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The Honourable Greg Donnelly
Chair, Legislative Council General Purpose
Standing Committee No. 2
Parliament House
Macquarie Street
SYDNEY NSW 2000

By email: gpsc2@parliament.nsw.gov.au

Dear Mr Donnelly

Inquiry into Child Protection – responses to questions

I thank you for the opportunity to provide evidence to the Committee on 27 September 2016 on behalf of the members of the Public Service Association of NSW. There are no corrections that I wish to make to the transcript provided.

I **enclose** our answers to questions taken on notice and supplementary questions provided by the Committee. I trust that this will be of assistance to you and I look forward to the publication of the Committee's final report.

Yours faithfully


Steve Turner
ACTING GENERAL SECRETARY

27 October 2016

Public Service Association of NSW

Answers to Questions on Notice



- 1 The Hon. Dr PETER PHELPS: *You say that Justice Wood recommended that some work be provided to the non-government sector. Can you point to me anywhere in recommendation 16.2 of the Wood report which indicates Wood envisaging any government role other than an oversight role in relation to out-of-home care?***

Recommendation 16.2 (a) (iii) of the Report of the Special Commission of Inquiry into Child Protection Services in NSW reads:

Children and young persons with significantly complex needs or who are assessed as at high risk of immediate or serious harm or whose case management requires high level collaboration with other government agencies will remain case managed by DoCS.

In the context of the Report, this and other recommendations concerning the transfer of Out-of-Home Care (OOHC) was made at the time with the view that bringing non-government players into the overwhelmed public system would strengthen it. This has not occurred. Instead, Community Services has remained under-resourced and existing problems have been transferred to the less regulated, less accountable and less experienced non-government sector. The overarching message of the Report was one of building capacity for child protection, of improving and adding to what we have, not merely shifting responsibility.

- 2 The Hon. Dr PETER PHELPS: *The other thing you said was that, "We know these NGOs are not looking for kinship arrangements for these Aboriginal children". Could you provide any evidence you have which indicates that NGOs are not looking for kinship arrangements for Aboriginal children?***

On 13 April 2012, the Ministerial Advisory Group endorsed the *Transition Program Office Policy Paper 1, Transition Cohort Priorities*.¹ This document fleshed out the principles contained in the *OOHC Transition Plan*,² including the following:

¹ Ministerial Advisory Group (April 2012), *Transition Program Office Policy Paper 1, Transition Cohort Priorities*
http://www.community.nsw.gov.au/__data/assets/pdf_file/0015/320037/tpo_policy_paper_1_transition_cohort_priorities_final_april-2012.pdf

² Ministerial Advisory Group (October 2011), *OOHC Transition Plan*
http://www.community.nsw.gov.au/__data/assets/pdf_file/0007/319750/oohc_transition_plan.pdf

All Aboriginal children and young people in OOHC will be cared for by Aboriginal carers, supported by Aboriginal caseworkers employed by local Aboriginal managed agencies.

Our members, particularly those working in the west of the state, have advised that on many occasions this placement principle has not been observed by Non-Government Organisation (NGO) agencies. This has been due to a number of factors, including the increased level of resources required to locate appropriate family members, the increasing rate of indigenous children entering OOHC³ and the lack of Aboriginal support agencies available.

This anecdotal evidence is supported by research published by the Australian Institute of Family Studies that states that 20.8% of indigenous children in OOHC in NSW were not placed with indigenous caregivers, including relatives or kin, or in indigenous residential care.⁴ This figure is over a year old and the PSA believes that the current proportion could even be higher. This remains a matter of deep concern.

- 3 The Hon. MATTHEW MASON-COX:** *Mr Turner, you note in recommendation 4 of your submission that there be an increase in the number of funded caseworker positions, and a commensurate level of system and support staff to ensure that no ROSH reports are closed because of competing priorities and that at least half of those reports result in a face-to-face assessment by Community Services caseworkers. Have you done an assessment of how many caseworkers will be required to meet that recommendation and what resources would be required to satisfy that recommendation as well?*

...

Will you take this question on notice? Will you do an assessment—you best guess, an estimate or whatever you want to call it—of what you think might be needed in the circumstances?

Mr DAVID SHOEBRIDGE: *Or indicate why you cannot.*

This is a question which would require detailed analysis and modelling to answer. Family and Community Services (FACS) should immediately commence an audit of work currently undertaken to better understand how service levels are delivered within current resources. A thorough analysis should be conducted of a sample of the ROSH reports that are closed because of competing priorities. Modelling could then be done to project the number of additional caseworkers required to meet these targets, as well as the additional other staff involved in casework that will be needed, such as Managers Casework, Managers Client

³ Between 2012 and 2015, the number of Aboriginal children in statutory OOHC increased by 25.7%. FACS Statistics, *Objective 1, Improving the lives of children and young people*, Dashboard 8 accessed 25 October 2016 <http://www.facs.nsw.gov.au/facs-statistics/objective-1>

⁴ Australian Institute of Family Studies 'Child protection and Aboriginal and Torres Strait Islander children' CFCA Resource Sheet— October 2016, <https://aifs.gov.au/cfca/publications/child-protection-and-aboriginal-and-torres-strait-islander-children>

Services, Psychologists, Casework Specialists, Legal Officers and Administrative Support staff.

To achieve the recommended targets in a time frame of two years, a significant increase in staff numbers will be required. We anticipate that it would be an increase in the vicinity of an additional 80% of child protection caseworkers and associated staff.

However, it should be noted that the recommended target is interim on the path to a longer term goal; that is, to provide a face-to-face assessment to every child at risk of significant harm unless there is a good reason not to. After this initial, and long overdue, increase in staffing levels, this goal should be within reach if other measures are adopted. For example, streamlining the administrative burden on casework staff would free them up to see more children at risk. Also taking steps to better address work health and safety, and in particular the specific risks in child protection work, will decrease staff turnover and produce a healthier and more productive workforce. Better targeted early intervention should also reduce the number of ROSH reports received.

4 The Hon. DANIEL MOOKHEY: *Am I right in my understanding of your evidence? Your members are being judged by a standard that does not yet exist?*

...

What implication does that have on how caseworkers go about doing their jobs?

FACS, like all NSW government sector agencies, is required to create staff role descriptions that incorporate the NSW Public Sector Capability Framework. The capabilities contained in the new role descriptions will form the basis of a new performance development system. The implementation of this system is required by section 67 of the *Government Sector Employment Act 2013*, and was meant to commence by July 2016.

However, FACS does not yet have compliant role descriptions for all its employees. For example, role descriptions have not yet been released for the Helpline Caseworker role, which makes up almost 200 FTE positions in Community Services.

The PSA wants to ensure that any performance management systems are fair and robust. Good systems promote constructive communication between managers and staff, allow for development opportunities for our members and provide a mechanism to address performance issues as early as possible. However, it is clearly unfair for our members to be measured against capabilities that have not yet been formulated by FACS and have not been the subject of consultation with staff. It is for this reason that the PSA embarked on industrial action in relation to the Performance Development Program.

5 Mr DAVID SHOEBRIDGE: *Will you provide on notice a copy of the standard workload planner?*

The Workload Planner comprises of three documents, which are at **Attachment 1**.

- 6 **The Hon. DANIEL MOOKHEY:** *Either now on or notice are you able to elucidate what support the department provides for caseworkers who are suffering mental illness, vicarious trauma, post-traumatic stress disorder or receiving other forms of mental health assistance? Can you give us a view as to whether that support is going up or down?*

The response to this question is contained in the answer to Question 2 of the Supplementary Questions.

COMMUNITY SERVICES WORKLOAD PLANNER 2015

TIME TO TASKS

History and background

As a result of proceedings in the Industrial Relations Commission in 1996/97 the Department and the PSA reached agreement to introduce a mechanism to identify what are reasonable and fair case load limits having regard to the time taken to perform the work. The department issued a memorandum directing all CSCs to commence introduction of a workload planner in February 1997. Since then there have been several updated and amended version of the Workload Planner. What makes the workload planner unique and effective is the fact that it is both a caseload management tool as well as a case planning tool.

Benchmark ratio of time to tasks

Caseworkers and Casework Managers can use the benchmark ratios set out below in the workload planning process. They assist by providing minimum estimated times for tasks commonly performed by Caseworkers. These benchmark ratios were first promulgated in 2002, revised in 2006 and 2011. The activity hours have now been revised in light of new casework assessment tools, new program areas and increased work demands.

The suggested time allocations are minimum times and do not include travel time, general KIDS tasks, recording telephone calls and file notes, case enquiries, transporting of clients, court waiting time, maintenance of resources and equipment, individual and group supervision, training and development (including practice solutions), debriefing (outside of PAC & AC) regular team and unit meetings as well as special adjustments according to the level of caseworker experience. Additional time will be required for siblings.

The benchmark ratios listed below should be utilised as a guideline.

Guide for the use of the Workload Planner

It is important that Caseworkers and Managers Casework read the more detailed guide on how to effectively use the workload planner. This Guide appears at the bottom of the actual workload planner tool.

TASK HOURS

<u>CASEWORK</u>	<u>Hours</u>
Interview child /parent (primary & secondary)	2 to 3.30
Routine home visit (primary & secondary)	2 to 3
Pre assessment consultation (PAC)	0.30 to 1
Assessment consultation (AC)	0.30 to 1
Analysis and review of information gathered	1 to 2
Referral to Services, Section 248 requests,	0.30 to 1
Best Endeavours request (per child)	0.30
Referral of case to OOHC /ISS	3 to 6
Preparation and attendance at PPM	2.30
Chronological file review – per volume	3
Preparation of case for transfer	Min 2
Preparation for and attendance at Teleconference	1 to 2:30
Preparation of meeting (Invitation to participants, agenda and minutes preparation)	1 to 3
Preparation for and development of case plan	2 to 4
Client history review and write up (per volume)	3
Case consultation session	1
Consultation with Key Agencies	0.30 to 1
Arrange Contact visits	1 to 2
Supervising Contact Visit Min (or according to time determined by case plan /court order)	2
Preparing placement referral/client profile	1
Reportable Conduct Investigation (Briefings, preparations of reports, interviews and meetings)	21 to 30
Investigating and verifying an overpayment	0.30 to 1
Preparation of Submission (dependent on complexity)	1 to 3
Aboriginal consultation	1 to 2
Multicultural consultation	1 to 2
Placement Needs assessment	2 to 4
Supported Care assessment (visits, consults, deliver training to carers, obtain required documentation, write up)	15
Special Needs assessment	3 to 5
Prepare for Interstate transfer	2 to 4
Youth Subsidy assessment	2 to 4
Case review	1 to 2
Complete MRG	0.15
Review/closure	1 to 2
Case preparation for PF group supervision	1 to 2
Relative/Kinship carer assessment	12
Placement assessment (visit and review)	12
16A /245c request /response (dependent on complexity)	0.30

Preparation of genogram	1 to 1.5
CIF preparation	1 to 2
Prepare Carer - provisional entry onto Carer Register	0.30 to 2
Prepare Carer - full authorisation onto Carer Register	1 to 4
Entering Carers onto Carer Register (designated persons)	0.30 per entry
Prepare contact schedule	1 to 2
Preparation of Behaviour Management Plan (consultation, gathering data, write up)	5
SARA Safety Assessment	1 to 2
SARA Risk Assessment	3 to 4
SARA Risk Reassessment	1 to 2
SARA Judgements and Decisions	0.30
SARA Review/Closure	0.30

KiDS

Search and obtain complete KiDS history (Dependent on length & complexity of history)	Min 0.15 to 0.30
Creating Contact	1 to 2
Completing Secondary Risk of Harm Part A	2 to 3.30
Completing Secondary Risk of Harm Part B	4 to 5
Completing interview notes & attaching	2 to 3
Entering child, y/p into placement, (Completing referral to carer, adding FPI and allowance schedule)	1.30 to 2
Create Respite Placement	0.15
Updating financial /placements records	0.15 to 1
Preparation of case for case review/case closure	1 to 2
Completion of meeting minutes	1 to 2
Create Carer Development Plan	2
Placement Review	1
Recording Special Needs Assessment record	0.30 to 1
Recording an Authorised Foster Carer Review	0.30 to 1
Enter initial Legal record	0.30
Creating a new Carer	0.30
Preparation of Plan for & Merge/Split/Roll (However very dependent on the state of the plan records and level of remediation required)	1 to 2
Managing KiDS Task List	1 per week
Individual Quality Data Management	2 per week
Case File Notes	4 per week

OOHC (In addition to general provisions outlined)

Submission for service	2 to 6
Arrange & Conduct Placement Review	6
After Care Service /Submission	4
Ex Child/YP in Care File Read (request files, cull, photocopy, support client to read)	6 per volume
Preparation of File for OCG (includes Case File Audit Form & KiDS Data Quality Checklist)	Min 2 per volume
OOHC Client Information Checklist	0.30 to 1
Preparation of Case for OOHC transfer	Min 2
Case Conference Preparation/Development of Case Plan and Case Plan meeting	12
Prepare Section 163	0.30 to 1
Prepare Section 149	0.30 to 1
Prepare Education Pathway notice	0.30 to 1
Prepare Health Assessment Pathway	0.30 to 1
Leaving Care/After Care Plan	12

COURT

Applying for Warrant	2 to 3
Preparation of general affidavit	3 to 5
Prepare and attend Children's Court Conference	3 to 6
Care Application Stage 1 & Stage 2 bundle combined	7 to 10
Prepare summary of proposed plan	2 to 3
Prepare Subpoena	0.20
Prepare Care Plan	7 to 10
Prepare Amended Care Plan	2.30 to 5
Prepare for and attend Preliminary Conference	2 to 5
Prepare Section 82 Report	2 to 3
Prepare for and writing of restoration plan	7 to 10
Court Attendance (whether giving evidence or not)	4 to 7
Preparation of documents for Children Court Clinician	2 to 3
Preparation of assessment Order Application	1

INDIVIDUAL CLIENT AGREEMENTS (ICA's)

Initial placement ICA	1 to 3
Recurrent ICA	1 to 2
First contact ICA	1 to 3
Recurrent contact ICA	1 to 2
Victims of Crime preparation	3

GENERAL

Reading and responding to Departmental e-mail	6 per week
Telephone contact with clients	0.30 per contact

Telephone contact with Service Providers	0.30 per contact
File Maintenance (Accreditation standard)	2 to 5 per week
Accessing Business Help/Policy changes etc	1 per week
Preparation for Supervision/PDP	2 per session
Personal Administration (flex, SAP HR, calendar)	1 per week
Data remediation tasks min	1 per week
Life Story Work	0.30 to 1 per week

INTENSIVE SUPPORT SERVICE (In addition to general provisions outlined)

Preparation of Client Profile (funding/referral purposes)	3
Attendance for Criminal matter (Court, Police or JJ interview)	3
Panel Report (initial)	2 to 3
Panel report (subsequent)	1 to 2
Consultation Meeting with Agencies/Organisation	Min 1
Engagement Meeting/Activity (with young person)	Min 2
Preparation of ISS Case plan	4
Update of ISS Case plan	1
File Review/Summary	10

CHILD & FAMILY DISTRICT UNIT - CFDU (In addition to general provisions outlined)

Complete Carer Assessment Tool	0.30 to 1
Carer review Home visit and write up	6 to 8
Case consultation/case conference	1 to 3
Shared Stories Shared Lives Training Preparation	7
Pre Training visit	2
Probity/Referee Checks	4
Carer Support Home Visit	3
Placement referral	Min 1
Carer Assessment (independent from step by step assess)	Min 3

CASELOAD CEILING LIMIT

If an effective workload planner cannot be agreed upon between a Caseworker and their Manager Casework, the matter should be referred to a PSA Representative as soon as possible. Should this fail to effectively resolve the situation then the Caseworker should limit their caseload to a maximum of SIX cases.

A case is defined as: "One file by way of a family or individual".

If siblings reside with separate carers and/or have unique or separate individual factors they are to be treated as separate cases and they should have individual files. It is recognised that, in some situations as with very complex and challenging cases, a single case may consume the entire caseload of a worker.

	INDIVIDUAL WORKLOAD PLANNER CSC:	Employee :	
		Period from / to :	
		Supervisor:	

1. ACTIVITY HOURS

Section 1: Activity Hours

This is where the caseworker enters the planned hours which do not involve direct casework tasks and activities. The total of activity hours for the reporting period is then subtracted from the 140 contract hours. The balance is then carried to the next section and are the available hours left to plan direct casework tasks and activities.

Activity	Planned	Comment	Completed
Secondment			
Leave			
Other			
Staff Development			
Case Reviews / Workload Planner			
Supervision (Group & Individual)			
PDP			
Intake Duties			

Administration / Non-Casework			
Meetings: General			
Community Development			
Aboriginal Consultation			
Hours Adjustment (Part /Time)			
Team / Unit Meeting			
Secondary Work			
Travel Time			
TOTAL ACTIVITY HOURS:		NON-CASE HOURS COMPLETED:	
TOTAL OF CASEWORK HOURS:			
BALANCE OF HOURS AVAILABLE:			

2. ALLOCATED HOURS

Section 2: Allocated Hours

*This section is where the agreed planned tasks and activities are recorded for each plan / case, in line with available hours. **This relates only to those cases that are allocated to you. Any plan/case that you can not work on during the planner period should NOT be allocated to you.***

Plan Name	Plan N°	Type	Priority	Planned	Comment	Completed
TOTAL OF ALLOCATED HOURS:					TOTAL ALLOCATED HOURS COMPLETED:	

3. UNPLANNED HOURS WORK COMPLETED DURING THE PERIOD

Section3: Unplanned Hours Work Completed During the Period

This section is where the any / all unplanned tasks and activities completed during the period are recorded for each plan / case.

Plan Name	Plan N°	Type	Priority	Hours	Comment	Completed
TOTAL OF UNPLANNED HOURS:					TOTAL UNPLANNED HOURS COMPLETED:	

4. TASKS CARRIED OVER TO NEXT PERIOD

Section 4: Tasks Carried Over to the Next Period

This section is where any /all tasks and activities carried over to the next period for consideration are recorded.

Plan Name	Plan N°	Type	Priority	Comment	Hours

TOTAL HOURS CARRIED OVER:					

5. ALLOCATED CASE REVIEW

Section 5: Allocated Case Review Form

This form section is where the key elements of each plan /case being reviewed are recorded.

Plan Name:		Plan N°		Legal Status:	
Time Allocated:		Priority:		Date of Last Review:	
Current Situation:					
Action since last Review:					
Action Required: <input type="checkbox"/> This Period <input type="checkbox"/> Next Period					

Case Plan Amendments:

6. WORKLOAD PLANNER REVIEW

Section 6: Workload Planner Review

This section is where all the activity, allocated and unplanned hours are reviewed and if necessary adjusted as required. Both the caseworker and supervisor are to sign and date this section. This is important to ensure that the workload planning process is transparent and consultative.

	Period:		
	Hours:	Planned	Completed
TOTAL ACTIVITY HOURS:			
TOTAL ALLOCATED HOURS:			
TOTAL UNPLANNED HOURS:			
TOTAL HOURS:			

Comments:

.....
Caseworker
Date:

.....
Manager Casework
Date:

Guide for the use of the Workload Planner

The Workload Planning tool provides the framework for calculating and negotiating the time required to undertake tasks planned for the flex period. The tool requires a record of each case name. There is provision on the tool to record task related information that is being planned for the four week period and an agreed time that each task will take.

The process is a discussion between the supervisor and the caseworker and each task is calculated using the guidelines provided by the PSA and considerate of travel in accordance with the RTA road rules, journey to and from, road works, weather etc. The guidelines are to be used flexibly and in consideration of the skill set and experience of each individual caseworker and should reflect fair negotiation and mutual agreement.

Preparation for the process requires access to an un-interrupted period of time and a quiet place, a routine schedule of planning sessions, punctuality and agreement that wherever a critical event delays the process, responsibility lies with the worker and the supervisor to promptly negotiate an alternate date and time. The supervisor and caseworker will require a computer to record the plan and an e-mail copy of the agreed planner must be immediately available to the caseworker and supervisor following the planning session a paper copy signed by both the caseworker and the supervisor should be retained by both parties. Caseworkers should be encouraged to update their planner prior to the session including information about any new cases and their recommendations about the type of activity which will produce the best outcome for children and families during the four week work period. The same workload planner can usually be updated monthly to reflect any new cases or casework priorities for existing clients.

*The workload planner **cannot contain activity that exceeds the paid hours** with the exception of the accumulation of flex time that can be accrued in a four week period.*

Caseworkers should be encouraged to record on their planner's details including any deviations to the planned activity caused by the occurrence of unexpected or critical incidents or urgent re-tasking or reprioritisation by the supervisor. This information is vital for use in the next planning session when being asked to explain why certain tasks or activities were not undertaken during the last workload period and when negotiating tasks to be carried over to the next workload period.

*The process need only take up to two hours and the session should be included on the planner and undertaken separately from the supervision & PDP process and timeframe. **Supervision and PDP processes are distinctly separate processes from Workload Planning sessions and should not be combined.***

Any disputes about time allocated for each task, (if not resolved in the planning session) should be referred up to your PSA representative. Any activities being undertaken outside the workload planner e.g. after hours' callouts or foster parent training on the weekends should be dealt with as overtime in line with the award provisions. The workload planning tool (or work not completed in the period) should not be used to decline flex leave. Flex leave should be administered in line with the Premiers Department provisions, not on individual interpretations by local supervisors.

2015 WORKLOAD PLANNER - FAQs

What is the Workload Planner (WLP)?

The PSA's Workload Planning tool (WLP) is a flexible caseload planning tool which assists to determine safe and workable caseload for Community Services casework staff.

The Workload Planner was designed by PSA Delegates and Members and endorsed by Community Services. It is both a case planning and case management tool, facilitating effective casework with children and families whilst protecting casework staff from excessive workloads.

How did the Workload Planner come about?

As a result of proceedings in the Industrial Relations Commission in 1996/97, the Department and the PSA reached agreed to introduce a mechanism to identify what are reasonable and fair case load limits having regard to the time taken to perform the work. The Department issued a memorandum directing all CSCs to commence introduction of a workload planner in February 1998. Since then there have been several updated and amended versions of the Workload Planner. The most recent version of the Workload Planner was issued by the PSA in December 2015.

What documents do I need?

There are two main documents:

1. Time to Task Hours – this document lists the minimum estimated times for tasks commonly completed by Caseworkers.
2. Individual Workload Planner tool and Guide – the workload planning tool is the framework for calculation and negotiating the time required to undertake tasks planned for the flex period.

How do I complete a Workload Planner?

Caseworkers prepare a proposed draft of the Individual Workload Planner prior to meeting with their Manager. Managers and Caseworkers then discuss the tasks listed in the Individual Workload Planner, using the Time to Task Hours guidelines provided by the PSA. The Time to Task Hours are to be used flexibly and in consideration of the skill set and experience of each individual Caseworker and should reflect fair negotiation and mutual agreement.

Why should I use a Workload Planner?

The PSA does not support allocation of an arbitrary number of cases to Caseworkers. Casework staff (CWs, MCWs and MCSs) should use the Workload Planner to determine the allocation of work and not an arbitrary blanket case allocation.

The Workload Planner provides evidence of when Caseworkers reach allocation capacity. This provides protection for Caseworkers, MCWs and MCSs. It is documented evidence that local management can show District management that their Caseworkers are working to capacity.

What do I say when my Manager says that my CSC or team doesn't use Workload Planner?

The PSA has issued a direction to Members to use the Workload Planner. Members following the PSA direction are afforded individual protection by their union. This direction protects members from over-allocation of work. If your Manager will not work with you to complete the Workload Planner, contact your local PSA Delegate or the PSA on 1300 772 679.

As a temporary staff member can I use the Workload Planner without jeopardising my temporary employment?

Using the Workload Planner protects all Members – regardless of your employment status.

I work in a Practice First site and I've been told that the Workload Planner is not used as case allocation is done in group supervision. What do I do?

As not all cases are discussed in group supervision, it is still necessary for Members in Practice First sites to complete a Workload Planner for each flex period. Again, the Workload Planner provides evidence of when Caseworkers reach allocation capacity.

Can I use the Workload Planner if I'm not a PSA Member?

The Workload Planner has been developed by PSA Delegates and Members for the benefit and protection of Members and clients. Members are afforded protection by following a union direction. To receive this protection, you will need to be a Member of the PSA. Join today!

Can my Workload be used against me in performance management?

Supervision and PDP processes are distinctly separate processes from Workload Planning sessions and should not be combined. The Workload Planner protects members so you are not set up to fail through unmanageable workloads which you don't have time to complete.

Section 1: Activity Hours of the Individual Workload Planner is where planned hours which do not involve direct caseworker tasks and activities are listed. Remember to include preparation of the Workload Planner itself as one of these activities

What do I need to do to prepare my Workload Planner?

It is recommended Caseworkers update their Workload Planner prior to meeting with their Manager. This preparation should include completing Section 1: Activity Hours (being indirect casework tasks such as leave), updating the Workload Planner with new cases and recommendations about the type of casework activities which will produce the best outcome for children and families during the four week flex period. Ultimately it is your manager who, in consultation with you, will decide what matters are allocated to you within contract hours.

What if my Manager won't use the Workload Planner?

Any disputes or disagreements about using the Workload Planner or the content in the Workload Planner should be referred to your line Manager. For Caseworkers, this would usually mean escalation to your MCS.

What happens if there is a disagreement about the planned hours for an activity?

The PSA supports prompt resolution at the lowest possible level so any disagreements should be referred to your line Manager. Any activities being undertaken outside the Workload Planner and your contract hours should be dealt with as overtime in line with the Award provisions. Assistance may also be sought from the PSA.

Should negotiation fail to effectively resolve the situation, then the Caseworker should limit their caseload to a maximum of SIX cases.

After using my Workload Planner, I have excessive hours, what do I do?

The Workload Planner cannot contain activities which exceed the paid hours with the exception of the accumulation of flex time that can be accrued in a four week period.

Who uses the Workload Planner?

All staff working in casework positions are directed to use the Workload Planner. Staff in other roles (e.g. Psychologists, Casework Specialists) may also use the Workload Planner tool as a template for planning and managing their work. The Time to Tasks estimates, however has only been developed for caseworker staff.

How do I know how many hours I have for casework?

Section 2: Allocated Hours includes the agreed planned tasks and activities for each case, in line with available hours. This relates to those cases that are allocated to you. Any plan / case that you can not work on during the 4 week planning period should be unallocated from you on KiDS.

What happens if there is a significant change in my work when the 4 week period is underway?

Refer to Section 3: Unplanned Hours. This is the section where any unplanned tasks and activities completed during the period are recorded. It is important that the Workload Planner is adjusted. Ask to meet with your Manager to discuss this adjustment. If this is not feasible or cannot occur, still complete the adjustment and discuss it with your Manager when you have your next Workload Planning session. Remember the Workload Planner tool is a fluid document and is likely to have some changes during the reporting period. Keep an electronic copy of your planner on your desktop for easy access and review.

What do I say to my Casework team member if they do not elect to complete the Workload Planner and I wish to use the Workload Planner?

Using the Workload Planner provides protection and evidence of work capacity for Members. Your use of the Workload Planner will hopefully encourage others to use it.

What do I do if my Manager refuses my leave request (for leave such as flex or rec leave) based on the work in my Workload Planner not being completed?

The Workload Planner (or work not completed in the period) should not be used to decline flex leave. Flex leave has no impact on the Workload Planner. Rec leave (and similar) should be included in Section 1: Activity Hours. Unplanned leave (such as Sick Leave) should be included in the adjustments in Section 3: Unplanned Hours.

Should I keep my Workload Planners, including my old ones?

Yes! Keep both hard and soft copies of each Workload Planner you complete. Your Workload Planner is evidence of tasks and activities undertaken and planned. Any adjustments made to your Workload Planner made during the period should also be kept, as this information will also provide you with evidence of other unplanned work which you completed. You will also need to refer to it in your next planning session.

What if I haven't been able to complete all the tasks and activities in my Workload Planner eg due to additional priority work or unplanned leave?

Refer to Section 4: Tasks to be carried over to the next period. Complete this section. It is also discuss these uncompleted tasks and activities with your Manager.

What if my Manager refuses to do the case review section of my Workload Planner (as this case review may be done in group supervision)?

Given only a limited number of cases are reviewed in group supervision, it is still important to complete Section 5: Allocated Case Review, especially for those cases not reviewed in group supervision.

Remember, take a commonsense approach when using the planner. It is there to support you with effective case planning in consultation with your Manager.