

Child Welfare Caseload and Workload Analysis

January 31, 2020

Required by:

Public Law 2019, Ch. 34 (LD 821)

Maine Department of Health and Human Services Office of Child and Family Services

Introduction and Background

Public Law 2019, Ch. 34 (LD 821) requires the Department of Health and Human Services "to review case load standards for child welfare caseworkers and develop standard case load recommendations with input from child welfare caseworkers and the Public Consulting Group (PCG) contracted by the Department." It further requires that "the department shall submit an initial report with its findings and recommendations on staffing in the department's child welfare program in relation to the standard case load recommendations no later than October 1, 2019 and subsequent annual reports by January 31st of each year beginning in 2020 and ending in 2030."

Last year, the Office of Child and Family Services (OCFS) contracted with Public Consulting Group to develop a workload analytic tool to determine OCFS' need for additional staff. OCFS' goal in establishing reasonable caseloads has been to improve effective staff engagement with families, ensure quality services statewide, and improve child welfare outcomes for children and families. The workload analytic tool is based on the specific workload of OCFS' staff. This includes intake staff who receive reports of abuse and neglect, assessment staff who receive reports deemed appropriate and complete an investigation into the allegations made in the report, permanency staff who support the reunification process when children have been removed from their home, adoption staff who seek adoptive homes for children who cannot return to their biological parents, and licensing staff who provide critical support to foster parents and oversee the licensing process. Each group of staff has specific duties and functions guided by policy and procedures. Additionally, each group's fulfillment of the assigned duties and functions is influenced by numerous case-specific factors. A few examples include the number of children in a particular family, the geographical distances between case participants, and the complexity of the child's needs. The workload analytic tool is designed to take into account assigned duties and functions, while also factoring in the impact of case-specific factors and the experience level of OCFS' child welfare staff. Since the Department's October 1, 2019 report on caseload and workload the Department has continued to work to refine the tool to ensure it takes into account a realistic cross-section of the common case-specific factors staff encounter in the field.

Workload vs. Caseload

OCFS has established clear definitions of both caseload and workload in order to guide the Department's work related to LD 821. OCFS utilized the expertise of the Child Welfare League of America (CWLA) in establishing the distinction between caseload and workload.¹

Caseload = Cases / Workers: The number of cases (children or families) assigned to an individual caseworker in a given time period. Caseload reflects a ratio of cases (or clients) to staff members and may be measured for an individual caseworker, all caseworkers assigned to a specific type of case, or all caseworkers in a specified area (e.g., agency or region).

Workload = (**Time required for cases** + **Non-casework responsibilities**) / **Workers:** The development of reasonable workload standards helps to guide an organization towards the establishment of caseload expectations. In order to understand how many cases a caseworker can effectively manage, one must first understand the work inherent in each case and the time necessary to complete all parts of the work, as well as any expectations which do not directly serve children and families but are required when carrying cases.

CWLA has published a National Blueprint for Excellence in Child Welfare. Within that document are standards for workforce development, which include the need to assure that each staff

¹ <u>Child Welfare Caseload and Workload: A Synthesis of the Evidence Base, Current Trends and Future Directions</u> (2018).

person's workload is reasonable and allows the employee to perform the required duties.² OCFS adopted this recommendation and recognized that staff are tasked with complex and difficult work each day as they seek to ensure child and family safety and wellbeing throughout the state.

Use of Data to Inform Workload Recommendations

OCFS has experienced a significant increase in the volume of work within the Office over the last few years. In December of 2017, OCFS received 1,535 reports of possible abuse and/or neglect. In the last month of 2019, OCFS received over 2,000 reports. Similarly, in December of 2017, assessment staff received 453 new reports which were deemed appropriate for assessment. In 2019, OCFS assessment staff received an average of 920 new reports each month which were deemed appropriate for assessment.

The number of children in custody has also increased significantly in the last two years. On December 1, 2017 there were 1,682 children in state custody. On December 1, 2019 that number was 2,209, a 31% increase.

The data regarding the volume of work was indicative of a likely need for increased staffing within OCFS and the Legislature supported the addition of new staff positions in the September of 2018 special session and in Governor Mills' biennial budget (positions effective September 1, 2019). These additional staff benefitted OCFS greatly but developing the workload analytic tool with PCG required information beyond just the number of reports, assessments, and children in care in order to establish appropriate workload and caseload expectations. The workload analytic tool was built to account for factors including OCFS' vacancy rate, the experience level of current staff, and the geographical area of OCFS' Districts in order to determine the capacity of our current workforce to accomplish their assigned duties and tasks within a standard workweek. In developing the tool, feedback was gathered from staff, stakeholders, and national and regional child welfare experts with experience in evaluating workload in other states. This resulted in functional workload recommendations that could be used to develop reasonable caseload recommendations.

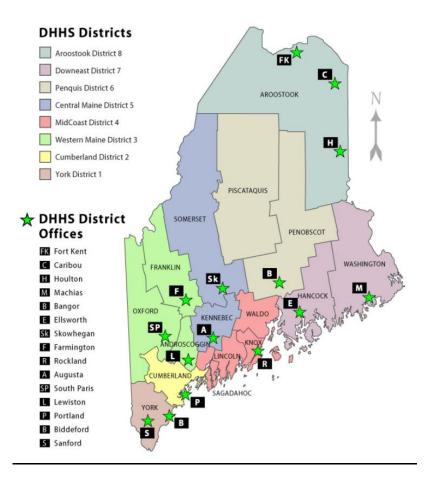
OCFS' turnover rate in 2019 was 17.73%, which is significantly less than the national turnover rate for child welfare staff which is 30-40%³. The turnover rate has also impacted the workload analytic tool, as it was designed to account for the relative level of experience of OCFS' workforce. Staff who are new to OCFS generally take more time to complete each task and require additional guidance from supervisors and their more experienced co-workers. Child welfare work is complex, and it takes a significant amount of time for workers to gain the experience and knowledge necessary to function effectively with a full caseload of families and children. Until a caseworker has established significant experience in the field it is likely that the work will take them longer to complete when compared to more experienced staff. PCG was provided with data on turnover (and vacancies resulting from promotions or transfers), as well as the number of years of experience of each current child welfare employee, including the recently added and filled positions budgetarily authorized.

² Child Welfare League of America, <u>National Blueprint for Excellence in Child Welfare</u> (2013).

³ United State General Account Office, Report to Congressional Requestors, <u>HHS Could Play a Greater Role in</u> <u>Helping Child Welfare Agencies Recruit and Retain Staff</u> (2003).

<u>Results</u> (Open Cases as of December 31, 2019)

District	Dec 2018 Number of Caseworkers	Dec 2019 Number of Caseworkers	Needed Number of Caseworkers	Difference
1	47	53	46.9	(6.1)
2	51	59	54.1	(4.9)
3	48	53	64.3	11.3
4	23	25	23.8	(1.2)
5	62	60	79.3	19.3
6	43	53	62.2	9.2
7	23	20	21.4	1.4
8	18	23	33.7	10.7
Total	315	346	385.7	39.7



The chart above shows the current number of caseworkers in each District, the number that the workload analytic tool indicates are needed, and the difference between the two (representing the need for additional staff). The increase is fueled by continued volume of opened assessment cases and applications for prospective resource homes. The tool estimates 385.7 caseworkers based on current caseload and workload, 39.7 more than were employed in December 2019.

This is an analytic recommendation in response to the LD 821, which directs OCFS to develop this information and report annually. It is not a policy proposal from OCFS or DHHS. The Governor

announced on January 21 that she will ask the Legislature for funding to increase the number of child protective services caseworkers, which this analytic recommendation does not yet take into account.

At this time, the Department has filled all new caseworker positions created in the biennial budget signed into law in June 2019. The 62 new positions for OCFS funded in the biennial budget included 33 caseworkers, 6 supervisors and 4 case aides. OCFS has established standard ratios of supervisor and case aide to caseworkers. For supervisors the ratio is 5 caseworkers per supervisor and for case aides the standard is 8 caseworkers per case aide. As the workload analytic tool is refined, OCFS will use these ratios to determine whether there is an additional need for supervisor or case aide positions.

<u>Next Steps</u>

OCFS continues to work towards refinements and improvements to the workload analytic tool and the resulting workload recommendations. OCFS is in the process of working with contracted partner, PCG, to further enhance the fidelity of the tool. The focus areas of projects and studies to be completed in the first half of 2020 include research regarding the workload within the Intake unit, the impact to workload based on the complexity of family structures, the effect that risk level and complexity of a given case has on the assigned worker's workload, the differences in workload between custody and service cases, and a consideration of the impact of LD 1526, An Act to Increase the Availability of Foster Homes, on licensing workers. LD 1526 went into effect in September and requires OCFS staff to conduct health and safety inspections of potential foster homes in lieu of the inspection by the Fire Marshall's office, which takes considerable additional time when compared to the licensing home study process prior to the implementation of LD 1526.

OCFS continues to work towards implementation of the Federal Family First Prevention Services Act (Family First) which is likely to impact both caseload and workload. After implementation of Family First, OCFS staff will play a primary role in the development of individualized prevention plans for families, as well as the monitoring, oversight, and documentation associated with a family's progress toward plan goals. It is anticipated the further adjustments to the workload analytic tool will continue as new initiatives are undertaken and changes to policy and practice are made. Additional work and ongoing updates must be completed with the workload analytic tool to ensure it can provide functional and accurate analysis based on ongoing changes to policy and practice.

Conclusion

The current iteration of the workload analytic tool estimates 385.7 caseworkers would support current workload and caseload. This tool is not able to determine the impact of OCFS caseload and workload on other related entities, including the Child Protective Division of the attorney general's office, the Maine Judicial Branch, and the attorneys and Guardians ad Litem who are appointed to represent parents and children. As the number of reports, assessments, cases, and children in care have risen across OCFS, there has been a corresponding impact to those areas. OCFS recommends the impact be researched so that steps can be taken to ensure all entities have the resources necessary to support the safety and wellbeing of Maine's children and their families.

OCFS will continue to refine the workload analytic tool with the next report to the Health and Human Services Committee to be presented by 1/31/21.