical) in all these
areas...on occasion, I sensed a lack of ability to
'get through' when people were blocking. Perhaps
a tad too much willingness to defer/
compromise...may need to be a bit more assertive
in requiring performance of others that she
requires of herself." (Chairman of the
Implementation Working Group)

-"...was seen as open, honest and helpful by all
concerned - clerical, social work, administrative
and executive levels. This is a tribute to her
communication skills." (Assistant Executive
Director)

These comments, more than the scores obtained on the

questionnaire, gave me a sense of a job well-done and the

knowledge of having accomplished my stated primary goal,

that is, acquiring and demonstrating an understanding of

the skills required to effectively function as an

administrator in a human service organization, particularly

during times of change.

5.3 Practicum Utility

The first question of the questionnaire asked respondents

to rate the utility of this administrative practicum to the

agency. Table 5:1 indicates a mean score of 4.4, a mode of

5, while Table 5:2 indicates a mean score of 4.4 for

Supervisors, 4.3 for Executive Directos and 4.7 for Other,

in answer to this question.

Again, the written comments provide a better assessment of

respondents' perceptions as to the utility of the

practicum:

-"Quite simply - we couldn't have completed
regionalization without this task." (Chairman of
the Implementation Working Group)

-"The case transfer process would have been
impossible without the help provided through this
practicum." (Assistant Executive Director)

-"This may have been a unique practicum. amd the
student had the opportunity to participate from
the ground floor in the reorganization of new
agencies. Her position as coordinator was needed
at the time, and there could be an ongoing need,
depending on what problems will continue to arise,
eg., how to transfer from one region to another."
(Supervisor)

-"The coordination of the transfers facilitated
greatly a very complex process." (Supervisor)

-"The agency desperately needed someone who would
take responsibility for the case-transfer
process." (Supervisor)

-"It helped to track and sort out cases."
(Supervisor)

-"This practicum provided the Agency with
information that was necessary and important."
(Supervisor)

General concensus, then, was that this practicum was of

true benefit to the Agency and to the regionalization

process.

Of equal concern to me, however, was the utility of the practicum to myself. In retrospect, I can say that as a learning experience, it provided me with innumerable opportunities for skill enhancement and personal growth. Beyond providing a medium for accomplishing my original goal of acquiring and demonstrating human service administrative skills, this practicum afforded me the opportunity to move from a theoretical framework of how organizations behave and the role organizational goals may play in program implementation, to a very real understanding of the highly political environment in which child welfare policies are developed amd implemented in this province. Success in meeting the practicum goal and task objectives, added to my sense of self-confidence and self-worth. I also had the opportunity of becoming familiar with the Management Information System and now realize the great potential it has for the child welfare field. Finally, for a social worker desiring to continue and further her career in the Manitoba child welfare system, this practicum experience allowed me to network with numerous personalities within this system and to establish myself as a competent social worker having some credible administrative/managerial skills and knowledge to offer the system.

CHAPTER VI

CONCLUSION

The theoretical framework of this practicum addressed two issues; the role that organizational goals serve as directives for the formulation and implementation of programs and services, and the role and skill requirements of the social work manager.

This practicum occurred in the midst of organizational change resulting from a major shift in government policy. The experience supports the use of Systems Theory to define "organization".

The goal of government in restructuring child welfare services in Winnipeg was to create a community-based system with an emphasis on prevention. The creation of six regional agencies with Boards of Directors elected from the community ensured that the new agencies would be more representative of, more accountable to and more accessible to the community it was to serve. The presence of three government appointees on each Board is an attempt to ensure that the agencies will continue to provide service in the manner originally planned by Government.

The literature provides opposing views on the value of using goals to analyze organizational behavior. This practicum experience supports the position that while the new Child Welfare program in Manitoba had some competing goals (eg. protecting children and keeping families together) and that while some of the goals of the program were vague and diverse (eg. the provision of "generic" services and the development of "prevention" programs) these goals did, however, justify the existence of the six new agencies, provided a focus for their activities and would eventually provide standards for assessing their efficiency. The goals that government set forth for the restructuring of the Children's Aid Society of Winnipeg set the pace for and gave direction to the manner in which cases and services were transferred.

The six new agencies became the tools or instruments required to implement the policy of community-based, prevention-oriented child welfare services that had evolved through a complex, political process in an attempt to meet social need. As acknowledged by the systems approach to formal organizations, conflict is ever present and, in this case was rampant. While many parties agreed that the provision of child welfare services employing a community-based, preventative perspective was preferable to the

services that had been provided by the Children's Aid
Society of Winnipeg, the opinions as to how to
operationalize this construct were as diverse as the
individuals, groups and organizations that had defined the
need for change.

The formation of various coalitions became evident during
the span of the practicum but the most powerful was that of
the Implementation Working Group (IWG). The IWG, as the
dominant coalition played a major role in determining the
nature of the services to be offered by the new agencies as
it determined the allocation and distribution of the
resources controlled by its members. However, the
coalition formed by the Executive Directors determined the
nature of and the manner in which the transfer of cases and
services occurred. The fact that these six individuals
soon would become the new employers of almost every staff
member then employed by the Children's Aid Society of
Winnipeg was never forgotten and generally had a great deal
of weight in ensuring that change occurred in the manner
desired by the new agencies.

This practicum supports the use of Etzioni's model of
Mixed-Scanning as the model by which decisions are best
made as it takes into account the reality of many varied

components operating at one time, interacting with each
other and the environment, and recognizes that detailed
examination on an on-going basis of each component is
unrealisitic and unfeasible. Figure 4:1 illustrates the
numerous activities that simultaneously occurred over
varying periods of time. To have "Rationally" planned for
each task, managing to complete it within the designated
time-frame would have been an impossibility.

The restructuring of Child Welfare services in Winnipeg is
an example of major systemic changes resulting from new
policy initiatives. Resources and political commitment
were indivisible. It also is an example of a broad-aim
program created in the face of a major political issue,
i.e. it was a large scale program intended to achieve
political objectives in response to political pressure.

This practicum, besides providing an occasion to observe
the interaction and relationship between organizational
goals and policy implementation, also was an excellent
opportunity for the building and developing of social work
managerial skills. While I was not in charge of a formal
organization or one of its subunits, I was responsible for
contribution to and results of the enterprise and so did
have an impact on the organization's direction and

performance.

In order to facilitate a smooth and orderly transfer of cases and services, as outlined in the Planning Manual, the following roles were used: leadership, liaison, information generalist, monitor, public relations, planner, organizer, director, controller and evaluator. To fulfill these roles, the following skills were required: the ability to work with people in different settings, technical skills, ability to facilitate the development of commitment both to the organizaion and its tasks, communication skills, ability to engage in organizational politics, ability to access the Managment Information System, and the awareness to perform one's duties ethically.

Having worked in Child Welfare for four years as a Children's Aid Society of Winnipeg social worker, I possessed a good understanding of the organization as well as of the Child Welfare Act. This knowledge and/or technical skill allowed me to have credibility with both the staff and the Executive Directors. This was vital when I was attempting to motivate staff to develop commitments both to the organization and its tasks. It was also important when I felt it necessary to intercede on behalf of the staff to the Executive Directors. This became a

critical role necessitating a delicate balancing act as loyalty was simultaneously expected by the Executive Directors and the Children's Aid Society of Winnipeg staff.

The importance of fostering commitment by including all parties involved in the development of plans was most clearly demonstrated on the ocassion of setting the schedule for the case transfers. In this instance, staff had not been included in the planning. Although the reason for not involving them in the scheduling of this activity seemed legitimate at the time, i.e. a lack of time to do so, it soon became obvious that there was little commitment to the schedule. In fact, the schedule generated so much antagonism that the union became involved.

As noted by Lauffer, the range of my activites and choices, as is any mid-level manager's was limited by the structure within which I worked. The limits of my mandate were not always clear initially and were developed and tested throughout the entire process. Gross' systems perspective and the administrative model proposed by Meenaghan, provided a framework for addressing the issue that all functions of administration are ongoing and interactive, with one function influencing the direction and the emphasis placed on the next.

- APPENDIX A -

TRANSFER SUMMARY (FAMILY)

*Note: All headings should be listed in the dictation and if
information requested is unknown or not applicable, notations
of N/K or N/A be made.

1) FAMILY COMPOSITION:

   FAMILY NAME/NAMES:

   MOTHER: FATHER:
     ADDRESS: ADDRESS:
     TELEPHONE: TELEPHONE:
     BIRTHDATE: BIRTHDATE:

   CHILDREN:
   Legal name, birthdate, address (whereabouts, e.g. at home, in
   care, placed for adoption, etc.), school, and grade or workplace,
   noting legal guardian if other than adults identified above.
   Include children living at home, adult children, children placed
   for adoption, and children in care.

2) EXTENDED FAMILY/SIGNIFICANT OTHERS/OTHER AGENCIES INVOLVED:
   Detail extended family members, as well as other agencies and
   organizations currently involved. Include the names of other
   professionals and volunteers involved. If child(ren) has ever
   been in care, note if any special relationships had formed with
   the foster parents and if they would be willing to provide care
   again should the need arise. List names, addresses, phone
   numbers and type of involvement.

3) Complete either A OR B of this section (#3)

   A) IF PSYCHOSOCIAL HAS BEEN COMPLETED ....
       i) Indicate date of completion and location in file (page #).
      ii) Record any changes in demographic information; i.e. births,
           deaths, names of new partners, etc.
     iii) Re-assess family functioning in terms of relationship changes,
           the level of care the child(ren) are receiving in the home,
           behavioral changes, etc.

                        *** OR ***

   B) IF PSYCHOSOCIAL HAS NOT BEEN COMPLETED ....
       i) Date of, reason for and source of referral.
      ii) Presenting problems as perceived by: client, worker and
           community.
     iii) History of present problem - briefly describe the factors
           leading to the present situation.
      iv) Family functioning - Assess family functioning in terms of
           relationships, the level of care the child(ren) is receiving
           in the home, social activities, etc.

TRANSFER SUMMARY (FAMILY)   Page 2

4) CHILDREN IN CARE:

    NAMES AND PLACEMENT INFORMATION (Foster Parents' Name, Address
    and phone)

    A) Name of child(ren)'s worker(s), where applicable.

    B) State all court hearings and TCP agreements, giving both
    commencement and expiration dates.

    C) Describe briefly how the children are progressing in care.

    D) Comment briefly, where applicable, on visits between child
    and family.

5) SUMMARY OF CONTACT SINCE LAST REVIEW
    Note: Date and location in file of previous summaries.

    Briefly describe your contact with this family, identifying
    those events that may have impacted on the family situation.
    Specify admissions to care - dates, reasons, status, length
    of orders or TCP's.

6) SPECIFY PROBLEM AREAS ADDRESSED AND PROGRESS ACHIEVED SINCE CASE
    OPENING/REOPENING:

    Indicate interventions that have been tried, noting those that
    proved successful and those that did not, include reasons for
    success or failure.

7) PROBLEMS STILL UNRESOLVED AND RECOMMENDATIONS FOR FUTURE INTERVENTION:

8) CASE TRANSFERRED TO: (Name of Worker and Region)

/mw
Jan. 10/85.

TRANSFER SUMMARY FOR CHILD IN CARE

* Note: All headings should be listed in the dictation and if
           information requested is unknown or not applicable, notation
           of N/K or N/A be made.

CHILD'S NAME: FILE NO:
CHILD'S WORKER: CROSS REFERENCES:
FAMILY'S WORKER:

1) IDENTIFYING INFORMATION

       Birthdate: Birthplace:
       Current Placement: Name:
                             Address:
                             Telephone:
       Legal Status - Note expiry date where applicable
                     - Indicate if child is a Crown Ward or another province
       Pending Court Hearings
       School (or Education):
          Include name of School, Grade and Teacher.
       Present Place of Employment:
       Manitoba Medical and Social Allowance Nos.:
       Racial Origin (Band Name and No. where applicable):

2) FAMILY COMPOSITION:

       FAMILY NAME/NAMES:

       MOTHER: .   FATHER:
          ADDRESS: ADDRESS:
          TELEPHONE: TELEPHONE:
          BIRTHDATE: BIRTHDATE:

       SIBLINGS
          Legal name, birthdate, address, school and grade or workplace,
          noting legal guardian if other than adults identified above.
          Include siblings living at home, adult siblings, siblings placed
          for adoption, and siblings in care (include: name of child's
          worker, status of child, all court dates and expiry dates for
          orders and TCP's and briefly note future plans).

3) Complete either A OR B of this section (#3)

    FAMILY BACKGROUND:

    A) If this issue has been addressed in previous dictation;
        i) Note date of entry and location in file (page #).
       ii) Record any changes in demographic information such as births,
           deaths, names of new partners, and the impact these have had
           on the family.
      iii) Re-assess family functioning in terms of relationship changes,
           the level of care children are receiving in the home, behavor-
           ial changes, etc.

                              *** OR ***

TRANSFER SUMMARY FOR CHILD IN CARE   Page 2

      B)   If this issue has NOT been addressed previously:
          i) Give a brief resume on each of the family members. Include
             a physical description, and a description of personality
             characteristics and interests of the parents.
         ii) Note how family is functioning and any problems it is
             encountering.

 4)   EXTENDED FAMILY/SIGNIFICANT OTHERS/OTHER AGENCIES INVOLVED:
      Detail extended family members, as well as other agencies and
      organizations currently involved. Include the names of other
      professionals and volunteers involved. If child(ren) has ever
      been in care, note if any special relationships had formed with
      the foster parents and if they would be willing to provide care
      again should the need arise. List names, addresses, phone
      numbers and type of involvement.

5)   PLACEMENT DATA:
      Date child came into care:
      Reason for admission to care:
      Placement History:
        Include names of all placements, date of admission, and date of
        discharge.
        Level of functioning in present placement:

6)   CHILD'S PROFILE:
      Physical Appearance
      Health (Medicals, Dentals, Optical, Psychiatric, etc.)
      Developmental Information
      Interests and Activities
      Delinquent Behavior
      Knowledge of Sex
      School Performance
      Employment Experience
      Ability to form relationships with adults
      Ability to form relationships with peers
      Social functioning and personality (Brief overall assessment)

7)   RELEVANT CORRESPONDENCE:
      i) List all incoming reports including developmentals, psychologicals,
        medicals and last IPP etc. Note date and location in file.
     ii) For permanent wards, list dates of internal reviews. Include
        location in file.
    iii) For Native children, list referrals made to Native agencies,
        noting dates and responses. Indicate location in file.

8)   SUMMARY OF CONTACT SINCE LAST REVIEW:
      * Note: Date and location in file of previous summaries, where
            appropriate.

9)   SPECIFY PROBLEM AREAS ADDRESSED AND PROGRESS ACHIEVED SINCE CASE
      OPENING/REOPENING:
      Indicate interventions that have been tried, noting those that proved
      successful and those that did not, include reasons for success or
      failure.

10)   PROBLEMS STILL UNRESOLVED AND RECOMMENDATIONS FOR FUTURE INTERVENTION:

11)   CASE TRANSFERRED TO: (Name of worker and Region)

- APPENDIX B -

The Children's Aid Society of Winnipeg

M E M O

To: ALL SOCIAL WORKERS CARRYING FAMILY SERVICE & CHILDREN'S
       SERVICE CASES

From: C. DROZNAK

Date: January 15, 1985

_____

Attached please find:

    1) Procedures for Case Transfer (Pages 1 and 2)

    2) Rules for Case Transfer (Pages 3 and 4)

Your supervisor has copies of the dictation outlines (pink)
and additional copies are available on the shelves in front of the
call directors.

The Family Service supervisors have the list of cases for
each worker. Children's Services supervisors will receive theirs
shortly.

/mw

PROCEDURES FOR CASE TRANSFERS

The following process has been established to facilitate the transfer of cases:

1) Workers in conjunction with their supervisors review their caseloads.

   1.1) Decide which cases are to be closed, transferred or maintained by the present worker using the protocols outlined on pages 3 and 4.

   1.2) Update and complete the worker case lists.

   1.3) Return one copy to C. Droznak by Jan. 23/85.

2) Day-to-day dictation and transfer summary typed.

   2.1) Attach green Family Information Sheet to front of file - update.

   2.2) Files put in order by stenos and returned to worker.

   2.3) Files referred to supervisor for approval.

3) Copy of the transfer summary forwarded to Dave Schellenberg and Carla Droznak according to the following schedule:

   Feb. 8, 1985   -   First 25% of cases to be transferred

   Feb. 22, 1985 -   25%

   Mar. 8, 1985   -   25%

   Mar. 22, 1985 -   Remaining 25%

Staff are requested to have their summaries in by NOON. It should be noted that more than 25% of the cases to be transferred on one's caseload cannot be dealt with at any one time.

4) Executive Directors and their teams reassign cases within one week.

   4.1) Teams notify D. Schellenberg and C. Droznak of reassignments.

   4.2) Information given to supervisors of transferring workers.

   4.3) Transferring worker informed of the reassignment.

5) <u>Complete</u> file physically transferred to the supervisor
   of the receiving worker.

    5.1) Supervisor of the receiving worker adds worker's
   name to <u>green</u> Family Information Sheet and puts
   into the <u>mail</u> system.

    5.2) File given to receiving worker who assumes
   responsibility for the case.

<u>Note</u>: Where more than one worker is involved in providing service
   to a client or family, the family service worker is responsible
   for co-ordinating the forwarding of transfer summaries.
   Where no family service worker is involved, the children's
   service worker assumes this responsibility.

In the event that there are cases that workers identify as
falling outside the scope of the Rules for Case Transfer and
requiring special consideration, workers should discuss these with
the appropriate regional agency.

A review of the transfer rules and the process to date will
be conducted on February 1 by the Transition Team and the Executive
Directors. Any comments/concerns should be directed to Dave
Schellenberg and Carla Droznak prior to this date.

/mw

Rules For Case Transfer

FAMILY CASES (Including Adoption, Abuse and Perinatal Services)

GENERAL RULE: ALL CASES TO BE TRANSFERRED TO REGION IN WHICH FAMILY OR PARENT REQUIRING/RECEIVING PRIMARY SERVICES RESIDES.

EXCEPTIONS:

1) Services expected to be terminated by June 30, 1985. However, should it become apparent after April 1 that further service will be required, the case should be transferred to the appropriate region as soon as possible.

2) Contested court hearing pending.

3) Client expecting a baby on or before April 30, 1985 and planning to relinquish.

4) Family receiving intensive therapy for a specifically contracted length of time. (Contract negotiated prior to Feb. 1, 1985.)

CHILDREN IN CARE

Native children residing outside of Winnipeg:

Where the plan is to transfer the guardianship of a Native child to a Native child welfare agency, the present worker should maintain responsibility until this plan has been effected. All such transfers should occur as soon as possible. Where no such plan exists, the guidelines below apply.

A. Nonpermanent (Temporary, Orders of Supervision, TCP's):

- Transfer to the worker who will be assuming responsibility for the family.

- Teenagers who will be 18 prior to Sept. 30, 1985 may remain with the present worker, if desirable.

B. Permanent Wards:

GENERAL RULE: All cases transfer to the region in which child presently resides.

EXCEPTIONS:

1. Community in which the child presently resides may not be the one with which he/she has the strongest ties.

- Transfer to the region in which child is attending school, or to which he/she plans to move prior to Sept. 30, 1985, or in which the natural family lives with whom the child has significant contact.

2. Children presently placed in a treatment facility.

   - Transfer to region to which child has significant ties, if in accordance with permanent planning. If no special ties to any region, then transfer to region in which treatment facility is located.

3. Teenagers who will be 18 prior to Sept. 30, 1985.

   - May remain with present worker, if desirable.

4. Special needs children

   - Those cases involving intensive service to support the resource, transfer to the region in which foster home is located.

5. Children residing in other provinces.

   1) Present worker maintains case.

   or 2) Transfer to region in which child originally resided.

   or 3) If child is returning to Winnipeg, transfer to region to which child will return.

6. Children who are wards of other provinces.

   - Transfer to region in which they are living.

7. Sibling groups who reside in different regions.

   Siblings will be maintained by one worker. Region will be determined according to treatment plan.

/mw
Jan. 11/85.

- APPENDIX C -

May 21, 1985

Dear

As a component of my practicum, I am required to have the people with whom I worked evaluate my performance. I would appreciate if you would be kind enough to take the time to complete the enclosed questionnaire and return it to me. A self-addressed, stamped envelope is attached.

I would also like to take this opportunity to thank you for the support, assistance and encouragement which you so generously gave me over the past months. The task of facilitating and coordinating the tranfer of cases certainly proved to be a valuable learning tool for me, as well as a most memorable experience!

Thank you.

Yours sincerely,

EVALUATION OF ADMINISTRATIVE PRACTICUM

Please circle the most appropriate number in response to each of the following:

1. I would rate the potential utility of this administrative practicum to the Agency as:

    Low   High   Unable to Assess
    1   2   3   4   5   0

    Comments:

2. My impression of the student's analytical skills, as demonstrated through the following:

    a. Ability to understand the dynamics of the Agency's organizational process and structure.
       Low   High   Unable to Assess
       1   2   3   4   5   0

    b. Ability to identify pertinent problems/issues.
       Low   High   Unable to Assess
       1   2   3   4   5   0

    c. Ability to draw meaningful conclusions/insights.
       Low   High   Unable to Assess
       1   2   3   4   5

d. Ability to make decisions/problem-solve.

   Low   High   Unable to Assess

   1   2   3   4   5   0

e. Ability to learn quickly from experience/information.

   Low .   High   Unable to Assess

   1   2   3   4   5   0

Comments:

3. My impression of the student's <u>interactional and human relations</u> <u>skills</u>, as demonstrated through the following:

a. Ability to develop open, working relationships with Agency
   staff.

   Low   High   Unable to Assess

   1   2   3   4   5   0

b. Ability to actively listen to and understand staff concerns
   re: issues related to the practicum.

   Low   High   Unable to Assess

   1   2   3   4   5   0

c. Ability to clearly communicate thoughts, ideas, preceptions and feelings.

    Low   High   Unable to Assess

    1   2   3   4   5   0

d. Ability to elicit open communication.

    Low   High   Unable to Assess

    1   2   3   4   5   0

Comments:

4 My impression of the student's technical skills, as demonstrated through the following:

a. Ability to plan and organize work-related tasks.

    Low   High   Unable to Assess

    1   2   3   4   5   0

b. Ability to conduct and facilitate productive "working" meetings.

    Low   High   Unable to Assess

    1   2   3   4   5   0

c. Ability to synthesize/record results of work activities.

    Low   High   Unable to Assess

    1   2   3   4   5   0

d. Ability to complete designated tasks.

    Low   High   Unable to Assess

    1   2   3   4   5   0

e. Ability to communicate effectively on paper.

    Low   High   Unable to Assess

    1   2   3   4   5   0

Comments:

Evaluation completed by (check one):

    Executive Director   _____

    Supervisor   _____

    Other   _____

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