Indiana Department of Child Services

Annual Staffing and Caseload Report

to the State Budget Committee and Legislative Council

State Fiscal Year 2018
(July 2017–June 2018)

SEAL OF THE STATE OF INDIANA
1816

Terry J. Stigdon, MSN, RN
Director

CONTENTS

Executive Summary

Each year, the Indiana Department of Child Services provides a report to the Legislative Council and State Budget Committee regarding caseloads carried by the agency's family case managers. Pursuant to IC 31-25-2-6, this report seeks to accomplish the following:

- Show the department's progress in recruiting, training and retaining FCMs;
- Describe the methodology used to compute caseloads for each FCM;
- Indicate whether the statewide average caseloads for FCMs exceed the standards established by the department; and
  - If the report indicates that average caseloads exceed caseload standards:
    - Include a written plan showing steps being taken to reduce caseloads, and
    - Identify, describe, and, if appropriate, recommend best management practices and resources required to achieve effective and efficient delivery of child protection services.

Note: At the end of SFY 2018, DCS received the results of an assessment from the Child Welfare Policy and Practice Group, which analyzed many of the factors that impact numbers included in this report. The implementation of CWG recommendations for improvements will be reflected in the SFY 2019 report.

Factors Contributing to Caseloads That Exceed the 12/17 Standard

- Increased reports made to the Indiana Child Abuse & Neglect Hotline
- Increased assessments (investigations of child abuse and neglect)
- Increased complexity of cases

Caseload Methodology

- DCS uses the 12/17 standard to calculate monthly caseload averages in 19 regions:
  - 12 assessments of child abuse/neglect allegations
  - 17 children monitored and supervised in ongoing cases
- A child placed in a residential treatment facility is weighted at 50 percent, as many of the daily case management functions traditionally performed by the FCM are assumed by the residential facility
- DCS uses the six-month caseload average for reporting its compliance with the 12/17 standard

SFY 2018 Year-End Snapshot

- 2,054 field FCM staff (individuals currently carrying a caseload)
- 273 FCMs in training
- 0 vacant field FCM positions
- 3 of 19 regions met the 12/17 standard
- An additional 3 regions were within 90 percent of necessary staffing levels to meet 12/17
- Statewide staffing level was 83 percent of need
- To have met the 12/17 standard, DCS would have needed an additional 142 caseload-carrying FCMs

Recruitment, Training and Retention of Family Case Managers

Indiana's child welfare system depends on the dedication of DCS' family case managers, whose work is integral to the protection and wellbeing of Hoosier families and children.

Continuity of case management has a direct impact on the children and families the department serves, and high FCM turnover can result in longer stays for children in foster care, delays in timely assessments of allegations of abuse and neglect, disruptions in child placements and an increased rate of repeat maltreatment.

DCS comprises more than 4,200 people who work together to protect and support Indiana's most vulnerable residents. More than half of those employees are FCMs, who serve as a lifeline to Hoosier families in crisis. Theirs is highly stressful work, as it requires them to make decision that have the potential to have a life-long impact on a child.

Supporting these employees is tantamount to ensuring the best service for the children in our agency's care. With that in mind, the agency is constantly evaluating strategies to recruit the best candidates for child welfare work as well as retain the important staff members who have already dedicated themselves to this cause. Part of this process requires DCS to assure our front-line staff members carry manageable caseloads.

Recruitment

Efforts to recruit highly qualified and committed FCMs are ongoing for the DCS HR department and the division of field operations, which employs a number of strategies aimed at attracting the best candidates. The HR team hosts career fairs across the state to engage with job candidates and seeks to broaden its reach through social media campaigns and job board advertising as well as via partnerships with area colleges/universities.

Training

Properly preparing FCMs to approach their work is integral to ensuring positive outcomes for children in our care. FCMs go through a comprehensive training program to equip them with the skills to serve Hoosier families to the best of their ability, including completion of 12 weeks of training before taking on a full caseload. Incoming FCMs are initially classified as FCM trainees, receiving $33,748 annual salary. At the time of this report, the FCM salary increased to $35,776 once the worker graduated from the 12-week training. (Note: Salary changes made as part of DCS' CWG recommendation implementation plan were effective on Oct. 17, 2018, and will be reflected in the SFY 2019 report).

The FCM training program comprises 26 classroom days and 32 local office transfer-of-learning days. In addition to the classroom training, 28 Computer-Assisted Trainings (CATs) were developed for these new workers to complete at their local offices. The training ensures new workers receive ample time in the local offices to gain hands-on experience relative to the area where they'll be working. New DCS employees are not immediately handed an entire caseload; we find it is more encouraging to incoming employees to take on smaller caseloads that we build upon as their comfort level grows.

DCS begins a new training cohort every two weeks. During SFY 2018, the department started 35 new cohort classes, and as a result of these efforts, 783 cohort members graduated to FCM status.

DCS continues to focus on leadership trainings for both directors and supervisors. In the last state fiscal year, the agency has provided workshops for supervisors including the following: Leading the Practice, Engagement through the Reflective Practice Survey, and Understanding Leadership Styles. The agency has also provided these workshops for directors: Leading the Practice, Engagement through the Reflective Practice Survey, and Promoting Culture and Climate.

Retention

A stable workforce is critical in the child welfare system, making retention of skilled employees equally important as recruitment. Each year, DCS tracks departures from the agency and the reason each employee sought opportunities elsewhere. This, coupled with caseload data, helps agency leaders determine how to best allocate vacant positions to meet operational needs in the field.

Turnover is divided into two categories — actual and negative. Actual turnover includes all FCMs who left their positions; negative turnover reflects only those FCMs who departed DCS entirely.

Negative turnover excludes employees who were promoted or transferred to another state position and is determined to be a better measure of how the department is doing with respect to retaining valuable staff.

In SFY 2018, the negative turnover calculates to 29.5 percent, which is on par with the SFY 2017 rate of 29 percent.

It is imperative the individuals who work with children and families remain committed to this very difficult work, and the department uses exit surveys to determine reasons why FCMs leave the agency. The results of those surveys consistently show that job-related stress and workload are the top influencers for leaving the agency.

DCS leaders continually seek ways to make sure staff members feel supported in the difficult but important work they do to lift up Hoosier families in need. Employee events, including staff appreciation days, local office celebrations and spot bonuses for exceptional work help to acknowledge the value of our staff.

Staff Caseload Data

Each month, DCS' case management system, Management Gateway for Indiana Kids (MaGIK), gathers information about current staffing levels and caseloads; this data helps agency leaders, in conjunction with the HR department, determine which regions are in the greatest need of additional employees.

MaGIK tracks new assessments opened each month, as well as the number of children who are being served in ongoing case, broken down by county. PeopleSoft, the state's human resources information system, compiles staffing levels, including total staff, staff in training, and staff unavailable for other reasons (such as leaves of absence).

DCS is organized into 18 geographical regions, with each region comprised of between one and nine counties. Additionally, the department created the central office region to encompass FCMs from the institutional assessment unit and the collaborative care unit, for a total of 19 regions.

DCS focuses its FCM-hiring practices on a regional level. Hiring FCMs on a regional basis (versus county-based) allows regional managers to better allocate resources as needed. With fluc-

tuations and spikes in caseloads, along with FCM vacancies, this process provides flexibility to redeploy FCMs to another county within a region, either temporarily or on a permanent basis. FCM need for each region is determined by using the same process outlined above, with the totals for each county within a region combined for a regional total.

Indiana law (35-25-2-5) dictates the following in regard to caseload limitations:

> Sec. 5. (a) The department shall ensure that the department maintains staffing levels of family case managers so that each region has enough family case managers to allow caseloads to be at not more than:
>
>> (1) twelve (12) active cases relating to initial assessments, including investigations of an allegation of child abuse or neglect; or
>>
>> (2) seventeen (17) children monitored and supervised in active cases relating to ongoing services.
>
> (b) The department shall comply with the maximum caseload ratios described in subsection (a).

There is no universal caseload standard governing all states, and most states do not have caseload standards codified in statute. Moreover, many states weigh cases differently in calculating caseload compliance, which means that case counts are not a function of just volume, but also complexity.

Exhibit 1 shows the number of FCMs needed to reach an average of 12 assessments or 17 ongoing children over the past 6 months by county and region. Please note these numbers are cyclical and vary from month to month.

Methodology Used to Compute Caseloads

The caseload methodology closely aligns with current DCS practice by removing from the 12/17 caseload analysis those specialized FCMs not carrying caseloads, such as hotline intake specialists, foster care and relative care specialists, and staff in training.

Effective with this report, DCS analyzes a six-month caseload average to measure agency compliance with the 12/17 standard. A six-month caseload average highlights current caseload trends, providing a more accurate representation that allows the agency to make better staffing and management decisions.

DCS uses caseload weighting to more accurately reflect caseloads based on the amount of work required to perform standard case management tasks. A child with a residential placement, for example, is weighted at 50% of the value of a CHINS case, as many of the daily case management functions traditionally performed by the FCM are assumed by the residential facility.

In addition to caseload weighting, DCS continues to evaluate workload and the functions performed by FCMs to determine an appropriate caseload. For example, the Collaborative Care program, a foster care program designed to allow older youth to receive case management support and services after age 18, has specially trained Collaborative Care Case Managers (3CMs). Collaborative Care looks past the idea of solely providing independent living services to older youth, pulling together two essential elements of becoming an emerging adult: building upon existing skill sets and developing supportive social networks. This program was designed to support youth-adult partnerships during the case planning, implementation, and monitoring process. In order to ensure appropriate workload for all FCMs, the Collaborative Care Unit was added to the 12/17 staffing table in SFY 2013. Another example of a unit with specialist FCMs is the Institutional Assessment Unit, which investigates allegations of child abuse and neglect in schools, day cares and residential facilities.

Additionally, in order to better support FCMs and remove certain functions from their workloads, DCS created two types of specialized FCM positions in the areas of foster care and relative care. The

department currently has 160 of these FCM specialist positions (129 foster care specialists and 31 relative care specialists) to improve recruitment, licensing and support of foster parents and relative caregivers. In addition, these positions provide relief to FCMs who were previously required to manage licensing and placement matching, as well as provide support for foster parents.

Since implementation of the specialized FCM position, the role of the specialist has evolved and is no longer solely comprised of duties previously handled by field FCMs. The specialists now manage all aspects of foster parent licensing, provide detailed guidance to FCMs in placement-matching, develop and implement recruitment plans to find the right foster parents to meet the needs in a particular region, manage initial orientation and training of new foster parents, and provide a higher level of support to foster parents and relative caregivers. In order to accommodate this evolution in practice, DCS does not include the specialist positions in its county or regional caseload calculations.

Because of the large number of FCMs the Department employs and staff attrition, DCS will always have a certain number of FCMs in training. In order to ensure the FCMs in training are appropriately identified, DCS created a new classification for FCM Trainees.

This classification allows DCS to more clearly identify the number of staff in training and to acknowledge that during those 12 weeks, staff are unable to carry caseloads and reduce the workload at the local level. FCMs in training are not included in the caseload calculation.

As DCS continues to evolve its practice, the department will continue to research and evaluate the use of caseload weighting and, as appropriate, implement additional measures to more appropriately reflect the workload associated with carrying various types of cases.

Compliance with Standards and Plans to Reduce Caseloads

SFY 2018 reflects a downward trend in the number of cases handled by DCS. At the end of SFY 2018, DCS had 26,047 open cases (including involvements of CHINS, informal adjustments and Collaborative Care/older youth), about an 11 percent drop from the end of SFY 2017, when the agency had 29,173 open cases.

At the end of SFY 2018, our staffing level was at 83 percent of need, with three of 19 regions achieving the required caseload averages of 12 assessments or 17 ongoing cases. To have met the 12/17 standard statewide, DCS would have needed an additional 142 caseload-carrying FCMs. This number is calculated in each region using the "6-Month Average FCMs Needed to Meet 12/17" figure from Exhibit 1 and subtracting the number of FCMs already deployed to the field and the FCMs in training. FCM trainees are removed from the calculation because they represent existing workers that will be able to carry caseloads in the near future, upon graduation.

At the end of SFY 2018, DCS had 2,054 caseload-carrying FCMs and an additional 273 FCMs in training. Staff in training are unable to carry full caseloads for a 12-week period from date of hire. During SFY 2018, the department started 35 new cohort classes, and as a result of these efforts, 783 cohort members were deployed to local offices.

In addition to analyzing the number and types of ongoing cases, DCS evaluates the number of assessments opened each month. Staffing to ensure average caseloads of 12 assessments for FCMs at a time is particularly challenging due to the fluctuation in the number of reports DCS receives each month. This was evident in SFY 2018, as evidenced by the range of assessments between the highest month total (12,187) and the lowest (8,163).

Assessments per month, SFY 2017 and SFY 2018
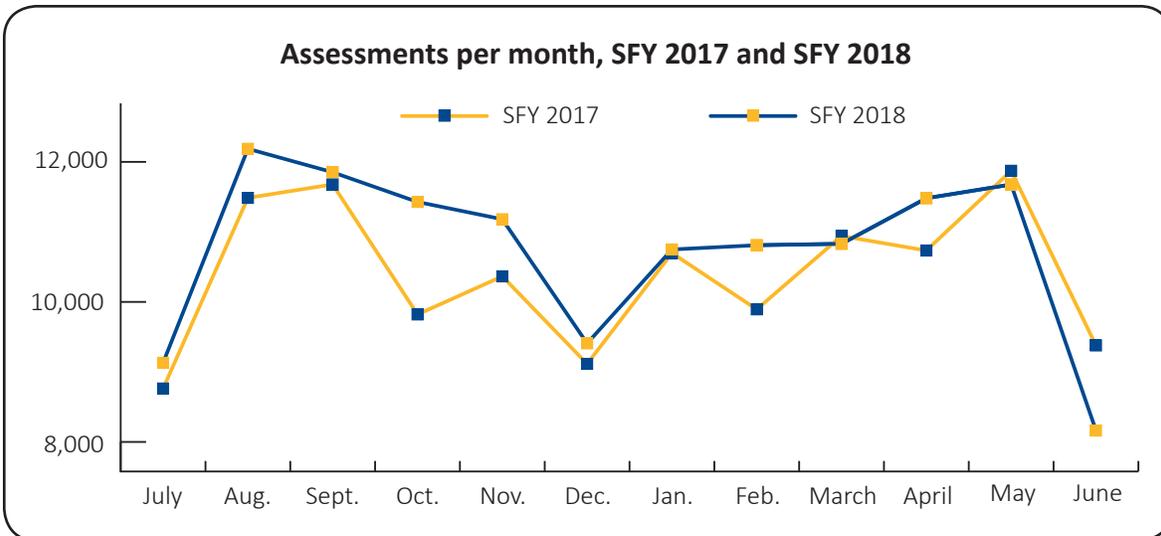
Month	Assessments	Change from SFY 2017
July 2017	9,130	+ 4.2%
August 2017	12,187	+ 6%
September 2017	11,852	+ 1.5%
October 2017	11,428	+16.4%
November 2017	11,181	+ 7.9%
December 2017	9,408	+ 3.2%
January 2018	10,749	+ 0.5%
February 2018	10,810	+ 9.3%
March 2018	10,830	- 1%
April 2018	11,481	+ 7%
May 2018	11,677	- 1.7%
June 2018	8,163	- 13%

DCS implemented strategies in SFY 2018 to reduce caseloads and staff turnover, and ensure compliance with the 12/17 standard. DCS has been working on implementing changes over the past year to improve staff workloads and increase the department's efficiency. Over the last year, DCS has implemented intensive initiatives to improve staff training and use of technology, better plan for future workforce needs, better support its staff, and safely close cases ready for closure. DCS is fully committed to keeping the administration and the legislature abreast of the progress and challenges in meeting the 12/17 standard. The department will continue to regularly evaluate its staffing needs to determine when and where new positions will be allocated statewide.

All of the efforts taken in SFY 2018 and those planned for SFY 2019 will continue to move the department in the right direction in effectively and efficiently administering child welfare services. DCS recognizes that this work is never complete, and as such, the department will continue to evaluate ways to make changes in the future to better serve Hoosier children and families.

A primary goal of the agency in 2019 is to improve the service offered to Hoosier families and children through reduced staff turnover. DCS has made a number of changes in pursuit of this goal; these efforts and other improvements resulting from the implementation of CWG's recommendations will be reflected in the SFY 2019 report.

Effective and Efficient Delivery of Child Protection Services

DCS was created in 2005 as a standalone agency charged with administering Indiana's child protection and IV-D child support systems. Today, Director Terry Stigdon leads a staff of more than 4,200 employees with local offices across the state, organized into 18 geographic regions. An additional region encompasses Central Office FCMs from the Institutional Assessment and Collaborative Care Units, for a total of 19 regions.

Since its creation, DCS has implemented a number of strategies designed to achieve child welfare best practices and ensure the agency is successful in furthering its mission of protecting children from abuse and neglect. DCS administers a variety of programs with the goal of developing, procuring, and delivering a range of proven, effective services to ensure the well-being of children and to ensure their financial support. The department also collaborates with other key stakeholders to provide a multi-disciplinary approach to tackling challenging child welfare issues.

Prior to 2010, there were more than 300 different phone numbers across the state a person could call to make a report. In 2010, DCS established the Indiana Child Abuse and Neglect Hotline to ensure consistent and improved handling of calls alleging child abuse and neglect. The hotline is staffed with trained FCM intake specialists and at least one supervisor on every shift, 24 hours per day, 365 days per year. FCM intake specialists are specially trained to ask probing questions to obtain comprehensive information about a number of factors, including those that could impact worker safety. These specialists gather information from callers, enter the information into the DCS intake system and make recommendations to the DCS local office as to whether the information provided meets statutory criteria for DCS to conduct an assessment. The local office reviews the recommendations included in the report to make a final decision of whether or not to open an assessment.

Calls are routed to one of five DCS hotline locations (Marion County, Blackford County, Lawrence County, St. Joseph County, and Vanderburgh County) in an effort to minimize wait time. In recent years, DCS has seen the number of reports increase annually, as indicated below:

SFY 2015	200,118
SFY 2016	211,502
SFY 2017	235,609
SFY 2018	247,658

From SFY 2015 to SFY 2018, the hotline saw a 24 percent increase in reports. We believe this is due in large part to increased awareness of the hotline. We continue to spread word of ways to report suspected child abuse or neglect, with the goal of educating every Hoosier about Indiana's status as a mandatory reporting state.

Exhibit 1

12/17 Staffing and Caseload Report, State Fiscal Year 2018

County Name	6-Month Average Number of FCMs Needed[1]	Available FCMs Carrying Full Caseload[2]	Additional FCMs Needed[3]	Percentage of Need Filled by FCMs carrying Full Caseloads[4]	FCMs in Training[5]	FCMs Needed minus Training and Vacancies[6]
Statewide						
Total	**2,469**	**2,054**	**415**	**83%**	**273**	**142**
Central Office						
Total	**66**	**71**	**(5)**	**108%**	**0**	**(5)**
Collaborative Care	48	54	(6)	113%	0	(6)
Institutional Unit	18	17	1	94%	0	1
Region 1						
Total	**155**	**162**	**(7)**	**105%**	**6**	**(13)**
Lake	155	162	(7)	105%	6	(13)
Region 2						
Total	**83**	**88**	**(5)**	**106%**	**2**	**(7)**
Jasper	8	10	(2)	125%	0	(2)
Laporte	31	30	1	97%	2	(1)
Newton	5	6	(1)	120%	0	(1)
Porter	25	27	(2)	108%	0	(2)
Pulaski	5	5	0	100%	0	0
Starke	9	10	(1)	111%	0	(1)

[1]Average number of caseload-carrying field FCMs needed to meet 12/17 standard
[2]Number of caseload-carrying field FCMs
[3]Additional FCMs needed to meet 12/17 standard (Column 2 minus Column 3)
[4]Percentage of staff need that is currently filled (Column 3 divided by Column 2)
[5]The number of FCMs currently in training
[6]Additional FCMs needed to meet 12/17 standard, not counting vacancies and FCMs in training (Column 4 minus Column 6, as there are no vacant positions.)
Note: Staff numbers are rounded to the nearest 1 person. Some figures may be slightly off due to rounding.

■ = 90% or more   ■ = 80 − 89%
■ = 79% or less

County Name	6-Month Average Number of FCMs Needed	Available FCMs Carrying Full Caseload	Additional FCMs Needed	Percentage of Need Filled by FCMs carrying Full Caseloads	FCMs in Training	FCMs Needed minus Training and Vacancies
Region 3						
Total	**165**	**155**	**10**	**94%**	**8**	**2**
Elkhart	47	43	4	91%	1	3
Kosciusko	19	15	4	79%	3	1
Marshall	10	12	(2)	120%	0	(2)
St. Joseph	89	85	4	96%	4	0
Region 4						
Total	**231**	**204**	**27**	**88%**	**24**	**3**
Adams	14	13	1	93%	1	0
Allen	134	114	20	85%	14	6
Dekalb	14	13	1	93%	1	0
Huntington	11	9	2	82%	3	(1)
LaGrange	8	8	0	100%	1	(1)
Noble	17	17	0	100%	0	0
Steuben	11	8	3	73%	3	0
Wells	13	13	0	100%	0	0
Whitley	9	9	0	100%	1	(1)

County Name	6-Month Average Number of FCMs Needed	Available FCMs Carrying Full Caseload	Additional FCMs Needed	Percentage of Need Filled by FCMs carrying Full Caseloads	FCMs in Training	FCMs Needed minus Training and Vacancies
Region 5						
Total	**98**	**76**	**22**	**78%**	**16**	**6**
Benton	3	0	3	0%	0	3
Carroll	7	5	2	71%	1	1
Clinton	13	13	0	100%	0	0
Fountain/Warren	12	12	0	100%	0	0
Tippecanoe	53	35	18	66%	13	5
White	10	11	(1)	110%	2	(3)
Region 6						
Total	**69**	**63**	**6**	**91%**	**8**	**(2)**
Cass	12	10	2	83%	1	1
Fulton	7	7	0	100%	2	(2)
Howard	29	27	2	93%	1	1
Miami	10	9	1	90%	3	(2)
Wabash	11	10	1	91%	1	0
Region 7						
Total	**117**	**97**	**20**	**83%**	**21**	**(1)**
Blackford	7	8	(1)	114%	0	(1)
Delaware	61	50	11	82%	11	0
Grant	28	25	3	89%	3	0
Jay	8	5	3	63%	4	(1)
Randolph	13	9	4	69%	3	1

County Name	6-Month Average Number of FCMs Needed	Available FCMs Carrying Full Caseload	Additional FCMs Needed	Percentage of Need Filled by FCMs carrying Full Caseloads	FCMs in Training	FCMs Needed minus Training and Vacancies
Region 8						
Total	**106**	**92**	**14**	**87%**	**10**	**4**
Clay	15	12	3	80%	1	2
Parke	7	6	1	86%	0	1
Sullivan	12	10	2	83%	2	0
Vermillion	8	10	(2)	125%	2	(4)
Vigo	64	54	10	84%	5	5
Region 9						
Total	**100**	**77**	**23**	**77%**	**15**	**8**
Boone	15	11	4	73%	2	2
Hendricks	26	17	9	65%	5	4
Montgomery	20	14	6	70%	2	4
Morgan	22	21	1	95%	2	(1)
Putnam	17	14	3	82%	4	(1)
Region 10						
Total	**431**	**292**	**139**	**68%**	**46**	**93**
Marion East	133	95	38	71%	8	30
Marion North	132	62	70	47%	16	54
Marion South	40	56	(16)	140%	17	(33)
Marion West	126	79	47	63%	5	42

County Name	6-Month Average Number of FCMs Needed	Available FCMs Carrying Full Caseload	Additional FCMs Needed	Percentage of Need Filled by FCMs carrying Full Caseloads	FCMs in Training	FCMs Needed minus Training and Vacancies
Region 11						
Total	**125**	**104**	**21**	**83%**	**14**	**7**
Hamilton	30	23	7	77%	6	1
Hancock	19	17	2	89%	1	1
Madison	70	60	10	86%	6	4
Tipton	6	4	2	67%	1	1
Region 12						
Total	**77**	**62**	**15**	**81%**	**13**	**2**
Fayette	13	12	1	92%	2	(1)
Franklin	8	10	(2)	125%	0	(2)
Henry	24	13	11	54%	8	3
Rush	5	4	1	80%	0	1
Union	2	2	0	100%	0	0
Wayne	25	21	4	84%	3	1
Region 13						
Total	**112**	**82**	**30**	**73%**	**15**	**15**
Brown	6	6	0	100%	0	0
Greene	16	11	5	69%	2	3
Lawrence	28	20	8	71%	4	4
Monroe	48	35	13	73%	6	7
Owen	14	10	4	71%	3	1

County Name	6-Month Average Number of FCMs Needed	Available FCMs Carrying Full Caseload	Additional FCMs Needed	Percentage of Need Filled by FCMs carrying Full Caseloads	FCMs in Training	FCMs Needed minus Training and Vacancies

Region 14

County Name	6-Month Average Number of FCMs Needed	Available FCMs Carrying Full Caseload	Additional FCMs Needed	Percentage of Need Filled by FCMs carrying Full Caseloads	FCMs in Training	FCMs Needed minus Training and Vacancies
Total	**112**	**86**	**26**	**77%**	**15**	**11**
Bartholomew	27	17	10	63%	8	2
Jackson	17	16	1	94%	1	0
Jennings	20	13	7	65%	1	6
Johnson	34	30	4	88%	4	0
Shelby	14	10	4	71%	1	3

Region 15

County Name	6-Month Average Number of FCMs Needed	Available FCMs Carrying Full Caseload	Additional FCMs Needed	Percentage of Need Filled by FCMs carrying Full Caseloads	FCMs in Training	FCMs Needed minus Training and Vacancies
Total	**78**	**63**	**15**	**81%**	**18**	**(3)**
Dearborn	19	12	7	63%	9	(2)
Decatur	20	20	0	100%	3	(3)
Jefferson	19	16	3	84%	3	0
Ohio	1	1	0	100%	0	0
Ripley	15	11	4	73%	2	2
Switzerland	4	3	1	75%	1	0

Region 16

County Name	6-Month Average Number of FCMs Needed	Available FCMs Carrying Full Caseload	Additional FCMs Needed	Percentage of Need Filled by FCMs carrying Full Caseloads	FCMs in Training	FCMs Needed minus Training and Vacancies
Total	**155**	**115**	**40**	**74%**	**20**	**20**
Gibson	16	10	6	63%	4	2
Knox	22	16	6	73%	3	3
Pike	7	6	1	86%	0	1
Posey	14	14	0	100%	2	(2)
Vanderburgh	78	54	24	69%	9	15
Warrick	18	15	3	83%	2	1

County Name	6-Month Average Number of FCMs Needed	Available FCMs Carrying Full Caseload	Additional FCMs Needed	Percentage of Need Filled by FCMs carrying Full Caseloads	FCMs in Training	FCMs Needed minus Training and Vacancies
Region 17						
Total	**76**	**71**	**5**	**93%**	**8**	**(3)**
Crawford	10	9	1	90%	0	1
Daviess	13	14	(1)	108%	0	(1)
Dubois	12	10	2	83%	3	(1)
Martin	4	5	(1)	125%	2	(3)
Orange	12	12	0	100%	1	(1)
Perry	12	9	3	75%	2	1
Spencer	13	12	1	92%	0	1
Region 18						
Total	**114**	**94**	**20**	**82%**	**14**	**6**
Clark	34	30	4	88%	3	1
Floyd	39	28	11	72%	8	3
Harrison	9	7	2	78%	1	1
Scott	24	22	2	92%	1	1
Washington	8	7	1	88%	1	0

Prepared by the Office of Data Management, Reports and Analysis. Source: MaGIK Monthly Data

INDIANA

DEPARTMENT OF

CHILD

SERVICES