Hierarchical Differences within Collaborative Service Delivery Networks:

The Role of Street-Level Workers in Shaping Informal Accountability

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Abstract

Collaborative service delivery networks have become a common mode of public service delivery, especially for social services. The challenges of providing services through these collaborative networks are multiple and inter-related. While formal systems are used in network governance, informal dynamics are an important dimension as well, yet they have been given far less attention. This paper seeks to remedy that gap by building upon earlier research that empirically identified core elements of informal accountability, and offered evidence that informal accountability manifests differently at various hierarchical levels within service delivery networks. Our goal is to shed light on the latter by focusing on the roles that street-level workers play in creating and sustaining informal accountability, and on the impact this has on relationships and effectiveness in collaborative service delivery networks.

This paper uses a multiple case study design to examine the role of street-level workers in developing and managing informal accountability among individuals working in children's human services in three counties. The data used were generated through semi-structured interviews with 55 individuals at 28 different organizations and analyzed using ATLAS.ti. Findings suggest that street-level workers play vital roles in shaping and sustaining informal accountability within service delivery networks. Contrary to the view that bottom-up implementation threatens accountability, we find that it is enhanced by front-line workers adhering to professional norms, exercising discretion and acting as "citizen-agents." Our study contributes to the public management literature on alternative service delivery, collaboration, networks, implementation, and informal accountability and has implications for managers in understanding the importance of their front-line workers in the new collaborative service delivery paradigm.

Multi-organizational, multi-sectoral collaborative systems have become commonplace in the landscape of public services. They are especially visible in the arena of social services, which are highly complex, and which lend themselves to partnerships among governments and nonprofit organizations (Smith and Lipsky 1993; Van Slyke 2003; Warner and Hefetz 2011), especially as states and local governments seek service innovation and alternative service delivery strategies (Romzek and Johnston 2005; Amirkhanyan 2009; LeRoux et al 2010; Bel and Fageda 2010; Warner and Hefetz 2011). The multiple and inter-related challenges of providing services through these systems have been well documented; they include goal conflict (O'Toole 1989, Meyers et al 2001), incompatible organizational cultures (Romzek and Johnston 1999), competition for scarce resources (Guo and Acar 2005), the need to maneuver both laterally and vertically (Cooper 2003), and system and staff instability (Johnston and Romzek 2008, O'Toole and Meier 1999). Perhaps chief among these concerns however, is the potential loss of accountability posed by networked service delivery, given the tendency of these arrangements to fragment power among a multiplicity of actors, and the potential for actors to pursue singular organizational goals at the expense of mutual system goals.

Service delivery networks operate within formal and informal accountability relationships and system participants must learn to operate within both, reconciling the expectations of multiple stakeholders with their institutional responsibilities. In the U.S., governments have shown remarkable proclivity to create multiple and often overlapping formal accountability mechanisms (Romzek and Dubnick 1987); in networked arenas they often are reflected in contracts or memoranda of understanding. While formal systems are often used in network governance, informal dynamics are an important dimension as well, yet one that has commanded far less attention among public management scholars. Service delivery by networked organizations inevitably gives rise to a need for informal strategies to reconcile issues such as disparate institutional cultures and service delivery protocols. Indeed, recent empirical work has demonstrated that actors within social service delivery networks create an informal accountability structure through adherence to shared norms, engagement in facilitative behaviors, and the use of informal rewards and sanctions (Romzek et al. 2012). Informal accountability dynamics are critical to networked service delivery, as they help to supplement formal accountability mechanisms governing system actors, and more importantly can promote inter-organizational accountability even among actors that must collaborate in the absence of contracts or formal mandates.

Yet in networked service delivery, accountability concerns are not just limited to the possibility of inter-organizational breaches, but rather they exist alongside the typical *intra*-organizational accountability concerns, as responsibility for carrying out system goals gets pushed down through the layers of hierarchy in each organization comprising the network. A perennial debate among implementation scholars has centered around questions of whether top-down or bottom-up approaches offer the most promise for carrying out public programs and services (Anderson 2003). While the latter has been viewed by some as creating a control problem for managers, proponents of the bottom-up approach have reasoned that ambiguous goals and uncertainty in the work environment justify broader grants of autonomy and discretion in decision making among those working at the "street-level" (Lipsky 1980). Networked service delivery may compound accountability concerns on the front-lines of social service policy implementation, as government agencies no longer directly deliver these services but contract them out to nonprofit organizations whose front-line workers have become "the new street-level bureaucrats" (Smith and Lipsky 1993, p. 115).

In light of this increasing shift from direct government service delivery to networked governance, Hupe and Hill (2007) have questioned the traditional dichotomous perspectives of top-

down versus bottom-up policy implementation, calling for a "rethinking of accountability at the street-level" (p.279). We take up this challenge by examining the roles that street-level workers play in creating informal accountability for collaborative service delivery outcomes. This paper builds upon our earlier research that empirically developed an informal theory of accountability (Romzek et al 2012) and work that observed hierarchical differences in informal accountability dynamics among network actors (Romzek et al. 2011). In this paper we examine the following questions: Do street-level workers play a role in creating informal accountability for system outcomes? If so, what norms and behaviors guide their actions? How are these norms and behaviors similar to, or different from, those that guide managers and executive personnel within the system? We examine these questions using a grounded theory approach involving a multiple case study of county-based children's human service networks in three states: Kansas, Maryland, and Michigan.

Contrary to the view that bottom-up implementation is problematic for accountability, we find that street-level workers play a critical "hub" role in shaping and sustaining informal accountability within the service delivery collaborative. We also observe that accountability for system outcomes is enhanced by front-line workers through adherence to professional norms, exercising discretion with regard to formal rules and procedures, and by acting as citizen-agents (Maynard-Moody and Musheno 2000). Our study contributes to the public management literature in three ways. First, we identify differences in attitudes and behaviors among personnel at different hierarchical levels within the collaborative system which has been overlooked in much of the network literature. Second, we contribute to the implementation literature by examining the norms and discretionary behaviors of street-level workers in carrying out human services in a networked service delivery context and highlighting how these discretionary actions collectively shape the service delivery system. Finally, we contribute to the emerging literature on informal accountability by revealing how workers establish and use informal enforcement mechanisms to drive the system toward positive outcomes, even in the absence of formal mandates for cooperation.

In the next section, we discuss the theory of informal accountability along with the literature pertaining to street-level workers in the social services context. Next we describe our methodological approach, and data collection strategy. We then present the results of our analysis. Finally, we conclude with a discussion of the implications of our findings for both theory as well as the practice of management in collaborative service delivery networks.

Informal Accountability in Collaborative Service Delivery Networks

As government agencies have expanded their reliance on contracts and collaborative networks for service delivery, efforts to understand the dynamics of accountability in networked settings have increased (Romzek 2011). The literature on accountability tells us that the usual and fundamental problem - that of "many hands" (Thompson 1980) - is compounded in collaboratives. Service delivery networks operate within both formal and informal accountability relationships and system participants must learn to operate within both, reconciling the expectations of multiple stakeholders with their institutional responsibilities. In networked policy arenas, accountability mechanisms are often reflected in contracts or memoranda of understanding. While formal systems are used in network governance, *informal* dynamics are an important dimension as well, yet one that is far less understood. Service delivery by networked organizations inevitably gives rise to a need for informal collaborations, if only to reconcile disparate institutional cultures and service delivery protocols.

Within this framework, Romzek and Dubnick (1987) tell us that accountability relates to responsibility and answerability, while Posner's (2000; p.524) questions about third-party service delivery - "accountability for what and to whom" – are also relevant. From these perspectives, Posner's "for what" question is best answered with the overall collaborative network goal: to best serve at-risk, often vulnerable children in order to improve the quality of their lives and enhance their future roles in society. In a more operational sense, the actors in the network will be responsible for and accountable to the specific formal contractual or agreement tasks and languages that "govern" the network in its pursuit of this larger goal. Informally, accountability is more complex because it entails answerability for informal and occasionally unstated expectations that are often uncertain, imprecise, and ambiguous – all in a dynamic system (Rousseau 2004). Actors in these systems are accountable for their actions undertaken in relation to the overall goal, especially as they relate to interactions with other individuals, from their own and from other organizations, as they work toward that goal. In terms of the "to whom," the focus is similar. Formally, accountability may be directed to a government through a contract, or perhaps to a "lead" network organization. Informally, and in reality, actors in these networks are accountable to each other because their interactions and joint efforts are critical to the system's overall goal. However, both informal and formal accountability includes responsibility within one's "home" organization as well. Our observations indicate that in a larger sense, informal accountability in these systems manifests as multiple strategies designed to keep all actors and organizations meeting mutual expectations, and moving together, toward the overall system goal – that is – to hold one another's "feet to the fire."

Multi-organizational delivery systems, even when formally structured, contain an element of self-governance that is enabled by informal systems of rules, trust and reciprocity norms, credible commitments, and informal mechanisms for rewarding or punishing those who violate rules and norms or defect on commitments (Ostrom et al. 1994; Brown et al 2010; Van Slyke 2007). For instance, Bardach and Lesser (1996) refer to partner accountability and Bryson and colleagues (2006) stress that both "formal and informal governing mechanisms are likely to influence collaboration effectiveness" (p. 49). Informal accountability in the more hierarchical structures of networks has been explored in the literatures on federalism and intergovernmental relations, among others (Agranoff and McGuire 2003). There are several components of informal accountability operative in lateral links – repeated interactions, norms of reciprocity, facilitative behaviors, informal rewards and sanctions (Romzek et al. 2012, Mandell and Keast 2007).

Recent work by Romzek et al. (2011) identified core elements of informal accountability through a study of social service collaborative networks in three states. These core elements include shared norms of trust, reciprocity, and respect for institutional turf; informal facilitative behaviors to include frequent and sustained communication, follow-up on commitments, information sharing, favors, acknowledgement of mistakes, action to correct errors, and relationship-building; and the use of informal rewards and sanctions to hold network members answerable for outcomes. Rewards include favors, commitments to future collaboration, public recognition, enhanced reputation, and advanced notice, while sanctions include diminished reputation, loss of opportunities within the service delivery system, and exclusion from information. Further empirical work on informal accountability in networks has identified the prevalence of relationship building and championing as facilitative behaviors (see Figure 1.)

These norms and behaviors promoting informal accountability exist in many of the relationships between individuals with authority and their subordinates within organizations, as well as in relationships between individuals in organizations with authority and those in subordinate organizations

4

in the system This analysis focuses on interactions that occur between front-line workers employed by different organizations, and within different policy systems to better understand the interpersonal dynamics by which individuals hold each other accountable for making appropriate contributions to shared outcomes.

Accountability on the Front Lines: Relevant Insights from the Street-Level Bureaucracy Research

Michael Lipsky coined the term street-level bureaucracy as a reference to 'the schools, police and welfare departments, lower courts, legal services offices, and other agencies whose workers interact with and have wide discretion over the dispensation of benefits or the allocation of public sanctions' (Lipsky 1980, p. 11). Serving as the point of reference for all "bottom-up" implementation studies, Lipsky made the case that public employees carrying out the functions of these bureaucracies do not simply implement policy, but rather they *make* policy through the discretion they exercise every day in the course of their encounters with citizens in the delivery of services. Lipsky argued that in many cases, rather than formal laws and policy statutes it is 'the decisions of street-level bureaucrats, the routines they establish, and the devices they invent to cope with uncertainties and work pressures that effectively *become* the public policies they carry out' (Lipsky 1980, p. 12).

Building on Lipsky's (1980) seminal work, Smith and Lipsky (1993) examined the widespread government contracting for social service that began in the 1960's and by the late 1980's had rendered the nonprofit sector the new face of the American welfare state. Given this shift in service delivery from public to private nonprofit organizations, they argued that "the individuals who now bring into reality the service side of the welfare state are the new street-level bureaucrats. Like their public sector counterparts, many workers in nonprofit agencies interact directly with clients and perform their jobs despite severely limited resources. Also like their public sector counterparts, they work in agencies with ambiguous and conflicting goals, and perform tasks which are difficult to measure" (Smith and Lipsky 1993, p. 115). These statements are reflective of the environment experienced by front-line workers in nonprofit child welfare and mental health agencies, as well as other types of nonprofit social service organizations.

Hupe and Hill (2007) have argued that in the current context of governance and networked relations, street-level bureaucrats practice "multiple accountability" both vertical and horizontal (see also Cooper 2003). Yet there have been few empirical studies examining the how this accountability manifests at the street-level, across organizations within a collaborative network. Selden et al (2006) examined the impact of inter-agency collaboration between street-level workers in two systems (early child care and education) and found that variations in collaboration levels among the nonprofit child care workers and public school teachers had an impact on both management and client outcomes. Specifically, they found that the intensity of the inter-agency collaborative relationship had a positive effect on children's school readiness, but also reduced staff turnover and had a positive effect on staff compensation. In an ethnographic study of front-line workers in public welfare bureaucracies and private welfare-to-work contractors in Michigan, Sandfort (2000) found that street-level workers develop shared knowledge and collective beliefs from their daily experiences, and base their actions, decisions, and interpretation of events on this socially constructed knowledge base.

Street-level workers are faced with situations in which rules may be ambiguous or even contradictory, and this is even more likely the case in networked service delivery. Informal norms and interorganizational dynamics can lead to the development of reciprocal relationships and a sense of partner accountability that may help street-level workers cope with this ambiguity (Bardach and Lesser

1996, Page 2004, Whitaker et al. 2004). Informal accountability emerges from the unofficial expectations and discretionary behaviors that take shape through repeated interactions among collaborative system members in recognition of their interdependence in pursuit of their shared goal(s). Lipsky (1980) identified three forms of street-level accountability – public-administrative, professional, and participatory accountability. It is professional accountability that is of particular interest and relevance to this study.

In the area of social welfare services, individuals in network organizations, regardless of sector, often identify with the overall norms of "social work," broadly defined. While they may not be formally trained in a "helping" profession, their direct work with child-clients will typically require an orientation to the demands of serving vulnerable individuals in need of services. Some case managers intend to continue their education in the future, and are gaining work experience in the interim. Others are interested in upward mobility within their organizations or communities. Still others are in the job for the long run, for a wide variety of reasons. Regardless, they are typically able to tap into the shared perspectives and language of "helping" professions. Professional disciplines represent normative learning institutions through which members are socialized into a common set of professional norms, values, and beliefs. Social work is defined by a set of core values, examples of which are "importance of human relationships" and "dignity and worth of the persons (National Association of Social Workers, 2012). The benefits of the shared perspectives derived from this professional orientation have been elaborated in the literature (LeRoux et al. 2010, Frederickson and Smith 2003, Romzek and Dubnick 1987).

Professional accountability taps into this shared orientation, and suggests that accountability to one's fellow professional is strong enough, in some cases, to supersede dynamics and incentives associated with bureaucratic, political, or legal accountability. Frederickson (1999) has shown that that in the absence of coercive governmental mandates, shared professions or "epistemic communities" serve as mechanisms through which managers can effectively cope with the problems of inter-organizational fragmentation. Defined by Adler and Hass (1992) epistemic communities are "networks of professionals with recognized expertise and competence in a particular domain and an authoritative claim to policy relevant knowledge within that domain or issue-area" (p. 3).

This means that when collaborative service delivery networks involve professionals with a common orientation, informal accountability is facilitated because it may flow naturally from the shared perspectives of the network individuals. System participants are often linked at the individual level through personal relationships, professional associations and memberships, and participation in local task forces, advisory committees or other forms of policy and planning networks related to their industry. These social connections foster relationships that can provide mutual benefit, reduce transaction costs of future collaboration, and solidify a sense of shared norms and mutual accountability among network participants (Van Slyke 2007). Just as these interpersonal relationships are informal, so are some collaborative organizations' expectations; these are expectations that are typically not included in formal contracts and agreements. The interpersonal behaviors involved are discretionary rather than those mandated by official agreements. So, too, are the rewards and sanctions of informal accountability.

Street-Level Workers in Children's Human Services

While their titles may differ slightly across organizations and locations, the street-level workers in our study are child welfare case managers and children's mental health therapists and case managers

(alternatively titled case workers, care coordinators, etc. but we use the term case manager to refer to all of these workers for the sake of consistency). A critical portion of the coordinating function within child welfare and children's mental health networks falls to the case managers who have responsibility for the "clients" to which the system's services are targeted. They are therefore often important conduits for flows of information, task-sharing protocols, program design, service integration, etc. – all arenas in which informal accountability can be manifested. Social welfare networks dealing with children often adopt "wraparound" or "integrated service" approaches in which an array of services is designed to treat the individual with complex needs– in this case, the child-client and his/her family. To the extent that case managers design and coordinate these services, they come into contact regularly with representatives of the organizations in the system providing those services.

Most of these systems work in the larger area of "child welfare," in programs that serve at-risk children – at-risk of losing homes with their biological families, at-risk of entry into the juvenile justice system, at-risk of long-term foster care, etc. Most are connected in some way with federal child welfare funding – more specifically, with the U.S. Department of Health and Human Services' Administration for Children and Families and their programs for adoption and foster care, child abuse and neglect, and/or family preservation. These programs, and their funding protocols, involve responsibility and authority sharing by the federal government and states. Many states rely on counties or other sub-divisions for actual service delivery to clients covered by these programs. Because of the needs of these children and youth, mental health organizations typically play a vital role in the service delivery networks, along with government, nonprofit, and other organizations.

Child welfare case managers in our collaborative systems often use a formal tool, a monthly "child and family team" meeting to assemble the client, the family, and all service providers. By way of illustration, a common array of providers might include a behavioral therapist, an after-school/weekend mentor, a respite provider, an academic tutor, and a probation officer. The child-client's progress is reviewed and discussed, barriers to progress are discussed, and strategies to improve progress are introduced and adopted. These meetings necessarily entail give and take, bargaining among parties, and conflict resolution. They are also the setting in which goal conflicts can emerge or amplify, and in which the benefits of informal accountability can play out.

To the extent that the parties on the team have used informal accountability mechanisms to facilitate interaction and coordination, positive team dynamics are facilitated. To the extent that informal mechanisms are weak or undeveloped, teams may be less integrated. In either situation, the case manager is at the hub of the team. Although in formal terms the family possesses the power in the team, (the family and child-client select providers and sanction the treatment strategy), informally, the case manager has significant influence over all facets of team dynamics. The case manager must approve the family's choices, and has a great deal of influence over which providers are selected.

Research Context and Methodology

Our exploration of informal accountability dynamics and how they manifest at the street-level of the network takes place in the context of children's human services. Specifically, we examine the interactions among case managers in multiple children's service systems (foster care and adoptions, etc.). These systems offer an ideal lens through which to observe the informal accountability dynamics at the street-level. For example, mental health and child welfare are two functionally distinct systems with their own service philosophies, funding streams, and legal rules, yet these systems are highly interdependent in serving at-risk children. The high degree of interaction among these two systems is

driven by the fact that clients of the child welfare system often receive services in the mental health system. Thus, staff within these systems must work together on a daily basis in order to effectively serve these mutual clients, often in the absence of formal rules to guide their interactions. Using a multiple case study design, we follow the general approach to grounded theory analysis of case data adapted to public administration by Agranoff and Radin (1991), and used in a number of studies by prominent scholars in the field (Dubnick and Frederickson 2010, Frederickson and Frederickson 2007, Dias and Maynard-Moody 2007, Sandfort 2000).

Case Selection

We examine three cases of county-based networks providing social services to children in three states: Kansas, Maryland, and Michigan. These three county networks were purposively selected, based on their similarities and on the researchers' ability to access key informants inside these service delivery systems. All three networks involve governmental and nongovernmental organizations (primarily nonprofit social service organizations), and all are in suburban counties adjacent to large urban cores. These counties are among the most affluent in the nation, but like many suburban settings, they are experiencing rapid demographic diversification. And like most counties in the US, they are undergoing serious financial pressures related to the Great Recession of 2008-2011 (and beyond). The similarities among these three counties allow us to rule out some rival explanations for any variations that we observe, over and above specific system structural and behavioral features. We have therefore "controlled" for some – but certainly not all – factors that could explain collaborative network behavior and effectiveness.

Data Collection

The data used in this analysis were generated through semi-structured interviews conducted with 55 public and nonprofit professionals at 28 different organizations, between the fall of 2010 and fall of 2011. Interview participants included executive level personnel, mid-level program managers and supervisors, as well as street-level case managers/workers. Each interview ranged between 60 to 90 minutes in length and nearly all were conducted in-person with the interviewee(s) at his or her organization. Each interview was recorded and later transcribed.

Our interview questions were designed to elicit information about how informal interactions and interpersonal behaviors manifest as informal accountability among network members. We asked interview participants about the informal expectations and behaviors they use in their dealings with partner agencies. We explored how they hold each other accountable for meeting their expectations for performance and what informal means they use to demonstrate their sense of obligation to their partners (and vice versa). These questions allowed us to explore the nature of system participants' norms and behavioral expectations for their network collaborators, and ways that interorganizational conflicts are addressed informally. We used the technique of asking "generative questions" (King, Keohane and Verba 1994, Strauss 1987) and relied on knowledge and experience derived from the interview process to further refine our questions and inform our research (Glaser and Strauss 1967).

Data Analysis

Each transcribed interview was analyzed using ATLAS.ti, which offers the ability to search for common themes and extract key concepts from large amounts of qualitative data. The interview team conferred at regular intervals between interviews at the three sites to process what had been learned

and to refine interview questions and generate common perspectives on coding schemes. Independent analysis of the ATLAS output by members of the research team resulted in the emergence of several broad themes and consistent patterns of norms and behaviors displayed by front-line workers across organizations. We now examine these findings.

Findings

Our analysis indicates that case managers occupy "hub" positions in social service networks, and that differences in their behavior may help to explain variations in the degree to which informal accountability facilitates delivery system success. As the "go to" conduits of information, as coordinators and facilitators, case managers are on the front lines of day to day network management. One case manager summed up his role this way:

> "[We] work with lots of other people, and we work with the families very closely, we work with whoever they're working with…so we really have the lens that is all encompassing."

Another participant on the child-family team observed that the case manager acts as a moderator among team members:

> "She tries to moderate, that is her job, she is the referee, she tries to be the good guy to everybody…did they get this? Did they get that?... just everything."

The case mangers role as broker/facilitator means that individual case manager success in initiating and sustaining collaboration is critical to effective collaborative service delivery. One Program Director described the link between the case managers' facilitation role and effectiveness of service delivery:

> "They do a lot more than case manage. I mean that facilitation process for the team meeting is a pretty complex deal, they have regular home visit schedules that they have to adhere to…. they are in the field with kids, with families, at IEP meetings, at detention centers, doing whatever it is that is required to bring this team together because it is not just about case managing to the service, it is also about the quality of the service, and are we meeting our outcomes, and so it really does require us to be ready to facilitate that team meeting, to know everything about everything in order to do a good job."

Norms, Facilitative Behaviors, Rewards and Sanctions

Our previous research has shown that actors within social service delivery systems create informal accountability through adherence to shared norms, engaging in facilitative behaviors, and the use of informal rewards and sanctions (see Figure 1). In terms of consistency with our prior research (Romzek et al. 2012), we observe that case managers exhibit respect for shared norms through ongoing trust-building activities across the team. These norms include frequent contact, continual efforts to break down barriers to cooperation, and engaging in reciprocity. These comments from case managers exemplify the norms promoting informal accountability among front-line workers across different agencies in the network:

> "I think that you have to earn a provider's trust, you have to prove yourself if you are transitioning [taking over the case] from another care coordinator."

"For cooperation it comes down to respect and relationships. The more you do outreach and build a relationship with organizations, organization to organization, or provider to provider, the better chance you have of kind of getting people to do what you need, when you need them to do it. Partly because they know you have their back too."

"Our providers will call us and say 'they [your staff] are not representing well in the community for you guys' and so that is really a positive thing, that is a relationship of trust to be able to call back and say you guys did it wrong and you need to fix it because that makes us better too so it really it is a reciprocal deal here with us."

We find that these norms and facilitative behaviors exist to varying degrees between and among professionals at the street-level of the service delivery system, but are also embraced by case managers in their interactions with clients in an effort to demonstrate accountability to them.

In addition to these norms, which we also observed in our previous research at higher levels of the system, we find lateral conflict resolution to be another important norm at the street-level of collaborative service delivery networks. In most instances, case managers are reluctant to go over their counterpart's head to resolve conflicts, preferring to work out misunderstandings and collaboration problems amongst themselves. In describing how she handled conflicts with counterparts in other agencies, one child welfare case manager put it this way:

"You can call and be nice and polite, [if] they don't call you back, you can call and be nice and polite to their supervisor, but you just have to understand that if you call their supervisor they are going to take that as a negative. Again we want to build a relationship and have a rapport with each other, so I don't really want to go over your head. I just want you to know I need information regarding this child's status with their treatment."

Another stated it this way:

"I have not had to go to supervisors, normally they [conflicts] are [worked out] informally because sometimes you just do not understand each other so we have to work on our communication."

While case managers exhibit a preference to "work it out" amongst each other, their allegiance is to the client first and foremost, so case managers will go up the chain of command if they feel that the client is suffering as result of a team members behavior or lack of responsiveness. As one respondent stated:

"I have a policy of never jacking up a service provider in front of a client for a missed meeting, but if it is something that is that will negatively affect the kid I do not have a problem holding anybody's feet to the fire."

Case managers also engage in facilitative behaviors (facilitation of the "team" and treatment of the client, achieved in part through coordination and collective action), frequent and sustained communication, follow-up on commitments (especially to the family in following through on issues with providers, and to providers by referring other clients to them), information sharing (which is extensive and ongoing), favors (referrals to other clients for especially favored providers, and to other case managers through shared trouble shooting and information sharing), and action to correct errors (as they develop in team dynamics). These statements from our case manager interviews capture the importance of communication as behavior that facilitates informal accountability:

"There's always going to be issues, communication issues that arise, or, you know, a therapist disagreeing with something that a case manager is doing, but I think it's really a case manager's job to manage a case and to work with everybody who's involved. I mean, that's collaboration and communication is a key part of the job function."

"I like to know what is going on so I am not surprised at the team meetings…so we are always in communication by email, I make myself available through my cell phone, text messaging, any way you can let me know how things are going, so that we are all on the same page is good."

"We have some workers who even have attended therapy appointments, whether that be with just the child or a family therapy and that is at the request of the therapist or the family. Just as an extra buffer or for more information or to open those lines of communication. Clearly that is not long-term, but also lots of phone calls and double checking."

One Program Director described her agency's administrative position on encouraging inter-agency communication among front-line staff:

"We really encourage our providers to be proactive in attending those [child and family team meetings] and if they can't, we encourage them to attend via phone and if they can't, our care coordinators draft minutes of the meetings, so there are ways to stay in touch, we highly encourage it [communication]".

The case managers also make use of informal rewards and sanctions to move their teams and child-clients toward favorable outcomes. In terms of rewards, they grant favors such as referring clients to respected providers, and sharing their positive impressions of those providers with other case managers who will, in turn, refer clients from their caseloads.

"Normally at each staff meeting we do kudos to people and so around the office if care coordinators help each other that is our way of telling them thank you, but we've also had it where we had to brag about a provider like 'oh my gosh you guys do not know that this provider has been incredible their contact with the family is great,' and we just let them know at the staff meetings or just emailing [supervisor and administrator] and letting them know that this provider is doing an awesome job for our families."

The situation works in reverse however, as case managers will also inform one another of bad experiences with providers, which has consequences of fewer referrals for those providers. These comments from case managers confirm that providers who fail to abide by informal accountability norms suffer diminished reputation and are sanctioned through fewer referrals:

"If you have provider you know is not reliable or a provider you've had a bad experience with, you let other people know."

"I really rely upon networking and word of mouth. If somebody has a 'bad reputation' then I am not going to refer to that agency."

"[Poorly performing provider] do not get as many referrals because, the way you carry yourself in the community will come back to you, so I think that could be challenging for their business if there was a bad experience and that did get around you know that saying if you have a good experience you tell one person, if you have a bad experience you tell thirteen people so I think the negative carries a lot more than the positive that is just the way that these systems work."

Many of the other informal rewards used to promote accountability by those at higher levels in the organizations in our collaborative network cases (commitments to future collaboration, public

recognition of respected system members, and advance notice), are beyond the formal authority of the case manager to dispense, but these often originate from case manager perceptions and endorsements to those higher in the [contractor] organization. The case manager is highly influential in determining not only executive level decisions to initiate or renew contracts, but also the choices of providers within the network made by families. Case managers are also in a position to sanction informally, primarily by reducing opportunities for providers perceived as inferior (in terms of accepted norms and expectations) through reductions in referrals or outright avoidance. These actions tend to cascade as "word gets out" to other case managers, to leaders in the network agencies, and especially, to clients and families.

> "The families decide at the child and family team [which provider to go with] so if the families are not getting what they need out of you there is a very good likelihood that you are not going to get called again. It just turns out that way. So if you do good work you will get calls and you will get on more cases, if you do mediocre work, families will fire you and if they fire you we will know that."

Discretion in Applying Rules

For the most part, child welfare and mental health case managers are well aware of the formal rules of their respective systems and adhere to these rules in the implementation of services. On top of these systemic rules, workers also have sets of organizational rules to follow. At times, workers invoke organizational rules to rationalize inaction when they are not willing or inclined to meet a request made of them by another team member. One mental health therapist explained her discomfort in making recommendations to a judge about whether a child could safely be reunited with parents. Despite her agency's lack of a formal written policy around this issue, she references the agency's informal practice of not making these recommendations as "the policy" when refusing such requests from child welfare team members:

> "We just follow our policy, we just don't do it. We stick to our policies, and so if [child welfare worker] wants us to do that, we will just say 'we don't do that' and we have been doing that for years, and they get new workers and we have to explain all over again and that is a big issue with us."

At the same time, case managers exercise considerable discretion with regard to organizational rules, often bending rules or even overtly disregarding agency policies when they felt such action was in the best interest of the client. One common example of acting against agency rules that we observed involves case managers choosing to attend a client meeting for which their organization would not be reimbursed. This was particularly common among mental health therapists and case managers whose administrators expect that they will maximize billable client contacts; thus the case manager's choice to attend these meetings involves opportunity costs for the organization. In many cases, administrators may be aware of these policy infractions but turn a blind eye toward them, particularly if they are trained in Social Work and share the case manager's professional norms and the values that emphasize clients' interests over others. One Executive Director of a child welfare organization even recalled her own attitude as a former case worker when confronted with rules that seems to conflict with the client's best interest, often acting without concern for the organizational or individual consequences:

> "As a case worker, as a line staff, I was a bit of a renegade. Why? I'm at the bottom of the chain. The only thing they can do is fire me, and I can go get another job."

Another rule-bending scenario occurred around providing services outside the scope of case management – services that the family is expected to find on their own, such as transportation. This

case worker's comment captures the general commitment to doing whatever it takes to meet the clients' needs, if even organizational policies pose obstacles:

> "I think the quality of your staff really address some of that garbage that is associated with some of the policies, cause if you have really thoughtful heartfelt staff they are going to collaborate back and forth with little regard, I don't mean totally ignoring policy, but we are going to work with these families and talk to each other [to get it done]".

This comment supports Maynard-Moody and Musheno's (2003) finding that street-level bureaucrats "define their work, and to a large extent themselves, in terms of relationships more than rules" (p. 20).

Case Managers as "Client-Agents"

Our study of children's mental health and child welfare case managers suggests that street-level workers in social service delivery networks conform to the "citizen-agent" model described by Maynard-Moody and Musheno (2000). In contrast to the two dominant models of decision discretion - the "state-agent" model which assumes discretion is exercised to further self-interest, and the "street-level worker" model which assumes discretion is exercised to make work easier, safer, and more rewarding (Frederickson and Smith 2003) – Maynard-Moody and Musheno (2000) provide a third model, the "citizen-agent," in which street-level workers see themselves as acting in response to individuals and circumstances, rather than in response to rules and procedures. Citizen-agents do not base their decisions and actions on perceptions of correctness of the rules, the wisdom of the policy, or accountability to a hierarchical authority, but rather they base decisions on their judgment of the individual citizen-clients' worth (Maynard-Moody and Musheno2000). Like Maynard-Moody and Musheno's subjects, the case managers we observed "discount the importance of self-interest and will often make their work harder, more unpleasant, even more dangerous, in an effort to respond to the needs of individuals" (Frederickson and Smith 2003, p. 181), and consistent with their research, case managers in our study base their decisions on normative choices, which are defined in terms of relationships with citizens, clients, coworkers and the system.

While case managers value collaboration and relationships with counterparts in other organizations across the network and within the service delivery system, their ultimate allegiance and sense of accountability is to the client. These comments by case managers in our study help to illustrate that fact:

> "Our relationship is with the client. [Child welfare agency] is just a funding source, a referral source, so I don't think we feel as much responsibility to them. Our responsibility is to the client and to what their goals are, which stem from [child welfare agency], but our relationship is with the client."

> "I think we join with them [mental health case managers and therapists] very much around the core principal of 'we are in it for the kids', our job is to take care of these kids and taking care of these kids means respecting parents, it means making sure that the voices of that family are heard above all other voices, and as long as we can join around those common goals here I think we are always pretty successful with them and we bring it back to that every time".

Another described her process for keeping everyone on the service team focused on the client's needs:

"I have this drawing and I will say with a dot, 'here is the kid', 'here is us, our whole reason for being around the table is this kid', so as long as we can keep focused on that, everyone has their job to do and their guidelines, because often times they will come with their own agenda."

This ultimate allegiance and sense of responsibility to the client and to the overall goal of the service delivery system is one way in which street-level workers differ from those at higher levels within the network hierarchy. While those at managerial and executive levels of the system maintain a "big picture" focus on aggregate performance outcomes and advancing their own organizational interests, they acknowledge the unique role played by their workers in shaping client's outcomes, which are ultimately a key indicator of successful network performance.

"I think our frontline people are much more sincere in their dedication. They see it [difficult client problems] every day. It is in front of their face, they have to deal with it."

"I think, honestly my workers here, they really are child advocates, and they really care about the child and the child's wellbeing. And for them, if they feel like they've been able to connect a kid with the right resources or even just connect with the child, period, that child's making progress and learning skills that will help them be more successful."

"Whoever the line person is, is the person who really has a lot of control of whether that family makes it or not, and how they establish that relationship and the advocacy they do for that particular family. So if you have a worker who only does the minimum, only goes to visits, does their reports, then chances are that family may not do as well… it's the worker who went that extra mile to try to help the family."

Each child and family represents a microcosm of the larger service delivery system, and to the extent that street-level workers are successful in using informal accountability strategies to promote effective inter-organizational collaboration to achieve positive outcomes for the clients on their caseloads, they play a critical role in driving the system toward achievement of the overall goal of best serving children in need.

Conclusion

Top-down implementation proponents argue that accountability is weakened by placing decision-making discretion in the hands of front line workers. Networked service delivery has the potential to threaten accountability even further as front-line workers face multiple, often conflicting goals and mandates imposed upon them vertically and horizontally, by their own organizations, partner organizations within the system, systemic rules, procedures, and demands, as well as those of their clients. Yet we find that case managers help to strengthen collaborative service delivery system accountability through their adherence to informal norms and behaviors, which includes professional norms, and by acting as "citizen-agents" placing the needs of the client at the forefront of their actions and decisions.

Case managers engage in many informal accountability strategies, primarily accomplished through repeated interactions with members of the team. This dynamic is consistent with Bryson's and colleagues' (2006) proposition that "cross-sector collaborations are more likely to succeed when trust-building activities (such as nurturing cross-sectoral and cross-cultural understanding) are continuous." (p. 48). Through repeated emails, phone calls, and site visits, the case manager uses reciprocity strategies, works on trust-building (thereby moving toward closer goal alignment), and otherwise breaks down barriers to integration, agreement, and co-production among team members. Case managers

tend to be in constant contact with the child-client and family, and with providers, including behavioral therapists, after-school mentors, respite providers, academic tutors, and a probation officer, if involved. The case manager strives to acquire knowledge about any potential conflicts, failure to perform on the part of any team member, and other barriers to the child's progress.

As a result, continual informal flows of information move between the case manager and team members, and to some extent among team providers as well. Providers may interact informally in order to coordinate around a particular need or issue, thereby contributing to the construction of informal accountability ties. But more often the information flows from provider to case manager to targeted team member (e.g., another provider, or the client and family).

This study contributes to the emerging literature on informal accountability by revealing how the norms, behaviors, and discretionary decisions of street-level case managers help to keep collaborative network members answerable and accountable to one another and to clients, ultimately shaping service delivery system outcomes in positive ways. We also contribute to the implementation literature by examining the norms and discretionary behaviors of street-level workers in carrying out human services in a networked service delivery context, finding that street-level worker behaviors in these contexts tend more toward the "citizen agent" model of street-level bureaucracy than other models. Finally, our study furthers our understanding of variations with regard to norms and behaviors displayed at different hierarchical levels within the collaborative, which has important implications for network management.
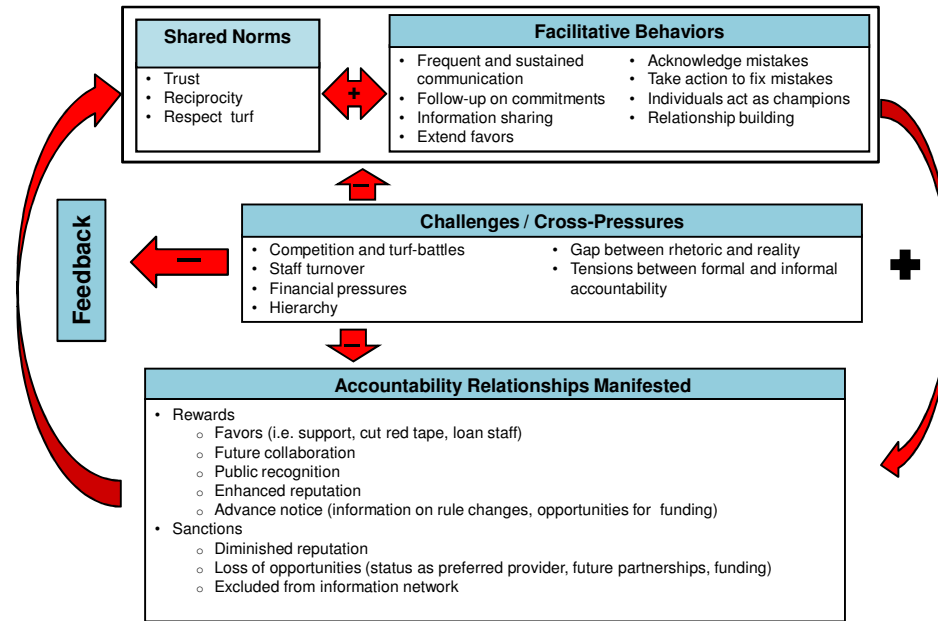
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Figure 2: Expanded Model of Informal Accountability*

Shared Norms

- Trust
- Reciprocity
- Respect turf

Facilitative Behaviors

- Frequent and sustained communication
- Follow-up on commitments
- Information sharing
- Extend favors
- Acknowledge mistakes
- Take action to fix mistakes
- Individuals act as champions
- Relationship building

Feedback

Challenges / Cross-Pressures

- Competition and turf-battles
- Staff turnover
- Financial pressures
- Hierarchy
- Gap between rhetoric and reality
- Tensions between formal and informal accountability

Accountability Relationships Manifested

- Rewards
  - Favors (i.e. support, cut red tape, loan staff)
  - Future collaboration
  - Public recognition
  - Enhanced reputation
  - Advance notice (information on rule changes, opportunities for funding)
- Sanctions
  - Diminished reputation
  - Loss of opportunities (status as preferred provider, future partnerships, funding)
  - Excluded from information network

*We make the assumption that shared goals are an embedded aspect in social service delivery networks.