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# SB 2030
# CHILD WELFARE SERVICES WORKLOAD STUDY

## FINAL REPORT

**APRIL 2000**

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# Executive Summary

## *Introduction and Background*

The resources required by county Child Welfare Services (CWS) to provide services to abused and neglected children in California are considerable. Each month caseworkers investigate some 40 thousand reports of maltreatment. Roughly 60 thousand family members receive services designed to improve the capacity of families to safely care for their children. Of over 100 thousand children in foster care, California is responsible for almost 75 thousand children who are in a long-term permanent placement. In addition to these basic services, caseworkers and other staff provide a range of services needed to prevent the need for more intensive care and to work with others at the community level and between counties to insure that the needs of children and families are met.

California's current method for allocating basic Child Welfare Services (CWS) resources is based on caseload standards and average monthly case counts. This leads to estimates of the number of workers or Full Time Equivalent (FTE) required to provide the basic Child Welfare Services. The method provides both the total budget of the basic program statewide and the allocation of this budget across counties which are responsible for administering the program. In the 15 years since the current model was adopted, there have been extensive changes in the delivery of social services as a result of numerous legislative, demographic, programmatic, administrative, and/or technical changes affecting the practice of CWS that necessitate a review of this process. Passage of Senate Bill (SB) 2030 required that the California Department of Social Services (CDSS) undertake an evaluation of workload and budgeting methodologies and set forth certain requirements for such a study. This report summarizes the recommendations emerging from the evaluation that was conducted from June 15, 1999, through December 15, 1999.

The four goals pertaining to the scope of the SB 2030 evaluation are stated below in order of priority:

1. To understand the routine activities of child welfare staff[1] in fulfilling their duties;
2. To understand the time needed to complete all mandated practice activities; and

[1] Clerical and administrative functions were not a focus of the study results and recommendations per se, but are addressed by the recommended budgetary approach.

3. To estimate the time required to engage in child welfare practice that can be considered best practice or state-of-the-art (as referenced in the SB 2030 legislation) (California Department of Human Services, RFP 99-03, p.4).
4. Review of the budgetary methodology for statewide Child Welfare Services and for county-level allocations.

The legislation also established the statewide advisory group consisting of caseworkers, administrators and other stakeholders. Broad representation from within CDSS and the county agencies was mandated. The role of the advisory group was to help refine expectations, review proposals and help select the contractor, provide guidance and assistance to the SB 2030 Project Team, and review the study results and recommendations in this report.

To address these goals a workload measurement and analysis process was conducted. All 58 counties participated with over 13,000 staff supplying workload study data for a 2-week period. Other study recommendations and results derive from reviews of laws and policies. Other qualitative data were gathered through focus groups held throughout the state and with participation of staff from most counties. This summary provides a description of the study recommendations and results of the evaluation. For a more detailed discussion of these recommendations, please refer to the recommendations section of the full report.

## *Study Recommendations*

### Recommended Standards from the Core Workload Study and Focus Groups

The average time per month it takes to provide service to a case is critical to the resource allocation budget model used by CDSS to set the annual budget request and to allocate funds to the counties. The table below shows the current Proposed County Administrative Budget (PCAB) caseload standards and the recommended changes to these standards for the five basic CWS program areas. The first number in each cell of the table is the average hours per month per case, the second number found in parentheses, is the cases of that type that one worker can carry. The current workload standard column provides the values that have been used since 1984 for budget allocations. Measured workload time is derived from the workload study which captured work for 13,584 eligible CWS case-carrying staff at the county level who performed 1,140,667.6, hours of work during the study. The difference between current standards and measured work reflects the efforts that workers are utilizing compared to the theoretical time that

was allocated by the PCAB method. There are many explanations for this difference including the possibility that some cases are not served each month, the use of overtime, and differences in how the counties have implemented the CWS basic program. Minimum and optimum times reflect the results from the review of laws, policies, standard-setting focus groups, and outcome expectations. Caseloads are calculated based on the study finding that 116.10 hours per month, on average, are available for workers to provide direct services to cases. The main project report contains a more detailed discussion of the study methods and the workload study results.

**Comparison of CWS Time per Case Standards**
**Hours per Case per Month and Cases per Worker**

| CWS Basic Program Area | Current Workload Standard | Measured Workload Time* | Composite Minimum Recommended Standard Time | Composite Optimum Recommended Standard Time |
|---|---|---|---|---|
| Screening/Hotline/Intake (ERA) | 0.36 | 0.78 | 1.00 | 1.69 |
| Caseload per Worker | (322.50) | (148.85) | (116.10) | (68.70) |
| Emergency Response (ER) | 7.35 | 7.19 | 8.91 | 11.75 |
| Caseload per Worker | (15.80) | (16.15) | (13.03) | (9.88) |
| Family Maintenance (FM) | 3.32 | 3.97 | 8.19 | 11.44 |
| Caseload per Worker | (34.97) | (29.24) | (14.18) | (10.15) |
| Family Reunification (FR) | 4.30 | 4.97 | 7.45 | 9.72 |
| Caseload per Worker | (27.00) | (23.36) | (15.58) | (11.94) |
| Permanent Placement (PP) | 2.15 | 2.37 | 4.90 | 7.07 |
| Caseload per Worker | (54.00) | (48.99) | (23.69) | (16.42) |

* “Measured Workload Time” based on a 1-month calculation. Except for Screening/Hotline/ Intake (ERA), which represents a 2-week time value.

## 1. Work Measurement and Workload/Caseload Standards Recommendations

### 1.1. Consider implementing the minimum standards for case-related time as soon as possible for at least some program areas.

### 1.2. Review the optimum standards and prioritize them for possible long-term implementation based on achievement of outcome criteria.

**Justification of Workload Standards**

From the table it is clear that implementation of either the minimum or optimum standards would result in considerably lower caseloads than the current budget allocation standards. Even so, the minimum standards are within the bounds for similar services set by other states and those by national child welfare organizations. The difference between the current standards and the recommended minimum standards reflects changes in law and policy that occurred during the intervening 15-year period since they were originally established.

Because the statewide permanent placement caseload is the single largest component of all of the cases, compared to the other program areas, achieving the minimum standards for permanent placement would have the largest impact on the allocation of casework staff. There is a wide range of policies that differentially affect the time required for caseworkers to provide service to children in this program area. Consequently, even though sufficient justification from the evaluation was found to warrant the reduction in caseloads, more information regarding the numbers of children with different permanent placement conditions would be needed to refine the required workload.

**Policy Changes Requiring Increases in Workload Standards**

Since the PCAB standards were developed 15 years ago, multiple changes in laws, policies and court decisions have impacted the requirements for providing services to children and families. As an example of changes at the state level, consider the area of Permanent Placement and the policies that are now in effect.

**Significant Changes in State Permanent Placement Policy:**
Considerations related to the permanent placement of children are covered in policy in the Department's Child Welfare Services Manual of Policy and Procedures, §31-425. This section of the policy manual has undergone substantial change in the past 15 years in accord with amendments to California statutes that:

- prioritized placing children with relatives when possible,
- mandated carefully assessing the suitability of relative placements, and
- gave the court the authority to allow relatives the same capacity as parents to legally consent to a child's medical, surgical, and dental care, and education.

(See California Welfare and Institutions Code, §§ 361.2 and 361.3, as amended by Assembly Bill 1544, Chapter 793, Statutes of 1997, and California Welfare and Institutions Code, § 366.27, as amended by AB 2129, Chapter 1089, Statutes of 1993.)

Prior to 1993, policy required that permanent placement be based on specific listed needs of the child and the capability of out-of-home care provider(s), adoptive parent(s), or guardian(s) to meet the child's specific needs, and other relevant factors even if not listed in policy. Consideration of the factors listed prior to 1993 alone (i.e., degree of permanency offered by the available alternatives; child's age, sex and cultural background, including racial or ethnic and religious identification; child's health and emotional factors; special needs) is a time intensive practice mandate. Amendments to the statutes made in 1992 and 1993 to further respond to the best interests of children now require preferential consideration of requests by relatives for placement of the child with the relative, specify the priority order in which relatives in different degrees of relation to the child must be considered, and list factors to be considered in assessing the suitability of specific relatives as placements. These statutory amendments (which have been incorporated into policy by reference) require that social workers now additionally consider a set of specific factors for relative placements, some of which are listed below to give an idea of the time impact:

- placement of siblings and half-siblings in the same home,
- good moral character of the relative and any other adult living in the home,
- nature and duration of the relationship between the relative and child,
- ability of the relative to
  - provide a safe, stable, secure home,
  - exercise proper and effective care and control of the child,
  - provide a home and necessities for the child,
  - protect the child from his or her parents,
  - facilitate court-ordered reunification efforts with the parents,
  - facilitate visitation with the child's other relatives,
  - facilitate implementation of the child's case plan, and
  - provide legal permanence for the child if reunification fails,
- the safety of the relative's home (which must be assessed and documented in the case record).

In 1991, SB 1125, c. 1203 reorganized Child Welfare Services in the state of California so that there is one program with four components (ER, FM, FR and PP). Further, this legislation requires closer monitoring of children and families, strengthening case plan requirements and tracking changes more closely. Case plans must be written within 30 days of removal. It permits an additional 6-month extension of family reunification services in certain permanent placement cases. DSS must write CWS regulations to conform to SB 1125 (Division 31).

In addition, state statutes have been amended in the last 15 years to conform to the requirements of the federal Adoption and Safe Families Act (see below). Furthermore, ACL 94-15, 2-15-94 requires the re-determination of deprivation every 6 months on all federal foster care cases including permanent placement and documentation of good faith effort to contact parents.

In 1989, AB 2268, c. 1437 and SB 1466, c. 1175 established that appropriate placements for children with special health care needs are the responsibility of the county. The county must implement a plan and train providers. Furthermore, there is a limit of two placements per specialized home.

Since 1990, successive legislation increased the screening of caregivers. In 1990, AB 2617 (c. 1570) required that social workers obtain a full criminal records check including arrests for the purpose of screening foster and adoptive parents. SB 426 (c. 892, ’93) required the social worker to investigate all possible relatives for placement and provides standards for evaluating relatives when re-placing a child. AB 1196 (c. 268, ’97) set safety standards for relative’s home for placement, including review of criminal records.

With the passage of AB 2129 (c. 1089, ’93) and SB 17 (c. 663, ’94), state law now required that workers make diligent efforts to place sibling together, to plan for frequent visitation for siblings placed apart, and to document the efforts in the case plan. Additionally, the two bills would require counties to evaluate placement resources, examine out-of-county and out-of-state placements, and develop resources for placement in county.

In 1994 SB 1407 (c. 900) was passed and allowed that juvenile courts may now appoint a legal guardian to the child at the dispositional hearing in lieu of a dependency if parents do not want family maintenance or family reunification services and all parties agree. The social worker must assess the suitability of the proposed guardian.

In 1997 the law changed through the passage of AB 1544 (c. 793) to require additional activities, specific to the permanency of children, be completed by social workers. These activities include the requirement that workers ask parents about all maternal and paternal relatives. There are newly added enumerated circumstances for not ordering reunification services. Courts are required to make paternity determinations at the detention hearing and order family reunification services to mothers and presumed fathers. Pursuant to this, the social worker is to document in the court report concurrent planning efforts and placements, if any. These changes establish criteria to assess relatives for placement (see above), require advising birth parents of the option of relinquishment, and require the social worker to disclose to relatives being assessed for placement the reasons the child is in out-of-home care. Additionally, AB 3441 (c. 495), passed in 1992, required the social worker to ask the parents which relatives they want considered for placement and this must be documented in the court report.

Furthermore, in the adoption assessment that is required for the .26 hearing, a case-by-case review of the minor's contact with his extended family must be documented by the worker (SB 475, c. 820, '91).

AB 1524 (c. 1083) passed in 1996 provided that expedited permanency may now occur in some cases—infants and toddlers under age 3. In these cases, family reunification services may be limited to 6 months. FR may not be ordered at all if there is abandonment, if the sibling has a permanent plan, if the parent is convicted of a violent felony or if there is parental substance abuse. Assessment of these circumstances places a greater load upon the worker.

ACL 89-26 expands the application of the Indian Child Welfare Act to non-federally recognized tribes for adoption services. Consequently, ICWA entails additional provisions for the social worker to meet in relation to permanent placement.

As another example, consider the recent changes in Federal policy which have an impact on providing services to children in permanent placement (PP). Compliance with these Federal mandates is necessary to insure that the state is able to access the title IV-B and IV-E funding which is the source of more than 50% of state funding.

**Significant Changes in Federal Policy Impacting Permanent Placement:**
Federal policy has also imposed additional requirements in the permanent placement arena in the last 15 years. The most significant changes in federal policy have been those stated in the Adoption and Safe Families Act of 1997 (ASFA), including the prioritization of child safety, the compressed time frames for attempts to reunify families before proceeding with another permanent plan for the child(ren), and a formal policy statement that concurrent planning for reunification and for another permanency option is not only acceptable but is good practice. The law includes requirements for:

- Placing children outside the home immediately if certain aggravated circumstances would endanger their safety if they remain in the home (42 U.S.C. §671 (a)(15)),
- Filing a petition to terminate parental rights (with certain exceptions) when a child has been in foster care for 15 of the most recent 22 months (45 CFR §1356.21 (i)),
- Conducting a permanency planning hearing within 12 months of the date that a child is considered to have entered foster care (formerly the requirement was 18 months and the hearing was denominated as a "dispositional hearing"). ASFA further requires that at the permanency hearing, a permanency plan must be developed that includes whether, and as applicable when, the child:
- Will be returned to the parent,
- Will be placed for adoption and the state will file to terminate parental rights,
- Will be referred for legal guardianship, or
- If there is a documented compelling reason that it is not in the best interests of the child to be placed for adoption, with relatives, or in legal guardianship, to determine another "planned permanent living arrangement" for the child (42 U.S.C. §675 (5)(c).

**Staff Focus Groups Justifications Regarding Increasing the Time to Provide Services**

In addition to consideration of these changes in law and policy in setting new standards, focus groups were held throughout the state and all California counties were invited to send CWS field staff including workers, supervisors and administrators to participate in setting workload standards. Examples of the comments in the area of permanent placement provide a sense of how workload is currently impacted by these changes and what staff believe is needed to meet these requirements adequately.

**Focus Group Justification Commentary on Permanent Placement Activities**
Many of the focus group participants expressed concern that due to inadequate time, support, and resources, staff members are burning out. According to focus group participants, current policy and good practice requires workers to spend more time in the following areas:

Need more time:
- For contacts with the family.
- For finding resources.
- For working with service providers.
- For preparing proper plans to reduce court contests.
- For conducting better assessments of parent/child relationship.
- For face-to-face contact with clients.
- For training relatives as is required to be foster parents.
- For facilitating parent/child visitations.
- For conducting case management in order to reduce placement moves for children.
- For adequately inputting information into the Child Welfare Services/Case Management System (CWS/CMS).

Need to be able to spend more time:
- Doing more in-depth documentation and writing reports.
- Conducting more thorough investigations when needed.
- In collaboration and follow-up with other agencies.
- Supporting and preserving resources for future placements.
- Preparing child for adoption.
- With parents preparing them for separation.
- Reviewing client history.
- Educating adoptive parents.
- Coordinating with public health.
- Working with long-term guardians.
- Finding resources.
- Coordinating services with managed health services.
- Matching the child with placements that are potentially permanent.
- Following up on treatment to ensure that it is appropriate and adequate.
- Preserving and improving current placements.
- In contact with collaterals.

> In the standard setting focus groups, staff indicated that many times workers are unable to meet current program/policy standards, and other times they are able to meet these standards for only some of the cases in their caseloads. Often, even when they are meeting the written program/policy standards, they are meeting only the letter of the standard, not the heart of the standard. For example, if policy requires them to make a home visit, they are able to make the home visit, but not for sufficient time to collect all the information they need or to establish a working relationship with the family.[2]

**Outcome Considerations for Addressing Optimum Standards**

Meeting the minimum standards assumes that the service delivery system will consistently function so that current program requirements will be met for all cases. In contrast, the implementation of the optimum standards would be tied to significant improvements in the outcomes for children and families. To ensure that outcomes are improved would require careful implementation of the standards and other process improvements designed specifically to address the outcomes, as well as a formal evaluation to learn whether the outcomes had been achieved. CDSS has already developed outcomes for CWS programs that would be addressed. For example, in the area of permanent placement, the following outcomes have been defined[3]:

- Children aging out of foster care shall be able to meet their basic needs.
- Children in out-of-home care are (in a) safe, healthy living environment.
- Children in out-of-home care shall achieve timely, legal permanence (reunification, adoption, guardianship).
- Children removed from home maintain family and/or community ties.

In addition to the CDSS outcomes, the federal requirements in ASFA mandate the development of outcomes to address safety, permanence and well-being.[4] The outcomes applicable to permanent placement in California include the following: reduce time in foster care to adoption finalization; increase placement stability; and reduce placements of young children in group homes or institutions. Similar justifications for other CWS services are found in the full report.

[2] An important distinction must be made between monitoring for CWS Program compliance based upon available documentation and meeting policy requirements. The current monitoring process captures data on a subset of the range of policy mandates and "good practice" approaches represented in this report. Also, the compliance monitoring process does not address the quality of the specific actions that are reviewed.
[3] March 1998 Report to the Legislature: Outcome Measures, Process Measures, and Conditions in the Child Welfare System.
[4] Part E of title IV of the Social Security Act (42 U.S.C. 670 et seq.)

## 2. Child Welfare Services Staff Tenure and Training Needs Recommendation

### 2.1. Consider the need to adjust standards for noncase-related time to address training and staff development needs.

Training and staff development occupies a total of 2% of the time of all primary case-carrying workers. For case-carrying workers with 6 months tenure or less, the average time per month spent in training is 11.02 hours, or 6% of the average worker's time per month. For purposes of this study, the California Social Work Education Center (CALSWEC) Core Training Curriculum Development Committee recommended an average of 41.67 hours per month of training, including on the job training (OJT), for new workers over a year. This estimate was derived through a process of examining the actual and proposed requirements for the core training curricula that are now being developed. If the CALSWEC committee core training recommendation is implemented, it is estimated that this would leave new workers short by over 30 hours each month. To address this need for training, it will be necessary to adjust the noncase-related time for workers with less than six months of tenure accordingly. The recommended adjustment is that for workers with less than six months tenure the noncase-related time should be adjusted from 57.10 hours per month to 84.56 hours per month.

To get a sense of the impact of the recommendation, the workload study instrument requested staff to identify the number of months they had worked in the child welfare services agency. A low number of months on the job indicates a greater need for new staff training. Across 57 counties,[5] 90.1% of the primary case carrying staff who entered tenure information have worked in child welfare services for more than 6 months, indicating that about 10% of casework staff would need additional time for training. Other staff may also require additional training, but these needs could not be addressed by the study scope and available information.

In making this recommendation it is important to recognize that the knowledge and skill level required to perform CWS casework activity is not necessarily contained in the curriculum new workers get in their post secondary education programs. Rather, all workers require some level of additional specialized training for their work in CWS agencies. However, the amount of training needed may vary depending on their educational background and experience. The clear

[5] This excludes Colusa County.

implication is that all new staff require training to adequately perform the child welfare casework job functions.

**2.2. Devise and implement a special recruitment plan to address likely staff shortages.** One implication of the evaluation is that if the workload recommendations are implemented, considerable demands will be placed on recruiting and hiring new staff. Therefore, a plan to address these likely shortages will be essential to obtain support from the secondary education system and other appropriate personnel resources.

### Budget Review and Financial Modeling Findings

The current CWS basic budget process is sophisticated and complex. It is conditioned in large measure by federal and state mandates and by the need to recognize the significant variation in county costs of child welfare services.

The primary advantages in the current basic budget methodology are that it recognizes caseload, county salary, and operating cost variances. The changes over time in the cost of doing business and in caseloads are considered. In that sense, and to the degree that county Proposed County Administrative Budget (PCAB) input data is used for allocating funds, the PCAB budget accommodates the cost variations inherent in each county. However, the current budget methodology is based on 1984 workload factors. These are outdated and need to be revised. They also should be expanded to accommodate changes and innovations and other workload considerations as noted in the recommendations. The recommendations below are described in more depth in the main body of the report.

## 3. Budget Methodology Recommendations

**3.1. The service-based budget methodology (PCAB) is the most practical and workable approach and should be continued.**

**3.2. The minimum standards service caseload factors as determined by the workload study should be used in place of the current standards.**

**3.3. Current budget methodology caseloads should be subject to additional specialized study to recognize the unique needs and additional time necessary to serve non-English speaking culturally diverse, and disabled or handicapped populations.**

**3.4. Adjustments for new staff training time needs should be addressed.**

**3.5. Minimum funding allocations, that have historically been used for very small counties reduce unessential administrative overhead and should be expanded to include additional small counties.**

**3.6. State funding for new child welfare programs, including new prevention and collaborative initiatives, should be considered.**

**3.7. A Block Grant methodology should be subject to further evaluation and considered for a limited pilot test.**

**3.8. Consideration should be given to reviewing current state and county cost sharing ratios.**

**3.9. Improve state and county budget communication.**

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## Other Budgetary Processes Considered

Alternatively, state funding could be allocated strictly on the basis of county funding. Such a block grant approach would be a significant departure from the current approach in CWS basic funding. The intent of such an approach would be to permit counties to have wide latitude in program management and increased flexibility in operations. It would also accommodate the diversity in county approaches in the provision of child welfare services. The primary impediment in moving to a workable system of block grants is the requirement for county compliance with state and, in some cases, federal mandates. For block grants to actually enable programmatic flexibility relief from compliance with regulations would be critical. To assure the success of such an approach, CDSS would probably find it necessary to measure, monitor, and review the performance of county programs. A block grant approach implies the development of incentives for improved performance balanced with sanctions for nonperformance and/or non-permitted expenditures. The major revisions inherent in a block grant approach would warrant an initial controlled and successful test prior to widespread implementation.

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Additional reporting of outcomes would provide meaningful data for assessing program costs and performance. However, in the absence of agreed upon, recognized outcome measures, and given the lengthy times to achieve satisfactory outcomes, developing a budget methodology based on outcomes is premature at this time. Further study to establish uniformly accepted outcome measurements is appropriate.

### Recommendations for Developing Workload Standards and Resource Requirements for Best Practice Areas

Several areas were designated for special study. There were focus groups convened to (1) look at areas of service delivery not clearly addressed in the workload study of tasks, and (2) estimate the time needed to implement innovative approaches to service delivery that are being piloted by some counties. The service areas that required special study were:

- Assessment of Relative/Kinship Homes
- Health and Education Passport
- Multilingual/Multicultural Services
- Independent Living Program
- Social Worker Training and Curriculum Development
- Response to Domestic Violence

The study examined the following areas of promising practice being implemented in one or more counties:

- Family Unity Meeting/Family Group Conferencing
- Healthy Start (School-based, school-linked services)
- Structured Decision Making
- Wraparound

## 4. General Recommendations for Best Practice Areas

**4.1. Comparability of local programs should be assessed before they are included in the same special study.**

**4.2. For all special study subject areas, consideration should be given as to how long programs or policies have existed in each county being studied.**

**4.3. Specific Recommendations for Each Best Practice Area:**

**4.3.1. Incorporate the emergency response and family maintenance workload standards for Structured Decision Making (SDM) on a county specific basis.**

**4.3.2. The Wraparound Program area could benefit from a longitudinal study that assesses short- and long-term outcomes for families served in the programs, and methodologies should include staff and partner agency interviews.**

**4.3.3. Conduct a structured estimation time study for domestic violence programs that are supported under California Work Opportunity and Responsibility to Kids (CalWORKs) auspices.[6]**

**4.3.4. Conduct either a structured estimation or time log time study for Independent Living and add Probation and Post-Emancipation as units of service for measurement.**

**4.3.5. Multicultural/Multilingual issues would best be addressed by a longitudinal study that identifies and assesses best practices (the Santa Clara model is an example worth examining further).**

**4.3.6. Use structured estimation and a staff shadow method to study Healthy Start programs.**

**4.3.7. For Health and Education Passports, conduct a lab study with a variety of cases using public health nurses and staff funded by CDHP and other funding sources.**

**4.3.8. Conduct a time study using counties who have implemented Family Group Decision Making (FGDM) and cases that are identified as practicing FGDM using a best practice model.**

**4.3.9. Conduct a time study using a sample of counties and collect data from all staff involved in the Assessment of Relative Homes.**

## Best Practices–Focus Groups

Focus groups on specific areas of practice, identified by the advisory group as needing more thorough exploration, were held in several locations in the state. The groups were primarily qualitative and exploratory in nature since some of these areas of practice are relatively new, or exhibit wide variations in implementation approaches in different counties. However, participants in the groups thought that better information could be gained by further definition of the work involved, so that any estimation of time requirements was not appropriate at this time.

Each group was asked for a consideration of whether the area represents a best practice, and whether the current practice met the guidelines for best practice or not, any barriers to fully implementing the area, consideration of the time needed to operate the best practice approach,

[6] CDSS is in the process of developing a Domestic Violence Protocol for ER Screening and Hotline staff which is also likely to have an impact on workload in this program area.

and a decision about the best way to study the area in the future. These discussions and recommendations are described in the main body of the report.

## 5. Other Recommendations

### 5.1. Management Uses of the Data

#### 5.1.1. Counties should consider using the formulas provided in the management of case assignment and monitoring to address workload equity.

### 5.2. Additional Related Research Recommendations

#### 5.2.1. Review the service categories used in the workload study and consider enhancements to the CWS/CMS to capture data on all service categories.

#### 5.2.2. Develop more capacity to generate routine CWS/CMS data on case entries, durations, and exits for all service categories.

#### 5.2.3. Current efforts to develop outcome data for CWS need to be integrated analytically with workload data and subsequent workload studies.

#### 5.2.4. Consider vacancies in staffing and the effects on existing staff workload.

#### 5.2.5. Develop a simulation model of CWS basic services for forecasting purposes.

### *Approaches to Conducting Future Studies*

A mechanism to re-evaluate and update workload/caseload standards on a perpetual basis to incorporate state-of-the-art program changes, legislative mandates, and demographic and societal changes is **not** recommended. The results of this study demonstrate that the workload standards established by the state 15 years ago are not in synch with current case activity and it will be costly and complex for the state to make these adjustments. This underlines the importance of being able to continue to conduct workload studies with a reasonable degree of frequency.

### Recommendations for Conducting Future Studies

1. Implement a periodic statewide, program-wide, scientific study mechanism combined with an ‘as needed’ small-scale study mechanism to address best practice areas.
2. Future statewide, program-wide, workload studies should be conducted every three to five years and use a statistically valid random sample of staff to determine the number of study participants.
3. Future periodic studies should collect data for one month (two 2-week periods at different times during the year).
4. Continue to use the time log methodology used in the current study.
5. Develop a 3- to 5-year plan to conduct small-scale special studies to address best practices and emerging practices.

6. Develop an infrastructure to support ongoing workload studies.

### *Conclusion*

The study recommendations reported in this summary provide support for the idea that changes in requirements and expectations for the CWS program have increased the time needed to provide services. More than anything, the change from the current standards to the minimum recommended standards reflects the 15-year gap between reviews of these standards and the new requirements and demands on staff that have been introduced during that period.

There are undoubtedly many opportunities to address improvements in productivity that are beyond the scope of this study. Providing more time to reach better initial decisions might reduce the need for additional services in the future. Reducing the required expectations in some areas might also reduce the time needed to provide certain services. However, these improvements cannot be expected to substantially address the large gap between the current standards and the minimum standard recommendations from this evaluation without providing more time to get the job done.

An example of a critical program area that deserves further scrutiny from this standpoint is the permanent placement program. It is in this area that the largest number of new staff would be needed, if the minimum standard is implemented. It is also in this area that the most significant policy changes from the Federal government have occurred. Most other states that have developed standards in this area allow staff more time to provide services to children in permanent placement. Furthermore, efforts to reduce length of stay in substitute care by focusing more attention on these children could have a major impact on the overall caseload level in this area. Success in impacting this area will require better information on the specific needs and conditions of children, a better understanding of how children transition to the range of permanent placements including emancipation, and the impact of new federal requirements.

Many of the program improvement activities reviewed as best practices have the potential to contribute to long-range improvements in both the productivity and effectiveness of service provision. However, to take full advantage of the opportunities these represent, it will be important for CDSS to develop more approaches to monitoring and evaluating CWS performance and improve the evaluation infrastructure accordingly.

Attachment 9

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Attachment 9