RESEARCH AND EVALUATION IN CHILD, YOUTH AND FAMILY SERVICES

Creating Effective Family Plans

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Abstract

This research project has been a partnership between the Ministry of Children and Family Development (MCFD) and the University of British Columbia (UBC) School of Social Work. In recent years, MCFD's policies and processes have shifted towards collaborative and participatory approaches. The Family Plan Structured Decision-Making (SDM) tool is a document (Family Plan) used to address child protection concerns as identified by the Family and Child Strengths and Needs Assessment. The Family Plan was also developed with the intention to involve families in identifying needs and goals. UBC-MCFD research proposals provided by MCFD sponsors Terry Leiko and Selena Cheng suggested some discrepancies in how this tool is used among child protection social workers (CPSW) and offices, and there is also a lack of research that looks at how CPSWs are and should be using the tool. Our evaluation research project seeks to answer the following three questions: 1. What are child protection social workers' understanding of how to utilize the Family Plan tool? 2. What do child protection social workers find useful and challenging when using the Family Plan tool? 3. How are child protection social workers using the Family Plan as a tool to engage and collaborate with families? This project evaluation highlights key areas for practice consideration regarding the use of the Family Plan. In order to better understand the importance and effectiveness of the Family Plan in practice, this research starts with an in-depth literature review that informs the theoretical frameworks, a comprehensive methodology section followed by findings and limitations to this research, as well as implications and recommendations for future research and directions. Our research team discovered that there is a lack of literature on the Family Plan, and other than the documents presented by MCFD. However, the following themes were highlighted in the literature: barriers to building a participatory worker-client relationship, facilitating family engagement and collaborative case planning. Our team considers the following theoretical approaches to be fundamental to our research study: strengths-based social work through promoting client empowerment and self-determination and trauma-informed social work practice (Darlington, Healy, & Feeney, 2010). This qualitative research study used a purposive sampling intentionally choosing participants on an inclusion criterion we created. Recruitment was conducted through MCFD sponsors facilitated contact procedure, and it focused mainly on three service delivery areas (SDA): Vancouver/Richmond, Coast/North Shore, and South Vancouver Island. The data was collected through six semi-structured phone interviews and six online surveys. The qualitative data was then coded and analyzed using the Thematic Analysis (Braun & Clarke, 2006) approach to identify themes and relationships. Following data analysis, student researchers identified five themes: clear and transparent reference guide, creativity in collaboration and empowerment, barriers, training and continuing education, and mentorship and collaborative practice. This evaluation project has limitations which are related to history, selection bias, reactive affect / social desirability, limited time frame, research bias, and differences in interviewing styles. This research has also highlighted five future recommendations to be considered by MCFD, and they are as follows: offer mentorship and ongoing training, increase awareness that the Family Plan is a collaborative tool, offer training in conflict management, incentivize training and continuing education by addressing what CPSWs consider as gaps in their knowledge of the plan, and draw upon collaborative practices such as FCPCs (Family Case Planning Conferences) to facilitate family engagement and reduce power imbalances. For future research, this team of student researchers also suggest to MCFD to examine the use of the Family Plan with Aboriginal families and the potential colonial aspects of the plan as well as how to effectively and collaboratively integrate resource mobilization into the plan. In closing, our research project was an outcome of MCFD's shift towards collaborative and participatory approach to child protection work. Furthermore, this team of student researchers believes that through this evaluation research project, we identified themes and specific recommendations that will help promote practice that is grounded in the principles of collaboration and empowerment.

Keywords: Family and Child Strengths and Needs Assessment, Structured Decision-Making (SDM), Child Protection, Collaboration, Vancouver/Richmond Service Delivery Area, Coast/North Shore Service Delivery Area, South Vancouver Island Service Delivery Area

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Introduction

The purpose of our research is to help inform and articulate what makes an effective Family Plan and how this tool can be used more effectively in practice. Our team goal is to gather information on what the understanding of a Family Plan is amongst CPSWs, pinpoint current practices among CPSWs across different offices and SDAs on how the Family Plan is being used, identify how CPSWs use the Family Plan to engage and collaborate with families to develop relevant and tangible goals as well as identify barriers to collaboration.

MCFD Policy

MCFD in British Columbia (BC) is responsible for protecting the safety and well-being of children when families are suspected of abuse and/or neglect. When concerns are identified within a family, CPSWs are responsible for engaging the family in developing a plan to address the concerns. For this purpose, the Family Plan was developed to identify goals and categorize the goals into indicators, which refer to how the CPSW will know that goals are being met, and strategies which refer to how goals will be attained. MCFD's policies and processes have shifted towards collaborative and participatory approaches. Therefore, the purpose of our research is to understand whether the implementation of the Family Plan aligns with MCFD policy that states that the tool is intended to be used in a collaborative case planning process (MCFD, 2004).

Relevance to Social Work and Theoretical Frameworks

Our research on creating effective Family Plans highlights the importance of creating trusting, respectful, and collaborative relationships with clients as the basis to effective social work practice. In terms of theoretical frameworks, our team considers that strengths-based social work through promoting client empowerment and self-determination, and trauma-informed social work practice have guided and informed our research project (Darlington et al., 2010).

The Family Plan is intended to provide CPSWs with an opportunity for relationship building, client engagement, and collaboration. The Family Plan provides the opportunity for clear and honest communication regarding the child protection concerns, which can contribute to positive relationship building when conveyed in a transparent, strength-based, and collaborative manner. When the Family Plan is used collaboratively, it has the potential to be empowering and promote client self-determination, since clients are involved in identifying goals that they view as realistic and meaningful. This is opposed to an approach where social workers independently develop the goals for clients and direct them to attain these goals. Furthermore, when used effectively, the Family Plan provides an opportunity for strength based social work practice. Social workers can acknowledge client strengths, capacities, and resources, and support clients to use these strengths when developing goals. The incorporation of strength-based practice into development of the family plan supports client empowerment, increases engagement, and facilitates more sustainable goals (MCFD, 2004). Trauma informed practice and strengths-based social work are consistent with one another since they promote the same values and principles. The purpose of using trauma informed practice when working with families on a Family Plan is the hope of decreasing the likelihood of re-traumatization which may affect engagement and goal attainment. These theoretical lenses inform our research because they provide a perspective that strengths-based, trauma informed, collaborative social work on the Family Plan may produce better outcomes and experiences for families.

Literature Review

This literature review discusses intersecting factors affecting use of the Family Plan such as techniques for collaboration between CPSWs and families and its barriers, and the use of FCPCs. There was limited literature on the Family Plan. This literature review was conducted by analyzing MCFD policies and practice standards, non-governmental agency reports, scholarly, peer-reviewed articles, and Doctoral and Master level dissertations.

Barriers to Building a Participatory Worker-Client Relationships

Building on the challenges on a system level, Horwitz and Marshall (2015) argue that child protection system has transformed the role of the CPSW from a case worker to a case manager, limiting the capacity to engage and build relationships. According to Horwitz and Marshall (2015), case workers have historically built relationships to gather information in regard to family safety, whereas case managers are more concerned with "using assessment tools to objectify safety and need, making service referrals, and monitoring compliance with these referrals" (p. 291). While the researchers recognized the efficacy of this model, they also highlighted that this form of "computer driven case management" reduces the amount of time CPSWs spend with the families and, as a result, work against the fundamental principle of family engagement (Horwitz & Marshall, 2015, p. 291).

Much of the literature on parental engagement focuses on the barriers that CPSWs face in completing tasks to promote engagement. Despite limited literature being dedicated to the Family Plan, much of the literature focused on parental engagement in assessment and planning services and could therefore be translated into facilitating engagement in family plans. Venables and Healy (2018) define interventions with parental agreement as child protection responses where parents agree to intervention without a court order. This concept shares similarities with MCFD's Family Development Response, which favours engagement (Ji, 2015). These concepts appear progressive on paper; however, when work is crisis-driven and caseloads are unmanageable, these approaches become less viable in practice (Venables & Healy, 2018). Välba, Toros, and Tiko (2017) explain that due to low worker motivation from burnout and high caseloads, parent engagement can become unachievable, despite the worker initially having positive intentions to accommodate engagement. In addition to an unmanageable workload and its accompanying stressors, CPSWs are expected to meet performance indicators where families must fit into categories, limiting their ability to individualize services (Munro, 2009). Similarly, Stokes (2009) states "by avoiding examining the complexity of the decision making through a contextual lens, and reducing practice to a set of procedures, the clinical judgement in social work decision making is once again essentially made invisible" (p. 52).

Facilitating Family Engagement

To mitigate the innate power-imbalance between client and CPSW, the worker should avoid accusatory language and unrealistic expectations and instead explain to the parent why their expectations could be beneficial (Damiani-Taraba, Dumbrill, Gladstone, Koster, Leslie, & Charles, 2017). Schreiber, Fuller, and Paceley (2013) noted that clients appreciated their worker "explaining the necessity of what may seem like intrusive or unnecessary questions..." (p. 711), because although the CPSW could not avoid the questions, an explanation as to why the questions were being asked created a comforting space during interviews. Platt (2012) applies a set of principles put forth by Trotter (2002) to engage with involuntary clients. The principles are (1) social worker role clarification, (2) collaborative problem solving, (3) pro-social modelling and reinforcement of client strengths, and (4) challenge and confrontation through the worker being transparent of their authority and when they may act in an authoritative role.

In relation to racial and ethnic differences, Chenot, Benton, Iglesias, and Boutakidis (2019) examined the approach of matching families of color with workers who might share certain characteristics such as race, ethnicity, or language, as a way to enhance family engagement. The child protection workers interviewed in the study conducted by Chenot et al. (2019) reinforced that ethnic matching in child protection system can have benefits as workers might be able to understand the unique needs of their clients in order to facilitate family engagement in the decision-making process.

Collaborative Case Planning and the Family Plan

The benefits of collaboration with clients in child welfare have been well documented in the literature. For instance, "Parental involvement in decision

making has been linked to improved rates of family restoration", and it "supports children's attachment relationships", while conversely a lack of parental involvement "increases the trauma associated with separation and reduces children's resilience and self-esteem" (Darlington, Healy, & Feeney, 2010, p. 1020). Furthermore, Littell (2001) examined how within family preservation services collaborative planning and client "compliance" with the agreed upon goals affects outcomes in child welfare (p. 103). Littell (2001) found that collaborative "treatment planning" leads to improved "compliance", and greater compliance was related to a "reduction in the likelihood of future reports of maltreatment and out of home placements" (p. 103). However, Littell (2001) points out that compliance tends to influence CPSW's decision making despite whether or not compliance is directly related to safety issues for the child(ren) or if the parent has genuinely participated and benefited from programming. Thus, "compliance" or "engagement" is viewed as a goal or indicator of child safety, which demonstrates the level of importance the perception of compliance has in the child protection system (Littell, 2001, p. 112). Moreover, Cheng and Lo (2019) found that collaboration enables clients to receive services, fosters progress on case plans, fosters permanency outcomes, and reduces the likelihood of substantiated future reports. Overall, the body of research examined highlights that collaborative practice in child protection has positive outcomes for families, which leads to a focus in the literature on how CPSWs foster a collaborative alliance in a non-voluntary and adversarial system. Our program evaluation research project aims to answer the following research questions: 1. What are child protection social workers' understanding of how to utilize the Family Plan tool? 2. What do child protection social workers find useful and challenging when using the Family Plan tool? 3. How are child protection social workers using the Family Plan as a tool to engage and collaborate with families?

Methodology

Sampling and Recruitment

The research study used purposive non-probablistic sampling to determine participant eligibility based on an inclusion criterion (Schutt, 2014). The inclusion criteria for this study required the research participants to be: 1. C6 Delegated Child Protection, Social Workers working for at least six months with MCFD, 2. Child Protection Social Workers who are currently using the Family Plan in their practice.

The study underwent review and received ethics approval from the MCFD Ethics Review Committee, a process facilitated by the MCFD Research Analyst and Research Course Facilitator, Melissa Nauta. A course based Behavioural Research Ethics Board (BREB) approval was obtained by the University of British Columbia. Student researchers utilized the MCFD Sponsor Facilitated Contact protocol to seek research participants for the study. The research sponsors, Selena Chang and Terry Lejko, were provided with both an Invitation to Participate letter and a link to the online survey. The Invitation to Participate letter identified that the research study included online surveys and individual phone interviews. Research participants were informed that, if interested, they may only participate in either the survey or the phone interview, in order to avoid duplication in the data.

The research sponsors distributed the Invitation to Participate letter along with a link to the online survey to SDAs in the Interior Region, Coast Fraser Region, Vancouver Island Region, and Northern Region. For the purpose of the study, the main focus SDAs included Coast North Shore, South Vancouver Island and Vancouver/Richmond. Research participants interested in the phone interview contacted the student researchers directly through their email. If further interest was demonstrated, student researchers determined a date and time for the phone interview and provided the research participants with a consent form and a Study Information Letter, as an email attachment. Student researchers requested the interested research participants to sign and return the consent before the interview was conducted. In total, there were six participants who participated in the semi-structured phone interviews (n = 6). As for the online survey, hosted on the UBC Qualtrics Survey platform, the consent form and the Study Information Letter were

embedded within the survey. Participants who were interested in the online survey were required to sign the consent form before beginning the survey. The online survey was completed by six research participants (n = 6).

Data Collection and Analysis

Student researchers utilized both semi-structured phone interviews and online surveys to gather data for the study. The semi-structured phone interviews were conducted in the privacy of the student researchers' homes, with no other individual present in the room during the interview process. The phone interviews consisted of twelve questions (see Appendix B) and ranged from 20-50 minutes in length. All six of the semi-structured phone interviews that were conducted included research participants from the focus SDAs — Vancouver/Richmond, Coast/ North Shore, and South Vancouver Island. The online survey was hosted on the UBC Qualtrics survey platform, which is a secure data collection platform. The online survey contained eight questions, and there were six responses to the survey. The research participants responding to the survey included participants from the study's focus SDAs, as well as one response each from the Interior and the Northern Region.

The semi-structured phone interviews were recorded and transcribed verbatim. Research participants and their corresponding transcripts were given an ID number (P01, P02, etc.) as a measure to anonymize the data. In addition, the student researchers redacted all identifying information from the transcripts before proceeding to the next step. The student researchers used the software program, NVivo, to code the qualitative data generated from the phone interviews. The first cycle of coding involved the structural coding framework, whereby sets of questions that shared the conceptual domain of inquiry were grouped together and assigned a code (Namey et al., 2008). In this case, the first three interview questions were grouped together, as these questions addressed the demographic factors of the interview participants. Similarly, questions 5, 6 and 10 were assigned one code, given that they shared a similar concept, and questions 11 and 12 were also grouped under one code. Questions 4, 7, 8, and 9 were each assigned a separate code, as each discrete question examined a separate concept. In total, there were seven codes that were generated at this stage of structural coding. During this cycle, student researchers first coded independently and then collectively analyzed these codes to develop codes that the group agreed upon. This process was incorporated to reach inter-reliability and to ensure that the student researchers had a uniform and agreed upon data set.

Following this, the student researchers, as a group, conducted a cycle of descriptive coding to summarize the primary topic of each section of the text into short phrases (Saldaña, 2013). At this stage, the research group met via video conference and identified six main codes. The codes were (1) Understanding of the Family Plan, (2) Engagement, (3) Barriers, (4) Successes, (5) Training, and (6) Promising Practices. Once structural and descriptive coding was complete, the student researchers then utilized the Thematic Analysis approach to organize the codes into potential themes and collated all the relevant coded sections of the data within the identified themes (Braune & Clarke, 2006). After this phase of searching for themes, student researchers then collectively reviewed these themes to ensure that each theme had enough data to support it, and the data within themes fused together to form a coherent pattern. It was also determined that if any of the themes consisted of sub-themes, those could be used to organize and give structure to the more complex themes. A concept map (see Figure 7) was generated to visually represent the relationship between themes and sub-themes, as well as to capture important ideas in relation to the main research questions of the study (Braun & Clarke, 2006). There are horizontal and vertical linkages within the map, where the horizontal linkages demonstrate how the research participants connected and related different themes and the vertical linkages demonstrate the hierarchical relationship between themes and sub-themes.

As for the online surveys, the qualitative data that was generated was anonymized; therefore, the

researchers were not able to link the answers to the identity of the participants once the responses were submitted. The quantitative data was then coded and analyzed using Microsoft Excel. In addition, the demographic information from the qualitative phone interviews and the online surveys was collated using Microsoft Excel. The two demographic components included the MCFD region the child protection workers worked in, as well as the number of years they had been working as child protection social workers. The student researchers utilized Microsoft Excel to create visual representations to illustrate the quantitative data results.

Findings

Demographic Results

Figure 1 demonstrates the regions where the participants were employed. Most of the participants that answered our survey and phone interviews (n = 12) were from the Coastal and Fraser regions.

Figure 2 demonstrates the years participants have been employed as CPSWs. The majority of participants (n = 12) have worked as child protection workers for three to four years.

Survey Results

Figure 3 highlights CPSWs' usage of the Family Plan in the practices (n = 6). Notably, some participants (n = 2) indicated they only sometimes use the tool in their practice.

Figure 4 is a representation of the aspects of the Family Plan that CPSWs found challenging (n = 6). The survey results indicated creating indicators of the Family Plan may be challenging and that families do not usually agree with the Family Plan.

Figure 5 depicts whether CPSWs found the Plan to be effective to achieve family reunification. Answers were equally divided with three participants agreeing and three disagreeing on its effectiveness in practice.

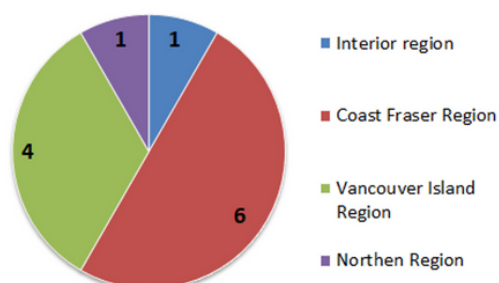*Figure 1.* Demographics: Current MCFD Employment Regions (n = 12),

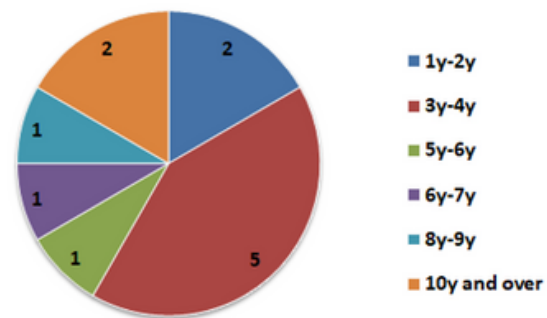*Figure 2.* Demographics: Years Working as a Child Protection Social Worker (n = 12).

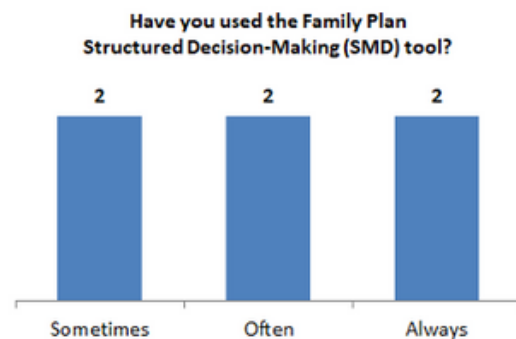*Figure 3.* Survey Information: Usage of the Family Plan.

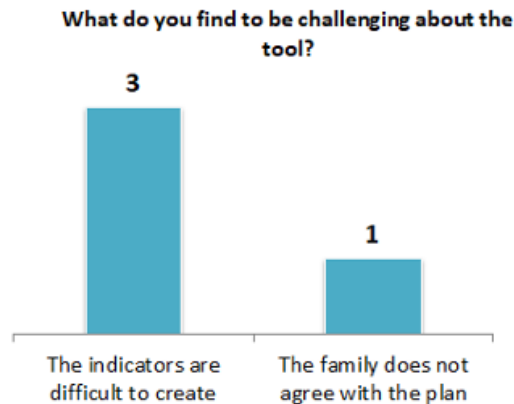*Figure 4.* Survey Information: Challenges of the Tool.

Figure 5. Survey Information: Effectiveness of the Family Plan in Facilitating Family Reunification.
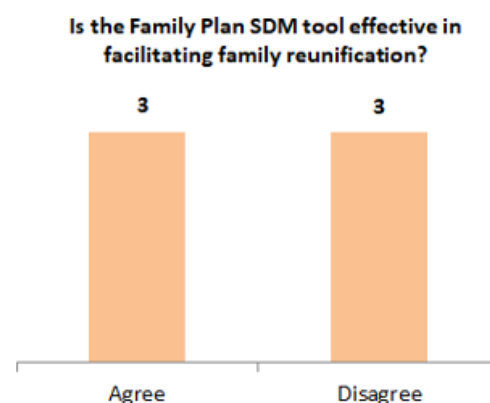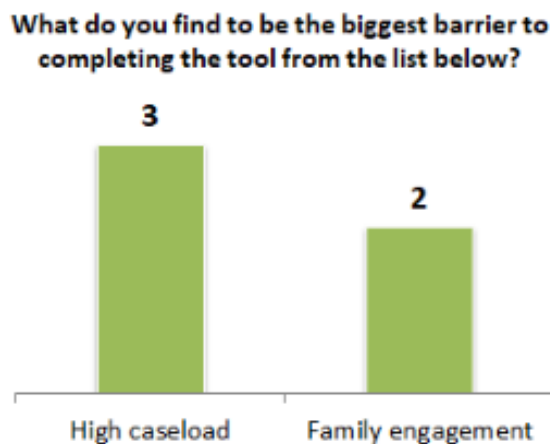
Figure 6 is a representation of what CPSWs found to be the most prominent barriers to completing the tool (n = 5). Identified barriers were the high caseload and family engagement.

Figure 6. Survey Information: Biggest Barrier to completing the tool.

What do you find to be the biggest barrier to completing the tool from the list below?

Themes

Seven themes emerged based on our analysis of our data. The emerging themes were as follows: 1. A Clear and Transparent Reference Guide, 2. FCPCs and FGCs as a Process for Completing the Family Plan, 3. Empowerment of Families, 4. Barriers, 5. Training and Continuing Education, 6. Mentorship, 7. Collaborative Practice.

A Clear and Transparent Reference Guide

When asked about the successes of the Family Plan, many participants praised the document for its clarity and transparency for the CPSWs and the family. Furthermore, participants noted that the Family Plan clearly identifies the risks and safety concerns. Participants also expressed that it was helpful to clearly outline the goals that the CPSW and the family can work towards to address the concerns. One participant stated, "My understanding of the family plan is that it's a really transparent, clear, documented plan that identifies the child protection concerns and essentially the strategies we're going to use to resolve them" (P01). Another participant expressed that the Family Plan is "A transparent piece of document that allows them [the parents] to see what our [child protection workers] concerns are" (P02).

Creativity in Collaboration

Many participants noted the necessity of being creative when creating and implementing the Family Plan. One participant noted that the simple act of being creative with the language and wording that describes the child protections concerns can assist in collaborating with the family. Ultimately, the child protection concerns cannot change; however, the participant indicated the possibility of changing the wording to help parents understand the concerns and what is expected of them. They stated: "As much as we want to do collaborative work , there is still that piece where there are protection concerns, hence why we're involved, and it's just about being creative around how we word these protection concerns when parents don't necessarily agree that this is the protection concern" (P02). Furthermore, another participant acknowledged family's creativity when developing the Family Plan. When a CPSW successfully collaborates with a family, the work being done on the family plan is not the sole responsibility of the CPSW, rather it is up to the family to be creative and come up with ways to address the child protection concerns in a way that is feasible for them and meets the expectations of the CPSW. This participant stated: "People are so creative, and their families and friends might step up and say that they can babysit, and all of these rich ideas come from the family and friends themselves. I could never create a Family Plan that's better than that because there's buy in" (P03, March 11, 2020).

Empowerment

Multiple participants expressed the importance of empowering families to be active in their own family planning. Similar to the above theme where participants emphasized the need for CPSWs to create a platform for families to exercise their own creativity, this theme acknowledged the need for families to be able to build a sense of self-determination within the child protection process. One participant noted: "Really taking a walk alongside someone approach as opposed to me dictating how you're going to [address] your needs because it doesn't work time and time again. There's recidivism, recidivism, recidivism" (P03, March 11th, 2020). Another participant noted that it

is important to exercise this level of empowerment from the beginning the Family Plan process: "I will basically ask them [families] what their sense is about the issue and what should happen and how this should be approached and the issues that we are looking at the protection concerns" (P04, March 13, 2010).

Barriers

When participants were asked about the challenges they encounter when using the Family Plan, many described the challenges as falling into three categories: 1. Engaging and implementing the Family Plan with families is challenging due to barriers such as denial of child protection concerns and unwillingness to participate. 2. The Family Plan template being difficult to use and the format being overly clinical. 3. Child protection social workers experiencing high caseloads, whereby engagement becomes difficult to attain.

One participant noted the following regarding the first two challenges: "One of my main challenges is the format. The format that they have is really clinical, it's available online, it's informal and impersonal, and not practical... The other part or the other a challenge is to get the family to the table to actually complete the plan" (P05, March 13, 2020).

This next participant identified how having a high caseload, while managing other requirements of the job, can impinge on CPSWs' ability to engage families: "If you have an expectation to be carrying a high caseload, and mentoring new hires, and mentoring mentoring practicum students, and staying on top of research, it's just sort of an impossible task. So, I will say that it's not just about a growth mindset and a willingness to practice collaboratively, but there's also a systemic barrier around caseload size for social workers to act and interact with families in the way that they would like to do when you are sort of meeting a requirement to put out fires and to really address the highest needs (P03).

Training and Continuing Education

Some participants noted that although training around using the Family Plan would be helpful, training around conflict management with families

would also be helpful when implementing the Family Plan. One participant stated: "But I would say more skills to manage and address conflict would be [helpful]. If there's training or a focus on that. I think that it's a glaring area where there's not enough resources or time or focus put on it" (P03).

Participants mentioned that ongoing training should be offered to seasoned workers to ensure that they are provided an opportunity to re-evaluate how they are using the Plan. Furthermore, it was noted that the breadth and content of the training should be carefully examined by trainers when designing Family Plan training. One participant stated: "And then season workers that may have developed some bad habits. [They] are a little bit jaded, a little bit cynical, and their soft skills are not particularly good" (P06). This participant also suggested that prior to offering training opportunities, trainers should ask CPSWs what knowledge gaps should be addressed in the training: "That should be just an ongoing, like every three or four months. Everybody should have a refresher. And then before you just call the training, a proper trainer would go out and engage the front line and ask what, if any, struggles do you have with these tools? Do you have any? Because we want to customize the training, we don't want to just assume that you're having problems, maybe you're only having problems in one particular area. So, engage the front line to make the training more relevant" (P06).

FCPCs and FGCs as a Process for Completing the Family Plan

Multiple participants expressed the effectiveness of using collaborative planning such as FCPCs to creative effective Family Plans. Participants highlighted that FCPCs and can empower families to become and remain involved with the Family Plan. One participant illustrated this sentiment by stating: "Family planning case conferences which are essentially a way to get a family to the table plus anyone else that they feel is necessary to be there, and in those one hour and a half meeting, we can create a Family Plan. And what I love about it is that is completely family driven" (P05).

Another participant explained that FCPCs can be

done in place of creating a Family Plan: "So actually, per policy, FCPCs can be used as family plans without actually doing up the general family plan format that we have. So, like if we have a FCPC, the goals that are put in for the plan from the FCPC can be used as the family plan as well" (P02).

Figure 7 demonstrates the interactions between the identified themes within the creation and implementation of the plan.

Discussion

The present research study aimed to gather information to help inform and articulate what makes an effective Family Plan. The literature on engagement and collaboration within child protection systems identifies the benefits for families when collaborative case planning is enacted (Little, 2001). The literature also recognizes the challenges to collaboration within the adversarial child protection system (Darlington et al., 2010). Our research sought to fill a gap in the literature by increasing our understanding of the successes and challenges of the Family Plan used in MCFD. The theoretical framework that guided and informed our research was strength based and trauma informed social work through respecting and supporting client self-determination and empowerment.

Successes with the Family Plan

The results of our study revealed the theme that CPSWs understand the Family Plan as a clear and transparent reference guide. Participants expressed that the Family Plan provides an opportunity for clear and honest communication regarding the child protection concerns, strategies to address the concerns and mitigate risk, as well as how to "measure how people are progressing and making changes" (P03, March 11, 2020). The literature adds to this finding by recognizing that transparency in child protection fosters positive relationship building, which leads to increased engagement and collaboration. Gladestone et al. (2012) found that parents who were more engaged were more likely to report that their parenting had changed since involvement with child protection. The strongest reasons given by parents who identified positive change were that they trusted their CPSW" (p. 116). Thus, the results of our study show that success from the Family Plan comes from using a trauma informed lens where transparency builds trust towards the worker and fosters engagement.

Furthermore, results indicated that the Family

Figure 7. A Concept Map of the Presented Themes
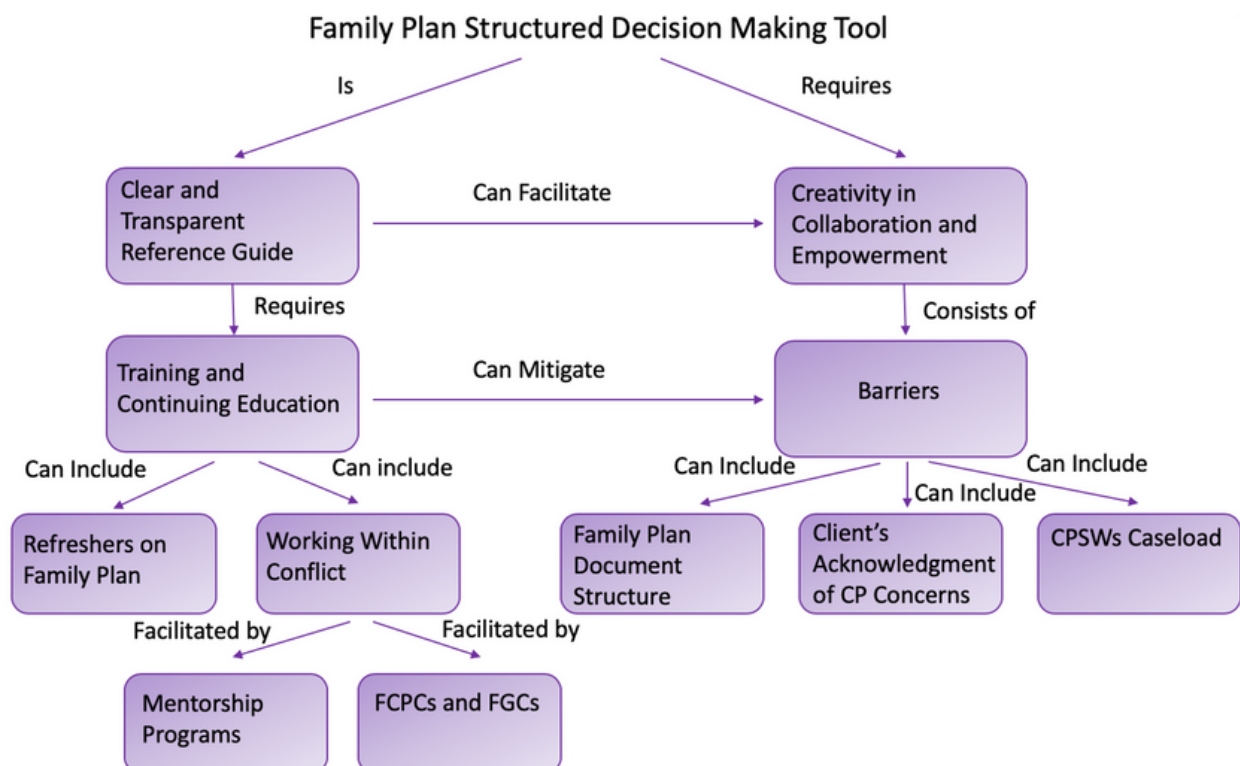
Plan facilitates opportunities to be creative when engaging and collaborating with families, which helps in balancing power differentials between CPSWs and families. We found that effective Family Plans involve creative collaboration on how goals, strategies and indicators are worded to increase engagement. Participants felt that wording can be a barrier if families feel that the wording forces them to admit they were abusive towards their children and when CPSWs use their power to try to obtain agreement on the family plan. Participants expressed that they addressed this barrier by finding language that is strength based and agreeable to both the family and CPSW.

This collaborative process applies the lenses of empowerment, where the CPSW is not enforcing power over clients, rather they are collaborating to come to an agreement and thereby fostering engagement in the plan (P02, March 4, 2020). This approach is consistent with the literature which states that clients that feel power is being used over them rather than with them tend to "oppose cooperation with the CPSW" (Darlington et al., 2010, p. 1023). Thus, from a trauma-informed and strength-based lens, one can assume that families who are in agreement with the Family Plan will be more engaged and have more success in achieving the goals.

Overall, the results indicate that success with the Family Plan involves collaborative, strength-based, and trauma-informed practice. Collaboration on the Family Plan promotes client self-determination and empowerment and leads to more meaningful, achievable, and sustainable goals. The benefits of collaboration with clients in child welfare have been well documented in the literature and align with our results. For instance, "Parental involvement in decision making has been linked to improved rates of family restoration," and it "supports children's attachment relationships", while conversely a lack of parental involvement "increases the trauma associated with separation and reduces children's resilience and self-esteem" (Darlington et al., 2010, p. 1020). Similarly, Cheng and Lo (2019) found that collaboration enables clients to receive services,

fosters progress on case plans, fosters permanency outcomes, and reduces the likelihood of substantiated future reports (p. 1). Thus, our results indicate that collaboration on the Family Plan would lead to improved outcomes for families.

Barriers to Collaboration with the Family Plan

Despite the successes with collaboration on the Family Plan, the results also show three themes that emerged that relate to the barriers to collaboration. These barriers include, the structure of the Family Plan document, high caseloads, and families' awareness of the child safety concerns.

First, participants identified that the structure and format of the Family Plan is not accessible to families. Participants referred to the tool as *"wordy"*, *"glitchy"* and *"too clinical" (P01, February 21, 2020 & P05, March 13, 2020)*. In addition, participants felt that the different categories in the Family Plan are difficult to understand and differentiate from each other. The lack of understanding on the format of the tool can lead to inconsistencies among CPSWs' application of the tool as well as limit the family's ability to engage in a tool that may not make sense to them. The literature expands on this concern by addressing how standardized assessment tools negatively affect client-worker engagement and child safety assessments. Munro (2009) states that CPSWs seem to be expected to meet performance indicators where families must fit into categories, which limits the ability to individualize services and plans. Therefore, the literature suggests that the rigid structure and categorical organization of the Family Plan may negatively affect collaboration and creativity when developing goals.

Relatedly, another participant described the tool as "impersonal" since it is only available online, which leads to workers completing the tool on their laptop during meetings with families (P05, March 13, 2020). The literature argues that "computer driven case management" negatively effects CPSW's ability to engage and build relationships with families (Horwitz & Marshall, 2015, p. 291). The literature describes this issue as a barrier caused by the system, where child protection has become about case management. A case management approach is over reliant on

formalized assessment tools to determine safety, needs, appropriate referrals, and to monitor compliance with referrals, which takes away from social worker-family relationship building and social worker clinical judgement (Horwitz & Marshall, 2015, p. 291). This involves a shift away from a case worker approach that focuses on CPSW's ability to engage and build relationships with families to gather information on safety and risks (Horwitz & Marshall, 2015).

Therefore, our results align with the literature by recognizing the underlying barrier as the system that is acutely focused on mitigating liability through standardized tools and formal documentation, rather than a system that promotes collaboration and worker creativity and flexibility when engaging with families.

Secondly, participants identified high caseloads as a barrier to collaboration on the Family Plan. The literature supports this finding and expands on these results by including worker burnout as inhibiting motivation for collaborative practice. The literature explains that the system provides limited opportunities for relationship building and collaborative case planning due to time pressures and high caseloads (p. 1024). Gladstone's et al. (2012) research showed that "the less stress, the greater a CPSW is able to engage" (p. 117). Thus, our results also indicate a system barrier, where unmanageable caseloads and crisis driven work hampers collaboration and engagement, despite positive intentions by workers to be collaborative.

Lastly, the results revealed the theme that family's lack of acknowledgement of child safety concerns or their capacity for insight due to mental health issues or substance use issues are a barrier to collaboration on the Family Plan. For instance, one participant stated, "sometimes the parents aren't willing to acknowledge what's really happening or work on it, so it becomes moot whether or not you collaborate. It's very difficult to collaborate with them when they get to that point" (P01, February 21, 2020). The literature echoed this finding and showed that the "client's level of willingness to engage and clients lack of understanding or insight

into child safety concerns creates a barrier to families meaningfully participating in decision making" (Darlington et al., 2010, p. 1023). In our study, participants emphasized this barrier as challenging to overcome; however they explained that using strategies, such as creativity with the language on the Family Plan or involving support networks are effective strategies in overcoming this barrier.

Promising Practices for Collaboration on the Family Plan

Our research demonstrated CPSWs' thoughts on practices to promote collaborative case planning and ways to overcome the barriers to collaboration. Our results revealed four themes in relation to promising practices. The themes are training and continuing education, refresher training for senior staff on how to effectively use the Family Plan, mentorship programs, training in conflict management, and the use of collaborative meetings, such as FCPCs.

Further, more training and continuing education was identified as a theme necessary for effective use of the Family Plan. Participants acknowledged that the Family Plan often elicits difficult conversations because it requires direct and clear identification of the concerns, which when discussed can stimulate conflict. A theme that arose was that new workers are often uncomfortable with this conflict, which inhibits their ability to be confident in their transparency of the child protection concerns. Thus, participants suggested mentorship programs for new workers and training to learn how to deal with conflict delicately, so that engagement and collaboration is not lost. Participants also suggested that regular refresher training be offered to senior workers on how to effectively use the Family Plan. The literature supports these suggestions, in regard to CPSWs' risk of burnout impacting collaborative practice. The literature would suggest that it is relevant to offer ongoing training to reignite motivation for creative and collaborative practice and to avoid practice that becomes habitual and jaded. Therefore, mentorship programs offer dual benefits of newer workers learning how to deal with uncomfortable or conflictual conversations and senior workers remaining fresh on new tools, such as

the Family Plan that offers opportunities for engagement and creative collaboration.

To conclude, the present study fills a gap in the literature by addressing how MCFD CPSWs use the Family Plan and whether or not its effectiveness is optimized through collaborative practice. Our research showed that CPSWs practice with the intention to be collaborative when creating the Family Plan, and in doing so they practice from a trauma informed and strength-based lens. However, there are barriers to collaboration that are recognized in our results and in the literature, which need to be addressed in order to have improved outcomes for families.

Overall, it is clear that the Family Plan is effective when it is used as an opportunity to meaningfully engage with families and build relationships, be creative and collaborative, and to promote client capacities and strengths.

Limitations

The first limitation was the influence of history in our research. The term history refers to any event that influences the outcome of the research. For instance, during the course of this study the Covid-19 pandemic emerged and affected people's health, working conditions, and routines. This pandemic occurred simultaneously with participant recruitment, which impacted worker's availability to engage in the study since they likely became distracted, busy, and stressed due to the crisis. Similarly, preparation for the end of fiscal year at MCFD may have also had an impact on worker's availability during the participant recruitment phase. The challenges during participant recruitment impacted the number of participants and therefore the student researchers' ability to reach data saturation.

Secondly, selection bias threatens the internal validity of the research because it acknowledges that those who volunteered to participate in the study may have unique attributes compared to those who chose to not participate in the study. Thus, selection bias of this study affects generalizability to the wider population of child protection social workers.

Thirdly, reactive effect threatens the internal and external validity. Reactive effect is when participants feel they are being tested, which influences the responses they provide since they feel they need to provide right answers as opposed to truthful answers. We found during interviews that participants more readily provided best practice answers and provided less information on challenges to collaboration on the Family Plan. Since our participant responses may not have provided the full picture of the Family Plan in practice, this would have impacted results and generalizability. However, the student researchers did attempt to decrease this threat of reactive effect by emphasizing to the participants that there are no right or wrong answers and that the goal is to discover the truth about child protection practice with the Family Plan. Also, the student researchers emphasized confidentially so that participants' felt safe to disclose their opinions.

Fourthly, researcher bias is a factor in this study as two of the student researchers have worked in front line child protection roles and have used the Family Plan. Therefore, the student researchers enter the research with assumptions and biases on the Family Plan's effectiveness and how it is truly being implemented in practice. Conducting the research with assumptions and biases can impact how the student researchers interview and how they interpret the results, which ultimately impacts external validity and results. However, throughout the research process, researcher bias was mitigated by the ongoing practice of self-awareness.

Lastly, the method of having individual student researchers conduct interviews may have resulted in differences in the outcome of interview data, because all researchers have different interview styles. For instance, some researchers used the semi-structured interview guide to ask follow-up questions, while other researchers did not ask follow-up questions. Furthermore, one student researcher did not ask all of the questions within the interview guide, which impacted the depth of information obtained. Overall, the differences in interview styles may have impacted the level of data collected and, subsequently, data saturation and results.

Implications for Policy and Practice
Recommendations

1. Ensure that it is communicated to CPSWs by trainers, team leaders, or managers that the Family Plan is to be done in collaboration with the family. Many participants prioritized collaboration with families and acknowledged that it is redundant to create the Family Plan without the family's input. Participants did note, however, that many other CPSWs in their offices do not prioritize collaboration or are simply unaware that collaboration is essential in creating the Family Plan. Moving forward, we are recommending that either trainers, team leaders, or managers take the time to engage CPSWs in reorienting their practice to prioritize collaboration with families when creating the Family Plan.

2. Offer mentorship and ongoing training on how to use the Family Plan. As discussed in the results section of this report, a common theme that was presented in the participant interviews was the necessity for mentorship and continuing education. Furthermore, it is important to offer training that CPSWs will find useful, providing them with an increased incentive to attend and be receptive to the presented information. We are recommending that trainers, team leaders, or managers ask CPSWs what they identify as knowledge gaps and where they feel they need further support in creating effective family plans. We are recommending the use of mentorship programs or senior CPSWs as mentors to ensure that new CPSWs feel confident in using the Family Plan and receive guidance regarding how to successfully engage families and use creativity when creating and implementing the plan.

3. Offer CPSWs training in conflict management to provide tools to adequately address conflict that arises during the creation of the Family Plan. Based on our research, training should be offered to CPSWs regarding effective conflict management strategies when creating and implementing the Family Plan. Participants highlighted that conflict management is a unique requirement of CPSWs when implementing the Family Plan and it is important that new and seasoned CPSWs are equipped with the adequate skills.

4. Draw upon collaborative practices (e.g., FCPCs) when creating Family Plans and use these practices to facilitate family engagement and reduce power imbalances. We recommend that trainers, team leaders, or managers promote the use of FCPCs to promote collaboration with families. We also recommend that CPSWs draw upon these collaborative practices to ensure that planning is family driven. These practices are particularly important to reduce power imbalances when the relationship between the CPSW and the family is contentious and highly conflictual. This recommendation was informed by the strength-based theories and trauma-informed social work approaches that guided our research.

Effect of Research on Policy and Practice

In terms of potential impacts, our team is hopeful that the recommendations will be a useful guide for MCFD to improve the use of Family Plans. Furthermore, we hope that our research affects policy by creating an increased awareness regarding the use of the Family Plan and the need for collaboration with families when it is being created and creating an increased awareness regarding the necessity and benefits of training, mentorship, and continuing education. Our report noted the lack of literature regarding the Family Plan. Our team hopes that our research has addressed a gap in the literature by the creation of this report.

Potential Future Research

Future research should examine the use of the Family Plan with Aboriginal families and the potential colonial aspects of the Plan. Furthermore, future studies should examine how to effectively integrate resource mobilization into the plan.

Conclusion

The research study is a result of the structural shift at MCFD towards a more collaborative and participatory approach to child protection social work. The aim of the study was to ascertain child protection social workers' understanding of the Family Plan Structured Decision tool, as well as the utility and challenges associated with the tool. The study also sought to understand how CPSWs use the Family Plan to engage families while also addressing

child protection concerns. The research study yielded a number of key findings that can be used to inform future policies and practices developed by MCFD. Overall, the CPSWs identified the Family Plan tool to be effective in engaging families in a meaningful way to both address child protection concerns and to promote families' capacities and strengths. Participants illuminated how creativity is pivotal to engaging families while using the Family Plan tool, which can include creative language and unique ways to incorporate resources and support systems within the Family Plan. At the same time, CPSWs noted several challenges linked with the use of Family Plan, which were associated with the structure of the tool itself, client's willingness to engage, and systemic pressures placed on CPSWs.

Some of these barriers to engagement identified by CPSWs can be addressed if the recommendations provided in the study are taken into consideration. These recommendations, built on the feedback provided by the research participants, highlight the significance of mentorship and new training initiatives on conflict navigation, in addition to a growing emphasis on collaborative practices, such as FCPCs. Future research can build on these key findings by examining the use of Family Plans with Aboriginal families, effective resource mobilization into the plan, and the relationship between years of CPSW experience and the frequency of its use to address child protection concerns. It is our hope that our findings and recommendations can promote collaborative practices that are informed by the principles of empowerment and align with MCFD's vision moving forward.

Acknowledgement

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Appendix A

Data Collection Instrument (1 Of 2): Demographic Questionnaire

1. How many years have you been working as a Child Protection Social Worker?
○ Less than 1 year
○ 1-2 years
○ 3-5 years
○ 6-8 years
○ 9-10 years
○ Over 10 years

2. What MCFD region do you currently work in?
○ Interior Region
○ Coast Fraser Region
○ Vancouver Island Region
○ Northern Region

3. Do you currently work for a delegated Aboriginal agency (DAA)?
○ Yes
○ No

4. Have you used the Family Plan Structured Decision-Making (SDM) tool?
○ Yes
○ No

5. How often do you include families in the creation of the Family Plan SDM tool?
○ Never
○ Sometimes
○ Often
○ Always

6. If you selected often, sometimes, or never, what do you find to be the biggest barrier to completing the tool from the list below?
○ High caseload
○ Family engagement
○ Audit standards
○ Other:

7. Is the Family Plan SDM tool effective in facilitating family reunification?
○ Strongly agree
○ Agree
○ Disagree
○ Strongly disagree

8. If you selected disagree, or strongly disagree, what do you find to be challenging about the tool from the list below?
○ The need categories are limited and do not apply to family situations
○ The indicators are difficult to create
○ The family does not agree with the plan
○ Other:

Appendix B

Data Collection Instrument (2 Of 2): Interview Questions

1. How many years have you been working as a Child Protection Social Worker?

2. Are you currently an employee with the Ministry of Children and Family Development (MCFD)?

3. Are you using the Family Plan Structured Decision-Making (SDM) tool in your practice?

4. If yes, what is your understanding of the tool and its key features? Please elaborate.

5. Do you engage families in the creation of the Family Plan?

6. If yes, what has been your experience in working collaboratively with families? Please explain.

7. Based on your experience, what are the challenges of creating the Family Plan with families?

8. Overall, what are the key factors that make the Family Plan successful?

9. What additional training or support do child protection workers need to create effective Family Plans with families?

10. Do you find the Family Plan SDM tool effective in engaging and collaborating with families? If so, please elaborate on your reasoning. If not, please elaborate on your reasoning.

11. Are you aware of any promising family goal planning practices being implemented in BC? If so, what and they and where?

12. Are you aware of any promising family goal planning practicing being implemented elsewhere? Is so, what are they and where?