
Senate Bill 6

180 Day Progress Report

A report from
The Texas Health and Human Services Commission
and
The Department of Family and Protective Services
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Executive Summary

Senate Bill 6, passed by the 79th Texas Legislature and signed by Governor Rick Perry, laid the groundwork for comprehensive reform of child and adult protective services in Texas. Since the legislation's passage, the state has hired more than 800 new protective services staff, strengthened training for caseworkers, improved risk assessments, and increased the focus on protecting vulnerable Texas children and adults.

These early efforts already are yielding results. Child Protective Services (CPS) has increased kinship placements for children who must be removed from their homes. The increase in child safety specialists has resulted in more high-risk cases being assessed for continued child safety. Youth aging out of foster care are now provided with continuous Medicaid coverage through a single application process up to the age of 21. Adult Protective Services (APS) has implemented a new risk assessment tool that more accurately identifies clients' needs during the investigation. APS is assigning complex cases to experts in abuse, neglect and exploitation resulting in more thorough assessments.

With the passage of Senate Bill 6 in May 2005, resources and direction were put in place to transform the programs charged with protecting children and vulnerable adults from abuse, neglect, and exploitation. As part of the ongoing legislative oversight, Section 5.01 of the legislation requires the Texas Health and Human Services Commission (HHSC) to submit a detailed progress report to legislative leadership every 180 days after its effective date. This report, due March 1, 2006, is the first of such reports.

This report documents the concrete progress that the Department of Family and Protective Services (DFPS) and the Department of Aging and Disability Services (DADS), in partnership with HHSC, have made in implementing Senate Bill 6. State leadership, community stakeholders, providers, and national experts have provided valuable input into the planning and progress to date.

Major achievements in implementing Senate Bill 6 include:

Vulnerable Adults

- Transferred the guardianship program to the Department of Aging and Disability Services September 1, 2005.
- Implemented a new APS risk assessment tool that improves the evaluation of a client's living condition, medical status, mental status, financial status and social support system.
- Hired 89 new APS staff, employed hiring specialists in each region, and instituted a pre-screening and realistic job preview.

- Made an education stipend available to all APS staff. The stipend encourages caseworkers to attain a higher level of education in APS-related fields and promotes workforce retention.
- Assigned complex cases to experts in abuse, neglect and exploitation.
- Implemented new, comprehensive APS training that includes advanced training on mental health and self-neglect and emphasizes working with community organizations, law enforcement, and courts.
- Provided tablet PC's and digital cameras to all direct delivery staff in the APS in-home and facility programs.
- Developed a new public awareness campaign, to begin in May 2006, which includes public service announcements and educational materials. Hired community initiative specialists in each region.

Children and Families

- Hired 643 CPS staff (caseworkers, supervisors and clerical support staff) from September through December 2005.
- Developed a new investigation model, which includes a stronger risk assessment instrument, new screening procedures for lower priority cases and training to recognize and respond to high-risk cases.
- Hired 81 abuse and neglect special investigators and 43 child safety specialists to assist with CPS investigations and training.
- Expanded training for CPS caseworkers to include working with law enforcement, conducting forensic investigations, gathering evidence, upholding fourth amendment rights, writing affidavits, and testifying in court.
- Implemented new processes to better screen job applicants to assess their ability to perform effectively in caseworker positions.
- Expanded the statewide kinship program, which provides initial start-up funds and financial assistance to help families with child caring expenses.
- Increased kinship care placements since the inception of the family group decision-making model.
- Started pilot programs in Houston, Arlington, and Fort Worth to address the disproportionate representation of minority children in the Child Protective system and specifically in foster care.

- Implemented continuous Medicaid coverage through a single application process until age 21 for youths who age out of foster care.
- Released a draft Request for Proposals for outsourcing substitute care services and a draft Request for Information for a comprehensive medical, behavioral health and dental network for the care of children in foster care.

Licensing and Regulation

- Adopted rules in December 2005 requiring background checks and drug testing in residential child-care operations.
- Implemented periodic random inspections of DFPS foster homes and group foster homes.
- Strengthened minimum standards for residential child care facilities and child-placing agencies.

DFPS also has developed and is implementing an agency wide accountability and performance management system. The system includes client-centered outcome measures, strengthened job performance standards, case reviews, and improved performance reports for management oversight.

Both the CPS and APS programs have made tremendous progress since the passage of Senate Bill 6. However, these programs also have encountered some obstacles to full implementation. APS has seen a surge in reports of abuse, neglect, and exploitation – greatly outpacing an expected 20 percent increase in such reports. This increase may be the result of the agency’s successful efforts to increase public awareness and reporting of abuse and neglect and a reflection of an increased demand for APS services as funding for local programs is reduced or eliminated. Similarly, CPS has experienced higher caseloads in the substitute care program due to the increase in the number and quality of abuse and neglect investigations. Other elements of CPS reform, such as the kinship care program, statewide expansion of family group decision-making conferences, and implementation of medical consent for children, have also contributed to the increasing workload of substitute care staff. HHSC and DFPS will work together to develop strategies to address these increased caseloads and other workload demands.

Another challenge has resulted from DFPS’ successful efforts to quickly fill new staff positions appropriated by the 79th Legislature. The agency is hiring record numbers of new caseworkers, leading to an increased demand for training resources, office space, and proper equipment for all staff members. DFPS has been in constant coordination with HHSC and the Texas Building and Procurement Commission to address these issues and ensure no delays occur in bringing on board 2500 new hires.

Despite some obstacles, which are to be expected in a reform effort of this size and scope, the overall implementation of Senate Bill 6 is on schedule and proceeding well. HHSC and DFPS have established a structure to monitor progress, coordinate with

internal and external stakeholders and ensure the delivery of quality services. The reforms have been driven by a focus on the most vulnerable of Texans, with their safety and well-being as the criteria against which the success of the reform effort is measured.

Introduction

In 2003 and 2004, several abuse and neglect cases ended in tragedy, despite prior involvement by the state's Child Protective Services (CPS) and Adult Protective Services (APS) programs. It was clear that the state's strained protective services system required immediate examination and fundamental reform to better provide for the safety and protection of the clients it serves.

In response to this crisis, Governor Rick Perry issued executive orders directing the Health and Human Services Commission (HHSC) to review and reform APS and CPS, both programs of the Texas Department of Family and Protective Services (DFPS). HHSC initiated an independent review of cases, training procedures, law and policies, management and organizational structure, and more. Detailed recommendations were developed and presented to the Governor, who called upon the Texas Legislature to pass emergency legislation to implement these recommendations. DFPS responded by organizing multiple initiatives to lay the groundwork for reform, while awaiting further direction and funding decisions from the Legislature.

In May 2005, the 79th Texas Legislature passed Senate Bill 6 outlining comprehensive reform of DFPS. As part of the ongoing legislative oversight, Section 5.01 of the bill requires HHSC to submit a detailed progress report to state leadership every 180 days after its effective date. This report, due March 1, 2006, is the first of such reports.

Senate Bill 6 specifies that each 180 Day Report address the following elements:

- The status of each major element of reform and each of the performance milestones specified in the act.
- Any significant obstacles encountered by the Health and Human Services Commission, Department of Family and Protective Services, or Department of Aging and Disability Services in implementing the provisions of the act, and the steps proposed to resolve those obstacles.
- Any provision of the act that state agencies are unable to fully implement due to insufficient funds.
- Any significant unanticipated fiscal implications associated with the implementation of the act, and recommendations for addressing the fiscal implications in the most cost-effective manner.
- Steps taken to enhance internal and external accountability to improve outcomes for children needing protective services and adults needing protective or guardianship services.

Following the passage of Senate Bill 6, HHSC and DFPS expanded the reform initiatives structure to include all provisions of Senate Bill 6. The reform structure was organized into 24 distinct initiatives chartered by DFPS and managed by cross-agency executive

level staff. In addition, a joint charter between DFPS and DADS was developed for oversight of the transition of the guardianship program. A brief description of each project is included in Appendix 1.

The HHSC Executive Commissioner provides leadership and oversight of all DFPS reform efforts and implementation of Senate Bill 6, is consulted on key issues involving policy or resources, and has final decision-making authority for all reform activities. The DFPS Commissioner works closely with HHSC, has direct responsibility for all reform efforts, and is involved on a daily basis in resolving issues and authorizing agency resources to enable the reform activities to move forward. Both the HHSC Executive Commissioner and the DFPS Commissioner are involved in promoting the organizational culture necessary to affect change of this magnitude.

HHSC and DFPS jointly established an executive steering committee composed of leadership from each agency to provide guidance, support and oversight to the 24 DFPS reform initiatives. The steering committee reviews the progress and work plans of the initiatives, resolves issues, identifies risks, and provides direction for project activities.

Senate Bill 6 recognizes the importance of external consultation by supporting DFPS and HHSC's efforts to draw upon the knowledge and expertise of other states, the private sector, service providers and other stakeholders in the design and implementation of the reform initiatives. HHSC has also procured project management expertise specifically to support DFPS reform. Three consultants are currently in place, assessing the entire reform effort and assisting with the substitute care outsourcing initiative. These consultants have a broad range of experience in project management, procurement, performance-based contracting, and cost modeling for performance-based contracts.

Stakeholder input has been sought on all major projects, including substitute care outsourcing, development of a medical services network for children in foster care, expansion of abuse and neglect prevention and early intervention services, strengthening child care licensing standards, and boosting the quality of abuse and neglect investigations. The body of this report includes detail of specific efforts to involve stakeholders in the reform process. In addition to these ongoing efforts, DFPS has developed a comprehensive strategic plan for agency communications that includes targeted efforts to increase stakeholder and community involvement.

The sections that follow review the major achievements of reform:

Vulnerable Adults

- Improving Structure and Practice
- Increasing Capacity
- Working Effectively with Community Partners

Children and Families

- Strengthening Investigations
- Supporting Quality Casework
- Improving Services and Child Outcomes
- Building Community Partnerships
- Preventing Maltreatment

Licensing and Regulation

- Ensuring Child Safety
- Regulatory Action

The final sections of the report discuss implementation obstacles, funding issues, and the accountability systems that will impact the ultimate success of Texas' reform effort.

Achievement Status Of Major Reforms: Vulnerable Adults

Senate Bill 6 addresses several areas of reform for the Adult Protective Services (APS) program. Investigations of APS problems revealed a program that lacked statewide consistency in employing sound case practices and achieving quality outcomes. Resources were scarce, and workers often did not have the background or training needed to accurately assess the difficult client situations they encountered. Technology support was lacking, adding an additional challenge of insufficient and untimely documentation of case actions.

The information in this section provides strong evidence that the development of a systematic and comprehensive approach to addressing APS problems is well underway. Senate Bill 6 required a number of changes to strengthen the organizational structure of APS. Policy and programmatic changes were implemented to improve client risk assessments and ensure that complex cases receive targeted attention designed to reduce repeated incidences of abuse and neglect and lower recidivism rates. Staff is also receiving better training, state-of-the-art technology, and incentives to improve qualifications and performance.

Reform has resulted in the APS program becoming more involved with community partners who can assist and reinforce these efforts. This is being accomplished through a public awareness campaign as well as more formal efforts such as community task units to monitor complex cases. Taken together, the implementation of Senate Bill 6 provisions pertinent to the APS program demonstrate solid progress towards quality and professionalism that will result in better outcomes for vulnerable adults.

Improving Structure and Practice

Guardianship Program Transfer

Section 3.02 and Section 3.03 amended the Human Resources Code to transfer statutory authority for the Guardianship Program from the Department of Family and Protective Services (DFPS) to the Department of Aging and Disability Services (DADS) on September 1, 2005. Section 3.02 further requires DFPS to refer minors in conservatorship who are at least 16 years of age and unable to care for themselves as well as adults with disabilities or elderly adults believed by DFPS to be incapacitated and in a state of abuse, neglect, or exploitation to DADS.

The transfer of guardianship responsibilities to DADS will focus DFPS' role on investigating and serving adults in need of protection. DADS' expertise with long-term care programs for persons who are elderly and adults with disabilities makes it the more appropriate agency for assuming guardianship responsibilities. Transferring this program

also removes any appearance of conflict of interest for DFPS staff in assessing and providing services for clients in need of guardianship.

Major Achievements/Milestones

- On September 1, 2005, the guardianship program was statutorily transferred to DADS. Operational authority was previously transferred through a Memorandum of Understanding effective December 1, 2004.
- An organizational structure was developed to ensure consistent statewide operation of the guardianship program at DADS. Additionally, a state office guardianship attorney and seven regional guardianship attorney positions were created to provide legal support for the program.
- A quality assurance program was established within the DADS guardianship program.
- A community outreach plan was implemented to ensure that all ancillary parties to the transfer were aware of legislative requirements. Letters were sent to all judges with probate jurisdiction (statutory probate, county courts, and county courts at law); to all county and district attorneys; and all county clerks. APS regional directors and DADS guardianship supervisors jointly visited most probate courts having significant numbers of guardianship cases to discuss the transition and respond to questions. Letters were sent to all major DADS external stakeholders updating them on the transition.
- Five existing contracts with private guardianship programs were transferred to DADS and extended through the end of fiscal year 2006. A Request for Proposals (RFP) is being developed to solicit contractors beginning in fiscal year 2007.
- DADS initiated work on a set of guardianship rules. The proposed rules will be presented to the DADS Council at its May 3, 2006, meeting.
- The guardianship handbook was revised to reflect changes in policy and practice.
- A workgroup of DFPS and DADS staff continues to ensure coordination of policy between the two agencies and will address any new issues that may arise over time.

Quality Assurance and Performance Management

Secton 2.04 instructed DFPS to develop and implement a quality assurance program for Adult Protective Services (APS). The statute requires client-centered outcome measures, minimum job performance standards for all APS employees, and procedures for conducting periodic performance reviews in order to monitor compliance with the aforementioned job standards.

The expanded requirements for quality assurance and performance management allow for active monitoring as well as a retrospective quality assurance process through which cases are reviewed based on specific factors to ensure casework was appropriately performed. Effective quality assurance and performance management functions also enable managers to identify patterns of performance at individual, unit, regional and statewide program levels.

Major Achievements/Milestones

- Client-centered outcome measures were developed using qualitative and quantitative data.
- APS staff has developed minimum job performance standards for caseworkers, supervisors, self-neglect and exploitation experts, quality assurance case readers, and regional support staff. APS is completing job performance standards for all other personnel.
- A performance management database was developed that enables APS supervisors to monitor caseworker performance.
- Five case readers were hired to measure case quality. These staff read and score cases using a standardized instrument. Scores are then tabulated and reported to regional and state office management for consultation with local unit supervisors, managers and caseworkers.
- Supervisory review of recidivistic cases was initiated. Supervisors are now responsible for reviewing recidivistic cases and assisting the caseworker with a long-term plan to resolve the issues involved in such cases.
- The first quarter performance report was submitted to the Governor and Legislative leadership on February 1, 2006.

Complex Cases

Section 2.10 instructs DFPS to develop and implement a system to ensure that, to the greatest extent possible, investigations involving complex issues of abuse, neglect, and/or exploitation are assigned to personnel who have experience and training in those areas.

This provision ensures that cases that are especially difficult to assess are given consideration by appropriate experts or specialists. Accurate assessments early in the process yield more appropriate decisions regarding case disposition, and may prevent recidivism.

Major Achievements/Milestones

- APS instituted policy and procedural changes to ensure staff with appropriate experience is assigned complex investigations.

- An expert in exploitation and evidence-driven investigations was employed in each region. These individuals have advanced skills in financial accounting, legal documentation, evidence collection and forensic investigations.
- An expert in self-neglect was employed in each region. These individuals have advanced skills in determining when to refer a client for a medical evaluation based on the client's behavior or physical surroundings.
- Self-neglect experts received specialized training, including training on effectively intervening with clients who hoard possessions or animals to the extent that they are at risk of harm.
- Experts in exploitation and evidence-driven investigations received specialized training, including training on identity theft.

Risk Assessment

Section 2.06 directs HHSC to develop and maintain risk assessment criteria for use by DFPS personnel in determining whether an elderly adult or person with a disability is in imminent risk of abuse, neglect or exploitation, or in a state of abuse, neglect, or exploitation and needs emergency protective services.

Quality risk assessments are essential in determining what actions are needed by APS to mitigate risk identified during the investigation. A comprehensive tool is necessary to ensure that risk factors are accurately analyzed so that appropriate services can be provided.

Major Achievements/Milestones

- A risk assessment tool known as the Client Assessment and Risk Evaluation (CARE) was developed and examines five areas of the client's circumstances: Living Conditions, Financial Status, Physical/Medical Status, Mental Status, and Social Interaction/Support.
- In Spring 2005, several regions piloted the paper-based CARE tool, with electronic use on tablet PCs beginning in June 2005.
- On May 29, 2005, the CARE tool was fully implemented into IMPACT, which is the DFPS electronic case management system.
- The CARE tool is currently being evaluated with an anticipated completion date of Spring 2006. Preliminary findings from pilots indicate the tool is comprehensive and effective in describing client problems and identifying potential risk.
- A rule that establishes risk assessment criteria in determining whether an elderly adult or a person with a disability is in imminent risk of abuse, neglect or exploitation or in a state of abuse, neglect or exploitation and needs protective

services is scheduled to be presented at the April 2006 DFPS Council meeting in accordance with Section 2.06.

Increasing Capacity

Staff Qualifications

Section 2.02 instructs DFPS to hire, as often as possible, Adult Protective Services caseworkers that have professional credentials in fields related to serving and protecting vulnerable adults. DFPS is instructed to hire licensed master social workers and licensed professional counselors whenever possible. DFPS shall develop a recruitment program designed to attract individuals with the aforementioned credentials provided that funds are available for such a program. DFPS shall develop an incentive program, subject to available funds, to encourage Adult Protective Services employees to obtain professional credentials described above.

Building the skill level of current staff, encouraging the pursuit of relevant formal education, and hiring new staff with professional credentials related to the protection of vulnerable adults increases the overall effectiveness of the APS program. Incentives encouraging the pursuit of professional credentials demonstrate the agency's commitment to individual professional development.

Major Achievements/Milestones

- DFPS developed a caseworker replacement program and hiring specialists were employed in each region to expedite the hiring process for APS caseworker positions in order to reduce the amount of time a position remains vacant.
- A pre-screening and a realistic job preview were instituted to ensure that applicants most likely to succeed in a particular position are selected for an interview.
- The interview process was standardized for direct-delivery staff.
- An education stipend is now available to all APS staff. The stipend encourages caseworkers to attain a higher level of education in APS-related fields and promotes workforce retention.
- DFPS has begun working with the Texas Higher Education Board to promote courses related to issues of abuse, neglect, or exploitation of the elderly and persons with disabilities.

Caseload Reduction Plan

Section 2.18 directs HHSC to develop, subject to the availability of funds, a caseload management reduction plan to reduce, not later than January 1, 2011, caseloads for workers employed by the Adult Protective Services division of DFPS to a level that does

not exceed professional caseload standards by more than five cases per caseworker. The first report is due by December 31, 2006.

Reasonable caseloads promote quality casework, positive outcomes, and assist in the retention of staff. APS will develop a caseload reduction plan as outlined in Senate Bill 6 in order to support caseworkers in their efforts to serve vulnerable Texans.

Major Achievements/Milestones

- APS hired 89 new staff appropriated for fiscal years 2005-2006.
- APS and HHSC are working together to address a significant increase in reports of abuse, neglect and/or exploitation that have been received by APS during fiscal year 2005 and the first quarter of fiscal year 2006 (See section on Obstacles, page 45).
- Updated caseload projections have been reported in the fiscal year 2006 DFPS Operating Budget (See section on Obstacles, page 45).
- A rule for a caseload management reduction plan for APS was adopted January 1, 2006.

Training for APS

Section 2.03 instructs DFPS to develop and implement a training program that each new APS employee must complete before initiating an investigation of a report of alleged abuse, neglect, or exploitation of an elderly person or person with a disability under Chapter 48. New APS employees may not deliver services under Chapter 48 until they have received the required training.

Ensuring that newly hired caseworkers are adequately trained and supervised in the field is essential for preparing workers to effectively address the unique situations they encounter. Support in those initial months is critical so that caseworkers are knowledgeable and confident in their abilities to make decisions to protect clients.

Major Achievements/Milestones

- The new basic training curriculum includes web-based, classroom, and on-the-job training and has been expanded from 3 weeks to 11 weeks.
- APS initiated the comprehensive Blended Learning for APS In-Home Skills Training (BLAST). Staff has the opportunity to learn basic information via web-based training, enabling classroom trainers to focus on advanced skill sets.
- Nine field trainers were hired to provide new employees with intensive coaching during the on-the-job training phase. New employees must complete "shadow" activities before attending classroom training, first observing the activities and then

performing them under close supervision. Skilled caseworkers, in addition to the field trainers, supervise staff during these shadow activities.

- Staff receives two weeks of basic classroom training, followed by one week of advanced classroom training which focuses on mental health, self-neglect, and working with community organizations, law enforcement, and courts.
- In order to ensure ongoing knowledge and skill development of tenured staff, APS now requires 18 hours per year of continuing education training for all direct delivery staff and supervisors.
- Comprehensive training on risk assessment and mobile technology were provided to address program enhancements as a result of APS reform.
- Regional experts in exploitation and investigations and their supervisors received four days of specialized training in June 2005.
- In August 2005, regional experts in self-neglect received advanced training.
- Curriculum specific to evaluation of staff judgments and case management was incorporated into the APS supervisor basic skills class.
- A rule was published for public comment in the Texas Register on February 3, 2006, that requires DFPS to incorporate in its training programs examples of actual cases investigated by the agency.

APS Technology

Section 2.17 directs HHSC to use technology whenever possible in connection with the Adult Protective Services program to achieve the following: 1) collect automated information necessary to evaluate the program; and, 2) reduce the time that caseworkers and other service providers spend gathering and reporting information necessary for program evaluation.

Through the use of mobile technology, APS investigators can more efficiently assess a client's situation and determine what services are needed. Deployment of appropriate technology to investigators provides useful and accurate information and aids in sound decision-making. Data collection from these tools can also be used to monitor caseworker and manager performance and inform policy decisions.

Major Achievements/Milestones

- All direct delivery staff in the APS in-home and APS facility programs were provided tablet PCs and digital cameras.
- Mobile Protective Services (MPS) software was developed enabling caseworkers to document case activities into their tablet PCs when in the field. Upon returning

to the office or using wireless connectivity, caseworkers can transfer data from their tablet PC into the DFPS case management database.

- The IMPACT database was revised to accommodate the new risk assessment tool.

Working Effectively With Community Partners

Public Awareness Campaign

Section 2.05 requires DFPS to implement a statewide public awareness campaign designed to educate the public regarding the abuse, neglect, and exploitation of the elderly and people with disabilities.

Outcomes for DFPS clients are enhanced by a community's investment and commitment to serving older Texans, and those with disabilities. Maintaining a public presence and providing information advances the public's understanding of the APS role, responsibility and mission, and creates a stronger connection between the community and APS.

Major Achievements/Milestones

- An APS public awareness campaign was developed in fiscal year 2005. The campaign materials were distributed in May of 2005 by regional community engagement staff with the assistance of local community organizations.
- The APS 2006 public awareness campaign has been planned and is currently in production. New campaign slogans and public service announcements have been developed, and additional educational materials have been created on topics such as summer heat awareness, financial exploitation, homelessness, and mental illness.

Special Task Units

Section 2.10 instructs DFPS to work with special task units that will exist in counties with a population of 250,000 or more. The task units will work together with APS regional staff to monitor complex investigations.

The task units are designed to provide additional support for complex APS cases by engaging other disciplines to effectively problem solve, identify resources, make recommendations on cases, and serve as catalysts for additional service delivery from the local community.

Major Achievements/Milestones

- DFPS developed a curriculum for counties with populations greater than 250,000 to implement special task units to monitor complex investigations.

- In January 2006, regional directors and resource/external relations specialists received training on working with counties to implement special task units.
- DFPS is working with the Texas Association of Counties to create special task units. There are 19 counties with populations greater than 250,000.
- DFPS is developing a manual for special tasks units in counties with a population of 250,000 or more. The manual will assist counties in establishing and operating their special task unit. The manual is in the final revision phase and should be ready for distribution by April 2006.
- DFPS community initiatives staff is being trained on the manual in preparation for assisting the counties with implementation.

Community Engagement

Section 2.07 instructs DFPS to develop a community satisfaction survey that solicits information regarding DFPS' performance with respect to providing investigative and adult protective services. The survey will be sent annually to APS stakeholders, protective services agencies, and probate courts, and will build on the survey conducted by HHSC in November 2004.

APS envisions the strategic development and maintenance of community support, thriving local community networks, strong volunteer programs, and productive resource development in the community to benefit APS clients.

Major Achievements/Milestones

- APS reform focused significantly on community engagement activities. The required annual community satisfaction survey is currently in the planning stages.
- Community initiative specialist positions were hired in each region to focus on the civic and volunteer communities, building the APS volunteer base and encouraging the development of diverse community boards in each region.
- Resource and external relations specialists were hired in each region to focus on relationships with the service and provider communities to increase access to services such as home repair and payment assistance for medication and utilities.
- DFPS staff identified priority needs and communities, and created community action plans in each region to address education and resource development.
- DFPS strengthened collaborations with law enforcement entities across the state and created new Extreme Weather Task Forces, financial exploitation education campaigns, and other critical community partnerships.

Achievement Status Of Major Reforms: Children And Families

The reform effort for the Child Protective Services (CPS) program is complex and expansive, changing virtually every aspect of policy, practice and performance expectations as widespread improvements are implemented to ensure the safety and protection of Texas children. Early review revealed key deficiencies, most notably unmanageable caseloads which resulted in poor quality casework. High caseloads and limited resources led to problems, such as staff circumventing policy and procedures, excessive caseworker turnover rates, and burnout among employees who stayed. Crisis management, rather than management focused on outcomes and results, became the norm.

In response to this crisis, Governor Rick Perry issued an executive order directing HHSC to review and reform CPS. HHSC carried out the Governor's charge by first listening to community representatives, families and other stakeholders to better understand the underlying issues. Those issues are discussed in the sections that follow, with an emphasis on quality investigations, improved casework and training, enhanced quality of services to ensure better outcomes, and stronger partnerships in Texas communities. CPS reform also stresses the need to support families and children in ways that will prevent the conditions that lead to abuse and neglect. The actions described below demonstrate solid progress in addressing these multifaceted issues.

Strengthening Investigations

New Investigations Structure

Section 1.82 instructs HHSC to establish an Investigations Division to oversee and direct investigative functions of CPS, including the receipt and screening of reports. The Director of Investigations is required to have law enforcement experience and is to be designated by the DFPS Commissioner.

The CPS Investigations Division will ensure that policy and practice methods incorporate the use of forensic investigations techniques into CPS investigations and improve working relationships with law enforcement entities throughout the state.

Major Achievement/Milestones

- The Director of Investigations was hired in June 2005 and participated in the revision of the new CPS caseworker investigations training.
- Regional law enforcement liaisons report directly to the Investigations Division rather than regional administration.
- Law enforcement liaison positions are being filled.

- Eighty-one special investigators, who are required to have a law enforcement background in abuse/neglect investigations, have been hired to help support investigation caseworkers in interviewing victims and suspected perpetrators, evidence gathering and coordination of criminal and civil case actions.

Child Safety Specialist

Section 1.29 requires a child safety specialist be employed in each of the DFPS administrative regions. The duties of the child safety specialists include conducting evaluations of cases determined to involve a high risk to the health or safety of a child, ensuring the risk assessment tools are fully and correctly used, and reviewing cases with multiple referrals involving the same family, child or alleged perpetrator.

Child safety specialists provide expertise for the risk assessment process and are available for expert consultation on court cases, child removals from the home and as otherwise needed in every region of the state. They meet a critical need for specialized assistance on questions of child safety.

Major Achievements/Milestones

- Filled all 7 lead child safety specialist positions. These positions supervise 43 child safety specialists, which have also been hired and trained.
- Delivered statewide Drug Endangered Child training with the assistance of child safety specialists.
- Refined and enhanced the CPS risk assessment instrument by:
 - ◆ Researching the literature and obtaining feedback from medical experts in the field of risk assessment instrument development.
 - ◆ Updating definitions of the risk items based on medical expert consultation.
 - ◆ Developing definitions for scales of concern used to rate elements contained in the risk assessment tool.
- Trained all supervisors and program directors to recognize and respond effectively to high-risk cases during Summer 2005. Beginning in September 2005, newly hired caseworkers received training in these risk and safety concepts.
- Safety assessment protocol is in development with anticipated implementation to occur with the roll-out of mobile technology; caseworkers will follow the protocol to help guide information gathering and decision-making.

Improved Screening

Section 1.19 requires that DFPS make the most effective use of its resources by screening out certain cases if DFPS determines, after contacting a professional or other credible source that the child's safety can be assured without further investigation.

Section 1.20 requires DFPS to develop, in cooperation with local law enforcement and the Commission on State Emergency Communications, a training program for DFPS employees who receive reports of abuse and neglect. The training must include information on proper methods of screening reports, and ways to determine the seriousness of a report, including determining whether the alleged circumstances could result in death or serious harm to a child.

The legislation requires DFPS to utilize highly skilled caseworkers to perform the screening of intakes, develop standardized policy guidelines and accountability measures, and monitor closed cases in order to detect any screening guidelines that need adjustment. Case screening performed by skilled caseworkers, with consultation by other experts as needed, results in more caseworker time spent on cases that need critical attention to ensure the safety of children. Of equal importance is having well-trained, skilled employees to effectively elicit vital information from individuals reporting the alleged abuse or neglect. This skill is crucial in assessing the situation accurately and assigning the case quickly.

Major Achievement/Milestones

- DFPS is hiring 41 screeners located throughout the state.
- New procedures have been developed requiring regional staff responsible for assigning investigations to route Priority 2 investigations to screeners for review. If the alleged victim is under 5 years of age, regardless of the allegation type, or if a case is already open, it will be referred directly to an investigator.
- Screeners will be responsible for reviewing abuse and neglect referrals from Statewide Intake, and determining if a full investigation is warranted. This determination can be made by obtaining collateral information from professionals such as school nurses to aid in the decision-making process. Data will be routinely gathered on the number of intakes closed by screeners and a sample will be reviewed to ensure child safety and consistency in decision-making.
- DFPS completed the development of the curriculum and sought comment from the Texas Municipal Police Association and the Commission on State Emergency Communications. The Commission on State Emergency Communications approved the training in December 2005, and the Texas Municipal Police Association did so in early January 2006.
- New training will be provided to existing and new intake staff during the summer of 2006.

Response Time Reduction

Section 1.16 directs that, through rules to be developed no later than September 2007, DFPS must immediately respond to a report that could lead to the death of or severe harm to a child. Highest priority reports must be responded to within 24 hours. All other reports must be responded to within 72 hours.

Responding more quickly to allegations of abuse or neglect ensures that children whose safety may be compromised are given prompt attention. Highest priority, or Priority I cases, are currently responded to within 24 hours; the current response time for lower priority cases, or Priority II, is 10 days.

Major Achievements/Milestones

- Pilot programs involving shift time work schedules have started in every region, providing useful information about response time and scheduling issues that will assist in planning for the full implementation of the 72-hour response time.
- Statewide implementation of the 72-hour response time will occur when the full complement of additional investigators are hired and trained, but not later than September 2007.

Joint Investigations and Training

Section 1.17 requires DFPS to collaborate with law enforcement agencies to provide joint training for DFPS investigators and law enforcement officers regarding effective methods for investigating allegations of abuse and neglect, including interviewing techniques, evidence gathering, and testifying in criminal court proceedings, as well as instruction on rights protected under the Fourth Amendment of the U.S. Constitution.

The purpose of this section is for CPS and law enforcement to develop collaborative training to effectively conduct joint investigations. This section will also encourage the development of multidisciplinary teams, which will strengthen the quality of abuse and neglect investigations and help ensure better outcomes for victims.

Major Achievements/Milestones

- DFPS, along with representatives from the Department of Public Safety, Dallas and Seguin Police Departments, and Children's Advocacy Centers of Texas, created guidelines for local agencies to use when developing protocols and training, forming multidisciplinary teams, and strengthening joint investigations practices.
- Law enforcement and child-advocacy center representatives assisted DFPS in redesigning its training course for new investigative caseworkers.
- The training curriculum includes new sections on working with law enforcement, forensic investigations, evidence gathering, upholding fourth amendment rights,

drafting affidavits, and testifying in court. The new curriculum was implemented in September 2005.

Parental Notification

Section 1.21 requires that before transporting children for an interview or investigation, DFPS must attempt to notify the parent or other person having custody of the child. A person commits an offense if he or she is notified of the time of the transport of a child by DFPS and of the location from which the transport is initiated, and the person attempts to interfere with the DFPS investigation. The offense is a Class B misdemeanor.

This provision, in providing for parental notification, recognizes the parent's need to know the whereabouts of their child and the reason the child is being transported by a caseworker. This section also clarifies legal consequences for interfering with an investigation.

Major Achievements/Milestones

- New policy was added to the CPS handbook requiring caseworkers to make a good faith effort to notify a parent prior to transporting the child. This includes a call to each telephone number the caseworker has, or can reasonably access, for a parent until contact is made or all numbers have been exhausted. A phone message can be left, or e-mail can be sent if actual contact cannot be made.
- A parental notification form with the caseworker's name and phone number was developed for staff to leave at the child's location, such as the school or day care center, if the caseworker is unable to verbally notify the parent of the intent to transport.

Taping of Child Interviews

Section 1.21 also requires DFPS to audiotape or videotape any interviews conducted with any child in an investigation.

This section broadened the requirement to audiotape or videotape all children interviewed during an investigation. Previous policy required CPS to tape only interviews with alleged child victims of physical or sexual abuse.

Major Achievements/Milestones

- New policy was added to the CPS handbook to require audiotaping or videotaping of all children interviewed.
- Child care licensing division developed new policy, which took effect September 1, 2005, requiring all interviews with children conducted during the course of a child care facility investigation be audiotaped or videotaped.

Supporting Quality Casework

Caseworker Replacement Program

Section 1.83 requires DFPS to develop a caseworker replacement program by December 2005 to ensure caseworker vacancies are filled in a timely manner.

The Legislature, through its passage of Senate Bill 6, recognizes that the ability to quickly replace caseworkers that leave employment is key to ensuring gaps in client services do not occur. High vacancy rates risk child safety as the remaining caseworkers struggle to manage excessively large caseloads.

Major Achievements/Milestones:

- DFPS allocated “hire-ahead” positions within regions in anticipation of new vacancies. These positions are designed to allow DFPS to have a ready pool of hired and trained caseworkers who can fill impending vacancies. This speeds up the time it takes to reassign a departing caseworker’s caseload to a new worker.
- DFPS has employed 18 hiring specialists to expedite the hiring of newly created and vacant positions.
- On-the-job training supervisors have been placed in each region to assist in properly preparing new workers for case assignment.
- DFPS established a streamlined priority hiring process for HHSC eligibility staff who are at risk of losing employment due to the implementation of the Integrated Eligibility and Enrollment system. Thus far, nearly 300 eligibility staff have transferred to DFPS. These tenured and hard-working staff are an asset to DFPS.
- From September through December 2005, 643 individuals (caseworkers, supervisors and clerical support staff) were hired into casework units.

Staffing and Workload Distribution Plan

Section 1.87 requires DFPS to create a comprehensive staffing and workload distribution plan for CPS to reduce caseloads, enhance accountability, improve the quality of investigations, eliminate delays in services, and ensure the most efficient and effective use of CPS staff and resources.

In order to improve the quality of casework, workloads must be reduced. This reduction can be accomplished by lowering the number of cases assigned to each worker and decreasing the workload associated with those cases. The hiring of specialized workers, such as screeners, casework assistants and clerical support staff, as well as the addition of more than 800 investigative caseworkers, will result in a more efficient distribution of resources and workload, and a reduction in investigative caseloads from a daily average of 44 to 33, or a 25 percent reduction, by the end of the biennium.

Major Achievements/Milestones

- HHSC and DFPS applied up-to-date workload measurement indices and client service needs data to formulate an equitable allocation of staff and purchased services resources to the regions.
- DFPS developed a standard regional organizational structure to provide an effective framework for the expansion and supervision of large numbers of new staff.
- CPS direct delivery staff are divided into “functional units.” These units apply to investigations, family-based safety services and conservatorship programs. Each unit will consist of 5 caseworkers and 1 supervisor, thereby reducing the supervisor’s span of control and increasing the time supervisors can spend with each caseworker teaching and guiding them to make sound casework decisions. Each functional unit will also have a casework assistant and clerical support to assist caseworkers in meeting the workload demands of their jobs.
- Positions required for the formation of functional units have been allocated to the regions, and hiring is authorized on a quarterly basis in accordance with appropriated funding. Full implementation of the functional unit structure will be completed by the end of the biennium.
- DFPS has strengthened new hire recruitment efforts by focusing on local job fairs, website job announcements and postings, and providing interested applicants with a realistic preview of what it takes to be a good CPS caseworker.
- DFPS has designed two new tools to aid in hiring individuals who are likely to be successful, long-term employees;
 - ◆ A pre-screening test for job applicants to assess skills and performance capabilities is now administered to all applicants.
 - ◆ A behavioral interview guide, geared to assessing how each candidate would respond to real life work situations, is scored according to responses considered most effective for caseworker positions.

Casework Documentation

Section 1.22 specifies CPS caseworkers will identify investigative actions that impact child safety and document those actions in the child’s file before the end of the next business day. This section requires management training on how to effectively use workload indicators and other data to monitor case flow and make sound case assignment decisions. It also requires a case tracking system to notify supervisors and managers if cases are not progressing in a timely manner.

Supervisors and caseworkers having access to updated case information is essential to ensuring child safety. Incomplete information, particularly case history, impacts staff's ability to make informed decisions about child safety. In addition, supervisors and managers must be able to access case information quickly so case monitoring and supervision can occur on a day-to-day basis.

Major Achievements/Milestones

- CPS management has identified the critical casework actions that require immediate documentation. These include daily entry of on-going investigative contacts, completing information on face-to-face contacts in family-based safety services and conservatorship cases, and documentation of placement changes.
- Pilot programs involving 24-hour documentation have begun in every region to examine how best to implement daily documentation requirements.
- A mobile transcription service is available for use by caseworkers to facilitate timely casework documentation while additional electronic tools are developed.

Training for CPS

Section 1.27 requires DFPS to add the following components to its training curriculum: forensic interviewing and investigatory techniques, collection of physical evidence, and training on applicable federal laws, including the Adoption and Safe Families Act (ASFA), Child Abuse Prevention and Treatment Act (CAPTA) and subsequent amendments. This section also requires DFPS, in conjunction with the Department of Public Safety, to provide residential child-care licensing investigators with advanced training in investigative techniques and protocols.

Section 1.84 requires DFPS to improve the quality and consistency of CPS training. Specifically DFPS is required to (1) augment classroom training by using computer-based modules, structured field experience, and case simulation to aid in skills development; (2) use a core curriculum for all new caseworkers and specialized training for specific jobs; (3) have caseworkers transferring to new jobs complete the core curriculum and advanced training for the new position before assuming those duties; and (4) centralize accountability and oversight of all training.

Caseworkers fully trained and equipped to do the job are better prepared to identify child endangerment and make sound casework decisions. Security in knowing what to do also results in greater job satisfaction and less job stress and turnover. Senate Bill 6 appropriately recognizes the importance of training, with particular emphasis on new forensic techniques that support investigatory best practices.

Major Achievements/Milestones

- DFPS hired 33 new CPS training staff to prepare for the training of new caseworkers.

- Effective September 2005, training for new CPS caseworkers expanded from a six-week program to a twelve-week program, including six weeks of structured field experience. A synopsis of the CPS training is included in Appendix 2.
- The new training model is composed of a five-week core curriculum for all caseworkers and seven weeks of specialized training for caseworkers on the various stages of service: investigations, conservatorship, and family-based safety services.
- The training for new caseworkers was expanded to include information on investigatory techniques, collection of physical evidence, state and federal legal requirements, and forensic-style interviewing.
- The legal component of the training curriculum highlights the development of key skills, including the drafting of affidavits to support a removal of a child and testifying in court. Both skills are essential to DFPS' ability to obtain court-ordered protection for a child.
- New training, which combines classroom and computer-based modules, is being developed for existing caseworkers.

CPS Technology

Section 1.80 requires DFPS to explore the strategic use of technology to improve effectiveness of DFPS operations.

DFPS will improve client services through mobile technology designed to speed up caseworker access to family case history and policy, facilitate communication between caseworkers and supervisors, allow timely and accurate recording of information, and reduce workload backlogs. DFPS will also modify the current automated case management system to improve risk and safety assessment and service plan development.

Major Achievements/Milestones:

- DFPS developed tasks and priorities to implement mobile technology and make the required changes to IMPACT, the current automated case management application.
- DFPS posted a Request for Proposals for mobile technology and other technological enhancements. Vendor responses are currently under review.
- DFPS completed a user survey of the APS mobile technology and developed an action plan to address technical and practice issues. These results will help guide appropriate usage of mobile technologies by CPS.

Improving Services and Child Outcomes

Outsourcing

Sec 1.123 directs DFPS to outsource all substitute care and case management services statewide by September 1, 2011. Senate Bill 6 specifies the goal of outsourcing as providing for a new structural model for the community-centered delivery of substitute care and case management services that is based on improving protective services, achieving timely permanency for children in substitute care (including family reunification, placement with relative, or adoption), and improving the overall well-being of children in substitute care consistent with federal and state mandates.

Outsourcing is intended to improve services and outcomes for children and families and to strengthen community-based systems of care. DFPS has established a project team, in partnership with HHSC and outside consultants, to ensure the project is successfully completed. The involvement of stakeholders, including providers, will be an integral part of the new model. The outsourcing of substitute care and case management also allows DFPS to focus its efforts on improving and strengthening investigative casework.

Major Achievements/Milestones

- Research was conducted to obtain information about how other states have outsourced child welfare services, with a focus on the Kansas, Florida and Illinois models.
- A website for the DFPS outsourcing initiative was created in October 2005 to ensure that project status and information is readily available and accessible to stakeholders and the general public.
- DFPS released the “Plan for Development of the Outsourcing Transition Plan” on October 7, 2005.
- DFPS released a Request for Information on October 19, 2005, and received comments from the public through November 18, 2005. Eighteen responses were received and analyzed to assist in the development of the transition plan and the draft Request for Proposals for the independent administrator.
- The outsourcing project team conducted stakeholder input meetings in San Antonio, Houston, Arlington, Lubbock and Austin in November 2005. Over 300 stakeholders attended and provided input on a series of questions related to outsourcing. A summary of comments from all meetings was compiled and posted on the DFPS outsourcing website.
- The draft Request for Proposals for the independent administrator was released in February 2006 for public comment. Comments will be received for four weeks and will be used to revise the Request for Proposals for final posting in April 2006.

- The draft Request for Proposals describes roles and responsibilities for the independent administrator and DFPS, options for cost models that reward good performance, quality assurance and accountability measures, and contracting and procurement standards.
- The Request for Proposals approach is to provide bidders as much discretion as possible, within state and federal law, to propose solutions to improving system capacity and child outcomes as required by Senate Bill 6.
- The outsourcing transition plan, to be released March 2006, concurrent with this report, provides additional detail on the state's approach to statewide implementation of outsourcing of case management and substitute care services.
- The independent evaluator Request for Proposals has been drafted and will be released in March 2006. The independent evaluator will assess the performance of both outsourcing efforts and DFPS' current system of service delivery.

Child Placement

Section 1.15 directs DFPS to provide relatives or caregivers with whom a child is placed, any information necessary to ensure the caregiver is prepared to meet the needs of the child, including information related to the abuse or neglect of the child.

Section 1.34 specifies that upon a child's removal from the home, DFPS must make every effort to identify and locate a non-custodial parent, relative, or other kinship caregiver willing and suitable to care for the child.

Section 1.26 requires DFPS to develop a manual that provides resource and contact information for a parent or person with custody of a child who is the subject of an abuse or neglect investigation and for a person selected to be the child's caregiver.

Section 1.62 requires DFPS to develop a Relative and Other Designated Caregiver Program that promotes continuity and stability for children for whom DFPS is the managing conservator by placing those children with relatives or other designated caregivers, and facilitate such placements by providing assistance and services in accordance with rules adopted by the Executive Commissioner. Section 1.62 further requires that rules be adopted for eligibility criteria for assistance and services.

Section 1.33 requires DFPS prior to the full adversary hearing to perform a background and criminal history check on relatives or other potential caregivers designated on the child placement resources form, evaluate each person to ascertain who is likely to be the most appropriate substitute caregiver, and complete a home study on that individual.

The emphasis placed on kinship care involves prioritizing placement with relatives or other adults significant in the child's life whenever possible to help maintain family, cultural, and community connections. Kinship placement enhances the child's sense of stability, identity and belonging. Kinship caregivers are provided with a kinship care information guide and work closely with DFPS to ensure the safety and best outcomes for the children

in their care. Expedited background checks and home studies speed up the placement of children with relatives and other significant caregivers thereby diverting them from the foster care system.

Major Achievements/Milestones

- The DFPS statewide kinship program is operational March 1, 2006.
- Rules were effective on December 5, 2005, which outline eligibility requirements for the kinship care program. The program provides initial start-up funds of \$1000 per sibling group, and annual recurring assistance of \$500 per child to qualified kinship caregivers, to assist them in providing for the child's essential needs including bedding, clothing and school supplies. Support services are available to kinship caregivers, including childcare for those who qualify, beginning March 1, 2006.
- A kinship care manual was made available November 1, 2005, as a resource and information guide for kinship caregivers. The manual is given to kinship caregivers upon placement of a child in their home and provides information such as caregiver rights, responsibilities and available financial, childcare, and support services.
- In October 2005, the development of the child placement resources form was completed. The form includes a statement to inform parents that CPS will share information about the case with the potential caregivers so they are aware of the child's history and are better prepared to meet the needs of the child.
- DFPS abuse/neglect database checks are now conducted upon receipt of the child placement resources form from the parent.
- For each potential placement option, the caseworker initiates a criminal background check within two business days of the agreement to accept possible placement of the child.
- If a parent completes the child placement resource form at the time of the child's removal from the home, a written home assessment is completed on the most appropriate person listed by the date of the adversary court hearing, or approximately 14 days after the child's removal from their home.

Cultural Awareness and Disproportionality

Section 1.54 specifies DFPS' responsibility to mitigate disproportionate representation of minority races and ethnicities in all phases of child welfare services delivery by:

- Delivering cultural competency training to all service delivery staff.
- Increasing targeted recruitment for foster and adoptive families.
- Targeting hiring recruitment efforts to ensure diversity among DFPS staff.

- Developing partnerships with community groups to provide culturally competent services to children and families.

Section 1.54 also requires HHSC and DFPS to analyze removal rates and other enforcement actions to determine whether disproportionality exists, taking into account other factors, such as poverty, single-parent families, and young-parent families, and to report the results to the Legislature. The legislation also requires a follow-up report to address the problems identified in the first report by July 2006.

HHSC and DFPS are committed to addressing disproportionality in the CPS system to ensure all children and families are afforded equitable opportunities for positive outcomes. The two agencies are working with committed community partners on multiple fronts to ensure success of these efforts.

Major Achievements/Milestones

- On January 2, 2006, HHSC and DFPS submitted the disproportionality report to the legislature. Major findings of the report include:
 - ◆ Even when other factors are taken into account, African-American children spend significantly more time in foster care or other substitute care, are less likely to be reunified with their families, and wait longer for adoption than Anglo or Hispanic children.
 - ◆ Poverty was a strong predictor of whether a child would be removed from the home, with more than 60 percent of child removals in Texas occurring in families with annual incomes of about \$10,000 or less. This is a factor in CPS disproportionality because poverty rates are higher among African-American families.
 - ◆ The study did not find a significant association between African-American race and a CPS decision to remove a child from the home when controlling for factors including income, age of the victim, type of abuse or neglect allegation, source of report, and region of the state. The analysis did find that Hispanic children were significantly less likely than Anglo children to be removed from the home.
 - ◆ African-American families were less likely than Anglo families to receive in-home family services to help prevent child removal in three areas of the state, while Hispanic families were less likely than Anglo families to receive such services in four areas.
- CPS training for all new caseworkers has been revised to include additional information on disproportionality, including the “Knowing Who You Are” video produced by Casey Family Services.

- Beginning in December 2005, new CPS foster-adopt caseworkers participated in a two-day specialized training on cultural/ethnic issues termed “Racial Ethnic Identity Formation.”
- “Undoing Racism” training, by the Peoples Institute of New Orleans, was provided to CPS management. DFPS now offers “Undoing Racism” courses to staff.
- Partnerships with communities to address the problem of disproportionality have begun in Houston, Arlington, and Fort Worth. The work includes convening a Community Advisory Committee of people from the local area, attending Undoing Racism training, selecting pilot sites, testing practice improvements, and replicating successes for families statewide.
- Disproportionality specialists have been hired in Houston, Dallas, Fort Worth, and Beaumont/Port Arthur to support the community’s work on disproportionality and to serve as resources to CPS staff.
- A child-specific adoption contract, with emphasis on minority children, has been signed with One Church, One Child of North Texas, to recruit adoptive families for those children awaiting placement in a permanent, loving home.

Family Group Decision-Making

Section 1.52 specifies that DFPS may collaborate with courts and appropriate local entities to develop and implement family group conferencing as a strategy to promote family preservation and permanency for children.

Family Group Decision-Making (FGDM) is the process used to engage families in decision-making and developing a service plan for use at various times throughout the case. This process involves recognition of family strengths during service plan development for meeting safety, well-being and permanency goals for the child.

Major Achievements/Milestones

- DFPS has worked with judges, attorneys and child advocates to address concerns and eliminate barriers to the success of FGDM. A meeting was held in Austin in which judges, prosecutors and other attorneys from around the state were invited to share thoughts, concerns and suggestions for improvement as implementation of FGDM continues across the state. Meetings have also been held at the local level between DFPS and members of the judiciary to provide an opportunity to dialogue about challenges and possible solutions.
- In August 2005, a preliminary evaluation of FGDM was completed and positive outcomes for children were shown.
- To date, more than 1600 FGDM conferences have been held. Since the program’s inception, about 61 percent of these conferences were held within the first 30-45

days following a child's removal from the home, and involved 1004 families and 1908 children.

- FGDM conferences have been held for youth aging out of foster care in order to promote stability and identification of supportive individuals committed to assisting these youth as they transition into adulthood. DFPS provides families the opportunity to participate in multiple conferences as needed in order to promote the child's achievement of permanency.
- The preliminary evaluation of family group decision-making efforts indicates that kinship placements, for families participating since the program's inception, have increased from 550 to 850 and 240 children were returned home to their parents.

Court Reports

Section 1.38 specifies that the court report provided by DFPS must include information regarding progress on the service plan, and review whether the parties have acquired or learned any specific skills or knowledge stated in the service plan.

Section 1.41 specifies that the court report provided by DFPS must evaluate whether the child's current educational placement is appropriate to meet the child's academic needs, include a discharge plan for youth age 16 and over, address Preparation for Adult Living (PAL) activities, and report on efforts that have been made to identify an adoptive placement for the child.

Families and children are best served when the child protection legal system has comprehensive information about specific progress being made to achieve permanency for children under the state's care.

Major Achievements/Milestones

- Court report templates incorporating these new requirements were implemented on September 1, 2005, and caseworkers use this new format to provide the Court with specific information about the child and family's needs and progress.

Family Plan of Service

Section 1.38 requires that DFPS write service plans for families in a language that the parents understand, or make it otherwise available, identify child education issues for the child's parents to address, and review parents' progress in addressing their child's education issues.

Service planning is a cooperative endeavor, between families and DFPS, designed to specify what steps are needed to reduce risk of abuse or neglect, meet the specific needs of the child and achieve permanency for the child. Service plans written in a manner that is easily understood by parents, combined with an additional focus on child education issues, enhances the service planning partnership and generates better results for children.

Major Achievements/Milestones

- DFPS policy was implemented on August 29, 2005. Service plans now specify what skills or knowledge are required and any behavioral changes that parents must make, including what a parent must do to ensure a child attends school and complies with academic requirements.

Initial Assessments

Section 1.49 directs that upon removal of a child from the child's home, DFPS shall use assessment services provided by a child-care facility, a child-placing agency, or the child's medical home during the initial substitute care placement, and that these services may be used to determine the most appropriate substitute care placement for the child, if needed. As soon as possible after a child begins receiving foster care, DFPS shall assess whether a child has a developmental disability or mental retardation, and HHSC shall establish the procedures for making assessments, which may include screening by persons with experience in childhood developmental disabilities or mental retardation, a local mental retardation authority, or a provider in a county with a child welfare board.

Positive placement outcomes for children are promoted when comprehensive assessments are conducted as children enter foster care.

Major Achievements/Milestones

- DFPS revised the child's initial assessment plan to include comprehensive questions regarding developmental disabilities and mental retardation. The child's initial assessment plan requires the caseworker and caregiver to observe the child's functioning and obtain additional assessments from the child's healthcare provider if developmental disabilities or mental retardation are suspected.

Education Passport

Section 1.65 requires an education passport be created for each child in DFPS conservatorship. The passport will become part of DFPS records and will remain with the child while in the care of DFPS. The format of the education passport can be determined by HHSC and DFPS, and can be electronic. If funding and technology are available the form and content of the passport must be finalized by March 1, 2006.

The education passport is designed to enhance educational outcomes for children in foster care by ensuring school records follow the child, should a placement change occur. The education passport provides further safeguards that children are placed in the correct grade and receive all educational services to which they are entitled.

Major Achievements/Milestones

- DFPS Education Specialists worked closely with representatives from Texas Education Agency, Advocacy Inc., Casey Family Programs, and other partners to develop educational policies to meet the needs of the children served.

- DFPS policy and procedures, to ensure the educational needs of children in care are identified, documented, and met in each school district, are in the final stage of development.
- The form and content of the education passport, which is a paper passport, are being developed in a collaborative effort between the Texas Education Agency, HHSC, and DFPS. The education passport will be referred to as the Educational Portfolio.
- Training for DFPS caseworkers is being revised to stress the importance of the Education Portfolio and methods for gathering and maintaining the information.

Preparation for Adult Living

Section 1.51 requires DFPS to improve discharge planning, increase the availability of transitional family group decision-making, extend Medicaid coverage to age 21 with a single application, and enter into cooperative agreements with Texas Workforce Commission (TWC) and local workforce development boards that will benefit foster care youth. This section also requires an annual survey of youth, aged 14 years or older, regarding substitute care services.

Systematic approaches to improving and expanding transition and discharge services for older youth in foster care have been employed by DFPS. A DFPS project team, in partnership with community partners and providers, has been formed to maximize resources and opportunities for youth transitioning to independent living. Youth driven, strengths-based conferences (Circles of Support) help youth to reconnect with their family, kin or other nurturing adults, who can provide the youth with ongoing encouragement and support throughout adulthood. These conferences result in a transitional plan that includes discharge planning, for the youth to maximize opportunities for successful transition to independent living.

Major Achievements/Milestones

- Circles of Support continue to be offered to youth aging out of foster care and are expanding statewide.
- Youth aging out of foster care are now provided with continuous Medicaid coverage through a single application process up to the age of 21.
- A Memorandum of Understanding with TWC is under development and will include staff cross-training, defining roles and responsibilities, information sharing, prioritization of both workforce and child care services for foster care youth, housing referrals, and meeting the objectives of the Preparation for Adult Living (PAL) program.
- Staff and youth jointly designed an annual survey for teens 14-17 years of age. The survey is slated for dissemination in Spring 2006, with results analyzed in June

2006. Questions in the survey will address quality of services, improvements needed to better support the youth, and other factors relevant to program enhancements.

- In August 2005, the Houston Transition Center for youth aging out of care opened. The center provides support in the areas of education, such as tutoring and GED referrals, employment resources, PAL classes, and linkages to community resources for obtaining mental health or other social services for youth who have aged out of care. The center also facilitates room and board payments for these youth.
- Rules for extension of foster care for eligible youth have been developed and will be proposed at the April 2006 DFPS Council meeting.

Medical Services

Section 1.65 directs the Health and Human Services Commission to develop a statewide healthcare delivery model for children in foster care. Section 1.65 further outlines requirements for the provision of medical consent for a child in foster care, parental notification of significant medical conditions, judicial review of medical care, health passports, and reporting to the Legislature the outcome of a study on the prescribing of psychotropic drugs for children in foster care.

A statewide healthcare delivery model for children in foster care will provide accessible, coordinated, comprehensive, and continuous healthcare in order for each child to achieve optimal physical and mental health. Children's healthcare is further improved by requiring the consent of a DFPS or court designated individual before medical and behavioral health services are provided to a child. Judicial oversight of children's health status will serve to enhance the medical and behavioral health outcomes for children. The goal of the health passport is to ensure portability of timely medical information and ready availability of comprehensive health information to healthcare providers, DFPS staff, caregivers, courts and youth. The health passport will contain information pertaining to the child, healthcare providers, diagnosis and treatment, and pertinent administrative documentation essential for continuity of care for children and effective case management.

Major Achievements/Milestones

- HHSC released a Request for Information on September 2, 2005, to obtain feedback from stakeholders and the vendor community on recommended approaches for delivering healthcare for children in foster care.
- HHSC contracted with a consultant group to assist in the development of a Request for Proposals for delivery of services through a Medicaid healthcare delivery model for children in foster care. This model will use a contracted managed care organization to provide and coordinate services for children in foster care, including medical, dental, pharmacological and behavioral healthcare needs.

- HHSC is finalizing the draft Request for Proposals for the healthcare delivery model with an anticipated release date in March 2006. The expectation for the health care delivery model Request for Proposals is that the vendor would be responsible for development and maintenance of the health passport with the state retaining ownership of all patient data.
- DFPS developed and implemented a medical consent policy, including parental notification requirements, for medical treatment of children in foster care.
- Medical consent online training for youth, staff, and non-DFPS employees who are serving as medical consenters for children in conservatorship is scheduled for release in March 2006.
- DFPS and the Department of State Health Services entered into an interagency agreement for the services of a consulting child psychiatrist to assess prescribing practices and recommend a process for on-going clinical reviews of the use of psychotropic medications in the treatment of children in foster care.
- DFPS revised court report documents to incorporate the summary of medical care provided to children in foster care required at each court hearing.

Building Community Partnerships

Community Engagement

Section 1.86 charges DFPS with developing a statewide strategy in CPS to build alliances and networks at the local level that support the detection and treatment of child abuse and neglect and enhance the coordination and delivery of services.

Building community relationships and partnerships is an integral part of DFPS' work and is critical to providing clients with needed support. CPS, as a part of the DFPS agency-wide community engagement initiative, developed a comprehensive strategic plan to achieve desired outcomes regarding community engagement development and coordination.

Major Achievements/Milestones

- The CPS plan, developed over the past ten months through collaboration with internal and external stakeholders, supports the following outcomes:
 - ◆ CPS strategically and consistently develops and maintains community participation in its service delivery in order to achieve better client outcomes.
 - ◆ Local community alliances and networks are established and thriving.
 - ◆ Enhanced, effective volunteer programs are in place.

- ◆ Ongoing community resource development is underway to benefit CPS children and families.
- CPS placed specialized staff in each region to coordinate community-based and public awareness activities. Community initiative specialists focus on civic and service organization relationships to help develop community boards, financial/in-kind resources, and volunteer program services. Resource and external relations specialists focus on local judicial, law enforcement, medical and other provider relationships in order to strengthen the quality of services provided to CPS children and families.
- CPS expanded the community engagement training provided to incoming DFPS staff.
- CPS has renewed its commitment to the increased engagement of clients, families, providers, officials, and other partners in all aspects of CPS work. CPS community-based initiatives (existing and new) have:
 - ◆ Incorporated stakeholder best practices to strengthen relationships and increase communication.
 - ◆ Held community meetings to gather stakeholder input.
 - ◆ Invited stakeholder and community participation on workgroups, the development of policy revisions, and in trainings with staff.
 - ◆ Created new partnerships and collaborations in support of reform goals.
 - ◆ Participated on external stakeholder initiatives and projects.
 - ◆ Expanded the use of volunteers to improve the quality and efficiency of programs and services.

Preventing Maltreatment

Prevention and Early Intervention

Section 1.53 directs DFPS to administer a grant program to provide funding for community organizations, including counties and faith-based organizations, to respond to lower-priority, less serious cases of abuse and neglect reported to DFPS.

Section 1.64 specifies that DFPS must fund, to the extent funds are appropriated, evidence-based programs provided by community-based organizations for prevention and amelioration of child abuse and neglect; to give priority to programs that target races and ethnicities disproportionately represented in all phases of child welfare services delivery; and to evaluate the effectiveness of such programs.

When a lower-priority case is received, and a determination is made that the case can be closed without a full investigation, the case will be sent to a contracted community-based organization for follow-up and services to enhance the safety of the child's home environment. This referral system will allow DFPS to concentrate its investigation and immediate intervention services on more serious cases. Funding evidence-based programs that target races and ethnicities disproportionately represented in child welfare ensures children receive appropriate services to meet their unique needs.

Major Achievements/Milestones

- An implementation plan is being developed to improve referral processes to Prevention and Early Intervention services to ensure that lower-risk families that do not require CPS intervention can access preventive services designed to bolster the family's capacity to care for their child.
- A working definition of "evidence-based services" as services proven effective through evaluation was developed with input from stakeholders.
- DFPS procured a new service, effective Spring 2006, referred to as At-Risk Prevention Services, for evidence-based interventions addressing either child abuse and neglect or juvenile delinquency. The At-Risk Prevention Services procurement process included special consideration for services that target children whose race and ethnicity are disproportionally represented within the CPS system.
- DFPS also procured a new service, referred to as Innovative Prevention Services, to fund demonstration projects addressing the same priorities mentioned above, but expanded to include promising programs and research-based designs. Services will be effective Spring 2006.

Drug-Related Initiatives

Section 1.63 describes a family drug court program designed to integrate substance abuse treatment with DFPS family reunification efforts. Essential components include comprehensive case management, early identification of eligible parents, needs assessment, periodic testing, judicial interaction, monitoring and evaluation and interdisciplinary education. County Commissioners are authorized to establish such a program for persons who have had a child removed and are suspected of having a substance abuse problem and shall explore availability of court improvement funds for this purpose as well as federal and state matching funds.

Section 1.89 describes the requirements for DFPS to establish a drug-endangered child initiative for children exposed to methamphetamine or to the chemicals related to illicit drug manufacturing; accept referrals from the Department of Public Safety reporting the presence of a child in a location where methamphetamines are manufactured (unless it interferes with a criminal investigation); and maintain a record of such reports and actions taken to protect a child.

Several judicial districts currently have drug court programs that are designed to serve DFPS clients and enhance family reunification outcomes. Drug court programs have a positive influence on the coordination of substance abuse treatment services and help to create an environment for easier access to services for DFPS clients. By creating a drug court program, a county establishes a therapeutic response within the judicial system that governs DFPS cases. Additionally, the drug-endangered child initiative ensures children are safe and protected from the potential harm caused by methamphetamine or other illicit drug use and manufacturing.

Major Achievements/Milestones

- The Department of State Health Services (DSHS) received a Technical Assistance grant, beginning in March 2006, from the National Center on Substance Abuse and Child Welfare. DFPS is working collaboratively with DSHS, Court Improvement Project, Court Appointed Special Advocates (CASA) and the Office of Court Administration on systemic changes to improve delivery of substance abuse services in child welfare.
- Protocols have been developed outlining the responsibilities of DFPS, law enforcement, prosecutors, medical professionals and mental health providers following identification of a drug-endangered child.
- Trainings have been held for DFPS staff and community organizations, including child welfare boards, on the dangers to children who reside where methamphetamine is being manufactured.
- DFPS has incorporated training about methamphetamine and the Drug Endangered Child protocols in the training for new DFPS caseworkers.
- A Memorandum of Understanding was completed and signed on December 29, 2005, between DFPS and the Department of Public Safety establishing a standardized set of protocols.
- DFPS is now assigning a Priority I status to all reports that allege a child is residing in an environment where methamphetamine is being manufactured.

Achievement Status Of Major Reforms: Licensing And Regulation

The child care licensing program is in the process of revising minimum standards for residential child care facilities and child-placing agencies. DFPS regulates all facilities that provide care for children in Texas. Completing the update of standards will strengthen the level of protection for all children in out-of-home care while also improving the performance of the residential child care licensing program. The Senate Bill 6 requirements related to the child care licensing program complement the major revision of the minimum standards.

As early as January 2003, child care licensing staff were researching and developing a draft of revisions to the residential and child placing agency standards. These standards were further discussed in both internal and external stakeholder workgroups. However, the draft revisions were completed before requirements of CPS reform were established. Child care licensing has reviewed and adjusted the draft revisions to align with and support a new agency direction as well as eliminate duplicative or conflicting requirements among multiple sets of standards. The anticipated effective date for the new minimum standards is January 1, 2007.

Steps remain before DFPS is ready to implement new standards in 2007 including public review and comment, policy review, coordination, and development, automation updates, ongoing communication with external stakeholders, and training providers and child care licensing staff. The implementation of Senate Bill 6 provisions related to child care licensing will reduce the risk of harm to children and improve the quality of care. In addition, these provisions ensure licensing requirements will be easier to understand, which should encourage voluntary compliance and reduce noncompliance. The public benefit anticipated is that the protection of children will be enhanced and the quality of care provided to children will improve.

Ensuring Child Safety

Child Care/Child Placing Administrator License

Section 1.111-1.122 changes the minimum qualifications for licensed child care administrators and adds the requirement for each child placing agency to have a licensed child placing administrator.

Previously, only administrators of residential child care operations were required to be licensed. Passage of Senate Bill 6 requires administrators of child placing agencies to be licensed as well. This ensures consistency of licensure requirements across all types of 24-hour out-of-home care and enhances the safety of children.

Major Achievements/Milestones

- DFPS began accepting applications for licensed child placing administrator on September 1, 2005.
- The required exam for licensed child placing administrator was developed in partnership with university-based experts and testing began in January 2006.

Reports of Abuse and Serious Incidents

Section 1.106 requires the reporting of certain serious incidents involving children in care by residential child care operations to DFPS, including a critical injury to a child; an illness that requires hospitalization of a child; and arrest, abuse, neglect, exploitation, runaway, suicide attempt, or death of a child.

Section 1.31 requires the reporting of child-on-child abuse.

Minimum Standards for residential child care operations and child-placing agencies required the reporting of serious incidents involving children in placement to the child care licensing division. Senate Bill 6 added this requirement to Chapter 42 of the Human Resources Code and defined what is meant by a serious incident as “a suspected or actual incident” that threatens the health, safety, or well-being of a child. Revising these standards strengthens safety outcomes for children in these placements by ensuring all types of abuse and serious incidents are appropriately reported.

Major Achievements/Milestones

- The child care licensing automated system, known as CLASS, has been modified to accept and track these reports.
- Rules to implement these requirements are a part of the revised Minimum Standards for Residential Child Care Operations and Residential Treatment Centers and Minimum Standards for Child Placing Agencies.
- Child care licensing management staff was trained on the proposed rule change on January 27, 2006.

Background Checks

Section 1.103 specifies that background checks in residential child care operations must be requested on all employees, including future employees, who will provide direct care or have direct access to a child in care. This section adds requirements that background checks must be submitted before a person provides direct care or has direct access to a child in a residential child care operation. This section further requires that the background checks must be completed and sent to the residential child care operation within two days or the residential child care operation can do its own background check.

Chapter 42 of the Human Resources Code (HRC) requires that staff of residential child care operations undergo background checks regarding criminal and child abuse history. Staff with a history of committing certain offenses or a record of child abuse or neglect may not be employed in a residential child care operation. The previous requirement was that background checks be completed on an employee once the person was hired. This section of Senate Bill 6 clarifies the checks must be done prior to employment and completed within a 2-day timeframe. Ensuring those entrusted with the care of children are properly screened will enhance child safety outcomes.

Major Achievements/Milestones

- Rules for conducting background checks in residential child care operations were adopted on December 1, 2005.
- Technology changes have been implemented to facilitate more timely results on background checks reported to residential child care operations.
- The residential child care licensing program has implemented a background check unit to handle the requests and facilitate the reporting of results.

Drug Testing

Section 1.104 requires a residential child care operation to have a drug testing policy for new and existing employees and to inform DFPS within 24 hours after becoming aware that a person who directly cares for or has access to a child in the operation has abused drugs.

Previously, there were no requirements in minimum standards for drug testing of employees of residential child care operations. The intent of this section was to ensure that children are safely cared for in a residential setting, while also protecting the rights of employees.

Major Achievements/Milestones

- Rules for drug testing in residential child care operations were adopted December 1, 2005, with providers of residential child care required to implement these rules by January 1, 2006.
- Residential child care licensing staff is currently providing technical assistance to operations to implement these rules and will begin citing for non-compliance in March 2006.

Behavior Intervention Training

Section 1.95 requires residential child care operations to provide training approved by DFPS on behavior intervention to their personnel. The training must include the risks associated with prone restraint.

This section of Senate Bill 6 is intended to ensure consistency in the type and quality of behavior intervention training being offered in residential child care operations.

Major Achievements/Milestones

- Residential child care operations were notified in August 2005 to revise their pre-service training curriculum on behavior intervention to include information on the risks associated with prone restraints.
- Rules to implement this requirement are effective March 1, 2006.
- After March 1, 2006, residential child care licensing monitoring staff will review the operations for compliance with the training curriculum during regular monitoring visits.

Regulatory Action

Random Inspections

Section 1.96 requires periodic inspection of a randomly selected sample of agency foster homes and agency foster group homes.

This section of Senate Bill 6 serves to address the gap in the ability of DFPS to inspect foster homes outside of a report of abuse or neglect by requiring periodic inspection of randomly selected foster homes. This also allows resources to be directed to these inspections to ensure the foster homes selected are meeting standards and that children are safe.

Major Achievements/Milestones

- Additional residential child care licensing monitoring staff has been hired.
- Methodology and policy were developed September through December 2005.
- Rules to implement this requirement are effective March 1, 2006.
- Residential child care licensing monitoring staff was trained on these inspections December 2005 through January 2006.
- Limited random sampling began in January 2006 with the full program operational by April 2006. The intent is to randomly sample and monitor 30 percent of all DFPS foster homes annually.

Adverse Actions

Section 1.99 allows DFPS to deny an application for a residential child care operation if there was a revocation of a license in another state or if an applicant is barred from operating a residential child care operation in another state.

Section 1.105 prohibits a residential child care operation from employing, in any capacity, someone who is ineligible to receive a license or someone who has been denied such a license because of out-of-state history.

Section 1.107 prohibits DFPS from issuing a permit to a person for 5 years after DFPS revokes the person's permit to operate a residential operation or denies the person a permit to operate a residential operation; and prohibits a person from applying for a permit for 2 years after DFPS has denied or revoked a permit to operate a non-residential operation, such as a day care center or registered family home. It also allows DFPS to deny any license or certification to a person who operated or was a controlling person of a residential operation whose license has been revoked or who voluntarily closed before the license was revoked.

Section 1.108 extends emergency suspensions of residential child care operations from 10 to 30 days.

Section 1.110 allows DFPS to impose an administrative penalty against a residential child care operation or a controlling person of the operation if the operation or person violates a term of a license.

The safety of children served by residential child care operations is advanced with good quality and appropriate licensure. There have been concerns that residential child care operations with adverse actions taken against them in another state were able to apply and be licensed to provide child care in Texas. These sections of Senate Bill 6 allow DFPS to deny or delay an application or license due to such adverse actions.

Major Achievements/Milestones

- Rules to implement these requirements are drafted and will be proposed to the DFPS Council at its April 2006 meeting.
- The DFPS child care licensing handbook and related forms were revised.
- Residential child care licensing management staff was trained on these changes in January 2006.

Exit Conference

Section 1.98 requires that upon completion of an inspection of a residential child-care operation, the inspector is to have an exit conference with a representative of the inspected operation and to provide the representative a copy of the inspection checklist used by the inspector.

Residential child care licensing staff is required to have an exit interview with the staff of a child-care operation at the end of an inspection. This ensures the representative of the child-care operation and DFPS have an opportunity to communicate about potential violations. Providing a copy of the inspection results supports the residential child-care staff in making necessary corrections or determining what change is needed to meet the licensing requirements.

Major Achievements/Milestones

- Interim measures began in September 2005 requiring licensing staff to leave a paper copy of the inspection checklist with the operation. Permanent processes are pending revisions to the licensing automated system, CLASS.

Significant Obstacles To Implementation And Steps To Resolve Obstacles

Both the CPS and APS programs have made tremendous progress since the passage of Senate Bill 6. However, these programs also have encountered some obstacles to full implementation. APS has seen a surge in reports of abuse, neglect, and exploitation – greatly outpacing an expected 20 percent increase in such reports. Similarly, CPS has experienced higher caseloads in the substitute care program. An examination of these and other obstacles, as well as the steps being taken to address them, follows.

APS Caseload Reduction Plan

Senate Bill 6 directs HHSC to develop a caseload reduction plan to reduce APS caseloads to a number not larger than five cases above the national standard by 2011. Early estimates for this plan factored in an expected 20 percent increase in cases of abuse, neglect and exploitation. However, actual reports have exceeded the state's forecasts, leading to increased caseloads for the APS program in fiscal year 2005 and fiscal year 2006.

In fiscal year 2004, DFPS and HHSC anticipated the APS average daily caseload per caseworker would be 29 by the end of fiscal year 2007. Revised forecast models show that even with additional staff appropriated for fiscal year 2006-2007, the average daily caseload per caseworker will be 47.6 for fiscal year 2006 and 46.7 for fiscal year 2007.

Reports of abuse, neglect, and exploitation received by APS for June, July, and August of fiscal year 2005 were 40 percent higher than November 2004 projections. Reasons for the increase in intake reports include:

- Outreach efforts focused on increasing public awareness of abuse, neglect and exploitation.
- Stronger involvement with community-based organizations and stakeholders to ensure awareness of APS services and resources.
- Increased demand for APS services as funding and local programs are reduced or eliminated.

Next Steps: APS is working closely with HHSC to outline solutions for handling the increase in cases and further strengthen screening processes. The caseload reduction plan that will be submitted in December 2006 will outline proposed long-term solutions, and short-term remedies will be implemented as developed.

Medical Consent

Senate Bill 6 requires the development of a statewide healthcare delivery model, provision of medical consent for children in foster care, parental notification of significant medical conditions, judicial review of medical care, health passports, and a report on the outcome of the study of incentives to prescribe psychotropic drugs.

DFPS has encountered some challenges implementing the medical consent policy. In addition, courts, advocates, residential childcare providers, attorneys and others have interpreted various provisions of Family Code Section 266.004 differently.

In response, legislative leadership convened a workgroup consisting of physician's groups, advocates, residential childcare providers, HHSC and DFPS to help clarify issues and develop solutions. Although significant progress has been made, additional clarification of certain provisions in Texas Family Code §266.004 is suggested including:

- Section 266.004(b)(1) needs clarification as to who the court can authorize to consent to medical care.
- Section 266.004(2)(c) needs clarification as to who DFPS can designate to consent to medical care.
- Section 266.004(2)(c) needs clarification as to whether DFPS can designate both live-in caregivers (e.g., both foster parents) as medical consenters.

Next Steps: Present for consideration to the legislature, revisions to clarify medical consent language in Texas Family Code, Section 266.004.

Retention And Workforce Stability

The Legislature provided funding for DFPS to increase staffing levels and enhance training. This opportunity is expected to result in lower caseload levels, less turnover, retention of a more professional workforce, and more effective service delivery. Sustaining the increased staffing made available by the 79th Legislature is fundamental to ensuring the most qualified staff are hired, trained and retained. DFPS is in the process of hiring 2500 new positions during the 2006-2007 biennium.

These resources, while representing an unprecedented opportunity for DFPS, also present new challenges in terms of hiring efforts, space coordination, training resources, and equipment needs. Each month, DFPS is filling newly allocated positions as well as working to fill any vacancies resulting from attrition.

While turnover has decreased in some areas of the state, it remains a continuing concern. As new employees graduate from training, it is anticipated that turnover will drop and reduce the number of new hires that must be processed each month.

As DFPS hires new employees, the agency must carefully coordinate to ensure staff has equipment and office space. This has required a significant ongoing coordination effort with various DFPS divisions, HHSC, and the Texas Building and Procurement Commission. Additionally, hiring efforts must be carefully planned to ensure that DFPS has adequate training capacity for new workers.

Next Steps: DFPS established an initiative to address these issues and developed solutions to ease turnover, including the use of applicant screening and more robust processes to enhance the selection of quality staff. DFPS has developed improved processes to provide equipment more timely for new staff. DFPS is also examining options for the provision of temporary space to accommodate the expanding need for automated classrooms.

CPS Conservatorship Caseload

While reforms such as expanded family group decision-making, informed medical consent and the roll-out of a statewide kinship program are having a positive effect on Texas families, there have been some corresponding caseload challenges.

In fiscal year 2005, average daily caseloads were 41.4 for conservatorship workers. The total number of conservatorship cases has steadily risen from 21,698 in fiscal year 2004, 25,241 in fiscal year 2005, and 27,624 in fiscal year 2006.

Although legislative appropriations allowed for the creation of functional units consisting of a 1:5 worker to supervisor ratio plus clerical support and a caseworker assistant, it did not authorize additional conservatorship caseworkers. Even allowing for the creation of functional units, conservatorship caseworkers have seen a workload increase.

Next Steps:

DFPS is approving paid overtime for conservatorship caseworkers to become current in case record documentation and is temporarily using other staff resources, such as foster and adoptive home development caseworkers, to assist with conservatorship duties. DFPS is also making increased efforts to move children to permanency through adoption.

Provisions Unable To Fully Implement Due To Insufficient Funds

Community-Based Family Services

DFPS must administer a grant program to provide funding for community organizations, including counties and faith-based organizations, to respond to lower-priority, less serious cases.

Although a specific appropriation was not granted for this provision, DFPS plans to fund the Community-Based Family Services program from Strategy A.2.16 appropriated to develop new Other At-Risk Prevention Services. The first year of the program, will be funded at \$125,000, with contracts expected to begin March 2007, with subsequent years funded at \$250,000. Without additional appropriations, DFPS is unable to fully implement this program on a statewide basis.

Unanticipated Fiscal Implications And Cost-Effective Recommendations

Transfer Of Guardianship Program

The number of intakes to APS has steadily increased and is projected to continue increasing for the next few years. As a result, the number of referrals to DADS guardianship has also increased.

To avoid a decline in the quality of services provided if this trend continues, it eventually will be necessary to either increase the number of regional DADS guardianship staff, or provide funding to expand contracts with private guardianship programs. These programs are a cost effective way to serve wards but are not available in all geographic areas, and some are more restrictive in the types of persons that are served. Consequently, a combination of DADS staff and private guardianship programs will continue to be needed to address the increased number of clients requiring services. HHSC and DADS are carefully monitoring guardianship caseloads and will apprise the legislature of significant issues.

Steps Taken To Enhance External And Internal Accountability For Achieving Favorable Outcomes And Expending Public Funds

Internal Accountability

Ultimately the success of reform will be determined by improved outcomes for children and adults served by DFPS. An effective system to improve outcomes must include measures of program performance, accountability at all levels of the organization, and internal and external stakeholders' participation in the shared vision of improved outcomes.

Key features of DFPS' performance and accountability system include:

- Performance indicators that were developed through a broad effort between HHSC and DFPS management and direct delivery staff.
- Performance expectations that support positive client outcomes, client safety, policy compliance, effective community engagement, and efficient use of agency resources.
- Using a regional report card containing high-level performance indicators.
- Strengthening the connection between accountability expectations and an employee's annual performance evaluation.
- Measures related to the quality and timeliness of data entry in accordance with the Legislature's emphasis on "real time" case management information.
- Regularly updated electronic reports with qualitative and quantitative information, allowing supervisors, managers and caseworkers to assess performance on an ongoing basis.
- Aggregate reporting of regional and statewide performance provided to DFPS managers and executive leadership.
- Defining specific and consistent performance expectations for positions statewide. For example, an APS caseworker in one part of the state is held accountable for the same level of performance as an APS caseworker in another part of the state. These performance expectations are comprised of critical qualitative and quantitative performance indicators for each DFPS program.

Contractor Accountability

DFPS contracts with external organizations for the delivery of a variety of client services. It is essential that contractors are held accountable and that DFPS has access to a solid contracting infrastructure that provides support for effective management of the contract lifecycle. DFPS is dedicated to improving accountability and oversight of agency contracts by developing:

- Service contracts with specific goals, outcomes, and output measures. These measures will become part of future procurements and resulting contracts. Contract monitoring will be enhanced to include assessment of the contractor's ability to meet measures.
- A centralized client services procurement unit to ensure uniform and consistent procurement practices.
- Policies, procedures and tools to strengthen contracting.
- Methods that provide ongoing technical assistance and training for procurement and contract management staff to increase agency accountability.
- A plan for the conversion from open enrollment to competitive procurement contracting.

Accountability to the Community

DFPS is improving accountability by engaging external stakeholders and providing meaningful and timely information about reform efforts and other important agency activities. New communications tools being used to accomplish this goal include:

- Outsourcing and Reform (Renewal) web pages created and used to disseminate the latest information both internally and externally. See: <http://www.dfps.state.tx.us/about/renewal/default.asp>
<http://www.dfps.state.tx.us/about/outsourcing/default.asp>.
- A new subscription e-mail service notifying stakeholders when new information is added to DFPS' public website (www.dfps.state.tx.us).
- Direct e-mail to associations and other high-level stakeholders about important developments.
- Creation of a community engagement plan that includes stakeholder interaction policies and procedures, outcome measures tied to performance management, and increased community engagement training for staff.

- Creation of a DFPS Commissioner's Roundtable to facilitate open communication and partnership with providers. Roundtable discussion is also intended to bring to the forefront issues as they evolve and create opportunities for collaboration.

Conclusion

As evidenced in this report, there has been concrete progress in implementing Senate Bill 6 since its effective date of September 1, 2005. HHSC, DFPS, state leadership, community stakeholders and expert consultants are committed to ensuring a positive start to this long-term reform effort.

Several major milestones will be met prior to the next report due on September 1, 2006:

- Announcement of the first region for outsourcing.
- Award of the first independent administrator contract.
- Issuance of the comprehensive medical service model Request for Proposals.
- Implementation of prevention and early intervention grant programs.
- Implementation of new community pilots to address disproportionality.

HHSC and DFPS look forward to working with their many partners in continuing to implement the comprehensive reform envisioned in Senate Bill 6. Though there are challenges, maintaining the vision of improved safety and well-being of vulnerable children and adults as the criteria against which implementation decisions are made, will ensure a steady and successful reform effort.

Appendix I: DFPS Reform Initiatives

Summary of DFPS Reform Initiatives

1 CPS Investigations

Program: Child Protective Services

Purpose: The CPS Investigations Initiative will create an Office of Investigations, develop a new model for investigations that will incorporate forensic techniques, and revise and enhance training for investigative staff. A number of other issues will be addressed, including contact timelines, Early Childhood Intervention (ECI) referrals, family location, engaging families, and working with uncooperative families.

2 CPS Risk and Safety Assessment

Program: Child Protective Services

Purpose: The CPS Risk and Safety Assessment Initiative will identify activities to ensure the risk assessment instrument and philosophy are fully integrated and consistently applied in daily practice at every stage of service with particular focus on investigations. A safety assessment process will be developed and integrated into the risk assessment process.

3 Supporting Quality Casework

Program: Child Protective Services

Purpose: The Supporting Quality Casework Initiative will focus on strengthening the structures of unit management and regional management to improve outcomes for clients. Embedding subject matter experts into units also will increase casework knowledge and lead to improved outcomes. Increasing mobile technology for casework support and improving court relations through use of technology are also critical components of the initiative.

4 Family Focus

Program: Child Protective Services

Purpose: The Family Focus Initiative will enhance the safety, permanency, and well being of children through the provision of direct and support services to their caretakers. This initiative is designed to improve the services delivered to families receiving Family-Based Safety Services as well as parents, children and extended family members involved in the foster care system. The Family Focus Initiative will also enhance and expand the Family Group Decision-Making process and Kinship Care.

5 Medical Services for CPS Children

Program: Child Protective Services

Purpose: The Medical Services Initiative will ensure that each foster child receives accessible, coordinated, comprehensive, and continuous healthcare through

establishing medical homes for foster children, improving management of psychotropic drugs, providing medical passports for foster children, and establishing Centers for Forensic Assessments for the forensic diagnosis and treatment of abuse and neglect.

6 Educational Services for CPS Children

Program: Child Protective Services

Purpose: The Education Initiative will develop and implement an educational passport to enhance educational outcomes for children in foster care and to ensure education records follow the children to their next placement. It also will ensure that a child in care is placed in the correct grade and receives identified educational services for which the child is eligible.

7 Transitional Living Services

Program: Child Protective Services

Purpose: The Transitional Living Services Initiative will improve and expand transition and discharge services for older youth in foster care. Services and support will also be improved and expanded for youth who have aged out of foster care, during their young adult years. Community partnerships with public and private agencies will be strengthened to expand transition services. This initiative will also ensure that federal funding for this population of youth is fully leveraged, with match from existing community resources.

8 Disproportionality

Program: Child Protective Services

Purpose: The Disproportionality Initiative will identify practice improvements that will address disproportionate representation and disparate outcomes for African-American children and their families within the CPS system. In addition to examining disproportionate rates of children entering the CPS system, other issues will be examined such as the equity with which children of color and their families receive access to available services and the disparate outcomes for African-American children once they are engaged in the child welfare system. This initiative will promote parity and improve outcomes for all children and families in Texas.

9 Outsourcing CPS Services

Program: Child Protective Services and Purchased Client Services

Purpose: The Outsourcing CPS Services Initiative will ensure the transition of substitute care and case management services from DFPS to private sector agencies and will continue to convert the agency to competitively procured, performance-based contracting practices to achieve desired client outcomes.

10 Prevention and Early Intervention

Program: Prevention and Early Intervention

Purpose: The Prevention and Early Intervention Initiative will support CPS reform efforts to strengthen the parent-child relationship and improve family functioning of at-risk families. This will be accomplished through development of community resources and provision of a continuum of evidence-based prevention and early intervention services to families, with particular focus on those at-risk families who do not qualify for state-mandated intervention.

11 APS Intake, Investigation and Service Delivery

Program: Adult Protective Services

Purpose: The APS Intake-Investigation-Service Delivery Initiative will plan, develop and implement new policies and procedures for these three areas of APS operations. The goal of this initiative is to ensure that investigation and service delivery functions will be performed in a manner that maximizes client safety and well-being. This will include a review of existing policies and procedures for modification and improvement, as well as implementation of new practices. All policy changes will be incorporated into a more user-friendly APS In-Home handbook for staff.

12 APS Risk Assessment

Program: Adult Protective Services

Purpose: The APS Risk Assessment Initiative will develop and implement a risk assessment tool (CARE) to replace the capacity questions used by APS staff to assess a client's decision-making capacity. This initiative includes: development and testing of the tool; design and testing of the instrument for mobile technology; risk assessment policy development; risk assessment training; and evaluation of the risk assessment tool by an outside entity.

13 Guardianship

Program: Adult Protective Services

Purpose: The Guardianship Initiative will address transition issues associated with the transfer of guardianship services from DFPS to the Department of Aging and Disability Services (DADS). Clients will be transferred in the least disruptive method with emphasis on client safety and care. Transition issues to be addressed include IMPACT security, space, equipment, referrals, invoicing, and dispute resolution. The initiative will also include development of a new Memorandum of Understanding for ongoing coordination and collaboration between the agencies and a transition of Guardianship staff training responsibility to DADS.

14 APS Case Profiling

Program: Adult Protective Services

Purpose: The Case Profiling Initiative will focus on developing a method for profiling APS cases in terms of their complexity and demand for APS resources. The goal is

to use regional case characteristics indicative of risk, need, and severity of alleged and actual abuse, neglect, and/or exploitation to inform management decision-making on how to best allocate resources to address APS cases.

15 APS Training Innovation

Program: Adult Protective Services

Purpose: The APS Training Innovation Initiative will improve services to APS clients by equipping APS staff with the knowledge and skills required for their positions. Activities in the initiative will include designing and implementing training programs for new and experienced APS staff that address new policies and procedures resulting from APS reform. The initiative also involves training APS staff in how to use new tools such as risk assessment (CARE) and mobile technology. The scope of the initiative includes all APS training delivered by agency staff or a contractor, with the exception of the APS conference.

16 Performance Management

Program: All DFPS Programs

Purpose: The Performance Management Initiative will implement a consistent, integrated performance management structure that identifies key measures of program performance and establishes individual and program accountability for successful client outcomes through quality casework.

17 Resource/Funding Allocation

Program: All DFPS Programs

Purpose: The Resource/Funding Allocation Initiative will ensure the model for allocating resources to regions (Equity of Service Statement, or ESS) reflects current agency priorities, incorporates appropriate information and equitably allocates resources.

18 Community Engagement

Program: All DFPS Programs

Purpose: The Community Engagement Initiative will develop a comprehensive and consistent approach for more effective community collaboration and participation at all levels and in all programs and divisions. The goals of the initiative are increased access to services through professional collaborations, and more civic and volunteer support for priority needs and initiatives.

19 Communications

Program: All DFPS Programs

Purpose: The Communications Initiative will develop and implement a comprehensive communications plan for DFPS that fosters consistent messaging both internally and externally, fosters a cultural shift within the agency, as well as an understanding of the agency's mission by the public, providers and other

stakeholders. The initiative is also charged with consolidating public information functions and developing public awareness plans for both APS and CPS.

20 CPS Training Innovation

Program: Child Protective Services

Purpose: The CPS Training Innovation Initiative will improve services to CPS clients by equipping CPS staff with the knowledge and skills required for their positions. Activities in the initiative include designing and implementing training programs for new and experienced CPS staff to address new policies and procedures recommended in CPS reform. The scope of the initiative includes a complete re-write and expansion of CPS Basic Skills Training and advanced training and re-training in areas including Joint First Responder Training with law enforcement, advanced forensic investigations, and other training needs defined by supervisors and caseworkers.

21 Human Capital

Program: All DFPS Programs

Purpose: The Human Capital Initiative will develop screening and selection processes to improve the retention of quality staff. Initiative objectives include increasing the pool of qualified applicants, and increasing DFPS' hiring capacity and efficiency. The initiative will also implement efforts to improve the retention and tenure of staff.

22 Records Management

Program: All DFPS Programs

Purpose: The Records Management Initiative will eradicate backlogged records and develop an improved system of technology, personnel, policy and procedure to ensure ongoing efficient management of agency records.

23 IMPACT Modifications

Program: Adult Protective Services

Purpose: The IMPACT Modifications Initiative will address the technological issues to include the use of mobile technology to support access to policies when caseworkers are in the field. The initiative will develop and implement a risk assessment tool, revise program policies related to merging of cases, and address other IMPACT enhancements to assist APS in achieving improved services to clients as well as new methodologies for monitoring quality assurance.

24 Revising Licensing Standards

Program: Residential Child Care Licensing

Purpose: The Revising Licensing Standards Initiative will revise minimum standards for residential child-care facilities and child-placing agencies. The revision will involve the consolidation of 10 sets of minimum standards for 24-hour Residential Child Care facilities into four sets, which will eliminate duplicative and conflicting

requirements among standards. The revision will provide the opportunity to design a system that assigns a numerical score or weight to individual minimum standards based on the relative risk to children.

Appendix II: CPS Basic Skills Core and Specialized Training

CPS Basic Skills Core and Specialized Training

Core Basic Skills Development (BSD) Classroom

Pre-BSD	
4 hours	Pre-BSD Introduction to IMPACT
BSD Core Week 1	
2 days	Fundamentals of CPS Practice
½ day	Safety and Risk Assessment I
2 days	Risk Assessment: Maltreatment Pattern
½ day	Risk Assessment: Child Vulnerability and Quality of Care
BSD Core Week 2	
1 ½ days (<i>cont</i>)	Risk Assessment: Child Vulnerability and Quality of Care <i>continued</i>
1 day	Risk Assessment: Caregiver Capability
½ day	Risk Assessment: Home Environment and Social Environment
1 day	Risk Assessment: Response to Intervention
½ day	Safety and Risk Assessment II
½ day	Family Assessment
BSD Core Weeks 3 and 4	
On-the-Job Training	
BSD Core Week 5	
2 days	Intake and Investigation
1 day	Removal, Placement and Permanency
1 ½ days	Core Legal
½ day	BSD Knowledge Assessment

Investigations

Week 6 (5 days)	
1 Day	Risk and Safety Assessment; Critical Thinking
1 Day	Investigative Interviewing: Adults
1 Day	Investigative Interviewing and Electronic Recording: Children
½ Day	Background Checks/Searches for Missing Families, Persons
½ Day	IMPACT
½ Day	Evidence: Preponderance & Narrative Writing
½ Day	Legal for Investigators: Civil v. Criminal, Affidavit Writing
BSD Weeks 7 & 8	
On-the-Job Training	
Week 9 (5 days)	
½ Day	Opinion v Fact in Case Narrative
½ Day	IMPACT
1 Day	Special Issues: Investigating Physical Abuse Cases
1 Day	Special Issues: Investigating Neglect Cases
1 Day	Special Issues: Investigating Sexual Abuse Cases
1 Day	Investigative Photography
BSD Weeks 10 & 11	
On-the-Job Training	
Week 12 (5 days)	
1 Day	Substance Abuse and Child Safety
1 Day	Domestic Violence and Child Safety
1 Day	Legal for Investigators: Statement Admissibility, Testifying in Court
1 Day	Utilizing Subject Matter Experts and Securing Expert Affidavits
1 Day	Engaging Clients in Difficult Situations

Conservatorship

BSD Week 6	
On-the-Job Training for Conservatorship, Foster Adoptive Development (FAD) and Family Based Safety Services (FBSS)	
Week 7 (5 days) Conservatorship, FBSS & FAD combined	
Day 1 am	Introduction to Specialty Track: Ethics
Day 1 pm	Role of a Caseworker
Day 2 am	Worker Safety
Day 2pm	Building Relationships: Communication I
Day 3 am	Building Relationships: Communication II
Day 3pm	Interviewing (Part I)
Day 4	Interviewing (Part II)
Day5	Critical Thinking & Family Assessments
BSD Weeks 8 & 9	
On-the-Job Training for Conservatorship, Foster Adoptive Development and Family Based Safety Services	
Week 10 (5 days) (Conservatorship/FAD)	
Day 1am	Review and Debrief of OJT experiences/
Day 1pm	Continuing to Assess: Safety & Risk Assessments
Day 2	Service Planning / IMPACT Documentation
Day 3 am	Educational Issues for Children in Care
Day 3pm	Time Management / Stress Management
Day 4** am	Conservatorship Documentation
Day 4** pm	Community Engagement
Day 5** am	Contracts
Day 5** pm	Records Management
**	To replace Knowing Who You Are until March/April 06
Day 4/5	Casey—Racial and Ethnic Identity Formation
BSD Weeks 11 & 12	
On-the-Job Training for Conservatorship/FAD	
Week 13 (5 days) (Conservatorship/FAD)	

Day 1	Review and debrief of OJT activities / Supporting Caregivers / Permanency Issues
Day 2	Legal for Conservatorship/FBSS Staff (combined)
Day 3	Reunification / case closure
Day 4	Preparation for Adult Living (PAL) – Aging Out Children
Day 5 am	Portfolio presentations / Protective Services Training Institute Assessment
Day 5 pm	Graduation

Family Based Social Services

BSD Week 6	
On-the-Job Training for Conservatorship/FAD and FBSS	
Week 7 (5 days) Conservatorship, FBSS & FAD combined	
Day 1 am	Introduction to Specialty Track: Ethics
Day 1 pm	Role of a Caseworker
Day 2 am	Worker Safety
Day 2pm	Communication
Day 3 am	Communication
Day 3pm	Interviewing part I
Day 4	Interviewing part II
Day5	Family Assessments
BSD Weeks 8 & 9	
On-the-Job Training for Conservatorship/FAD and FBSS	
Week 10 (5 days) (FBSS only)	
Day 1 am	Review and Debrief of OJT experiences/ Critical Thinking
Day 1 pm	Continuing to Assess Risk and Safety
Day 2	Service Planning / IMPACT Documentation
Day 3 am	FBSS Documentation
Day 3 pm	Time Management / Stress Management
Day 4 am	FBSS Treatment Strategies
Day 4 pm	Community Engagement

Day 5 am	Contracts
Day 5 pm	Records Management
BSD Weeks 11 & 12	
On-the-Job Training (for FBSS)	
Week 13 (5 days)	
Day 1 am	Review of OJT activities / Boys Town Mediation
Day 1 pm	Boys Town Crisis Management
Day 2	Legal for Conservatorship/FBSS Staff (combined)
Day 3 am	Boys Town Perceiving Opportunities to Teach
Day 3 pm	Boys Town Identifying and Building on Strengths
Day 4	Reunification Services
Day 5 am	Portfolio presentation / Assessment
Day 5 pm	Graduation