**West Sussex – Practice Guidance**

IROs are qualified social workers with at least five years’ experience, and who have acquired the right skills to carry out this role.

**Case Load Management**

**Purpose**

The Standards for Social Worker Employers (2010 and refreshed in May 2014) set out the shared core expectations of employers which will enable social workers in all employment settings to work effectively. Standard 3 covers ‘Safe Workloads and Case Allocation’ and mandates that West Sussex County Council as an employer should ensure social workers have safe and manageable workloads.

The standard includes requirements for a workload management system that:

• Sets transparent benchmarks for safe workload levels in each service area;

• Ensures workloads are regularly assessed;

• Allocates cases in a transparent way, in discussion with social workers and taking into account the complexity of the case, their professional judgement and the requirements of their registration, in particular make provision for the allocation of caseloads for Newly Qualified Social Workers;

• Reports regularly to senior management about workload and capacity issues within the service;

• Have contingency plans in place for resolving situations when workload demands exceed capacity;

• Provides information on average caseloads for publication.

The purpose of this caseload policy is to set out Luton Borough Councprocess for monitoring and managing the caseloads held by individual social workers and practitioners.

**Objective**

The objective of this policy is to enable social workers and other practitioners ‘to put children, young people and their families at the heart of everything that we do. Outcomes will include:

• Caseloads are within agreed limits;

• Delivery of consistent, high quality services to achieve positive outcomes for children, young people and their families;

• The Standards for Social Worker Employers are met.

**Standards**

The Standards contained within this caseload policy sets out the process for monitoring and managing the caseloads held by individual social workers and practitioners.

Benchmarks for case allocation:

There is no clear national or local guidance regarding caseloads and so there are significant variations between Local Authorities. The responsibility for ensuring that caseload levels are safe has been delegated to the employers of social workers

There will inevitably be variations in caseloads between teams reflecting the differences in the nature of the work being undertaken and the risks being managed.

In light of this it is important to define clear Standards:

• We aim to achieve an average caseload of between 15 - 20 children or young people to enable social workers and other practitioners to provide a high standard of practice to the children, young people and families that they work with;

• Cases will be allocated at the discretion of practice managers, based on the skills and experience of the worker in being able to respond to the needs and characteristics of the child(ren) and family, the complexity of the case and the complexity of other cases currently being held;

• Managers have a responsibility to monitor caseloads using the available performance information about the cases allocated to workers in their teams. Caseloads of individual teams are a standing item in the line manager’s own supervision and in management meetings;

• It is likely that there will be times when there may be deviations from the average caseload of 15-20 children dependent on the range of responsibilities for safeguarding children carried by practitioners in different teams, and the complexity of the case(s) being held;

• For practitioners who do not carry case responsibility for Child in Need, Child Protection or Looked After Children, the average caseload may be higher;

• Practice Managers and Group Managers should not carry a caseload.

Caseloads of New Qualified Social Workers (NQSW) in their Assessed and Supported Year in Employment (ASYE)

NQSW’s are classed as qualified following the completion of their course and subsequent graduation, but they are not a registered social worker until they register with the Health and Care Professionals Council (HCPC) and receive their HCPC number. Until they receive their HCPC number they are unable to undertake statutory social work.

It has also been recognised that Newly Qualified Social Workers should have a reduced caseload to assist them in their Assessed and Supported Year in Employment. To support Newly Qualified Social Workers specific arrangements have been agreed (refer to the ASYE Handbook.

Caseloads of Students

In order to meet their own assessment criteria (Practice Capabilities Framework; PCF), students need to undertake direct practice experience. However, they cannot undertake statutory duties and they cannot hold cases (they are always co-workers).

Students on their first placement can work with a caseload of 5-8 children and students on their final placement can work with 8-9 children (see Student Caseload Guidance Handbook for more information).

Caseloads of Independent Reviewing Officers (IRO’s) and Child Protection Advisors (CPA’s)

Caseloads for IRO’s will match those as stated in the ‘IRO Handbook Statutory guidance for Independent Reviewing Officers and local authorities on their functions in relation to case management and review for looked after children’

2010. This states that a caseload of 50 to 70 Looked After Children for a full time equivalent IRO, would represent good practice, and we aim for IRO’s to hold cases of between 50-70 children.

Caseloads for CPA’s follow a different format and are considered on the basis of number of meetings per week. The benchmark is no more than 6 Conferences per week (averaged across the year) This will mean a case load of between 80 – 95 per CPA . An additional weighting factor is all Conferences will have a note taker which creates additional capacity.

The Manager will need to consider a number of factors when allocating a case, in accordance with the following Standards:

• Anticipated requirements set out in primary legislation, regulations and guidance;

• Outcomes of quality assurance audits;

• Capacity to support developments within the service, especially in relation to increasing the active participation of children in the Review process.

The handbook also states the actions that IRO’s are required to undertake to provide a quality service to each child, and the line manager will also consider the 13 bullet points on page 49 of the handbook when allocating cases. This principle also applies to the CPA’s.

Workload monitoring through supervision

Supervision is seen as a core part of caseload management. It is through supervision that the line manager can assess the complexity of the case to be allocated, the skills and experience of the worker, and the capacity of the worker given other cases that they hold. The following Standards will support this process:

• When allocating new cases it is the responsibility of the line manager to review the current caseload of the practitioner who will be receiving a new case, and record this on their personal supervision record;

• Any deviations from the average caseload figure (both higher and lower) have to be agreed in supervision with the reason clearly recorded on the worker’s personal supervision file;

• The line manager retains the right to allocate cases to social workers, practitioners, IRO’s and CPA’s even if such allocation exceeds the maximum average caseload. The line manager must explain the reason for this action to the worker, clearly record the reason for allocating a new case in their personal supervision folder, and take responsibility for re-prioritising their workload where this is possible. Such allocation must have a clear, maximum timescale clearly recorded and be subject to regular review;

• An analysis of caseloads for each practitioner should be undertaken at least every 12 weeks as part of supervision. This analysis to include any issues relating to the extent to the time available to work directly with children and families, and any issues in meeting other demands.

Concern when cases exceed safe limits

Any concerns should be raised with the immediate line manager swiftly. It is important that workers take responsibility for reporting concerns about their caseloads, in a timely manner, to their line manager and or the Principal Social Worker.

If a caseload for a worker continues to exceed the maximum average level for any longer than a three-month period and it is the assessment of the line manager and the worker that the work will be ongoing, the line manager must inform the relevant Group Manager who will attempt to rectify the situation.

If a team holds a caseload higher than the overall average levels set, this will have to be agreed by the relevant Service Lead. Such allocation must have a clear, maximum timescale and be subject to regular review.

Monitoring and reporting caseloads by Senior Managers

Caseloads will be monitored by Managers and reported through the line management arrangements.

Accountability

Accountability for cases and what it means to be accountable form part of the professional accountability framework for social work, and the overall accountability framework for children’s services (as required by the DCS statutory guidance). The responsibility for different individuals is listed below:

* Individual practitioners have responsibility to engage with supervision in which caseloads are discussed and to ensure that they have the knowledge and skills to manage the cases that they are allocated.
* Individual practitioners have a responsibility to raise concerns to their line manager about the number of cases they hold when this exceeds the agreed average limits, and/or concerns when a particular case complexity limits their ability to manage other cases effectively.
* If individual practitioners feel that these concerns are not dealt with swiftly and robustly, then they are to raise their concerns with the relevant Group Manager.
* Practice Managers have responsibility for ensuring cases are allocated appropriately given the available resources within the team and the skills of the individual worker.
* They have responsibility for ensuring individual workers are satisfied that they have the capacity, knowledge and skills to manage the cases allocated to them.
* Practice Managers have a responsibility to regularly access and use performance information about all of the cases held within their team and the individual cases held by each worker, so that they can monitor caseload and to take appropriate action as required.
* All Managers, have responsibility for alerting the Director of Children’s Services and the Principal Social Worker of caseload related issues; including where caseloads exceed agreed limits for individual workers and teams, as well as concerns raised by individual workers about their caseloads.
* Senior Managers have a responsibility to monitor caseload information by team and where necessary, reallocate work or capacity across teams as possible.
* The Director of Children’s Services (DCS) and Principal Social Worker (PSW) have responsibility for ensuring that caseloads are at a safe and reasonable level across the system. They should receive regular reports on caseload levels and related workforce information, and have contingency plans for when the system is at capacity.

**Reference Points;**

ADCS Report

