The mission of the Department of Family and Protective Services is to protect children, the elderly, and people with disabilities from abuse, neglect, and exploitation by involving clients, families, and communities.
Outline

• Local Resources
• Community Partnerships
• Foster Care and Foster Care Redesign
• Workforce Stabilization
Local Resources

Counties Funding DFPS FTEs

- BEXAR, 62.0
- DALLAS, 53.0
- TARRANT, 41.5
- BOWIE, FORT BEND, GALVESTON, HAMILTON, LAMAR, AND LUBBOCK, 1

Number of FTEs

County
<table>
<thead>
<tr>
<th>CPS in Harris County 2014 Funding</th>
<th>State</th>
<th>Harris County</th>
<th>Federal</th>
<th>Others</th>
<th>Total HCPS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff Salaries, Benefits and Travel</td>
<td>$473,084</td>
<td>$16,317,732</td>
<td>$2,799,796</td>
<td>$2,068,430</td>
<td>$21,659,042</td>
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<tr>
<td>Children’s Foster and Institutional Care</td>
<td>0</td>
<td>$117,125</td>
<td>$268,325</td>
<td>0</td>
<td>$385,450</td>
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<tr>
<td>Children’s Services Contract</td>
<td>$151,820</td>
<td>$100,800</td>
<td>$1,121,735</td>
<td>0</td>
<td>$1,374,354</td>
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<tr>
<td>Children’s Medical Services</td>
<td>$98,700</td>
<td>$244,620</td>
<td>0</td>
<td>0</td>
<td>$343,320</td>
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<tr>
<td>General and Administrative</td>
<td>$665,099</td>
<td>$2,914,514</td>
<td>$194,394</td>
<td>$664,554</td>
<td>$4,438,561</td>
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<tr>
<td>TOTAL</td>
<td>$1,388,703</td>
<td>$19,694,791</td>
<td>$4,384,250</td>
<td>$2,732,984</td>
<td>$28,200,728</td>
</tr>
</tbody>
</table>

Source: CPS in Harris County Annual Report 2014 - 2015
• The Children’s Assessment Center provides a multidisciplinary team approach in the prevention, assessment, investigation and treatment of child sexual abuse.

• The Center substantially benefits child sexual abuse victims and their families by offering the following services:
  o One child-friendly location
  o On-site medical and clinical assessments using state-of-the-art equipment. Joint training for all professionals and volunteers
  o Elimination of repetitive interviews of children by co-housing all treatment professionals and team staffing all cases
  o Quality, coordinated assessment and planning to ensure the success of recovery by children and families
  o Volunteer supervision the children while obtaining services
Community Partnerships

- Child abuse and neglect is a public health issue that must be addressed at the community level. Community partnerships are critical to accomplishing DFPS’s Mission.
  - Foster Parents
  - Foster Care Providers
  - Clinicians and Service Providers
  - Hospitals
  - CASA
  - Child Advocacy Centers
  - Local Mental Health Authorities
  - Superior HealthPlan
  - TJJD and Other State Agencies
  - Judiciary
  - Law Enforcement
  - Child Protection Advocates and Stakeholders
Foster Care

• When a child can’t live safely at home and no appropriate non-custodial parent, relative, or close family friend is willing to care for them, the court can give conservatorship to CPS.

• Foster care settings include:
  o Foster family homes
  o Foster group homes
  o Residential group care facilities
  o Facilities overseen by another state agency
Kinship Care

- Kinship Care is care provided to a child in DFPS conservatorship by relatives or fictive kin who live outside of the child’s home. More than 40% of the children and youth in DFPS conservatorship reside in Kinship placements.
  - A Relative Caregiver is defined as a person who is related to the child by blood or adoption or marriage.
  - A Fictive Kin Caregiver is an individual who has a longstanding and significant relationship with a child or with the child’s family.
The foster care population has shifted. A greater percentage of children in care are requiring a higher level of services. The services may include:

- Behavioral Health Services
- Primary Medical Needs
- Intellectual or Development Disabilities
- Other special needs such as autism, bipolar disorder, diabetes and serious behavioral issues.

Many children with high needs entering foster care are placed outside of their communities.
Foster Care - Solutions

- Foster Care Redesign
- Child and Adolescent Needs and Strength (CANS) Assessment Tool
- Single Child’s Plan of Service
- Performance-based Demonstration
Workforce Stabilization - Challenges

• Turnover in Child Welfare has been a national concern for 30 years.

• Effects of Turnover:
  o Fewer Tenured Staff
  o Raises Caseloads of Remaining Caseworkers
    ▪ Increases risk to children
    ▪ Increases caseworker stress levels
    ▪ Caseworkers more likely to leave agency
Workforce Stabilization - CPS Turnover

CPS Turnover Data for 2nd Qtr FY16

Region 1: 22.5%
Region 2: 28.2%
Region 3: 30.4%
Region 4: 17.6%
Region 5: 16.1%
Region 6a: 25.8%
Region 6b: 20.5%
Region 7: 22.5%
Region 8: 19.2%
Region 9: 28.9%
Region 10: 10.2%
Region 11: 15.5%
Statewide: 23.0%

Source: Turnover and HR-Related Data for FY16
Reason Caseworkers leave and what DFPS is doing about it:

1. Concerns about Working Conditions: Safety and Stress Levels
   - Office of Worker Safety
   - Caseworker Support Centers
   - Impact Modernization

2. Better Pay and Benefits
   - Overtime Balance Pay Down
   - Locality Pay
   - Performance Based Merits

3. Issues with Supervisors or People Supervised
   - Redesigned Training Model
   - Performance Evaluations
   - Cultural Shift
Conclusion

• Over the last 3.5 years we have made a number of changes to ensure the safety of our children, but challenges still exist.

• These challenges include meeting the higher needs of our children and addressing the stability of our workforce.

• As we continue CPS Transformation, we expect better outcomes for our children.