



*Texas*

DEPARTMENT OF FAMILY  
AND PROTECTIVE SERVICES



PROGRESS REPORT TO THE  
SUNSET ADVISORY COMMISSION:

CHILD PROTECTIVE SERVICES  
TRANSFORMATION

OCTOBER 2015



**BRIDGE**  
TO A BETTER CPS



TEXAS DEPARTMENT OF FAMILY AND PROTECTIVE SERVICES

COMMISSIONER  
John J. Specia, Jr.

October 15, 2015

Mr. Ken Levine, Director  
Sunset Advisory Commission  
1501 North Congress 6th Floor  
Austin, TX 78701

Dear Mr. Levine:

Recommendation 2.2 of the Department of Family and Protective Services (DFPS) Sunset Report requires the agency to report the following Child Protective Services (CPS) performance measures statewide, and for each region, to the Sunset Advisory Commission at six-month intervals through October 2016.

- Turnover rate for investigators, conservatorship caseworkers, and family based safety services caseworkers.
- Average number of days to close an investigation.
- Average number of placements per child.
- Average number of days to achieve permanency.
- Recidivism rate of children into the CPS system in all stages of service.

In addition to these measures, DFPS is pleased to present a full status update on implementation of the change efforts outlined one year ago in the CPS Transformation Plan.

DFPS is evaluating each Transformation effort against intended goals, and that data and information, as well as feedback from staff and clients, is included in this report. Some issues being targeted through CPS Transformation, such as those relating to caseworker retention or keeping children safe following case closure will require longer time frames to study. However, we are closely monitoring every effort to assess the desired impact.

As we embarked on this effort, I asked DFPS and CPS leadership to do three things: work collaboratively as leaders for change, listen to the caseworkers and staff working directly with clients about needed changes, and move swiftly to make the changes even if it means correcting course later. I am pleased to report that staff rose to the challenge.

Transformation has been an extensive effort and I am extremely pleased with the progress staff have made.

- In January 2015, CPS Regional Directors developed a plan to implement every practice improvement identified by field-driven transformation teams that was successfully piloted in fall 2014. While some efforts are still taking root, this month marks the successful conclusion of the statewide rollout plan. Regional champions led the implementation efforts, which included better ways to coordinate internally, collaborate with our partners, and serve clients to more quickly bring cases to positive conclusion.
- As of September 1, 2015, all CPS investigators are using new automated safety and risk assessment tools to make consistent and accurate decisions in a structured way. CPS has plans to develop more of these structured assessments in the year ahead.
- As of October 1, 2015, new caseworkers in every region are immediately assigned a mentor and trained through the new CPS professional development training model, which enables them to spend more time learning and practicing skills in the field.
- Harris County had a specific challenge to move children in CPS care more than two years, many of whom had a goal of adoption, to permanency. As of August 1, 2015, 375 of these children have a permanent home. Further, as a result of their Transformation efforts, Harris County, which had the lowest reunification rate in the state, is now a leader in reuniting children new to CPS care with their families.

These are only a few of the significant changes occurring in CPS. CPS Transformation remains a priority at DFPS and for the Health and Human Services Commission. We continue to believe the changes reported here and those in the CPS Annual Business Plan for fiscal year 2016 will result in a highly effective organization and safety for Texas children who are victims of abuse and neglect.

We look forward to continuing to report on our accomplishments and performance in fiscal year 2016.

Sincerely,

A handwritten signature in blue ink, appearing to read "John J. Specia, Jr.", with a long horizontal flourish extending to the right.

**John J. Specia, Jr.**  
**Commissioner**

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## Summary of Major Accomplishments

### Develop a Professional and Stable Workforce

- Implemented new employee evaluations for caseworkers – March 2015
- Implemented DFPS-specific behavioral assessment hiring tool – March 1, 2015
- Provided Strengths-Based Supervision training to CPS statewide leadership and to supervisors in every region – March 31, 2015
- Implemented new hiring process – April 1, 2015
- Developed recommendations to strengthen and evaluate the Title IV-E Training Program – August 2015
- Designed and implemented new statewide worker training model – January 1 - October 1, 2015

### Ensure Child Safety, Permanency, and Well-being

- Established new comprehensive CPS practice model framework and trained statewide leadership team – January 6, 2015
- Launched new automated Structured Decision Making (SDM) safety assessment statewide – March 29, 2015
- Visitation Matters training delivered in all regions – March 31, 2015
- Realignment of Kinship/Conservatorship staff implemented in all regions – April 2015
- Implemented earlier assignment of Conservatorship worker in all regions – April 2015
- Trained staff in all regions on “triaging” cases using administrative closures and abbreviated investigations to safely close more cases – July 2015
- Harris County moved to permanency 375 children in care more than two years, most of whom had a goal of adoption – July 31, 2015
- Implemented initiative to hold the Family Group Conference within 30 days of removal and make other improvements in all regions – August 2015
- Launched SDM risk assessment statewide – August 23, 2015
- Established a work plan to shift residential contracts monitoring to performance-based monitoring approach, including design of the demonstration program – August 24, 2015
- Accelerated Family Reunification initiative rolled out in all regions – September 2015

### Establish Effective Organization and Operations

- Implemented a plan to use predictive analytics to anticipate high-risk events and allow staff to make real-time interventions beginning with a new case reading process for Family Based Safety Services cases – October 1, 2014
- Completed streamlining of Investigations and Family Based Safety Services policy – December 11, 2014
- Transformation teams identified and tested organizational changes in the field to better align stages of service and expedite services to clients – October 2014 - January 2015

# CPS Transformation Implementation Update

## Priority A: Develop a Professional and Stable Workforce

Improving quality outcomes for children and families depends on CPS' ability to build a high-quality, professional, and stable workforce. CPS caseworkers help Texas' children in complex environments through work that demands specialized intellectual and behavioral skills, appropriate and effective training, and ongoing support. DFPS started a comprehensive initiative that includes redesigning recruiting and hiring practices, overhauling the current learning model for workers, and providing additional support through mentoring, strengthened management, and improved employee performance evaluation and recognition. A better understanding of the characteristics of high-performing workers and the essential competencies needed for job success now informs activities from recruitment and hiring to training and retention.

### *Recruitment and Hiring*

This initiative established a strategic approach to recruiting the highest-quality individuals for the job; sought to increase collaboration with targeted colleges and universities to develop child welfare professionals; improved DFPS hiring practices to identify successful candidates and expedite hiring; and established early outreach to staff within the first two years of service to ensure long-term retention.

In March 2015, DFPS implemented its newly created behavioral assessment tool in its hiring process. The tool identifies the essential characteristics and traits of individuals who will provide high-quality service, demonstrate a higher degree of commitment, and have the resilience to make protective services a career. In fiscal year 2016, CPS will evaluate the behavioral assessment tool to determine if it is measuring the appropriate traits, measuring those traits correctly, and if staff are using it regularly and correctly. A report is anticipated in December 2015.

Initiative	Implementation	
	Status	Comments
<p><b><u>University Collaboration:</u></b></p> <p>Collaborate with colleges and universities to attract and develop qualified students from diverse degree plans, through:</p> <ul style="list-style-type: none"> <li>• Recruitment and outreach</li> <li>• Course curriculum development</li> <li>• Continuous learning</li> </ul>	<p><b>Complete</b></p>	<ul style="list-style-type: none"> <li>• August 2015 – College Collaboration Workgroup submitted final recommendations. Recommendations include developing a system to track employee performance and client outcomes of those staff who participated in the Title IV-E Training Program and creating a Title IV-E coordination role within the Workforce Management and Support Division. These recommendations will be implemented by the end of FY 2016.</li> </ul>

<p>Specific focus on enhancing current collaborations with Title IV-E partner colleges and universities.</p>		
<p><b><u>Recruitment:</u></b></p> <p>Expand recruiting and marketing efforts and opportunities to educate job seekers about protective services careers at DFPS.</p>	<p><b>Complete</b></p>	<ul style="list-style-type: none"> <li>• August 2015 – Finalized market analysis to assist in defining and identifying high-priority populations for recruitment. This analysis will guide the development of more targeted recruitment activities in FY 2016.</li> </ul>
<p><b><u>Hiring:</u></b></p> <p>Strengthen the quality of job candidates by evaluating and reconfiguring the screening and hiring process.</p> <ul style="list-style-type: none"> <li>• Outsource more administrative hiring functions to expedite the hiring process and allow trained hiring specialists to dedicate more time to recruitment and retention efforts.</li> <li>• Expedite the screening and hiring process by revising or eliminating unnecessary steps, monitoring performance targets and timelines, and making process revisions.</li> </ul>	<p><b>Complete</b></p>	<ul style="list-style-type: none"> <li>• December 1, 2014 – Completed human resource contract changes. The new process includes an initial contact with the applicant, periodic communication throughout the hiring process, and a statement of interest that contractors screen and DFPS hiring specialists analyze for quality and match.</li> <li>• March 1, 2015 – Implemented the DFPS-specific Human Services Index, a screening tool that identifies essential characteristics and traits of individuals who can be successful workers.</li> <li>• August 2015 – Created a new job-preview video for CPS’ various stages of service. Applicants are required to watch the video as part of the screening process.</li> </ul>
<p><b><u>Retention:</u></b></p> <p>Improve staff development and retention by periodically contacting new workers in the six- to 24-month tenure range for support. Collect feedback and apply to continuous improvement of the hiring, training, and retention program.</p> <p>In a coordinated effort, DFPS hiring specialists and program will develop a standardized statewide process</p>	<p><b>Ongoing</b></p>	<p>October 15, 2014 – CPS regional management staff completed contacts to employees in the 6- to 24-month tenure range. The experience was overwhelmingly positive for management staff and workers. CPS regional leadership continued the practice at the six- 12- 18-, and 24-month for all new workers as part of transformation. Of the approximately 1,600 persons identified to get a call over the course of the project, 97 percent are still employed with CPS.</p>

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<p>that will effectively identify, track, and respond to issues to improve staff development and retention.</p>		<ul style="list-style-type: none"><li>• June 2015 – The newly created Workforce Management and Support Division revised the Rookie-Year survey. The division will send the survey to employees at six months. The data from this and the modified Exit Survey will be part of the ongoing analysis of workforce trends.</li></ul>
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## Evaluation of Recruitment and Hiring Initiatives

As part of CPS Transformation, DFPS began a comprehensive effort to improve recruitment and hiring practices. The strategic goals of this effort are to:

- recruit the highest-quality individuals for the job;
- increase collaboration with colleges and universities to develop child welfare professionals;
- improve DFPS hiring practices to identify successful candidates and expedite hiring; and
- develop a professional and stable workforce.

An evaluation group defined measures to assess quarterly progress toward each goal. Highlights of this analysis follow.

### Recruitment

State office and regional staff significantly expanded recruitment efforts over the past year. Increased attendance at recruitment events include university job fairs and career days, classroom presentations in many disciplines (i.e., nursing, social work, business), events at junior and high schools and community colleges, and community-based events. There was a 207.4 percent increase in recruitment activities during the first three quarters of fiscal year 2015 over fiscal year 2014.

	Q1 2014	Q1 2015	Q2 2014	Q2 2015	Q3 2014	Q3 2015
Career Fairs	11	48	17	18	21	61
Veterans Career Fairs	4	9	0	5	1	5
<b>Total</b>	<b>15</b>	<b>57</b>	<b>17</b>	<b>23</b>	<b>22</b>	<b>86</b>

### Hiring

A restructuring of the responsibilities of DFPS and the hiring vendor, STARK, took effect on December 1, 2014. The changes shifted more administrative tasks to the vendor, freeing DFPS staff to focus on recruitment and provide more personal attention to applicants during the hiring process. The framework of the new hiring process and responsibilities of each party are shown below.

Stage of the Hiring Process	Hiring Activities
<b>Application Submitted to Referral to Hiring Specialist</b>	1. Application Submitted 2. Initial Screening by STARK and Invitation to Applicant for Statement of Interest (SOI) 3. Applicant Completes Self-Assessment and SOI 4. Review of Assessment and SOI by STARK and Email to Hiring Specialist
<b>Hiring Specialist Review to Stark Assessment</b>	5. Hiring Specialist Reviews SOI and Orders Assessment 6. STARK Invites Applicant to Complete Assessment
<b>Assessment Returned to Submission of Applicant Packet</b>	7. Applicant Completes Pre-Interview Assessment 8. STARK Reviews Assessment and sends Applicant Packet to Hiring Specialist
<b>Selection of Candidate to Date of Interview</b>	9. Hiring Specialist Reviews Applicant Packet 10. Supervisor Responds to Hiring Specialist with Availability 11. Interviews Occur
<b>Interview Completion to Hiring Decision</b>	12. Preferred Candidate Selected
<b>Reference Check to Onboarding</b>	13. Hiring Specialist Performs Reference Checks; Refers Candidate for Hire 14. Due Diligence (Background Check and Drug Testing) 15. Offer to Candidate 16. Offer accepted by Candidate 17. Date of Onboarding

DFPS identified reducing the time to hire as a strategy to improve the application process and increase the quality of job candidates. Historically, high-quality applicants receive multiple job offers. By decreasing the time to hire and with increased engagement, DFPS is likely to retain the applicants through the point of hire.

Historical time to hire cannot be directly compared with the current time to hire because in addition to the recalibration of DFPS and contractor responsibilities as shown above, DFPS made other changes to the hiring process. These include involvement of direct delivery supervisors in interviews, among other changes. While the availability of field staff can add time to the process, this change was important to ensure a good match between candidate and unit.

To facilitate future analysis and process improvement, DFPS segmented the hiring process into stages and is capturing data on the length of time of each stage. The following figure reflects the average days for each stage, as of third quarter fiscal year 2015.

Stage of the Hiring Process	Average Business Days to Complete
Application Submitted - Referral to Hiring Specialist	9
Hiring Specialist Review - Stark Assessment Invitation	3
Assessment Returned - Submission of SMART Report	7
Selection of candidates - Holding Interviews	7
Hiring Decision	2
Reference Check - Onboarding	18

In addition to decreasing the time to complete certain hiring tasks, DFPS hiring specialists have increased applicant engagement during the hiring process. DFPS hiring specialists’ contacts with successful candidates increased from 48 percent to 70 percent between the second and third quarters of fiscal year 15.

DFPS monitors the quantity and quality of job applicants moving through the screening and hiring processes. The total number of applications processed under the new screening procedures from December to May 2015 is shown below. STARK identified 56.8 percent of applications as eligible for DFPS review (meaning they meet minimum requirements) and 19.8 percent of total applicants were selected for DFPS review. Note that data include candidates screened for all DFPS programs, not just CPS.

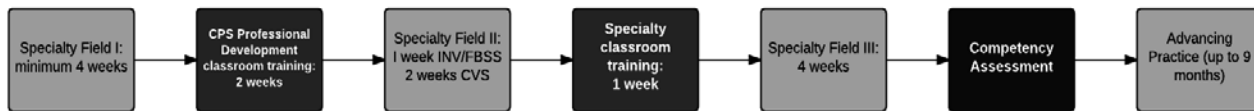
Screened	Eligible	Selected for DFPS Review	Hired
58,661	33,338	11,589	786
100%	56.8%	19.8%	2.4%

Regarding candidate quality, DFPS found that the overall scoring process was consistently weighting candidates higher than their individual scores on the screening tools (i.e., the “SMART Report,” which includes the behavioral assessment) would merit. DFPS recalibrated the scores considered for each rating to be more selective (see the figure below) as a means of elevating the quality of candidates selected for DFPS review. The new distribution restricts the number of applicants rated as “substantially strong” to between 23 percent and 33 percent for any competency measure. DFPS continues to refine the screening process to ensure that screening tools are producing candidates who meet DFPS program needs.

SMART Report Rating Summary		
Rating	Prior to 03/31	After 03/31
Substantial Strength/ Low Risk	51-100	90-100
Adequate Strength/ Moderate Risk	21-50	80-89
Not a Strength/High Risk	1-20	0-79

### Continuous Learning

As part of transformation, CPS redesigned caseworker training. The new model begins on the new caseworker’s (called a protégé) first day and extends over the first nine months of his or her career. The model includes using mentors, revised classroom training (now known as CPS Professional Development) and increased time spent on field-based specialty training (for the Investigations, Family Based Safety Services, and Conservatorship stages of service). This figure shows the integration of classroom and field experience over a protégé’s first 12 to 13 weeks of training.



While the current model was largely classroom-based, the new model provides more field-based training. In addition, the training model has shifted from task-focused to core practice model competencies. New caseworkers receive a customized plan for their training and development over their first nine months on the job. The individualized plan allows for additional time to help the caseworker develop competencies if needed or less time in situations where they may develop more quickly (or if they have prior child welfare experience). Supervisors assess whether their staff are “case assignable” based on demonstration of competencies, instead of the prior approach to testing workers at the end of basic skills development using two simulated cases.

CPS has implemented the new training model statewide. Before this rollout, CPS tested, evaluated, and modified the approach to design the most effective statewide program. This included the following components.

- Mentoring – In fall 2014, CPS piloted four mentoring programs in Regions 1, 3, 4/5, and 8. These pilots tested different features of mentoring programs. CPS combined the best features into the statewide program.
- Specialty Training – From November 3, 2014, to December 15, 2014, CPS piloted the field-based specialty training component of the new model for 18 investigators in Region 7. The pilot tested use of individualized training plans, coordination and training delivered by field staff (as opposed to professional trainers), and case assignability based on achieved competencies.
- Combined Model – On January 1, 2015, Region 8 launched the new combined training model.

Initiative	Implementation	
	Status	Comments
Overhaul the CPS core and specialty training program and curriculum. Change delivery of specialty training to be primarily field-based, delivered by staff with field experience.	<b>Complete with evaluation in progress</b>	<ul style="list-style-type: none"> <li>• November 3, 2014 - December 15, 2014 – Conducted pilot for investigator specialty training in Region 7.</li> </ul>

<p>Implement the revised training model and new mentoring program as one program.</p> <p>Evaluate the program at key stages of implementation to address barriers and make practice improvements for successful implementation.</p>		<ul style="list-style-type: none"> <li>• January 1, 2015 – Launched new CPS professional development program in Region 8.</li> <li>• May - October 2015 – Completed statewide rollout.</li> <li>• December 31, 2015 – Conclude one-year evaluation.</li> </ul>
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### **Internal Evaluation of Training Model**

Throughout implementation of the new training model, the CPS Analytics and Evaluation Team conducted an internal evaluation of CPS Professional Development, including reviewing the rollout process for fidelity to the model and collecting staff feedback through surveys and focus groups. The findings are below. DFPS has also contracted with the University of Texas at Austin Child and Family Research Partnership to evaluate the model, including its outcomes. This evaluation will occur in fiscal year 2016, with feedback provided on an ongoing basis. The final report is due in December 2016.

The CPS Analytics and Evaluation Team analyzed information from the first group in each region where the model was implemented.

### **Region 8 Roll-Out Summary**

- Fifteen protégés in Region 8 completed CPS Professional Development over the approximate time period of January – March 2015.
- All 15 protégés completed specialty and were deemed as case assignable based on the Individual Training Plan and Ongoing Competency Evaluation.
- CPS administered a survey to protégés, mentors and supervisors. Staff members rated most aspects of the CPS Professional Development and mentor process highly. Mentors and supervisors reported that protégés were better prepared and had more advanced knowledge under the new model compared to trainees in the old model.

### **Improvement Actions Taken from Region 8 CPS Professional Development Roll-out**

Recommendations from the analysis of the rollout in Region 8 informed model design and rollout in subsequent regions. Changes that were incorporated into the model for implementation in the next group of regions (Regions 4/5, 7, and 11) include:

- a contingency plan was put in place in the event no mentors are available;
- weekly calls to guide supervisors and mentors about when to have the protégés complete tasks on their own to relieve the mentor's workload;
- pre roll-out orientation with supervisors, PDs and PAs increased from two meetings to 10 meetings;.
- DFPS is reviewing current trainings and curricula in other states to identify the best solution to provide coaching, development and assessment training for mentors and supervisors; and
- ensure timely completion of the redesigned Center for Learning and Organizational Excellence (CLOE) Learning Management System module to improve tracking, assessment and analysis of the CPS Professional Development process.

### **Implementation in Regions 4/5, 7, and 11**

The first group trained in Regions 4-5, 7 and 11 completed the 12 to 13 week program in August 2015. Of these protégés, 88 percent (40 persons) completed the training. The breakout by region is shown:

- Region 4-5: Six protégés complete training (4 resigned);
- Region 7: 20 protégés complete training (3 resigned); and
- Region 11: 14 protégés complete training (1 resigned).

The University of Texas at Austin Child and Family Research Partnership will administer surveys and conduct focus groups to collect additional data in Regions 4/5, 7, and 11.

### **Additional Feedback Collected**

A series of focus groups on CPS Transformation were conducted in four regions in June 2015. These focus groups included supervisors, caseworkers, and, in some cases, program directors. Focus group feedback of the new training model is summarized below.

- Supervisors appreciate the experience the new workers are getting quickly. Four weeks in, the new workers have experienced overtime, two removals, positive client contacts and difficult parents (serves as a realistic job preview).
- Great movement in the right direction to reduce classroom time and have faster feedback for the new employee on what life in the field is like.
- Like the less structured approach with emphasis on shadowing caseworkers.
- A lot of responsibility falls on the supervisor.
- The model works best when the mentor and protégé are in the same unit. Protégés are much more prepared to do the job.
- New protégés bond better with their units.
- Like the adjustable timeline of training (so workers can get extra help if needed).
- Weekly conferences are beneficial to work through problems immediately (not at end of training as in the previous model).
- It is beneficial that workers are learning from real cases.
- Workers get more out of classroom training due to their field experience.
- Shorter classroom time and immediate time in the field builds on new worker's enthusiasm.
- Mentor supply is an issue in some areas.

## *Mentoring*

CPS implemented a statewide mentoring program to ensure protégés receive technical and personal support throughout their training. CPS tested different features of mentoring programs in four pilots (Regions 1, 3, 4/5, and 8) from September 1, 2014, to November 30, 2014. CPS finalized the design of the statewide mentoring program and combined mentoring with the revised training components. The new continuous learning model began January 1, 2015 in Region 8 and has now been rolled out in all CPS regions.

Initiative	Implementation	
	Status	Comments
Implement a statewide mentoring program. Key features of the program include: <ul style="list-style-type: none"> <li>• A one-to-one pairing of mentor and protégé, beginning on the protégé's first day.</li> <li>• A shared caseload, where the protégé works real cases and gradually assumes more responsibility.</li> <li>• A realistic job preview, where the protégé adopts the same on-call schedule as the mentor.</li> <li>• Mentors are compensated with a monthly stipend (began September 1, 2015).</li> </ul>	<b>Complete with Evaluation In Progress</b>	<ul style="list-style-type: none"> <li>• August 27, 2014 – November 30, 2014 Conducted and evaluated pilot mentoring programs in Regions 1, 3, 4/5, and 8.</li> <li>• January 1, 2015 – Implemented new continuous learning model (combined mentoring, CPS professional development and specialty training) in Region 8.</li> <li>• May - October 2015 – Completed statewide rollout.</li> <li>• December 31, 2015 – Conclude one-year evaluation.</li> </ul>



***Management Training***

Transformation’s success depends heavily on supervisors’ ability to become proficient in their new responsibilities, including an increased level of decision-making, moving towards a field-based learning model for staff training, and new safety and risk assessment tools. Effective supervisors are also critical to improving staff retention. DFPS selected Strengths-Based Supervision (SBS) as the first initiative to strengthen the skills of supervisors. Through a combination of classroom sessions and group coaching led by management (program directors and program administrators), the curriculum provides practical and emotional support and highlights the importance of clinical supervision essential to child welfare work.

Regional focus group feedback on the group coaching sessions has been positive, especially from new supervisors. An internal process evaluation completed by CPS found 68 percent of supervisors active in June 2015 have completed the SBS training. This suggests that given the changing composition of the CPS workforce, there may be a need to continue to offer trainings to ensure all supervisors are trained. CLOE continues to offer the Strengths-based Supervision course in all regions to address this need.

Initiative	Implementation	
	Status	Comments
Implement Strengths-Based Supervision training model statewide to improve management and supervisor capabilities in three essential areas: critical thinking and analysis; guidance and support; and administrative responsibilities.	<b>Complete</b>	<ul style="list-style-type: none"> <li>• September 24, 2014 – Launched SBS training for more than 100 frontline supervisors in Harris County (Region 6).</li> <li>• November 14, 2014 – Completed delivery of SBS training to all CPS management staff statewide.</li> <li>• December 9-10, 2014 – Trained selected CPS program directors to deliver SBS training statewide.</li> <li>• December 11, 2014 – Launched SBS training for management and supervisors in Region 8 in anticipation of new continuous learning model rolled out to new staff in Region 8 on January 5, 2015.</li> <li>• March 31, 2015 – Completed rollout of SBS training in all regions.</li> </ul>

### *Performance Evaluation and Recognition*

Improving performance evaluation, increasing feedback, and expanding recognition efforts are part of the broader objectives of elevating the professionalism of CPS' workforce and improving the agency's culture, work environment, and staff retention.

In March 2015, CPS implemented a statewide employee recognition and appreciation program based on a successful pilot in Region 2. The "e-Rewards program" allows supervisors to recognize employees for their contributions to CPS and award privileges such as administrative leave or wearing blue jeans to work. CPS awarded a total of 3,197 e-Rewards between March and July 2015.

DFPS also implemented the Commissioner's employee recognition program, DFPS Stars, statewide for all staff. Employees are nominated for statewide recognition by the Commissioner for outstanding performance.

Following a recommendation of the operational review, CPS tested "360-degree" performance feedback as one method to continue the development of management staff, including regional directors, program administrators, regional operations support administrators (ROSAs), and service program administrators (SPAs). CPS worked with Health and Human Services Commission staff to develop a tool for CPS. In February 2015, 61 managers were identified for participation. Of the 128 persons responding to a survey assessing the usefulness of the process, only 35 percent found the resulting Individual Development Plan and feedback useful. Given the resources required to complete and compile the results for staff evaluated, CPS has decided not to continue the effort at this time.

DFPS is developing new performance evaluations for all staff. CPS tested new caseworker evaluations in Regions 2 and 6 (excluding Harris County) in all stages of service. The revised evaluation measures tasks for quality as well as completion and incorporates practice model components and structured decision-making requirements. Supervisors unanimously agreed that the redesigned evaluation was more useful toward developing and training caseworkers on critical thinking, outcomes and quality. CPS is developing new evaluations for direct delivery staff, subject matter experts, administrative staff, supervisors and managers. In addition, Regional leadership made a sustained effort to bring outstanding performance evaluations current. Between September 2014 and September 2015, CPS increased the completion rate of employee evaluations from 54 percent to 78.3 percent.

Initiative	Implementation	
	Status	Comments
Evaluate successful regional recognition campaigns for expansion statewide.	<b>In Progress</b>	<ul style="list-style-type: none"> <li>November 5, 2014 – Implemented "DFPS Stars" employee recognition program.</li> <li>March 2015 – CPS Regions implemented e-Rewards recognition programs.</li> </ul>

<p>Implement 360-degree performance feedback for CPS regional management.</p> <p>Revise performance evaluation tools for all caseworkers that incorporate qualitative and quantitative indicators and correspond to new job descriptions, competencies established in training, and practice model guidelines.</p>		<ul style="list-style-type: none"> <li>• February 1, 2015 – Conducted 360-degree performance feedback with regional directors, program administrators, and ROSAs/SPAs.</li> <li>• March 1, 2015 – Launched new performance evaluations for investigation, FBSS, and CVS caseworkers to align with new training model. Staged rollout for all other staff continues throughout 2015.</li> </ul>
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## Priority B: Ensure Child Safety, Permanency, and Well-being

The CPS mission and mandate is to protect children from abuse and neglect; provide services so children can live with their families when possible or in another permanent setting; and ensure the health and well-being of children in the state's care. Ensuring positive outcomes for children and families requires giving caseworkers the right tools and consistent training to aid in judgment and decision-making from beginning to end of a case. In addition, a signature goal of transformation is to improve operational efficiency to give staff more time to spend with the children and families they serve. Meeting this goal is essential to retaining staff and providing quality services.

### *Structured Decision Making Safety and Risk Assessment*

CPS implemented safety and risk assessment instruments that guide and support caseworker decision-making in a manner consistent with the agency's mission of protecting children. While many states have safety and risk assessment tools, Texas has become a national leader by adopting a 24-hour safety assessment tool and integrating the tool with its Practice Model.

CPS worked with the National Council on Crime and Delinquency (NCCD) to adapt their Structured Decision Making (SDM) safety assessment tool for use in Texas and develop a training plan and curriculum. Early adopters began using the new tool on January 26, 2015, and the tool rolled out to all investigators on March 29, 2015.

CPS also developed a risk-assessment tool to help caseworkers determine the likelihood of future abuse and neglect. This is an actuarial tool that categorizes situations as very high, high, moderate, or low risk for future maltreatment. Early adopters began using the tool in May 2015 and CPS implemented it statewide August 23, 2015.

Initiative	Implementation	
	Status	Comments
<p><b><u>Safety Assessment</u></b></p> <p>Implement a 24-hour safety assessment to be used during initial contact with the child or children. Aspects of the safety assessment tool can be completed on site, with additional factors being completed within 24 hours.</p>	<p><b>Complete</b></p>	<ul style="list-style-type: none"> <li>• December 1, 2014 – Finalized 24-hour safety assessment tool. Development included rigorous “inter-rater reliability” testing of tools to determine consistency of rating of test cases by users.</li> <li>• January 26, 2015 – Began rollout of SDM safety assessment training to early adopter units.</li> <li>• March 29, 2015 – Deployed statewide.</li> </ul>

<p><b><u>Risk Assessment</u></b></p> <p>Implement a new risk assessment for use within 30 days from the start of the case. This new tool will be more objective and based on actuarial principles that have been scientifically accepted and adapted for Texas.</p>	<p><b>Complete with assessment in progress</b></p>	<ul style="list-style-type: none"> <li>• December 18, 2014 – CPS completed the first draft of the risk assessment tool.</li> <li>• February 6 - 27, 2015 – CPS and NCCD adjusted the SDM tool to incorporate Texas’ unique case information.</li> <li>• May 7, 2015 – Deployed SDM risk assessment to early adopter units</li> <li>• August 23, 2015 – Deployed statewide.</li> <li>• June 2016 – Data analysis showing actual performance of the new risk assessment tool nine months from implementation.</li> </ul>
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### *Practice Model*

CPS developed a practice model that defines the organization, its values, and approach to serving children and families. As of December 2014, the practice model concepts were integrated into all transformation-related initiatives, such as Structured Decision Making, performance evaluation tools, strengths-based supervision, mentoring, and the core competencies created for the training model. The alignment between the practice model and other transformation initiatives is the most critical piece of implementation and what brings the practice model to life in the daily work of child protection.

CPS is using a multi-pronged approach to build staff core practice competencies. First, the CPS Division of Best Practice is developing tools and providing training for all workers and supervisors. Practice guides and critical-thinking tools address core practice model competencies: engaging, assessing, teaming, and planning, intervening, and evaluating. Training seminars on these guides and tools began in January 2015 and continues through December 2015 including webinars and regional face to face training. Work has begun on reference guides in areas such as working with cases of domestic violence, substance abuse, and mental health issues.

CPS is also implementing an innovative model known as Signs of Safety, a relationship-grounded, safety-organized child protection framework designed to help families build real and lasting safety for children. In March 2015, CPS began rollout to early adopter units in Region 8 (a total of seven Family Based Safety Services units). In July 2015, Signs of Safety was implemented in four FBSS units in Region 11. In October, Regions 8 and 11 added three early adopter units in the Investigations stage.

Initiative	Implementation	
	Status	Comments
Implement a practice model, including a consistent framework for the standards, approaches, and methods that define the essential elements of how CPS interacts with children and families, as well as expectations of the child/family's experience with CPS.	<b>In Progress</b>	<ul style="list-style-type: none"> <li>October 14, 2014 – Finalized the practice model framework document and communication strategy. Published framework document November 15, 2014.</li> <li>January 6, 2015 – Trained regional directors, program administrators, and state office leadership on the practice model at the quarterly leadership meeting.</li> <li>March 2015 – Signs of Safety implemented in the first early adopter units (seven Family Based Safety Services units in Region 8). Since March, Signs of Safety has been implemented in additional FBSS units in Region 11 and in Investigations</li> </ul>

		<p>units in both Regions 8 and 11, for a total of 16 early adopter units.</p> <ul style="list-style-type: none"><li>• Throughout 2015 – Complete practice guides and staff desk references regarding substance abuse, domestic violence and mental health.</li><li>• December 31, 2015 – Provide webinars and face-to-face training in each region on the practice model application of the core competencies in all stages of service.</li></ul>
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***Investigation and Family Based Safety Services (FBSS)***

The CPS operational review identified process, practice, organizational, and technology issues that were obstacles for investigations and Family Based Safety Services caseworkers. These issues ranged from minor inconveniences to major time-consuming activities. Subsequent to the operational review, two regional leaders organized a team with field staff from every region and state office subject experts to generate solutions.

The team prioritized ideas into three groups: those that could be implemented immediately, those that needed testing and evaluation before implementation, and those that required technology changes and could be considered for future IMPACT modernization efforts.

From fall 2014 to early spring 2015, the team oversaw the development and implementation of its initiatives in early adopter regions. The team provided technical assistance and training to additional regions as these initiatives rolled out statewide. In fall 2015, the team shifted focus to the FBSS stage of service and will continue to develop new initiatives for statewide rollout.

Initiative	Implementation	
	Status	Comments
<p>Decrease time spent on activities that can be eliminated or handled by other staff and adopt practice improvements increasing the amount of time spent with families, and getting families needed and tailored services faster while maintaining a priority focus on child safety.</p> <p>The team generated 320 process and practice changes and prioritized those for immediate implementation or pilot testing in the regions. The four initiatives included:</p> <ul style="list-style-type: none"> <li>• Triageing (use of administrative closures and abbreviated investigations)</li> <li>• Investigations/FBSS case transfer</li> <li>• Timeliness – require 90 percent of investigations to be submitted for supervisor approval within 45 days</li> <li>• Caseworker support centers</li> </ul>	<p><b>In Progress</b></p>	<ul style="list-style-type: none"> <li>• October 2014 – Implemented immediate solutions. Began testing select process and practice changes in specific areas. Between November 2014 and January 2015, pilots expanded to additional regions (See chart next page).</li> <li>• December 2014 - January 2015 – CPS evaluated the pilots using focus groups, surveys, and data.</li> <li>• January 8, 2015 – Developed statewide rollout schedule to implement successful pilots as practice.</li> <li>• March - July 2015 – Regional staff trained on how to triage cases.</li> <li>• May – November 2015 – Regions implementing INV/FBSS case transfer initiative.</li> <li>• January 1, 2016 – New timeliness standard implemented statewide.</li> </ul>



**Evaluation of Investigations / Family Based Safety Services Initiatives**

Child Protective Services created two teams of field and state office staff to identify program and process improvements in response to The Stephen Group’s Operational Review finding that staff spend limited time working directly with children and families. One team focused on Investigations and Family Based Safety Services. The team generated hundreds of process and practice changes and ultimately prioritized four initiatives. The table below defines each initiative and summarizes anticipated outcomes.

<b>Initiative</b>	<b>Increase Time with Families</b>	<b>Increase Safety</b>	<b>Expedite Service Provision</b>	<b>Increase Staff Collaboration</b>
<b>Timeliness</b> Implements statewide standard that 90 percent of investigations must be submitted to a supervisor within 45 days of assignment.	✓	✓		
<b>Triaging</b> Improves “triaging” and assessment of cases before assignment to an investigator to allow CPS to focus on high risk cases. Helps identify situations that fit policy standards for abbreviated investigations and administrative closures, and tries to bring regional practice in line with the policy.	✓	✓		
<b>INV / FBSS case transfer</b> Pairs Investigations and FBSS units to accelerate service provision. Requires investigations to involve FBSS within 10 days of the start of the investigation if the caseworker determines the family needs services.	✓		✓	✓
<b>Caseworker Support Center</b> Create a one-stop/one-call pool of administrative resources to support caseworkers.	✓			✓

**Timeliness**

In practice, many obstacles prevent timely case closure. This initiative refers to the speed at which investigations are closed and seeks to align actual performance with targets established in policy (workers submit investigations to their supervisors within 45 days, to enable case closure by 60 days). An investigation should be thorough enough to consider input from the alleged victim, other family members, teachers, medical professionals, and the alleged perpetrator (as appropriate) but completed quickly enough so the caseworker can reach a decision in a case and take action to ensure child safety.

In April 2015, CPS communicated the new timeliness standard to the regions and gave them through January 2016 to comply. Between May and August 2015, the statewide rate of investigations submitted for approval within 45 days has ranged from 47.6 percent to 53.9 percent. To provide additional technical assistance to the regions, CPS collected best practices from strong-performing regional staff and shared them statewide.

## Triaging

Since 2011, policy allows for both an abbreviated investigation and an administrative closure of an investigation and defines the specific circumstances for their use. In an abbreviated investigation, the worker gathers enough information to rule out the allegations or determines a parent has taken actions to protect the alleged victims from any identified danger. Administrative closures occur when the worker determines CPS does not have jurisdiction to investigate the allegations or if the allegations do not meet the definition of abuse and neglect. The challenge is overcoming fear and a misperception that it is better to delay closing the case rather than to follow the policy and focus resources on families that demonstrate need. The INV/FBSS Team has provided training in each region and this initiative has been implemented fully. The regions continue to use data on their rates of abbreviated investigations and administrative closures to identify if additional coaching is needed.

Data from Region 10 showed that during a three-month pilot period, workers were able to identify cases that did not need full investigations and this initiative provided them with tools to manage the workload. As a result of the increase in abbreviated investigations, the region's average length of an investigation decreased by 7.8 days. The region also did not experience an increase in recidivism, suggesting that workers and supervisors made sound decisions in closing cases.

Staff participating in regional focus groups identified the following positive outcomes of the initiative.

- The initiative is helpful for managing caseload / reducing caseloads.
- Staff feel it is positive for CPS to not get involved with families when they should not be.

Worker enthusiasm for this initiative is summed up in a comment from one worker: "It reduces our caseload and we can focus on real cases. I like not dragging the family through a full investigation if I know it will be an administrative closure. This is long overdue!"

Still, work remains in implementing this change. Some workers and management are resistant to using these strategies out of fear that they will make a mistake; these attitudes take time to overcome.

## INV/FBSS Case Transfer

This initiative pairs Investigations and FBSS units to improve communication and collaboration between CPS staff and accelerate the involvement of the FBSS caseworker in the case to start services sooner for the family. The progression of a case from Investigations to FBSS involves various handoff issues between staff that can delay services to families. National research has shown that the sooner services are started, the more receptive the family is to the services and the more likely they are to complete the desired services.

CPS piloted this initiative in Regions 3 and 10. Additional regions began rolling this out in mid-2015. Full implementation will be complete in November 2015.

Data from the pilot regions indicates that services started an average of 20.3 days sooner (64 percent improvement), from the point at which the case was opened to FBSS.

Additional feedback from regional focus groups illustrates staff support for the initiative. Staff identified the following benefits of the approach:

- Investigations and FBSS units are working well together, including conducting visits together and discussing cases. Staff like the sister unit concept. Transfers of cases are going more smoothly. An Investigator noted that whereas before there would be disagreements about whether a case should move to FBSS, joint early involvement supports the transition: “Now we are more cohesive, working better together.”
- For families, the benefit is FBSS services initiated closer to the point of crisis and quicker access to services. One FBSS worker stated, “We are getting cases faster, and can start services sooner for families.” A supervisor noted the difference in the experience families have with CPS, stating, “Another family had been through the process before and commented on the difference.”

The effort has challenges, including some information from the investigation not yet available to FBSS and additional time requirements for the FBSS caseworker. But the overall assessment is this change has been positive for staff and families.

### **Casework Support Center**

DFPS designed the casework support center to be a convenient way for mobile caseworkers to accomplish scanning of documents and common administrative support requests, and to provide a physical workspace for collaboration with their peers. Eight units from Region 7 served as the pilot site and tested the concept from December 2014 to May 2015.

Focus group feedback identified concerns with the original model related to a lack of cross training of administrative staff across stages of service, an imbalance between the ratio of support staff to the frontline staff they supported, and technology limitations with the scan-as-you go technology. As a result of this feedback, CPS modified the concept’s design in a number of ways to prepare for a successful rollout in other areas. The centers will focus on the most successful aspect of the model (pooling of administrative resources) and over time, they may take on other support functions. The 84th Legislature provided \$1.8 million (All Funds) for expansion of this model and CPS is planning to open up to seven new centers in fiscal 2016.

### *Reunification and Permanency*

CPS believes that all children deserve a lifelong connection to a family and it is CPS' responsibility to find safe, permanent, family relationships for each child and youth in foster care. Because of this, DFPS is dedicated to creating a practice that supports developing family connections for children and youth, and quickly exiting children and youth to permanency. Towards this goal, two regional leaders organized a cross-functional team with field staff from every region and state office subject matter experts to identify CPS system improvements to move children more quickly to permanency. The group targeted agency practices that inadvertently delay reunification and other exits to positive permanency. The team also focused on field-driven ideas to reduce time spent on activities that could be eliminated or streamlined to allow workers more time for critical casework. Together, these efforts seek to improve time to permanency for children and increase caseworker morale and retention.

The team prioritized ideas into three groups: those that could be implemented immediately, those that needed to be tested and evaluated before implementation, and those that required technology changes and could be considered for future IMPACT modernization efforts.

From fall 2014 to early spring 2015, the team oversaw the development and implementation of its initiatives in early adopter regions. The team provided technical assistance and training to additional regions as these initiatives began statewide.

Initiative	Implementation	
	Status	Comments
<p>Increase the average number of children who can be reunified with their families in less than a year, and reduce the average time to permanency by involving field staff in identifying immediate solutions.</p> <p>The team generated 95 process and practice changes and prioritized 17 ideas for immediate solutions that can be implemented statewide and practice changes for testing and replication. Ideas prioritized for implementation include:</p> <ul style="list-style-type: none"> <li>• Visitation Matters training</li> <li>• Realignment of Kinship/CVS Staff</li> <li>• Accelerated family reunification</li> <li>• CVS Worker Assignment</li> <li>• Family Group Conference (FGC) Improvements</li> <li>• Single Child Plan</li> </ul>	<b>In Progress</b>	<ul style="list-style-type: none"> <li>• October 2014 – Began testing select process and practice changes in specific areas. Between November 2014 and January 2015, pilots expanded to more regions.</li> <li>• December 2014 - January 2015 – CPS evaluated the pilots using focus groups, surveys, and data.</li> <li>• January 8, 2015 – Developed statewide rollout schedule to implement successful pilots as practice.</li> <li>• March 31, 2015 – Visitation Matters training rolled out in all regions.</li> <li>• January - April 2015 – Realignment of Kinship/CVS Staff rolled out in the regions.</li> </ul>

		<ul style="list-style-type: none"><li>• January - April 2015 – CVS Worker Assignment rolled out in areas where it was not standard practice.</li><li>• January - August 2015 – FGC improvements implemented in the regions.</li><li>• January - September 2015 – Accelerated Family Reunification rolled out in the regions.</li><li>• April - present – Regions continue to work with early adopter child placing agencies on implementation of the single child plan initiative. Efforts at the statewide level to develop the model and address barriers continue.</li></ul>
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## Evaluation of Reunification and Permanency Team Initiatives

The second field and state office staff team focused on improving permanency outcomes in the Conservatorship stage of service. Like the INV/FBSS Team, the team identified many process and practice changes, but prioritized six for implementation. They are summarized below.

	Increase Time with Families	Increase Permanency	Expedite Service Provision	Increase Staff Collaboration	Increase External Collaboration
<b>Visitation Matters</b> Training for frontline workers on how to coach parents during supervised visitations and progress parents from supervised to unsupervised visits. Research correlates positive, frequent visits to more likelihood of reunification.		✓			
<b>Realignment of Kinship/CVS Staff</b> Pairs Kinship workers with conservatorship caseworker units.	✓	✓	✓	✓	
<b>Accelerated Family Reunification</b> Identifies cases appropriate for early family reunification using established criteria.		✓			
<b>CVS Worker Assignment</b> Assigns the CVS worker within 72 hours of a removal.	✓	✓	✓	✓	
<b>Family Group Conference (FGC) Improvements</b> Expedites service planning and provision by holding the FGC within 30 days of removal, accelerating creation of the Family Plan of Services.		✓	✓		
<b>Single Child Plan</b> CPS workers collaborate with child placement agencies (CPAs) in developing the Child Plan of Service.		✓	✓		✓

### Visitation Matters

CPS implemented this training for all Conservatorship and Kinship caseworkers. The University of Texas developed the content after academic research and feedback from external stakeholders. The theory is based on the following concepts.

- 1) CPS owes parents immediate feedback on any issues that occur during a supervised visit with their child rather than hearing about it months later in court.
- 2) The supervised visit is an opportunity to coach the parent on improving their parenting skills.
- 3) It will be motivating to parents to move from highly supervised visits to unsupervised visits as they demonstrate improvement in their skills. The feedback on the visits will help enable this progression.

Workers liked the philosophical shift that parental visitation with their children is a right, not a reward for good behavior; however, they had logistical concerns with the implementation. This work will continue to be reinforced through the practice model and in collaboration with CPS' partners.

### **Realignment of Kinship/CVS Staff**

In situations where a child is placed with a relative, the kinship worker is the advocate for that family member, assisting with tasks such as day care renewals and paperwork to get financial compensation. In the past, in some regions, kinship workers were assigned by geography. This created difficulties when large sibling groups were placed with different relatives. There could be multiple kinship workers involved in a case, as well as the conservatorship worker. This Transformation initiative changed the alignment and assignment of kinship workers so they are paired to one conservatorship unit. The intent of the pairing is to increase collaboration between conservatorship and kinship staff and improve coordination of the support to the kinship placement(s) in a family's case. All of the regions have implemented this change.

Staff response to this initiative in focus groups was overwhelmingly positive and cited the following benefits.

- The initiative has improved communication between conservatorship and kinship staff. Kinship staff are more integrated than they were before and receive more information about court hearings and other meetings. One CVS worker noted: "I meet monthly with our unit's Kinship worker about our caseloads. This never happened in the past."
- Kinship workers are helpful to conservatorship workers.
- Involving kinship workers sooner is good for families – it expedites service delivery and the referral to Fostering Connections. One staff member noted, "This is benefiting the family by helping put cases on track sooner."

As anticipated, the additional travel required of kinship workers who are no longer geographically-based is a challenge. Building relationships between personnel also takes time. Overall, the effort has proven worthwhile and welcomed by staff.

### **Accelerated Family Reunification**

Texas law provides parents with one year before their parental rights can be terminated. That law was designed to protect the parent and give them time to make positive change to reunify with their children. The unintended consequence of this is that CPS sometimes uses the 12 months as a standard,

which can delay reunification unnecessarily. This initiative was designed to accelerate reunification for certain cases that meet strict criteria. All regions have implemented this initiative.

Evaluation of the pilot considered descriptive statistics of accelerated reunifications (long-term, there is a need to look at recidivism data to ensure children are being reunified safely). While the number of applicable cases varies by region, some regions have capitalized on the opportunity this initiative provides. For example, Region 6B (counties surrounding Harris County) reports that, between March and July 2015, caseworkers staffed 208 cases; 43 cases were approved for accelerated reunification and 113 children have been returned home.

Another metric was whether the average time in days from removal to trial home visit decreased during the evaluation period. In the Region 8 pilot, the average decrease across three pilot units was 58 days; one unit saw an increase.

This initiative has encouraged staff to think creatively to reunify families. For example, in one Region 9 case involving a 4-year old boy, accelerated reunification was proposed early in the life of the case (at only 64 days). The rationale for the reunification was that a strong safety and support network was in place to support the mother and child. The mother was residing in the home of a couple whom CPS originally studied to be a fictive kin placement. Once reunified, the mother and child would continue to reside in their home. All parties agreed with the plan.

Frontline staff responded positively in the focus groups, noting the following benefits.

- This initiative has put reunification at the forefront and allowed staff to consider this option earlier. One staff member noted, “[I] like the fact that we don’t have to wait a year to reunify. Six months down the road [we] can look at reunification if safety allows.”
- Early reunification is good for families and staff. One staff member noted, “This is good because it’s less traumatizing for the families and gets cases off of your caseload.”

Concerns raised about this initiative included the following comments.

- Only a limited number of cases meet the criteria. One worker noted a need to “select cases carefully.” Many cases, such as those involving substance abuse or domestic violence, cannot be resolved quickly.
- This change represents a cultural shift for CPS. Some staff and external stakeholders have not yet embraced this initiative.

### **CVS Worker Assignment**

In some regions, CPS assigned the CVS worker early in the process, but in other regions, this was not occurring until well after the 14-day hearing (adversary hearing). This initiative sought to extend the practice of early CVS worker assignment statewide (so that the worker who will own the case long-term can be involved sooner). Early assignment of the CVS worker enables them to attend and meet the family at the 14-day hearing and start their work sooner. This initiative has been implemented in all the regions where it was not already practiced.



Evaluation of this initiative found a decrease in the average time to authorize services in both pilot regions. One region experienced a 15-day reduction, while another experienced a 41-day reduction. Focus group feedback indicated positive support from CVS workers. One worker noted: "It is a lot better. This helps get the parents engaged with Family Plan sooner and report to judge at the hearing that parent is engaged and working to do what needs to be done." Another indicated: "This (initiative) eliminates parents having to wait. At times this can also help identify parents that want to relinquish rights sooner in the process and find permanency for the children."

### **Family Group Conference within 30 Days**

The Family Group Conference (FGC) is a meeting of CPS staff, parents and extended family members, and other stakeholders who agree to a service plan. This is a critical step in getting the buy-in from the parents on what they must do to regain custody of their children and to engage other persons who can hold the parents accountable to the plan. A worker noted in the focus groups, "FGC can be the fulcrum and make a difference for parents who are in the middle between highly motivated and not involved."

The concept of this initiative is to hold conferences within the first 30 days of a case (faster than current practice) and to improve their effectiveness by ensuring that the family plan is completed at the FGC and that parents leave the meeting with their service referrals. All regions have implemented this initiative.

Focus group feedback from staff members about this initiative indicated that many staff view the FGC meeting positively but ways to strengthen the family-focused feel of the meetings remain.

### **Single Child Plan**

This initiative seeks to increase collaboration between CPS and the Child Placing Agency (CPA) on the child's plan of service. In the current system, CPS and the CPA create their own plans at separate points in time. The intent is that the joint planning will result in a better coordination of services for the child and will help both entities work toward achieving permanency for the child.

There are over 300 CPAs in Texas. The success of this initiative depends on the CPAs working with CPS. The initiative is being implemented both at the State Office level through a work group with the largest CPAs, and at the individual regional level where regions are working with their local CPAs. Many are piloting the approach in a defined area with a defined number of providers. Only Regions 2 and 9 have implemented this initiative fully.

Feedback on this initiative has been limited due to the measured pace of rollout. In one region, staff provided feedback in the focus group that the initiative is positive in its reduction of duplication in planning at CPS and the CPA and in eliminating the preparation of reports.

A provider in Region 6B cited several benefits of the initiative, including that "It helps us to coordinate services better as well as work together as one team instead of each entity having their own goals instead of collective goals. It also forces us to plan and organize better so that we can incorporate all the team members into meeting together. It allows for input on every side and that includes the biological parent. If the child is old enough, this allows them to see all of the team members work together toward the same goal."

### *Permanency Call to Action*

In February 2015, CPS launched a Permanency “Call to Action” in partnership with Casey Family Programs. A statewide permanency summit with state office staff, regional directors, and conservatorship program administrators focused staff on the statewide goal of safely achieving positive permanency for more children and youth. Positive permanency is achieved when a child leaving DFPS’ care exits into a permanent setting, which involves a legal relationship to a family. Reunification with parents, transfer of custody to a relative or extended family member, and adoption are all examples of positive permanency outcomes.

In April, a second statewide summit engaged more regional staff about the importance of permanency. Each region began reviewing data to identify their unique challenges. Regions focused on reunification, exits to relatives, or adoption. They also began planning on how to engage their local stakeholders in preparation for their regional permanency summits held between June and November 2015.

More information about the statewide and regional permanency work can be found in the Permanency Strategic Plan.

Initiative	Implementation	
	Status	Comments
<p>Goals of the Permanency initiative include:</p> <ol style="list-style-type: none"> <li>1. Safely reduce the average time to achieve positive permanency by 25 percent by 2020.</li> <li>2. Achieve positive permanency for children under six years old who have been in DFPS conservatorship for more than two years.</li> <li>3. Reduce the number of youth exiting care without a permanent home.</li> <li>4. Create a culture in which staff and stakeholders value and demonstrate a sense of urgency to achieve positive permanency.</li> </ol>	<b>In Progress</b>	<ul style="list-style-type: none"> <li>• February 20, 2015 – Permanency Summit kicked-off Permanency Call to Action.</li> <li>• April 29 - 30, 2015 – Statewide program director Call to Action meeting.</li> <li>• September 1, 2015 – Statewide Permanency Strategic Plan established statewide goals for FY 2016 and accompanying targets for each region.</li> <li>• June - November 2015 – Regions engage local stakeholders through regional Permanency summits.</li> </ul>

*Harris County Transformation*

Transformation is a statewide effort. However, with a child population of over one million and a monthly average of almost 4,500 children in CPS care, Harris County’s challenges are especially acute. Children living in Harris County remain in foster care longer than the statewide average (29 months compared to 24 months) and are less likely to reunite with their families (22 percent compared to 32 percent statewide). Recognizing the specific needs of this urban area, CPS requested that Casey Family Programs assess the issues in Harris County and make recommendations. Casey Family Programs recommended a targeted permanency campaign and structured effort toward making long-term practice improvements.

Over the past six months, CPS has worked toward moving to permanency a targeted group of 600 children who have been in care for more than two years, most of whom have a goal of adoption. During this process, CPS continued to develop a deeper understanding of barriers to permanency and engaged staff in taking ownership of the work needed to affect internal change. Harris County has now implemented a change management structure that includes the state transformation efforts in this plan along with initiatives specific to Harris County. This governance structure facilitates the region’s ability to develop, lead, track, and evaluate efforts designed to improve child welfare practice, increase the professional skills of the workforce, improve operational efficiencies, and effectively communicate a permanency-based vision within the agency and throughout the community. Strategies under development include initiatives to reunify children and families earlier, improve child and family visitations, engage families and services more quickly, prevent children from staying in state care for extended periods of time, and draw on the strengths of community stakeholders as partners in permanency for children in Harris County.

Initiative	Implementation	
	Status	Comments
<p><b><u>IV-E Demonstration Waiver</u></b></p> <p>Implement five-year child welfare demonstration project in Harris County. The project allows DFPS to waive certain IV-E requirements to use funding more flexibly on new service approaches. For the target population, CPS will implement the Child and Adolescent Needs and Strength (CANS) assessment tool, and provide coaching on how to develop effective service plans and identify interventions that meet the specific needs of the child and family.</p>	<p><b>In Progress</b></p>	<ul style="list-style-type: none"> <li>October 1, 2014 – The U.S. Department of Health and Human Services granted DFPS a Title IV-E waiver. Casey Family Programs and Chapin Hall at the University of Chicago will help the state plan and implement the waiver project.</li> <li>January 2015 – Secured an external evaluator to conduct the initial process evaluation, annual outcome evaluation reports upon implementation per federal requirements, and cost analysis. Subsequently, CPS negotiated the scope of work and research design with the U.S. Department of Health and Human Services.</li> </ul>

		<ul style="list-style-type: none"> <li>September 2015 – The Texas Comprehensive CANS assessment tool was finalized. This tool includes behavioral health and child welfare assessment information. Region 6A staff provided input in the development of this tool in conjunction with Harris County Protective Services and state partners.</li> </ul>
<p><b><u>Harris County Transformation</u></b></p> <p>Move a targeted group of 600 children who have been in care for more than two years, most of whom have a goal of adoption, to successful permanency by December 31, 2014.</p> <p>Reduce the length of stay in foster care and the time to permanency in Harris County by identifying key barriers and making practice improvements.</p> <p>Implement geographically driven case distribution. Harris County was divided into four quadrants (north, south, east and west).</p>		<ul style="list-style-type: none"> <li>September 1, 2014 – Began geographically assigning cases.</li> <li>December 31, 2014 – At the end of July 2015, CPS had moved 375 of the original group of 600 children into permanency. As of August 2015, CPS has moved 375 of these children to permanency. CPS continues to work to move “long-stayers” to permanency but has also increased work to prevent “long-stayers.”</li> <li>January 9, 2015 – Completed an analysis of the barriers to moving “long stayers” to permanency. Because many of the barriers identified were legal barriers, CPS began working with its legal partners to address these issues.</li> <li>February 6, 2015 - Ongoing – The external stakeholder committee formed to engage key stakeholders in the process. The committee includes CASA, the Harris County Attorney’s Office, and education, health, and mental health representatives, and meets quarterly.</li> <li>Spring 2015 – Region 6A began conducting quarterly town hall meetings led by the regional director on transformation and permanency-related topics.</li> </ul>

*Purchased Family Preservation and Reunification Services*

CPS purchases a number of family preservation and reunification services such as counseling, substance abuse, and mental health treatment. In response to Sunset Advisory Commission concerns about the need to track outcomes of these services, CPS has begun using data to better drive contracting and referral decision-making. CPS will use data to identify the most-effective types of services, the providers with the best outcomes, and service capacity needs. To improve services and client outcomes, CPS intends to strengthen training, communication and access to information for all parties involved in the contracting, referral, and delivery of these services, including CPS management and workers, CPS contract monitoring staff, and providers.

Initiative	Implementation	
	Status	Comments
<p>Develop a method to assess the efficacy of services using data on removals from FBSS and client recidivism at the region, unit, and provider level.</p> <p>Implement strategies to improve service delivery including the quality and array of services available and families' completion of services.</p> <p>Implement strategies to improve communication and partnership among program, contract, budget, and provider staff.</p>	<p><b>In Progress</b></p>	<ul style="list-style-type: none"> <li>• December 1, 2014 – Completed analysis of existing data available in the DFPS data warehouse, from contract management staff, and through quality assurance processes. Identified correlation between low service completion rates and poor client outcomes. Conducted focus groups in December 2014, to get more information in select regions based on data analysis.</li> <li>• December 31, 2014 – Recommended practice, contract and communication improvements, including continued need for data analysis.</li> <li>• July 1, 2015 – Incorporated provider communication and performance items into quality assurance case reads ensuring that it informs CPS program and contract management decisions.</li> <li>• September 2015 – Conducted provider fair in Regions 2 and 10 to identify best practices in improving communication between providers, contracts, and caseworkers and educating caseworkers about providers in their area. Developed a</li> </ul>

		<p>provider fair toolkit for regions. Regions will be expected to hold fairs in the fall and spring each year.</p> <ul style="list-style-type: none"><li>• September 2015 – Drafted revised scope of work for purchased client services provider contracts, which include clearer provider expectations related to performance. Will continue to gather internal and external input to finalize by April 2016 for FY 17 procurement.</li></ul>
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**Foster Care**

Foster Care Redesign is the competitive procurement of performance-based contracts with a single provider to create sustainable placement resources in communities and keep children close to home. The Sunset Advisory Commission identified a need for long-range planning for Foster Care Redesign. Planning for statewide rollout (pacing and location) will take place in the larger context of CPS transformation. Sunset also identified the need to develop a consistent approach to measuring and monitoring provider quality in existing residential contracts.

Initiative	Implementation	
	Status	Comments
<p><b><u>Foster Care Redesign</u></b></p> <p>Develop a long-range plan for fully implementing foster care redesign informed by thorough evaluation, cost-analysis of redesign to date, and a Request for Information (RFI) to solicit information on procurement and implementation approach. The information will help DFPS prepare Request for Proposals (RFPs) for the Single Source Continuum Contracts (SSCC) in designated catchment areas.</p>	<p><b>Complete</b></p>	<ul style="list-style-type: none"> <li>• January 1, 2014 – DFPS contracted with ACH Child and Family Services in Region 3 to serve as the SSCC for Tarrant, Palo Pinto, Parker, Erath, Johnson, Somervell, and Hood counties. As of August 28, 2015, 1,295 children were being served under ACH’s Our Community-Our Kids model. This represents approximately 94 percent of all children from the catchment area. Evaluation efforts led by Chapin Hall will continue throughout implementation.</li> <li>• Fall 2014 – CPS gathered data and other information before the 84th Legislative Session, including a cost analysis completed by Public Consulting Group on September 19, 2014, and information from potential vendors collected in response to an RFI in November 2014.</li> <li>• April 2015 – DFPS published a long-range Foster Care Redesign implementation plan.</li> <li>• May 2015 – The 84th Legislature funded expansion of foster care redesign into one additional catchment area. Region 2 counties selected.</li> </ul>

<p><b>Other Foster Care Initiatives</b></p> <p>A July 24, 2014, DFPS Internal Audit report on Residential Foster Care Contract Monitoring recommended shifting from the traditional “one size fits all” monitoring approach to one using predictive analytics to improve how the agency identifies residential childcare providers and foster homes that present the greatest risk to child safety.</p> <p>CPS Purchased Client Services Division is changing from the traditional approach:</p> <ul style="list-style-type: none"> <li>• reactive;</li> <li>• compliance-focused; and</li> <li>• annual assessment of risk.</li> </ul> <p>To an improved approach:</p> <ul style="list-style-type: none"> <li>• proactive;</li> <li>• outcome focused; and</li> <li>• continuous risk assessment.</li> </ul> <p>Three components comprise the new approach to contracts monitoring:</p> <ul style="list-style-type: none"> <li>• performance-based contracts set expectations for outcomes providers should attain for children in CPS care;</li> <li>• continuous Quality Improvement approach that uses predictive analytics in anticipating safety risks and provide real-time feedback and technical assistance to providers; and</li> <li>• accountability through scorecards.</li> </ul>		<ul style="list-style-type: none"> <li>• August 2014 – As an interim measure, CPS updated the current risk assessment tool and oversight practices contract staff use to monitor residential childcare contractors to be more safety-focused and include additional financial reviews to determine providers’ overall operational health.</li> <li>• August 31, 2015 – CPS created a detailed work plan to strengthen residential contracts monitoring. This includes improved monitoring of providers, use of real-time data analysis, and identification of performance measures for internal and external use. In September 2015, CPS launched a voluntary demonstration program with select providers to test the use of these strategies.</li> </ul>
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*Office of Child Safety*

Abuse/neglect fatalities and near-fatal events occur in every program within DFPS. Historically, CPS, Adult Protective Services (APS), and Child Care Licensing (CCL) have been independently responsible for identifying and addressing issues relating to fatalities affecting persons served in their programs. There has not been a centralized mechanism for ensuring an independent case review, coordination of efforts, development of an agency perspective of systemic issues, or for targeting prevention efforts to reduce fatalities. This has resulted in fragmented responses from the agency and a perception that the agency is unable to provide unbiased reviews of its own work. The new Office of Child Safety (OCS) provides a laser-focus and objective approach to research systemic problems, identify areas of prevention and intervention, initiate enhancements to practice, and bolster collaboration opportunities among DFPS, Department of State Health Services (DSHS), other agencies, and stakeholders. With this new office, Texas is a model for other states and a national leader in addressing child fatalities and serious injury.

Initiative	Implementation	
	Status	Comments
Establish Office of Child Safety to house the child fatality review process within the Prevention and Early Intervention Division. This office will support independent data analysis, identification of systematic issues, and support cross-program (CPS, APS, CCL) initiatives to address preventable child fatalities, serious injuries and increase overall child safety. Policies and procedures for both investigations and reviews will be centralized and made available to all staff and the general public.	<b>Complete</b>	<ul style="list-style-type: none"> <li>• September 1, 2014 – DFPS created the Office of Child Safety and staffed first positions as of January 6, 2015.</li> <li>• December 2014 – Ongoing – DFPS participates in the <i>Forum on Improving Safety and Preventing Child Fatalities: Application of Predictive Risk Modeling</i> along with the Department of State Health Services, Health and Human Services Commission, and the Honorable Judge Karen Sage. DFPS also continues to work with the Protect Our Kids Commission to address child fatalities. The Commission’s final report will be published in December 2015.</li> <li>• January 2015 – OCS began conducting case reviews for child fatalities that are suspected to be abuse/neglect-related and where the family is involved with CPS. In April 2015, OCS started its online data and information webpage, which includes the publicly releasable reports prepared by OCS and data related to ongoing work of the Office.</li> </ul>

		<ul style="list-style-type: none"><li>• March 2015 – DFPS produced a DFPS/DSHS strategic plan to reduce abuse/neglect fatalities using public health data. Texas is leading the national effort to use public health data to address child fatalities, as more than half of families are not known to CPS before the fatality.</li><li>• March 2015 – DFPS produced an analysis of child abuse and neglect fatalities from FY 2010 – 2013, which was released in parallel with the strategic plan.</li><li>• September 2, 2015 – DFPS participated in DSHS’ training seminars/”Grand Rounds” for Texas physicians on the OCS DFPS/DSHS Strategic Plan to Reduce Child Abuse and Neglect Fatalities and the risk factors identified by the DSHS/DFPS research.</li></ul>
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*Prevention and Early Intervention*

The Sunset Advisory Commission recommended prioritizing prevention programming at DFPS, which until recently has been a contracting function within CPS Purchased Client Services. Elevating Prevention and Early Intervention (PEI) to report directly to the Commissioner allows prevention to administer programs that maintain a connection to both the agency’s critical child welfare function and with community and public health partners who participate in broader prevention efforts. PEI will benefit from data and research provided by the Office of Child Safety. Better use of data and partner involvement in the agency’s prevention strategy will improve programs serving at-risk families.

Initiative	Implementation	
	Status	Comments
<p>Reorganize DFPS’ organizational structure to elevate Prevention and Early Intervention efforts as a direct-report to the Commissioner.</p> <p>Better use existing data to focus on programmatic outcomes, and develop a comprehensive strategic plan for PEI programs.</p>	<p><b>Complete</b></p>	<ul style="list-style-type: none"> <li>• October 1, 2014 – Executed contract with UT Austin Center for Social Work Research for the HOPES program. UT conducted a literature review of best evaluation methods for prevention program effectiveness in January 2015. UT assessed current data measure collection and developed an evaluation plan in May 2015. The final evaluation is due August 31, 2017.</li> <li>• October 31, 2014 – Established the Texas Prevention Network as a structure for gathering input and prioritizing issues for a 5-year strategic plan, due October 1, 2016.</li> <li>• November 1, 2014 – Reorganized PEI Office to report directly to the DFPS Executive Commissioner.</li> <li>• May 2015 – The 84th Legislature provided DFPS PEI with funding to grow the HOPES and Community Youth and Development programs, to pilot a family support for military families, and to fund a safe babies initiative to prevent incidence of shaken baby syndrome. Enacted Sunset recommendation to consolidate the Texas Home Visitation Program (currently housed at HHSC), into the PEI Division at DFPS.</li> </ul>

### *Faith-Based Programs*

DFPS collaborates with faith-based organizations and community partners across the state to serve children and families involved with or at risk of involvement with the CPS system. In the Texas faith-based model, local churches receive data specific to the needs of children, youth, and families in their area that help determine the type of ministry they are called to develop from “prevention to permanency.” DFPS has received national attention for its success in galvanizing the resources of faith-based communities.

One opportunity for faith communities to support children and families is through a web-based engagement tool – Care Portal – that allows CPS staff to connect with the faith community. CPS staff use the portal to request church support for children and families’ needs. The portal launched on August 1, 2014, in Bell, Williamson and Travis Counties. It has since expanded to nine other counties in Regions 2, 4, 7, 9, 10 and 11.

In February 2015, CPS surveyed participating churches. Thirty-seven of 96 churches surveyed responded (39 percent). They indicated that overall collaborations with CPS were very positive. They stated they understand the mission and vision of CPS and are satisfied with the staff they work with. Over half felt that CPS does not maximize the use of all services their church provides, suggesting there is opportunity for expansion of this initiative.

Initiative	Implementation	
	Status	Comments
<p>Increase the number of churches establishing ministries to serve children and families involved with the child welfare system.</p> <p>Recent faith-based expansion efforts include the following.</p> <ul style="list-style-type: none"> <li>CPS has identified staff in each region to support the growth in the number of faith-based organizations willing to partner with CPS.</li> </ul> <p>Continue the work of the Advisory Committee for the Promotion of Adoption of Minority Children (ACPAMC) to support faith-based work.</p>	<b>In Process</b>	<ul style="list-style-type: none"> <li>August 1, 2014 – Launched the Care Portal. To date, 276 faith-based organizations have signed on to participate in the portal.</li> <li>December 31, 2014 – Completed a chronicle of the evolution of the Texas faith-based model and collaborative work underway between churches and the state child welfare system. The document will be published in fall 2015 as a national resource.</li> <li>August 26, 2015 – Completed an evaluation of faith-based collaboration and portal in initial target sites.</li> </ul>

## Priority C: Establish Effective Organization and Operations

One recommendation of the Sunset Commission was for CPS to get back to the business of effective management and do a better job of planning, communicating, and listening. To do so, CPS has taken the following steps.

- Reorganized state office to align with the field’s organizational structure and maximize use of existing resources.
- Tested restructuring of direct delivery functional units to improve services to children and families,
- Paused non-critical policy updates and adopted a more effective policy development and communication strategy.
- Prioritized information technology changes that will most significantly improve casework in the field as the agency works toward modernization of CPS’ data system, IMPACT.
- Expanded the use of predictive analytics to address emerging problems more strategically and is developing a comprehensive quality improvement system.

### *Organization and Operations*

The operational review found that CPS needs a stronger team focus across disciplines to support day-to-day field operations. For state office, CPS must eliminate silos; sharpen the focus on supporting the field; align and coordinate changes in policy, practice, technology, and training for the field; and enhance communications. These efforts will result in a more mission-focused state office that provides greater regional support.

Initiative	Implementation	
	Status	Comments
<p><b><u>Organization</u></b></p> <p>Restructure state office and regional functional units to better align stages of services and functions.</p>	<p><b>Complete</b></p>	<ul style="list-style-type: none"> <li>• August 28, 2014 – CPS adopted a new state office organizational structure:                             <ul style="list-style-type: none"> <li>○ consolidated permanency functions</li> <li>○ consolidated quality management functions; and</li> <li>○ positions to coordinate and guide policy development and best practice innovation.</li> <li>○ Integrated Alternative Response, investigations and family reunification services</li> </ul> </li> <li>• September 1, 2014 – CPS ended non-critical policy updates and paused non-critical training to the field outside of transformation efforts.</li> <li>• October 2014 - January 2015 – Piloted solutions to better integrate stages of</li> </ul>

		<p>service in the field. All of the regions have implemented the KIN/CVS worker pairing initiative, and by November, the INV/FBSS case transfer will be implemented in all regions.</p>
<p><b><u>Operations</u></b></p> <p>Pause non mission-critical CPS policy updates and training and realign quality initiatives and projects with transformation goals.</p> <p>Eliminate duplicate approvals across points in a case, shifting more decision-making to workers and supervisors and freeing time for management staff.</p>	<p><b>In Progress</b></p>	<ul style="list-style-type: none"> <li>• October 1, 2014 – Eliminated non-safety-related duplicative approvals. Also identified safety-related duplicative approvals for possible elimination as part of transitioning more critical decision-making to workers and supervisors once new supervisor training is completed.</li> <li>• November 2015 – CPS will launch an “Approved Supervisors” pilot program in Region 3. This pilot is testing the feasibility and effectiveness of shifting certain decision-making responsibility to a group of supervisors who meet criteria.</li> </ul>
<p><b><u>Information Technology</u></b></p> <p>Prioritize current and future technology projects that support transformation efforts or improve worker efficiency. IMPACT Modernization will provide a new technology platform for easier and less costly system enhancements in the future and a better user experience.</p>	<p><b>Complete</b></p>	<ul style="list-style-type: none"> <li>• December 2014 – New data fields created in IMPACT to capture “time with families.” Workers began capturing this data in April 2015.</li> <li>• December 2014 – Identified exceptional items for technology improvements that support transformation goals and workers spending more time with families.</li> <li>• April 2015 and August 2015 – Implemented new Structured Decision Making safety tool and assessment tool into IMPACT.</li> <li>• May 2015 – The 84th Legislature funded Transformation technology initiatives. CPS prioritized initiatives to improve caseworker time with families, such as to streamline and improve the process for requesting and monitoring contracted services, re-engineering caseworker key functions, improved access to case history information, and allow multiple stages to be open in parallel.</li> </ul>

<p><b><u>Communication</u></b></p> <p>Communicate transformation efforts to internal and external stakeholders.</p> <p>Revise form letters to parents, youth and reporters so they communicate DFPS involvement and decisions in plain language and align with the CPS practice model.</p>	<p><b>In Progress</b></p>	<ul style="list-style-type: none"> <li>• September 2014 - January 23, 2015 – Held 11 regional staff meetings and 13 stakeholder meetings and webinars.</li> <li>• October 2014 - Ongoing – Released monthly CPS “Meeting in a Box” to implement change in the field through supervisor-led communication and training.</li> <li>• July 2015 – Identified priority form letters in the Investigations stage that go to parents and guardians, as well as reporters/other third parties. Reviewed accuracy of legal content and simplified language for improved readability. Additional feedback will be collected from the Parent Collaborative Group. Letters will be automated in IMPACT in fiscal year 2016.</li> </ul>
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### *Policy Strategy*

CPS has enacted a new policy strategy to improve the clarity and accuracy of resources for staff by establishing a centralized process for policy review, development, and dissemination. More coordinated and strategic distribution of policy enables staff to identify key changes and more effectively incorporate those into their daily work.

CPS completed review and streamlining of the existing policy handbook for Investigations and Family Based Safety Services staff in December 2014. The revised handbook is a concise, accurate resource that focuses on critical tasks to achieving safety, permanency, and well-being. The policy review resulted in substantive changes, including improvements identified by field staff as part of transformation. Between December 2014 and January 2015, CPS trained staff and the new handbook was effective on February 15, 2015. CPS is now reviewing the Conservatorship policy handbook. Streamlining will be completed by October 31, 2015 and rollout will occur in January 2016. CPS will engage stakeholders in the CVS policy review and revision.

Benefits of the new policy development process were evident after the legislative session. Each legislative session, statutory changes require CPS policy updates. Historically, CPS would communicate these changes to frontline staff but often did not update policy until much later. As a result of the new streamlined and centralized policy development process, CPS incorporated nearly all of these changes into policy for a September 1 rollout to align with the start of the new fiscal year.

Initiative	Implementation	
	Status	Comments
Streamline the current CPS policy handbook by separating policy from practice and create a more effective and efficient process for revising, disseminating and implementing policy and practice in the future.	In Progress	<ul style="list-style-type: none"> <li>August 11, 2014 – Revised definitions of policy and practice and established a new process of policy development including centralized review.</li> <li>October 31, 2014 – Implemented a new process to provide policy to field staff.</li> <li>December 11, 2014 – Completed streamlining of policy and practice for Investigations and Family Based Safety Services. New policy took effect February 15, 2015.</li> <li>February 2015 – Began streamlining of policy and practice for Conservatorship to take effect January 1, 2015.</li> </ul>



### *Using Data to Improve Outcomes for Children and Families*

DFPS maintains hundreds of data reports along with data and information gathered through the regional investigation and Child and Family Services Review (CFSR) case reads. To effectively use this information to improve outcomes, CPS must create a continuous quality improvement (CQI) structure. To do so, CPS must (1) integrate and analyze the data and information in a way that supports field and state office in effectively using it to manage staff and implement improvements; and (2) train staff to use the integrated data and information to inform decisions and ensure a continual and strategic transformation and improvement process.

CPS started this process through its original state office restructure as part of Transformation. As recommended by The Stephen Group (TSG) operational review, CPS organized state office into two operational groups, as follows.

- Functional Support divisions focusing on field and state office operations. The Deputy CPS Assistant Commissioner and the Functional Support divisions report directly to the CPS Assistant Commissioner and include: Investigations and FBSS, Permanency, Purchased Client Services, Field, Disproportionality, Communications and Community Affairs.
- Systems Support divisions focus on systemic change and improvement and report to the Deputy CPS Assistant Commissioner and include Systems Improvement, Special Projects, Legislative Coordination, Federal and State Support, Accountability and Practice Excellence.

Consolidating the Systems Support divisions under the Deputy Assistant Commissioner for CPS was an important first step in creating a strong CQI structure. Operating within CPS but outside of the day-to-day operations, the Deputy Assistant Commissioner for CPS can maintain the objectivity needed to ensure accountability while keeping critical connections to the work CPS field and state office are doing. The Deputy Assistant Commissioner for CPS works along with the Functional Support Directors to help the Assistant Commissioner for CPS set, track and implement the strategic vision and plan for CPS.

To extend the CQI structure into the field to help sustain Transformation, CPS is creating a CPS Regional CQI or Systems Improvement Team, which will be part of the Systems Support under the Deputy Assistant Commissioner for CPS. This team will work with CPS leadership to proactively and strategically make needed changes to further build an experienced and tenured workforce and improve safety, permanency, and well-being for the children and families CPS serves. Using integrated data and reports, the team will help regional leadership identify for each stage of service what parts of the system are working well and areas to target for improvement. Working with regional staff and, when appropriate, external stakeholders, the team will brainstorm solutions, help implement plans, and track and report on progress.

In fiscal year 2016, CPS will also begin an annual planning process looking at key outcome measures at the state and regional levels. This effort will inform decisions about changes needed to CPS' business plan for fiscal year 2017.

Initiative	Implementation	
	Status	Comments
<p>Coordinate and align investigation CFSR quality assurance case reads. Integrate information and data gathered through investigation and CFSR quality assurance case reads, data analysis, predictive analytics, and program evaluation.</p> <p>Dedicate staff to support field and state office in strategically using the integrated information for planning and decision-making. Expand the use of data analysis and predictive analytics to identify emerging problems and high-risk cases.</p> <p>Support evaluation of CPS Transformation efforts through short-term analysis that allows CPS to make adjustments during the course of implementation and evaluation of outcome data over time.</p>	<p><b>In Progress</b></p>	<ul style="list-style-type: none"> <li>• July 2015 – Complete inventory of all information and data gathered through various case reads and identify gaps and areas of overlap.</li> <li>• July 2015 – Created Regional Systems Improvement Division to extend the CQI structure into the field to help sustain Transformation. The Division Administrator has been hired and CPS is in the process of hiring 11 specialist positions.</li> <li>• July 2015 – Family Based Safety Services Real-Time Case Reads rolled out statewide.</li> <li>• August 2015 – Develop structured case reading tool for Child Safety Specialist reviews.</li> <li>• August 2015 – Completed initial evaluations of all key Transformation initiatives and pilots.</li> </ul>

## Evaluation of Transformation Efforts as of August 2015

Since Transformation began in August 2014 and as evidenced in this report, CPS has evaluated the implementation and outcomes of individual initiatives in order to improve their effectiveness. In addition, CPS has tracked and reported on their collective impact on key outcome measures over time.

### *Average Time to Case Closure*

Time to case closure fell slightly for all stages of service.

Time to Closure	FY 14	FY 15
Average time to investigation closure (in days)	52.9	48.2
Average time to FBSS closure (in months)	7.1	7.0
Average time to conservatorship closure (in months)	21.3	20.9

### *Turnover*

DFPS has not seen substantial and sustained improvement in caseworker turnover in recent years.

	FY 12	FY 13	FY 14	FY 15
Turnover for CPS overall	26%	26%	25%	26%
Turnover for Investigations	34%	32%	34%	33%
Turnover for Family Based Safety Services	26%	25%	23%	28%
Turnover for Conservatorship	24%	22%	23%	23%

Assessing turnover since Transformation began, some timeframes show an increase; however, overall turnover is improving.

Investigations		
	FY 14	FY 15
<b>Total</b>	<b>34%</b>	<b>33%</b>
0-3 Months	23%	34%
3-9 Months	51%	50%
9-18 Months	48%	42%
19-36 Months	28%	25%
37+ Months	21%	19%

Although overall turnover in investigations improved only slightly from FY 14 to FY 15, the timeframe for when caseworkers are leaving shifted, with turnover in the first three months increasing significantly. Turnover for more tenured workers actually improved. With the redesigned training, new caseworkers get a more realistic preview of the job in the early months and those for whom it is clearly not a good fit appear to be opting out early. Caseworkers leaving early-on is less of a loss on the agency’s initial investment as caseworkers have not yet been assigned a caseload and, as a result, it has less of an impact on workload of those who remain.

Family Based Safety Services		
	FY 14	FY 15
<b>Total</b>	<b>23%</b>	<b>28%</b>
0-3 Months	21%	22%
3-9 Months	20%	37%
9-18 Months	35%	42%
19-36 Months	26%	29%
37+ Months	18%	18%

In FBSS, turnover spiked in fiscal year 2015 driven in large part by significant increases in turnover for those employed three-18 months. The increase in FBSS turnover overall, however, is not a consistent trend throughout the state. About half of the regions (1, 3, 6, 7, 9, 11) experienced an increase in FBSS overall turnover while the other half (2, 4, 5, 8 and 10) had lower overall turnover.

Conservatorship		
	FY 14	FY 15
<b>Total</b>	<b>23%</b>	<b>23%</b>
0-3 Months	20%	23%
3-9 Months	30%	34%
9-18 Months	32%	31%
19-36 Months	26%	24%
37+ Months	15%	13%

In Conservatorship, turnover has remained relatively stable and lower than the other two major stages of service. Turnover among more tenured workers (nine or more months), however, improved while turnover among new workers (less than nine months) increased. As with Investigations, this may be, in part because of the redesigned training. As caseworkers get a more realistic preview of the job in the early months, those for whom it is clearly not a good fit appear to be opting out early.

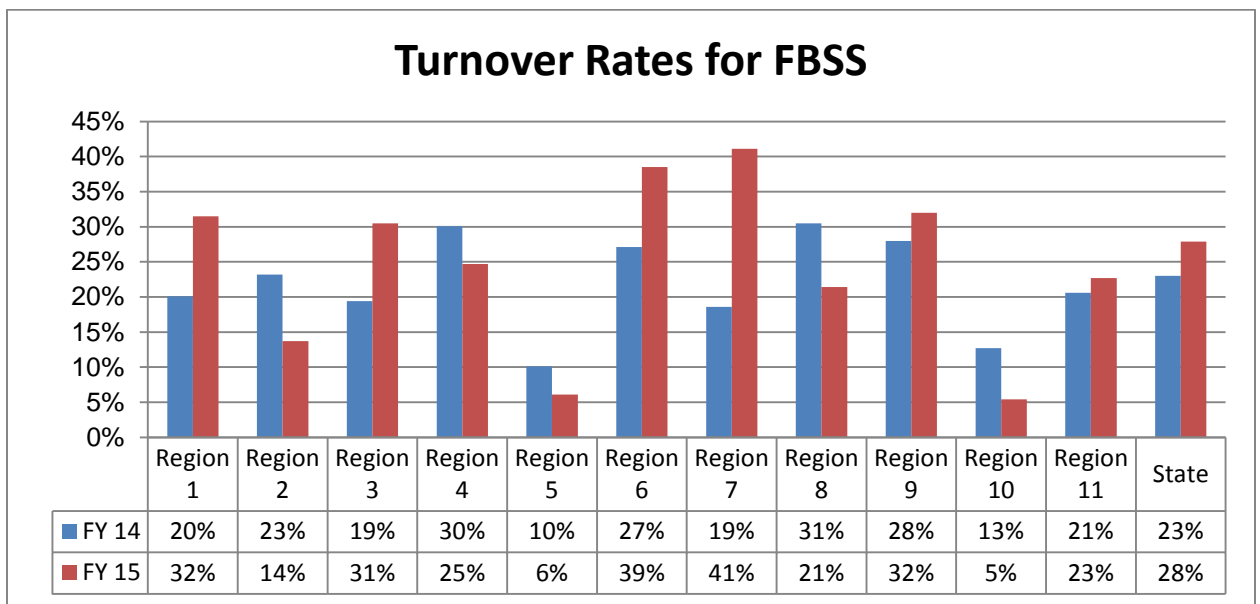
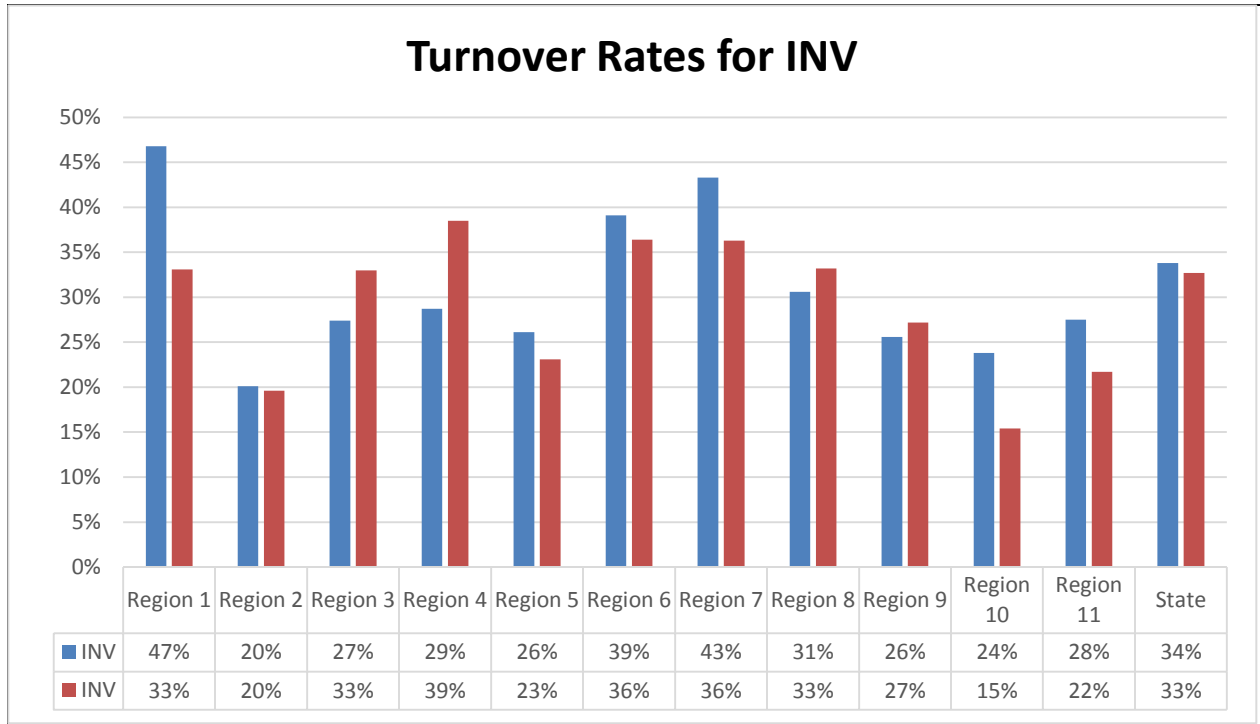
### *Recidivism, Placement, and Permanency*

With respect to outcomes such as recidivism (children having a subsequent confirmed incident or case opened for services with 12 months) and permanency (reunification, exit to relative or adoption), it is more difficult to determine the impact of Transformation, based on data alone, because the outcomes take a significant period of time to develop. For example, recidivism is examined over a 12-month period and, as a result, recidivism rates for the current year reflect how the system was operating last year. As a result, the impact of Transformation may not be fully reflected in these measures until FY 16.

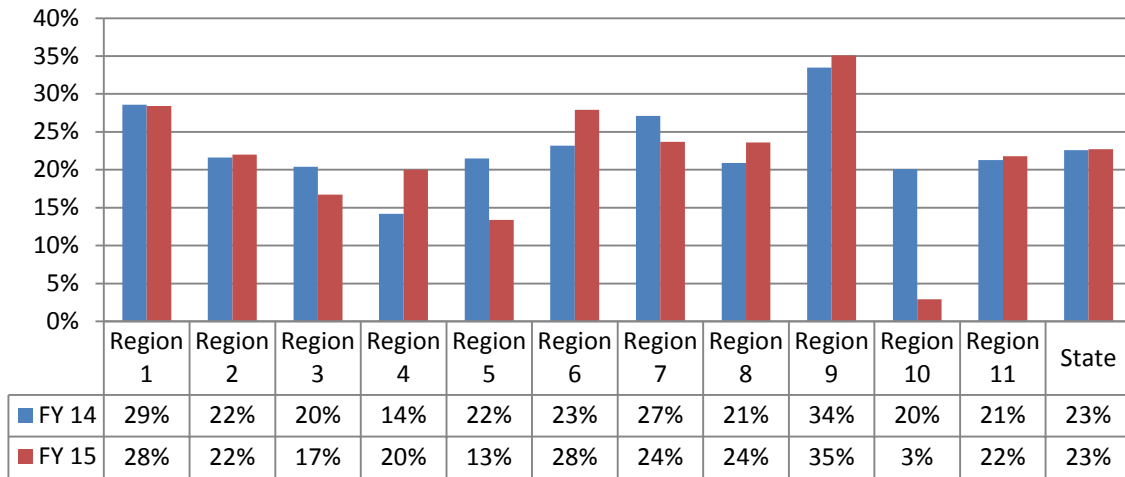
Transformation Outcome Metrics	FY 14	FY 15
Recidivism from Investigation	7.5%	7.7%
Recidivism from Family Based Safety Services	7.8%	7.6%
Recidivism from Reunification	11.9%	11.5%
Average Number of Placements	3.2	3.2

Exits to Permanency	91.4%	92.2%
Average Time to Exit to Permanency (in months)	18.8	18.5

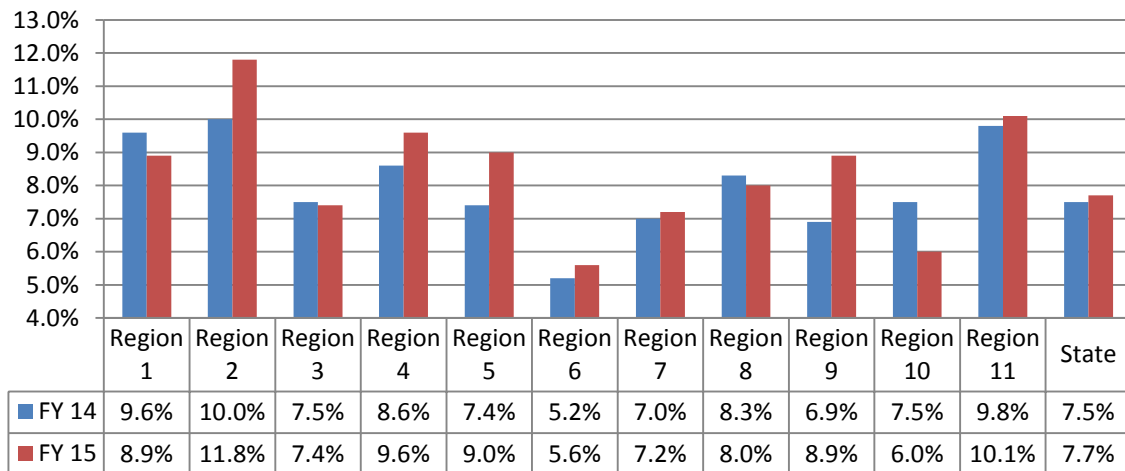
Data on turnover and outcomes for each region follows.

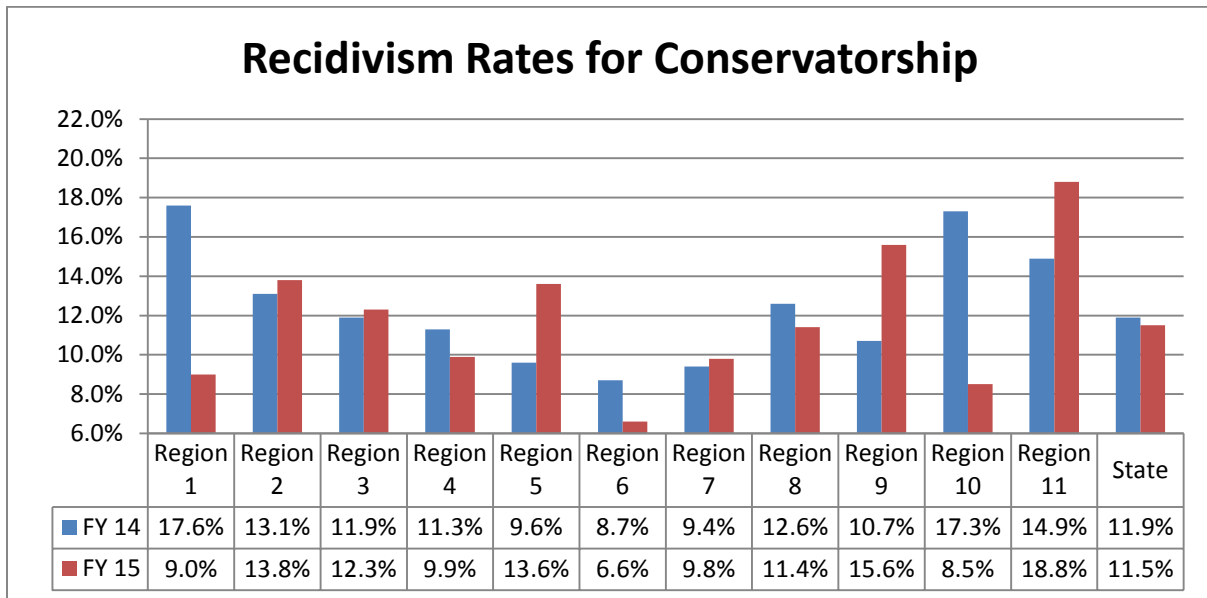
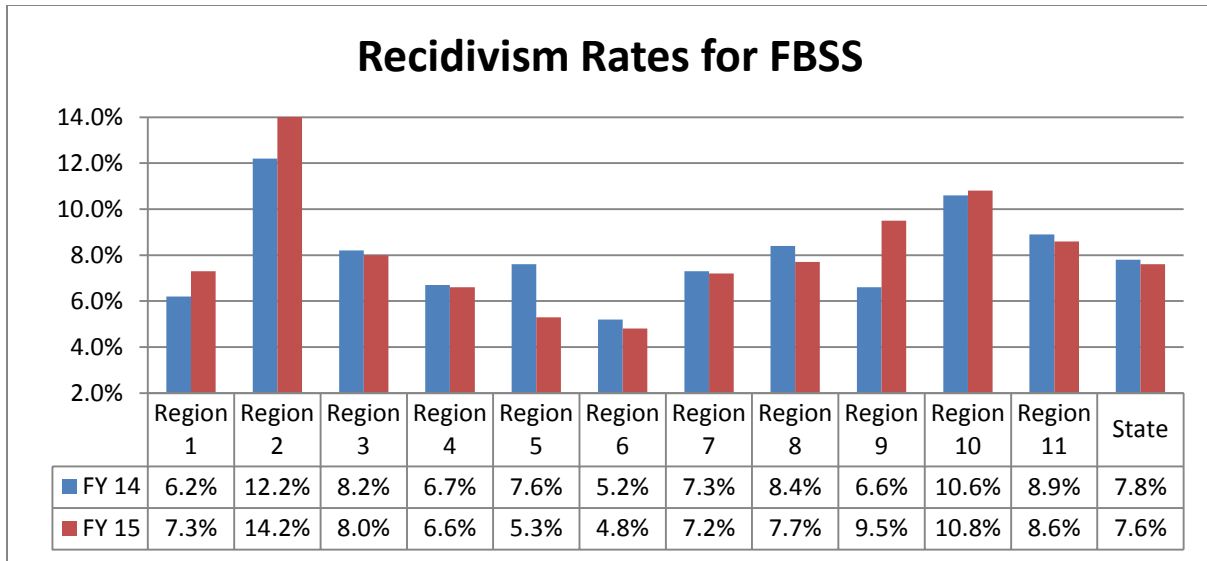


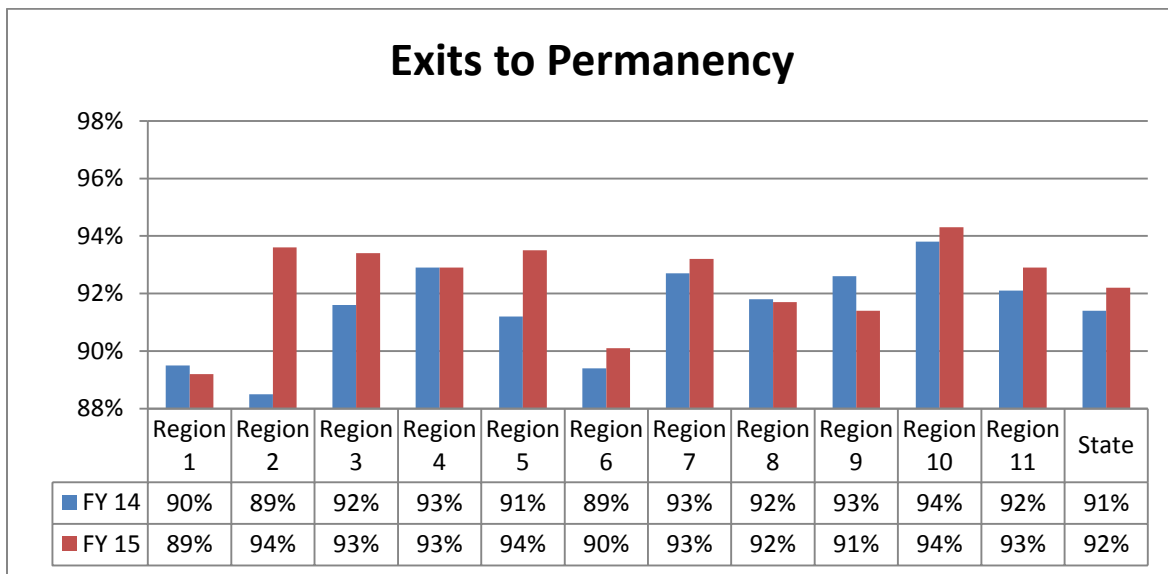
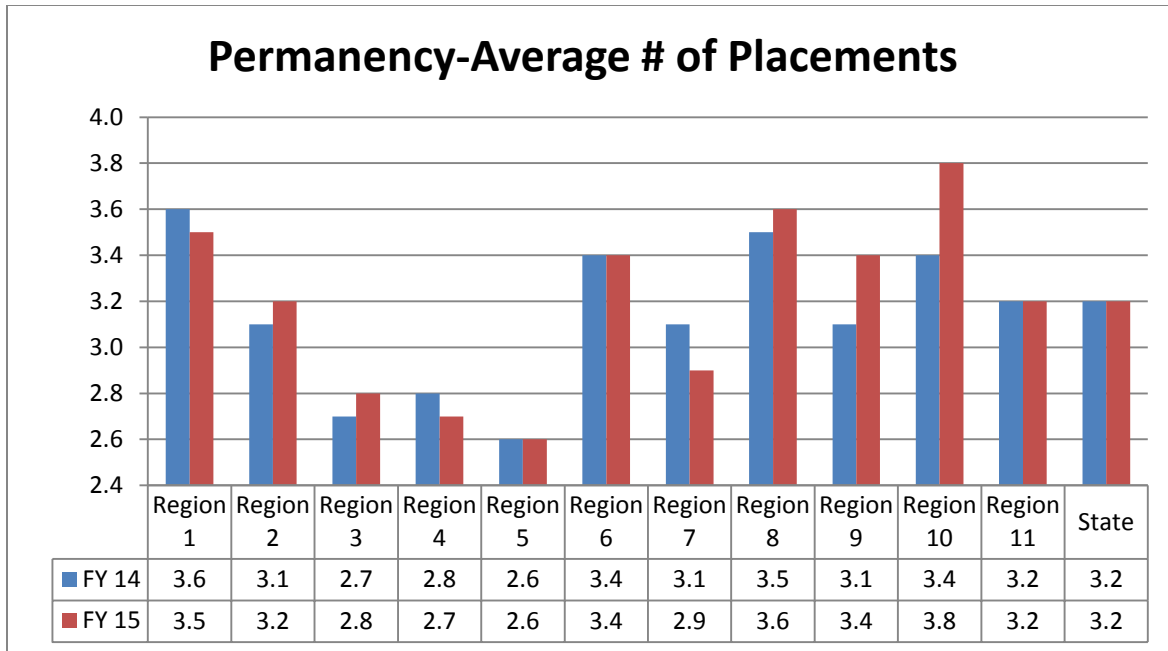
### Turnover Rate for Conservatorship



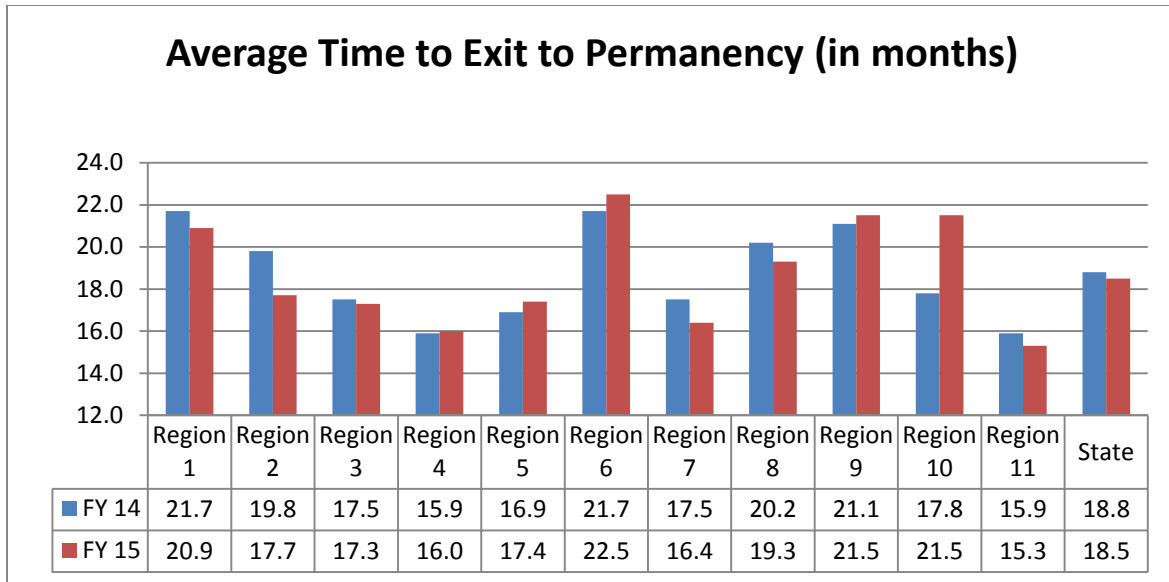
### Recidivism Rates Investigations



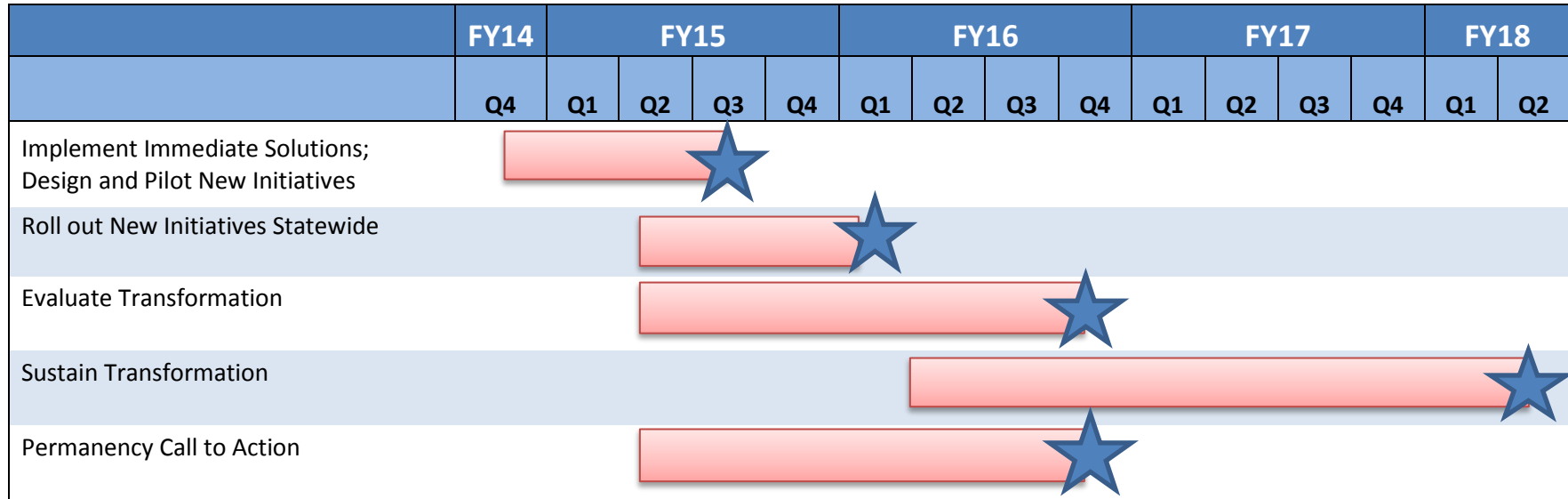




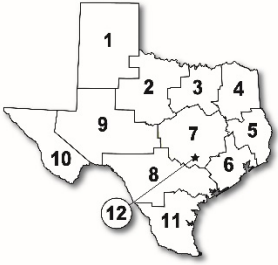




## Appendix A: Transformation Timeline



## Appendix B: Transformation Implementation

												
	REGION											
Initiative	1	2	3	4	5	6A	6B	7	8	9	10	11
Continuous Learning Model (including Mentoring)	★	★	★	★	★	★	★	★	★	★	★	★
Management Training	★	★	★	★	★	★	★	★	★	★	★	★
Recognition Program (eRewards)	★	★	★	★	★	★	★	★	★	★	★	★
Performance Evaluation Tools (caseworkers)	★	★	★	★	★	★	★	★	★	★	★	★
SDM Safety Assessment and Risk Assessment	★	★	★	★	★	★	★	★	★	★	★	★
Policy Streamlining (INV and FBSS)	★	★	★	★	★	★	★	★	★	★	★	★
Case Transfer between INV and FBSS*	★	★	★	★	★	★	★	★	★	★	★	★
Triaging - Closing cases prior to assignment	★	★	★	★	★	★	★	★	★	★	★	★
Pair Kinship Workers with CVS Units	★	★	★	★	★	★	★	★	★	★	★	★
CVS worker assignment	★	★	★	★	★	★	★	★	★	★	★	★
Family Group Conference within 30 Days of Removal	★	★	★	★	★	★	★	★	★	★	★	★
Accelerated Family Reunification	★	★	★	★	★	★	★	★	★	★	★	★
Single Child Plan (working with at least one provider)	★	★	★	★	★	★	★	★	★	★	★	★

\* Case transfer is implemented in every region, but continues to roll out to the entire region through November.

## Appendix C: Transformation Full Implementation Impact

### CPS Staff Impact of Transformation Initiatives, Over Time

Transformation Initiative	Total # CPS staff affected	CPS Staff Using New Approach, by:		
			10/31/2015	12/31/2015
Continuous Learning	2,967	# staff	2,967	ongoing
		% staff	100%	--
Strengths-based Supervision	1,161	# staff	1,161	--
		% staff	100%	--
360 Feedback	63	# staff	63	--
		% staff	100%	--
6-24 Month Calls	1,869	# staff	1,869	ongoing
		% staff	100%	--
Performance Recognition Program	9,095	# staff	9,085	--
		% staff	100%	--
Performance Evaluation Tools	8,841	# staff	5,949	6,900
		% staff	67%	78%
SDM - Safety Assessment	3,080	# staff	3,080	--
		% staff	100%	--
SDM - Risk Assessment	4,160	# staff	4,160	--
		% staff	100%	--
INV/FBSS Policy Streamlining	4,244	# staff	4,244	--
		% staff	100%	--
Triaging	3,163	# staff	3,163	--
		% staff	100%	--
Case Transfer INV to FBSS	4,954	# staff	3,153	4,954
		% staff	63%	100%
Visitation Matters	2,874	# staff	2,874	--
		% staff	100%	--
Realignment of Kinship/CVS staff	2,863	# staff	2,863	--
		% staff	100%	--
Accelerated Family Reunification	2,359	# staff	2,359	--
		% staff	100%	--
Family Group Conference	6,171	# staff	6,171	--
		% staff	100%	--
CVS Worker Assignment	2,358	# staff	2,358	--
		% staff	100%	--

## Notes:

- 1) This figure reflects all staff to be affected directly by these initiatives including direct delivery, management, and specialist staff, as well as certain state office staff. The figure does not capture staff with secondary impact e.g., quality assurance, policy, and program evaluation.
- 2) For initiatives that are ongoing, the October number reflects the number of staff to date.
- 3) The estimated number of staff affected is based on analysis of the current CPS work force, as of the 9/18/15 Active Position Report and assumes the regional rollout schedule as of 9/30/15. Because the data constantly fluctuate, the figure is an estimate of the staffing impact. In the future, if an updated report was used, it would be expected that the total staff affected by an initiative would change. Similarly, rollout plans are subject to change.
- 4) For performance evaluations, the count reflects the number of staff for whom a new evaluation tool is available and not how many employees will be reviewed that month. Supervisors will evaluate employees at the point that their evaluation is due over the course of the next year.
- 5) All regional employees are eligible to participate in the employee recognition program; the count does not reflect the actual number of employees that will be recognized.