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Agency Workforce Estimation: A Step Toward More Effective Workload Management

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Introduction

Evidence indicates that many child welfare agencies are experiencing workforce shortages. A 2001 survey of 43 state and 48 county child welfare agencies reported an average annual worker turnover rate of 22% and a vacancy rate of 7% (American Public Human Services Association [APHSA], 2001). A literature review conducted by Kadushin and Harkness (2002) identified three reasons child welfare workers quit: (a) Failure to meet agency service delivery standards; (b) a reporting (paperwork or data entry) burden that decreases client contact; and (c) inadequate supervision, training, and support. Heavy caseloads also appear to be a common reason for leaving the child welfare profession (Child Welfare League of America [CWLA], 2002). Recent reviews of staff exit interviews and staff surveys identify similar issues (Institute for the Advancement of Social Work Research [IASWR], 2005; Robison, 2006).

High staff turnover may have a negative impact on agency functioning. A recent U.S. General Accounting Office (GAO) study of Child and



Family Services Review (CFSR) findings from several states associated high worker turnover with agency failure to meet a variety of CFSR performance standards, including those related to child safety and permanency (U.S. GAO, 2003). In a possibly related development, class action suits brought against several child welfare agencies identify inadequate staffing as a major cause of harm to plaintiff children (see Farber & Munson, 2007; *Dwayne B. v. Granholm*, 2006; or *Olivia Y. v. Barbour*, 2007).

Studies have highlighted a variety of tactics to reduce staff turnover, such as more effective job screening, better training and supervision, higher pay, and reduced caseloads (IASWR, 2005). This article attempts to extend the discussion of agency turnover and retention by addressing a question that has received less attention: Since staff time is a primary resource agencies use to strengthen families and promote child safety and permanency, how can agencies manage it more effectively? Caseworkers' knowledge, communication skills, and ability to engage families are critical for effective service delivery, but can only be leveraged if workers have the necessary time to interact with and serve families.

The article begins by reviewing recent research findings that link adequate staffing to improved child safety and well-being. It then outlines simple steps child welfare administrators can take to evaluate and manage agency workload capacity. These steps include the following: (a) Identifying common symptoms of agency understaffing; (b) estimating the time workers have available to serve clients; and (c) estimating workload demand in different operating units (e.g., intake and investigation, foster care). The emphasis is on developing practical approaches for measuring workload, managing existing workforce resources, and documenting staffing requests for external funding agencies.

The Link Between Child Welfare Workforce Capacity and Case Outcomes

The federal CFSR sets clear objectives for agency performance (see, for example, U.S. GPO, 2006). These include measurable case outcome standards for placement stability, maltreatment recurrence, reunification, and foster care permanency. These standards establish a framework for examining the relationship between workforce capacity and service delivery performance.

A 2003 GAO study reviewing CFSR findings from 27 states found that high worker turnover was associated with agency failure to meet standards for child protective services (CPS) investigation response time, timely investigation closure, case plan completion, worker contact with children and families, maltreatment recurrence, and timely permanency (GAO, 2003). Another study, funded by the Annie E. Casey Foundation, established a more direct link between agency performance and workforce capacity (National Council on Crime and Delinquency [NCCD], 2005). Twelve California county child welfare agencies were ranked into three groups based on their average annual turnover: low (8% average turnover), moderate (13%), and high (23%). Group performance was examined for several CFSR criteria related to CPS investigation and in-home services. Families served in low-turnover counties had significantly lower maltreatment recurrence rates and were more likely to have approved current case plans and up-to-date child physical exams. In addition, a study in Milwaukee of several private foster care agencies found that high case manager turnover (i.e., multiple workers serving a case) increased the time required for children to achieve permanency (Flower, McDonald, & Sumski, 2005).



Taking a somewhat different approach, a more recent analysis of CFSR case-level findings from 50 states examined the relationship between worker contacts and foster care performance measures. A significant correlation was found between worker contacts (with parents and children) and placement stability, receipt of child mental health or educational services, and the timely achievement of permanency (Administration for Children and Families [ACF], 2006). In effect, increased worker-client contact appears to have a positive impact on the CFSR performance of child welfare agencies (National Conference of State Legislatures [NCSL], 2006).

The results of this research review suggest that agencies with high staff turnover are less likely to perform well on CFSR process and case-outcome measures than those with lower turnover. Since staff turnover is a widely accepted proxy for understaffing, this finding will not surprise most child welfare professionals. Active worker-client engagement in case planning and service delivery requires a significant amount of worker time, and workers in agencies with low turnover may simply have more time available to engage their client families. Given that increased worker contacts are related to positive outcomes (ACF, 2006), it is prudent for agencies to explore ways to measure and manage workforce capacity to ensure that workers have time to effectively engage families.

This article presents a simple approach to measuring and managing workload that may help agency administrators improve service delivery performance and reduce staff turnover. Much of the information reviewed originated from the authors' experience conducting workload studies for several state child welfare agencies.¹ Specifically, the workload estimation methods reference findings from the five most recent of these child welfare workload studies.

Is the Agency Understaffed?

Almost all administrators want to know if their agencies are understaffed, but very few want to invest in costly and time-consuming research studies to measure workload. Fortunately, certain gross performance indicators that many child welfare agencies already monitor can be easily examined to discern symptoms of understaffing. Examining these indicators to identify reasonable, if not conclusive, evidence of understaffing is a first step for conducting an internal review of workforce capacity. For the purpose of this discussion, an understaffed condition means that the current workforce capacity is less than authorized or less than is necessary to meet reasonable service delivery standards.

Agencies often have access to information system data or case file review findings that may disclose signs of understaffing. For example, virtually all child welfare agencies have standards for closing CPS investigations—typically, 30 to 45 days after they are assigned. When workers routinely fail to close investigations within the established timeframe, a measurable “backlog” of past-due open investigations results. The size of this backlog and its persistence over time can be a good indicator of an understaffed condition among investigating workers. A low, single-digit backlog (expressed simply as a percentage of the number of past-due investigations at the end of the month divided by the total number assigned) is not necessarily a serious problem, since workers do not close every investigation on time—even in agencies that are adequately staffed. On the other hand, a backlog that approaches double digits or increases each month should cause concern.

Other case management indicators, such as timely case plan completion, up-to-date medical exams, or worker case contacts, can also be used

¹The Children's Research Center (CRC) conducted workload estimation studies for child welfare agencies in Michigan, Tennessee, Georgia, Alaska, Oklahoma, California, Minnesota, and Wisconsin.



as indicators of understaffing. If measures like these are observable in the information system or captured in case review findings, agencies may find it useful to monitor them. For example, many agencies have a minimum expectation of one monthly worker-client contact with active in-home or foster care cases. Many agencies have adopted advanced quality assurance mechanisms to routinely monitor the percentage of open cases for which workers failed to contact families in the last month, or the percentage of past-due case plans, medical exams, or court hearings (Jacobsen, 2007). Regularly monitoring aspects of service delivery can identify indicators of understaffing, such as persistent failure to make case contacts or otherwise appropriately serve a case.

Staff turnover is an easily observed indicator that is related to workload. Turnover is typically computed as a percentage, in which the number of caseworkers who leave the agency each year is divided by the total number of authorized caseload-carrying positions. It is a good measure of how many staff an agency has to recruit, hire, and train to maintain its authorized workforce, but not a precise indicator of understaffing. Since public service hiring can take several months, agencies with high turnover usually have a high staff vacancy rate and a significant number of new staff in their workforces. Practices vary, but new workers typically have a first-year training requirement that significantly reduces their caseloads, sometimes by 50% or more. If an agency has a 10% vacancy rate but 20% of its current positions are occupied by new workers who are in training half-time, operational workforce capacity is 20% less than authorized. This is a clear symptom of understaffing, and it illustrates a point often overlooked: Both the work capacity of new staff and the vacancy rate must be weighed to secure an accurate estimate of workload capacity. Administrators should attempt to secure this estimate at least annually and monitor it carefully over time.

The studies reviewed found that high worker turnover rates and fewer worker contacts with families were correlated with poor CFSR performance in several areas. Consequently, consistently substandard CFSR performance on the 6-month maltreatment recurrence rate, placement stability, and the timeliness of reunification or adoption may be related to understaffing (GPO, 2006). Many agencies already report on these child welfare performance indicators annually.

The set of available indicators should be viewed as a simple checklist for diagnosing agency understaffing. Agencies may not be able to observe all the measures described, but most will be able to use some of them. The checklist should be monitored over time and displayed by operating region, if possible. Observing consistent problems in multiple performance areas indicates a greater likelihood that an agency is understaffed.

While creating a checklist can help an agency identify an understaffed condition, it will not allow the agency to estimate the magnitude of understaffing or indicate how staff could be deployed to address the problem. That requires a more comprehensive workload estimation approach, as described in the section that follows.

How Many Staff Does an Agency Need?

Caseload-to-staff ratios provide a helpful guideline rather than an exact estimate of the number of staff required to deliver child welfare services (CWLA, 2006). Since agencies differ in their operational characteristics, personnel practices, and service delivery expectations, it is difficult for a single caseload ratio to accurately reflect the staffing requirements of a particular agency. Consequently, a more accurate determination of an agency's staffing requirement calls for customized estimation of two parameters: first, the time direct service workers have available to serve clients, and second, the

worker time required to comply with agency service delivery standards for clients. The first parameter, worker time available, approximates the effective workload capacity of an average direct service worker. This question is relatively simple: How much time does a worker have to serve agency clients in a month or a year?

The second parameter, the amount of worker time required to comply with agency service delivery standards for clients, is more difficult to estimate. Obviously, client services vary by case type (e.g., CPS investigation, in-home services, foster care), as do agency service delivery standards. These standards must be taken into account in the estimation process for two reasons: They establish minimum performance criteria workers are asked to meet, and they represent the agency's service delivery intentions to clients, oversight agencies, and the public. Consequently, a responsible staffing estimate has a clear prescriptive component; it should identify the sufficient number of staff for the agency to routinely meet its assigned service delivery standards.

Since agency standards can vary considerably in terms of case types, number or type of worker-client contacts required, and investigative tasks, a workload study in the field is the best way to establish the time workers need to meet their agencies' standards. Many agencies have conducted studies to estimate these time requirements, and their findings can be generalized.

Given the cost and effort involved, not all agencies can or will conduct comprehensive workload studies. They can, however, improve their workforce management by adopting the workload findings and estimation procedures from jurisdictions that *have* conducted them. A basic approach is outlined in the next section.

Estimating Staff Time Available

Table 1 indicates how agencies can estimate the time their workers have available to fulfill their direct service case responsibilities. The example shown is for experienced workers who are not engaged in formal training programs. The objective is to arrive at an average monthly estimate of the time available for them to spend on direct service.

The estimation method starts with an average work month (usually 173.3 hours) and subtracts unavailable hours. Obviously, direct service workers cannot serve cases during paid break time, holidays, vacation, or sick leave. Staff training time should also be estimated (note that training time may vary for new workers). Annual leave or training times for a prior year are converted to monthly figures. The table figures are median estimates drawn from several Children's Research Center (CRC) workload studies. These serve as useful examples, but agencies can substitute their own estimates when available. The subtraction of training, leave, and break time leads to a subtotal of 136.9 hours available per month.

Two additional subtractions from this subtotal are made for case support and administrative tasks. These are critical tasks workers perform in every agency. The median 6.5 hours of case support time shown were drawn from worker time recorded in CRC workload studies. This figure represents the time workers spend serving cases that are not assigned to them. This typically includes emergency on-call case activity, case consultation, substitute case coverage, and backup coverage. The 7.3 hours of administrative time represents non-case-related unit meetings; supervisory sessions; and participation in agency task forces, committees, or special assignments. These subtractions result in a net 122.3 hours available for the average experienced social



Table 1: Estimated Time Available Based on Median Leave and Administrative Work Values

Estimated time available for experienced social worker	Median time in hours
Total work hours per month	173.3
Average amount of training	-4.2
Total leave (vacation, sick, holiday, personal)	-23.9
Daily breaks (usually 0.5 hours per day)	-9.2
Monthly hours available minus training, breaks, and leave time	136.9
Case support time	-6.5
Administrative time	-7.3
Monthly hours available to experienced social worker	122.3

Note: Table 1 reports median values for every category and results therefore differ slightly from a summation.

worker. This estimate represents workers’ effective workforce capacity, which is the time they have to serve clients assigned to them. A separate estimate may be necessary for new workers, who spend more time in training and therefore have a lower workload capacity.

Estimating Worker Time Required to Serve Clients

Estimating workers’ case time is more challenging, since workers’ service activities must be observed and recorded for a variety of cases. A field study is the best method for estimating case times. A brief discussion of workload field study methods describes how these time estimates are derived and what they represent.

Each of the child welfare agency workload studies CRC conducted employed the same research methods. These methods were developed to support the safety and permanency objectives these agencies share. Workers were trained to record daily, under actual field conditions, the time required to do the following: (a) Serve a randomly sampled foster care or in-home family case for 1 month; and (b) complete a random sample of intakes, CPS investigations, and other case studies from assignment to completion.

Workers were asked to meet or exceed agency service delivery standards for each sample case they recorded, and supervisory reviews verified that standards were met.

Agency standards play a large role in these estimates. For example, standards for a child in a foster care case with a return-home goal may require the caseworker to contact the child, the child’s parent, and the foster caregiver each month; coordinate with service providers; conduct safety assessments; and update case service plans. Additional monthly expectations might include preparing a permanency planning review, appearing in court, or conducting a family conference. Comparable estimation procedures apply to CPS investigations, which have similar standards for contacting alleged victims, perpetrators, or caretakers, or completing safety and risk assessments.

Workers also tracked the time necessary to document all other case-related activities, including travel time. In effect, workers recorded *all* the time spent serving a sample case (e.g., travel, case documentation, contacts with clients or any collateral) that met or exceeded the applicable standard.



Sample case times were averaged to estimate the time required to meet standards for a variety of case types. Random sampling ensured that both difficult, time-consuming case events and routine practice conditions were accurately represented. Difficult cases can require activity that exceeds agency standards, but any additional time required was recorded and factored into the estimate.

Case times in Table 2 represent the median estimate observed across five child welfare agency workload studies. In each study, workers recorded the time they required to meet agency standards for several hundred randomly assigned cases. Standards varied by agency, but all agencies had a minimum standard of one monthly contact with the child and parent or substitute caregiver for service cases. Some agencies required a monthly face-to-face contact in the family home, while others did not. In some sites, workers were expected to meet face-to-face with the parent and the child at the same time. Standards for CPS investigations also varied to some degree by agency, and standards did impact worker case time.

These estimates are prescriptive because they reflect the time required to provide services at the best-practice standard employed by each agency. Workers can serve a child in foster care without making monthly face-to-face contacts with the child, parent, or care provider, or without documenting case activities. This practice would take much less time than estimates shown in Table 2, but the objective of the estimation process is to reflect good, not substandard, practice.

For agencies that have not conducted their own studies, these median times provide a valuable reference point for estimating the time their direct service workers may need to perform

similar tasks and meet minimum service delivery standards. Table 2 reviews the median worker time to perform intake, investigation, and service functions in a way that meets standards common to most child welfare agencies. For example, when processing a maltreatment report from call-in to investigation assignment, a CPS intake screening required 1.1 hours. Informational calls that did not allege maltreatment took, on average, only 0.3 hours.

The CPS investigation/assessment section of Table 2 displays time required to conduct investigations from assignment to completion in two scenarios. Non-placement investigations required 8.1 hours, while investigations involving placement of at least one child required 18.6 hours. Clearly, placement investigations entail a great deal more worker time, which should be acknowledged in workload estimation.²

The child and family services section of Table 2 presents worker time for in-home family cases (6.6 hours) and child placement cases. Placement cases are shown in three subcategories: new cases, ongoing cases with a return-home goal, and ongoing cases with another goal (other goals include maintaining a child's own home placement, guardian placement, termination of parental rights, adoption, and/or independent living). The field studies conducted found significantly different worker times for these case types. New cases require more worker assessment and case planning. Return-home-goal cases require service delivery to and routine contact with parents as well as with the children and foster caregivers. They also require permanency hearings. This case type takes more worker time than cases with other permanency goals, as the estimates reflect.

² Some jurisdictions have staff dedicated to arranging and coordinating the out-of-home placement of children. When estimating workload, these jurisdictions may wish to use the difference between investigations with child placement and investigations without (10.5 hours) as a rough workload estimate for dedicated placement coordinators.

Table 2: Median Worker Time Estimates for Cases That Met Standards

Agency service area	Median worker time (in hours)
CPS intake	
a. Maltreatment report	1.1
b. Informational call	0.3
CPS investigation/assessment	
a. Non-placement investigation	8.1
b. Placement investigation	18.6
Child and family services	
a. In-home family case	6.6
b. Child placement case	
New child case	9.5
Ongoing, return-home goal	7.5
Ongoing, other goal	5.6

Constructing an Agency Workload Estimate

The worker case time estimates in Table 2 and the monthly worker hours available in Table 1 are critical parameters for computing a simple but useful estimate of agency workload and staff capacity. The estimation procedure provides a reasonable indication of the relative balance between available staff capacity and agency service delivery demand, both measured in hours.

Table 3 provides an example agency’s estimate of workload demand for a typical operating month. This estimate requires the number of monthly intakes and investigations completed as well as active in-home and placement cases. Agencies can derive these numbers by observing the number of each during a recent month or computing averages for a prior period. Calculating averages from a prior 12-month period provides a stable overview of operational activity. Agencies can also calculate averages for each quarter to examine trends in the numbers of intakes, investigations, and cases served.

Once operating data are secured, the workload computation is straightforward. The worker time associated with each case type is multiplied by the number of intakes, investigations, or service cases. Table 3 operational data show that 2,291 intakes were screened into CPS investigation during an average operating month. Since each one requires 1.1 worker hours, 2,520.1 hours are required to complete them. A similar approach is used to estimate staff time for investigations. The example shows 812 completed non-placement investigations. At 8.1 hours each, completing these requires 6,577.2 staff hours. Only 63 investigations involved a child placement. Since an estimated 18.6 hours are required to complete each one, placement investigations require 1,171.8 total staff hours. Worker hours are estimated for in-home service and placement cases in the same fashion.

Staff hours for each service delivery area are summed to represent total workload demand, which in this example is 32,141.3 staff hours. This estimate represents the worker hours required to meet service delivery standards for clients. To



convert the estimate to worker positions, total staff hours are divided by the 122.3 hours the average experienced worker is available each month (see Table 1). The example estimate shows that 262.8 staff positions are required to meet workload demand. This is the number of workers required to meet agency standards given the demand for child welfare services.

The 262.8-position estimate may be compared to the number of available staff positions (authorized positions minus vacancies) or positions authorized by the agency’s funding source. In this example, the available agency workforce capacity is 216 positions. Since 262.8

positions are required, the agency is understaffed by 46.8 positions (262.8 minus 216). Required positions may also be compared to total authorized positions; for example, if 230 positions are authorized, an additional 16.8 would be required to meet standards (not shown).

Applying the Workload Estimate

Agencies can approximate their own staffing requirements by securing comparable service delivery data and applying the case time estimates shown here. The monthly worker time available (122.3 hours) used in this example summarizes findings from several jurisdictions.

Table 3: Example Agency Estimate of Monthly Workload Demand

Agency service area	Work hours/ case	Average monthly cases	Total worker hours
CPS intake			
a. Maltreatment report	1.1	2,291	2,520.1
b. Screened out	0.3	4,694	1,408.2
Intake subtotal			3,928.3
CPS investigation/assessment			
a. Completed, no placement	8.1	812	6,577.2
b. Completed with placement	18.6	63	1,171.8
Investigation/assessment subtotal			7,749.0
In-home service cases			
a. In-home family case	6.6	1,356	8,949.6
In-home case subtotal			8,949.6
Child placement cases			
a. New child case	9.5	123	1,168.5
b. Ongoing child case, return-home goal	7.5	921	6,907.5
c. Ongoing child case, other goal	5.6	614	3,438.4
Placement case subtotal			11,514.4
Total agency workload demand in worker hours			32,141.3
Staff required to meet estimated workload demand (Total demand divided by worker time available [122.3 hours per month])			262.8
Agency workforce capacity (available staff)			216
Additional staff needed to meet estimated workload			46.8



Table 4: Example Workload Estimates by Region

Agency service area	Workload hours/case	Region 1	Region 2	Region 3
Intake				
Average maltreatment reports	1.1	756	1,169	366
Average reports screened out	0.3	1,549	2,394	751
Intake workload estimate (in hours)		1,296.3	2,004.1	627.9
Intake staff required to meet estimated workload		10.6	16.4	5.1
Investigation				
Average investigations, no placement	8.1	268	414	130
Average investigations with placement	18.6	20	33	10
Investigation workload estimate (in hours)		2,542.8	3,967.2	1,239.0
Investigative staff required to meet workload		20.8	32.4	10.1
In-home family cases				
Average in-home family cases	6.6	447	693	216
In-home family case workload estimate (in hours)		2,950.2	4,573.8	1,425.6
In-home staff required to meet estimated workload		24.1	37.4	11.7
Placement child cases				
Average number of new cases	9.5	40	63	20
Ongoing cases, return-home goal	7.5	303	471	147
Ongoing cases, other goal	5.6	202	314	98
Placement case workload estimate (in hours)		3,783.7	5,889.4	1,841.3
Placement staff required to meet estimated workload		30.9	48.2	15.1
Total agency workload demand in staff hours		10,573.0	16,434.5	5,133.8
Total staff required to meet estimated workload demand		86.5	134.4	42.0
Actual staff available		60	104	52
Additional staff needed		26.5	30.4	-10.0
Proportion of staff needed relative to staff available		44.2%	29.2%	--



Agencies can adjust it by computing their own training, leave, and break times (see Table 1).

In addition, the staff hour subtotals can be used to estimate the staff capacity and workload demand balance for service delivery areas or operating units (intake, investigation, in-home, or foster care case services). For example, the number of staff required to meet the estimated workload associated with CPS investigation/assessment can be calculated separately by dividing the total estimated workload of 7,749 hours per month by the staff time available of 122.3 hours (see Table 3). By comparing the 63.4-position estimate to available unit staff, administrators can secure a reasonable approximation of how adequately the unit is staffed.

The evaluation of workload demand and staff capacity by region is another useful analysis. Regional findings can help administrators deploy new or existing staff to equalize the workload burdens of their operating units and workers. Table 4 illustrates a regional workload comparison. The calculations are identical to the agency total but substitute regional data for intake, investigation, and case service activity. For example, the intake workload estimate for Region 1 is 1,296.3 hours (the sum of 1.1 workload hours per case multiplied by 756 maltreatment report intakes and 0.3 workload hours per case multiplied by 1,549 screened-out reports). This estimated monthly workload is divided by time available (122.3 hours per month) to obtain the staff required to meet the estimated workload demand.

Table 4 shows that in this hypothetical example, Region 3 is overstaffed. This might be remedied by assigning new staff to Regions 1 or 2, which are clearly understaffed. In effect, these kinds of analyses can help administrators make better-informed decisions about staff deployment or otherwise address workload

concerns. If staff redeployment is not an option, an agency may wish to examine other ways of managing workload, such as analyzing policies and procedures to support efficient use of worker time, and/or reallocating tasks to provide workers more time for family interactions. Given the relationship between understaffing and service delivery performance, tools for managing workforce capacity offer administrators an opportunity to improve service delivery and perhaps reduce staff turnover.

The previous hypothetical estimate is limited to case-carrying workers. Supervisors and clerical staff are excluded from the estimate because these staff are often hired in proportion to the number of case-carrying workers. The example estimate also excludes foster and adoption home licensing workers, resource development staff, forensic interviewers, or other specialized staff. If an agency has specialized staff that provide additional support to cases, it can improve the accuracy of its estimate by excluding such staff from the count of case-carrying staff, or by applying more accurate case times to the applicable case types.

Summary and Conclusion

Staff time is a critical resource child welfare agencies deploy in their efforts to strengthen families and promote child safety and permanency. This article presents a case for improving workforce management by reviewing research findings that link understaffing to poor performance on CFSR case outcome measures. This review is followed by a simple approach to estimate agency workforce capacity, workload demand, and understaffing. The article's objectives are to provide child welfare agencies with straightforward methods for conducting quick assessments of their workloads and to show some examples of how this approach might be used to improve workforce management.



The approach outlined can provide a more accurate and more flexible workload estimate than a simple caseload ratio, and is no more difficult to compute. The case time estimates reviewed were derived from several field studies of workers who performed common child welfare case functions: screening intake calls, performing CPS investigations, or serving families receiving in-home or foster care services. For each of the studies, the estimates represent the worker time required to meet the best practice standards of the specific agency. While other agencies may employ more stringent standards, the estimates reflect the time required to provide services at a generally accepted standard of good practice. The studies were conducted by a number of states from different geographic regions, and many of the states served clients in both urban and rural settings. These workers served a wide variety of clients whose demand for case management activity ranged from routine to emergency. In this respect, the median case times presented here are broadly representative.

These median case times are realistic estimates for agencies that have not conducted workload studies—but the case times do have some limitations. The estimates were derived from five studies conducted by state child welfare agencies, which do not constitute a large sample. As mentioned, the estimates are limited to case-carrying workers and exclude licensing, clerical, supervising, and specialized staff such as placement coordinators or forensic interviewers. Agencies that wish to use these case times to estimate workload should also be aware that these case times may not capture some of the practice standards they employ; for example, they do not capture the staff time required to conduct a family team meeting or family conference for every client. These estimates represent typical agency practice, but do not specifically address exceptional practice circumstances.

These case time estimates will result in a meaningful estimate of workload, but agencies can take additional steps to increase the accuracy of their estimates. Agencies may wish to use further differentiated case types in their estimates to account for differences such as intensive in-home services and clients living in remote areas. For example, a number of states classify families by an actuarial risk of future child maltreatment, then apply differential contact standards that increase as risk increases. These jurisdictions could apply workload values specific to cases by risk level. Applying case time estimates that more closely match their practice standards and that accommodate differences in standards will result in more representative workload estimates.

This approach to estimating workload can also be referenced periodically to inform management decisions. Many agencies have developed ongoing systems for workload accounting that can be monitored over time to help ensure equitable distribution of workload across state regions or field units. These systems should be regularly updated with case activity data to provide managers with timely information. Workload accounting systems may also be used to test the workload impact of agency policy changes, especially those that may have a dramatic impact on the workload of existing staff. For example, practice changes that screen in more CPS investigations or increase the worker-client contact standards will clearly impact agency workload. Agency administrators can use approaches like those described here to estimate that impact in advance of the decision.

Agency administrators can also reference this approach to estimation when communicating with legislators or other community stakeholders about workload needs. The methodology is easy for individuals to understand, and can facilitate a discussion about how to improve service delivery. If stakeholders understand the method



for calculating workload but question the validity of the time needed to serve a case according to standards, they may be more likely to support a full workload study that is tailored to practice in the jurisdiction.

The workload estimate can be supplemented with other components to create a more persuasive, comprehensive approach toward improving services for families. For example, a workload estimate that justifies staffing levels necessary for effective service delivery can be partnered with interventions that have a demonstrated positive effect on outcomes. To further strengthen service delivery planning, agencies can use data to manage workload, monitor operations on a regular basis, and evaluate programs based on measurable outcomes such as the nature and number of contacts with families and their subsequent maltreatment of children.

Most workload studies to date have not included an evaluation of effective service delivery. Future workload studies could include assessments of the quality of worker interactions with families and an evaluation of case outcomes (such as subsequent involvement with child protection and/or timely attainment of permanency). This type of study could provide valuable information about the minimum frequency and nature of contacts required to best serve families.

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*A Forum hosted by the Migration
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- The well-being of children and families in Mexico and Latin & Central America;
- State and federal policies that directly impact child welfare agency's ability to work with immigrant children and their families;
- What immigrant-serving agencies, including public child welfare, can do to influence policy locally;
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