**Children’s Services Social Work Caseloads**

At some point in time, social work caseloads have been a focus for all local authorities in an attempt to understand what constitutes a manageable caseload. Emphasis has been placed on identifying the ‘magic’ number – an appropriate and manageable caseload for social workers across their career pathway.

Research in this area, including a survey of ADCS members, has shown that identifying one single caseload figure which can be interpreted by local authorities and those at a national level as manageable would be arbitrary. A recent ADCS survey attempted to benchmark caseloads for senior practitioners, social workers and newly qualified social workers in four distinct service areas: early help; children in need; child protection; and children in care and identified only that what is manageable depends on the complexity of individual cases, the mix of cases in a caseload, and the availability of appropriate support. As local authorities continue to experience increased levels of demand for social care services and an ever shrinking resource base, new and innovative ways of working are being developed to ensure children, young people and their families receive the support they need to thrive. As services continue to innovate and integrate, judgements based on caseload numbers alone become even more unreliable.

The results of the survey showed that developing any benchmark is complex: there is huge variability across local authorities in the roles and remits of those responsible for children’s social work, and in the way in which services are organised and structured. These variations, along with the unique nature of each individual social care case, mean it is extremely complex to draw comparisons based on numbers alone.

Achieving manageable caseloads is much more than a numbers game. A range of factors need to be considered in the allocation process including the complexity of cases, levels of risk and the experience of the worker involved. As demand continues to increase, it is vital that social workers are able to access appropriate supervision, including support, guidance and training in order to ensure their caseloads are manageable.

**An overview of the results of the caseload management survey of ADCS members**

1. Directors of Children’s Services in all 152 authorities in England were asked to complete a survey about current caseloads of social work staff along with methods used to manage workload.
2. A total of 32 local authorities (21%) completed the survey and responses were received from authorities in all 9 regions. A number of authorities did not complete all of the questions in the survey, where this was the case, only the responses provided have been included in the analysis below.
3. The survey attempted to benchmark caseloads for senior practitioners, social workers and newly qualified social workers in the four distinct service areas of early help, children in need, child protection and children in care. It is apparent from the responses received that across local authorities, there is huge variability in these roles and the responsibilities assigned to them. There is also variability in the way local authorities organise these services, while some have distinct service areas with teams who carry caseloads, many local authorities have teams who span a combination of the four service areas and therefore teams have ‘mixed’ caseloads. This difference can be seen in the caseload numbers reported. Some local authorities have workers who work in one of the four areas and the caseload numbers reflect this, however others broken-down a mixed caseload and reported a figure for each of the four service areas, meaning these figures must be aggregated to get a complete picture of a caseload.
4. These variations, along with the unique complexity of each social care case, make it extremely difficult to draw comparisons and develop benchmarks when considering caseloads. There are numerous factors that must be taken into account when allocating caseloads such as the needs of the child(ren) and family, the complexity and associated risk, the experience of individual workers, the capacity of the workforce as a whole, the services available, and pathways for escalation and de-escalation. Given this, the results of the caseload management survey should be interpreted with these variations in mind.
5. The Department of Education (DfE) publish a statistical release on the children’s social work workforce. The most recent release was published on 25 February 2016 and provided details on the workforce as at 30 September 2015. It may be helpful to consider this release alongside the data from the ADCS survey.
6. **Caseloads held by senior practitioners**
   1. Early help

The majority of local authorities reported that senior practitioners did not work in early help services, however where senior practitioners were managing early help cases, the caseload varied from 5 to 25 cases. Senior practitioners in one local authority worked with 10 families while also having an overview of a number of other families (approximately 10) who were managed by universal service providers.

* 1. Children in need

Where senior practitioners were managing children in need cases, the caseloads ranged from 4 to 25 cases. Two local authorities did not have senior practitioners managing children in need cases. Two local authorities reported that their senior practitioner children in need caseloads were unmanageable, the caseload figures were 15 and 23.

* 1. Child protection

All but one local authority had senior practitioners with child protection caseloads, the number of cases held by an individual varied between 1 and 23 cases. Two local authorities reported that their senior practitioner child protection caseloads were unmanageable, again, the caseload figures were 15 and 23.

* 1. Children in care

All local authorities reported that their senior practitioners held children in care cases with caseloads varying between 3 and 25 cases. Four local authorities reported that their senior practitioner children in care caseloads were unmanageable, the caseload figures were 13, 15, 15 and the highest reported caseload of 25.

* 1. Mixed caseloads

A number of local authorities reported their teams held mixed caseloads containing a combination of cases from the different service areas. Mixed caseloads can be broken down as follows:

* Senior practitioners working with both children in need and child protection cases had caseloads that varied from 8 and 25. Two local authorities reported their senior practitioners mixed caseloads across these two services were unmanageable, the caseload figures were 10.3 and 25.
* Senior practitioners working with both child protection and children in care cases had caseloads that varied from 15 to 22. One local authority reported their senior practitioner caseloads across these two service areas were unmanageable, the figure was the highest reported at 22.
* Senior practitioners working with children in need, child protection and children in care cases had caseloads varying from 8 to 23. The local authority reporting a caseload of 23 suggested this was unmanageable.

1. **Caseloads held by social workers**
   1. Early help

Ten local authorities reported that social workers did not manage any early help cases, however where social workers were managing early help cases, their caseloads varied between 15 and 25. Two local authorities reported that their social workers managed families who were receiving early help services and both had an average caseload of 10 families (one indicated that these families were troubled families). One local authority reported that their social worker caseloads in early help services were unmanageable, this was the local authority who reported the lowest caseload level (15).

* 1. Children in need

The caseloads of social workers managing children in need cases varied from 10.6 to 31. Two local authorities reported that their social worker children in need caseload levels were unmanageable, these figures were 15 and 23.

* 1. Child protection

Social workers managing child protection cases had caseloads varying from 2 to 27. Two local authorities reported that their social worker child protection caseloads were unmanageable, these figures were 18 and 23.

* 1. Children in care

Social workers managing children in care cases had caseloads varying from 3.7 to 28. Five local authorities reported that their social worker children in care caseload levels were unmanageable, these figures were 13, 18, 18, 20 and 25.

* 1. Mixed caseloads

A number of local authorities reported their teams held mixed caseloads containing a combination of cases from the different service areas. Mixed caseloads can be broken down as follows:

* Social workers working with both children in need and child protection cases had caseloads that varied from 17 and 25. Three local authorities reported their social worker mixed caseloads across these two service areas were unmanageable, the caseload figures were 17, 24 and 25.
* Social workers working with both child protection and children in care cases had caseloads that varied from 15 to 21. One local authority reported their social worker mixed caseloads across these two service areas were unmanageable, the figure was the highest reported at 21.
* Social workers working with children in need, child protection and children in care cases had caseloads varying from 8 to 24. Two local authorities reported their social workers mixed caseloads across these three areas were unmanageable, the caseload figures were 18 and 21.

1. **Caseloads for newly qualified social workers**
   1. Early help

14 local authorities reported that newly qualified social workers (NQSW) do not manage early help cases or that this measure was not applicable. Three local authorities reported their NQSW worked with children and families receiving early help services, however each local authority used a different measure to report their caseloads: one had an average caseload of 15 children; one had an average caseload of 10 families (these families are usually less complicated to begin with); the final local authority reported an average caseload of 10 troubled families.

* 1. Children in need

NQSW children in need caseloads varied from 4 to 21. NQSWs in one local authority only carried children in need cases on their caseload. One local authority reported their NQSW children in need caseloads were on average 13.6 and this level was unmanageable.

* 1. Child protection

NQSW child protection caseloads varied from 2 to 21. One local authority stated that the caseload for a NQSW would be protected at a maximum of 2 child protection cases until late in the ASYE programme, another stated that a NQSW would have a caseload of 2 but these would be co-worked. One local authority reported their NQSW caseloads in child protection were on average 13.6 and this level was unmanageable.

* 1. Children in care

NQSW children in care caseloads varied from 2 to 25.2. One local authority reported that NQSWs did not manage children in care cases. One local authority reported their NQSW children in care caseloads were on average 11.2 and this level was unmanageable.

* 1. Mixed caseloads

A number of local authorities reported their teams held mixed caseloads containing a combination of cases from the different service areas. NQSW mixed caseloads can be broken down as follows:

* NQSW working with both children in need and child protection cases had caseloads that varied between 18 and 20. One local authority reported their NQSW mixed caseloads were between 18 and 20 cases and these were unmanageable.
* NQSW working with both child protection and children in care cases had caseloads that varied from 12 to 15.
* NQSW working with children in need, child protection and children in care cases had caseloads varying from 6 to 19. One local authority reported their NQSW mixed caseloads across these three areas were unmanageable, the caseload figure was the highest reported, 19.
  1. Additional information

A number of local authorities provided additional information regarding NQSW caseloads:

* One local authority aimed for NQSW caseloads to be 20% less (presumably compared to the caseload of an experienced social worker) but stated this is difficult to achieve
* Two local authorities planned for NQSW caseloads to be 10% less than the average caseload within the team
* One local authority implemented a sliding scale of caseloads for NQSW depending on their experience. A NQSW with under 6 months experience would have between 8-10 cases and someone with 6 to 12 months experience would have between 10-12 cases
* One local authority allocated NQSW six cases by six weeks and they were expected to progress to the maximum of 10 cases by 6 months.

1. **Achieving and maintaining manageable caseloads**

The majority of local authorities who responded to the survey reported that they did not use any formal mechanism to weight cases prior to allocation. Allocation methods that did not contain any form of weighting included reflective supervision and senior management oversight of caseloads.

The formal weighting tools used by local authorities to allocate caseloads all varied. Each tool considered different factors to determine the weighting of cases. Common factors across the tools included: the number of cases, level of complexity, time required to undertake tasks associated with the case, the amount of court work required, and the number of out of area cases (and travel time required due to this).

A number of local authorities provided examples of the caseload management tools used to allocate cases.

* 1. Nottinghamshire County Council, workload management tool and pro-forma



This tool aims to take into account issues such as complexity, risk, time and type of work. The system is points based and used in supervision to discuss caseloads. Every workload consists of two elements (personal element and case element) for which points are allocated. The overall points score reflects the overall workload for the particular worker at the time of measurement.

* 1. Swindon Borough Council, caseload weighting scheme



The scheme identifies the key tasks and types of case and awards specific weightings, each varying from 4 to 10 points. The weighting produced by the scheme should be reviewed monthly in regular supervision. The scheme does not have a minimum or maximum figure for caseloads however, it does suggest a ‘bandwidth’ that is regarded as average and reasonable for an experienced social worker.

* 1. Royal Borough of Windsor and Maidenhead, caseload weighting scheme

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The scheme commits to ensuring caseloads are allocated in line with qualifications and experience and works towards the following allocations: newly qualified social workers: 8 – 10 cases, after first year of practice: 10 – 12 cases, and, more than two years’ practice: 12 – 15 cases. The scheme identifies the type of case and their associated key tasks and awards specific weightings, each varying from 4 to 10 points.

* 1. Warrington Council, workload management scheme



The system acknowledges that each workload consists of three elements and points are awarded for each: stable element, cases and, extra responsibilities.

The scheme is based on a full time worker being allocated a maximum of 100 points (15 stable points + case points + extra responsibilities). As a worker approaches 100 points, this suggests that their capacity to take on additional work is limited. ASYE are allocated 90 points during their first year and student social workers receive 60 points during placement.

1. **Local authorities with manageable caseloads**

17 local authorities reported that their caseloads were manageable across all roles in all four service areas. Although not all of these authorities utilised caseload management tools, many of them provided examples of measures the local authority had taken to achieve manageable caseloads.

* 1. Organisational and team structures

Many local authorities described their development of multi-agency safeguarding hubs, along with the continued development of early help services to assess need, implement thresholds and signpost to other services. Other areas of development included robust arrangements for ‘step down’ services and the creation of more but smaller teams to allow for flexibility in meeting peaks and troughs in demand.

Two local authorities have introduced the role of consultant social worker. This role does not carry a caseload but provides regular case direction and reflective supervision to team members to ensure cases are progressed appropriately.

Two local authorities also referenced the creation of new panel arrangements, a vulnerable young people’s panel and a permanence improvement board.

* 1. Implementation of policy

A number of local authorities stressed their continued work with partners to systematically implement robust thresholds. To support this, some local authorities conduct regular audits to ensure thresholds are appropriately implemented, where thresholds are not met, cases are closed or stepped down. Where management oversight identified drift with cases, targeted audits were implemented to address this and ensure all cases progress appropriately. One local authority also referred to their case closure protocol.

* 1. Resources

Although not all local authorities received additional resources to ensure manageable caseloads, a number have received additional funding and have used this to recruit additional staff, both temporary and permanent.

1. **Other local authorities**

Other local authorities who were experiencing unmanageable caseload levels in one or more of the service areas were also implementing a range of measures in an attempt to make these more manageable. These included:

* The provision of additional resources: hiring agency staff, recruiting more staff, and back filling long term sickness and maternity vacancies
* Continued monitoring and use of performance management systems
* Effective supervision
* Continued work to ensure thresholds are implemented
* Further development of early help/ early intervention services and working with partners to embed these
* Incentives to attract and retain staff
* Implementation of integrated children’s workforce, e.g. Multi-Agency Safeguarding Hubs