

Legislative Audit Division

Caseload Management

Department of Public Health and Human Services

Performance Audit

September 2004

04P-09

Introduction In October 2002, the Legislative Audit Division (LAD) issued a performance audit report on child protective services (02P-02) administered by the Department of Public Health and Human Services (DPHHS). DPHHS officials believed a lack of resources to handle on-going caseloads was a cause for certain problems identified during the audit. The audit recommended the department's Child and Family Services Division establish a caseload tracking system to further analyze social worker activities and help establish division work priorities. The audit raised questions among legislators on how the department, as a whole, manages staff caseloads. As a result, the Legislative Audit Committee requested a department-wide review of DPHHS caseload management procedures.

Audit Scope Since DPHHS has eleven divisions administering a variety of services, the first decision in setting audit scope was to determine which divisions would be included in the caseload audit. To help guide this decision, we developed specific criteria divisions (or division programs) had to meet. Based on the criteria developed, the following divisions or programs were included in the audit.

- ▶ Child and Family services Division (CFSD)
- ▶ Child Support Enforcement Division (CSED)
- ▶ Public Assistance Bureau (PAB)
- ▶ Vocational Rehabilitation Program (VR)
- ▶ Developmental Disabilities Program (DD)
- ▶ Adult Protective Services Program (APS)

Some DPPHS Program Caseloads Increased While Others Decreased We analyzed caseload trends for each program for fiscal years 1997-98 through 2002-03. Our analysis found caseloads for some DPHHS programs increased while others decreased over the last six years. Some of our observations of caseload trends included:

- ▶ APS experienced the largest percentage increase (16.58 percent) in caseloads.
- ▶ CFSD (children in care) had the largest percentage decrease (9.54 percent) in caseloads.

- ▶ PAB's Food Stamp program had the greatest increase in number of cases (3,508).
- ▶ CSED experienced the largest decline in number of cases (1,084).

Caseworkers Believe Their Caseloads Have Increased Even though department data shows statewide caseloads for many programs have either declined or remained stable, a survey of DPHHS caseworkers noted the majority believe their caseloads have increased. In some instances, changes in case management requirements, such as a stricter federal or state law, give caseworkers the perception their caseloads have increased even though they may have declined or remained stable. In other instances, staff turnover, vacancy savings, and shifting state population increased caseloads for some caseworkers even though overall program caseloads may not have increased.

Department Programs Have Effective Case Management Audit work found CSED, PAB, VR and DD have effective methods for managing staff caseloads and workload. In general, program managers assess program caseload trends, verify the number of cases carried by caseworkers, measure workload associated with caseloads, prioritize workload activities, and reallocate program resources (i.e. staff) to where they are most needed.

Effective Methods Have Four Characteristics in Common The caseload management techniques used by these four programs are not the same, but they have four common characteristics. We note that in order for programs to effectively manage caseloads and workload, these four characteristics must exist. These include:

1. Detailed policies and procedures related to caseload management.
2. Information from federally required management information systems condensed into easier-to-use management reports.
3. Defined criteria and controls for closing cases.
4. Program management performing on-going assessment of program activities.

Audit work determined it is not necessary for programs to have new, potentially high-cost systems to enhance their ability to track and manage caseloads for their programs. For example, the programs we found with effective caseload management systems have achieved this by using existing computer applications. A major benefit of these systems is providing management with a low-cost alternative to analyze program resources and allocate them to areas of the state where they are most needed.

CFSD and APS Could Improve Caseload/Workload Management The department could improve how two programs, CFSD and APS, manage staff caseload and workload. These programs did not have sufficient policies and procedures related to caseload management, useful data to help program managers manage staff caseload and workload, or on-going assessment of program activities. National standards recommend programs like CFSD and APS have systems in place to track staff caseload and workload and make more informed decisions related to caseload distribution and staffing needs.

Over the last six years, CFSD and APS received increased funding for FTE (for both caseworkers and non-caseworkers). We were unable to determine whether the increases received by CFSD and APS were justified because neither program had quantifiable information showing the need for the additional resources.

DPHHS needs to develop an on-going process for department programs to share caseload/workload management ideas. CFSD and APS could use the process to develop better systems to manage caseloads. One way of doing this is for programs to develop management strategies on how caseloads should be managed and share information between programs. These strategies should be based upon the four elements of caseload management including: policies and procedures, useful management reports, case closure, and on-going management assessment of program activities.