

**REPORT TO THE  
UTAH LEGISLATURE**

Report No. 2002-05

**A Performance Audit  
of  
Child Welfare Caseworker Workload**

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Audit Performed by:

Audit Manager

Rick Coleman

Auditor Supervisor

Wayne Kidd

Audit Staff

Deanna Herring  
Ivan Djambov

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TO: THE UTAH LEGISLATURE

Transmitted herewith is our report, **A Performance Audit of Child Welfare Caseworker Workload** (Report #2002-05). A digest is found on the blue pages located at the front of the report. The objectives and scope of the audit are explained in the Introduction.

We will be happy to meet with appropriate legislative committees, individual legislators, and other state officials to discuss any item contained in the report in order to facilitate the implementation of the recommendations.

Sincerely,

Wayne L. Welsh  
Auditor General

WLW/lm

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# Digest of A Performance Audit of Child Welfare Caseworker Workload

In accordance with **Utah Code** 62A-4a-118, our office has conducted its annual child welfare audit. The Child Welfare Legislative Oversight Panel asked the Legislative Auditor's Office to do a workload study of the Division of Child and Family Services (DCFS) caseworkers. The main conclusions of this report are the following:

- Caseworkers allocate their time to multiple tasks
- Caseloads of 12 to 15 appear reasonable
- Some workload areas can be reduced
- Inconsistencies throughout DCFS should be addressed

We performed four different tests that helped us to understand the demands placed on caseworkers: 1) We shadowed caseworkers to learn their duties and the challenges they face. 2) We asked a sample of caseworkers from each of the five regions of DCFS to complete a time log for the month of March 2002. Caseworkers were asked to write down all activities or tasks. We then summarized how each caseworker spent his or her time and how much was spent on each case. 3) We organized five focus groups, one in each region, to discuss workload issues. 4) We also monitored three offices to look at the detailed operations of the offices.

Following the introduction in Chapter I, this report contains four chapters that each address one of the topics mentioned above. Each chapter is summarized below.

## **Caseworkers Allocate Their Time to Multiple Tasks.**

Documenting casework, visiting children and families, and traveling consume the majority of caseworkers' time. About 68 percent of caseworker time is available to work on their assigned caseloads after deducting time spent in training, on administrative tasks, and on personal leave. Casework involves much more than just visiting children and families, such as court appearances, developing plans for the clients and their families, and completing needs assessments, citizen reviews, and a lot of paperwork.

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Chapter II: How do caseworkers spend their time?

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Chapter III: Given the current workload, what constitutes a reasonable caseload for caseworkers?

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Chapter IV: What are some strategies for reducing workload?

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Chapter IV  
Recommendations

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**Caseloads of Twelve to Fifteen Appear Reasonable.** We determined the reasonable number of cases that caseworkers can manage, given the current workload requirements and practices. We examined the three main case types that caseworkers manage: child protective services (CPS), out-of-home care services, and home-based services including—court ordered (PSS), and voluntary (PSC) services. On average, we believe 15 cases is a full load for CPS or home-based cases, and 12 cases is a full load for out-of-home cases. However, average caseloads are affected by staff turnover, required travel, sibling groups, and other factors.

**Strategies to Reduce Workload.** We suggest three areas that state policy-makers should consider to help reduce the high workload of DCFS caseworkers. First, caseworkers who manage out-of-home cases generally are required to visit the child at least twice per month. The second visit may not be needed and places Utah within a higher standard than other states. Second, a way to reduce the time caseworkers spend traveling to visit clients is to assign a courtesy supervision worker. The courtesy supervision program is an underutilized asset which DCFS should administer in a more formalized manner. Third, the level of documentation required by DCFS frustrates caseworkers because the more paperwork involved in a case, the less time a caseworker can spend providing the social work the children need.

The recommendations for reducing workload are listed below.

1. We recommend that the Division of Child and Family Services revise its policy on out-of-home care visits, considering the following options:
  - Eliminate the second monthly visit
  - Allow caseworkers to request a waiver from their supervisor and/or a regional administrator for each out-of-home child that does not need the second visit
  - Allow a professional from the child and family (e.g. therapist, teacher, etc.) to complete the second monthly visit
  - Adopt a visit policy based on length of time since the last child visit (e.g., 30 days)

2. We recommend that the Division of Child and Family Services consider two changes to the courtesy supervision program:
  - Amend DCFS policy governing courtesy supervision to be separated from the transfers area, as well as clarify vague language to more accurately reflect the intent of the courtesy supervision program
  - Change the courtesy supervision policies to include both inter- and intra-regional courtesy supervision to encourage the most efficient use of caseworker resources
  
3. We recommend that the Division of Child and Family Services consider the options suggested in this chapter, as well as their own options, to reduce paperwork, including the following:
  - Reduce the number of forms
  - Shorten forms by making them more succinct
  - Enhance transcription and E-SAFE options
  - Provide laptop computers
  - Coordinate with other agencies to reduce the number of forms which share the same information
  - Allow “canned” responses to common questions

**Inconsistencies Should Be Addressed.** We found many differences and inconsistencies throughout DCFS that division management or legislators should address. Some differences are appropriate because they result from local factors that vary throughout the state. However, other differences may be unintended consequences of inconsistent policies and practices at the division, region, office and caseworker levels. Inconsistencies that we found during the audit that need to be addressed include:

- Caseloads vary by region
- Better resource distribution policy is needed
- Practices with ungovernable youth vary throughout state
- Western region’s pilot assessment format could be applied statewide to lower priority referrals
- Inconsistent caseworker practices result from policy confusion
- Use of caseworker assistants and interns vary by office

The recommendations to resolve these inconsistencies are listed below.

1. We recommend that the Division of Child and Family Services develop a well-documented needs-based approach to distributing resources to regions.
2. We recommend that the Division of Child and Family Services study and develop recommendations to address the issue of ungovernable youth placed in their custody.
3. We recommend that the Division of Child and Family Services consider applying the Child and Family Assessment format to low priority referrals.
4. We recommend that the Division of Child and Family Services complete its ongoing policy revisions as soon as possible.
5. We recommend that the Division of Child and Family Services clarify the job description of caseworker assistants to ensure a more efficient and effective use of their time in helping caseworkers with their workload.
6. We recommend that the Division of Child and Family Services expand their intern pool by actively networking with local colleges and universities.



# Chapter I

## Introduction

In accordance with **Utah Code** 62A-4a-118, our office has conducted its annual child welfare audit. The Child Welfare Legislative Oversight Panel asked the Legislative Auditor’s Office to do a workload study of the Division of Child and Family Services (DCFS) caseworkers. We were specifically asked to determine what constitutes a reasonable caseload for various types of child welfare workers given the unique statutory and court monitoring demands imposed on our system.

### DCFS Is a System Under Reform

In recent years, Utah has put much effort and additional resources into reforming its child welfare system. DCFS and its staff have received much criticism as they have struggled to improve child welfare practices. Currently, DCFS is working to fully implement its Milestone Plan by developing an organizational environment where good social work practice skills are employed and good outcomes for the child and family are paramount. However, DCFS remains under court supervision.

As shown in Figure 1, since 1994 the state has put significant additional resources into DCFS.

**Figure 1. DCFS Funding.** Since 1994 DCFS total funding (state and federal) has increased 162 percent.

Fiscal Year	State General Funds	Percent Increase Since 1994	Total Funding (includes federal funds)	Percent Increase Since 1994
1994	\$ 18,872,900	– %	\$ 48,902,600	– %
1998	57,795,800	206	108,474,800	122
2002	64,798,500	243	128,236,600	162

In the eight-year period, state funding has increased 243 percent. The total funding increase of about \$80 million has enabled the hiring of many

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DCFS has refocused their services, targeting the needs of the child and family.

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Since 1994, state funds to DCFS have increased 243 percent.

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The Milestone Plan is the guide that has been developed to provide principles, goals, objectives, and standards for DCFS.

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additional staff so that caseloads are low compared to other states. Still, it seems that the workload required on each case is so high that it is difficult for caseworkers to complete all the necessary requirements. For fiscal year 2003, DCFS' programs budget decreased by \$3.5 million and they lost 37 FTE's. This includes a loss of \$1.8 million and 26 FTEs, due to the discontinuance of an early intervention program (FACT).

The division's efforts are guided by its Milestone Plan that articulates the "principles, goals, objectives, and standards in which DCFS believes, to which it aspires, and which it endeavors to achieve." The Performance Milestone Plan outlines

- The process of developing a consistent philosophy of practice called the Practice Model
- Training employees on the Practice Model
- Monitoring how well Practice Model principles are being incorporated into the system

The Milestone Plan is an ambitious effort to reform the child welfare system so the focus is on best practices and child and family outcomes.

**DCFS Remains Under Court Supervision.** DCFS has been under court supervision for over eight years. In response to a class action lawsuit filed in 1993, the state negotiated a settlement agreement the next year. The agreement was scheduled to expire after four years, but since the state has not met expectations, court supervision will continue indefinitely.

The David C. settlement agreement of 1994 required DCFS to comply with many detailed procedures and established a monitoring panel to measure procedural compliance. In 1998, after four years of effort and more than a doubling of resources, the panel actually reported declining performance. In addition, focusing on compliance seemed to foster an atmosphere where documentation was sometimes regarded as more important than results.

In 1998, the federal court refused to extend the four-year term of the settlement agreement because "it did not believe that merely extending a failed agreement into the indefinite future would serve any purpose whatsoever." However, the court also declined to honor the scheduled expiration date finding that the state's "failure to make any substantial

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Court supervision will continue until DCFS meets expectations.

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progress. . . gives the court power to enact necessary modifications of the settlement agreement.” Instead, the court ordered DCFS to develop a comprehensive plan to replace the settlement agreement, and the division created the Milestone Plan.

**Private Group Serves as Court Monitor.** The Child Welfare Policy and Practice Group (CWPPG) is a private organization that serves as the court monitor of DCFS. CWPPG was originally hired by the old monitoring panel to help assess the division’s compliance with the settlement agreement. Later, the federal court ordered DCFS to retain the services of CWPPG to help complete the Milestone Plan. The court also required that “the plan must have some provision for continued monitoring by CWPPG so long as the termination conditions have not yet been met.”

CWPPG’s most recent annual report, released in January 2002, assessed DCFS compliance with the Milestone Plan on three separate criteria:

- Achievement of plan tasks (or Milestones)
- Performance on case procedural tasks
- Qualitative practices performance

According to CWPPG, their findings “reflect a mixed picture of performance, with progress in two areas and declining performance in a third. Performance in all three areas falls short of that necessary for compliance and exit [from court supervision].”

Of particular note to our audit is the area where CWPPG reported declining performance: compliance with procedural tasks. Although outcomes improved, compliance with case process declined. Despite lower caseloads in Utah, staff still cannot complete all the required casework. To help evaluate why performance continues to fall short of standards, this audit then addresses workload by looking at how caseworkers spend their time.

## Audit Scope and Objectives

This audit was requested by the Child Welfare Legislative Oversight

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Although resources have increased, performance falls short.

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The Child Welfare Legislative Oversight Panel requested a workload study of DCFS.

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Panel in response to the 2001 legislative audit. This audit can be seen as a continuation of the 2001 audit which found that although caseloads are low, DCFS caseworkers seem to have a high workload. The panel asked that we follow up on our earlier work by completing a workload study. The specific questions addressed by this audit are as follows:

- How do caseworkers spend their time?
- Given the current workload, what constitutes a reasonable caseload for the main types of child welfare workers?
- What are some strategies for reducing workload?
- How are resources allocated to the five regions within DCFS?

In order to answer these questions, we performed four different tests that helped us to understand the demands placed on caseworkers and to develop some suggestions for reducing workload. The four tests that were performed are described below:

**Caseworker Shadow Test.** We spent all or part of a day with a number of caseworkers that manage each of the three main types of cases: CPS, out-of-home, and home-based to learn their duties and the challenges that caseworkers face. We spent an entire day with each type of caseworker. We shadowed caseworkers from different offices and from different regions. We wanted to compare demands placed on caseworkers that worked in large offices with caseworkers that worked in smaller offices. We also wanted to make regional comparisons.

**Time Log Test.** We asked a sample of caseworkers that manage the three main case types (CPS, out-of-home, and home-based) from each of the five regions of DCFS to complete a time log for the month of March 2002. Caseworkers were asked to write down every activity or task—if the activity was case-related, the worker wrote in the case name and the time it took to complete each task. An example of the time log is in Appendix A. After they returned the time logs to us, we summarized how each caseworker spent his or her time and how much was spent on each case. The summary for how each of the 26 caseworkers spent their time is in Appendix B. At the beginning of the test, the sample consisted of 50 caseworkers. Not all of the caseworkers completed their time logs, and some did not complete them accurately enough to use for this audit.

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Four different tests were used to better understand workload demands placed on caseworkers.

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**Focus Group Test.** We organized five focus groups, one in each region, to discuss workload issues. Each focus group consisted of employees from different levels of DCFS. Each group had at least one regional administrator, one supervisor, two caseworkers, and one caseworker assistant. Each focus group gave its perspective on what is working well in the division and areas for improvement. Some of the same topics were brought up in every focus group.

**Office Monitoring Test.** We also monitored three offices in three different regions for a month. The purpose was to look at the detailed operations of the offices. We looked at the resources available for the offices, the organization of the offices, the responsibilities of the employees—the supervisors, the caseworkers, the assistants, etc.—and the “caseload flow” throughout the month. We talked with supervisors to ascertain how the caseload and workload are disseminated to their teams. We frequently contacted employees and attended staff meetings to understand the demands placed on the offices.

Besides the information gathered from these four tests, we interviewed many DCFS employees and gathered a variety of data to help us complete this audit, including organizational charts, caseload, FTE count, and current and historical budget information.

This audit report covers the following: Chapter II describes how caseworkers spent their time. Chapter III addresses what constitutes a reasonable caseload for the three main types of child welfare workers, given the statutory and court monitoring demands imposed on and by DCFS. Chapter IV suggests strategies to DCFS to reduce caseworkers’ workload directly related to the most time consuming caseworker activities described in Chapter II. Chapter V raises some questions of how DCFS allocates the budget to the five regions and describes other regional inconsistencies.

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**This report examines workload issues and presents options to help reduce workload.**

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## Chapter II Caseworkers Allocate Their Time to Multiple Tasks

Documenting casework, visiting children and families, and traveling consume the majority of caseworkers' productive time. About 68 percent of caseworker time is available to work on their assigned caseloads after deducting appropriate time spent in training, on administrative tasks, and on personal leave. Casework involves much more than just visiting children and families. For example, casework also includes court appearances, developing plans for clients and their families, and completing needs assessments, citizen reviews, and much paperwork.

The Child Welfare Legislative Oversight Panel asked the Legislative Auditor's Office to do a workload study of DCFS caseworkers. We asked a sample of caseworkers to complete a time log for the month of March 2002 to determine how caseworkers spend their time, what activities consume most of their time, and what constitutes a reasonable caseload for various types of child welfare workers. We discuss reasonable caseload sizes in Chapter III.

We looked at how a sample of caseworkers spent their time for the month of March 2002. There were 168 working hours in the month, and about 68 percent of the 168 hours was spent doing case-related activities/tasks. The remaining 32 percent of the time was spent on noncase-related activities/tasks, such as administrative meetings, training, vacations, and sick leave.

We examined the three main case types that caseworkers manage. These include the following:

- **Child Protective Services (CPS)** – CPS cases involve allegations that are investigated by caseworkers to ensure the safety and well-being of the child and family.
- **Out-of-Home Care Services** – Out-of-home cases are for children that have been removed from their home and are placed in foster homes, group homes, or residential treatment centers.

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Sixty-eight percent of caseworker time is spent on case-related tasks.

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We examined the three main case types that caseworkers manage: CPS, out-of-home services, and home-based services.

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- **Home-Based Services** – Home-based cases include services provided to families and children in the family home. There are several types of home-based cases, but three primary types of cases are–
  - Protective Services Counseling (PSC) – the family volunteers to receive services
  - Protective Services Supervision (PSS) – the family is court ordered to obtain services
  - Protective Supervision Interstate (PSI) – supervising families that currently live in Utah, but services were initiated in another state

Some caseworkers manage only one case type, some manage two types, and a few caseworkers, especially those in rural areas, manage all three case types.

DCFS caseworkers have other case types to manage. In February 2002 we looked at all the different case types and how many cases of each type the division was handling.



**Figure 2. DCFS Case Types in February 2002.** We audited the main case types which accounted for 66 percent of all cases in February. If the no longer funded or discontinued case types in fiscal year 2003 were removed from the figure, the main case types would account for 73 percent of all cases.

Type of Case	Count of Cases
<b>Audited Case Types:</b>	
Child Protective Services (CPS)	1,555
Out-of-Home (SCF)	2,042
Primary Home-Based Case Types:	
- Protective Services Supervision (PSS)	1,078
- Protective Services Counseling (PSC)	334
- Protective Supervision Interstate (PSI)	82
<b>Total Audited Cases:</b>	<b>5,091</b>
<b>Other Case Types:</b>	
- Children at Risk (CAR) - No longer funded after July 2002	304
- FACT Service (CAS) - No longer funded after July 2002	443
- Clinical Counseling Services (CCS)	115
- Child & Family Assessment (CFA)	10
- Counseling Individual Services (CIS)	155
- Home Study (CSE)	949
- Domestic Violence Services (DVS)	366
- Post Adoption Treatment (PAT)	33
- Project Early Intervention (PEI) - Discontinued after July 2002	8
- Protective Family Preservation (PFP)	117
- Family Reunification (PFR)	29
- Protective Youth Services (PYS) - Transferred to Division of Youth Corrections July 2002	62
<b>Total Other Cases</b>	<b>2,591</b>

The main case types accounted for sixty-six percent of DCFS total caseload in February 2002.

When we looked at the cases within DCFS, we did not include the adoption/guardian families—AAM and GAM cases that require financial assistance—in the above table because the work required for those cases can be misleading. The main responsibility is to ensure that financial forms are completed and updated. Most of these cases are not managed by caseworkers but by caseworker assistants. Appendix C lists all case type definitions.

Also, in February 2002, we looked at how many caseworkers and supervisors were managing all 7,682 cases. The figure below shows 550 caseworkers and the types of cases they manage. We separated the three main case types that we reviewed (CPS, home-based, and out-of-home) from the other types of cases. In Figure 3 we combined home-based and out-of-home caseworkers together because those workers frequently manage both case types.

**Figure 3. DCFS Employees Assigned Cases.** Seventy-nine percent of the caseworkers manage at least one of the three main case types (CPS, home-based, and out-of-home).

Type of Case(s)	Assigned To	
	Caseworker	Supervisor
CPS	102	2
Home-Based and/or Out-of-Home	212	3
CPS / Home-Based and/or Out-of-Home	26	1
<b>Sub-total</b>	<b><u>340</u></b>	<b><u>6</u></b>
CPS/ Other	19	7
Home-Based / Out-of-Home / Other	76	14
CPS / Home-Based / Out-of-Home / Other	2	4
<b>Sub-total</b>	<b><u>97</u></b>	<b><u>25</u></b>
Other	113	5
<b>Grand Total</b>	<b><u>550</u></b>	<b><u>36</u></b>

Seventy nine percent of the caseworkers manage one or more of the three main case types.

Four hundred thirty-seven caseworkers, or 79 percent, are managing one or more of the three main types of cases; 340, or 62 percent, are exclusively managing one or more of the three main case types. One hundred thirteen caseworkers, or 21 percent, are managing other types of cases. It was not in the scope of this audit, however, to do a workload study of the other types of cases.

## How Caseworkers Spend Their Time

Analyzing the activity logs caseworkers completed, we looked at how caseworkers spend their time. As mentioned earlier in the chapter, about 68 percent of caseworker time is available to work on their assigned caseloads. Caseworkers who participated in the time log study were to record every case and non-case task/activity and the length of the time it took to complete each task/activity. We placed each task caseworkers logged into one of two main categories: (1) tasks that were case-related that involved work completed on the caseworker's caseload; and, (2) tasks that were not case-related and work completed on co-worker's caseload. Within these two categories we divided tasks into sub-categories.

We separated the case-related tasks into eight sub-categories as follows:

- **Documentation** – The time caseworkers spent documenting their case work and doing case-related paperwork
- **Visits** – The time that caseworkers spent visiting the client and their families
- **Travel** – The time caseworkers spent traveling for case-related functions, except for court and citizen review travel
- **Communication** – The time that caseworkers spent contacting or being contacted by the client, families, or other parties working with the client and/or families such as a therapist or teacher
- **Other** – Every caseworker logged a few activities or tasks that didn't fit one of the broad categories mentioned above, so we grouped these items together in this category
- **Court** – The time caseworkers spent attending court, preparing for court, and traveling to and from court
- **Staff Case** – The time caseworkers spent discussing their cases with their supervisor and/or other caseworkers
- **Citizen Review** – The time caseworkers spent preparing for, attending, and traveling to and from citizen review boards (applicable to out-of-home cases only)

Besides managing cases, caseworkers have other responsibilities, such as administrative duties, training, staff meetings, etc. When we reviewed the noncase-related tasks, we separated those tasks into six sub-categories:

- **Office** – “Take care of business” tasks, such as staff and other

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Caseworkers' case-related activities include visiting clients and families, documenting activities, court appearances, etc.

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Caseworkers have other responsibilities besides managing cases, such as administrative duties, training and staff meetings.

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administrative meetings, organizing, paperwork that is noncase-related, reading/sending noncase-related e-mails, time sheets, etc.

- **Sick/Other Leave** – Time for sickness or vacation/other leave was grouped together as one category
- **Co-worker Cases** – The time spent helping co-workers on their cases. Even though the work completed for co-workers was case-related, we did not include it in the case-related category because this work does not involve the caseworker's own caseload
- **Training** – Time spent doing training activities or in training sessions
- **Break** – Time for morning and afternoon breaks that caseworkers are allowed
- **Travel** – Time caseworkers spent traveling for non-case activities such as training or administrative meetings

### **We Reviewed Time Spent on Different Caseworker Activities**

After we placed all tasks each worker did for March into one of the above categories, we calculated the percent of time spent per category for each caseworker. We averaged all the caseworkers' time spent for each category together to create an overall average for both CPS caseworkers and out-of-home/home-based caseworkers. We separated the caseworkers into two groups because CPS workers do not spend time on foster care citizen reviews. We kept out-of-home/home-based caseworkers together because, as we stated earlier, it is a common practice for out-of-home caseworkers to also carry home-based cases on their caseload and vice-versa. The results for both groups are shown in the figure below.

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It's common practice for out-of-home caseworkers to also manage home-based cases.

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**Figure 4. CPS, Out-of-Home, and Home-Based Caseworkers' Time Allocation.** We averaged each category to determine how workers spend their time.

Type of Category	Percent per Category		
	CPS	Out-of-Home and Home-Based	Average
<b>Case-related</b>			
Documentation	20%	16%	17%
Visits	14	14	14
Travel	8	12	11
Communication	7	12	10
Other	5	6	6
Court	3	7	5
Staff Case	5	4	5
Citizens Review Board	n/a	1	1
<b>Total</b>	<b>63%</b>	<b>70%</b>	<b>68%</b>
<b>Noncase-related</b>			
Office	13%	14%	13%
Sick/Leave	12	8	9
Co-worker	6	2	4
Training	4	5	5
Break	2	1	1
Travel	1	1	1
<b>Total</b>	<b>37%</b>	<b>30%</b>	<b>32%</b>

Out-of-home and home-based caseworkers' allocation of time is similar to CPS caseworkers.

Of case-related activities, documentation is the most time consuming.

As ranked in Figure 4 above, of the case-related activities, documentation is the most time consuming activity. Visits with child/family are second, and case-related travel is third. Out-of-home and home-based caseworkers' allocation of time is very similar to CPS caseworkers. A detailed summary of Figure 4 is in Appendix B.

Caseworkers are required to do much documentation which involves documenting child/family visits, phone contacts, and other case activities; preparing service plans, assessments, and progress reports; and filling out various forms such as foster care payment forms, social security forms, etc. Later in the report we discuss some possible steps that DCFS can take to help reduce the amount of time caseworkers spend on documentation, visits, and case-related travel.

For out-of-home/home-based caseworkers, time spent for citizen reviews is the least time consuming. (CPS caseworkers don't attend citizen review.) During the audit work, caseworkers complained that they spend a lot of time preparing and attending citizen reviews without receiving much benefit. But the time logs showed that caseworkers spend an average of about two hours per month preparing and attending citizen reviews. When we reviewed the results of the time logs with a few caseworkers, we were told that two hours a month is a lot of time to spend towards something from which caseworkers don't see any benefit.

### **Caseworkers Spend Time on Other Cases Besides Their Current Caseload**

From our sample, we also looked at the status and nature of the cases that workers worked on during the month of March. We learned that caseworkers don't just work on open cases that are assigned to them. Caseworkers also work on co-workers' cases and cases that have been closed. The figure below shows the percent of time caseworkers spent on the different status of cases.

**Figure 5. Case Status.** We looked at the status of the cases that caseworkers managed during the month of March 2002. The percent of time spent on each case status is shown below.

Case Type	Case Status		
	Open Cases	Closed Cases	Co-worker Cases
CPS	77%	9%	14%
Out-of-Home / Home-Based	93	4	3
<b>Overall</b>	<b>87%</b>	<b>6%</b>	<b>7%</b>

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**Out-of-home caseworkers spend an average of about two hours per month preparing and attending citizen reviews.**

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**Caseworkers spend time on co-workers' cases.**

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CPS caseworkers spent more time on closed cases and co-worker cases than out-of-home care or home-based caseworkers did. CPS caseworkers are the first workers assigned to a case after a referral has been reviewed by DCFS intake workers. CPS caseworkers investigate allegations and, with the help of other professionals, determine the child and family's safety and well being. Sometimes other parties involved with a client will call CPS workers to obtain information because they were the initial caseworkers that investigated a case. For example, if a case involves criminal charges, an attorney may call a CPS caseworker to obtain information, or a therapist may call the CPS caseworker to obtain additional information on a client.

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**Caseworkers spend  
time on closed  
cases.**

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Caseworkers that manage all types of cases need to look at closed cases for different reasons. Reviews cause caseworkers to look at closed cases. Each year a sample of cases is reviewed for compliance in accordance with the Milestone Plan. The Office of Services Review (OSR) conducts compliance and qualitative reviews. When OSR conducts these reviews, sometimes closed cases will be selected to be reviewed. Caseworkers have to spend some time on cases that are reviewed by OSR, especially those cases that are examined for the qualitative review.

In addition, there are problems that arise after the cases are closed. Part of the additional work on closed cases may be due to some caseworkers becoming attached to their clients, and even though the cases are closed, they continue to contact them. Other caseworkers see a genuine need in reviewing closed cases. For example, we asked one caseworker why work was done on a particular closed case and the caseworker stated that the client is only one year old, and the step-dad reported (after the case was closed) that the biological mother's whereabouts was unknown. Thus, the caseworker, with others, was trying to help locate the mother. The caseworker further stated that, "I couldn't blow off the case because it was closed; that wouldn't be ethical."

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## **Chapter III**

### **Caseloads of Twelve to Fifteen Appear Reasonable**

We were asked by the Child Welfare Legislative Oversight Panel (CWLOP) to determine what constitutes a reasonable caseload for various types of child welfare workers, given the statutory and court monitoring demands imposed on caseworkers. DCFS officials and the Child Welfare Policy and Practice Group (CWPPG) have stated that Utah has low caseloads compared to other states. It is inaccurate, however, to compare caseloads with other states unless those states have the same workload standards (requirements per case). Of the states that we have contacted, we have learned that workload standards vary and that Utah has higher workload standards.

Rather than comparing caseloads with other states, we determined the reasonable number of cases that caseworkers can manage, given the current workload requirements and practices. We examined the three main case types that caseworkers manage: child protective services (CPS), out-of-home care services, and home-based services including court ordered (PSS) and voluntary (PSC) services. As mentioned in Chapter II, some caseworkers only manage one type of case and others manage two or all three case types. On average, we believe 15 cases is a full load for CPS or home-based cases, and 12 cases is a full load for out-of-home cases. However, average caseloads are affected by staff turnover, required travel, sibling groups, new cases versus cases that have been open for a long time, and other factors.

Our estimates are based on our time log study. We asked a sample of caseworkers from different offices, both urban and rural areas, and from all five regions of DCFS to complete a time log for the month of March 2002. At the beginning of the month, the sample consisted of 50 caseworkers; but, by the end of the month, we were only able to use 26 caseworkers' activity logs for this audit. One caseworker quit, five caseworkers never provided us logs, and 18 caseworkers' time logs were not completed with enough detail. After following up with the caseworkers, we still were not able to use their logs for this audit.

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**CPS and home-based caseworkers can handle 15 cases and out-of-home caseworkers can handle 12 cases.**

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## Caseload Guidelines Are Consistent with DCFS

When we reviewed our findings with DCFS administration, regional administration, and a few caseworkers, they were not surprised that we determined that the reasonable caseloads for a full time caseworker should be between 12 -15, depending on the case type. One region director stated that when caseload sizes are being reviewed, a benchmark of 15 cases is often used to determine a high caseload. When we asked caseworkers' opinion during the audit, they often suggested approximate caseloads of 15 to be able to complete all case requirements within a forty hour work week.

From the caseworkers' time logs, we summarized all the activities that the caseworkers completed for each of their cases and how much time caseworkers spent on each of their cases. We determined that, on average, 68 percent of caseworkers' time goes toward case-related tasks, which includes work on cases that have been closed.

To determine caseload guidelines, we separated cases from the sample where caseworkers had completed all the required tasks; in other words, those cases that had no overdue action items. For those cases with no overdues, we further separated them into the three main case types: CPS, home-based, and out-of-home. Since we had one month's data to rely on, we reviewed each of the opening and, when applicable, closing dates of each of the cases. For CPS cases, we included all general CPS cases that opened by February 28 and were closed by April 1. CPS cases are open on average for 32 days. If we had expanded that time frame, we would have missed time spent working on cases in either or both February and April and wouldn't have been able to determine a reasonable guideline.

The criteria for including out-of-home and home-based cases to determine caseload guidelines is different because those cases are open for longer periods of time than CPS cases. Out-of-home cases are generally open for more than a year and home-based cases are generally open for several months, but less than year. Thus, we included all the out-of-home and home-based cases from the sample that were open the entire month with no overdues. We included those cases that closed after March 20th and those that opened by March 8th to ensure most of the time spent on casework was done during March.

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**Caseworkers spend 68 percent of their time on case-related matters.**

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We also looked at the time spent on cases that were not included to ensure that the cases we did include captured the workload. As expected, those cases with overdues had less time spent on them, per case, than those without overdues due to incomplete casework. We also looked at cases that opened late in the month of March or closed early in March, and again time spent per case was less than the cases selected to determine caseload guidelines.

We determined the average time that each type of case needs in a month to complete all required casework, as Figure 6 below shows. From that information and knowing that caseworkers spend 68 percent of their time on case-related tasks, we determined what constitutes a reasonable number of cases that caseworkers should be managing, also shown in Figure 6 below.

**Figure 6. Caseload Guidelines.** Based on a sample of time logs completed by DCFS caseworkers, we determined the average time needed for the main case types and the reasonable number of cases a caseworker should manage, given the current workload requirements and/or practices.

Type of Case	Average Hours Needed Per Month Per Case	Reasonable Caseloads Per Caseworker
CPS	7.6	15
Out-of-Home	9.1	12
Home-Based	7.4	15

CPS caseworkers have the responsibility of ensuring a child's safety during the investigation process.

**Allotted Time Is Not Much, Given Caseworker Responsibilities.**

CPS caseworkers are charged with the task of ensuring a child's safety during the investigation process as well as providing services to the family. Some of the tasks involved during an investigation are as follows:

- Maintain a well-documented case file
- Attend meetings with and concerning Guardian Ad Litem, administrative hearings, court, shelter hearings, multi-disciplinary meetings, law enforcement, etc.
- Visit with the child, family, and others concerned with the case

- Transport clients to and from shelters, court, hospitals and other health care professionals, etc.
- Set up needed services for families

Upon completion of the CPS investigation, or as instructed by the courts, a caseworker receives a home-based or out-of-home case. The caseworker is required to complete several tasks necessary to manage the case. Some of the tasks involved in running both home-based and out-of-home case include:

- Maintaining a well-documented file and generating the necessary paperwork
- Attending meetings and making court appearances with attorneys, families, schools, therapists, etc., including child and family team meetings, court reviews and termination hearings, etc.
- Visiting at least once a month with home-based clients and twice a month with out-of-home clients
- Transporting clients to and from doctors' appointments and visitations with biological parents and siblings for out-of-home cases
- Setting up needed services for families

We realize that no two cases are alike; some cases are complex and require a significant amount of caseworkers' time while other cases require less time. Despite this limitation, we calculated an average time per case type to provide a benchmark for DCFS.

DCFS supervisors assign incoming cases to caseworkers on their team. Because of the uniqueness of the cases, supervisors use their judgement to balance caseloads for their team. Sometimes caseloads on a team appear unevenly distributed; one worker may have a few more cases than another worker on a team. We have found that when supervisors have assigned fewer cases to a specific caseworker, that worker will either have a difficult case(s), or the worker may be newer and is not yet capable of handling a full caseload. But when caseloads increase above the benchmark that this audit suggests, caseworkers are not able to complete all of the required tasks for each case.

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**As caseloads increase, caseworkers are unable to complete case requirements.**

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## Some Caseworkers Have Higher Caseloads Than Guidelines Recommend

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Fifty percent of sampled caseworkers have higher caseloads than recommended.

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A sample of 26 caseworkers completed time logs for the month of March 2002. At the end of the month, we reviewed the number of cases that each worker was currently managing. Fifty percent, or 13 of those caseworkers, had higher caseloads than guidelines recommend.

Information collected from the sample of caseworkers also shows evidence that as caseloads increase, it becomes impossible to complete all required tasks. DCFS's child welfare database management program (SAFE) keeps a record of required items that have not been completed by the caseworker or other professionals involved in cases.

Case closure is the only item that shows as overdue on SAFE for CPS cases. At the end of March, of the nine CPS caseworkers, two had higher caseloads than the guidelines established by this audit. One of those caseworker had seven overdues; the other had none. The seven workers that had a reasonable caseload all had zero overdues.

Out-of-home and home-based cases have several action items per case that can show as overdue on SAFE. Items such as child/family visits, service plans, etc., can be overdue. It is common practice in DCFS for caseworkers that have out-of-home cases to also carry home-based cases on their caseload and vice-versa. Most of the caseworkers from our sample that had one of these two types of cases also had the other, so we looked at the caseloads for these types together.

At the end of March, 11 of the 17 out-of-home and home-based caseworkers had a higher caseload than the guidelines established by this audit. Those 11 caseworkers had an average of 24 overdues, each at the end of March, while the other five caseworkers with reasonable caseloads had an average of 13 overdues each. There is a trend—as caseloads increase, so do the number of overdues.

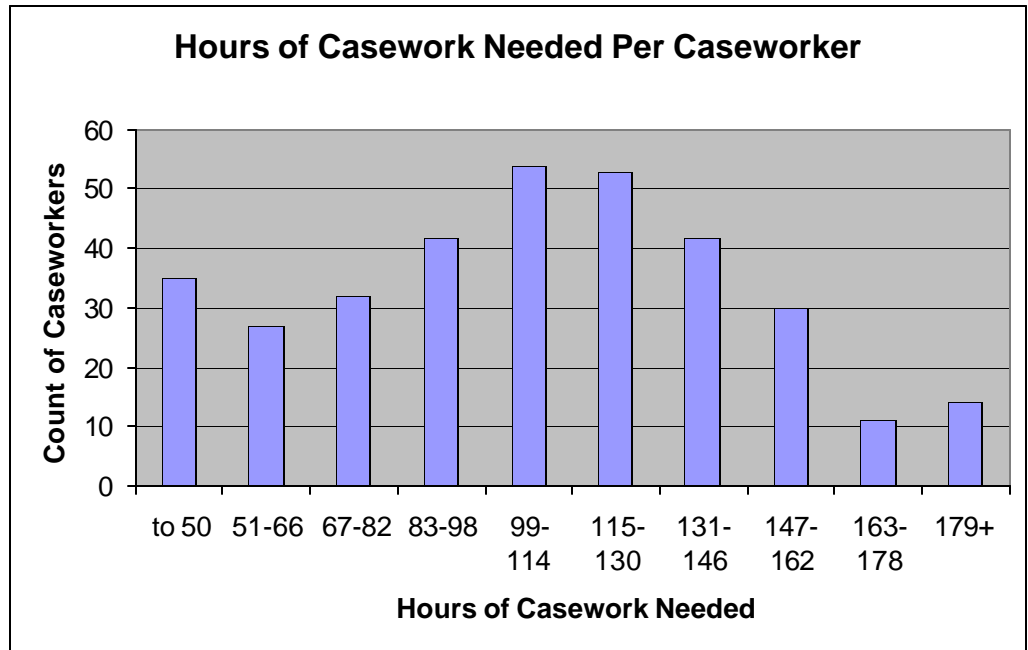
### High Caseloads Are of Concern

Besides reviewing caseloads from the sample, we also looked at all 340 caseworkers in DCFS who only manage the main case types (CPS, out-of-home, and home-based) on a day in February 2002 to determine about how many caseworkers have high caseloads. One hundred and fifty caseworkers, or 44 percent, have a higher number of cases than the

caseload guidelines established in this report. It is concerning to have at least 150 caseworkers with high enough caseloads to require additional hours of work which aren't available.

For the 340 caseworkers, we looked at how many hours of casework are needed in a month, per caseworker, given the caseworker's caseload and current workload requirements. We based the hours needed per case on the average hours stated in Figure 6 of this chapter. Caseworkers have about 114 hours in a month available to do casework, so we are concerned with the 150 caseworkers that need more than 114 hours to complete their casework. Figure 7 shows, for a given point in time, the hours that the 340 caseworkers (who only manage CPS, out-of-home, and home-based cases) need to complete their casework given their caseload.

**Figure 7. Casework Hours Needed.** Approximately 44 percent of the caseworkers have higher caseloads than is manageable.



Forty-four percent of the caseworkers have higher caseloads than is manageable.

New caseworkers should not be assigned a full caseload for the first few months of work.

The figure above shows that 94 caseworkers have less than 83 hours of needed casework for a month. It may appear that the 94 caseworkers are under-worked, while others are over-worked. But we would expect some caseworkers to have less than a full caseload. We didn't analyze all 94 caseworkers' responsibilities to determine why each of them have less than a full caseload, but we know that according to policy new caseworkers should not be assigned a full caseload for the first few months, lead caseworkers should only manage a half caseload so they can assist other

caseworkers, and there are caseworkers that have administrative responsibilities and they only manage a few cases.

We expect some caseworkers would have additional hours of work due to case turnover, unexpected circumstances, etc. We also expect a few caseworkers would have an unusually high caseload due to crisis situations. For example, we learned from one team that all the caseworkers had quit except for two, and all of the team's cases were divided between the two caseworkers. As new workers are hired and trained for the team, these two caseworkers' load should decrease to a more manageable size.

Due to budget constraints, most caseworkers generally are not allowed overtime, and when caseworkers have high caseloads that require additional hours to complete all required tasks with appropriate documentation, they are placed in an impossible situation. Due to pressures of the job, some caseworkers report that they do casework on their own time. DCFS administration report that they encourage all caseworkers to report overtime.

### **Uncompleted Case Items Are Not the Sole Responsibility of the Caseworker**

Some required items are out of the control of the caseworker. Other professionals involved in the case may be responsible for completing case items. During the audit, we spent the month of May 2002 surveying three different teams in DCFS. We wanted to learn how the teams operated, what the teams' resources are, and the demands and challenges placed upon the team.

One aspect that we learned from monitoring the teams is the number of professionals that can be involved in a case. Below is a list of some of the professionals that are frequently involved in cases:

- **Health Care Coordinator/Nurse** – The nurse reviews medical records to ensure clients are getting medical needs met. The nurse

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Due to high workload, some caseworkers report that they do casework on their own time.

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visits clients as needed. The nurse is also a resource for foster parents to address concerns or questions.

- **Medicaid Eligibility Worker** – This worker reviews clients’ files that are medicaid eligible and ensures that all medicaid paperwork is done accurately and timely.
- **Clinical Consultant** – When clients are dealing with critical issues, caseworkers can consult clinical consultants to obtain a professional opinion.
- **Independent Living Specialist** – The specialist helps clients prepare to live on their own after they are released from state custody.

Caseworkers work with these and other professionals, such as medical doctors, dentists, attorneys, school teachers, law enforcement, and mental health professionals, to ensure that clients are getting quality care. Sometimes these other professionals do not complete a task on time. While caseworkers are primarily responsible for a case, as mentioned above, some of the reasons for incomplete required items for a case may be due to other professionals and not the caseworker.

To conclude, caseworkers have a difficult job. Many caseworkers are assigned more cases than they can manage, given the current workload requirements, without working overtime. One apparent solution is to increase the number of caseworkers. But, with recent budget cut-backs, that option is not feasible. In recent years, DCFS has received additional funding to help resolve this problem; however, the problem still exists. Another option that we recommend is that DCFS pursue strategies to reduce workload demands.

DCFS needs to determine which tasks and activities are essential for good casework and eliminate those tasks and activities which aren’t essential. Caseload size should allow the caseworker to spend enough time with families to help them achieve their goals within the time limitations of service. In the following two chapters, we suggest some areas or steps where DCFS can reduce some of the workload.

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**DCFS should reduce workload demands so caseworkers can spend adequate time with their clients and families.**

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## Chapter IV

# Strategies to Reduce Workload

Chapter II described how caseworkers spent their time according to a time log survey. Time spent visiting clients and those associated with client cases, traveling for those visits, and documenting case information are the three most time consuming activities for caseworkers. This chapter suggests three areas state policy-makers should consider to help reduce the high workload of DCFS caseworkers.

First, caseworkers who manage out-of-home cases generally are required to visit the child at least twice per month. The second visit may not be needed and places Utah within a higher standard than other states. Second, a way to reduce the time caseworkers spend traveling to visit clients is to assign a courtesy supervision worker. The courtesy supervision program is an underutilized asset which DCFS should administer in a more formalized manner. Third, the level of documentation required by DCFS frustrates caseworkers because the more paperwork involved in a case, the less time a caseworker can spend providing the social work the children need.

### Visit Policy for Out-of-Home Care Is Too Inflexible

Current DCFS policy requires caseworkers to visit each child in out-of-home care at least two times each month. The time and travel that is required to make these visits greatly contribute to workload. We believe that the visit policy for out-of-home care clients should be more flexible to better accommodate the needs of the children. According to caseworkers and supervisors, not every child in out-of-home care needs two visits a month. Some children need less and other children more. After surveying 10 states, we learned that DCFS requires more visits than any of the other child welfare agencies we contacted. DCFS should consider revising the out-of-home visit policy, which may mean giving caseworkers some flexibility and allowing them to make some judgements so that caseworkers have quality time with children and families to help them achieve their goals.

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**DCFS policy currently requires caseworkers to visit each child in out-of-home care twice a month.**

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Visit policy should be flexible to meet the needs of the children.

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In limited situations, DCFS policy does allow for only one monthly visit for out-of-home care children.

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## Two Monthly Visits Aren't Always Needed

In general, the more times that caseworkers are able to visit children, the more they can help reduce risk to the children and families. While the DCFS policy is to have two visits, some children need more than two visits while others may not. Caseworkers and supervisors indicate that there are circumstances where children do not need a second visit every month.

In limited situations, DCFS policy (shown in Appendix D) does allow for only one required monthly visit. The child welfare manual states that caseworkers must visit each child on their caseload at least **twice per month** except for the following circumstances:

- The child has been with the same family for a minimum of six months in an adoptive placement that has not yet been finalized but a Termination of Parental Rights petition (TPR) has been filed.
- DCFS has custody of the child and the provider or kin has guardianship.
- The child is at the State hospital or other psychiatric hospital placement and the caseworker maintains regular contact with the facility staff on the child's progress.
- The child is in a psychiatric residential treatment facility and the caseworker maintains regular contact with the facility staff on the child's progress.

**More Exceptions Are Needed.** There are additional situations that may warrant a similar exception. For example, children who have been in a stable placement and have proven over time to be in a positive, nurturing environment do not need as much caseworker interaction and may not need the second monthly visit.

One example is a seventeen-year-old girl who has been in DCFS custody for almost one year. The girl is currently in a group home where she receives all the needed services, such as therapy, schooling, and transportation. The supervisor managing the case believes that one visit per month by the caseworker would be sufficient; however, this child does not meet the exception because she is not placed in the State hospital or psychiatric unit. The supervisor is particularly concerned about visiting this child more than necessary because the total travel time to and from the

visit takes ten hours. The supervisor believes that the state pays for this high cost placement to act as the caseworker for this child and sees it as an inefficient use of resources in requiring the second monthly visit.

**The Second Visit Requirement Can Lead to Futile Visits.** There is a particular challenge in making the required visits when a child is placed outside of the caseworker's office boundaries. Some caseworkers can be creative in satisfying the second monthly visit requirement. For example, one caseworker travels once a month on a Friday to visit the clients who reside a considerable distance from the worker's office boundaries. The caseworker stays over the weekend in the area and then visits all of them again on Monday. This type of activity fulfills the two monthly visit requirement, but the arrangement may be discounting the quality of the visits. Unless something has happened with the children over the weekend, the second visit would not be very effective.

### **Visitation Requirements in Utah Are High Compared to Other States**

Utah requires more visits per child than any of the states we surveyed. According to a sample taken of 10 states, none required as many visits per month as the State of Utah. Figure 8 summarizes the results of our survey.

**Figure 8. Minimum Requirements for Visiting Children in Out-of-Home Care in 10 States.** Of the states we investigated, we did not find another state that required two visits per child every month.

State	No More than 90 Days Between Visits	One Visit Each Month	No More than 30 Days Between Visits	Two Visits Each Month
Arizona		X		
Idaho		X		
Illinois		X		
Iowa			X	
Kentucky		X		
Maryland		X		
Nevada		X		
New Mexico			X	
Oregon*			X	
<b>Utah</b>				<b>X</b>
Washington	X			

\* Oregon staff report they plan to change from one visit per month to no more than 30 days between visits in September 2002.

None of the states we surveyed required visiting the children in out-of-home care as often as the State of Utah with two visits per month. Six of the states require one visit per month. The other four states do not base their policy on calendar months but on how many days have elapsed since the prior visit. The policy of no more than 30 days between visits would require more visits than one visit per month, but still the number would be less than Utah’s requirement. The elapsed time policy also prevents workers from bunching visits together merely to satisfy calendar-based requirements.

**DCFS Should Consider Options to Reduce Out-of-Home Care Visit Workload**

In order to reduce caseworkers’ workload, but still ensure quality visits for the children in out-of-home care, we recommend that DCFS revise its

**Utah requires more visits than other states.**

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Options exist to reduce the workload associated with the second visit requirement.

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visitation policy in out-of-home care and consider the following options in regard to the second monthly visit:

- Eliminate the second monthly visit
- Allow caseworkers to request a waiver from their supervisor and/or a regional administrator for each out-of-home child that does not need the second visit
- Allow a professional from the child and family team (e.g. therapist, teacher, etc.) to complete the second monthly visit
- Adopt a visit policy based on length of time since the last child visit (e.g., 30 days), rather than on pre-established time periods

If the division doesn't eliminate the second monthly visit, they should consider either the second or third option above, or implement both the second and third option simultaneously.

By implementing one (or more) of these options, caseworkers can target service resources more efficiently to help high risk, out-of-home care, children who have more needs and to help reduce caseworker's workload, including eliminating some travel time to complete the visits. As shown earlier in this report, case-related travel takes a substantial portion of caseworkers' time. The policy governing visits needs to be modified so that it reflects a realistic standard for caseworkers and still protects the integrity of the casework. From Figure 7 in Chapter III we determined that there are 4,501 hours of needed casework that are not available. By eliminating the second visit, we estimated that those hours of needed casework can be reduced by 1,586 hours or 35 percent.

## **Courtesy Visits Are Underutilized and Need Better Governing Policies**

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Expanding the courtesy supervision program can help reduce workload.

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Courtesy supervision is an underutilized approach to completing visits. If employed statewide, assigning more courtesy supervision could allow regions to reallocate resources for more efficient use. In addition, current policy governing courtesy supervision (shown in Appendix D) is not consistent with actual practice. Finally, the policy is unclear as to the use of the courtesy supervision program.

According to DCFS records, less than 2% of cases (32 out of about 2,000) have been assigned courtesy supervision between regions. In other words, there are 32 children whose primary caseworker works in a

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Many more cases could benefit from the courtesy supervision program.

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different region than the child's placement, and another worker, located closer to that child's placement, has been assigned to make the monthly visits.

During the audit we found several examples that show that more caseworkers throughout the state could benefit from this program. One example is a caseworker in the Eastern region has one child in an out-of-home placement in St. George, in the Southwest region, and one child in an out-of-home placement in Orem in the Western region. Neither of these two placements have a courtesy visit set-up. The caseworker is only able to visit the child in St. George once a month, but the caseworker is usually able to visit the child in Orem twice a month. Both of these placements could benefit from courtesy supervision.

**Courtesy Visits and Other States.** Utah is not unique in providing courtesy visits. We contacted seven other states to learn how they manage cases when caseworkers have to travel long distances to visit clients. Five of the states do have a courtesy visit program, while two of the states do not. Since Utah requires more visits than other states, courtesy supervision can have a great impact here than for some states.

### **Barriers to Courtesy Visits Hinder Workload Reduction**

Several reasons were given as to why courtesy visits have not been extended to all those who could benefit from the program. Some of the reasons are certainly valid, but, overall, the lack of courtesy supervision increases caseworkers' travel time workload, thus reducing the time available to focus on other needed work areas.

**Some Caseworkers Don't Want Courtesy Visits.** Many workers believe that courtesy visits interrupt the continuity of care and risk the integrity of the case. Although assigning courtesy supervision may not be the ideal practice, caseworker time (a scarce DCFS resource) is stretched so thin that some children are not being visited by the primary caseworker. Assigning a courtesy worker to visit a child is better than no visit.

**Regions Refuse Courtesy Supervision Requests.** In some instances, regions believe their own caseloads are too high to help on another region's cases. While the benefit of assigning courtesy supervision is to reduce travel time workload overall, it does so by transferring workload from one area to another. Since the region that provides courtesy supervision gets more work, but no more resources, it may decline

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In order to receive a workload reduction benefit with the courtesy supervision program, several barriers must be removed.

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requests. That make sense for the division as a whole. DCFS should consider including courtesy visits as criteria for allocating resources among the regions. Resources would then be reallocated to accommodate those areas providing numerous courtesy visits.

**Fifty-Mile Rule-of-Thumb.** Some staff report, as a rule-of-thumb if a child is placed within 50 miles of the primary caseworker's office, no courtesy visit will be extended by another office. Taking into consideration that 50 miles of travel each way can take up to two hours, such visitation can significantly limit a caseworker's day.

**No Existing Intra-regional Provisions in Policy.** We found within regions some workers have to travel long distances to the client's placements even though another office is closer to the child. Unfortunately, the courtesy supervision policy only addresses situations when the child is placed in a different region. We are aware that courtesy supervision can and does take place within the regions, but formalized guidelines should be established in policy. Intra-regional courtesy supervision can also reduce travel time and allow caseworkers to use their time more efficiently.

**Approval for Courtesy Supervision Is a Hassle.** Supervisors and caseworkers have complained about the administrative hassle of getting courtesy visits approved. Some caseworkers don't request courtesy visits because past experience has shown that the process takes too long, and there's uncertainty whether the visit will be granted.

### **Courtesy Visit Policy Should Be Clarified and Expanded**

Caseworkers could make better use of courtesy supervision if the policy was updated to reflect current expectations and practices. The section governing courtesy visits is within the division's policy on Intra-State Transfers. However, when a courtesy supervision is requested, the actual case responsibility is not transferred, only the visits. As we discussed the courtesy supervision policy with DCFS staff, we found that some aspects of the policy are outdated or unclear.

**Parts of Policy Are Outdated.** Once a courtesy supervision has been requested and approved, policy sets forth that the receiving office (the office receiving the child’s case as a courtesy supervision) *shall* set the case up as a courtesy supervision (DCFS case type SCS), yet this is not being done. The SCS code has become obsolete and is no longer used.

According to DCFS case management database staff, the use of code SCS was made obsolete in 1999 when the case management program (called SAFE) gave workers the ability to identify their roles in specific cases. As a result, caseworkers are able to enter themselves in as “courtesy supervision” workers. The problem with this is that workers are entering themselves as both “courtesy supervision” workers and “secondary workers.” This inconsistent way of reporting makes generating reliable reports on courtesy supervision difficult. Establishing a consistent method of recording assigned courtesy supervision would help DCFS administration quickly identify how this program is utilized. DCFS would then be able to monitor how and where their resources are allocated and how caseworkers in each office must allocate their time to other caseworkers’ cases.

Policy also states that the office sending the request for courtesy supervision shall send a copy of the current court order and latest court report, case plan documents (which include the Social Summary and Treatment Plan), the Quarterly Progress Summary, and medical forms. In practice, when a sending region requests courtesy supervision from another region, the assistant regional director (ARD) from the receiving region is e-mailed. The e-mail forwards two documents: 1) a Case Transfer Courtesy Supervision Request Form and 2) the Functional Assessment Report. The ARD evaluates the case and, in some cases along with supervisors in the region, determines if the region is able to accept the case. Policy should reflect the actual practice so that caseworkers and administration have the same understanding of what is required to establish a courtesy supervision.

**Parts of Policy Are Unclear.** Some aspects of the courtesy visit policy should be clarified. For example, the policy says that when a need is identified, the sending office shall make a “request,” but the basis by which another office may deny the request isn’t stated. In practice, staff report that regions often refuse to honor courtesy supervision requests.

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Outdated policy limits DCFS administration from obtaining accurate reports on how courtesy supervision is utilized.

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Unclear policy can lead to wasted caseworker resources.

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We also found confusion about whether courtesy supervision may be used for both of a caseworker's required monthly visits to a child. The Office of Services Review (OSR), which monitors policy compliance, states that the two required monthly visits to an out-of-home care child may be made by an assigned courtesy worker. However, this is not in DCFS policy. It is widely believed by DCFS caseworkers, as well as administration, that the primary caseworker must make at least one of those visits. If the DCFS policy board establishes that a courtesy worker may make both visits, the primary caseworker can then allocate his or her time to other responsibilities. This could expand primary caseworker resources. In any event, the confusion should be addressed.

## **DCFS Should Explore Ways to Reduce Documentation Workload**

As discussed earlier in this report, documentation is the caseworkers' most time-consuming activity. Documenting case activity and completing paperwork is a necessary part of social work. Well-documented case files provide a history and record of case progress. Files also track a child's progress and allow for a continuity of care if needed from future caseworkers. However, workers sometimes feel overwhelmed with the amount of paperwork.

The court monitor, who has experience in other states, also expressed concern with the level of documentation required from DCFS caseworkers. According to the 2002 Annual Compliance Report, "observations by The Child Welfare Group staff suggest that the documentation requirements of the Division do seem quite high."

Caseworkers express frustration not only with the amount of paperwork they have, but also because they believe that too many of these reports contain duplicate information. DCFS should reduce the duplication of information on interoffice forms and try to reduce duplication between DCFS and other agency forms. Duplication is wasted effort for already overworked caseworkers. Caseworkers do have options for completing limited documentation while away from the office; however, in order to complete required tasks, caseworkers need additional options available to them.

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**The amount of required documentation is of concern to caseworkers and the court monitor.**

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**Data duplication is a wasted effort.**

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## **Paperwork Demands Frustrate Caseworkers**

An employee satisfaction survey conducted in one region by a local university professor disclosed that although DCFS caseworkers are dissatisfied with their salary, reducing paperwork would be more of a morale booster. The study also found that the “amount and quality of client contact appear to be important to DCFS employees..., are significant contributors to worker satisfaction, and are related to the amount of burnout experienced on the job.” When caseworkers are required to complete a lot of paperwork, their time to spend with clients is reduced. This situation could lead to caseworker burnout and high turnover.

Caseworkers expressed frustration because sometimes they have to enter data twice. With so many requirements on caseworkers, duplicate data entry wastes their valuable time. Caseworkers believe that DCFS should make forms more fluid in passing from one area to the next within DCFS. DCFS should consider doing a study to reveal how much duplication there is among forms. Caseworkers are concerned because they, as well as administration, want more social work, such as engaging more with the families, but system demands—such as federal requirements and the court monitor—have specific paperwork requirements, which cause some data duplication.

Caseworkers would also like the computer database system (SAFE) to be more user friendly. It would help if once they entered something into SAFE that data would appear in all applicable areas instead of caseworkers having to retype the same information. One group of caseworkers suggested linking documents in SAFE so as they complete information on one form another form would be partially completed with the shared data. Retyping information adds to the amount of time it takes to complete paperwork. Another problem caseworkers expressed is that many of the forms on SAFE are not up-to-date with DCFS policy requirements. Another group of caseworkers said that simple changes to SAFE document templates to adjust for changes in policy take too long. DCFS administration agrees with these comments but lack the staff to devote time to implementing these changes.

## DCFS Should Consider Caseworker Ideas to Reduce Paperwork

Several options to reduce paperwork exist. We conducted focus group meetings and learned from caseworkers potential ways to reduce paperwork. However, it was beyond the scope of this audit to evaluate all of these ideas raised by caseworkers. Some of these suggestions mean added costs to the division.

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Caseworkers offer several suggestions to reduce paperwork.

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**Reduce the Number of Forms.** One option is to reduce the number of forms. Reducing the number of forms by either combining them or eliminating the form altogether would reduce the number of times a caseworker would have to enter the same data. Or, as discussed above, link data between forms so caseworkers do not have to re-type basic information. As mentioned above, caseworkers are frustrated by duplication.

**Shorten Forms.** Caseworkers believe that some documents need to be more client-friendly. Families get intimidated by long, cumbersome reports. They say the reports are hard to understand and do not focus on the family's needs and duties. For example, the service plan can be as long as fifteen to twenty pages. Caseworkers say this is too long for families to understand. Families may respond to the report better if it's a more reasonable size.

**Enhance Transcription and E-SAFE Options.** Although DCFS has offered several methods to input data, two of the options—the transcription service and E-SAFE—should be enhanced to allow more than just activity log data entry. Most offices offer a transcription service where caseworkers can call and dictate their activity logs over the telephone. Caseworkers who use this method of input suggested the service be able to accept more than just activity log transcription. It would help the caseworkers if they could also dictate forms, assessments, and reports. The same applies to E-SAFE, which allows activity log entry through the internet. Caseworkers would like to be able to complete other documentation through this format.

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With laptop computers, caseworkers could save time documenting case activities.

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**Provide Laptop Computers.** If caseworkers had laptops, they could also do some of their paperwork while in the field. With a laptop computer, caseworkers would be able to type their notes and other information directly into the computer while interviewing clients and related parties. One caseworker is concerned that a computer may

intimidate a child from talking. However, one caseworker has already purchased a pocket PC to take notes on. The worker types interview notes directly into the computer at the time of the interview then cuts and pastes them into SAFE. The worker has found this method very successful. A laptop computer or pocket PC would provide caseworkers with more flexibility in completing the required documentation.

**Coordinate Forms with Other Agencies.** A way to reduce paperwork is for DCFS to coordinate with other agencies in an attempt to consolidate forms which supply the same information. When a child is removed and placed in a shelter, much of the same information is reproduced on numerous forms given to a number of agencies. For example, DCFS, the shelter, and court each have their own forms which must be completed when a child is removed. Perhaps DCFS could work with the court and the shelters to try to come up with one form which best suits all of their needs.

**Allow Canned Responses as an Option.** Another option is to program SAFE to allow canned responses to common questions. There is a concern that offering caseworkers canned responses in SAFE will foster uniformity. However, if used in line with The Practice Model, canned responses could offer caseworkers pre-formulated responses to common questions. This format would save time for caseworkers. If the goal is to provide detailed documentation, DCFS may want to reduce the number and length of required forms and documentation since time constraints and caseload do not allow caseworkers the luxury of extensive documentation without generating overdue items or working more than 40 hours per week.

## Recommendations

1. We recommend that the Division of Child and Family Services revise its policy on out-of-home care visits, considering the following options:
  - Eliminate the second monthly visit
  - Allow caseworkers to request a waiver from their supervisor and/or a regional administrator for each out-of-home child that does not need the second visit
  - Allow a professional from the child and family (e.g. therapist, teacher, etc.) to complete the second monthly visit

- Adopt a visit policy based on length of time since the last child visit (e.g., 30 days)
2. We recommend that the Division of Child and Family Services consider two changes to the courtesy supervision program:
    - Amend DCFS policy governing courtesy supervision to be separated from the transfers area, as well as clarify vague language to more accurately reflect the intent of the courtesy supervision program
    - Change the courtesy supervision policies to include both inter- and intra-regional courtesy supervision to encourage the most efficient use of caseworker resources
  3. We recommend that the Division of Child and Family Services consider the options suggested in this chapter, as well as their own options, to reduce paperwork, including the following:
    - Reduce the number of forms
    - Shorten forms by making them more succinct
    - Enhance transcription and E-SAFE options
    - Provide laptop computers
    - Coordinate with other agencies to reduce the number of forms which share the same information
    - Allow “canned” responses to common questions

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# Chapter V

## Inconsistencies Throughout DCFS Should Be Addressed

We found many differences and inconsistencies throughout DCFS that division management or legislators should address. Some differences are appropriate because they result from local factors that vary throughout the state. However, other differences may be unintended consequences of inconsistent policies and practices at the division, region, office and caseworker levels. After the turmoil in and rapid growth of DCFS over the past decade and with the desire to progress out of court monitoring, policymakers should consider the topics discussed in this chapter to ensure they reflect a coherent and intended state child welfare policy.

This audit is focused on workload because DCFS staff have not been able to adequately complete their work. As a result, the division remains under court monitoring. Chapter IV addressed some ways that caseworkers' workload might be reduced or completed more efficiently. This chapter focuses on how workload demands and the use of available resources vary throughout the state. Most of the issues discussed here arose from the focus groups we held in each region or from discussions with individual staff. The rest of this chapter addresses the following topics:

- Caseloads vary by region
- Better resource distribution policy is needed
- Practices with ungovernable youth vary throughout state
- Western region's pilot assessment format could be applied statewide to lower priority referrals
- Inconsistent caseworker practices result from policy confusion
- Use of caseworker assistants and interns vary by office

### Caseloads Vary by Region

On a per capita basis, significant caseload differences exist among regions. These differences are primarily due to the number of new cases in each region, but variations in how long cases remain open is also a factor. We discussed some reasons for caseload differences with division staff, but

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**Workload demands and the use of available resources vary throughout DCFS' regions.**

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**There are significant caseload differences among regions.**

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it was beyond the scope of this audit to fully evaluate the causes. While local needs may account for some of the differences that exist, we believe local policies and practices also are a major factor.

Figure 9 shows the average number of cases in each region during fiscal year 2002 per 1,000 children. The average caseloads are calculated based on the number of cases as of the first of each month during the year and are shown on a per 1,000 children basis in order to facilitate comparisons among regions. We show only the three major types of cases to simplify the presentation. However, Appendix E provides additional detail for these and other case types.

**Figure 9. Average Number of Cases per 1,000 Children.** The Eastern region had the most cases, and the Western region had the fewest cases per 1,000 children during fiscal year 2002.

Region	Child Protective Services	Home-Based	Out-of-Home
Eastern	2.8	5.8	6.7
Northern	1.9	2.5	2.1
Salt Lake	2.7	1.9	3.7
Southwest	2.4	1.9	2.1
Western	1.9	1.6	1.6
<b>Total</b>	<b>2.3</b>	<b>2.1</b>	<b>2.8</b>

Eastern region has more CPS, out-of-home, and home-based cases per 1,000 children than any other region.

The information in Figure 9 shows that caseloads vary widely throughout the state. Based on each region’s population of children, the Eastern region stands out as having significantly more cases than other regions, while the Western region has the fewest cases. Also of note is the relatively high out-of-home caseload in the Salt Lake region. Compared to the Northern region, which has the second highest population, Salt Lake has 76 percent more out-of-home cases per capita.

When we asked division staff about the high number of cases in the Eastern region, they speculated that it could be due to the Native American population. Over twelve percent of Eastern region population is Native American while no other region is as high as two percent. DCFS staff report that long foster care placements are more frequent with Native



American children because relinquishment of parental rights is less likely. Thus, a high caseload could result from long cases rather than having many cases.

In an effort to better understand caseload variation among regions, we broke cases into two components: how many cases are initiated and how long they are open. Figure 10 shows the number of new cases assigned during fiscal year 2002 in each region.

**Figure 10. Number of New Cases Assigned per 1,000 Children.** During fiscal year 2002, the Eastern region had the most new cases in each major category.

Region	Child Protective Services	Home-Based	Out-of-Home
Eastern	34.8	7.9	5.7
Northern	24.2	3.3	2.5
Salt Lake	30.5	3.0	2.5
Southwest	27.7	2.8	2.1
Western	17.8	1.8	1.9
<b>Total</b>	<b>26.2</b>	<b>3.0</b>	<b>2.5</b>

Eastern region has more new cases assigned per 1,000 children than any other region.

In general, Figure 10 shows a picture similar to Figure 9. Although the number of CPS cases for Eastern region does not include cases that are investigated through the Ute tribal courts rather than by DCFS, the region still has the most CPS cases. We were not able to find a reasonable explanation for why the number of new cases in Eastern region is so high.

We used the data in the prior two figures to estimate the average length of cases shown in Figure 11. Unless caseload numbers are significantly increasing or decreasing, this is an accurate method of calculating average case length. We examined the monthly caseload and concluded that Figure 11 provides a fair estimate of average case lengths.

**Figure 11. Average Length of Cases in Months.** The Salt Lake region has longer lasting out-of-home care cases than the Northern and Western regions.

Region	Child Protective Services	Home-Based	Out-of-Home
Eastern	1.0	8.8	14.2
Northern	1.0	9.0	10.2
Salt Lake	1.1	7.7	17.4
Southwest	1.0	7.8	12.3
Western	1.3	10.1	10.1
<b>Total</b>	<b>1.1</b>	<b>8.5</b>	<b>13.7</b>

The average case lengths for CPS and home-based cases are longest in the Western region; however, that region has the fewest cases initiated. The different lengths for out-of-home cases are probably more significant. For example, the average out-of-home case lasts over seven months longer in the Salt Lake region than in the Northern region, greatly contributing to caseload. Thus, although Figure 10 shows that Salt Lake region only has slightly more new cases per child than Northern region, the longer case length leads to the 76 percent caseload difference shown in Figure 9. It should be noted that the division staff report case lengths are often driven by judges' decisions rather than the actions of DCFS staff.

In conclusion, caseload and thus workload differences among regions are affected both by the number of new cases initiated and the length of those cases. No doubt many factors contribute to the regional differences that exist; it was beyond the scope of this audit, however, to provide a detailed examination of the causes. However, the remainder of this chapter discusses some factors that may contribute to the inconsistencies we observe, not only at the regional level but at the office and worker levels as well.

### **Better Resource Distribution Policy Needed**

DCFS should develop a method for assessing regional needs and allocating budget resources to meet them. Currently, regional budgets are

On average, out-of-home cases in the Salt Lake region are open longer than any other region.

Caseload and workload are affected by the number of new cases initiated and the length cases are open.

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DCFS discontinued formula-based budgeting when problems arose.

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mostly based on historical spending. According to the division's Milestone Plan, regional budgets will be based on a formula that accounts for needs. However, even partially implementing the formula led to budget difficulties and the formula was abandoned. We examined regional budgets on a per-child, weighted caseload, and formula basis and found a wide disparity among regions in all cases. While change will be difficult, we believe DCFS needs to develop a more well defined and better documented method to allocate resources among regions.

### **Budgeting Is an Important Policy Tool**

Establishing budgets is perhaps the most important and powerful policy tool available to legislators and state level staff. The amount of resources distributed to DCFS regions and offices throughout the state largely determines the level of services that can be provided. While need-based budgeting is desirable, designing and implementing such a system is very difficult.

**Current Budget Allocations Are Largely Historical.** DCFS budget staff told us they do not use a tool for assessing the current needs and allocating resources to the five regions; instead, the available budget is distributed among the regions mostly based on past funding history. After the initial allocation, the division director meets with the regional directors and presents the budget for discussion. We were told that if a regional director disagrees with the allocations, he or she could request changes and explain the reasoning. Then the administration would consider the request and make a final decision. DCFS staff reports they adjust regional budgets based on need, but do not have good documentation to support the justification of the adjustments.

Historical-based budgeting can be an effective technique, but only if prior budgets were appropriate and similar changes are occurring in all regions. Since change throughout Utah is not uniform, the appropriateness of historical budgets is questionable. For example, since 1998 the number of children in the Western region has increased by 17 percent while the number in the Eastern region has decreased by one percent. However, these two regions have continued to receive roughly the same proportion of available resources.

**Need-based Budgeting Contributes to Policy Goals.** The division's Milestone Plan proposed changing to a need-based budget process to

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Historical-based budgeting is not effective when regional changes vary each year throughout the state.

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A seventeen percent increase in children in the Western region did not change budget allocation in comparison to Eastern's region one percent decrease for the same period of time.

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promote good child welfare policy. According to the plan, “Utah is a geographically diverse state. . . . To ensure that each child and family have equal access to needed and appropriate services, budget distribution must account for that diversity.” Therefore, the Milestone Plan reported the adoption of a formula that would shift “regional allocations from an historic budget distribution to one that recognizes needs as expressed by population, poverty, and geographic area.”

DCFS management adopted a budgeting formula based on square miles, child population, children living in poverty, and CPS referrals. A phased implementation was attempted but was abandoned as the division experienced a budget shortfall in 2000. According to a DCFS addendum to the Milestone Plan, “the formula initially designed was faulty and budget difficulties resulted. A new formula will be used in the future to meet this milestone requirement.”

### **Fairness of Regional Budget Allocations Is Unclear**

When the allocation formula was abandoned, the division resumed a historical-based budgeting distribution process with adjustments based on need. Because of the potential inequity of relying on an historical rather than a need-based budget model, we compared regional spending on a per child, caseload, and formula basis. While none of the three methods of comparison is all-inclusive, the apparent spending disparity we found raises concerns about the fairness of current budget allocations. If some regions of the state do not have the budget capacity of others, then they cannot provide the level of services that children and families in the rest of the state receive.

Because the topic of this audit is the workload of caseworkers, this section focuses on the “service delivery” portion of DCFS expenditures. The service delivery budget category includes almost all the caseworkers and other staff needed to deliver local services. Domestic violence, shelter workers, and staff involved with “minor grants” are in separate budget categories, but 90 percent of region staff is paid through the service delivery category. Thus, caseworkers, except those who handle domestic violence cases, are in the service delivery category. However, division staff caution that region accounting practices may not be consistent in classifying service delivery costs. Therefore, although this section just shows service delivery costs, we included all regional expenditure categories in Appendix F.

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**Need-based budgeting takes into account regional population diversity.**

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**The use of historical budgeting can lead to unfair resource distribution.**

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**Regional Spending Varies Widely on a per Child Basis.** As shown in Figure 12, the five regions vary widely in service delivery expenditures per child. For example, the Eastern region spent \$237 per child, almost five times the \$49 per child spent by the Western region. In fact, Eastern region expenditures in this budget category exceed those of the Western region by almost \$400,000 even though it contains only about one-fifth as many children.

**Figure 12. Service Delivery by Region in Fiscal Year 2002.** The Eastern region spends the most and the Western region the least per child.

Region	Service Delivery Expenditures	Number of Children	Service Delivery Cost per Child
Eastern	\$ 7,538,157	31,800	\$ 237
Northern	11,479,152	192,044	60
Salt Lake	21,697,755	286,710	76
Southwest	5,186,495	59,227	88
Western	7,161,192	147,050	49
<b>Total *</b>	<b>\$53,062,752</b>	<b>716,831</b>	<b>\$ 74</b>

\* Excludes state office expenditures.

**Regional Spending Varies on a per Weighted Case Basis.** Another way to compare regional spending is based on their caseloads. There are many different types of cases, some that require a lot of work and some that require little work. Therefore, cases have to be weighted before they can be combined.

Based on our workload study discussed in Chapter II, we gave CPS and home-based cases a weight of one and out-of-home cases a weight of 1.25. These three types of cases make up most of the division's workload, and Figure 13 shows the average number of weighted cases in each region during fiscal year 2002. Spending per weighted case varies significantly. Based on our calculations, the Salt Lake region has the lowest cost per weighted case, and the Eastern region has the highest.

Regional service delivery expenditures per child vary.

**Figure 13. Service Delivery Expenditures Per Weighted Case.**  
Regional expenditures, per weighted caseload, vary widely.

Region	Service Delivery Expenditures	Number of Weighted Cases	Service Delivery per Case
Eastern	\$ 7,538,157	538	\$14,002
Northern	11,479,152	1,348	8,517
Salt Lake	21,697,755	2,642	8,212
Southwest	5,186,495	411	12,614
Western	7,161,192	795	9,008
<b>Total</b>	<b>\$53,062,752</b>	<b>5,734</b>	<b>\$9,253</b>

Service delivery expenditures per weighted case are highest in the Eastern region and lowest in the Salt Lake region.

**Regional Spending Varies from Formula.** We also compared regional spending to the allocation formula DCFS management adopted as part of the Milestone Plan. As mentioned earlier, the formula was abandoned amidst budget difficulties and may not be well designed. However, some staff told us the main problem was not with the formula itself, but implementing it during a year with budget deficits has led to budgets reductions in some areas.

We applied the formula results to actual fiscal year 2002 expenditures to provide another way to compare spending among regions. The formula is based on square miles, child population, children in poverty, and CPS referrals in the regions. Figure 14 shows the difference between actual service delivery expenditures and those expected based on the formula. Using this yardstick, the Southwest region is the most underfunded with only 73 percent of the expected amount while both the Eastern and Salt Lake regions spent more than indicated by the formula.

**Figure 14. Service Delivery Expenditures Differ from Formula.**  
Actual service delivery expenditures differ from those expected from the once used formula.

Region	Actual FY 2002 Service Delivery Expenditures	Service Delivery Expected Cost per Formula	Difference	Actual Amount as Percent
Eastern	\$ 7,538,157	\$ 6,187,536	\$ 1,350,620	122%
Northern	11,479,152	11,980,046	(500,894)	96
Salt Lake	21,697,755	18,703,065	2,994,723	116
Southwest	5,186,495	7,058,226	(1,871,731)	73
Western	7,161,192	9,133,911	(1,972,718)	78
<b>Total</b>	<b>\$53,062,752</b>	<b>\$53,062,752</b>	<b>-0-</b>	<b>100%</b>

Except for the actual expenditure column, all the data in Figure 14 is hypothetical—based on the old formula. Even though two regions spent over 100 percent of the formula amount, the figure doesn’t indicate they had more funding than needed. All of the regions could provide additional valuable services with additional funds. The concept behind the formula was simply to provide a way to distribute the limited funding available.

While this section focused on the service delivery expenditure category, it should be noted that formulas were also developed for other categories. Including other categories significantly changes the results because the Salt Lake region has such high expenditures in the out-of-home and adoption assistance categories (over half the state total in each). Considering all expenditures, only the Salt Lake region spent more than indicated by formula.

To summarize, while there are other ways of comparing regional budgets, the three ways that we used raise concerns about the equity of current historical-based budgets. DCFS staff believe that the annual adjustments they make to prior year budgets do reflect regional needs. However, there is no documentation to account for the decisions that are made. We believe DCFS should work towards developing a clearly documented needs-based approach to distributing resources to regions.

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**DCFS should work toward developing a clearly documented needs-based approach to allocate resources among the regions.**

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## Practices with Ungovernable Youth Vary Throughout the State

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The number of ungovernable youth in DCFS vary by region.

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We found significant differences among regions in the number of ungovernable youth in out-of-home care. These DCFS clients are youth who have “acting out” behavior problems (e.g. runaway, truancy, family disruption issues, etc.), but they are not abused, neglected, or abandoned. They often are referred to the juvenile courts by a school counselor, correction officer, or their parents and end up being placed in a DCFS out-of-home care program, but not by means of a CPS investigation.

According to DCFS administration, these children are placed in DCFS custody by the courts, using a broad definition of the word “dependency” in the *Utah Code*. According to statute, dependency means a child “who is homeless or without proper care through no fault of the child’s parent, guardian, or custodian.” Many ungovernable youth in DCFS custody have parents or guardians who are doing all they can to provide proper care for their child. DCFS administration believe that the division’s mission is to provide services for children who are abused, neglected, and abandoned, and DCFS lacks the capacity, the funding, and the resources to appropriately provide for ungovernable youth.

Some DCFS administrators and caseworkers told us that it can be difficult to find good solutions for ungovernable youth who come directly from the juvenile court system into out-of-home care. The out-of-home care is a long term service program designed to protect youth from abuse and neglect, and provide safety, counseling, and therapy services to help them deal with their situations. But, especially in some regions of the state, DCFS staff claim judges order youth into out-of-home care in DCFS as a punishment.

In the focus groups we held in each DCFS region, we found that some regions identified ungovernable youth cases as a significant part of caseworkers’ workload, but others did not. We tried but were unable to get reliable data from DCFS on how many of these cases there were in each region. Therefore, we surveyed several caseworker teams in each region to estimate what percent of caseworkers’ out-of-home cases are court-ordered ungovernable youth that do not enter the division as a result of a CPS investigation. Figure 15 summarizes our survey results.



**Figure 15. Percent of Ungovernable Cases.** The percent of ungovernable youth vary by region.

	DCFS Regions				
	East	North	Salt Lake	South-west	West
Ungovernable Youth As a Percent of Out-of-Home Care Cases	15%	7%	22%	13%	4%

Salt Lake region has the highest percentage of ungovernable clients.

In the figure above, Salt Lake region has the highest percentage of ungovernable clients, and Western region has the lowest. This inconsistency may help explain the variation in caseloads among regions presented earlier in this chapter.

According to caseworkers, it can be difficult for DCFS to find and maintain foster placements for ungovernable youth which adds to the workload. We have been told that because of their behavioral problems, it is difficult to place ungovernable youth in standard foster homes. They are often placed in structured foster homes, where foster parents have additional training. Structured foster homes are expensive placements.

Staff in some regions report that they have taken steps to help the juvenile court system more appropriately place ungovernable youth. For example, in Northern region, DCFS tries to help judges be aware of some other resources that are available in that region which may be better alternatives for ungovernable youth. But the problem remains unsolved.

### Ungovernable Youth Issues Need Additional Study

Given the magnitude of this issue in some regions additional study is needed. Policy makers need data about how many youth are ordered into DCFS custody, not because of abuse or neglect, but because they are ungovernable. DCFS staff claim some judges assign custody to DCFS as a punishment for rebellious youth, but we did not have time to discuss the issue with judges or to review case files. A study could also address whether the services received by ungovernable youth in out-of-home care are appropriate for their needs.

A study is needed to determine whether DCFS services are appropriate for ungovernable youth.

Unless the Child Welfare Legislative Oversight Panel requests that our office address this issue, we feel DCFS needs to evaluate how judges apply the dependency provision to ungovernable youth. Possible recommendations that could come from the study include:

- Statutory changes to clarify when youth should be placed in DCFS custody because of “dependency”
- Additional efforts by DCFS staff to assist judges to find alternatives to using out-of-home placement as a sanction
- Development of a strategic plan of action by DCFS to provide services tailored to ungovernable youth rather than placing them in the out-of-home care program

Of course, depending on the findings, other recommendations could come from an in-depth study.

## **Western Region’s Pilot Program Can Reduce Workload for Investigations**

DCFS’s Western region has implemented the Child and Family Assessment Program (CFA) as a pilot program. When a referral is accepted into the CFA program, DCFS staff assesses the child and family’s situation to see if services can be provided to help prevent future problems. If the assessment indicates a full CPS investigation is warranted, that option remains open. If not, the assessment reduces workload compared to an investigation because less paperwork is required. DCFS should consider amending the CFA format to fit low priority referrals and extending the program statewide.

### **Staff Report CFA Program Is Helpful**

The Child and Family Assessment Program (CFA) was designed to ensure a child’s safety through family participation while offering services targeting the family’s needs. It allows for a less intrusive look at a family in question. The program started from a complaint by Guardian Ad Litem who believed that all cases should be accepted as investigations (Child Protective Services or CPS) and then closed if necessary. CFAs are designed to provide an assessment even though the referral does not warrant opening the more intense CPS investigation. However, there must be enough concern for the family to justify opening a CFA case.

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**The CFA program should be extended to lower priority referrals statewide.**

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The CFA program is a less intrusive way to provide services to families.

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According to caseworkers, families are more responsive to a CFA as opposed to a CPS investigation. It offers a preventative maintenance program to help families get the help they need before their situation escalates. Caseworkers say that a CFA is less intrusive on families, and there is less paperwork. It is believed that the onset of the CFA program has built up DCFS's reputation for wanting to help families.

According to program administrators, there is not as much rigidity to a CFA as there is to a CPS investigation. Caseworkers are given the ability to be more flexible in their investigation and assessment of CFAs than with CPS investigations. These fundamental ideas behind the program can be implemented to help reduce workload with investigations.

### **CFA Approach Should Be Considered for Low Priority Referrals**

One option that DCFS should consider is to allow caseworkers to approach low priority referrals initially under a CFA format. This less formal approach produces less paperwork and requires less time for the caseworker, but it still provides the option of converting the case into a formal investigation.

**Referrals Are Prioritized at Intake.** When an allegation of child abuse or neglect is received by DCFS, a priority level is assigned. The priority level is assigned based on the risk involved to the child, as determined from information received from the referent. The priority level serves two functions: 1) It determines the time allotted for the intake process and 2) The time allotted for the DCFS CPS worker to make the initial face-to-face contact with the alleged victim.

There are four levels of priority. Priority One is assigned when there is an immediate protection need and a CPS worker must see the child within one hour. When Priority Two is assigned, 24 hours is allowed for initial contact with the child. Priorities Three and Four are less urgent.

In order to qualify for priority three investigations, the following criteria must be met:

- There must be a potential for future harm to the child with no immediate protection needs
- A low risk of loss of physical evidence

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All accepted DCFS referrals are assigned a priority level.

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The caseworker is given three days to visit a child in this situation after intake has assigned the case. An example of a Priority Three investigation is a report that a child is dirty and/or under-fed or the home is unsanitary.

Priority Four investigations are a recent addition to the CPS investigation priority list and require a CPS caseworker to make initial contact with the child within five days of being assigned the case from intake. These investigations are initiated under three scenarios:

- At the request of the courts
- There are allegations of an out-of-home perpetrator and no critical evidence will be lost by delaying a visit
- Another state's agency requests a courtesy investigation (given the circumstances do not warrant a more timely investigation)

An example of a Priority Four investigation is a report of a sex abuse incident that happened a long time ago and the perpetrator is not in the home and has no access to the child.

**DCFS Should Consider Utilizing the CFA Format.** The common element among Priority Three and Four investigations and the current CFA program is that all begin with lower risk referrals. By applying the CFA format to Priority Three and Four investigations, essentially allowing the caseworkers to construct the investigation as needed, workload can be reduced.

With this new approach cases would still be accepted as Priority Three or Four investigations, yet the case initially would be conducted as though it were a CFA. If the evidence dictates as the assessment develops, then the more formal CPS investigation can be opened. This new way of approaching Priority Three and Four investigations fosters a more flexible investigation. Caseworkers will be able to structure an assessment or investigation as needed, not as required (whether needed or not). It aims to reduce workload because less paperwork is required for the CFA format.

By approaching Priority Three and Four investigations as a CFA, the caseworker will be able to use his or her professional skills to assess how to best utilize his or her time while taking into consideration the child's needs. The CFA format will help reduce workload and is not as intrusive to the family as a CPS investigation.

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By applying the CFA format to Priorities Three and Four, workload can be reduced.

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## Policy Confusion Causes Inconsistent Practices

A cause of inconsistent practices at the caseworker level is policy confusion. While collecting information for this year's audit, we found instances of policy misunderstanding reminiscent of last year's audit. For example, we discussed confusion about the courtesy supervision policy in Chapter IV. DCFS is aware of inconsistencies between existing policies and desired practice and is working to update child welfare policies. The division needs to complete its policy revisions as soon as possible because unclear policy and caseworker misunderstanding of policy can create unnecessary work and inefficiencies.

### Policy Misunderstanding Adds to Workload

Unclear policy can create additional workload. For example, Chapter IV discussed some confusion about the DCFS courtesy visit policy. According to the caseworker visit policy, "the caseworker must visit each child...at least twice per month." The confusion occurs when courtesy supervision has been assigned. Primary caseworkers believe that they must continue making one of the visits every month. However, the Office of Services Review (OSR), which monitors compliance, allows the courtesy supervision workers to make both visits. If policy does allow the courtesy workers to make both visits, primary caseworkers are spending their valuable time making visits that have already been assigned to another worker.

DCFS is aware of other differences between written policies and expected practice. For example, the service plan requirements for home-based care monitored by Office of Services Review are different than those required by policy. According to the division newsletter explaining the difference to caseworkers, "In the spring of 1999 . . . the court monitor and DCFS management determined to change the time requirement for home-based services to 30 days . . . Further, they determined to add a question on whether family strengths were considered in developing the service plan." At the time of the newsletter in October 2000, workers were told that the changes would be included when new policy was finalized; however, the policy has still not been changed. It can be very difficult on caseworkers to hold them accountable for practices that are contrary to written policy.

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Unclear policy can  
cause additional  
workload for  
caseworkers.

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We found other examples where caseworker practices differ from policy. For example, in the SAFE program, caseworkers are assigning themselves as both courtesy supervision workers and secondary workers on cases designated as courtesy supervision. Policy does not clearly state whether a caseworker should be set up as a courtesy worker or secondary worker. One administrator said in response to this inconsistency that she wasn't sure if caseworkers understand how to identify themselves in SAFE when assigned as a courtesy worker.

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Last year's audit also addressed the issue of policy misunderstandings.

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**Last Year's Audit Addressed Policy Misunderstanding.** Last year our annual audit of DCFS, Child Welfare Referrals and Cases (Audit Report 2001-08) discussed the caseworkers' misunderstanding of DCFS policy. Some of the comments made by caseworkers which reflect a misunderstanding of policy from last year's audit are as follows:

- I don't know what the out-of-placement form is, or that it needed to be in the file.
- I didn't know I still needed to do a monthly visit if the child is placed in a home more than two hours away.
- I thought that if the child was over 16, it was up to their discretion to visit their parents.

Because these policy misunderstandings contributed to low scores on case process reviews, we recommended that OSR include caseworkers in the review process to give feedback on results and provide a training opportunity.

**DCFS Needs to Complete Policy Rewrite.** The division is aware of the importance of completing its policy revisions and is working to do so. In its January 2002 report to the court, the monitor reported that "most of the policy development supporting the practice model and setting of expectations for its achievement at the worker and supervisory level has not been completed." Our concern is that the delay in completing the policy revisions increases caseworker workload because expectations are not clear.

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DCFS is aware of the importance of completing its policy revisions.

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While DCFS hopes to complete its policy revisions soon, it reports that the delay has had two legitimate causes. First, the practice model design had to be completed first and that took longer than expected. Second, the division's board decided to complete a comprehensive rewrite of all governing policy. To do so, the volunteer citizen board sought input

from many community partners including its advisory boards, child welfare advocates, and others. Hopefully, policy will be completed soon and supported by clear procedures that give clear guidance to staff about casework expectations.

## **The Use of Caseworker Assistants And Interns Varies Statewide**

In our visits to DCFS offices and our discussions with staff, we found that some offices seem to make a greater use of caseworker assistants and interns than others. DCFS may be able to make wider use of these resources to help reduce caseworker workload. The role of the caseworker assistant can be defined to help distribute the workload. Interns from local colleges can provide some short-term relief as they develop into long-term assets. DCFS should develop these two areas—caseworker assistants and interns—aiming at reducing caseworker workload.

### **Clarifying Caseworker Assistants' Role Can Help Reduce Workload**

Caseworker assistants can be a valuable resource to help reduce caseworker workload, but caseworkers complain that caseworker assistants' duties need to be clarified. Some tasks that caseworkers complete, assistants should also be able to complete. Situations have arisen where caseworkers need assistance with filing, faxing, etc., but some senior caseworker assistants won't provide support because they believe it's not part of their job description.

We visited many DCFS offices throughout the state. We learned that the ratio of caseworkers and caseworker assistants varies from office to office. In addition, we learned that caseworker assistant responsibilities vary from office to office. Some typical duties include

- Keeping files in order
- Starting new files for new cases
- Answering phones
- Transporting clients
- Processing payment forms
- Supervising visits

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**Caseworker  
assistants and  
interns can help  
reduce caseworker  
workload.**

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Caseworker assistants need to know what is expected.

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Caseworker assistants should cross-train to help all caseworkers as needed.

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It would be better if a comprehensive list of assistant responsibilities was developed so caseworker assistants, as well as caseworkers, know what is expected.

We met with focus groups consisting of regional administration, caseworkers, and caseworker assistants in each of the five regions that make up DCFS. During one of these focus groups, the suggestion was made that caseworker assistants should cross-train. In some offices a caseworker assistant helps CPS caseworkers and another assistant helps out-of-home and home-based caseworkers. But if one assistant is gone, the other assistant may not be familiar with all of the tasks for that office. Cross-training caseworker assistants can help offices function more effectively.

**Caseworkers Need to Utilize Assistants Efficiently.** Assistants can help caseworkers reduce workload and save time by dividing tasks rather than working on them together. For example, a situation occurred during the audit while a caseworker was managing a co-worker's case. The caseworker asked the assistant to travel with the caseworker to pick up an out-of-home client to visit the biological father. The caseworker asked the assistant to go because the caseworker was not familiar with the location of the foster parent or the biological parent and thought it would be less time consuming if the assistant went along. Both the caseworker and the assistant spent over two hours doing the same task. The most efficient use of both of their time would have been to let the assistant go alone to take the out-of-home client for the visit, allowing the caseworker to do other tasks.

### **Interns Can Be a Valuable Resource for DCFS**

A quality intern experience is an investment for DCFS. Intern positions help prepare interns for jobs with DCFS, and a seasoned intern helps reduce workload by helping caseworkers complete tasks. Students generally intern for two semesters, but it depends upon the program. Some degrees don't require an internship. Interns are not paid, but they receive credits that are applied toward their degree.

During the internship, interns can learn the case management database (SAFE), DCFS policy, DCFS organization, the court system, and caseworker responsibilities. At the beginning of an internship, interns shadow a caseworker. If caseworkers take the time to properly mentor

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Interns can be a valuable asset.

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interns, and interns have a good experience with DCFS, they will more likely accept positions with DCFS. Caseworkers may need some training to learn how to mentor interns.

After interns learn the basic procedures, they can be secondary workers and help caseworkers complete case tasks usually during their second semester of placement at DCFS. One intern worked with an assigned caseworker to design the intern's workload to focus on areas that interested the intern. We have learned that interns have helped with documentation, helped file petitions, made case-related phone calls, and interviewed clients. It is important, however, that an intern's work must be supervised by a caseworker.

Interns that later accept positions with DCFS are better prepared for their job. They have already learned basic procedures, are able to take on a full caseload sooner, and help reduce workload pressures of other team members. DCFS should encourage internships to help manage the workload.

## **Recommendations**

1. We recommend that the Division of Child and Family Services develop a well-documented needs-based approach to distributing resources to regions.
2. We recommend that the Division of Child and Family Services study and develop recommendations to address the issue of ungovernable youth placed in their custody.
3. We recommend that the Division of Child and Family Services consider applying the Child and Family Assessment format to low priority referrals.
4. We recommend that the Division of Child and Family Services complete its ongoing policy revisions as soon as possible.
5. We recommend that the Division of Child and Family Services clarify the job description of caseworker assistants to ensure a more efficient and effective use of their time in helping caseworkers with their workload.

6. We recommend that the Division of Child and Family Services expand their intern pool by actively networking with local colleges and universities.

## **Appendices**

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**Agency Response**

September 6, 2002

Wayne L. Welsh, Auditor General

Office of Legislative Auditor General

130 State Capitol

Salt Lake City, Utah 84114-0151

Dear Wayne:

Thank you for the opportunity to meet with you and your staff to review Audit No. 2002-05, "A Performance Audit of Child Welfare Caseworker Workload". We, honestly, appreciate the effort your staff put into the audit with the short timeframe to complete such a study. We believe this audit reflects the impact both the David C settlement and the Performance Milestone Plan has had on caseworker workloads. While caseloads are continually assessed and are regularly measured, workload is more difficult to evaluate. As you know, we have been accumulating information through focus groups and data analysis to uncover the real issues beneath the seeming inability of our system to meet all of the goals that have been set for the division by statute, Federal requirements and the Federal Court Order. This audit lays the groundwork for additional in-depth analyses of the effect of ever increasing requirements and the efforts necessary to perform quality case management and deliver services uniquely fitted to each child and each family.

Overall, we concur with your recommendations. Our studies have concluded similar findings. We will take necessary actions to begin the implementation of the recommendations where we concur and will ask for some time to reassess some of the recommendations. We are responding to all of the "Recommendations" sections of the report and have the following comments to specific recommendations:

#### **Chapter IV - Strategies to Reduce Workload**

**Recommendation No. 1: We recommend that the Division of Child and Family Services revise its policy on out-of-home care visits, considering the following options:**

- **Eliminate the second monthly visit**
- **Allow caseworkers to request a waiver from their supervisor and/or a regional administrator for each out-of-home child that does not need a second visit.**

- **Allow a member of the professional service team (e.g. therapist, teacher, etc.) to complete the second monthly visit**
- **Adopt a visit policy based on length of time since the last child visit (e.g. 30 days).**

Response: This lofty requirement is an example of what Child Welfare in Utah is often about. We have high ideals. Our ideals often become requirements. Then, we find that we do not have the capacity to reach the ideal. We believe that any one who has a child in foster care would prefer to have their child visited a couple of times a month rather than just once. We have attempted to meet this requirement by having some other workload issue decreased in order to allow us to maintain this desired practice. The changes in our practice may be one of the solutions. The practice model that we have been implementing over the past year facilitates the building of a team of family members, community members and professionals that support the family. We believe that the team can assure that the child in care will have visits often enough to keep communication flowing and ensure that they are receiving good care. We do agree that visits to children in foster care should be made, at a minimum, every thirty days. Our reviews show that we are meeting this level of contact with the children in foster care. We will discuss this change with the Court Monitor. The outcome of this negotiation, if successful, would then lead to our presenting to our citizen Board a proposed revision of the policy on visits to children in foster care.

This response provides an opportunity for us to state that we firmly believe that Utah has excellent foster parents and skilled caregivers. This gives us confidence that decreasing visits by the caseworker would not be the issue that it could be if the quality of foster care was not as high as it is.

**Recommendation No. 2: We recommend that the Division of Child and Family Services consider two changes to the courtesy supervision program:**

- **Amend DCFS policy governing courtesy supervision to be separated from the transfers area and set apart into its own area, as well as clarify vague language to more accurately reflect the courtesy supervision program**
- **Re-evaluate the courtesy supervision program to allow both inter- and intra-regional courtesy supervision to ensure the most efficient use of caseworker resources.**

We agree that the policy on courtesy supervision needs to be highlighted in our policy sections and that more clarity can be given. Some of our regions have already developed internal procedures regarding courtesy visits. We will gather both the inter-regional and intra-regional courtesy supervision procedures and processes that are currently effective. The administrative team will then establish statewide procedures and guidelines that balance both the best interests of the child and family while addressing caseworker workload. The courtesy worker picks up additional workload to provide the service, while the initial caseworker continues to work with the family, the court and other entities to prepare for the return of the child to their family. The workload savings would come from travel time. The guidelines must be flexible enough to allow for the best quality of service to the family. We will establish procedures and guidelines that will take all of this into account.

**Recommendation No. 3: We recommend that the Division of Child and Family Services consider the options suggested in this chapter, as well as their own options, to reduce paperwork, including the following:**

- **Reduce the number of forms**
- **Shorten forms and make them more succinct**
- **Enhance transcription and E-SAFE options**
- **Provide laptop computers**
- **Coordinate with other agencies to reduce the number of forms which share the same information**
- **Allow canned responses to common questions.**

Review of these issues is an ongoing process in the division and we will continue to evaluate the necessity of documentation and work to avoid duplication. The costs of programming the SACWIS (SAFE- the division's electronic information system) are high. We have not been able to keep up with the database changes made in practice as part of the Federal Court Order. Each time there is a statute change we use a large amount of the funding available to implement those changes in the system. Funding for computer changes has not been able to keep up with the need to maintain the system and make timely updates or analyses of cost saving recommendations. We are working with ITS to make E-SAFE more workable and will meet with users to obtain their recommendations. We are represented on the Court's CARE (their information system) committee and will continue to work with them to interface our data system to share information and prevent both duplication and unnecessary manual completion and mailing of documents. We are currently in negotiations with the federal entity that funds the state SACWIS systems to increase the rate at which they reimburse the state. We have determined that many of the needed changes are to be considered a new building of the system as opposed to maintenance. New builds receive a greater federal match rate.

The forms that we use are often a requirement of those that either have oversight of our work or who fund our programs. We will continue to reduce the amount of time it takes to provide this information, but much of what we do is in response to requirements that are not set by the Division.

We would not concur with the recommendation to use "canned responses to common questions". We have moved away from such an environment, as it did not match the uniqueness of the individual, the family or the specific services that were required. The depersonalization of the services was apparent. We realize this might save time, but it is not helpful to children and families to have a system that does not reflect the detail of their struggles and the specificity of the services they need.

We will continue to work toward "paperwork" reduction. The requirements on the division from differing entities often create duplication that comes as requirements to the agency. The additional growing oversight of the division during the past several years has created much of the additional administrative workload that is required of caseworkers.

We are currently researching options for inexpensive laptop capability. We have been pilot testing the use of wireless laptops for a few Child Protective Services workers in the Salt Lake Valley Region. As you well know, the budget for computer purchases was drastically reduced. We are still doing the research to see what might work within the funding we have for such resources for our staff. The outlook is hopeful in that we are finding the costs of such tools starting to be within our reach.



## **Chapter V - Inconsistencies Throughout DCFS Should be Addressed**

### **Recommendation No. 1: We recommend that the Division of Child and Family Services develop a well-documented needs-based approach to distributing resources to regions.**

Much of the groundwork to developing needs based budgeting has been accomplished including organizational accountability, better cost and use data, and increased ability to analyze direct and indirect costs. As the audit points out, the division took steps to implement a formula based budget over two fiscal years. However, due to many factors, including existing contracts, regions incurring the highest unit costs were not able to make abrupt changes in the way services were provided. The shift in funding was too quick and regions could not respond either to the large increase in budgets or the sudden cut in funding. Rural resources could not be developed at the same level as available in urban regions. In partnership with our Department, we have developed a model of fiscal accountability – a fiscal certification process. This has promoted close supervision to the regions on budget decisions and accountability. Changes were made to the region budgets during the past two years on a need basis in discussions with state and regional management. We analyze factors creating the differences in regional demographics that contribute to different funding requirements and allocations. The audit points out some of the same apparent seeming inequities as our own analyses have shown. We feel we must consider cultural differences, family structure and expectations, size of families, and other factors in developing equitable means of distributing funding to regions. We will document the process we have established to create equity of distribution while meeting current local needs in the various regions of the state. That documentation can be accomplished in the next two months.

### **Recommendation No. 2: We recommend that the Division of Child and Family Services study and develop recommendations to address the issue of ungovernable youth placed in DCFS.**

We fully concur that this is a dilemma. Several meetings have been held with judges to have them work with us on understanding the problems of being ordered to serve youth that don't seem to fit current services and sometimes, in our opinion, do not need to be in the custody of the State. We will continue to work with the Courts and, if appropriate, we may suggest legislation to address a better way to serve the needs of ungovernable youth.

### **Recommendation No. 3: We recommend that the Division of Child and Family Services consider applying the Child and Family Assessment format to low priority referrals.**

The Child and Family Assessment program was instituted as a pilot project in the Division's Western Region. While there are positive benefits including a less intrusive, more partnering approach with the family, it has been found to be more costly. This approach has brought families into services that would not have been provided services in the past. In reality, the practice changes that we are making across the entire Division provides this kind of approach to families that are identified clearly as needing assistance to stop the neglect or abuse of their children. Regions that had initially wanted to participate in this pilot withdrew their applications as they realized that there was a commitment to more services with no new resources. The Division may not be expanding the pilot in light of the current resource levels, although the approach and philosophy of working with families in this manner is still at the core of Child and Family Services' way of serving families. We will continue to review the approach and determine if there are less costly modifications that will achieve the purpose or if the Division-wide.

**Recommendation No. 4: We recommend that the Division of Child and Family Services complete its ongoing policy revisions as soon as possible.**

We concur that this must happen. The Board of Child and Family Services has set a target to update all Division policy by December 31, 2002. This is also a requirement of the Performance Milestone Plan under the Federal Court Order. The division is currently using up many resources to provide support to the Board in this endeavor.

**Recommendation No. 5: We recommend that the Division of Child and Family Services clarify the job description of caseworker assistants to ensure a more efficient and effective use of their time in helping caseworkers with their workloads.**

While we agree there needs to be some standardization in the job description and expectation of caseworker assistants, we need to review more completely current use of these positions in the regions. Due to the differences in organizational structure and differences in needs from urban to rural regions, a to-consistent standard description may not be appropriate. We will review the programs and determine if a single description or a regional description will be most appropriate. The different programs may also dictate differences in the description. We are in agreement that the more we can focus the work of the caseworker assistants onto sharing the load of the caseworker the better the outcomes will be for those we serve.

**Recommendation No. 6: We recommend that the Division of Child and Family Services expand their intern pool by actively networking with local colleges and universities.**

This will always be a resource to and a part of the workforce in the division. The level at which this resource can be used often depends on the availability of stipends for the students. We are going through a time where the funding for stipends in social work, in child welfare, is being decreased. We have also experienced several cases where after we provide significant training the intern opts to work elsewhere. The large majority of interns in the division are paid positions.

We are in the process of conducting a more in-depth workload review considering specific program areas, urban vs. rural work variations and caseloads composed of different types of cases. We will also measure the impact of workers involved in cases as secondary workers. Your audit has provided us acceleration in the process of studying our workload and increasing efficiency. You have also provided tools and processes upon which we can build. Again, we appreciate the professional attitude of the auditors as they worked with our staff and the skill with which they have drawn conclusions, provided insights and defined such appropriate recommendations.

Sincerely,

Richard J. Anderson  
Director

# Policy #312

## Developing and Implementing Permanency Treatment Plans

### 1. Permanency Service Plans:

- a. A permanency service plan shall be developed for each child in foster care. The plan shall be a contract between DCFS and parents which outlines agreed upon roles, responsibilities and activities.
- b. The plan for the child and family shall be developed and finalized within 45 days after a child's removal from the home or placement in DCFS custody, whichever occurs first. A finalized service plan means all individuals involved with the case have reviewed and signed the service plan.
- c. An interdisciplinary team shall be used to develop each service plan. The interdisciplinary team will include, whenever possible, natural parents, foster parents, guardian ad litem, representatives from mental health, education, and, where appropriate, a representative from law enforcement.
- d. The permanency Service Plan (OH02) includes a permanency goal returning the child to their home, and if applicable, a projected date when the child may be returned to the parents (ASFA 302(C)).
- e. If a child who had been placed home returns to DCFS custody, the reason for return to foster care and the reason for selection of the foster care placement shall be included in the child's service plan. If a new "return home" goal is adopted, the service plan shall specify why.
- f. If the plan is for the child to return home, the plan shall specify what the parents must do in order to enable the child to be returned home using specific expectations and time frames that clearly identify how the expectations may be accomplished and how those requirements will be measured. The time limit for the plan shall be no more than six months. It shall state a beginning and completion date and what the consequences of compliance or non-compliance will be. In addition, the plan must include specific services needed to meet the needs of the child and the foster parents and the appropriateness of the services provided.
- g. The plan shall include specific services needed to reduce the problems that necessitated placement in DCFS custody and who will provide and be responsible for case management.
- h. The service plan shall be individualized to each child and family. As many objectives and activities can be added as are needed to adequately address the problems and needs of the family.
- i. The plan shall include a health care plan for the child as well as a mental health care plan (if appropriate) to address any known or diagnosed health and/or mental health needs of the child. For additional information on health care requirements, refer to Health Care Policy, Section #310 of this manual.
- j. The plan shall include an educational plan for the child to address their educational needs, i.e.: assessments, evaluations, services. Refer to Policy #303, Pre-placement/Placement Activities, for educational requirements and services.
- k. The service plan objectives and activities shall contain specific time frames to help ensure permanence for the child in a timely manner.

- l. If the child is age 16 or older, the plan shall include objectives and methods to assist the youth in learning basic life skills in order to make the transition from foster care to self-sufficiency as per Child Welfare Policy #307.
- m. All parties to the plan, including foster parents, shall sign the service plan. A copy of the service plan shall be provided to the parties signing the plan as well as to the guardian ad litem, attorney general, and the Juvenile court.
- n. Visits: The plan shall have a visitation schedule between the natural parent(s) and the child as well as between the child and his/her siblings. The visitation requirements are as follows:
  - 1) Parental Visits: Children in DCFS custody shall be provided with visits with their parents no less than once a week. Unless otherwise ordered by the court or impossible due to circumstances outside the control of the agency, an initial visit shall be offered within three (3) working days of initial placement. Best practice for children age ten or under, is for the initial visit to occur within three working days of initial placement. If the caseworker believes that such visitation would be contrary to the welfare of the child, the caseworker shall staff the case with the attorney general to pursue whether to seek a juvenile court order mandating less frequent visits. While awaiting a court order on the issue of visitation, less frequent visitation may be provided if, in the exercise of professional judgement and as documented in the case file, weekly visits are determined to be contrary to the health and welfare of the child. Part of the child's service plan shall include the long-term visitation schedule for the child and parents.
  - 2) Sibling Visits: For siblings who have lived together prior to entry into foster care and who have a personal relationship, DCFS shall arrange for visitation at least twice a month, unless the placements are in excess of two hours travel time apart—in which case monthly visits shall be arranged. A family visit that includes all family members can count as a sibling visit. Mandatory sibling visitations need not be arranged if it is not in the best interests of the child(ren) (as documented in the case record). Visitation plans shall take into account the child's age, the child's own wishes and reactions regarding visitation, and the child's permanency plan.
  - 3) Caseworker Visits: Caseworkers must visit each child on their caseload on a regular and frequent basis to evaluate the child's placement, track the child's progress, and most importantly, establish a relationship and link with the child. Specifically, the purpose of the visits are:
    - a. To establish a relationship with the child, listen to the child's view of how the placement is working, evaluate progress on service plan goals, development milestones, and to be aware of any evidence of possible maltreatment.
    - b. To share information with the child about upcoming Foster Care Citizen Review Board and court hearings, and any other relevant information.

- c. To provide an opportunity for the foster family or provider to discuss unmet needs, educational successes, and other concerns regarding the child.

## Developing and Implementing Permanency Treatment Plans

Page 3

### **General Guidelines**

1. The caseworker must visit each child on their caseload at least *twice per month* except that one visit per month will be permitted under the following circumstances:
  1. The child has been with the same family for a minimum of six months in an adoptive placement that has not yet been finalized but a Termination of Parental Rights petition (TPR) has been filed;
  2. DCFS has custody of the child and the provider or kin has guardianship;
  3. The child is at the State Hospital or other psychiatric hospital placement and the caseworker maintains regular contact with the facility staff on the child's progress;
  4. The child is in a psychiatric residential treatment facility and the caseworker maintains regular contact with the facility staff on the child's progress.
2. At least one visit per month must take place at the child's placement.
3. Visits should be more frequent if required by the needs of the child, such as a placement change, change in permanency goal, or loss of visitation rights with the birth parents.

### **Procedure**

1. The caseworker will contact the foster family or provider to schedule a mutually-agreed upon time to visit the child at the placement.
2. At least once per month, the caseworker will meet privately with the child, outside the presence of the foster family or provider staff, to give the child an opportunity to express needs or concerns he/she would be uncomfortable discussing in the presence of the caretaker. The worker must do this in a sensitive manner and should explain this requirement to the foster family or provider so as not to create unnecessary friction for the child.
3. The caseworker must promptly follow-up on the results or findings of the visit to ensure the continued well-being of the child.

### **Documentation**

Caseworkers will document the visit in the SAFE activity recording module as follows:

COFV — Foster Parent Visit

CLFV — Foster Child Foster Home Visit

CLFC — Foster Child Visit

COFT — Foster Parent Telephone

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# Policy #316

## Placements

### 1. Intra-state Placements:

a. **Purpose:** There may be times when it becomes necessary to place a child in another regional office for out-of-home care. The placement should be screened very carefully by the “sending region” to determine if the placement is in the best interest of the child, (i.e., permanency goal to return the child to their own home, needed treatment or services).

### b. Procedures for Intra-state Transfers:

#### 1) Procedures When Both Parent and Child—

- a. Each office shall have a designated person to be responsible for region transfers. It is recommended that a supervisor or assistant director have this responsibility.
- b. The sending region “coordinator” shall contact the receiving region “coordinator” to discuss a placement. If the receiving office agrees to the placement and it is in the best interest of the child and consistent with the case plan, the sending office shall use the following process:
  - i) Complete the Case Transfer Form 843-A. Place a copy in the case record and send the original 843-A, a completed Quality Assurance Form and the case record to the receiving office.
  - ii) The sending office “coordinator” shall sign the transfer form indicating the case file is complete as indicated on the form.
  - iii) Upon receipt of the case file, the receiving office “coordinator” shall check contents of the file, sign-off on the transfer form, and return the copy to the sending office for their records.
  - iv) If the case file is incomplete, the file is to be returned to the sending office. The sending office shall bring the case record into compliance before sending it back to the receiving office.
  - v) The sending office is responsible for payment until the receiving office receives a complete case record. The sending office cannot close the case until the receiving office accepts the case and the court approves transferring the jurisdiction.

#### 2) Procedures For Separate Offices Serving Parents and—

- a. The office that has the court jurisdiction on a case (sending office) is responsible for:
  - i) Maintaining a complete case record;
  - ii) Writing the case plan;
  - iii) Carrying out 6 and 12 month hearings and administrative reviews;
  - iv) Providing the medical card;
  - v) Placement payment;
  - vi) Written quarterly progress summaries;
  - vii) TC monthly activity logs (collection of and entering units on the computer, refer to TCM Policy)

- b. If the sending office identifies a need for courtesy supervision, the supervisor shall request that a caseworker be assigned in the receiving office.
- c. The receiving office shall open the case under the SCS service code. The receiving office shall be responsible for:
  - i) Providing written information to the sending office for quarterly progress summaries, case plans, court reports, etc.;
  - ii) Monitoring the child's placement or providing services to the parents, whichever service was requested by the sending office,
  - iii) Providing support services.
- d. When a child is placed in foster care outside of the sending office, that placement shall be coordinated with the licensing facilitator in the receiving office. In no instance shall placement be made directly by the caseworker with foster parents without going through the licensing facilitator or if not available, the facilitator's supervisor. The sending office is responsible for transporting the child to the placement.
- e. Payment shall not be made unless the sending office follows placement policy. (Refer to Child Welfare Manual, Policy #316 - Intra-state Placements)
- f. The sending office, when requesting courtesy supervision, shall send the following documents to the receiving office:
  - i) Copy of the current court order and latest court report;
  - ii) Copy of the current case plan documents: Social Summary, Treatment Plan, Placement Information Form; Transitional Independent Living Form (youth age 16 or older);
  - iii) Copy of the current Quarterly Progress Summary;
  - iv) Copy of the completed CHEC/EPSTDT Physical form.
- g. When the courtesy supervision is no longer needed, the receiving office shall close their case record and keep the file in their closed files. (Refer to Child Welfare Policy #311, Records)
- h. Legal Risk Placements: If a case has been sent to an adoptions worker and there is still a foster care worker involved, the adoption worker shall open the SCS code to supervise the child and the foster care worker (sending office) shall maintain the SCF code until the termination of parental rights has been completed. The foster care record shall not be closed until a Quality Assurance has been done and the case meets foster care requirements.

**ACS** is a Secondary Worker assigned to a case. The ACS code is used when assigning an adoptive worker who will be providing adoption support services to an already open case. The same worker cannot be the primary and secondary worker.

**SCS** is a Secondary Worker assigned to an already open case. This is used when a region requests courtesy supervision by another region. This code would never be used for an adoption or ICPC case.

**Note:** If Supervision is from another state, the code is **PSI**.