CPS Critical Needs Request

- 550 Direct Delivery staff (828.8 total, including support staff)
- $142,434,948 All Funds

DFPS received approval for FTEs and funds for FY 17 on 12/01/2016

Funds were used to hire additional CPS caseworkers and staff, as well as provide salary increases for front-line CPS staff.
CRITICAL NEEDS HIRING BY MONTH AND TYPE

DEC JAN FEB MAR APR MAY

INV CVS FBSS SPEC INV SUPERVISORS UNIT SUPPORT REGIONAL MGT AGENCY SUPPORT

12 14 30 2 2 1
6 14 45 16 1 8
54 28 42 21 2 30
56 14 32 16 2 37
67 48 22 40 37 30
1 1 1 1 4 1
1 4 1 1 2 1
1 14 2 2 1 6
1 1 1 1 1 1

DFPS Prior to the 85th Session
DFPS Prior to the 85th Session

Caseloads

LBB Performance Targets

<table>
<thead>
<tr>
<th>Year</th>
<th>INV Caseload</th>
<th>CVS Caseload</th>
<th>FBSS Caseload</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>14</td>
<td>24.1</td>
<td>11.5</td>
</tr>
<tr>
<td>2019</td>
<td>13.9</td>
<td>23.1</td>
<td>11.2</td>
</tr>
</tbody>
</table>
Face to Face Contacts

Priority 1 Investigations seen within 24 hours

P2 Investigations seen within 72 hours

Jan '17 to Oct '18

- Jan '17: 74.1%
- Feb '17: 79.4%
- Mar '17: 80.7%
- Apr '17: 81.8%
- May '17: 91.1%
- June '17: 88.2%
- July '17: 86.5%
- Aug '17: 86.0%
- Sept '17: 85.4%
- Oct '17: 83.6%
- Nov '17: 86.9%
- Dec '17: 86.0%
- Jan '18: 86.5%
- Feb '18: 83.6%
- Mar '18: 86.3%
- Apr '18: 90.0%
- May '18: 86.1%
- June '18: 84.7%
- July '18: 86.4%
- Aug '18: 89.5%
- Sept '18: 90.1%
- Oct '18: 88.5%
Intakes, Investigations, & Removals

<table>
<thead>
<tr>
<th>Year</th>
<th>Intakes (CPS)</th>
<th>Investigations</th>
<th>Removals</th>
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<tbody>
<tr>
<td>FY '16</td>
<td>289,334</td>
<td>238,592</td>
<td>19,079</td>
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<tr>
<td>FY '17</td>
<td>295,479</td>
<td>238,600</td>
<td>19,864</td>
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<tr>
<td>FY '18</td>
<td>300,897</td>
<td>246,085</td>
<td>20,540</td>
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</tbody>
</table>
Removals Reversed Within 30 Days

Number of Children Removed

Children Removed Who Exited DFPS Custody within 30 Days
Improved Outcomes for Kids & Families

Kinship Placements: FY '16 43.2%, FY '18 45.6%
PAL Completion: FY '16 75.5%, FY '18 91.4%
Reunification: FY '16 30.5%, FY '18 32.7%
Adoptions w/i 12 months: FY '16 53.7%, FY '18 56.2%
Permanency w/ Relatives: FY '16 65.9%, FY '18 67.9%
House Bill 5 (Frank)

- Removed DFPS from the Health and Human Services System and established DFPS as an independent agency that reports to the Governor.
- Reestablished the FPS Council to make recommendations on policies, management, and operations of the department.
- Required Senate confirmation of the DFPS Commissioner.
- Established/memorialized:
  - Investigations Division
  - Consolidated Data Division
  - Legal Division
  - Operations Division (including Human Resources and IT functions)
  - Financial Management and Accounting Services
- Further allowed DFPS Commissioner to establish additional divisions as appropriate and assign department functions among the divisions.
- DFPS worked closely with HHSC to successfully separate the agencies while ensuring no services were interrupted for clients.

- DFPS continues to contract with HHSC for shared administrative services, including payroll, procurement, information resources, rate setting, purchasing, and contracting.

- DFPS and HHSC established a Steering Committee and sub-committees that remain committed to addressing issues of overlap as they occur.
Established a monthly payment for relative or other designated caregivers.

In order to qualify, a caregiver must have a family income less than or equal to 300 percent of the federal poverty level.

Monetary assistance provided to a caregiver may not exceed 50 percent of the department’s daily basic foster care rate for the child.

Payment remains a manual process, however DFPS anticipates release of an automated solution in December 2018.

First payments were made in October 2017 to 3,552 caregivers.

DFPS has requested funding in our Legislative Appropriations Request to continue this program and further grow kinship placements.
House Bill 7 made several changes regarding suits brought by DFPS that affect the parent-child relationship including:

- **Increased protection for parents:**
  - Prohibited removals and termination based on homeschooling, poverty, nonviolent misdemeanor charges, low THC cannabis products as prescribed, or declined immunizations.
  - Created a defense for a parent who acts in good faith, but is unable to complete all requirements in a service plan, when such failure is not the fault of the parent.
  - Required that in order to terminate the parental rights of two parents, the evidence with respect to each parent must be proven by clear and convincing evidence.
  - Allowed that parents who are not indigent may postpone a full adversary hearing for not more than seven days to hire an attorney or provide the parent's attorney time to respond to the petition.
  - Clarified standard for non-emergency removal.
General litigation changes:

- Clarified process around mandatory transfer when one court takes emergency jurisdiction over a CPS matter but another court otherwise has exclusive jurisdiction because of prior action.
- Added required findings and focus on relative placements and parental reunification in court hearings.
- Made mandatory dismissal of CPS cases automatic and jurisdictional.
- Required the court to make findings in the record supporting the court’s order if the court finds that a health care professional has been consulted regarding a health care service, procedure, or treatment for a child in the conservatorship of the department and the court declines to follow the recommendation of the professional.
- Required DFPS and Children’s Commission to review form of jury submissions and make recommendations on broad-form or specific jury questions.
- Requires the Supreme Court Children's Commission to conduct a study regarding the use of attorneys ad litem in DFPS cases.
Additional changes

- Changed the inpatient mental health facility admission and discharge standards for children in CPS conservatorship.
- Required DFPS to notify STAR Health of placement changes within 24 hours. Superior is responsible for notifying key treatment professionals of the placement change.
- Created new licensing types for child care licensing (governed/implemented by HHSC).
- Foster Care Capacity Needs Assessment
- 3-Day Medical Exam
- Community-Based Care Expansion and Statewide Rollout
- Performance Based Contracting, Incentives and Penalties
- FBSSS Pilot Program
FY 17 Foster Care Needs Assessment

Total Available Capacity

- Private Agency Foster Homes: 9,858
- Private Agency Foster Home Licensed Capacity: 28,735
- DFPS Foster Homes: 1,133
- DFPS Foster Home Licensed Capacity: 3,133
- Licensed Capacity for GROs: 35,594
Changes in Capacity

• **568** placements *lost* since Fiscal Year 2017 (actual lost beds)
  – placements in RTCs and GROs serving high needs children due to contract actions, contract terminations, Hurricane Harvey, or provider imposed capacity limits

• **351** General Residential Operation placements *gained* through **new** contracts in Fiscal Year 2018 (estimate)
  – contracts with thirteen new providers join existing capacity expansion through existing contracts

• **50 percent reduction** in DFPS Home and Community Services (HCS) waiver slots for aging-out youth (currently 110 total for DFPS) and a **100 percent reduction** in general residential operation division slots
Capacity Building Strategies

Foster Care Needs Assessment

- Released in August 2018
- Provides a road map for the agency and its stakeholders to more strategically build foster care capacity while identifying patterns, calculating available supply, and better estimating local capacity

Treatment Foster Care

- New program designed to provide intensive services to children in a highly structured home environment and be a cost-effective alternative to residential treatment.
- Three contracts with providers to serve an estimated 500 children statewide

Intense Plus Rate

- Supports providers in serving high-needs kids through a specialized rate.
- DFPS worked with nine providers, who expressed interest in providing this service and submitted the required documents for considerations, and DFPS has a contract with one provider for this level of care.
3-in-30 Medical Exams

1. 3-Day Initial Medical Exam
   In 3 business days, children entering DFPS care must see a doctor to be checked for injuries or illnesses and get any treatments they need.

2. CANS Assessment
   In 30 days, children (ages 3-17) must get a CANS assessment. The CANS is a comprehensive trauma-informed behavioral health evaluation. It gathers information about the strengths and needs of the child and helps in planning services that will help the child and family reach their goals.

3. Texas Health Steps Medical Check-Up
   In 30 days, children must see a doctor for a complete check-up with lab work. This makes sure:
   - We address medical issues early.
   - Kids are growing and developing as expected.
   - Caregivers know how to support strong growth and development.
3-Day Medical Exam

Senate Bill 11 (Schwertner, 85R) requires children entering care to receive a medical exam in the first three business days after removal and is part of the “3 in 30” protocol.

The department shall ensure that each child who is in the conservatorship of the department for more than three business days receives an initial medical examination from a physician or other health care provider not later than the end of the third business day after the date the child is removed from the child’s home, if the child:
- Is removed as the result of sexual abuse, physical abuse, or an obvious physical injury to the child; or
- Has a chronic medical condition, a medically complex condition, or a diagnosed mental illness.
- The department shall ensure that any child who enters the conservatorship of the department receives any necessary emergency medical care as soon as possible.
# 3-Day Medical Exam Implementation

<table>
<thead>
<tr>
<th>Regions 1, 7, 9, &amp; 10</th>
<th>Regions 2, 3 East, &amp; 3 West</th>
<th>Regions 4, 5, 6A and 6B</th>
<th>Regions 8 &amp; 11</th>
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<tr>
<td><strong>April 2018</strong></td>
<td><strong>May 2018</strong></td>
<td><strong>June 2018</strong></td>
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<td><strong>Oct 2018</strong></td>
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<td><strong>Nov 2018</strong></td>
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</table>

## Medical Assessment
- Vital Signs, including growth parameters
- History
- Physical exam
- Tests (lab, imaging, etc)
- Treatment
- Discharge
- Follow-up Instructions
• The 3-day exam **DOES NOT** replace the Texas Health Steps (THSteps) medical checkup or the Child and Adolescent Needs and Strengths (CANS) Assessment. The 3-day medical exam is required in addition to THSteps and CANS.

• Children and youth **MAY NOT** receive vaccinations at the 3-day exam unless the medical professional determines that a *tetanus* vaccination is necessary.
CBC (formerly known as Foster Care Redesign) is a community-based approach to meeting the individual and unique needs of children, youth, and families. Within a geographic catchment area, a single contractor (Single Source Continuum Contractor or SSCC) is responsible for duties traditionally handled by CPS.

- **CBC Stage I:** SSCC responsible for placement of children in foster homes and other living arrangements as appropriate with a “no eject, no reject” clause and performance-based contract
- **CBC Stage II:** SSCC responsible for full case management and reunification services that move children to permanency
- **CBC Stage III:** SSCC performance metrics inform incentives and penalties for the time a child spends in foster care
Rollout of CBC

REGION 3B: ACH serving Region 3B (Fort Worth and surrounding counties) in Stage I (since Jan. 2014)
• ACH and DFPS have reached agreement (pending Legislative Approval) to transfer Stage II Case Management as required by SB 11; anticipated rollout of Stage II in Spring 2019;
• As of July 2018, ACH was serving 1,322 children, approximately 8% of children in paid foster care in Texas.

REGION 2: In June 2018, 2INgage (a new partnership between Texas Family Initiative LLC and New Horizons Ranch and Center Inc) signed a contract to serve as the SSCC in Region 2 (30 Counties in Northwest Texas, including Abilene and Wichita Falls).
• Readiness activities are underway and 2INgage plans to begin serving children in Stage I in December 2018. Stage II case management services will begin based on SSCC readiness
• 2INgage will serve an estimated 754 children or 4% of children in paid foster care in Texas.

REGION 8A: In August 2018, Family Tapestry (a division of the San Antonio Children’s Shelter) signed a contract to serve as the SSCC in Region 8A (Bexar County).
• Readiness activities are underway and Family Tapestry plans to begin serving children in Stage I in February 2019. Stage II case management services will begin based on SSCC readiness (in previous experience, an SSCC requires at least one year in Stage I before they can contemplate readiness for Stage II).
• Family Tapestry will serve an estimated 1,982 children or 11% of all children in paid foster care in Texas.

REGION 1: In August 2018, DFPS announced that it would be expanding CBC into Region 1 (41 counties in the panhandle, including Amarillo and Lubbock); DFPS expects to release an RFA for Stage I in fall 2018.
• An estimated 1,076 children or 6% of all children in paid foster care in Texas will be served by an SSCC in Region 1.

REGION 8B: In August 2018, DFPS announced that it would be expanding CBC into Region 8B (27 counties in south central Texas, surrounding (but excluding) Bexar County); DFPS expects to release an RFA for Stage I in March 2019.
• An estimated 1,296 children or 7% of all children in paid foster care in Texas will be served by an SSCC in Region 8B.
DFPS has requested an Exceptional Item for FY 2020-2021 to sustain and expand Community Based Care

- As directed by SB 11, 85th Legislative Session, this request supports the continued phased in expansion of the Community Based Care (CBC) model to a total of nine geographic catchment areas, serving the majority of children in paid foster care by the end of the biennium if fully funded.

SSCC contracts:
- Competitively Procured
- Approximately six months from release of RFA to contract award
- Performance-based with financial incentives and remedies related to permanency
- No eject, no reject philosophy
Performance Review and Evaluation

- Readiness Review determines placement and case management start dates
- DFPS conducts quarterly contract performance and monitoring reviews with each SSCC
- Rider 21 completed biannually
- DFPS has contracted with Chapin Hall of Chicago to develop contract monitoring systems, rate-setting methodology, startup funding
- DFPS will hire case management oversight staff to oversee and ensure accountability
CBC Contract Performance Measures

- The contract performance measures for the SSCC contracts are based on federal and/or state requirements.
- When an SSCC begins to serve children, DFPS begins to monitor their quality and provide oversight.
- For example, if DFPS saw from SSCC-reported data that caseworker turnover was spiking, we will work with the SSCC to make sure there are enough caseworkers to serve children.
- These are not punitive measures, rather they are the agency’s tools for oversight and quality assurance.
- Unresolved issues impacting performance can result in something beyond a quality improvement plan, like a contract action, if that were to become necessary.
CBC Contract Performance Measures

**PM #1** The percentage of children/youth who do not experience a validated incidence of abuse, neglect or exploitation.

**PM #2** Foster care placements per child/youth.

**PM #3** The percentage of days that are in a Least Restrictive placement.

**PM #4** The percentage of children/youth in foster care placements within 50 miles of their home.

**PM #5** The percentage of sibling groups placed together in foster care.

**PM #6** The percentage of youth age 16 or older who have a driver's license or state identification card.

**PM #7** The percentage of youth who turned 18 and have completed required PAL Life Skills Training.

**PM #8** The percentage of approved Service Plans where children/youth age 5 or older participated in development of the service plan.

**PM #9** The percentage of court hearings attended by children/youth.

**PM #10** The percentage of school aged children who are attending their school of origin.

**PM #11** The percentage of children placed with kin.

**PM #12** The percentage of classified regular full- and part-time SSCC caseworkers who voluntarily and involuntarily separate from the SSCC agency.
CBC Improvements

- CBC Process, Outcome and Financial Evaluations used to inform and improve the CBC model
  - September 2018, DFPS will begin working with Texas Tech University on the CBC Process Evaluation
  - Contract with Chapin Hall of Chicago will conduct a CBC outcome & cross-SSCC evaluations
  - Contract with Chapin Hall amended to include a CBC financial evaluation of the blended foster care rate and SSCC start-up costs
Family-Based Safety Services Pilots

- Senate Bill 11 required DFPS to establish pilots in two regions of the state to contract for the provision of case management services in Family-Based Safety Services (FBSS).

- In June 2018, Pathways began serving children and families involved in FBSS in the El Paso area.

- DFPS is working with HHSC to begin procurement of a second FBSS site (location not yet announced).

- Evaluation of project due in December 2018.
What’s Next for DFPS?

- Expansion of Community-Based Care
  - Exceptional Item in 86R LAR, for a total of 9 catchment areas by the end of the 2020-2021 biennium

- Family First Prevention Services Act
  - Signed into law in February 2018
  - Working to finalize fiscal and legal analysis

- Continue positive momentum on turnover, caseloads, face-to-face contacts, kinship placements and positive permanency

- Class-action lawsuit update