Apollina Smith and the Amazing Exploding Triangle

A cautionary tale on the hazards of large scale integration of human services

by Patricia Miles and John Franz

For a while, it seemed to Apollina Smith like things were finally going to fall into place. As the director of a human services agency in a modest-sized Wisconsin county, she had believed that her organization was in a perfect position to become much more flexible and responsive to the needs of its clients. She had good staff, a reasonable county board, and, she thought, a plan.

Suddenly, she wasn't sure it would ever happen.

We need to get things together

Five years ago, when she took on her current responsibilities, all of the services her agency offered were locked into the traditional disciplinary silos. Mental health, child welfare, juvenile justice, developmental disabilities, substitute care, public health, services for the elderly, housing assistance, alcohol and drug abuse and income maintenance were all whirring along in their own quiet fiefdoms. Budgets, staff roles, responsibility, evaluation and advancement processes, client intake, assessment and intervention strategies, all were different in each service domain. It seemed like staff in each division even dressed differently and spoke a different language.

Generally, everybody in the organization got along fine – as long as they didn't have to work together to serve a client with complex needs. Although many individuals and families received services from more than one of her divisions, coordination was minimal. In fact, it seemed like the occasional attempts by some staff to collaborate with their colleagues in other areas were perceived negatively. The unwritten rule appeared to be, "If your client needs help in another division, just make the referral. Then get out of the way and let those folks do their job." It wasn't so much that there were bad feelings, it was just that the culture of the department was to look down on anyone who didn't adhere to Robert Frost's advice that good fences make good neighbors.

Then some clients the staff called "hot potatoes" began to take center stage. The first that Apollina remembers was a family named the Jensens. Mr. and Mrs. Jensen had three children and a lot of problems. The flare up in her agency came when no division wanted to take responsibility for case management. Mrs. Jensen had problems with alcohol. One of her children, Tim, who was 9, had what was suspected to be fetal alcohol syndrome or effect. Alice, his older sister, who was 12, had muscular dystrophy. The youngest, Brian, who was 3, was actually the one who brought the family into the system when he showed up at Head Start with suspicious bruises and a child protection investigation was begun.

In fact, the schools had been calling for a while with regard to Tim, whom one teacher described as a "holy terror," and Alice, who they believed was not receiving adequate care for her disability. On different occasions, staff from the child welfare and the developmental disabilities

units had visited with the family, but the family had refused voluntary services and, there being no basis for a court petition, no further action had been taken.

The child protection worker who investigated Brian's bruises found that they were on the side of his face and were in the shape of a hand print. An exam in the school nurse's office revealed older bruises on his buttocks which looked like a strap and a belt buckle. Contact with the family revealed that their lives were in chaos. Mr. Jensen had lost his job when a manufacturing company moved out of town. Mrs. Jensen was drinking openly. The child welfare worker said that "the house was filled with despair and anger like thick black clouds." She said that all of the children were at risk and might have to be placed. Being a new worker, she thought that it might make sense to have consultation from the other units.

Apollina agreed and the meeting was held. She sat in on it because she felt it would be a good opportunity to foster better cooperation among the divisions. It was a disaster. When the units weren't blaming each other, they were blaming the family. This kind of behavior was out of character for many of the staff, but Apollina could see how threatened many of them were by the immensity and diversity of this family's needs.

Ultimately, the task of helping the family fell solely on the child welfare unit's shoulders. The division supervisor assigned a second worker, but after a year both Brian and Tim, who had kicked a teacher and destroyed about half a class room, were in placement. And more inter-system issues were bubbling up in other client situations all across the service spectrum.

"Folks, we've got to get things together around here," Apollina said at a meeting with her management team. "I am open to any suggestions."

Lets create a special team

The plan which emerged from that meeting was to establish a special program for families with children who had the most complex needs. Using the wraparound process, that program would be able to work across system boundaries and use flexible funds to provide unique services designed to address each family's unique needs. After further discussion, the group decided that the most realistic plan was to contract out for the program.

A grant was received from the state Bureau of Community Mental Health for startup, and the Kenyon County Wraparound Team was established by a local non-profit agency, Action for Kenyon's Kids, which also operated an intensive supervision unit, a youth restitution program and some prevention programs. AKK hired a case manager who went to a workshop in Wausau for training and the next week started with her first family, which incidentally was the Jensens. By that time, Tim had been placed at a residential treatment center for almost 9 months and was going nowhere fast.

AKK's case manager, Lizzie Albright, was a ball of fire. She was creative and dynamic and simply outflanked the system on behalf of her families. Three months later, by some miracle, as far as Apollina was concerned, Tim was back with his family. Things weren't perfect, but Mrs. Jensen was relatively sober, Alice was having a better life and it looked like Brian might also be coming back. The plan was a crazy quilt of everything from mentoring and respite to a special job training experience for Mr. Jensen, but it was working. Apollina wasn't embarrassed to notice that with all of its elements, it was still costing less that the $5,000 a month the county had been spending for institutional care for Tim, let alone all the other costs.

Early on, there had only been a few referrals to the AKK wraparound program - mostly families like the Jensens that no one else wanted to deal with. There was some worry that without

changes the program would have to be dropped for lack of use. Then as pressures increased on the department and Lizzie began demonstrating her apparent magic with families, requests to use the program began pouring in. The juvenile court judge even ordered one kid into "that wraparound thing."

AKK's contract was expanded for the second year and another case manager was hired. Lizzie had even pulled together an inter-system coordinating committee. It was part of the grant as such committees always are but Apollina hadn't had much hope for it, given her prior experiences with collaborative planning. It still wasn't a model of cooperation and mutual understanding, but Lizzie had them meeting every month, doing joint planning and even sharing a few resources, although most of the funds being spent by the wraparound project were coming out of Apollina's budget.

That was when Apollina began to think there might be hope. Maybe, she thought, she could use the AKK experience to get some serious system reform underway. She should have known better.

The roof falls in

About six months ago, trouble began brewing. The wraparound project had maxxed out its budget and was unable to accept any more families, even though there was growing demand. But instead of general support for expanding the contract, her staff and others in the county system were calling for the project to be terminated. The basic theme of the complaints was that the AKK project was drawing off resources these other programs badly needed. She was being blamed for giving the contract to a non-profit agency instead of keeping the program in-house. Some folks on the county board wanted the project ended because it was coddling juvenile delinquents, others wanted it expanded because it was saving money at a time when the out of home care costs were sky-rocketing.

To make matters worse, two months ago, Lizzie burned out and quit. She left Kenyon to go to graduate school in Madison. Privately, she told Apollina that the pressure within her agency to dilute her program had just gotten to be too much. Now, on top of everything else, about a dozen parents of kids with severe emotional problems who had heard about the program through a school-based support group are demanding that they be allowed to participate.

Suddenly what Apollina had thought would be the basis of system reform in Kenyon looked like it might cause system meltdown.

Enter the exploding triangle

What happened? How could something that seemed to be such a good idea cause so much trouble? One way to explain this situation to Apollina is through the image of the exploding triangle. It has been helpful in the past to visualize the levels of need of the people coming to human service agencies in a community as forming a three part triangle. The wide base represents those clients who have needs that can be met through a contact with a single department or agency using a fairly standardized form of service. In Apollina's county she believed that accounted for as many as 85% of the total consumer population. The narrower middle section represents about 13% of the clients whose needs are much more complex, and require services through multiple resource channels. Often coordination of services is difficult for these clients and it is not unusual that only a portion of the needs they present are actually met. The tip of the triangle represents the 2% or so of the clients whose needs are so complex that they usually blow

right through all of the established services in a community and end up in various highly restrictive forms of care with little chance of long-term positive outcomes.
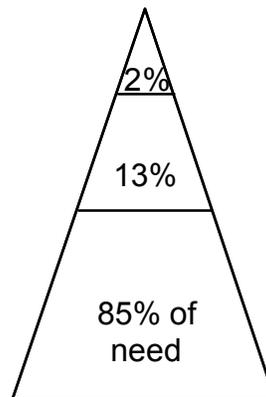
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Chart One
Initial assumptions
about the distribution of
client need in the
system

Seeing the range of need in the community through this perspective supports the strategy of implementing a narrowly targeted pilot project to address the needs of the people in the system of care who have the greatest unmet need. Since it is also not unusual to find that systems are spending as much as a third of their budgets for this group while obtaining outcomes which are at best modest and often quite poor, there are fiscal as well as humanitarian reasons for this decision.

The triangle model can be helpful for getting things started, but it has important limitations when it runs up against the reality of rapidly accelerating levels and diversity of need in our systems of care. If the distribution of need were static, the model would work and appropriate types of services could be targeted for the folks in each layer. But as the triangle has been tested, we are beginning to learn that our assumptions about need may not be accurate.

First, needs are always changing in response to added social, economic and other pressures. Second, it is harder than anyone thought to separate people out into distinct bins in terms of the type of need they have. In fact, need seems to be a combination of our perception and the actual situation of the client, rather than a fixed, objective entity that can be consistently measured. Third, new ideas are hard to contain. If families, case managers and others operating in the system of care come to believe that a better alternative is out there for meeting needs, they will attempt to get that service. Even targeting these services to narrowly defined populations won't prevent this pressure for access. If the entry criteria for the new service are that clients must be red-headed, left-handed and Lithuanian, case managers who are trying to help their clients have a better life will be getting out the L'Oreal, working on their client's handwriting and changing their client's last names to help them get what they need. This upward pressure erodes the system's base of care from the lower segment of the triangle, and, if the barrier to the upper triangle is strong enough, causes the middle level to expand rapidly, resulting in what has been called the amazing exploding triangle.
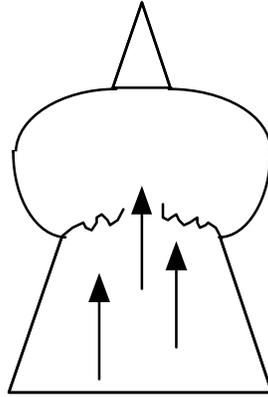
Chart Two
System disruption as
demand for a targeted
service increases

The exploding triangle is not a stable state for a system of care. It represents not only conflict caused by increased demand, but also disruption caused by a collision of values and approach between the traditional services and those represented by the newly successful, but narrowly targeted innovation. Often at this point, systems will try a variety of techniques to restore equilibrium. First, there will be an attempt to restore or maintain old boundaries. But this counter-pressure to change will usually only increase internal competition, which will lead to a disruption of organizational identity, an increase in functional confusion across disciplines, reinforce specialization, and precipitate even greater divisional fragmentation.

Second, there may be an attempt to let off steam by rapidly diverting children from "hot potato" families to dispositional options that previously had been less favored. Systems at this stage will see a rapid increase in the use of high cost restrictive services such as correctional placements, residential care and hospitalization, even if their use had been declining with the introduction of the innovative services. But the increased fiscal pressure created by using more high end services is usually so great that this strategy only increases disruption. In the ensuing struggle caused by fiscal inflation, systems can begin to founder under emerging counterproductivity, accelerating system dependence by the clients with greatest needs and increasing authoritarianism by providers and other system agents in response to growing distrust and the struggle over vanishing resources.

An environment that demands change

Depending on the resources available to the system, the dangerous conditions described above can persist for years. But as resources diminish, the internal strife and increasing expenditures can lead to disintegration of many of the service organizations in the system. Also, besides the events taking place within a particular system, additional changes will be happening in the external environment.

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Taking a quick scan of the situation and attitudes in her community, Apollina finds that the factors her agency would have to take into account if it were to rescue itself from its plunge toward implosion include:

• *Increasing demand for local control of resources.* Not only was there a push to move decision-making from the state to the county, but even from the county to individual providers.

• *Increasing demand for consumer self-determination.* Not only were advocates and consumer groups pushing this point, some of the more innovative providers were saying that it was the only way they could obtain effective outcomes with their clients.

• *Increasing demands for efficiency.* The county board and others were expecting her agency to produce better outcomes at lower expense.

• *Increasing demands for new types of partnerships.* Everywhere Apollina turned she had someone asking or telling her that she had to be in some sort of collaborative arrangement or another.

• *An emerging trend that emphasizes support models* over intervention or clinical models in providing services for families.

An organizational structure that resists change

One way to deal with all these pressures would be to have a more flexible organizational structure. This has been a goal of Apollina's for several years. She has read about the development of team-based structures but is wondering if that option will ever be possible in her department. As things stand, she is stuck with the old-fashioned hierarchical organization chart with each discipline in a separate pyramid and a high degree of compartmentalization. Specialization is high, connectivity is low and as the threat of change increases, so does the competition among divisions.

She asks an organizational consultant about the possibility of moving from the existing structure to a team-based approach. He tells her that, yes, a team arrangement could offer a lot of advantages. The use of multi-function teams can reduce fragmentation and compartmentalization, increase connectivity and transform negative competition into a drive for improved services. He says there is only one problem: in his experience true team-based structures are rare as hens teeth. First, they are usually highly countercultural to the generally individualistic approaches most agencies have taken to the delivery of human services. Second, regardless of the type of organization, he has found that empowering teams involves a high level of risk. Upper management has to give up a lot of power to make it work. Usually what he sees is that organizations go only so far down this road, and then pull back. Paradoxically, because of those two factors, implementing a team structure usually requires the existence of a very powerful central authority. In fact, in the few private companies with successful team structures, the top executive has almost had to shove the change down the throat of the staff and employees - even though they may end up liking the new arrangement.[1]

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[1]The discussion of the barriers to the development of a team-based structure is based on an interview with business consultant Robert Morris, president of Organizational Skills Associates, of Madison, Wisconsin, who, despite the barriers, has been working for over 8 years with both private and non-profit organizations to help build effective teams.

The third barrier to the development of a team structure is the fact that in most organizations, even where group tasks are created, nearly all of the internal contingencies such as the reward system, the supervisory system, the accountability system and the career advancement system continue to be built on highly individualistic values.[2]

However, an alternative to an authoritarian leader forcing autonomy, flexibility and responsibility on her staff is the creation of such a strong sense of vision and mission in the staff that they self-organize into functional teams for the simple purpose of getting the job done.[3]

So, Apollina Smith is faced with the threat of an exploding triangle, a system of care that wants to run back and hide in a belief that things can be the way they once were, and a knowledge that many of the critical needs of her system's clients are not being met. What can she do?

Creating a vision for change

Looking at her situation in the most positive light, Apollina realizes that she does have some tools for fostering change. Given the limits of her power and the near chaos of the system in which she works, she knows she cannot pick a new design or even have a committee draw up a new plan and push her agency into it by brute force. But she does think that she can manipulate some factors that could create a context in which a more effective operational structure might emerge. Her list includes:

• *Staff roles and job descriptions*. She hopes to create opportunities that will allow those staff who want to try something different the opportunity to flex their roles and even join in informal teams if they choose.

• *Internal and external partnerships*. She realizes that her agency can no longer work alone. She needs better partnerships with other aspects of county government, with the non-profit agencies and consumer groups, with the business community and with neighborhood groups. As time consuming as building these partnerships may be, she has begun to make them a high priority for her office.

• *Actions that build, define and infuse vision and values*. Nothing she can say will inculcate value and vision into her staff any more. They have seen a dozen mission statements prepared and ignored in the face of external pressures. But Apollina has decided that if nothing else they will see her consistently acting upon a clear set of values and she hopes to begin activities which will build vision through participation.

• *Resource acquisition and deployment*. Money talks in human services as much as anywhere else. Apollina has set up a process of looking at the way her agency seeks funds and distributes them to identify requirements that unnecessarily reduce flexibility and responsiveness.

• *Decision-making location and capacity*. One of the key values she is trying to infuse is to reinforce the use of common sense and innovation at the point of client contact. During a recent interview, a line staff member said, "Wait a minute, I think I get it. You're trying

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[2]Cf. Schein, Edgar H., *Organizational Culture and Leadership*, 2nd Edition. San Francisco, Jossey-Bass, 1992.
[3]A possible process for building a coherent and evolving sense of identity throughout an organization has been suggested by Peter Drucker. He proposes that organizations adopt a long term process that continually assesses the organizations information and assumptions about the environment in which the business operates, the mission which that organization carries into the environment, and the core competencies which the organization has or must develop to accomplish its mission. Cf. "The Theory of the Business," Harvard Business Review, Sept.- Oct. 1994, pp. 95 -104.

to tell me you want me to think for myself." When she nodded her agreement he added, "Whew. Things are really getting strange around here."

•   *Formal and informal contingencies*. To the degree that she can control them, Apollina has begun putting in place rewards for client responsiveness, innovative service and cross-system connectivity.

•   *Optimizing consumer influence*. Apollina wants to hear from her customers what is working and what is just causing frustration. To that purpose she has begun developing mechanisms that increase consumer voice and ownership in the design and delivery of services.

Toward a theory of service

Things are getting both better and worse for Apollina as she attempts to put some of her ideas into place. The AKK contract did not disappear as she thought it might. In fact, at the last minute the board looked at the rising institutional costs and put additional money in the budget for her to contract with a second agency for front end wraparound services. She is thinking about giving to the school so that the parent support group can operate it themselves. Lizzie's replacement at AKK is one of Apollina's own workers who moved over just to try something new. He's more soft-spoken than Lizzie, but knows the ins and outs of the system as well as anyone.

Apollina feels like a theory of service is beginning to evolve not only for her agency, but for the community as a whole. Generally, it is happening through a one step forward, two steps backward process, but gradually a clearer sense of mission is emerging among her staff as they listen to their clients, gain a better understanding of the community environment and acquire more confidence in their own strengths and abilities and in the power of the relationships they are building with other service providers and especially with the consumers who are forming the core of the new system of care.