



December 15, 2021

Debra Baetz
Director, Orange County Social Services Agency
County of Orange
500 N. State College Blvd.
Orange, CA 92868

RE: *Working conditions of CFS Social Workers*

Dear Ms. Baetz:

The Orange County Employees Association (OCEA) is the exclusive representative for most workers in the County Social Services Agency (SSA). The largest SSA classification is the Senior Social Worker (SSW) classification and the vast majority of these workers are assigned to the Children and Family Services (CFS) Division.

For far too long CFS workers have suffered under unreasonable caseloads, unrealistic expectations, an unsupportive workplace culture, and an overall toxic work environment.

Over many years OCEA has sought to resolve these and other related CFS workplace issues through the channels designated by the County. OCEA members have continually presented these issues in detail in the CFS Caseload Management Forum but have been met with frequent resistance and little or no positive change. During bargaining for successor Memorandum of Understanding OCEA has repeatedly proposed bargaining proposals crafted to remedy these long-standing issues but those proposals were consistently rejected by the Agency and the County.

Workplace toxicity has now reached a breaking point. Without immediate action the physical and mental health of CFS workers and the welfare of those who rely on them risk being seriously compromised.

The challenges span across the entire Division but are particularly acute in the Emergency Response Program, where clients often first encounter the Agency. We have attached a summary of specific workplace issues in the Emergency Response Program, including specific straightforward and easily implemented proposed actions to resolve those issues. While each CFS program has its own unique issues which need to be addressed, we believe the Agency can best demonstrate a genuine commitment to its workers by aggressively seeking resolution to the serious intolerable conditions that exist in Emergency Response.

The toxic work environment throughout CFS, particularly in Emergency Response, has robbed workers of the time necessary to achieve the positive outcomes the County desires and the community needs. None of us can afford to allow CFS workers to continue to be subjected to an intolerable work environment.

We want to help the Agency provide high quality services to the community. For that to occur, the Agency must recommit to help social workers by providing them safe and supportive working conditions.

We therefore demand immediate and tangible improvements to the conditions of Senior Social Workers in CFS and look forward to collaborating with you to that end.

Sincerely,

Charles Barfield
General Manager

ORANGE COUNTY SOCIAL SERVICES AGENCY

OVERALL CFS DEMANDS



"THE EXPECTATIONS ARE BECOMING MORE AND MORE UNREASONABLE. THEY KEEP ADDING ONE LITTLE THING AFTER ANOTHER NOT REALIZING HOW OVERWHELMING THE JOB IS BECOMING."

- ORANGE COUNTY SOCIAL WORKER

CFS SOCIAL WORKER DEMANDS:

ADOPTIONS | CHILD ABUSE REGISTRY | COURT SERVICES | EMERGENCY PLACEMENT | EMERGENCY RESPONSE
FAMILY MAINTENANCE COLLABORATIVE SERVICES—DIFF RESP & FCIM | FAMILY MAINTENANCE COLLABORATIVE SERVICES—VFS | INTEGRATED CONTINUING SERVICES (ICS)
PERMANENCY SERVICES PROGRAM (PSP)—CONTINUING | PERMANENCY SERVICES PROGRAM (PSP)—COLLABORATIVE COURT | RESOURCE FAMILY APPROVAL (RFA)
SPECIALIZED FAMILY SERVICES (SFS)SPECIAL MEDICAL | TRANSITIONAL PLANNING SERVICES PROGRAM | VISITATION SUPPORT SERVICES

**OCEA EXPECTS STARRED ITEMS TO BE INITIATED WITHIN 60 DAYS*

*CASELOADS

ESTABLISH A CASELOAD DISTRIBUTION PHILOSOPHY AND IMPLEMENT A CASELOAD YARDSTICK TO INCLUDE CASE CAPS WHICH, IF HIT, WOULD TRIGGER PROTECTIONS AND BENEFITS FOR WORKERS.

*REASONABLE EXPECTATIONS

ASSESS THE EXPECTATIONS FOR EACH TYPE OF CASE/ASSIGNMENT AND ESTABLISH A REASONABLE WORKLOAD PER CASE/ASSIGNMENT.

STAFFING

HIRE ENOUGH STAFF TO MEET CASELOAD YARDSTICK STANDARDS, KEEP UP WITH ATTRITION, AND HAVE ADEQUATE COVERAGE WHILE WORKERS TAKE TIME OFF.

*CLASS & COMP

CONDUCT A CLASSIFICATION & COMPENSATION STUDY FOR THE SOCIAL WORKER JOB SERIES.

OVERTIME

PAY OUT OVERTIME, DON'T REQUIRE SOCIAL WORKERS TO FLEX OUT THEIR TIME.

TRANSFERS

REVISE THE CFS TRANSFER POLICY TO ELIMINATE TIME LIMITS REQUIRED TO STAY IN A PROGRAM.

COUNSELING

IMPROVE THE QUANTITY AND QUALITY OF COUNSELING/THERAPY SERVICES AND INCORPORATE IT INTO THE WORK.

MANAGEMENT CULTURE

IMPROVE LABOR-MANAGEMENT RELATIONS WITH A FOCUS ON COMPASSION AND SUPPORT. SHOW COMPASSION THROUGH ACTION. LISTEN TO EMPLOYEES AND IMPLEMENT THEIR IDEAS.

ALL PROPOSALS ARE AIMED AT RETAINING EXISTING EMPLOYEES, ATTRACTING NEW EMPLOYEES, AND CREATING FAIRNESS AND RESPECT IN THE WORKPLACE.

**REAL WORLD
 IMPACTS**

“If caseloads were reduced, we’d have more time to devote to providing resources and engaging the family. Due to the immense workload for each specific case, when you have 30 cases your time is very limited and often spent completing desk work.”

“The focus seems to have changed to an unmanageable amount of paperwork, forms, CFTs, late nights etc etc and taken the focus away from truly being able to assess risk and do so promptly and with a clear head.”

MAIN WORKER CONCERNS INCLUDE:

INCLUDED AS A
 TOP THREE ISSUE

LACK OF WORK / LIFE BALANCE	64%
CASELOADS / EMPLOYEE BURN OUT	53%
UNREALISTIC EXPECTATIONS	49%
EMPLOYEES FEEL UNAPPRECIATED	48%

LACK OF WORK / LIFE BALANCE

- Unpredictable work schedule with inconsistent hours
 - Cannot plan personal or family time
 - No certainty for scheduled time off or holidays off
 - Forced overtime
 - Expected to hit tight deadlines after working long nights without rest
- Work-created secondary/vicarious trauma affecting personal life
- Evenings/weekends spent recuperating from exhaustion, stress, and emotionally overwhelming experiences

CASELOADS / EMPLOYEE BURN OUT

- High caseloads and lack of transparency in caseload distribution
- Little support or assistance with clerical duties
- Unrealistic, inconsistent, and increasing expectation from management without relief

EMPLOYEES FEEL UNAPPRECIATED

- Lack of Empathy/Compassion from management
 - No understanding of the amount of work their employees are taking on
 - Holiday and weekend work used as threats
 - We are not respected as people
 - They do not listen to or implement worker suggestions
- Safety issues
 - Sent out alone at night in unsafe neighborhoods and unstable situations
 - Driving long distances fatigued after working all day and into the night

INEFFICIENT BUSINESS PRACTICES

- No truth or transparency about working conditions when hiring (ie. hours, overtime, holidays, workload)
- Lack of incentive for employees to stay in the most challenging program with the worst working conditions
- Insufficient technology
- Perpetually short staffed due to recruitment and retention challenges

REAL WORLD IMPACTS

ER used to be a program that was hard to get into and many people wanted to work there. Now it's hard to get out of and few want to go.

If [continuing programs] are not allowed to perform social work and help and support our clients they come back and inundate ER again with a new referral.

The amount of work causes SSWs to be focused on paperwork instead of helping and providing services to families.

URGENT DEMANDS IN EMERGENCY RESPONSE

The following demands would provide some immediate relief and OCEA expects implementation within the next 60 days:

1. **PROVIDE CLERICAL SUPPORT**—Utilize clerical staff to make “shells” and collect priors. This could save a Social Worker 1-6 hours of work.
2. **PROVIDE SOCIAL WORKER II SUPPORT**—Temporarily assign two (2) SWII's to each Emergency Response program (i.e., ER I, II, III) to assist with interviewing non-offending and at-risk youth, make phone calls, and schedule home assessments. Take away the restrictions placed on SWII's so they can assist as needed without being required to get authorization for each tasks.
3. **INTAKE DAYS**—Continue to protect a Social Worker by having them off rotation on an intake day. Extend the intake narrative deadline from 11:00am to 5:00pm, so workers do not need to begin their workday earlier than their assigned start time to meet the deadline.
4. **TRAUMA INFORMED COUNSELING**—Like other first responder departments, provide all investigating Social Workers who support the Emergency Response program with County-offered trauma focused counseling.
5. **CREATE EFFICIENCIES IN DOCUMENTATION THROUGH TECHNOLOGY:**
 - a. Pilot lightweight tablets with the ability to write on the screen and convert to text.
 - b. Provide dictation software at a Social Worker's request without a medical restriction/note.

ADDITIONAL DEMANDS IN EMERGENCY RESPONSE

The following demands are longer term goals:

1. **WORKER RETENTION PRACTICES BEGIN AT THE TIME THE JOB IS OFFERED. Be truthful and transparent about the working conditions of the job (hours, holidays, overtime, workload, etc.) when hiring new staff. If hiring managers are worried that being truthful about the working conditions creates risk of losing a job candidate, there is clearly a problem.**
2. **CREATE MONETARY INCENTIVES FOR SOCIAL WORKERS WHO PERFORM WORK FOR THE EMERGENCY RESPONSE PROGRAMS.**
 - a. Provide an Assignment Differential Pay for all hours paid while assigned to ER. For workers assigned to non-ER programs who work ER referrals, pay the differential pay for all hours worked on an ER referral.
 - b. Provide new incentive pays for Social Workers with Master's degrees and professional licenses.
 - c. Provide increased incentive pays for holidays, on-call, weekend, and PM shifts.
 - d. Do not require Social Workers to flex their schedule out when they volunteer for a Holiday On-Call shift.

REAL WORLD IMPACTS

Upper management, director and deputy directors are out of touch with the staff and work requirements.

In this job the work doesn't stop and it's never ending. I have felt overwhelmed where at times the only way to "catch up" is to work and type off the clock. The caseload is just too much and workers leave because of the burn out.

- e. Pay overtime based off of hours paid, not hours worked.
 - f. Provide a car allowance/stipend to help offset the increased insurance premiums Social Workers accrue from driving many miles for work in their personal vehicles.
 - g. Provide Fatigue Pay as follows:
 - i. Employees shall be provided with eight (8) consecutive hours of non-work time (rest period) before being compelled to commence a regularly scheduled shift or to commence other duties on behalf of the County.
 - ii. If the eight (8) hour rest period runs concurrently or extends into the employee's next regularly scheduled work shift, the employee shall not suffer loss of pay or accrued time for designated rest period. The rest period hours that run concurrently with a regularly scheduled shift shall be considered compensable hours worked.
- 3. TO CREATE A CULTURE OF WORK-LIFE BALANCE, PROVIDE CONSISTENT SCHEDULES FOR WORKERS BY RESTRUCTURING REGULAR SHIFTS, PM SHIFT, AND ON-CALL SHIFTS. Social Workers should be able to regularly go home at the end of their scheduled shift and not be required to regularly work additional hours/shifts. Some solutions include:**
- a. Do not assign immediate referrals out to staff in the last two hours of their shift.
 - b. Do not assign a worker to a PM shift the day following an Intake.
 - c. Under the current schedule system, have minimal staff assigned to each PM and on-call shift and reduce the required frequency each worker must work these shifts. Do not schedule an employee to more than two (2) PM shifts per month.
 - d. Extend the intake narrative deadline from 11 a.m.-5 p.m., so workers do not need to begin their workday earlier than their assigned start time to meet the deadline.
- 4. COUNSELING/THERAPY SHOULD BE AN EXPECTED PART OF THE JOB. Like other first responders, Social Workers experience vicarious trauma, and need to process it to be able to continue working effectively. The EAP program only offers three sessions per year and the counselors do not always specialize in trauma therapy. This is insufficient.**
- a. Similar to other first responder departments, provide all investigating Social Workers who support the Emergency Response program access to County offered trauma focused therapy.
 - b. Provide paid time off to attend counseling/therapy to process work related trauma.
- 5. EMBRACE SELF-CARE AND TIME OFF AS A METHOD OF RETAINING STAFF.**
- a. Expect Social Workers to take time off regularly and plan for it in the agency's staffing plan.
 - b. Allow staff take time off after a trauma case.
 - c. Stop denying time off for significant personal life events such as a child's graduation, bereavement, etc.
- 6. STREAMLINE THE APPROACH TO WORK AND CREATE EFFICIENCIES**
- a. **Create efficiencies through better regional assignments.**
 - i. Narrow regionalization down to one city, such is the practice for Police liaisons. Staying in the same city helps to reduce travel time, lower mileage, and increases availability of the Investigating ER Social Worker to complete

REAL WORLD IMPACTS

The job has set us up to fail and there is not enough support from management and from line staff to come close to making it what they expect of us.

No amount of overtime pay (mostly not by choice to do) can compensate for our stress, fatigue, mental health... We've been screaming for help for years and have gone unheard. Many potentially great ER SSWs left, [are] leaving, or want to leave because of management/BoS lack of everything!

several visits and return visits in the same day, increasing compliance on contacts.

- ii. Regional Teams—On a monthly basis, provide all ER SSWs with a list of all the other Social Workers within their city/region, to allow for better communication, cooperation, and requesting assistance.
- iii. Create regional units for the Immediate/I-List. For example, have 5 units and have them rotate units each day to take all the I's that come in for the day.
- iv. Reduce the frequency of leveling to once a month so Social Workers aren't receiving referrals outside their assigned region so frequently.

b. Encourage a team approach so Social Workers feel supported and can help each other with time consuming cases. Examples of a team approach include:

- i. Assign two Social Workers to any referral involving a death.
- ii. Assign two Social Workers to any referral that's a C to C in separate residences to allow for a speedy investigation and implementation of services/referrals.
- iii. Assign two Social Workers to any referral with residences in separate regions and counties to improve response time, decrease travel time, and lessen the burden on one single Social Worker.

c. Provide Social Workers with support staff for various tasks.

- i. Utilize clerical staff to make "shells" and collect priors. This could save a Social Worker 1 to 6 hours of work.
- ii. Assign two (2) Social Worker II's to each Emergency Response program (i.e., ER I, II, III) to assist with interviewing non-offending and at-risk youth, make phone calls, and schedule home assessments. Take away the restrictions placed on SWII's so they can assist as needed without being required to get authorization for each tasks.
- iii. Provide help for transporting children after hours.

d. Technology

- i. Provide lightweight tablets with the ability to write on the screen and convert to text.
- ii. Provide dictation software without a medical restriction/note.
- iii. Provide apps that allow Social Workers to fill out forms, referrals, and releases of information, and obtain signatures in the field.

7. REVAMP THE CHILD ABUSE REGISTRY'S (CAR) PROCESS IN ASSIGNING EMERGENCY RESPONSE REFERRALS.

- a. Form a committee to look at CAR practices with ER Social Workers to establish more efficiencies and what factors determine an ER investigation be created.
- b. Develop a clear policy for determining which referrals need an immediate same day visit at night, versus what can be assigned out the following morning.
- c. Do not let CAR "hold on" to referrals, rather pre-assign them once they get to CAR.
- d. As soon as a referral gets generated at the CAR level, before it's even assigned to an ER worker, have support staff or another SSW start the background for the

REAL WORLD IMPACTS

ER is in need of a top to bottom overhaul and to have Management that want to work towards improvement, not ones who are punitive and only looking to assure that they look good to promote and stats look good.

investigation, and upload to CWS so it's available right away to the investigating ER SSW. This work would include, at minimum, the following:

- i. Summarize all prior investigations, including dispositions and rationales, and summaries of all reports taken as Info Only, Evaluated Out, or Duplicates, as everything is important to get a big picture of the family and situation. Also, include are any case histories, with dates of services, any sustained petitions, reason for closure, and any exit order regarding custody. (The investigating SSW will still review the priors, but having them summarized will save significant time for the investigating SSW)
 - ii. Do the background searches of OCCourts.org, regarding any criminal history and warrants, and crimagency.ocgov.com/WebDV/Logon.do, regarding any restraining orders.
 - iii. Request Police Reports and scan once received
 - iv. Once the Investigating SSW completes the primary interviews with the family, the referral can go back to support staff/seasoned off rotation ER SSWs to complete the collateral contacts. (Investigation Narratives have grown from about 6 pages to about 40 pages for each referral, even unfounded referrals, and the steps above can take several hours for each referral. The number of intakes/custodies, and when an intake is indicated, it'll allow the SSW time to engage families and get their buy in before a referral went to Court, which in turn will increase their case compliance and timelier reunification of children with their families.)
- e. When a minor injury, such as scratch, is called into CAR as physical abuse, this type of injury should not qualify as an SDM override and can be taken an info only, unless there was a prior substantiated physical abuse allegation or injury to a child. By taking these types of reports as info only, we will be reducing the number of ER investigations and focus on the highest priority cases.
 - f. If a call is called into the hotline and the CAR SSW requests a welfare check by law enforcement, and law enforcement finds no evidence of whatever's alleged, such as finding the children to be healthy, well-cared for, no marks or bruises, and a clean home, then the family's had professional eyes on them and the call could be taken as info only or evaluated out. Similarly, if officers find no evidence to the allegation, then the call might not need addition CPS investigation and could be taken as info only or evaluated out, which will in turn reduce redundancy.
 - g. If a family already has had contact with other agencies regarding the specific allegations, (i.e. allegations already investigated by law enforcement, allegations already being addressed in Family Court, out of home perps with a protective parent, whether or not the alleged out of home perp might one day have access to the child because there was a protective parent, etc), then this type of call might be able to be taken as info only or evaluated out. For example, law enforcement cross-reports a first time DV incident that they already investigated and managed, then perhaps these types of CAR calls could be taken as info only, especially if there was no prior CWS history, no prior DV offense, a protective parent, and no injury to child. Similarly, if a CAR call is cross-reported by Family Court after a parent files for a Restraining Order, showing that parent's protective capacity, then maybe this type of CAR call can be taken as info only as the case is already being heard in Family Court, and knowing that most of these types of cases get assigned to a Court investigator or Court mediator for review/investigation. By taking these types of CAR calls as info only, it not only reduces replication of work for SSA, but also reduces the workload for ER SSWs. That's not to say SSA won't document the allegations and have a record to show a pattern, should another call be called into the hotline, as all reports taken by mandated reporters are inputted into CWS; we just don't need to create another investigation, assign an ER SSW, and replicate work. This practice will in turn reduce redundancy and workload demands on all ER SSWs.

In anticipation of making improvements in the working conditions of Social Workers in the Children and Family Service Division of SSA, OCEA is requesting the following information:

1. **CFS PROGRAMS**—Provide a list of all CFS programs in which Social Workers work. Indicate the following for each program:
 - a. Are Social Workers in the program case carrying, non-case carrying, or a mix.
 - b. Name of the current Program Manager (AM II)
 - c. Name of the current Deputy Division Director (AM III)
 - d. Are the Social Workers in the program required to travel/perform field work?
If so, do they travel within the County, Out-of-County, State-wide, or Out-of-State?
 - e. Is time set aside per case/referral to complete documentation? If so, provide the amount of documentation time assigned to each case and, if applicable, each type of case.
 - f. Does the program use a regionalization model?
 - g. How are referrals/cases assigned to Social Workers (e.g. on a rotation basis, by region, etc.)
2. **CLASS & COMP**—Provide the data/results from the last Classification and Compensation Study for the Social Worker job series.
3. **BUDGETED POSITIONS**—Provide the current number of budgeted Social Worker positions in CFS broken out by program and by classification (i.e. Social Worker I, II, Sr.). *For example, the Court Services program has X budgeted Sr. Social Worker positions, X budgeted Social Worker II positions, and X budgeted Social Worker I positions.*
4. **VACANCIES**—Provide the current number of Social Worker vacancies in CFS, broken out by program and by classification (i.e. Social Worker I, II, Sr.). *For example, the Court Services program has X Sr. Social Worker vacancies, X Social Worker II vacancies, and X Social Worker I vacancies.*
5. **ATTRITION**—Provide the following attrition data for each Social Worker classification for each calendar year from 2015-2021:
 - a. Number of hires and non-retirement separations in CFS overall.
 - b. Number of hires and non-retirement separations in the Emergency Response (ER I, II, III) program.
6. **TRANSFERS**—Provide the following information related to transferring:
 - a. A copy of the current transfer policy that applies to Social Workers in CFS.
 - b. The number of Social Workers currently on a transfer list.
 - c. The number of Social Workers who transferred out of an Emergency Response program into any other Social Worker position County-wide, for calendar years 2015-2021.
 - d. The number of Social Workers who voluntarily transferred into the Emergency Response program from any other Social Worker position County-wide, for calendar years 2015-2021.
7. **VOLUNTARY DEMOTIONS**—Provide the number of voluntary demotions by Sr. Social Workers in the CFS Division for calendar years 2015-2021. Provide the program the employee was a Sr. Social Worker in. *For example, in the Emergency Response programs there were X voluntary demotions in calendar year 2016, X in calendar year 2017, etc.*

8. **WORKERS' COMPENSATION DATA**—Provide the following data regarding worker's comp claims filed by Social Worker classifications in the CFS division for calendar years 2015 - 2021. For each category, indicate the total number for CFS as a whole and the number for Emergency Response programs:
 - a. Number of workers' comp cases filed by calendar year.
 - b. Number of claims related to driving and vehicle accidents by calendar year.
 - c. Number of claims related to stress/anxiety by calendar year.
 - d. Number of lost hours of work due to workers' comp cases.
9. **EMPLOYEE ASSISTANCE PROGRAM (EAP)**—The number of CFS Social Workers who accessed EAP counseling services for each calendar year from 2015-2021.
10. **ER REFERRALS**—The total number of Emergency Response referrals in each calendar year from 2015-2021.
11. **16+ HOUR DAYS**—Provide the number of shifts in which each CFS Social Worker worked sixteen or more consecutive hours for each calendar year from 2015-2021. Include the name of the program in which the Social Worker is assigned.
12. **ON-CALL HOURS**—Number of On-Call Pay hours paid to Social Worker classifications in each CFS program per year for each calendar year from 2015-2021.
13. **CALL-BACK HOURS**—Number of Call-Back Pay hours paid to Social Worker classifications in each CFS program per year for each calendar year from 2015-2021.
14. **OVERTIME**—Number of Overtime and Straight Overtime (SOT) hours paid to Social Worker classifications in each CFS program per year for each calendar year from 2015-2021.
15. **MILEAGE**—Provide the total number of miles claimed by Social Workers per year for each calendar year from 2015-2021. Provide the average number of miles claimed.
16. **CASELOAD COUNT**—For each case-carrying CFS program, provide a list of employees showing each employee's case/referral count for each month of calendar year 2021.