



**DEPARTMENT OF CHILD SAFETY**  
**Quarterly Progress Report**  
**(Filling FTE Positions and Reducing the Inactive)**  
**December 2018**

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**PROGRESS MADE IN INCREASING THE NUMBER OF FILLED FTE POSITIONS**

The Department of Child Safety (DCS) maintains continuous efforts to reduce turnover in order to sustain sufficient staff resources that provide quality services to the children and families it serves. In state fiscal year 2019 (FY19), one of the Department’s strategic objectives is to develop and retain a highly effective workforce by improving employee retention through improved supervision.

DCS identified several key actions in FY17 and FY18, which were implemented. These included realignment of pay structure and job classification for the DCS Specialists; improvements to Core Training curriculum; improving the onboarding experience of all new DCS employees; and the development of general management and leadership skills for supervisors and managers.

For FY19, DCS aims to further its efforts to improve employee retention by improving supervision. This includes objectives to implement infrastructure and tiered accountability for a supervisor coaching model and to define and implement a “Day 1 as a New Supervisor” training. This quarter, the Department began developing roles and responsibilities for supervision coaches, developing the standard work, filling coaching positions and developing training.

DSC HR continues to target recruitment efforts at the local office level for DCS Specialist vacancies as compared to historical practices of posting for a specific city or county. This helps identify candidates who can work in their community and aims to improve the candidate’s experience because applicants are applying for the office location in which they prefer to be placed.

DCS HR has been working closely with local hiring managers to identify candidates based on selective preferences. Since different offices may have different or unique needs, HR’s work with managers will help identify candidates who more closely meet the office’s needs. It is important to note that exit surveys completed by Child Safety Specialists when they leave employment with DCS continue to reveal that low pay is a key reason for their decision to leave. Currently, a Child Safety Specialist’s starting pay is \$33,000 annually.

DCS HR analysis of DCS Specialists leaving the Department indicates a majority of employees that choose to leave the agency were hired under the “old” hiring process. For those candidates who were hired under the current hiring process, very few have resigned. During this quarter, 76 Specialists resigned who were hired under the previous hiring process and only eight Specialists who resigned were hired under the current process. Additionally, DCS continuously reviews the recruitment/hiring process by including necessary stakeholders that will provide information to expedite the hiring process.

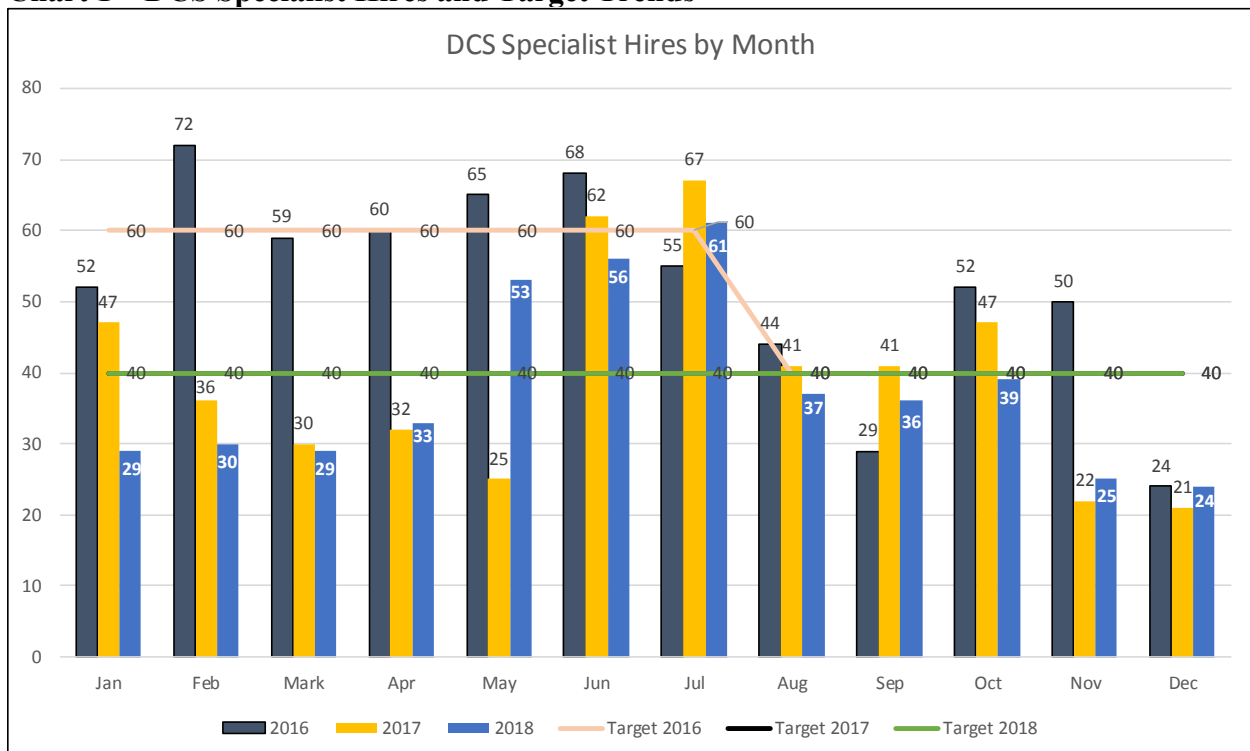
DCS has developed multiple partnerships with local colleges and universities to attract potential candidates for employment. DCS continues to attend job fairs; expand its presence on online job boards to recruit for hard to fill positions that require specific skill sets to reach likely candidates.

The Department has been sustaining its active recruitment process to fill all Child Safety Specialist positions. As of November 2018, the Department filled 1,326 (94 percent) of the 1,406 funded positions. DCS funds 236 supervisor positions, 221 (94 percent) of which are filled.

To support DCS Specialists, Supervisors, case aides and other front line staff experiencing secondary trauma, DCS implemented its peer-to-peer support program, Workforce Resilience. This program seeks to enhance a healthy workforce, provide staff a safe and supportive environment when coping with the experiences inherent in child welfare and help address burnout staff may experience.

The Department continues its efforts to minimize the overall attrition of all DCS employees. Chart 1 shows the number of DCS Specialist hires for CY 2016 through CY 2018 to date, along with hiring targets. These targets were established against historically observed attrition rates.

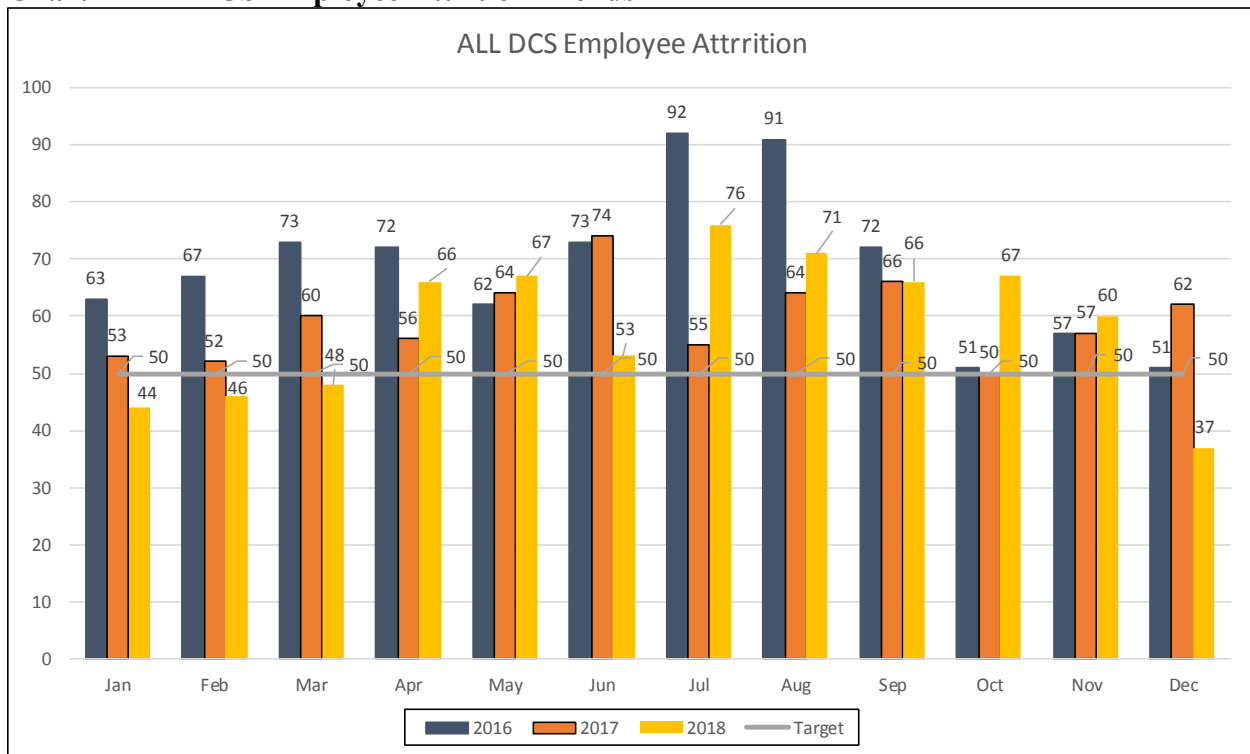
**Chart 1 – DCS Specialist Hires and Target Trends**



\*Data has been updated from prior reporting periods. December data will be updated in future reports as this report is required prior to the end of the reporting period.

Chart 2 shows the Department’s reduction in turnover for all employees for CY 2016 through CY 2018.

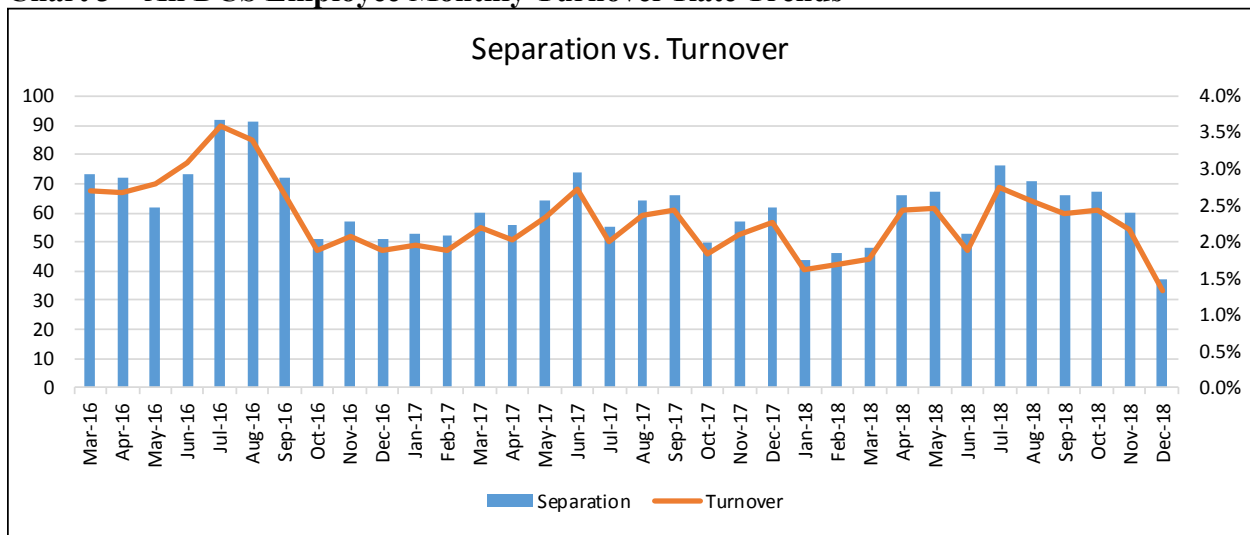
**Chart 2 – All DCS Employee Attrition Trends**



\*DCS Employee Attrition for December 2018 will be updated in the next quarterly report.

Chart 3 demonstrates the Department’s monthly separation data and monthly turnover rate since March 2016.

**Chart 3 – All DCS Employee Monthly Turnover Rate Trends**



\*December 2018 turnover rate data will be updated in the next quarterly report.

### **PROGRESS MAINTAINING INACTIVE CASES AND IMPROVING CASELOADS**

DCS has maintained the inactive cases well below the legislative benchmark of 1,000 since April 2017. Additionally, the Department reduced the number of open reports from 9,611 in December of 2016 to 6,695 in December 2018. The Department has experienced a stabilization in the number of open reports where it has remained below 7,500 since February 2017.

Additionally, DCS HR continues its efforts to hire and place Specialists at a rate equal to or greater than departures from the Department. Sustained staffing levels help contribute to the reduced number of inactive cases, total open reports, and foster care population, the overall caseloads for DCS investigators continue to decline across most offices (see Table 2).

In March 2017, DCS fell below the legislatively required benchmark of 1,000 inactive cases. From a peak of 16,014 in January of 2015, the Department now has only 302 inactive cases as of December 17, 2018, representing a 98 percent decrease. To avoid a return to higher numbers of inactive cases, the Department uses performance management and other elements of the management system to maintain caseload levels. Across the state, sustainment measures include: the implementation of performance management metrics to monitor and control the total number of open reports and the percentage of those reports that are overdue for investigation; and completion and closure and the implementation of leader standard work to ensure routine follow-up.

The Department achieved the benchmark of less than 13,000 open reports six months ahead of the established target date. From a peak of 33,245 open reports in April 2015, the Department reduced that to only 6,695 as of December 2018, representing an 80 percent reduction (see Table 1).

### **PROGRESS MADE REDUCING THE OUT-OF-HOME POPULATION**

The Department continues to achieve a safe reduction in the out-of-home foster care population. In the second quarter of SFY 2019, the Department reduced the out-of-home foster care population by 0.2 percent (32 children) from the previous quarter (see Table 1). The progress made since the baseline period of March 31, 2016 (18,917 children) is a 25 percent reduction (4,708 children) to the current number of children in out-of-home care (14,209).

By slowing the entry rate and sustaining performance for children exiting care, the Department has been able to maintain a safe reduction of the foster care population. In addition, this is highlighted by no significant change in the re-entry rate for children who left care within the past 12 months. The reduction in the number of children entering out-of-home care can be attributed to several factors. These include, but are not limited to, the additional standardized process tools including supervisory administrative and case progress review checklists, as well as standardized safety discussions guides and training staff to better engage a family's network to identify in-home options in order to maintain children safely in the home. Improved response times also contribute to the reduction of children entering care as this enables Child Safety Specialists to make decisions that will help support families, provide services in a timely manner and avoid entry into care.

Through the continued application of monthly clinical staffings on reunification cases using a standardized process, ongoing workers have been able to maintain the rate of children exiting care.

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Through these standard process activities, paired with the continued to use of cursory case reviews and Fostering Sustainable Connections (the Title IV-E Waiver demonstration project), the Department seeks to continue realizing safe and sustainable out-of-home care population reductions.

**Table 1 – Benchmark Performance**

	Q1FY18	Q2FY18	Q3FY18	Q4FY18	Q1FY19	Q2FY19
Backlog Cases						
<i>Benchmark (less than)</i>	1,000	1,000	1,000	1,000	1,000	1,000
<i>Actual</i>	212	265	176	225	183	302
Backlog Case by disposition						
<i>Investigation Phase</i>	125	165	84	115	74	188
<i>In-Home Cases</i>	77	89	84	98	93	98
<i>Out-of-Home Cases</i>	10	11	8	12	16	16
Number of Open Reports						
<i>Benchmark (less than)</i>	13,000	13,000	13,000	13,000	8,000	8,000
<i>Actual</i>	6,444	6,621	6,087	5,871	6,562	6,695
Number of Out-of-Home Children						
<i>Benchmark (less than)</i>	16,471	16,142	15,819	15,503	15,192	14,889
<i>Benchmark (% reduction)</i>	2%	2%	2%	2%	2%	2%
<i>Actual</i>	16,316	15,744	15,139	14,869	14,241	14,209

**Footnotes**

- Number of open reports is the actual figure as of the Monday before the legislatively required reporting period based on the automated report run. Due to the
- Number of inactive cases is the actual figure as of the Monday before the legislatively required reporting period based on the automated report run. Due to
- Out-of-home population figures are directly from the Monthly Out-of-Home Care run for the Monthly Outcome and Operational Report (MOOR) which is a lagging 60 day metric.

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Table 2 – Headcount and Caseload Performance

Region	Section #	March 31, 2016 Baseline			Quarter 1 FY 2019							Quarter 2 FY 2019								
		Workload			FTE		Workload					FTE		Workload						
		# Open Reports (investigations)	# of In home cases	# of Out-of-Home Children	Investigators	Case Managers	# Open Reports (investigations)	# of In home cases *	# of Out-of-Home Children	Investigation (reports per worker)	In Home (cases per worker)	Out of Home (children per worker)	Investigators	Case Managers	# Open Reports (investigations)	# of In home cases	# of Out-of-Home Children	Investigation (reports per worker)	In Home (cases per worker)	Out of Home (children per worker)
10 - Central	0, 1	576	0	601	17	17	181		488	10		28	18	18	172		464	9		26
	2	834	0	688	19	19	185		506	10		26	21	21	159		507	8		24
	3	1005	0	542	19	19	242		682	13		35	17	17	276		659	16		38
	4	17	495	111		38	15	380	16	0	10	0		39	27	557	35	1	14	1
	5	1423	0	615	18	18	244		455	13		25	18	18	261		446	14		25
	6	1236	0	824	17	17	270		389	16		23	19	19	314		391	17		21
	7	1786	0	913	19	19	252		572	13		29	20	20	284		538	14		27
	8	1493	0	663	20	20	363		614	18		31	18	18	308		615	17		33
	9	1522	0	775	17	17	273		476	16		29	19	19	224		453	12		24
	10	2	0	1520		39	0		1423	0		36		40	---		1369	0		34
20-Pima	1	980	49	342	17	22	171	31	224	10	1	10	17	21	196	24	237	12	1	11
	2	227	27	398	11	22	151	32	342	13	1	16	11	21	121	40	356	11	2	17
	3	132	18	370	10	18	97	28	283	10	2	15	11	21	131	26	303	12	1	14
	4	126	19	313	9	17	173	22	145	19	1	8	9	18	183	19	135	19	1	7
	5	599	39	164	10	18	142	0	211	15	0	11	10	19	152	0	211	15	0	11
	6, 0	7	0	555	12	23	5	0	570	0	0	25	12	23	0	0	472	0	0	20
	7	326	53	379	12	23	174	33	252	15	1	11	11	22	142	34	248	12	2	11
	9	174	15	312	11	20	146	41	193	14	2	9	11	22	165	45	215	15	2	10
	10	82	0	340	0	5	1	0	71	0	0	14	0	4	0	0	71	0	0	18
	30- Northern	1	266	---	398	14	14	239	22	230	17	2	16	14	14	188	8	252	13	1
2		127	---	188	10	10	72	12	317	7	1	31	11	11	56	15	158	5	1	15
3		200	---	220	10	10	147	17	159	14	2	16	10	10	133	38	161	13	4	16
4		176	---	399	11	11	79	21	276	7	2	25	13	13	91	33	286	7	2	21
5, 00		198	---	132	10	10	111	13	290	11	1	29	11	11	88	16	429	8	2	40
40- Southeast	1	254	30	245	5	9	71	19	118	15	2	13	5	9	133	18	114	27	2	12
	2	645	34	169	7	14	48	16	184	7	1	13	7	14	55	20	174	8	1	13
	3	383	14	119	3	6	55	7	78	17	1	13	4	7	44	18	94	13	3	14
50- Southwest	0, 1	483	0	4	24		1		4	0		0	21		1		7	0		0
	3	44	---	101		39	20	383	73	1	10	2		37	21	536	30	1	14	1
	4	937	0	774	20	20	313		570	16		29	20	20	316		573	15		28
	5	1999	0	839	19	18	300		547	16		30	19	19	270		568	14		29
	6	1558	0	584	20	22	270		419	14		19	19	19	358		440	19		24
	7	614	0	804	21	21	162		628	8		30	20	20	199		567	10		29
	8	0	0	1667		38	3		1137	0		30		43			1172	0		27
	9	347	0	418	16	17	168		377	10		22	14	14	145		381	10		27
	12	953	0	670	18	20	305		535	17		27	19	19	354		569	18		29
	13	597	0	713	19	17	220		373	11		22	19	19	184		384	10		20
105, 106 - Other	various	370		48	81		893		14	11		90		944		4691	10			
Totals		22,698	793	18,917			6,562	1,077	14,241					6,695	1,447	14,209				

Footnotes

- FTE reporting for March 31, 2016: The process of reporting FTE, in particular the specific section assignment of trainees, was not yet established in March 2016. As a result, the FTE counts for that period are not available since they do not match the information on the total number of filled FTE positions as is required by the monthly hiring report.
- Number of open reports is the actual figure as of the Monday before the legislatively required reporting period based on the automated report run.
- As of the Q1 FY2019, Specialists in a trainee status are accounted for in FTE figures in each section with an equal distribution of 66% caseload.
- Out-of-home population figures are directly from the Monthly Out-of-Home Care run for the Monthly Outcome and Operational Report (MOOR) which is a lagging 60 day metric.
- In Home cases are based on a handcount of cases actively managed in each respective Region. March 2016 values for Northern Region are not available given that the Region counted the number of children and not the number of cases.
- In Home case figures were not handcounted in Southwest Region in March 2016. The handcount only included total child count.
- In Home cases assignments differ Regionally. Central and Southwest Regions employ specific in-home units who manage in-home cases only, while Northern, Pima and Southeast Regions have mixed units that may carry in-home or out-of-home cases.
- FTE assignments to investigations or case management are based on assignment of 50% investigative and 50% ongoing in Central, Northern and Southwest Regions. Pima and Southeast Regions employ a distribution of 34% Investigations and 66% ongoing.
- \* In-Home data for Pima Region in Q1 FY2019 was updated in Q2 FY2019 to reflect case count rather than kid count.