Senate Bill 6
180-Day Progress Report

A Report From
The Texas Health and Human Services Commission
and
The Department of Family and Protective Services
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Executive Summary

Senate Bill 6, passed by the 79th Texas Legislature and signed by Governor Rick Perry, laid the groundwork for comprehensive reform of child and adult protective services in Texas. Resources and direction were put in place to transform the programs charged with protecting children and people who are elderly or have disabilities from abuse, neglect, and exploitation. In the first year since Senate Bill 6 came into effect, these sweeping reforms have yielded tremendous improvement in the services that protect the most vulnerable Texans.

Since the legislation’s passage, the state has hired more than 1,900 new protective services staff, strengthened training for caseworkers, improved risk assessments, and deployed technological innovations to enhance casework in the field. Child Protective Services (CPS) has increased kinship placements for children who must be removed from their homes. The number of child safety specialists has increased, resulting in more high-risk cases being assessed for continued child safety. CPS now offers a comprehensive program that provides financial assistance, child care resources, and additional support to relatives who care for children in the state’s conservatorship. Youth aging out of foster care are now provided with continuous Medicaid coverage through a single application process up to the age of 21.

Adult Protective Services (APS) has implemented a risk assessment tool that more accurately identifies clients’ needs during the investigation. APS is assigning complex cases to experts in abuse, neglect and exploitation resulting in more thorough assessments. APS staff is working with special task units in large counties to maximize problem-solving skills and community resources for clients in complex investigations. Tablet personal computers (PCs) were distributed to APS caseworkers so that, from the field, they can document investigations and share on-site observations electronically with supervisors.

Child Care Licensing (CCL) now conducts random inspections of all foster family and foster group homes, including DFPS foster homes, to ensure they are meeting minimum standards. Background checks are now required prior to employment at a residential child care operation, and drug testing is required of all residential child care employees.

As part of the ongoing legislative oversight, Section 5.01 of Senate Bill 6 requires the Texas Health and Human Services Commission (HHSC) to submit a detailed progress report to legislative leadership every 180 days after the effective date. This report, due September 1, 2006, is the second progress report.

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

**Vulnerable Adults**

- Transferred the APS guardianship program to the Department of Aging and Disability Services. Final rules related to the DADS guardianship program will be published for adoption as of September 1, 2006.

- Implemented a new APS risk assessment tool that improves the evaluation of a client’s living condition, medical status, mental status, financial status, and social support system. An independent evaluation of the tool concluded that it is effective in identifying risk.

- Hired all 89 newly appropriated APS staff, employed hiring specialists in each region, and instituted a pre-screening test and realistic job preview.

- Assigned complex cases to experts in abuse, neglect, and exploitation.

- Developed a performance management system that allows supervisors to generate daily reports that assist with monitoring caseloads and quality of casework.

- Implemented new, comprehensive APS training that includes advanced training on mental health and self-neglect and emphasizes working with community organizations, law enforcement, and courts.

- Provided tablet PCs and digital cameras to all direct delivery staff in the APS in-home and facility programs.

- Launched a year-long public awareness campaign in May 2006, which included public service announcements and educational materials.

- Hired APS community initiative specialists in each region to make civic connections and mobilize volunteers.

- Made an education stipend available to all APS staff. The stipend encourages caseworkers to attain a higher level of education in APS-related fields and encourages workforce retention.

**Children and Families**

- Hired 1,778 CPS staff (caseworkers, supervisors and clerical support staff) from September 2005 through June 2006.

- Developed a new investigation model, which includes a stronger risk assessment instrument, new screening procedures for lower priority cases, and training to recognize and respond to high-risk cases.
• Hired 131 abuse and neglect special investigators, 43 child safety specialists, and seven lead child safety specialists to assist with CPS investigations and training.

• Expanded training for CPS caseworkers to include working with law enforcement, conducting forensic investigations, gathering evidence, upholding fourth amendment rights, drafting affidavits, and testifying in court.

• Implemented new processes to better screen job applicants to assess their ability to perform effectively in CPS caseworker positions.

• Completed CPS pilot programs for five-day response times for Priority 2 investigations and for 24-hour casework documentation.

• Expanded the statewide kinship program, which provides initial start-up funds and financial assistance to help relative families with child-caring expenses.

• Increased kinship placements since the inception of the family group decision-making model.

• Started pilot programs in Houston, Arlington, and Fort Worth to address the disproportionate representation of minority children in the child protective system and specifically in foster care.

• Implemented continuous Medicaid coverage though a single application process until age 21 for youth who age out of foster care.

• Announced the first region for outsourcing substitute care services, released the final Request for Proposals for the independent administrator, and formed a regional outsourcing transition advisory committee in San Antonio.

• Developed education portfolios for every school-aged child in care to improve educational outcomes and to ensure that school records follow each child through placement changes.

• Released the final Request for Proposals for a comprehensive medical, behavioral health, and dental network for children in foster care.

• Conducted a tablet PC pilot with direct delivery staff in the CPS investigations and family-based safety services programs.

**Licensing and Regulation**

• Adopted rules in December 2005 requiring background checks prior to employment, training on prone restraints, and drug testing in residential child care operations.
• Implemented periodic random inspections of DFPS foster homes and group foster homes.

• Strengthened minimum standards for residential child care facilities and child-placing agencies.

• Conducted a tablet PC pilot with direct delivery staff in the residential child care licensing investigations program.

DFPS has developed and is implementing an agency-wide accountability and performance management system. The system includes client-centered outcome measures, job performance standards, case reviews, and improved performance reports for management oversight. Case quality and timeliness goals are being consistently integrated into the performance evaluations of all staff.

Both the CPS and APS programs have made tremendous progress since the passage of Senate Bill 6. However, these programs have encountered some obstacles to full implementation. CPS has experienced higher caseloads in the substitute care program due to the increase in the number and quality of abuse and neglect investigations. Other elements of CPS reform, such as the kinship care program, statewide expansion of family group decision-making conferences, and implementation of medical consent for children have also contributed to the increasing workload of substitute care staff. HHSC and DFPS are working together to develop strategies to address these increased caseloads and other workload demands.

Another challenge has resulted from DFPS’ successful efforts to quickly fill new staff positions appropriated by the 79th Legislature. DFPS is hiring record numbers of new caseworkers, leading to an increased demand for training resources, office space, and proper equipment for all staff members. DFPS has been coordinating with HHSC, the Texas Building and Procurement Commission, and necessary technology equipment vendors to address these issues in bringing on board 2500 new employees and associated equipment.

Despite some obstacles, which are to be expected in a reform effort of this size and scope, the overall implementation of Senate Bill 6 has been highly successful after this first year. HHSC and DFPS established a structure to monitor progress, coordinated with internal and external stakeholders, and ensured the delivery of quality services. The reforms have been driven by a focus on the most vulnerable of Texans, with their safety and well-being as the criterion against which the success of the reform effort is measured.
Introduction

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

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

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

Senate Bill 6 specifies that each 180-day report address the following elements:

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

Following the passage of Senate Bill 6, HHSC and DFPS expanded the reform initiatives structure to include all provisions of Senate Bill 6. The reform structure was organized into 24 distinct projects chartered by DFPS and managed by cross-agency executive level
staff. In addition, a joint charter between DFPS and DADS was developed for oversight of the transition of the APS guardianship program. A brief description of each project is included in the Appendix.

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

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

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

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

The sections that follow review the major achievements of reform, including those listed in the first progress report on March 1, 2006, as well as achievements since that time:

Vulnerable Adults

- Improving Structure and Practice
- Increasing Capacity
- Working Effectively With Community Partners
Children and Families

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

Licensing and Regulation

- Ensuring Child Safety
- Regulatory Action

The final sections of the report discuss implementation obstacles, funding issues, and the accountability systems that will impact the ultimate success of Texas’ reform effort.
Achievement Status of Major Reforms: Vulnerable Adults

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

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

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

Improving Structure and Practice

Guardianship Program Transfer

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

The transfer of guardianship responsibilities to DADS has reinforced DFPS' primary role of investigating and serving adults in need of protection. DADS' expertise with long-term services and support programs for persons who are older and adults with disabilities makes it the appropriate agency for assuming guardianship responsibilities. Transferring this program removes any appearance of conflict of interest for DFPS staff in assessing and providing services for individuals in need of guardianship. As a result of coordinated
DADS and DFPS efforts, the transfer of the guardianship program was completed on September 1, 2005, with no disruption in services to individuals served.

**Major Achievements/Milestones First 180 Days**

- On September 1, 2005, the guardianship program was statutorily transferred to DADS. Operational authority was previously transferred through a Memorandum of Understanding effective December 1, 2004.

- An organizational structure was developed to ensure consistent statewide operation of the guardianship program at DADS. Additionally, a state office guardianship attorney and seven regional guardianship attorney positions were created to provide legal support for the program.

- A quality assurance program was established within the DADS guardianship program.

- A community outreach plan was implemented to ensure that all ancillary parties to the transfer were aware of legislative requirements. Letters were sent to all judges with probate jurisdiction (statutory probate, county courts, and county courts at law), to all county and district attorneys, and all county clerks. APS regional directors and DADS guardianship supervisors jointly visited most probate courts having significant numbers of guardianship cases to discuss the transition and respond to questions. Letters were sent to all major DADS external stakeholders updating them on the transition.

- Five existing contracts with private guardianship programs were transferred to DADS and extended through the end of fiscal year 2006.

- The guardianship handbook was revised to reflect changes in policy and practice.

- A new Memorandum of Understanding (MOU) between DADS and DFPS, replacing the MOU governing the transition period, was signed in January 2006, and interagency initiatives continue to ensure cooperation and communication.

- A workgroup of DFPS and DADS staff continues to ensure coordination of policy between the two agencies and will address any new issues that may arise over time.

**Major Achievements/Milestones Second 180 Days**

- DADS and the Texas Guardianship Association (TGA) co-sponsored a guardianship conference on April 27, 2006, which focused on topics relevant to individuals from the courts, local and state guardianship programs, and private professional guardians in Texas. Approximately 200 people attended, making it the largest TGA conference to date.
• A DADS data management system to provide staff with information necessary for effective operation was implemented. The initial version of the system was deployed in April 2006, and planning for refinements and enhancements to the system have begun.

• A new contract payment system to reimburse local contractors is in development and will replace the payment mechanism through DFPS' automated case management system.

• Guardianship rules were presented to the DADS Council on May 3, 2006. Final rules for the DADS guardianship program will be published for adoption on September 1, 2006.

• Monitoring visits of contracted programs are being conducted using existing protocols. A comprehensive quality assurance program is being developed that includes standards for future contract monitoring.

• Quality assurance visits are being conducted in each region to obtain baseline information on the performance of DADS regional guardianship staff. This information will help develop the standards by which staff will be evaluated.

• An expanded training program for new DADS guardianship staff was implemented, a training protocol for new regional supervisors (including classroom instruction and partnering with experienced supervisors) was developed, and plans for ongoing refresher training were created.

• Twenty-eight guardianship staff became registered guardians through the National Guardianship Foundation. One staff member achieved the designation of Master Guardian, becoming the second Master Guardian in Texas.

• An evaluation of the current assessment process and procedure, as well as a feasibility study of alternatives, is being conducted to ensure accurate assessment of a person’s need for guardianship.

• The DADS and DFPS guardianship workgroup was chartered in June 2006. The charter outlines the goals and objectives of the guardianship workgroup.

Quality Assurance and Performance Management

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

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

**Major Achievements/Milestones First 180 Days**

- Client-centered outcome measures were developed using qualitative and quantitative data.

- APS staff developed minimum job performance standards for caseworkers, supervisors, self-neglect and exploitation experts, quality assurance case readers, and regional support staff. APS is completing job performance standards for all other personnel.

- A performance management database was developed that enables APS supervisors to monitor caseworker performance.

- Five case readers were hired to measure case quality. These staff read and score cases using a standardized instrument. Scores are then tabulated and reported to regional and state office management for consultation with local unit supervisors, managers and caseworkers.

- Supervisory review of recidivistic cases was initiated. Supervisors are now responsible for reviewing recidivistic cases and assisting the caseworker with a long-term plan to resolve the issues involved in such cases.

- The first quarter performance report was submitted to the Governor and legislative leadership on February 1, 2006.

**Major Achievements/Milestones Second 180 Days**

- APS supervisors were trained on the new APS Performance Management System. The focus of the training was to orient supervisors on how to integrate quantitative data and quality assurance case reading into their management of cases and staff. APS supervisors now have daily reports available online to monitor caseloads and case quality.

- The third quarter performance management report was submitted to Governor Perry and legislative leadership on August 1, 2006.

**Complex Cases**

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

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

Major Achievements/Milestones First 180 Days

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

Major Achievements/Milestones Second 180 Days

- In June 2006, subject matter experts attended training in Houston, with the goal to develop advanced skills in the areas of exploitation and serious self-neglect. National experts in the fields of exploitation and self-neglect provided the training.
- APS is identifying cases for a comparison reading of those with subject matter expert involvement, versus those without, to assess client outcomes.

Recidivistic Cases

Section 2.12 requires APS supervisors to review all cases involving clients about whom there have been two previous allegations of abuse, neglect, or exploitation.

Supervisors designate these as recidivistic cases and assist caseworkers in the investigation of the third report and the development of a long-term plan for resolving the client’s issues. Though the provision for complex cases is designed to reduce recidivism, this policy addresses recidivistic cases by requiring management review and the creation of a long-term plan to address the needs of clients with multiple or intractable problems.

Major Achievements/Milestones First 180 Days

- Policy on recidivistic cases was developed and released to APS staff on January 24, 2006.
Major Achievements/Milestones Second 180 Days

- Policy and practice fully implemented; no further achievements to report.

Risk Assessment

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

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

Major Achievements/Milestones First 180 Days

- A risk assessment tool known as the Client Assessment and Risk Evaluation (CARE) tool was developed and examines five areas of the client’s circumstances: Living Conditions, Financial Status, Physical/Medical Status, Mental Status, and Social Interaction/Support.

- In spring 2005, several regions piloted the paper-based CARE tool, with electronic use on tablet PCs beginning in June 2005.

- On May 29, 2005, the CARE tool was fully implemented into the DFPS automated case management system.

Major Achievements/Milestones Second 180 Days

- DFPS and HHSC contracted with the University of Texas (UT) to evaluate the CARE tool and the Center for Social Work Research submitted its final report. The evaluation found that the CARE tool is effective in identifying risk; however, additional research was recommended in order to evaluate client outcomes based on service plans derived from the CARE tool.

- The CARE tool is included on the tablet PC as one of several data entry pages used in the Mobile Protective Services (MPS) application. This application allows APS caseworkers to complete the CARE form in the field and then transfer the information to the automated case management system at a later time.

- DFPS developed a rule establishing the risk assessment criteria. The DFPS Council recommended adoption of the rule at the July 2006 Council meeting.
Emergency Orders for Protective Services

Section 2.16 expands the list of professionals who may provide reports that support emergency orders for protective services when a physician is unavailable. These reports are used when clients are alleged to be suffering from abuse, neglect, or exploitation, which presents a threat to life or physical safety. Under this section, professionals such as nurse practitioners, psychologists and clinical social workers offer the opinion that under the circumstances, a temporary order of emergency services without the person’s consent is necessary. If the emergency order is based on a report from someone other than a physician, a physician must provide a written assessment to the court within 72 hours concerning the client’s capacity to consent to services. This section also allows emergency protective orders to be extended for 30 days, rather than the 14 days previously allowed. A physician’s report must be obtained to request the extension.

By enabling other professionals to assess clients for the purposes of emergency orders, APS can provide emergency protective services faster. Clients facing a threat to life or physical safety and who lack capacity to consent will have a greater pool of professionals able to provide assessments and thus, faster access to services. The ability to extend emergency orders will provide APS caseworkers, as well as medical and mental health professionals, additional opportunity to secure services for clients before a final judicial determination is made regarding their capacity.

Major Achievements/Milestones First 180 Days

- Policy on emergency orders was revised and published in the APS policy handbook in September 2005, for use by workers in the field.

Major Achievements/Milestones Second 180 Days

- Policy and practice fully implemented; no further achievements to report.

Increasing Capacity

Staff Qualifications

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

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

**Major Achievements/Milestones First 180 Days**

- DFPS developed a caseworker replacement program and hiring specialists were employed in each region to expedite the hiring process for APS caseworker positions in order to reduce the amount of time a position remains vacant.
- A pre-screening and a realistic job preview were instituted to ensure that applicants most likely to succeed in a particular position are selected for an interview.
- The interview process was standardized for direct delivery staff.
- An education stipend is now available to all APS staff. The stipend encourages caseworkers to attain a higher level of education in APS-related fields and promotes workforce retention.

**Major Achievements/Milestones Second 180 Days**

- APS began meeting with the Texas Higher Education Coordinating Board (THECB) in February 2006. APS provided to THECB a list of knowledge and skills necessary for successful employment in APS. THECB designed and distributed a survey with this information to all Texas colleges and universities offering degrees in social work and psychology. THECB is requiring universities to indicate whether they are currently providing instruction that develops the knowledge and skills identified by APS. The THECB survey also asked Texas universities to indicate how they will incorporate the necessary skills and knowledge in applicable social work and psychology curriculum, if not currently offered.
- Following the survey, APS will provide recruitment brochures to THECB for distribution in schools of social work and psychology.
- 371 APS in-home pre-employment screening tests and 107 APS facility pre-employment screening tests were conducted from September 2005 through May 2006. These tests help identify the most qualified candidates to proceed to the interview and selection processes.
- A mechanism was developed to prompt and track, at the regional level, the delivery of training on new APS policy to staff.
- Eight staff members were approved for educational stipends. These staff members are pursuing Master’s degrees in social work or management-related fields.

**Caseload Reduction Plan**

Section 2.18 directs HHSC to develop, subject to the availability of funds, a caseload management reduction plan to reduce, not later than January 1, 2011, caseloads for APS
workers to a level that does not exceed professional caseload standards by more than five cases per caseworker. The first report is due by December 31, 2006.

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

**Major Achievements/Milestones First 180 Days**

- APS hired all 89 new staff appropriated for fiscal years 2005-2006.
- APS and HHSC worked together to address a significant increase in reports of abuse, neglect, and exploitation received by APS during fiscal year 2005 and the first quarter of fiscal year 2006.
- Updated caseload projections were reported in the fiscal year 2006 DFPS Operating Budget.
- A rule for a caseload management reduction plan for APS was adopted January 1, 2006.

**Major Achievements/Milestones Second 180 Days**

- Legislative leadership approved 179 additional APS caseworkers for fiscal year 2007 to address growing caseload demands. These new staff will be phased in beginning September 2006.
- DFPS developed a regional tablet PC skilled user training program to assist staff in the best use of the new mobile technology resources to perform casework efficiently.

**Training for APS**

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

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

**Major Achievements/Milestones First 180 Days**

- The new basic training curriculum includes web-based, classroom, and on-the-job training and has been expanded from three weeks to 11 weeks.
• APS initiated the comprehensive Blended Learning for APS In-Home Skills Training (BLAST). Staff has the opportunity to learn basic information via web-based training, enabling classroom trainers to focus on advanced skill sets.

• Additional field trainers were hired to provide new employees with intensive coaching during the on-the-job training phase. New employees must complete “shadow” activities before attending classroom training, first observing the activities and then performing them under close supervision. Skilled caseworkers, in addition to the field trainers, supervise staff during these shadow activities.

• New employees receive two weeks of basic classroom training, followed by one week of advanced classroom training which focuses on mental health, self-neglect, and working with community organizations, law enforcement, and courts. Integration of the tablet PC into casework practice is also addressed in this classroom component.

• In order to ensure ongoing knowledge and skill development of tenured staff, APS now requires 18 hours per year of continuing education training for all direct delivery staff and supervisors.

• Comprehensive training on risk assessment and mobile technology were provided to address program enhancements as a result of APS reform.

• Regional experts in exploitation and evidence-based investigations and their supervisors received four days of specialized training on these topics in June 2005.

• In August 2005, regional experts in self-neglect received advanced training.

• Curriculum specific to evaluation of staff judgments and case management was incorporated into the APS supervisor basic skills class.

**Major Achievements/Milestones Second 180 Days**

• APS in-home and facility staff have completed training in financial exploitation.

• A major revision of the web-based portion of training was completed, making the modules more efficient, accurate, and user-friendly.

• APS established a system for tracking the delivery of training on new policy in the regions, as well as training for supervisors on case management.

• Exploitation and self-neglect subject matter experts received training from a group of nationally recognized professionals on a variety of subjects, including the art of consulting, medications for mental health in later life, chemical dependency in later life, working with law enforcement on exploitation cases, and palliative care.
• DFPS developed a mechanism for training in-home workers on local judicial procedures.

• A rule was adopted June 1, 2006, that requires DFPS to incorporate examples of actual cases investigated by the agency into its training programs.

• APS incorporated tablet PC training and best practices into new employee basic skills training.

**APS Technology**

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

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

**Major Achievements/Milestones First 180 Days**

• All direct delivery staff in the APS in-home and APS facility programs were given tablet PCs, digital cameras, and specialized training on how to make the best use of this new technology.

• Mobile Protective Services (MPS) software was released enabling caseworkers to document case activities into their tablet PCs when in the field. Upon returning to the office or using wireless connectivity, caseworkers can transfer data from their tablet PC into the DFPS automated case management database.

• The DFPS automated case management database now accommodates the new APS risk assessment tool, CARE.

**Major Achievements/Milestones Second 180 Days**

• Tablet PC users were surveyed to gather information on the strengths and challenges associated with the new technology. Based on the survey results, APS and DFPS information technology (IT) staff has developed a cultural change management plan. The plan includes a DFPS intranet site for tablet PCs, web-based training, job aids, as well as identification of skilled users to work with employees on specific training needs.

• Ongoing communication and best practice development activities continue through the cultural change activities as well as biweekly meetings between regional users and state office staff.
• As of July 10, 2006, APS tablet PC users have received faster-speed wireless cards to better facilitate their remote access needs.

• Implementation of a virtual private network service has begun for APS workers who do not have wireless service in their homes during on-call hours.

• In July 2006, management reports on the use of the MPS application by employee, unit, and region became available. These reports assist APS leadership in understanding the current usage pattern of the tablet PC application and will provide guidance on future adjustments.

• The tablet PC and MPS software won the “Business Evolution Through Mobilizing Field Workers" category at the Mobile & Wireless World Conference hosted by Computerworld magazine on May 24, 2006. This is the second award that DFPS has received for their development of the tablet PC and MPS. The mobile technology project was also awarded the “Best Application Serving the Public” by the Centers for Digital Government and Education earlier that month.

**Working Effectively With Community Partners**

**Public Awareness Campaign**

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

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

*Major Achievements/Milestones First 180 Days*

• The APS 2006 public awareness campaign was designed and in production. New campaign slogans and public service announcements were developed, and additional educational materials were created on topics such as summer heat awareness, financial exploitation, homelessness, and mental illness.

*Major Achievements/Milestones Second 180 Days*

• DFPS finished production and released the 2006 APS public awareness campaign in May, which is also Elder Abuse Awareness month. The theme of the year-round campaign, “It’s Everyone’s Business,” focuses on community-wide efforts to prevent abuse, neglect, and exploitation. APS community engagement staff continues to work with local community organizations to raise awareness and
directly help Texans who are elderly and disabled guard against and cope with summer heat, financial exploitation, homelessness, and mental illness.

- The DFPS communications office has engaged local media to ride along with APS caseworkers to further share information with them about the program and raise public awareness and support for APS’ mission.
- Articles and news stories were published across the state demonstrating APS’ effective use of mobile technologies.

**Special Task Units**

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

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

**Major Achievements/Milestones First 180 Days**

- DFPS developed a curriculum for counties with populations greater than 250,000 to implement special task units to monitor complex investigations.
- In January 2006, regional directors and resource and external relations specialists received training on working with counties to implement special task units.
- DFPS continued working with the Texas Association of Counties to create special task units. There are 19 counties with populations greater than 250,000.
- DFPS developed a manual for special tasks units in counties with a population of 250,000 or more. The manual will assist counties in establishing and operating their special task unit.
- DFPS community initiatives staff were trained on the manual in preparation for assisting counties with implementation.

**Major Achievements/Milestones Second 180 Days**

- Training and supporting materials on special task units were provided to community engagement staff. Officials in counties with a population of 250,000 or more were contacted to initiate the process of developing the special task units.
- Commissioners’ Courts have formally approved creation of the special task units in 20 counties. Nineteen of the 20 counties mentioned above were required to have
special task units due to their size. Members are being selected and initial meetings have occurred or are scheduled in many counties.

Community Engagement

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

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

Major Achievements/Milestones First 180 Days

- Community initiative staff was hired in each region to focus on the civic and volunteer communities, building the APS volunteer base, and encouraging the development of diverse community boards in each region.

- Resource and external relations staff were hired in each region to focus on relationships with the service and provider communities to increase access to services such as home repair and payment assistance for medication and utilities.

- DFPS staff identified priority needs in Texas communities and created community action plans in each region to address education and resource development.

- DFPS strengthened collaborations with law enforcement entities across the state and created new Extreme Weather Task Forces, financial exploitation education campaigns, and other critical community partnerships.

Major Achievements/Milestones Second 180 Days

- DFPS completed a statewide community engagement strategic plan.

- In April 2006, community engagement staff attended a statewide training held in Austin. The training focused on providing information and tools necessary to facilitate community engagement activities.

- In May 2006, the new community satisfaction survey was sent to 2,450 stakeholders across the state to solicit feedback on APS services.

- As part of DFPS’ co-location efforts, the Dallas region is assessing the potential for housing APS staff in local hospitals.
Achievement Status of Major Reforms: Children and Families

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

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

Strengthening Investigations

New Investigations Structure and Forensic Investigation Support

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

Section 1.28 requires DFPS, subject to the availability of funds, to employ or contract with medical and law enforcement professionals who can provide support and assistance to caseworkers with assessment and intervention activities, employ or contract with subject matter experts to serve as consultants to caseworkers, and designate persons to act as liaisons within DFPS to work with law enforcement and the courts.

The CPS Investigations Division ensures that policy and practice methods incorporate the use of forensic investigations techniques into CPS investigations, solicits the expertise of medical and law enforcement professionals when feasible, and improved working relationships with law enforcement entities throughout the state.
**Major Achievement/Milestones First 180 Days**

- The Director of Investigations was hired in June 2005 and participated in the revision of the new CPS caseworker investigation training.

- Regional law enforcement liaisons report directly to the Investigations Division rather than regional administration.

- Law enforcement liaison, substance abuse specialist, and nurse positions were created for each region and are in the process of being hired.

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

- Modifications were made to the case management system related to the CPS investigation conclusion. This change requires investigators to document whether Priority 1 physical abuse or sexual abuse cases are investigated jointly with law enforcement as required by statute. The modification allows the collection of data indicating the frequency of joint investigations with law enforcement, as mandated by law, as well as the rationale if a joint investigation is not conducted.

**Major Achievements/Milestones Second 180 Days**

- Seven out of 11 regional law enforcement liaisons have been hired as of June 2006. Regional law enforcement liaisons are specialized staff whose primary functions are to increase the quality and number of joint investigations and improve CPS’ relationship with local law enforcement agencies.

- CPS law enforcement liaisons are meeting with regional investigation staff and local law enforcement to assess shared investigation needs, including the need for joint training.

- Law enforcement liaisons are assisting with recruiting and hiring special investigators and working with regional management on the best utilization of the special investigator position.

- As of June 30, 2006, 131 special investigators were hired statewide. These staff are conducting investigations and assisting other investigators to develop forensic investigation skills.

**Child Safety Specialists**

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

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

**Major Achievements/Milestones First 180 Days**

- DFPS hired all seven lead child safety specialist positions. These positions supervise 43 child safety specialists, who have also been hired and trained.

- Delivered statewide Drug Endangered Child training with the assistance of child safety specialists and in collaboration with the Texas Alliance on Drug Endangered Children from September 2005 to June 2006.

- Refined and enhanced the CPS risk assessment instrument by:
  
  Reviewing the risk assessment tools used by other states, researching the literature, and obtaining feedback from medical experts in the field of risk assessment instrument development.

  Updating definitions of the risk items based on medical expert consultation.

  Developing definitions for scales of concern used to rate elements contained in the risk assessment tool.

- Safety assessment protocol is in development with anticipated implementation to occur with the rollout of mobile technology; caseworkers will follow the protocol to help guide information gathering and decision-making.

- Trained all supervisors and program directors to better recognize and more effectively respond to high-risk cases during summer 2005. Beginning in September 2005, newly hired caseworkers received training in these risk and safety concepts.

**Major Achievements/Milestones Second 180 Days**

- From February through June 2006, risk and safety assessment training was provided statewide to CPS caseworkers that completed their basic skills training prior to September 2005.

- Child safety specialists developed a webpage and centralized information on the DFPS intranet in June 2006. It provides helpful information regarding the roles and responsibilities of child safety specialists, regional protocols surrounding child deaths and other serious situations, available training both internally and externally,
tools, forms, and best practices tips that can be used by these and other staff as needed.

- Training modules were developed regarding risk and safety assessment, development of safety plans, use of safety determinations, assessment of substance abuse dynamics and other topics. These modules are currently being presented during staff and management meetings.

- A quarterly report for state and regional management has been developed that includes statistical information, narrative descriptions of trends and patterns, and recommendations as to how child safety specialists may be helpful in addressing issues identified. As child safety specialists review cases with staff, they are looking for trends and patterns, as well as identifying areas where staff needs to improve their proficiency at assessing and controlling risk and safety.

- A risk and safety committee, comprised of state office and regional staff, has recommended modifications to the current risk assessment tool which will better address risk and safety. These modifications include a component to assess safety separately from risk, improve the manner in which contacts are documented, and enhance the way narrative reports are generated. Implementation of these changes into the automated case management system is currently underway and will roll out with the Mobile Protective Services program for use on the tablet PC.

**Improved Screening**

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

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

The legislation requires DFPS to utilize highly skilled caseworkers to perform the screening of intakes, develop standardized policy guidelines and accountability measures, and monitor closed cases in order to detect any screening guidelines that need adjustment. Case screening performed by skilled caseworkers, with consultation by other experts as needed, results in more caseworker time spent on cases that need critical attention to ensure the safety of children. Of equal importance is having well-trained, skilled employees to effectively elicit vital information from individuals reporting the alleged abuse or neglect. This skill is crucial in assessing the situation accurately and assigning the case quickly.
Major Achievement/Milestones First 180 Days

- DFPS hired 38 screeners located throughout the state.

- New procedures have been developed requiring regional staff responsible for assigning investigations to route Priority 2 investigations to screeners for review. If the alleged victim is under 5 years of age, regardless of the allegation type, or if a case is already open, the case will be referred directly to an investigator.

- Screeners will be responsible for reviewing abuse and neglect referrals from Statewide Intake, and determining if a full investigation is warranted. This determination can be made by obtaining collateral information from professionals such as school nurses to aid in the decision-making process. Data will be routinely gathered on the number of intakes closed by screeners and a sample will be reviewed to ensure child safety and consistency in decision-making.

- DFPS completed the development of the curriculum required by Section 1.20 and sought comment from the Texas Municipal Police Association and the Commission on State Emergency Communications. The Commission on State Emergency Communications approved the training in December 2005, and the Texas Municipal Police Association did so in early January 2006.

Major Achievements/Milestones Second 180 Days

- A standardized protocol manual was developed and distributed to investigation screeners. This manual promotes statewide consistency regarding which cases are selected for screening and the process by which they are screened.

- All screeners participated in statewide training covering screening protocol and risk assessment in May 2006.

- As of June 30, 2006, screeners have reviewed over 24,000 reports of child abuse and neglect. Nearly one quarter of those cases were closed during the screening process. This not only reduces workloads for CPS investigative workers, but also ensures that CPS is not unnecessarily intervening in family situations. DFPS is analyzing data on the impact of screening on the investigation process.

- Training for new abuse and neglect intake specialists began in May 2006 during basic skills classes. Training for tenured intake staff will be complete by the end of 2006.

Response Time Reduction

Section 1.16 directs that, though rules are to be developed no later than September 2007, DFPS must immediately respond to a report that could lead to the death of or severe harm to a child. Highest priority reports must be responded to within 24 hours. All other reports must be responded to within 72 hours.
Responding more quickly to allegations of abuse or neglect ensures that children whose safety may be compromised are given prompt attention. Highest priority, or Priority 1, cases are currently responded to within 24 hours and the current response time for lower priority cases, or Priority 2, is ten days.

**Major Achievements/Milestones First 180 Days**

- Pilot programs involving shift time work schedules have started in every region, providing useful information about response time and scheduling issues that will assist in planning for the full implementation of the 72-hour response time.

- Statewide implementation of the 72-hour response time will occur when the full complement of additional investigators are hired and trained, but not later than September 2007.

**Major Achievements/Milestones Second 180 Days**

- Dallas/Fort Worth and the surrounding 13 counties began piloting a five-day face-to-face response time with alleged victims in Priority 2 investigations in fall 2005. Data about the success in responding within five days is currently being gathered and analyzed. A plan has been developed to pilot a 72-hour response in a few select units around the state. Formal evaluation of that pilot will provide guidance in rule formulation and procedures for staff prior to full implementation in September 2007.

- A change to the contact screen in the automated case management system was implemented in May 2006 that allows workers to enter the time they completed their documentation. This change is in support of the 72-hour response time pilot and in preparation for full response time reduction to be implemented statewide no later than September 2007. In addition, a time stamp enhancement to the automated system was incorporated into the information technology project.

- A mobile casework pilot to leverage tablet PC hardware began on May 1, 2006. One goal of this pilot was to aid caseworkers in meeting the upcoming response time requirement as well as identify best practices for field use. Due to the positive results of the pilot, full implementation of the tablet PC hardware began August 7, 2006.

**Joint Investigations and Training**

Section 1.17 requires DFPS to collaborate with law enforcement agencies to develop guidelines and protocols for joint investigations and to provide joint training for DFPS investigators and law enforcement investigators regarding effective methods for investigating allegations of abuse and neglect, including interviewing techniques, evidence gathering, and testifying in criminal court proceedings, as well as instruction on rights protected under the Fourth Amendment of the U.S. Constitution.
The purpose of this section is for CPS and law enforcement to develop collaborative training to effectively conduct joint investigations. This section will also encourage the development of multidisciplinary teams, which will strengthen the quality of abuse and neglect investigations and help ensure better outcomes for victims.

**Major Achievements/Milestones First 180 Days**

- DFPS, along with representatives from the Department of Public Safety, Dallas and Seguin Police Departments, and Children’s Advocacy Centers of Texas, created a joint investigations guidelines manual for local agencies to use when developing protocols and training, forming multidisciplinary teams, and strengthening joint investigations practices.

- Law enforcement and child advocacy center representatives assisted DFPS in redesigning its training course for new investigative caseworkers.

- The training curriculum includes new sections on working with law enforcement, forensic investigations, evidence gathering, upholding fourth amendment rights, drafting affidavits, and testifying in court. The new curriculum was implemented in September 2005.

**Major Achievements/Milestones Second 180 Days**

- The joint investigation guidelines manual is being used by regional law enforcement liaisons as they work with CPS staff, local law enforcement, and prosecutors to begin forming local multidisciplinary teams to conduct joint investigations. The local teams will then develop or update existing joint investigation guidelines and protocols under Section 261.3011 of the Texas Family Code.

- Law enforcement liaisons are assessing training needs at the local level and working with CPS and law enforcement to provide joint training.

- A contract with the Shaken Baby Alliance was executed in June 2006 for advanced training on abuse and neglect investigations. The Shaken Baby Alliance will provide advanced training to CPS, Child Care Licensing and law enforcement on effective methods of conducting joint investigations. Three joint training sessions will be conducted in the summer of 2006 and 11 joint training sessions in fiscal year 2007.

**Parental Notification and Failure to Cooperate With an Investigation**

Section 1.21 requires that before transporting children for an interview or investigation, DFPS must attempt to notify the parent or other person having custody of the child. A person commits an offense if he or she is notified of the time of the transport of a child by DFPS and of the location from which the transport is initiated, and the person attempts to interfere with the DFPS investigation. The offense is a Class B misdemeanor.
Section 1.23 enables DFPS to seek assistance from the appropriate county attorney or district attorney to obtain a court order if a person refuses to cooperate with an investigation of child abuse or neglect and the refusal poses a risk to the child’s safety.

These provisions recognize the parent’s need to know the whereabouts of their child and the reason the child is being transported by a caseworker. These sections also clarify the legal consequences of interfering with an investigation.

**Major Achievements/Milestones First 180 Days**

- New policy was added to the CPS handbook requiring caseworkers to make a good faith effort to notify a parent prior to transporting the child. This includes a call to each telephone number the caseworker has, or can reasonably access, for a parent until contact is made or all numbers have been exhausted. A phone message can be left, or e-mail can be sent if actual contact cannot be made.

- A parental notification form with the caseworker’s name and phone number was developed for staff to leave at the child’s location, such as the school or day care center, if the caseworker is unable to verbally notify the parent of the intent to transport.

- Policy was developed to outline the situations when staff must seek the input of the attorney representing DFPS to ensure the parent’s cooperation and the safety of the child.

**Major Achievements/Milestones Second 180 Days**

- Policy and practice fully implemented; no further achievements to report.

**Taping of Child Interviews**

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

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

**Major Achievements/Milestones First 180 Days**

- New policy was added to the CPS handbook to require audiotaping or videotaping of all children interviewed.

- Child care licensing division developed new policy, which took effect September 1, 2005, requiring all interviews with children conducted during the course of a child care facility investigation be audiotaped or videotaped. This policy was incorporated into the basic skills training for child care licensing investigators.
Major Achievements/Milestones Second 180 Days

- Policy and practice fully implemented; no further achievements to report.

Supporting Quality Casework

Caseworker Replacement Program

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

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

Major Achievements/Milestones First 180 Days

- DFPS allocated “hire-ahead” positions within regions in anticipation of new vacancies. These positions are designed to allow DFPS to have a ready pool of hired and trained caseworkers who can fill impending vacancies. This speeds up the time it takes to reassign a departing caseworker’s caseload to a new worker.

- DFPS has employed 14 hiring specialists to expedite the hiring of newly created and vacant positions.

- On-the-job training supervisors have been placed in each region to assist in properly preparing new workers for case assignment.

- DFPS established a streamlined priority hiring process for HHSC eligibility staff that is at risk of losing employment due to the implementation of the Integrated Eligibility and Enrollment system. Thus far, nearly 300 eligibility staff has transferred to DFPS. These tenured and hard-working staff members are assets to DFPS.

- From September through December 2005, 676 individuals (caseworkers, supervisors, and clerical support staff) were hired into casework units.

Major Achievements/Milestones Second 180 Days

- Regional hiring teams (consisting of hiring specialists, a lead and a clerk) were reorganized to ensure a standard and efficient process is used and to maximize resources across all regions.

- DFPS hired over 2000 CPS direct delivery staff into casework units since September 2005. The agency has been able to quickly fill pre-CPS reform positions as well as new positions created by the reform effort.
• DFPS hired more than 600 former HHSC eligibility staff, primarily into direct delivery positions.

• DFPS recently discontinued the “hire-ahead” positions due to the success in hiring and high numbers of filled positions.

**Staffing and Workload Distribution Plan**

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

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

**Major Achievements/Milestones First 180 Days**

• HHSC and DFPS applied up-to-date workload measurement indices and client service needs data to formulate an equitable allocation of staff and purchased services resources to the regions.

• DFPS developed a standard regional organizational structure to provide an effective framework for the expansion and supervision of large numbers of new staff.

• CPS direct delivery staff is divided into “functional units.” These units apply to investigations, family-based safety services, and conservatorship programs. Each unit consists of 5 caseworkers and 1 supervisor, thereby reducing the supervisor’s span of control and increasing the time supervisors can spend with each caseworker teaching and guiding them to make sound casework decisions. Each functional unit will also have a casework assistant and clerical support to assist caseworkers in meeting the workload demands of their jobs.

• Positions required for the formation of functional units have been allocated to the regions, and hiring is authorized on a quarterly basis in accordance with appropriated funding. Full implementation of the functional unit structure will be completed by the end of the biennium.

• DFPS has strengthened new hire recruitment efforts by focusing on local job fairs, website job announcements and postings, and providing interested applicants with a realistic view of what it takes to be an effective CPS caseworker.
• DFPS has designed two new tools to aid in hiring individuals who are likely to be successful, long-term employees:

♦ A pre-screening test for job applicants to assess skills and performance characteristics is now administered to all applicants.

♦ A behavioral interview guide, geared to assessing how each candidate would respond to real life work situations, is scored according to responses considered most effective for caseworker positions.

Major Achievements/Milestones Second 180 Days

• Investigation caseloads have been decreasing with the addition of screeners and more investigative workers. In September 2005, the daily average investigation caseload was 39.1, and in June 2006, the daily average investigation caseload was 33, representing a 15.6 percent decrease.

• CPS has sustained lower pending investigation rates statewide. The timeliness of investigation documentation is connected to accountability, as managers can review actual work done on investigations. This helps support better decision-making and is part of CPS’ plan to improve child safety.

• A pre-screening test to assess an applicant’s skills and performance characteristics is now administered to all prospective CPS caseworkers. Over 4,000 tests were conducted from September 2005 through May 2006.

Casework Documentation

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

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

Major Achievements/Milestones First 180 Days

• CPS management has identified the critical casework actions that require immediate documentation. These include daily entry of ongoing investigative contacts, completing information on face-to-face contacts in family-based safety services and conservatorship cases, and documentation of placement changes.
• Pilot programs involving 24-hour documentation have begun in every region to examine how best to implement daily documentation requirements.

• A mobile transcription service is available for use by caseworkers to facilitate timely casework documentation while additional electronic tools are developed.

**Major Achievements/Milestones Second 180 Days**

• CPS caseworkers continue to use the mobile dictation service. Caseworkers have identified this tool as one of their most valuable resources, critical to timely documentation. Caseworkers dictate documentation by phone and receive typed documentation in return via email. The edited documentation is then inserted into the electronic case file. Many caseworkers find this saves time and enables them to stay current with documentation.

• A plan has been developed to train supervisors on utilizing data for critical casework actions in their supervision of caseworkers. DFPS aims to complete this training by January 2007.

• Pilot programs involving 24-hour documentation have been completed in every region and evaluation of the results is underway.

• The tablet PC pilot conducted from May 2006 through June 2006 demonstrated the benefits mobile technology has on the timely completion of case documentation.

• DFPS has a contract in place to modify the automated case management system and develop a CPS version of the Mobile Protection System (MPS) to facilitate documentation both in and out of the office. The MPS application will allow staff to directly enter documentation details from the field and later transfer the information into the automated case management system. This will ensure that supervisors have the most current information available on a case, even if the worker remains in the field. The first phase of this project began on July 5, 2006.

**Training for CPS**

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

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

Section 1.128 requires HHSC to study the feasibility of providing financial incentives to promote child protective services training. The study must assess the feasibility of a private foundation to solicit and receive funds, the use of stipends, criteria for eligible individuals, an estimated initial and annual cost, and associated costs from improved training. HHSC is required to report the study results no later than September 1, 2006 to the Legislature.

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

Major Achievements/Milestones First 180 Days

- DFPS hired 33 new CPS training staff to prepare for the training of new caseworkers.
- Effective September 2005, training for new CPS caseworkers expanded from a six-week program to a twelve-week program, including six weeks of structured field experience.
- The new training model is composed of a five-week core curriculum for all caseworkers and seven weeks of specialized training for caseworkers on the various stages of service: investigations, conservatorship, and family-based safety services.
- The training for new caseworkers was expanded to strengthen the emphasis on investigatory techniques, collection of physical evidence, state and federal legal requirements, and forensic-style interviewing.
- The legal component of the training curriculum highlights the development of key skills, including the drafting of affidavits to support a removal of a child and testifying in court. Both skills are essential to DFPS’ ability to obtain court-ordered protection for a child.
- New training, which combines classroom and computer-based modules, is being developed for existing caseworkers.

Major Achievements/Milestones Second 180 Days

- DFPS identified training needs for existing CPS staff, prioritized those needs, and developed an implementation plan for training direct delivery staff in new reform
initiatives and practice changes. The implementation plan includes using a blended learning environment, as some topics are suitable for computer-based modules, simulation activities, and classroom learning.

- The two-day Casey Family Services “Knowing Who You Are” racial/ethnic identity formation training for new caseworkers was implemented, with special emphasis on caseworkers working with children in foster care. The course uses the blended learning methods of video, web-based modules, and classroom experiential exercises to help caseworkers understand and assist children who may be placed or raised in families whose culture is different from the child’s family of origin.

- A web-based kinship program training was implemented for all CPS caseworkers in March 2006.

- DFPS developed a series of up-to-date information sharing audio files featuring various topics and experts. Topics include: medical consent, I-See-You program, kinship program, educational portfolio, centralized placement, tablet PC rollout, Casey Family Services, Children and Pregnant Women Program, and the Texas CHIP program. Staff can access these audio files at any time on the DFPS intranet.

- DFPS is implementing the rollout of tablet PCs and training for all investigation and family based safety services caseworkers. The target completion date is the end of October 2006.

- DFPS studied the feasibility of providing financial incentives to promote child protective services training. The report will be submitted to the Legislature on September 1, 2006.

CPS Technology

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

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

Major Achievements/Milestones First 180 Days

- DFPS developed tasks and priorities to implement mobile technology and make the required changes to the current automated case management application.
- DFPS posted a procurement solicitation document for the desired technology, and vendor responses are under review.

- DFPS conducted a survey of the APS mobile technology users and used the results to address technical and practice issues. These results will help guide appropriate usage of mobile technologies by CPS.

*Major Achievements/Milestones Second 180 Days*

- Ninety CPS investigation and family based safety services workers were provided tablet PCs in May 2006 to pilot their use and examine potential issues. The pilot showed that tablet PCs could be integrated into CPS casework successfully. Plans were completed to distribute tablet PCs to investigation and family based safety services workers statewide. Implementation began in August 2006, with statewide completion projected for October 2006.

- Approval of the tablet PC pilot and implementation plan was secured from the Federal Administration for Children and Families. This approval was needed to secure the funding match DFPS receives for information technology projects related to the Statewide Automated Child Welfare Information System.

- Nine regional “road shows” have been conducted to demonstrate tablet PCs to the supervisors of caseworkers who will be receiving tablets.

- A vendor has been awarded the contract for development of the CPS Mobile Protection System for the tablet PC.

*Improving Services and Child Outcomes*

**Outsourcing**

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

Outsourcing is intended to improve services and outcomes for children and families and to strengthen community-based systems of care. DFPS has established a project team, in partnership with HHSC and outside consultants, to ensure the project is successfully completed. The involvement of stakeholders, including providers, will be an integral part of the new model. The outsourcing of substitute care and case management also allows DFPS to focus efforts on improving and strengthening investigative casework.
Major Achievements/Milestones First 180 Days

- Research was conducted to obtain information about how other states have outsourced child welfare services, with a focus on the Kansas, Florida, and Illinois models.

- A website for the DFPS outsourcing initiative was created in October 2005 to ensure that project status and information is readily available and accessible to stakeholders and the public.

- DFPS released the “Plan for Development of the Outsourcing Transition Plan” on October 7, 2005.

- DFPS released a Request for Information for the independent administrator on October 19, 2005, and received comments from the public through November 18, 2005. Eighteen responses were received and analyzed to assist in the development of the transition plan and the draft Request for Proposals for the independent administrator.

- The outsourcing project team conducted stakeholder input meetings in San Antonio, Houston, Arlington, Lubbock, and Austin in November 2005. Over 300 stakeholders attended and provided input on a series of questions related to outsourcing. A summary of comments from all meetings was compiled and posted on the DFPS outsourcing website.

- The draft Request for Proposals for the independent administrator was released in February 2006 for public comment.

- The draft Request for Proposals describes roles and responsibilities for the independent administrator and DFPS, options for cost models that reward good performance, quality assurance and accountability measures, and contracting and procurement standards.

- The Request for Proposals approach is to provide bidders as much discretion as possible, within state and federal law, to propose solutions to improving system capacity and child outcomes as required by Senate Bill 6.

- The outsourcing transition plan, released March 1, 2006, provides additional detail on the state’s approach to statewide implementation of outsourcing of case management and substitute care services.

Major Achievements/Milestones Second 180 Days

- The draft Request for Proposals for the independent administrator was released on February 22, 2006 for public comment and responses were received through March 20, 2006. Seventeen responses were received, providing DFPS an
opportunity to use these comments to make changes to the final Request for Proposals.

- As a result of a comprehensive evaluation of criteria and stakeholder input across all regions of the state, DFPS and HHSC announced on April 19, 2006, that San Antonio and the 28 surrounding counties would be the first region to outsource case management and substitute care services. DFPS published the regional analysis document on its Outsourcing web page at the following location: http://www.dfps.state.tx.us/Documents/about/Outsourcing/2006-04-19_1stRegionFinal.pdf

- On May 1, 2006, DFPS released the final Request for Proposals for the independent administrator for the San Antonio region. Proposals from respondents were due by July 31, 2006.

- On May 9, 2006, DFPS conducted a bidder’s conference for potential respondents to the final Request for Proposals for the independent administrator. The purpose was to provide general information about the Request for Proposals, as well as the procurement process, that would help potential respondents prepare and submit effective proposals. Thirty-one individuals attended the conference, representing 25 agencies or companies.

- On May 12, 2006, DFPS conducted a second bidder’s conference for potential respondents to the final Request for Proposals for the independent administrator. The purpose of this conference was to provide potential respondents with an overview of the DFPS automated case management system.

- DFPS conducted several meetings with internal and external stakeholders in San Antonio during May 2006, including meetings with DFPS foster homes, providers, community stakeholders, members of the judicial and legal communities, and DFPS staff. The purpose of the meetings was to inform participants about the outsourcing project and to listen to ideas and issues regarding the project.

- On June 28, 2006, DFPS released an addendum to the Request for Proposals for the independent administrator that contained additional information for respondents to use in developing their proposals.

- DFPS formed a regional outsourcing transition advisory committee in San Antonio to provide DFPS with input and advice from a broad array of community stakeholders and to ensure a successful transition of case management and substitute care services from DFPS to an independent administrator. The first meeting of the regional outsourcing transition advisory committee was held on July 31, 2006.

- The Request for Proposals for the independent evaluator has been drafted and will be released in October 2006. The independent evaluator will assess the
performance of the independent administrator and of DFPS’ system of service delivery.

Child Placement

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

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

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

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

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

Section 1.37 requires that the court require each parent, alleged father, or relative of the child present to submit the placement resources form at the status hearing if the form has not already been submitted.

The emphasis placed on kinship care involves prioritizing placement with relatives or other adults significant in the child’s life whenever possible to help maintain family, cultural, and community connections. Kinship placement enhances the child’s sense of stability, identity, and belonging. Kinship caregivers are provided with a kinship care information guide and work closely with DFPS to ensure the safety of and best outcomes for the children in their care. Expedited background checks and home studies speed up the placement of children with relatives and other significant caregivers thereby diverting them from the foster care system.

Major Achievements/Milestones First 180 Days

- In October 2005, the development of the child placement resources process was completed. The form includes a statement to inform parents that CPS will share information about the case with the potential caregivers so they are aware of the child’s history and are better prepared to meet the needs of the child.
• DFPS abuse/neglect database checks are now conducted upon receipt of the child placement resources form from the parent.

• For each potential placement option, the caseworker initiates a criminal background check within two business days of the agreement to accept possible placement of the child.

• If a parent completes the child placement resource form at the time of the child’s removal from the home, a written home assessment is completed by the date of the adversary court hearing, or approximately 14 days after the child’s removal from their home.

• A kinship care manual was made available November 1, 2005, as a resource and information guide for kinship caregivers. The manual is given to kinship caregivers upon placement of a child in their home and provides information such as caregiver rights, responsibilities and available financial, childcare, and support services.

• Rules were effective on December 5, 2005, which outline eligibility requirements for the kinship care program. The program provides initial start-up funds of $1000 per sibling group, and annual recurring assistance of $500 per child to qualified kinship caregivers, to assist them in providing for the child’s essential needs including bedding, clothing, and school supplies. Support services are available to kinship caregivers, including childcare for those who qualify, beginning March 1, 2006.

Major Achievements/Milestones Second 180 Days

• Statewide implementation of the DFPS kinship program began March 1, 2006. Kinship workers are available in every region in the state, providing support and services to kinship caregivers. In counties where there are no kinship workers, conservatorship workers provide the needed support and services to kinship caregivers.

• A revised kinship care manual was made available on March 1, 2006, to incorporate the new financial support, day care, support group, and community resource information available to kinship caregivers throughout the state. The kinship care manual and brochure are available electronically on the DFPS website in both English and Spanish.

• DFPS implemented an online training for staff regarding the new kinship program services and supports. The DFPS web-based training offers information about the kinship program, including service information, policy, and rules, as well as the kinship manual and brochure.

• From March 2006 to August 2006, over $800,000 has been distributed to kinship caregivers to assist them in providing for the essential needs of children in kinship care.
Section 1.54 specifies DFPS’ responsibility to mitigate the disproportionate representation of minority races and ethnicities in all phases of child welfare services delivery by:

- Delivering cultural competency training to all service delivery staff.
- Increasing targeted recruitment for foster and adoptive families.
- Targeting hiring recruitment efforts to ensure diversity among DFPS staff.
- Developing partnerships with community groups to provide culturally competent services to children and families.

Section 1.54 also requires HHSC and DFPS to analyze removal rates and other enforcement actions to determine whether disproportionality exists, taking into account other factors, such as poverty, single-parent families, and young-parent families, and to report the results to the Legislature. The legislation also requires a follow-up report to address the problems identified in the first report by July 2006. Enforcement actions are defined as actions taken by CPS that are supported by legal court proceedings and regularly reviewed by the courts, including:

- Removal of a child from the home.
- Court order to participate in services prior to removal of a child or parent.
- Placement of the child while in custody.
- Adoption of the child, or any other outcome that results in permanent placement and dismissal of the state’s legal case.
- Decision to offer or not offer services that might prevent any of the above.

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

Major Achievements/Milestones First 180 Days

- On January 2, 2006, HHSC and DFPS submitted the initial disproportionality report to the Legislature. Major findings of the report include:
  - Even when other factors are taken into account, African American children spend significantly more time in foster care or other substitute care, are less likely to be reunified with their families, and wait longer for adoption than Anglo or Hispanic children.
Poverty was a strong predictor of whether a child would be removed from the home, with more than 60 percent of child removals in Texas occurring in families with annual incomes of about $10,000 or less. This is a factor in CPS disproportionality because poverty rates are higher among African American families.

The study did not find a significant association between African-American race and a CPS decision to remove a child from the home when controlling for factors including income, age of the victim, type of abuse or neglect allegation, source of report, and region of the state. The analysis did find that Hispanic children were significantly less likely than Anglo children to be removed from the home.

African American families were less likely than Anglo families to receive in-home family services to help prevent child removal in three areas of the state, while Hispanic families were less likely than Anglo families to receive such services in four areas of the state.

- CPS training for all new caseworkers has been revised to include additional information on disproportionality, including the “Knowing Who You Are” cultural awareness video produced by Casey Family Services.

- Beginning in December 2005, new CPS foster-adopt caseworkers participated in a two-day specialized training on cultural/ethnic issues termed “Racial Ethnic Identity Formation.”

- “Undoing Racism” training, by the People’s Institute of Survival and Beyond, was provided to CPS management. DFPS now offers “Undoing Racism” courses to staff.

- Partnerships with communities to address the problem of disproportionality have begun in Houston, Arlington, and Fort Worth. The work includes convening a Community Advisory Committee of people from the local area, attending “Undoing Racism” training, selecting pilot sites, testing practice improvements, and replicating successes for families statewide.

- Disproportionality specialists have been hired in Houston, Dallas, Fort Worth, and Beaumont/Port Arthur to support the community’s work on disproportionality and to serve as resources to CPS staff. The disproportionality specialists are successfully engaging the community and building awareness around disproportionality through focus groups, town hall meetings, and presentations.

- A child-specific adoption contract has been signed with One Church, One Child of North Texas, to recruit adoptive families for those children awaiting placement in a permanent, loving home.
Major Achievements/Milestones Second 180 Days

- The Disproportionality Policy Evaluation and Remediation Plan was submitted to the Legislature on June 30, 2006. The initial report and subsequent policy evaluation and remediation plan are both available to the public on the DFPS website at: http://www.dfps.state.tx.us/About/Renewal/disproportionality.html

- The Austin region was added as a pilot site for DFPS to address disproportionality. Meetings with community members and DFPS staff to build awareness about disproportionality and begin planning for the Austin pilot site were held in May and July 2006. The community advisory committee on disproportionality will be formed by October 2006.

- A grant was received from the Child Welfare League of America to support children and families impacted by Hurricane Rita and is attached to Project HOPE (Helping Our People Excel). The Port Arthur HOPE Center is a 501(c) (3) community-developed initiative that addresses disproportionality through prevention. HOPE celebrated its one-year anniversary in April 2006.

- A grant was received from the Amon Carter Foundation to support disproportionality work in Tarrant County. This grant is designed to address racial disproportionality in the child welfare system, specifically in Tarrant County. The goal is to reduce racial disproportionality, and to sustain this reduction through preventive, community-based services by funding family group conferences and kinship placement home studies, and developing a community resource group.

- All regional directors and program administrators for the state along with all state office directors, division administrators and some program specialists have attended “Undoing Racism” training.

- Texas’ efforts continue to receive national recognition. DFPS staff has been invited to present on the disproportionality policy evaluation and remediation efforts, resulting in multiple state and national presentations.

Family Group Decision-Making

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

Family Group Decision-Making (FGDM), an umbrella term used to describe a variety of related models, is the process used to engage families in decision-making and development of a service plan for use at various times throughout the case. The process involves recognition of family strengths during service plan development for meeting safety, well-being, and permanency goals for the child. FGDM is more inclusive of family and significant others in the planning process. Evaluation of this program found increased family satisfaction, reduced child anxiety after a conference, and more individualized
service planning. Improvements in service planning are expected to increase the likelihood of improved family functioning so that children can return home more safely or, failing that, more readily find other permanent placements.

Major Achievements/Milestones First 180 Days

- DFPS has worked with judges, attorneys, and child advocates to address concerns and eliminate barriers to the success of FGDM. A meeting was held in San Antonio at the Beyond the Bench conference in January 2005 in which judges, prosecutors, and other attorneys from around the state were invited to share thoughts, concerns, and suggestions for improvement as implementation of FGDM continues across the state. Meetings have also been held at the local level between DFPS and members of the judiciary to provide an opportunity to exchange ideas about challenges and possible solutions.

- In August 2005, a preliminary evaluation of FGDM was completed and positive outcomes for children were shown with regard to satisfaction and increased relative participation.

- FGDM conferences termed “Circles of Support” have been held for some youth aging out of foster care in order to promote stability and identification of supportive individuals committed to assisting these youth as they transition into adulthood.

- DFPS provides families the opportunity to participate in multiple conferences as needed in order to promote the child’s achievement of permanency.

Major Achievements/Milestones Second 180 Days

- Family group decision-making staff are partnering with disproportionality staff to better understand the cultural needs of families served. Disproportionality staff, along with new family group decision-making coordinators/facilitators, is being trained to conduct FGDM conferences.

- A Texas FGDM model has been finalized and policy development is underway. Beginning family group decision-making on a small scale and securing technical assistance from others allowed for more creativity and system improvement as the Texas program expanded. Based on practice and evaluation results, Texas has refined its model and is developing statewide policy for further implementation.

- Plans are underway to incorporate the FGDM model in certain cases prior to the removal of children from their parents or caregivers.

- All youth in foster care over the age of 16 are being offered a form of family group decision-making termed “Circles of Support”. These meetings are designed to enhance the youth’s sense of connection to an ongoing support system that will be with them after transitioning to independent living.
• As of August 2006, over 3600 family group decision-making conferences have been conducted since the program’s inception, and conferences continue to be offered in a total of 57 counties.

• In June 2006, the National American Humane Conference on Family Group Decision-Making was held in San Antonio, and 68 staff from DFPS attended. Following the conference, a national expert in family group decision-making conducted a workshop specifically designed for Texas participants. The meeting resulted in decisions for overall best practice and operational recommendations for the Texas FGDM model.

• DFPS staff presented evaluation results at the National American Humane Conference on Family Group Decision-Making held in San Antonio. The presentation included the following data:

  ♦ Analyses on the 1004 families and 1908 children who had participated in family group decision-making conferences as of June 2005 indicated that:

    ▪ Placements of children in the weeks following participation in a conference shifted toward reunification and placement with relatives. For those who participated in a conference since the program’s inception, foster care placements fell from 1035 to 733, relative placements increased from 550 to 850, and 240 children had returned home to their parents. Encouraging as these numbers may seem, caution is warranted as the comparable rates in placement changes in standard practice are unclear.

    ▪ The number of relatives participating in the development of the family plan more than tripled in family group decision-making conferences.

  ♦ Surveys and telephone interviews were conducted with families who had participated in FGDM conferences and those who had not. Among the findings:

    ▪ Parents and relatives expressed greater satisfaction with the family group decision-making conference process compared to another permanency planning process used by CPS.

    ▪ Parents’ ratings of empowerment, clarity of expectations, and sense that the right issues had been identified in the family plan were higher for participants in family group decision-making conferences.

    ▪ Children whose families participated in a family group decision-making conference prior to being placed with relatives were found to be the most well-adjusted.

• Recent data analyses were conducted on the placement outcomes for children who experienced a removal from their home between November 2004 and July 2005.
As of June 2006, approximately 10 to 18 months following participation in a family group decision-making conference, it was found:

♦ 48 percent of the children whose families participated in a conference had exited care compared to 33 percent of the children whose families did not have the opportunity to participate in a family group decision-making conference. Thirty one percent of those who exited care after a conference were reunited with their parents compared to 14 percent participating in traditional services.

♦ Despite earlier indications that family group decision-making conferences resulted in increases in relative placements, slightly fewer children from family group decision-making conferences (14 percent) were permanently placed with relatives compared to those receiving traditional services (16 percent). Thus, it appears that the increased role of relatives earlier in the case has a longer-term effect of family reunification.

♦ There was no statistically significant difference in the number of placements for children exiting care after a family group decision-making conference compared to those following traditional services.

♦ The reunification findings were most pronounced for African American and Hispanic children. After participation in a family group decision-making conference, 32 percent of African American and 39 percent of Hispanic children had returned home compared to 14 percent and 13 percent, respectively, for those receiving traditional services.

- The final evaluation of the Texas family group decision-making program is scheduled for completion and publication on the DFPS web site on October 1, 2006.

**Court Reports**

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

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

Families and children are best served when the child protection legal system has comprehensive information about specific progress being made to achieve permanency for children under the state’s care.
Major Achievements/Milestones First 180 Days

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

- Template questions were revised or added to ask about information on educational placement, discharge plans, PAL, and potential adoptive placements.

Major Achievements/Milestones Second 180 Days

- Policy and practice fully implemented; no further achievements to report.

Attorney Ad Litems

Section 1.04 adds duties for an attorney ad litem appointed to represent a child in a CPS suit, including minimum continuing legal education requirements, meeting the child before each court hearing if the child is four years of age or older, or visiting the caretaker if the child is younger than four years of age, unless the court finds the attorney ad litem has shown good cause why compliance is not feasible or in the child's best interest.

Section 1.06 requires the court to appoint an attorney ad litem for an indigent parent responding in opposition to a suit filed by DFPS for temporary managing conservatorship of a child.

These provisions improve the expertise of an attorney ad litem appointed to represent a child in a CPS suit, and clarify the frequency of contact between attorneys and the children or parents they serve. If an indigent parent responds in opposition to the suit, DFPS will now be able to begin working with attorney ad litems for the parents earlier in the case.

Major Achievements/Milestones First 180 Days

- DFPS amended legal forms to include the appointment of an attorney ad litem for the parent at the first hearing and all subsequent hearings should the judge determine that the parent is indigent and in opposition to the suit.

- All CPS regional attorneys received information and training on these provisions.

- DFPS provided explanations and sample language for orders to County and District Attorneys' offices.

- CPS staff received information and training about the new requirements for attorney ad litems in August 2005.

- Policy regarding these sections was published in the CPS handbook in September 2005.
• Staff is working with attorney ad litems to facilitate their meetings with children or caretakers before each court hearing.

Major Achievements/Milestones Second 180 Days

• Policy and practice fully implemented; no further achievements to report.

Family Plan of Service

Section 1.38 requires that DFPS write service plans for families in a language that the parents understand or make it otherwise available, identify child education issues for the child’s parents to address, review parents’ progress in addressing their child’s education issues, and to identify the knowledge, skills, and abilities the parent must acquire to achieve the goal of the plan.

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

Major Achievements/Milestones First 180 Days

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

Major Achievements/Milestones Second 180 Days

• Structural changes are being made to the family plan of service document so that it is more easily understood by parents and has a stronger focus on child education issues.

Initial Assessments

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

**Major Achievements/Milestones First 180 Days**

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

- DFPS is working with HHSC to develop a new medical and behavioral health care program for children in foster care, which will include an initial assessment process conducted by medical professionals. This new system is targeted to be effective July 1, 2007.

- Until that time, CPS revised its current initial assessment form to include prompts regarding developmental disability or mental retardation. If staff or caregivers have information or suspect that a youth might have a developmental disability or mental retardation for which they have no confirmation or documentation, they have been directed to seek out appropriate testing from qualified professionals. If in doubt, they have been prompted to consult with their regional development disability specialist.

**Major Achievements/Milestones Second 180 Days**

- DFPS staff has continued to meet with HHSC to strengthen the coordination between CPS and the Early Childhood Intervention program to secure services available to children and their families.

- Efforts to address initial assessments requirements have been folded into the new medical and behavioral health care program for children in foster care. This new system is targeted to begin providing services in July 2007.

**Education Passport**

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

The education passport is designed to enhance educational outcomes for children in foster care by ensuring school records follow the child, should a placement change occur. The education passport provides further safeguards that children are placed in the correct grade and receive all educational services to which they are entitled.
Major Achievements/Milestones First 180 Days

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

- DFPS policy and procedures, to ensure the educational needs of children in care are identified, documented, and met in each school district, were in the final stage of development.

- The form and content of the education passport, which is a paper passport, were being developed in a collaborative effort between the Texas Education Agency, HHSC, and DFPS. The education passport will be referred to as the Educational Portfolio.

- Training for DFPS caseworkers was revised to stress the importance of the Education Portfolio and methods for gathering and maintaining the information.

Major Achievements/Milestones Second 180 Days

- By June 2006, the materials for the Education Portfolio for every school-aged child in care were delivered to the regional offices.

- The roles and responsibilities of all stakeholders were developed and address the implementation and ongoing maintenance of the Education Portfolio for each child in care. This information is being included in each Education Portfolio and in presentations and training conducted by CPS education specialists.

- A communication plan for stakeholders was developed to highlight improving educational outcomes and the importance of tracking education documents through the use of the Education Portfolio.

- Presentations and training on the Educational Portfolio were conducted with Court Appointed Special Advocates (CASA), various school districts throughout the state, the National Foster Parent Association, and CPS staff. Presentations will also target education service centers and the Texas Foster Parent Association.

- Changes to the DFPS automated case management system are being made to track the implementation of the Educational Portfolio.

Preparation for Adult Living

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

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

Major Achievements/Milestones First 180 Days

- Youth aging out of foster care are now provided with continuous Medicaid coverage through a single application process up to the age of 21.

- A Memorandum of Understanding with Texas Workforce Commission is under development and will include staff cross-training, defining roles and responsibilities, information sharing, prioritization of both workforce and child care services for foster care youth, housing referrals, and meeting the objectives of the Preparation for Adult Living (PAL) program.

- Staff and youth jointly designed an annual survey for teens 14-17 years of age. The survey is slated for dissemination in spring 2006, with results analyzed in June 2006. Questions in the survey will address quality of services, improvements needed to better support the youth, and other factors relevant to program enhancements.

- In August 2005, the Houston Transition Center for youth aging out of care was opened. The center provides support in the areas of education, such as tutoring and GED referrals, employment resources, PAL classes, and linkages to community resources for obtaining mental health or other social services for youth who have aged out of care. The center also facilitates room and board payments for these youth.

- Rules for extension of foster care for eligible youth have been developed and will be proposed at the April 2006 DFPS Council meeting.

Major Achievements/Milestones Second 180 Days

- CPS continued to expand and provide Circles of Support to youth statewide. Circles of Support, a youth driven process based on the family group decision-making model and offered to youth beginning at 16 years of age, is a facilitated meeting with participants that a youth identifies as “caring adults” who make up their support system. Each caring adult participant identifies a personal way they
can help support the youth’s transition plan and attainment of short and long-term goals toward self-sufficiency. Circles of Support are operating in all regions in the state.

- Transition (discharge) policy and protocol are in the final stages of development, with staff training projected for fall 2006.

- A Memorandum of Understanding between DFPS and the Texas Workforce Commission has been signed. The Memorandum of Understanding ensures there are local cooperative agreements that meet the objectives of the transitional living program. As of August 2006, regional staff, local workforce boards, community partners, and providers entered into cooperative agreements.

- Rules for extended care to youth up to the age of 22 to complete high school level education, or up to age 21 to complete vocational training were posted for public comment and recommended for adoption by the DFPS Council at the July 2006 meeting.

- CPS developed guidelines for expanding transition centers and transition service networks to areas where none currently exist. Transition centers are currently operating in Dallas, Houston, San Antonio and Austin. In a transition center, a young person can go to one location to complete their GED certification, receive Preparation for Adult Living services, take a community college prep course, talk to the onsite apartment locator service, and receive employment training and placement services. Transition centers also provide an opportunity for youth to develop personal and community connections, another important step in transitioning to adulthood.

- Policy to permit eligible youth to return to foster care as necessary to achieve goals of the Preparation for Adult Living Program is under development.

- Coastal Bend College of Beeville and DFPS signed a Memorandum of Understanding on June 6, 2006, whereby Coastal Bend College agrees to provide housing assistance for foster care alumni. Beginning in fall 2006, Coastal Bend College agrees to provide two housing scholarships to foster care alumni and a one-day training session for Texas college-bound high school juniors and seniors in foster care.

**Medical Services**

Section 1.65 directs the Health and Human Services Commission to develop a statewide healthcare delivery model for children in foster care. Section 1.65 further outlines requirements for the provision of medical consent for a child in foster care, parental notification of significant medical conditions, judicial review of medical care, health passports, and reporting to the Legislature the outcome of a study on the prescribing of psychotropic drugs for children in foster care.
A statewide healthcare delivery model for children in foster care will provide accessible, coordinated, comprehensive, and continuous healthcare in order for each child to achieve optimal physical and mental health. Children’s healthcare is further improved by requiring the consent of a DFPS or court-designated individual before medical and behavioral health services are provided to a child. Judicial oversight of children’s health status will serve to enhance the medical and behavioral health outcomes for children. The goal of the health passport is to ensure portability of timely medical information and ready availability of comprehensive health information to healthcare providers, DFPS staff, caregivers, courts, and youth. The health passport will contain information pertaining to the child, healthcare providers, diagnosis and treatment, and pertinent administrative documentation essential for continuity of care for children and effective case management.

Major Achievements/Milestones First 180 Days

- HHSC released a Request for Information on September 2, 2005, to obtain feedback from stakeholders and the vendor community on recommended approaches for delivering healthcare for children in foster care.

- HHSC contracted with a consultant group to assist in the development of a Request for Proposals.

- HHSC developed the draft Request for Proposals for the healthcare delivery model with an anticipated release date in March 2006. The expectation for the healthcare delivery model Request for Proposals is that the vendor would be responsible for development and maintenance of the health passport with the state retaining ownership of all patient data.

- DFPS developed and implemented a medical consent policy, including parental notification requirements, for medical treatment of children in foster care.

- Medical consent online training for youth, staff, and non-DFPS employees who are serving as medical consenters for children in conservatorship is scheduled for release in March 2006.

- DFPS and the Department of State Health Services (DSHS) entered into an interagency agreement for the services of a consulting child psychiatrist to access prescribing practices and recommend a process for ongoing clinical reviews of the use of psychotropic medications in the treatment of children in foster care.

- DFPS revised court report documents to incorporate the summary of medical care provided to children in foster care required at each court hearing.

Major Achievements/Milestones Second 180 Days

- On March 1, 2006, HHSC released the draft Request for Proposals for the delivery of services through a Medicaid healthcare delivery model for children in foster care
for public comment. This model will use a contracted managed care organization to provide and coordinate services for children in foster care, including medical, dental, pharmacological and behavioral healthcare needs.

- HHSC held a public meeting in Austin on March 9, 2006, to review the draft Request for Proposals and to solicit public comment.

- HHSC received several hundred comments to the Request for Proposals. Based on these comments, HHSC substantially revised the Request for Proposals to allow for more types of managed care organizations to bid and to be more responsive to the unique set of needs of children in foster care.

- HHSC released the final Request for Proposals on July 20, 2006.

- DFPS is negotiating a contract with the University of Texas for development of the forensic assessment center network. Initial implementation in a limited area of the state is planned for September 2006. A forensic assessment center – or a “pediatric center of excellence” – is a healthcare facility with expertise in forensic assessment, diagnosis, and treatment of child abuse and neglect. A statewide telemedicine system will be established to link DFPS investigators and caseworkers with the forensic assessment center or other medical experts for consultation.

- HHSC, DSHS, and DFPS published a report, “Use of Psychoactive Medication in Texas Foster Children State Fiscal year 2005,” in June 2006. The report noted that in the five months since the release of the guidelines for psychotropic medications for children in foster care, the percentage of children in foster care who were prescribed a psychotropic medication fell seven percent and there was a 29 percent decrease in the percentage of children taking two or more psychotropic medications.

- HHSC, DSHS, and DFPS have developed interim strategies for ensuring appropriate prescribing of psychotropic medications for children in foster care until the healthcare delivery model is implemented.

- All CPS regional nurses have been hired. The regional nurse positions will provide medical consultation to regional staff to improve decision-making and child safety.

- Regional interagency teams with representatives from HHSC, DSHS, DFPS, and Texas Access Alliance meet quarterly to coordinate informing foster parents about the services available through Texas Health Steps and to facilitate referrals for medical case management for children in foster care who have serious and complex medical conditions.

- Medical consent online training for youth, staff, and non-DFPS employees who are serving as medical consenters was revised and released in July 2006.
Building Community Partnerships

Community Engagement and Co-Location

Section 1.86 charges DFPS with developing a statewide strategy in CPS to build alliances and networks at the local level that support the detection and treatment of child abuse and neglect and enhance the coordination and delivery of services. The strategy should explore opportunities to move DFPS staff into community-based settings and joint offices with children’s advocacy centers, law enforcement officials, prosecutors, health care providers, and domestic violence shelters.

Section 1.30 also addresses the co-location of DFPS investigators and local law enforcement, to the extent possible, to improve child abuse investigations.

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

In addition, the relocation and co-location of DFPS staff in regional community-based offices as well as in workplaces of local officials and organizations facilitates teamwork, better understanding of roles and expectations, efficient working relationships, and DFPS and law enforcement coordination on immediate response to Priority 1 reports.

Major Achievements/Milestones First 180 Days

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

- CPS placed specialized staff in each region to coordinate community-based and public awareness activities. Community initiative staff focus on civic and service organization relationships to help develop community boards, financial/in-kind resources, and volunteer program services. Resource and external relations staff focus on local judicial, law enforcement, medical, and other provider relationships in order to strengthen the quality of services provided to CPS children and families.
• CPS expanded the community engagement training provided to incoming DFPS staff.

• CPS has renewed its commitment to the increased engagement of clients, families, providers, officials, and other partners in all aspects of CPS work. CPS community-based initiatives (existing and new) have:
  ♦ Incorporated stakeholder best practices to strengthen relationships and increase communication.
  ♦ Held community meetings to gather stakeholder input.
  ♦ Invited stakeholder and community participation on workgroups, the development of policy revisions, and in trainings with staff.
  ♦ Created new partnerships and collaborations in support of reform goals.
  ♦ Participated on external stakeholder initiatives and projects.
  ♦ Expanded the use of volunteers to improve the quality and efficiency of programs and services.

Major Achievements/Milestones Second 180 Days

• CPS regional directors are conducting stakeholder meetings across the state to provide both internal and external stakeholders an open forum to discuss issues relating to CPS clients, families, and providers. These meetings provide an opportunity for leadership to update key stakeholders about progress in CPS reform and to get input from the community. Meetings will be held in all regions by December 2006.

• Town hall meetings have been held in the counties of Tarrant, Dallas and Denton. The purpose of these meetings is to build awareness of the issue of disproportionality as well as engage the community in discussions about their concerns and invite them to collaborate with DFPS in the development of solutions. Town hall meetings will also be held in Houston and Beaumont/Port Arthur.

• CPS community engagement staff strengthened collaborations with other state agencies to address the needs of children and families.

• A CPS staff member was appointed to the Community Collaboration Group, which was formed to determine the logistics of a state-level proposal to bring funds into specific areas of Texas to address disproportionality.

• As a result of enhancing DFPS volunteer programs, the number of volunteers within the CPS program has increased. Currently, there are over 3,700 active CPS volunteers.
DFPS is assessing options for establishing community partnerships through co-location. An assessment tool is being used to conduct a cost-benefit analysis and determine the feasibility of co-locating CPS staff with other community services such as hospitals, police departments, schools, and child advocacy centers. These opportunities for co-location would enhance service delivery to clients and may assist with providing sources of office space for CPS staff.

In most regions, CPS is housed with children's advocacy centers. DFPS is currently assessing options in Travis County and Fort Bend County for future co-location of CPS staff in community-based settings. Dallas/Fort Worth has several CPS staff located at police departments and is currently working with a school district to locate a unit with that district’s police department. In San Antonio, DFPS is involved in discussions with city officials and other entities regarding the use of a school building as a community service center. In McAllen, DFPS is co-located with City of McAllen staff and other community services. These partnerships with community agencies have expanded CPS’ visibility and service delivery in neighborhoods and provided much needed office space for staff.

Preventing Maltreatment

Prevention and Early Intervention

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

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

When a lower-priority case is received and a determination is made that the case can be closed without a full investigation or the results of the investigation determine that abuse/neglect did not occur, the case will be referred to a contracted community-based organization for follow-up and services to enhance the safety of the child’s home environment, where services are available. This referral system will allow DFPS to concentrate its investigation and immediate intervention services on more serious cases. Funding evidence-based programs that target races and ethnicities disproportionately represented in child welfare ensures children receive appropriate services to meet their unique needs.

Major Achievements/Milestones First 180 Days

An implementation plan is being developed to improve referral processes to Prevention and Early Intervention services to ensure that lower-risk families do
not require CPS intervention can access preventive services designed to bolster the family’s capacity to care for their child.

- A working definition of “evidence-based services” as services proven effective through evaluation was developed with input from stakeholders.

- DFPS procured a new service, effective spring 2006, referred to as At-Risk Prevention Services, for evidence-based interventions addressing either child abuse and neglect or juvenile delinquency. The At-Risk Prevention Services procurement process included special consideration for services that target children whose race and ethnicity are disproportionally represented within the CPS system.

- DFPS also procured a new service, referred to as Innovative Prevention Services, to fund demonstration projects addressing the same priorities mentioned above, but expanded to include promising programs and research-based designs. Services were effective spring 2006.

**Major Achievements/Milestones Second 180 Days**

- At-Risk Prevention Services contracts became effective on April 1, 2006.

- Innovative Prevention Services contracts became effective on April 1, 2006.

- The contracts have been divided into “Youth Resiliency” programs that target juvenile delinquency prevention and “Family Strengthening” programs that focus on abuse and neglect prevention.

- Adoption of rules is required to implement the Community-Based Family Services program, including rules governing the submission and approval of grant requests and the cancellation of grants. The DFPS Council reviewed the proposed rules at the July 2006 Council meeting. The rules are anticipated to be effective December 1, 2006.

**Drug-Related Initiatives**

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

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

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

Major Achievements/Milestones First 180 Days

- The Department of State Health Services (DSHS) received a Technical Assistance grant, beginning in March 2006, from the National Center on Substance Abuse and Child Welfare. DFPS is working collaboratively with DSHS, Court Improvement Project, Court Appointed Special Advocates (CASA) and the Office of Court Administration on systemic changes to improve delivery of substance abuse services in child welfare.

- Protocols were developed outlining the responsibilities of DFPS, law enforcement, prosecutors, medical professionals, and mental health providers following identification of a drug-endangered child.

- Trainings were held for DFPS and community organizations, including child welfare boards, on the dangers to children who reside where methamphetamine is being manufactured.

- DFPS incorporated training about methamphetamine and the Drug Endangered Child protocols in the training for new caseworkers.

- A Memorandum of Understanding was completed and signed on December 29, 2005, between DFPS and the Department of Public Safety establishing a standardized set of protocols.

- DFPS is now assigning a Priority 1 status to all reports that allege a child is residing in an environment where methamphetamine is being manufactured.

Major Achievements/Milestones Second 180 Days

- The Texas Alliance for Drug Endangered Children, through a grant from the Children’s Justice Act, has conducted ten multidisciplinary regional trainings across the state since October 2005. Presenters at each of the trainings included a narcotics officer, CPS staff, a medical professional, a prosecutor and a social work
professional. For each training session, 30 percent of the slots were identified for law enforcement and 30 percent for CPS. Several of the trainings had over 300 participants.

- Modifications have been completed to DFPS’ automated case management system to identify cases where the manufacture of methamphetamine was alleged at intake or discovered during the course of an investigation.

- DFPS has continued to collaborate with DSHS, the Court Improvement Project, Texas CASA, and the Office of Court Administration on the technical assistance grant from the National Center on Substance Abuse and Child Welfare.

- An advisory committee has been formed and participants include staff from DFPS and DSHS, a former CPS client, a former foster youth, a foster parent, Child Advocacy Centers of Texas, substance abuse providers, a representative from Betty Ford Center-Five Star Kids, a parent/child attorney, CASA, Texas Workforce Commission, a judge, Casey Family Programs, and the Texas District and County Attorneys Association.

- The Court Improvement Project administered by the Texas Office of Court Administration facilitated the participation of a number of family court judges and their staff as well as several CPS staff at the National Association of Drug Court Professionals conference in Seattle, Washington in June 2006. Participating judges have all expressed an interest in beginning family drug court programs in their county.

- DFPS has hired substance abuse specialists in each region of the state. These staff have special training or experience working in the area of substance abuse or a related field.
Achievement Status of Major Reforms: Licensing and Regulation

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

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

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

Ensuring Child Safety

Child Care/Child-Placing Administrator License

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

Previously, only administrators of residential child care operations were required to be licensed. Passage of Senate Bill 6 requires administrators of child-placing agencies to be licensed as well. This ensures consistency of licensure requirements across all types of 24-hour out-of-home care and enhances the safety of children.
Major Achievements/Milestones First 180 Days

• DFPS began accepting applications for licensed child-placing administrators on September 1, 2005.

• The required exam for licensed child-placing administrators was developed in partnership with university-based experts and testing began in January 2006.

Major Achievements/Milestones Second 180 Days

• As of June 1, 2006, 201 people had taken the licensed child-placing administrator exam and 82 percent passed. DFPS anticipates an additional 125 people will take the exam before the end of December 2006.

Reports of Abuse and Serious Incidents

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

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

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

Major Achievements/Milestones First 180 Days

• The child care licensing automated system has been modified to accept and track these reports.

• Rules to implement these requirements are a part of the revised Minimum Standards for Residential Child Care Operations and Residential Treatment Centers and Minimum Standards for Child-placing Agencies.

• Child care licensing management staff was trained on the proposed rule change on January 27, 2006.

Major Achievements/Milestones Second 180 Days

• Residential child care licensing staff was trained on the automated system enhancements and the new rules on April 19, 2006.
Background Checks

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

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

Major Achievements/Milestones First 180 Days

- New rules for conducting background checks in residential child care operations were adopted on December 1, 2005.

- The residential child care licensing program has implemented a background check unit to handle the requests and facilitate the reporting of results.

Major Achievements/Milestones Second 180 Days

- In order to provide more timely feedback to residential child care operators, technology changes were implemented that allow background checks to be run against the Department of Public Safety database daily instead of weekly.

- Reports of findings on background checks are being sent via e-mail to child care operators in order to provide more timely notifications. DFPS is able to provide background check information to child care operators within 24 hours.

Drug Testing

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

Previously, there were no requirements in minimum standards for drug testing of employees of residential child care operations. The intent of this section was to ensure that children are safely cared for in a residential setting, while also protecting the rights of employees.
Major Achievements/Milestones First 180 Days

- Rules for drug testing in residential child care operations were adopted December 1, 2005, with providers of residential child care required to implement these rules by January 1, 2006.

- Residential child care licensing staff is currently providing technical assistance to operations to implement these rules and will begin citing for non-compliance in March 2006.

Major Achievements/Milestones Second 180 Days

- Policy and practice has been fully implemented; no further achievements to report.

Behavior Intervention Training

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

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

Major Achievements/Milestones First 180 Days

- Residential child care operations were notified in August 2005 to revise their pre-service training curriculum on behavior intervention to include information on the risks associated with prone restraints.

- Rules to implement this requirement were effective March 1, 2006.

Major Achievements/Milestones Second 180 Days

- After March 1, 2006, residential child care licensing staff began reviewing child care operations, during regular monitoring visits, for compliance with providing employees with the required behavior intervention training curriculum.

- Licensing staff has provided technical assistance on how to meet the standard.

Regulatory Action

Random Inspections

Section 1.96 requires periodic inspection of a randomly selected sample of agency foster homes and agency foster group homes.
This section of Senate Bill 6 serves to address the gap in the ability of DFPS to inspect foster homes outside of a report of abuse or neglect by requiring periodic inspection of randomly selected foster homes. This also allows resources to be directed to these inspections to ensure the foster homes selected are meeting standards and that children are safe.

**Major Achievements/Milestones First 180 Days**

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

**Major Achievements/Milestones Second 180 Days**

- As of June 15, 2006, inspections of randomly selected foster homes were being done in four additional regions. Foster homes will be randomly inspected in all regions by the end of August 2006.
- Since January 1, 2006, there have been 277 inspections completed.
- Forms and letters have been developed to support sampling of homes for periodic inspection, including letters to notify selected foster parents and child-placing agencies, and forms to capture the information obtained during the foster home visits.
- Changes have been made to the automated licensing management system to include sampling information. The information can be compiled into a report that may be used when evaluating a child placing agency’s compliance with minimum standards.

**Adverse Actions**

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

Section 1.105 prohibits a residential child care operation from employing, in any capacity, someone who is ineligible to receive a license or someone who has been denied such a license because of out-of-state history.
Section 1.107 prohibits DFPS from issuing a permit to a person for 5 years after DFPS revokes the person’s permit to operate a residential operation or denies the person a permit to operate a residential operation; and prohibits a person from applying for a permit for 2 years after DFPS has denied or revoked a permit to operate a non-residential operation, such as a day care center or registered family home. It also allows DFPS to deny any license or certification to a person who operated or was a controlling person of a residential operation whose license has been revoked or who voluntarily closed before the license was revoked.

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

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

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

**Major Achievements/Milestones First 180 Days**

- Rules to implement these requirements are drafted and will be proposed to the DFPS Council at its April 2006 meeting.

- The DFPS child care licensing handbook and related forms were revised to incorporate these requirements and for staff to record findings of compliance or noncompliance on these rules.

- Residential child care licensing management staff was trained on these changes in January 2006.

**Major Achievements/Milestones Second 180 Days**

- Rules to adopt these requirements were proposed at the April 2006 DFPS Council meeting and will be presented for recommendation to adopt at the October 2006 Council meeting.

**Exit Conference**

Section 1.98 requires that upon completion of an inspection of a residential child care operation, the inspector is to have an exit conference with a representative of the inspected operation and to provide the representative a copy of the inspection checklist used by the inspector.
Residential child care licensing staff is required to have an exit interview with the staff of a child care operation at the end of an inspection. This ensures the representative of the child care operation and DFPS have an opportunity to communicate about potential violations. Providing a copy of the inspection results supports the residential child care staff in making necessary corrections or determining what change is needed to meet the licensing requirements.

**Major Achievements/Milestones First 180 Days**

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

**Major Achievements/Milestones Second 180 Days**

- Forms have been developed to allow licensing staff to leave a written report with a copy of the findings of the inspection with the child care operator at the end of an inspection.

- The licensing policy and procedure handbook has been updated to include procedures for conducting an exit interview and leaving a written report at the child care operation.
Significant Obstacles to Implementation and Steps to Resolve Obstacles

Both the CPS and APS programs have made tremendous progress since the passage of Senate Bill 6. However, these programs have encountered some obstacles to full implementation. DFPS and DADS have addressed some of the obstacles reported in the first Senate Bill 6 180-Day Progress Report. APS and HHSC have a plan to reduce APS caseloads, and CPS and HHSC, with guidance from the Legislature, have developed a policy for medical consent. However, retention and workforce stability continues to present challenges. A new obstacle has emerged due to DFPS’ successful hiring efforts and the lack of office space. An examination of these obstacles, past and current, follows.

Past Obstacles

APS caseloads and medical consent were presented as obstacles in the first report. DFPS and HHSC addressed these issues and no longer consider them obstacles. This section discusses how these obstacles were resolved.

APS Caseload Reduction Plan

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

APS intakes steadily increased for the first two quarters of fiscal year 2006. The total number of intakes for the first quarter of fiscal year 2006 was 28 percent higher than the first quarter of fiscal year 2005. As a result of the ongoing rise in intakes, the average daily caseload per caseworker was 58.5 for the first quarter of fiscal year 2006.

In the third quarter of fiscal year 2006, APS intakes decreased by 5 percent over intakes recorded in the third quarter of fiscal year 2005. While the rate of growth has declined for APS intakes, the overall numbers still represent an increase over fiscal year 2005, a year in which APS received the highest number of intakes since the program’s inception. The slower growth rate in APS intakes has corresponded with additional staff appropriated for fiscal year 2006 that have completed training and are carrying full caseloads. These two factors have largely influenced the decrease in average daily caseload per caseworker, which was 51.2 at the end of the third quarter of fiscal year 2006.

In order to address high caseloads and an estimated rise in intakes over the next three fiscal years, legislative leadership approved 179 additional caseworkers in fiscal year 2007. These 179 caseworkers will be phased in over fiscal year 2007, with the majority of positions filled by April 2007.
Medical Consent

Senate Bill 6, Section 1.39 requires the development of a statewide healthcare delivery model, provision of medical consent for children in foster care, parental notification of significant medical conditions, judicial review of medical care, health passports, and reporting to the Legislature the outcome of a study on the prescribing of psychotropic drugs for children in foster care.

The court presiding over the child’s case authorizes an individual or DFPS to consent to medical care for each child in DFPS conservatorship. If the court authorizes an individual as medical consenter, then the individual will be named in the court order, is ultimately responsible for medical decisions, and reports to the court. If the court authorizes DFPS to consent, DFPS is named in the court order. DFPS will designate a medical consenter and a back-up medical consenter for each child. Although those individuals are responsible for reporting to DFPS and DFPS in turn, to the court, DFPS is ultimately responsible for medical decisions.

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

In response, legislative leadership convened a workgroup consisting of physicians’ groups, advocates, residential childcare providers, HHSC, and DFPS to help clarify issues and develop solutions. It was clarified that the individuals DFPS may designate as medical consenter and back-up medical consenters include professional employees of emergency shelters, live-in caregivers (e.g., foster parents), relatives, and CPS caseworkers. DFPS may not designate employees of staffed facilities (e.g. residential treatment centers, intermediate care facilities for mental retardation) as medical consenters or back-up medical consenters. CPS caseworkers will likely be designated in those cases unless another individual, such as a relative, is available.

Remaining Obstacles

Retention and workforce stability and CPS conservatorship caseloads were presented as obstacles in the first report, and they continue to be issues for DFPS. This section discusses why these areas continue to receive attention and the strategies DFPS is developing to address them.

Retention and Workforce Stability

Retaining workers has been an ongoing issue for DFPS due to the nature of the work and a number of other factors. A key measure of retention and worker stability is the turnover rate and both APS and CPS continue to experience caseworker turnover. The APS caseworker turnover rate is 18.2 percent through the third quarter of 2006 (compared to the fiscal year 2005 rate of 20.5 percent). The CPS caseworker turnover rate is 28.9
percent through the third quarter of 2006 (compared to the fiscal year 2005 rate of 29.3 percent).

DFPS has worked on the issue of retention and workforce stability on a variety of fronts, primarily by hiring additional qualified workers, enhancing training to better prepare workers for their jobs, reducing the administrative burden on workers, providing additional staff resources to assist in success, improving supervisory skill levels, and building commitment and loyalty. The Texas Legislature provided funding for DFPS to address many of these areas.

The following sections provide additional information on DFPS’ strategies to address retention and workforce stability:

**Hiring:** In an effort to select candidates that have the needed technical skills, performance characteristics, and behavioral responses to real-life work situations, DFPS has employed new tools to hire staff who are most likely to be successful in these areas and stay with the job long term, including:

- A pre-screening test for job applicants to assess the applicant’s skills and performance characteristics.
- A behavioral interview guide, to assess how each candidate would respond in various work situations, scored according to the types of behaviors or responses that are most effective in CPS worker positions.

**Training and Development:** As a result of Senate Bill 6, DFPS restructured its training program, increasing training time for new workers to 11 and 12 weeks for APS and CPS respectively. The new curriculum developed for fiscal year 2006 is being evaluated and revised to further improve its effectiveness. To retain its workers, APS has implemented a stipend program to provide tuition and fees assistance for staff actively pursuing degrees in social work, gerontology, and other professional programs related to serving vulnerable adult populations.

As a result of the revised selection process and training program, the number of CPS caseworkers who leave the agency within their first 6 months of employment has substantially declined. In fiscal year 2005, 14 percent of CPS caseworker terminations occurred during the first 6 months of their employment, compared to 10.9 percent as of June 30, 2006.

**Administrative Burden:** DFPS has made available mobile dictation, remote computer access, and tablet PCs to select worker groups in APS, CPS and Residential Childcare Licensing (RCCL). APS has fully implemented tablet PCs and CPS and RCCL have completed the pilot phase of implementation. In addition, revisions to the licensing automated case management system have greatly reduced duplicative data entry by licensing staff.

**Additional Resources:** Senate Bill 6 provided additional staff to CPS and APS, which reduced caseloads for CPS investigators. APS has experienced a significant increase
in intakes, so caseloads have remained high despite the new caseworkers. CPS conservatorship workers have also experienced significant caseload increases. In response to these challenges, legislative leadership approved an additional 179 APS caseworkers and 100 CPS conservatorship caseworkers for fiscal year 2007.

**Improved Supervision:** The leadership program termed “DFPS Tomorrow” is in its third year, and many supervisors are completing the program requirements. To date, 158 supervisors have graduated. DFPS also has an aggressive schedule for implementing its performance management system. APS has fully implemented its performance management system, CPS is nearing completion, and other areas in DFPS are following suit.

**Commitment and Loyalty:** The DFPS Commissioner visited large DFPS offices in every region and is currently beginning visits to smaller regional offices. He has used these opportunities to discuss the impact of Senate Bill 6 and to encourage staff to continue their good work and rise to the new challenges of DFPS reform. DFPS established a change management steering committee to advance DFPS’ mission, vision and values and to help workers adjust to the many changes. A workgroup centered on recruitment, recognition, and retention was created to focus on all aspects of worker retention and stability.

**CPS Conservatorship Caseload**

While reforms such as expanded family group decision-making, informed medical consent, and the rollout of a statewide kinship program are having positive effects on Texas families, there have been some corresponding caseload challenges for CPS. In fiscal year 2005, average daily caseloads were 42.7 for conservatorship workers. As of June 2006, that number has risen to 46.9. The total number of conservatorship cases has steadily risen from 35,412 in fiscal year 2004, to 41,305 in fiscal year 2005, and to 43,202 in fiscal year 2006.

As of June 2006, 1112 of the 1200 authorized conservatorship caseworker positions allocated statewide were filled. Legislative appropriations allowed for the creation of functional units consisting of a 1:5 worker to supervisor ratio plus clerical support and a caseworker assistant; it did not authorize additional conservatorship caseworkers. Even allowing for the creation of functional units, conservatorship caseworkers experienced a workload increase.

CPS managers recognized the obstacles facing front-line conservatorship workers and sponsored efforts to assist. Regional and state office staff assisted in visiting children for a 3-month period, providing some relief for monthly duties of workers. Paid overtime was offered for a 4-month period to conservatorship staff to assist in documenting casework activities. Conservatorship workers continue to use the mobile dictation service as a method to input casework data. Support resources such as clerical assistance, casework assistance, and other agency staff have been diverted to help with appropriate casework duties that do not require a caseworker to complete.
Despite these efforts, conservatorship caseloads continue to rise. In response, legislative leadership approved an additional 100 conservatorship workers for fiscal year 2007. Beginning September 1, 2006, DFPS will begin hiring these workers. While the new conservatorship workers and other efforts will provide much relief, it may not sufficiently impact workers in having adequate time to perform all the critical duties needed for each child and family on their caseload. These obstacles are expected to continue in the future.

**New Obstacles**

Since the first report, a new obstacle has emerged in the form of limited space and unforeseen infrastructure needs for new DFPS staff, partly as a result of the delay in the rollout of the HHSC Integrated Eligibility Project. This section discusses this new obstacle as well as steps taken to overcome it.

**Space and Infrastructure for Program Growth**

The rollout of the Integrated Eligibility Project has been delayed. Consequently, office space that DFPS had planned on receiving from HHSC to house additional staff in various parts of the state has not yet been made available. In the regions where the rollout was to occur first, the impact on DFPS’ ability to receive office space was challenging.

DFPS is working with HHSC and the Texas Building and Procurement Commission to acquire new leases for office space. It is anticipated that there will be costs related to the purchase of furniture, telephone systems and other items that DFPS had originally planned to acquire from HHSC.

DFPS continues to work with HHSC to house staff, whenever possible, at sites where other social services and state agencies are located. In addition, lease acquisition attempts are focused on office locations where a significant client base exists, ensuring that DFPS establishes offices in areas where services are most needed. DFPS continues to pursue co-location opportunities with community partners that best optimize available resources.
Provisions Unable to Fully Implement

Community-Based Family Services

As noted in the first Senate Bill 6 progress report, Section 1.53 requires DFPS to administer a grant program to provide funding for community organizations, including counties and faith-based organizations, to respond to lower-priority, less serious cases.

Although a specific appropriation was not granted for this provision, DFPS plans to fund the Community-Based Family Services program from Strategy A.2.16 appropriated to develop new at-risk prevention services. The first year of the program will be funded at $125,000, with contracts expected to begin March 2007. Subsequent years will be funded at $250,000. Without additional appropriations, DFPS is unable to fully implement this program on a statewide basis. DFPS is requesting $1.5 million each year for the fiscal year 2008-09 biennium for this purpose through the legislative appropriations request process.

Development of Child Safety Alert Checklist With the Department of Public Safety

Section 1.22 states that, subject to the availability of funds, the Texas Department of Public Safety (DPS) shall create a child safety alert checklist as part of the Texas Crime Information Center to help locate a family for purposes of investigating a report of abuse or neglect.

Since publication of the first Senate Bill 6 progress report, DFPS contacted DPS to discuss creation of the checklist. DPS indicated they have insufficient resources to implement a child safety alert checklist. DFPS sent a letter to DPS on August 1, 2006, to formally acknowledge this understanding.
Unanticipated Fiscal Implications and Cost-Effective Recommendations

Transfer of Guardianship Program

As DADS initially reported, the number of intakes to APS has steadily increased and is projected to continue increasing for the next few years. As a result, the number of referrals to the DADS guardianship program has also increased. These increased referrals resulted in the number of active guardianships increasing from 656 in December 2004 to 805 as of May 31, 2006. This is an approximate 23 percent increase in the number of individuals for whom DADS provides guardianship services. The number of guardianships that DADS contracts for remains fairly constant at 160 due to the amount of funds available for those services.

To ensure the continued quality of services provided, DADS will need to look at expanding the program through increased funding for contract guardianships and increasing the number of DADS guardianship staff. Although cost effective, local guardianship programs are not available to contract within all geographic areas, and some of the existing programs are restrictive in the types of persons they serve. HHSC and DADS are carefully monitoring guardianship caseloads and trends. DADS has submitted an exceptional item request, for fiscal years 08/09, for additional contract dollars and additional guardianship staff to address the increased demand for services.

Supporting Mobile Casework

Since the publication of the first Senate Bill 6 progress report, DFPS identified unforeseen fiscal and resource challenges as a result of the mobile casework initiative. The APS, CPS, and residential childcare licensing (RCCL) program mobility efforts, resulting from Senate Bill 6, are a major contributor to the anticipated success of the APS and CPS reform efforts. Adding approximately 3,000 tablet PCs and associated tools to the DFPS information technology landscape creates a challenge for that division. The hardware and software used for tablet PCs requires more support, part replacement, and maintenance activities than desktop PCs. By adding a new platform based on mobility, the workload of the information technology staff has significantly increased. Some of the key information technology activities associated with mobile casework are:

- Hardware inventory management for large amounts of equipment.
- Development and maintenance of a new computer image based on a different operating system and software than the desktop PC environment.
- New platform needing security patches and updates on a regular basis.
- Implementation and maintenance of a wireless network environment.
- Implementation and maintenance of a virtual private network and dial-up modems to support home network access.
• Large increase in individual user support caused by increased volume of hardware, software, and decentralization of computer use.

Some of these items are the result of changes in approach learned through pilot projects and assessments. Continuing to evaluate and adjust the details of mobile technology is critical to DFPS’ overall reform success. Tablet PCs are a new technology, and very few state agencies in the United States have identified a best practice approach for their use and support. DFPS will need to continue to adjust to best meet the needs of clients as well as caseworkers, which may result in continued resource challenges for information technology staff.
Steps Taken to Enhance External and Internal Accountability for Expend ing Public Funds and Achieving Favorable Outcomes.

Internal Accountability

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

**Major Achievements/Milestones First 180 days:**

- Developed performance indicators through a broad effort between HHSC and DFPS management and direct delivery staff.
- Identified performance expectations that support positive client outcomes, client safety, policy compliance, effective community engagement, and efficient use of agency resources.
- Strengthened accountability expectations to an employee’s annual performance evaluation.
- Developed measures related to the quality and timeliness of data entry in accordance with the Legislature’s emphasis on “real time” case management information.
- Developed regularly updated electronic reports with qualitative and quantitative information, allowing supervisors, managers, and caseworkers to assess performance on an ongoing basis.
- Implemented a system to ensure aggregate reporting of regional and statewide performance is analyzed, summarized, and provided to DFPS program staff and executive leadership.
- Re-defined specific performance expectations for positions statewide. For example, APS caseworkers in one part of the state are held accountable for the same level of performance as caseworkers in another part of the state. These performance expectations are comprised of critical qualitative and quantitative indicators for each DFPS program, and thresholds were established for what constitutes particular performance ratings.
Major Achievements/Milestones Second 180 Days:

- Established thresholds for performance indicators for supervisors, program directors, and regional directors.

- Centralized responsibility for DFPS performance management.

Contractor Accountability

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

Major Achievements/Milestones First 180 Days:

- Identified needed service contract improvements related to specific goals, outcomes, and output measures. These measures will become part of future procurements and resulting contracts. Contract monitoring will be enhanced to include assessment of the contractor’s ability to meet measures.

- Created a structure for a centralized client services procurement unit to ensure uniform and consistent procurement practices.

- Developed policies, procedures, and tools to strengthen contracting.

- Identified methods to provide ongoing technical assistance and training for procurement and contract management staff to increase agency accountability.

- Began developing a plan for the conversion from open enrollment to competitive procurement contracting.

Major Achievements/Milestones, Second 180 Days:

-Began operation of a centralized client services procurement unit.

- Provided technical assistance and training for procurement and contract management staff.

- Continued developing an agency wide contract improvement plan.
Accountability to the Community

DFPS is improving accountability by engaging external stakeholders and providing meaningful and timely information about reform efforts and other important agency activities.

Major Achievements/Milestones First 180 days:

- Created a community engagement plan that includes stakeholder interaction policies and procedures, outcome measures tied to performance management, and increased community engagement training for staff.

- Created outsourcing and DFPS Renewal (Reform) web pages which are used to disseminate the latest information both internally and externally. The renewal pages include information on CPS Medical Services, Disproportionality in CPS, APS Renewal, and CCL Renewal. See: http://www.dfps.state.tx.us/about/renewal/default.asp http://www.dfps.state.tx.us/about/outsourcing/default.asp.

- Implemented a subscription e-mail service notifying stakeholders when new information is added to DFPS' public website (www.dfps.state.tx.us), as well as the renewal and outsourcing pages. Directly e-mailed associations and other stakeholders about important DFPS developments.

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

Major Achievements/Milestones Second 180 days:

- Produced an informational release for all DFPS program staff, anchored by a video message from the DFPS Commissioner, outlining the major goals and expectations for community engagement success.

- Attended monthly meetings facilitated by Texans Care for Children: Partners in CPS Reform. During these meetings, information on DFPS reform efforts is shared and feedback is received from stakeholders to include advocates, providers, and legislative staff.

- Participated in a workgroup to obtain input on implementation and procedures for the random sampling inspections of foster homes conducted by residential child care licensing staff. Stakeholder membership consists of child-placing agency representatives, foster parent association representatives, and representatives of the Texas Alliance.

- Formed a committee to determine the steps needed to implement the revised minimum standards for general residential operations and child-placing agencies.
Committee membership includes residential child care and child-placing agencies as well as DFPS staff from the protection, licensing, and technology program areas.

- Held a series of stakeholder meetings in San Antonio, the first selected region for the outsourcing of substitute care and case management services.
Conclusion

There has been concrete progress in implementing Senate Bill 6 since its effective date of September 1, 2005. HHSC, DFPS, state leadership, community stakeholders and expert consultants are committed to ensuring a positive start to this long-term reform effort. HHSC and DFPS look forward to working with their many partners in continuing to implement the comprehensive reform envisioned in Senate Bill 6. Though there are challenges, maintaining the vision of improved safety and well-being of children and vulnerable adults as the criteria against which implementation decisions are made, will ensure a steady and successful reform effort.
### Appendix: DFPS Reform Initiatives

#### Summary of DFPS Reform Initiatives

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<tr>
<th>1 CPS Investigations</th>
<th>Program: Child Protective Services</th>
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<tr>
<td><strong>Purpose:</strong> The CPS Investigations Initiative will create an Office of Investigations, develop a new model for investigations that will incorporate forensic techniques, and revise and enhance training for investigative staff. A number of other issues will be addressed, including contact timelines, Early Childhood Intervention (ECI) referrals, family location, engaging families, and working with uncooperative families.</td>
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<th>2 CPS Risk and Safety Assessment</th>
<th>Program: Child Protective Services</th>
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<tr>
<td><strong>Purpose:</strong> The CPS Risk and Safety Assessment Initiative will identify activities to ensure the risk assessment instrument and philosophy are fully integrated and consistently applied in daily practice at every stage of service with particular focus on investigations. A safety assessment process will be developed and integrated into the risk assessment protocol.</td>
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<th>3 Supporting Quality Casework</th>
<th>Program: Child Protective Services</th>
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<tr>
<td><strong>Purpose:</strong> The Supporting Quality Casework Initiative will focus on strengthening the structures of unit management and regional management to improve outcomes for clients. Embedding subject matter experts into units also will increase casework knowledge and lead to improved outcomes. Increasing mobile technology for casework support and improving court relations through use of technology are critical components of the initiative.</td>
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<th>4 Family Focus</th>
<th>Program: Child Protective Services</th>
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<tr>
<td><strong>Purpose:</strong> The Family Focus Initiative will enhance the safety, permanency, and well being of children through the provision of direct and support services to their caretakers. This initiative is designed to improve the services delivered to families receiving Family-Based Safety Services as well as parents, children and extended family members involved in the foster care system. The Family Focus Initiative will also enhance and expand the Family Group Decision-Making process and Kinship Care.</td>
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<th>5 Medical Services for CPS Children</th>
<th>Program: Child Protective Services</th>
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</table>
**Purpose:** The Medical Services Initiative will ensure that each foster child receives accessible, coordinated, comprehensive, and continuous healthcare through establishing medical homes for foster children, improving management of psychotropic drugs, providing medical passports for foster children, and establishing Centers for Forensic Assessments for the forensic diagnosis and treatment of abuse and neglect.

### 6 Educational Services for CPS Children

**Program:** Child Protective Services

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

### 7 Transitional Living Services

**Program:** Child Protective Services

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

### 8 Disproportionality

**Program:** Child Protective Services

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

### 9 Outsourcing CPS Services

**Program:** Child Protective Services and Purchased Client Services

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

Program: Prevention and Early Intervention

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

11 APS Intake, Investigation and Service Delivery

Program: Adult Protective Services

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

12 APS Risk Assessment

Program: Adult Protective Services

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

13 Guardianship

Program: Adult Protective Services

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

14 APS Case Profiling

Program: Adult Protective Services

Purpose: The Case Profiling Initiative will focus on developing a method for profiling APS cases in terms of their complexity and demand for APS resources. The goal is
to use regional case characteristics indicative of risk, need, and severity of alleged and actual abuse, neglect, and/or exploitation to inform management decision-making on how to best allocate resources to address APS cases.

15 APS Training Innovation

**Program:** Adult Protective Services

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

16 Performance Management

**Program:** All DFPS Programs

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

17 Resource/Funding Allocation

**Program:** All DFPS Programs

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

18 Community Engagement

**Program:** All DFPS Programs

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

19 Communications

**Program:** All DFPS Programs

**Purpose:** The Communications Initiative will develop and implement a comprehensive communications plan for DFPS that fosters consistent communication both internally and externally, fosters a cultural shift within the agency, as well as an understanding of the agency’s mission by the public, providers
and other stakeholders. The initiative is also charged with consolidating public information functions and developing public awareness plans for both APS and CPS.

20 CPS Training Innovation

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

21 Human Capital

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

22 Records Management

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

23 IMPACT Modifications

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

24 Revising Licensing Standards

| Program: Residential Child Care Licensing |
| Purpose: The Revising Licensing Standards Initiative will revise minimum standards for residential child care facilities and child-placing agencies. The revision will involve the consolidation of 10 sets of minimum standards for 24-hour Residential
Child Care facilities into four sets, which will eliminate duplicative and conflicting requirements among standards. The revision will provide the opportunity to design a system that assigns a numerical score or weight to individual minimum standards based on the relative risk to children.