Kidsvoice: A Multidisciplinary Approach to Child Advocacy

Scott Hollander

KidsVoice

Jonathan Budd

KidsVoice

Follow this and additional works at: https://repository.law.umich.edu/mjlr

Part of the Juvenile Law Commons, and the Legal Profession Commons

Recommended Citation
Available at: https://repository.law.umich.edu/mjlr/vol41/iss1/9

This Symposium Article is brought to you for free and open access by the University of Michigan Journal of Law Reform at University of Michigan Law School Scholarship Repository. It has been accepted for inclusion in University of Michigan Journal of Law Reform by an authorized editor of University of Michigan Law School Scholarship Repository. For more information, please contact mlaw.repository@umich.edu.
KIDSVOICE: A MULTIDISCIPLINARY APPROACH TO CHILD ADVOCACY

Scott Hollander*
Jonathan Budd**

There is growing recognition that effective child advocacy requires a broad range of knowledge that often goes well beyond the legal needs of the child. This Essay details the multidisciplinary approach to child advocacy that KidsVoice, a Pittsburgh legal services organization representing almost 5000 dependent children each year, has implemented to better develop uniquely tailored recommendations regarding which placement and services might create better possibilities of success for each child and family.

INTRODUCTION

This Essay provides a practical example of multidisciplinary practice at one child advocacy agency. The approach and experience at KidsVoice starts from the premise that there is no one right way to implement a multidisciplinary practice in a child advocacy organization. We expect that each reader will like some but not other aspects of our practice. We also recognize that what will work in any particular office depends upon many factors, including the culture and philosophy of the organization and staff, the expectations and operations of the local juvenile court and child welfare agency, and the statutes and regulations in each jurisdiction.

I. HISTORY OF KIDSVOICE

KidsVoice originally was founded in 1908 as the Legal Aid Society of Pittsburgh, and has provided legal advocacy services exclusively for dependent children since 1983. Currently, KidsVoice is the sole provider of this state mandated service for children involved in the child welfare system for Allegheny County, Pennsylvania.

* Scott Hollander, J.D., is the Executive Director of KidsVoice.
** Jonathan Budd, J.D., is the Associate Executive Director of KidsVoice. He has a B.A. in Social Work, an M.A. in Public Affairs, and has previously worked as a counselor for delinquent and at-risk youth, a program manager for the U.S. Department of Justice's National Institute of Justice and Office of Juvenile Justice and Delinquency Prevention, a nonprofit administrator, and a labor and employment attorney.
Each year, KidsVoice represents approximately 5000 abused, neglected, and at-risk children. Clients range in age from newborn to eighteen and, in some circumstances, to twenty-one. Since 2001, the staff has increased from twelve to more than sixty and the annual budget from $500,000 to $4 million, without increasing the number of clients represented.

In 2000, KidsVoice had ten attorneys representing 5000 clients. The agency provided, on average, 2.8 hours of service per client each year. It simply was not possible for ten attorneys to provide quality representation with that many cases per attorney. Clearly, more resources were needed.

Then, in 2000, the Pennsylvania legislature passed a law mandating the appointment of an attorney guardian ad litem ("GAL") for every abused and neglected child whose case became court-active. The legislature further specified particular tasks that the GAL must perform, including meeting with the child, interviewing potential witnesses, reviewing records, and conducting investigations prior to each hearing. These requirements heightened the need for more resources in order to advocate adequately for our clients.

Over time, KidsVoice developed a vision for how extra resources might be used to achieve higher quality advocacy in a cost-effective manner. The staff started with the understanding that most issues in dependency proceedings relate to a child’s placement and well-being. Recognizing that social service professionals with expertise in these areas could provide valuable insight and assistance, KidsVoice staff concluded that every case would benefit from combining legal expertise with social service expertise.

Allegheny County officials and local foundations agreed with this approach and provided increased funding to enable KidsVoice to implement the multidisciplinary model. In 2001, using 200 cases, KidsVoice piloted a new approach to child advocacy that teams attorneys with social service professionals on staff who have backgrounds in child development, social work, education, mental health, physical therapy, substance abuse, and domestic violence treatment. This team model draws upon the combined expertise and training of professional staff from different disciplines to develop uniquely tailored recommendations regarding which placement and services might create better possibilities of success for each child and family.

Today, every KidsVoice client is assigned both an attorney and a social service professional. KidsVoice has grown from ten attorneys

2. Id.
representing 5000 children in 2001 to twenty attorneys and twenty social service professionals representing 5000 children in 2006. This increase in professional staff has enabled the agency to increase the service provided to each client from an average of 2.8 hours to an average of thirteen hours per year. The agency believes that this average of thirteen hours is the minimum amount necessary to provide adequate representation to clients at KidsVoice.

II. BUILDING A MULTIDISCIPLINARY TEAM APPROACH

Part II of this Essay addresses how KidsVoice turned a multidisciplinary advocacy concept into specific policies and practices involving staffing, training, and team operations.

A. Mission and Values

First, implementing a multidisciplinary approach required that everyone in the organization agree on a common mission. Through a series of discussions, the KidsVoice staff and board of directors developed an overarching mission statement and a series of value statements which further outline the objectives of the multidisciplinary approach.

Mission Statement: KidsVoice advocates in court and in the community to ensure a safe and permanent home for abused, neglected, and at-risk children.

Value Statements:

- We believe that better child advocacy is achieved when a diverse team of professionals with knowledge and experience in a variety of disciplines work together for children.
- We believe that all children can thrive and deserve the opportunity to achieve their full potential.
- We recognize the awesome responsibility of our work and will be as resourceful and creative as we need to be to meet each child’s needs.
- We believe that each child is a unique individual with intrinsic value and rights that we must appreciate and respect.
- We are committed to fostering children’s self-esteem and encouraging children to dream.
We believe that we have the ability to create positive change at the individual, organizational, and system levels and that we must be a catalyst for innovative and collaborative solutions among agencies serving children.

We believe that educating others about the needs of children is an integral part of our advocacy for children.

We believe that diversity in all areas—including culture, background, training, and experience—strengthens our organization and we are committed to creating a work environment that embraces and encourages diversity.

We value each employee and are committed to creating an open, supportive, and challenging work environment that fosters creativity and professional growth for all employees.

B. Staffing

KidsVoice has five regional teams that mirror the geographic regional offices of the county child welfare agency, and a sixth team that deals with termination of parental rights and dual delinquent/dependent clients. Each regional team consists of several attorneys and several Child Advocacy Specialists ("CASs"). CASs are social service professionals with expertise in social work, mental health, education, child development, case management, domestic violence, and/or substance abuse treatment.

Every client is assigned a case team consisting of an attorney and a CAS, who work together throughout the case. The attorney and CAS are equal partners, and are expected to reach consensus on recommendations for placement and services. The team's suggestions are put forth in court and also at other meetings held on behalf of the child (permanency planning meetings, family service plan meetings, interagency meetings, etc.).

Logistically, when a case is assigned to a case team the attorney and CAS meet to discuss the case. The attorney and CAS then will determine what information needs to be gathered, how it will be obtained, and which teammate is responsible for each task. After that, the case team is required to meet at least once a week to discuss shared cases, and typically meets twice more prior to the adjudication hearing to formulate recommendations. The case
team also meets after court hearings to discuss the results and monitor the implementation of the court order. This same process also occurs for quarterly review hearings, typically starting three weeks before a hearing is scheduled.

KidsVoice encourages cooperation among professional staff, so each attorney on a regional team will work with at least two CASs and vice-versa. Case team members also routinely consult with others on their regional teams and throughout the office on complex case matters.

C. Training

In implementing the multidisciplinary approach at KidsVoice, training for both attorneys and CASs is a crucial element. All new attorneys and CASs initially receive a five week training/orientation that involves classroom training and shadowing in the field. They are trained on both the legal and human services aspects of their jobs. The agency’s case team approach is emphasized throughout, as this is usually the first time an attorney or CAS has worked in this type of multidisciplinary practice.

Along with this initial training, KidsVoice holds monthly mandatory professional meetings, one for attorneys and one for CASs, where new legal and social service developments are highlighted and discussed. Lastly, KidsVoice arranges for other service providers to give presentations to interested staff members each month about the services and placement options available to KidsVoice clients.

D. Information Sharing

With a team approach like the one at KidsVoice, it is important that team members document their work so that each team member can easily remain current with all case information. Documentation is also important because cases that come in for emergency hearings may be handled by other attorneys or CASs. To this end, attorneys and CASs are required to keep notes on all phone conversations, meetings, visits, and court hearings. Originally, these notes were either hand-written and placed in the working file, or could be typed and placed on a shared computer drive. With this system, however, KidsVoice staff identified certain barriers to accessing case information in a quick and readable format. Problems included case information being placed in two
different locations, hand-written notes being lost or illegible, difficulty in keeping information current, and lack of access to files, especially outside of the office.

In response to these concerns, a veteran KidsVoice attorney developed a comprehensive information system which allows staff to have all important case information available by accessing their client's name on a computer database. This KidsVoice information system may be accessed both internally and from remote locations, and also features a section for measuring case outcomes.

E. Case Team Communication

For the agency's approach to work, creating and maintaining positive and effective communication between team members is critical. The very strength of the multidisciplinary model is that people with different backgrounds and training bring their perspectives to bear on a child's case. This cooperative approach, however, can create communication challenges as attorneys typically approach cases in a different manner than social service professionals. Issues such as CASs feeling that attorneys treated them as paralegals rather than equal partners, and attorneys feeling that CASs did not always provide legally relevant information can seriously hamper the effectiveness of a case team. KidsVoice has found that these problems are best resolved by implementing a supervisory structure to identify these issues early on and address them in a timely manner.

F. Accountability

The multi-disciplinary approach facilitates both direct and indirect accountability among staff members, a crucial element in the operation of an advocacy agency.

First, each attorney and CAS completes an on-line activity log to document their case-related work as well as other administrative work such as general meetings or trainings. Attorneys and CASs are required to log at least thirty-three hours of direct case work per week. Additionally, KidsVoice supervisors meet monthly with individual staff members and hold monthly regional team meetings. Supervisors also periodically sit in on case team meetings and conduct file reviews to ensure that the team model is functioning as smoothly as possible. Finally, attorneys and CASs are observed in
the field and given feedback about their strengths as well as suggestions for improvement.

A positive aspect of the multidisciplinary approach is that because there is an attorney and CAS on every case, staff members are also accountable to each other for their work on each case.

G. Ethics, Confidentiality, and Mandated Reporting

Most discussions of multidisciplinary practice inevitably focus on the issues of ethics, confidentiality, and mandated reporting. These issues, however, rarely arise in actual practice at KidsVoice, and when they do they have been resolved in a way that is consistent with the personal and professional values and ethics of the KidsVoice staff. This is possible largely because the KidsVoice staff and management, in their original discussions about implementing a multidisciplinary practice, separated which aspects of these issues were client-focused and which were about personal feelings. While some of that discussion was about what worked for clients, a greater part of the debate was driven by how the staff felt about their professional identities as lawyers or social service professionals such as social workers, family counselors, child development experts, or substance abuse treatment providers. After acknowledging and respecting these individual views, KidsVoice was able to develop client-driven policies and procedures to address these issues while still acknowledging and respecting the staff’s strong personal feelings.

Other multidisciplinary offices with whom KidsVoice discussed these issues also report that confidentiality and mandated reporting issues rarely arise and can be resolved in a manner that is satisfactory to the professionals involved. How any particular office does this obviously depends upon statutes, regulations, and rules of professional conduct governing confidentiality and mandated reporting in their specific jurisdiction—including whether attorneys are mandated reporters of child abuse, as they are in some states.

3. As of 1992, attorneys were mandated reporters of child abuse in twenty-two states; some states enumerated attorneys among the professionals mandated to report while other states simply mandated that every citizen report abuse without exception. Robert P. Mosteller, Child Abuse Reporting Laws and Attorney-Client Confidences: The Reality and the Specter of Lawyer as Informant, 42 DUK 203, 217 (1992). Other authors have devoted much analysis to the issues of ethics, confidentiality, and mandated reporting, and offer competing models and theories for how to address these issues in multidisciplinary practice. E.g., Jean Koh Peters, Concrete Strategies for Managing Ethically-Based Conflicts between Children’s Lawyers and Consulting Social Workers Who Serve the Same Client, 1 KY. CHILD. RTS. J., Mar. 1991, at 15; Jacqueline St. Joan, Building Bridges, Building Walls: Collaboration between Lawyers and Social
III. Effects of the Multidisciplinary Team Approach

Upon implementation, KidsVoice sought independent feedback on the effectiveness of the multidisciplinary approach to advocacy.

A. Outcome Measures

With funding from the Pennsylvania Commission on Crime and Delinquency, KidsVoice contracted with the University of Pittsburgh's Office of Child Development ("OCD") to develop appropriate outcome measures for multidisciplinary advocacy. OCD first conducted a process evaluation that included interviews with judges, caseworkers, service providers, and other stakeholders. These parties indicated that they saw an improvement in the quality of advocacy by the agency. This was particularly encouraging since fewer than half of the clients were represented by the team model at that time, with other clients still represented by attorneys responsible for representing 400-500 children each year.

After thoroughly reviewing the work of KidsVoice attorneys and CASs and the agency's role in the child welfare/juvenile court system, OCD determined that for purposes of outcome measures, there was neither a valid control group nor a statistically supported way to demonstrate a causal relationship between the work of KidsVoice and measurable changes in a child's well-being. Therefore, OCD strongly recommended limiting outcome measures to items under the agency's direct influence.4 Specifically, OCD suggested measuring the quality of advocacy through such indicia as how often staff's recommendations are ordered by the court and how often such court orders are implemented. Tracking the outcomes recommended by OCD made sense because those measures were directly tied to the essential work of child advocates. KidsVoice adopted the OCD recommendations. Today, these outcomes are entered into the client information system after every hearing so that the agency can monitor its continuing impact.

4. OCD stressed that while length of time until case closure, length of time in placement, number of placements, etc. may be good system-wide measures, the amount of control a child advocate has over these measures is more limited, as other system players such as the child welfare agency and placement providers are much more directly tied to those measures.
B. Cost-Effectiveness

Cost savings is one of several unintended benefits of the KidsVoice team model. Using attorneys alone to provide thirteen hours of service per year would be significantly more expensive than using the agency's multidisciplinary approach. Staff social service professionals are paid, on average, $7,500 per year less than attorneys. Since KidsVoice currently employs twenty social service professionals, there is a savings of $150,000 per year in salary alone. Clearly, a multidisciplinary approach not only improves advocacy and service delivery, but also creates cost savings in these increasingly financially conscious times.

CONCLUSION: RECOGNITION AND REPLICATION OF THE KIDSVOICE TEAM MODEL

KidsVoice received the 2004 Child Advocate of the Year Award from the Pennsylvania Bar Association and the 2004 Child Advocacy Award from the American Bar Association for the effectiveness of the agency's advocacy and for the growth and development of the multidisciplinary model.

The multidisciplinary advocacy model intuitively makes sense to child advocacy organizations and courts. KidsVoice has been approached by advocates from surrounding counties and by child advocacy agencies and courts in other jurisdictions interested in replicating the agency's model. Initially, KidsVoice did not pursue these opportunities because the focus was on working out the challenges in the team model and supervisory structure. Now that the agency has refined and fully implemented the multidisciplinary model for several years, KidsVoice is developing resources to assist other jurisdictions in establishing a multidisciplinary team approach to advocacy. The agency also is currently evaluating whether to expand operations into other counties in Pennsylvania.

For more information about KidsVoice, please visit www.kidsvoice.org.

POSTSCRIPT: AUTHORS' NOTE

Part of the inspiration for including a broad array of professionals beyond lawyers and social workers in the KidsVoice multidisciplinary model came from the University of Michigan Interdisciplinary Training Program in Child Abuse and Neglect, a fellowship program funded by the Kellogg Foundation. In this program,
graduate students and faculty from the schools of law, social work, psychology, medicine, and public policy came together to examine child abuse and neglect issues from a multidisciplinary perspective. One of the most intriguing aspects of the fellowship was the opportunity to bring to this multidisciplinary forum cases from participants' individual disciplines where they had run out of options and solutions for a particular child or family. Other professionals invariably had suggestions about a new treatment program, a possible diagnosis to consider, or a novel resource or opportunity. Regardless of the origin of the case, each participant walked away with a blueprint of new options to explore, and new found enthusiasm about how they might help their clients. KidsVoice Executive Director Scott Hollander participated as a law student in both the University of Michigan Child Advocacy Law Clinic and the Interdisciplinary Training Program in Child Abuse and Neglect. Ten years later, when faced with the question of how to increase staff and resources at KidsVoice, Hollander mentioned that some of the most powerful and effective advocacy in his career had been done as a law student with access to the expertise and resources of this multidisciplinary fellowship. The KidsVoice staff was excited by the concept and the potential to create something similar, and decided to add social service professionals to the agency's staff to develop a multidisciplinary team approach to child advocacy.