Texas Department of Family and Protective Services (DFPS) is charged with protecting children, the elderly, and people with disabilities from abuse, neglect, and exploitation, and regulating all child-care operations and child-placing agencies. The agency is also charged with managing community-based programs that prevent child abuse and neglect and juvenile delinquency. The agency's services are provided through its Adult Protective Services (APS), Child Protective Services (CPS), Child Care Licensing (CCL), and Prevention and Early Intervention (PEI) programs. By the end of FY 07, over 9,500 DFPS employees across the state will be working to protect the physical safety and emotional well-being of the most vulnerable citizens of Texas.

### **Agency Reform**

In 2004, several high-profile abuse and neglect cases ended in tragedy, focusing intense scrutiny on the APS and CPS programs. As a result, the Governor issued executive orders calling for the Health and Human Services Commission (HHSC) to review and make recommendations to reform the programs. Senate Bill 6 (SB 6), passed by the 79th Legislature and signed by Governor Perry, was drafted in response to the comprehensive review conducted by HHSC and a report of the House Select Committee on Child Welfare and the resulting recommendations of those reports. It laid the groundwork for comprehensive reform of child and adult protective services in Texas. Through the implementation of SB 6 DFPS has made significant changes to agency policies and significant improvements to the provision of services. Stakeholder input has been sought on all major projects, including the outsourcing of case management and substitute care.

The impact of reform can best be discussed as reforms to services for children and families and reforms to services for vulnerable adults. Due to the large volume of policy and service changes this Administrator's Statement only addresses a few of the most significant.

#### Reforms to Services for Children and Families

Outsourcing - The Legislature set a new course for child welfare services with the goal of reaching better outcomes for children and families. SB 6 directs DFPS to contract with private entities to provide substitute care and case management services statewide by September 1, 2011. DFPS will use an Independent Administrator (IA) to contract for services or will contract directly with private agencies for these services in designated geographic areas. In either case, DFPS will remain the legal managing conservator for children receiving services. Since the passage of SB 6, DFPS has worked closely with HHSC and stakeholders to develop a plan for outsourcing these services. On April 19, 2006, DFPS announced Region 8 would be the first region to be outsourced. The final Request for Proposals for the IA was released on May 1, 2006 with responses due by July 31, 2006.

The timeline for this procurement calls for a tentative award by the end of September and contract execution by January 2007. This timeline will not allow DFPS to know the budget impact of outsourcing in Region 8 until negotiations have been finalized and the contract executed, which is after the submittal of this legislative appropriations request document. DFPS plans to revise its exceptional item list to include a request for additional outsourcing funds following contract negotiations, if necessary.

Mobile Technology - The Mobile Technology project received funding through CPS Reform. Tablet PCs, digital cameras, and wireless connectivity will make CPS investigative and family based safety services caseworkers more efficient, letting them spend more time in the field with clients. Tablet PCs are more than just a new tool—they are a whole new way of doing business that will improve services to clients and help caseworkers to better protect children. This project is being implemented with field-testing currently taking place, followed by the rollout of approximately 3,000 Tablets PCs by the end of FY 06.

Training – SB 6 requires DFPS to add a series of components to its CPS training curriculum and to improve the quality and consistency of training. Caseworkers who are fully trained and equipped to do the job are better prepared to identify child endangerment and make sound casework decisions. As a result of this direction DFPS has extended training for new caseworkers from six to 12 weeks and revised and strengthened the curriculum. The new training model is composed of a five-week core curriculum for all caseworkers and seven weeks of specialized training on the specific stage of service the caseworker will be performing.

Medical Services – In 2004, HHSC and DFPS began examining ways to improve the quality of healthcare services for children in foster care. This effort was further enhanced by the implementation of SB 6. SB 6 gives direction for the coordination of medical services including: creating a comprehensive health care delivery model, establishing an electronic health passport to house a child's medical records, studying the prescriptive use of psychotropic medication, and authorizing persons to consent for medical care of children in foster care. The health care delivery model is scheduled to be operational by the fall of 2007. In addition, a network is in development to provide CPS staff with medical expertise in forensic assessment and general diagnosis and treatment of child abuse and neglect.

**Investigative Response Time** – SB 6 requires that CPS respond to reports of abuse and neglect within 24 hours for the highest priority reports, or Priority I cases, and within 72 hours for all other reports, or Priority II cases. The agency currently responds to Priority I cases within the required 24 hours, but by policy has 10 days in which to respond to Priority II cases. The rules associated with these response times must be developed no later than September 2007, when the full compliment of additional staffing resources is hired.

However, based on the HHSC intake and caseload growth forecast, the increased number of investigators to be hired by the end of FY 07 will not allow us to comply with the response time requirement for Priority II cases. The exceptional item being requested to maintain caseloads will continue the projected FY 07 investigative caseload per worker, but will not add sufficient staff to meet this statutory requirement. We will gladly work with the Legislature to provide estimates of FTEs and cost that would allow us to respond to all Priority II cases within 72 hours.

Substitute Care Caseload Increase – While the substitute care stage of service was strengthened through CPS Reform by the creation of functional units that added more supervisors and more caseworker support positions, other legislative directives increased the duties of substitute care caseworkers. Additionally, as investigations have been strengthened, caseloads have increased for substitute care caseworkers. DFPS worked with HHSC to help address this issue, and funding was transferred so that DFPS could add 100 new substitute care caseworkers in FY 07. Based on the HHSC caseload growth forecast, caseloads will increase above the projected FY 07 level for FY 08-09 unless more caseworkers are added. This need to maintain caseload per worker is addressed in an exceptional item. However, in order to reduce caseloads per worker, additional FTEs and funding would be necessary. If more information is desired by the Legislature concerning a reduction to substitute care caseload per worker, we will provide estimates of FTEs and costs.

Residential Child Care Licensing (RCCL) Standards Revisions – DFPS embarked on the first major overhaul of minimum standards for residential child care in 18 years. 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 RCCL program. The agency worked closely with stakeholders to ensure a well-developed rules proposal. The DFPS Council and HHSC have approved this new set of standards and the anticipated effective date for the new minimum standards is January 1, 2007.

#### **Reforms to Services for Vulnerable Adults**

Client Outcomes - Client outcomes are enhanced as a result of the systemic reform of the APS program. New assessment tools, clinical expertise, and quality assurance provisions help ensure client safety and well-being. A new risk assessment tool has been developed to assess five domains related to client safety and well-being. In addition, five full-time case readers have been employed to evaluate case quality, and experts in exploitation and self-neglect are now assisting caseworkers in each region. Special task units are under development to monitor complex investigations in counties with a population greater than 250,000.

**Mobile Technology** – The Mobile Technology project began with the development of the Mobile Protective Services application and rollout of Tablet PCs to caseworkers in the APS In-Home and APS Facility programs. Through the use of Tablet PCs, digital cameras and wireless connectivity, caseworkers work more efficiently and effectively in the field. Assessment, consultation with supervisors, and documentation is faster and easier, resulting in improved outcomes for clients.

**Transfer of Guardianship** – SB 6 directs the transfer of guardianship services to the Department of Aging and Disability Services (DADS). DFPS will continue to refer minors in the state's conservatorship who are at least 16 years of age and unable to care for themselves and vulnerable adults to DADS for guardianship services. This transfer was complete on September 1, 2005. DFPS continues to work closely with DADS to ensure coordination of policy between the two agencies.

**Training -** SB 6 requires DFPS to implement an enhanced training program that each new employee must complete before initiating an investigation. The goal is to improve caseworkers' knowledge and skills resulting in better case decisions and enhanced outcomes for clients. The basic training program expanded from three weeks to 11 weeks, and incorporates web-based training, classroom training and on-the-job training. Staff receive an additional three weeks of advanced classroom training in the first year that focuses on advanced skills.

Caseload Increases - The volume of APS In-Home intakes rose sharply during APS Reform. Concurrently, APS direct-delivery staff were experiencing significant changes in the way they performed their job. The additional staff funded as part of APS Reform was not sufficient to meet the mandated initial contact within 24-hours policy. DFPS worked with HHSC to address this issue, and funding was transferred so that DFPS could add 204 new caseworkers and other direct-delivery staff in FY 07. Based on the HHSC caseload growth forecast, this new staffing level will sustain compliance with the response time requirement through the FY 08-09 biennium.

### **External and Internal Factors Impacting Current Service Levels**

Several factors impact DFPS' ability to maintain current services. We have summarized these issues below and have referenced the exceptional item request for additional resources above the baseline that address each one.

#### **LAR Policy Directions on Baseline Funding**

Instructions were provided to all agencies by the LBB and the Governor's Office limiting agencies baseline request for general revenue-related funds to 90% of amounts expended in FY 06 plus budgeted in FY 07, excluding funds necessary to maintain caseloads for federal entitlement services. The approach DFPS has taken is to apply the reduction to the prevention programs in order to avoid the impediment of APS and CPS reform efforts. As discussed above, SB 6 outlined a comprehensive reform of DFPS to improve its services. The 79<sup>th</sup> Legislature demonstrated support for the critical nature of DFPS' mission by providing DFPS an unprecedented increase in funding and FTEs to achieve the improvements laid out in SB 6. Any reduction in staffing levels or other resources initially funded or increased by reform appropriations would impede the agency's ability to continue the critical improvements beyond the current biennium. By applying the 10% reduction to prevention services funding, there is a resulting 53.5% reduction in prevention programs. The restoration of this baseline funding is being requested as exceptional item 1, Restore Base Funding, the agency's highest priority additional funding item.

The majority of reform-funded FTEs and initiatives were phased in over the current biennium. In addition, funding was provided for additional APS in-home direct-delivery staff and CPS substitute care caseworkers beginning in FY 07. Because of this phase-in over the biennium, the FY 08-09 baseline request does not provide funding for all of the FTEs and other initiatives provided in the current biennium due to the annualized cost being higher than the FY 06-07 cost. The additional funding needed to restore the FTEs and continue the other improvements for FY 08-09 is being requested as exceptional item 2, Required Biennial Funding for Phased-In APS and CPS Reform Initiatives. It is critically important for this item to be funded to avoid a cut of 1,150 direct-delivery APS and CPS staff.

#### **Changes in Federal Participation**

The Deficit Reduction Act (DRA) enacted in early 2006 contained a provision that resulted in a reduction in the level of participation of federal Title IV-E administrative claiming, creating a state funds need for the agency for the current biennium. Another provision in the DRA stated that beginning in January 2006, Medicaid Targeted Case Management (TCM) for children in foster care was no longer allowable. Since this outcome for TCM was anticipated due to a disallowance in FY 2005 and was funded by the 79<sup>th</sup> Legislature, there were no negative budget implications for the loss of TCM. In addition, we continued to claim TCM for September through December 2005 which provided additional funding above the appropriated level. This additional funding was used to help offset the loss of Title IV-E for FY 06.

Another method of financing issue impacting the agency's ability to claim federal funds is a change in the results of the agency's time study. A time study is used to determine how much of the direct-delivery staff expense is paid by federal funding sources. Recent results indicate a shift from entitlement Title IV-E activity (substitute care stage of services) to non-entitlement TANF and Title IV-B activities (investigations and family based safety services), which also created a state funds need for the current biennium.

These state funds needs have been addressed for the FY 06-07 biennium – first with the TCM claimed for September through December 2005, and then with a funding transfer from HHSC. However, the impact on the FY 08-09 baseline is that there is not enough funding to continue all the CPS direct-delivery staff appropriated for FY 07. This is because the TCM claimed for the first four months of FY 06 cannot be included in the baseline request, and the impact of the loss of federal funds due to the time study shift is greater when annualized for the FY 08-09 biennium. Exceptional item 3, Restore Loss of Funds from Method of Financing Changes, requests the funding needed so that 325 CPS direct-delivery staff will not have to be cut.

#### Increases in Caseload

Due to Reform, there was a 14.8 % increase in intakes (reports of abuse and/or neglect assigned for investigation) from FY 04 to FY 05. Intakes are one of the lead indicators of CPS workload. Recent data suggest a return to pre-Reform growth trends. HHSC is forecasting slightly less than a 9 % increase in intakes for each year of the FY 08-09 biennium. Based on this projected increase, DFPS will need additional direct-delivery staff to maintain projected FY 07 caseloads per worker for CPS substitute care and family based safety services staff. Additional Statewide Intake staff are also needed to keep hold times at the level projected for FY 07. The funding for these staff is requested in exceptional item 4, Additional Direct Delivery Staff to Maintain Caseload per Worker.

As caseloads increase, additional resources for purchased client services and for program support staff are needed. These types of resources were recognized through Reform actions as being critical to address the improvements needed in protective services. Exceptional item 5, Additional Purchased Client Services for Caseload Growth, and exceptional item 6, Additional Program Support Staff for Caseload Growth, request the funding necessary to increase these resources as more caseworkers are added to address caseload growth.

Another program experiencing caseload growth is the Relative and Other Designated Caregiver Placement Program. This new program was authorized in SB 6 and became effective March 1, 2006. The monetary assistance component of this program provides payments to assist relatives and other designated caregivers with the cost of essential child-care items and other expenses when children in DFPS conservatorship are placed in their care. Exceptional item 7, Relative Caregiver Caseload Growth, requests the necessary funding to address projected caseload growth in the monetary assistance component of this program for the FY 08-09 biennium.

### Aging Technology

The DFPS technology infrastructure is crucial to the business operations and therefore the service delivery provided by the agency. Periodic upgrades and replacements are critical to ensure continued effective service delivery. Funding is being requested in exceptional item 8, Maintain Information Technology Capabilities, for operating system software upgrades, Microsoft Office upgrades, new circuits and routers, and printer replacements. These upgrades and replacements are needed to ensure productivity, compatibility, system and data security, and appropriate vendor support.

The following sections describe recommended enhancements to current service levels that require funding above the baseline.

#### **Prevention Services**

Prevention services are a valuable resource for keeping children safe and for addressing the increasing workload for CPS. Exceptional item 9, Increase Prevention Services, requests a 10% expansion to the Services to At-Risk Youth program, four new sites for the Community Youth Development program, approximately 3-4 new specialized evidence-based contracted programs for child abuse prevention and juvenile delinquency, and funding for community-based at-risk family services, a prevention approach called for in SB 6. Providing additional funding for these prevention services allows a greater number of at-risk children, youth and families to be served with the outcome of preventing child abuse or neglect and juvenile delinquency.

#### Family Preservation Flexible Funding Pilot Program

National studies indicate a relationship exists between neglect and poverty, and that addressing a family's poverty in many instances reduces or eliminates the neglect found in the home. We are asking that TANF funding be made available to implement a Family Preservation Flexible Funding pilot program in the seven CPS disproportionality sites, which are located in the Arlington, Beaumont, and Houston regions. This program proposes a model that offsets certain poverty-related factors to help families working with CPS avoid having their children removed from the home, and that maintains the safety and home placement of children reunified with their families. This program would expand on current services within the family based safety services and reunification service delivery models to provide eligible families with a flexible fund account for nonrecurring expenses that have been defined in the service plan for the family. Exceptional item 10, Establish Family Preservation Flexible Funding Program, requests the funds for this pilot.

### Mobile Technology for CCL Staff

The mobile technology initiatives for APS and CPS have provided DFPS the opportunity to assess the capabilities of Tablet PCs and their use in protective services. We believe Tablet PCs would be beneficial for the Child Care Licensing program, in that they would provide an efficient, automated way to comply with the SB 6 requirements to complete a monitoring exit conference, provide the information about the results of the inspection to the child-care provider, and input the information into the automated system. This automated process would improve quality and accuracy of documentation and improve staff productivity. Additionally, Tablet PCs for Day Care investigation staff would reduce time spent on documenting cases and allow more worker time in the field. It would improve quality by allowing timely input from supervisors through the email capability. As more time and expertise becomes available for inspections and investigations, outcomes for children are improved. Funding for the Tablet PCs is requested in exceptional item 11, Mobile Technology for Child Care Licensing Staff.

Finally, an important financial component of this agency is foster care reimbursement rates. Adequate rates are essential to recruiting quality foster care providers and thus increasing capacity of foster home placements. Increased capacity of quality providers helps ensure all children in foster care are provided the best care in the least restrictive setting. Provider rate increases will be submitted as a package in the HHSC Consolidated Budget. HHSC is working to determine their recommended rate increases based on audited cost reports. We support HHSC recommended rates and encourage the Legislature to fund their request.