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Optimizing home visit scheduling for family interventions: balancing service delivery and technician well-being

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Outline

- Home social intervention for families with vulnerable children
- The problem and some case study details
- The model
- Results
 - proposed plan
 - current plan vs. proposed plan
 - workload distribution
- Final remarks



Context

Several factors have been increasing the demand for Family Interventions

- Increasing trend of referrals for emotional abuse and neglect
- Awareness of the negative consequences of children's institutionalization
- Long-term societal impact

Shift towards **community-based (proximity) services**, with family-centered interventions and multidisciplinary approaches

The **organizations** providing these services **are frequently not for profit** and have difficulty in answering the rise in demand

- They present low levels of operational efficiency
- Resources are shared between services, making it hard to plan manually

Context

Home social intervention for families with vulnerable children

Social Intervention: To develop the social and emotional skills necessary for families to change negative dynamics

- Family Reunion (FR) supervision of the return of the child to the family environment after a period of removal
- Family Meeting Point (FMP) neutral and appropriate space aimed at maintaining or re-establishing family ties
- Family Preservation (FP) aims to prevent child removal from the family, mostly done by home visits

For the CAFAP of ComDignitatis, we are studying how to improve the planning of home visits for FR and FP.







Problem

Problem:

To produce a tactical baseline plan for home visits. How to assign visits to teams and when to schedule them to meet service standards Objectives:

- To improve the assignment of technicians to visits, and the visits scheduling
 - Increase the number of visits per outing
 - To balance workload
- To model work regulations in the context of worktime exemption

Technicians can work three slots in a row but must be compensated in hours To consider technician's work-life balance

		1				
Slot \ day	Mon	Tue	Wed	Thu	Fri	
Morning	Home Visit	\geq	Occupied	Home Visit	Occupied	
Afternoon	Occupied	Occupied	Occupied	Home Visit	Home Visit	Disrupts technicians
Evening	Home Visit					work-life balance

14 - 15 OUT 2024



Case study data

Data reports to January 2022 – March 2022

53 Families: 40 families associated to two techs & 13 associated to three techs

- Availability
- Time interval between consecutive visits $[T_i^{min}, T_i^{max}]$, 1h per visits

six technicians – two trainees and four senior technicians

- Work 35h/week (10 slots), not all assigned to home visits.
- Availability

Planning Horizon: three months, services on weekdays. Each day has three slots.

120 slots per technician (40 slots per month, 10 slots per week)

Technician	Number of families		
al	19		
a2	23		
a3	21		
a4	29		
a5	3		
a6	25		

Slots	Time- Windows		
Morning	9:00 - 12:00		
Afternoon	13:30 – 16:30		
Evening	17:00 - 20:00		



The model *in words*

Bi-objective multi-period assignment and scheduling problem

*Z*₁- Service quality (maximizing the number of visits) Penalize surpassing maximum limit of interval between visits

Z_2 - Workload concerns (minimizing the maximum workload)

Penalize the use of inconvenient slots

Solved through a **lexicographic approach** (GAMS + Gurobi)

de Aguiar AR et al. (2025). Home visit scheduling for family interventions: a child protection case study. *International* Transactions in Operational Research, 32: 669-691.



The model in words

Scheduling

- 3 daily visit slots with a maximum of 2 visits per slot by same team
- 2 families visits in a slot distance at most 20km
- Technicians and families' availabilities are considered
- Families already assigned to a small set of Technicians
- Consecutive visits within pre-established time interval
- Minimum of 1 visit per family in planning horizon

Work Regulations

- Technicians should work no more than 40 slots per month
 - Assured weekly to avoid workload concentration

Skill Level

Trainees can only perform visits with a senior technician



Results: Proposed plan

Weekly team meeting t3 t4 t1 t2 t5 week 1 a4+a6: {i49, i53} Meeting a3+a4: {i2, i42} a2+a3: {i13, i28} a2+a3: {i36} s1 Monday of week s2 a2+a6:{i27, i34} a2+a4:{i3, i43} a3+a4: {i20, i46} a4+a6: {i5, i12} 2 technicians a4 a3+a4: {i22} a2+a6:{i9, i18} a4+a5:{i37} a3+a4:{i50, i21} a2+a6: {i48} 53 & a6 visit family week 2 t6 t9 t7 t8 t10 i7 between 9 am a4+a6:{i7} a3+a6: {i35} a2+a4:{i47 s1 Meeting a2+a4: {i16, i33} a2+a5:{i32} s2 a2+a5: {i6} a3+a4: {i4, i30} a2+a6:{i1, i17} a3+a4:{i24, i44} a4+a6: {i45} a3+a6: {i29} s3 week 3 t11 t12 t13 t14 t15 s1 a2+a4:{i52} Meeting a3+a4:{i15} a3+a4: {i2, i42} a2+a3:{i13} s2 a2+a6:{i23, i40} a2+a3:{i39} a4+a6:{i49} a3+a4:{i22, i53} a4+a5:{i10} a2+a4: {i11, i25} a2+a6: {i27} s3 a2+a4:{i3} week 4 t16 t17 t18 t19 t20 a3+a4:{i50} a3+a4: {i12} a2+a3:{i28} a2+a3:{i36} s1 Meeting s2 a2+a4:{i43} a2+a4:{i32} a3+a4:{i20, i46} a2+a4:{i16, i33} a4+a6:{i37} a2+a6:{i9, i18} a3+a4:{i21} s3 -

Two families being visited by the same team within allowed interval

and 12 pm

EURO Practitioners' Forum 5th Annual Conference



Results

Performance indicators: **Service Quality**





Results

Performance indicators: Workload Concerns

		Current plan	Proposed plan	Variation	Maximum no. of visits	
	Max #visits	37	112	203%	performed by one technician Maximum no. of slots dedicated home visits for one	
	Max #HV slots	29	77	166%		
	Max capacity	74%	99%	25pp	technicianMaximum no. of slots	
				used by a tech and other act	nician, both with home visits ivities, as a percentage of the total available slots	



Results

Performance indicators: **Technicians' preferences**

	Current plan	Proposed plan	Variation	Total number of times at least
#inconvenience	18	72	300%	one visit is scheduled in the evening slot of a technician
Max #inconvenience	5	24	380%	Maximum no. of times, at
				least, one visit is scheduled in

the evening slot of a technician



Results: Workload among technicians



The relative distribution remains very similar, despite the increase in number

Some technicians are close to having 100% of their *capacity* (120 visits) used

The assignment of the technicians to the families was not a decision of the model

Final remarks

This was our first approach to this problem. Now we are:

- Considering the assignment of families to technicians aiming at a more balanced workload distribution among technicians
- Develop a rescheduling approach. There are many cancellations, both from technicians (e.g., required court appearances) and from families.
- Modeling technician **preferences as a third objective** rather than it being modeled as a soft constraint.

This was the first time the technicians saw a Tactical Plan of their visiting service



TEAM



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