

Searching for the right door

By Tony Pearson

For some time, I have been troubled by Bancroft's Community Safety and Well-Being Plan. There are times when it has looked much like the Hans Christian Anderson story of the Emperor's New Clothes. You remember ? where two con men posed as tailors to sew an elegant (and very expensive) new robe for the king. When it looked like they were doing nothing, they convinced the court officials that their stitching was so fine that only people of the highest quality could see it. They then took the money and ran, while the king paraded naked around the court, until a little child proclaimed ?The emperor has no clothes!?

Certainly it is difficult to see in the bureaucratic language of the explanatory document (?Our Shared Commitment?) an action plan to reduce crime and social disorder, no matter how many times town officials have patted each other on the back for their wonderful accomplishment. It talks a lot about collaboration and partnerships and community approaches. But as to what's actually going to be done ? that seems to be missing.

At times, local agencies have been a bit testy about the document. ?The town says everyone should work together ? but then tells us we have to do all the heavy lifting,? said one. The other point of irritation was that Bancroft had no plans to do any of the necessary programming itself. ?Show me the money!?

But sometimes you do need to be shown a framework if what you need is a new type of structure. The council's committee, aided extensively by Maynooth's Dr. Hugh Russell, discovered that the very lack of structure was creating many unnecessary problems. A recent headline reminded me. The claim was made that Bancroft's rate of violence crime was increasing. It wasn't, and isn't. What happened was that a new regulation requires scuffles at an assisted living complex ? like the Manor ? to be reported as assaults. What had previously gone unreported was now a ?violent crime wave?.

But of course, a patient suffering from dementia doesn't need a police officer; he needs medical assistance. However, that takes collaboration. All the possible helping agencies have to know the full dimensions of the problem, and figure out what should be supplied by whom. Otherwise it's like the classic tale of the blindfolded men and the elephant: each touching the problem at a different point has a different perspective: ?It's a tree ? no, it's a snake ? no, it's a spear ? etc.? As in the Jain version of the fable, the men have to exchange information and collaborate to come up with a full picture. If the blindfolds can't be removed ? if the institutional jurisdiction lines can't be crossed ? then at least sharing information may allow the development of a co-ordinated plan. Unfortunately, there's a vital piece missing. The various health link networks had the same problem: knowing the need for better co-ordination, but constrained from working together by bureaucratic barriers and lack of staff. However, they were able to get funding for a couple of key positions.

The most important was someone called a ?System Navigator?. The identified problem was that a small group of clients (five per cent of the total) accounted for more than half of all health costs ? mostly because of over-use of hospitals (the most expensive part of the health system), including emergency room visits. The analogy to the overuse of the OPP for health and social issues is a close parallel ? including on costs, where OPP staff costs are much higher than most.

With a system navigator, this ?heavy use? group was assigned to more appropriate care, and their hospital utilization was cut phenomenally ? and so were overall health care costs.

The system navigators were backed up by data management co-ordinators, who ensured that all the agencies had access to the same data, and could see virtually immediately what action was taken.

I believe that to achieve the same sort of results with social services, the county or the province should similarly come up with money for ?system navigators? ? people who can work through the client confidentiality problems, put the comprehensive files together, and then advocate on the client's behalf for appropriate services.

If this is done, all parties should save money in the long run ? and if the health system is an example, in the short run as well.

The town can help - by convening partnership meetings, by identifying grant opportunities to the agencies best equipped to take advantage of them, and by helping develop and advocate for these grants. This they have promised to do.

The OPP can't solve what are social problems, and it's unfair to expect them to.

But it's also unfair to expect existing agencies to ?build bricks without straw?, to use a Biblical phrase. Their present personnel can help, but they're now stretched thin just delivering what the province expects. There has to be some financial investment. But as with any properly planned investment, payoff and payback should follow.