# S.B. 758 Foster Care

# Capacity-Building

# Progress Report

A Report from

The Texas Department of Family and Protective Services

September 2012

## Introduction

S.B. 758, 80th Legislature, Regular Session, 2007, by Senator Jane Nelson and Representative Patrick Rose was developed as the continuation of the Texas Department of Family and Protective Services’ (DFPS) Reform that began with the passage of S.B. 6 by the 79th Legislature. A central part of this Reform was to increase the ability of DFPS to provide a safe, nurturing placement to every child in foster care.

The Child Protective Services (CPS) Improvement Plan, as outlined in S.B. 758 Section 51 Subdivision (8) Subsection (b), must include expanding the quality and capacity of placements, both substitute and adoptive, in local communities through the procurement of a statewide needs assessment and through implementation of recommendations for expanding and improving provider capabilities. Subsection (c) of S.B. 758 further directs DFPS to ensure that the recommendations for expanding and improving provider capabilities include:

* Provisions for start-up funding for providers to build necessary capacity in the state;
* Partnerships with community leaders to identify local resources to support building capacity; and
* The development of pilot projects to procure regional capacity development.

Each year, DFPS is directed to prepare a progress report that details activities to implement the recommendations. The report must include regional data regarding the number of children in state conservatorship who are placed in their home region separated into classifications based on service levels. This is the fifth report to be submitted and includes new initiatives and updates since the last report.

## DFPS Foster Care Capacity-building Efforts

In the S.B. 758 Foster Care Capacity-building progress reports submitted in 2008, 2009, and 2010, DFPS provided information on a variety of efforts to better understand and address barriers to providing quality foster care placements for children in their home communities. Efforts that DFPS began to implement immediately included improvements to the contracted foster care placement vacancy database that aids in matching children and youth with foster homes, and changes in the DFPS foster and adoption verification process that decreased the wait time before a family is ready to accept a child into their home. In 2008, in accordance with the requirements of S.B. 758, DFPS procured a needs analysis and plan that compared existing placement quality and capacity to the specific needs of the current and projected substitute care population. The resulting DFPS Statewide Placement Quality and Capacity Strategic Plan suggested alternatives and solutions to address the gaps and needs in the substitute care system. The resulting analysis and strategic plan were submitted as part of the 2009 S.B. 758 Progress Report. The text of the strategic plan with goals and objectives are attached as an Addendum.

DFPS continues to make progress in achieving the objectives of the strategic plan. Beginning in January 2010, DFPS initiated the "Improving Child/Youth Placement Outcomes: A System Redesign" project, with the goal of improving outcomes for children and families by creating sustainable placement resources in communities that will meet the service needs of children in foster care using the least restrictive placement settings. This effort is commonly referred to as "Foster Care Redesign." This report outlines the work by DFPS and its stakeholders over the last two years on the Foster Care Redesign effort. The report also addresses the continued work of DFPS to provide quality health care to foster children and promote placements that maintain children's and youth's cultural, faith and social connections.

## Permanency Roundtables

When children cannot be safely returned home after a removal, CPS works to find other permanent homes for them. CPS has initiated Permanency Roundtables to facilitate this process. Permanency Roundtables are internal CPS processes that support caseworkers in identifying realistic solutions to permanency obstacles for children. The Texas model involves an internal team consisting of caseworkers, supervisors, program directors, program administrators, and other agency subject matter experts who meet to discuss and create child-specific action plans to achieve permanency. In many cases, a child will be placed with a relative or kinship caregiver, who becomes permanent managing conservator (an individual or entity to be permanently legally responsible for a child). A CPS staff member specializing in permanency issues facilitates the Permanency Roundtable meetings and is responsible for monitoring that tasks assigned out of those meetings are completed.

In June 2012, CPS started implementing Permanency Roundtables in Region 6 with a plan to expand into Region 8 and Region 10 in the fall 2012. CPS plans to have Permanency Roundtables implemented in every region by November 2013.

## Improving Child/Youth Placement Outcomes: A System Redesign (Foster Care Redesign)

Beginning in January 2010, DFPS joined other child welfare stakeholders in a united effort to develop recommendations for a redesigned foster care system that addresses problems with the current system, supports improved outcomes for children, youth, and families, and provides increased opportunities for collaboration and partnership in serving children, youth, and families.

As required by federal regulations, under any system design DFPS will remain responsible for proper operation of the foster care system. However, the redesign does intend increased latitude for providers in making placement decisions to meet the needs of children and in the planning and coordination of services for families and children. Resources commensurate with tasks transferred will be transferred to the provider known as the "Single Source Continuum Contractor" (SSCC).

*Stakeholder Involvement*

Children, youth, and families rely on many different stakeholders to meet their safety, permanency, and well-being needs. In order to properly address these needs, the development of the redesigned foster care model was based on input and recommendations from over 3,000 stakeholders.

Stakeholders participated in presentations, focus groups, meetings, and surveys. Also, they responded to a Request for Information (RFI) and a draft Request for Proposal (RFP) to provide input into the new foster care model. In May 2010, a stakeholder survey designed to assist in the identification of barriers within the current foster care system was conducted. Six hundred twenty-two stakeholders from ninety-four Texas counties responded to the survey. Respondents represented various individuals and disciplines within the child welfare community.

From July 21, 2010, through August 19, 2010, the RFI was posted on the *Electronic State Business Daily.* The purpose of the RFI was to gather input for a redesigned foster care system and implementation strategies. A link to the RFI was posted on the DFPS Redesign webpage and notice was sent to all DFPS licensed residential child care and regional purchase of service providers. A total of twenty-two responses were made to the RFI.

The Public Private Partnership (PPP), served as the guiding body in developing recommendations for a redesigned foster care system. The PPP includes foster youth alumni, members of the judiciary, foster care providers, child and family advocates, provider associations and DFPS leadership. Its first task was to design a system to improve outcomes for children in foster care and their families and to recommend that design to the DFPS Commissioner. Due to Texas procurement law, the PPP had only limited participation in developing the RFP and in subsequent work related to the procurement of the initial SSCC contracts. DFPS intends to resume the work of the PPP once the initial SSCC contract is in effect which is anticipated to occur in fall 2012.

*Recommendations*

In December 2010, members of the PPP reached consensus on recommendations for a redesigned foster care system that will result in better outcomes for children, youth, and families; increase accountability; enhance opportunities for partnership and collaboration; and improve the availability, quality, and coordination of services in communities.

Eight quality indicators serve as a foundation for the development of a redesigned foster care system that will improve permanency outcomes for children and youth. As specified in related legislation, the individual needs of a child are paramount; not all indicators are appropriate for every child. The quality indicators include:

* First and foremost, children are safe in their placements;
* Children are placed in their home communities;
* Children are appropriately served in the least restrictive environment, which supports minimal moves for the child;
* Connections to family and other individuals that are important to the child are maintained;
* Children are placed with siblings;
* Services respect the child's culture;
* To be fully prepared for successful adulthood, children and youth are provided opportunities, experiences, and activities similar to those experienced by their non-foster care peers; and,
* Children and youth are provided opportunities to participate in decisions that impact their lives.

In addition to the quality indicators, the PPP recommended changes to the methods in which DFPS procures, contracts, and pays for residential child-care services and outlined a streamlined approach to service coordination and delivery, which supports improved safety, permanency, and well-being outcomes for children and youth in foster care. The PPP made those recommendations within the following parameters:

* Transfer of DFPS resources commensurate with transferred tasks;
* Staged implementation and an evaluation of early implementation sites showing positive results prior to expanding roll-out;
* Increased provider authority/participation in making placements that meet the needs of children;
* Increased collaboration and cooperation between DFPS and stakeholders;
* Provider authority/ability to impact outcomes for which they are held accountable; and,
* Maintaining, at a minimum, current foster care funding levels.

*Implementation*

DFPS considered the recommendations of the PPP and endorsed the outlined redesign model and implementation plan through the formal release of the Foster Care Redesign Report. S.B. 218 and H.B. 1, Rider 25 passed by the 82nd Legislature, support the Redesign project and call on DFPS to proceed with implementation of the new model in accordance with the Foster Care Redesign Report.

On August 1, 2011, DFPS posted a Request for Proposal (RFP) for two Single Source Continuum Contracts (SSCC), as a part of the Foster Care Redesign effort. One of the SSCC contracts was to be awarded to an entity that would ensure services in a either DFPS Region 7 (Austin) or Region 11 (Corpus Christi, the Valley and Laredo) metropolitan areas and the other was to be awarded to an entity that would ensure services in either Region 1 (Lubbock/Amarillo) or Region 2/9 (Wichita Falls, Abilene/ Midland, Odessa) non-metropolitan areas of the state.

On June 20, 2012, DFPS made a tentative award to Providence Service Corporation of Texas to serve the Region 2/9 non-metropolitan area and to Lutheran Social Services of the South to serve the Region 11 metropolitan area.

In August 2012, DFPS determined that it will not award an SSCC contract for a metropolitan area under the initial procurement. Although DFPS opted not to award an SSCC contract in a metropolitan area as a part of the initial procurement, the agency intends to move forward with procuring for an SSCC to serve a metropolitan area in the future.

DFPS remains committed to implementing Foster Care Redesign and will continue with efforts to negotiate an SSCC contract for a non-metropolitan area. DFPS is currently in negotiations with Providence Service Corporation of Texas and anticipates the first SSCC contract covering Regions 2 and 9 to be in effect in September 2012.

For more information and status updates on the Foster Care Redesign effort, please visit the project webpage: http://www.dfps.state.tx.us/Child\_Protection/Foster\_Care/redesign.asp.

## Texas Adoption Resource Exchange

The Texas Adoption Resource Exchange (TARE) web-site (AdoptChildren.org) is a DFPS recruitment tool for prospective foster and adoptive homes. The TARE web-site’s most prominent and unique feature is its photo-listing of Texas children awaiting adoption, including children’s photos, profiles, and videos. During Fiscal Year 2011 modifications to TARE made it more streamlined, user-friendly, and informative to families. Enhancements to TARE became available on August 28, 2011. These enhancements were detailed in the January 2012 S.B. 758 report.

By redesigning the TARE system, DFPS hopes to increase positive customer relations, increase the system's user friendliness and responsiveness to families, while creating a new and progressive matching system for waiting children. In recognition of the enhancements made to TARE, the Center for Digital Government awarded the TARE website their “Best in Texas Award” and the national “2012 Digital Government Achievement Award.”

## The Advisory Committee on Promoting Adoption of Minority Children

The Legislature established the Advisory Committee on Promoting Adoption of Minority Children to help DFPS increase adoptions for children of color. Recently, the committee has partnered with Regional Disproportionality Task Forces, faith-based communities, and Casey Family Programs to host disproportionality-focused community adoption forums in Houston and Abilene, with another forum scheduled for Dallas. The adoption forums are designed to increase community awareness of children waiting for adoptive homes. The adoption forum held in Houston resulted in many relatives expressing an interest in becoming verified foster parents for their relative children in the legal custody of CPS. Following the Houston forum, more relatives have expressed their interest in caring for their relative children in foster care.

## The Residential Child-Care Contracts (RCC) DFPS/Provider Performance Measures Workgroup

The DFPS Residential Contracts division established a co-facilitated, DFPS and provider workgroup in early 2009 to develop and implement contract performance measures related to residential service provider responsibilities that impact the safety, permanency, and well-being of children in care. The performance measures align with the Child and Family Services Review (CFSR) measures and DFPS' statewide strategic plan for placement. The workgroup initially met in 2009 to organize and to discuss measures for the fiscal year 2010 residential contract. They continued to meet during the following three years to develop a new measure for the fiscal year 2011 contract; develop six new measures for the fiscal year 2012 contract, three of which require contractors to self-report data to DFPS via the Performance Management Evaluation Tool (PMET); and delete two measures and add one new measure for the fiscal year 2013 contract. The group continues to meet with a goal of revising and developing meaningful measures for fiscal year 2014 and beyond. Provider members of this workgroup were also available as a resource to the Foster Care Redesign project team as they identified quality indicators for the new foster care model.

## Partnership Systems with Residential Child Care Licensing, Residential Contracts, and CPS

DFPS has worked internally to identify opportunities for increased communication and coordination among its regulatory, contracting and program functions related to residential child care provider development and oversight. In fiscal year 2010, DFPS developed a crosswalk of application requirements for residential child care licensing, residential child care contracts and the third-party service level monitor. A joint presentation of these requirements was piloted at licensing inquiry meetings in the Austin and San Antonio areas to help prospective providers understand the processes and timeframes associated with obtaining both a child care license and contract from DFPS to provide residential child care services.

The pilot proved successful and was expanded statewide in January 2011. Presenters from CPS, Residential Child Care Contracts, and Child Care Licensing continue to be available at inquiry meetings to answer questions in their area of expertise. This joint process allows prospective providers to make more informed decisions regarding the licensing and contracting process.

## Fostering Connections

The federal Fostering Connections to Success and Increasing Adoptions Act of 2008 promotes finding permanent homes (permanency) for children and youth. The Act emphasizes adoption and care by relatives, and transition services for young adults who have aged out of care. One result was the start of the Permanency Care Assistance (PCA) program in fiscal year 2011. This is a new option for youth who would otherwise grow up in foster care because going home or being adopted are not viable options.

The Fostering Connections initiative was developed in response to federal and supporting state legislation. A federal act, *Fostering Connections to Success and Increasing Adoptions Act of 2008* (H.R. 6893/PL 110-351), signed into law October 7, 2008, significantly overhauls the federal child welfare structure. This is a fundamental shift in child welfare that recognizes that:

* Foster care is not a viable long-term solution;
* Adoption is not an option for everyone;
* Increased focus on relatives; and,
* Older children in foster care need help.

The federal legislation authorized an assistance program to provide financial support to relative caregivers who take permanent legal responsibility for a child who cannot be reunited with his or her parents and for whom adoption is not an appropriate permanency option. In order to qualify for the program, relative caregivers must, among other requirements, become verified as foster parents, care for the child as foster parents for at least six months, negotiate an agreement before receiving legal custody, and then go to court and receive legal custody. DFPS received state support in the 81st Texas legislative session, with the passage of S.B. 2080 and H.B. 1151, to implement PCA. The Texas Legislature also approved extending PCA benefits up to a person's 21st birthday if the PCA agreement was signed after a CPS youth turns 16.

Rules were adopted in March 2010, and the policy became effective September 1, 2010. The maximum amounts and process for negotiating the monthly PCA payment are identical to the amount and process for negotiating the adoption assistance payment in Texas.

As of August 31, 2012, there were 689 children who exited to permanency through the kinship family receiving legal custody (permanent managing conservatorship or PMC) with the support of monthly PCA benefits.

## Disproportionality

DFPS is engaged in a variety of efforts to address the disproportionality of African American children in the child welfare system. These efforts support foster care capacity building in their similar commitment to keeping siblings together and maintaining connections for children. The very nature of disproportionality work is family-focused, recognizing the importance of culture, community, family, kin, sibling relationships, and the impact other systems have on children involved with CPS. Texas is at the forefront of efforts to eliminate disparities in its system and remediate associated issues.

Texas has become a national leader in addressing disproportionality through leadership development, community partnerships, cultural training, and developing more sensitive and safety-centered practices. DFPS seeks to equitably serve families and youth in all stages of service by utilizing initiatives to reduce the number of children in foster care and the disparate outcomes experienced in the system. Texas legislation and practices in this arena are being duplicated by other child welfare systems seeking solutions to disproportionality. These practices include:

* Family Group Conferencing - an innovative approach to engage families in planning for their children when they have come to the attention of CPS;
* Faith-based Initiative - dedicated to finding more foster and adoptive homes for African American children;
* Kinship Care Initiative - involves the commitment of relatives and trusted friends, who have a relationship with the child by providing safety and stability in their homes for children when they cannot live with their birth parents;
* Diligent Recruitment Grant - the recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in foster care;
* Permanency Care Assistance - a paid guardianship subsidy to support permanent placement of children with relatives and trusted friends when adoption is not possible; and,
* Foster Care Redesign - restructuring how CPS administers foster care, which will emphasize supportive, community-based services for children, and families in Texas.
* Implementation of Permanency Roundtables as an intervention designed to facilitate the permanency planning process by identifying realistic solutions to permanency obstacles for youth.

In September 2010 the Texas Health and Human Services Commission (HHSC) formed the new Center for Elimination of Disproportionality and Disparities. The Center serves as a leader in addressing the systemic factors and identifying practice improvements that address the disproportionate representation and disparate outcomes for children, their families, and other vulnerable citizens within Texas Health and Human Services systems. In an effort to centralize the disproportionality work in Texas, CPS regional disproportionality specialists were transferred to HHSC effective January 2, 2012.  These specialists will continue to expand the disproportionality work in CPS to all health and human services agencies.  They will remain an integral part of the work in DFPS and remain a source of information and expertise for DFPS staff.

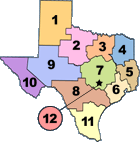
## Conclusion

In 2004, Governor Rick Perry issued an Executive Order which resulted in the major reform of the Texas CPS system. The 79th Texas Legislature responded swiftly, passing landmark legislation (S.B. 6). The 80th Legislature continued the Reform of CPS with the passage of S.B. 758. A central part of this Reform was to increase the ability of DFPS to provide a safe, nurturing placement to every child in foster care.

In the 81st Legislative Session, state leaders continued to support earlier improvements and also directed more targeted resources, such as an increase in Family Based Safety Services staff and the enactment of a paid relative guardianship program to facilitate moving foster children into permanent homes.

The 82nd Legislature took the reform efforts in a new direction with the authorization of a redesigned foster care model. With the award in 2012 of the first contract for the redesigned foster care model, the Department continues its efforts to enhance placement capacity and improve outcomes for the children in the care of DFPS.

### Appendix

S.B. 758 directed that the progress report must include regional data separated into classifications based on service levels regarding the number of children in state conservatorship who are placed outside their home region (referred to as “legal region” in Table 1). Table 1 (below) shows children across all service levels are placed outside their regions of conservatorship. Some regions are better able to maintain children with basic, moderate, and specialized service levels in their home regions. Other regions struggle to place children close to home, particularly at the moderate, specialized, and intense service levels. These regional trends are consistent with those identified in the 2011 report.

Placements made out of a child's home region sometimes occur when the department cannot secure needed capacity within a region. This is especially true for children with higher service levels needing more specialized services, such as residential treatment, that cannot be located within the child's home region. Of the 1,576 children placed in residential treatment as of June 2012, 34.1 percent were placed in their home region.

Other times, out of region placements can provide the best placement option for children in substitute care. For example, DFPS has dedicated more resources to locating and supporting kinship placement in recent years, resulting in an increase in kinship placements. Of the 28,339 children in substitute care as of June 2012, 8,342 (29.37%) of placements were in kinship homes, both within and outside of children’s home regions. This compares to 21.5% of children in substitute care living in kinship placements at the end of March 2005.

#### Table 1. Substitute Care Placements by Legal Region and Authorized Service Level, March 31, 2012

**Basic Level of Care**

| **Legal Region** | **Placements** | **Placements Out of Region** | **Placements In Region** |
| --- | --- | --- | --- |
| 1 | 844 | 83 | 761 |
| 2 | 470 | 113 | 357 |
| 3 | 3,565 | 257 | 3,308 |
| 4 | 873 | 214 | 659 |
| 5 | 669 | 139 | 530 |
| 6 | 2,978 | 331 | 2,647 |
| 7 | 1,668 | 251 | 1,417 |
| 8 | 2,486 | 280 | 2,206 |
| 9 | 520 | 211 | 309 |
| 10 | 264 | 26 | 238 |
| 11 | 1,305 | 100 | 1,205 |
| Unknown | 649 | 577 | 72 |
| **State** | **16,291** | **2,582** | **13,709** |

**Specialized Level of Care**

| **Legal Region** | **Placements** | **Placements Out of Region** | **Placements In Region** |
| --- | --- | --- | --- |
| 1 | 201 | 130 | 71 |
| 2 | 73 | 50 | 23 |
| 3 | 525 | 228 | 297 |
| 4 | 140 | 88 | 52 |
| 5 | 63 | 33 | 30 |
| 6 | 641 | 145 | 496 |
| 7 | 328 | 131 | 197 |
| 8 | 437 | 142 | 295 |
| 9 | 109 | 86 | 23 |
| 10 | 77 | 25 | 52 |
| 11 | 187 | 109 | 78 |
| Unknown | 264 | 254 | 10 |
| **State** | **3,045** | **1,421** | **1,624** |

**Moderate Level of Care**

| **Legal Region** | **Placements** | **Placements Out of Region** | **Placements In Region** |
| --- | --- | --- | --- |
| 1 | 265 | 71 | 194 |
| 2 | 128 | 66 | 62 |
| 3 | 675 | 86 | 589 |
| 4 | 176 | 94 | 82 |
| 5 | 113 | 48 | 65 |
| 6 | 763 | 92 | 671 |
| 7 | 362 | 80 | 282 |
| 8 | 582 | 122 | 460 |
| 9 | 132 | 83 | 49 |
| 10 | 96 | 12 | 84 |
| 11 | 282 | 64 | 218 |
| Unknown | 363 | 326 | 37 |
| **State** | **3,937** | **1,144** | **2,793** |

**Intense Level of Care**

| **Legal Region** | **Placements** | **Placements Out of Region** | **Placements In Region** |
| --- | --- | --- | --- |
| 1 | 24 | 16 | 8 |
| 2 | 4 | 4 | 0 |
| 3 | 53 | 36 | 17 |
| 4 | 12 | 10 | 2 |
| 5 | 8 | 6 | 2 |
| 6 | 40 | 15 | 25 |
| 7 | 49 | 35 | 14 |
| 8 | 58 | 20 | 38 |
| 9 | 16 | 15 | 1 |
| 10 | 5 | 4 | 1 |
| 11 | 19 | 16 | 3 |
| Unknown | 54 | 52 | 2 |
| **State** | **342** | **229** | **113** |

**Intensive Psychiatric Transition**

| **Legal Region** | **Placements** | **Placements Out of Region** | **Placements In Region** |
| --- | --- | --- | --- |
| 1 | 1 | 0 | 1 |
| 2 | 0 | 0 | 0 |
| 3 | 2 | 1 | 1 |
| 4 | 0 | 0 | 0 |
| 5 | 2 | 2 | 0 |
| 6 | 2 | 2 | 0 |
| 7 | 5 | 4 | 1 |
| 8 | 1 | 0 | 1 |
| 9 | 0 | 0 | 0 |
| 10 | 1 | 1 | 0 |
| 11 | 6 | 6 | 0 |
| Unknown | 2 | 2 | 0 |
| **State** | **22** | **18** | **4** |

**Unknown Level of Care**

| **Legal Region** | **Placements** | **Placements Out of Region** | **Placements In Region** |
| --- | --- | --- | --- |
| 1 | 275 | 17 | 258 |
| 2 | 96 | 11 | 85 |
| 3 | 81 | 10 | 71 |
| 4 | 192 | 23 | 169 |
| 5 | 23 | 13 | 10 |
| 6 | 1,444 | 82 | 1,362 |
| 7 | 689 | 94 | 595 |
| 8 | 1,195 | 37 | 1,158 |
| 9 | 193 | 23 | 170 |
| 10 | 41 | 2 | 39 |
| 11 | 344 | 16 | 328 |
| Unknown | 23 | 22 | 1 |
| **State** | **4,596** | **350** | **4,246** |

### Addendum

*Note: The DFPS Statewide Placement Quality and Capacity Strategic Plan was developed in association with the Moving Foster Care Forward project. The DFPS Statewide Placement Quality and Capacity Strategic Plan is included in this document for reference purposes. However, the DFPS Statewide Placement Quality and Capacity Strategic Plan has been formally incorporated in the DFPS effort to redesign the foster care system.*

**DFPS Statewide Placement Quality and Capacity Strategic Plan**

**Goal and Objectives**

**Fiscal Years 2010-2014**

The implementation of this Plan is at all times contingent upon availability of funding, legislative mandates, HHSC Directives, and DFPS Directives.

***Goal***

Statewide Placement Quality and Capacity will be strengthened to meet the needs of children and youth in foster care.

***Objective* *1***

DFPS will increase its ability to meet the needs of children and youth in substitute care by providing continuity of care in placements, which are the least restrictive and most appropriate for the child or youth.

Strategy 1.1. Advocate for the development of an efficient and effective rate structure and rate methodology.

Strategy 1.2. Define and implement an effective utilization review process.

Strategy 1.3. Develop and implement a performance based system to include incentives relative to outputs and outcomes.

***Objective 2***

Promote best practices and innovations in purchased service delivery.

Strategy 2.1. Establish partnerships and collaborative efforts among service providers to ensure continuity of care for a child or youth while receiving needed services.

Strategy 2.2. Pilot innovative case management strategies based on available resources.

***Objective 3***

Establish effective business and regulatory relationships with providers and stakeholders to share and strengthen accountability of outcomes by promoting internal coordination, program efficiencies, and communication practices.

Strategy 3.1. Develop partnership systems with Residential Child Care Licensing, Residential Contracts, Youth for Tomorrow and CPS teams.

Strategy 3.2. Develop a system that evaluates outcome-based performance for contractors related to health, safety and wellbeing of children and youth in substitute care.

Strategy 3.3. Operational capacity will be evaluated.

***Objective 4***

Adequate health services will be available to meet the physical health and behavioral health needs of children and youth in state conservatorship.

Strategy 4.1. Consult with HHSC to determine DFPS role in and Enterprise approach to address Objective 4.

Strategy 4.2. DFPS will increase its ability to meet the behavioral health service needs of children and youth in conservatorship.

Strategy 4.3. Health resources are easily accessible to meet the needs of children and youth in state conservatorship.

***Objective 5***

Outcomes of safety, permanency, and well being will not be disparate for children and youth regardless of race, ethnicity, or geographical location.

Strategy 5.1. Provide placements that maintain children’s and youth’s cultural, faith, and social connections.

Strategy 5.2. All children and youth will be provided safe and appropriate care.