



## HARRY SPENCE, COMMISSIONER, MASSACHUSETTS DEPARTMENT OF SOCIAL SERVICES

Close-up

*Harry Spence was appointed Commissioner of the Massachusetts Department of Social Services (DSS) in November, 2001. He is a former deputy chancellor for operations for the New York City Public Schools; a governor-appointed receiver for the bankrupt city of Chelsea, Massachusetts; and a court-appointed receiver for the Boston Housing Authority. Spence has led sweeping changes at DSS by abolishing a “culture of blame” and fostering a “learning organization” that is now focused on permanence for every child. Currently, Massachusetts has more than 9,450 children in placement, a majority of whom are age 12 and older.*

**VOICE:** *What changes have you implemented to achieve permanence for kids – especially older youth?*

**SPENCE:** Four years ago, we began to look at the system through the lens of permanence. We worked with our provider networks, in part because we were concerned about having an overreliance on residential placement, which was a source of kids aging out of care. We reorganized our purchased services to enhance their focus on permanence. That meant moving to a system where we keep kids as close to home as possible, creating permanency incentives for everyone involved in the system, and making a systemic commitment to permanence as a goal for children.

Another initiative was “Working with Families Right from the Start,” a 90-member committee that looked at the entry into care and the ways in which we could look at permanence from the outset. Our traditional entry process had an overwhelming focus on safety. That focus on safety needed to continue, but also be combined with a focus on permanence.

The third change is our “teaming” approach. The staffing model in child welfare has been one social worker responsible for a number of cases. With the teaming approach, for example, we assign cases to a group of five social workers, with a supervisor. They’re able to assign resources within the group as needed. We think it’s a more effective way of organizing the work and will make a big difference in the quality of decision-making, the support that the workers feel, and the state’s ability to achieve permanence for kids.

**VOICE:** *Have you expanded prevention services, so children don’t have to enter care?*

**SPENCE:** Central to the intake process is a belief that if we work collaboratively with the majority of families, we will not need to remove as many kids. The reorganization of our service system is directed toward delivering services immediately because we know that if we provided services within a day or two, we often wouldn’t have to remove the child. One way we hope to reduce the number of children in care is by moving to a Differential Response System. Under this effort, we hope to be able to provide support and services to many families without charging them with neglecting their children, as we do now. It allows families to receive community-based supports without

the necessity for a formal finding of abuse or neglect.

**VOICE:** *What do you think the public expects from its child welfare system?*

**SPENCE:** We’ve really got three public expectations of child welfare that pull the system in different directions. The public insists that DSS work to prevent atrocities to children, and there’s zero tolerance for failure. Countering that first expectation is another that mandates that we support families (with minimal intervention) to improve their parenting in order to keep children safe; but these two expectations are in complete contradiction, since we cannot ensure safety while maintaining our distance with vulnerable families. There also is a permanency expectation from the community. People believe that the outcomes for youth in the child welfare system should not be any worse than for other children.

All three have some reasonable and appropriate element to them, but when each is made absolute, it is what I call the Bermuda Triangle of child welfare.



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**VOICE:** *Child welfare systems routinely come under fire when a child in care sustains injuries or dies, which leaves communities and officials wanting to place blame. How does DSS respond to crisis?*

**SPENCE:** Since I got here, I have said publicly that I will not punish error, that I will defend error. I won't defend negligence, I won't defend dereliction of duty, but error occurs in everyone's life all the time. Therefore, we need to become a learning organization in which we review our mistakes and create a culture of change and lessons learned.

Fifteen years ago, in the medical world, practitioners moved to reduce fatalities by making the culture of hospitals one where the acknowledgment and analysis of error is constant. So, we've said we're going to take that kind of approach.

This question of how we build learning organizations is critical. And I think that's the real challenge we face, because child welfare ought to be the most exciting, rich, complex, intellectually stimulating, emotionally powerful work that anyone could do. DSS ought to be the center of services for children, and others ought to be excited about what we're doing. And I think the possibility for that is very real, but we've got to learn how to be learning organizations.

**VOICE:** *Do you have supports for youth who have "aged out?"*

**SPENCE:** For a number of years, Massachusetts had a provision for helping youth ages 18 to 22, but they had to be high-performing kids to qualify, either in college or some form of job-training. We realized those are the kids who least need the assis-

ance. It's the other kids, the ones who aren't so high-performing, who would benefit most from continued supports. We decided a performance requirement wasn't necessary, but we have established standards for those who will receive ongoing support, because between ages 18 and 22, youth should be making some progress toward becoming an adult. We're not looking to build dependence on the state, but rather to use our support to help kids transition into adulthood more successfully.

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**VOICE:** *What other changes are you making for older youth in care?*

**SPENCE:** We're redefining our service goals. Our Group on Adolescent Permanency has made its recommendation to eliminate both independent living without a family connection and long-term substitute care as acceptable outcomes.

And all 29 [DSS] offices in the state have been involved in our first home-grown breakthrough series on how to improve our achievement of adolescent permanence.

We've invited other states in New England to join us, and we're looking at everything from how kids in care can become the major resource for identifying possible permanency solutions, to how to work on genograms and access family history.

**VOICE:** *Have you changed your foster and resource family recruitment strategies?*

**SPENCE:** Yes. We're developing regional strategies for recruitment. We recently mapped the location of our foster families around the state, and we found that they are clustered around DSS offices. Therefore, the families are not necessarily where the kids are—they're where our staff are. So we need foster families to be where our kids are. We need to recruit geographically. Also, to help kids feel a sense of continuity when they enter care, we need to recruit with ethnicity and religion in mind. We've also adopted the Washington State approach of using foster parents as stipend-paid recruiters. Today we have these "foster parent ambassadors" in every office, and it's working wonderfully.

We also are recruiting foster families specifically for adolescents, based on a model from Pat O'Brien, the executive director of You Gotta Believe in New York City. The families are asked to pledge to keep a foster child no matter what until that child achieves permanence.

**VOICE:** *But it's understood that the foster family is a "bridge family?"*

**SPENCE:** Yes. They make a commitment to that child for the duration of his or her time in care. Now, not infrequently, they end up being the permanent family for that child, which is a great outcome, but not

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ty you have when you run an organization is to give people permission [to make change].

What’s also been striking is that this is the hardest work I have ever done. The challenge of the public’s complex, confused, and deeply charged views of child welfare has been the most difficult. On the other hand, we’ve had success with the elected leadership in this state. And in thinking about how you change the societal context and reframe the issues, I don’t think it’s done by trying to change the media. You change how people perceive an issue by determining what the political leadership understands and to what they will respond.

required. Often, the family takes an active role in the permanency planning for that child as well.

**VOICE:** *What is the role for community partnerships?*

**SPENCE:** Whether you’re talking about entering or leaving state care, the role of the community is crucial. And I say that because, as we thought about moving our system from residential care to one with community-based supports, we realized there are issues of both community capacity and acceptance.

We are striving to develop symbiotic relationships with teachers, because they can be the first ones to identify vulnerable families for preventive services. In turn, we can work with families and help to stabilize the children who are in their classrooms.

We also have sought partnerships with community schools because schools are a flash-

point for resistance about high-needs kids living in the community. So the question of the community’s commitment to these young people is crucial. DSS also is partnering with a nonprofit organization, Treehouse, to explore ways we can engage the community to support foster, pre-adoptive, and adopted children living in a given community.

**VOICE:** *In your leadership role, what have been your successes and challenges?*

**SPENCE:** For me, this reform effort has been huge in terms of thinking about organizational change. I used to think the task was to come in, figure out the charge, get a few like-minded people around you, and convince the organization what it needed to do. At DSS, I took a very different approach, basically, asking people: “If you could do the kind of practice you long to do, what would it be?” And the answers to that have come entirely from the department’s staff. I say to people now that the greatest authori-



*Massachusetts DSS Commissioner Harry Spence at a National Adoption Day event.*