



Public Service Association of NSW

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Ms Allisar Katrib
Director
Employee Relations
Department of Communities & Justice
Locked Bag 5000
PARRAMATTA NSW 2150

Email: allisar.katrib@dcj.nsw.gov.au

Dear Ms Katrib,

Re: Casework Specialist Proposal – PSA Feedback

The PSA is writing to provide feedback on the proposed changes to Practice and Permanency delegations and reporting structures.

The PSA immediately notes that the proposed changes to Casework Specialists are scheduled to begin from 26th August 2024. The PSA considers that due to the scope of the changes, and the concerns raised below, any plan to begin carrying a caseload from 26th August should be abandoned by DCJ, and we request confirmation of this by COB Friday, 23rd August 2024.

The PSA has been inundated with feedback from our members regarding the proposal, and provide it below:

- Before allocation of any cases, the “Guiding Principles” for the core work Casework Specialists will undertake, and the types of cases they should be allocated, must be completed, including consultation with all stakeholders, in particular Casework Specialists. **The PSA requests an outline, including any relevant timeframes, of the plan for specific consultation on these principles.**
- A Practice Governance group is being created to oversee this restructure and proposed model. Given this group will govern the work and role of CWS, why is there no representation of CWS in this group? 72 CWS will sit in Districts, and yet there is only one district representative. 8 CWS will remain with the OSP, and there are 4 OSP representatives. This governance group is not representative of the majority of CWS that are affected by this change to role and reporting. **The PSA request CWS representation in this Practice Governance group.**

- Were there any other models/options considered and if so, why were they not suitable?
- The Manager Casework has the responsibility for directing the work of the Caseworkers. **If the Casework Specialist encourages a Caseworker to do one thing and the MCW directs them to do the opposite, who's direction does the Caseworker follow?**
- The provision of 4-5 cases will significantly affect the ability for CWSs to facilitate group supervision, training, individual consults as well as conduct case reviews which is a current expectation. There will be no meaningful coaching, consultation, reviews, or professional development support. **What current tasks will be reduced to accommodate the increased workloads holding a caseload will result in, and what is the plan to mitigate the risks of these tasks not being performed?**
- How will Regional CWSs, who are already stretched to the limit, be able to perform these duties as well as the proposed caseload?
- How is DCJ purporting they are going to support good practice, staff development and quality assurance in the absence of CWSs doing this work?
- The diversity of views in panels and group supervision will be impacted, as CWSs will no longer have time to do this work. CWS presence has been written into the policies for Safeguarding Decision Making for Aboriginal Children (SDMAC) panels; Care Pathways and Group Supervision. These policies, along with most practice advice that suggests consulting your CWS will need to be amended. **What is the timeframe for reviewing and amending these policies?**
- Casework Specialists support the thinking and often redirect the impact of a stressed workforce on analysing the experiences of children and responding with empathy and hope. This is currently done via consultation and direct field support work where Casework Specialists' model and help practitioners plan their response to children and families and engage in critical reflection. **How will this important work be undertaken if CSWs also have a caseload of their own?**
- CWS are essentially being asked to do two jobs – the role of a caseworker with a full caseload, as well as the existing roles of the CWS in consultation, coaching and training. How will CWS determine their workload, with two competing sets of responsibilities and two different managers overseeing their work? What is the criteria that will guide when a CWS should prioritise work that involves a family or work that involves a Caseworker? This is an impossible task and places the CWS in a situation of incredible risk and vulnerability.

- Casework Specialists again provide support in group supervision, in the field, in planning and consultation as well as systems reviews to support the workflow and the development of leadership capabilities in doing this. **Have DCJ considered that children in OOHC will be impacted by their Caseworkers and Managers receiving no service from Casework Specialists, and if so how will DCJ mitigate this risk?**
- The Casework Specialist roles were born from the outcomes of child death reviews and royal commissions in the 1990s that demonstrated the need to have a role that provides consultation, support, training and quality assurance. **Is DCJ saying these issues have been resolved? What evidence is there to support this?**
- The additional cultural load of an Aboriginal CWS is a further element of workload that has not been considered. This cohort attend numerous SDMAC panels as well as cultural consultations, direct practice support and work with families. **How will DCJ prevent the inevitable burnout for this group of staff? Have DCJ considered reducing the caseload for Aboriginal CWS's in recognition of their responsibilities?**
- In Regional Areas there will be additional significant travel requirements. **Has DCJ considered reducing the proposed caseload to take this into consideration?**
- How will a CWS who resides in Queanbeyan but has case management of a family in Jindabyne (2.15 hours away) respond when needed?
- The proposal notes the risk associated with having a CWS reporting to two managers (an MCS and an MPP). This is an underestimate in country areas. There are numerous places in regional / remote districts where Specialists cover numerous CSCs and clusters. They may actually be reporting to two or three MCSs plus their Manager Practice Permanency. **How will these multiple reporting lines work in practice?**
- The proposal notes there are a number of CWSs within OSP who will be redirected to Districts. **In order to support the implementation of this policy in country areas, has DCJ considered those numbers, or at least some, be directed to regional areas?** For example, this could result in a CWS in Goulburn and Queanbeyan, rather than one covering both.
- If a CWS is split between 2 MCSs does this mean each MCS can allocate only two matters to them?
- CWSs are currently expected to be heavily involved in the role out and implementation of the new assessment tool and professional judgement for safety/risk assessments. **How will this be managed if CWS also have a caseload?** It is widely held the allocation of a caseload should be delayed until

the new year so CWS's can actively participate and support the implementation of the interim assessment tools for the remainder of the year.

- Currently Casework Specialists are being briefed that they will be given very complex tasks due to their experience, but Districts are being told they should be given more straight forward tasks to mentor new CWs through. If CWS's are given more complex tasks, they will have even less time for their other roles, and these cases are not necessarily the best space in which to teach new staff. If CWSs are given simpler cases, these may be more appropriate for early training and may allow more time to do their other tasks. It also needs to be acknowledged that even the most seemingly straightforward matter can become complex quickly. **DCJ needs to provide clarity on the types of cases allocated before implementation.**
- The proposal for CSWs to have a caseload was clearly rejected in 2022 via the Allison Dillon review. This review found that Casework Specialists being repurposed to Caseworker positions and allocated a caseload was rejected by all the focus groups. **What evidence is DCJ relying on that this proposal has now been recycled?**
- It is our understanding from the CDP Redevelopment Working Group that the CDP program is being significantly reformed in response to the poor evaluation and feedback it has received. The impact of introducing a drastic change to the Casework Specialist role with the assumption that new Caseworkers will be secondary alongside Casework Specialists while completing CDP appears to be based on the current program. **Has DCJ given any consideration to making changes to the CDP program in the first instance, to fix the first problem created, before expecting CWS to take on an allocated caseload while coaching CDP Caseworkers who have spent 17 weeks in ineffective training?** This is a significant cost to the agency in terms of resources and more consideration should be given to reforming this program.
- In light of the clear problems identified with the CDP program that have contributed to its review, **the PSA requests a copy of the CDP Program Evaluation report that was recently completed. Has DCJ given any consideration to diverting resources from this program to initiatives that would address the face-to-face assessment numbers?**
- Within the CDP Program is the role of the 'practice coach' – a Senior Project Officer that is allocated to the groups of CDP Caseworkers and supports them in their learning. These roles were previously called 'Field Coach'. This group of staff have the same capabilities as CWS and the same role in coaching and mentoring CDP Caseworkers. **Has DCJ considered moving this role into Districts?**

- The proposed model states that this change is part of DCJs efforts to increase the number of face-to-face assessments. 72 CWS redeployed to districts holding a caseload of 5 families each will increase the number of assessments by 360 (possibly more if there are multiple children). Given the nature of issues currently being reported, it is unlikely these assessments will result in closure within a short time frame, and it is doubtful that the number of assessments that could be completed by 72 CWS will be statistically significant of the 112,592 children reported at ROSH. There is also consensus amongst CWS and District Leaders that beyond the initial increase in new assessments, this proposal does little to address the systemic issues that limit DCJ's ability to "see more children". **What is the evidence or data (projection forecast or modelling analysis) that has informed this proposed change and how will this proposal meet the above rational for change?**
- Many districts use a 'hub' model to allocate and respond to ROSH reports. In the Western Sydney district, all ROSH reports are triaged and assessed by the Response Team at Blacktown CSC. After completing their assessment, the team refers certain families for ongoing work by local CSCs. The ongoing work completed by CSCs does not 'count' towards the numbers of new assessments completed. **Any casework specialist in the Western Sydney District holding a case load outside of the Blacktown Response Team (currently supported by one specialist) will not be increasing the numbers of new assessments completed by DCJ.** This means that the proposed caseloads held by most specialists allocated to the Western Sydney district (and any other district with a similar 'hub' structure) will not contribute to the primary identified issue of DCJ only assessing 21% of the children reported to be at ROSH. Have DCJ considered this when formulating this proposal?

Assumptions Made

"The model is designed with the assumption that families will be allocated to the casework specialist as the primary caseworker, with the CDP caseworker providing secondary support"

- There is an assumption here that all Casework Specialists are sufficiently trained to be primary caseworkers and can commence this role immediately. Some CWS have never completed any form of CDC or CDP and will need to be offered this opportunity. Most were Caseworkers when the Department used CIS or KIDS – and will need significant training in ChildStory to be able to create records as a primary Caseworker. There is no acknowledgement of this in the proposed model and no plan for how this will be rectified before the commencement date of 26 August 2024. **There needs to be a process in place for CWS to identify which learning needs must be met before they can commence casework as the primary allocated Caseworker.**

- The move out of the OSP and into Districts is a significant change to the role within the agency. If CWS are now considered a frontline resource, they need to be afforded the same support as frontline staff. **To recommence primary casework responsibilities, CWS will need refresher training in PMOV and access to WorkSafe Guardian.**

“Once the CDP caseworker has completed their formal training, they will then assume primary allocation of these families where appropriate”

- Who makes the determination that it is appropriate? And what is the criteria that a CDP Caseworker will be assessed against to be deemed appropriate?
- The proposal has no details about what will happen to allocation of that family if there are any issues with the CDP Caseworkers performance. This may include non-completion of CDP tasks and/or concerns for their capabilities that arise from their assessment work. When this occurs, it is usually the CWS that is required to provide additional support to the CDP Caseworker to assist them so that they are able to successfully complete the program – this will be impossible to do for the CWS when they are carrying a caseload of five families.
- **There is also no detail in the proposal about what will happen if the CDP Caseworker chooses to leave DCJ before completion of CDP.** Who will the family be allocated to in that instance? Will CWS continue to work with that family indefinitely or is there a process where that family is allocated elsewhere within the CSC to allow the CWS to be allocated new families to meet the Face-to-Face assessment targets?

“Districts will need to consider how CDP caseworkers can also be exposed to casework and coaching for children in out-of-home care, as this is highly likely to be out of scope for casework specialists.”

- The Auditor-General report and numerous reviews from the Office of Children’s Guardian have highlighted DCJ’s poor record in meeting the needs and special rights of children in out of home care. CWSs provide a significant role in supporting casework practice with these casework teams to meet DCJ’s obligations in this space. At times, CWSs have been redeployed to different districts to support practice uplift in order to meet the OCG accreditation requirements. The proposed model suggests that this will no longer be within scope for CWS. **What is DCJ’s plan to fill this gap in practice support to casework teams providing OOHc casework?** It is concerning that CWS are being deployed primarily to meet the needs of more children requiring assessments, at a cost to supporting the needs of children in our statutory care with the Minister as their legal parent.

- Sydney District has an OOHC hub at Burwood CSC, which means CDP Caseworkers join an OOHC team at their commencement with DCJ. There are similar OOHC Hubs in SWS and Illawarra Shoalhaven districts. **How will this proposed model work for CWS that are based at these hubs when the CDP Caseworkers they support will be allocated children in OOHC?**
- The proposed model refers to 'coaching' CDP Caseworkers. Literature on staff development indicates that new staff that are learning their role require managing (direction – being told what to do and how) and mentoring (modelling and providing guidance). Coaching is a tool to be used when someone is seeking to improve their performance – it is a voluntary process and requires someone to have some degree of knowledge of their role, in order to identify the gaps they need to work on or the areas they wish to develop to move them in their career path. The proposed model is describing a process of mentoring, which is something that any senior Caseworker in the agency can do. CWS have been recruited into a Grade 9 position for their skills in developing casework practice for all staff across all stages of their casework careers. If CWS have a full caseload and are supporting CDP Caseworkers, they will not have any time to support other casework staff that have gaps in their performance or wish to develop themselves further by way of coaching. This will impact on Caseworkers and MCW performance and retention. **How will other casework staff be supported to perform their casework roles when coaching support will no longer be available due to CWS being allocated a caseload?**

“Casework specialists will report to managers client services for casework and financial delegation decisions and report to managers practice and permanency for individual supervision, support of CDP caseworkers and other functions of the role they undertake.”

- The proposed model has no details about how CWS will undertake child protection work (face to face assessments and all other casework associated with being the primary allocated caseworker) by themselves, with just the MCS to provide casework and financial decision making. Child protection work cannot be done in isolation and every other primary allocated caseworker sits in a team of 6-7 Caseworkers. Having a team is fundamental as everybody contributes to the support and success of each other's casework. This is particularly important when completing safety assessments – as there is the possibility those assessments mean that children need to enter care. In current practice, if Caseworkers are in the field removing children, their managers will support them by asking other Caseworkers on their teams to complete the casework tasks required to find placements, organise transportation or the purchase of emergency supplies for those children etc. **Who will provide this casework support to CWS? How will a MCS have time to allocate this work when they already have full workloads and are required in other important meetings/places?**

- There are significant concerns surrounding the MCS supervisory relationship not working in practice. **If there are many more CDP staff at one CSC than another, as frequently happens, how will one CWS cover the primary casework for those staff under direction of the one MCS?** Other CWS may be called to help cover and hence MCS may be called on to direct casework practice in CSCs that are not their own and linked to CDP caseworkers that sit in other CSCs.

Response to risks

Further consideration to the risks identified is required, as the feedback gathered suggests that a number of risks have been understated or overlooked.

- Caseworkers (and their Manager Caseworks) who are past CDP will no longer receive a very important support that they have depended upon in their day-to-day practice, and which has helped safeguard their practice and decision making. Lack of opportunity for this to occur will likely lead to more entries into OOHC, more critical incidents including child deaths and more re-reports. **Has DCJ considered this risk, and if so, what is the plan to mitigate it?**
- OOHC caseworkers and MCWs will be particularly disadvantaged in terms of tapping into CWS supports that they have relied on and see as essential in supporting their work and meeting OCG standards for children in care.
- The proposed changes have left many CWS feeling undervalued and in a role that they did not apply for. This will lead to a significant proportion of CWS staff who will likely leave DCJ in pursuit of other roles more aligned to their skills and values. This will leave a large gap in skills and experience in districts. A lack of experienced workforce is already an issue identified within districts. **Has DCJ considered this risk, and if so what is the plan to mitigate it?**
- This change to the CWS role means that CWS will undertake responsibilities in a similar role to Senior Caseworkers. It will no longer be a role that requires a depth of casework experience in order to be a skilled practitioner that has the additional skills of being able to influence and inspire the practice of others without holding any delegation. These changes mean that Caseworkers who are not interested in becoming managers, will no longer have a role they can aspire to in their careers. This means that they will not stay in front line child protection work, as there is no career path available to them, and that DCJ will be unable to retain staff and the experience needed to undertake skilled child protection work. **Has DCJ considered this risk, and if so what is the plan to mitigate it?**
- Manager Casework's will be disproportionately burdened with the loss of a key support in their day-to-day practice. They hold one of the most pivotal and difficult roles in DCJ and need the support to help safeguard their decisions and sustain their practice. **What support is planned for Manager Casework roles?**

- The reduction in casework support and safeguarding offered by CWS will have detrimental impacts on Aboriginal children and families. There will be less support with Active Efforts, less consultations that may prevent Aboriginal children entering care, may divert an unnecessary statutory intervention or may support their restoration. **Has DCJ considered this risk, and if so, what is the plan to mitigate it?**
- Working with men using violence is a significant issue facing caseworkers, and often a space where the CWS is relied upon to provide coaching, mentoring and field support. Men are largely invisible in casework as is, and the allocation of a full-time caseload is only going to exacerbate this issue more, potentially leaving children and women in unacceptable risk alongside increasing re-reporting. **Has DCJ considered this risk, and if so, what is the plan to mitigate it?**
- The current system measures how many safety assessments are completed, not whether children are seen and spoken with, or how well this process is actioned by caseworkers. Allocating a full caseload to CWS under the guise of seeing more children is short-sighted in the context of the Practice Governance presently being unclear alongside there being a lack of data in relation to the quality of assessment work across the state; it is very likely a qualitative review of assessments will reflect significant practice issues requiring attention and support – a key function of the CWS role prior to the role changes. **How will perform these assessments following the proposed role changes?**
- The changes will have a big impact on MCS who will be essentially put back into a MCW role for CWS. This will increase their workload and hence impact operations and their availability to existing MCW staff in their CSC. The supervision relationships are also confused between MPP and MCS at a time when CWS will need consistency as they re-integrate to field work. **Has DCJ considered this risk, and if so, what is the plan to mitigate it?**
- As referenced above, DCJ is implementing an interim approach to risk assessment which includes the removal of the two actuarial SDM tools (Risk Assessment and Risk ReAssessment) that have been used for the past 10 years by casework staff. These will be replaced with assessment tools that require professional judgment. The timing of this proposed change means that CWS will not be available to support this implementation in a meaningful way beyond the initial introduction to the tools, and that casework staff will not have access to practice support at a critical time when they are unlearning old ways and learning new ways of undertaking child protection work. Furthermore, due to holding a caseload, CWS will not have time to undertake their other roles of consultation, sitting in PACs and ACs to support critical reflection, learning and safeguard decision making – which are critical to safeguard against bias and predictable errors when using professional judgement. The impact of the proposed changes cannot be understated – this will impact children and families and the quality of the assessments that determine whether DCJ remain involved, and the delivery of the right services at the right time for families to address the issues that cause

harm to children. Given that an Aboriginal child is 12 times more likely to enter care compared to a non-Aboriginal child in NSW, these proposed changes will impact Aboriginal children and families more significantly than others. There are no provisions or details in the proposal about how children and families will be impacted by this change to the CWS role and what safeguards are in place to ensure no further harm is done to them by the agency. **What analysis has been done to ensure that this proposed change will not negatively impact the children and families DCJ is already involved with, in the pursuit of more face-to-face assessments?**

- This significant change to the role most significantly impacts single parents, parents with young children and workers with other caring responsibilities such as children with disabilities, sick or elderly parents etc. There has been no consultation, a very short implementation date of only two weeks from being told, and no mention of how staff will be supported to transition to their new roles. **How will staff be supported to transition to this new role when they have significant caring responsibilities?**

The current proposal has been discussed in different forums, through a variety of messaging. The PSA requests that a formal proposal is distributed to all affected staff, including specific responses to all the feedback submitted above, with further background, rationale and reasons for the change, the strategies for mitigating risks associated with the proposal and clear and specific timeframes.

The PSA would like to reiterate that in order to address the attraction and retention crisis in Child Protection, the NSW Government urgently needs to recruit another 500 caseworkers, give Caseworkers an immediate and substantial pay rise, and de-privatise foster care. The proposal to provide Casework Specialists with a caseload does not solve the crisis in Child Protection.

As stated above, the PSA would like a response to these concerns before any potential implementation, and an interim announcement the implementation date of Monday, 26th August 2024 for the allocation of cases is abandoned.

Yours sincerely,



Nathan Bradshaw
for **STEWART LITTLE**
GENERAL SECRETARY