

SOCIAL, INFORMATION AND HEALTH COMPONENT
APPENDIX 4 – WORKLOAD REPORT

Employee name: _____ **Job Title:** Guardianship Social Worker

Work Location: _____

Supervisor: _____ **Excluded Manager:** _____

STAGE 1 – Verbal discussion with supervisor – 14 days to respond.

STAGE 2 – Problem description:

Unable to meet MCFD policy/standards/expectations in the following areas:

Maintaining ongoing contact and relationship building with Children in Care (CIC), family members, foster parents, service providers and schools, monitoring attendance in school and other programs, ongoing safety planning for high risk youth, monitoring Youth Agreements, arranging and attending integrated meetings for planning and Careplans; assessing and completing Agreements with Young Adults; planning for transition to adulthood and to CLBC, initiating and participating in Family Group Conferences, unable to complete and update Careplans as per standards, maintain case notes, Closing Recordings, Case Transfer Recordings, keep ICM computer system information updated, ensure birth certificates and other ID on file, complete referral documents for services for CICs, conduct Youth Agreement Assessments and documentation, completing Reportable Circumstances reports, timely and ongoing home visits, moving children from placements, referral documents for foster homes, consultations with supervisors; returning phone calls in a timely manner, timely initiation of payments associated with CICs, extensive court preparation for hearings, assisting youth with criminal court, attending medical appointments and assessments with CICs, Cultural Planning, Determining Cultural Heritage, Consultation with Aboriginal Communities, completing Careplans, initiating and participating in Family Case Planning Meetings and Family Group Conferences, and Mediation. Participating in mandatory webinars on policy changes, practice updates, legislation changes, completing Employee Evaluation Process, completing Occupational Health and Safety Risk Assessment checklist.

Approximate time spent weekly keeping Time and Leave Management System up to date: _____.

Approximate amount of UNPAID time that signatories are performing on a weekly basis: _____.

What factors contribute to the problem?

Workload Size Unavailability of Supervisor

Inadequate equipment Malfunctioning Equipment

Absence of Staff (Specify): _____

Additional Functions assigned to the Employees (Specify)

 Training required

Other: _____

Employee's Signature: _____ Date: _____

Supervisor's and Excluded Manager's Written direction – 14 days to respond.

A copy of the documentation will be forwarded to the employee(s), the next level of excluded manager and to the Local Union Chair through the appropriate union area office.

STAGE 3 – Referred to the Article 29 Committee.

Employee's signature: _____ Date: _____

Article 29 Committee response and recommendation – 30 days to respond.

Article 29 Committee Co-Chair's signatures: _____ Date: _____

Union: _____ Employer: _____

Copies of the response and recommendation to be sent to the Deputy Minister and the employee(s).