THE USE OF PROFESSIONAL TIME IN RELATION TO
CASE CONTENT AND SERVICES RENDERED.

An Exploratory Analysis based on a
Representative Group of Cases carried by
the Children's Aid Society of Vancouver,

by

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## TABLE OF CONTENTS

Chapter 1. **Professional Time: One Important Component in the Provision of Child Welfare Services**

Current demand for social workers exceeds supply. Sound general child welfare services are essential for community mental and social health. The problem of achieving both coverage and quality. The use of professional time per se has received little attention. The Children's Aid Society of Vancouver selected for study. Brief history of the Society. Statement of function and services. Method used in making study. ........................................ 1.

Chapter 2. **The Differential Approach to Caseload**

Literature on time studies and caseloads. Children's Aid Society time study of June, 1955. Numbers of visits and interviews in June 1955. Types of cases carried - family cases, foster homes, adoptive applicants, children in care, children on adoption probation. Findings regarding activity and inactivity. Time study findings compared to case findings. .................................................. 20.

Chapter 3. **An Appraisal of Casework Services**

Criteria for judging adequacy of service. Qualitative ratings regarding service. Intake in the Children's Aid Society. Case examples of adequate, fairly adequate and inadequate service. Relationship of availability of time to quality of service. .................................................. 48.

Chapter 4. **Direct Service to Clients: Distributing the Responsibility of the Professional Worker**

Representative quality of case material on which study is based. Evaluation of services rendered. Variables regarding the use of time. Percentage of time spent on visits and interviews. Other factors influencing quality of service. Caseload count. Recommendations. Suggestions for further research. Conclusion. .................................................. 84.

Appendices:

A. Survey Schedule for Family Cases.
B. Survey Schedule for Foster Homes.
C. Survey Schedule for Adoptive Applicants.
D. Survey Schedule for Children in Care.
E. Survey Schedule for Children on Adoption Probation.
F. Summary Sheet for Family Cases.
G. Summary Sheet for Foster Homes.
H. Summary Sheet for Adoptive Applicants.
I. Summary Sheet for Children in Care.
J. Summary Sheet for Children on Adoption Probation.
L. Bibliography.
TABLES IN THE TEXT

Table 1. Visits and Interviews by Social Workers:
Children's Aid Society (Vancouver),
June 1955 .................................................. 24.

Table 2. Types of Family Cases in Sample Group ........... 27.

Table 3. Marital Status of Parents, Numbers and
Status of Children .................................................. 29.

Table 4. Comparison of Sample to 1955 Statistics on
the Basis of Age Groups .......................... 36.

Table 5. Indications of Case Status and Activity
Children's Aid Society (Vancouver),
June 1955 .................................................. 45.

Table 6. Qualitative Ratings on Services Rendered ........ 52.

Table 7. Intake in the Children's Aid Society
(Vancouver), 1955 .......................................... 55.

Table 8. Evaluation of Services Given and Time-Service
Factors .......................................................... 83.A.

Table 9. Summary of Adequacy of Service and Time-
Service Ratings .................................................. 83.B.
ABSTRACT

While it is generally accepted that basic child welfare services are essential, insufficient attention has yet been given to the problems of (a) the shortage of professionally qualified social workers in relation to the many types of need, (b) making the best use of professional personnel in relation to specific job content, (c) setting up criteria on priority indications for the different fields of social work, which, in a children's agency alone can be separated into many categories.

As an approach to some of these patterns, a study was devised to review the main branches of the Vancouver Children's Aid Society caseload, using an administrative "time study" made in 1955 as a base. Aiming at a group of cases representative of an average worker's share of responsibility, cases were selected proportionately from five main areas, (a) family cases, (including services to unmarried mothers), (b) foster homes, (c) adoptive applicants, (d) children in care, and (e) children on adoption probation. (1) Visits and interviews carried out in one month (June 1955) on behalf of these clients, are tabulated and compared with those undertaken by the "average worker" in the agency time study, (2) service rendered is qualitatively rated for each case, and (3) case illustrations are employed as a further aid to evaluation. In a summary assessment, (4) the relation of availability of worker-time to the adequacy of service is examined.

Using a threefold rating of service, it is estimated that in the 83 sample cases adequate or fair service was given in 66 cases. The quality of service in 45 cases was judged to be not affected by lack of worker-time, although it was an important cause of limitation of service in the remaining 38. The proportion of total time revealed as spent on visits and interviews, 23 - 28 percent, is similar to that of the few other agencies which have studied this matter, but must be regarded as low if direct service to clients is considered to be the chief responsibility of qualified social workers. Possible methods of increasing time spent on visits and interviews are suggested, and subjects requiring further research are indicated.
Acknowledgements

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THE USE OF PROFESSIONAL TIME IN RELATION TO
CASE CONTENT AND SERVICES RENDERED.
Chapter 1.


Availability of professional social workers, both as architects and as builders will have decisive influence on the structure and adequacy of the welfare services of the future. Although numbers of social workers have increased rapidly since World War I, the tendency for demand to outrun supply has become so serious that continuing councils on education for social work have been set up by lay and professional bodies both in Canada and the United States, in order to try to find a solution to this problem.\(^1\) In the present situation of intense competition for able staff, and of rapid, and essentially unplanned development of specialized services, it is important that social workers at least begin to consider the question of priorities in the use of time and of personnel.

It seems safe to assume that there is general agreement among lay and professional groups that basic child welfare services are among the most important in the community. Even at the time of Socrates\(^2\) wise men understood the special value and vulnerability of children.

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2. Socrates. "Could I climb to the highest place in Athens I would lift my voice and proclaim 'Fellow citizens, why do you turn and scrape every stone to gather wealth and take so little care of your children to whom, one day, you must relinquish it all!"
However, it is only in comparatively recent times that experts have demonstrated in precise detail the direct relationship which exists between the affectionless, deprived child and the affectionless, anti-social adult, who in turn, is unable to give love and care to his children, thus perpetuating the dreary cycle of mental illness, delinquency and dependency. To quote John Bowlby, "The proper care of children deprived of a normal home life can now be seen to be not merely an act of common humanity, but to be essential for the mental and social welfare of a community. For when their care is neglected, as happens in every country of the Western World today, they grow up to reproduce themselves. Deprived children, whether in their own homes or out of them, are a source of social infection as real and serious as are carriers of diphtheria and typhoid ... To those charged with preventive action the present position may be likened to that facing their predecessors responsible for public health a century ago. ...Let it be hoped, then, that all over the world men and women in public life will recognize the relation of mental health to maternal care, and will seize their opportunities for promoting courageous and far-reaching reforms."

The belief that evaluative research in the child welfare field is not only possible, but beneficial, has been advanced by Alfred J. Kahn of the New York School of Social Work. He writes, "The effectiveness of child care services can be determined, given willingness to tackle difficult problems of research design and the courage to face the findings .... The very decision to undertake evaluative studies in agencies and research centres will spark the field to formulate clear questions and consider research plans, the consequent discussion and decision-making cannot but have a salutary effect on practice"1.

The problem as to how the quality of service can be blended with broad coverage has vexed the profession of social work for some years. "The great modern dilemma is the size of program without loss of those human values and truths inherent in basic principles."2

Many private agencies have been able to limit their intake and accept no more cases than the number to which they believe their staff can give good service. However in general, these decisions have been arrived at by the board, executive, and staff of individual agencies, often with little reference to the needs of the community and the services rendered by other agencies.

As a result, it is possible to find the anomalous situation of top-flight agencies, which make available a skilled standard of service to a limited clientele, operating in the same community with public services where the standards are poor and where the social work practice may actually create or perpetuate problems which can never be solved, or can be solved only at great expense. To quote Charlotte Towle "As one example of poorly co-ordinated planning, at the local level, mothers receiving assistance under Aid to Dependent Children programs were under pressure to go to work at the same time that expanded provisions for psychiatric treatment of delinquent and disturbed children were being projected"\(^1\).

The questionable solution of limiting intake, which is possible for purely private agencies, cannot be adopted by a Children's Aid Society, which has a quasi-public function. Such an agency is charged with carrying out a defined job within a certain geographical area, and all clients who fall within the categories designated for service, must be accepted. The result is, of course, that when demand for service increases, some adaptation takes place. Either staff is increased or the staff works harder, or services suffer. Sometimes all these things happen though not necessarily all at once.

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The history of public social work in expanding communities has been a rather unequal struggle to keep pace with 1.) the natural increase of need for service due to population growth, 2.) the increased acceptance of and demand for social services of all types in many new fields and among new levels of society and 3.) the drive within the profession itself to improve standards consistent with new psychiatric and sociological insights regarding human needs and clinical methods of influencing behaviour and attitudes. Although this new knowledge has resulted in a marked advance in the ability of social workers to help people with certain kinds of problems, there remain huge areas of human need which have not been met. For example, the profession still lacks much of the knowledge and skill necessary for the successful treatment of the chronically dependent family and the delinquent.

Translating accumulated clinical and psychiatric wisdom into mass programmes for human welfare is a difficult job, but it is a necessary job if the profession of social work is to survive as a strong vital force in the community — as a profession which concerns itself with the welfare of people at large, not just with those who are "treatable" in a rather narrow, clinical sense. In his article "The Responsibilities of a Socially Oriented Profession", Harry L. Lurie points out that, due to the current "decline of the philosophy of liberalism which believed in progress, in change, and in the perfectibility of human nature and the social order", social work has temporarily lost much of its "dynamic quality" with the result that there is a lack of "channels for developing and carrying
through effective programs of social improvement". He warns that unless social workers continue to "remain alert to the implications of unsatisfactory mores and institutions in their own lives and in the lives of clients they serve", they will have no important part in the social engineering of tomorrow's society.

The problem of many public agencies and indeed of much of the whole of social work, is that of trying to do too much with too little but on the whole, being afraid to say so. "Caseworkers are dependent on the "charitableness" of governments and individuals for their opportunity to practice. Yearly, social casework agencies must sell a bill of goods to the public and the powers that be. There may be fear that any confession of failure or exposure of weakness may result in lowered appropriations or contributions ... the caseworker's economic relation to the public is a major source of his anxiety and blocking over evaluative research ..." Social workers have tended to feel guilty about failures and to believe they were due either to some fault in case handling or else to the fact that the "client was unable to use help". The deeper, broader causes stemming from lack of specific knowledge or from defects in social structure and the organization of services, have not always been sufficiently recognized and acknowledged.


Because of the rapid expansion of social work, it has been difficult to achieve a comprehensive view of the total profession, its responsibilities and resources. Not only have social workers failed to see the total job, but they have failed to see the specific job, whole. Identification and description of actual job content has, to a great extent, been lacking, except in relation to methods of handling specific cases. Nor has the profession been explicit or clear about which services and methods of service were essential, and which were merely desirable. In spite of the efforts of such standard setting organizations as the Child Welfare League of America, the United States Federal Children's Bureau and the Family Service Association of America there have been wide divergences, as between agencies, in the number of staff employed to give comparable services. On the whole agencies have started out on a small scale and have increased in a sort of "stimulus-response" pattern. When the pressure got too great another staff member was added, as soon as budget permitted.

Professional time is certainly a most valuable resource. Yet, as a profession little attention has been paid to the use of time per se in relation to the amount of work for which each individual agency or worker is responsible. The literature on the subject seems to be limited to less than a dozen professional articles compared to the wealth of material on the most effective way of handling an individual case or group of cases. Nevertheless, there is recent healthy evidence of increasing interest in the question of the most productive use of the limited professional time available, and in the development of norms.
for the use of time. This point will be discussed in Chapter 2. Information on this subject should be of vital importance not only to planning bodies, whether public or voluntary, but also to agency administrators and boards, and to individual workers seeking to increase their professional competence.

The study of the use of available professional time in relation to case-load content and services rendered in the Children's Aid Society of Vancouver, can, at best illuminate only a small portion of the large evaluative question - "how much" of "what" can a professional worker carry effectively? It is worth noting that the Jewish Child Care Association of New York studied the question for eighteen months without arriving at a definite answer. Skilled services are dependent on many factors besides the availability of time to work with clients, but it seems reasonable to assume that, unless there is at least minimal time available, skilled service will be lacking. It does not follow, of course, that the quality of service improves in direct ratio to the amount of time spent. In an interesting article in which he comments on this point, Louis H. Sobel, executive director of the Jewish Child Care Association of New York, states "We believe it will be generally agreed that there was, and is, no need for objective documentation of the clear values in lower caseloads in agencies that still have fifty or more children per worker; or even forty, or perhaps even somewhat less. Under such circumstances there would probably be a clear correlation between lower loads and more effective service."
This stems from the deep convictions of the agencies and workers who carried the fight for better service to the point of present standards. But out of another and equally deep conviction about the basic need for at least beginning to measure results, as well as the pressures of money and deficits, we are led to make an observation that may sound heretical: that under certain circumstances still lower caseloads may not necessarily mean better service.1

Reason for Selecting Children's Aid Society of Vancouver, B.C. for Study.

The Children's Aid Society of Vancouver, is the pioneer child welfare service in British Columbia and is still the largest service devoted exclusively to child welfare within the Province. With its fourfold programme of protective family work, child placement (both wards and voluntary placements), services to unmarried mothers, and adoptions, it can be readily seen that the Society occupies an exceedingly important place among local social agencies, and that the way in which it handles problems of coverage, financing and standards of service will have considerable effect upon the general welfare of the community. The Executive, Board and Staff of the Society are striving for the progressive improvement of standards of service and will be interested in the results of the study as a possible guide to future planning.

Brief History of Children's Aid Society

The Children's Aid Society of Vancouver, B.C., a private agency, governed by a Board of Directors in accordance with a constitution and set of by-laws, was incorporated under the Societies Act by authority of a Provincial Charter granted on July 17, 1901, following the hurried passage of The Children's Protection Act in the Provincial Legislature earlier in the same year.

"The early years were an incessant struggle to keep some sort of balance between increasing numbers of children to care for and the collecting of sufficient money to do so ... children from any part of the Province could be, and were, committed to the care of the Society, and no one was under any statutory obligation to pay for their maintenance". Total provincial contributions in 1905 totalled $750. Little by little the proportion paid by government was pushed up but it was not until after the Child Welfare Survey of 1926-27, that the Act was amended to provide for payment of full maintenance ($1.50 per week) by the municipalities responsible. Although the Society had pressed for the appointment since its inception, a Provincial Superintendent of Neglected Children was not appointed until 1924. During these years the Society itself had only one, poorly paid, staff member, the Superintendent.

1. Angus, Anne Margaret, Children's Aid Society of Vancouver, B.C. 1901-1951, Vancouver B.C. (History printed 1951, occasion of 50th Anniversary)
The press of children needing care continued and standards of service fell. In 1926, following a public scandal, the Board of Directors decided to call on expert help and requested the Canadian Welfare Council to make a survey of child welfare needs. The Survey was carried out and in 1927 the Society was reorganized under the leadership of the first trained social worker in British Columbia, Miss Laura Holland, and of Mr. Herbert R. Glass, President of the Board of Directors. Emphasis was placed on protective family work and placement of children in approved foster homes. The professional staff has grown from three paid social workers in 1927 to 60 in 1955. Clerical staff numbering three in 1930 has increased to 31 in 1955.

Since its earliest days the Society has been struggling to meet ever-increasing demands for its services. "Your directors" the first annual meeting was told, "at the time of the incorporation of the Society, expected to be called upon to deal with some two or three cases during the year, but they regret to say that their work has, by force of the evil conditions existing in the city, been more extensive than could be imagined ...\(^1\) The present situation is not very different in essence. The Society is still striving to meet the needs of children and families who desperately require its help. Basic principles, the belief in the worth and individuality of every child, and of his deep need for a family of his own, have not changed since the days of the founders, but they have been illuminated by new

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1. Angus, Anne Margaret, *Children's Aid Society of Vancouver B.C. 1901-1951.*
knowledge and fortified by the gradual development of sound
practice. As Dorothy Hutchinson says so aptly, "Principles do
not change. Their innate goals are never reached because once
they are achieved they are given up for new ones". The
history of the agency bears eloquent witness to this truth.
Out of the accomplishment of one objective, others, just as vital,
have emerged. For example, at one time the Society strove
toward the objective of finding a suitable adoption home for
each one of its "adoptable" babies. The achievement of this
goal and the success of the adoption programme in general were
partial reasons why the agency has gradually changed its
practice, so that the benefits of adoption may be made avail-
able to every child, even though handicapped, if it seems likely
that he will be able to profit by and contribute to family
life.

The re-organization of the agency in February 1954
from a two-department structure based on function, to an agency
with five units each giving generalized services, plus an
adoption department and a home-finding department, has been a
recent example of the Society's ability to adapt itself to
changing concepts regarding the most effective methods of
serving clients. As the agency grew larger, it became obvious
that at times the two-department structure "hampered wise,
co-ordinated planning for the child and his family ... It
became increasingly evident that integrated planning ... could

1. Hutchinson, Dorothy, "Basic Principles in Child Welfare"
Selected Papers in Casework, National Conference of Social
Work 1952 Raleigh, N.C. Health Publications Institute, Inc.,
(Copyright 1953).
Flexibility is a necessary attribute of an agency which is sensitive to community needs.

Authority under which the Children's Aid Society operates. Purpose, Function and Services

"The Children's Aid Society operates under the authority of the Protection of Children Act R.S.B.C. (passed March 18, 1943) and its amendments, and the Provincial Charter granted July 17, 1901, which established the Society under the Children's Protection Act of British Columbia. The Charter states as Article 2, "the business and objects of the Society shall be the protection of children from cruelty and caring for and protecting neglected, abandoned or orphaned children and the enforcement by all lawful means of the laws relating thereto". The 1943 Act speaks of the Children's Aid Society as one "that has among its objects the protection of children from cruelty, the safe-guarding of the young, the amelioration of family conditions that lead to the neglect of children, or the care and control of children in need of protection."

These statements, together with the traditional scope of children's services, indicate that the major responsibilities of a Children's Aid Society lie in the field of active protection and care of children in dangerous situations, described in some detail in the Act.

A secondary purpose - "the amelioration of family conditions which lead to the neglect of children" is broadly stated and, unless clarified and limited by community planning and the functions of other agencies, could envelop almost the whole field of social welfare.¹

The major functions² of the Children's Aid Society are:

I. Provision of services for the preservation and strengthening of family life when the community has expressed concern for the well-being of the children, provision of services for the unmarried mother and her child, and provision of voluntary placement services for the community in accordance with defined policy.

II. Apprehension and presentation before the Family Court, of children considered to be in need of protection, so that the Judge may decide, on the basis of the evidence, whether guardianship should be removed from the parents and vested in a Children's Aid Society.

III. Provision of guardianship and care for children who have been judged to be in need of protection.

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IV. Auxiliary Functions are:

1) Participation in social work education.
2) Participation in social research.
3) Participation in community planning, social action, and interpretation of child welfare needs and services to the community.

As well as basic casework service, a number of specific social services have been developed as an additional means whereby the Society seeks to fulfil its function. Briefly these are:

1) Protective service to children and families.
2) Services related to court procedures.
3) Services to unmarried mothers, and to illegitimately pregnant married women who request adoption for their children.
4) Foster home care and group care for children of long or short duration on a voluntary or committal basis.
5) Private Boarding Homes (Investigation and Supervision in co-operation with City of Vancouver Health Authorities)
6) Adoptions.
7) Special Investigations related to the Child Welfare field.

Method Employed in Making this Study.

The central purpose of this study is to examine a group of cases representative of the amount of work assumed by an average worker, to see what kinds of cases are included in the work load, and to make a qualitative analysis of the adequacy of the services rendered.
The amount of work done on these actual cases is compared with the average amount of work done in one month by an average worker, insofar as this can be determined from the time study carried out by the Children's Aid Society in June 1955. The main units of work selected for comparison are visits and interviews, held either directly with clients, or on their behalf. Inadequacies in service are evaluated, and a judgment made as to whether the inadequacy can be attributed primarily to lack of time, or to other causes.

Selection of cases for study was a central problem. It was desired that they should represent a neutral sample of the entire work of the agency as to type of case and quality of service, and that the number chosen should approximate, as closely as possible, one worker's share of the total caseload of the agency.

The first step was to exclude from the study all supervisors and part time workers and their caseloads, as these staff members were not considered to be representative of the average caseworker. Totals of all categories of cases open in the agency on the last day of the month, January to June 1955 inclusive, were then obtained from the remaining workers statistics, totalled, and averaged.

1. A visit is a call outside the office, involving face-to-face contact, either with a client, or with another person, exclusive of agency staff, directly on the client's behalf.

2. An interview is a face-to-face contact within the agency office, carried on either with a client, or with another person, exclusive of agency staff, directly on the client's behalf.
The number of workers (minus the excluded groups) who were employed by the agency during each of these same months were also totalled and averaged. From the monthly average of workers employed and the monthly average of open cases in each category, it is possible to ascertain the average number of cases in each category for which one worker would have responsibility at the end of a month, if cases were evenly distributed from a numerical point of view. For example, the total number of family cases open in the agency at the end of an average month (January-June 1955) was 1060. When this figure is divided by the average number of caseworkers (46) employed in one month, it is apparent that the average number of family cases for which the average worker was responsible is 23 cases. The same procedure was used in order to obtain an average number of cases in all other categories. Categories included are: 1) family cases including unmarried mothers, 2) foster homes (those approved and in use or waiting, and those being studied), 3) waiting adoption homes (both those approved and waiting, and those being studied), 4) cases of children in care, and 5) children on adoption probation (exclusive of children in care). The only type of case excluded from the study was private boarding homes which are all carried by one worker, the Supervisor of Private Boarding Homes, who was also excluded. On this basis the hypothetical caseload for which one worker was responsible at the end of a month was composed as follows - 23 family cases, 24 children in care, 15 foster homes, nine children on adoption probation, and eight adoptive applicants.
As the Children's Aid Society had carried out a time study during the month of June 1955, and the intention was to examine the work done on the cases in relation to some of the time study findings, the case records were obtained from the group of cases open in the agency at the end of June 1955. Workers' monthly reports were arranged in alphabetical order and every 46th case carried over from the end of June 1955 into July 1955 was selected for study. In order to make the sample caseload representative of the total cases open during the month of June 1955, every 46th case from the total closed in June 1955 was also added. This meant an additional four cases, one in each category except for that of adoptive applicants. The final numerical count of cases studied was therefore as follows, 24 family cases, 16 foster homes, eight adoptive applicants, 25 children in care, and ten children on adoption probation - a total of 83.

This figure of 83 cases does not represent a case load in the usual sense of the word. No actual Children's Aid Society worker would have a caseload of this composition. Foster home studies are made almost entirely by the Home Finding Department, and children on adoption probation are carried, and adoptive home studies made, by the Adoption Department of the agency. Since February 1954, when the agency structure was changed, and generalized caseloads became the rule, all workers except home finders and adoption workers have carried caseloads composed of varying proportions of family cases, children in care and foster homes in use.
When quoting caseloads it is agency practice, in line with that of other child welfare agencies, to count as one case each family case, each child in care, each child on adoption probation and each adoptive home whether "approved and waiting" or "understudy". Except in the case of home finders, who are engaged in studying foster home applications, it is not agency practice to count foster homes as cases. Thus in terms of the agency's methods of counting, the number of "cases" represented by the section of work under review was actually 67. This figure is arrived at by subtracting the total number of foster homes being studied (16) from the total of 83 cases.

The 83 cases were each analysed according to the attached schedules (Appendices A to E), special attention being paid to the nature of the case, the type of services rendered, and the number of visits and interviews. Workers were consulted verbally whenever it was necessary to clarify or supplement the information in the case record. The material obtained was then compiled on summary sheets (Appendices F to J). Numbers of visits and interviews carried on in relation to the cases studied were compared to the findings in the agency time study. The cases selected were evaluated as to adequacy of service rendered, and observations made regarding the relationship between the availability and use of time and adequacy of service.

Statistical material and case examples used in the following chapters are derived from the cases studied. In the case examples identifying information was, of course, disguised.
Chapter 2.

The Differential Approach to Caseload.

Literature on Time Studies and Caseloads.

The literature on time studies and methods of estimating caseloads which can be effectively served in the working time available, is somewhat scanty. It has been difficult to compare findings because of work weeks of differing length, and the fact that several studies included telephone calls to clients with visits and interviews, without differentiation. Some writers quoted caseloads, others did not, and most seemed to have different ways of counting cases. One children's agency\(^1\) reported, out of a 47\(\frac{1}{2}\) hour week, an average of 15 hours a week, or 31.3% of total time spent on client contacts, including telephone contacts, and thought this could be raised to 18\(\frac{1}{2}\) hours per week (30% of total time). No caseloads were quoted in this article.

Another children's agency\(^2\) quoted 13\(\frac{1}{2}\) hours (37%) of interviewing time in a 36\(\frac{1}{2}\) hour week, but did not say if telephone contacts were included. This agency computed workable caseloads as follows, 18 mothers plus their babies in foster care,

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or 24 children in adoptive homes including the home studies, or 19 children in foster care plus their parents, foster home studies also being included. Other suggestions regarding reasonable caseloads composed of children in care plus their parents were 18 to 34 (agency average 25) children per worker\textsuperscript{1}, 31 children per worker in a public agency\textsuperscript{2}, and 23 children per worker\textsuperscript{3}. In most cases responsibility for the home finding was also included in the work load. It was generally agreed by these writers that caseloads ought to be based on an analysis of the services required in each case, and that the numerical case count was unsatisfactory. An interesting method for weighting cases, according to estimated time required for service, was suggested in the article by Ruth Weisenbarger.

\begin{enumerate}
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Other articles\textsuperscript{1,2,3} were concerned less with size of caseload, than with the desirability of increasing direct client contacts, and ways and means of doing so. Orville Robertson stated that his agency, a family agency, had accepted the standard of case workers spending 50\% of their time in seeing clients, and that they hoped to increase this percentage even more. Hill and Ormsby\textsuperscript{4}, reckoned the unit cost of the professional hour with clients in the Family Service Agency of Philadelphia, as $24.91, and it can therefore be seen that methods of increasing time with clients, at the expense of other uses of time, would be desirable.

Most writers were agreed that agencies should engage in time studies, and carefully scrutinize the value of time spent in activities other than face-to-face contact with clients, such as committee meetings, dictation, statistics and supervision.

\begin{itemize}
  \item\textsuperscript{1} Robertson, Orville, "More Staff Time for Seeing Clients", \textit{Highlights}, October 1952, Vol. 15, No. 8, Family Service Association of America, New York, p. 122.
  \item\textsuperscript{2} Francis, Blythe W., "Los Angeles Time Study", \textit{Highlights}, May 1949, Vol. 10, No. 5, Family Service Association of America, New York.
  \item\textsuperscript{3} "How Efficient Are We?" (No author noted), \textit{Highlights}, October 1952, Vol. 15, No. 8, Family Service Association of America, New York.
\end{itemize}

During June 1955, in order to learn more about the use of professional time, particularly its distribution between services chargeable to the Community Chest and Council of Greater Vancouver, and those chargeable to public funds, the Children's Aid Society of Vancouver carried out a time study. All professional staff, with the exception of administration, filled in daily time sheets showing the precise use of time, in minutes, under the headings noted on the Daily Time Sheet form. (Appendix K). From the completed time sheets it was possible to ascertain the total numbers of visits and interviews held with, or on behalf, of clients and the time spent on this activity. Time spent on other parts of the social work job, such as recording, casework supervision and travelling could also be computed from the time sheets but this study makes use of the material on visits and interviews only, as these were the units of work which could, most accurately, be identified and counted on the basis of the case records. For the purposes of this study the visits and interviews made by the supervisors and workers in the excluded group, and the amount of time spent on them, were subtracted from the agency totals. These figures, on visits, interviews and time spent, would thus represent the work of the professional staff from whose caseloads the sample cases were selected.

For purposes of clarity these figures are set down in Table 1.
Table 1. Visits and Interviews by Social Workers:
Children's Aid Society (Vancouver), June 1955.

<table>
<thead>
<tr>
<th>Units of Service</th>
<th>Client Categories</th>
<th>Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Children in Care</td>
<td>Family Cases</td>
</tr>
<tr>
<td>Visits</td>
<td>(number)</td>
<td>(number)</td>
</tr>
<tr>
<td>Client</td>
<td>1426</td>
<td>399</td>
</tr>
<tr>
<td>Collateral</td>
<td>1779</td>
<td>270</td>
</tr>
<tr>
<td>Interviews</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Client</td>
<td>499</td>
<td>211</td>
</tr>
<tr>
<td>Collateral</td>
<td>215</td>
<td>68</td>
</tr>
<tr>
<td>Total visits</td>
<td>3204</td>
<td>669</td>
</tr>
<tr>
<td>Total interviews</td>
<td>714</td>
<td>279</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Time</th>
<th>(hours)</th>
<th>(hours)</th>
<th>(hours)</th>
<th>(hours)</th>
</tr>
</thead>
<tbody>
<tr>
<td>visits</td>
<td>1005</td>
<td>296</td>
<td>1301</td>
<td>1186</td>
</tr>
<tr>
<td>interviews</td>
<td>367</td>
<td>181</td>
<td>548</td>
<td>447</td>
</tr>
</tbody>
</table>

(a) Excluding supervisors and part time workers.

Average time spent:
by all workers: 20 minutes (visits) 28 minutes (interviews)
by workers studied: 21 minutes (visits) 31 minutes (interviews)
The "average" worker in the group studied carried out 75 visits and 19 interviews (i.e. one forty-sixth of total visits and interviews for group studied).
Types of Cases Carried by the Children's Aid Society.

The main categories of cases for which the Children's Aid Society of Vancouver assumes responsibility, may be classified as follows, family cases, foster homes, adoptive applicants, children in care, and children on adoption probation.

Family cases include: situations of child neglect and of illegitimacy, particularly cases of unmarried mothers, cases where some form of child placement is requested, and a miscellaneous group of cases usually involving a fairly brief service, such as custody investigations, services to out-of-town agencies, and services to transient children. Intake figures for 1955, on presenting problem at referral, show the following proportions: illegitimacy, 41%, neglect, 23%, placement request, 18%, all other 18%.

Foster homes are families who board children for the agency. They are partners with the agency rather than clients. They seek to care for a child rather than to obtain a service for themselves. In the last analysis, the degree to which they can give love and care to a child because he needs it, rather than because they need him, will be the measure of their value as foster parents. Included on foster home statistics are homes studied and in use, homes studied and waiting for children, and homes in the process of being studied.

Adoptive applicants are couples who have applied to adopt a child. Their homes have been, or are being, studied by the agency but a child has not yet been placed with them. They can be distinguished from foster parents by the fact that they wish to make the child their own. People who apply for an
additional child, after an adoption has been legally completed, are also counted in this category, until their homes have been re-evaluated and another placement made.

Children in care are children ranging in age from a few days to twenty-one years, for whose care and maintenance the Children's Aid Society is responsible for one of three reasons:

1.) The children have been made wards of the Society under the Protection of Children Act, or are before the Court.

2.) They are non-wards; that is their parents have voluntarily asked the Society to take care of them for a temporary period, because of some misfortune which makes care apart from the parents necessary and desirable.

3.) They are wards of other agencies, who have moved, usually with their foster parents, to the Children's Aid Society area of supervision, and for whom supervision has been requested by the responsible agency.

Children on adoption probation are children who are in adoption homes under the supervision of the Children's Aid Society pending legal completion of the adoption. They may have been placed in the adoption homes by the Children's Aid Society, or another social agency, they may be natural children of one spouse whom both are applying to adopt jointly, or they may have been placed privately in the adoption home either directly by the mother, or through some third party.
Family Cases.

Twenty-four open family cases were studied and of these, ten were "active" and fourteen "inactive" during the month of June 1955. Six of the ten "active" cases had either visits or interviews; the other four received other kinds of service such as letters and telephone calls. Visits to clients totalled eleven and there were no office interviews with clients. There were also four collateral "contacts", three of these being visits and one an office interview.

Of the "inactive" cases, three were rated as "needing attention", four as "inactive according to plan" and seven as "waiting closing". Of these seven, two were waiting transfer to "in care" rather than closing as the children had previously been made wards of the agency.

The following table gives a picture of the major types of cases and shows whether they were "active" or inactive during June 1955.

Table 2. Types of Family Cases in Sample Group

<table>
<thead>
<tr>
<th>Classification</th>
<th>Active</th>
<th>Inactive</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Neglect</td>
<td>4</td>
<td>4</td>
<td>8</td>
</tr>
<tr>
<td>Unmarried Mother</td>
<td>2</td>
<td>4</td>
<td>6</td>
</tr>
<tr>
<td>Placement Request</td>
<td>2</td>
<td>4</td>
<td>6</td>
</tr>
<tr>
<td>Married Woman Asking Adoption</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Brief Service</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td><strong>TOTALS</strong></td>
<td><strong>10</strong></td>
<td><strong>14</strong></td>
<td><strong>24</strong></td>
</tr>
</tbody>
</table>
In the sample the proportion of unmarried mothers works out to one quarter of the total group, while agency figures on cases open at December 31, 1955, show that unmarried mothers constitute one-third of the total caseload. Comparable agency figures on the other classifications are not available. Thus it is not possible to claim that the sample group is more than roughly representative of cases open in the agency.

These cases involved a wide range of problems and services. Seven cases were concerned with the placement of a child for adoption. In four cases, where non-ward care for a child had been given, the major reason was illness of the mother. There were also four situations of serious neglect in which court action, resulting in the commitment of the children had been necessary. An additional four complaints of neglect of children had been investigated and appropriate services given. The remaining cases involved assistance to an unmarried girl prior to confinement, requests for referral to a private boarding home, difficulties in relation to a child's legal status, and services to other agencies. Of the three cases rated by workers as being "inactive, needing attention" two were cases where another agency had requested a minor service and no action had, as yet, been taken. The other was a complaint of neglect regarding the care an unmarried mother, previously known to the agency, was giving her child, and although the complaint had been received at the end of May 1955, it had not been followed up by the end of June.
Judging by sources of referral, the Children's Aid Society is giving service to a large number of people who make voluntary application. Out of the twenty-four cases one-third (eight) were self-referred. Nine cases were referred by a variety of other social agencies. Other sources, each of whom referred one case, were relative, doctor, land-lady, private boarding home, police, neighbour. There was also an anonymous complaint on a case already known to the agency.

The facts regarding marital status of parents, numbers, and status of children are most clearly portrayed in table form.

Table 5. Marital Status of Parents, Numbers and Status of Children.

<table>
<thead>
<tr>
<th>Marital Status of Parent(s)</th>
<th>Total families</th>
<th>Number and Status of Children</th>
<th>Total Children</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Legitimate</td>
<td>Illegitimate</td>
</tr>
<tr>
<td>Unmarried Mother</td>
<td>8</td>
<td>-</td>
<td>12</td>
</tr>
<tr>
<td>Married Couple</td>
<td>6</td>
<td>17</td>
<td>-</td>
</tr>
<tr>
<td>Divorced</td>
<td>4</td>
<td>4</td>
<td>3</td>
</tr>
<tr>
<td>Separated</td>
<td>5</td>
<td>6</td>
<td>3</td>
</tr>
<tr>
<td>Unmarried Couple</td>
<td>1</td>
<td>-</td>
<td>5</td>
</tr>
<tr>
<td>TOTALS</td>
<td>24</td>
<td>27</td>
<td>23</td>
</tr>
</tbody>
</table>

In the ten active cases all but one required some form of child placement. Three cases involved non-ward care, there were two cases of adoption and two of ward care, one service for another agency in relation to ward care, and one case involving placement in a private boarding home. In the remaining case the problem was such that placement of the children was not considered.
In the inactive group there were eleven placement cases out of a total of 14. Of these, five involved adoption, and two ward care. There were also two placement requests which had not been followed up by the clients, one non-ward case, and one request for service from another agency involving private placement. Thus 20 out of the 24 family cases were concerned with some form of child placement.

**Degree of Urgency at Time of Referral.**

The number of cases referred in which immediate action is required constitutes one of the most difficult features of the work of all Children's Aid Societies. The family cases were therefore roughly rated according to their urgency at the point of referral. Only cases where immediate attention was necessary (i.e., the same day, or the next day) were rated as urgent. Cases rated as fairly urgent were those which required service (in addition to intake service) in not less than two weeks; cases rated as not urgent were those where speed was of no great importance. The category "client withdrew" represents cases where the client, usually after making an urgent request either withdrew the application or dealt with the problem independently. Exactly one third of the cases were urgent at the time of referral and in only a small proportion (one-eighth) was there no element of haste. In three cases the client withdrew the request.

In emergency situations it is often necessary to take quick, definitive action, such as bringing children into care, with little or no information about the case, and with only an
uncertain appreciation of what this move means in the lives of the children and parents concerned. Such action may have a profound effect upon evaluation and treatment. For example, in one of the cases studied, a seven year old Indian boy, found downtown without a place to go, was picked up by the police, apprehended and brought into the care of the Children's Aid Society that same night. Investigation showed that conditions in the parental home were unsatisfactory and he was made a ward. Although he will receive protection, physical care, education, acceptance from agency staff, and a limited sort of community toleration, it is questionable whether, in the long run, he will be as well prepared for adult life as he would have been if he had remained in his own setting, provided that he managed to survive. Through an incident of neglect which may not have been very different in essence from what the boy had experienced before, he was extracted from his admittedly depressed cultural milieu. Having been removed it did not seem possible for the authorities to give official sanction to his return to conditions of which they could not approve. Although hasty apprehension does not always influence subsequent handling of a case to such an extent, because of the urgency in some cases, action, having far reaching consequences, must often be taken before an adequate diagnosis can be made. Because of the emergent nature of much of the work of a Children's Aid Society, it seems

1. Problems concerning the assimilation of Indians into the population occurred several times in the cases studied, suggesting that research into this subject would be of value.
particularly important that caseloads be sufficiently manageable that workers and supervisors do not feel under undue pressure. Many crucial decisions must be made, and if they are to be made wisely, thought and care are essential.

Foster Homes.

Of the 16 foster homes in the sample, 13 were in use and three, all of which had at one time taken children, were vacant, waiting either re-evaluation or closing. No homes which were approved and waiting, or currently under study, were found in the sample chosen. Of the 13 homes in use one had actually turned into an adoption home by June 1955. These parents, who had previously adopted two children from the agency, had been able to accept an element of risk, and had taken a child, not yet legally free for adoption, on a boarding basis, until the legal matters were cleared.

Foster home annual statistics for 1955 show that out of a total of 728 foster homes open at December 31, 1955, 494 or 66.4% were in use and 244 or 33.6% were vacant or waiting to be closed. In the sample chosen, out of a total of 16 foster homes, 13, or 81.2% were in use and three, or 18.8%, were vacant or waiting to be closed. In this group of cases, therefore, the sample chosen is not accurately representative of the total agency picture.

Of these 16 homes, five had been opened in 1955, three in 1954, two in 1953, one in 1951, two in 1948, and one each in 1947, 1946 and 1939. With the exception of the three vacant homes all had been used continuously since opening.
All foster parents in the sample were married couples. In one foster home the foster parents were both in their twenties, and in seven homes both in their 30's. Of the other couples, three foster fathers and five foster mothers were in their 40's, and the two other foster fathers in their 50's. The couple who had been active foster parents since 1939 were in their 60's. In two cases, where homes were accepted for individual children known to them previously, but not used as regular foster homes, the age of the parents was not recorded.

In eight of the 16 cases, foster parents had from one to three natural children, and in all but one case these children were still living at home. In two cases foster families had already each adopted two children from the agency. In another two cases foster parents had one natural and one adopted child, as well as a foster child. In three cases they had no children of their own, and in one case this information was not recorded.

Of the thirteen homes where there were children, twelve had one foster child each, and were therefore used by only one Children's Aid Society worker. The other home was being used for five foster children, and being visited by four different workers. The fact that two of the children were permanently placed, while three were temporarily placed, would account for this rather unsatisfactory situation. Of the three vacant homes, each had cared for one child only. Of the seventeen children in the homes, one had already been placed on adoption probation, and two others had been placed with "a view to adoption".
As a matter of interest, the workers carrying the homes were asked to state their professional opinion of the quality of the 16 homes in relation to the children who had been placed. On this basis five were rated as "very good", six as "good", three as "fair" and two as "poor".

Except for the material in the original home studies, which were adequate in eleven cases, and inadequate in five, foster home files were not very informative. In only two cases, one of which was the home which had turned into an adoptive home, were progress notes meaningfully recorded. In the other cases, in order to obtain an evaluation of a placement, and of the foster parents' attitudes, it was necessary to consult the files of individual children. It seems probable that this lack of evaluative material on foster home files hinders the agency from using them to the best advantage.

Interviews and visits with foster parents were not counted. The reason for this was that these foster homes are not the same ones which are caring for the 25 children in the "children in care" sample. Visits with the foster parents of these children were counted as collateral visits on behalf of the children and it would not be correct to count visits with two groups of foster parents when attempting to ascertain representative monthly totals of visits and interviews.

Adoptive Applicants.

Of the eight adoptive applications surveyed, only one was approved, while seven were still under study. Of the eight cases, three were "active", with a total of one visit and two
office interviews. In one of these cases the home was, following the home study process, approved for placement during June 1955; in another the intake interview only was held, and in another the client withdrew due to pregnancy.

There were five "inactive" cases, all of which were rated as "inactive according to plan". Two of these were homes where successful first placements had been made. In one of these, where adopting parents were over forty, and the first placement had been made seven years before, the adopting parents had not pursued their request after the initial re-application and the worker was undecided whether to follow-up or not. However she had not, as yet, closed the case, because "it might be useful". In the other case a young couple had just completed the adoption of an infant in May 1955, and had applied for a second child. June 1955 was considered too soon to begin re-evaluation of the home in respect to another placement. The remaining three cases represented applications which had progressed little, if at all, beyond the intake interview and had not been followed up by the clients. In one case where the application had been made in March 1955, keeping the case open seemed sound practice, but in the other two cases, where the original applications had been made in 1951 and 1954, it appeared that the clients' eventual decision to withdraw should have been more rapidly ascertained, and the cases closed. This small sample suggests that a fairly high percentage of adoptive applicants never progress to the stage of full home study and approval. In this group it appeared probable that five out of eight applicants would never
be used, not because of known unsuitability, but because of failure on their part to pursue the application.

Children in Care.

Of these 25 cases, 19 were "active" during June and 6 were "inactive", four of these being rated as "according to plan" and two as "needing attention". Total visits in relation to these cases during June 1955 numbered 51, (25 client visits, 26 collateral visits) and total interviews numbered 29.

At December 31st, 1955, Children's Aid Society Annual Statistics show 1184 children in care. The following table presents a comparison by age groups with the sample group of children in care.

Table 4. Comparison of Sample to 1955 Statistics on the Basis of Age Groups.

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Children in Care December 31/55</th>
<th>P.C.</th>
<th>Children in Sample</th>
<th>P.C.</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 - 5</td>
<td>337</td>
<td>28.4</td>
<td>9</td>
<td>36</td>
</tr>
<tr>
<td>6 - 12</td>
<td>369</td>
<td>31.1</td>
<td>8</td>
<td>32</td>
</tr>
<tr>
<td>13 - 21</td>
<td>478</td>
<td>40.5</td>
<td>8</td>
<td>32</td>
</tr>
<tr>
<td>TOTAL</td>
<td>1184</td>
<td>100</td>
<td>25</td>
<td>100</td>
</tr>
</tbody>
</table>

The sample seems to be particularly representative for the 6 - 12 year-old group, but is less so for the other two groups.
The sample group of 25 cases was composed as follows:

20 Children's Aid Society wards, three non-wards and two wards of other agencies. Sixteen of the children, or just over three-fifths, had two placements or under, (ten had one, six had two), and of the remaining nine children three had three placements, and six had four, six, seven, ten, 12 and 14 placements each. The length of time the children had been in care varied from admission in June 1955, to 15 years, but a large proportion (ten) had been in care under one, or between one and two years.

Neglect was the single biggest reason for admission, accounting for 17 children. Four came in because of illness of parent, two pending adoption, one because the responsible parent was working and could not manage the care of a large family, and another because of temporary parental incapacity.

Appraisal of Adjustment.

In working out a rating of the adjustment of the children as good, fair and poor, the following factors, as recorded in the files, were taken into consideration, along with the verbal judgment of the child's worker.

1. Health and general appearance of child.
2. School progress, use of intelligence, ability to get on with peer group, and with teachers.
3. Apparent emotional health.
4. Acceptance of child in foster home, and of foster parents by child.
5. Acceptance of child in the community.
6. Child's understanding and acceptance of reasons for being in care.
7. Child's understanding and acceptance of natural parents.
8. Child's relationship with, and contact with, siblings.
10. Presence of positive attitude toward worker and agency.

The following description is a sketch of good adjustment. The child is in good health or else is receiving adequate medical attention. His progress at school is within the normal range within his intellectual capacity, and he is able to get along with both pupils and teachers. He does not exhibit obvious symptoms of emotional disturbance such as stealing, enuresis or excessive withdrawal. He is loved and accepted by his foster parents having regard for the proposed term of placement. He is accepted as a member of the community as judged by foster parents' observations and school reports. He knows and understands, within the limits of his capacity, the reasons for his being in the care of the agency. He has been able to identify with parent persons, either his own, or the foster parents, and as a result, he has a concept of self-worth appropriate to his age. He is living with, or has meaningful contact, with his siblings. He looks on his worker as a helpful friend and on the agency as a benevolent institution. Where these factors predominate, his adjustment is rated as good. When several of these conditions are unsatisfactory, so that the child is having difficulties which hinder him from reaching his normal potential, and which interfere with his happiness, but where there is
likelihood that he can make use of the help available, his adjustment is rated as fair. Ability to function in the community without serious difficulty would be a condition of fair adjustment. Where most, or all of these conditions are absent, and where the child shows marked maladjustment and trends toward delinquency, mental illness or excessive dependency, his adjustment is rated as poor.

Obviously all the factors listed are not equal in importance, and they will vary considerably according to the age of the child. It is also true that certain combinations of factors, or certain factors present to an extreme degree, have more bearing on the total concept of adjustment than do other combinations or extremes. For example, it is theoretically possible for a child who has a completely negative attitude toward the agency to make an adequate social and personal adjustment, but it would be highly improbable for him to do so if his concept of self-worth were extremely low.

These adjustment ratings are quite rough and valuable only as an index of probabilities.

On this basis, the adjustment of the twenty-five children studied was considered good in eleven cases, fair in eleven, and poor in two. These two children had had twelve placements and fourteen placements respectively, and had been in care eleven and nine years respectively. One of these was the most active of all the cases, the worker having noted eight visits and 17 interviews either with him or on his behalf, during the month of June. One of the children whose adjustment was rated good, was a baby of 18 months who, after a period of observation
for a medical difficulty, was, in June, successfully placed on adoption probation in a home which was able to accept the one to four possibility of the development of a hereditary eye defect.

In the twenty-five cases the following contact with parents was noted:

- Parents paying some maintenance, visiting child and consulting agency. 2 cases
- Parent paying only. 1 case
- Parent visiting child and consulting agency. 4 cases
- Parent visiting child only. 3 cases
- Parent consulting agency only. 3 cases
- No parental contact for over 5 years of since commitment. 12 cases

The living arrangements of the twenty-five children present a composite picture of the various types of care provided by the agency. Throughout the month of June 1955, by far the largest number (14) were in foster homes on a boarding basis. One child was placed from a foster home to an adoption home within the month. Two others were in free foster homes at the beginning of the month, but one of these changed his status to "adoption probation" by the end of the month, as his mother's consent to adoption had been finally obtained during June. Three children were self-supporting, two of them having remained in their foster homes, and the other being a ward of another agency who had come to work on the boats running out of Vancouver. There was one child placed in each of the following situations: a subsidized baby home, an agency receiving home, a commercial group living home for girls, a commercial boarding home for
older boys and the Boys' Industrial School at Brannan Lake, B.C.

Services rendered the children in the nineteen active cases covered a wide range. One child was taken to the Provincial Child Guidance Clinic for a pre-adoption appraisal; several had medical examinations; camp arrangements and school reports were much in evidence in this month; parents were interviewed and visits with the children arranged. One boy, who had recently been committed from a "skid-row" area, was taken back to the district for a brief visit with his old friends, was fitted for new glasses, and paid a visit to his sister in her foster home, all in one afternoon. He also used the time for discussing with the worker his concern over his mother's recent committal to the mental hospital. The boy in the Industrial School was visited by the Children's Aid Society worker during June. Help to older children regarding summer employment was noted several times. One child was placed for two weeks on account of her mother's confinement. There was much discussion with foster parents regarding the adjustment and progress of children. On most visits, children too, were seen, and appeared to have sound, personal relationships with the workers.

Among the children in care there were six "inactive" cases, four being designated as "inactive according to plan" and two as "needing attention". One of these cases was Mary North, described in Chapter III as an example of inadequate service, the other was a somewhat similar case of a little girl, placed in a rigid, and rather unsatisfactory foster home. Both cases were badly in need of more careful diagnosis and attention.
Children on Adoption Probation.

The British Columbia Adoption Act requires that persons wishing to adopt a child, must submit legal notice of intention to adopt to the Superintendent of Child Welfare of British Columbia, at least six months before the adoption petition is set down for hearing in the Supreme Court of the Province. At the request of the Superintendent of Child Welfare, the Children's Aid Society takes responsibility for supervising and making a report on all adoption placements within the City of Vancouver, and for agency placements and private placements in North and West Vancouver. Agency placements are under supervision for a year, but most private and relative placements are not referred until the Superintendent does so after receiving the six months notice of intention to adopt. Thus, it is necessary to make a study and prepare a report which will be used by the Superintendent as a basis for her court report within a period of about six months.

Of the ten cases selected for study, seven were active. During the month there was direct service totalling five visits and one interview spread over four cases, and the other three cases had other forms of contact, such as letters and telephone calls. There were three "inactive" cases, two rated as "according to plan" and one as "needing attention".

Of the ten cases of children on adoption probation, five were agency placements (two of these were second placements), one was a private placement, and four were relative placements where one of the adopting parents was also the child's natural parent.
The ten cases involved twelve children as there were three in one family in one of the relative placements. The ages of the children varied from one month to 18 years, five being under eighteen months (all agency placements). In the remaining group of seven children, there were children aged five, eight, 15, 16, 18 and two aged nine. The single private placement had been made in April 1947, and had not yet been completed because of inability to secure the consent of the legal father for the adoption. The agency placements had all been made within sixteen months or less. In all the relative placements the children had always been with one or other of the parents.

In this group, one agency placement, where the adopting mother was showing neurotic symptoms, was a source of concern. The other cases were straightforward. In one case a final visit was paid, and the report prepared for the Superintendent; in three, the final report had already been sent in and the agency was waiting confirmation of the completed adoptions before closing the files; the other cases, which all appeared satisfactory, required periodic supervision during the adoption probation period. The one case which was "needing attention" was a case where the adoption had never been legally completed, which had been referred for re-evaluation in May 1955, and had not been followed up in June.

Summary of Findings Regarding Activity and Inactivity of Cases.

Findings regarding activity and inactivity of cases, and a statistical count of services rendered are presented in
Table 5. As previously explained, visits and interviews in regard to the foster homes studied were not counted and foster homes are therefore not included in Table 5. Services rendered in relation to children in care seem significantly higher than services in relation to any other group. The fact that seven (29%) of the family cases in the sample fell into the category "waiting closing", may have biased the findings in relation to services to family cases. However it indicates that the agency is probably carrying, as open cases, a large proportion of family cases which ought to be closed statistically, thus unduly inflating caseload figures. Of the 67 cases studied, 39 were "active" during June 1955 and 28 "inactive". Only six of the "inactive" cases were rated by workers as "needing attention".
Table 5. Indications of Case Status and Activity. Children's Aid Society (Vancouver), June 1955.

Total for 67 cases in sample.

<table>
<thead>
<tr>
<th>Index</th>
<th>Children in Care</th>
<th>Children on Adoption Probation</th>
<th>Family Cases</th>
<th>Adoptive Applicants</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Active</strong></td>
<td>19</td>
<td>7</td>
<td>10</td>
<td>3</td>
<td>39</td>
</tr>
<tr>
<td><strong>Visits</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Client</td>
<td>25</td>
<td>5</td>
<td>11</td>
<td>1</td>
<td>42</td>
</tr>
<tr>
<td>Collateral</td>
<td>26</td>
<td>0</td>
<td>3</td>
<td>0</td>
<td>29</td>
</tr>
<tr>
<td><strong>Interviews</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Client</td>
<td>28</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>29</td>
</tr>
<tr>
<td>Collateral</td>
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<td>0</td>
<td>1</td>
<td>2</td>
<td>4</td>
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<tr>
<td>Letters</td>
<td>6</td>
<td>5</td>
<td>6</td>
<td>1</td>
<td>32</td>
</tr>
<tr>
<td>Telephone Calls</td>
<td>14</td>
<td>2</td>
<td>11</td>
<td>5</td>
<td>32</td>
</tr>
<tr>
<td>Other Services</td>
<td>19</td>
<td>1</td>
<td>7</td>
<td>0</td>
<td>27</td>
</tr>
<tr>
<td><strong>Total (Items of Service)</strong></td>
<td>119</td>
<td>14</td>
<td>39</td>
<td>9</td>
<td>181</td>
</tr>
</tbody>
</table>

| **Inactive**        |                  |                                |              |                     |       |
| According to plan   | 4                | 2                              | 4            | 5                   | 15    |
| Waiting (a)         | 0                | 0                              | 7            | 0                   | 7     |
| Needing Attention   | 2                | 1                              | 3            | 0                   | 6     |
| **Total (Inactive Cases)** | 6 | 3 | 14 | 5 | 28 |

Total cases 67, plus 16 foster homes of which 3 were not in use.
Visits and interviews made to foster homes were not counted.
(a) Awaiting closing or transfer to "in care".
Time Study Findings Compared to Case Findings.

The total number of hours worked by the group of workers whose cases are under study was computed roughly, rather than exactly. Thus the number of workers, (46) was multiplied by the number of working days in June 1955, (22) and the hours in a working day, (7), making a total of 7084 hours or 154 hours per worker. It is likely that this figure is fairly accurate, as absence of workers for holiday and illness would, probably, be balanced by overtime and work done on night, and weekend duty. Using the figure 7084 hours for all the workers studied, and 1633 hours for the time spent by these workers on visits and interviews as shown by the Time Study (Table 1), it was calculated that the proportion of worker time spent on this activity was 23 percent. During the month each worker spent 9.7 hours on 18.9 interviews and 25.8 hours on 74.89 visits, or 35\(\frac{3}{4}\) hours on visits and interviews. Thus in this 22 day month a worker spent an average of one hour and 37 minutes per day on visits and interviews.

Totals of visits carried out by one worker as revealed in the Time Study (i.e. 75) (Table 1) show a close parallel to numbers of visits held on the 67 cases reviewed (i.e. 71) (Table 5).

1. Other direct services to clients such as telephone interviews and letter writing, and "enabling services" such as travelling, supervision and case recording undoubtedly account for a large proportion of the expenditure of the remaining time. These necessary parts of the professional job are not covered by this study but some suggestions for further consideration are made in Chapter 4.
Totals of interviews show a wide difference, the average number of interviews being 19 according to the Time Study, while the interviews held on the 67 cases reviewed totalled 33. However this discrepancy might be explained by the fact that one of the children in care, in the sample, had 17 interviews in one month, which could not be considered typical. Taking this fact into account, the degree of similarity between Time Study figures and sample figures is striking.
Chapter 3.

An Appraisal of Casework Services.

The adequacy of service must be considered in relation to the needs of clients but also in relation to the declared functions of the agency. What, however, do we mean by "needs"? It is now well understood that needs can never be wholly met: all people have some unsatisfied desires, and the whole complex organization of society is mankind's attempt to meet human requirements and aspirations. Social welfare agencies are organized expressions of the public conscience, an attempt to meet need in some specific area through appropriate services. Of course, the fact that an agency has a defined function and programme of services does not free it from the obligation for recognizing other social problems, and participating in planning and social action for welfare purposes in the community at large. But it must do its first job first. The method of giving help is also of importance. Social workers believe that the process of enabling the client to make use of needed services through the medium of a professional relationship will, in itself promote growth in the client so that he will be better able to cope with his own life. In evaluating agency services, therefore, it is necessary to consider three elements -- clients' needs, agency functions and services, and the quality of professional relationships.
As Gordon Hamilton has said "helping an individual to avail himself of the social program of the community is the chief business of casework",¹ and in doing this the goal of treatment is "to support or maintain the clients' current strengths by helping him to mobilize capacity and resources to meet his current life situation".² While it is sometimes possible "to modify the clients' attitudes and patterns of behaviour by increasing his understanding of himself, of his problems and of his part in creating them"³, casework of this kind requires a great deal of skill and time, as well as the active involvement of the client. Many of the clients of a Children's Aid Society are not capable of using this kind of service, nor are they asking for it. One or two of the case examples will illustrate situations where casework on this level might have been appropriate, but was not given for various reasons.

Judgments regarding adequacy of service have been made on the basis of the total service rendered the client during his contact with the agency rather than on the service rendered only in June 1955.


³. Ibid.
Thus, even though the fact that a case which could have been closed, still remained open in a statistical sense in June 1955, thus indicating some administrative weakness, service is not rated as inadequate if, at the time the case was active, adequate service was given to the client. On the other hand, if serious errors, affecting the whole conduct of a case, were made during the months prior to June 1955, but adequate service was given in that month, the case is rated on the basis of the total service given. However, cases of children in care, opened years ago, are also judged in terms of practice generally considered sound at that time, rather than by present day standards of practice. Present policy regarding adoption placement of children with handicaps is a striking example of this kind of change. Although formerly it was considered good practice to bring up "unadoptable" children in ward care, this point of view has changed during the past decade, and it is now judged essential to make every effort to place those children who need families, and who can benefit from and contribute to family life, with adoptive parents who can accept them, in spite of the limitations they may have.

With these considerations in mind criteria for adequacy of service were drawn up as follows: Service was considered adequate if:

1) In a new case, service was made available within an appropriate time-interval following application; in an open case, service was not significantly limited through lack of time.

2) Worker-client relationship gave evidence of respect for, and acceptance of the client; of ability to make fitting use of authority where necessary; and of the worker's desire to help.

3) The treatment plan and services rendered were appropriate to the presenting problem.

4) There was evidence of continuing psycho-social diagnosis, with corresponding modification of treatment plan, if needed.

For many years child caring agencies were so absorbed in the struggle to achieve satisfactory standards of physical care, supervision, clothing, and medical services that they were almost inarticulate on the subject of child placement as casework process. Only recently has it been clearly recognized that child placement must be viewed not as an end in itself, but as a part of a total treatment plan, developing out of a sound social diagnosis. Inadequate planning can negate the results of the best standards of physical care. Thus in evaluating the child

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1. The length of an "appropriate time interval" would vary greatly with the nature of the case. Some neglect complaints require immediate (same day) attention, while the application of an adoptive applicant might be delayed to a month, or longer, provided the lapse of time had been agreed upon.
placing programme of an agency, both standards of care and adequacy of casework planning must be kept in mind.

Three rating categories were used, "adequate", "fairly adequate" and "inadequate". In addition, the degree to which lack of time appeared to be a cause of limitation of service was calculated under three headings; "main cause", "contributing cause" and "not a cause".

Table 6: Qualitative Ratings on Services Rendered.

<table>
<thead>
<tr>
<th>Type of Case</th>
<th>Quality of Service</th>
<th>Limitation of service due to lack of time</th>
<th>Total Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Adequate</td>
<td>Fairly Adequate</td>
<td>Inadequate</td>
</tr>
<tr>
<td>Family Cases</td>
<td>6</td>
<td>12</td>
<td>6</td>
</tr>
<tr>
<td>Children in Care</td>
<td>10</td>
<td>10</td>
<td>5</td>
</tr>
<tr>
<td>Children on adopt.,</td>
<td>6</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>probation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Adoption Homes</td>
<td>5</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Foster Homes</td>
<td>3</td>
<td>8</td>
<td>5</td>
</tr>
<tr>
<td><strong>TOTALS</strong></td>
<td><strong>30</strong></td>
<td><strong>36</strong></td>
<td><strong>17</strong></td>
</tr>
</tbody>
</table>
Coverage is one important aspect of function and service. Because of the Children's Aid Society's statutory obligations, and also because of underlying philosophy, it has been agency practice to accept for service all cases which fall within the agency's function and to make an effort to meet the most essential requirements in as satisfactory a manner as possible, rather than to limit service in accordance with resources available. Obviously the "amelioration of conditions which lead to neglect" (of children) could, if broadly interpreted, embrace almost the whole field of health and welfare services. As a result, there has been a tendency for cases involving children for whom there is no adequate programme in the community, to be referred to the Children's Aid Society, whether or not the services which have been developed in the agency are adequate to meet the needs. Situations in point might be emotionally disturbed, or delinquent children, hopefully referred by other agencies in the community, for "placement in a good foster home" because no treatment centre was available or, because it was considered the resources for delinquents might do more harm than good, and that a foster home should be "tried first".

Chronically inadequate families presenting a constellation of social, psychological and economic problems, but also containing positive values for family members, have been shifted about uneasily among public assistance agencies, family agencies, and children's agencies. No agency considered itself equipped or was anxious to engage in the long term financial and casework help necessary to meet the needs of these clients. Nor
were agencies prepared to carry out the research necessary to achieve an understanding of the most appropriate methods of treatment. A number of these cases are usually included in Children's Aid Society caseloads, often being carried in cooperation with other welfare agencies, such as the City Social Service Department. Services to these families have, on the whole, been ineffective. The needs are great, the resources few, and the families themselves not making active requests for help, except on an emergency basis. Their needs for service are often superceded by the more pressing demands made on agency services by critical situations of neglect, abuse, or abandonment of children, the requirements of unmarried mothers, or cases where placement must be speedily arranged. Recent efforts have been made to define and clarify the areas of service appropriate to the Children's Aid Society, in terms of the proper functions and services of other community agencies, such as the Family Service Agency. 1

The extent of the present demand for service made by the community, as reflected in intake figures for 1955, is shown in Table 7.

Table 7. Intake in the Children’s Aid Society (Vancouver, 1955.

| Category                                                        | New Cases |        |        |
|                                                                | Total     | Year   | Monthly Average |
|                                                                |           |        |                |
| **Total Family Cases**                                         | 1718      |        | 143           |
| (a) referred; no case made*                                    | 482       |        | 40            |
| (b) accepted for service                                       | 1236      |        | 103           |
| **Adoption Applications**                                     | 269       |        | 22            |
| **Foster Home Applications**                                  | 341       |        | 28            |
| **Children on adoption probation**                            | 178       |        | 15            |
| private or relative placements                                 |           |        |                |
| **Total accepted for service**                                | 2024**    |        | 168           |
| **Children Placed**                                           |           |        |                |
| Admitted to care                                              | 416       |        | 35            |
| Placed on adoption probation                                   | 164       |        | 14            |
| **Total**                                                      | 580       |        | 49            |

* Applications referred to other agency or resource.

** This figure excludes private boarding homes (not included in this study).
Evaluative Criteria: Illustrations:

Ten case examples, representing approximately one out of every eight cases in each category in the sample group, were selected in order to serve two purposes: the illustration of typical case content, and the description of practice in the three groups of cases which had been rated as giving adequate, fairly adequate and inadequate service. Three family cases and three children in care showing adequate, fairly adequate and inadequate service in each category were chosen. Two foster homes, one adoptive applicant, and one child on adoption probation, giving one example of adequate, and one of inadequate service, and two examples of fairly adequate service, were selected.
Cases illustrating Adequate Service:

The effective use of time is illustrated by the Eyre case. On June 5th, 1955, a neighbour who identified herself, telephoned a complaint that four Eyre children were being neglected. The complainant stated the children were begging around the neighborhood for food, and the mother was not doing anything about the situation. All the money in the family was either "gambled or drunk away". The district worker visited on June 8th and found the home clean, though barely furnished. Mrs. Eyre, who seemed to be a capable woman, stated she was in financial difficulty as her husband had had very little money to leave her, when he went out of town to work two weeks before, following several months of unemployment. They had not paid their light bill and electricity had been cut off. She denied the neglect complaint and stated she expected to receive money from her husband immediately. The worker gave reassurance of the agency's interest in enabling children to remain with their parents and recognized Mrs. Eyre's expressed desire to be a good mother. She was invited to get in touch with the agency if she needed help. Two days later a staff member of another social agency, who knew the complainant, telephoned stating the situation in the home was serious and the worker had not obtained full information. The worker immediately got in touch with the complainant, who stressed the difficulty of the financial situation and the fact that there was no heat, light nor means of cooking, since the electricity had been discontinued. She also stated the mother was "afraid" to apply for Social Assistance.
Two days later the worker called at the school where the principal described the two older children, who were attending, as well behaved and doing good work. He was aware of the financial problem, and believed the mother was doing the best she could. The worker then visited the complainant who repeated much of the same information. Her attitude appeared somewhat "spiteful", although there were elements of genuine concern.
The complaint that the children were begging was not supported.
The mother was then visited, and, on this occasion, she was more ready to share her problems. She told the worker she had felt afraid of social agencies as she had once been a "welfare child". She expressed concern over the lack of electricity and the failure of her husband to send money, though she was quite certain this was not due to any fault of his. The worker offered help with both these problems and also spoke of the possibility of Social Allowance if all else failed. The same day the worker was able to arrange with the B.C. Electric Company that the electricity would be turned on immediately. Though unsuccessful in attempts to reach the central office of the husband's place of employment, the worker found, when visiting the mother again the same day, that she had just received a substantial cheque from her husband. Before closing the case, a follow-up visit was paid and the family found to be managing satisfactorily. They were planning to move up the coast to the father's place of employment.

In this case three visits were paid to the mother during June, and there were three collateral visits, two for the purpose of assessing the situation, and one with the practical purpose
of having the electricity turned on. There were also several
telephone calls. A helpful relationship was established, even
though contact was non-voluntary, a tentative diagnosis made,
strengths supported, appropriate practical assistance given, and
the case closed promptly after further assessment. It was not,
in essence, a case of neglect but rather of generalized family
difficulty, complicated by the mother's distrust of social
agencies.

The case of Thomas Bryan, born January 1, 1954, and
finally placed for adoption on June 17, 1955, is a convincing
illustration of the importance of integrated services to
parents and children. One worker carried both mother and child
from the time the case was opened in November 1953 until it was
closed December 1955, six months after the child's adoption
placement.

Thomas, who was half Hawaiian, and thus difficult to
place for adoption, came into the care of the Children's Aid
Society on January 11th, 1954, as a non-ward pending adoption.
He was placed in a temporary foster home where he was supervised
from the health standpoint by medical staff. There was slight
difficulty with the formula adjustment in the beginning, but he
soon progressed normally, and developed into a healthy, vigorous
child.

Thomas' mother, a brilliant, but unstable woman in
her forties, capable of earning a good salary, decided on adoption
after considerable ambivalence. Unfortunately, neither the
Children's Aid Society nor the Provincial Child Welfare Division,
was able to offer an adoption home which would meet mother's
request for superior standards, and also be accepting of a child of mixed racial origin. Before the right adoptive parents were finally located in June 1955, no less than ten possible homes had been explored for this child. Three couples had been sufficiently interested to visit the child, but after seeing him, had decided against taking him because of his rather dark colouring.

After the first two failures to place, of which the mother was aware because the child was a non-ward, the mother became discouraged and decided to remove her child from non-ward care, and place him in a private boarding home at her own expense. The worker helped her to secure a suitable home; it was agreed that the mother would continue to work with the agency, and that efforts to obtain a suitable adoption home would still go on. Thomas was discharged to the mother and placed in the private boarding home at the end of April 1954, when he was just under four months old. He continued to make good progress in this home. The case was discussed with the agency psychiatric consultant as the mother was making enquiries regarding psychiatric help for herself. It was felt such help was indicated as the mother's personality disturbance seemed severe. The importance of continued planning toward adoption was also stressed. The mother began treatment with a psychiatrist and continued to work and pay for the child's care until she developed an acute mental illness in September 1954. She went to Crease Clinic and as her relatives did not wish to continue to assume responsibility, the agency was able to apprehend Thomas as being in need of protection. Because of the acute nature of her illness,
planning could not be discussed with the mother at the time, and thus apprehension was the only possible course of action. Fortunately Thomas did not have to be replaced, as the private boarding home parents were willing and suitable to become agency foster parents. The mother made a satisfactory recovery and was discharged from Grease Clinic at the end of December 1954. On March 7, 1954, the agency took court action for guardianship of Thomas after having gained the mother's somewhat reluctant agreement to this plan. It was considered guardianship would offer the child more protection, particularly as no suitable adoption home had, as yet, been secured. Thomas remained in his foster home and continued to develop well. The worker visited him occasionally during this period and also continued to see the mother on a supportive basis. Beside protecting Thomas from the possibility of eccentric alteration of plans by the mother, the fact that he was a ward made it possible to continue with the search for adoptive parents, without making the mother aware of every move and thus contributing to her disturbance.

Finally, in June 1955, the Child Welfare Division located a suitable adoptive couple, who were attracted to Thomas as soon as they visited him. At this point the matter was discussed with the mother, who was pleased with the information about the home, and willing to sign consent to adoption. The adoptive couple spent several days in Vancouver getting to know Thomas in his foster home, and he was able to go with them quite comfortably when he was transferred to their care on June 17th. A particularly perceptive letter written to the foster mother by the adoptive mother in September 1955, gave a thoughtful descrip-
tion of ways in which various problems of adjustment had been worked through and Thomas had become "not a dear little baby, but our dear little baby".

Adequate service was given this child, although there was only one concentrated period of work with him, which occurred at the time of his adoptive placement. This involved seven interviews or visits with the mother or child and three collateral visits to the foster parents and the doctor. The Children's Aid Society worker met the adoptive parents and went with them twice to the foster home, but the responsibility for work with them rested with the Child Welfare Division worker. Thus, the use of time in direct relation to this child, although not very extensive, except in the month of June, was well focused on the most important aspects of the case. It is also clear it would have been of little value if continued service to the mother had not been closely integrated with planning for the child.
The Campbell adoptive home study is also an example of adequate service. In the course of the study which continued over a period of six months, November 1954 to May 1955, Mr. and Mrs. Campbell were interviewed together three times, twice at home and once in the office, Mr. Campbell was seen alone at the office twice, and Mrs. Campbell alone at the office once. There were also numerous telephone calls, several letters and detailed medical reports on both parents. Their natural child, Dawn, aged six, was seen with the parents on several occasions. Between mid-December and mid-March contact was slight as the Campbells were building a house. Both parents were interested in the home study and highly co-operative in sharing personal information about themselves, their child and their own parent-child relationships.

The Campbells were a strikingly good looking young couple in their early 30's. Both had professional or business backgrounds and had come from happy, privileged, though rather strict, homes. Both had siblings with whom they maintained friendly relations. Parents of both were alive and in good health, with many interests, and active in community life. Mr. Campbell had unsuccessfully tried to work with his father in business but, in spite of his withdrawal from the business, and his expressed resentment of his father's need to dominate, they continued to be fond of each other. Mr. Campbell seemed slightly less mature than his wife, with more need to assert himself, but the marriage was a very happy one and the partners' personalities complemented each other. Mrs. Campbell had had repeated miscarriages after Dawn's birth although she had
received expert medical attention. Otherwise, both parents were in excellent health. Dawn was an active, "highly-strung", intelligent child with many friends. During the early part of the home study she was occasionally enuretic in the day time. The parents attributed this to disturbance caused by a recent move and the father's change of employment. The parent-child relationships gave evidence of much affection and interest, and the worker came to the conclusion there was no basic difficulty between parents and child. By the time the home study was completed this diurnal enuresis had disappeared.

Mrs. Campbell had had two years at University, and Mr. Campbell had a BSc. degree. He had been somewhat slow in settling into a permanent business position, and while he had always maintained his family comfortably, and had financial security, he had changed jobs several times. When the home study was completed he had been in his job several months and was pleased with it. Like his father, Mr. Campbell had considerable drive to succeed, but he was, at the same time, a devoted family man who spent much time with his wife and child.

Both parents freely discussed such matters as heredity, illegitimacy and telling a child of its adoption, and in doing so gave evidence of flexibility, tolerance and informed attitudes. They requested an infant "like themselves" but made no demands regarding sex or background. In May the home was approved for an infant of either sex. A suitable infant was discussed with them at the end of June 1955, and a placement made early in July. The child's progress was excellent and the parents very happy with him. Dawn, too, was pleased with the child, and showed no
jealousy or regressive behaviour. The parents' statements of satisfaction were confirmed by observation during several supervisory visits. It appeared there was no difficulty in this case in regard to availability of time. The pace was leisurely, the recording detailed, and the worker seemed intent on making an adequate study.
Cases illustrating fairly Adequate Service.

The case of Susan Ross, an unmarried mother of 23, is an example of service, limited to some extent by lack of time, but also by the worker's understanding of possible treatment goals.

Susan, a healthy attractive and intelligent girl, five months illegitimately pregnant at the end of September 1954, applied to the Agency for help in arranging adoption placement for her child, expected at the end of January 1955. Susan had been referred by the woman in the satisfactory work home which she had located for herself. As Susan had had no medical care she was referred, at her request, to a free, public clinic. Susan's defenses seemed high and she gave an impression of poise and sophistication. The intake worker gave assurance of the agency's desire to help and discussed the adoption programme in a general way.

Although the district worker telephoned Susan ten days following her application, an appointment was not arranged until November 5th. It is likely that pressure of work was at least partly responsible for this delay. From November 15th until mid-January, Susan was seen in the office every two weeks for approximately an hour's interview. Later on two visits were paid. Susan quickly related positively to the worker who was obviously interested in her and liked her. The superficial defensive structure was not strong and Susan was able to bring out many things with her worker; her ambivalence about keeping her child, her mixed feelings about the putative father to whom
she had been intensely attracted, her rivalry with a younger married sister who had had a baby, her fear of death in childbirth, her unrealistic need to deny negative feeling. The child, a healthy baby girl, was born on January 19th without complications, and was placed for adoption on February 2nd, 1955. Although there was a brief period of hesitation shortly after the baby's birth, Susan never really faltered in her request for adoption. This realistic plan was supported by her worker and Susan seemed firmly resolved on adoption at the time placement was made. Subsequent contact with the worker consisted of a telephone call concerning job placement and future plans.

The client made good use of the services offered, and there was some evidence of maturation in this case. However, the summarized record gave no indication of an attempt at diagnosis or conscious treatment process. The dynamics of much of the material seemed to have escaped the worker. Family history and relationships, which revealed a meaningful parental separation, were treated merely as "background information" for the baby. Although she was given considerable acceptance and freedom to express herself, no apparent effort was made to have the client see her current ambivalent feelings more clearly, and relate these to patterns of behaviour and self-understanding. There is no evidence to suggest the client acquired much understanding regarding the feelings which led to her illegitimate pregnancy, so that she would be enabled to avoid a recurrence of the situation. It seemed evident from the record that the client would have been willing and able to use help of this kind, if it had been available. Such a level of casework would have required
weekly interviews and considerable worker and supervisory skill.

In the Miller foster home the only cause of limitation of service appeared to be lack of worker time. The home, which was fully studied during the months of November and December 1954, was put into immediate use at the beginning of January 1955. The emotionally disturbed child placed at that time received excellent care and made unusually good progress. No other placements were made. The worker visited often at the beginning of the placement but later, had to curtail visits more than she felt was desirable. The foster mother valued, and made good use of, the caseworker's support and help. Because a good relationship had been established in the early period, the use of telephone contacts between visits which were paid every two months after the placement had become secure, made possible a fairly satisfactory standard of service.

The foster home was that of a happily married couple in their early thirties. They had three natural children, a boy of eight and a half, a girl of seven, and a boy of two. All were happy, confident children making satisfactory progress. The marriage seemed exceptionally satisfying and the parents were able to discuss, realistically, the normal adjustment problems which they had successfully worked out. The foster father who was the head of a department in a large store, earned an adequate salary and they were buying their house. The atmosphere was comfortable and homelike and housekeeping standards were not rigid. The parents took an active interest in community affairs, Parent Teachers Association, and their children's pursuits. They enjoyed their own children immensely, and their
motive for wanting to take a foster child was to round out their own family, and also to help a child. They had planned to have four children, but Mrs. Miller had been advised against another pregnancy as her three children had been delivered by Caesarian section. The family doctor confirmed that all members of the family were in good health and their references, including the school principal and school nurse, spoke highly of the home, particularly of the quality of family relationships. Both parents had come from contented, middle class backgrounds, although Mr. Miller felt he had been somewhat overprotected as a boy. Relationships with relatives were cordial. The Millers asked for a girl of six, and felt they could accept a child who was either slightly retarded or emotionally disturbed, but did not want a child of mixed racial origin or one with a marked physical handicap.

In January 1955, a six and one half year old girl, who had been severely rejected, and whose symptoms were stuttering, withdrawing and lack of self-confidence, was placed in the home after suitable preparation. She was well accepted and a recent child guidance clinic evaluation confirmed the worker's opinion that her improvement had been remarkable in view of her degree of disturbance. In a case where such good initial work was done, and where the conditions for success are present, it seems unfortunate that a conscientious, careful worker should be limited by lack of time, from giving the maximum service she considers desirable. Although the foster home study was adequately recorded, no progress notes regarding the child in the home, with the exception of date and fact of placement, had been put in the
foster home file, although the child had been in the home for six months in June 1955. Progress notes regarding the child were obtainable in the child's file.

Danny Lane born September 30th, 1945, and his four brothers and sisters were brought into the care of the Children's Aid Society as wards in June 1954. The father had requested permanent placement for the children when his wife finally deserted with another man, following a ten-year pattern of occasional incidents of leaving home. Efforts to improve the marital situation had failed. The father had tried to care for the children for a time with the help of elderly grandparents, but this did not work out. The children were poorly looked after physically, and also showed various signs of emotional disturbance, such as excessive worry, undue quietness, inability to endure normal frustration, and occasional violent temper outbursts. As the father worked out of town much of the time and felt unable to make a suitable plan for the children in the foreseeable future, ward care was mutually decided upon.

The youngest child, aged one year, was placed, with the father's agreement, in a permanent home with a view to adoption. Danny, aged nine, and the other three children aged eleven, ten and five, were placed together in a rather low standard country foster home, which they had visited once, prior to placement. The foster parents were elderly, kindly and religiously motivated. The children settled down fairly well but Danny was concerned about the placement of the baby in a different home. The father visited regularly and was well accepted by the foster parents. The mother and her man friend visited occasion-
ally, unannounced, and these visits appeared to upset the children who felt bitter toward their mother. The children received the usual material benefits of being in care, adequate clothing and medical and dental care, Christmas presents, camp outings. They were visited in their foster home approximately every two months and careful enquiry was made into each child's progress. Difficulties in adjustment were discussed with the foster mother. The worker had a friendly relationship with the children. The father continued to visit and to take a constructive interest. His relationship with the worker was pleasant and cooperative, and he got in touch with her about once a month, or whenever he came into Vancouver. The mother avoided all contact with the agency. The children were still in the same foster home in June 1955, and appeared, from observation, to be getting on reasonably well. There was considerable improvement in general appearance and behaviour. There had been no crisis of any kind, nor was there any thought of change. The case had been transferred once, from the worker who placed the children and did the original work with the family, to the regular country worker who also carried both parents and children.

This case had many satisfactory aspects, the major ones being the acceptance of the four older children in one foster home, the apparent stability of the placement, the kindness and tolerance of the foster parents, particularly the foster mother, and the continued constructive interest of the father. Considering the size of the current caseloads in the agency, it was a creditable piece of work with attention and
effort being focused upon the major essentials. However there
were unsatisfactory aspects. The foster parents were too elderly
to have the care of a child as young as the five-year old,
there was a certain rigidity in the home and an undue emphasis
on the restrictive aspects of religious belief. Because of the
current shortage of foster homes, particularly for large
families, the worker would have little choice in this respect.
The main problem, however, ran deeper. Each of the children,
with the possible exception of the eldest, a boy, had
experienced considerable affectional and physical deprivation
and were suffering from emotional disorders of considerable
severity. Danny, for example, was effeminate, easily hurt,
avoided the company of boys and sought out girls; was
particularly solicitous and fawning toward mother figures. There
was no psychiatric assessment, nor was one proposed, but judging
from these symptoms, it is probable that supervised foster home
placement alone, would not help Danny to achieve the satisfactory
degree of adjustment which might be his if skilled, intensive
casework or, perhaps, psychiatric help, were possible. More
should be done to help these children with their feelings around
the breakup of their family, the roles of the parents, and the
loss of the baby. Community resources to enable a fairly
adequate father to care for his children in his own home were
a fundamental lack in this case, but would be difficult to
develop. In order to do the individualized work with each child,
which would likely be required for maximum results, much more
time and more highly skilled staff would be necessary. Possibly
after the main problems had been worked out, there could be a
return to a less intensive type of contact.

The Hutton-Taylor adoption, the case of an infant, placed for adoption by the Children's Aid Society, in an approved adoptive home, was a case where the chief cause of limitation of service was due to lack of worker time. Although the recording was very condensed, the home study gave a clear picture of an ordinary, working class couple, both aged 39, who maintained a modest, though comfortable home. They were fond of each other, in good mental and physical health, and interested mainly in family, friends and relatives. In spite of intensive treatment, Mrs. Hutton had not become pregnant during seven years of marriage. An infant boy, in good health, and of average working class background, was placed in the home in October 1954. Supervisory visits were paid in November 1954 and April 1955 and contact was also maintained by telephone. The child was well accepted by parents and their relatives and his progress was satisfactory and uneventful. He contributed much to the happiness of both parents and his care, in which both participated, gave them much pleasure. Service in this case was rated as fairly adequate, because, while results were satisfactory, the supervisory visits could not be considered frequent enough to ensure sufficient help during the probationary period.¹

If a choice must be made, it is preferable to spend time on the home study, rather than on supervision after placement, but an adequate standard of service in both areas should be the goal. "After placement the aim is to give support and (to) nurture the potentialities of the couple for good parenthood --- all the answers will not lie in the study and selection of the home". ¹

Cases illustrating Inadequate Service.

The Morgan case re-opened May 10th, 1954, and not recorded after May 31, 1954, was an example of a situation where inadequate service seemed largely due to lack of time. On May 10th, 1954, Mrs. Morgan, a 24-year old woman separated from her husband, applied for private boarding home placement for her seven-week old baby, having been referred by the Foster Day Care Association to whom she had gone first. She had been known to the Children's Aid Society as an unmarried mother, four years previously. She had been the eldest of five children in a home of rigid religious standards from which the father had deserted. Mrs. Morgan had relinquished her illegitimate child for adoption, although this had not been an easy decision for her to make. A few months prior to re-application to the agency, Mrs. Morgan had repeated the family pattern of separation. She had left her husband and returned to the home of her mother and four younger siblings. The grandmother was receiving Mother's Allowance which she supplemented by the odd day's work. Mrs. Morgan had also been in receipt of Social Allowance for several months just prior to, and after, confinement. However, in line with the policy of the public assistance agency, she had been advised to obtain work, and had been cut off social assistance at the end of April. Mrs. Morgan would have preferred to remain at home to care for her child, "for a time at least". She reported that the child was thriving and that she enjoyed looking after her. Mrs. Morgan's mother was not willing to assume this responsibility because of her need to supplement Mothers' Allowance. The two agencies concerned
consulted each other on the telephone, but never held a proposed conference, evidently due to changes in staff. After two interviews with the mother and several collateral telephone calls, the record ceases and the following information was gained by verbal communication with the worker. Mrs. Morgan found a job and the Children's Aid Society referred her to a private boarding home in which she placed her child for several months. During this time there was telephone contact between the mother and the worker but she was never interviewed. The child was visited occasionally by the Children's Aid Society private boarding home worker and also by the public health nurse. The mother removed her child from the private boarding home in February 1955, possibly because she had lost her job. In any case she was working again in July 1955 and had made some tentative enquiries about placement which she had not pursued further. Developments were not followed up although the case remained open.

From a superficial point of view this mother's request for service was met, and a properly supervised private boarding home was made available. This is an improvement over indiscriminate placement of young children, but it falls short of a desirable standard of service in relation to a placement request. "There is agreement in child placement agencies that appropriate intake studies ....... are needed to ensure that children are separated from their families only when it has been determined that placement is the needed service".

In this case intake study, diagnosis, and follow-up service, all appeared inadequate. In addition, the public agency's policy regarding the ineligibility for assistance of mothers with one child, seems to have been rigidly applied and there was insufficient attempt at communication and co-operation between agencies. Three agencies, Family Court, City Social Service Department, and Children's Aid Society had been involved with this family within a period of three months' time, and in spite of present knowledge concerning the young child's deep need for a mother's care, and the critical importance of the early years, these matters were at best, given very cursory attention. It would not be surprising if this child again appeared on the caseload of a child guidance clinic or placement agency within the next ten years, not as an infant, but as an emotionally disturbed child. An excellent opportunity to practise preventive mental health was missed.

Mary North born June 25, 1948 is a tragic example of a case of inadequate service. It is, possibly, less representative than a case of a disturbed teen-ager, but, because it is typical of the kind of case which can easily be neglected by the heavily burdened worker and supervisor, it was chosen for closer examination.

At three weeks of age, Mary, the second illegitimate child of a former ward of the Children's Aid Society, who, in turn, had been neglected by her psychotic, epileptic mother, was admitted to the care of the agency on a ward basis. Her mother had requested adoption, but because of the pathology in the background, and the fact that paternity had not been established,
the child was not considered "adoptable".

Mary was first placed in a subsidized baby home under the supervision of the nursing department of the agency, which, at that time, carried the cases of all infants up to two years of age. When she was just under three months old, she was placed in a permanent boarding home with "a view to adoption", where she remained. During her first fourteen months Mary was supervised quite closely by the nurses, largely from the standpoint of physical health and development. Mary's physical development was better than average although she developed eczema at about six months of age following her first inoculation. Various danger signals were noted in the record, such as the observation that the foster mother was dominated by her mother, anxious and unsure of herself, that the child was a poor sleeper, "nervous" and given to temper tantrums. The case remained in the nursing department until Mary was three years of age because of the problem around eczema which, at times, was quite severe. In June of 1951 it was transferred to the district worker, but received no attention until November 1951 possibly because of a rapid turnover of workers.

From November 1951 until March 1952 a trained, experienced worker visited every two weeks and sought to establish a helpful relationship with foster parents and child. Some progress was made but the foster mother gave evidence of considerable anxiety, feelings of personal inadequacy, and difficulty in the area of relationship. The only way she felt she could control Mary was by spanking her, and the child had frequent and severe temper tantrums. Foster father was a mild pleasant man, a steady
worker, fond of Mary and much better able to manage her. During this period the child was examined at the Provincial Child Guidance Clinic for a pre-adoption appraisal and found to be in the superior group of general intelligence, "healthy, happy, alert and independent". The foster mother was seen as an "unhappy woman" and it was noted "there was not as affectionate a bond between mother and child as one might desire". History of maternal grandmother and other relatives known to Provincial Mental Health Services was noted in the report and suggestions were made that the child should have a blood test and that it might be diagnostically helpful to arrange for an electroencephalogram. The child's medical sheet does not indicate that either suggestion was acted upon. The worker recorded that she believed re-placement of Mary should not be considered until further efforts to help the foster mother work out the problem of temper tantrums had been made. This worker apparently left suddenly and there is no recording for a year and a half.

The next worker, who continued with the case until June 1955, recorded in summary form and the exact number of contacts was not noted. However, the impression was given that they were few in number. A school report showed Mary to be a good pupil, working to capacity and exhibiting no overt behaviour problems. The worker heard a report of marital difficulty between foster parents but this was not dealt with. The matter of Mary's adoption by the foster parents was "left dangling" and the child remained on a boarding basis in spite of the fact that the mother signed specific consents to Mary's adoption by these foster parents during 1954.
The basic problem in this case, that is, the uncertainty about which children can safely be placed for adoption at an early age, still troubles child welfare agencies and medical opinion on the subject is sharply divided. Social work practice itself, seems to be advancing answers on a pragmatic basis, and more and more agencies are cautiously experimenting with the early adoption placement of children with pathology in the background. Such follow-up studies as have been done are encouraging, but there is crucial need for more research in this field.

Another serious difficulty in the present case was the apparent inadequacy of the foster home study. Although the "boarding adoption" has worked out satisfactorily in many cases, the practice has been seriously questioned on the ground that there must be strong neurotic components in the personalities of foster parents who are willing to endure so much uncertainty as to the ultimate outcome of adoption. Frequent staff changes, the fact that these foster parents avoided, rather than sought, service from the agency, the increasing difficulty of the problem as time went on, lack of worker time and of careful supervision all appear to have been causes of the inadequate service given in this case.


In 1953 the Brown family had applied to the agency as foster parents. The application had been briefly studied and rejected because the foster mother was working part time, from noon to 6:30 p.m., and therefore was not suitable for the school age girl she was requesting. The family consisted of Mr. and Mrs. Brown, aged 44 and 40 and two boys of 18 and 16. The income was adequate, and the home comfortable in a modest way. The motives for taking a foster child seemed mainly interest in having a girl, and desire to help a child. Mrs. Brown gave evidence of the warmth and understanding so necessary in a foster mother, and it was with regret that the application was refused. The home study had not been completed, as Mr. Brown and the boys had not been interviewed and no medical reports or references had been obtained.

Some months later, one of the workers was faced with the problem of immediate placement of a seventeen year old girl, for whom no approved home was available. The home-finding department remembered Mrs. Brown, and, although the home had not been approved, referred it to the girl's worker with the understanding that she would complete the home study. The worker visited in the home, liked it and arranged for placement of her girl there, feeling Mrs. Brown's working hours would not constitute a problem in the case of a girl of this age. The home study was never completed but a brief note on the file indicated that this placement was satisfactory. In May 1955, several months after the seventeen year old had left the home, another worker was faced with obtaining a quick placement for a girl of 13 who had been rejected by her mother and step-father, and who was presenting
problems around staying out late with boys and generally unsatisfactory school-work. The worker must have learned of this home through the first worker, since it would not have been listed as a vacancy in the central foster home index of the agency as it had not yet been approved. After one preliminary visit, in which she was favourably impressed, the second worker decided to use the home for her girl. The home was visited several times following placement and a good deal of work with the foster mother and girl was done. Due largely to the fact that this girl was still very much tied to her mother, and was not accepting of a foster home, this placement was not a success. Additional reasons might well be the fact that the foster mother was working, as well as other subtleties in family relationships which had not been evaluated, or, in any case, recorded. The second worker verbally reported that she was well acquainted with the foster-father and the boys and found their attitudes helpful. She had not, however, recorded this information in the file. Also she had not, apparently, been aware that the home had not been properly approved, evidently taking it for granted that, because it had been used once, it could be used again. Lack of worker and supervisory time, as well as the necessity of finding accommodation quickly, all seem to have played a part in this unsatisfactory situation. Another unfortunate aspect of the case was, that because the second placement was unsuccessful and discouraging, the foster mother decided not to take any more children from the agency, although it was possible her home would have been valuable for older, more stable girls. An incident of this kind creates unsatisfactory public relations. It also indicates one of the
most serious pressure points in the agency programme -- suitable placement facilities for teen-aged children.

Adequacy Ratings on Total Cases in the Sample.

In the 83 sample cases, service was rated as adequate in 30 cases, as fairly adequate in 36 and as Inadequate in 17. Lack of time was a main cause of limitation of service in 22 cases, a contributing cause in 16 and not a cause in 45.

The relationship between lack of time and adequacy ratings is presented in Tables 8 and 9. From these tables it appears that services to families, and in relation to foster homes, were more seriously curtailed by lack of time than in any other categories.
Table 8. Evaluation of Services Given and Time-Service Factors,
(Sample Group, Classified by kind of Case)

<table>
<thead>
<tr>
<th>Analysis</th>
<th>Rating of Services Given</th>
<th>Adequate</th>
<th>Fair</th>
<th>Inadequate</th>
<th>Total</th>
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<tr>
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<tr>
<td>A. Family Cases</td>
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<td>Lack of time</td>
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<td>(a) main cause</td>
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<td>(b) contributing cause</td>
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<tr>
<td>(c) not a cause</td>
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<tr>
<td>B. Foster Homes</td>
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<tr>
<td>Lack of time</td>
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<td></td>
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<tr>
<td>(a) main cause</td>
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<td>(b) contributing cause</td>
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<tr>
<td>(c) not a cause</td>
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<tr>
<td>C. Adoptive Homes</td>
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<td></td>
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<tr>
<td>Lack of time</td>
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<tr>
<td>(a) main cause</td>
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<tr>
<td>(b) contributing cause</td>
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<tr>
<td>(c) not a cause</td>
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<tr>
<td>D. Children in Care</td>
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<tr>
<td>Lack of time</td>
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<tr>
<td>(a) main cause</td>
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<td>(b) contributing cause</td>
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<td>(c) not a cause</td>
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<tr>
<td>E. Children on Adoption</td>
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<tr>
<td>Probation</td>
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<td></td>
</tr>
<tr>
<td>(a) main cause</td>
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<tr>
<td>(b) contributing cause</td>
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<tr>
<td>(c) not a cause</td>
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<tr>
<td>TOTAL</td>
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</table>

<table>
<thead>
<tr>
<th>Adequate</th>
<th>Fair</th>
<th>Inadequate</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
<td>36</td>
<td>17</td>
<td>83</td>
</tr>
</tbody>
</table>
Table 9. Summary of Adequacy of Service and Time-Service Ratings.

<table>
<thead>
<tr>
<th>Analysis</th>
<th>Adequate</th>
<th>Fair or Inadequate</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lack of time a main or contributing cause.</td>
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<td>38</td>
<td>38</td>
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<tr>
<td>A. Family Cases</td>
<td>0</td>
<td>14</td>
<td>14</td>
</tr>
<tr>
<td>B. Foster Homes</td>
<td>0</td>
<td>11</td>
<td>11</td>
</tr>
<tr>
<td>C. Adoptive Homes</td>
<td>0</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td>D. Children in Care</td>
<td>0</td>
<td>8</td>
<td>8</td>
</tr>
<tr>
<td>E. Children on Adoption</td>
<td>0</td>
<td>3</td>
<td>3</td>
</tr>
<tr>
<td>Probation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lack of time not a cause.</td>
<td>30</td>
<td>15</td>
<td>45</td>
</tr>
<tr>
<td>A. Family Cases</td>
<td>6</td>
<td>4</td>
<td>10</td>
</tr>
<tr>
<td>B. Foster Homes</td>
<td>3</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>C. Adoptive Homes</td>
<td>5</td>
<td>1</td>
<td>6</td>
</tr>
<tr>
<td>D. Children in Care</td>
<td>10</td>
<td>7</td>
<td>17</td>
</tr>
<tr>
<td>E. Children on Adoption</td>
<td>6</td>
<td>1</td>
<td>7</td>
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<tr>
<td>Probation</td>
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</table>
Chapter 4.

Direct Service to Clients: Distributing the Responsibility of the Professional Worker.

The Children's Aid Society of Vancouver provides a large and important section of the welfare services in the community. The agency receives an average of 208 requests for service each month\(^1\), and an average of 168 cases are accepted. In addition, 35 children are brought into care every month, and another 14 placed on adoption probation. These figures represent a considerable degree of responsibility and also of opportunity.

It is generally accepted that the best place for a child to receive the affection and security he needs is in his own home, and society has an obligation to preserve and protect this important birthright. However, it is equally true that, for many children, a home has never existed, or else it has been damaged beyond hope of repair. For these it is essential to provide, as far as possible, the intelligent, loving care which a "wise and good parent would desire for his own children"\(^2\).

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1. Including foster home applications and adoptive applicants. See Table 7.

Case Material on which Study is based.

This study has been based on a group of cases open in the Children's Aid Society of Vancouver during June 1955. The numbers of visits and interviews carried out in relation to these cases, considered to be roughly representative of one caseworker's share of agency responsibility, were compared with the number undertaken by the average worker as revealed in the Agency Time Study of June 1955. There was sufficient similarity between numbers of visits and interviews counted in the cases studied, and the number of visits and interviews carried on by the average worker as shown in the Time Study, to indicate that the cases in the sample group are fairly representative of general case content and agency practice. However, at least one important subgroup, i.e. foster homes under study, is not represented in the sample. The proportion of cases of illegitimacy in the sample group of family cases is smaller than it is in 1955 yearly statistics. It also appears that this sample group may be unduly weighted with cases "waiting closing". The sample group of children in care includes proportionately more children under school age and fewer adolescents than are shown by the yearly figures, while the proportion of six to twelve year-olds is almost exactly the same.

Although it was realized that the sample of one forty-sixth of cases open in June, was probably not large enough to be entirely representative, it was thought an analysis of these cases would throw some light on the quantity and quality of agency service and the influence of the availability and use of professional time on services.
Evaluation of Services Rendered.

Out of the 67 open cases studied where direct service activity was counted, 39 cases were "active" during June 1955, and 28 "inactive". In the "inactive" group, seven were "waiting closing" or transfer to "in care", 15 were classified as being "inactive according to plan", and six were shown as "inactive needing attention". Measurement of this kind is simply a rough index of worker activity and bears little relation to the quality of work being done. For example, the case which, in June 1955, was the most active was rated as an instance of inadequate service.

The figures on service ratings show that out of the 83 cases studied from the point of view of quality of service, adequate service was given in 30 cases, and fairly adequate service in 36. Thus, a total of 66 cases out of 83 was receiving an acceptable standard of service, although there was room for improvement. The seventeen cases where service was judged inadequate, and the proportion of the total work of the agency which these cases probably represent, must however, be considered a source of concern, not only to the agency itself, but also to the community. It is difficult to know how best to make the public aware of the necessity of closing this gap in service, without undermining confidence in the much larger constructive aspects of the programme.

1. Excluding foster homes (See Table 5, Chapter II).
2. Foster homes included in this group. See Table 6, Chapter 3.
Quality of Service related to Time Factors.

The extent to which the availability and use of worker time affected the quality of service has been estimated as accurately as possible. The findings were that actual lack of time was a major cause of inadequate service in 22 cases and a contributing cause in 16 but that lack of time did not appear to affect quality of service in 45 of the cases. The relationship between lack of time and adequacy of service is significant. In the 30 cases where service was rated as adequate no lack of time was apparent, except that several files were too briefly recorded. In the 36 cases where service was rated as fairly adequate, lack of time was a major cause of curtailment of service in 14 cases, a contributing cause in 9 cases, but not a cause in 13 cases. In the 17 cases where service was rated inadequate, lack of time was a major cause in ten cases, a contributing cause in five cases, and not a cause in two cases. Thus in fifteen cases, causes other than lack of worker time, were responsible for inadequate service, and in an additional fourteen cases both lack of time and other causes combined to produce an unsatisfactory result.

How is lack of time to be measured? It is clear that among members in any professional group there are marked differences in ability to organize and make use of time to the best advantage. Also there are wide divergences as to the quality

1. Table 6.
2. Table 9.
3. Table 8.
of service rendered within the same space of time, and as between one case and another. Since the primary purpose of a children's aid society is direct service to clients, and all other activities, administration, recording, supervision, committee work, statistics, are merely means to this end, it is important to look at the amount of time spent on face-to-face contacts either with clients, or on their behalf.

During the month 71 visits and 33 interviews were conducted in relation to the cases reviewed. Calculated on the same basis as the June Time Study, which showed that visits and interviews by workers averaged 21 minutes and 31 minutes, respectively, the time spent on this activity was 43 hours per month or 27.9 percent of working time in a seven hour day, 22 day month. This figure differs from the Time Study figure of 23 percent of working time spent on visits and interviews by 4.9 percent, probably because the sample included one non-typical case where there were eight visits and 17 interviews on behalf of one child in care.

Though it appears that 23 to 28 percent of worker time spent on face-to-face contacts with clients is low, these figures seem roughly comparable with those of other agencies which have done time studies as described in Chapter II. True comparisons are not possible because most agencies include the time spent on telephone interviews with the time spent on face-to-face interviews, and also work weeks are of differing length. Although no figures on the amount of time spent are available, it is reported that in 60 private family agencies with membership in the Family Service Association of America, the number of face-
to-face interviews and visits in one month "ranged from 35 to 83 per practitioner with a median of 51." Thus it can be seen, that as a general rule, the number of face-to-face interviews has reached a level which would be considered by most professional social workers to be "dangerously low".

Other Factors influencing Quality of Service.

As mentioned above, as well as lack of time, a number of other difficulties were affecting the ability of workers to give adequate help to their clients. Socio-economic problems such as poor housing, unemployment, low wages and assimilation of Indians into the general population, were factors in a number of cases. Lack of fully trained staff, and considerable variation in the availability and quality of supervision were important considerations. Gaps in community and agency resources, such as adequate special employment services, a treatment centre for emotionally disturbed children, group living facilities for adolescent children, the shortage of foster homes for large families, and of both foster and adoption homes for children of mixed racial origin, were also noted. Another source of difficulty appeared to be the lack of common purpose among agencies. Several cases gave evidence of the desirability of greater co-operation, understanding and joint planning if the needs of clients are to be adequately met.

Considerations regarding Caseload Count.

Most professional writers agree that caseload numbers mean very little, and that the professional job must be reckoned in terms of the workload, as defined by the needs of cases. However, the caseload count continues to be used as a kind of measuring rod, and it was therefore decided to attempt to estimate the number of cases, of the variety described in the sample, which one worker might be able to handle effectively. As a possible basis for estimating such a caseload the 67 cases where direct service was given were examined as follows:

**Active Cases 39.**

- Service adequate or fairly adequate: 34
- Service inadequate: 5

**Inactive Cases 28.**

- Service adequate or fairly adequate: 12
- Service inadequate: 16

The cases where inadequacy of service was considered to be due to a time factor (7) or which were waiting statistical closing (7) were then excluded as follows: active, two; inactive, twelve. This leaves 53 cases where service was considered adequate or fairly adequate or where the inadequacy was not due to lack of time on the part of the worker. This figure suggests that 53 might be considered as a caseload which could be carried effectively by a trained social worker with good supervision,
provided about 14 cases could appropriately remain inactive each month. The foster homes of the children in the group, which are not counted as cases, would be an additional responsibility, but workers would not be expected to do the home-finding. In considering a caseload of 53, it would be necessary to examine, at the same time, what other responsibility a worker would have, and how much of this was necessary or desirable from the point of view of the agency, the community and the professional development of the worker.

Recommendations to the Children's Aid Society of Vancouver.

It seems reasonable to assume that service to clients could be immediately improved with existing staff if more worker time could be released for face-to-face contacts with clients. Precise job analysis, leading to job classification, as recommended in the recent Report of the Joint Committee on Social Work Education would be of great value in enabling the agency and the individual to know to what extent this goal is possible and desirable. Accurate job analysis is dependent upon further research in regard to the job done and the use of time. It would require the interested participation of staff in developing methods of enquiry and evaluating results. In short, staff should

1. Of the 67 cases examined where direct service was given, 39 were active, 28 inactive. (Table 5).

become more "time conscious". Such a plan might well involve further brief, periodic studies regarding the current uses of time in the agency, both for the purpose of determining trends, and also in an attempt to work out norms for the use of time in terms of specific agency needs. A statement of the job for which a worker is appointed should be closely related to the time actually spent on the work described. Recommendation ten of the Joint Committee on Social Work Education has already been partly carried out by the agency time study and this thesis.

There are implications in this for worker, supervisor, and administration. For the worker particularly, requirements and practices in relation to recording should be reviewed, especially in regard to diagnostic statements, significance of material in the running record, periodic summaries and statistical closing of files. The marked lack of current, evaluative recording on foster home files, suggests that the agency may not be using these scarce resources to the best advantage, or making sufficient effort to conserve them. The time spent on recording should also receive close attention.

Supervisory, consultative and staff development programmes should be periodically reviewed in terms of new thinking and practice, particularly in relation to the use of group supervision.

1. "That agencies be urged to study current practice in the light of these reports; that time studies be made in relation to client contacts and all job responsibilities, and the kinds of service rendered in the various fields of practice, keeping in mind the place of volunteers and lesser trained persons."
On the administrative side it is important to try to ensure that professional staff are not spending time on activities which could be delegated to clerical staff. Lines of authority should be clear and administrative aids such as a complete, definitive, policy manual, should be available. Necessary procedures should be streamlined as much as possible. Attention should be paid to such matters as availability of interviewing rooms, dictation facilities, files and cars so that frustration in relation to working conditions is cut to a minimum.

Continued clarification of inter-agency policy and active participation in community planning are particularly necessary activities in view of the broadly stated aims of the Society and the existing pressure for services from the community. In view of the Agency's present heavy responsibilities any proposals for expansion into new areas of service should be carefully examined. Continued improvement of casework service and of agency resources in relation to types of cases already carried, appears to be the current need.

As a method of supplementing what appears to be a chronic shortage of trained social workers, and also as a means of re-involved interested members of the community in the operational work of social agencies, careful consideration should be given to the possible use of case aides in certain types of cases. To do this, without threatening professional standards of service to the client, cases would need thoughtful study, and case aides would require careful selection, in-service training, and supervision.
The Children's Aid Society of Vancouver has already carried out many of these suggestions or is in the process of doing so. Some of these objectives can, of course, never be fully realized, for, as soon as specific goals are reached, new ones take their places.

Suggestions for Further Research.

The findings of this study are that 72 to 77 percent of practitioner time is spent in activities other than face-to-face contacts with clients. As suggested previously, it is undoubtedly true that most of the remaining time is spent either on other forms of direct service to clients, or on enabling activities. For this reason it is suggested that research which would develop better understanding of all the uses of professional time, should be carried out not only by the Children's Aid Society but also by other social agencies. Expenditure of time on various parts of the professional job should be evaluated in terms of total agency purpose. These other uses of professional time fall roughly into six categories:

1.) Other forms of direct service to clients, including telephone interviews, travelling time, telephone or letter writing on a client's behalf, consultation with experts, or with other agencies, in regard to a specific case handled by a worker.

2.) "Enabling activities", such as supervision and case recording, which are an essential part of rendering adequate service to clients, but which must never come to be regarded as ends in themselves.
3.) Direct public relations, such as speeches, committee work, and professional writing.

4.) Staff development such as participation in staff meetings, conferences, and agency consultations not related to the worker's own case.

5.) Research.

6.) Student training.

An interesting avenue for enquiry was raised by the findings of the study regarding the relationship between quality of service and availability of worker time. In the cases examined, 45 did not appear to be adversely affected by lack of time, while it was at least an important contributing factor in limitation of service in the remaining 55 cases. Since the cases reviewed were drawn from 46 different caseloads, it is possible to infer that the difference lay in the individual practitioner's use of time, or in large differentials in the time required to handle different caseloads. Another influence might be that some clients are particularly vocal in demanding service, and it is well known that persistent requests are apt to get attention first. It might also be true that decisions to allow sufficient time for certain cases, because of their particular importance or excellent prognosis, were carefully made by worker and supervisor. Enquiry into this subject might well increase understanding of the most valuable ways of using professional time.

Another relevant piece of research might be done on the numbers and types of cases most suitable for service from case-aides; combined with a study of the most effective methods
of training and using case-aides. In the provision of child welfare services, as in any other worthwhile form of human endeavour, "a man's reach must exceed his grasp". Vision, courage, ability to use knowledge in a disciplined way, and an "infinite capacity for taking pains", are the essential qualities which the professional worker must bring to the high adventure of serving children.

1. Volunteers are already used by the Children's Aid Society.
Appendix A: Survey Schedule for Family Cases.

Sample No. ...

1. Type of Case U.M. ... M.W. asking Adop. ... Neglect ..........
   Placement Request .... Brief Service ...... Other ............

2. Case No.  

4. Last Referral Date .............

3. Source of last Referral  

5. Reason for Referral or Request ............

6. 

<table>
<thead>
<tr>
<th>Status</th>
<th>Family Status</th>
<th>in Care</th>
<th>Age</th>
<th>Ethnic</th>
<th>Occupation</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Father</td>
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<tr>
<td>Mother</td>
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<tr>
<td>Children</td>
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</tbody>
</table>

(Rate as good, fair, poor)

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</thead>
<tbody>
<tr>
<td>Father</td>
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<tr>
<td>Mother</td>
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<tr>
<td>Children</td>
<td>1-</td>
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<tr>
<td></td>
<td>2-</td>
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</tbody>
</table>

7. Brief Summary of situation when referred:

8. Activity in June 1955 Visit Int. Tel. Letter Other

9. Casework Service rendered (describe):

11. Specific lacks or inadequacies in Agency or Community Resources:

12. Limitation of service apparently due to time factor:

13. Comment on problem presented:

14. Comment on service rendered:
## Appendix B: Survey Schedule for Foster Homes

1. Case Number

2. Sample Number

3. In use Approved Under Study Waiting Closing

<table>
<thead>
<tr>
<th>Status of home June/55</th>
<th>Visit or Waiting &amp; Closing</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Date of last Interview</th>
<th>Visit or Waiting &amp; Closing</th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>contact by worker</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

4. Investigation completed

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

5. Date of last opening of home:

6. Family Group Age

<table>
<thead>
<tr>
<th>Family Group</th>
<th>Age</th>
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</thead>
<tbody>
<tr>
<td>Father</td>
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<tr>
<td>Mother</td>
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<tr>
<td>Children 1.</td>
<td></td>
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<tr>
<td>Children 2.</td>
<td></td>
</tr>
<tr>
<td>Children 3.</td>
<td></td>
</tr>
<tr>
<td>Others</td>
<td></td>
</tr>
</tbody>
</table>

7. C.A.S. Children in Home June 1955

<table>
<thead>
<tr>
<th>Boys</th>
<th>Girls</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
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<td></td>
<td></td>
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</tbody>
</table>

8. Number of CAS workers using home in June 1955

9. Describe contact in June 1955

10. Limitation of Service apparently due to time factor:
11. Comment on Problems Presented:

12. Comment on Services rendered:

13. Worker consulted - yes: no:
Appendix C: Survey Schedule For Adoptive Applicants

1. Case Name

2. Sample Number

3. Status in June/55

<table>
<thead>
<tr>
<th>Active</th>
<th>Inactive</th>
</tr>
</thead>
<tbody>
<tr>
<td>According to plan</td>
<td>Needing Attention</td>
</tr>
<tr>
<td>Waiting</td>
<td>Closing</td>
</tr>
<tr>
<td>Approved</td>
<td></td>
</tr>
<tr>
<td>Not approved</td>
<td></td>
</tr>
</tbody>
</table>

4. Date opened:

5. Date of last activity:

6. Activity during June/55

<table>
<thead>
<tr>
<th>Visit</th>
<th>Int.</th>
<th>Tel.</th>
<th>Letter</th>
<th>Other</th>
</tr>
</thead>
</table>

7. Describe casework services rendered in June 1955:

8. Limitation of Service apparently due to time factor:

9. Comment on problems presented:

10. Comment on services rendered:

11. Discussion with worker - yes: no:
Appendix D: Survey Schedule For Children In Care

1. Case No. ......

2. Sample No. ......

3. General Information

<table>
<thead>
<tr>
<th>Name of Child</th>
<th>Age under</th>
<th>Status</th>
<th>Type of Care</th>
<th>Date ad. to Jun 1/55</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0-1 2-5 6-12 13-21 W. N.W B.C.</td>
<td></td>
<td>Jun 1/55 Care</td>
<td></td>
</tr>
</tbody>
</table>

4. Brief summary of situation when child came into care

5. Estimate of Child's adjustment to being in care - poor, fair, good

6. Specific lacks or inadequacies in Agency or Community Resources:

7. Activity in June 1955 | Visit Int. | Tel. | Letter | Other
|------------------------|-----------|------|--------|------|

8. Describe casework services rendered in June 1955:

9. Inactivity in June 1955 | Needing Attention | According to plan
|---------------------------|-------------------|----------------|
10. Limitation of Service Apparently due to time factor:

11. Comment on problems presented:

12. Comment on Services rendered:
Appendix E: Survey Schedule For Children On Adoption Probation

1. Case Name: ________________________________  2. Sample Number: ____________________________

3. Type of placement | Date child placed | Date Case opened
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>Agency placement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Private placement</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Relative placement</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Brief description of Case:

   Activity during June, 1955.

5. Visit | Int. | Tele. | Letter | Other
<table>
<thead>
<tr>
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</thead>
<tbody>
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</tbody>
</table>

6. Describe Casework services rendered in June, 1955:


   Needing | According | Waiting | Attention to plan | Closing
   -------|----------|--------|-------------------|--------|
   |          |         |       |                   |        |

8. Limitation of Service Apparently due to Time Factor:

9. Comment on Problems Presented:

10. Comment on Services Rendered:
Material was summarized from the schedules under a series of headings as follows:

### A. Active Cases

<table>
<thead>
<tr>
<th>Case Number:</th>
<th>Sample Number:</th>
<th>Type of Care:</th>
<th>Date Last Opened:</th>
<th>Visits Client</th>
<th>Collateral Interviews Client Collateral</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Services</td>
<td>telephone</td>
<td>letters</td>
<td>other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Description of Casework Service: 

Limitation due to Time Factors:

Limitation due to other Problems:

Adequacy of Service:

### B. Inactive Cases

<table>
<thead>
<tr>
<th>Case Number:</th>
<th>Sample Number:</th>
<th>Type of Care:</th>
<th>Date Last Opened:</th>
<th>Date of last Activity:</th>
<th>Status: Needing Attention:</th>
<th>According to Plan:</th>
<th>Waiting Closing:</th>
</tr>
</thead>
</table>

Description of Casework Service:

Limitation due to Time Factors:

Limitation due to other Problems:

Adequacy of Service:
Appendix G: Summary Sheet for Foster Homes:

Material was summarized from the schedules under a series of headings as follows:

Sample Number:

Case Number:

Status: in use:
  waiting closing:

Investigation: completed:
  recorded:
  adequate:

Date of last opening:

Age of foster parents
  father:
  mother:

Foster parents children:
  number:
  age:

Foster children
  number:
  age:

Number of workers using home:

Adequacy of Service:

Limitation of Service due to time:

Rating of Home:

Progress Notes:
Appendix B:  **Summary Sheet for Adoptive Applicants.**

Material was summarized from the schedules under a series of headings as follows:

<table>
<thead>
<tr>
<th>A. Active Cases</th>
<th>B. Inactive Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Sample Number:</strong></td>
<td><strong>Sample Number:</strong></td>
</tr>
<tr>
<td>Category: approved:</td>
<td>Category: approved:</td>
</tr>
<tr>
<td>understudy:</td>
<td>understudy:</td>
</tr>
<tr>
<td>Visits: client:</td>
<td>Inactive according to plan:</td>
</tr>
<tr>
<td>collateral:</td>
<td>needing attention:</td>
</tr>
<tr>
<td>Interviews: client:</td>
<td>waiting closing:</td>
</tr>
<tr>
<td>collateral:</td>
<td></td>
</tr>
<tr>
<td>Other Services: telephone:</td>
<td>Casework Service given:</td>
</tr>
<tr>
<td>letter:</td>
<td>Adequacy of Service:</td>
</tr>
<tr>
<td>other:</td>
<td></td>
</tr>
<tr>
<td>Description of Casework Service:</td>
<td>Limitation of Service due to time:</td>
</tr>
<tr>
<td>Adequacy of Service:</td>
<td>Limitation due to other factors:</td>
</tr>
<tr>
<td>Limitation of Service due to time factor:</td>
<td></td>
</tr>
<tr>
<td>Limitation due to other factors:</td>
<td></td>
</tr>
</tbody>
</table>
Appendix I: Summary Sheet for Children in Care.

Material was summarized from the schedules under a series of headings as follows:

A. Active Cases:
   
   Sample Number:

   Visits:
   
   client:
   collateral:

   Interviews client:
   
   collateral:

   Other Services:
   
   telephone:
   letter:
   other:

B. Inactive Cases:

   Sample Number:

   Inactive:
   
   needing attention:
   according to plan:

   Limitation of Service:
   due to time factor:

   Limitation of Service due to other factors:

   Present adjustment of child:

Description of Casework

Service:

Limitation due to time factor: Adequacy of Service:

Limitation due to other factors:

Present adjustment of child:

Adequacy of Service:
Appendix J: Summary Sheet for Children on Adoption Probation.

Material was summarized from the schedules under a series of headings as follows:

A. Active Cases:
   Sample Number:
   Type of Placement:
      Agency:
      Private:
      Relative:
   Visits: client:
          collateral:
   Interviews: client:
           collateral:
   Other Services: Telephone:
       Letter:
       Other:
   Description of Casework Service:
   Adequacy of Service:
   Limitation of Service due to time factor:
   Limitation due to other factors:

B. Inactive Cases:
   Sample Number:
   Type of Placement:
      Agency:
      Private:
      Relative:
   Inactive:
      according to plan:
      needing attention:
      waiting closing:
   Description of Casework Service:
   Adequacy of Service:
   Limitation of Service due to time factor:
   Limitation due to other factors:

**DAILY TIME SHEET - JUNE, 1955**

(Please Return to Supervisor Each Evening)

For June this sheet will replace Daily Work Report. After information is compiled by statistician, sheets will be returned to workers within two days.

<table>
<thead>
<tr>
<th>Worker</th>
<th>Date June, 1955</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>NAME</th>
<th>Adoption</th>
<th>Home Finding</th>
<th>Family &amp; PBH</th>
<th>Children in Care</th>
<th>Visits To</th>
<th>Visits For</th>
<th>Interviews To</th>
<th>Interviews For</th>
<th>Telephone To</th>
<th>Telephone For</th>
<th>Meetings Time Spent</th>
<th>Conferences Time Spent</th>
<th>Travel Time</th>
<th>Other (Specify)</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>
Appendix L: Bibliography

(a) General References


(b) Specific References


(c) Unpublished, mimeographed material.


Protective Family Services of the Children's Aid Society
in Relation to Family Services of other Agencies in the community.

The Children's Aid Society of Vancouver, B.C. Its Purpose,