DEPARTMENT OF CHILD SAFETY

Quarterly Progress Report
(Filling FTE Positions and Reducing the Inactive)
March 2019

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. During the second and third quarters of FY19, the Department began developing roles and responsibilities for supervision coaches, developing the standard work, filling coaching positions and developing training.

During the current quarter, DCS began implementing a hiring selection process and interview guide for new field supervisors and has standardized onboarding and on the job training experience for new field supervisors. Additionally, the Department has been building a training outline and related materials to create a curriculum and exam for new supervisors.

The Department has been evaluating and working to improve the organizational design that supports ongoing coaching to supervisors and Program Managers (PM) in the elements of the practice model and problem solving. DCS also developed new position description and standard work for Supervision Coaches that will support practice fidelity. 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 has developed multiple partnerships with local colleges and universities to attract potential candidates for employment. DCS continues to attend job fairs including the ASU School of Social Work Career Fair; 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 February 2019, the Department filled 1,304 (93 percent) of the 1,406 funded positions. DCS funds 236 supervisor positions, 223 (95 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 2017 through CY 2019 to date, along with hiring targets. These targets were established against historically observed attrition rates.

Chart 1 – DCS Specialist Hires and Target Trends
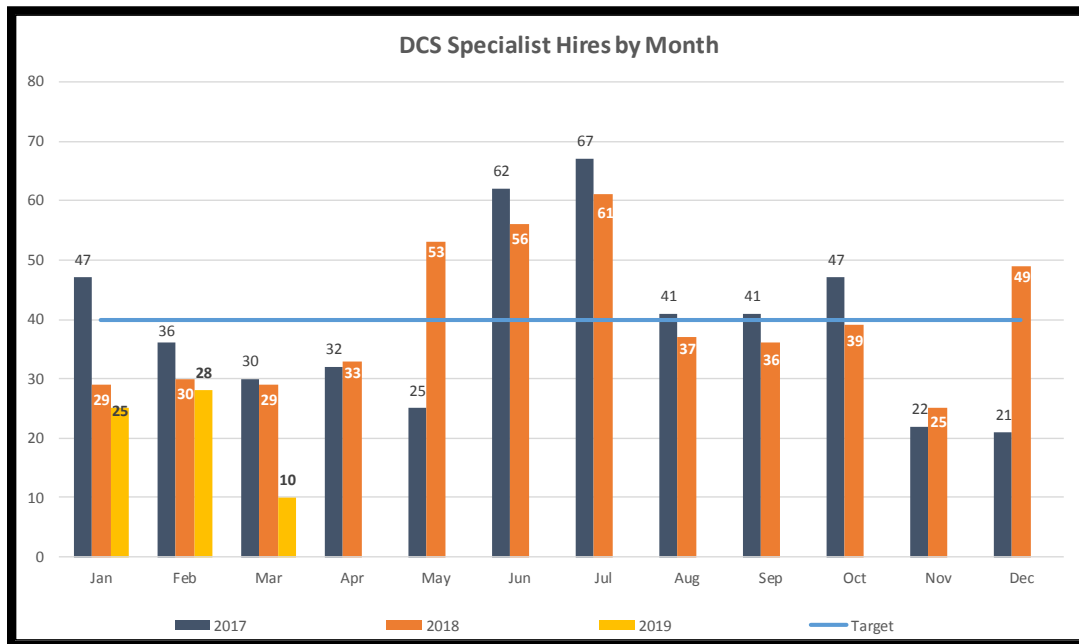
*Data has been updated from prior reporting periods. March data will be updated in future reports as this report is required prior to the end of the reporting period.

Chart 2 shows the Department's reduction in turnover for all employees for CY 2017 through CY 2019.

Chart 2 – All DCS Employee Attrition Trends
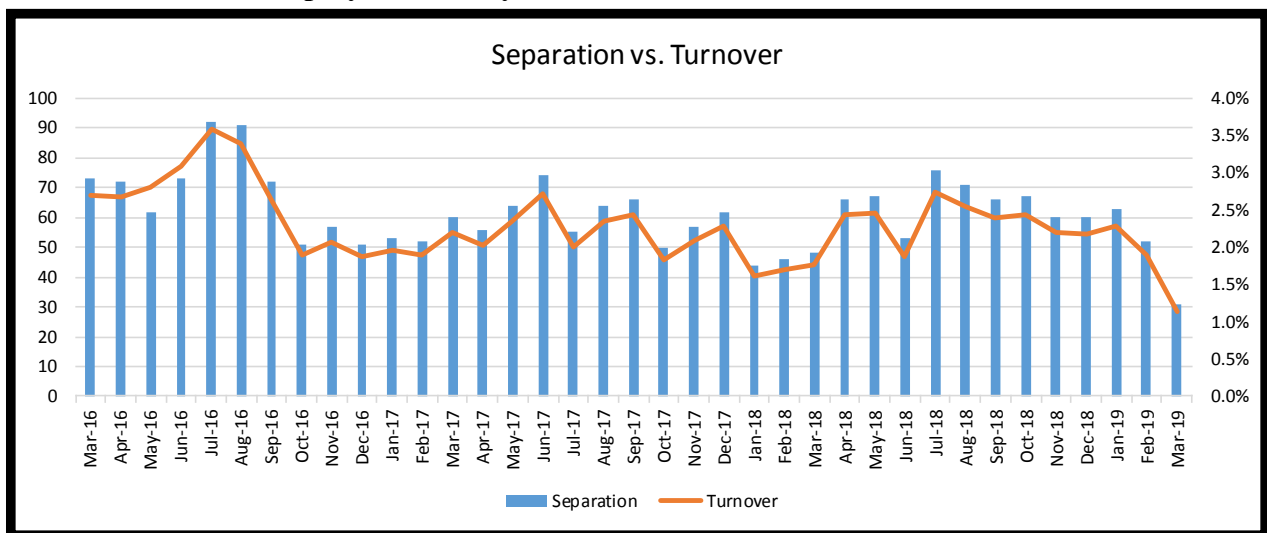

ALL DCS Employee Attrrition
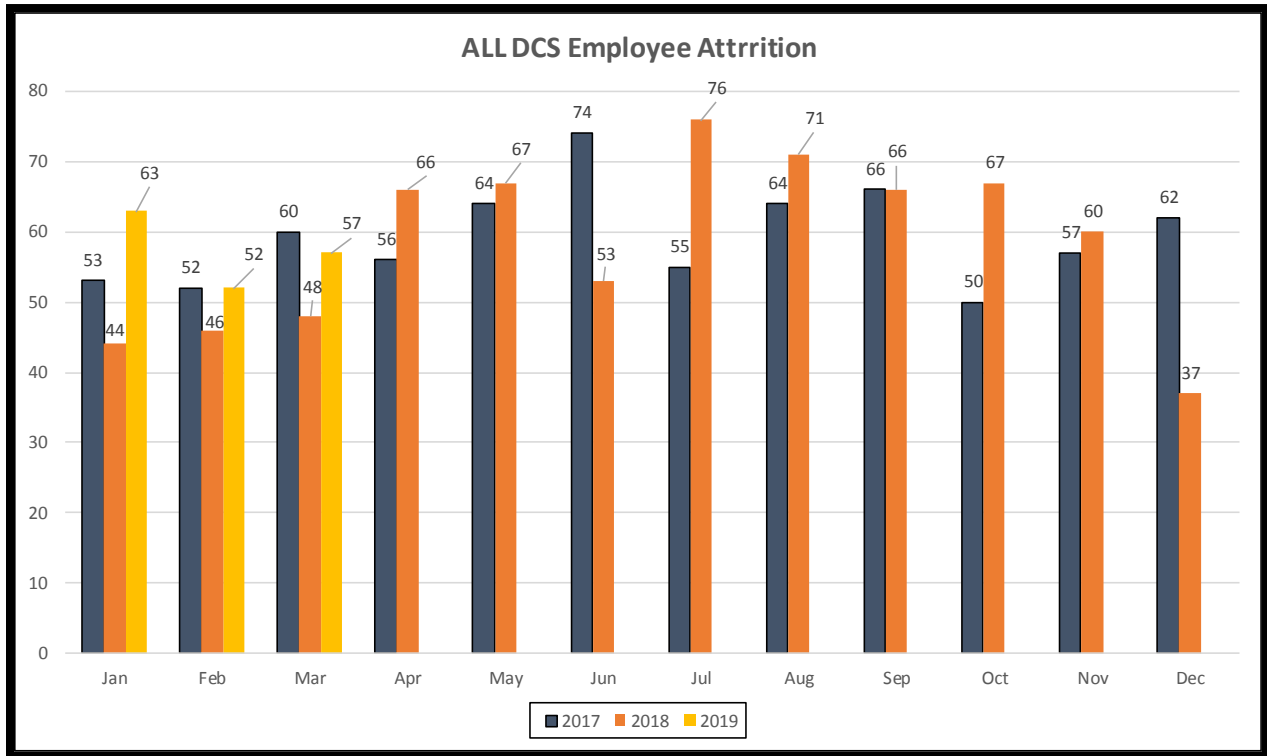
*DCS Employee Attrition for March 2019 will be updated in the next quarterly report.

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

Separation vs. Turnover

*March 2019 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 6,554 in March 2019. The Department has experienced a stabilization in the number of open reports where is 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 355 inactive cases as of March 18, 2019, 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 6,554 as of March 2019, 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 third quarter of SFY 2019, the Department reduced the out-of-home foster care population by 2.6 percent (368 children) from the previous quarter (see Table 1). The progress made since the baseline period of March 31, 2016 (18,917 children) is a 27 percent reduction (5,076 children) to the current number of children in out-of-home care (13,841).

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 highlighted by no significant change in the re-entry rate for children who left care within the past 12 months. The entry rate per 1,000 of Arizona's general population was 4.7 in February 2019. 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 contributes 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.

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

		Q3FY17	Q4FY17	Q1FY18	Q2FY18	Q3FY18	Q4FY18	Q1FY19	Q2FY19	Q3FY19
Backlog Cases										
	Benchmark (less than)	4,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000	1,000
	Actual	746	354	212	265	176	225	183	302	355
Backlog Case by disposition										
	Investigation Phase	633	222	125	165	84	115	74	188	227
	In-Home Cases	99	111	77	89	84	98	93	98	112
	Out-of-Home Cases	14	21	10	11	8	12	16	16	16
Number of Open Reports										
	Benchmark (less than)	---	13,000	13,000	13,000	13,000	13,000	8,000	8,000	8,000
	Actual	6,610	5,644	6,444	6,621	6,087	5,871	6,562	6,695	6,554
Number of Out-of-Home Children										
	Benchmark (less than)	17,150	16,807	16,471	16,142	15,819	15,503	15,192	14,889	14,591
	Benchmark (% reduction)	2%	2%	2%	2%	2%	2%	2%	2%	2%
	Actual	17,174	16,917	16,316	15,744	15,139	14,869	14,241	14,209	13,841

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 holidays, this quarter the report was

- 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 the holidays, this quarter the report was

- 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.

Table 2 – Headcount and Caseload Performance

Region	Section #	March 31, 2016 Baseline # Open Reports (investigations)	# of In home cases	# of Out-of-Home Children	Q2 FTE Investigators	Q2 FTE Case Managers	Q2 # Open Reports (investigations)	Q2 # of In home cases	Q2 # of Out-of-Home Children	Q2 Investigation (reports per worker)	Q2 In Home (cases per worker)	Q2 Out of Home (children per worker)	Q3 FTE Investigators	Q3 FTE Case Managers	Q3 # Open Reports (investigations)	Q3 # of In home cases	Q3 # of Out-of-Home Children	Q3 Investigation (reports per worker)	Q3 In Home (cases per worker)	Q3 Out of Home (children per worker)
10 - Central	0, 1	576	0	601	18	18	172		464	9		26	17	17	197		477	11		27
	2	834	0	688	21	21	159		507	8		24	18	18	145		457	8		25
	3	1005	0	542	17	17	276		659	16		38	19	19	327		585	17		31
	4	17	495	111		39	27	557	35	1	14	1		37	33	562	24	1	15	1
	5	1423	0	615	18	18	261		446	14		25	20	20	229		414	12		21
	6	1236	0	824	19	19	314		391	17		21	20	20	292		362	15		18
	7	1786	0	913	20	20	284		538	14		27	20	20	270		498	14		25
	8	1493	0	663	18	18	308		615	17		33	16	16	447		567	27		34
	9	1522	0	775	19	19	224		453	12		24	17	17	208		498	12		30
	10	2	0	1520		40	---		1369	0		34		42	---		1484	0		35
20-Pima **	1	980	49	342	17	21	196	24	237	12	1	11	16	20	181		223	11		11
	2	227	27	398	11	21	121	40	356	11	2	17	11	21	125		248	11		12
	3	132	18	370	11	21	131	26	303	12	1	14	9	18	133		269	14		15
	4	126	19	313	9	18	183	19	135	19	1	7	7	13	211		141	31		11
	5	599	39	164	10	19	152	0	211	15	0	11	20	10	161		187	8		18
	6, 0	7	0	555	12	23	0	0	472	0	0	20		31	7		537			17
	7	326	53	379	11	22	142	34	248	12	2	11	9	17	180		215	21		13
	8												7		102			15		
	9	174	15	312	11	22	165	45	215	15	2	10	11	20	170	6	244	16	0	12
	10	82	0	340	0	4	0	0	71	0	0	18	0	29	8	196	149	0	7	5
30- Northern	1	266	---	398	14	14	188	8	252	13	1	18	12	12	201	38	283	16	3	23
	2	127	---	188	11	11	56	15	158	5	1	15	11	11	60	12	192	5	1	17
	3	200	---	220	10	10	133	38	161	13	4	16	6	12	78	---	138	13	---	12
	4	176	---	399	13	13	91	33	286	7	2	21	8	15	119	39	320	15	3	21
	5, 00	198	---	132	11	11	88	16	429	8	2	40	7	14	66	8	448	9	1	32
40-Southeast **	1	254	30	245	5	9	133	18	114	27	2	12	1	2	9	5	56	7	2	23
	2	645	34	169	7	14	55	20	174	8	1	13	3	6	2	30	180	1	5	29
	3	383	14	119	4	7	44	18	94	13	3	14	5	5	69	20	103	14	4	21
50- Southwest	0, 1	483	0	4	21		1		7	0		0	18		1		1	0		0
	3	44	---	101		37	21	536	30	1	14	1	2	39	33	617	35	17	16	1
	4	937	0	774	20	20	316		573	15		28	19	19	273		533	14		27
	5	1999	0	839	19	19	270		568	14		29	17	17	277		476	16		27
	6	1558	0	584	19	19	358		440	19		24	17	17	307		390	18		22
	7	614	0	804	20	20	199		567	10		29	21	21	252		592	12		28
	8	0	0	1667		43			1172	0		27		42			1258	0		30
	9	347	0	418	14	14	145		381	10		27	13	13	153		285	12		22
	12	953	0	670	19	19	354		569	18		29	18	18	310		534	17		29
	13	597	0	713	19	19	184		384	10		20	17	17	137		373	8		22
									4691	10										
105, 106 - Other	various	370		48	90		944		125	10			69		781		65	11		
Totals		22,698	793	18,917			6,695	1,447	14,209						6,554	1,533	13,841			

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 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 activitly 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 Soutwest 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 Northen, 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 and certain Northern Region sections 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.
- As of Q1 FY2019, Specialists in a trainee status are accounted for in FTE figures in each section with an equal distribution of 66% caseload.
** As of Q3 FY2019, DCS began realignment of regional offices. Select units from the Southeast Region have been moved to Pima Region which includes assigning these to Section 9 and the previously inactive Section 8. Additionally, Northern Region changes include reassigning Section 03 in home cases to Section 01.