## **2017 CWDA Adult Services Workforce Survey Summary**

## **CWDA Workforce Survey Development**

# The survey was designed to gather information about:

- Recruitment Methods
- Staffing Levels
- Funding Sources
- Salary
- Classification

vices (IHSS)

he County Welfare Directors
Association (CWDA) of
California Adult Services Committee
designed a workforce survey in
2017 to identify common
workforce practices in Adult Social
Services among the counties in
California.

The survey captured workforce practices for the typical professional positions utilized across Adult Services programs including Adult Protective Services and In-Home Supportive Services. Some counties utilize other professionals beyond those that were the focus of the survey.

Of the **58 Counties** that received a link to complete the survey online, **56 counties participated in the survey**.

Counties that participated were categorized by county size using the following California Department of Social Services (CDSS) criteria:

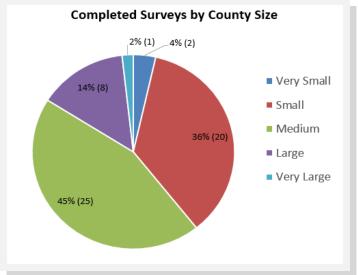
- Very Large: IHSS caseload of 50,000 or more cases
- Large: IHSS caseload of 10,000—49,999 cases
- Medium: IHSS caseload of 1,000—9,999
- Small: IHSS caseload of 25 to 999 cases
- Very Small: IHSS caseload up to 24 cases

The surveys were created and distributed using **Survey Monkey**. 48 surveys were completed online and 8 counties submitted a completed paper-based survey.



## **Survey included questions about 2 Adult Social Services programs:**

Adult Protective Services Pg. 2 (APS)
In-Home Supportive Ser-Pg. 3



## **Adult Protective Services (APS)**

Barriers to filling vacant APS social worker positions include competing with CPS, funding forecast and candidates who do not pass background checks.

#### **Recruitment Methods**

The top three primary resources for APS social worker recruitment reported by counties are *county HR*, *local universities* and *internships*. Other recruitment methods include Merit Systems Services, social media, Craig's List, PSOC email list and department transfers.

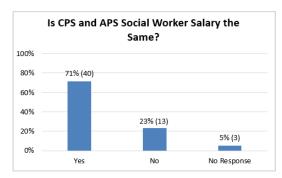
71% (40) of survey respondents strongly agree/agree that recruitment of qualified APS social workers is a challenge.

57% (32) reported that they provide internships. Of those, only 13% (4) are paid internships.

#### **Staffing Levels**

36% (20) of counties reported having ratios of 6 to 8 social workers per supervisor while 21% (12) reported having ratios as low as 1-to-1 or 2-to-1 workers per supervisor.

48% (27) of the counties reported having a 1-to-1 *supervisor* to *manager* ratio followed by 20% (11) reporting 2 to 4 supervisors



per manager.

66% (37) of counties use nurses to assist with APS case work. Of those, 62% (23) reported that nurses are employed directly by their county department.

21% (12) use behavioral health clinicians to assist with APS case work.

#### **Salary Ranges**

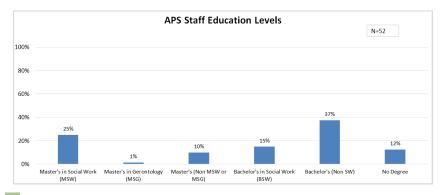
The APS social worker annual salary range is 30K to 104K with an average annual salary of 56K. More than half of the counties (34) report a starting salary of 31-50K and maximum salary range of 56-80K.

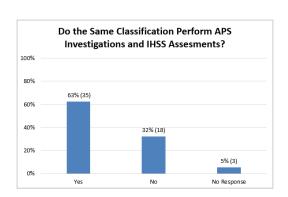
71% (40) of the counties

reported that they use the same classification to perform APS and CPS investigations.

#### **Funding Sources**

A combination of 2011 Realignment, General, and Federal funds are the primary sources of APS funding. Additional APS funding sources reported include Skilled Professional Medical Personnel (SPMP) federal funding and Social Services Block Grant funding. Other revenue sources used to support APS include donations, Victims of Crime Act (VOCA) grant funding, and Inter-governmental funding.





### Adult Protective Services (APS) - continued

#### **Training**



While most (45/56) APS programs require on-the-job training such as shadowing or online coursework for a period of 2 weeks to 3 months, only 23% (13) of counties report having a formal induction training for new APS social workers. Of

those, most (12) report having 2 days to 5 weeks of dedicated APS-specific training.

34% (19) of the counties reported that APS social workers receive the same IHSS training as IHSS social workers, 25% (14) receive limited IHSS training and 36% (20) do not receive any IHSS-specific training.

39% (22) of APS social workers are required by their county to participate in continuing education related to APS.

Continuing education topics reported include:

- ♦ Law & Ethics
- ♦ Financial Abuse
- ♦ Multi-Disciplinary Teams
- ♦ Substance Abuse
- ♦ Mental Illness
- ♦ Estate Planning
- ◆ Capacity
- ♦ Neglect
- ◆ Confidentiality
- ◆ Investigations (all levels)



Of those who responded that their new APS social workers are expected to participate in continuing education, 18% (4) are expected to participate every 2-4 months and 50% (11) are expected to participate once or twice a year.

## **In-Home Supportive Services (IHSS)**

#### **Recruitment Methods**

The primary resources for IHSS staff recruitment is County HR with 91% (51) of counties reporting this as their primary source. 18% (10) of counties also report that local universities provide a resource for recruiting qualified candidates. Other recruitment methods include general partnerships, Merit Services Systems, social media, promoting within the agency, and transfers.

61% (34) of counties reported challenges in the recruitment of qualified IHSS workers. 57%

(32) of counties reported noncompetitive salaries, 45% (25) limited years of experience of applicant pool, and 36% (20) unpopular geographic area as barriers to filling vacant IHSS social worker positions. Additional barriers include job complexity, high cost of living,

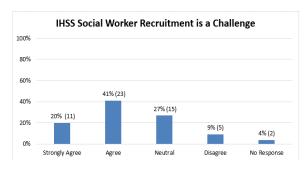
complexity, high cost of living, current fiscal forecast, slow administrative processes, and candidates not passing medical or background checks.

#### **Staffing Levels**

43% (24) of counties report maintaining 6 to 8 social workers per supervisor, followed by 20% (11) with a 3 to 5 worker per supervisor ratio. Supervisor to manager ratios varied with 45% (25) of counties reported having 1 to 3 supervisors per manager.

The utilization of nursing staff to assist with IHSS case work is fairly common practice at 61% (34) across counties. Of these, 62% (21) reported having 1 to 2 nurse FTEs employed, followed by 18% (6) having 3-5 dedicated nurses employed.





## In-Home Supportive Services (IHSS) - continued

Only 11% (6) of the counties report using behavioral health clinicians to assist with IHSS case work.

#### **Salary Ranges**

The IHSS social worker annual salary range reported by counties is 29K to 90K with an average annual salary of 55K. The average starting annual salary was 30-50K across 66% (37) of the counties and a maximum salary range of 56-80K was reported for 61% (34) of the counties.

#### **Funding Sources**

77% (43) of the counties reported that their IHSS programs are funded by 1991 Realignment funding, 57% (32) by 50% Federal Match, and 41% (23) by county

general funds. Other additional funding included Maintenance of Effort (MOE).

23% (13) of counties also reported that they receive enhanced federal funding for IHSS activities.

#### **Training**

70% (39) of new IHSS social workers are required to attend IHSS-specific training prior to making home visits. Counties also reported that new IHSS workers are expected to participate in 2 weeks to 2 months of on-the-job training including shadowing and online coursework.

23% (13) of IHSS social workers are provided the same APS training as APS social workers while 50% (28) receive limited APS training. 20% (11) of IHSS social workers do not receive any APS training.

Only 18% (10) of IHSS social workers are required to take continuing education related to APS.

Types of continuing education classes offered to IHSS social workers include:

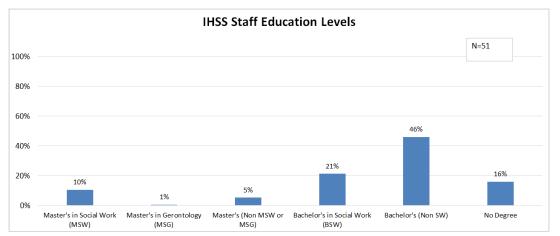
- IHSS regulation changes
- Aging and Memory Issues
- Provider Management
- IHSS Training Academy
- Annual Mandated Reporter Training
- APS Online Training Curriculum
- APS in-person Training (UC Davis)



Only 18% (10) of counties reported that continuing education is a requirement for their IHSS workers. Of those, 40% (4) participate in continuing education once or twice a year.



84% (47) of counties reported that new IHSS social worker training is a combination of Department and IHSS Academy training.



## **Data Collection Process Challenges**

he 2017 CWDA Workforce
Survey was made available to 58
counties across California at 2 different
time points to maximize participation
across the state. However, the length
of the survey (100+ questions) and
significant effort required to gather
workforce information prior to
completing the survey, made
participation and submission of
complete surveys an ongoing
challenge. Several counties entered the
survey multiple times before

completion and some were only able to provide partial surveys.

everal data entry challenges encountered in the first release of the survey including the inability to exit and re-enter the same survey; and numerical fields that limited ratio or fraction values were remedied in the second release. Still due to the lengthy nature of the survey, some counties entered more than one online survey in order to

complete their entries, or opted to provide a paper-based version which was then transcribed into the online version.

maller or larger counties reported challenges when attempting to report numerical values outside of a field's predetermined maximum, or when trying to report values less than one (1). The survey was modified after several counties reported that their data fell outside of the range initially allowed by some numerical fields.

## Next Steps

- Using the survey data, counties can share strategies and determine where they rank among other participating counties across staffing, salary, funding, and training domains.
- A multi-county workgroup was formed to determine and plan further analysis of survey data.
- The following are the workgroup's recommendations:
  - \* Adults Committee to determine regular redistribution of the CWDA Workforce Survey. Workgroup recommendation is distribution of survey every 2 to 3 years.
  - \* Data details could be beneficial to counties across the state. Adults Committee to determine distribution of 2017 CWDA Survey data outside of Adults Committee and level of anonymity.
  - \* 2017 Survey participation was a challenge due to the length of the survey. Workgroup recommends that future surveys be distributed in a programspecific manner.
  - \* Future survey versions should collect client demographic information for each county.
  - \* Future CWDA Workforce Survey should include caseload/workload questions.

