Peel Children's Aid Society

Comprehensive Review

REPORT

Submitted to the Director, Central Region

Ministry of Children, Community and Social Services

August 31, 2021

THE OSBORNE GROUP
Executive Performance on Demand

CCR
INTERNATIONAL

CENTRE FOR CONFLICT
RESOLUTION

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EXECUTIVE SUMMARY

Purpose

The Peel Children's Aid Society (Peel CAS) review was undertaken to develop findings and recommendations relating to service, operational, resource and workplace issues requiring further attention by the organization. The targeted outcome was the development and implementation of a path for improvement and sustainability. A central focus was the preparation of an action plan to address systemic racism and anti-Black racism and other issues identified in the review. Implementation of the action plan will be closely monitored on an ongoing basis by the Ministry.

This review was led by the Osborne Group, a Toronto based consulting firm. The review team included other external consultants and six Ministry of Children, Community and Social Services staff. The review was a targeted review rather than a full operational review.

Methodology

The overall scope of the review encompassed workplace culture, governance, service delivery model, compliance with Child, Youth and Family Services Act (CYFSA), community partnerships, human resources and finance.

The review team, led by The Osborne Group, focused on:

1. A third-party workplace cultural assessment conducted by the Centre for Conflict Resolution International (CCR).
2. The review included exploration of selected areas of Peel CAS's service delivery led by the Osborne Group.
3. Selected human resources policies and practices were reviewed by Aileen Edwards, AME Consulting and Leadership Coaching (Osborne Group Associate).
4. The effectiveness of financial processes was based on Government and Ministry directives and policies and were conducted by the Ministry of Children, Community and Social Services (MCCSS) staff.
5. The Compliance Review was conducted against key aspects of the Child Youth and Family Services Act (CYFSA) and were assessed by MCCSS staff.
6. The effectiveness of board governance and relationships with community partners was assessed by the Osborne Group team.
7. A final report was prepared for MCCSS by The Osborne Group and CCR in collaboration with the review team.

Summary of Findings

The detailed findings of the review team are reported in subsequent sections of this report. There are strengths, limitations and recommendations reported in all areas.

The most significant findings in the areas of strengths and weaknesses are described below.

Strengths

Client services and community partnerships are excellent. There is a clearly articulated model of service delivery that focuses on early intervention and prevention, serving children at home whenever possible or with kin if support outside the immediate family is needed. Over the past few years, the agency has partnered with a wide range of community service providers to develop culturally appropriate services and has worked with partners to provide comprehensive wrap-around supports for children and families. The Peel CAS, with immigration partners, has developed specialized services for new immigrants.

The society use metrics to evaluate client services and make improvements. Community partners interviewed during the review support these conclusions. They report that Peel CAS staff have an excellent reputation for sharing power and for having timely, forthright conversations about difficult issues to resolve differences in the interests of clients. Peel CAS staff report a sense of pride in their numerous unique specialized service teams and a responsive intervention model that has shifted toward greater collaboration with families and partners in the interests of children.

The Board is composed of a range of experienced, skilled individuals with diverse backgrounds committed to leading the Peel CAS in its mission. The Board uses a skills matrix for succession planning that reflects diversity in ethnic/visible minority identity; First Nations, Metis or Inuit identity; lived gender identity; sector and geographic representation; French language representation; skills, work experience and governance experience. They have thoughtful sound policies and are open to improvement. The Board walks the talk of commitment to ongoing learning and development.

Overall, case review results demonstrated high compliance across all service areas reviewed.

Challenges

The workplace environment is seriously troubled**.** The leadership culture is described as command-and-control; the union-management relationship is described as dysfunctional; communication lacks clarity and transparency; conflict is avoided; safe spaces for difficult conversations are lacking; and too much change is expected too quickly. A lack of healing of legacy issues including the strike and other key incidents, compounds the problems. Human legacy issues, resources and policies also need to be addressed.

Human resources stewardship by the Board requires increased focus. While there is a commitment to provide an environment where people are thriving in a healthy workplace and that the workplace is supportive of diversity, inclusion and equity, the Board does not have metrics in place to evaluate whether these commitments are being honoured.

OVERVIEW OF PEEL REGION

The following data was provided by the Peel CAS. Data sources are identified in Appendix 2.

Population
One in ten Ontarians live in Peel Region which is home to just over 1.5 million people. Over the last five years the population grew by 6.5%.

Peel has 11.5% of Ontario's children and youth aged 0-19; approximately 20% (1 in 5) of Peel's population are children or youth based on Peel's 2020-21 child welfare funding model socio-economic data.

Language
39% of Peel residents most often speak a language other than English at home.

Of the non-official languages (neither English nor French) spoken in Peel, Punjabi is most often spoken at home.

12.6% of Peel's population speaks more than one language at home.

Visible minorities
32% of Peel's residents are South Asian; 10% are Black; 5% are Chinese; 4% are Filipino, and 3% are Arab.

62.3% of Peel's population identify as a visible minority. This is more than two times higher than for Ontario as a whole.

Immigration
Immigrants comprise more than half of Peel's total population (51.5%), which is 1.8 times higher than that for Ontario. The country of birth for the highest percentage of immigrants in Peel is India (25.7%)

Poverty
16% of racialized (visible minority) populations in Peel experience low income.
Peel has 13.2% of Ontario's low-income families. 18% of Peel's children aged 0-17 live in low-income households.

Part I – WORKPLACE ASSESSMENT

CENTRE FOR CONFLICT RESOLUTION (CCR)

1.   Executive Summary

This report details the findings of a Workplace Cultural Assessment conducted within Peel Children's Aid Society (Peel CAS) from March to June of 2021. More than 350 participants, including staff, managers and Board members, were consulted, via surveys, focus groups and interviews, on the strengths and challenges of the workplace culture within Peel CAS.

Positive dynamics at Peel CAS include:

- **A passion for the work** and a strong commitment to children and families.
- **A sense of pride** in the numerous specialized teams and unique and responsive programming for clients.
- **Strong interpersonal relationships** between individuals.
- **A responsive intervention model** that has shifted towards greater consultation and collaboration with families and partners.

Challenging dynamics at Peel CAS include:

- **A leadership culture** that is described as command-and-control and has created a climate of disempowerment at all levels of the organization.
- **A lack of reconciliation** on legacy issues including the strike and other key incidents.
- **A union-management relationship** described as adversarial and dysfunctional.
- **A communication style** that lacks clarity and transparency.
- **Conflict avoidance** where issues and challenges are frequently dismissed or minimized.
- A lack of safe spaces to have difficult conversations on **anti-Black racism** leading many to feel unsupported.
- **Too much too fast**; Many new initiatives introduced without adequate time to plan, engage, communicate or get buy in from various internal stakeholders.

Many recognize pride in the accomplishments of Peel CAS and the reputation developed within the Peel region, and in Ontario, as a progressive and responsive agency to shifts in standards and systemic challenges facing the field of child protection. However, there is notable division within the agency over how it responds to workplace issues, challenges and disputes and this has led to negative impacts for many staff. The approach leadership has taken to disputes over strike actions, workplace safety and systemic racism has been described by many as top-down and non-collaborative. CCR International recommends:

- **a Workplace Restoration for Peel CAS, involving:**
  - **leadership coaching,**
  - **an internal dispute resolution process and**
  - **a maintenance plan to restore a foundation of trust within the agency.**

2.   Introduction

The Centre for Conflict Resolution International (CCR International) services were retained to assess the current workplace culture at Peel Children's Aid Society and facilitate a series of interventions towards restoring functional harmony to the organization. Subsequently, the Ontario Ministry of Children, Community and Social Services determined a need for an overarching review of Peel CAS and consequently this cultural assessment became part of an overall organizational review.

This report aims to provide Peel Children's Aid Society and the Ministry of Children, Community and Social Services with an impartial perspective on the workplace culture of the organization, specifically focusing on the challenges this culture presents in achieving their mandate. Peel CAS has demonstrated a commitment to better understanding themselves as an organization and addressing weaknesses and reinforcing successes in order to better serve the families in their service. The process engaged for this Workplace Cultural Assessment involved the collection of qualitative and quantitative information through the OrgPulse survey, focus groups and individual interviews to identify issues, interests, and positions and gain an overall understanding of the dynamics challenging the organization.

CCR International conducted a full assessment process by engaging all members of the organization including staff and leadership. It is important to note that CCR International received full cooperation from everyone engaged throughout this process, indicating the willingness of the parties involved to identify and address workplace issues in a healthy and productive manner. This report summarizes the information collected via the survey, focus groups and interviews, discusses the resulting analysis and concludes with the recommendations on moving forward.

CCR International's approach to assessments is founded on two key elements: confidentiality and impartiality. No notes or reports, verbal or written, are shared with the organization before the distribution of this final Assessment Report and no individual statements or identifying details are attributed to specific individuals within the report. Instead, we look for overarching patterns that are either a foundation for strength and effectiveness or are causing dysfunction within the organization, the severity of which is measured by the overall impact on people within the organization.

3. Qualitative and Quantitative Information Collected

At Peel CAS information was collected via three channels: an OrgPulse survey available to all staff within the organization via an internet link; focus groups held virtually with Peel CAS staff, and individual interviews conducted by phone. The following sections outline the information collected.

3.1 Quantitative Information: OrgPulse Survey

An OrgPulse survey was conducted online via a link sent to all staff at Peel CAS. Three hundred and forty-three (343) surveys were completed. The OrgPulse survey is made up of 91 questions spread across 12 key areas and establishes an overall score of organization functionality as well as identifies the areas of weakness that may be impeding the organizational culture from operating at full capability.

The overall score for Peel CAS was 70%, indicating that the organizational effectiveness at Peel CAS according to respondents is on the cusp between satisfactory and effectiveness limited, requiring some re-alignment.

Figure 1: Organization Score

	Total Points Possible	Total Points Scored	% of Total Points
Organizational Assessment Responses	153790	108391	70%
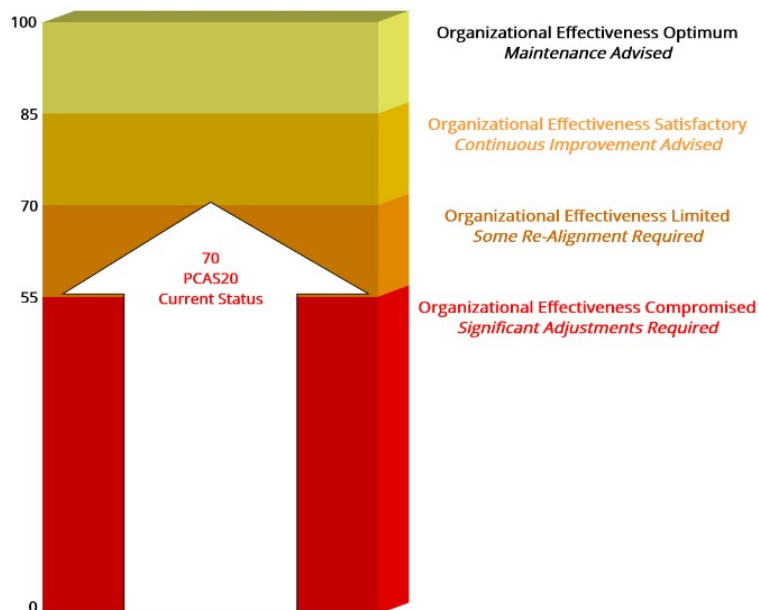
This overall score is made up of individual scores in 12 categories evaluated in the OrgPulse survey, which include Equity and Inclusion, Corporate Culture, Interpersonal Relationships, Roles and Responsibilities, Change Management, Conflict Management, Communication, Policies and Procedures, Job Satisfaction, Organizational Goals and Values, Leadership, and Organizational Structure.

While all results below 70% indicate some level of weakness, those around the 65% range indicate areas of concern where a deeper look at the underlying factors is necessary. For Peel CAS, Corporate Culture, Change Management and Conflict Management are areas of pronounced weakness, as are Policies and Procedures and Leadership, whereas Organizational Structure, Interpersonal Relationships and Roles and Responsibilities within the organization are the more functional areas. This result was confirmed by the qualitative information collected within focus groups and interviews and is discussed in further detail in section 3.3.

Figure 2: Summary of Results by Category
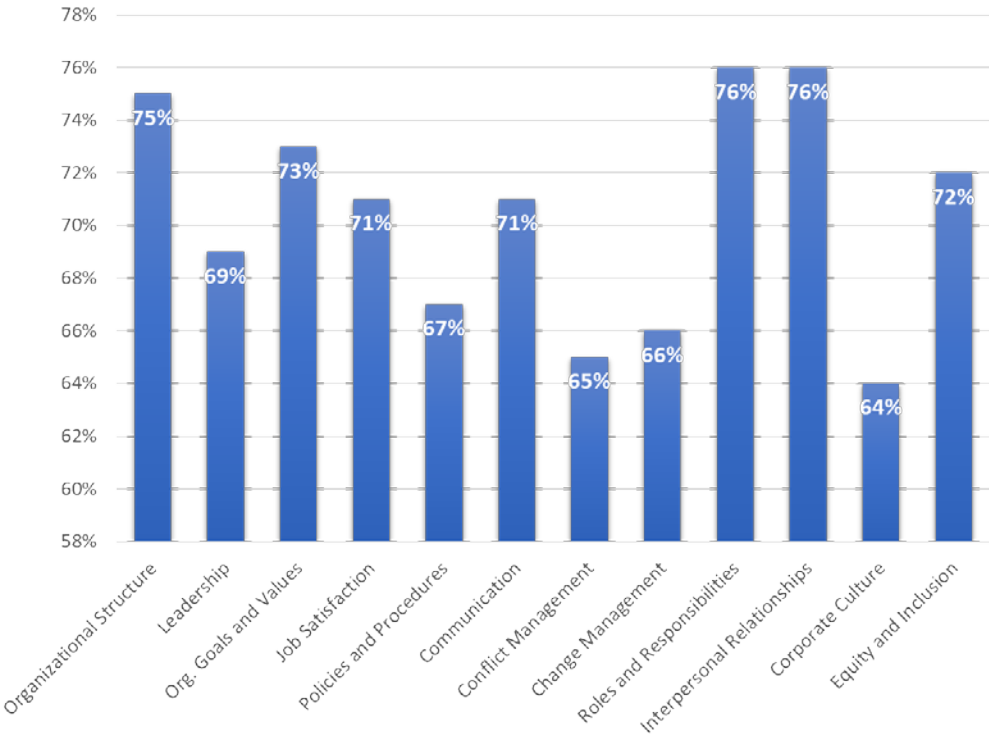
The breakdown of respondents by race category that best describes them shows a slim majority of respondents identify as White (i.e. European descent), followed by Black (African, Afro, Caribbean, African-Canadian descent), followed by South Asian (i.e. East Indian, Pakistani, Bangladeshi, Sri Lankan, Indo-Caribbean etc.). The next category of respondents preferred not to reveal their identity. This is followed by respondents who identify as East Asian (i.e. Chinese, Korean, Japanese, Taiwanese descent), Latino (i.e. Latin American, Hispanic descent), Indigenous (i.e. First Nations, Métis, Inuk/Inuit descent), Middle Eastern (i.e. Arab, Persian, West Asian descent: Afghan, Egyptian, Iranian, Lebanese, Turkish, Kurdish etc.) and Southeast Asian (i.e. Filipino, Vietnamese, Cambodian, Thai, Indonesian, other Southeast Asian descent) who make up the remaining number of respondents.

Figure 3: Breakdown of Respondents by Demographic
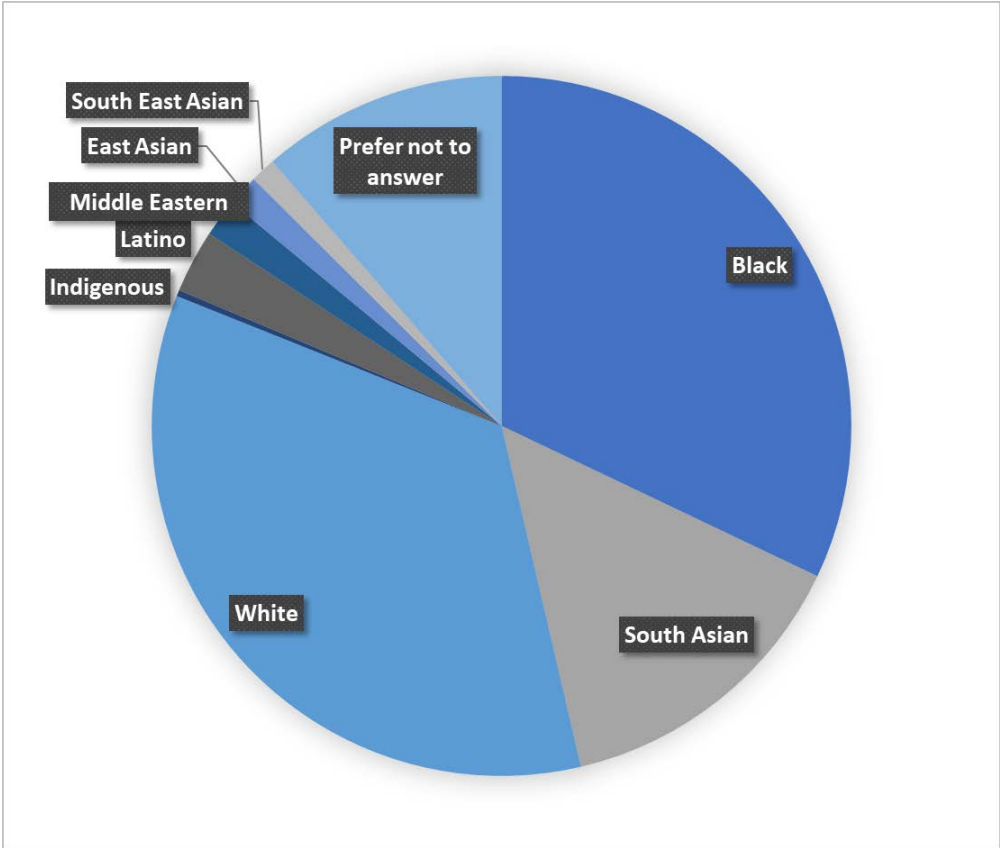
In order to protect the confidentiality of respondents, those race categories with less than ten people were combined in the following chart that displays how the organization was rated by each race category.

Figure 4: Organization Score by Demographic
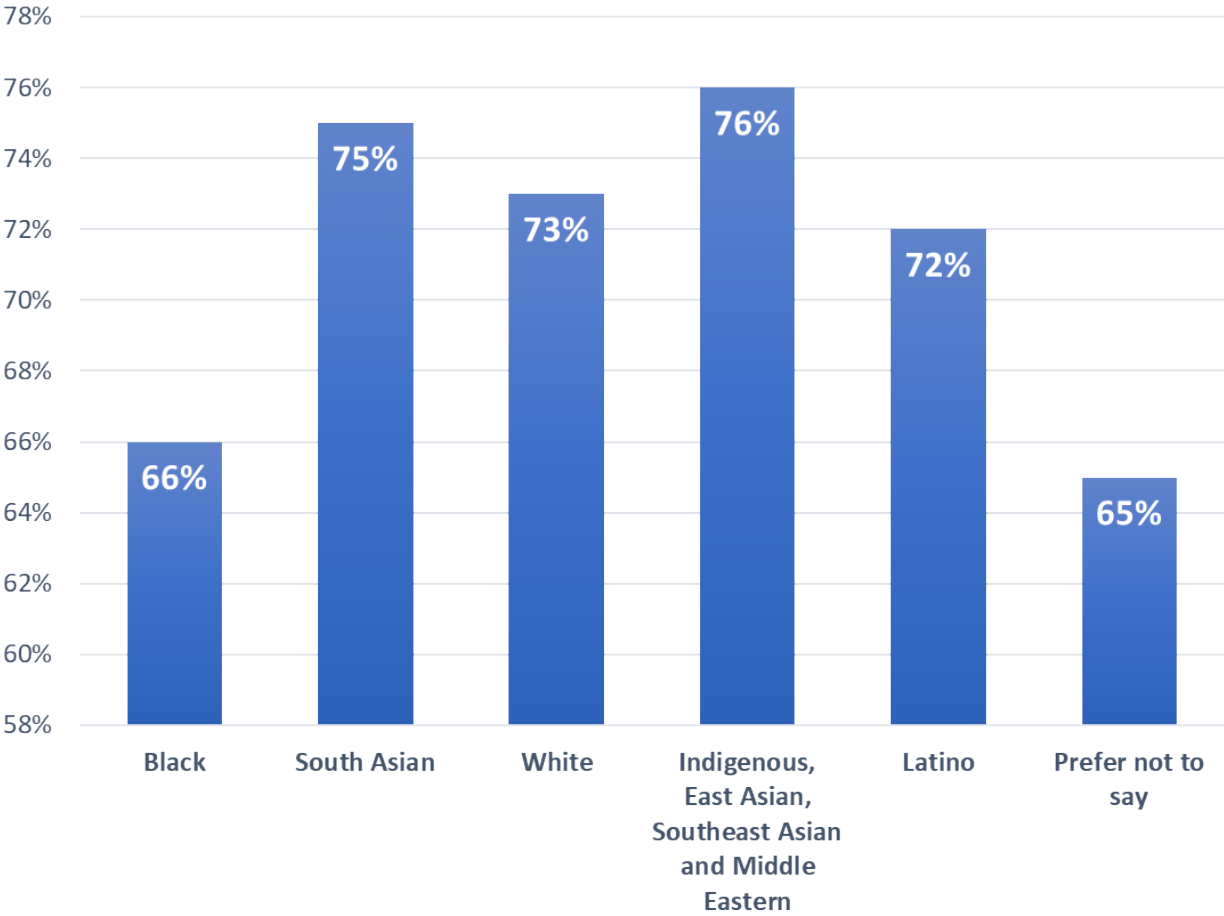
Figure 5: Category Scores by Demographic

Category	Responses					
	Latino	South Asian	Black	White	Middle Eastern, Southeast Asian, Indigenous, East Asian	Prefer not to Answer
Overall Score	72%	75%	66%	73%	82%	65%
Organizational Structure	75%	80%	72%	78%	84%	69%
Leadership	69%	74%	63%	72%	85%	63%
Organizational Goals and Values	76%	77%	68%	76%	86%	68%
Job Satisfaction	73%	75%	67%	73%	84%	64%
Policies and Procedures	69%	73%	63%	68%	81%	63%
Communication	71%	75%	67%	72%	83%	65%
Conflict Management	65%	69%	62%	67%	79%	63%
Change Management	65%	71%	63%	67%	78%	62%
Roles and Responsibilities	80%	80%	73%	79%	81%	70%
Interpersonal Relationships	80%	79%	74%	78%	85%	72%
Corporate Culture	67%	71%	60%	64%	76%	59%
Equity and Inclusion	73%	75%	67%	75%	83%	66%

There is considerable agreement, however, within categories of position concerning how the organization was rated. In the following graph (figure 6) we see how different levels of authority within Peel CAS perceive the overall effectiveness of the organization. Those in direct service who are non-management are least content with the organization, while those in Management with the least contact with front line work are the most content with the agency. Those who preferred not to state their position scored the organization the lowest, and they represent 7%, however, those in non-management direct service represent more than half of respondents at 53%. It should be noted that those 7% of respondents who did not identify their position are not necessarily the same respondents who preferred not to state their race category, age or other social location data.

Figure 6: Organization Score by Position
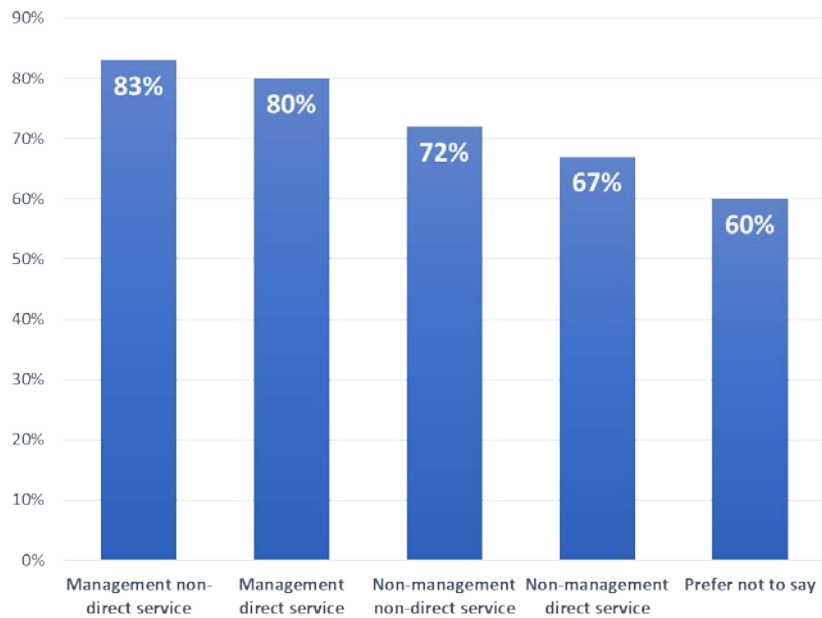
Figure 7: Category Scores by Position

	Management Non-Direct Service	Management Direct Service	Non-Management non-direct Service	Non-Management Direct Service	Prefer not to Answer
Overall Score	83%	80%	72%	67%	60%
Organizational Structure	87%	87%	76%	72%	65%
Leadership	82%	81%	72%	65%	56%
Organizational Goals and Values	84%	84%	75%	70%	62%
Job Satisfaction	85%	82%	72%	65%	84%
Policies and Procedures	80%	76%	69%	64%	57%
Communication	83%	79%	73%	67%	61%
Conflict Management	79%	74%	68%	61%	57%
Change Management	79%	75%	68%	62%	57%
Roles and Responsibilities	85%	83%	75%	75%	68%
Interpersonal Relationships	83%	83%	77%	74%	67%
Corporate Culture	76%	70%	67%	60%	56%
Equity and Inclusion	87%	81%	74%	68%	61%

From the information presented here we can deduce that there is some correlation between identifying as Black and or being in a direct service non-management role and perceiving the organization as less than satisfactory or effective. The following sections look deeper into the qualitative data collected, which provides more detail and nuance concerning the why behind these numbers.

3.2   Qualitative Information Collected: Focus Groups, Interviews

Figure 8: Conflict Zones
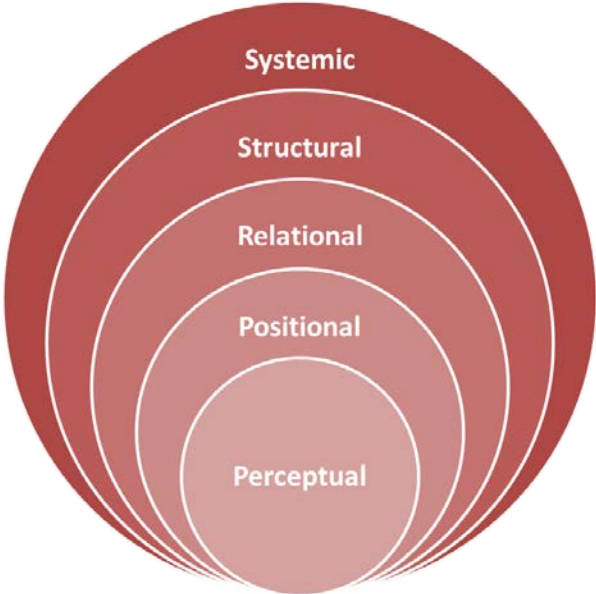
A total of 19 focus groups were held with Peel CAS; 14 for staff, 3 for Team Leads and 2 for Senior Managers, with more than 200 staff participating. Seventy-three (73) interviews were conducted with a selection of individuals randomly selected by CCR International. Additionally, individuals were interviewed at their request. In the OrgPulse survey one hundred and twenty-eight (128) individuals provided additional detailed feedback in the comments section. The key issues identified via these channels of information have been classified below in relation to CCR International's Conflict Zones framework: systemic, structural, positional, relational and perceptual. The qualitative data provides insights into the general atmosphere within the organization and points towards some of the key issues that are negatively impacting the client's environment and shed light on what the quantitative data identified.

Key issues are recorded and then organized in terms of a conflict model used by CCR International to classify the issues reported (pictured above). This classification begins the process of identifying overarching themes, patterns and issues rather than individual comments and observations. Often there are issues repeated in more than one area, which indicates that the issue is impacting people in different ways and should be factored into the conflict analysis (section 4).

3.3 Systemic Issues

Systemic issues refer to issues caused by external influences on the organization that directly impact the workplace and can cause deeper conflicts. Catastrophic events, market demands, public opinion, societal rules and norms are all issues outside an organization that can cause conflict within an organization.

Systemic issues are rarely resolved within the organization. Frequently, systemic issues are "managed" and skills to cope with these issues are generated, as these issues are frequently out of the scope of change for an individual organization.

The systemic issues negatively impacting Peel CAS are identified as follows:

Shifts in Government Policy

- Increased Ministry requirements for compliance and data has added to the disconnect between staff and management over the issue of quality of service vs quantity of information.
- Changes to Ministry policy affecting service standards (less children in care and addressing overrepresentation of Black children in care) has added to the pressures impacting the direct service staff.

Demographic Changes

- Demographic changes in client population (immigration, demographic shifts) are constantly necessitating changes in programs to better serve the different demographics within Peel.
- Greater understanding of the importance of representation (workers reflecting the clients they serve) has added to tensions between representative communities within in Peel CAS in regard to recruitment and promotions.

Systemic Racism

- Systemic racism and specifically anti-Black racism is a societal reality; the manner in which it impacts and is experienced by individuals and groups in Peel CAS varies greatly.
- Systemic racism (anti-Black racism in particular) in the community that Peel CAS serves is impacting racialized front-line staff who report a lack of adequate support.
- Euro-centric model of service disadvantages racialized families and if left unchallenged it will impact quality of service to an ever-changing cultural makeup of the community that Peel CAS serves.

3.4   Structural Issues

Structural issues centre on those rules, procedures, structures and roles in the organization that are currently causing problems and strain. Poorly defined roles and responsibilities, unequal distribution of workload, inefficient reporting systems, etc. are all a part of an organization's structure that can result in conflict.

The key to resolving structural conflict is in taking a structural approach. For example, if poorly defined roles and responsibilities is the cause of conflict then the roles and responsibilities must be more clearly defined through revised job specifications.

The structural issues negatively impacting Peel CAS are identified as follows:

Corporate Business Model

- Many in this organization believe that the current corporate "business model" at Peel CAS is incompatible with social work values and practices.
- A command and control "business model" that relies on a hierarchy of decision making that does not support bottom-up collaboration and consultation or consensus building.
- High number of contract positions and a lack of clarity around contract security, contributing to a culture of uncertainty and fear of reprisal.
- Administration staff report a lack of acknowledgement and active engagement that in turn lessens their ability to provide meaningful input.
- Too much, too fast; many new initiatives introduced without adequate time to plan, engage, communicate or get buy in from various internal stakeholders.
- Heavy workloads negatively impacting work-life balance.
- Frequent training opportunities: however, many lack the appropriate follow through to support meaningful change.
- Unwillingness on the part of leadership to accept fault or responsibility for conflicts, challenges and past decisions that negatively impacted the culture of the organization.

Communication

- Lack of transparency and clarity in communication across the organization.
- Decisions on clinical issues are frequently described by front line staff as being top-down, and reliant on Team Lead to advocate, with little recourse for workers to clarify or impact the decision.
- Inconsistent communication practices across Peel CAS that are dependent on individual leaders' communication style.

Conflict Management

- Lack of accountability and follow through when addressing individual staff issues, challenges or problems, are frequently minimized or dismissed.
- Responses to broader workplace issues are seen as reactive or performative with little time for planning or follow through.
- Culture of conflict avoidance (silencing, dismissing, denying, minimizing, delaying) rather than a collaborative approach.
- A lack of safe space to raise issues, challenges or conflicts.
- Inconsistent level of skills amongst Team Leads to address conflict and varying levels of trust in Team Leads amongst staff.
- Lack of effective structures and skill sets to address conflict has led to the exacerbation of unresolved issues and frequent expressions of frustration in various forums.

Leadership

- Inconsistent leadership (capacity, skills, engagement) across all levels of management.
- Staff report a lack of consistency in leadership skills and practices of Team Leads across the organization.
- Unclear or inadequate process to provide feedback on management performance, and where opportunities arise the response is not seen as genuine and lacks meaningful application.
- Team Leads do not feel empowered to take risks and resolve difficult issues due to command-and-control leadership practices.
- Hierarchy of importance amongst different departments within the agency that impacts negatively on leadership cohesion.

Role of People and Culture Department (HR)

- Inconsistent application of hiring/promotion standards that is seen as unfair has led to distrust of the process and People and Culture Department.
- People and Culture Department seen as not approachable; staff report People and Culture Department as exhibiting a lack of friendliness, suspicion towards staff, mistrust and report frustration over long, drawn-out or onerous processes.
- Lack of clarity between People and Culture Department and Department of Equity and Inclusion around their respective roles in addressing HR issues pertaining to diversity and equity.

Equity and Diversity

- While agency is recognized for addressing the needs of various racialized groups in the community, it has not been as effective over the years in addressing issues of race and inequity within the organization.
- Lack of accountability on issues of racism, sexism and discrimination; concerns are frequently dismissed, minimized or fail to meet the needs of many staff.
- A lack of segregation of racial and ethnic data within certain ethnic groups served by Peel CAS (lumping together of ethnic categories such a South Asian, using mixed or biracial term without definition).
- Lack of respectful and open spaces or forums to address issues of systemic racism and discrimination for all staff and leadership.
- Experiences of racism are expressed and dealt with through blame and shame discourse rather than as opportunities for difficult conversations that are based in respect towards positive change.
- No segregation of client satisfaction information collected which prevents understanding of how Peel CAS is serving specific segments of the population.
- Discrepancies in how identity-based data of service recipients is collected and prioritized by staff.
- Cultural groups/committees at Peel CAS have a primary focus on external service delivery and programming with minimal internal collaborative work amongst communities within Peel CAS.

Physical and Psychological Safety

- A number of conflicts and issues around safety are reported as dismissed or not acted upon by leaders.
- Workload demands have led to burnout and concerns for safety.
- There is a fear of negative repercussions for speaking out on contentious issues at all levels of Peel CAS.
- Staff have expressed feeling unsafe in reporting issues of misconduct and harassment.
- A number of Black staff reported feeling frustrated that their issues do not get a fair hearing and instead are negatively labeled as "challenging".

Informal Network of Communication

- Lack of transparent communication from leadership has led to a climate of distrust and gossip.
- Conflict between union and management has created a culture of mistrust where parties consistently try to control the narrative.
- Staff describe disclosing grievances to one-another but fear filing formal complaints.
- Lack of feedback loop on issues and concerns raised by staff that results in increased misunderstandings and distrust.

3.5   Relational Issues

Relational issues arise in workplaces wherever people are involved. Relational issues are rooted in differences in behavior, attitude, and relational style between people that have become problematic. These issues may stem from differing temperaments, beliefs or values, work styles or accumulated negative history.

To resolve relational issues, one needs to address the behavior that is causing the conflict, work on enhancing communication, and explore the underlying attitudes that are sustaining the situation. These attitudes are often rooted in past events and issues that have not been adequately understood or addressed.

The relational issues negatively impacting this organization are identified as follows:

Culture of Fear

- Organization-wide fear of speaking out (negative repercussions, not being seen as an ally, being perceived as difficult) and/or fear of association.
- Many managers and staff are conflict avoidant and consequently make decisions out of fear or risk-aversion.
- Staff reported frequent experiences of micro-aggressions that caused negative impacts.
- Individuals at all levels of the organization have reported fear and mistrust of "the other".
- Lack of agreement around how to manage difficult conversations/complaints within a public setting.
- Staff and managers expressed hesitancy in participating or presenting in meetings or public forums for fear of being labelled or judged.
- Many feel pressured to fit within a particular group narrative with negative consequences if they choose otherwise.
- Outspoken individuals in this organization are seen as aggressive and difficult, this leads to a lack of meaningful dialogue and resolution of issues.
- Many members of this organization report a high level of anxiety across different levels within the workplace.

Leadership

- Many staff experience individual Team Leaders differently in their communication, decision-making and behaviour, this impacts the level of trust and work efficacy between staff and Team Leads.
- Staff feel that many leaders do not communicate with sincerity or transparency.

Morale

- Staff describe a lack of morale due to inconsistent individual team experiences.
- Many staff describe a lack of morale due to unresolved conflicts in the organization, such as union-management relations and a lack of respectful communication between individuals.
- Little or no recognition for years of service or achievement or exceptional provision of service.

Inter-Staff Conflict

- The emergence of a culture of mistrust post-strike has resulted in polarized conflict between individuals.
- Inconsistent management skills and practices in many individual Team Leads allowed for divisions between staff to persist.
- Pressures of workload prevent opportunities for cooperation/collaboration between teams or peers.

Strike

- Strike was prolonged and impactful, lasting 13 weeks, and was a turning point in management-union relations.
- Unresolved distress and challenges persist for individuals in this organization originating from the strike and post-strike actions or inaction.
- The lack of healing and closure post-strike has left many open wounds for individuals in this agency that persist and impact relations into the present.
- The adversarial relationship between leaders both in management and the union has resulted in dysfunctional relationships that are based in distrust and miscommunication.

3.6   Positional Issues

Positional issues are those that arise from fundamental disagreement on issues of process, approach, preference, etc. Thus, two parties may simply disagree on how best to proceed, or which approach to take when it comes to tasks.

Some positional issues may remain unresolved, and the conflicting parties simply agree to disagree. To resolve positional issues, parties need to compromise on the solution or agree to either follow one's preference/process over the other.

The positional issues negatively impacting this organization are identified as follows:

Union-Management Conflict

- Adversarial conflict between union and management was exacerbated during and after the strike of 2016, this in turn prevents cooperation and collaboration on issues important to all staff.
- Entrenched, polarized conflict between union and management has led staff to feel pressured to "choose sides" for fear of repercussions, with little or no room for open and constructive dialogue.

Leadership

- Lack of agreement between many staff and management regarding allocation of resources (increases in management salaries versus front line salaries).
- Disagreement on work processes has led to adversarial relationships between some staff and their Team Leads.

3.7   Perceptual Issues

Perceptual issues result from perceptions and interpretations of actions that cause conflict. Frequently it involves a misunderstanding or a difference between intention and effect.

The key to resolving perceptual conflict is in clarification. When the difference between the intention of a person's actions or words and the effect those actions or words had on another party are discussed, any misunderstandings or misinterpretations can be rectified.

The perceptual issues negatively impacting this organization are identified as follows:

Leadership

- There is a shared understanding that the agency must maintain a level of excellence it has become known for and is referred to as the "Perfect Peel" and this is perceived by many staff members as taking priority over the safety and wellbeing of staff.
- Many staff report a fear that past conflicts will impact opportunities for advancement. There is a perception that the agency does not forgive and holds resentment.
- There is a lack of trust in the agency's intention to change and there is a perception that the agency is disingenuous and performative.
- Staff perceive leadership as fearful and unwilling to be seen as making mistakes and this has led to a culture of blame at all levels.
- There is a generalized staff perception that leadership cares more for how the agency is perceived externally than for the health and wellbeing of staff.

- There is a concern that leadership is "out of touch" with how social work has evolved and a lack of understanding of the day-to-day challenges, leading to unrealistic expectations of front-line staff.
- There is a perception by some staff that speaking up against management will lead to loss of employment or loss of opportunities.
- Individuals' cultural identity inform how they perceive the actions and decisions of their leaders, based on their lived experiences. This in turn produces higher levels of disagreement and conflict over motivation and impact.
- External praise for work accomplished by Peel CAS is seen by some staff as a tool to serve the leadership's interest in managing the agency's reputation.

People and Culture Department

- People and Culture decisions are not seen as impartial but rather side with manager views or positions, which adds to a higher level of distrust.
- In spite of attempts made by People and Culture Department to address staff issues, they are not perceived as a safe place to raise complaints or problems.

Union-Management Conflict

- Frequent and repeated use of contract work positions are perceived by some staff as a tool to weaken union and invoke fear and uncertainty in employment status.
- Union seen as focusing on issue of anti-Black racism at the exclusion of other issues.
- Leadership is perceived as demonstrating favouritism in the form of rewards and positions to those willing to minimize their support to the union or endorse management decisions.

Discrimination and Racism

- Generalized feeling amongst staff and management of victimization and that their identity is being diminished or undermined.
- There is resentment amongst some racialized, non-Black staff that they are taken for granted because they are not outspoken.
- There is a perception by some members of Peel CAS that racism and specifically anti-Black racism eclipses all other challenges and issues in the organization.

Informal Network of Communication

- Confidentiality is not upheld in certain situations which has led to increased levels of distrust in the agency.

4.   Analysis

Many entrenched conflict situations in workplaces, or indeed outside of workplaces, are perpetuated through a series of interdependent issues without which the dynamic or conflict system could not persist. The aim of CCR International in conducting an analysis of the data is to construct a working model for how these interdependent issues rely upon each other and perpetuate systems that are causing conflict and dysfunction in the workplace. Once a model of the conflict dynamic is mapped, we can then hypothesize a theory of change based on interventions that obstruct this conflict system.

4.1   Integral and Urgent

All of the issues identified in section 3 are important, however, not all issues affect everyone equally or are time sensitive. The first step in this process is to understand which of the issues identified in the data collection process are both integral (affect everyone and without which the conflict would not exist) and urgent (are time sensitive and demand quick resolution). There are seven (7) areas that meet these criteria:

1. **Leadership Culture**: Many experience a command-and-control culture of leadership that is expressed by key individuals in the organization that has created a climate of disempowerment at all levels of the organization.
2. **Lack of Healing:** There is a lack of healing and closure on legacy issues including the strike and other missteps within the organization that persist and impact relations into the present.
3. **Union-Management:** The adversarial conflict between management and the union has resulted in dysfunctional relationships that are based in distrust and miscommunication.
4. **Communication/Transparency**: In addition to a lack of transparency and clear communication, there are different groups who attempt to disseminate their narrative at the exclusion of the other which produces further confusion and distrust.
5. **Conflict Avoidance**: Complaints are frequently dismissed or minimized, policies and procedures are inconsistently applied and when issues raised are addressed individuals are not kept informed of actions taken.
6. **Anti-Black Racism**: Issues of anti-Black racism tend to be dismissed and minimized, there is a lack of safe spaces to have a respectful, constructive and difficult conversations regarding race, which leads to a number of Black employees feeling alienated and unsupported.
7. **Too much too fast**; Many new initiatives introduced without adequate time to plan, engage, communicate or get buy in from various internal stakeholders.

4.2   Underlying Conflict Dynamic

The following is a description of the conflict dynamic model that CCR International has identified as operating within Peel CAS.

Figure 9: Conflict Dynamic
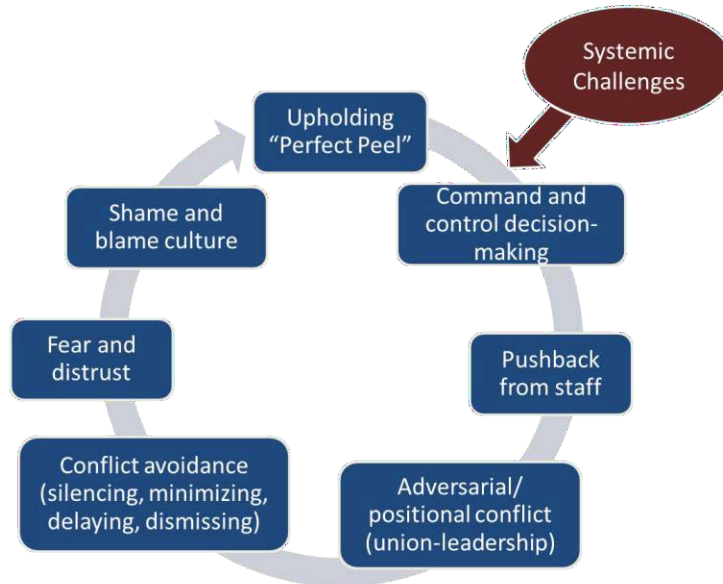
Changes in the field of child protection are a frequent occurrence in child protection agencies as all people involved work towards a system that is both inclusive and child-centred. However, the resulting pressures on agencies to be flexible and meet ever changing standards are substantial and every agency manages these pressures differently. Peel CAS has ostensibly been very responsive and maintained a quality of service for children and families throughout several major changes in recent history, however, it has done so with lesser regard to its impact on internal stakeholders at Peel CAS. The ideal of the "Perfect Peel" that not only meets the changes to Ministry standards but is instrumental in setting new benchmarks in the field of child protection in Ontario has been achieved and the positive impacts on the community and families was well received. The impact of this pressure on staff, conversely, was not being measured and a fear in upsetting the "Perfect Peel" was leading many in management to avoid or downplay challenges.

The leadership culture at Peel CAS became one that prioritizes external achievement over internal well-being and this led to pushback within the agency over workloads, dismissal of complaints and a lack of attention to the concerns of staff. Resistance was responded to with command-and-control style of leadership that resulted in a positional conflict between Peel CAS leadership and Union leadership. Rather than engaging and working cooperatively these issues were avoided and dismissed by leaders within Peel CAS and exaggerated and generalized by the

Union leading to an escalation in the conflict. This trend of conflict avoidance persisted and led to channels of communication drying up and a climate of distrust and miscommunication to form. Fear of failure and a strong commitment to oppositional narratives prevented collaborative solution-finding and instead a culture of shame and blame became prevalent.

4.3   Discrimination and Anti-Black Racism at Peel CAS

Bearing in mind the qualitative and quantitative information identified regarding anti-Black racism at Peel CAS, the following section provides further analysis of the data outlined throughout this report.

Racism is a systemic reality that is ever-present and impacting this agency. The reason it has become contentious at Peel CAS is due to a culture that is unwilling to accept fault and dismisses or minimizes difficult issues raised. While Peel CAS has addressed diversity and equity issues openly and with concerted efforts in unique programming with community partners and families, there has been a lack of meaningful engagement on racial challenges with staff. Third party consultants and experts have provided a buffer or "band-aid" solution to staff concerns that have ultimately not allowed for the honest and difficult discussions needed to address how racism is impacting staff and leadership within the organization. By dismissing or minimizing complaints concerning issues of racism, particularly anti-Black racism, the agency risks upholding systemic oppression. In addition, conflict avoidant behaviour has meant that safe spaces for meaningful dialogue concerning racism have not been enabled and the frustration and suppression of these important conversations has led to a culture where tension is treated with shame and blame by all sides.

The mantra of the "Perfect Peel" hinders the organization from having contentious and difficult conversations that require humility and vulnerability. The issue of anti-Black racism necessitates having very difficult conversations where recognition and admission of lack of perfection is foundational to any meaningful growth and change. The reality that racism is more often embedded in institutions and policies means that an organization unwilling to be self-reflective concerning their internal mechanisms leads to exclusion not inclusion.

The lack of empathy in this organization for "the other" and their lived experiences has led to an erosion of the values described as integral to Peel CAS and impacts different staff for different reasons regardless of how they identify.

5.   **Conclusions and Recommendations**

In conclusion, aiming for perfection is not the problem, rather it is the seemingly performative nature of the this aim within Peel CAS and the lack of listening on all sides that has left many staff feeling that sincerity is lacking. As the quantitative data demonstrates, there is a clear division between non-management, front-line staff and management in terms of how the organization is perceived and experienced, which speaks to this concern, as does the conflict between management and the union. The key to resolving the root of these conflicts lie in listening first, and acting only after analysis and reflection occurs.

In specific terms, to break this self-perpetuating cycle or conflict dynamic, Peel CAS must re-establish leadership standards with stronger links to the wellbeing of employees andaccountability measures that are implemented consistently in order to rebuild trust in leadership. CCR International has designed a series of inter-related interventions that would disrupt this conflict system and lay the groundwork for continued change, with the cooperation and active participation of Peel CAS Board, leadership, union, and staff.

Figure 10: Conflict Dynamic and Proposed Interventions
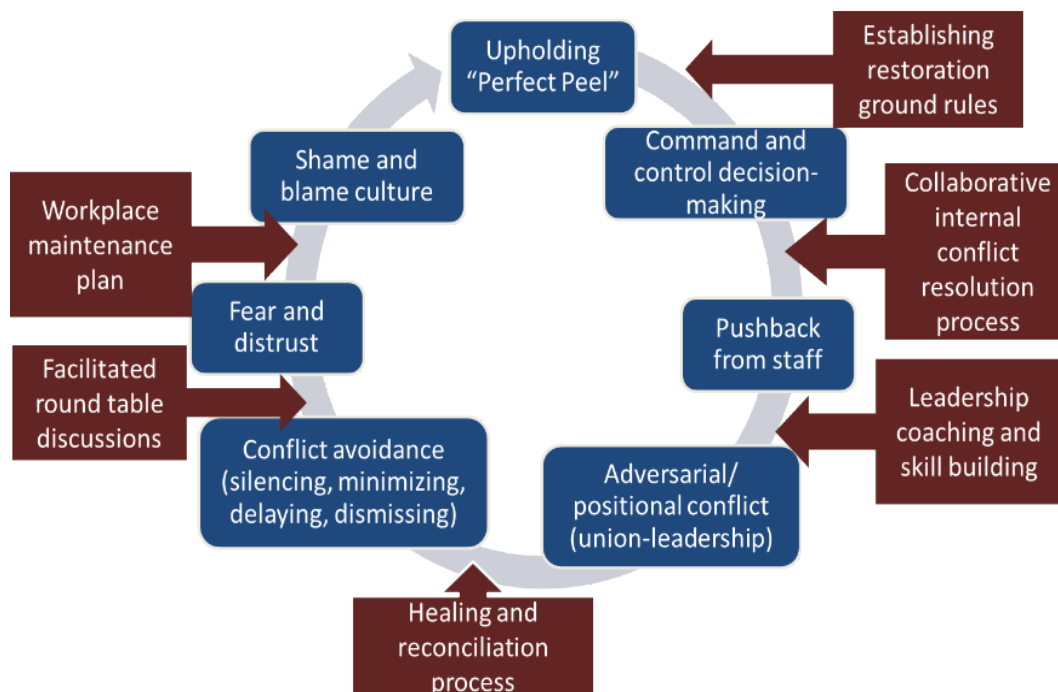
The overarching recommendations for interventions are as follows; firstly, establishing restoration ground rules for respectful workplace behavior within Peel CAS. Engaging in active listening and trauma informed practices will enable Peel CAS to prevent tensions from escalating. Secondly, instituting a collaborative conflict resolution process for internal complaints. Initially we recommend that this process be administered jointly by a team of People

and Culture and Union personnel with oversight by the Board on a temporary basis (12-18 months) while trust is rebuilt. Thirdly, coaching and building the skill sets of leaders (both within leadership and the union) concerning how to address challenging situations, or have difficult conversations and use conflict as a catalyst for change rather than an obstacle will enable all to be more effective in addressing issues and limiting their escalation. Fourth, is healing and reconciliation sessions for all staff that enables a more detailed account of the impact of the challenges detailed here on staff and an opportunity for some closure. Fifth, is the opportunity for facilitated round table discussions between groups and individuals where open and honest discussion on issues such as anti-Black racism and the strike will provide an opportunity to parties to express their needs and positions fully in a safe and accepting space and find opportunities for common ground or agreement. Finally, a maintenance plan, built on specific action items, with input from all staff will serve as a mutual agreement on how to move forward, hold each other accountable and rebuild a foundation of trust.

5.1   Forces for Workplace Harmony

In order to provide a balanced picture of the workplace at Peel CAS it is important to state the positive factors that contribute to workplace harmony and which have contributed to a majority of staff at Peel CAS expressing a certain level of satisfaction with the agency despite the challenges. These positive elements have allowed unique and important programming for children and families in the community and have led to a collective sense of pride within the agency. These factors will be the foundation upon which the Workplace Restoration process will enable healing and trust-building. These include:

- A passion for the work and a strong commitment to children and families.
- A recognition that there are challenges in the organization and yet with the right tools and approaches they can be addressed and resolved.
- This organization is proud of its diversity where the majority of the staff are racialized, reflecting a racially diverse community of service recipients.
- A sense of pride in the numerous specialized teams and unique and responsive programming for clients.
- An overall low number of children in care, that is widely understood to lead to better outcomes for families.
- Strong interpersonal relationships between individuals.
- Strong community partner relationships.
- Opportunities for training and professional development, particularly for front line staff.
- A responsive intervention model that has shifted towards greater consultation and collaboration with families and partners.

These positive forces are worthy of note as is the high level of participation in the organization in the Workplace Cultural Assessment process, despite reservations and low trust, as they speak to the hope that all staff and leadership have in the future of Peel CAS.

5.2   Moving Forward

Based on the 6 overarching interventions proposed above and recognizing Peel CAS's desire and commitment towards improving the workplace environment, the following Workplace Restoration Action Plan is recommended.

No.	Restoration Action Items	Recommended Timeline
1.	The establishing of ground rules for workplace restoration to ensure transparency, confidence and trust-building actions and behaviours.	0-3 months
2.	Temporary Board oversight of an internal conflict resolution process with transfer of oversight to People and Culture Department in 12 months.	3-6 months
3.	Training for leadership (Core Leadership Program) to address conflict and workplace challenges.	3-6 months
4.	Facilitated Restoration sessions with Executive Leadership.	0-3 months
5.	Facilitated Restoration sessions with Team Leads.	0-3 months
6.	Facilitated Restoration sessions with Union Leadership.	0-3 months
7.	Facilitated Restoration sessions with Board members.	0-3 months
8.	Facilitated healing and restoration sessions with all staff.	6-12 months
9.	A series of facilitated round table discussions between leadership and the Union including the Anti-Black Racism Steering Committee aimed at finding common ground and making a plan to move forward.	0-3 months
10.	Maintenance Plan development to establish clear goals and specific action items to hold each other accountable during a process of re-establishing trust within the organization between all levels.	6-12 months
11.	Independent third-party collection of satisfaction data from service recipients.	6-12 months
12.	Support to the Board concerning governance and accountability.	6-12 months
13.	Continued oversight by the Board to measure progress and address continued challenges.	Ongoing
14.	A re-assessment in 12 months using the OrgPulse and a small number of interviews to gauge progress and overall workplace health.	12 months

Part II – REVIEW OF GOVERNANCE, SERVICE DELIVERY - MODEL AND COMPLIANCE WITH CFSA, COMMUNITY PARTNERS, HUMAN RESOURCES AND FINANCE

a. GOVERNANCE

Methodology

The review conducted by the Osborne Group consultants focused on the structure and functions of the Peel CAS Board of Directors. The process included a review of key board documents, and interviews with Board members.

The following documents were reviewed:
1. By-laws
2. Governance policies, including:
   - Vision, mission, values, goals of organization
   - Governance philosophy
   - Roles and responsibilities of directors, officers
   - Board committees and terms of reference
   - Evaluation of effectiveness: organization, CEO, Board
   - Board development
     - o Recruitment of board members
     - o Skills matrix used in board recruitment
     - o Orientation of new board members
     - o Ongoing board development

3. Strategic Plan 2019-20, 2020-21

4. The governance function review included the following:

   - Review of agendas, minutes of board meetings from January 2018 -present
   - Review of reports on performance indicators
   - Review of decision-making processes
   - Review of risk management approach
   - Attending meetings of board committees (Finance and Audit, Board Development,and board Performance Monitoring and Evaluation)
   - Interviews with Board committees, Board President, CEO, senior staff based on lines of inquiry developed after reviewing the board documents

Findings

Strengths

The Board is composed of a range of experienced individuals with diverse backgrounds. Each Board member serves on one of three committees: Finance and Audit, Board Development, or Board Performance Monitoring and Evaluation. There is also an Executive Committee.

The Board usually meets monthly except over the summer and in December. Committees usually meet between full board meetings. Committee reports are presented at the meeting following the committee meetings. Agendas are used to guide meetings and comprehensive minutes are prepared following each meeting.

The Peel CAS has a clearly articulated strategic plan. There are six strategic goals, four of which focus the organizational efforts on outcomes related to children, youth, families; one focuses on using a quality improvement process and one focuses on providing a healthy workplace where people thrive. There are objectives for each strategic goal.

The organization has performance indicators for all of the objectives. The Board receives quarterly and annual reports on progress on the strategic priorities.

The Board of Directors' governance philosophy is based on the Carver approach to governance (Policy Governance) and has a range of policies consistent with the model such as: Statement of Ends (i.e., the purpose for which the organization exists,), Governing Style, Governing Process, Relationship with CEO, and Executive Limitations (i.e., general executive constraints).

The Board Policy Manual states that the Board is accountable to the Ministry of Children, Community and Social Services and to the citizens of Peel for effective service delivery and meeting legal requirements.

The Policy Manual includes an *Ends* Statement committing the Board to leadership on diversity, equity and inclusion. The policy defines inclusion as: "The extent to which the diverse members of a group or community/society/organization feel valued and respected" and equity as: "A condition or state of fair, inclusive, respectful treatment of all people. Equity does not mean treating people the same without regard for individual differences".

The Orientation and Reference Materials document for new Board members contains the core board documents.

The Board has annual retreats as a part of their commitment to ongoing learning and development.

There are processes in place for the annual evaluation of Board members and the CEO.

The Board members are skilled individuals committed to leading the Peel CAS in its mission. The Board uses a skills matrix for succession planning that reflects diversity in ethnic/visible minority identity; First Nations, Metis or Inuit identity; lived gender identity; sector and geographic representation; French language representation; skills, work experience and governance experience.

Individual Board members are knowledgeable about governance and the Peel CAS Board policies. They walk the talk of commitment to ongoing learning and development.
There are thoughtful processes in place for selecting committee members, committee chairs, and officers.

Committee members operate according to the terms of reference of their committees and the committees are ably chaired.

The Board operates responsibly following the majority of its policies and procedures which are evaluated regularly.

The by-laws are consistent with government regulations.

Board policies are relatively comprehensive and consistent with the Carver model of governance focusing the Board on Ends, Executive Limitations and Board Processes.

The Strategic Plan includes all the essential elements of a good strategic plan.

Strategic objectives for the four strategic goals and performance indicators for these initiatives focusing on service to children, youth and families are strong and substantive.

There is ample evidence of excellent client service. Board monitoring reports indicate achievements in these areas are substantial. This is consistent with comments from the community partners interviewed. Internal indicators of success in these areas are supported by CCR summary statements that staff a) have a sense of pride in the numerous specialized teams, unique and responsive programming for clients, and b) express pride in their work.

Performance indicators about staff diversity are reported at Board meetings.

Limitations

<u>Executive Limitations</u>

There is no mention of Board accountability to the staff of the organization in the Board Statement of Accountability (Policy E1).

There are no metrics or performance indicators that assess the degree to which the CEO is operating within the General Executive Limitations (EL1): "The Chief Executive Officer shall not cause or allow any practice, activity, decision or organizational circumstance which is either imprudent or in violation of commonly accepted business and professional ethics and applicable laws" and (BCE01): "The Chief Executive Officer may not perform, allow or cause any act which is contrary to policies and Executive Limitations".

<u>Human Resources Stewardship</u>

A major area for development is strategic objectives for the Strategic Direction #3: "provide an environment where people are engaged and thrive in a healthy workplace". This is a strong,responsible strategic direction. However, the only strategic objectives are "Continued implementation of the Learning and Development Strategy", and "Continued implementation of the Health and Wellness Strategy". These are not "*Ends*" or outcomes but activities. The range of performance indicators reported to the Board paints a picture of results that are either as expected or better than expected. The CCR findings that contradict these conclusions are compelling and a glaring testimony to the inadequacy of the metrics the Board uses here.

A second major area for development is measuring whether there is "an environment of mutual respect, learning and inclusion for all personnel consistent with our values [Executive Limitations 3 (EL-3)]: Staff and Volunteer Treatment)". This includes expectations that the CEO will not, "fail to take appropriate, timely action in response to formal or informal allegations of racism, homophobia, sexual harassment or any other form of oppression or discrimination which is inconsistent with our Board policies". Other specific executive limitations under EL 3 that further constrain the CEO are also not being monitored.

Employees are not only stakeholders in an organization, but they are also one of the most important assets of any organization. With finances, a major asset, there is a disciplined process for managing, overseeing and externally auditing the work of the CEO and leadership team to ensure validation of the work. The same rigor used in leading and overseeing the financial integrity of the organization should be used in leading and overseeing the treatment of people, i.e., the human resources, of the organization.

<u>Risk Management</u>

There is no evidence in the Board meeting minutes for the period from January 2018 to the present of discussion of risk management. There are no reported areas of weakness, problemsor conflicts within the organization and no mention of any legislative changes that could have a material effect on Peel CAS. For example, there was no mention of Bill 124 passed in 2019, the Government's control mechanism for public sector salaries; no mention of the letter of February 17, 2021, to the President of the Board and the CEO from Karen Singh, Director, Central Region, MCCSS, announcing the Ministry review. While these topics may have been raised in "In Camera" sessions, summaries of decisions taken "In Camera" should be recorded in the more public meeting minutes. The absence of any of these topics, together with the fact that all

metrics on strategic accomplishments show all progress as either "as expected" or "better than expected" with no indication that any performance falls short of expectations, indicates a lack ofcomprehensive reporting to the Board.

Recommendations

1. Expand the statement of accountability in the Board policies (E1-Board's Statement of Accountability) to include a statement of accountability to employees. While the Board does not direct or oversee staff, quality service delivery and adherence to government requirements is not possible without staff.

2. Expand the CEOs job description (Board/CEO Relationship, Board of Directors' Policy Manual) by adding a point that the Board holds the CEO accountable for operating within Executive Limitations. Right now, there is a point that holds the CEO accountable for achieving the Ends specified by the Board. Operating within Executive Limitations is equally important.

3. Develop and implement metrics to assess the extent to which the CEO is operating within the executive limitations specified by the Board of Directors (Board of Directors' Governance Policy Manual). High priority should be given to Executive Limitation # 3: Staff and Volunteer Treatment "the Board seeks an environment of mutual respect, learning and inclusion for all personnel consistent with our values" and the eight constraints listed under this Executive Limitation #3. This recommendation is consistent with the Board Policy, "Monitoring CEO Performance" (Board of Directors' Governance Policy Manual).

4. Develop a formal governance policy that addresses risk management. Review the current practices of reporting to the Board through a risk management lens. The goal should be to ensure the Board receives timely comprehensive reports that reflect a more realistic view of the weaknesses as well as the strengths of the organization. Peel CAS should be rightly proud of their many substantial successes and recognized areas of excellence. However, no organization is perfect, and the Board should be familiar with all material issues, including weaknesses, so they can guide and support on-going progress.

5. Review current practices of governance peer review and the CEO performance appraisal with a view to enhancing them to address the issues raised in the review.

6. Foster a Board culture of asking questions of senior management at committee and Board meetings about what is not being reported. There is a need to provide an environment that is safe for senior management to answer comprehensively. Consider the lens of: "How would those reporting to the senior team see this? What am I not hearing about that may be relevant to our governance responsibilities?" This is good practice for everyone in a leadership or management position. It helps to balance our human tendency to report only what represents us in a positive light.

7. The Board should enhance financial policies (see Finance Findings and Recommendations).

b. SERVICE DELIVERY MODEL

Methodology

In addition to reviewing a variety of documents and data sets, the reviewers met with the service directors on two occasions. These meetings were very helpful in developing an understanding of the Peel CAS and its service delivery model. The section of the review was completed by the Osborne Group consultants.

The Ministry asked the review team to explore two questions:

- Why does the Peel CAS have the highest absolute number of referrals in the province as compared to all other Children's Aid Societies?
- Why does Peel CAS have such a low number of children in care as compared to all other Children's Aid Societies?

The following information was provided by Peel CAS:

A number of years ago, Peel CAS realized that segments of the community viewed them negatively, leading them to significantly increase their community outreach, to build bridges and be seen as helpful and compassionate. This also began a shift in the service delivery model to early intervention and prevention which included moving from a narrow front door approach to a more open front door.

The majority of referrals made to the Peel CAS in 2020-21 are from police (51%) and school boards (11%) There are between 600 – 800 police referrals per month, many related to domestic violence. Of these referrals, 28% are moved to investigation.

This following chart demonstrates the change in referral patterns from 2019/20 to 2020/21 which has been affected by COVID in 2020/2021.The number of referrals in 2019/20 are more reflective of normal referral patterns.

	2019-20		2020-21		Variance
	N	%	N	%	
Police	5,724	43%	5,378	51%	(346)
Education	2,714	21%	1,161	11%	(1,553)
All referrals	13,177		10,611		(2,566)

The average number of police referrals per month is 477 for 2019-20, and 448 for 2020-21 many of which are related to domestic violence.

Of the referrals from police, in 2019-20 48% opened to investigation, and in 2020-21 55% opened to investigation. In comparison, for both years, of all referrals, 59% opened to investigation.

Several years ago, Peel CAS and Peel Regional Police realized that up to 25% of police referrals were not reaching the CAS. As a result, an electronic process was implemented by the Peel Police in conjunction with the Peel CAS to ensure referrals were made in a more seamless and integrated way.

Referrals include inquiries, community links and reports received but not investigated as well as reports of child abuse and neglect.

There are nine intake teams (known as Advice and Assessment):
- two screening teams
- six investigation teams for 12 hour and seven-day assessments
- one Community Caregiver Serious Incident team

There are also Assessors (Investigators) in the Parent and Child Capacity Building teams

Peel CAS also has two domestic violence teams in the Parent and Child Capacity Building unit that are community based.

The Community Caregiver Serious Incident team includes five workers (assessors) plus two flex staff. They are responsible for the most serious types of investigations (e.g., those involving child fatalities, serious child abuse, sensitive and high-risk situations, cases that are receiving media attention, as well as investigations involving community caregivers. They also do other types of 12-hour investigations.

The after-hours service is staffed by employees who are not regular day staff and who often have other jobs. The four senior directors rotate on an after-hours schedule.

Peel CAS has made a conscious decision to de-emphasize the word investigation, using the term assessment in its place. The model emphasizes a "how can we be of assistance" attitude both in community work and when calls are received. They start from a point of "how can we help".

Staff at all levels always ask, "how can we keep this child at home"? The focus is on keeping children safe in their own environment whenever possible. When an out of home placement is deemed necessary, kinship service is always considered first to keep the child as connected to family and community as possible.

When a child comes into care, workers react quickly to identify options with the focus always being on returning the child home. Their rapid conferencing process for children and youth in care kicks in within the first 24 hours knowing that if a child is not returned home within six weeks, disconnect begins to happen, making it harder to return the child home. If the child cannot go home, there is a continuous focus on reviewing the child and family situation to limit the drift/disconnect from the family.

Peel CAS reports that they have achieved the Child Welfare Redesign goal of 85% of placements in family-based care. As of June 2021, 88% of placements for children in Peel CAS care were family based.

A phone survey for caregivers is conducted when service is completed, with a 30 – 40% response rate and 80 – 84% overall satisfaction rate. Of those not satisfied, the greatest concern was that phone calls were not promptly returned. The survey includes the collection of identify data.

Peel CAS conducts stakeholder surveys every two years among foster and kin families and volunteers.

Peel CAS, in partnership with key community partners has developed four ethno-centric programs to better meet the needs of children and families. MCCSS provides prototype funding for Akoma and Saath.

1. AKOMA Program:

The AKOMA pilot has grown into a full community wraparound service where Peel CAS, Roots Community Services, Free for All Foundation and Black Community Action Network (BCAN) work together to reduce racial inequalities and increase the well-being of Black Canadian families involved in the child welfare system in Peel.

2. MASSI Program:

This collaborative project between the Peel CAS, Punjabi Community Health Services and Indus Community Services builds awareness and provides support and mentorship to South Asian young mothers.

3. MA'AN Program:

The goal of the project is to create a wraparound service model to help provide culturally appropriate services for Arabic children, youth and families.

4. Saath Program:

Saath is a collaborative service model with Indus Community Services which provides services to South Asian families including a cultural facilitator.

With Pearson Airport located in Peel Region, there are a number of refugee challenges which impact Peel CAS which works closely with settlement partners. In June 2018, Peel CAS, in partnership with the Ontario Association of Children's Aid Societies, launched the Child Welfare Immigration Centre of Excellence (CWICE). CWICE provides training, knowledge, guidance and services to societies in Ontario and other agencies nationally on the immigration and citizenship issues facing children, youth and families involved in the child welfare system.

Data provided by the Peel CAS:

- The number of referrals to Peel CAS were relatively consistent from 2011/12 to 2019/20 ranging from 12,166 to 13,177.
- When compared to other societies, Peel CAS has the highest number of referrals provincially.
- However, the Peel CAS referral rate is not the highest in the province, when compared to other societies based on the rate per 1000 child population. Peel CAS referrals are 35.6/1000 compared to 53.0/1000 provincially.
- Investigations completed have remained relatively consistent from 2011/12 to 2019/20 ranging from a low of 7,516 to a high of 8,077.
- The number of children in care has been declining since 2011/12 when there were 484 in care versus 2019/20 with 304 children in care. As a percentage of 1000 child population, Peel CAS has 0.8 children in care. An OACAS quarterly report indicates that the provincial average of children in care is 3.3.
- Data indicates that 58-68% of children exit care within 12 months post-admission. By 24 months post- admission 73-83% of children that came into care had been discharged.
- Data for children admitted in 2010-11 to 2014-15 show that by 36 months postadmission, 84-92% had been discharged from the care, with 8-16% of children remaining in the care of Peel CAS.

Data:

Data is an integral component of the Society's service delivery model which, combined with solid research, underpins their service delivery approaches.

The objective of the Peel CAS is to have complete socio-demographic data on their service users – all children involved and at least one caregiver. As many referrals come from the community and not from families, Peel CAS does collect identity data at the front door, but they acknowledge that this information is usually from a referrer and not self-identified by the client or family, which is the preferred practice. As a result, identity data is reviewed and refreshed at various stages in the service delivery process.

Race data for children in care is reviewed weekly to inform decisions and approaches. They acknowledge that they are doing well but it a continuous journey.

The following data is derived from Peel CAS's Weekly Dashboard for the week of June 27, 2021.

Children In Care - Race

Race	Percentage (Count)
White	40% (62)
Black	21% (32)
South Asian	10% (16)
White and Black	9% (14)
First Nations Inuit & Metis	7% (11)
Unknown	5% (7)
*Southeast Asian	2% (3)
White and Southeast Asian	1% (2)
Arab	1% (2)
Multiple visible minorities	1% (2)
White and Latin American	1% (1)
West Indian	1% (1)
West Asian	1% (1)
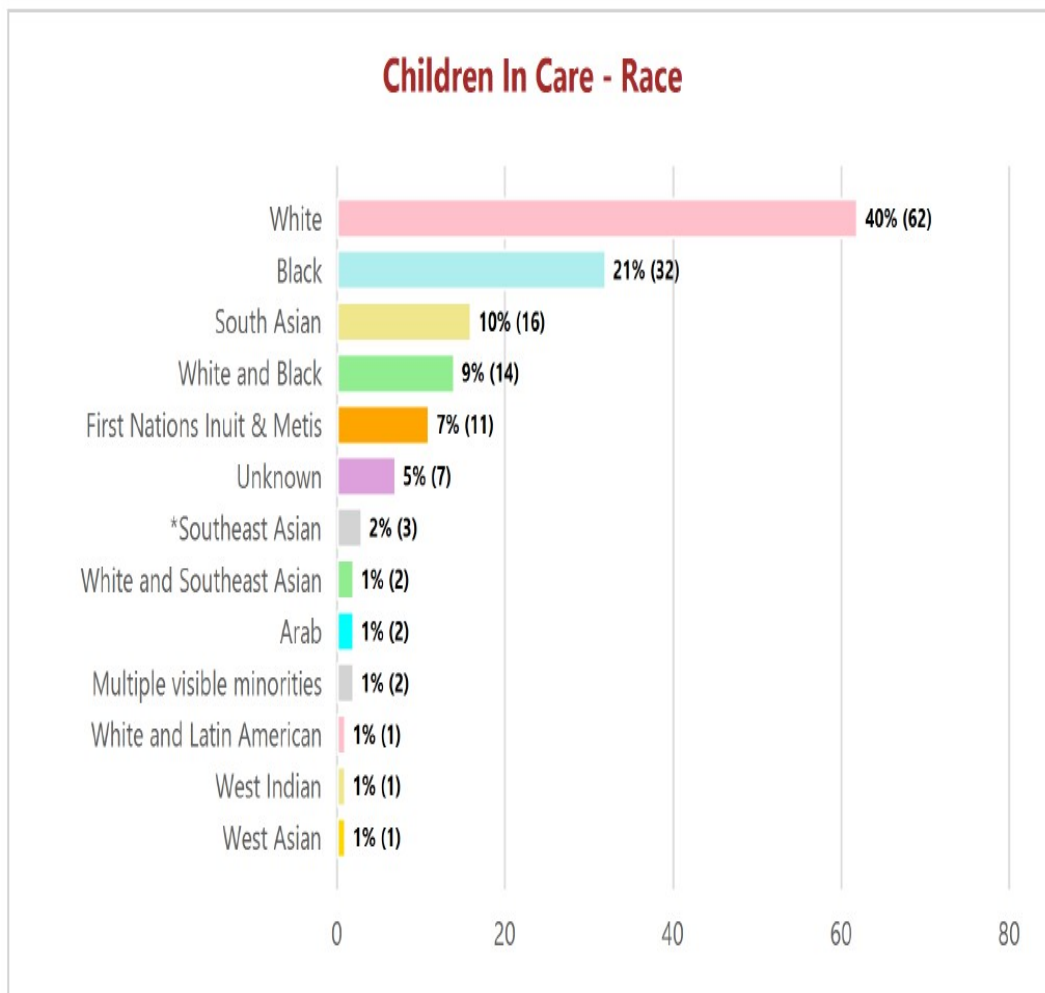
★ East Asian (includes: Chinese, Korean, Japanese, Taiwanese descent)
★ Southeast Asian (includes: Filipino, Vietnamese, Cambodian, Thai, Indonesian descent)

Findings

From interviews, review of documentation and data, and interviews with community partners, it appears that the Peel CAS is well respected in the community for their service delivery model that focuses on early intervention and prevention and their considerable success in kin placements.

Peel CAS has developed a service delivery model that is very specific to the region and its unique demographics. This has occurred over several years and in consultation with a range of community partners. Responsiveness to community/family/children's needs has resulted in changes to better serve the community such as the establishment of a sub-office in Caledon and the move of two domestic violence teams to community settings.

With respect to low numbers of children in care, their partnerships with AKOMA, Massi and Ma'an and Saath are believed to enhance the experience of children and families and contribute greatly to keeping children in their families. Peel CAS, upon placing a child in an out of home placement applies a Diversity, Equity and Inclusion (DEI) lens to each child and family with a focus on kin care and culturally appropriate responses.

The Society's internal approach appears to be comprehensive with a focus on continuous learning including how to be comfortable asking identity questions; identifying the key safety issues within the relevant cultural contexts; how to meet the child's needs in the context of family and kin wherever possible and with a focus on working with relevant community partners.

The reviewers suggest that the following "influences" may contribute to the Peel CAS referral rate:

- As Peel CAS shifted from a "narrow front door" and worked diligently to change negative perceptions in the community and with community partners, referrals increased. As they have continued to work to improve community perceptions and knowledge about their role, the referral rate is higher than it was previously.

- Historically the Region of Peel suffered a lack of social services compared to other regions. Over time, more services have become available and may influence the increased rate of referrals.

- The Peel CAS focus on early intervention and prevention and its practice model may influence the rate of referrals.

- It would appear that the service delivery model which concentrates staff in the referral/investigation stage may contribute to the low number of children in care.

Recommendations:

There are no recommendations based on the findings.

c. SERVICE DELIVERY COMPLIANCE WITH THE CHILD, YOUTH AND FAMILY SERVICES ACT

The following components of the review were conducted by Ministry of Children, Community and Social Services staff.

Methodology

The purpose of the case review was to ensure compliance with the Child, Youth and Family Services Act, its regulations, Ministry directives and standards through a sample of child welfare cases across the society.

The review team developed lines of inquiry aligned with the scope of the file review. Time frame for files chosen was between October 1, 2020 to March 31, 2021. A random sample of child welfare cases was selected in each of the following service areas: Investigations, Ongoing family services, and Child-in-care. Due to low number of audit files in some service areas, the number of files chosen to be reviewed (sample size) was 5% or 20 cases (whichever was higher).

Child Protection Information Network (CPIN) reports were provided by Peel CAS for the case reviews. In total, there were 267 cases reviewed, which included:

- Investigation Complete, Case Closed – 132 cases
- Investigation Complete, Case Transferred to Ongoing – 29 cases
- Ongoing Service-Open – 31 cases
- Ongoing Service- Closed – 33 cases
- Admissions/Re-Admissions into Care – 20 cases
- Discharged from care – 20 cases
- Cases as requested by family – 2 cases

It should be noted that findings reflect comparison of the Peel CAS data to the average of the comparator societies.

It is important to state that the CYFSA does not set out requirements about how societies staff their organizations to carry out the legislated functions nor does it set out how much societies pay their staff. Each Society is responsible for developing its own staffing structure and pay grids to provide mandated services.

Regarding the collection of standardized identity-based data, currently, CPIN requires that the following mandatory information be entered for all individual person records: 1) gender and 2) First Nations, Inuit, Metis (FNIM) Identity information. For the purposes of this review, in order to ascertain whether or not additional identity-based data was being collected by the Society, the reviewers chose the following baseline criteria: in order to be considered as "compliant" two other identity markers must be entered (other than gender and FNIM identity). The collection of standardized identity-based data is self-reported and consent based.

Peel CAS provided the names of five comparator societies to be used for comparative analysis and the data in this document reflects comparative averages. The compliance reviewers agreed to the use of data from the following comparator societies:

- Children's Aid Society of Ottawa
- Catholic Children's Aid Society of Toronto
- Children's Aid Society of Hamilton
- Durham Children's Aid Society
- York Region Children's Aid Society

It must be emphasized that the service delivery case review was limited to assessing cases from a compliance lens, not an anti-Black racism lens, owing to limitations in availability of race-based data entered on CPIN and compliance measurement tools. Accordingly, the results regarding service compliance should not be used to ascertain whether or not the organization's policies, practices or culture are impacting service delivery towards Black families.

The charts included in the various sections of this section of the review are designed to identify broader issues across the society so efforts can be focused on increasing service quality.

Investigations

Findings

From 2016-2017 to 2019-2020, there has been a 10.4% overall increase in the number of investigations completed.

Year	Number of Completed Investigations
2016-17	7316
2017-18	8206
2018-19	7714
2019-20	8077

- Peel CAS has approximately 12 full time equivalent staff (FTE) more in the Advice and Assessment Team compared to the other five societies which would be reflective of the number of referrals received by the Society and the investigations conducted.
- Peel CAS has higher number of investigations completed and cases transferred to ongoing than their comparator average. As a result, total expenditures are higher; however, cost per investigation completed is lower.
- Peel CAS has greater unit staffing FTE's and unit workloads for each case carrying worker (78 investigations served in 2020-21 Q3 per case carrying worker vs 56 for comparator average).
- Peel CAS team lead spans of control (# of FTEs per team) are less than the comparator average.

Investigations Served per Case Carrying Worker

Comparator Average: 76 (2016-17), 75 (2017-18), 78 (2018-19), 67 (2019-20), 56 (2020-21 Q3)

Peel: 100 (2016-17), 103 (2017-18), 100 (2018-19), 88 (2019-20), 78 (2020-21 Q3)

Legend: Comparator Average — Peel
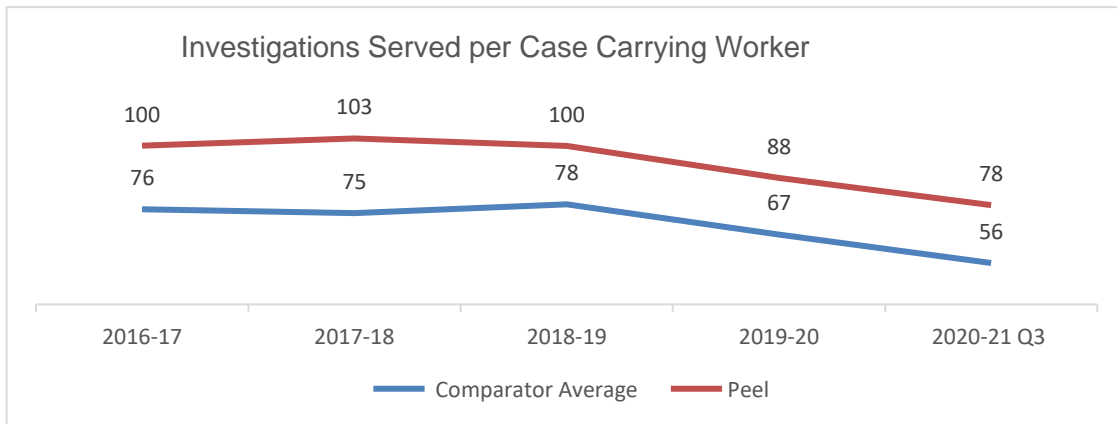
Case Reviews (Compliance with Investigations Complete- Case Closed)

Investigations Completed-Case Closed

Category	Percentage
ESC matches intake details	94%
Response time	90%
Safety assessment consultation	94%
Documentation supports reason for case closure	98%
Investigation disposition approved within 7 days	99%
Person record of primary has at least 2 other than FMNI identity and gender	64%
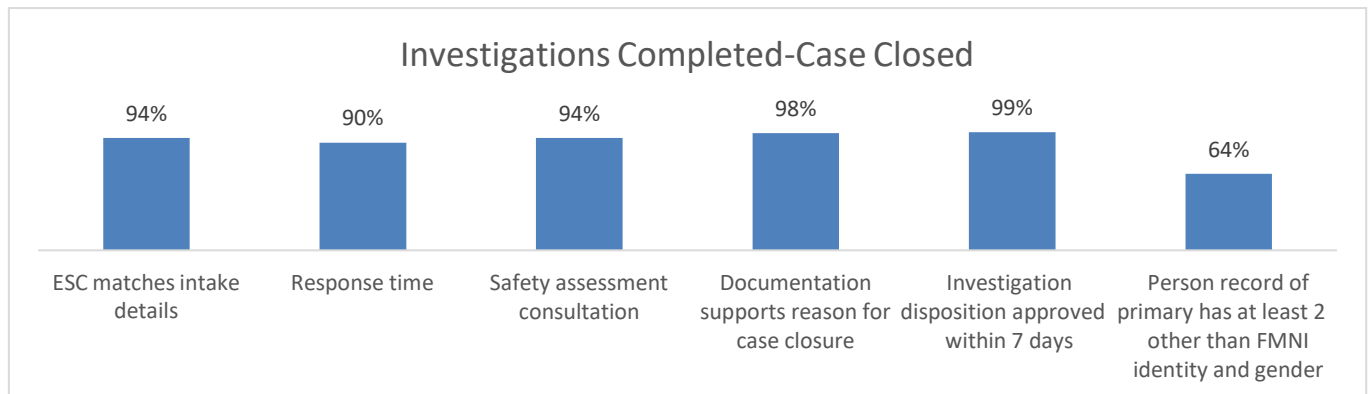
- To get a better sense of the investigations completed at Peel CAS, a total of 161 cases (closed and transferred) were included in the case review.
- A sample was selected from Investigations Completed-No Further Protection Concerns CPIN report.
- Case review results indicate high levels of compliance in the timeliness of investigations being completed and documented (90% response time and 99% Investigation disposition approved within 7 days). In addition, case work contains extensive documentation that outlines the reasons for initiating an investigation and the outcomes of investigations. Signs of Safety has been embedded throughout the investigative case work and is evident throughout the documentation and contact logs within investigation cases.
- Of the 132 cases reviewed, a clear linkage to the Eligibility Spectrum Code was not present in 6% of cases reviewed.
- Thorough identity-based information was available in 64% of cases reviewed.

Investigations Completed-Case Transferred

Category	Value
ESC matches intake details	93%
Response time	93%
Safety assessment consultation	83%
Documentation supports reason for case transfer to ongoing services	97%
Investigation disposition approved within 7 days	100%
Person record of primary has at least 2 other than FMNI identity and gender	79%
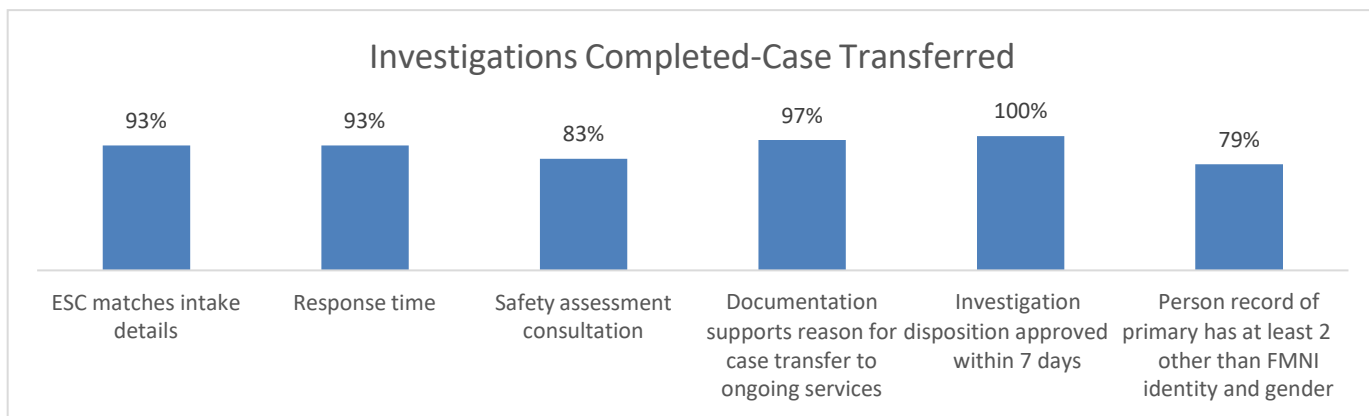
- The sample was selected from Investigations Completed-Transfer to Ongoing CPIN report.
- Case review results indicate high levels of compliance in the timeliness of investigations being initiated and completed (93% response time and 100% Investigation disposition approved within 7 days).
- Documentation was noted as very thorough and there was clear evidence that Signs of Safety had been embedded into the investigation case work.
- Case review results indicate that of 29 cases reviewed, 7% of the cases did not demonstrate a clear linkage to the Eligibility Spectrum Code.
- Of the cases reviewed, thorough identity-based information was documented in 79% of cases reviewed.
- The files reviewed involved both racialized and non-racialized families.

As stated previously, according to data provided by Peel CAS (*2020-21 Year in Review Report*), in 2020-21, Peel CAS received 10, 611 referrals. Of these, 51% of referrals came from law enforcement. The second referral source was educational personnel (note: due to the COVID-19 pandemic, referrals from schools were markedly decreased across the province). The case review results were consistent with this data as reviewers observed the majority of referrals stemmed from police and schools.

While this is not unique to Peel CAS, it must be acknowledged that both the Peel Regional Police and the Peel District School Board, Peel CAS's two largest referral sources, have recently come under scrutiny for systemic racism within their organizations. However, it was beyond the scope of the compliance review to verify anti racism protocols in place with the Peel police and the school boards.

While it is recognized there is an inherent level of subjectivity and judgment that must be applied when determining if a case should be opened for an investigation in a small percentage of cases, both racialized and non-racialized, the reviewers questioned the decision to open a child protection investigation (e.g., reviewers questioned if the case would have been more suitable as a community link). Recognizing the important opportunity that an investigation provides to connect with a family and provide supports, Peel CAS is encouraged to review their

investigation practices to ensure that wherever possible, a less intrusive option to a child protection investigation is chosen.

Recommendations

1. When societies receive a referral and determine that a child protection investigation is necessary, they are required to meet the requirements set out in Child Protection Standard #2 and utilize the practice notes to guide their work. It is recommended that the society review and assess its decision-making guide to ensure that the initial assessment of the referral is coded appropriately, thereby ensuring the most appropriate interventions and services are provided to children and families.
2. It is recommended that the society review a larger sample of investigations completed-case transferred, to confirm that the initial assessment of the referral continues to be relevant, thereby ensuring the most appropriate interventions and services are provided to children and families.
3. It is recommended that Peel CAS continue to work in partnership with local police services and school boards to ensure referrals to the society are appropriate and made within an anti racist lens.

Ongoing Services

Findings

Peel CAS reports that from 2016-2017 to 2019-2020, there has been a steady decline in the average number of ongoing cases at Peel CAS. This has meant an overall decrease of 27%.

Year	Average Number of Ongoing Protection Cases
2016-17	1881
2017-18	1658
2018-19	1549
2019-20	1374

- Peel CAS case load per FTE data suggests that it has approximately 23 FTEs more than the comparator societies in the Parent and Child Capacity Building Team.

- Average number of ongoing cases and open protection cases served are higher than comparator average. Total expenditures are much higher as a result of the larger numberof cases, however, cost per average of ongoing cases is lower.
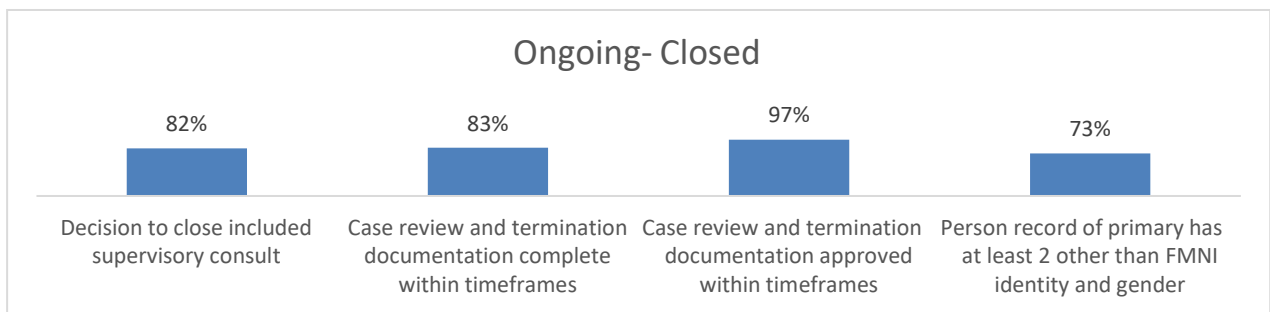- Peel CAS has a higher number of open protection cases served per service unit and per case carrying worker than the comparator average.
- However, the number of case carrying workers and other staff to supervisor numbers are lower at Peel CAS.
- Peel CAS has higher number of cases per FTE.

To obtain a better understanding of the ongoing cases at Peel CAS, a total of 64 ongoing cases (e.g. Ongoing cases that were open and cases that were moved to Ongoing services but that were closed at the time of the review) were included as part of this case review.

Ongoing Cases-Brought Forward

Category	Value
Transfer visit conducted with family	83%
Transfer visit occurred within required timeframe	89%
Initial S&N assessment within 30 days of case start date	43%
30 day service plan agreement	53%
30 day service plan approved within required timeframe	96%
Monthly home visits (e.g., every 30 days)	93%
6 month review and agreement complete	75%
6 month review approved within required timeframe	100%
Person record of primary has at least 2 other than FMNI identity and gender	81%

- The sample was selected from Ongoing Brought Forward CPIN report.
- Case review results indicate high compliance as it relates to contact with families (i.e. in 93% of cases, monthly visits occurred in a timely manner). Where timelines were not met, most case included approved departures from the supervisor and demonstrated evidence of significant attempts to meet with the family.
- 17% of cases transferred to ongoing services did not have clear documentation that either a transfer visit occurred and/or that both the transferring and receiving child protection workers were present for the transfer visit.
- Compliance with the strengths and needs assessment, and the initial 30-day service plan agreement was low. This means that families may not have experienced clear service goals identified within 30 days of having their case transferred to ongoing services. Without clear service goals, this can lead to a lack of clarity regarding specific concerns the society has with a family as well as the associated expectations of the society.
- Only four cases out of 31 met the criteria for a six-month review and agreement (i.e. The remaining 27 cases were closed prior to the 6-month review date). Accordingly, the compliance results should be interpreted with caution given the low sample size.

- Of the 31 ongoing-open files reviewed, there was only one instance where a child was removed from the home. This finding is consistent with the society's articulated practice of prioritizing keeping children in their homes.
- Reviewers observed that the majority of ongoing cases reviewed were related to concerns regarding partner/domestic violence. This is consistent with data provided by Peel CAS that shows that the largest percentage of cases transferred to Ongoing from April 1, 2020 to March 31, 2021 were coded under Eligibility Spectrum Section 3 (Emotional Harm/Child exposed to partner violence).
- Of the cases reviewed, 81% of cases included through identity-based information.

Ongoing- Closed

Decision to close included supervisory consult	Case review and termination documentation complete within timeframes	Case review and termination documentation approved within timeframes	Person record of primary has at least 2 other than FMNI identity and gender
82%	83%	97%	73%

- Sample selected from Ongoing Closed CPIN report.
- Case review results found that the reasons for closure appeared to be appropriate (e.g. making the decision to close a case when child protection concerns were mitigated and/or when service goals were met). Reviewers noticed that efforts were made to refer families to SAATH and AKOMA programs, where culturally appropriate.
- Case review results indicate that in 18% of cases reviewed, clear documentation outlining a supervisory consult describing the rationale for case closure was missing or incomplete.
- In addition, timeframes for entering the case review and termination documentation were not met for 17% of cases reviewed. However, documentation was approved by the supervisor and closed in CPIN within timeframes for almost all files.
- 73% of cases reviewed included thorough identity-based data.

Recommendations

1. It is recommended that supervisors ensure that all transfer documentation complies with Child Protection Standard #6 prior to approving a case for file transfer.
2. It is recommended that supervisors ensure that all case closure documentation complies with Child Protection Standard #8 prior to approving a case for closure.
3. It is also recommended that the society aim to enter the case review and termination documentation within legislated timelines and where not possible, provide a documented rationale for departing from this requirement.
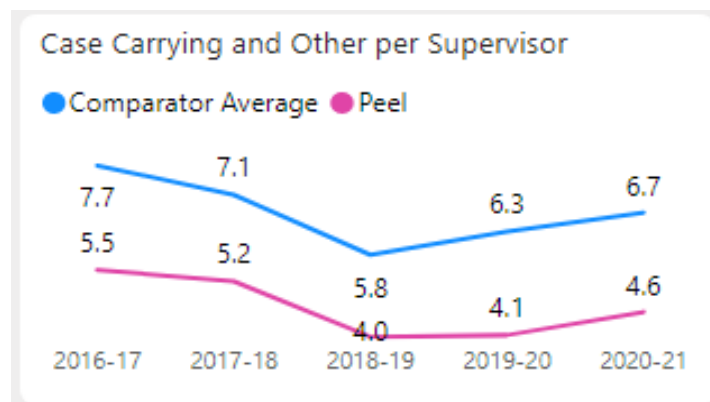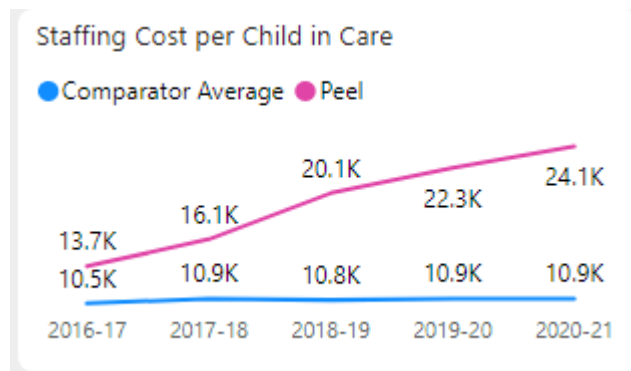
Children in Care

Findings

From 2016-2017 to 2019-2020, there has been a 20% overall decrease in the average number of children in care at Peel CAS.
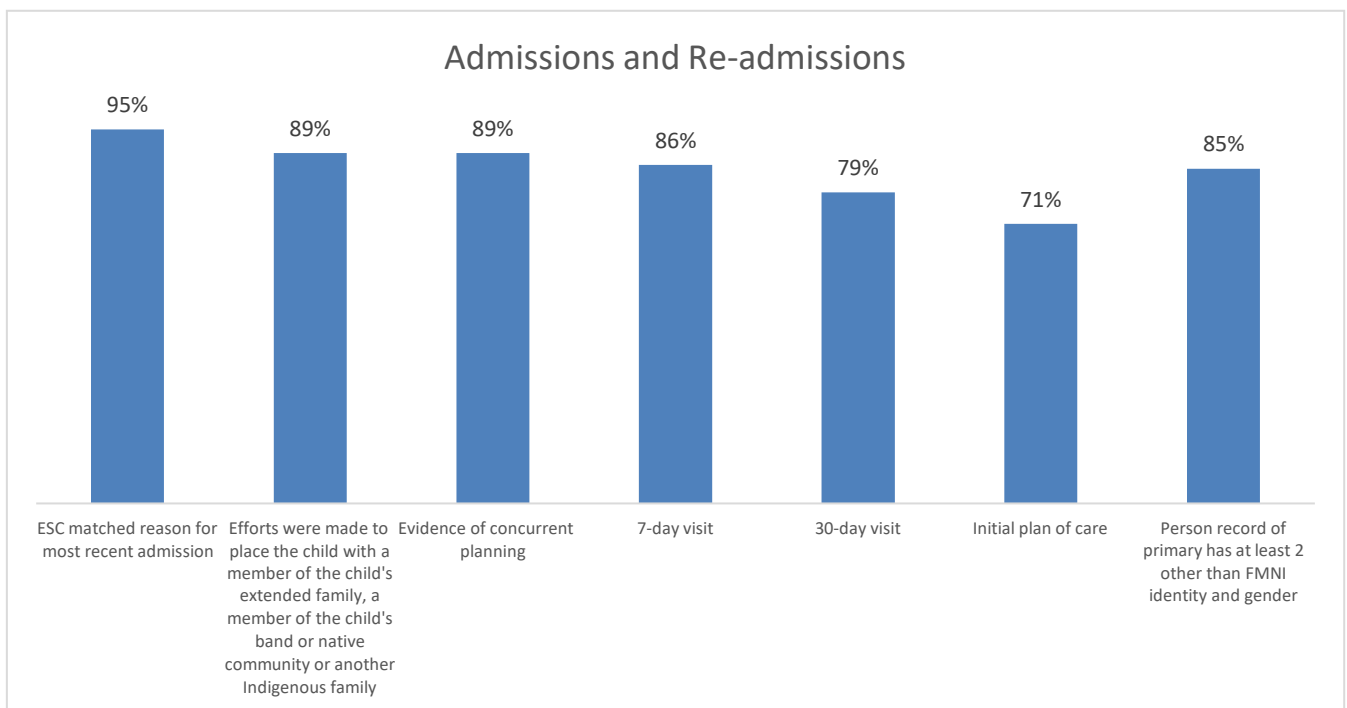
Year	Average number of children in care
2016-17	382
2017-18	370
2018-19	315
2019-20	305

- Peel has a lower number of children in care, but total costs and cost per child are significantly higher than the comparator average.
- While the total FTEs are higher, Peel CAS's supervisor span of control (# of FTEs per supervisor) is lower than their comparator CAS's.
- From 2016 to 2021, costs in the following areas have been significantly lower than the comparator societies:
    - the average number of children in care
    - case carrying worker per supervisor
    - children in care served
- Despite Peel CAS having a lower average number of children in care, notably their cost per child in care is significantly higher than the comparator average by roughly $13.2K in 2020-2021.
- Under this category, FTEs are substantially higher than the comparator average by 28.8.
- The number of other staff Per Team Lead and Children in Care Served per Case Carrying Worker are slightly higher than the comparator average from 2016 to 2021.
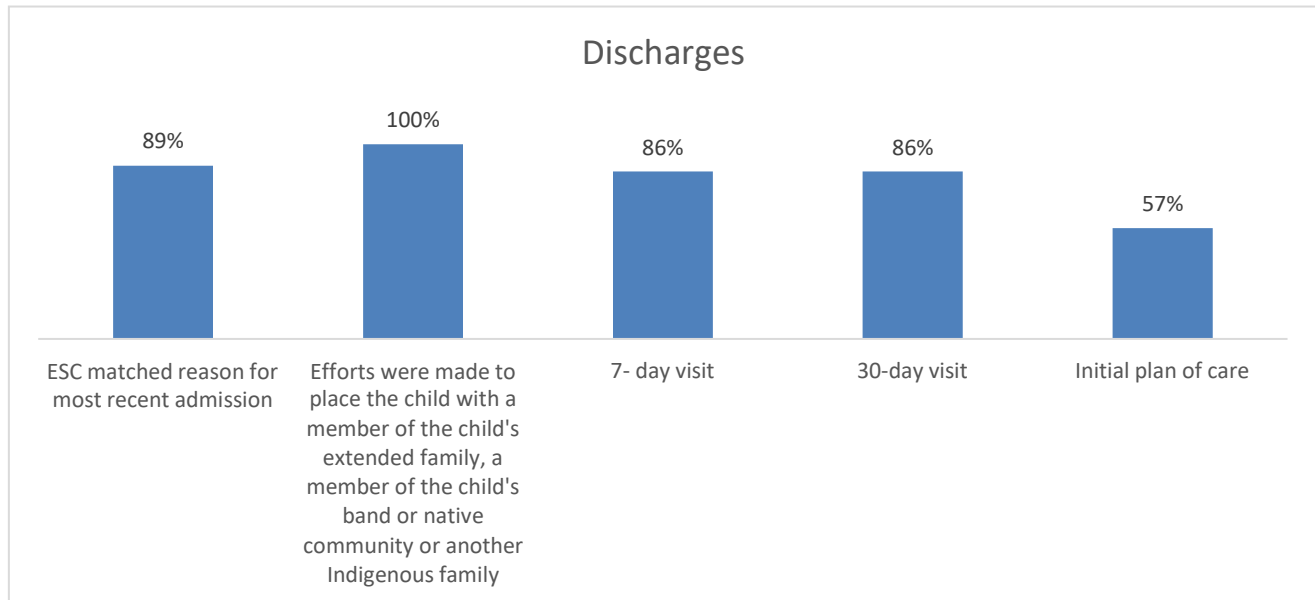
Staffing Cost per Child in Care

To get a better understanding of the children being admitted and discharged into care at the Society, a total of 40 cases were included as part of this case review.

- The sample was selected from Children in Care Admitted Readmitted CPIN report.
- Overall, compliance was noted to be high in most areas measured.
- The reviewers observed that the number of contacts with children and youth was generally high and the Peel CAS commitment to kin exploration was evident throughout the case work.
- In 89% of cases, it was observed that efforts were made to place the child with a member of the child's extended family prior to bringing the child into care. Instances where this did not happen were usually linked to Voluntary Youth Services Agreement (VYSA) cases.
- Where kinship placement was not possible, contact logs indicated that despite efforts to place the child in a culturally matched foster home, this was often not feasible (i.e.

Contact notes indicated the child was not placed in a culturally matched home).

- Peel CAS's compliance with the 30-day visit and initial plan of care was comparatively lower than other measures which suggests that children and youth entering into care may not have the opportunity to meet with their children services worker within a timely manner to address any concerns they may have. In addition, it suggests that a clear plan of care for the child or youth may not be developed within 30 days and may leave children, youth, foster providers unsure of service goals.
- Thorough identity-based data was available in 85% of cases reviewed.

Discharges

Category	Value
ESC matched reason for most recent admission	89%
Efforts were made to place the child with a member of the child's extended family, a member of the child's band or native community or another Indigenous family	100%
7- day visit	86%
30-day visit	86%
Initial plan of care	57%

- Sample selected from Children in Care Discharged CPIN report.
- Compliance was noted to be high in most areas measured. The reviewers observed that the number of contacts with children and youth was generally high and the Peel CAS commitment to kin exploration was evident throughout the case work.
- 100% of cases had clear documentation demonstrating efforts to place the child with a member of the child's extended family, band or native community or another Indigenous family.
- Of the 20 cases reviewed, 70% of files (14 out of 20) were discharged to a kinship placement or returned to their caregiver. This is consistent with the Society's vision of family-based permanency for children and youth.
- Peel CAS compliance with the Initial Plan of Care was noted to be low and suggests thata clear plan of care for the child or youth may not have been developed within 30 days which could potentially leave children, youth, foster providers unsure of service goals.
- Peel CAS reports that their Children in Care costs are a function of the complex needs of the children in care and this explains why the total expenditures of have grown exponentially from 2016-2021 by $2M whereas the comparator average has noticeably decreased by $1.4 M within the same time period.
- The review team did not find any data to support the Peel claim that Children in Care costs are high due to complexity of needs of the children.
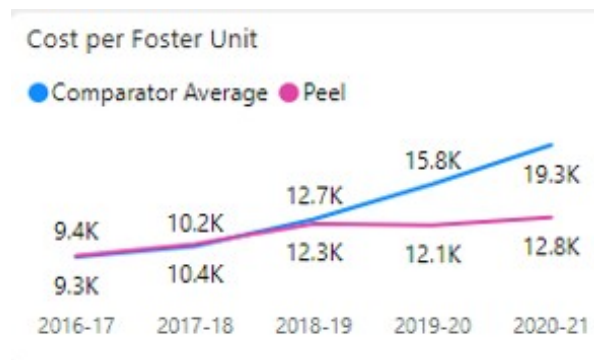
Recommendations

1. It is recommended that Peel CAS continue its efforts to recruit culturally diverse foster families and report on efforts to place children in culturally matched home.
2. *Peel CAS is encouraged to develop a quality assurance plan aimed at increasing compliance with the timeliness of the initial plan of care.*
3. *It would be beneficial for the Society to explore with their comparator societies how their model compares and examine possible strategies for lowering their Children in Care expenditures.*

Foster Care

Findings

There are three types of foster care – regular, specialized and treatment**.**

- Regular foster care expenditures are lower, number of homes available and total FTE staff are lower than comparator average.
- Foster care specialized expenditures and days of care are more than four times greater than comparator average.
- Foster care treatment expenditures and days of care are greater than comparator average.
- In both these situations the rate is determined by the needs of the child.

Cost per Foster Unit

● Comparator Average ● Peel

	2016-17	2017-18	2018-19	2019-20	2020-21
Comparator Average	9.4K	10.2K	12.7K	15.8K	19.3K
Peel	9.3K	10.4K	12.3K	12.1K	12.8K

Recommendations

1. That Peel CAS undertake an analysis of their model of care vis a vis their comparators and examine why their foster treatment costs and days of care are greater.

Identity based data collection

In February 2018, Policy Directive CW005-17 came into effect, requiring all Children's Aid Societies (societies) on the Child Protection Information Network (CPIN) to collect voluntary and self-reported identity-based data from the children and youth they service.

As of July 1, 2021, under the *Anti-Racism Act, 2017* (ARA) and O. Reg. 267/18 (the Regulation), regulated Public Sector Organizations (PSOs), including specified societies listed in the Regulation, are required to collect race-based data in compliance with the Anti-Racism Data Standards (ARDS). Societies specified in the Regulation under the ARA are those non-Indigenous societies on CPIN.

Collecting standardized identity-based data, including race-based data that is in alignment with the ARDS, is one way in which societies and the Ministry can better understand who is receiving child protection services and the outcomes for specific groups of children and youth. This data can also improve transparency and accountability of ministry-funded services.

Recommendation

1. The Ministry recognizes the challenges in collecting self-reported and consent-based identity-based data and recognizes the considerable efforts made by Peel CAS to collect this information thus far. The Society is encouraged to continue to develop best practices to support the collection of identity-based information consistently, across the continuum of service delivery, in order to continue to inform their policy and practices around the delivery of culturally appropriate services.

Summary

In summary the above findings provide a snapshot of compliance. Caution should be used when interpreting and comparing compliance results as compliance results are based on a small sample size.

Overall, case review results demonstrated high compliance across all service areas reviewed. Efforts made by staff to connect with families were visible throughout the case files. Decisions were consistently supported with documentation/rationale and made in consultation with supervisors.

d. COMMUNITY PARTNERS

Methodology

Peel CAS and the MCCSS Central Region Program Supervisor selected eight community partners to be interviewed. The eight partners are as follows:

Everymind: provides mental health services to children, youth, young adults and families in Peel Region

Associated Youth Services Peel (AYSP): offers youth justice and children's mental health services in the Region of Peel

Black Community Action Network (BCAN): a network of community leaders, professionals, residents and allies united in a mission to promote equity focused systems change and to deal with issues related to the African/Caribbean/Black population in Peel Region

Indus Community Services: a community-based service focused on building a resilient and healthy South Asian community

Brampton Caledon Community Living: provides services to children and adults with developmental disabilities

Peel Police: three units liaise with the Peel CAS – Special Victims, International Child Exploitation, Intimate Partner Violence

Peel Region School Board: 257 schools across the Region

Catholic Family Services (CFS): heads the 21-agency collaborative that co-exists in a CFS owned building which includes an on-site Peel CAS domestic violence team and Peel Police team

Findings

The focus of the interviews was to understand each partner's relationship with Peel CAS, to examine what works well and where improvements might be needed.

All the partners spoke very highly of the Peel CAS and their contribution to Peel Region. It was generally agreed that given the demographic makeup of Peel Region, Peel CAS has realized over the past number of years the need to be opened to doing its work differently.

Several important themes emerged from these interviews:

1. As a large Peel service provider, Peel CAS takes their responsibility to the community seriously and the Society is seen as a leader. They are known to be innovative and responsive. There was praise for the professional way in which the Society contributes to the community network of agencies and services. For example, Peel CAS recently set up a site office in Bolton to better respond to that community's needs.

2. Peel CAS is a strong collaborator in the Black, South Asian, East Asian and Arab communities and in the areas of youth justice, mental health and developmental disabilities, education and policing. The Peel CAS leadership is perceived by many as being prepared to give up power to make community collaborations possible. In the community there is a strong belief that change is not achieved through shame and blame but through open, honest dialogue. Peel CAS leadership is seen to be aligned with this perspective. The community partners are very respectful of the Peel CAS work on diversity, equity and inclusion. They understand this is not about just language, as language is only one aspect of culture.

3. Community Partners do not always like how Peel CAS applies its mandate and speak about natural and expected tensions, but they respect their child welfare role. All the community partners agree that Peel CAS staff at all levels work collaboratively to address issues as they arise, supporting a wraparound approach to serving children and families. This reflects the push/pull – "how can they leave this child in their home" versus their legal mandate.

4. Peel CAS does extensive training of staff in school boards, with the Peel Police and community agencies related to their mandate and the Child, Youth and Family Services Act (CYFSA).

5. The 2016 strike at Peel CAS and its aftermath continues to be felt in the community and has had lingering effects.

Recommendations

Without question, these strong collaborative working relationships effectively assist the Peel CAS to protect children and keeping them in their families. Peel CAS should continue their efforts to support the delivery of child-centred, wrap-around services for children and families in collaboration with their community partners.

e. HUMAN RESOURCES (PEOPLE AND CULTURE DEPARTMENT)

Methodology

Discussions were held with the Director People and Culture (HR) and the following policies reviewed:

- Whistleblower (draft)
- Job Posting
- Employment of Relatives
- Prevention of Workplace Violence and Harassment
- Prevention and Resolution of Harassment and Discrimination in the Workplace
- Third Party Harassment
- Staff Discipline
- Sick Leave Program
- Education, Practicums and Tuition Reimbursement

The Attendance Management Policy was not reviewed, as it is no longer in use at Peel CAS.

The Performance Appraisal process was also reviewed.

1. Human Resources Policy Review

Whistleblower Policy

Findings

The Whistleblower policy is still in draft form. It is not comprehensive enough to cover important factors such as how investigations will be conducted and by whom. The confidentiality clause of too vague. It is an important policy that needs to be confirmed as a priority.

Recommendations

This policy should be revised to include:

1. A confidential third party should be identified as the sole recipient of complaints to ensure employee confidentiality. The policy should clarify which complaints are shared with the Board of Directors.

2. A simplified process that is efficient to use should be developed.
3. There should be better definitions of key terms such as whistleblower, wrongdoing and vexatious.
4. The policy should clearly state when an investigation will not be conducted (e.g. frivolous or vexatious).

Job Findings

Postings

Many aspects of the policy are confusing.

Recommendations

1. The Job Posting policy should be re-written to include more specific actions regarding job postings rather than just focus on the recruitment process. A change to the policy name will better reflect the focus of the policy.

Employment of Relatives

Findings

This policy does not contain a human rights component, namely "in accordance with human rights legislation…will not discriminate in its hiring on the basis that a person is a relative to a current employee."

The policy is confusing.

Recommendations

1. The policy needs to be strengthened including adding the definition of an "indirect relationship".
2. The conflict-of-interest paragraph needs to be revised.

Prevention of Workplace Violence and Harassment

Findings

There are several changes that are needed. There are several gaps in the policy including, but not limited to, the need to have an appeals process.

Recommendations

1. There should be clear definitions of harassment and discrimination.
2. The revised policy should state that the employer has a duty to investigate all complaints not just when HR believes an investigation is required.
3. The complaints process should be clearly outlined.
4. There should be an appeals process built into the policy.
5. All complaints should be in writing.
6. All parties should receive a copy of the full report, not just an overview/summary.

7. All complaint files should be closed upon completion of the investigation.

Prevention and Resolution of Harassment and Discrimination in the Workplace

Findings

There are many gaps in this policy that need to be addressed.

Recommendations

1. It is recommended that this policy be aligned with the Ontario Human Rights Code.

2. All complaints should be in writing.

3. It should be specified that the employer has a duty to investigate all complaints.

Third Party Harassment Policy

Findings

The policy needs to be amended. Acronyms are confusing and may not be understood. There are two reporting avenues which may also be confusing. There are no definitions of misconduct or serious misconduct. The policy states that People and Culture "will then determine the appropriate method of investigation" which may invite concerns about bias.

Recommendations

1. The policy should clarify that it relates only to external parties, not staff.

2. All reports should be investigated in the same way to eliminate any notion of bias in deciding which complaint to investigate.

3. There should be only one route to report third party harassment (currently there are two routes).

Staff Discipline Policy

Findings

This policy lacks clearly articulated steps to handle discipline issues.

Recommendations

1. The policy should be amended to more clearly articulate the rules and expectations.

Sick Leave Program

Findings

The policy does not clarify the roles and responsibilities of the employee, supervisor, manager or People and Culture. Some aspects of the policy are confusing, and the written policy is not as clearly articulated, organized or delineated as it should be.

Recommendations

1. This policy should be more detailed and should ensure that it conforms to the Employment Standards Act.

Educational Leaves, Practicums and Tuition Reimbursement

Findings

This policy needs to clearly outline definitions and procedures. It does not state that not all leaves can be approved depending on operational concerns.

This policy contradicts the values statement (fostering and stimulating professional growth by offering encouragement…") in that it states that in order to pursue full time education, the employee would need to leave or resign which does not encourage professional development. The policy was last reviewed in 2000.

Recommendations

1. Research should be conducted into best practices before this policy is reviewed and updated.

Summary

Per the above, a number of policies were found to be out date, not within best practice and needing an improved focus on inclusion.

HR does have a process to review policies; however, this only occurs when issues arise or on a case-by-case basis. HR drafts policies, which are then reviewed by the senior management team. Once input has been received from the senior management team, the policies are shared with the rest of the management group for their feedback and then shared at the labour/management meetings with the union. After the policies have been finalized, they are posted on the intranet site. Staff are required to read and confirm they have read the policies.

The Attendance Management policy was not received well and has been pulled back for further review.

2. Peel CAS Performance Appraisal System:

Findings

Peel CAS uses Trakstar, an automated performance appraisal program. This system allows all staff, including the senior team to enter their work and developmental objectives into the system each year. The process works as follows:

- The Performance Appraisal program runs from April 1 to March 31 each year (consistentwith the fiscal year).
- Each year on April 1, work and developmental objectives are set for the employee by their manager/supervisor, with input from the employee.
- Employees are rated on competencies. There are different competencies set in the system for front line staff and for management staff.
- There is a "360 process" component for management staff. Staff and their direct report select three internal staff to complete an automated Trakstar questionnaire regarding the employee.
- Each year, on March 31st, staff are rated on the completion of their work and developmental objectives, as well as their competencies.
- Staff contribute to the performance appraisal by completing the employee section which allows them to comment on their own accomplishments over the year.
- Performance appraisals for the senior management team, aside from the CEO, did not occur for several years. As a result, although Trakstar showed there was 100% completion, this was not accurate. However, in 2021, performance appraisals re-commenced, and the CEO conducted performance appraisals with the senior managers.

Recommendations

The following are general Human Resource recommendations:

1. Each policy should have a review date and be reviewed annually, or at least once every two years.
2. Each policy should have a clear purpose and definitions.
3. Roles and responsibilities should be added to each policy to outline the specific tasks and duties of roles.
4. Consider a third-party service to confidentially receive and review whistleblower complaints.
5. Consider eliminating subjective phrases such as "People and Culture will decide or consider.
6. Have all managers more involved in explaining policies to staff to ensure they are understood, enforcing policies to ensure they are observed, and working together with HR so is the department is not viewed as always being punitive or the enforcer.
7. The CEO should conduct senior management staff performance appraisals each year and they should be entered into Trakstar. In the absence of performance appraisals, it is

difficult to understand how compensation increases can objectively be determined. This is also one way in which succession management can be planned. Reviews will increase senior management engagement.

f. FINANCE

Methodology

The following components of the review were conducted by Ministry of Children, Community and Social Services staff.

Peel CAS responded to all the queries and provided the requested supporting documents as and when required. During the process three staff were also interviewed by the reviewers. Relevant CPIN data was used.

As stated earlier, Peel CAS provided the names of the following five comparator societies to be used in comparative analysis. The reviewers agreed that these five societies were appropriate comparators. The average of the comparator societies data was used:

- Children's Aid Society of Ottawa
- Catholic Children's Aid Society of Toronto
- Children's Aid Society of Hamilton
- Durham Children's Aid Society
- York Region Children's Aid Society

This approach allowed for comparative data to be included in the report which may be of assistance to the Peel CAS and the Ministry of Children, Community and Social Services. Comparisons were used to determine the lines of inquiry – to identify those areas that may appear to be different, so that the review team could focus the financial review on understanding why there are differences and to identify where there could be opportunities for savings and efficiencies.

The Director of Finance and IT and his staff was collaborative during the process which greatly facilitated the review.

Salaries & Benefits

Findings
- Peel's CEO/ED is the highest paid of the five comparator societies.
- The CEOs salary has increased by 29.7% (4.95 % per year) since 2015 which is the 2nd highest % change against comparators. The CEOs salary is 29% (or $ 60.0k) higher that the

averagecomparator salary.

- Several executive staff received salary increases of greater than 2% year over year.
- Some Director positions were reclassified which resulted in increases greater than 4%. These classifications were approved by the CEO.
- The average 2020 Director salary at Peel of $164,857 which is within range of $143,931 to $201,219 of comparative societies.
- The Finance and Audit Committee of the Board of Directors, in a discussion with the reviewers, explained that they were not aware of Ontario legislation *Protecting a Sustainable Public Sector for Future Generations Act* 2019 which limits compensation increases for staff. Children's Aid Societies are specifically mentioned as organizations affected by this legislation.
- Peel provided each employee with $200.00 as part of their COVID 19 response. These funds were for the employees to purchase IT related assets for home use. This bonus was included in the employee's compensation.
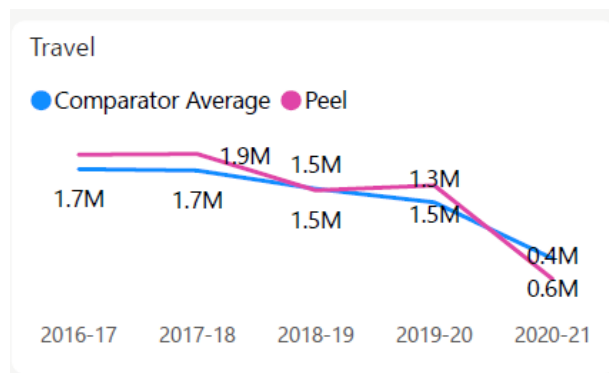
Recommendations

1. That the Board of Directors should assess comparator societies' executive compensation increases when determining management compensation increases.
2. As there have been job classification changes and resulting salary increases, it is recommended that all senior management job classification changes be approved by the Board of Directors based on a supporting business case/analysis.
3. That the Board review its oversight of the Society's policies related to the requirements of the *Broader Public Sector Accountability Act* 2010 and determine how to ensure if the Society's policies and the requirements of the Act are adhered to.
4. That the Board become familiar with the requirements under *Protecting a Sustainable Public Sector for Future Generations Act, 2019* and assess against its compensation increases to employees since the legislation came into effect in 2019. The Board should also be aware of the consequences associated with non-compliance with the legislation.
5. Peel CAS should ensure that the purchase and use of IT equipment is tracked accurately and is also accounted for when staff remove assets for home use. This will allow Peel to redistribute assets as needed.
6. As outlined in the Children in Care findings and charts, it appears that the team leads "span of control" are less than comparator societies. Peel CAS should review their organizational structure to have team leads and managers span of control that are in line with their comparator societies.

Travel

Findings

- The Society has a travel, meals and hospitality policy in place.

- Sample claims of Executive/Senior Management travel indicated a couple of instances wherethe total cost for meals exceeded the maximum allowance of $45 per day.
- The Society's policy on travel incidentals, use of personal credit cards is vague except for meal costs.
- The allocation of expenses between office administration and service delivery incurred using the corporate credit cards is not clear to the review team.
- Sample CEO expense claims confirmed that they were Board approved.
- There was one instance where the CEO's air flight was charged to the Director of People and Culture's Visa card for a trip to San Francisco on August 9, 2019 in the amount of $1043.48 which means that the Board would not have signed off on this expense. Given that Peel CAS's policy is that the cost for any out of country flights must be paid by the employee, the CEO re-paid this cost in 2021.

Recommendations

1. The Society should put appropriate controls in place to ensure the policy is adhered too. All expenditure policies must adhere to Ministry directives and guidelines. The Society needs to ensure proper approvals are documented.
2. The Society should develop a policy related to the use of personal credit cards for Society expenditures given that corporate credit cards are available and used. The policy should limit the use of personal credit cards and include prior approval process if personal credit card usage is requested.
3. Policy revision required for Travel Incidentals to be more specific related to the details of spending.
4. Review the cost allocation for expenses incurred utilizing corporate credit cards. Update policies and procedures as required to clearly articulate costing assumptions and allocations.
5. The CEO should not use other employees' Society credit cards. This results in the Board not signing off on CEO expenses per Delegation of Financial Authority (DOFA) and the CEO would be approving their own expenses.

Training and Recruitment

Findings

- Training and recruitment costs are double the comparators' average.
- The costs are always recorded but in a number of cases, there was no record of what the actual costs related to.

Recommendations

1. The Society should engage with comparator societies to consider their policies for training and recruitment <u>costs</u> and incorporate their best practices and look for opportunities to reduce costs.
2. Recording of training costs should adhere to appropriate account codes to ensure transparency, validation, and reconciliation.

Client Personal Needs

Findings

- Much of Peel CAS client spending between 2018 - 2021 is attributed to drug testing, counselling, interpretation services, education, travel insurance, citizenship applications, tutoring, legal services, gift cards and community services. These personal needs range from as little as $2.00 to a high of $70,000 for a client.
- Peel finance staff provided the following explanation to the review team: Despite the Society serving fewer clients than their comparator average, it was noted that in 2020-21 the following factors contribute to higher costs than comparator societies - having children that are of higher needs and many one-to-one arrangements are required due to the spectrum they are on, in addition to the added costs of Covid 19.
- The Society confirms that all client personal needs are approved by the Team Leader or Director depending on the request. Each case is reviewed on an individual basis and decisions are made accordingly.

Client Personal Needs
- Comparator Average ● Peel

2016-17: 1.18M / 1.02M
2017-18: 1.22M / 1.08M
2018-19: 1.12M / 0.81M
2019-20: 1.25M / 1.07M
2020-21: 0.96M / 1.58M

- The additional spending for Education was primarily for the purchase of devices

(laptops/computers) to support the remote learning needs of clients during the pandemic. Peel utilized in year savings to make the device purchases.

- In addition, the Society showed increased expenditures in Miscellaneous Client Personal Needs due to the COVID-19 support that was provided to the youth.
- Food Voucher expenses increased in 2020-21 due to providing additional support to families during COVID-19 pandemic. The support resulted in keeping kids out of care and the society noted this policy was implemented across the sector with each agency providing various amounts to the families.
- Client Transportation costs noted the Society's purchase of 4 new vehicles ($133,635) in 2020-21. While the society followed the policy for the vehicle purchase, formal documentation was lacking related to the needs assessment and approval to proceed with the purchase. A memo to CEO for direction to proceed with purchase was not signed and did not capture details for the needs and costs associated with the purchase.
- Recognizing the Society's actions to secure the required resources to support clients learning needs and support staff travel during the pandemic, the review completed was unable to determine if a fulsome cost-benefit analysis was completed and documented to determine the most cost-effective purchase options for the devices and the four new vehicles.

Recommendations

1. With regards to Personal Needs Client, it is recommended that the process and spending authority be more clearly laid out. It is unclear when a Team Leader would sign off versus a Director.

That the Society update its policies and procedures to include strengthening of the business processes for the documentation of approvals (e.g. cost benefit analysis report, DOFA sign off approvals) that supports decision making (e.g. the purchase of vehicles).

Building Occupancy

Findings

- Current Finance and Audit committee confirmed that they were not Society Board members when the capital project was approved so have no background related to this project.
- The Board relied on a consultant's analysis (purchase existing building, purchase land and build) and recommendations to make the decision to build.
- The current building design allows for expansion.
- The decision to build included a commitment from the Foundation expected to raise

5M towards the cost of the building. The Foundations fundraising activities are continuing.

- The Foundation is housed in the new building.
- 7.68 acres of land was purchased, of which the building uses 4 acres, leaving excess land of 3 acres.
- Space in building design noted for use by Community Partners and sports events. At the time of the review Peel has not leased excess space to any community partners. COVID restrictions have significantly limited Peels ability to rent the excess space.

Recommendations

1. Peel CAS should:
   a. explore revenue generation/debt retirement by utilizing excess land
   b. Ensure community partner space is fully leased at fair market rates
   c. Ensure that the Foundation pay fair market rate for space used
   d. Explore revenue generation using sports court

Professional Services – Non-Client

Findings

- Peel CAS had a surge in their Professional services Non client expenditures in 2017/18 with expenditures falling significantly in 2018/19. In 2020/21 the Professional Non-Client services were up over 100% from the previous year for Peel CAS and are slightly lower than comparator average.
- Expenditures in 2020-21 were $341,376.07. These expenditures were primarily legal fees and Ceridian/Dayforce invoices, however the highest was for Digital Documents Conversion, the highest being $182,311.50 which is likely a one-time, outlier expense.
- Across both years, Ceridian/Dayforce expenses and legal fees are consistent expenditures.
- Most services in both years are consistent due to the nature of the purchase, however the Digital Documents Conversion expenditure is an outlier.
- Agency reports indicate the society's move towards digitizing hard copies.

Professional Services - Non Client

● Comparator Average ● Peel

Peel: 0.9M (2016-17), 1.3M (2017-18), 0.6M (2018-19), 1.1M (2019-20), 1.0M (2020-21)
Comparator Average: 0.4M (2016-17), 0.4M (2017-18), 0.3M (2018-19), 0.4M (2019-20), 0.8M (2020-21)

Recommendations

There are no recommendations based on the findings.

Miscellaneous

Findings

- Throughout 2016-2021, Peel CAS's miscellaneous expenditures have been significantly lower than their comparator average.
- Much of Peel CAS's miscellaneous spending is attributed to memberships (e.g. professional designations), entertainment, and software licensing.
- Entertainment costs are deemed inadmissible.
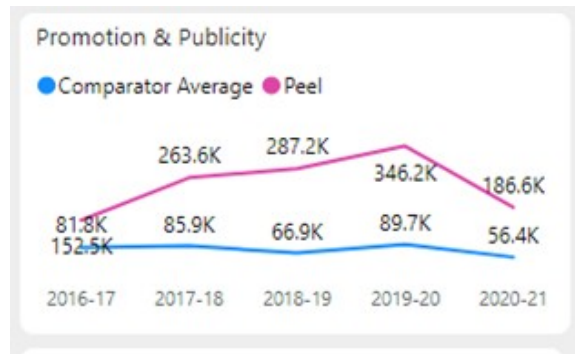
Recommendation

1. Peel should review the expenditures coded to miscellaneous to ensure they align with MCCSS guidelines.

2. Peel should enforce Ministry guidelines and Broader Public Sector directives related to entertainment expenses.

Promotion and Publicity

Findings

- Peel CAS spends three times more for Promotion and Publicity than the comparator CASs.
- Their 2020-21 expenses have been reduced from the last three years.
- The Society notes that spending is approved as part of the society's budgeting process. Requests are presented at the time of the society's budget preparation and the Society sets out its requirements for such costs. If new initiatives are implemented during the year, they are reviewed and approved by the Director of Communications as well as the CEO. There are also other Directors such as the People and Culture as well as DEI Director that can approve Special Events. All expenditures are either done by using the Vendor of Record (VOR) if they exist or by obtaining quotes to ensure procurement policies is followed.

- Overall observations of the 19/20 and 20/21 GL expenditures did not highlight any immediate areas of concern.

Recommendations

1. Peel CAS should engage with comparator societies to understand their promotion and publicity policies and practices and to incorporate best practices into Peel policy. Peel CAS should work to find efficiencies and reduce their spending to come into line with comparator societies. Ontario Child Benefit Expenses.

Findings

- With respect to Ontario Child Benefits, 2020-21, the largest expense in 2020/21 was $40 097 which was for the cost of a media class for one child. Other expenditures included tutoring services and equipment and a bike for a child.
- In 2019-20, the largest expense of $11,432 was allocated for tutoring services, Quran lessons, a gym membership, summer camp, school supplies and uniform for a single child. It is likely that there was a jump in expenses in 2020-21, due to Coronavirus which may have compelled children to purchase electronics and tutors to enhance their learning seeing as they were unable to be physically taught by their teachers.
- A review of Peel CAS's utilization of the OCBE program activity funding showed that it has beenconsistent in its utilization (40% in 2018-19, 36% in 2019-20, 39% in 2020-21). On March 31, 2021, Society had approximately $311K in unused OCBE program activity funding.

Recommendations

1. Peel CAS should increase OCBE program utilization rate and use savings program for more children.

Budgeting/Forecasting process

Findings

The society uses excel worksheets to develop each areas budget. This process begins in

January-February. Once each respective Director has completed their preliminary budget, the Finance manager meets with each Director to understand the budget and verify the asks. These budgets are then uploaded to a share point site where each manager/director verifies their costs monthly. Each quarter, the budget process is followed with the Finance Manager and Supervisor meeting with the Director of the budget to verify if costs are on track and if the numbers need to be amended. All these numbers are then reviewed by the Director of Finance and adjusted or revised based on the historic costing. The Director of Finance then meets with the CEO to finalize the quarterly budgets prior to a full discussion with the senior team. Once finalized, this is presented to the Board finance committee for approval. Once approved by the finance committee, it is approved by the Board of Directors and locked in. The process is not documented but is understood and followed by all the members.

The Senior Management Team and Board of Directors discuss the financial results and any investment opportunities if surpluses are identified.

If the variance identifies that the Society is forecasting a deficit, the senior team reviews options related to what projects can be moved to the next year. To date this has not occurred because the Society reviews the numbers monthly and is always ahead of this occurring.

In instances where the variance identifies that the Society is forecasting a surplus position, the Society has a list of projects that need to be completed. If these projects can be accomplished within the existing timeline, they move forward. If not, the surplus is identified and discussed with the MCCSS Regional Office.

All the decisions are clearly presented to the finance committee and approved by the Board.

Monthly department finance reports available for Directors and Managers.

In addition, the budget forecast is developed using the prior year costing and factors that could increase the costing for the following year. A detailed walkthrough of the forecast is completed with the Service Directors prior to the development of the budget and it is also reviewed quarterly to ensure that it is on target and revisions are made quarterly as required. The forecast is then summarized for the Senior Management team who reviews and approves prior to Board review and approval.

Recommendations

1. While the Society's financial policies and processes are comprehensive and thorough, it

should document the budget and forecasting process including tools, templates, and resources regarding Spending, Budget Allocation that describes the monthly, quarterly and annual forecasting process throughout the year.

Finance Staff Interviews

Findings

The reviewers randomly selected three finance staff from the organization chart to be interviewed.

Overall, the staff interviewed described positive working relationships and recognized a teamwork approach amongst the finance team. Staff also noted and appreciated the support that supervisors and managers provide. Staff were knowledgeable of the Society's financial policies and ensured adhere to in their day-to-day work. They would like to see a plan developed for quarterly lunch and learn sessions which would provide staff with an opportunity to learn about various roles and responsibilities of others and provide opportunities for staff to share lessons learned and techniques that may assist people in their work.

Recommendations

1. Peel CAS should develop formal financial overview/orientation sessions to ensure all staff are updated on the Society's financial policies and procedures. Sessions can be provided when there are new staff joining the society, revisions to a policy, semi-annual refresher of policies to departments.

OVERALL REVIEW SUMMARY

The Peel CAS targeted review was undertaken to develop findings and recommendations in select areas of the Peel CAS. The outcome was the development of a report highlighting strengths and describing a path for improvement and sustainability.

The review was led by the Osborne Group, a Toronto based consulting firm. The review team included other external consultants and Ministry of Children, Community and Social Services staff (MCCSS).

Centre for Conflict Resolution International (CCR) completed a workplace assessment which was a key component of the review.

The scope of work included workplace culture, governance, service delivery, community partnerships, compliance with the Child Youth and Family Services Act (CYFSA), human resources management, and finance.

Data gathering involved staff surveys, document reviews, and interviews within the organization and with select community partners.

A final report including findings and recommendations was prepared based on input from all the reviewers and submitted to MCCSS.

Summary of Findings and Recommendations

Workplace Culture

The workplace assessment, conducted by CCR, engaged various individuals and groups from across the organization through 19 focus groups. CCR consultants also interviewed over 70 individuals from across Peel CAS including staff, team leads, managers, directors, and board members. As well CCR administered their proprietary workplace assessment survey "Org pulse" with an exceptional response of 343 completed surveys.

All these components provided a comprehensive, accurate and inclusive picture of the depth and width of workplace issues articulated by all those who participated in this assessment process within Peel Region CAS.

The review found many positive dynamics. However, many challenging dynamics exist in the Peel CAS.

While Peel CAS is proud of its accomplishments and reputation, there is a notable division within the agency over how it responds to workplace issues, challenges, and disputes.

The review found that there is a clear division between non-management, front line, and management staff in terms of how the organization is perceived and experienced. As well there is conflict between union and management.

It is very important to state, that based on feedback received, there is a gap between how a number of black employees experience the Peel CAS culture and practices and others in the organization. Even though the overall gap is not large, it shows that there are a number of individuals who have lived experiences that are uniquely their own and have impacted them negatively. Therefore, the restoration process must be inclusive of all issues identified,

especially anti-Black Racism.

Governance

The Board is composed of a range of experienced individuals with diverse backgrounds. There is a clearly articulated strategic plan with performance indicators used for evaluating organizational effectiveness. There is governance philosophy with policies and procedures that guide Board work, a skills matrix that is used to recruit new Board members, orientation reference materials and processes for new Board members and processes for evaluating Board members and the CEO. The Board is actively involved with community partners. They "walk the talk" of being committed to learning and development.

Improvements are recommended in the areas of defining and measuring compliance with executive limitations, human resources stewardship and risk management.

Service Delivery

The leadership has a developed a community and staff respected service delivery model. Staff members are proud of the work they do. Community partners report that leadership and service delivery staff are collaborative and committed to excellence. They are seen as leaders who are prepared to share power and resources. They are respected for always being prepared to have difficult conversation to find the best solutions for children and families

Compliance with CYFSA

Overall, case review results demonstrated high compliance across all service areas reviewed. Efforts made by staff to connect with families were visible throughout the case files. Decisions were consistently supported with documentation/rationale and made in consultation with supervisors.

Human Resources Management

The organization is committed to diversity, equity and inclusion. They have worked hard to ensure the staff composition reflects the population in Peel so that services can be delivered in a culturally sensitive manner.

In some key areas, Human Resource policies and procedures are missing (i.e. Whistle Blower policy). A number of policies need to be strengthened and updated.

As stated in the Compliance Section, compared to other societies, Peel CAS has a higher

number of open protection cases serviced per unit and per case carrying worker than the comparator average. This, coupled with many other internal factors identified in the CCR review, should be examined carefully given the fact that staff are reporting burn out and that the Society ran a surplus in 2020/2021. The human resource implications of this finding were out of scope for the HR component of the review, so more examination by the Peel CAS would be appropriate.

It is recognized that stress at the front-line is an all-too-common reality in the child welfare sector. This reality has been intensified by COVID 19. With respect to Peel CAS, the internal stressors and dynamics further exacerbate the situation.

 Finance

The finance review team reviewed a number of aspects of financial management: salaries and benefits of the executive team, travel, training and recruitment, client personal needs, building occupancy, professional/non-client, promotion and publicity, Ontario Child Benefit expenses and budgeting and forecasting. In addition, three finance staff were interviewed.

Peel CAS has had clear audits over the last number of years which include clean management letters. There are no significant concerns in the financial management of the Society.

Concluding Comments

The review revealed a significant dichotomy at Peel CAS. Staff describe their commitment and passion for their work and are well respected in the community, yet they are part of an organization that requires substantial workplace restoration to address the significant internal challenges that it faces.

We, the review team, thank the Peel CAS staff and Board of Directors for their cooperation and support throughout this process. We wish you all the best on your journey forward.

Appendix 1

[1] Region of Peel (2019). "The Changing Landscape of Health in Peel: A Comprehensive Health Status Report 2019". Pp. 12. Retrieved from: https://www.peelregion.ca/health/resources/pdf/CHSR-changing-landscape-health-peel-full-report.pdf

[1] Region of Peel (February 2017). "2016 Census Bulletin: Population & Dwelling Counts." Retrieved from: https://www.peelregion.ca/planning-maps/2016-population-dwelling-counts-bulletin.pdf

[1] Region of Peel Data Portal. "Population estimate, 2020 Year-End." Retrieved from: Data Portal - Region of Peel - Demographics (peelregion.ca)

[1] Region of Peel Website. "2016 Census: Population & Dwelling Counts." Retrieved from: https://www.peelregion.ca/planning/pdc/data/census/2016-Census/population-and-dwelling-counts.htm

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Peel children 0-19 - 350,680 or 11.6% of Ontario children's 0-19 (3,019,640)

[1] Region of Peel. (May 2017). "2016 Census Bulletin: Age, Sex & Dwelling Type." Retrieved from: https://www.peelregion.ca/planning-maps/censusbulletins/2016-age-sex-bulletin.pdf

[1] Peel Census Tables. Retrieved from: https://www12.statcan.gc.ca/census-recensement/2016/dp-pd/prof/details/page.cfm?Lang=E&Geo1=PR&Code1=35&Geo2=CD&Code2=3521&SearchText=Mississauga&SearchType=Begins&SearchPR=01&B1=Population&type=0
Peel children 0-19 - 350,680 or 25.4% of Peel's population (1,381,739)

[1] Region of Peel Website. "2016 Census: Languages." Retrieved from: https://www.peelregion.ca/planning/pdc/data/census/2016-Census/languages.htm#:~:text=In%20Peel%2C%20English%20was%20the%20language%20most%20often,often%20at%20home%2C%20down%20from%2069.0%25%20in%202011.

[1] Region of Peel. (August 2017). "2016 Census Bulletin: Languages." Retrieved from: https://www.peelregion.ca/planning-maps/censusbulletins/2016-languages-bulletin.pdf

[1] Region of Peel. (August 2017). "2016 Census Bulletin: Languages." Retrieved from: https://www.peelregion.ca/planning-maps/censusbulletins/2016-languages-bulletin.pdf

[1] Census of Canada 2016 Data Tables. Found in: 2016 Visible minorities_Peel.xlsx

[1] Region of Peel (October 2017). "2016 Census Bulletin: Immigration and Ethnic Diversity." Retrieved from: 2016-immigration-ethnic-diversity.pdf (peelregion.ca)

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