Arizona Department of Child Safety
Caseworker Caseload Standards

Best practice for caseload standards is evolving, and Department does not use caseload standards to manage caseworker workloads; instead, it moves cases or caseworkers in an effort to balance caseworker workloads, overseeing these efforts through management reviews.
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July 31, 2020

Members of the Arizona Legislature

The Honorable Doug Ducey, Governor

Mr. Michael Faust, Director
Arizona Department of Child Safety

Transmitted herewith is a report of the Auditor General, *A Special Report of the Arizona Department of Child Safety—Caseworker Caseload Standards*. This report is in response to Laws 2018, Ch. 282, §1, and was conducted under the authority vested in the Auditor General by Arizona Revised Statutes §41-1279.03. I am also transmitting within this report a copy of the Report Highlights to provide a quick summary for your convenience.

The Arizona Department of Child Safety has provided a brief response to the report.

My staff and I will be pleased to discuss or clarify items in the report.

Sincerely,

Lindsey Perry, CPA, CFE
Auditor General
Arizona Department of Child Safety
Caseworker Caseload Standards

Best practice for caseload standards is evolving, and Department does not use caseload standards to manage caseworker workloads; instead, it moves cases or caseworkers in an effort to balance caseworker workloads, overseeing these efforts through management reviews.

Audit purpose
To assess the Department’s process for determining caseworker caseload standards and compare the Department’s caseload standards with best practices and other states’ caseload standards.

Key findings
- The Child Welfare League of America (CWLA) has historically recommended using caseload standards to help manage caseworker workloads, and child welfare agencies in many states have adopted them. However, the CWLA reported it is moving away from a focus on numerical caseload standards and is instead developing outcome-based workload standards.
- Although reports we reviewed cautioned against comparing caseload standards across jurisdictions because requirements and practices vary, we provide information on caseload standards in 6 states. For example, in accordance with a consent decree, Illinois’ caseload standards are no more than 12 to 15 new investigations per month per investigator, 25 families per caseworker providing services to children in foster care, and 20 families per caseworker providing follow-up services to intact families. As specified by state law, Indiana’s caseload standards are no more than 12 active investigations, 13 children receiving ongoing services in out-of-home placements, and 12 families receiving in-home services.
- The Department does not use caseload standards to establish maximum caseloads for its caseworkers but instead has implemented practices to move cases or caseworkers within the field in an effort to balance caseworker workloads, a process the Department refers to as “equalization.”
- The Department oversees equalization through ongoing management reviews.
- As part of these reviews, the Department uses scorecards for each region and section that included up to 37 performance metrics in fiscal year 2020 related to caseworkers, quality, service level, cost, and process adherence.
- The Department believes its equalization and oversight practices are in line with the CWLA’s new direction and has reached out to the CWLA to share its practices.

Key recommendations
There were no recommendations for this report.
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This report addresses the Arizona Department of Child Safety’s (Department) process for determining caseworker caseload standards and a comparison of the Department’s caseload standards with best practices and other states’ caseload standards, as required by Laws 2018, Ch. 282, §1. A second report will address our assessment of the reliability of the data used to report caseloads in public Department reports, as required by the same law. This second report will be published by December 31, 2020.

Managing child welfare caseloads and workloads is important, and various strategies exist for doing so

According to a 2016 issue brief from the Child Welfare Information Gateway, maintaining manageable child welfare caseloads and workloads has many benefits, including providing caseworkers the time needed to engage families and deliver quality services, achieving positive outcomes for children and families, helping retain caseworkers who may leave as a result of feeling overworked, and supporting worker attitudes and well-being.1 The issue brief identifies broad strategies for managing caseloads and workloads, including:

- Enhancing work processes and supports, such as consolidating requirements and processes, using tools and technology to increase work efficiency, and allowing for alternative work schedules and telecommuting.
- Implementing program, practice, and system changes, such as evidence-based practices, prevention and early intervention services, and continuous quality improvement, and developing positive organizational cultures and climates.
- Addressing staffing needs, such as relocating or adding caseworker positions, recruiting and retaining caseworkers to reduce vacancies, using competency-based hiring practices, developing specialized and support staff, and using teams to manage more challenging cases.
- Improving worker effectiveness, such as providing training, ongoing support, and supervision.

In addition, as discussed in Chapter 1 (pages 4 through 6), some child welfare agencies have implemented caseload standards that limit the number of cases assigned to a caseworker to help reduce caseloads and workloads.

Key terms for this report

**Caseload**—The number of individuals (usually counted as children or family units) for whom a caseworker is responsible, expressed as a ratio of individuals to caseworkers. Caseloads may be measured for an individual caseworker, all caseworkers assigned to a specific type of case, or all caseworkers in a specified area.

**Caseload standard**—The maximum number of cases for which a caseworker should be responsible.

**Workload**—The amount of work required to successfully manage a case and bring it to resolution based on the responsibilities assigned to complete a specific task or set of tasks for which the caseworker is responsible. Workload reflects the average time it takes a caseworker to (1) do the assigned tasks and (2) complete other noncasework responsibilities.

Source: Auditor General staff review of definitions from the Child Welfare League of America and the Child Welfare Information Gateway.

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Department is appropriated 1,406 caseworkers assigned to investigative, ongoing, in-home, or other specialized casework throughout the State

The Department is appropriated 1,406 DCS specialist (caseworker) positions.\(^2\) According to the Department’s Monthly Operational and Outcome Report, as of April 2020, 1,329 of these positions, or approximately 94.5 percent, were filled.

The Department assigns caseworkers to units that specialize in specific types of casework. Most caseworkers are assigned to units that work investigative, ongoing, or in-home cases (see textbox).\(^3\) Some caseworkers perform other types of specialized casework, such as working the Department’s intake hotline to receive reports of suspected abuse/neglect or within the Department’s Placement Administration, which helps identify placements for children in Department care. Additional examples include caseworkers who specialize in adoption or the Young Adult Program.\(^4\)

Generally, units include about 6 caseworkers overseen by a supervisor. The Department groups units into larger organizational tiers called sections based on geographic location and/or function. For example, a section may comprise several in-home units or a mix of investigative and ongoing units. Sections include between 4 to 8 units overseen by program managers.

The Department groups sections into its largest organizational tiers called regions. Regions are organized geographically, as shown in Figure 1 on page 3. As of July 2020, regions included 4 to 10 sections overseen by program administrators who reported to the Deputy Director of Field Operations.

Figure 1 also shows that the Department had 215 case-carrying units, 35 sections, and 5 regions. In addition to these case-carrying units, the Department had 12 units and 2 sections for the hotline and 6 units and 1 section for Placement Administration.

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\(^2\) The 1,406 caseworker positions do not include Office of Child Welfare Investigations (OCWI) positions. According to the Department’s Monthly Operational and Outcome Report, OCWI had 94 filled positions as of April 2020.

\(^3\) Some units, particularly in rural areas, have mixed units that perform 2 or more types of casework.

\(^4\) The Department’s Young Adult Program provides services to assist teens and young adults in the Department’s care to develop the skills and competencies necessary to successfully transition to adulthood. Services can include financial assistance as well as assistance with healthcare, housing, education, life skills, and other supports that help a youth successfully transition into adulthood.
Figure 1

Department regions and the number of case-carrying sections and units per region
As of July 2020

South Region
10 sections

- 5 units
- 6 units
- 5 units
- 7 units
- 6 units
- 6 units
- 4 units
- 6 units
- 6 units
- 5 units

Maricopa West Region
9 sections

- 4 units
- 8 units
- 8 units
- 7 units
- 8 units
- 8 units
- 8 units
- 8 units
- 8 units

Maricopa East Region
8 sections

- 6 units
- 7 units
- 6 units
- 7 units
- 7 units
- 6 units
- 6 units
- 7 units

Northeast Region
4 sections

- 4 units
- 4 units
- 6 units
- 7 units

Northwest Region
4 sections

- 5 units
- 6 units
- 5 units
- 5 units

Source: Auditor General staff analysis of Department-provided information.
Best practice around use of caseload standards is evolving

**LEGISLATIVE REQUEST:** Compare the Department’s caseload standards with best practices and other states’ caseload standards.

**CONCLUSION:** The Child Welfare League of America (CWLA) historically recommended using caseload standards to help manage caseworker workloads, and child welfare agencies in many states have adopted them. Specifically, the CWLA recommended that child welfare agencies develop their own specific caseload standards but provided recommended standards that agencies could follow until they did so. Child welfare agencies in many states have either adopted the CWLA’s recommended caseload standards or developed their own. However, the CWLA reported that workload studies used by child welfare agencies to establish caseload standards for their jurisdictions have not accounted for all the variables that affect workload. According to a 2018 CWLA report, “[t]he field needs to move past establishing blanket caseload standards that do not take into account the complexities of workload.” For these reasons, the CWLA reported it is moving away from a focus on numerical caseload standards to outcome-based workload standards and creating a methodology for managing them. As discussed in Chapter 2 (see pages 7 through 10), the Department does not use caseload standards to establish maximum caseloads but instead has implemented practices to move cases or caseworkers in an effort to balance caseworker workloads.

CWLA historically recommended using caseload standards, and child welfare agencies in many states have adopted them

For many years, the CWLA—a coalition of hundreds of private and public agencies that provides best practices on policies, programs, and practices related to child welfare—recommended that child welfare agencies use caseload standards to help manage caseworker workloads. The CWLA recommended that child welfare agencies develop their own specific caseload standards but provided recommended standards that these agencies could follow until they did so. The CWLA’s recommended standards are no more than 12 active investigative cases per caseworker per month, 12 to 15 children receiving family foster care per caseworker, or 17 families receiving in-home services per caseworker. Based on our review of relevant literature, the CWLA’s recommended caseload standards have been cited by various organizations, state auditors and researchers, the U.S. Government Accountability Office, and the U.S. Department of Health and Human Services. Scholars have promulgated them as well.

Child welfare agencies in many states have either adopted the CWLA’s recommended caseload standards or developed their own (see textbox, pages 5 through 6, for examples). According to the Child Welfare Information Gateway, agencies have adopted caseload standards for various reasons, including but not limited to complying with state law, efforts to meet CWLA standards, and negotiations with unions representing child welfare workers. Additionally, some child welfare agencies have established caseload standards as part of consent decrees that mandated them to address workload issues. In a 2018 report, the CWLA analyzed the consent decrees for 22 states and the District of Columbia and found that each of these jurisdictions had established caseload standards and
that many of them were mandated through consent decree to adhere to CWLA and Council on Accreditation caseload standards.5,6

However, some reports we reviewed cautioned against comparing caseload standards across jurisdictions. For example, according to a 2017 child welfare system evaluation by the Idaho Legislature Office of Performance Evaluations, “[b]ecause workload factors vary from state to state, the maximum recommended caseloads may be appropriate in one state but excessive in another.”7 A 2014 Colorado child welfare county workload study similarly noted that it is difficult to make direct comparisons of workload and caseload standards among states because state requirements and practices vary.8 Further, the 2018 CWLA report stated that “…there is no tested and universally accepted formula for determining workload caseload standards.”9 It also noted that there is not a standard way to define a “case” across jurisdictions and that variance in whether a case represents a child or family (with potentially several children) impacts the ability to establish a clear national standard or formula.

Examples of states with caseload standards1

**Alabama**—In response to a consent decree, Alabama’s Administrative Code provides specific caseload standards.2 For example, the standards require 1 investigation worker for every 8 child sexual abuse reports, 1 worker for every 10 child abuse/neglect reports where children enter foster care, and 1 worker for every 12 child abuse/neglect reports that do not fall within the other 2 categories. The standards also require 1 worker for every 18 open family services cases and 1 worker for every 18 children in foster care.

**Delaware**—Delaware state law requires its General Assembly to ensure that there is an adequate number of child protection investigation workers so that regional caseloads do not exceed 11 cases per fully functioning worker and an adequate number of child protection treatment workers so that regional caseloads do not exceed 18 cases per fully functioning worker.3 The law further states that if regional caseloads exceed these standards, Delaware’s Office of Management and Budget shall, to the extent monies are available, authorize the use of seasonal employees to ensure caseloads remain within standards.

**Illinois**—In accordance with a consent decree, Illinois child protective services investigators are to have no more than 12 new abuse or neglect investigations per month during 9 months of a calendar year.4 During the other 3 months, investigators should be assigned no more than 15 new abuse or neglect investigations per month. Similarly, follow-up caseworkers responsible for services to children in foster care should be assigned a maximum of 25 families per caseworker. For caseworkers providing follow-up services to intact families, caseloads should not exceed 20 families per caseworker.

**Indiana**—In 2019, Indiana law was revised to update the state’s caseload standards. Specifically, Indiana changed its standards from no more than 12 active investigation cases and no more than 17 children receiving ongoing services (either in-home or out-of-home) to no more than 12 active investigation cases, 13 children receiving ongoing services in out-of-home placements, and 12 families receiving in-home services.

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6 The Council on Accreditation (COA) is an accrediting body that promotes best practice standards for child welfare, behavioral health, and community-based human and social service providers. Organizations seeking COA accreditation must apply and demonstrate implementation of COA best practice standards. COA’s public child welfare caseload standards are similar to the CWLA’s recommended standards. For example, according to COA, caseloads per caseworker should not exceed 12 active investigations at a time, including no more than 8 new investigations per month; 15 to 17 families receiving ongoing in-home services; and 12 to 15 children in out-of-home care and their families. Blended caseloads should be weighted and adjusted appropriately. COA’s standards are designed to support reasonable workloads by ensuring caseloads are regularly reviewed. COA acknowledged that caseload limits may be exceeded in some circumstances and evaluates agencies’ caseloads standards in relation to client outcomes and worker capacity. To review the full text of COA’s caseload sizes for public child welfare agencies, visit: https://coanet.org/standard/pa-cfs/2/09/.
CWLA reported it is moving away from an emphasis on caseload standards and plans on using a workload-based approach

The CWLA reported that it is moving away from an emphasis on numerical caseload standards to outcome-based workload standards and creating a methodology for managing workloads. According to the CWLA, workload studies used by child welfare agencies to establish caseload standards for their jurisdictions have not accounted for all the variables that affect workload. The 2018 CWLA report identified 32 variables that affect workloads, such as regional factors affecting case volumes, the age and needs of children in care, service gaps in communities, caseworker competency, and agency policies. According to the report, “[t]he field needs to move past establishing blanket caseload standards that do not take into account the complexities of workload.” The report also observed that “[t]here is general agreement that caseload standards that neither take into account actual workload nor are tied to child and family outcomes are not particularly useful for agency-level or supervisory decision-making.”

For these reasons, the CWLA reported it is revising its approach to reflect the latest research, changes in the way casework is done, increased requirements, and the ongoing challenges of workload-related issues. According to the CWLA, the revised approach will address the need for a new framework that takes all of these factors into account and identifies a methodology for determining acceptable workloads and staffing levels tied to achieving improved outcomes for children and families. As of May 2020, the CWLA reported it was in the process of conducting its research and gathering data to develop the new framework.

Department does not use caseload standards to manage workloads and instead moves cases or caseworkers and monitors performance metrics to oversee these efforts

**LEGISLATIVE REQUEST:** Assess the Department’s process for determining caseworker caseload standards.

**CONCLUSION:** The Department does not use caseload standards to establish maximum caseloads for its caseworkers but instead has implemented practices to move cases or caseworkers in an effort to balance caseworker workloads. The Department calls these practices “equalization,” and they involve both (1) short-term, day-to-day decisions to move cases when the Department determines it is necessary and (2) long-term decisions to move caseworker positions to address changing needs. The Department oversees these efforts through ongoing management reviews of specific performance metrics reported through region and section scorecards, which are visual tools used to manage and measure performance for a given fiscal year. The Department believes its equalization and oversight practices are in line with the CWLA’s new direction regarding caseload standards and caseworker workloads (see Chapter 1, page 6) and has reached out to the CWLA to share its practices with this organization.

Department does not use caseload standards but instead moves cases or caseworkers in an effort to balance caseworker workloads

Although Arizona caseload standards were previously developed, the Department’s leadership reported that they have never used them to manage workloads. According to the Department, these caseload standards were developed for budgetary purposes and are not effective for managing caseworker workloads because (1) the Department has a fixed number of appropriated caseworker positions and cannot limit the number of cases per caseworker when case volumes increase, and (2) caseload standards do not account for differences in case complexity, staff capabilities, rural versus urban areas, and mixed units that perform more than one type of casework.

Instead of using caseload standards to establish maximum caseloads per caseworker, the Department has implemented practices to move cases or caseworkers in an effort to balance caseworker workloads in order to achieve specific performance metrics (see pages 9 through 10 for more information about performance metrics). The Department calls these practices “equalization,” and they involve both (1) short-term, day-to-day decisions to...
move cases when the Department determines it is needed, and (2) long-term decisions to move caseworker positions to address changing needs. Specifically:

- **Short-term equalization decisions generally involve moving new cases from one unit or section to another**—The Department makes short-term equalization decisions, which typically involve moving new cases from one unit or section to another. According to Department policy and staff, the Department generally assigns investigative cases to a specific unit based on the zip code of the child’s primary caretaker, and the Department reported that it assigns ongoing cases to an available unit in the same section where the investigation occurred. According to the Department, in-home cases are assigned based on where the Department has in-home units. Per discussion with Department staff and our review of their internal reports, as cases are assigned, regional staff use data on case volumes and staffing levels to determine if units and sections have the staff resources to handle the cases. According to Department staff, if a unit or section does not have the staff resources to handle the cases, it should coordinate with other nearby units or sections to transfer the cases, and regional staff monitor this process and make adjustments as needed. Further, to avoid unnecessarily disrupting relationships between caseworkers and children and families, the Department reported that cases are moved at natural transition points in a case, such as when cases move from investigation to ongoing casework or when a case is already being transferred from one caseworker to another because of caseworker turnover.

Equalization allows for flexibility to move cases across units and sections, and this practice varies from region to region. Regions that cover more densely populated areas have more standardized approaches to short-term equalization decisions. For example, the Maricopa West Region creates specific reports on caseworker availability and new cases to inform decisions about moving cases among units and sections in the region. In comparison, the Department described using less standardized approaches in regions that cover rural areas because they generally have fewer cases and, thus, less need to equalize workloads. Additionally, the Department reported that the distances between field offices in rural regions may make transferring cases to balance workloads less effective because of the additional caseworker travel that might be involved.

- **Long-term equalization decisions involve moving or realigning caseworker positions**—The Department makes long-term equalization decisions that involve moving or realigning caseworker positions. According to the Department, these decisions occur less frequently and address changing populations and casework needs around the State. Long-term equalization decisions have involved the following:

  - **Reorganizing regions**—The Department reorganized its regions in June 2019 (see Figure 2, page 9). According to the Department, this reorganization was intended to increase work efficiency by reducing the need for caseworkers to navigate multiple court systems. As part of the reorganization, the Department moved areas that were not part of Maricopa County out of the 2 regions that cover Maricopa County and reorganized the rural regions with the goal of reducing the geographic coverage of some of the regions to reduce caseworker travel. The Department reported that these actions made its work more manageable.

  - **Realigning units and zip codes**—As stated previously, investigative cases are generally assigned based on the zip code of the child’s primary caretaker, and the Department aligns units with specific zip codes. Department leadership reported that as populations change throughout the State, caseload volumes also change. According to the Department, this requires a periodic realignment of units with zip codes to ensure investigative caseloads are balanced. The Department last realigned units with zip codes in Maricopa, Pima, and Pinal Counties in 2018.

  - **Moving caseworker positions**—The Department reported that it may move caseworker positions from one region to another to address challenges that result from changing long-term trends (as opposed to short-term fluctuations), such as population growth in specific areas. The Department reported that

12 Each region has a regional automation liaison who is responsible for gathering data to inform equalization decisions.

13 According to the Department, short-term equalization may also include temporarily reassigning staff from one unit or section to another to assist with casework.
caseworker positions are moved through attrition; as vacancies occur in the area where positions are being reduced, new staff are hired for areas where additional staff is needed.

**Figure 2**
June 2019 regional reorganization

Department oversees equalization through ongoing management reviews

Department management at all levels holds weekly and/or monthly meetings, which the Department reported help it to assess the effectiveness of its equalization practices. For example, in monthly meetings called business reviews, Department staff review region and section scorecards to discuss specific performance metrics (see textbox, page 10). As shown in the first 3 bullets of the textbox, these performance metrics include 3 metrics for investigative, ongoing, and in-home caseloads, and the Department has established targets for these caseload metrics that it uses to assess whether workloads are balanced. According to the Department, these targets are not the same as caseload standards but are points of reference for monitoring caseloads. Department leadership reported that these targets are based on averages and past experiences, and the Department does not expect that every caseworker will have the same number of cases. In addition, the Department expects that it will, at times, exceed its caseload targets because of changes in case volumes and staffing levels.

Further, the Department considers performance in other metrics—particularly those related to quality, service level, and process adherence—to assess the effectiveness of its equalization practices because it believes that underperformance in these areas might reflect workload imbalances regardless of whether the caseload targets are met. For example, a scorecard might show that a region has exceeded its ongoing caseload target for a given month but has still met the targets for other relevant metrics, such as making monthly visits to children and maintaining updated case plans. Such a scenario could indicate that the caseworkers are able to manage their workloads despite having relatively more cases.

Thus, from the Department’s perspective, missing caseload targets for a given month does not necessarily indicate a workload imbalance depending on the reason why the targets were missed and performance in other metrics. Rather, the Department looks for trends that indicate workload problems that should be addressed. For example, we observed a regional business review in which a section program manager explained that her section had struggled with the number and percentage of overdue investigations of child abuse or neglect because they had recently lost a caseworker but that another section had moved 2 caseworkers to the section to help move cases forward. In another business review, a regional program administrator explained that her region had struggled with its investigation caseloads for 6 months. The region’s scorecard also showed that it struggled with overdue reports of abuse and neglect during that same period. During this business review and in subsequent
As of June 2020, the region had developed a plan to move many positions among sections to balance workloads.

Region and section scorecards

Scorecards are a visual tool the Department uses to manage and measure agency performance metrics that are updated monthly over the course of a fiscal year. The Department maintains individual scorecards for each region and section. The Department’s fiscal year 2020 scorecards included up to 37 performance metrics related to people (i.e., caseworkers), quality, service level, cost, and process adherence. The Department established targets for many of the performance metrics, which the Department reported were based on federal requirements, Department policy, prior years’ performance, or professional judgment and experience. Some of the performance metrics and their related targets (where applicable) for fiscal year 2020 included:

<table>
<thead>
<tr>
<th>Metric</th>
<th>Description</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caseload investigations</td>
<td>The average number of reports per investigative caseworker.</td>
<td>15 reports per caseworker.</td>
</tr>
<tr>
<td>Caseloads ongoing</td>
<td>The average number of children per ongoing caseworker.</td>
<td>25 children per caseworker.</td>
</tr>
<tr>
<td>Caseloads in-home</td>
<td>The average number of children per in-home caseworker.</td>
<td>30 children per caseworker.</td>
</tr>
<tr>
<td>Percentage of open reports with a safety decision</td>
<td>The percentage of open reports where a caseworker has documented a decision about the safety of the children involved.</td>
<td>85 percent.</td>
</tr>
<tr>
<td>Percentage of overdue reports</td>
<td>The percentage of open reports that have been open 61 days or more.</td>
<td>12.5 percent.</td>
</tr>
<tr>
<td>Percentage of children exiting care to permanency within 12 months</td>
<td>The percentage of children who entered Department care 1 year ago and who exited care to permanency (e.g., reunification or adoption) within 12 months. This performance metric is monitored but does not have a target.</td>
<td></td>
</tr>
<tr>
<td>Percentage of children reentering care</td>
<td>The percentage of children who exited Department care in a rolling 6-month period and who reentered care. This performance metric is monitored but does not have a target.</td>
<td></td>
</tr>
<tr>
<td>Percentage of on-time responses</td>
<td>The percentage of abuse/neglect reports responded to within established time frames.</td>
<td>93 percent.</td>
</tr>
<tr>
<td>Percentage of child visitation</td>
<td>The percentage of children in Department care who received a monthly visit from their caseworker.</td>
<td>95 percent.</td>
</tr>
<tr>
<td>Percentage of parent visitation</td>
<td>The percentage of parents of children in Department care who received a monthly visit from their caseworker when required.</td>
<td>65 percent.</td>
</tr>
<tr>
<td>Percentage of on-time initial case plans for children in out-of-home care</td>
<td>The percentage of children who have been in Department care for 60 days or more and have an active case plan.</td>
<td>65 percent.</td>
</tr>
<tr>
<td>Percentage of case plans that are overdue and/or late</td>
<td>The percentage of case plans that are older than 6 months and/or are not created within 61 days of a case opening for services.</td>
<td>5 percent.</td>
</tr>
</tbody>
</table>

Source: Auditor General staff review of the Department’s fiscal year 2020 scorecards.

The Department believes its equalization and oversight practices are in line with the CWLA’s new direction regarding caseload standards and caseworker workloads (see Chapter 1, page 6) and has reached out to the CWLA to share its practices with this organization.
APPENDIX A

Objectives, scope, and methodology

The Arizona Auditor General has completed this special report of the Department pursuant to Laws 2018, Ch. 282, §1. We used various methods to meet the report’s objectives. Specifically, to review best practices regarding caseload standards and other states’ caseload standards, we:

• Reviewed best practice literature concerning caseload standards, including literature published by the Child Welfare League of America (CWLA) and the U.S. Department of Health and Human Service’s Child Welfare Information Gateway. We also interviewed a representative from the CWLA and representatives from Council on Accreditation (COA) and reviewed COA’s public child welfare caseload standards.

• Reviewed statutes, rules, policies, legal documents, reports, and/or information that other states provided to learn about their caseload standards. Specifically, we reviewed caseload standards in 6 judgmentally selected states: Alabama, Delaware, Illinois, Indiana, Maryland, and Virginia.¹⁴

To review the Department’s practices for balancing caseworker workloads instead of using caseload standards, we:

• Interviewed Department management and staff, including the 5 regional automation liaisons, and Joint Legislative Budget Committee (JLBC) staff.

• Reviewed applicable Department website information and other Department-provided documentation, including policies and procedures, reports, and region and section scorecards.

• Reviewed statute, session laws, baseline books, and JLBC appropriations reports to gain an understanding of the Department’s historical caseload standards.

• Observed multiple Department meetings, including 2 of the Deputy Director’s business reviews held in January and February 2020, 3 weekly accountability phone calls held in January 2020, 2 regional business reviews held in November and December 2019, and 5 unit and section meetings held in December 2019 and January 2020.

• Observed Department investigative, ongoing, and in-home caseworkers as they conducted their work in October and November 2019.

We express appreciation to the Department’s Director and staff for their cooperation and assistance throughout the audit.

¹⁴ We selected states that had caseload standards according to law, policy, and consent decree.
July 29, 2020

Ms. Lindsey Perry
Auditor General
Arizona Office of the Auditor General
2910 North 44th Street, Suite 410
Phoenix, Arizona 85018

Re: Auditor General Report – Caseworker Caseload Standards

Dear Ms. Perry:

The Arizona Department of Child Safety (Department) appreciates the opportunity to provide this response to the Auditor General’s report of the Department’s Caseworker Caseload Standards.

We are pleased you acknowledge the Department has implemented practices to move cases or caseworkers as needed to help manage workloads.

The collaborative effort of the Auditor General’s staff throughout this audit is valued and appreciated.

The Department would like to acknowledge the work of your staff throughout this audit and we look forward to our continued collaboration.

Sincerely,

Mike Faust
Director