

Child Welfare Caseload Management

Third Follow-up Report
February 2009

Office of Performance Evaluations
Idaho Legislature



Report 09-07F

Created in 1994, the Legislative Office of Performance Evaluations operates under the authority of Idaho Code § 67-457 through 67-464.

Its mission is to promote confidence and accountability in state government through professional and independent assessment of state agencies and activities, consistent with legislative intent.

The eight-member, bipartisan Joint Legislative Oversight Committee approves evaluation topics and receives completed reports. Evaluations are conducted by Office of Performance Evaluations staff. The findings, conclusions, and recommendations in the reports do not necessarily reflect the views of the committee or its individual members.

Joint Legislative Oversight Committee

Senate

Elliot Werk, *Co-chair*
John McGee
James C. Hammond
Edgar J. Malepeai

House of Representatives

Clifford R. Bayer *Co-chair*
Maxine T. Bell
Donna Boe
Shirley G. Ringo

Rakesh Mohan, Director
Office of Performance Evaluations

Acknowledgments

We appreciate the cooperation and assistance of Department of Health and Welfare staff. Office of Performance Evaluations staff Hannah Crumrine conducted the follow-up review, and Maureen Shea did the quality control on this project.

Child Welfare Caseload Management

Third Follow-up Report

In February 2005, we released a report evaluating the adequacy of caseload and workload management in the Department of Health and Welfare’s Child Welfare program. This follow-up review concludes that the department continues to make significant progress toward implementing our recommendations to improve caseload tracking and workload monitoring.

Background

As outlined by Idaho statute, the Department of Health and Welfare’s Child Welfare program is responsible for investigating allegations of child abuse or neglect and providing child protection, foster care, and adoption services. In March 2004, due to increasing caseloads and deficiencies identified in a 2003 federal Child and Family Services Review, the Joint Legislative Oversight Committee directed us to conduct a study of caseload management in the Child Welfare program. Our original report made seven recommendations to strengthen Child Welfare program accountability in management and financing.

Current Status

At our last follow-up review in 2007, three of the seven recommendations had been implemented or sufficiently addressed by the department. Since then, the department has taken significant steps to address the remaining recommendations. The department’s assessment of its progress is provided in appendix A.

Caseload

The number of cases workers are assigned in a given time period. Caseloads may be measured for individual workers, all workers assigned a specific type of case, or all workers in a particular office or region.

Workload

The amount of work required to address assigned cases. Measuring workload requires an assessment of (1) the factors that impact the time it takes to work cases, and (2) the time workers spend on activities not directly related to their case responsibilities.

Child Welfare Management

Recommendation 5.1: *To obtain workload information for Child Welfare program staff, the Department of Health and Welfare should*

- *employ an on-going, cost-effective method of measuring the amount of time staff spend on different types of cases and activities in relation to program outcomes;*
- *analyze key factors that impact the time it takes staff to work cases and perform specific tasks; and*
- *work with a steering committee that includes department representatives, and other key stakeholders—such as representatives of the court system, the Office of the Governor, and the Legislature—to develop the methods used for regular collection of workload information.*

In our original study, we found that the Child Welfare program did not have a systematic way to measure workload or estimate staffing needs. We recommended that the department develop an on-going, in-house capacity to collect and measure workload data. In 2006, the department contracted with the American Humane Association (AHA) to perform a workload study in the Child Welfare program. As a result, it acquired a software tool and methodology necessary to perform future in-house workload analysis.¹ Since the AHA study, the department has continued to improve its caseload management through process mapping.

Process mapping
evaluates the steps involved in completing a task and determines what steps can be streamlined to reduce workload

In 2008, the department began process mapping for adoption and permanency-related tasks in each of the state's seven regions. Process mapping allows the department to set benchmarks for workload cost-effectiveness. The department is currently focused on reducing the time spent on adoption and permanency tasks. It has plans to begin process mapping for foster and adoptive home licensing in 2009.

At our last follow-up review, the department anticipated conducting its first in-house workload assessment in mid to late 2009. Due to the current process mapping effort, the department plans delaying the in-house workload assessment to allow ample time for changes to program outcomes. Department officials also state that, considering the current economic condition and budget restraints, the possibility of conducting a workload assessment will be reviewed no earlier than 2012.

¹ The Children's Mental Health program was included in the workload study but has since become part of the Division of Behavioral Health [Executive Order 2006-18].

We recognize the benefit of allowing sufficient time for programmatic changes to take effect before the department conducts future in-house workload assessments. Monitoring staffing needs and performing workload assessments are ongoing processes and should adapt with changes in circumstance. Although Health and Welfare has decided to postpone an in-house workload assessment, it continues to improve systems and processes directly affecting caseload and workload.

Status: If future changes in circumstance result in the need for significant staffing increases, we recommend that the department consider conducting an in-house workload assessment as a means of demonstrating need to the Legislature. This recommendation is **in process**.

Recommendation 5.3: To increase program accountability, the Department of Health and Welfare should annually report accurate caseload and workload information to the Office of the Governor and the Legislature. This information should include

- *average caseloads by case worker type (e.g., risk assessment, case management);*
- *caseload distribution among case workers in each region, such as high and low caseload;*
- *caseload differences among regions;*
- *major workload components for each region, including the number of children in foster care and the number of legal and voluntary cases;*
- *annual statewide summaries of the total number of risk assessment, case management, adoption, and independent living cases;*
- *comparison of caseloads to department caseload standards; and*
- *comparison of program performance measures to key outcomes identified in the department's Program Improvement Plan, which was developed to address issues raised in the federal Child and Family Services Review.*

In 2005, we reported that the department provided limited caseload and workload information to policymakers concerning the Child Welfare program. We recommended increasing program accountability through annual reporting to the Office of the Governor and the Legislature. The Department of Health and Welfare currently collects data through the Family Oriented Community User System (FOCUS) and quarterly caseload surveys. During the 2009 legislative

session, the Department of Health and Welfare released its first report, *Idaho Child Welfare Caseload Report for State Fiscal Year 2008*. The report highlighted most of the information we suggested and was submitted to the Office of the Governor and the Legislature.

Although the current report does not contain information by caseworker type, the number of legal and voluntary cases, or a comparison of actual cases to caseload standards, the report meets the intent of the our recommendation to improve accountability and communication among the department, the Office of the Governor, and the Legislature. The Child Welfare program can continue to increase program accountability in future reports to the Office of the Governor and the Legislature by including more of the information recommended by our report.

Status: This recommendation has been **implemented**.

Child Welfare Financing

Recommendation 6.1: To better access federal Title IV-E funding, the Department of Health and Welfare should continue to work with the Court Improvement Project to improve the state's Title IV-E eligibility rate. This could include expanding training for judges and prosecutors to ensure

- *court orders include language required in federal and state statutes; and*
- *12-month permanency hearings are held in a timely and consistent manner.*

Title IV-E of the Social Security Act provides federal funding to cover a portion of the cost states incur to care for foster children, as well as funds to help administer the program. In 2005, we reported that Idaho was losing Title IV-E funding for foster care children due to inadequate language in court orders and untimely permanency hearings.² In the past year, the department has seen a rise in the eligibility rate for Title IV-E funding. A current Department of Health and Welfare quarterly summary report indicates that 64 percent of Title IV-E applicants qualified for federal funds in December 2008, compared to 53 percent in December 2007.

Several factors may be responsible for the increases in Title IV-E eligibility rates:

² Initial determinations of eligibility for Title IV-E are made when children first enter foster care, and re-determinations of eligibility are made every six months that children remain in foster care. Children can lose eligibility for Title IV-E when they initially enter foster care, at the time of re-determinations, or at 12 months when permanency hearings should be held.

- The department has improved its ability to track reasons for Title IV-E eligibility denial using FOCUS to monitor 12 categories of non-eligibility, including missing required court ordered language and untimely court hearings.
- The department and the Court Improvement Project recently established a Strike Team to track the timeliness of permanency hearings, train new prosecutors, and work with regions or counties where achieving eligibility is problematic.³ The Strike Team consists of representatives from the Department of Health and Welfare, the Supreme Court, the Idaho Prosecutors Association, and the Office of Attorney General.

Status: This recommendation has been **implemented**.

Recommendation 6.2: To assess the workload and resource needs of the Resource Development Unit, the Department of Health and Welfare should

- *determine the appropriate level of technical and other support needed by the unit to ensure timely and accurate eligibility determinations;*
- *assess current workload levels as a result of the increases in the number of children entering foster care; and*
- *conduct a formal analysis to estimate cost savings that could be achieved by adding positions in the Resource Development Unit to increase federal Title IV-E funding.*

The primary task of the Resource Development Unit is to determine Title IV-E eligibility for all foster care applications statewide. Our original report identified the need to potentially increase the size and level of technical and clerical support in the Resource Development Unit. Since our last follow-up review, the automation of the application process has modified the role of Resource Development Unit staff.

Previously, Resource Development Unit staff worked with regions to complete applications for Title IV-E funding. However, in June 2008, the department automated the Title IV-E eligibility determination process. This new automation process requires that regions fully complete each application before it is submitted to the Resource Development Unit for an eligibility determination. Department officials indicate the automation of this process has resulted in

³ The Court Improvement Project began in 1998 following passage of the Adoption and Safe Families Act in the previous year. The project consists of a multidisciplinary approach to dealing with child protection issues and the court

Resource Development Unit staff spending less time on data collection and more time determining eligibility.

Since implementing the automated process, department staff indicate that the Resource Development Unit has cited lighter workloads and no delay in determination of applications or eligibility.⁴ Department staff stated that previous Resource Development Unit workload issues may have stemmed from inefficiencies at the regional level.

Status: This recommendation has been **addressed** through department efforts to automate tasks and reduce workload in the Resource Development Unit.

⁴ Department officials also cite a decrease in foster care placement during fiscal year 2008 as an additional factor contributing to lighter workloads for the Resource Development Unit.

Appendix A

Update of Implementation Efforts



IDAHO DEPARTMENT OF
HEALTH & WELFARE

C.L. "BUTCH" OTTER - GOVERNOR
RICHARD M. ARMSTRONG - DIRECTOR

OFFICE OF THE DIRECTOR
450 W. State Street, 10th Floor
P.O. Box 83720
Boise, ID 83720-0036
PHONE 208-334-5500
FAX 208-334-6558

January 7, 2009

Rakesh Mohan, Director
Office of Performance Evaluations
P.O. Box 83720
Boise, ID 83720-0055

RECEIVED
JAN 12 2009
PERFORMANCE EVALUATIONS

Dear Director Mohan:

The Department is pleased to provide an update on the status of its implementation of the Office of Performance Evaluation (OPE) recommendations reported as "In Progress" or "Not Implemented" at the time of the December 2007 OPE follow-up report. Of the seven original recommendations, OPE has acknowledged recommendations 3.1, 5.2, and 5.4 as "Implemented" or "Addressed."

In the attached report, the Department summarizes actions taken over the last 12 months regarding the other four recommendations. We believe the Department has institutionalized sound practices for effective workload management in the Child Welfare Program and advise that we consider all recommendations "Implemented."

If you have additional questions, please contact Michelle Britton, Administrator, Division of Family and Community Services, at 334-5680.

Sincerely,



RICHARD M. ARMSTRONG
Director

RMA/eb

enc

cc: Wayne Hammon
Amy Castro
Drew Hall
Michelle Britton

Child Welfare Caseload Management

Department of Health and Welfare Response to OPE's Follow-up January 2009

The Department of Health and Welfare is pleased to announce completion of all recommendations from the Office of Performance Evaluation's report on Child Welfare Caseload Management.

This report updates the recommendations reported as "In Progress" or "Not Implemented" in OPE's December 2007 follow-up report. Of the seven original recommendations, OPE has already acknowledged Recommendations 3.1 and 5.2 as "Implemented" and Recommendation 5.4 as "Addressed."

Accordingly, with this response the Department indicates completion of the other four recommendations. In so doing, the Department asserts that it has successfully implemented all seven recommendations.

Recommendation # 5.1:

The Department has completed the three specific tasks related to this recommendation "To obtain workload information for Child Welfare program staff:"

- 1. Employ an on-going, cost-effective method of measuring the amount of time staff spend on different types of cases and activities in relation to program outcomes.*
- 2. Analyze key factors that impact the time it takes staff to work cases and perform specific tasks.*
- 3. Work with a steering committee that includes department representatives and other key stakeholders ... to develop the methods used for regular collection of workload information.*

As OPE's December 2007 report indicates, the Department contracted with the American Humane Association (AHA) to conduct its Workload Assessment in May-June 2006 and considers that assessment's software tools and methodological framework successful in providing "an on-going, cost-effective method of measuring workload." The Department now possesses the necessary infrastructure to conduct future workload assessments and will do so to the extent that staffing and budget constraints allow.

As for the second task of analyzing "key factors that impact the time it takes staff to work cases," the Department will follow OPE suggestions in any future workload studies to:

- a.) Define service categories more precisely;
- b.) Determine which case characteristics should be used for measuring the effect on workload;

- c.) Consider the coding of case characteristics in future workload assessments; and
- d.) Include analysis of supervisory and support staffing needs in future assessments.

The third task of using a steering committee to “develop methods of regular collection of workload information” has also been implemented. The Division formed a steering committee to direct the activities of the workload study conducted in August, 2006. In August 2008, the Department employed a committee to conduct an extensive “process mapping” effort to improve definition of various child welfare tasks and to reduce staff time to perform them. Through December 2008, the Department has completed process mapping for adoption and permanency-related tasks. (See Attachment A of process mapping samples and focus group responses.) Findings from this process mapping project will inform improvements in tasks and activities needed to simplify adoptions and permanency.

The “structured estimation” process used in the AHA Workload Assessment was considered by the OPE consultant to be less than ideal. The consultant recommended developing a reliable ‘standard’ but gave no suggestions about how to develop such a standard. To date, the “structured estimation” methodology is regarded as “state of the art” in such workload studies and was the methodology utilized in four of five studies identified by the Division. Case weighting was used in a fifth study.

The Division has no plan to conduct another workload study within the next two years in the Child Welfare Program. Primary work will be focused to increase performance measures as outlined in the Performance Improvement Plan submitted to federal partners in December 2008 in response to the findings of the most recent Child and Family Services Review. No significant new information will result in a workload study until further process mapping activities and automation improvements are completed.

Recommendation # 5.3:

This recommendation calls for the Department to “annually report accurate caseload and workload information to the Office of the Governor and the Legislature.”

Implementation of this recommendation is evident in the attached Idaho Child Welfare Caseload Report for State Fiscal Year 2008 (Attachment B). This report includes all information deemed as essential by OPE, as organized into the headings of:

1. Trends in Volume of Child Welfare Workload Components
2. Summary of Caseload Changes by Type of Case
3. Summary of Caseload Differences among Regions
4. Allocation of Staff Based on Caseload Data
5. Allocation of Staff Based on Outcome Data
6. Relationship between Program Performance and Program Outcomes

The Department believes that this first annual report fully meets the OPE recommendation. After allowing OPE the opportunity to review this report, the Department will submit it to the Office of the Governor and the Legislature by January 23, 2009, for their review.

Recommendation # 6.1:

This recommendation indicates that Department "should continue to work with the Court Improvement Project (CIP) to improve the state's eligibility rate."

The Department's resounding success in implementing this recommendation is seen both in process measures and the ultimate outcome measure of a marked increase in Title IV-E foster care penetration rate.

The Department has amply documented its collaboration with the CIP in regular reporting of IV-E related judicial problems, constant monitoring of the IV-E penetration rate, and participation in training for judges and prosecutors on the importance of appropriate court language and timely hearings. The CIP has formed a "Strike Team" comprised of representatives from the court, the Office of the Attorney General, the Idaho Prosecutors Association, and the Department to track the timeliness of permanency hearings, ensure appropriate training of new prosecutors, and pursue a "focus group process" to identify counties wherein legal services are problematic. (See Attachment C for sample minutes of Strike Team meetings.)

The Department has previously supplied data showing clear improvement in percentage of appropriate judicial findings as well as a decrease in the number of children found ineligible. The Court system has indicated its confidence in, and use of, the Department's monthly tabulations on eligibility denials which document up to 12 different reasons for denials of eligibility. These monthly tabulations are now automated as the "IV-E Not Eligible Statistical Report," of which a current sample is attached (Attachment D).

More important than success in these process measures has been the marked improvement in the Title IV-E foster care penetration rate. Attached is a graphical depiction of an increase in rates from the mid-50% range at the end of Fiscal 2007 to the mid-60% range for the first half of Fiscal 2009 (Attachment E). The IV-E penetration rate has risen steadily from 53% in the October-December 2007 quarter to 64% in the same quarter for 2008. A number of factors, in addition to the CIP have contributed to the improved penetration rate. (See Attachment F "Factors Affecting IV-E Penetration Trend Positively".)

The Court's collaboration in addressing problematic judicial performance and the recent trend in improving the IV-E foster care penetration rate clearly attest to the Department's full implementation of this recommendation.

Recommendation # 6.2:

This recommendation asks that the Department “assess the workload and resource needs of the Resource Development Unit (RDU) to

- a.) Determine the level of technical and other support needed to assure timely and accurate eligibility determinations;*
- b.) Assess current workload level; and*
- c.) Conduct an analysis to estimate cost savings from adding positions in the RDU.”*

In its assessment of “technical and other support needed to assure timely and accurate eligibility determination,” the Department optimized timeliness and accuracy by automating the IV-E eligibility determination process. The Department added this new functionality to its FOCUS child welfare information system in June 2008.

In this process, regional line staff complete the automated form within FOCUS for an initial or redetermination application and electronically submit it to RDU unit staff. The FOCUS system derives a decision on client IV-E eligibility for review and confirmation by RDU staff. The automated features of this new function require that staff complete all data before submission; FOCUS will not transmit any application with incomplete data to RDU staff. In this way, the automated edits on application submission ensure accuracy and prevent inadvertent delays in eligibility decisions due to missing data.

With the automated eligibility system in place, the Department distributed and provided training in a new Child Welfare Standard on “Foster Care IV-E and Medicaid Eligibility Electronic Submissions.” A copy of this standard is attached, Attachment G). All relevant staff received training in this new standard during the summer of 2008.

The implementation of automated eligibility, now six months in operation, responds fully to the OPE recommendation. With automated edits for completeness and accuracy of eligibility determination, clear reduction in the workload of RDU staff (also due to a decrease in foster care placements), and savings generated by sustained increases in IV-E penetration rates, the Department has implemented this recommendation.

The Department believes it has demonstrated through the institutionalizing of improved infrastructure and performance reports in child welfare, its intention to work through a continuous improvement process to develop its knowledge and skill in workload management. Significant budget constraints during the next 2-3 years will limit the agency somewhat on the tempo of that progress, but clearly, based on caseload and performance data, the Department understands the benefits of workload management.

Office of Performance Evaluations Reports, 2007–Present

Publication numbers ending with “F” are follow-up reports of previous evaluations. Publication numbers ending with three letters are federal mandate reviews—the letters indicate the legislative committee that requested the report.

<u>Pub. #</u>	<u>Report Title</u>	<u>Date Released</u>
07-01	Use of Average Daily Attendance in Public Education Funding	February 2007
07-02	Virtual School Operations	March 2007
07-03F	Higher Education Residency Requirements	July 2007
07-04F	State Substance Abuse Treatment Efforts	July 2007
07-05F	Idaho School for the Deaf and the Blind	July 2007
07-06F	Public Education Technology Initiatives	July 2007
07-07	Health Insurance Coverage in Idaho: A Profile of the Uninsured and Those with Coverage	July 2007
07-08	Options for Expanding Access to Health Care for the Uninsured	July 2007
07-09F	Child Welfare Caseload Management	December 2007
07-10F	Management in the Department of Health and Welfare	December 2007
07-11F	School District Administration and Oversight	December 2007
07-12	Cataloging Public Health Expenditures in Idaho	December 2007
07-13	Estimating Private Health Expenditures in Idaho	December 2007
07-14	Trends in and Drivers of Health Expenditures in Idaho	December 2007
08-01	Governance of Information Technology and Public Safety Communications	March 2008
08-02F	State Substance Abuse Treatment Efforts	March 2008
08-03F	Virtual School Operations	March 2008
09-01	Public Education Funding in Idaho	January 2009
09-02F	Higher Education Residency Requirements	January 2009
09-03	Idaho Transportation Department Performance Audit	January 2009
09-04	Feasibility of School District Services Consolidation	February 2009
09-05F	School District Administration and Oversight	February 2009
09-06F	Use of Average Daily Attendance in Public Education Funding	February 2009
09-07F	Child Welfare Caseload Management	February 2009
09-08F	Public Education Technology Initiatives	February 2009

Desktop published by Margaret Campbell, with assistance from Brekke Wilkinson

Reports are available on our website at www.idaho.gov/ope/
Office of Performance Evaluations • P.O. Box 83720 • Boise, ID 83720-0055
Phone: (208) 334-3880 • Fax: (208) 334-3871