



# Calculating Caseload & Staffing Needs: In-Home Services Redesign in Maryland

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# Why is this important?

- Caseload size may impact:
  - The quality of child welfare services
  - The outcomes of child welfare services
  - The retention of child welfare staff

# What prompted this initiative?

## **Mandate from the Child Welfare Accountability Act of 2006:**

- (A) THE SECRETARY AND THE SECRETARY OF BUDGET AND MANAGEMENT SHALL ENSURE THAT SUFFICIENT NUMBERS OF QUALIFIED CHILD WELFARE STAFF, AS SPECIFIED IN ARTICLE 88A, § 3A OF THE CODE, ARE HIRED AND RETAINED IN ORDER TO ACHIEVE CASELOAD RATIOS IN CHILD WELFARE SERVICES CONSISTENT WITH THE CHILD WELFARE LEAGUE OF AMERICA CASELOAD STANDARDS.
  
- (B) THE DEPARTMENT, IN CONSULTATION WITH AN APPROPRIATE ENTITY WITH EXPERTISE IN CHILD WELFARE SERVICES CASELOAD RATIOS, SHALL DEVELOP A METHODOLOGY TO CALCULATE CASELOAD RATIOS IN CHILD WELFARE SERVICES FOR THE STATE.
  
- (C) THE DEPARTMENT SHALL ENTER INTO A WRITTEN CONTRACT WITH AN ENTITY THAT HAS EXPERTISE IN CHILD WELFARE SERVICES CASELOAD RATIOS TO ANNUALLY REVIEW THE CALCULATION OF CASELOAD RATIOS USED BY THE DEPARTMENT.



# What else prompted this initiative?

- Reasonable caseload sizes in Maryland will support achievement of *Place Matters* goals
  - Interest in having appropriate caseloads in anticipation of finalizing Maryland's Family Centered Practice Model





# PLACE MATTERS

*Nothing Matters More to a Child  
Than a Place to Call Home*



# THE FOCUS

Family

*Children deserve a family*

Safety

*Children need to be safe and protected*

Permanency

*Children need to be with families.*

Well-being

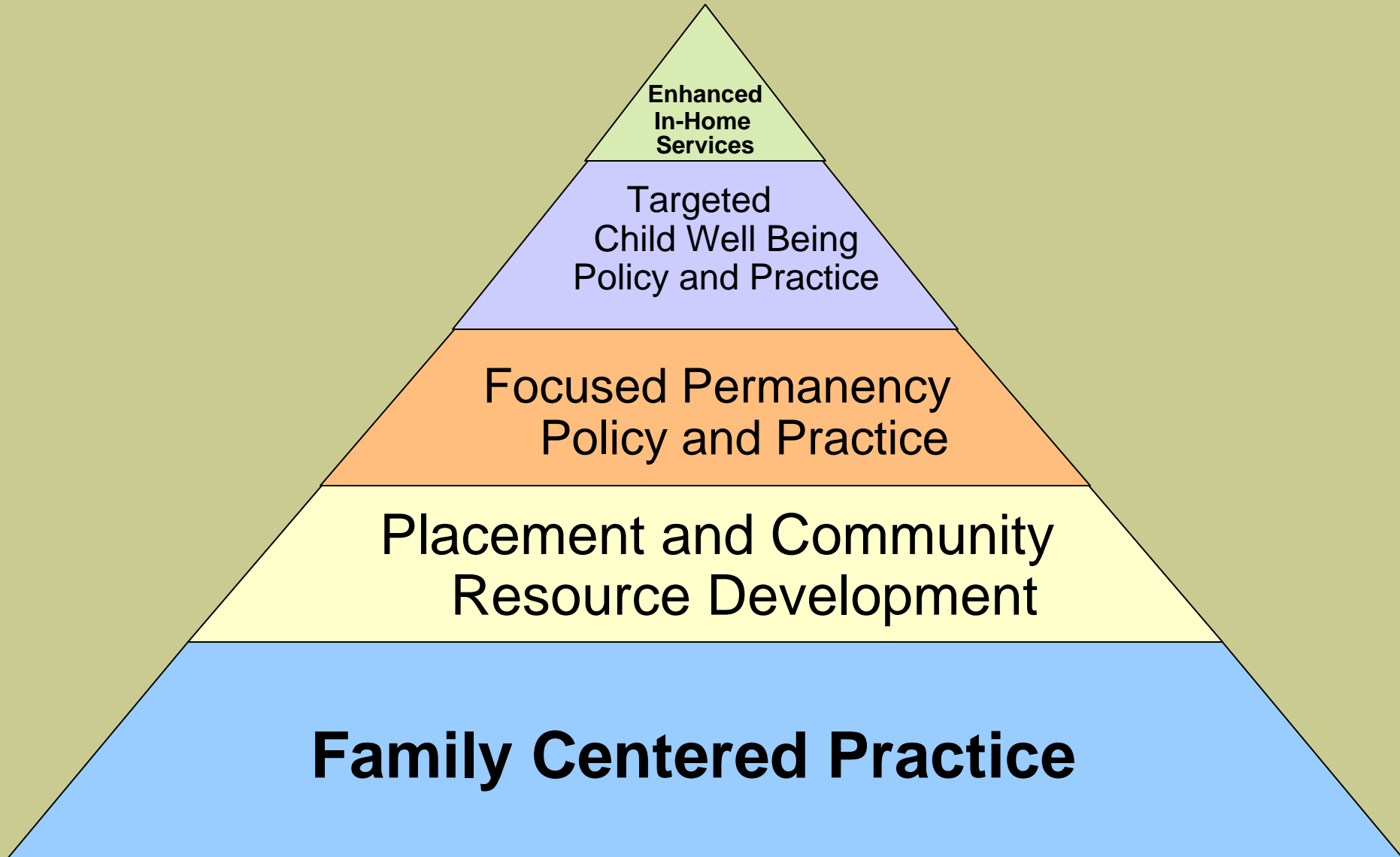
*Children need care, guidance, and support.*



# Place Matters Goals

- Keep children in families first
- Maintain children in their communities
- Reduce reliance on out of home care
- Minimize the length of stay
- Manage with data and redirect resources

# Place Matters Key Elements





# In-Home Services Workgroup

- Objectives:
  - Assessed the feasibility of risk and safety based in-home service delivery
  - Evaluated staffing needs for new system
- Membership
  - SSA program staff
  - LDSS leadership
  - NRC for Child Protective Services
  - University of Maryland School of Social Work



# Approach

1. Defined safety/risk categories
2. Defined levels of service
3. Assigned safety/risk categories to level of service
4. Calculated caseloads
5. Estimated staffing needs
6. Used estimates in budget requests and local staffing allocations



# Maryland SAFE-C

- Description
  - Assessment of 19 safety influences that if present, suggest possible harm now or in the immediate future
  - Leads to an in-home safety plan or decision for out-of-home placement if the plan will not address safety influences with the child at home

# Safety Categories

Level	Description
Unsafe	At least one safety threat identified without a safety plan in place; <ul style="list-style-type: none"><li>• immediate danger in OOH placement,</li><li>• caregiver will not agree to safety plan,</li><li>• danger cannot be addressed with safety plan</li></ul>
Conditionally Safe	At least one safety threat identified with safety plan in place
Safe	No identified safety threats

# Maryland Family Risk Assessment

- Description
  - Assessment of factors that if present, may indicate the likelihood of child maltreatment in the future
  - Assesses five domains: child, caretakers, family, ecological environment, maltreatment

# Risk Categories

Level	Description
High	Extensive negative family conditions and circumstances are present and influencing family functioning
Moderate	Even distribution of positive and negative conditions and circumstances; negative influences are serious
Low	More positive than negative conditions and circumstances; negative influences are low to moderate seriousness
None	Generally positive family conditions and circumstances; negative conditions are low to none

# Levels of Service

Level	Description	Caseload
1 Intensive	Minimum 3 hours face-to-face time per week	1:6
2 Placement Prevention	Minimum 1.5 hours face-to-face time per week	1:12
3 Stabilization	Minimum 1 hour face-to-face per week	1:15

# Assignment to Service Levels

	High Risk	Moderate Risk	Low Risk	No Risk
Unsafe	Level 1			
Conditionally Safe	Level 2		Level 3	
Safe				



# Calculation of Staffing Needs

- Data on risk and safety assessments on all in-home service cases and cases in investigations as of March 08 were classified based on safety and risk ratings
  - Used Maryland CHESSE system and special data request to all 24 jurisdictions to verify entries and ratings
- Cases were classified by 3 levels

# In home Services Analysis

	n	%
Level 1	166	3.8
Level 2	1,975	45.5
Level 3	1,440	33.2
Safe-No risk*	611	14.1
Missing	144	3.3
Total	4,336	100

\*e.g., children/families referred from other systems, e.g., mental health, courts  
(Excluded from child welfare staffing need estimates)

# Investigations at L1 & L2

	n	%
Level 1 & Level 2*	513	26.7
Total	1,919	100

\* High Likelihood of opening for in-home services

# Dealing with Missing Data

Large amount of missing CHESSIE data

- 53% complete in-home data
- 63% complete in investigations data

1. Request for completion improved data

- 85% complete in in-home data
- 87% complete in investigation data

2. Calculated inflation factor based on hand count data to extrapolate from CHESSIE

- Inflation factor ranged from 1.0 to 2.0

# Calculating Staffing Needs

$$\Sigma_{\text{Caseload Ratios}} = \frac{n_{L1}}{6} + \frac{n_{L2}}{12} + \frac{n_{L3}}{15}$$

$$\Sigma_{\text{Service Hours}} = \frac{5.17n_{L1} + 2.58n_{L2} + 2.07n_{L3}}{31}$$

# Calculating Staffing Needs

$$\sum_{\text{Caseload Ratios}} = \frac{n_{L1}}{6} + \frac{n_{L2}}{12} + \frac{n_{L3}}{15}$$

# cases in each level of service

CWLA's # cases per worker for each level of service

$$\sum_{\text{Service Hours}} = \frac{5.17n_{L1} + 2.58n_{L2} + 2.07n_{L3}}{31}$$

# Calculating Staffing Needs

$$\sum_{\text{Caseload Ratios}} = \frac{n_{L1}}{6} + \frac{n_{L2}}{12} + \frac{n_{L3}}{15}$$

# hours of service per week  
for each level of service

$$\sum_{\text{Service Hours}} = \frac{5.17n_{L1} + 2.58n_{L2} + 2.07n_{L3}}{31}$$

Total # intervention hours  
per worker per work week

# Assumptions of Analysis

- Staffing needs are based on the staff needed to serve all cases in 1 month
- Assumes a full month of service – if a jurisdiction needs a partial staff member, calculations were rounded up
- The number of current in-home staff was provided by local departments



# Calculations of Hours Available

- CWLA recommended standards guided the weights for each level
- The number of staff needed to provide the total hours of service needed each week per category assumes that staff have 31 hours per week for client contact/resource management
- 6.2 hours per day for 21 working days per month was used as the standard



# Results

- 341 in-home services workers are needed to provide the level of effort their risk/safety score required
- An additional 62 in-home services workers will be needed to serve incoming investigations

# Estimated Needs vs. Current Staffing

- Maryland needs 403 in-home services workers to provide risk and safety based services by CWLA's caseload ratios
- Maryland has 295.25 in-home services staff – 108 fewer than needed to meet CWLA standards
- Discrepancies in local departments ranged from -8 to 43

# Use of Data to Drive Staffing Decisions

- Maryland Plan to meet CWLA standards via combination of new staff and redeployed staff:
  - 2010 state budget request included a staffing request to increase staff positions to match the need
  - Jurisdictions that appeared to be over-staffed were required to submit hiring exemptions to fill positions resulting in a pool of vacant positions when they were unable to justify replacements
  - As vacant positions started to accumulate (due to over-staffing in some jurisdictions), vacant positions were allocated to jurisdictions with the greatest need

# Limitations

- This was a preliminary effort that could be flawed if workers have inconsistently applied safety and risk assessments within and across jurisdictions
- Evolving implementation of MD-CHESSIE and the need to use hand-count adjustments could have increased error in the calculations

# Future Directions

- Repeat the analysis on a regular basis, refining the calculation as needed
- Use information to inform the need for enhanced safety and risk training
- Begin to compare whether caseload size matched to case type influences any better child safety and permanency outcomes (prevention of placement)



# The Ruth H. Young Center for Families and Children

*Serving Families, Educating Practitioners, Generating Knowledge*



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