Reducing unnecessary social worker workload through workload and caseload management

Research report

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Introduction

This report is published as part of a suite of supplementary reports from the work of the National Workload Action Group (NWAG). NWAG was established by the Department for Education to identify potential solutions to reduce unnecessary social worker workload, so that social workers could focus on necessary activities. The suite of supplementary reports provide additional detail about the activity and findings of each of the workstreams: admin support, workload and caseload management, supervision, hybrid working and digital practice and the use of AI in case recording. The NWAG Final Report summarises the NWAG activity and recommendations.

This supplementary report summarises the research and policy papers on social worker workload and caseload. It identifies the challenges in defining a single workload or caseload management system which would work for everyone, while recognising the impact of workload and caseload on social workers if no workload or caseload management system is in place. Different approaches to caseload and workload management are explored, highlighting the benefits and challenges of each. The project insights summarise the key findings from the project. Case studies of different approaches to workload and caseload management are on Support for social workers.

Definitions

Workload management and caseload management or measurement are separate and distinct, although are often used interchangeably. The definitions below describe what is meant in this supplementary report when the terms 'workload' and 'caseload' are used.

Workload varies according to what is happening in children's lives, and the level of activity needed from the social worker. This will vary over time as family circumstances change and situations escalate or remain stable. It includes the other work social workers do which is not directly about children on their caseload. A **caseload** is the number of children and families assigned to individual social worker at a given time.

'Caseloads' reflects a ratio of cases to workers, measured by individual worker and assigned to specific types of case. Unmanageable 'caseloads' are a significant feature of high workloads and have a direct impact on worker ability to practice effectively. The importance of how different levels of social worker expertise interacts with managing complexity, as well as volume of work is highlighted in the literature,[1] emphasising the need to consider proposed solutions collectively. When referring to 'case', it is not meant to refer to an individual child, but the term is used here because it is a commonly understood term.

[1] Miller, E and Barrie, K. (2022) *Setting the Bar for Social Work in Scotland*. Social Work Scotland

Context

The case for strategies to reduce social worker workload

Over the past 20 years, there have been repeated calls for greater use of workload management systems (WMS) in social care. While more common in the US, workload management systems are also being used in English settings. WMS can be manager-led, using managers' knowledge of team strengths and case types, or tool-based, using measures and formulas based on case complexity and risk.

Surveys examining the challenges faced by the social work profession highlight that social workers have high caseloads, work excessive hours, experience reduced wellbeing, and have intentions to leave the profession.[2] The Social Work Task Force (SWTF)[3] emphasised the importance of social work organisations undertaking health check audits and applying transparent systems to manage workload and case allocations.

Evidence from practitioners indicates that reducing the number of cases per social worker can help lower workplace pressures, provide opportunities for practitioners to establish higher quality relationships with families, and enable practitioners to anticipate problems rather than only react to crises.[4]

NWAG activity is focused on identifying potential solutions to reducing unnecessary social worker workload. Undoubtedly, how social worker workload and caseload are measured and managed forms part of any solution to address workload issues.

[2] Annual surveys by Community Care, the British Association of Social Workers, UNISON, and the Department for Education's longitudinal study of children and family social workers.
[3] The Social Work Task Force (2009) 'Building a safe, confident future: The final report of the Social Work Task Force' The Social Work Task Force.
[4] National Children's Bureau. (2017). No Good Options: Report of the Inquiry into Children's Social Care in England. [online] Available at: https://www.ncb.org.uk/resources/all-resources/filter/social-care/no-good-options-report-inquiry-childrens-social-care [Accessed 7 Mar. 2025].

Project approach

The NWAG made the following proposals in relation to caseload and workload management to be taken forward into the development and review stages of the programme:

- review existing evidence about (case) workload management models
- explore current promising practice in local authorities with a view to considering a workload ‘range’ for social workers
- explore how the workload (caseload) range might be applied in local authorities

The first of these proposals, a review of existing evidence about (case) workload management models, was completed by Dr Mary Baginksy, and highlighted the significant challenges faced by social workers due to managerialism, administrative burdens, and caseload management. This underscored the need for effective systems and further research to support the profession.

The second and third proposals made by the NWAG involved a multi-faceted iterative process to gather, test and review information on caseload and workload management. This involved engaging a diverse range of stakeholders to ensure a comprehensive understanding of caseload and workload management. Local authorities were involved to gather perspectives from different regions, while social work professionals, including principal social workers, heads of service, and team leaders, provided frontline insights. Senior managers were engaged to understand strategic and policy-related challenges. National representatives from Unison and the British Association of Social Work were also involved, bringing broader advocacy and policy perspectives to the discussions.

This inclusive approach ensured that the study captured a wide array of viewpoints, making the findings and recommendations robust and well-rounded. All collected data were thematically analysed to identify key patterns and insights, ensuring a thorough understanding of the issues. Specifically, the methodology involved:

- a survey conducted among the local authorities who formed the Review, Testing and Implementation Network (RTIN) supporting this project, yielding nine responses from six different local authorities. This survey provided initial insights into the approaches and strategies to managing caseload and workload
- focus group discussions were held with professionals from six local authorities. These discussions included principal social workers, heads of service, and team leaders, offering a rich qualitative perspective on the challenges and experiences related to caseload and workload management

- to gain deeper insights, one-to-one discussions were conducted with senior managers. These conversations focused on strategic challenges and policy gaps, providing a managerial viewpoint on the issues at hand
- two focus group discussions were organised with national representatives from Unison and the British Association of Social Work
- caseload and workload management were also key topics during RTIN meetings, ensuring that these issues were discussed in a collaborative setting

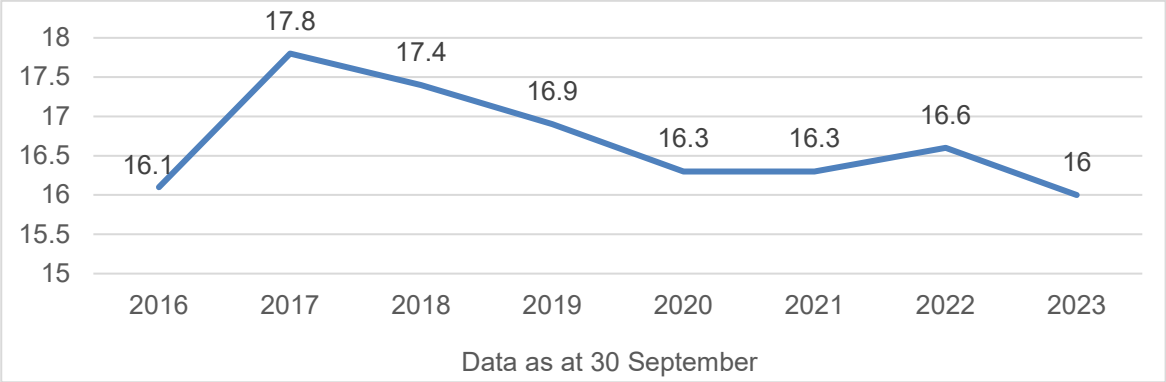
Key messages

A summary of the evidence

The Social Workers' Union (SWU) and the Independent newspaper conducted a survey of social workers in 2024 and found that 58 per percent said their caseloads were unmanageable, with almost all (92%) saying that 'vulnerable people' would be better protected if caseloads were lighter (N=716).[5]

The DfE annual statistics release on average caseload of children and family social workers at 30 September each year is shown in the graph from 2016 to 2023.[6]

Figure 1 - Average caseload of children and family social workers (2016-2023)



- average caseload in 2016 was 16.1 and in 2023 was 16. Between 2016 and 2023 average caseload peaked in 2017 at 17.8
- data on caseloads prior to 2016 is not comparable as it only used Children In Need and therefore did not capture all case holding social workers

Data limitations

Caution should be employed when interpreting the DfE data on social worker caseload for the following reasons:

- the data includes all registered practitioners who hold cases, which means that the figure for those who hold relatively few cases, because of their role, depresses the overall average

[5] Social Workers' Union (SWU) (2024) SWU and Independent Survey: Cost of Living Crisis. Available at: https://swu-union.org.uk/2024/04/swu-and-independent-survey-cost-of-living-crisis/ (Accessed: 7 April 2025).
[6] Department for Education (2025) Children's Social Work Workforce Statistics. Available at: https://explore-education-statistics.service.gov.uk/find-statistics/children-s-social-work-workforce (Accessed: 7 April 2025).

- newly qualified social workers have their cases capped which can also affect the overall average
- using the median number of cases as well as the average would be more reliable. The data does not take into consideration the complexity of cases

What recent studies tell us about workload

Caseload indicates 'the number of cases assigned to an individual worker in a given time period' whereas workload is usually interpreted as the average time it takes a caseworker to do the work required for each assigned case and complete other non-casework responsibilities.[7]

A number of factors can impact on workload. These include:

- complexity of the families a social worker is working with, and the mix of families in a caseload
- location, including travel time in rural settings and in some urban areas without good transport or because of congested roads
- levels of poverty and deprivation
- availability of community interventions, services and supports to which people may be referred
- social workers' knowledge, skills, experience and expertise
- number of available and suitably qualified social work staff
- availability of administrative support
- frequency and quality of supervision and other forms of managerial support
- organisational issues including leadership and culture
- the physical environment in office or hybrid working
- external factors such as policy directives in relation to timescales for concluding activities[8]

It is important to employ caution when interpreting the data from surveys because they do not include representative samples. They are instead self-selected samples and therefore likely to be biased. However, the messages from recent surveys are consistent:

[7] Kim, J., Yi, E., Pierce, B. and Hall, J. (2019). Effective workload management in child welfare: Understanding the relationship between caseload and workload. Social Policy & Administration, 53(7), pp.1095–1107. doi:https://doi.org/10.1111/spol.12499.
[8] Ylvisaker, S. and Rugkåsa, M. (2022) Dilemmas and Conflicting Pressures in Social Work Practice. European Journal of Social Work. Available at: https://doi.org/10.1080/13691457.2021.1954884 (Accessed: 8 April 2025).

- a survey of social workers in London and the Southeast in 2023[9] found that 36 per cent described their workload as unmanageable (N=1000)
- the British Association of Social Workers (BASW) annual survey found that 50 per cent of social workers were unable to cope with their workload and 65 per cent reported not being able to complete all their work during their contracted hours (N= 1215)[10]
- a longitudinal study to investigate recruitment, retention and career progression of local authority child and family social workers over five years (2018 to 2022) commissioned by the DfE found that in the most recent data collection in 2022, 63 per cent of respondents reported that their overall workload was too high (N=1283).[11] This was an increase on previous years' data collections. In addition, the most commonly cited reasons given by those who were considering leaving local authority child and family social work in the next 12 months were high caseloads (49%)

Workload management strategies

Over the past 20 years there have been repeated calls for greater use of workload management systems to be applied in social care and there have been numerous attempts to develop effective WMS. There are two types of workforce management systems:

- **manager led**: these use managers' knowledge of the strengths, skills and capacities of team members, alongside the number and types of cases. Managers will also address targets and work with their teams to prioritise, allocate, close and transfer cases
- **tool-based** which use various measures and processes, which may include the number and types of cases, as well as a weighting system with a formula based on complexity and risk

There are three stages of implementing workload management systems identified by Stevens:[12]

[9] The Big Listen project was carried out by the London Innovation and Improvement Alliance (LIIA) in collaboration with the South East Sector Led Improvement Programme (SESLIP) (SESLIP and LIIA, 2023).
[10] British Association of Social Workers (BASW) (2023) *Annual survey of social workers and social work 2023,* BASW Annual Survey of Social Workers and Social Work 2023, (Accessed 7 April 2025)
[11] Department for Education (2023) *Longitudinal Study of Local Authority Child and Family Social Workers*. Available at: https://www.gov.uk/government/publications/longitudinal-study-of-local-authority-social-workers (Accessed: 7 April 2025).
[12] Stevens, M. (2008). *Workload management in social work services: what, why and how?* Practice. Social Work in Action, 20(4), 207-221.

- the planning stages
- establishing information about the workforce
- understanding the type of work involved

Data from social workers on the tasks they complete over a period and how long they take would also be beneficial. This would help ensure the system reflects the current reality.

Workload management systems are more common in the US. However, there are some examples of their development and implementation in English settings.[13]

Evidence and efficacy

At the present time it is not clear if it is possible to develop a systematic approach to workload management to inform the allocation of work. There is little evidence that workload and caseload management and measurement tools are effective.

Research demonstrates that there is scope to evidence the effectiveness of 'case' allocation tools and explore how best to support social workers and employers to use them.[14] Little is known about the impact on caseloads and workloads of social work practice models that have been introduced across English local authorities.

The following elements should be considered when developing a workload management system:

- good quality data to inform the systems developed
- use of other information to assess the quality of work – e.g. evidence about outcomes, increases in demand, the time needed for different tasks
- repeated information gathering
- recognising that different kinds of work will have different impacts on workers and may affect the time taken on similar tasks. Including different types of family circumstances and a variety of presenting issues as part of the workload measurement approach will help allow for this variable

[13] Association of Directors of Children's Services (ADCS) (2016) Children's Services Social Work Caseloads. Manchester: ADCS.
[14] Rodwell, C. (2024) 'Measuring caseloads, building resilience, and preventing burnout.' Research in Practice. https://www.researchinpractice.org.uk/all/news-views/2024/march/measuring-caseloads-building-resilience-and-preventing-burnout/ (Accessed: 7 April 2025).

Caseload management

There is a long history of attempting to develop caseload management systems. There are the following general approaches that have been used in determining caseload size:[15]

- judgement of professional staff members
- workload studies that look at the amount of time staff members spend on different activities, or the amount of time spent serving different types of families
- a standard based on the number of allocated children carried by workers that achieve agency goals for children and their families
- a case-weighting formula to determine maximum caseload size for mixed caseloads

There are some examples of case management tools for use in an English context. These include Swindon and the Royal Borough of Windsor and Maidenhead.[16] An attempt to identify an appropriate and manageable caseload for social workers at different points in their career and in different service areas was carried out by an ADCS survey.[17]

More recently Ireland has developed a different national policy approach to caseload. Tusla, the child and family agency in Ireland base their caseload management approach on the Signs of Safety practice model[18] In 2022, a study for Social Work Scotland, a professional leadership body for the social work profession in Scotland, recommended 'indicative caseload limits[19] for social workers, which was supported by the workforce and Social Work Scotland, but did not become national policy.

Examples of workload management strategies

The measurement and management of social worker workload used by local authorities is carried out in different ways, including:

- **tailored approaches to workload management using manager discretion.** For example, team managers use their discretion to allocate cases based on the experience, skills, and development needs of practitioners

[15] Stein, M., et al. (1990) A Caseload-Weighting Formula for Child Welfare Services. Available at: https://www.jstor.org/stable/45394063.
[16] Association of Directors of Children's Services (ADCS) (2016) Children's Services Social Work Caseloads. Manchester: ADCS.
[17] Ibid
[18] Tusla 2018 National Policy and toolkit for Social Work Caseload Management
[19] Miller, E, Barrie, K, 2022, Setting the Bar for Social Work in Scotland, Social Work Scotland. Available at: Setting the Bar for Social Work in Scotland - University of Strathclyde (Accessed 7 April 2025).

- **case load targets or 'range'** that involve setting a number of children per worker, varied according to the type of team, with the aim to ensure caseloads are manageable. It is not always possible to retain set numbers due to various factors such as sickness and variations in the demands on the services. Numerical caseload numbers are avoided in other places, to focus on the child's needs and the social worker's capacity and expertise. However, exceeding set numbers can provide an indication of where additional resources may be needed and can be deployed strategically to make the case for recruitment or other workload management strategies
- **case load policies** for example, having no unallocated children. Whilst designed to ensure the needs of children are responded to in a timely way, policies can have unintended consequences. Short-term pressures on social workers can emerge as well as 'bottlenecks' – used to refer to where some teams or services might be unable to respond effectively. For example, a lack of capacity to provide a child with Child in Need plan could mean that they remain with the front door team, receiving only the minimum support necessary to prevent escalation
- **retaining oversight through a flexible approach** allows leaders and managers to respond to changing pressures and needs and to manage 'bottlenecks'. This requires continuous monitoring, increased triage and good levels of oversight to manage workflow. For example, managers need to have clear line of sight to team workloads, including how non-social worker staff, such as family support workers and administrative staff, are managing. Approaches include:
    - keeping teams small
    - ensuring regular supervision, including for managers
    - collaborative review processes to identify increase and reduction in need and facilitate transfer
    - organisational review of families who have been allocated to a SW for an extended period to try to identify blockages and solutions
- **reviewing team structures and wellbeing**, dedicated teams and deployment of specialist workers to create oversight and continuity. Balancing specialist teams with generic teams can help to provide additional support at critical times, such as pre-birth assessment and early permanence. Dedicated teams provide intensive support to try to prevent escalation of need and resolve issues more quickly. Social workers can become champions if they have specialist skills/knowledge in areas like life story work, domestic violence or contextual safeguarding. Other elements were:

- focusing on the role of early help in managing the front door by working with multi-agency partners to reduce demand
- using support workers to support with administrative tasks and with some face-to-face activity with families can provide SW with space to undertake more complex assessments and interventions
- having robust systems of support and strategies to support worker wellbeing, including through use of the health check[20] or SWORD tool[21]

- **systematic use of data and business intelligence**, a combination of approaches is in use but limited by an absence of good quality data to monitor workforce trends, capacity to undertake relevant analysis and continued use of manual systems. There is a strong interest in using AI to better analyse and manage data. The goal is to develop tools that can provide a clearer snapshot of social workers' workloads, identify trends, and streamline administrative tasks such as case notes. Current approaches include:
  - weekly data reports that include information on each social worker's caseload. This helps managers allocate work based on capacity and experience
  - analysis of demographic and socioeconomic data which impact on service demand. Analysis of these factors helps in understanding the broader context in which social work services operate
  - analysis of referrals (including quality of referrals from partners) and of trends over time (such as parental substance misuse) to help understanding of the underlying issues driving demand for services
  - regular performance management reports to monitor effectiveness
  - case file audits to review quality
  - financial scenario modelling to plan resource allocation

[20] Local Government Association, 2025. Employer Standards Health Check. Available at: https://www.local.gov.uk/our-support/workforce-and-hr-support/social-workers/employer-standards-health-check (Accessed 7 April 2025).
[21] Research in Practice, 2025. About the SWORD Tool. Available at: https://sword.researchinpractice.org.uk/about/ (Accessed 7 April 2025)

Project insights

Effective child and family social worker workload management strategies that systematically support planning and sustainability of the workforce are needed. There are limited ways to respond to high workload and caseload levels (despite caseload targets or 'range' being exceeded) because statutory social work must continue to receive referrals. At an individual worker level this can result in increased workloads until a worker reaches burnout; at local system level, this results in ongoing balancing of resources with a risk that worker numbers reduce, leading to retention and recruitment challenges. Without a systematic approach in which there are 'limits' for statutory social work and linked mechanisms to create a sustainable workforce, system leaders and managers have limited options. This can make the use of common tools and strategies counter-productive.

National safe workload limits could provide a lever for a system response to increases in case/workload levels, leading to greater sufficiency and retention. A virtuous cycle could be created between safe workloads, responding to sufficiency, and use of caseload/workload models to monitor and enable retention. This would require a shift in approach. Currently, the question of 'safe workload' and social worker sufficiency has been left to local authorities to determine, rather than there being a nationally agreed 'safe workload' range or limit. The issue is complex, and the algorithm required to calculate a safe workload range for each social worker hasn't yet been developed.

In the absence of a national workforce strategy or approach, retention issues are unlikely to be resolved using current workload strategies alone. The data tells us that social workers are leaving the profession and, reportedly, one of the main reasons they do so is caseload being too high, and workload being too pressured. There is evidence that some social workers are choosing to move to agency work, and one of the reasons they do so is to be able to have more control over their workload. Without 'safe workload' guidance, some social workers are working extra hours, unpaid, spending less time on direct work and often feeling unsafe in their practice. In other words, they are working in the 'panic zone'.[22] Supervision and emotional support for social workers is reported to be insufficient in some instances, and social workers are leaving the profession faster than their replacements can be recruited.

Case load tools or case weighting systems can be 'simplistic and clunky' and perceived benefits are limited, resulting in them not being used. The effectiveness of a given tool relies on how well it is populated and applied to support decision making. Where tools are complex to use, they can add to workload because they are time

[22] Rodwell, C. (2024) *Measuring caseloads, building resilience and preventing burnout.* Research in Practice. Available at: https://www.researchinpractice.org.uk/all/news-views/2024/march/measuring-caseloads-building-resilience-and-preventing-burnout/ (Accessed 7 April 2025).

consuming to complete. If no or limited data is collected, or used to inform decision making, there are few perceived benefits of adopting a single tool. This results in a lack of relevant information to systematically inform workforce planning. Caseload numbers can mask workload and complexity of the families social workers are working with and the dynamic context of the work. Numbers of families also miss dimensions of the workforce which can impact upon the 'manageability' of a given case load, like working patterns, levels of absence or leave and vacancy rates.

Different workload strategies have relative benefits and challenges for workforce management and social worker workload. There is no evidence showing a single model or approach is impactful on workload levels or retention. Instead, a combination of workload management strategies, including analysis of caseload data or 'range' combined with manager knowledge about the work and workforce is common.

There is a need for high quality workforce statistical data that includes accurate, timely data on workforce numbers, caseloads, vacancies, and sickness and absence levels. Regional workforce data are not yet consistently collected and analysed, with Regional Innovation and Improvement Alliances (RIIAs) taking different approaches to this. Regional workforce data includes national workforce statistical data terms. Elements of the national workforce statistical data terms could be strengthened to provide more meaningful information to DfE and the social care sector about the workforce elements necessary to underpin policy decisions.

In relation to the work of NWAG, this relates particularly to two areas:

- caseload data, where the average caseload numbers may be shown to be lower than they are because non-case holding social workers may be assumed to be case holders
- taking account of the impact of the non-social worker workforce who make a substantial contribution to improving outcomes for children

The recommendations from this project are in the NWAG Final Report.

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