Time Study of DCF Social Work Staff During March 2016 as Requested by the Department of Children and Families' Administration and AFSCME Local 2663
February 28, 2017

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Time Study of DCF Social Work Staff During March 2016 as Requested by the Department of Children and Families' Administration and AFSCME Local 2663

Introduction

The Department of Children and Families Administration (DCF) and AFSCME Local 2663 jointly requested that the Court Monitor's Office conduct a time study during the month of March 2016. The inter-dependency of the caseload/workload of staff and achieving quality outcomes for children and families is an ongoing point of discussion in the ever-changing realm of child welfare services. DCF and the union had explored external entities for conducting the time study review but the costs were prohibitive. The Court Monitor's Office was well positioned to undertake this review given it's familiarity with Connecticut's child welfare system and excellent working relationship with both the Department and the union. The request was also shared with the Honorable Judge Stefan Underhill, and *Juan F*. Plaintiffs. Agreement was reached by all to proceed. Given this was an unbudgeted request and the limited Court Monitor staff resources, there were constraints to the proposed methodology and analysis that were discussed with all parties in respect to this voluntary endeavor. When first proposed, the parties met to discuss the purpose and considerations for the process. It was acknowledged at the outset that this would not be a statistically valid time study, but rather a snapshot or point in time view of the agency. It was well documented that caseloads have been above the Consent Decree standard in several of the last quarterly reports due to increased caseloads and multiple episodes of staffing freezes in recent years. While the staffing issue impacted all operations of the Department the parties settled on exploring only the Ongoing Services and Investigation Units across the state.

The parties reached consensus on the overarching questions posed for the time study. The DCF and AFSCME Local 2663 agreed on the following essential questions as the focus of our study:

Can key DCF policies and federal and state requirements be complied with by a social worker who is at or below the caseload standard within the 40 hour work week, such that children and families are well served and safety is accurately assessed and monitored throughout the life of a case?

Layered onto that consideration, it was asked, that;

If there was flexibility in the scheduling, such that the hours were not only the standard hours of 8:30-4:30 or 9:00-5:00 would that increase the likelihood of the work being accomplished in a 40 hour week?

And lastly;

If the work cannot be accomplished in a 40 hour work week, what is the average number of hours it actually takes to accomplish the tasks required of the average SW at or near caseload capacity?

All Department Staff that participated in the time study process, both focus groups and data collection are deserving of praise for their time and input. Special thanks is extended to those who took part in the formal data collection (n=30). These individuals should be commended for agreeing to take on this responsibility despite the overwhelming workload that already existed

for each of them. They each demonstrated remarkable dedication and professionalism to providing the best case management services for their clients while taking on the considerable additional task of logging their work every 15 minutes during the month. These Social Workers included:

• Scott Ackley

February 2017

- Jennifer Benzie
- Emma J. Brooks
- Sarah Clark
- Georgette Clements
- Rose Cuadrado
- Heather Czerwinski
- Nikki Deluz
- Lisa Fryer
- Anita Groballi
- Meghan Guiliano
- Keith Hazelwood
- Meaghan Hinchey
- Eric Hundley
- Chris Jackle
- Shawnna Jacobs
- Jill Johnson
- Marge Knapik
- John Kuzmech
- Jenniffer Lawlor
- Kathryn Levy
- Pam Lucier
- Angie Nelson
- Manuela Perez
- Pasqualina Polanco
- Rachel Sanborn
- Christina Shackford
- Alison Sroka
- Donna Marie Wallace
- Denita Weber

Summary Findings

- Social Workers cannot comply with all fundamental and key DCF policies and federal and state requirements within the 40 hour work week when they are at or below the current maximum caseload standard¹ such that children and families do not have all needs met or accurately assessed and monitored throughout the life of the case. In spite of diligent work and demonstrated efforts, none were able to achieve fundamental mandates/policies consistently across all cases.
- The quality of the Social Workers' case management and documentation is negatively impacted as caseloads increase. The quantity and quality of work was clearly compromised when caseload levels exceeded a range of 75%-80% of the maximum caseload standard.
- None of the workers in the study could comply with the all of the key DCF policies and state requirements they are responsible for; this even with 40 hours plus significant amounts of paid and/or unpaid overtime (additional 10-20 hours).
- Many workers feel compelled to work unpaid overtime in order to meet the most basic elements of their work including; visits, data entry, court work and case plan development.
- The review of the 30-day time study data along with a review of all of the individual cases in LINK of 12 worker's caseloads, does indicate that flexibility in hours, while not resolving the barriers and issues faced by workload, would assist in meeting some caseload obligations if managed properly.
- It is difficult to ascertain the average number of hours it would take to accomplish all of the required tasks based on the methodology of the review. The study does show that even with 20 hours of overtime all of the fundamental or key DCF policies and state requirements cannot be met by one individual with the current systems in place.

¹ Outcome Measure 18: Caseload Standards

Measure

 By July 1, 2004 the caseload of no DCF social worker shall exceed the following caseload standards, with exceptions for emergency reasons on caseloads, lasting no more than 30 days:

O In-Home treatment workers shall have no more than 15 cases at any time.

Adoption and Adolescent specialty workers shall have no more than 20 cases at any time.

O Social workers with in-home voluntary and interstate compact cases shall have no more than 49 cases at any time.

• Measurement Procedure

 The Monitor shall determine if this outcome has been achieved through LINK daily reports. DCF will report quarterly on the barriers to meeting this measure.

O Investigators shall have no more than 17 investigative cases at any time.

Out-of-Home treatment workers shall have no more than 20 individual children assigned to them at any time. This includes voluntary placements.

O Probate workers shall have no more than 35 cases at any time. When the probate or interstate worker is also assigned to provide services to the family, those families shall be counted as in home treatment cases with a ratio of 1:20 cases.

A worker with a mixed caseload shall not exceed the maximum weighted caseload derived from the caseload standards in A through F above. These standards supersede those of Order No. 441 dated July 29, 2003.

The Monitor shall find that DCF has complied with this outcome measure when DCF has documented this outcome measure in LINK for two (2) consecutive quarters, maintains compliance through exit from this action, and the Monitor has verified compliance with this measure.

- Workers spend much of their work time on tasks that do not involve direct contact with children, families or stakeholders. They include travel time, data entry, court preparation, written communications etc. Table 12 on page 21 as well as the Area Office trend tables beginning on page 29 demonstrate that Social Worker activities are skewed toward tasks that do not focus on direct contact and engagement activities with children, families and providers.
- The current information system is woefully inadequate, as it does not allow DCF staff to do their work in an efficient manner.
- The process for receiving permission for overtime was cumbersome in some regions and inconsistent both within offices and between offices.
- Workers documented minimal breaks, shortened or missed lunches and worked many hours without pay.
- The lack of mobile technology for DCF staff severely limits the productivity and quality of the case record documentation and case management activities.
- The complexity of client issues and practice expectations for the cases that social workers currently have in their caseloads bears very little comparison to the caseloads that existed at the time when the caseload standards were set.
- There are many opportunities outlined by focus group staff, expressed during exit interviews, gleaned from the data and apparent from our shadowing of the Time Study staff to streamline redundant, inefficient and ineffective mandates and procedures.
- Additional staffing for Case Aides, Office Assistants, clinical positions, and foster care staff, would greatly assist social workers in applying best practice standards. Social Workers are currently performing tasks that are not related to providing case management to the family such as: copying, faxing, maintenance of cars, filing, transporting etc.

Methodology

The Time Study methodology included four components. First, there was a series of focus groups including both social worker and social work supervisor groups convened separately in each region to allow frank discussions regarding issues impacting the ability of the staff to comply with key DCF policies and federal requirements both at, and below the caseload standard within the current 40-hour work week. Each region had two groups convened (one for each level work staff.) The meetings were open to all applicable regional staff. They were held in Norwalk, Manchester, New Haven, Meriden, Waterbury and Norwich. This allowed for participation of staff outside of those offices engaging in the Time Study. The total number of participants statewide was 115. Each meeting began with the participants being provided with a short survey. The conversations were guided by an agenda and key questions asked in each forum but allowed for some flexibility to gain regional perspective. Participant feedback was gathered and analyzed for trends and perceptions of staff as it related to work schedules and task activities absorbing the majority of social workers' time.

The larger component of the time study review incorporated 30 Social Worker participants (5 from each of the six regions) completing the task of logging in their daily activities at 15 minute intervals each work day during the entire month beginning with the start of their work day on

March 1, 2016 and ending at the close of business March 31, 2016. Bridgeport, Hartford, Milford, New Britain, Torrington and Willimantic were the offices selected for this study to allow for diversity in geography, demography and provider access. The state recognized one paid holiday during the month of March 2016. For the average full time SW, this month should have resulted in 22 eight hour days, plus one paid holiday. Each worker is paid for two 15 minute breaks, and an hour paid lunch. The expectations for a full-time SW during the month that we conducted the study was that they would have been paid for 184 hours, of which 143 would actually should have been spent in a work activity: 184 (- 8 hours for holiday, - 22 hours for lunch, - 11 hours for break.) Oversight of the Time Study review was directly provided by Court Monitor Ray Mancuso and Reviewer Janice DeBartolo. Communications was very fluid, with weekly visits to the offices to collect and discuss the timesheets conducted each week, supplemented by phone and email correspondence on an as needed basis.

The third component of the review was a more in-depth look at a 12 person subsample of our 30 person Time Study group. This review encompassed an accounting of their work load and narratives across the month to get a more in-depth understanding of the ability of the workers to accomplish the tasks at the case level as required by the Consent Decree, DCF policy mandates, and CT State statutes and regulations. This view allows us to not only look at the time spent on activities, but also gain a snapshot of the quality of those endeavors.

Lastly, we mathematically calculated the total time it would take a social worker to comply with the required tasks across a month.

The key practices that were identified at the outset that workers were required to adhere to by policy included:

Contact Standards (DCF: A Practice Guide to Purposeful Visitation and DCF Case Planning Guide):

In a one month period, a worker is responsible to visit with a child(ren) and parents in an inhome case a minimum of twice monthly unless documented otherwise. Involved parents must be contacted regardless of whether they are living in the home or not. If a child visits regularly in a home of the non-custodial parent that home must also be visited. A child in placement must be visited monthly. During the investigation phase of involvement with a family, contact/visits must comply with the visitation standard. Initial contact must occur within the specified timeframe directed by Careline, and should occur again at mid-point and prior to disposition (dependent upon the length of the investigation). Additional visits are required in all cases if circumstances of the case warrant such increase in oversight. See

 $\frac{http://www.ct.gov/dcf/lib/dcf/policy/best\ practice\ guides/purposeful\ visitation\ practice\ guide.pdf}{http://www.ct.gov/dcf/lib/dcf/policy/pdf/36050000.pdf}$

Case Planning (DCF Policy Chapter 36 and Case Planning Practice Guide)

The Case Planning Practice Guide lays out the requirements for the case plan and ACR process that fulfills federal and Consent Decree mandates for the agency. Beginning at the 45-60 day of the case opening in Ongoing Services and every 180 days thereafter, the Administrative Case Review process is triggered within the automated system to remind workers that the case plan document is required to be updated and approved for official presentation to the family and all

stakeholders at an official meeting with an independent reviewer (CIP cases) or within a less formal case conference (in-home cases) This meeting is the culmination of all of the on-going case planning activities that are to be occurring during home visits and case contacts during which the SW is to be making informal assessments of safety, risk and well-being. Needs and barriers as well as families' strengths are to be identified and planned for during each period under review (PUR) using the Guides' parameters. See: http://www.ct.gov/dcf/cwp/view.asp?a=2639&Q=329064

http://www.ct.gov/dcf/lib/dcf/policy/pdf/Case Planning Practice Guide 11-12-13.pdf

Documentation (DCF Policy 31-8-8)

The Social Worker is to document all case activity within the appropriate LINK sections within 5 working days of occurrence. Placement is to be documented within 24 hours. See http://www.ct.gov/dcf/cwp/view.asp?a=2639&Q=393670

Legal Work (DCF Policy Chapter 46-3 Superior Court for Juvenile Matters)

This encompasses all conferences with legal, required forms and affidavits, social studies for the court related to clients including but not exclusive of protective supervision, 96 hour hold, OTC, neglect petitions, revocations, commitments, termination of parental rights, guardianships, and adoptions. See http://www.ct.gov/dcf/cwp/view.asp?a=2639&Q=395122

Investigations (DCF Policy Chapter 34 highlighting 34-3-5, 34-4, 34.5)²
This includes all Differential Response contacts, assessment and docume

This includes all Differential Response contacts, assessment and documentation beyond the requirements covered under policy specified for the Ongoing Social Worker. Full chapter with emphasis on: http://www.ct.gov/dcf/cwp/view.asp?a=2639&Q=393958 and http://www.ct.gov/dcf/cwp/view.asp?a=2639&Q=393950 and http://www.ct.gov/dcf/cwp/view.asp?a=2639&Q=393962

Family Assessment Response (DCF Policy Chapter 35 and FAR Practice Guide)
This includes all contacts, assessment and documentation specific to the FAR requirements beyond that covered under other policy specified for Ongoing or Investigation Social Workers: http://www.ct.gov/dcf/lib/dcf/policy/pdf/Family_Assessment_Response_Practice_Guide_final.pdf

² The policy identified for Investigations was the official DCF Policy intact at the time of the Time Study. It has since been been sunsetted as of a 3/1/2017 release which incorporated these requirements in 34-1, 34-2, 34-3, the FAR Practice Guide and an Investigations Practice Guide (to be released at a later date.)

Placement (DCF Policy 36-50, 36-55.1-25.12, 36-70 through 36-115: includes among many items such as relative search and Kidpix)

See: http://www.ct.gov/dcf/cwp/view.asp?a=2639&Q=329064 http://www.ct.gov/dcf/cwp/view.asp?a=2639&Q=394354 and http://www.ct.gov/dcf/cwp/view.asp?a=2639&Q=393694

Sibling Visitation (DCF Policy 36-55-7) http://www.ct.gov/dcf/cwp/view.asp?a=269&Q=394366

Permanency Teaming (DCF Policy 36-8) http://www.ct.gov/dcf/lib/dcf/policy/pdf/36-8_-_CF-PT_03042015.pdf

Children's Health Care, Mental Health (DCF Practice Guide: Standards and Practice Regarding the Health Care of Children in DCF's Care)

All areas related to healthcare practices are covered within this extensive practice guide; http://www.ct.gov/dcf/lib/dcf/policy/pdf/HealthCare of Children - Practice Guide.pdf . From the requirement to obtain the MDE, to what expectations are for ongoing well child care both for the child in placement and for the in-home populations served. Medically complex casework and specific concerns of adolescents or mental health and dental are also covered within this Practice Guide.

Education (DCF Policy 45-1 through 45-12)

The need to enroll children timely, maintain children in their schools of nexus, and monitor attendance and progress are all requirements of the social worker. Advocacy as needed. See http://www.ct.gov/dcf/cwp/view.asp?a=2639&Q=378360

Supervision (DCF Policy 31-7-1.2, 31-7-1.4)

This includes the requirement to utilize the expertise of supervisor and management for areas untrained. Could include the PD and utilization of the BHPD or AAG consultation. See: http://www.ct.gov/dcf/cwp/view.asp?a=2639&Q=393638 and http://www.ct.gov/dcf/cwp/view.asp?a=2639&Q=393634

Training (DCF Training Academy Workforce Practice Guide)

All Social Workers are to engage in ongoing training with the training academy to develop their skillset. This is identified in http://www.ct.gov/dcf/lib/dcf/policy/pdf/11-2_TA_PRACTICE_GUIDE.pdf

Focus Groups

Composition of Focus Groups

As stated earlier, the Court Monitor's office conducted 6 focus groups, one in each region. This was done to gain perspective from a wider range of staff that were not able to participate in the formal time study process. The information gained from the focus groups helped inform the data collection study process. For the focus groups, 70 social workers and 45 supervisors volunteered and participated.

Table 1: Regional Participation in Focus Groups						
Region	Social Workers Participating Social Work Supervisors Participation					
Region I	13	8				
Region II	13	9				
Region III	11	6				
Region IV	15	10				
Region V	11	6				
Region VI	7	6				
Statewide	70	45				

Focus Group Feedback

Below is a listing of topics identified by the focus group participants. Please note that there are some similarities that were presented by both groups.

Social Workers Focus Group Topics Identified

- Improvements need to be made to caseload weighting to better/differently account for issues such as separate or multiple households, number of children, difficulty of the work required by the social worker.
- Regardless of our efforts, having caseloads in the top range of the standard compromises the quality of our work.
- Case Plan should be used for everything (court studies/referrals, etc.). This would encourage staff to keep it updated.
- Meetings for families, currently prescribed by policy, are too many, too frequent, and repetitive. There should be one 90 day meeting half way through the planning cycle that meets the need for the majority of routine policy requirements.
- Mandatory trainings are scheduled with no coordination of other meetings or responsibilities of staff.
- SW are performing tasks that are not social work related or role related, for example: clerical tasks such as filing, copying, faxing, and maintenance of cars.
- There continues to be a lack of consistency among the skillset and expectations of managers at all levels in an area office, within the region and statewide.
- Some case decision making that has historically rested with the social worker and supervisors has now moved to a supervisory or managerial level.

- Court wait time is sometimes hours and there is no ability to multitask on site.
- There are not enough cars, difficulty locating and installing car seats, and too much time spent on maintenance of the cars.
- There are insufficient Office Assistants and Social Work Case Aides in most offices.
- Requiring a RRG consult on all transferred cases is an unreasonable policy mandate. It should be based on whether supervisors agree or not, especially in light of the limited RRG staff.
- There is a need for one standard referral form for all providers. The providers can redo the information internally if they need this to accommodate their contracts.
- Travel time can be extensive, sometimes hours (ex: SW in Torrington has to attend a court hearing at the Permanency court located in Middletown) and this is not given appropriate allowance when factoring caseload assignments.
- Providers are not being held accountable for reports/feedback/communication.
- There is a need for mobile technology. The lack of mobile technology undermines the quality and efficiency of case management services.
- There is a lack of consistent information sharing in the offices resulting in uneven practice across units.
- Unpaid work is being done because many social workers feel that the process for overtime is cumbersome.
- Unpaid work is being done by Social Workers in an effort to attempt to meet even the primary elements of the standard case practice.
- Foster and Adoptive Service (FASU) social workers contact with families and providers should and could be counted for some contact standards if they document it within the case record.
- Multiple Central Office mandates/inconsistency of focus on mandates makes for confusion.
- Limits on overtime and the required closing of the offices at a certain time per administration necessitates workers to take work home to finish it (unpaid).
- There is a lack of specialized services.
- There are wait lists for some services.

Social Work Supervisor Focus Group Topics Identified

- Case Plans are no longer the working document they are supposed to be as they are being done so far in advance to accommodate the Administrative Case Review (ACR) and supervisory approval process.
- There is a lack of support resources (RRG/OA/SWCA/FASU).
- There are too many levels for decision making (needs to be a reallocation of some of the decision making back to SWS/SW
- Many supervisors are doing the actual work of their SW due to the vacancy rate (medical leaves, vacations and vacant positions). Leaving less time for actual supervision.
- Too many managers in the agency. Not enough SW/SWS.

- SWS have multiple roles that are time consuming (gatekeepers for programs/trainers/committee work and mentoring) This work is voluntary however the feeling is that it is highly recommended and expected if you want to have upward mobility.
- The Agency should allow for more critical thinking at the SWS level.
- Family Assessment Report cases (FAR) tracking should be decided at the SWS level and the ability to change tracks should be able to switch both ways.
- Providers need to be held accountable for reports, attending meetings, and communications with the Department staff.
- The need for a consistent statewide tickler system for all SWS and SW (This system would track all important due dates according to requirements, i.e. case plans, 90 days meetings, investigation commencement and disposition.
- Mixed caseloads in the unit require the SWS to have a higher degree of expertise (knowing CPS/Mental Health/Probate, Medically complex, High Risk Newborns).
- The human resource process for performance evaluations and progressive discipline is long, complicated and drawn out with little support or outcomes obtained for staff or the agency.
- There is a lack of transportation service especially in outlying areas.
- There is a lack of service providers and waiting lists for services.
- New hires and trainees leave soon after being hired, as the Department assigns far too many cases to them too early in their training. Assigning trainees in one unit is very difficult and some of the training supervisors don't want to be training new staff.
- Number and frequency of the Community of Practice meetings should be reviewed
- One SWS did an unofficial study of his time based on the allocated 160 available hours in a month, the basic tasks which were rated conservatively totaled 260 hours.

At the end of each focus group, all participating staff were asked to complete a short tool which estimated the percentage of time spent completing the following activities that categorized those included in detail on the time study tool:

- 1. Direct contact with clients
- 2. Non-direct but client specific tasks
- 3. Provider Communication
- 4. Administrative/clerical tasks
- 5. Supervision
- 6. Career enhancement/development
- 7. Non-casework activities

Table 2: Comparison of Focus Group Estimates of Time with Sample Findings

The following table provides the average percentages of these activities as reported by the focus groups respondents. This is followed by the final column indicating the % represented by our sample during the Month for that Activity:

There are comparison of 100ms						
Activity	% per Investigation SW Focus Group	% per Ongoing SW Focus Group	% per Sample Findings*			
Non- direct casework tasks	2%	7%	38.8%			
Non-direct contact with clients	36%	45%	21.3%			
Direct Contact with Clients	37%	23%	20.7%			
Provider communication	13%	13%	6.2%			

13%

9%

3%

22%

6%

3%

5.4%

4.5%

3.1%

Administrative/Clerical Tasks

Supervision

Career development

^{*} Percentages calculated on total hours after subtracting lunch/breaks, time out and time spent in time study activities.

Time Study of DCF Social Work Staff During March 2016 as Requested by the Department of Children and Families' Administration and AFSCME Local 2663 February 2017

30-Day Time Study Component

The largest component of this undertaking, the time study review, incorporated 30 Social Worker participants (5 from each of the six regions) completing the task of logging in their daily activities at 15 minute intervals each work day during the entire month beginning (with the start of their work day on March 1, 2016 and ending at the close of business March 31, 2016.) Bridgeport, Hartford, Milford, New Britain, Torrington and Willimantic were the offices selected for this study to allow for diversity in geography, demography and provider access. The state recognized one paid holiday during the month of March 2016. For the average full time SW, this month should have resulted in 22 eight hour days, plus one paid holiday. Each worker is paid for two 15 minute breaks, and an hour paid lunch. The expectations for a full-time SW during the month that we conducted the study was that they would have been paid for 184 hours, of which 143 would actually should have been spent in a work activity: 184 (- 8 hours for holiday, - 22 hours for lunch, - 11 hours for break.) Oversight of the Time Study review was directly provided by Court Monitor Ray Mancuso and Reviewer Janice DeBartolo. Communication was very fluid, with weekly visits to the offices to collect and discuss the timesheets conducted each week, supplemented by phone and email correspondence on an as needed basis.

The 30 voluntary time study participants ranged in years of service from just over a year to 18 years of service. The group included nine Investigation Social Workers, and 21 Ongoing Services Social Workers, several of the Ongoing Services Social Workers were located within specialty areas such as Adolescent, Permanency or Mental Health Units. All were full time, however one participant was participating in the Social Worker Internship Program (SWIP) program. The SWIP time was captured using a category code identified specifically for this purpose, so as not to artificially inflate other categories.

Upon review, post data collection, it was determined that several participants did not credit individual codes exactly as the process was designed to accommodate. This was understandable given the number of codes and the workload demands. Overall, though some issues are noted, the Court Monitor and CM Reviewer who fielded questions and supported the participants felt the social workers coding was of good quality. In all cases, our review of records found the SW often multitasked with much greater frequency than they gave themselves credit for on the coding sheet on any given day. This will be highlighted in our section regarding our findings on caseload's impact on quality and case practice later in this document.

The data collection tool was designed with input from the Department and Union to capture elements of preidentified key practice requirements at 15 minute increments and was capable of adjusting to a 24 hour schedule dependent upon the Social Worker's work day. All numbers are reported in aggregate or refer to the participants as randomly assigned alphabetical subjects so as not to identify any specific individual. The categories included the following options:

ctivity	
ode	Activity
1	ACR/CPC
2	Actual Travel Time for Agency Purposes
3	Actual Travel Time for Client Purposes
4	Arranging for Personal Transportation
5	Arranging for Transportation of Clients
6	Assisting/Coverage Duty
7	Case Plan Preparation
8	Case Record Maintenance
9	Clerical tasks (faxing, copying, filing)
10	Complete Background Checks
11	Consultation - FASU
12	Consultation - RRG, BHPD
13	Court
14	Court - Reading of Documents/Writing or Verbal Preparation of Documents
15	Court Related Wait Time
16	Face to face visit with caretaker of child in placement - successful
17	Face to Face visit with Collateral Providers (Community , Educational or Medical - Successful
18	Face to Face visit with Collateral Providers (Community , Educational or Medical - Unsuccessful
19	Face to face with caretaker of child in placement - unsuccessful
20	Face to face with child in out of home care - successful
21	Face to face with child in out of home care - unsuccessful
22	Face to face with child in-home - successful
23	Face to face with children in-home - unsuccessful
24	Face to face with parent/guardian - successful
25	Face to face with parent/guardian - unsuccessful
26	FAR Assessment Documentation
27	Investigation Protocol Documentation/Entry
28	Lunch/Breaks
29	Meetings (Case Related)
30	Meetings (Non Case Related)
31	Placement of Client
32	Provider Referral
33	Relative Search/Family Connections/Family Assessment
34	Safety Planning with Clients
35	SDM
36	Supervision - Peer
37	
38	Supervision - SWS or PM Talanhana salls to diant as callatoral contact, no massage left /urang number/disconnected, etc.
	Telephone calls to client or collateral contact - no message left/wrong number/disconnected, etc.
39	Telephone Contact - All Other
40	Telephone contact with Caretaker of Child in Placement
41	Telephone contact with Child in Placement
42	Telephone contact with collateral providers
43	Telephone contact with parent or guardian (in-home custodial)
44	Telephone contact with parent or guardian (in-home non-custodial)
45	Telephone contact with parent or guardian of Child in Placement
46	Telephone/Voice mail exchanged with client or collateral contact (message left or received)
47	Time Off (Sick/PL/Vacation)
48	Time Study Activities
49	Training
50	Translation/Interpretation
51	Transportation of Clients (Direct)
52	Visitation Observation (Parent/Child or Other Significant Adult/Child)
53	Visitation Observation (Sibling)
54	Wait Time (Medical/Therapeutic Appointments)
55	Written Communication
99	Other:

Across the state the five staff from each of the six designated offices logged their respective days with any hours worked and one theme clearly became evident early in the logging process. SW often worked through their breaks and lunches without payment, or even the expectation of payment.

	Social Worker	Hours LOGGED	Hours of Lunch/Break	Hours Off (Sick/PL/ Holiday/ Vacation)	AO Avg # of Hours LOGGED	AO Avg # hrs Lunch/ Break	AO Avg Time Off (hours)
Bridgeport	AA	203.8	15.4	3.4			
Bridgeport	I	196.0	0.5	48.5			
Bridgeport	C	191.0	9.8	3.5			
Bridgeport	S	180.8	16.5	9.0			
Bridgeport	Н	175.1	13.9	18.3	189.3	11.2	16.5
Hartford	В	218.3	12.0	19.8			
Hartford	G	204.6	3.4	16.8			
Hartford	K	177.9	24.1	27.0			
Hartford	D	158.0	9.5	35.5			
Hartford	F	155.3	12.5	36.3	182.8	12.3	27.1
Milford	DD	191.8	5.3	10.0			
Milford	Q	188.8	7.8	13.0			
Milford	V	182.4	16.9	28.5			
Milford	W	170.8	16.3	14.0			
Milford	R	168.0	3.3	36.0	180.3	9.9	20.3
New Britain	Т	215.9	20.4	9.0			
New Britain	Z	206.5	9.8	20.0			
New Britain	A	185.8	7.0	11.0			
New Britain	P	181.9	13.1	19.8			
New Britain	J	169.8	21.5	32.8	192.0	14.4	18.5
Torrington	M	204.9	9.1	15.5			
Torrington	О	196.9	8.8	24.3			
Torrington	U	190.1	10.3	29.1			
Torrington	X	165.8	7.5	27.8			
Torrington	Y	159.0	5.8	47.3	183.3	8.3	28.8
Willimantic	CC	223.9	6.1	24.0			
Willimantic	L	207.4	6.5	26.9			
Willimantic	BB	188.8	4.5	21.0			
Willimantic	N	180.3	5.6	19.3		_	
Willimantic	Е	164.4	12.9	44.5	192.9	7.1	27.1
	Average	186.8	10.5	23.0			

Fourteen of the thirty participants worked a day or more than the 22 day work month. In three of the five offices the average of days worked exceeded the 22 work day expectation. Also, there was often daily overtime reported. Sometimes this was with the approval and payment of the agency. Other times it was done after approval was denied or it was done without the expectation of payment to ensure specific deadlines were met, or client needs were attended to. In other cases, workers found the overtime request process too time consuming and cumbersome.

Table 4: Percentage of Days with Overtime by Bridgeport Social Worker Among Actually Worked Days in March 2016							
Social Worker	Days	Yes All Time O/T- Paid	Yes All O/T- Unpaid	Yes - O/T Both Paid & Unpaid	No Overtime		
I	26	53.9%	15.4%	0.0%	30.8%		
С	25	24.0%	8.0%	4.0%	64.0%		
S	24	12.5%	16.7%	4.2%	66.7%		
AA	24	45.8%	20.8%	8.3%	25.0%		
Н	22	40.9%	18.2%	0.0%	40.9%		
Bridgeport Average	24.2	35.4%	15.8%	3.3%	45.5%		

2016					
Social Worker	Days	Yes All Time O/T- Paid	Yes All O/T- Unpaid	Yes - O/T Both Paid & Unpaid	No Overtime
В	21	76.2%	4.8%	14.3%	4.8%
D	19	15.8%	21.1%	0.0%	63.2%
F	20	10.0%	55.0%	0.0%	35.0%
G	21	71.4%	14.3%	0.0%	14.3%
K	22	36.4%	27.3%	0.0%	36.4%
Hartford Average	20.6	42.0%	24.5%	2.9%	30.7%

Table 5: Percentage of Days with Overtime by Hartford Social Worker Among Actually Worked Days in March

Table 6: Percentage of Days with Overtime by Milford Social Worker Among Actually Worked Days in March 2016

Social Worker	Days	Yes All Time O/T- Paid	Yes All O/T- Unpaid	Yes - O/T Both Paid & Unpaid	No Overtime
Q	22	45.5%	27.3%	0.0%	27.3%
R	22	59.1%	0.0%	0.0%	40.9%
V	23	30.4%	30.4%	0.0%	39.1%
W	22	45.5%	4.6%	0.0%	50.0%
DD	22	31.8%	22.7%	0.0%	45.5%
Milford AO Average	22.2	42.4%	17.0%	0.0%	40.6%

Table 7. Percentage of Days with Overtime by New Britain Social Worker Among Actually Worked Days in March 2016

Social Worker	Days	Yes All Time O/T- Paid	Yes All O/T- Unpaid	Yes - O/T Both Paid & Unpaid	No Overtime
AA	22	27.3%	54.6%	0.0%	18.2%
J	24	37.5%	20.8%	4.2%	37.5%
P	22	22.7%	31.8%	4.6%	40.9%
T	23	30.4%	43.5%	17.4%	8.7%
Z	23	65.2%	0.0%	8.7%	26.1%
New Britain AO Average	22.8	36.6%	30.1%	7.0%	26.3%

Table 8: Percentage of Days with Overtime by Torrington Social Worker Among Actually Worked Days in March 2016

Social Worker	Days	Yes All Time O/T- Paid	Yes All O/T- Unpaid	Yes - O/T Both Paid & Unpaid	No Overtime
M	24	33.3%	29.2%	25.0%	12.5%
0	21	33.3%	52.4%	14.3%	0.0%
U	21	28.6%	23.8%	0.0%	47.6%
X	20	40.0%	0.0%	0.0%	60.0%
Y	20	60.0%	10.0%	0.0%	30.0%
Torrington Average	21.2	39.0%	23.1%	7.9%	30.0%

Table 9. Percentage of Days with Overtime by Willimantic Social Worker Among Actually Worked Days in March 2016						
Social Worker	Days Actually Worked *	Yes - Paid	Yes - Unpaid	Yes - Both Paid & Unpaid	No Overtime	
Е	20	20.0%	10.0%	15.0%	55.0%	
L	21	28.6%	19.1%	33.3%	19.1%	
N	22	18.2%	45.5%	0.0%	36.4%	
BB	22	31.8%	22.7%	0.0%	45.5%	
CC	25	52.0%	20.0%	4.0%	24.0%	
AO Average	22	30.1%	23.4%	10.5%	36.0%	

Looking at how the 30 social workers actually spent their time during the month of March 2016, the top ten work tasks that were identified (excluding time off for sick/PL/vacation of 691.5 hours and the time allotted for lunch/breaks of 315.2 hours; and noting that this number was significantly lower than it should have been had all workers taken the actual designated times allowed by contract) statewide were:

Table 10: Top Ten Work Tasks of the Sample of 30 Social Workers	
Written Communication	440.5 hours
Actual Travel Time for Client Purposes	421.9 hours
Case Record Maintenance	408.3 hours
Court –Reading of documents/Writing or Verbal Preparation of Documents	387.5 hours
Actual Travel Time for Agency Purposes	320.0 hours
Investigation Protocol Documentation/Entry	291.2 hours
Face to Face Contact with Parent/Guardian (Successful)	244.8 hours
Case Plan Preparation	223.2 hours
Face to Face Contact with Children in-Home (Successful	176.2 hours
Supervision – SWS or PM	162 hours

Overall, Table 11 provides the time study participants accounting of time across the month of March for all categories. As detailed in Table 11, workers spend much of their time on tasks that do not involve direct contact with children, families or stakeholders. This includes travel time, data entry, court preparation written communication, etc. The Court Monitor staff visits to the offices to collect time sheets and speak with time study participants often resulted in conversations and observations not only with participants of the study but also with staff at large that corroborate these findings.

Activity Code	Activity	Time (hours)	# of the 30 Social Workers Identifying this Code during the Month	Percent of Total Time in Month	
47	Time Off (Sick/PL/Vacation)	691.5	30	10.50%	
55	Written Communication	440.5	28	6.70%	
3	Actual Travel Time for Client Purposes	421.9	30	6.40%	
8	Case Record Maintenance	408.3	28	6.20%	
14	Court - Reading of Documents/Writing or Verbal Preparation of Documents	387.5	27	5.90%	
2	Actual Travel Time for Agency Purposes	320	29	4.80%	
28	Lunch/Breaks	315.6	30	4.80%	
27	Investigation Protocol Documentation/Entry	291.2	10	4.40%	
24	Face to face with parent/guardian - successful	244.8	30	3.70%	
7	Case Plan Preparation	223.2	24	3.40%	
22	Face to face with child in-home - successful	176.2	28	2.70%	
37	Supervision - SWS or PM	162	30	2.50%	
42	Telephone contact with collateral providers	160.4	30	2.40%	
9	Clerical tasks (faxing, copying, filing)	155.8	29	2.40%	
29	Meetings (Case Related)	155.2	30	2.30%	
49	Training	144.4	22	2.20%	
30	Meetings (Non Case Related)	139.5	27	2.10%	
46	Telephone/Voice mail exchanged with client or collateral contact (message left or received)	137.3	29	2.10%	
48	Time Study Activities	135.9	30	2.10%	
99	Other	135.4	26	2.00%	
20	Face to face with child in out of home care - successful	112.6	27	1.70%	
51	Transportation of Clients (Direct)	92.4	21	1.40%	
26	FAR Assessment Documentation	88.3	9	1.30%	
36	Supervision - Peer	84.5	25	1.30%	

Activity Code	Activity	Time (hours)	# of the 30 Social Workers Identifying this Code during the Month	Percent of Total Time in Month
17	Face to Face visit with Collateral Providers (Community, Educational or Medical - Successful	65.8	27	1.00%
43	Telephone contact with parent or guardian (inhome custodial)	59.8	21	0.90%
6	Assisting/Coverage Duty	58.2	20	0.90%
13	Court	55.6	23	0.80%
16	Face to face visit with caretaker of child in placement - successful	54.3	21	0.80%
32	Provider Referral	51.5	27	0.80%
40	Telephone contact with Caretaker of Child in Placement	48.1	22	0.70%
12	Consultation - RRG, BHPD	47	25	0.70%
52	Visitation Observation (Parent/Child or Other Significant Adult/Child)	47	15	0.70%
39	Telephone Contact - All Other	44.6	26	0.70%
15	Court Related Wait Time	43.7	24	0.70%
5	Arranging for Transportation of Clients	41.7	25	0.60%
31	Placement of Client 35.6 17		17	0.50%
1	ACR/CPC	35	16	0.50%
45	Telephone contact with parent or guardian of Child in Placement	33.5	24	0.50%
4	Arranging for Personal Transportation	29.8	22	0.50%
38	Telephone calls to client or collateral contact - no message left/wrong number/disconnected, etc.	24.7	21	0.40%
66	Internship/SWIP	23.8	1	0.40%
44	Telephone contact with parent or guardian (inhome non-custodial)	21.5	18	0.30%
25	Face to face with parent/guardian - unsuccessful	21.4	18	0.30%
53	Visitation Observation (Sibling)	21	9	0.30%

Activity Code	Activity	Time (hours)	# of the 30 Social Workers Identifying this Code during the Month	Percent of Total Time in Month	
54	Wait Time (Medical/Therapeutic Appointments)	15.5	19	0.20%	
11	Consultation - FASU	15.4	15	0.20%	
33	Relative Search/Family Connections/Family Assessment	14.8	16	0.20%	
23	Face to face with children in-home - unsuccessful	14.5	19	0.20%	
41	Telephone contact with Child in Placement	ntact with Child in Placement 12.7 10		0.20%	
21	Face to face with child in out of home care - unsuccessful	11.1	12	0.20%	
10	Complete Background Checks	9.6	15	0.10%	
19	Face to face with caretaker of child in placement - unsuccessful	8	9	0.10%	
34	Safety Planning with Clients	8	10	0.10%	
35	SDM	5.7	14	0.10%	
18	Face to Face visit with Collateral Providers (Community, Educational or Medical - Unsuccessful	4.8	8	0.10%	
50	Translation/Interpretation	2.1	3	0.00%	

Time Study Sample: Area Office Trends

The trends differ slightly within each office. The bulk of the 30 Social Workers' time during the available hours were spent in non-contact activities. The majority fell short of the mandated contact and visitation requirements in their assigned cases as outlined earlier in this document. Travel related time demands are present in each office. Case documentation and correspondence activities, legal briefs and documentation, case plans and investigation protocols account for a large percentage of each office activity trend. Face-to-face contact with children or parents ranks highest in the regions at a fifth priority ranking, in Milford and Bridgeport. It does not make the top ten activities in New Britain, however in New Britain it is noted that (telephone) contact with collateral providers ranks eighth. Provider contact only appeared in Bridgeport's top ten listings of activities where it also ranked eighth.

	Table 12: Top Ten Activities by Amount of Time Spent Office Wide - Bridgeport *						
Rank	Activity Code	Description	Time (hours)				
1	27	Investigation Protocol Documentation/Entry	98.3				
2	2	Actual Travel Time for Agency Purposes	75.9				
3	55	Written Communications	73.5				
4	14	Court - Reading of Documents/ Writing or Verbal Preparation of Documents	60.5				
5	24	Face to Face with Parent/Guardian - Successful	49.5				
6	29	Meetings - Case Related	39.0				
7	3	Actual Travel Time for Client Purposes	36.8				
8	42	Telephone Contact with Collateral Providers	34.5				
9	37	Supervision with SWS or PM	31.0				
10	8	Case Record Maintenance	28.9				

Bridgeport had two Investigation SW, two Ongoing Services SW, and one Ongoing Service SW specializing in Permanency.

	Table 13: Top Ten Activities by Amount of Time Spent Office Wide - Milford *						
Rank	Activity Code	Description	Time (hours)				
1	8	Case Record Maintenance	74.8				
2	3	Actual Travel Time for Client Purposes	70.6				
3	2	Actual Travel Time for Agency Purposes	64.6				
4	14	Court - Reading of Documents/ Writing or Verbal Preparation of Documents	57.6				
5	22	Face to Face with Child In-Home (successful)	54.4				
6	24	Face to Face with Parent/Guardian - Successful	47.8				
7	7	Case Plan Preparation	41.0				
8	55	Written Communication	39.5				
9	99	Other	34.5				
10	48	Time Study Activities	29.4				

Milford had One Investigation SW, Three Ongoing Services SW and One Ongoing SW specializing in Adolescent Services.

T	Table 14: Top Ten Activities by Amount of Time Spent Office Wide - Willimantic							
Rank	Activity Code	Description	Time (hours)					
1	3	Actual Travel Time for Client Purposes	102.9					
2	14	Court - Reading of Documents/ Writing or Verbal Preparation of Documents	87.4					
3	55	Written Communication	78.8					
4	7	Case Plan Preparation	68.6					
5	8	Case Record Maintenance	64.8					
6	2	Actual Travel Time for Agency Purposes	52.2					
7	29	Meetings (Case Related)	43.0					
8	24	Face to Face with Parent/Guardian - Successful	38.4					
9	46	Telephone Voice Mail Exchanged with client or collateral contact (message left or received)	31.9					
10	30	Meetings (Non-Case Related)	30.9					

Willimantic had one Investigation SW, two Ongoing Services SW, one Ongoing Services SW specializing in Permanency and one Ongoing Services SW specializing in Adolescent Services.

	Table 15: Top Ten Activities by Amount of Time Spent Office Wide - Hartford st						
Rank	Activity Code	Description	Time (hours)				
1	2	Actual Travel Time for Agency Purposes	89.3				
2	55	Written Communication	75.8				
3	8	Case Record Maintenance	72.8				
4	49	Training	44.3				
5	14	Court - Reading of Documents/ Writing or Verbal Preparation of Documents	41.2				
6	27	Investigation Protocol Documentation/Entry	40.7				
7	37	Supervision - SW or PM	34.5				
8	36	Supervision - Peer	29.2				
9	51	Transportation of Client - Direct	27.8				
10	24	Face to Face with Parent/Guardian - Successful	26.5				

Hartford had one Investigations SW, two Ongoing Services SW, One Ongoing Services SW specializing in Mental Health, and one Ongoing Services SW specializing in Permanency.

Rank	Activity Code	Description	Time (hours
1	8	Case Record Maintenance	99.9
2	55	Written Communication	88.8
3	14	Court - Reading of Documents/ Writing or Verbal Preparation of Documents	87.3
4	3	Actual Travel Time for Client Purposes	76.5
5	27	Investigation Protocol Documentation/Entry	47.7
6	49	Training	33.8
7	30	Meetings (Non-Case Related)	32.8
8	42	Telephone Contact with Collateral Providers	32.2
9	37	Supervision - SW or PM	29.1
10	2	Actual Travel Time for Agency Purposes	29.0

New Britain had two Investigations SW, one Ongoing Services SW, and two Ongoing Services SW specializing in Permanency.

	Table 17: Top Ten Activities by Amount of Time Spent Office Wide - Torrington							
Rank	Activity Code	Description	Time (hours)					
1	3	Actual Travel Time for Client Purposes	112.1					
2	55	Written Communication	83.9					
3	8	Case Record Maintenance	66.9					
4	27	Investigation Protocol Documentation/Entry	63.0					
5	7	Case Plan Preparation	53.9					
6	24	Face to Face with Parent/Guardian - Successful	53.8					
7	14	Court - Reading of Documents/ Writing or Verbal Preparation of Documents	53.3					
8	9	Clerical Tasks (faxing, copying, filing)	43.3					
9	26	FAR Assessment Documentation	41.0					
10	22	Face to Face with Child In-Home (successful)	29.9					

Torrington had two Investigations SW, one Ongoing Services SW, and two Ongoing Services SW specializing in Permanency.

Sub Sample Review

In order to provide a more detailed view of the percentage totals statewide, caseload records of 12 Social Workers that participated in the time study were reviewed. This also served the purpose of ensuring that the activity sheets were filled out accurately. Six investigation and six ongoing service caseloads were reviewed for the work done in the month of March, 2016. A total of 112 Investigation/Family Assessment Response (FAR) cases were reviewed: 40 FAR cases, 70 CPS track investigations including 68 families, one (1) school, and one (1) daycare. A total of 100 Ongoing Services cases were reviewed: including 48 CPS in-home family or associated family cases, 49 Children-in-Placement cases, and 3 Voluntary Service cases.

Activities recorded on the time study tool by the participating social workers were accurate with the following exceptions:

- 1. Investigation staff often coded the work done on SDM tools as time identified for code 27, Investigation protocol documentation rather than breaking it out to its discrete code.
- 2. Ongoing Services staff likewise coded some SDM tool work as code 7 rather than its discrete code so it accumulated into case planning preparation rather than to its discrete code.
- 3. Both Investigation and Ongoing Service Social Workers did not code some of the time with supervision during corresponding entries of supervision by SWS found in the LINK documentation. This could account for our lower percentage of supervision recorded statewide. (2.5%) However, we note that in some cases it is unclear if some of the entries are actual in-person or verbal supervisory sessions or just LINK entries by the Supervisor.
- 4. Our review of the LINK narratives indicate that the Social Workers multitasked beyond the capability of the tool to capture discrete items of work in even 5 minute increments (Instructions to social workers was to limit the codes to three per 15 minute increments). Narratives showed that more work was often completed and not recorded on the activity timesheets (i.e. phone calls, emails, paperwork).

Investigations - Sub Sample Practices (n=6)

Contact Standards

The required contact standards was not met for any of the Investigation Social Workers in our time study. Compliance was 73.2% for the 112 Investigation cases. Most of these cases had the initial contact, but failed to have the required follow up visits with all case participants prior to disposition. Caseloads were above 75% for all of the Investigation staff in the subsample at some point during the month. One of the SW in this group started the month with 127% caseload and ended the month with 94%. Two of the Investigation individuals in our full group were below 75% utilization at one measurement point during the month. One SW, however was involved with SWIP and was to have a reduced schedule. The other initially had a percentage of 59% but by month's end was up to 88%.

On a positive note, collateral contacts with community providers, medical and educational professionals were made in most all of the cases (staff failed to record these contacts in the activities sheets – but we found them in our documentation review so this contact is one that is underreported –see bullet 4 above). Of the 112 cases, ten

Time Study of DCF Social Work Staff During March 2016 as Requested by the Department of Children and Families' Administration and AFSCME Local 2663 February 2017

cases (9%) did not to have any collateral contacts recorded. Five of these cases were FAR, where parents refused to sign ROI forms and it appeared that the SW felt the case did not warrant pursuing the releases.

Timeliness of Case Disposition

Of the 112 cases reviewed, 99 were disposed of within the 45-day requirement (88.4%). This is just shy of the requirement of 85.0%. Of the 13 cases that were not disposed of within 45 days, 12 were FAR cases with assessments completed by day 60. One case was approved on the day 76 from acceptance at the Careline. Most of the FAR cases appeared delayed due to awaiting the manager's approval or the team meeting with the CPA.

Supervision

Eighty-four of the 112 Investigation cases required supervision during the month of our time study. Forty five (53%) had no supervision coded on the activity sheets. While we found evidence of supervision for many of these forty-five with the assigning conference notes entered by the SWS the entries were not adequate to meet the standard. Most of the assigning supervisory notes did not appear to be face to face or verbal meetings with the SW. It was hard to determine from the LINK documentation if the supervisory conferences were actual meetings or just notes entered after the supervisory review of documentation. Within our focus groups, SWS indicated that they felt approximately 28%-30% of their month was spent in direct supervision. This is not corroborated by documentation in the time study data or the narratives that were reviewed.

Structured Decision Making (SDM) – Safety and Risk Assessments

Policy requires that the SDM Safety Assessment tool be completed within five days of initial face to face contact. Of the 112 cases reviewed for this sub sample, there was a high rate of compliance with the completion of the initial safety tool. Only 3 cases (2%) did not have the initial safety tool done timely. For these cases, the tool was completed, only delinquent, at the end of the investigation. SDM Risk Assessments were documented prior to the close of all required cases. The quality of the SDM tools is an ongoing Agency issue. Utilization of this tool needs to be reviewed closely and addressed with training and improved supervisory oversight. As indicated in bullet 1 earlier, a limitation of our study is that much of the LINK documented SDM work was coded mistakenly as part of the work completed and entered as code 27-Investigation Protocol Entry Documentation instead of the separate SDM code, 35.

Removal/Placements

Of the 112 investigation cases only 2 cases required placement of 1 child each. All of these placements were completed in a timely manner. None of these placements required an MDE during the month.

Investigations – Social Worker Sub Group Perspectives (n=6)

During follow up interviews with the time study participants, the Investigations staff noted the following issues that impacted daily routines/functioning:

- One emergency assignment can be 3-4 full days of work, especially if that emergency report ends in removal and placement of children. This consists of extensive court work both preparing documents and attending court, placement of children, follow-up with that placement, and rapid preparation of the case for transfer. This one case could set an investigator back a full week. Sometimes all the compensation a staff gets for this situation is to be skipped for one rotation of the assignment log which in some offices equals only one day of no new assignments.
- Many investigators don't get trained in time management or have a chance to set up clear systems to manage the work.
- When staff struggle with tasks required by policy, regulation or statute (many social workers who are at, near or over the maximum caseload standards) a work plan can be developed, however little or no protected time is given to complete the overdue tasks and workers are given no relief from accepting new assignments. This is why staff report that they take work home, without approval for overtime, all the while feeling more stressed to get back on track, and filled with frustration. It is a cycle that repeats time after time and clearly impacts the quantity and quality of the work.
- The investigation staff reported that they spend too much time completing clerical tasks and such things as car maintenance or locating car seats for the actual case work that needs to be done.
- Staff report that investigation and FAR cases are approved at the 45-day mark, but often there is work that still needs to be completed as they await return calls, make visits, or gather information that should be included in the assessment.
- All supervision needs to be face to face (or at minimum verbally provided) directly with SW staff.
- Staff report that the quality of work is negatively impacted when caseload exceeds approximately 75-80% of the maximum caseload standard. Time is not available to provide more frequent contacts, add the needed additional information and elements that result in higher quality documentation and assessments. Often work is done after the protocol or FAR is disposed. Collateral information returned is left for filing later, and may not get incorporated.

Ongoing Services - Sub Sample Practices (n=6)

Contact Standards:

Overall the visitation rate for the 100 cases of the Ongoing Services sub-sample (n=6) was 80%. Ability to achieve contacts was discussed with the SW during visits and caseloads were identified as a barrier. As one can see later in Table 19, caseloads were above 75% for nineteen (90.5%) of the full Ongoing Services SW sample at some point during the month. All of the SW in the sub-sample of six were above 75% at some point during the month. The lowest recorded caseload at the point in time measurement for our subsample group was 72.0%. One SW was above at 105.0% utilization at months' end. In some instances within the sub-sample of six, we saw documentation that the SW utilized other staff to assist with visitation to ensure benchmarks. Reciprocally, they also assisted in other's cases in the same manner. Still compliance was not achieved for contacts in all

cases within the sub-sample set. Our review of the documentation in LINK found that SW visits were recorded accurately on the timesheets. Several cases had multiple attempts to meet the standard that were unsuccessful. Of the six Ongoing Social Workers we reviewed, three or 50%, met the required contact standard for visitation. Two of those three were predominantly serving children in placement with limited associated family requirements. One had a truly mixed load case. In looking across the full spectrum of cases touched by the workers in this sub-sample, the face-to-face contact standards were not consistently met for the visitation requirements for both children in placement and for in-home case family members. The in-home cases missing the standard did so most routinely by not contacting the father. For some, the father was a member of the household while in others he was living out of the home.

Collateral Contacts:

Of the 100 cases reviewed, 97% of the cases had at least one collateral contact documented during the month. However, it was clear that even though efforts were made, the SW staff were unable to contact all active providers on their caseloads at the required rate of once per month. Education and Medical Providers were also not routinely contacted in order to update necessary case planning and documentation as needed. As with the investigation staff, the ongoing social workers' did underestimate their work, as we found evidence of fifteen cases during our sub sample review as having collateral contact activity that was not recorded on the coding sheets.

Case Planning:

All Administrative Case reviews were held and attended by the SW in a timely manner. Of the 100 cases reviewed in the sub group, 19 cases required case plans during the month of the time study. These 19 cases required three In-Home Family Case Plans with a goal of maintaining the children in the home, and 19 Children-in-Placement case plans with seven Associated Family Plans (identifying the permanency goal of the CIP and corresponding needs and service requirements of the parents and children remaining in the home to help achieve that said permanency goal). Of the 19 cases, one case requiring two case plans (represents 1 child in care and one family plan) was not completed and actually remained undone/overdue for months. Therefore 94.7% of the cases requiring plans had a timely approved case plan as required. Our review did not include a quality assessment of said case plans but the Department has struggled with the overall quality of its case planning efforts. Many staff identify excessive workload and expectations as a primary reason for insufficient case planning.

Legal requirements

Of the 100 cases reviewed, 18 cases (18%) had some level of legal involvement during the month of March 2016. 12 cases required in-person contact in court with associated paperwork. It should be noted that some legal work recording in LINK was not coded on the activity sheets, primarily the preparation for trial. Six cases required the court filings but no appearance.

Placements

Of the 100 Ongoing Services cases reviewed only 1 case included the placement of a child. This placement was completed in a timely manner. The MDE was not required during our period under review.

Direct Observations of Required Sibling Visits

Of the 48 children in out of home placements, 7 cases required sibling visits. Direct observation of these case visits were completed as required. Four were done by the assigned social worker, and three were completed by SWCA or a private agency under contract.

Structured Decision Making (SDM)

In the 100 Ongoing Services cases reviewed for the sub group of Ongoing Services, 19 SDM tools were required during the month of March 2016. Of the 19 required, 15 (78.9%) were completed timely. Four cases (21.1%) did not have the required SDM tools completed at all. These included both FSNA, Risk and Reunification. As stated earlier, SDM activities were not always recorded on the time study activity sheets correctly. Some were coded as 8 Case Record Maintenance.

Supervision

Of the 100 Ongoing Services cases reviewed, 34 cases required a supervisory conference during the month. 33 cases (97.1%) included a SWS Narrative. In only one case was there no entry. However, of these 34 cases, 16 of the SW did not record supervision in their time study. This suggests that it may not have been a face to face activity, with the SWS recording the conference for the SW review. For example a conference note was found in LINK stating that the SWS reviewed the ACRF and made recommendations for the SW to complete, without meeting face to face. Within our focus groups, SWS indicated that they felt approximately 28%-30% of their month was spent in direct supervision. This is not corroborated by documentation in the time study data or the narratives that were reviewed.

On Going Service - Social Worker Sub Group Perspectives

During the follow-up interviews completed with the Ongoing Services Social Workers after the time study was completed the following statements were identified:

- The time spent getting cars, car seats and maintaining the cars is a clear detriment in achieving the priority tasks of the job.
- Time spent with the transporting of clients, driving to home visits is significant, especially when the home visit or appointment was cancelled or unsuccessful. Some staff reported traveling an hour one way to a home visit or court appointment.
- Duplicate paperwork is time consuming and clerical tasks take a large amount of time from the SW's day.
- One staff stated that she spent all day (actually a day plus four hours overtime) with one child trying to get the child evaluated and placed. (12 hours spent to accomplish this one placement.)
- Overtime approval seems arbitrary, and the process is too cumbersome for gaining approval. Workers
 reported they are working without requesting approval or in some cases in spite of getting denied the
 overtime just to stay on top of the tasks needed to be completed.
- There is no common referral form to providers. This can mean repetitive versions of requests for services that are time consuming and often fruitless.

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- SWS/SW Supervision gets pushed off due to other priorities on the part of the SW and/or SWS.
- A direct quote from a staff involved in our study; "If you do good work, you get more and more work...feels like a punishment."

Mathematical Calculation Model

From our time study and focus groups it was evident that the expectations identified in policy and practice place an overwhelming task upon the Social Work staff when combined with caseloads at the maximum standard. Suffice it to say that none of the 30 workers reported with confidence that they were able to meet all mandates. Further, none of the Ongoing Service SW in the sample worked only the 143 physical hours expected of them during the month. The two tables that follow provide a mathematical calculation with a conservative estimate of hours for a SW with a mixed caseload of 15 cases, and a comparison to a SW who had just that. We did not do a similar comparison with an Investigation caseload, as the issues were found to be very similar.

Quality of the visits and case plans was not being assessed as part of this endeavor, however it was clear from discussions with the workers as well as the narratives and case plans reviewed that engagement of all members of families and providers is an issue; and that the fullness of assessments may have been less robust than they should have been.

Table 18: Mathematical Calculation for Minimal Requirements for an Ongoing SW with a mixed Caseload of 15 Cases (8

CIP with 6 Associated Family, 1 In-Hom	e Case with 3 (Children) Ca		e 82% - 88%
Requirement	Visits/ Contacts or Items Needed	Estimate Of Hours	Actual Hours logged by SW	Was the Minimum Requirement/Statute or Policy Met?
Trainings/Employee Development			29.4	Employee had to attend a 4 day LINK training during the month.
Transportation of Client (Direct)		12	25.3	Direct transportation of clients to appointments, PPTs, etc. F2F occurred during this time for a few OOH clients.
LINK Narrative/Case Documentation Entry		23	20.3	
Travel		25	20.1	Travel for agency and client purposes.
Written Communication		22	20	
Placement of Client	1	8	10.75	This month SW had one.
Face to Face Contacts with Parents/Guardians	18	24	7.25	No. 10 visits made at 6.5 hours. 4 additional attempts unsuccessfully documented at .75 of a hour.
Legal Work	3	12	7.1	2 Permanency Plans and one Court Hearing.
Permanency Teamings/Case Related Meetings	1	2	5.9	Included one Permanency Teaming
Case Plan Development/Writing	6	24	5.5	6 Case Plans were due. 5 were written.
Monthly Collateral Contacts (In Person or Phone)	18	5	4.2	No. 12 Collateral contacts documented.
Clerical Tasks		4	4	
RRG Consultation	5	3	3.5	The SW engaged in 5 requested RRG consultations.
Face to Face Contacts with Child in Placement	8	4	2.9	No. 7 contacts made. One Child was not seen.
ACR Attendance	4	4	2.8	4 ACRs were scheduled/ held/attended.
Face to Face Contact with All Children in In-Home Case	15	7.5	2	No. 5 contacts made. 3 Unsuccessful attempts noted.
Supervision	5	5	1	5 - 90 day Supervisory notes required. 4 documented.
Supervised Visitation (Parent/Child)	16	16	1	8CIPs with six associated family cases. SW provided one hour of Supervised visitation. FM was used for two siblings. Case Aides provided supervision in others.
Face to Face Contacts with Caretaker of Child in Placement	6	3	0	No. 5 Contacts documented in LINK. One Caretaker not seen. These were identified only as CIP contacts.
SDM Work	4	2	0	3 SFNA and one Risk Assessment were required and completed. These were coded under LINK narrative code.
Supervised Visitation (Siblings)	0	0	0	Siblings placed together. No sibling visitation required.
Lunch/Breaks	22/44	33	31.8	1 hr lunch/two 15-minute breaks each day totals 33 hours. SW took 31.8 hours
Sick/Personal/Vacation Time		0	11.8	SW used 11.8 hours of sick/vacation/PL time
Paid Holidays	1	<u>8</u>	<u>8</u>	1 Holiday observed
		246.5	224.6	
Overtime		0	34.3	SW logged an additional 34.3 hours above the maximum 184 hours of regular hours in a 23 day work month.

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The categorical rows for actual hours above are not the full accounting of all codes for the SW during the month. These are selected codes representing those that are key to the completion of required policy mandates for safety, permanency and well-being as well as the need for employee development. As noted, without a full accounting of all codes the worker had already far surpassed the expected 143 work hours for March (allowing for the holiday, lunch and breaks). The SW had worked an additional 34.3 hours to accommodate for 29.4 hours of mandated training that was required during the month. It should also be noted that this worker also had a total of 10.6 hours of coverage duty that was mandated. In spite of working beyond scheduled hours, one can see from the table above that the SW still was not able to meet the visitation requirements for all cases assigned. Further, only 83.3% of the case plans were completed timely. This SW utilized direct transportation as an opportunity for face to face contacts/discussions. The SW managed a caseload that fluctuated in the 80% -90% range during the month. That being said given the hours on the schedule it was clear that the required tasks, could not be accomplished in the official 8 hour schedule at this caseload. This would be true even stripping away without the added emails, referrals, emergencies, and other tasks not included in the accounting above (but still routine and required).

The table below represents caseloads of the time study participants at the beginning of the study and at the end of the study. The areas in the chart that are bolded represent either a discrepancy in the LINK caseload report and the actual reported caseload or if the staff was at or over 100%.

Caseload Point in Time Comparison

Table	Table 19: Sample Participant's Caseloads: Point in Time at 3/1/2016 and 3/31/2016						
Participant	position	office	Caseload on Desktop 3/1/2016	Actual 3/1/2016	Caseload on Desktop 3/31/2016	Actual 3/31/2016	Comments
Н	SW-Ongoing	Bridgeport	65%	65%	73%	73%	
AA	SW -Investigation	Bridgeport	35%	35%	47%	47%	SWIP work 19 hrs
С	SW - Ongoing	Bridgeport	72%	72%	77%	77%	
1	SW -Investigation	Bridgeport	88%	88%	82%	82%	
S	SW- Permanency	Bridgeport	67%	67%	77%	77%	
K	SW-Permanency	Hartford	85%	85%	80%	80%	
G	SW - Investigation	Hartford	94%	109%	82%	82%	
D	SW - Ongoing	Hartford	90%	95%	95%	95%	
В	SW-Ongoing	Hartford	82%	82%	88%	88%	
F	SW-Ongoing (MH)	Hartford	92%	92%	97%	97%	
W	SW-Investigation	Milford	127%	127%	94%	94%	
R	SW-Adolescent	Milford	90%	105%	105%	105%	
V	SW-Ongoing Trainee	Milford	91%	96%	95%	95%	
Q	SW - Ongoing	Milford	80%	80%	90%	90%	
DD	SW-Ongoing	Milford	80%	86%	93%	93%	
J	SW - Investigation	New Britain	124%	124%	112%	112%	
Т	SW - Ongoing (MH)	New Britain	65%	65%	70%	70%	
Р	SW - Permanency	New Britain	95%	95%	95%	95%	
Z	SW - Investigation	New Britain	82%	82%	124%	124%	
Α	SW-Permanency	New Britain	87%	87%	95%	95%	
М	SW-Investigations	Torrington	94%	101%	94%	94%	
U	SW - Ongoing	Torrington	92%	92%	77%	77%	
0	SW - Investigation	Torrington	82%	82%	77%	77%	
Х	SW - Permanency	Torrington	92%	92%	77%	77%	
Υ	SW-Permanency	Torrington	90%	90%	95%	95%	
CC	SW - Ongoing	Willimantic	98%	98%	98%	98%	
L	SW - Investigation	Willimantic	59%	59%	88%	88%	
ВВ	SW - Adolescent	Willimantic	85%	90%	100%	100%	
N	SW - Permanency	Willimantic	95%	95%	100%	100%	
E	SW- Ongoing	Willimantic	92%	92%	105%	105%	