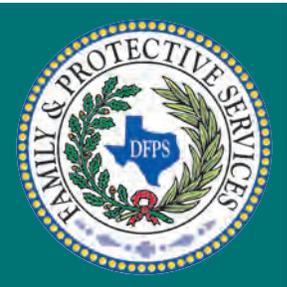


# Annual Report and Data Book **2009**



Texas Department of Family and Protective Services





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# Executive Summary

## Introduction

The Texas Department of Family and Protective Services (DFPS) serves the state's youth, families, elderly, and people with disabilities. Our mission is to protect the unprotected.

The 2009 Annual Report and Data Book is an overview of the department's programs, services, performance, and accomplishments, and a comprehensive statistical resource of DFPS services. This report covers the fiscal year beginning Sept. 1, 2008 through Aug. 31, 2009. The 2009 Annual Report and Data Book, and additional information can be found on the department's web site at [www.dfps.state.tx.us](http://www.dfps.state.tx.us).

### Mission

Our mission is to protect children, the elderly, and people with disabilities from abuse, neglect, and exploitation by involving clients, families and communities.

### Vision

The Texas Department of Family and Protective Services (DFPS):

- Is recognized for innovative, effective services.
- Builds strong, effective partnerships with clients, communities, providers, and state leaders.
- Provides effective leadership that is accountable for its actions and communicates openly with clients and stakeholders.
- Supports staff who are highly motivated, diverse, ethical, well trained, and professional.

### Values

- We protect the unprotected.
- We involve clients, families and communities in decision making.
- We provide quality services.
- We are innovative and strive for excellence.
- We are ethical and accountable.
- We promote diversity.
- We value our staff.

## DFPS Staffing and Structure

A nine-member advisory council, who is appointed by the Governor and confirmed by the Senate, makes recommendations regarding the department's rules and policies and provides a venue for public input. The DFPS Commissioner, who is appointed by the Executive Commissioner of the Texas Health and Human Services Commission, directs 11,082 employees in 305 local offices. These offices are located in 11 regions and a state headquarters in Austin. Three major programs make up DFPS: Child Protective Services (CPS), Adult Protective Services (APS), and Child Care Licensing (CCL). Prevention and Early Intervention (PEI) is administered as part of CPS.

The 81st Texas Legislature directed DFPS to develop a plan to improve employee morale and retention. Since turnover peaked at 21.2% in FY 2007, DFPS has steadily improved. A combination of extensive internal efforts and economic factors helped reduce the turnover rate to 15.2% in FY 2009.

*For more information on staffing: DFPS Data Book, pages 1, 5, 21, 27, 71, 85, and 101 under "Expenditures and Total Average Filled Full Time Equivalent (FTE) Staff," "Worker Demographics," and "Supervisor Demographics"*





neglect or exploitation in MH and MR facilities and programs, the public should contact 1-800-647-7418.

All reports meeting the statutory definitions of abuse and neglect are investigated after being assigned a priority based on the level of risk to the alleged victim. Law enforcement agencies are also notified of reports regarding children.

*For more information on Statewide Intake and Intake of Reports: DFPS Data Book, pages 1-4, 10-11, 36, 119-127 (APS), 128-133 (CPS)*

## Office of Consumer Affairs

The department's goal is to improve the lives of the people it serves, and it is important to respond to complaints. Clients with case-specific complaints about DFPS may contact the Office of Consumer Affairs at 1-800-720-7777 for a review of their case. These reviews determine if the department's policies have been followed properly. During FY 2009, the Office of Consumer Affairs received 17,294 contacts from various sources including the public, clients, elected officials, other agencies, and DFPS staff. Of that number 4,185 were handled as case-specific complaints. The Office of Consumer Affairs found that 4.9 percent of complaints were valid.



## DFPS Volunteers

Social services workers, no matter how dedicated and skilled, cannot address abuse, neglect, and exploitation without help from the larger community. In FY 2009, over 1,000 volunteers worked over 137,000 hours, side by side with DFPS employees.

Trained DFPS volunteers:

- Delivered greatly needed prevention and intervention services.
- Promoted policies and programs that build healthy families.
- Expanded efforts to create a network of community resources that support and nurture DFPS clients.
- Made unique contributions to those Texans least able to protect themselves.

## Statewide Intake

State law requires anyone who believes a child is being abused or neglected, or an adult who is elderly or has a disability is being abused, neglected, or exploited, must report the situation to DFPS' Texas Abuse Hotline, also known as Statewide Intake. The 24-hour statewide hotline (1-800-252-5400) receives reports of suspected abuse or neglect of children, the elderly, or people with disabilities. Reports can also be made online through a secure web site at <https://www.txabusehotline.org>. To report abuse,



# Child Protective Services (CPS)

## Responsibilities

- Conduct civil investigations of reports of child abuse and neglect.
- Protect children from abuse and neglect.
- Promote the safety, integrity, and stability of families.
- Provide permanent placements for children who cannot safely remain with their own families.

## 2009 Accomplishments and Initiatives

### Increases to Staffing

To accomplish continued reforms, the 80th Texas Legislature funded DFPS to hire an additional 1,353 staff. DFPS was allocated 1,003 new staff in FY 2008 and another 350 during FY 2009. This included:

- 501 Conservatorship staff (including 372 caseworkers)
- 348 Family Based Safety Services staff (including 212 caseworkers)
- 84 Family Group Decision Making staff
- 70 Kinship workers
- 86 Residential Child Care Licensing staff (including 40 workers)
- 31 Legal staff
- 21 Contracting staff

### Fostering Connections Act

In October 2008, new sweeping federal legislation was enacted. The federal Fostering Connections Act emphasized:

- Foster care is not a viable long-term solution.
- Adoption is not an option for everyone.
- There should be increased focus on relatives.
- Older children in foster care need help.

As a result, the 81st Texas Legislature passed corresponding legislation effective in FY 2010 that requires DFPS to enact related programs. During FY 2009, DFPS made preparations to put these changes into practice, which will include funding for:

- Increasing diligent searches to find family members.
- Financial assistance for relatives, other designated caregivers, and adoptive parents.
- Additional supports and options for youth transitioning out of foster care, and
- Strengthening ties with Native American tribes.

### Disproportionality

Since 2004, CPS has addressed the disproportionate representation of African-American and Native American children in the child welfare system, also known as “disproportionality.” Each region now has at least one dedicated staff member to help guide this work. Efforts to reduce this over representation contributed to less children being removed, an increase in kinship care placements, and an increase in children being served in their own home. An evaluation of DFPS disproportionality efforts and their effect shows the disproportionate representation of African-American children in the child welfare system has decreased in three of the five largest counties in Texas.

*For more information on Texas child and removal demographics: DFPS Data Book, page 174-185*

### Child and Family Services Review

The Child and Family Services Review (CFSR) is a federal initiative to measure and improve each state’s entire child welfare system. Administered by the U.S. Department of Health and Human Services, the review monitors compliance with federal requirements for child protection, foster care, adoption, family preservation and family support, and independent living services. The CFSR process has a variety of components, including an analysis of statewide data, the completion of a Statewide Assessment, an Onsite Review, and a Program Improvement Plan period. Each CFSR evaluates seven outcomes involving child safety, permanency, and well-being.

In March 2009, DFPS received a final report and began development of a required Program Improvement Plan. The plan included the following objectives:

- Strengthen critical decision-making skills, particularly in family-centered safety decision-making.
- Enhance placement capacity by redesigning the Texas foster care system.

- Remove barriers to child permanency, especially when children remain in state conservatorship but parental rights are not terminated.
- Strengthen family based safety services (in-homes services) practices.

As part of CPS' family-focused approach and in response to the CFSR, a fatherhood specialist position was added. The fatherhood program specialist consults with case-workers across the state on increasing inclusion of fathers in service plans even if those fathers are non-custodial or incarcerated. CPS has a running pilot project involving fathers who do not live in the same residence as their children that began in January 2008 and ends in March of 2010. The project, located in Tarrant County, examines how involvement by fathers affects the safety and well-being of children.

### Public Awareness to Decrease Accidental Child Deaths

In recent years, CPS has worked to increase public awareness about two causes of accidental child deaths: Child drownings and co-sleeping.

Unfortunately, calendar year 2009 was the deadliest year since DFPS began counting, with 121 known accidental child drownings. An average of 80 children drowned each year since DFPS began tracking child drowning statistics in 2005. DFPS identified 66 drowning deaths in 2005, 70 in 2006, 63 in 2007, and 82 in 2008. CPS worked with Child Care Licensing, which sponsors its annual "See and Save" public awareness campaign to try to prevent drowning and hot car deaths. 2009 was one of the hottest years on record in Texas, which may have been a factor in the increased number of child drowning deaths.



In FY 2009, CPS increased its efforts to warn the public about the potential danger of allowing an infant to sleep with a parent, other adult or older children, also known as co-sleeping. In November 2008, DFPS announced that in FY 2008, 165 children died while sleeping with an adult or older child. This was the first year DFPS conducted such a case-by-case analysis of investigations. The trend continued with 167 co-sleeping deaths in FY 2009.

## Investigation and Placement Services

### Investigations

State law requires anyone who believes a child is being abused or neglected to report the situation to DFPS' Texas Abuse Hotline at 1-800-252-5400 or make the report online at <https://www.txabusehotline.org>.

When an intake report is assigned for investigation, CPS workers interview verbal children, parents, and others with knowledge of the family. These interviews help determine if child abuse or neglect has occurred and assess the risk of further harm to the child. It is critical to child safety that investigations are completed in a timely fashion. In addition, families are entitled to timely resolution of an investigation.

Even if evidence of abuse or neglect is not found, case-workers may refer families to services in the community, such as individual or family therapy, parenting classes, medical assistance, mental health services, or programs offering financial assistance for utilities, rent, and child care.

*For more information on CPS investigations and investigation process: DFPS Data Book, page 27, example flow chart and pages 37-45*

### Family-Based Safety Services (FBSS)

When child safety can be reasonably assured, CPS provides in-home services to help stabilize the family and reduce the risk of future abuse or neglect. Services provided through FBSS include family counseling, crisis intervention, parenting classes, substance abuse treatment, domestic violence intervention, and child care. Most children served by FBSS continue to live at home while CPS works with their families. In cases, children may live elsewhere temporarily, usually with relatives or family friends, until the home becomes safe for them to return.

*For more information on in-home services: DFPS Data Book, pages 47 and 68*

## Family Group Decision Making (FGDM)

Family Group Decision Making is a part of the CPS Family Focus Initiative. The goal is to enhance safety, permanency, and well-being for children by providing direct services and support services to their caregivers, whether biological or through affinity. This initiative addresses two primary needs:

- Increase the parent's participation in safety and service planning.
- Strengthen an extended family's ability to provide safe and permanent living arrangements within their kinship structure.

Family Group Decision Making describes a variety of practices to work with and engage families in problem solving, including Family Team Meetings, Family Group Conferences, and Circles of Support.

- Family Team Meeting (FTM) is a rapid response to child safety and placement concerns and is used to achieve positive outcomes for children in the earliest stages of interaction between CPS and families.
- Family Group Conference (FGC) is a process where families join with relatives, friends, and others in the community to develop a plan to ensure children are cared for and protected from future harm. This broader constellation of "family" convenes with caseworkers and others in a unique partnership that empowers the "family group" with a high degree of decision-making authority and responsibility.
- Circles of Support (COS) is a youth-focused, youth-driven meeting with the primary purpose of developing a plan for older youth to transition from foster care to adulthood. It may be used for other purposes as well. It includes broader participation of the youth's support network.

*For more information: DFPS Data Book, pages 69-70*

## Foster Care

When it is not safe for children to live with their own families, CPS petitions the court to remove the children from their homes. They may be placed temporarily in kinship care, a verified foster family, an emergency shelter, or another foster care facility. Foster families provide a safe, nurturing environment for children in CPS care. Foster families receive a daily reimbursement for the costs associated with caring for children. CPS and the foster parents are required to arrange all medical, dental, and therapeutic services needed by the child. Some children have emotional or other needs that can be difficult to address in a foster home. These children may be placed in specialized group residential homes,

residential treatment centers, or other facilities that best meet their needs.

*For more information on foster care and other placements: DFPS Data Book, pages 48-56, 60-65*

## Kinship Care

When removing children from their homes to ensure immediate safety, DFPS and the courts are required to consider temporary placements with relatives and to ask parents to provide DFPS with contact information for relatives who may be able to care for those children. For generations, extended families have played significant roles in the rearing of children when parents are having a difficult time. Referred to as kinship care or relative care, these caregivers provide children the benefit of more stability when they cannot live with their birth parents.

*For more information on Kinship Care: DFPS Data Book, pages 50 and 66*



## Adoption

When it is not possible for a child to return home, the court may terminate the parents' rights, which makes the child available for adoption. The number of DFPS children who have been adopted has increased steadily over the past five years. One major factor in this increase has been the number of relative adoptions. Relative adoptions in Texas have more than doubled since 2005 and now represent almost half of the DFPS consummated adoptions in Texas. DFPS approves adoptive homes and also contracts with licensed private child-placing agencies to increase the number of adoptive homes available to adopt foster children. CPS has been recognized by the U.S. Department of Health and Human Services every year since 2005 for significantly increasing the number of adoptions and relative placements.

*For more information on adoption: DFPS Data Book, pages 50, 54-60, 62-63, 156-161, 165-167, 192-197*

# Girl Finds Adoptive Family and Learns Life lesson from Her Dog

As a child growing up in foster care, Alexis M. may not have lived a dog's life, but she's learned a lot from her dog, Lucky.

"I've learned that you can overcome a bad start in life from my dog," she says in her contribution to the recently released book, *Chicken Soup for the Soul: What I Learned from My Dog*.

"When he came to us he was thin and hungry and had bald spots from fleas. He had an infection. The people who had him wanted to get rid of him. He was the last in the litter and if they couldn't find a home for him they were going to shoot him. My neighbor took him so he wouldn't be shot, but she couldn't keep him. My mom and dad decided to let me have him."

Alexis knew the dog needed a loving home of his own. She knew because, like thousands of foster children awaiting adoption, she once asked herself, "Why not me? Why can't I have a family?"

"I understand how his life has been because my life had pretty much been the same," she says. "Even though he was a dog, I understood how it made him feel to be treated that way. I was in foster care for almost five years. My first years of life were really tough. Taking care of him has helped me deal with some of my past hurts and problems."

During November, which is Adoption Month in Texas, the Texas Department of Family and Protective Services holds its annual "Why Not Me?" campaign. The campaign asks caring adults two simple questions: "Why not you? Why not adopt an older child?" The campaign includes radio and television public service announcements.

The campaign's goal is to increase the number of children, especially older children and minority children, who are adopted. The number of children adopted from state care increased 43 percent during the first three years of the "Why Not Me?" campaign. Last fiscal year, 4,831 abused or neglected



*Alexis M. and her dog, Lucky*

children and teens were adopted from state care in Texas. Yet the need for safe and loving homes has not diminished - more than 6,000 children are still waiting.

"Another thing I've learned from my dog is not to give up," she says. "I never gave up the hope for a family. I was adopted when I was eight years old. We got Lucky soon after my adoption was final. I knew I would be here forever. Lucky helps me feel secure and reminds me that hard times won't last forever."

"Taking care of Lucky made me want to help other dogs. I've decided to become a veterinarian when I grow up. For now, I try to help any dogs I see that need help. So far, I've helped about six dogs find homes. Being at home for good is the best feeling you can have, whether you are dog or human."

To learn more about children who are hoping for loving homes, visit [www.adoptchildren.org](http://www.adoptchildren.org).

## Dual-Verified Homes

National studies indicate greater opportunities for successful adoptions when foster parents adopt because the children and their new parents have already formed a bond during the foster care placement. CPS makes a concerted effort to “dually verify” homes for both foster care and adoption. CPS recruits foster and adoptive families through national, state, and regional campaigns, and through the Texas Adoption Resource Exchange web site at [www.adoptchildren.org](http://www.adoptchildren.org).

Examples of recruitment efforts include:

- Foster Care Month activities in May across the state.
- Adoption Awareness Month activities in November: activities include mass adoption events created by working with juvenile courts, adoptive families, attorneys, and others to schedule clusters of hearings for finalizing adoptions.
- The “Why Not Me?” campaign uses advertising, news coverage, and community engagement to encourage families to adopt older children.
- Recruitment drives by partners such as child placing agencies and Heart Galleries, etc.

*For more information on dual-verified homes: DFPS Data Book, pages 165-167*

## Texas Adoption Resource Exchange

The Texas Adoption Resource Exchange (TARE) web site ([www.adoptchildren.org](http://www.adoptchildren.org)) is the department’s leading recruitment tool for prospective foster and adoptive homes. TARE’s most prominent feature is its photo-listing of Texas children awaiting adoption, which includes children’s photos, profiles, and videos. The site allows families who have already been approved to adopt through the verification process to express their interest about specific children. If families are not already verified, TARE allows them to research requirements, next steps, and express interest to begin the process of becoming a foster and/or adoptive home.

An additional TARE feature is the Adoption Family Network (AFN), a free, self-registration listing of adoptive families and individuals across the United States already approved for adoptions. Families can list their preferences for children they are willing to parent, and this information is available to CPS adoption staff through a searchable database.

TARE offers a toll-free, nationwide Adoption and Foster Care Inquiry Line (1-800-233-3405). The inquiry line receives about 2,500 to 3,500 calls a month from prospective foster care and adoptive families. The information

from these calls is forwarded to the appropriate regional staff to follow up with prospective families.

## Adoption Support Services

Adopted children who have suffered abuse or neglect often need help coping with the effects of these experiences and the loss of their birth families. Each CPS region contracts with private agencies to provide post-adoption services to adopted children and their families. These services include case management, mental health services, therapeutic services to children and families, parent training, support groups, and respite care for adoptive parents.

*For more information on adoption support services: DFPS Data Book, pages 67, 168-173*

## Services for Foster Youth Transitioning Out of Care

### Preparation for Adult Living

The Preparation for Adult Living (PAL) program helps make the transition to adulthood more successful for youth in foster care. PAL services include independent living assessments, time-limited financial help, and training in such areas as financial management, job skills, educational planning, and interpersonal skills. A statewide Youth Leadership Council meets quarterly to review policies and practices and submits recommendations to the DFPS Council and other decision-makers to improve services for children and youth.

*For more information on Preparation for Adult Living: DFPS Data Book, page 70*

### Education and Training Vouchers

The Education and Training Voucher (ETV) program provides additional funds to eligible youth after they leave CPS care and are going to school to help cover expenses such as rent, computers, day care, and transportation. This program supplements the state’s Preparation for Adult Living (PAL) program, as well as a tuition waiver program at state-funded universities, colleges, junior colleges, and vocational schools. The ETV program served 679 youth in FY 2009.

In 1993, the Texas Legislature exempted former foster youth from paying tuition and most fees at state-funded colleges, community colleges, universities, and vocational schools. Due to new legislation, students who were adopted through DFPS are also exempted. 73 students received waivers in the program’s first academic year in 1993, and since then the program has grown signifi-

cantly. The number of foster and adopted youth using the waiver increased from 1,689 foster and 197 adopted youth in academic year 2007 to 2,030 foster and 224 adopted youth in academic year 2008.

## Working with Partners

### Foster Parents and Child Placing Agencies

Foster parents and child placing agencies are integral partners in helping DFPS support the thousands of children in the department's managing conservatorship who have been abused or neglected and have nowhere else to turn. DFPS supports the statewide Texas Foster Family Association by providing Title IV-B, federal funds to help educate and retain foster parents.

DFPS also provides Title IV-B funds to the statewide Texas Council on Adoptable Children. In addition, DFPS funds local associations with Title IV-B funds. Training is one of the services these local associations provide. All training helps foster and adoptive parents better meet the needs of these children.

### Child Welfare Boards

DFPS works with the Texas Council of Child Welfare Boards (TCCWB), a statewide network of more than 2,000 volunteers appointed by county commissioners' courts to work in cooperation with CPS staff. Annually, child welfare boards distribute \$20 to \$30 million in county contributions to meet children's needs. DFPS works with TCCWB and others to develop resources, programs, and strategies to enhance services to vulnerable children and families. Leaders from the regional councils come together with DFPS staff in Austin three to four times yearly for educational programs and to share information and strategies that provide for the safety and well being of children.

### Greater Texas Community Partners

Greater Texas Community Partners supports two projects that help CPS caseworkers help their clients: Rainbow Rooms and Adopt-A-Caseworker. Rainbow Rooms, supported by community contributions, provide donated clothes, toys, formula, and supplies to caseworkers in a store-like setting. Adopt-A-Caseworker projects pair church and civic groups, businesses, and individuals with CPS caseworkers to help children. Participants donate items such as birthday gifts, household goods, bus passes, new clothes, gift certificates for children's meals, and money to pay for utilities. These unique public/private partnerships between DFPS and local community partner groups throughout Texas support 173 Rainbow Rooms and 320 adopted caseworkers at 43 sites.

## Texas Supreme Court

Once children are removed from their homes, courts play a critical role in determining their future and are the ultimate arbiter of what happens to these children. No child enters or leaves foster care without a court order. A judge decides where the child will live, with whom, and for how long. Every day, Texas courts decide whether a child goes home or to live with a relative, visits a sibling, or becomes eligible for adoption.

In November 2007, the Supreme Court of Texas created the Permanent Judicial Commission for Children, Youth, and Families as a high-level, multidisciplinary entity to coordinate and implement comprehensive efforts to improve child protection courts. The commission works toward ensuring better outcomes for children and families involved in the child-protection system. Commission membership includes judges, elected officials, attorneys, CPS, the Texas Health and Human Services Commission, Casey Family Programs, and other organizations.

In FY 2009, the Commission worked with the National Association of Counsel for Children to deliver 14 one-day training sessions across Texas. This free legal training on child abuse and neglect covered state and federal statutory material, case law, and best practices for attorneys ad litem, respondent parents' counsel, and other practitioners.

## Abuse and Neglect Fatalities

It is a great tragedy whenever a child dies because of abuse or neglect, and CPS has developed both internal and external mechanisms to review these fatalities. Citizen Review Teams, Child Fatality Review Teams, CPS child safety specialists, regional CPS child death review committees, and the state Child Safety Review Committee all review child deaths. While each entity reviews child deaths for unique purposes, a common goal is to help CPS and communities identify the causes of child fatalities and develop strategies, programs, and training to reduce the rate of preventable child deaths, as well as provide intervention services to families and children at risk.

*For more information on child abuse and neglect fatalities: DFPS Data Book, page 149*





# Adult Protective Services (APS)

## Responsibilities

- Investigate reports of abuse, neglect, and exploitation of adults in the community who are elderly or have disabilities and provide or arrange for protective services as needed.
- Investigate reports of abuse, neglect, and exploitation of persons receiving services in state operated and contracted settings that serve adults and children with mental illness or mental retardation.

## 2009 Accomplishments and Initiatives

### Response to U.S. Department of Justice Settlement

In 2005, the United States Department of Justice began investigating the conditions and practices at 13 Texas facilities for people with developmental disabilities. Although these facilities are operated by the Departments of Aging and Disability Services (DADS) and State Health Services, APS is responsible for investigating allegations of abuse, neglect, and exploitation at these facilities. In its June 2009 settlement with the State of Texas, DFPS was required to make changes in its investigation procedures, requiring completed investigations within 10 days instead of 14. In FY 2009, the Texas Legislature authorized APS to hire the additional staff needed.

### Improvements in Services to People with Mental Retardation

In Senate Bill 643, the 81st Texas Legislature made numerous improvements in the service delivery system for people with mental retardation. Most of the improvements were focused on services to people in state-operated intermediate care facilities. The bill made three changes affecting APS' role. The bill:

- Required APS to coordinate with the Health and Human Services Office of the Inspector General on investigations that may involve a criminal offense.
- Development of a database with DADS for reporting on abuse, neglect, and exploitation across multiple settings.

- Transferred responsibility for investigating abuse, neglect, and exploitation at privately run intermediate care facilities to APS in FY 2010.

APS began efforts in 2009 to work with partner agencies on making the rule and policy changes necessary to make these improvements.

### Public Awareness

In 2009, APS continued its public awareness campaign called "It's Everyone's Business." The main goals of the campaign are to enhance awareness about the problems of adult abuse, neglect, and exploitation, enlist community collaboration and support, and increase awareness of APS programs.

It's Everyone's Business targeted the general public, law enforcement, judicial partners, and organizations that provide services to vulnerable adults, and it addresses important issues in protecting older adults and individuals with disabilities. The campaign focused on adult abuse and neglect in May, which is Elder Abuse Awareness Month. Other specific issues were addressed throughout the year such as summer heat protection and financial exploitation prevention. In October 2009, APS launched a financial exploitation theme of "If It's Not Your Money, It's a Crime." You can learn more about APS public awareness activities at [www.everyonesbusiness.org](http://www.everyonesbusiness.org).



## Texas Partners for Adult Protective Services

APS enjoys a unique relationship with volunteers in communities across Texas. There are currently 23 local boards or coalitions in Texas that support the efforts of APS in their local communities. Volunteers who serve on these boards devote thousands of hours a year providing support services to APS clients and staff.

Texas Boards:

- Sponsor community events to raise funds to purchase items for APS clients such as fans in the summer and blankets in the winter.
- Assist APS staff with local conference planning to educate the public and other service providers about elder abuse issues.
- Provide their expertise as speakers for community events and training.
- Provide support in the way of recognition and appreciation events for regional staff.
- Stock and maintain emergency resource rooms in APS offices, giving APS worker easy access to basic necessities for clients in need.

Texas Partners for Adult Protective Services is the first statewide APS affiliated organization serving as a resource to APS and its clients. Texas Partners for Adult Protective Services became an official non-profit organization in October 2007. Its focus is to help improve the lives of adults who are abused, neglected, or exploited in Texas by developing resources and providing assistance to local boards who support APS. Local boards across Texas are able to affiliate with the statewide organization.

### APS Conference

APS held its 25th Annual APS Conference in San Antonio during November 2008. The conference attracted 515 registered participants from 13 states and two foreign countries. The silver anniversary conference included workshops such as “Tips on Testifying in Court,” “Forensic Wound Identification,” and “Solutions to Reduce Health Disparities in Hispanic Elders.” The APS Conference offers opportunities for DFPS staff members to network and learn with others who serve, treat, and represent victims of abuse, neglect, or exploitation. The annual conference is a major national training event that offers continued education credits to social workers and law enforcement.

### APS Services

APS serves adults who are age 65 and older, or who have a disability and reside in the community, and adults or children with mental illness or mental retardation who receive services in state operated and/or contracted settings,



or in unlicensed facilities. Two program areas serve APS clients: In-Home Investigations and Services, and Mental Health (MH) and Mental Retardation (MR) Investigations. APS works closely with the Texas Department of Aging and Disability Services on cases that require coordination and referral for guardianship services.

As the population of adults who are elderly or have a disability continues to grow, so does the need for protective services. APS workload increased in both programs in 2009. Many of these individuals live alone and depend on others for care.

*For more information on Texas population demographics: DFPS Data Book, pages 8, 119-124*

### In-Home Investigations and Services

The largest APS program area is In-Home Investigations and Services. The In-Home program investigates allegations of abuse, neglect, and exploitation of the elderly or adults with disabilities. Specifically, APS works with vulnerable adults who reside in their own homes or in room-and-board homes not subject to licensure. APS also investigates allegations of exploitation involving vulnerable adults living in nursing homes who may be financially exploited by someone outside the facility. State law requires anyone who believes that an elderly person or adult with a disability is being abused, neglected, or exploited to report it to the DFPS hotline at 1-800-252-5400 or online at <https://www.txabusehotline.org>.

An investigation begins with initial contact by phone or in person within 24 hours of receiving a report. When maltreatment is confirmed, APS may provide or arrange for emergency services to alleviate abuse, neglect, or exploitation. These services may include short term assistance, shelter, food, medication, health services, financial assistance for rent and utility restoration, transportation, and minor home repair. APS also refers clients to other social or community services including guardianship services at DADS.

*For more information: DFPS Data Book, pages 10-19, 119-124*

### **Mental Health/Mental Retardation Investigations**

APS is responsible for investigating abuse, neglect, and exploitation of people receiving services in state operated and/or certain contracted settings that serve adults and children with mental illness or mental retardation. Investigations are conducted in the following settings:

- State supported living centers, state hospitals, and state centers
- Community mental health and mental retardation centers
- Facility and community center contractors, including home and community-based waiver programs

APS initiates investigations after an allegation is reported to DFPS Abuse Hotline (also known as Statewide Intake), by notifying the facility within one hour, and notifying law enforcement within one hour if necessary.

*For more information: DFPS Data Book, pages 21-25, 125-127*



# Jacque Never Quits

## APS Helps Brave Woman Battle Adversity

As a young girl, it wasn't hard for Jacque to get around. In fact, she saw more of the world than many people see in a lifetime. Born in Hampton, Virginia to an Air Force family, she and her parents moved around a great deal, including many years hopping around Germany. Eventually, they settled in Wichita Falls where she later worked as a nurse and helped children with disabilities.

Then in 1998, she and four other people tried to transfer a patient who weighed more than 350 pounds. The patient fell on her, fracturing three of Jacque's vertebrae. Jacque endured nine back surgeries over the next several years, including three bone grafts, and had six titanium cages, two steel rods, and a nerve stimulator placed in her back.

Jacque spent the next four years in and out of a wheelchair and in 2003 she began to walk again with fewer problems. In 2005, after most of her surgeries were complete, Jacque decided to go back to school.

Although things were looking up, trouble lay ahead. She began having medical problems and her doctor prescribed a variety of medications, searching for an effective combination. After trying a different medicine in October 2008, Jacque had a severe reaction. She ended up paralyzed from the neck down and stayed that way for 10 days, unable to speak and suffering seizures. When she was discharged from the hospital Jacque had nowhere to go and no equipment to assist her. She was still paralyzed from the waist down, had limited use of her upper body, and communicated with great difficulty.

After seven weeks in a rehabilitation hospital and other facilities, Jacque went home but still couldn't walk and could not leave her home because it was not equipped with ramps. By the time Adult Protective Services (APS) was called, Jacque had spent three weeks essentially trapped in her own home, able to do little more than hope that a fire or other emergency would not occur.

With help from both APS and the local APS Partner Board, Jacque is now safer and much more independent. She moved to nearby Eastland, and the board helped Jacque purchase a wheelchair ramp and threshold so she can leave her home to continue physical therapy. Jacque hopes to walk again one day.

Jacque now has an associate's degree in computer information technology, and is close to earning a degree in business. She wants to go back to school, finish her coursework, and return to work. That is possible, thanks to APS and many others.





# Child Care Licensing (CCL)

## Responsibilities

- Regulate all child-care operations and child placing agencies to protect the health, safety, and well-being of children in care, largely by reducing the risk of injury, abuse, neglect, and communicable disease.
- Establish and monitor operations and agencies for compliance with licensing standards, rules, and law.
- Inform parents and the public about child care, including the histories of specific homes, child-care operations, and child-placing agencies in complying with minimum standards of care.
- Provide technical assistance to providers on meeting licensing standards, rules, and laws.

## 2009 Accomplishments and Initiatives

### Improving Texas Child-Care

The Committee on Licensing Standards was created by the 80th Texas Legislature to participate in the review of day care standards and evaluation of residential care standards. The committee had its first meeting on November 25, 2008 and provided two reports to the 81st Texas legislature. After the initial meeting the committee held 40 regional meetings across Texas to review child-care industry trends regulated by CCL.

After a preliminary review there was one trend in particular that stood out as an obvious and tragic pattern requiring urgent attention. In reviewing the child deaths that occurred between fiscal years 2004 and 2008, the committee found that 58 children died in child day care home-based settings that were not registered or licensed. The Committee on Licensing Standards' April 2009 Interim Report, posted on the DFPS web site at [www.dfps.state.tx.us](http://www.dfps.state.tx.us), provided several recommendations to support the ongoing efforts to end these tragic deaths.

The 81st Texas Legislature worked with DFPS and CCL to address the recommendations highlighted in the interim report. Several Texas House and Senate bills passed, including Senate Bill 1 that provided \$4 million in federal

economic stimulus funds for DFPS to invest in high quality child day care programs for infants and toddlers.

CCL hosted a full-day meeting on June 15, 2009 to gather input from stakeholders on creating a plan to use the allocated funds. The input received, combined with a review of licensing compliance and child death data, pointed to three primary areas to increase the safety of infants and toddlers in out-of-home care and to improve the quality of infant and toddler child care programs.

They are:

- Educating infant and toddler caregivers and their directors about safe sleep practices and beneficial infant and toddler care practices.
- Educating child care licensing inspectors to more effectively regulate infant and toddler care practices, and improve and facilitate the provision of technical assistance to child care directors and caregivers of infants and toddlers.
- Educating consumers on the importance of selecting regulated care, safe sleep practices, and improving communication with caregivers.

The plan for Improving the Quality of Infant and Toddler Child Care Programs focuses on improved education for both providers and consumers.

Provider education will include training on the unique and important physical, social, and emotional needs of infants and toddlers and better equip CCL staff with knowledge and tools to train, educate, and provide expanded technical assistance to child-care providers on quality infant/toddler care, and provide affordable and easily accessible online training for infant and toddler caregivers.

Consumer education will focus on educating parents of infants and toddlers on choosing quality regulated child-care, communicating with child-care providers and monitoring their child's well-being in care, and educating caregivers on safe-sleep practices.

### Initiatives Resulting from Legislation

The 81st Texas Legislative Session in FY 2009 was an important one for improving the safety and welfare of children in child care.

House Bill 3137 requires DFPS to develop a statement that lists the rights and responsibilities of foster parents in licensed and child-placing agency (CPA)-verified foster homes. CCL will develop a licensing standard that will list the foster parent rights and responsibilities and require CPAs to provide this information to foster homes.

Texas Senate Bill 68 made a number of important upcoming changes to the CCL program affecting definitions, exemptions, background checks, due process requirements, ex parte orders, emergency suspensions, and bars to obtaining a new license. The bill strengthened the oversight of licensed daycare operations and closed gaps in policy to ensure all child-care providers operate with a license.

Texas Senate Bill 95 prohibits day care centers and licensed and registered child-care homes from using unsafe children's products. CCL developed a tip sheet and certification form to help providers understand this requirement and mailed it to all providers.

Texas Senate Bill 572 requires child-care owners or workers who transport children who are chronologically or developmentally younger than age 9 to have at least two hours of annual training on transportation safety in addition to current training requirements. To facilitate the implementation of this requirement CCL developed a tip sheet for providers that include possible sources for training as well as information on how to develop training in-house. CCL will also develop a licensing standard specifying the new transportation training requirement.

### **H1N1 Response**

CCL in conjunction with the Department of State Health Services (DSHS) participated in the statewide effort to respond to the H1N1 flu (sometimes called swine flu) outbreak during the spring of 2009. CCL developed guidance and worked with providers and partners to respond to the need for child care during emergency response situations like the H1N1 flu and other infectious disease outbreaks. CCL helped ensure that child-care centers were aware and prepared for the H1N1 flu.

### **CCL Services**

CCL is responsible for protecting the health, safety, and well-being of Texas children who attend or reside in regulated child care operations. These operations include child-care centers, licensed and registered child-care homes, residential child-care operations, child-placing agencies, foster homes, adoptive homes, and maternity homes. CCL also licenses child-care administrators and child-placing agency administrators.



### **Regulating Child Care Operations**

CCL regulates three categories of child-care operations. They are: Listed Family Homes, Registered Child-Care Homes, and Licensed Operations (licensed child care centers and homes, 24-hour care residential care, and Child Placing Agencies).

#### *Listed Family Homes*

Listed Family Homes provide child care on a regular basis (at least 4 hours per day, 3 or more days a week, for more than 9 consecutive weeks) in the providers' own homes for 1 to 3 unrelated children. Providers are required to go through an application process that includes a criminal background check and issuance of a certificate. Listed Family Home providers must be at least age 18. However, there are no minimum standards, orientation, or training requirements. Listed Family Homes are not inspected unless DFPS receives a report alleging child abuse or neglect. CCL also investigates any home that is reportedly not properly listed or registered.

#### *Registered Child-Care Homes*

Registered Child-Care Homes provide care in the providers' own homes for as many as 6 children younger than age 14 and as many as 6 additional school-age children. The number of children allowed in a home is determined by the ages of the children. No more than 12 children, including the provider's children, can be in care at any time. Providers are required to go through an application process that includes completion of an orientation class and criminal background checks. DFPS issues a registration certificate after licensing inspectors complete an on-site inspection to ensure providers are meeting the minimum standards. Registered homes are inspected every one to three years. CCL will also inspect them if it receives a report related to child abuse or neglect or standards violations.

# Home Child-care Provider in Houston Glad to be Regulated



***Licensing Representative Juan Nava and child care provider Anna Armenta at her registered child-care home in Houston.***

When you meet or talk to Anna Armenta, you cannot mistake the passion and love she has for the children in her care. She refers to them as, “My kids.”

Who is Anna Armenta? She’s a mother of three who has been providing child care in her community for over 15 years. The ninth child in a single parent home with 14 children, Armenta learned to care for children at an early age. As her mother struggled to make ends meet, Armenta eventually became responsible for her younger siblings. Her mom was her greatest inspiration because she saw how hard she worked to provide for her family while also working to improve herself.

A couple of years ago, Armenta was chatting with one of her peers who also took care of children. The person warned her, “You better be careful because I got caught taking care of children without a permit.” Armenta responded, “What do you mean by a permit? I didn’t know I

need a permit to care for children in my home.”

And so began Armenta’s quest to find out how to get a permit. She borrowed an old copy of the booklet, “Minimum Standard Rules for Registered Child Care Homes,” which is put out by Child Care Licensing. As she put it, she starting reading it like her prayers had been answered. She had a hunger to learn more.

Armenta contacted the Houston Licensing office to find out what she needed to do to be regulated. She submitted her application for a registered child care home in July 2007 and her permit was issued September 2007. “I feel protected now for what’s right for children with regulation,” she said. “I wish I could be like a preacher and quote the different sections to parents as a preacher would do with Bible verses.”

Armenta said she doesn’t think all child care providers understand their true role in the lives of children in their care. “Usually, you will hear teachers say, ‘If only I could change one child.’ For me, I don’t change one child. It’s the family that am changing. When I do my job with the children in my care I will make it easier for their teachers to do their job when the get into school.”

When asked if there was one thing she would share with other providers, Armenta said, “If your heart is in taking care of children, look for education. It will help prepare you to do the best you could possibly do for children when you understand how important the first five years are. It’s overwhelming—the love, joy, and blessing the children give in return.”

Armenta said child care deserved more attention than it usually gets. “When my children were growing up and going to a career day, there was lots of information about other careers, but nothing about being a child-care provider,” she said. “If there is more awareness about our line of work, maybe we would get the respect we deserve.”

### Licensed Operations

All licensed operations must follow published standards and are routinely monitored and inspected. To become a licensed operation, a prospective provider must complete an application process that includes completion of an orientation class and criminal background checks. CCL issues a license after completing on-site inspections to ensure providers are meeting minimum standards. Licensed operations are inspected every 5 to 12 months or more often if there are reports of alleged child abuse or neglect or violations of state standards. Licensed operations include Day Care and 24-Hour Care.

### Child-Care Centers

Child-Care Centers serve 13 or more children younger than age 14 for less than 24 hours.

### Child-Care Homes

Child-Care Homes provide care for less than 24 hours per day for 7 to 12 children younger than age 14.

### 24-Hour Residential Care (where children live)

- Foster Family Homes provide 24-hour care for 6 or fewer children younger than age 18.
- Foster Group Homes provide 24-hour care for 7 to 12 children younger than age 18.
- Child-Care Institutions provide 24-hour care for 13 or more children younger than age 18 and for children who are fragile. These institutions include general residential operations that may provide various treatment services, emergency care services, or therapeutic camps.



- Maternity homes provide care for four or more minor and/or adult women and their children during pregnancy and/or during the six-week postpartum period, within a period of 12 months.

### Child-Placing Agencies

A child-placing agency (CPA) is a person, agency, or organization, other than the natural parents or guardian of a child, which places or plans for the placement of a child in a child-care facility, agency foster home, agency foster group home, or adoptive home. CPAs recruit and verify foster family homes, foster group homes, and/or adoptive homes. A child-placing agency is responsible for managing its verified homes and ensuring they comply with all applicable laws and minimum standards.

Child-placing agencies licensed by DFPS vary in both the size and scope of their operations. Some are very small agencies that offer only private adoption services. Others are multi-office organizations that offer adoption services, manage networks of foster parents, and provide treatment services to children placed in foster care. A large collection of licensed child-placing agencies serve as the state's foster care system, including privately licensed CPAs and Child Protective Services (CPS) which is also licensed as a CPA. These CPAs screen, approve, and manage foster homes as well as match children in the state's custody with foster homes and manage their care in those homes. Private CPAs play a critical role in the care of children in foster children.

*For more information: DFPS Data Book pages 71-97*

### Annual Report of Licensing Violations

Using standards, CCL strives to protect the basic health and safety of children in out-of-home care. The goal of the Child Care Licensing program is to appropriately and consistently enforce minimum standards for all types of operations statewide. The consistent enforcement of minimum standards should result in increased compliance



# State's Top 10 Standards Deficiencies for Day-Care Operations in FY09

Rank	Standard Rule*	Description	Non-Compliances	Category
1	746.1203(4)	Responsibilities of Caregivers- Supervision of Children	1,728	Caregiver
2	746.3701	Safety - Areas Free From Hazards	1,679	Safety
3	746.1201(1)	Responsibilities of Employees and Caregivers -Demonstrate Competency, Good Judgment, Self-control	1,463	Caregiver
4	746.3407	Maintenance of Building, Grounds and Equipment	1,334	Safety
5	746.5101(a)	Annual Fire Inspection - Before Provisional Issued and Every 12 Months	1,204	Safety
6	745.615(a)(3)	Required background checks-any persons counted in the Child/Caregiver Ratio, including volunteers	1,069	Record Keeping
7	745.615(a)(2)	Required background checks-employees and applicants you intend to hire	1,002	Record Keeping
8	747.3501	Safety - Areas Free From Hazards	997	Safety
9	745.615(b)(3)(c)	Required FBI background checks, Child Care Centers-any persons counted in the Child/Caregiver Ratio, including volunteers	936	Record Keeping
10	746.1601	Child/Caregiver Ratio - 13 or More Children	849	Caregiver

\* Only includes deficiencies where administrative review was upheld or waived.

Note: Does not include assessment deficiencies.

## Violations by Category

Category	Violations Cited
Safety	5,214
Caregiver	4,040
Record Keeping	3,007
Total	12,261

from child-care operations and provide stronger protections for children in care.

The regulation of child-care facilities and child placing agencies routinely presents two challenges for licensing staff and permit holders alike: consistency in interpretation of minimum standards and consistency in enforcement decisions and actions. CCL analyzes trends in

licensing standards violations cited statewide and regionally to get a better idea of the technical assistance needed by providers during the next fiscal year.

### Child Care Violation Trends

The statewide trends table of the top 10 standards deficiencies for day-care operations is derived from analysis of standard violations cited during FY 2009. The most frequently cited violations have been categorized into three distinct groups for the purpose of trend analysis: safety violations, record keeping, and caregiver responsibilities. Safety violations represented 5,214 of violations cited or 43 percent of the total, caregiver responsibility violations accounted for 33 percent of the total, and record keeping violations accounted for 25 percent of the total. (Regional trend data is available upon request.)

# Top 10 Standards Deficiencies for Residential Care Operations in FY09

Rank	Standard Rule*	Standard Description	Non-Compliances	Category
1	749.607(1)	Employee general responsibilities- demonstrate competency, prudent judgment, self-control in presence of children and when performing assigned tasks	167	Caregiver
2	745.625(a)(7)	Background checks submitted- every 24 months after first submitted	150	Record Keeping
3	748.507(1)	Employee general responsibilities - demonstrate competency, prudent judgment, self-control in presence of children and when performing assigned tasks	110	Caregiver
4	748.3301(a)	Physical site- buildings must be structurally sound, clean, and in good repair. Paints must be lead-free	105	Safety
5	749.1953(a)	Corporal punishment- may not use/threaten corporal punishment, such as hitting/spanking, forced exercise, holding physical position, unproductive work.	88	Caregiver
6	748.685(a)(4)	Caregiver responsibility- providing the level of supervision necessary to ensure each child's safety and well-being	80	Caregiver
7	749.2593(a)(3)	Supervision- caregiver is responsible for ensuring each child's safety and well being, including auditory and/or visual awareness of the child	73	Caregiver
8	745.615(a)(8)	Required background checks- each person over 14 years or older, who will regularly or frequently be present while children are in care	72	Record Keeping
9	749.3041(3)	Physical Environment- foster home must ensure that equipment and furniture are safe for children, kept clean, and in good repair	62	Safety
10	748.3391(a)	Bathrooms-Must be maintained in good repair & kept clean	60	Safety

\* Only includes deficiencies where administrative review was upheld or waived.

Note: Does not include assessment deficiencies

## Violations by Category

Category	Violations Cited
Safety	227
Caregiver	518
Record Keeping	222
Total	967

## Totals - Day Care and Residential Care Combined

Category	Violations Cited	Percentage
Safety	5,441	41%
Caregiver Responsibility	4,558	35%
Record Keeping	3,229	24%
Total	13,228	100%

## **Residential Care Violation Trends**

The statewide trends table of the top 10 standards deficiencies for residential-care operations is derived from analysis of standard violations cited for operations during FY 2009. The most often cited violations were categorized into three distinct groups for the purpose of trend analysis: safety violations, record keeping, and caregiver responsibilities. Caregiver responsibility violations represented 518 of violations cited or 54 percent of the total, safety violations accounted for 23 percent of the total, and record keeping violations accounted for 23 percent of the total.

Residential Child Care Licensing (RCCL) is a statewide program that is not divided into regions. Therefore, a regional analysis of violation trend data was not performed for residential operations.

## **Addressing Violation Trends with Technical Assistance**

It is important to note that these violations were cited in various types of inspections. Some were cited during unannounced, routine monitoring inspections, some in response to a complaint concerning a specific incident, and others during targeted, follow-up inspections.

Emphasis is placed on providing technical assistance to providers concerning these licensing standards. In addition, the data is shared with all management staff and field trainers to promote awareness of the need to provide targeted technical assistance to providers in an effort to improve compliance.

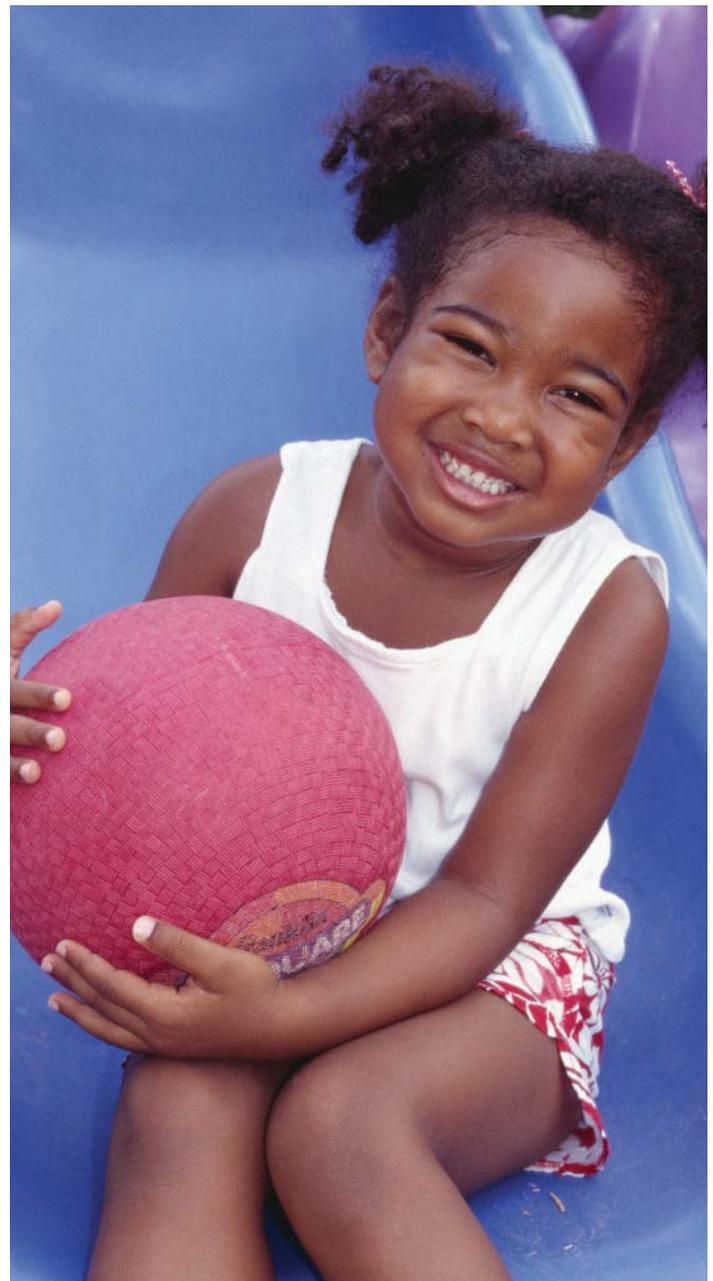
## **Quality Assurance**

The CCL Investigation Division oversees all licensing investigation policy and training and provides consultation and technical assistance on investigations associated with a higher risk of harm to children. The CCL Performance Management Division performs quality assurance activities. These include early identification of compliance histories that present a higher risk of harm to children and providing field staff with objective analysis and recommendations for action to ensure the safety of children in care. Case reviews and analysis from both divisions are used to identify trends and develop recommendations for training, program structure, policy, and practice to improve the quality and consistency of monitoring and investigations.

## **Training**

To continue to enhance the quality of child-care regulation, CCL district representatives, investigators, supervi-

sors, directors, and clerical staff received approximately 978 hours of training and professional development on work-related issues. These include child development, automation support, regulation and inspection of operations, and health and safety issues. At the same time, CCL staff provided more than 260 training events for almost 12,000 caregivers. The topics included minimum standards, health and safety, infant and toddler needs, guidance, discipline, staff to child ratios, and child development. During the same period, CCL conducted 436 orientation sessions for 7,434 participants. These meetings give an overview of the licensing process, including steps required to complete an application and obtain a permit to operate in Texas.





# Prevention and Early Intervention (PEI)

## Responsibilities

- Work with Texas communities to develop services to prevent child abuse and neglect, delinquency, running away, and truancy.
- Plan, develop, and administer a comprehensive, unified approach to delivering prevention services to avoid fragmentation and duplication.
- Make prevention and early intervention services more accountable by demonstrating the effectiveness or public benefit of programs.

## 2009 Accomplishments and Initiatives

### New Programs Implemented

In FY 2009, PEI implemented the Community Based Family Services (CBFS) program to help reduce and prevent child abuse and neglect. This program serves families that were investigated by CPS, the allegations were unsubstantiated, and yet the risk of abuse and neglect still exists. It provides community and evidence-based services that include home visitation, case management, and additional social services to provide a safe and stable home environment.

### Interagency Collaboration

PEI led the Interagency Coordinating Council (ICC) for Building Healthy Families during FY 2009 as directed by House Bill 662 of the 80th Texas Legislature. The collaborators completed a comprehensive evaluation of the effectiveness and cost efficiency of state-funded prevention services carried out under contract with the University of Houston, and the final ICC report to be submitted in FY 2010.

Interagency collaboration also contributed to the planning effort for the annual Partners in Prevention Training Conference, and the development of the Keep Me Safe and Sound community outreach and awareness campaign, both addressed later in this section.

## PEI Services

PEI contracts with community-based agencies and organizations to provide services to prevent the abuse, neglect, delinquency, and truancy of Texas children. Services are voluntary and provided at no cost to partici-

pants. However, all services are not available in all Texas communities. To find out if services are available in your community, look under Prevention and Early Intervention on the DFPS web site at [www.dfps.state.tx.us](http://www.dfps.state.tx.us).

*For more information: DFPS Data Book pages 99-107*

## Community Youth Development (CYD)

The CYD program contracts with community-based organizations to develop juvenile delinquency prevention programs in ZIP codes with high juvenile crime rates. Approaches used by communities to prevent delinquency have included mentoring, youth employment programs, career preparation, and alternative recreational activities. Communities prioritize and fund specific prevention services according to local needs. CYD services are available in 15 targeted Texas ZIP codes. In FY 2009, 19,390 youth received services through the CYD program.

## Services to At-Risk Youth (STAR)

The STAR program contracts with community agencies to offer family crisis intervention counseling, short-term emergency respite care, and individual and family counseling. Youth up to age 17 and their families are eligible if they experience conflict at home, truancy or delinquency, or a youth who runs away from home. STAR services are available in all 254 Texas counties. Each STAR contractor also provides universal child abuse prevention services, ranging from local media campaigns to informational brochures and parenting classes. In FY 2009, 29,406 youth received services through the STAR program.

## Statewide Youth Services Network

The Statewide Youth Services Network contracts provide community and evidence-based juvenile delinquency prevention programs focused on youth ages 10 through 17, in each DFPS region. In FY 2009, 6,548 clients received services through the Statewide Youth Services Network funded programs.

## Texas Families: Together and Safe (TFTS)

TFTS funds evidence-based, community-based programs to alleviate stress and promote parental competencies and behaviors that increase the ability of families to become self-sufficient and successfully nurture their children.

The goals of TFTS are to:

- Improve and enhance access to family support services.
- Increase the efficiency and effectiveness of community-based family support services.
- Enable children to stay at home by providing preventative services.
- Increase collaboration among local programs, government agencies, and families.

In FY 2009, 3,122 families received services through the TFTS program, which includes 3,040 families in which the primary caregiver received services.

### Texas Runaway and Youth Hotlines

The toll-free Texas Runaway Hotline and the Texas Youth Hotline offer crisis intervention, telephone counseling, and referrals to troubled youth and families. Volunteers answer the phones and interact with callers facing a variety of problems including family conflict, delinquency, truancy, and abuse and neglect issues. The program increases public awareness through media efforts that may include television, radio, billboards and other printed materials. Hotline telephone counselors received 13,072 calls during FY 2009. (A technical problem with AT&T's system prevented inclusion of call volume data from the Texas Youth Hotline.)

- Texas Runaway Hotline - [www.texasrunaway.org](http://www.texasrunaway.org) or 1-800-580HELP.
- Texas Youth Hotline - [www.texasyouth.org](http://www.texasyouth.org) or 1-800-98YOUTH.

### Community-Based Child Abuse Prevention (CBCAP)

The CBCAP program seeks to increase community awareness of existing prevention services, strengthen community and parental involvement in child abuse prevention efforts, and encourage families to use the services that are already available. CBCAP funds a variety of contracts with community based organizations to provide child abuse and neglect prevention services. These include the Relief Nursery, Community Partnerships for Strengthening Families, Family Support and Rural Family Support programs, as well as various special initiatives and public awareness campaigns as noted in other sections of this report. In FY 2009, 180 families received services through CBCAP funded programs.

### Tertiary Child Abuse Prevention

Community-based, volunteer-driven prevention, intervention, and aftercare services are provided for children



who have been or are being abused or neglected, or are at risk of future abused or neglect. The goals of the program include reducing child maltreatment and the number of families re-entering the Child Protective Services system. Additional goals are to improve the quality and availability of aftercare services for abused children and enhance a statewide network of tertiary child abuse prevention programs. In FY 2009, 32 families received services through the Tertiary Child Abuse Prevention program.

### Family Strengthening

A variety of Family Strengthening services that are available statewide have been evaluated and proven to effectively increase family protective factors. These services are provided to increase the resiliency of families and prevent child abuse and neglect. Programs must also foster strong community collaboration to provide a continuum of family services. In FY 2009, 1,200 families received services through the Family Strengthening program.

### Youth Resiliency

Youth Resiliency Programs provide services proven to increase protective factors for youth. A variety of services are available across the state to increase youth resili-

ency and prevent juvenile delinquency. These programs must foster strong community collaboration to provide a continuum of services for participating youth. In FY 2009, 1,895 clients received services through the Youth Resiliency program, which includes 1,654 children at-risk.

### PEI Child Abuse Prevention Special Initiatives

In FY 2009, DFPS created the third annual prevention calendar for families across the state titled “The Parenting Toolkit: Building Strong Families.” The calendar provided caregivers practical advice on safety, communication, managing stress, setting limits, and more. The calendar is consistent with prior assessments of the most effective strategies for prevention outreach. These assessments indicate the best approach is to directly target families with user-friendly outreach materials that provide concrete tools parents can use to strengthen their parenting skills. PEI distributed nearly 500,000 calendars to approximately a thousand agencies, contractors and partners across Texas, including:

- More than 250 social-service providers.
- Licensed child-care facilities, child welfare boards and child advocacy centers.
- Elementary and secondary schools and Head Start programs.
- Women, Infants, and Children (WIC) offices in many locations.
- Local churches and medical facilities.

English and Spanish versions of the calendar were made available for free download at [www.itsuptoyou.org](http://www.itsuptoyou.org). The calendar was endorsed by the Texas Pediatric Society and the Texas Chapter of the American Academy of Pediatrics.

### Partners in Prevention Training Conference

Each year, DFPS hosts the Annual Partners in Prevention Training Conference in Central Texas. The conference brings together social service professionals, parents, advocates, educators, law enforcement professionals, child care professionals, community leaders, and faith leaders interested in improving programs and sharing expertise. The conference is open to prevention and early intervention agencies that contract with DFPS and other prevention service providers and interested parties. The conference was planned in collaboration with the Office of the Attorney General, Texas Department of State Health Services, Texas Department of Assistive and Rehabilitative Services, Texas Youth Commission, Texas Education Agency, Texas Health and Human Services Commission, Center for Substance Abuse Prevention, Texas Department of Aging and Disability Services, Texas Juvenile Probation

Commission, Texas Department of Housing and Community Affairs, and the Texas Workforce Commission. More than 300 people attended the Partners in Prevention Conference in November 2008.

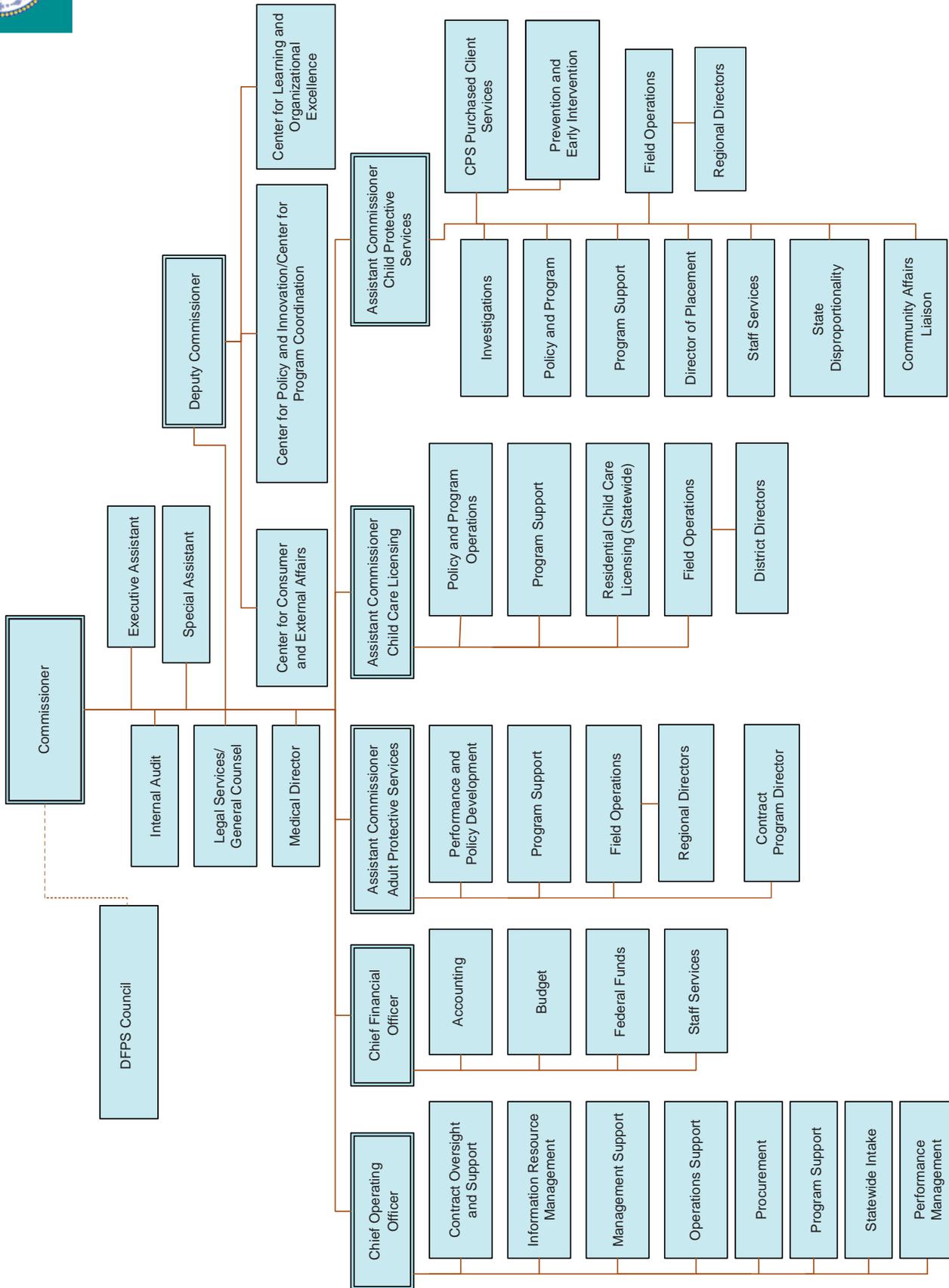
### Public Awareness Campaigns

During FY 2009, PEI and other DFPS divisions developed public awareness campaigns targeting child safety. Those efforts included the Keep Me Safe and Sound campaign, an effort to address factors associated with Sudden Infant Death Syndrome and other unexplained infant death. The community-based campaign, focused particularly on safe sleeping, was developed in collaboration with the Texas Department of State Health Services. The campaign began with distribution of a fact sheet titled “Safe Sleep for Babies.” A train-the-trainer curriculum will be utilized in three target counties during FY 2010 to make information available through trusted community partners. This and other DFPS public awareness campaigns may be found at [www.dfps.state.tx.us](http://www.dfps.state.tx.us).





# DFPS Organizational Chart







# Hotlines and Online Resources

**Texas Abuse Hotline: 1-800-252-5400 or [www.txabusehotline.org](http://www.txabusehotline.org)**

Report abuse, neglect, or exploitation of children, the elderly, or people with disabilities

**APS Facility Investigations: 1-800-647-7418**

Report abuse, neglect, or exploitation in facilities

**Foster Care and Adoption Inquiry Line: 1-800-233-3405**

Provides information on how to become a foster or adoptive parent

**Child Care Information: 1-800-862-5252**

Delivers information about child care in Texas

**Office of Consumer Affairs 1-800-720-7777**

Make an inquiry about an existing DFPS case or make a complaint

**Texas Runaway Hotline: 1-888-580-HELP**

Provides peer counseling to runaways and family members

**Texas Youth Hotline: 1-800-98YOUTH**

Provides peer counseling to youth and family members for family conflicts, delinquency, truancy, and running away

**DFPS Web Sites**

<a href="http://www.dfps.state.tx.us">www.dfps.state.tx.us</a>	Texas Department of Family and Protective Services (DFPS)
<a href="http://www.txabusehotline.org">www.txabusehotline.org</a>	Report abuse, neglect, or exploitation of children, the elderly, or people with disabilities
<a href="http://www.adoptchildren.org">www.adoptchildren.org</a>	Adopt children through the Texas Adoption Resource Exchange
<a href="http://www.texasrunaway.org">www.texasrunaway.org</a>	Texas Runaway Hotline
<a href="http://www.texasyouth.org">www.texasyouth.org</a>	Texas Youth Hotline
<a href="http://www.itsuptoyou.org">www.itsuptoyou.org</a>	Child Abuse Prevention
<a href="http://www.everyonesbusiness.org">www.everyonesbusiness.org</a>	Adult Abuse Prevention
<a href="http://www.txchildcaresearch.org">www.txchildcaresearch.org</a>	Search Texas Child Care
<a href="http://www.volunteerdfps.org">www.volunteerdfps.org</a>	Become a DFPS Volunteer
<a href="http://www.seeandsave.org">www.seeandsave.org</a>	Safety for children around water or in cars
<a href="http://www.texasyouthconnection.org">www.texasyouthconnection.org</a>	Resources for youth in foster care

**DEPARTMENT ADDRESS**

Texas Department of Family and Protective Services  
(512) 438-4800

**MAILING:**

P.O. Box 149030  
Austin, TX 78714-9030

**PHYSICAL**

701 W. 51st St  
Austin, TX 78751





Texas Department of Family and Protective Services

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