

# **DFPS CPS Operational Review**

## **Phase 1: Recommendations**

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## 1. EXECUTIVE SUMMARY

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### A Culture of Change with a Clear Vision of Success

Texas' Child Protective Services (CPS) within the Department of Family and Protective Services (DFPS) is awash in change. The numerous initiatives driven by shifting laws, policies, technologies and best practice models leave the agency at a constant crossroads to achieve its mission – promoting the safety, well-being and permanence of children across the state. Couple this with a tremendous rate of employee turnover, and the only constant is change.

The missing key ingredient in CPS' change culture is a unifying vision that clearly defines success and demonstrates how to get there. Instead of the shifting sands of a new mandate to implement, the organization needs a bottom up approach where everyone is focused on easily understood key goals and supported by a state leadership committed to supporting these efforts with a big-picture policy direction.

CPS needs to move away from an ad hoc approach to meeting ever-changing goals to a sure focus on meeting a vision of success and giving staff tools to get there. The findings from The Stephen Group's (TSG) operational review make clear the direction where the CPS vision should aim:

- Maximizing the time spent between field staff and children and families;
- Creating an environment where staff want to come and grow their skills;
- Building a culture of excellence that is focused on quality;
- Empowering staff with the responsibility, tools and accountability for success;
- Ensuring that CPS communicates clearly about keeping children safe, and
- Showing maximum dignity and respect to families involved in the system by delivering timely and high-quality results.

This means focusing on moving towards excellence for an agency whose mission is critical to lives of Texas' children. It also means stripping away the layers of policies that have taken CPS' focus in different directions.

CPS is filled with talented people who are utterly committed to the children and families of the state. It's time to let them do their jobs with the tools and empowerment they need. While our

investigation found numerous areas for improvement, we came away with the overwhelming sense of optimism that the potential in the organization is outstanding when all of CPS' energies are focused in the same direction for a clear goal. While the challenges will be great, real change in CPS – change for the better that everyone understands and supports – is within reach. The goal of the recommendations in this report is to set the clear direction and remove obstacles to getting there. These will make CPS a model organization and will accomplish this goal quickly.

## **Recommendations Derive from a Comprehensive Review of CPS**

The recommendations are the byproduct of TSG's findings associated with a thorough, comprehensive operational assessment of CPS. That companion volume demonstrates the significant need for change and outlines numerous findings from across the state, based upon several hundred meetings with staff and stakeholders, looking at every aspect of the agency. To fully understand the necessity and nature of these recommendations, it is critically important to absorb the findings of that review.

Without the advantage of that evaluation, the deep background of the reasons that require these changes is challenging. We recommend using the Recommendations and Implementation Planning document for reference, and that readers also refer to the Assessment Report of the operational review.

## **Make sure that CPS Staff's Time is Spent with Children and Families Enhancing Safety, Well-being and Permanency**

Among the most critical of the TSG's findings in our operational review was only 26% of CPS field staff's time is actually spent with children and families<sup>1</sup>. That means that nearly three quarters of time frontline workers are on the clock is spent away from individuals they are charged to protect and help. Our top recommendation is to take steps to significantly improve that figure.

Some of the time away is unavoidable. There is no way to work around the realities of travel and court time. However, the loss of time to data entry, document recovery, staffings and other administrative tasks not only means that families are poorly served, but also undermines morale,

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<sup>1</sup> The 26% finding came from TSG's survey data of over 3000 employees and was validated during interviews and focus groups. See TSG Assessment/Findings Report (April 2014).. TSG did not conduct a time study

which results in higher turnover. The less time staff is spending working with the individuals involved with a case, the less connected they feel not only to those people, but toward the mission that brought them to CPS in the first place.

Throughout our review, we saw how much field staff wanted to be more engaged with their cases. They feel that face-to-face time with these children and families is a critical component to improving quality outcomes. We believe that the figure should rise to over 30% within the next six months and close to 40% as the final outcome, with a goal of reaching it in one year.

To get there, we make the following recommendations:

- **Implement Structured Decision Making and put a 24-hour safety assessment in place** – This will shorten the seven-day safety assessment to expedite intervention, if necessary, and provide an actuarially sound assessment to improve decision-making through a structured process designed to put the right tool in the hands of the caseworkers. (See recommendation 3, 7)
- **Develop a case guide (checklist) for each case to ensure that time spent with children and families is used wisely** – While the facts will change for every case, caseworkers should build a plan for each case that supports their decision-making and ensures that they gather the critical information to make an assessment. A case guide is a road map that directs the collection of the right data. (See recommendation 47)
- **Develop metrics and a management process to measure how much time each caseworker is actually spending with children and families** – The agency has a number of tools to measure the time that field staff spends working directly with the subjects of cases. These need to be used to create metrics to assess the performance of workers and to create a strong incentive for direct care time. (See recommendation 50)
- **Streamline and reduce duplication of work** – Documentation requirements and work requirements often create redundant layers of work. Creating a workflow that eliminates this will free up more time for field staff to spend with children and families. (See recommendations 47-67 and 107-109)
- **Improve functionality of child welfare data warehouse and interface (IMPACT) to reduce delays and to align with caseworker needs** – Every minute that a field staffer needs to get a paper document scanned, re-enter data into the same system, or sort through countless data screens is time not spent with children and families. Aligning these resources would make workers more productive and improve outcomes. (See recommendations 75-76, 78)

- **Integrate CPS systems with other State systems to reduce time to find children and adults** – Field workers spend an inordinate amount of time attempting to locate families because of poor ability to identify their home or school. However, there are frequently other state databases that have collected recent data. Integrating them will allow for caseworkers to use their time more efficiently. (See recommendation 70, 77)
- **Enhance process to support mobility to reduce office and administrative time** – While CPS has spent considerable resources building out mobile devices for the staff, the policy and process still creates delays, such as the printing of a form back at the office to be picked up and then returned to the home for signature. Making the technology and the process work together better will mean that caseworkers spend more time with families and less time on administrative tasks. (See recommendation 79)

### Reduce Staff Turnover by Making CPS a Place People Want to Stay and Grow

A well-known concern across CPS that was reinforced by TSG's operational review was the issue of turnover. Annual turnover rates in some regions exceeded 40% for direct care staff, putting enormous pressure on staff, supervisors and groups that work with CPS to keep children safe.

The benefits of lowering turnover are enormous. Having more experienced staff improves quality, leads to closing investigations and cases faster, and saves money as veteran field workers can cover more cases, thus requiring a smaller workforce. Moreover, reducing turnover removes stress from the organization, which makes individuals more likely to stay – the virtuous circle in full effect.

Ultimately, direct care workers need to identify CPS as a place to stay and grow if they are going to remain employed with the agency. They need to know that they will get the training, support and opportunity to advance their careers to make CPS (or the Department if DFPS) a place to plant roots.

At the same time, DFPS should do a better job identifying prospective candidates who are committed to the mission of delivering safety, well-being and permanency to children. These new recruits must be given a realistic vision of what the job entails and the intrinsic and extrinsic benefits from working for CPS.

One area that we regularly observed during our ride-alongs is the issue of worker safety and the appropriate concern that caseworkers have being in contact with families at times when adult or

children may be in crisis or in emotionally charged situations. DFPS leadership has gone to great lengths to ensure the safety of its workers and remains committed to protecting its staff, but additional training and resources may be required to make workers feel safe. Beyond the current training in dealing with these situations, DFPS should consider additional safety equipment, training for personal protections, continuing to maximize opportunities to work with law enforcement, and most importantly, providing appropriate support for workers who have been involved in such incidents. Knowing that these resources are there will help make staff feel that CPS is fully dedicated to their employees and will build loyalty.

Currently, CPS has seen over one-third of its frontline staff turning over each year. Commissioner Specia has set a targeted goal of 23% annual turnover, and we concur with that goal. However, as turnover is often a lagging indicator, that goal will likely take more than a year to achieve.

To meet these aggressive goals for reducing turnover, we recommend:

- **Ease new workers onto the job with strong mentoring** – New workers are frequently overwhelmed with the responsibilities they absorb, and experienced workers are not given a break from their workload to help new staff get up to speed. Creating a mentoring environment in which more experienced staff are given time to coach younger workers will help these newer staff get acclimated and make them more comfortable, reducing the number of employees who quit within the first 12 months. (See recommendation 10)
- **Make turnover levels a responsibility of the regional director** – The regional director sets the tone for the regional workplace and must take personal responsibility for creating a supportive environment where people want to stay and grow. If they are accountable for turnover, they will have a vested interest in making sure younger staff are comfortable and feel supported. (See recommendation 13)
- **Hire to a staffing model** – Building a clear staffing model that informs future CPS needs will enable DFPS to better identify the number of workers who need to be recruited. This will allow better planning at the state and regional level to anticipate agency needs. (See recommendation 16)
- **Make realistic job previews** – Child protective work is not for everyone. It is much better if an individual self-selects out of employment with CPS than goes through training, starts work and then leaves a hole to fill. Online videos, marketing materials

and personal accounts should make clear exactly what one might expect as a CPS employee. (See recommendations 19-20)

- **Improve profiling of potential applicants** – Through outreach and marketing, CPS needs to identify the right type of applicants before the vacancy becomes open. This involves working with colleges and universities to find the right type of candidates and cultivating a strong relationship. (See recommendations 25-26)
- **Enhance on the job training capabilities** – New workers should start their careers by joining experienced workers on cases, even while they are going through the training process. Child protection workers can only learn so much in a classroom and need to couple that with real-world experience. (See recommendations 33)

### Focus on the Big Picture Goals and Take a “Time Out” from Tasks that are Non-Critical

Both the Sunset Advisory Commission and TSG found that CPS staff spends an inordinate amount of time working to implement initiatives, policies and studies that are not critical to its mission. This is time that many workers could otherwise spend providing services to children and families.

TSG’s review found many tasks that were duplicative, unrelated to care or unlikely to yield a significant benefit relative to the work involved. These should all be paused immediately and the resources involved should be reallocated to delivering or supporting direct care operations. Moreover, there are some proposals that would provide some benefit, but are simply a lower priority than other more pressing matters, and these too should receive a “time out” until greater concerns are met.

In all, we recommend suspending over a dozen of these initiatives. The energies that can be transferred from these programs will offer a major benefit to transforming CPS.

- **Immediately implement Sunset Advisory Committee recommendations to stop non-essential tasks** – Working with staff, TSG identified a number of non-critical projects and initiatives that drain staff resources and keep staff from the goal of spending time with children and families. CPS should immediately stop work on these efforts to redeploy these assets back to serving the public. (See recommendation 1)

## Realign Resources across CPS to Meet Critical Goals

In TSG's review of CPS capabilities, our analysis reveals that the program has sufficient resources, but needs to reallocate these much more efficiently to deliver the type of organizational change to improve areas that are critical to the mission. There should be a reorganization of staff responsibilities to remove obstacles, which must also be coupled with above-mentioned reduction in turnover to boost productivity. The goal must be consistent with a focused approach of reclaiming the fundamental mission of CPS.

At the same time, to make sure that resources are balanced effectively, regional leadership needs the flexibility to shift staff to meet local demands. At that level, even an illness running through an office can bog down staff, and regional directors do not have the authority to move people to ensure the work is done effectively. The power cannot come only from state office or higher; it needs to be put in the hands of the managers on the ground.

Hand-in-hand with the ability to realign resources, CPS needs to carefully re-examine its policies to ensure that it is producing the most value and is in sync with the goals of increasing staff time with children and families, accelerating the time for decisions on cases, empowering workers, and delivering a culture of quality. Where these policies are out of alignment, the policy must change to harmonize with the big-picture objectives – everyone needs to be pulling in the same direction toward a common goal.

Similarly, CPS should work with the Legislature to identify areas where family law is creating barriers to critical objectives and work to streamline state law to ensure that children are safe while giving the agency the flexibility to meet its mission. Legislators and staff we spoke to made clear that their interest is the safety, well-being and permanency of children, not an effort to micromanage the agency through the huge array of existing laws, and they would welcome a chance to simplify the Family Code to get back to the basics of meeting CPS' fundamental purpose.

To accomplish this task, we recommend:

- **Manage investigators to accelerate case closure time once a thorough investigation is complete** – Currently, the agency measures how many investigations are completed within 60 days, but this provides little incentive to close cases as soon as all the relevant facts are collected, leaving the family in limbo. CPS should shift its resources to closing

cases quickly, and make its metric for performance the average time for case closure. (See recommendation 51)

- **Shift Conservatorship (CVS) resources to accelerate the time to permanency for children** – The focus of CVS staff should be getting children in conservatorship to permanency quickly. Accordingly, the metrics and resources should be shifted to align with a goal of measuring the days to permanency and shortening that time frame. (See recommendation 52)
- **Encourage and incentivize workers to work as a team and to cover each other's workload when they can do so more efficiently** – Staff should be encouraged to shift their time to cover others' cases if they, for example, have a case in a similar area that is far from the regional office. When they act in a team manner to assist other staff, they should be recognized, not risk being penalized in their performance reviews. (See recommendation 53)
- **Expand management tools in IMPACT and Mobility to find bottlenecks** – IMPACT and Mobility offer the prospect for supervisors to review the workflow of individual employees and to identify where the bottlenecks are, so that resources can be reallocated more productively. (See recommendations 68, 75)
- **Give regional directors the flexibility to redeploy staff to balance workload issues** – Presently, shifting regional staff resources requires state office and even HHSC approval to make moves. This might take longer than a potential problem exists. Giving regional directors the tools to move staff, even for a brief period, would take tremendous stress off the workers there and allow greater performance. (See recommendation 83)
- **Enhance communication of budget numbers with regional offices** – Regions are often left in the dark relative to their current budget situation. Giving them the tools to help them plan, and allowing them to produce a budget plan based on their needs will expand regional accountability. This also will cause regional leadership to consistently focus on meeting their budget targets while understanding how their budgets are derived. (See recommendation 120)
- **Improve data collection and integration to determine if families are using services and track the impact on recidivism** – Caseworkers should be able to identify, in real time, what services that individuals associated with a case are actually using so they know how closely they are maintaining a service plan. Furthermore, the data collection should track how likely those who received services were to re-offend. (See recommendations 122-123)

- **Pay for performance among vendors for lower recidivism** – Today, vendors of purchased services from CPS are paid the same regardless of the outcomes of the work they do. Under a pay-for-performance model, vendors whose services directly correlate with recidivism would be paid more if they can demonstrate that their outcomes result in lower re-offense among those involved in a case. (See recommendation 126)
- **Increase prevention and wellness among children under state care** – Texas became a national leader in better managing psychotropic medications for children under state care in 2008. CPS should work with HHSC/Star Health to build upon this success to assure child wellness screenings, chronic care, mental health care and other prevention services. This will help identify health issues early among a vulnerable population. (See recommendation 127)

### Moving from a Culture of Compliance to a Culture of Excellence

Compliance is an absolutely critical element to any public entity, particularly one that is charged with the awesome responsibility of protecting children. With that in context, compliance should only be a minimum baseline level of expectation, and the real focus should be on achieving excellence. However, when workers are flooded with an onerous combination of a bulky Family Law, streams of new CPS policy and an array of internal initiatives, the best many can accomplish is just meeting the rules that are laid out for them.

While our earlier recommendations emphasize lifting these burdens off field staff, the next step must be to instill a concentration on quality and continuous improvement. CPS workers need to get away from “checking the boxes” and put their talents to work on ensuring the best possible outcomes for families. The benefits to the families will be shorter times for investigations, faster action on permanence and lower recidivism – goals that everyone wants to see.

This starts with a reorganization of CPS to put the focus on quality. That must involve a complete rethink on the quality management and quality assurance functions within CPS. There needs to be an assessment process and metrics that center on improving performance of both workers and the entire organization towards clearly defined goals that will lead to excellence, benefitting all families involved with the agency.

When an entire organization (public, private or non-profit sector) embraces quality, the results are often stunning. That said, many groups say they are committed to excellence but don't make the changes to get there. The following recommendations are designed to build a framework for

continuous improvement, but ultimately the success will be determined by whether CPS builds a true culture of quality in its DNA.

Accordingly, we recommend:

- **Develop and implement a practice model** – Currently, CPS does not have a model to standardize and implement best practices. Putting a practice model in place will give field workers a clear decision-making process in working cases. (See recommendation 2)
- **Create a learning organization** – Training cannot be something that staff receives when they start their careers at CPS, and then it stops. Instead, employees should always be learning best practices, new ideas and ways to improve their performance. This means giving the tools and the opportunity for staff to share information and receive ongoing training. (See recommendation 27)
- **Provide improved management training for supervisors and managers** – Managers in CPS often receive little continuing education after the move into a leadership role. Given that exit interviews often cite supervisors as the reason workers leave the agency, giving supervisors ongoing training should be a top priority to ensure they have the tools to be effective and can lead successfully. (See recommendations 37-40)
- **Reorganize CPS operations to focus on continuous improvement, financial integrity, improved communications and streamlined policy** – The current organizational structure is not optimized for top performance, with similar operations unconnected, so the benefits of integration cannot be realized. Reorganized, the setup will create numerous synergies that will improve performance and result in efficiencies. (See recommendation 88)
- **Add a significant quality management (QM) approach to support quality assurance (QA) work** – While QA is about testing the work of existing staff, QM revolves around building an organization that is continually working to build a structure of improving quality. This process will dramatically reduce errors and improve outcomes. (See recommendation 107)
- **Move QA to a centrally managed, regionally staffed model** – The QA function should be diffused into the regions, constantly doing case reads and taking other steps to evaluate quality across CPS. Getting this work into the local areas will send a clear message to the entire staff about commitment to quality work. (See recommendation 108)
- **Develop an executive dashboard that provides meaningful data for key decisions** – CPS is awash in data, but actual meaningful data is harder to identify. Accordingly, the

agency should build an executive dashboard that includes the figures that can truly be used to manage CPS. (See recommendation 110)

**Improve transparency in budget figures** – The lack of transparency in budget figures has left CPS with a degree of mistrust from legislative budget writers. The agency needs a cultural change to engage leaders to make sure that they are aware of budget figures in real time and can act accordingly. (See recommendation 116)

## Empowering Staff with the Tools for Success

Throughout TSG’s operational assessment, one of the key takeaways for our team was the lack of empowerment among CPS staff. Decision-making is pushed up to supervisors to avoid the possibility of punishment for a poor choice. This is a sign that there needs to be a major shift in decision rights back to the field workers, while giving them the tools and training to succeed.

Fundamental with this decentralization is the creation of a culture of learning. That means line staff need to consistently make decisions and understand the consequences of those choices and learn both the good and bad that results. Even when they fail, they must “fail forward” and embrace the opportunity that failure has created. This will mean that every day they make decisions, they grow from the experience and are better prepared for the next case.

Consistent with the model of staff empowerment must be a training framework that demonstrates real-world experiences accurately and the consequences of CPS engagement for families and children. While this training starts in a classroom for new employees, it should continue in the field with strong mentoring from experienced staff who can assist new employees as they find their way into the field.

While CPS has invested heavily in technology over the past few years, field staff still spends enormous time away from families and children on tasks like data entry, accessing databases and administrative tasks like scanning and copying documents. They need technology that functions well, supports their efforts seamlessly and makes their time more valuable.

In the same vein as shifting decision-making from supervisors to field staff, CPS must begin to transfer many decision rights from state office to the regions. TSG’s review found tremendous variation across the regions and that a one-size-fits-all approach limits the effectiveness of regional staff to do their job. Giving the regions the empowerment and the accountability to

implement strategies is a critical piece to delivering a true bottom-up organization that reinforces culture and puts the focus on quality.

For these reasons, we recommend:

- **Push decision-making to the field level** – Today, caseworkers frequently push most decisions on their cases to supervisors. This must shift to a process where the field staffer – the person with access to the best information about the case at hand – makes the decision with the support of a strong assessment tool. (See recommendation 8)
- **Expand access to Spanish language forms, court documents and other materials in IMPACT** – Giving caseworkers the ability to work with families in their native tongue removes what is often a significant barrier that currently exists. This would make staff more effective and reduce tension from what are often challenging interactions. (See recommendation 72)
- **Develop a new policy strategy and separate policy from practice** – Build a policy development process that is fast, collaborative, separated from practice, reviewed for effectiveness periodically and which sunsets every five years. Opening the policy process to CPS field staff will ensure much better understanding of why new rules are necessary and if they should be kept around. (See recommendation 89, 92)
- **Rewrite entire policy handbook consistent with this new strategy** – After CPS implements the new process for newly created policies, rewrite all existing policies to conform to this new, open and effectiveness-based process. (See recommendations 90-93)
- **Improve distribution of policy** – When policy is poorly disseminated, it is unlikely to be followed rigorously. New policy should be placed on as many mediums as possible with the opportunity for all staff to seek clarification easily. (See recommendations 97-98)
- **Assign cases to field staff based on judgment and match** – Not all cases are alike and not all caseworkers are alike. Some staff may have bilingual skills, while some might relate well to teenagers. Instead of assigning cases on a round robin, purely on caseload or a “next one up” model, supervisors should understand the strengths and capabilities of their staff and assign cases to those individuals who are most likely to achieve the highest quality outcome. (See recommendation 156)

## Improving the Ability to Communicate to the Public and Stakeholders

The staff of CPS works diligently to keep children safe, but the best way to protect children is to make sure the public is aware of child abuse and neglect, knows what to do when they see it and understands the community resources for families that need support, including child protective services. At the same time, key stakeholders, from the Legislature to providers to community groups, need to know what's going on within CPS.

For this to happen, DFPS should rethink how it engages all external groups, and across all communications platforms – including working with the media, the agency's website, social media, marketing materials, government relations and customer service. This needs to be a unified process where people should hear a consistent message regardless of how they interact with CPS or with DFPS.

At the same time, DFPS must significantly enhance its community engagement. Instead of being reactive to the public, the Legislature and other stakeholders, the Department should be looking for proactive opportunities to explain more about abuse and how to stop it, about adoption and why it is important and about how families can find help. No one should ever wonder what they should do if they see a child in danger and no family should question where they can get assistance if their situation is spiraling out of control. Moreover, every legislator needs to know how they can make sure the tools are there for their constituents to ensure children are safe. No senator or representative or their staff should wonder who or how they should contact CPS. They should know what is going on in their district and where the hard-earned taxpayer dollars are being spent on child protection.

Finally, stakeholders should feel engaged constantly about what changes are coming in the future from CPS and what they can expect. They shouldn't feel blindsided about decisions or question how their voice can be heard. They should be an active part of the discussion in their region about opportunities for improvement and how they can help.

To get there, we recommend:

- **Consolidate all DFPS communications functions under one staffer** – Right now, not all DFPS employees engaged in communication functions are consolidated, and some are spread across several areas in DFPS. These should all be consolidated under one senior staffer who is a member of the Management Team. This will ensure that there is

consistency across the various messaging functions of the agency. (See recommendation 129)

- **Relocate all media managers to state office to deliver work balancing and specialization** – DFPS should centralize its media function in state office to balance the work load and to allow for specialization in the various aspects of the agency functions. This will lead to greater efficiencies and a more consistent message for the Department. (See recommendation 130)
- **Provide media training to DFPS and CPS state and regional leadership** – The media want to hear from true professionals working the program areas. However, these workers need to be given training to develop confidence to accurately articulate the agency message. (See recommendation 131)
- **Improve coordination between the Legislature and CPS budget staff** – The Legislature frequently feels they aren't getting up to date information from CPS on budget matters. There should be improved coordination and communication among these groups to enhance a critical working relationship. (See recommendations 139-140)
- **Develop a key set of metrics for the Legislature** – The Legislature feels that CPS provides a "data dump" as opposed to easily understandable metrics to assess agency performance. This should be pared down to a limited number of critical facts that are useful for making policy decisions. (See recommendation 143)
- **Make sure all legislative requests receive a timely response** – Legislative responses often come from various directions that aren't necessarily connected to Government Relations. All requests should be forward to or coordinated with GR, so that they can ensure that legislative offices receive a timely, helpful response. (See recommendations 141-142)
- **Ensure all legislators receive consistent, direct interaction from CPS** – Every legislator should know what CPS is doing in their district. GR should take the opportunity to reach out to each legislator regularly and share information, media clips and opportunities to meet with key staff. (See recommendations 142, 145)

## Building a Positive Vision for the Future of Texas' Children

CPS is an organization that is committed to change, but one that wants to see that the future will be brighter. Too often change initiatives have been ad hoc and piecemeal and simply meant a greater administrative burden on staff. TSG believes that for a true cultural shift to take place, the change needs to be both comprehensive and dedicated to action, not aspiration.

The recommendations in this document are designed to be implemented in short order across all of CPS. While not all of them can be fully completed in a short time period, the process to begin them all must start quickly. Not only will starting immediately ensure buy-in from staff across the agency, it will help them all begin to shape the vision of where CPS must go to build a culture of success.

What separates this change initiative from prior ones is that it fully embraces a bottom up approach specifically designed to engage workers at all levels pulling in the same direction. Their expanded empowerment is central to both the implementation of these recommendations as well as the long-term success of a new CPS.

TSG is highly confident that Texas' children and families will see tremendous benefits from this work. The success of this will be measured not in new organizational charts, but in healthier, safer children who have achieved permanence and well-being. Given the outstanding talent across CPS and the commitment of strong leadership at CPS, DFPS and HHSC to accomplishing this task, we believe that a brighter future is within reach.

## 2. PURPOSE AND SCOPE OF THE RECOMMENDATIONS

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### Purpose and Scope of the CPS Operations Review Recommendations

The Stephen Group (TSG) was retained by the Texas Health and Human Services Commission (HHSC), the State agency that oversees the Department of Family and Protective Services (DFPS), and DFPS, to conduct a broadly-scoped Operational Review of the Child Protective Services (CPS) Agency, within DFPS. The objective of the Operational Review is a "top to bottom" assessment followed by recommendations and an implementation plan. The scope includes many aspects of CPS including organization, work flow, allocation of staff, decision making and general business processes including policy development, continuous quality improvement and budgeting, training, hiring, contracting and finance. The goal of the Operational Review is to describe a transformational project that can better enable CPS to promote child safety, well-being and permanence.

The Operational Review is divided into the following three tasks as part of Phase 1 of the project:

Task 1 - Develop and agree on a Project Plan for Tasks 1 and 2

Task 2 - Business Process Mapping and assesses the strengths and weaknesses of internal operations of CPS

Task 3 - Offer recommendations as to how CPS can be managed and operated more effectively and efficiently.

Phase 2 is the implementation. The current document is the report of Phase 1, Task 3. A separate document describes the Task 2 Assessment Findings.

### About The Stephen Group

The Stephen Group (TSG) is a business and government consulting agency. TSG combines strategic government and private sector intelligence with a deep government and regulatory experience that offers state agencies tactical and practical information that addresses their most critical challenges, transforms their agencies and helps achieve extraordinary results. State agencies measure those results as significant improvements in efficiencies, quality of service,

increased cost savings, and (ultimately) benefit to the taxpayer. For more information on the TSG assessment project team and background see Appendix A.

## **CPS Collaboration and Support**

CPS provided strong support for the Assessment project. Some examples of the solid support include:

- A dedicated CPS Lead Project Coordinator to work directly with TSG on information, data, and scheduled meetings across the state
- Over 100 CPS workers, supervisors, managers and directors in focus groups to assess and refine recommendations
- Untold hours of time dedicated by senior CPS and DFPS senior leadership
- 3,922 responses to a survey addressing management and change readiness
- Over 250 State and regional interviews
- Regional Investigator ride-a-longs and interviews
- Dedicated focus groups at each of the state regions and in the state-office areas of Policy, Budget and Quality. These included an average of 10 top workers and lasted between one and three days each
- Caseworker surveys describing user issues with CPS systems support
- Meetings with members of CPS upper and middle management, including the regional management
- Discussions/meetings with legislators and key legislative staff
- A public forum and meetings with key stakeholders
- Over 2GB (nearly 500 files) of data extracts and reports

CPS provided unequivocal support to every aspect of the Operations Review.

### 3. VALUE ASSESSMENT OF ON-GOING PROJECTS AND INITIATIVES

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Both TSG's preliminary findings and the Sunset Advisory Commission identified that CPS is working on numerous non-critical or duplicative projects and initiatives that drain staff resources. Frequently, these other change proposals were begun in an ad hoc fashion. To implement a comprehensive transformation of the agency, CPS will need all staff focused on a clearly defined goal and

As such, we fully support the recommendation from Sunset that CPS put a "timeout" on these non-critical projects. Ultimately, the organization cannot travel in two directions simultaneously. Accordingly, the work on these other initiatives should stop immediately. Once the transformation is put in place, CPS leadership should review the items that were put on pause and determine if they still have value or are in alignment within the new framework<sup>2</sup>.

Despite the inherent difficulty of its protective mission, DFPS is expected to answer for every bad outcome. As a result, the agency frequently finds itself on the defensive and in a constant state of putting out fires and responding to crisis and criticism, creating a continual cycle of both legislative and self-imposed change in which outside pressures dominate its agenda.

What DFPS sorely needs is a timeout to breathe and a chance to regroup after being in near constant transition for so long."

#### 1. *Immediately Implement Sunset Advisory Commission Timeout Advice*

After speaking with a number of direct care caseworkers and senior staff, and reviewing a number of current CPS initiatives, we offer a list of items here that should immediately be put on hold:

- Discontinue regional work groups not directly in sync with transformation initiative
- Eliminate the need in many regional CPS office buildings for CPS staff to be the local office coordinator for buildings and maintenance (non-child safety task)
- Eliminate the Regional Child Death Review Teams and, instead, use the state office Child Death Review process/team that is currently in place
- Put Trauma Informed Care project on hold

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<sup>2</sup> Sunset Advisory Commission Staff Report, Department of Family and Protective Services, May 2014

- Put Signs of Safety Project on hold
- Stop separate regional initiatives that are out of sync with transformation initiative
- Eliminate PSAs as a method for developing and distributing policy
- Stop the critical project processes that increases management overhead
- Suspend contract surveys to caseworkers
- Suspend staff surveys that are not mission critical
- Postpone immediate CPS leadership development until in sync with transformation initiative

There are a number of other projects and initiatives that are going on at the state and regional office that are not identified here. CPS should move swiftly to meet the Sunset Recommendations and obtain a list from state office and each region of any project or initiative that is ongoing that is not mission critical. The Commissioner or his designee should then make a decision within 30 days of which initiatives or projects will be put on hold or eliminated. That list should be made part of the Transformation project management schedule.

## 4. UNDERSTANDING THESE RECOMMENDATIONS

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This report lays out TSG's recommendations in a standardized manner in order to bring consistency to the reader. The recommendations follow the Phase 1, Task 1 Project Plan agreed to by DFPS in the CPS Operational Review. Each recommendation section follows the below format:

**Vision for the Future** – A brief summary of the "To be" state following transformation to inform of the direction and why it is meaningful

**Background** – A short version summarizing the need for change, with a more expanded view found in TSG's findings document

**Recommendations** – Individual recommendations laying out specific changes

**Summary of Benefits List** – A short summary of benefits broken down by financial and quantitative benefits

**Time to Complete and Cost Chart** – A chart laying out the time to complete each of the recommendations and the cost associated with implementation

Within this chart, the recommended time frames for completion are as follows:

Near Term: Can be completed within 6 months

Intermediate: Can be completed within one year

Long Term: Completion beyond one year<sup>3</sup>

For a comprehensive matrix of recommendations, see the Transformation Priority Matrix in a separate section.

**Note:** While the timeframe for potential completion of these recommendations are included, it's clear that it would be extremely challenging, if not impossible, for CPS to concurrently implement each of the 160 recommendations included in this report. Thus, it will require DFPS and CPS leadership to prioritize these recommendations to ensure that the agency can execute these changes while still conducting its critical business of protecting the welfare of children

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<sup>3</sup> It must be recognized that any of the timelines recommended by TSG may need to be further extended where there is a required procurement for any contracted service or solution

across Texas. Consequently, a lower priority near-term recommendation might actually take a year or more to put in place fully, for example, as CPS works to transform itself as it continues operations.

Moreover, where we use the phrase "Near Term," we believe the recommendation can either be fully implemented state-wide or tested in one or more regions, ready to be rolled out statewide, within the suggested time frame. Much of this, however, will depend upon CPS's ability to develop its priorities for implementation, identify the "timeout" activities that will either be cancelled or paused, and identify the existing resources to be re-deployed.

## 5. PRACTICE MODEL AND DECISION MAKING

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### Vision for the Future

CPS will have an integrated framework and method that formally guides case decision making. The framework will be based on a practice model, and will incorporate a set of assessment instruments and decision logic to guide safety and risk decisions. The implementation of a comprehensive practice model and effective safety/risk assessment instruments will increase the standardization of the decision making process and planning for services and result in increased caseworker time with families based on process efficiency, as well as enhanced safety.

Of course, complex family decisions could never be made by a machine or checklist - yet the vision is that CPS uses a rigorous, evidenced-based approach to support and guide decision making. That approach will draw on information in IMPACT, observations in the field, representations from the parents and children, and an “actuarial” and decision logic model based on trends in past cases. The vision starts with a series of instruments to support decisions that are built as part of Structured Decision Making<sup>4</sup> (SDM) (see Appendix B for a detailed description of SDM). The vision should include predictive analytics based on current and future applications in child welfare. In the short term, SDM takes CPS much further toward a rigorous, evidence-based method for empowering caseworkers to make decisions, and allowing supervisors to manage their people, rather than be active in all decisions themselves.

The vision includes how all case decisions are made: the decision to remove and related child safety decisions, but also the type and level of services to include in the family plan, which foster care environment is best, where is the best permanent family, the developmental and health well-being of the child, and so forth.

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<sup>4</sup> Any use of the term Structured Decision Making is not intended to endorse a particular vendor's service and it is recommended that CPS seek the best value for the state in procuring any decision making instrument or logic

## Background

Thirty-two U.S. states have practice models to guide case work<sup>5</sup>. A child welfare practice model is simply defined as the basic principles and approaches that guide a child welfare agency's work. (For a comprehensive definition of practice model see Appendix B).

CPS has not yet implemented a practice model, except for attorneys<sup>6</sup>. However, CPS has been working on the development of a practice model for several years, including the development of the Enhanced Safety Family Decision Making model. Recently CPS has re-prioritized the development of a practice model. Current CPS practice model planning actions include the development of an approach that addresses the impact of the Sunset Commission, The Stephen Group Report, Harris County Assessment Report, and the Title IVE waiver. CPS intends to include a practice model that states CPS Vision, Mission and Values, Standards of Practice, and Indicators of Practice. At this stage there is recognition that a comprehensive practice model will impact policy, supervision methods, hiring, training, performance evaluation, data placement, IMPACT, and forms/assessments/tools. At this stage a timeline for completion of the development of the practice model, identification of needed resources, and implementation schedule have not been identified.

Practice models are used to drive practice improvement and systems change. A practice model contains definitions, explanations, and expectations for how an agency will operate and partner with families and other stakeholders in child welfare services.<sup>7</sup>

Transforming their child welfare system drives states to develop and implement statewide practice models. Some states have done so in response to legal mandates determined in class action lawsuits -- as was the case with states such as Alabama and Utah. Other states, also seeing a need for system-wide child welfare reform, chose to adopt a practice model voluntarily, although the decision is often in response to efforts to improve outcomes or address an identified problem.<sup>8</sup> Some states, such as Iowa and New Hampshire, have used their practice model as an integrating factor for decision-making, casework practice, outcomes expectations, and functions such as Professional Development/Training, Quality Assurance/Quality Improvement, and IT/SACWIS capacities. (For a review of details on state practice models see Appendix B).

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<sup>5</sup> TSG analysis of the table provided at:

<https://www.childwelfare.gov/systemwide/sgm/index.cfm?&submit=1&topicName=practice%20models&audiencename=professionals>

<sup>6</sup> [http://www.dfps.state.tx.us/Child\\_Protection/Practice\\_Guide/](http://www.dfps.state.tx.us/Child_Protection/Practice_Guide/)

<sup>7</sup> <https://www.childwelfare.gov/management/reform/approaches/practicemodels.cfm>

<sup>8</sup> [http://dcfs.co.la.ca.us/katieA/docs/Practice\\_Model\\_LR.pdf](http://dcfs.co.la.ca.us/katieA/docs/Practice_Model_LR.pdf)

The purpose of a practice model is to allow a level of systematic review never before possible. States have implemented that purpose differently. Appendix B describes some of the leading practice models nationally. A practice model achieves the following:

- Guides “Frontline Practice”: Safety and decision-making
- Guides “Frontline Practice”: Casework and family-engagement
- Integrates Policy, Procedure, Staff Selection, Professional Development/Training, Outcomes, Quality Assurance and Quality Improvement and use of data

After reviewing 10 practice models, Catherine Muskie developed a list of articulating principles a great practice model should define the agency’s beliefs about<sup>9</sup>:

- Families
- How the casework process should work
- Where children should live
- Working in teams
- The importance of culture in a family’s life
- Partnerships and collaboration

A key purpose of a practice model is to guide decision-making. At the core of CPS casework is a series of decisions.

During the assessment, TSG determined that CPS lacks a formal method by which caseworkers make these key decisions. The fields in IMPACT document many factors that relate to the decision, and comments about the decision that was made, but do not support the decision itself.

There is some debate in the industry today comparing various decision models including (SDM) and a Clinical Decision Making model. To a large extent, this debate is within the CPS community. At present, CPS relies on informal models of decision- making based on child/family observation and practiced through a series of phone calls between the caseworker and supervisor. The use of the current safety and risk assessment instruments comes after initial decisions are made.

Texas CPS must face the critical reality that the current Safety Assessment instrument and related decision making process regarding immediate and emergent child safety must be

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<sup>9</sup> <http://muskie.usm.maine.edu/helpkids/practicemodel/PMguide.pdf>

improved as quickly as possible. TSG believes the implementation of a Texas CPS practice model and SDM/logic model should allow for more caseworker time with children and families in conjunction with other key recommendations in this report.

Beyond CPS' unstructured decision-making of today, are many more structured approaches to decision-making.<sup>10</sup> Four families of decision models are:

- **Decision tree** – guides caseworkers through key questions that allow them to determine how quickly to respond to the referral<sup>11</sup>
- **Clinical model** – reaching consensus through team discussion
- **Structured Decision Making** – answering a set of questions the answers to which are weighted by empirically-based parameters to position cases in groups with common risk factors
- **Predictive analytics** – tracking patterns in historic and current, quantitative and unstructured data to characterize the case

The SDM model consists of a set of assessment instruments augmented by management components that provide accountability, quality assurance, and planning, budgeting and evaluation data. Each assessment tool is designed specifically for use at a key decision point in the life of a CPS case.

By focusing on particular decision points rather than attempting to address multiple issues with a single tool, the SDM model enhances clarity and allows agencies to more effectively monitor compliance with established policies and procedures. Although SDM tools identify the critical assessment factors for each decision point, the model also includes ways to account for unique case characteristics that may not have been captured on the assessment instrument.

Most SDM tools incorporate an override provision that allows workers to change the assessment-indicated decision, when necessary. SDM does not replace worker judgment; instead, it provides an objective framework within which to articulate agency policy, thereby helping ensure that “best practices” are applied to all cases<sup>12</sup>.

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<sup>10</sup> For a review of approaches used in the US and globally, see [https://www.ncjrs.gov/html/ojjdp/jjbul2001\\_7\\_1/page4.html](https://www.ncjrs.gov/html/ojjdp/jjbul2001_7_1/page4.html)

<sup>11</sup> [https://www.ncjrs.gov/html/ojjdp/jjbul2001\\_7\\_1/page4.html](https://www.ncjrs.gov/html/ojjdp/jjbul2001_7_1/page4.html)

<sup>12</sup> [https://www.ncjrs.gov/html/ojjdp/jjbul2001\\_7\\_1/page4.html](https://www.ncjrs.gov/html/ojjdp/jjbul2001_7_1/page4.html)

The heart of the SDM model is its research-based risk assessment tool. Although other components of the model are based on a general consensus (often informed by available research) of what constitutes best practice, SDM risk assessment tools are based on the outcomes of actual cases. To develop a risk assessment tool, the agency identifies a list of potential risk factors. These potential factors are based on literature, experience, and previous agency research results.

The agency then reviews a large sample of case records (e.g., 1,000) and codes them for the presence or absence of the factors, based on what was known about each family at the time of the sampled investigation. Case records are further explored to identify families that experienced re-involvement with the agency after the sampled investigation<sup>13</sup>.

The result of this analysis is a questionnaire that a worker uses in the case analysis. The questionnaire produces a result that groups the case into one of several groups that have common characteristics of maltreatment. Thus, SDM does not “make” the decision, it merely informs it. Also, SDM is only as good as the research and modeling that goes into it.

The benefits claimed of SDM include:<sup>14</sup>

- Fewer subsequent referrals and substantiations
- Fewer subsequent abuse/neglect injuries
- Fewer subsequent placements
- Faster permanency
- Better consistency, accuracy, and equity
- Increased efficiency by making the best use of available resources
- Improved data for program planning and evaluation

Many reports have demonstrated the efficacy of SDM compared to less-structured decision making, including:

- Michigan’s foster care SDM expedited permanency for children entering foster care<sup>15</sup>

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<sup>13</sup> [https://www.ncjrs.gov/html/ojjdp/jjbul2001\\_7\\_1/page4.html](https://www.ncjrs.gov/html/ojjdp/jjbul2001_7_1/page4.html)

<sup>14</sup> Structured Decision Making and Critical Thinking in Child Welfare Assessment, 2011, at: <http://bayareaacademy.org/?s=Structured+Decision+Making+and+Critical+Thinking+in+Child+Welfare+Assessment>

<sup>15</sup> Dennis Wagner, Evaluation Of Michigan’s Foster Care Structured Decision Making Case Management System, September 2002, Children’s Research Center

- Minnesota found that SDM cases closed without services had fewer new reports and substantiations, fewer subsequent removals, and fewer child injuries reported compared to cases not using SDM<sup>16</sup>
- California's CFRA proved accurate in predicting future incidents of maltreatment<sup>17</sup>

Thus, the evidence suggests the effectiveness of SDM compared to conventional decision-making. Furthermore, while Texas could conceptually replicate the decades of work that has gone into the commercially available SDM, TSG sees no benefit to taking the time, resources and other risks to replicate SDM. SDM does not make decisions. It is a method of using data along with a decision instrument and caseworker judgment to make more rigorous, supportable decisions.

Predictive analytics is in a different branch of the field of data analytics. SDM is based on a predetermined set of data modeled into a particular "equation." Predictive analytics takes the concept a step further to explore the data for trends and relationships. Predictive analytics uses many techniques from data mining, statistics, modeling, machine learning and artificial intelligence to analyze current and historic data to make predictions about the future.<sup>18</sup> While SDM uses a pre-established set of numerical data, predictive analytics can use unstructured data including text. SDM applies a formula; predictive analytics looks for patterns.

As far as TSG is aware, no CPS agency uses predictive analytics at the present time. However, that is the forefront of decision support. In a presentation to the Texas Senate Health and Human Services Committee, CPS talked about exploring the use of predictive analytics. This is early as a field of study. Pursuing the application of predictive analytics seems consistent with Texas' leadership role among other state CPS agencies, but research is ongoing. Collaborating with leading commercial vendors, leading child protective think tanks and other leading states will produce the best results from this endeavor. Texas CPS has the opportunity to be a national leader in predictive analytics in child welfare.

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<sup>16</sup> L. Anthony Loman & Gary L. Siegel, An Evaluation of the Minnesota SDM Family Risk Assessment, 2004, Minnesota Department of Human Services

<sup>17</sup> Will Johnson, Effectiveness of California's Structured Decision-Making (SDM) Model: A Prospective Study of the Validity of the California Family Risk Assessment, February 16, 2004, Alameda County Social Services Agency

<sup>18</sup> <http://www.predictiveanalyticstoday.com/what-is-predictive-analytics/>

## Recommendations

### *2. Develop and implement a Practice Model*

The Stephen Group recommends a comprehensive approach, such as the Iowa and New Hampshire models (see Appendix B), as they address and integrate a transformative implementation strategy that addresses safety and risk, staff and supervisor casework practice, staff qualifications, training in a learning environment, aligned Quality Assurance and Improvement actions, and effective SACWIS modifications or alternative temporary solutions to support the enterprise.

CPS needs to be dedicated to the implementation of a practice model to attain a high probability of success. The National Child Welfare Resource Center for Organizational Improvement housed at the Muskie School of Public Service (University of Southern Maine) recommends a dynamic strategic planning approach for Practice Model implementation<sup>19</sup>:

- **Leadership:** commitment to the practice model; pace implementation and be flexible; be inclusive and transparent
- **Capacity:** train managers, supervisors, staff, and stakeholders; designate staff and support champions; align staff selection and evaluation systems
- **Organization:** evaluate progress and outcomes through Quality Improvement; use feedback loops at all levels of the organization and externally; revise policy and create relevant tools.

Texas CPS needs to make a decision on whether the current internal development of the practice model requires additional resources to be able to complete this task and develop a successful implementation strategy across the state.

### *3. Implement a Structured Decision Model solution: Safety (24 hours initial contact) and Risk Assessment*

Implement an actuarial judgment Safety Assessment instrument and related decision-making logic pathway for all 24-hour in-home, face-to-face assessments. The Safety Assessment instrument will serve as the front line method to determine immediate and emergent child endangerment during the initial 24-hour face-to-face home visit assessment. SDM has proven to be an effective tool for safety and risk assessment for all stages of service. CPS has spent years

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<sup>19</sup> Jan McCarthy, Developing and Guide For Implementing Child Welfare Practice Models, October 2012, National Child Welfare Resource Center for Organizational Improvement

trying to create its own decision-making model. TSG is recommending that CPS join the collaboration of many states already succeeding with SDM. SDM has many resources embedded in the model including an “early adapter” component and IT capacity to “host” the Information Technology required to “go live” while the state updates their SACWIS (IMPACT) system to integrate the model.

Moreover, CPS should implement an actuarial-based Risk Assessment instrument and related decision-making logic pathway for Investigations, FBSS, and CVS stages of service. This specialized assessment instruments would include differential presenting risks such as sexual abuse.

The Risk Assessment instrument must integrate best practice actuarial knowledge concerning immediate and emergent child safety circumstances impacting risks while engaging the strengths of the family/caregiver in building protective capacity and effective parental skills supporting appropriate age related child development and well-being.

#### ***4. Review and update as needed the current definitions of “safety”, “immediate”, and “impending/emergent danger”***

These are key parts of the practice model, investigations process, and training augmented by continuous discussion and use of new related evidence and knowledge.

#### ***5. Develop a family services instrument***

CPS should broaden and enhance the in-home array of services and infuse with evidenced-based interventions. Other states have demonstrated that an SDM-based decision model offers an effective method of improving outcomes. This approach overcomes the current CPS situation, in which there is not a formal model to guide the recommendation or provision of family services. The model should take into account data stored in the family services support system recommended in the IT recommendations section of this report.

#### ***6. Continue to collaborate on research into predictive analytics***

Predictive analytics is in the early stages of being conceptualized for use in the child welfare environment. Embracing SDM into case work now will begin to set the stage for the use of predictive analytics within Texas CPS. SDM could serve as an intermediate step between today’s unstructured decisions and possible use of data patterns to further decision-making in the future. Recently, Texas CPS recommendations for the use of predictive analytics methods include: identifying which investigations are at high risk of future serious incident; directing

real-time case reads to these cases while they are still open; identifying any needed immediate action; identify which FBSS cases are at a high risk for removal; directing real-time case reads to these cases while they are still open; and identifying any needed immediate action.

**7. *Conduct on-going evaluation and study of the effectiveness of instruments and SDM***

CPS should aggressively participate in collaborative efforts with other states to establish how best to use decision instruments, SDM and predictive analytics to improve practice and child outcomes. While the early evidence suggests these are the wave of the future, Texas should take a leadership role in assuring that the tools are developed and proven with case data.

**8. *Push decision-making to the field level to empower the CPS workforce***

CPS should expect (allow) the caseworker to make the key decisions of the case. Supervisors should develop caseworker abilities and review and coach caseworkers on the judgments that go into decisions. Supervisors should generally not make the decisions. Caseworkers should be empowered to use rigorous instruments and SDM to support evidence-based decisions. This recommendation will reverse the practice of using a series of informal “staffings” and shift primary responsibility (and authority) to the caseworker, supported by the SDM decision tools.

**9. *Revise the supervision and coaching method that guides decision-making***

CPS should learn from other agencies that have adapted decision instruments and SDM to develop a new method of supervision based on the decision support tools. This should be done in collaboration with field workers.

**Summary Benefits of Decision Making Recommendations**

	<b>Financial</b>	<b>Non-Financial</b>
<b>Quantitative</b>		<ul style="list-style-type: none"> <li>Higher outcomes of safety and well-being have been demonstrated as a result of more consistent decision making</li> </ul>
<b>Non-Quantitative</b>	<ul style="list-style-type: none"> <li>Cost to adopt an evidenced-based risk/safety instrument</li> <li>Training and implementation of evidenced-based interventions</li> </ul>	<ul style="list-style-type: none"> <li>Strengthens risk and safety decision-making and overall casework quality</li> <li>Allows CPS workers to spend more time in the field with children and families</li> <li>Improved BSD training</li> <li>Implementation of practice model and alignment with policy and risk/safety instruments</li> </ul>

**Summary Timetable and Investment for Decision-Making Recommendations**

<b>Recommendation</b>	<b>Timetable</b>	<b>Cost</b>
Develop and implement a practice model	Near Term	\$0
Implement SDM	Intermediate	\$2,000,000
Update definitions of "safety"	Near Term	\$0
Develop a family services instrument	Intermediate	\$0
Collaborate on research into predictive analytics	Intermediate	\$0
Evaluate effectiveness of instruments and SDM	Long Term	\$0
Push decision-making to the field level	Intermediate	\$0
Revise supervision of decision-making	Intermediate	\$0

## 6. RETENTION

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### Vision for the Future

In the future, CPS will lower the current turnover rate, particularly for investigators, through improving the work environment and creating a feeling of teamwork and support from supervisors and management from a person's first day on the job. CPS will deal more effectively with the large numbers of inexperienced workers by creating effective mentoring programs and pairing experienced and newer caseworkers together. CPS will reward the experienced personnel for mentoring newer caseworkers in a number of creative ways that make this an activity they want to do rather than an unwelcomed extra burden. CPS will change the dialogue between the supervisor and the caseworker by much better tracking of the details around the tasks the agency asks each person to do. With the support of supervisor training and metrics focused on the quality (not just quantity) of work, the environment will become much more desirable and allow more caseworkers to be proud of working for CPS.

### Background

TSG associated turnover with several root causes in its Assessment. TSG found that turnover is a complex challenge stemming from:

- Poor supervision
- Workload
- Rate of pay, particularly in the oil-rich areas
- Unpaid overtime
- Stress and fear
- Inconsistent or long hours
- Inability to achieve an acceptable work/life balance
- Unclear career path

Kezeli Wold conducted a 2010 study of Texas’ *Adult* Protect Services (APS) that TSG believes is helpful for understanding turnover in *Child* Protective Services (CPS)<sup>20</sup>. APS has substantially lower turnover among workers dedicated to a similar task (on behalf of a different subject age group). APS overall turnover (according to the 2013 Data Book) is 17% compared to CPS’ 24% rate in the same source for all CPS workers (turnover is substantially higher among CPS field staff). The APS study says that APS caseworker turnover peaks at 30%, whereas CPS turnover peaks at over 40% for investigators.

Comparing the APS study to TSG’s assessment allows us to understand the difference. The APS study found that APS could reduce turnover through better hiring practices by doing a better job of supporting employees through the first year and recognizing employees for their good work — findings similar to TSG’s findings about CPS. Table 1 suggests that there were two main differences between APS and CPS that might account for the difference in turnover rate: feeling supported and recognized.

Table 1 - Comparing Factors Driving Turnover between Texas APS and CPS

<b>APS Study Factors of Turnover</b>	<b>Learning for CPS</b>
Internal factors	As for APS, CPS workers perceive they do important work
• Perceptions of public service motivation	
• Perceptions of mission attachment	
External factors	
• Perceptions of supervisory support	Unlike CPS, APS workers reported feeling well supported uniformly by their supervisors
• Significant associations in supervisory support	
• Perceptions of recognition	APS new workers generally reported good recognition. CPS survey responses included a few comments about special monetary awards, but mostly felt they did not receive recognition for the good work they do.
• Significant associations within recognition	
• Formal recognition and specialist level	
• Casework recognition and specialist level	
• Peer recognition and APS program	
Organizational factors	
• Emotional exhaustion	CPS and APS caseworkers seem to report similar emotional stress and drain as a result of the work.
○ Significant associations within emotional exhaustion	
○ Emotional drain and specialist	

<sup>20</sup> <https://digital.library.txstate.edu/bitstream/handle/10877/3654/fulltext.pdf?sequence=1>

APS Study Factors of Turnover	Learning for CPS
level	
○ Emotional drain and APS program	
○ Feeling used up	
○ Feeling at the end of one's rope	
● Depersonalization	TSG's survey did not find signs of depersonalization in CPS.
○ Depersonalization and specialist level	
○ Significant associations within depersonalization	
○ Callous and APS program	
○ Lack of caring and APS program	
○ Emotional hardening and APS program	
● Effectiveness/Achievement	The study found that APS caseworkers felt they were being effective. Likewise, TSG survey confirmed a similar feeling from CPS caseworkers that they do make a difference in the lives of the children they touch.
○ Dealing effectively with client problems	
○ Positive influence on clients lives	
○ Significant associations within effectiveness	
○ Accomplishment	

Note: Although we mention here that the functions of APS is a "similar task" to that of a CPS worker, TSG is mindful that the investigation and protection of vulnerable children often involves a number of family-centric issues that can be more demanding in terms of workload, causing additional stress not present in many APS cases. However, we do believe the study is instructive.

## Recommendations

### 10. *Ease new employees into the job through mentoring*

CPS loses a significant number of caseworkers in the first year on the job. Interviews and surveys have confirmed that new employees feel ill-equipped to handle the harsh realities of the situations they encounter, and without insight and support from a fellow worker, many leave. Creating an effective mentoring program will ease the transition into the real world of child welfare and encourage employees to stay.

Experienced caseworkers value a sense of team within their unit. These employees chose to work to protect vulnerable children for their career, and they value connecting with other people

who can relate to the challenges of their job. The opportunity to become a mentor, with appropriate support from management for the extra work it takes, is a desirable role for many experienced caseworkers.

Mentorship is not a vocation. TSG does not recommend that CPS dedicate significant staff resources as full-time mentors. According to Dr. Jean Rhodes, professor of psychology at the University of Massachusetts, Boston, the most significant predictor of positive mentoring results is whether mentors and mentees share a close, trusting relationship.<sup>21</sup> Such relationships need ongoing support and monitoring, particularly during the early stages, to ensure that the relationships do not terminate prematurely. TSG recommends that CPS develop a mentoring program in which mentor/mentee relationships develop organically.<sup>22</sup> The mentoring program is a chance to develop a relationship with a more senior employee who can become friend, role model and advocate. CPS' role is in:

- Conducting reasonably intensive screening of potential mentors
- Making matches based on interests that both the mentor and the mentee share
- Providing effective training for mentors
- Offering post-match training and support for the mentor

Being an effective mentor takes time and skill. Because of the scale of the opportunity for mentoring relationships, TSG recommends a broad, formal mentoring approach. The process should include:

- Mentors and mentees work in the same stage of service and geography
- Measure participation and satisfaction levels
- Strategic pairing of mentors and mentees. That is, CPS creates pairs unless individuals desire to pair up
- Mentoring engagements last for the first 12 months
- Mentor training and on-going support
- Effective history as a mentor should become part of a management career path at all levels of management

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<sup>21</sup> [http://www.mentoring.org/downloads/mentoring\\_413.pdf](http://www.mentoring.org/downloads/mentoring_413.pdf)

<sup>22</sup> "Toward Predicting Successful Youth Mentoring Relationships: A Preliminary Screening Questionnaire," J. Roffman, R. Reddy, and J. Rhodes, 2002. (Submitted for publication.) cited at <sup>22</sup> [http://www.mentoring.org/downloads/mentoring\\_413.pdf](http://www.mentoring.org/downloads/mentoring_413.pdf)

Because of the current scale of CPS' turnover, most workers with more than three years of experience should expect to serve as a mentor to a new worker. CPS will find that some caseworkers are more effective as individual contributors and cannot be effective mentors, while others will enjoy the role. So, taking on mentors could be the first step toward management. Mentoring responsibilities should be considered as part of the experienced caseworker's workload so as not to expect that person to do 100% of their normal load and coach the new person. A new method for assigning cases to the pair of mentor-mentee is required to make being a mentor desirable. Unit Supervisors will balance workload to reflect contributions of those taking on mentees. CPS could also apply a bonus or financial incentive, like a pay grade escalation, for mentors, thus providing incentives for experienced caseworkers to become a qualified mentors. The recommendations in this document outline ways that will create opportunities to free up time resources for experienced caseworkers to become mentors.

CPS, however, must make it clear to all that a mentor is not the supervisor. Mentors are not part of management or the personnel evaluation process. Mentors could initially accompany the new caseworker on the initial cases when they are likely to be the most confused about interview protocols, safety and risk assessment, court appearances, dealing with difficult families and other things that are hard to teach in a classroom setting. As the new worker gains experience, the mentor will be able to provide quick help through ad hoc conversations and periodic informal meetings. The time commitment for being a mentor will be greatest when the mentee is new and the caseload assigned to the mentee must be considered as part of the mentor's workload to allow the mentor to spend sufficient time being a real-world coach.

While there will be initial implications to the caseload assignment from this approach, over time, CPS should see a reduction in caseload backlog as newer caseworkers become proficient faster and turnover decreases.

### ***11. Create performance pairs with new workers***

CPS should develop opportunities to increase the sense of teamwork, increase job satisfaction, make workers feel better supported, and deal with the geographic component of the work by creating more performance pairs of caseworkers. These pairs could share responsibility for certain cases or certain aspects of the work. For example, if two CVS workers each had responsibility for a child in a group home, they could share these two cases and one worker check on both children each time they made a trip to the home. This concept could allow the various specialists who serve a particular family to work as a synergistic team rather than each one having to do their work in a silo. Research has proven the decision-making is better from a

high-performance team and the feeling of connection between the caseworker and the Agency will be improved.

**12. *Talk with every worker in the 18 to 30-month experience range***

This tenure group is crucial. They have the experience to work full caseloads but are likely to leave over the next 12 months. CPS leadership should immediately focus on this critical group. CPS regional leadership should immediately make efforts to talk personally with every one of them. Regional leadership should explain to these workers how important they are, and that serious improvement efforts are underway. The message has to be honest, frank and believed.

This group includes about 1,500 of CPS’ case workers See Table xxx. Thus, if the responsibility to encourage them were spread across the regional leadership group, then the task of talking with them could be completed in a few weeks. For example, if 10 of the leadership from Region 8 each spent two hours a day talking for 15 minutes with one of this cohort; they could talk to each one in a week’s time.

Table 2 - Caseworkers with 18-30 months’ tenure at 4Q2013

Region	Number of Caseworkers 18-30 months
01	87
02	138
03	367
04	401
05	130
06	304
07	479
08	481
09	321
10	80
11	184
12	164
Total	<u>1,532</u>

***13. Put turnover on the critical metrics list for Regional Directors***

Making regional directors accountable for turnover will have a “trickledown effect” encouraging everyone to make it a focus. TSG believes that the regional director is in the best position to make the changes needed to improve turnover situations. This incents the regional director to participate actively in the hiring process, focus on the right mentor-mentee pairings, and make the positive changes in the environment to improve morale. In the metrics section of this report, we recommend an Executive Dashboard for the DFPS Commissioner and senior CPS leadership that will continuously display turnover rates by region and by stage of service, so that “hot spots” can be identified in real time. This way, both DFPS state office and CPS regional administration will be more focused on this critical issue in a timely manner in the future.

***14. Announce a 360 feedback program within the next 30 days and conduct it within 60 days***

This has proven in many organizations to be an effective method of improving management performance. While TSG hopes that is the case for CPS, the key driving motivation is to quickly demonstrate that CPS leadership is serious about improving. The initial survey should be followed by immediate corrective action plans for every level of management within CPS. Key: the whole 360 degree program should be as visible as possible and CPS leadership must be willing to listen to the feedback they receive.

***15. Launch a performance recognition campaign***

Every office should immediately launch a campaign to expose great work on behalf of children and families. Individuals would be encouraged to write short (e.g. one paragraph) vignettes describing some aspect of great service performed during the week. The regional director will select winners and recognize them widely within the region, coming up with creative ideas to reward them such as Region 6 “Wall of Fame.” The award need not be based on objective criteria; the point is recognition, not a rigorous program. CPS might decide to post the stories and pictures of winners on the Intranet site. This program has a threefold objective:

- Get workers thinking about the great work they do — working to amplify the positive qualities of the CPS job
- Start a “buzz” about the great winning stories. This is why program has to be weekly
- Call out workers that do good work, giving them the recognition they deserve

**Summary Benefit of Retention Recommendations**

	<b>Financial</b>	<b>Non-Financial</b>
<b>Quantitative</b>	Retain more workers, especially in the 12-36 month range. These workers are fully trained. CPS has invested over \$50K into their salary, benefits and training. Thus, these are the most important people to focus on	Reduce turnover among this highly visible group
<b>Non-Quantitative</b>		There benefit is not only financial, but when this tenure group leaves it is a real negative impact on the unit since they are well known and do good work. Also, they are well connected within the unit and their dissatisfaction impacts others

**Summary Timetable and Investment for Retention Recommendations**

<b>Recommendation</b>	<b>Timetable</b>	<b>Cost</b>
Ease new employees into the job through mentoring	Near Term	\$0
Create performance pairs with new workers	Intermediate	\$0
Talk with every worker in the 18 to 30-month experience range	Near Term	\$0
Put turnover on the critical metrics list for Regional Directors	Near Term	\$0
Announce a 360 feedback program within the next 30 days and conduct it within 60 days	Near Term	\$0
Launch a performance recognition campaign	Near Term	\$0

## 7. RECRUITING AND HIRING

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### Vision for the Future

In the future, CPS will find the “sweet spot” in attracting people who are committed to the mission of protecting the unprotected and dealing with the reality that child welfare agencies nationally face a relatively high turnover rate. CPS will not only select qualified employment candidates, but the best of the best through improved recruitment, selection strategies and tools to guide the process. During the Assessment, TSG was told by several caseworkers that CPS might be an employer of last resort for many candidates. We even heard that some new hires take a position with CPS so they can have benefits while they continue their job search. TSG has a vision that CPS can develop a whole new status among graduates of social work degree programs. This will require a different approach to better marketing CPS on campuses. TSG recommendations get tactical with methods of moving into the position of a top campus recruiter.

TSG has a vision of recruiting and hiring being used as a key to reducing turnover. TSG reported in its Assessment that there is a general feeling among CPS workers that CPS is hiring candidates that are not well-qualified for the work. This not only means workers have less chance of doing good work, but it also drives up the number of new workers that leave within the first year. Not only is it demoralizing to see so many new hires leave, it stretches the remaining CPS caseworkers' ability to do casework. TSG believes that CPS can turn this around in less than a year. Careful redesign can change the CPS image from a “safety job” to a place where people will want to stay and grow.

### Background

As TSG noted in its Assessment, leaders have long recognized the value of organizational stability to achieve desired outcomes. For leaders involved in child welfare, the impact of instability and an inexperienced workforce has more severe consequences and the need for well trained, experienced workers, and those committed to the mission of child protection are critical to achieving the best outcomes for the children and families served.

The CPS workforce acts as the ambassador and direct point of contact between the children and families they represent and the state's child protection system. Considering the important role of the CPS worker in the child welfare system, a successfully executed recruiting and selection strategy is paramount to serving Texas' families.

The formula of how best to recruit, select and retain the best CPS worker has eluded almost every state in the country. Hundreds of research papers and studies have been completed during the past 20 years related to the issue. The imperative and paramount demographic and psychographic attributes needed to be an accomplished child abuse investigator or caseworker has remained elusive. A 2010 article arrived at the same conclusion. Few studies have examined the characteristics of caseworkers and even fewer compare demographics, attitudes and beliefs.<sup>23</sup>

To complicate the recruiting conundrum, the amount of negative local and national media attention makes it difficult to attract qualified candidates to public child welfare. Texas CPS must improve the image of CPS investigators and caseworkers by increasing awareness of the profession by highlighting the excellent and sometimes lifesaving work, done every day.

Texas CPS uses an outsourced human resources partner (STARK) to test potential CPS candidates. The STARK SourceMatch test battery measures nine skills deemed specific and relevant to the CPS investigator and caseworker. As outlined in the operational review, the tests were developed from the job description and CPS focus groups. The test also measures the big five personality traits (commonly called the Five Factor Model FFM) and a sixth trait, altruism. Although the Myers-Briggs and the FFM construct are common screening instruments, the continued high turnover should at least suggest the screening instruments be re-examined for effectiveness. The test focuses on the broad psychological and personality traits, versus a more detailed picture of what drives a successful caseworker to excel in a difficult job environment.

## Recommendations

Improving the recruitment and selection of a skilled workforce is of critical importance to ensure the continuity of quality services and maintaining reasonable stability in the workload. To establish an effective CPS recruiting and selection strategy TSG recommends the following.

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<sup>23</sup> *Children and Youth Services Review - 2010*

**16. *Create and hire to a staffing model, in advance of need***

As TSG reported, the turnover rate among certain parts of the caseworker resource exceeds 40%. Much of the recommended Transformation seeks to reduce turnover. In the meantime, and even when turnover is lower, CPS needs to have enough staff to do the job. Furthermore, TSG's professional development recommendations should speed up the time to productivity for new hires. All this notwithstanding, CPS will have turnover, and it will take a long time for a replacement hire to be fully productive. Accordingly, CPS should develop a staffing model that assures it has sufficient caseworkers to "get the job done." The staffing model should account for the lead time of getting a new worker productive as well as the level of expected turnover. It should recognize that "average caseload" is useless for planning purposes, because half the workforce in the average is new. So, the model should plan on caseload level commensurate with the expected experience level of the workforce—given expected turnover. Obviously, the model would have to recognize expected work load by program (stage). This would be a simple model to develop. It could tell CPS exactly how many new workers to hire in a period so that it always has enough caseworkers for the expected workload. Note: this DOES NOT mean more personnel, just better timing of hiring.

Today, CPS begins to seek a new employees after one leaves. That means the new employee has to be located (perhaps 2-4 weeks), interviewed (1-2 weeks minimum), accept and join (another 1-3 weeks). Thus, using the current approach, a newly vacant position might remain open for months. We recommend that CPS maintain an active list of recruits in each office who are waiting for an offer. In the simplest form, CPS would make an offer the day the caseworker leaving announces his or her intention to quit. With a little more planning, CPS could anticipate that offers take 14 days before the person typically starts and always have enough offers out to cover expected terminations during a month. Another option is to offer as soon as CPS determines the need for an involuntary termination, buying time before actual departure.

A still more aggressive, though reasonable approach, is that CPS hire to have workers trained in advance of turnover. This better meets the need, although it raises some planning challenges. TSG stops short of recommending this approach.

**17. *Work actively with Texas higher education schools of social work to promote CPS as an employer of choice***

Although TSG did not collect the data in its Assessment, we feel it safe to assume that a high percent of CPS' recruits come through social work or related degree programs of Texas colleges and universities. This is in part because of the IV-E stipend program that helps pay tuition

expenses of some students. Although some of the regions have on-going ad hoc relations with local colleges and universities, TSG recommends that CPS develop a more structured and standardized system to play an even more active role with these schools to “fill the pipeline” of well-qualified recruits. DFPS leadership should work with CPS to develop this strategy. CPS should encourage its workers to serve as guest lecturers or even adjunct professors at local schools. CPS should work with local schools to support academic research, building bridges from the school to CPS. CPS should work with the deans of schools to encourage focus on the practical issues of CPS in curriculum development. In addition, CPS should continue to work actively with career offices to identify the best candidates. The objective of this recommendation is to put a positive image of CPS at the forefront of students’ thinking.

### ***18. Develop a strategic marketing and recruitment plan***

CPS should develop a strategic recruiting plan that contains a complete profile of the ideal candidate, a more creative and targeted analysis of the best places to source for talent, and positive branding and messaging to promote positive occupational awareness about the position. CPS has the opportunity to target potential recruitment candidates just as a salesman targets a potential client. As it has come to realize, CPS cannot assume that there are enough young people out there waiting to become case workers. Filling the pipeline with great candidates requires an aggressive recruiting campaign:

- Talk to a sampling of recent hires and students to develop a clear understanding of the role potential employees think CPS play in their careers. Is CPS a career objective, or a first-job? What is it that potential employees want to get from working with CPS? CPS should research where target candidates go instead of CPS? Why?
- Develop a segmentation of potential new hires, and recruiting messages tailored for each. For example, some may be looking to break into social services...others for a first job...others to stay in the local area...still others as a first step to break into state government service. CPS should have recruiting material and messages for each segment.
- Build stronger relations with college career offices. CPS should become a leading recruiter, working actively to work hand-in-glove with the career centers. CPS should spell out the priority schools and develop methods of making it easy for those career offices to work with CPS.
- Develop a process of reaching out to every college professor of social work to tap into the potential candidate pool. This might involve more actively seeking professor.

recommendations. It might also involve offering more quest lectures about CPS case work. CPS should have a presentation “in the can” that a CPS representative can give.

- CPS should have a recruiting plan to obtain the right students from each of the 145 colleges and universities in Texas.<sup>24</sup>
- Develop a method for prioritizing and pursuing the best candidates. This should involve repeat contacts (e.g. email blasts) as well as an individual file on the best candidates.

### ***19. Revalidate the job expectations for the CPS positions***

CPS should verify that each of its job description and posting include a clear definition of the roles and responsibilities, the requisite competencies, and knowledge skills and abilities for the position.

### ***20. Improve the job preview process***

Develop a mandatory, rigorous, realistic job preview process that is included earlier in the hiring process; completed before an application is submitted, such as on-line videos demonstrating the nature of the duties of the position. This will improve applicants’ understanding of the role, increase the quality of the applicant pool and create more accurate incoming job expectations.

In addition, CPS should expand the applicant pool:

- Work with colleges in neighboring states
- Work with colleges nationally
- Improve the web recruiting site. Today it serves only as a place to search for open positions, not as a “recruiting” tool<sup>25</sup>. This 20 minute video is largely about why not to work with CPS...not a recruiting video. TSG reviewed the “Come work for us” page at the DFPS website.<sup>26</sup>
- Advertise on campuses. This ties to the “positive message” recommendation

Improve the message. In the video linked above, the candidate is told not to apply unless this is a career choice. That is not a realistic message in an industry with 24% turnover. The message should change to: CPS is a great place to start your social work career.

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<sup>24</sup> TSG analysis of list at <http://www.window.state.tx.us/scholars/schools/>

<sup>25</sup> See <https://www.dfps.state.tx.us/Jobs/>

<sup>26</sup> See <https://www.dfps.state.tx.us/Jobs/apply.asp>

**21. *Revalidate and broaden candidate profiles***

Continue with the STARK SourceMatch Assessment Process, but revalidate and build candidate profiles to include the most effective behavioral and attitudinal characteristics and attributes of excellent CPS workers. This is necessary to help identify the right candidate. The current STARK SourceMatch test battery was developed after small focus groups of CPS staff were convened years ago. Based on the continued high turnover, CPS must ask the question; are these the right tests? CPS should expand the focus groups and study the best and most tenured CPS workers and ask: why are they still with CPS? What skills and education did they bring with them, or what was developed that made them successful?

Moreover, the current Myers-Briggs and FFM personality traits construct are common screening instruments, but the continued high turnover should at least suggest the screening instruments be re-examined for effectiveness. The test focuses on the broad psychological and personality traits, versus a more-detailed picture of what drives a successful caseworker to excel in a difficult job environment. Thus, the screening process should be broadened to identify good CPS workers, rather than narrow the candidate field.

**22. *Source hiring process management to Vendor***

Consider eliminating the DFPS hiring specialists and shifting all of the recruitment and selection process steps (with the exception of the final interview and selection) to a vendor. The savings from eliminating, or repurposing, the DFPS hiring specialists should offset the amount the vendor would require to expand the services it provides the agency. If the hiring specialists remain, mandate they have CPS experience.

TSG is aware of the additional administrative burdens that will fall on CPS supervisors if the hiring specialist positions are eliminated. Thus, there will need to be a resource allocation to supplant these important administrative tasks and some should fall on the vendor. However, during our process mapping sessions, we heard in a number of regions, that supervisors or managers were not as intimately involved in the actual interview process as they should have been. Regional management having more control over hiring decisions is an important thing, and will help further good and meaningful selection decisions.

**23. *Improve interviewer preparation***

Create selection criteria for interviewers (hiring specialists and supervisors) who attend mandatory interview training on process and interviewing techniques. Mandate that the CPS

supervisor or a unit manager is involved in the interview process and has the final authority on the candidate selection.

**24. Develop and manage to a standardized and expanded interviewing process**

Develop a process based on the validated job profile that enables CPS to assess applicants against the minimum successful requirements for the position and to gauge potential success in the position. Revalidate the interview guide and verify the questions contain the right mix of situational and behavioral questions.

**25. Refine selection process**

Adopt and implement an evidenced-informed child welfare selection process. Georgia uses the Employee Selection Protocol (ESP) developed by Dr. Alberta Ellet (University of Georgia), used to strengthen recruitment and retention in child welfare agencies.<sup>27</sup> Table 2 shows typical steps in an ESP process.

Table 3 - Key Steps in the ESP Process

<b>Key Steps in the ESP Process</b>	
Step 1	Information about elements of job (salary, benefits, schedule, typical workday)
Step 2	View realistic job preview, description of stresses, complete self-assessment, written feedback
Step 3	Personal decision to proceed with formal application - written personal statement (motivation/career goals), resume, references, and transcripts. Steps 1 – 3 allow candidates to expend energy to apply for the position and potentially increases commitment
Step 4	On-site visit - assessment activities, team- interview, assessment of skills (personal judgment, reasoning, analytical), and on-site writing sample
Step 5	Juried process - three-person assessment team considers all information, makes individual decisions regarding applicant, and discusses/decides as group

The ESP was designed to facilitate a better match between potential candidate’s skills, commitments, attitudinal beliefs, and expectations and the demands of work in child protection. The ESP allows applicants to self-select out of the ESP process before making more formal applications for child welfare positions. Research has supported the value of ESP in establishing

<sup>27</sup> Ellett, A.J., Ellett, C.D., Ellis, J., & Lerner, B. (2009). *A research-based child welfare employee selection protocol: Strengthening retention of the workforce*. Child Welfare, 88(5), 49-68

a common assessment framework. ESP was designed to allow agencies to hire applicants with stronger personal and professional commitments to the field.

**26. *Improve tracking and management of recruitment***

TSG recommends that CPS contact and learn from several unrelated recruiting departments in Texas. These will include some outside state government, such as top consulting firms, banks or other industries that hire professionals into high-turnover positions. CPS should adapt many techniques from industry. CPS should also talk with college recruiting offices to learn about how they track employers and present them to students. After this, CPS should refresh its recruiting tracking and assessment methods.

**Summary Benefit of Recruiting and Hiring Recommendations**

	<b>Financial</b>	<b>Non-Financial</b>
<b>Quantitative</b>		Reduce turnover, which is not only costly, but demoralizing to the workforce
<b>Non-Quantitative</b>	Reduce occurrence of new hires that leave in the first 6 months. The goal is to cut that to less than 10%. Each person that leaves at 6 months costs CPS \$20-25,000 <sup>28</sup>	Reduce the number of poorly managed cases that put CPS at risk as well as families

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<sup>28</sup> Half a year pay and benefits plus the cost of training and supervision

**Summary Timetable and Investment for Recruiting and Hiring  
Recommendations**

<b>Recommendation</b>	<b>Timetable</b>	<b>Cost</b>
Hire to staffing model in advance of need	Near Term	\$0
Work with Texas higher education schools of social work to promote CPS as employer of choice	Intermediate	\$0
Develop a strategic marketing and recruitment plan	Near Term	\$0
Revalidate the job expectations for CPS positions	Near Term	\$0
Improve the job preview process	Intermediate	\$0
Revalidate and broaden candidate profiles	Near Term	\$0
Source hiring process management to vendor	Immediate	\$0
Improve interviewer preparation	Near Term	\$0
Develop and manage a standardized and managed interviewing process	Intermediate	\$0
Refine selection process	Near Term	\$0
Improve tracking and management of recruitment	Intermediate	\$0

## 8. PROFESSIONAL DEVELOPMENT

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### Vision for the Future

There was a time when CPS could assume that what they taught in the classroom would last new workers for a long career at CPS. That was then; now everything is different. Today, BSD and the other aspects of CPS training are tasked with preparing CPS workers for challenges that don't yet exist, technologies we can hardly envision, and problems that have yet to emerge. Impossible? No. Challenging? Yes. However, meeting CPS' challenge will require rethinking of training itself – its purposes and how to deliver it.

In the future, Texas CPS will strive to be a learning organization. This is fundamentally different because every employee will think of learning as part of his or her daily job requirement. CPS will integrate professional development into all levels of the organization by creating a learning environment that emphasizes knowledge and skill development. CPS will supplement traditional learning approaches with alternative, technology-based opportunities and structured and guided field experiential learning activities.

### Background

Building caseworker skill is a challenge for all state CPS agencies. TSG looked at the best other states have achieved. We found the following:

#### *New Hampshire*

The Bureau of Organizational Learning and Quality Improvement of the Division for Children, Youth and Families/CPS have a partnership relationship with the Center for Professional Excellence in Child Welfare at the University of New Hampshire. The UNH Center provides a range of education and training services including:

- Core, specialized training for CPS caseworkers
- Training for all staff in CPS involved with the stages of service
- Outside (CPS) agency staff
- Residential care providers
- Foster and Adoptive parents

- Annual Conference for professionals and families

## *Washington*

The Children's Administration/CPS has created a Social Worker Training Academy that provides the mandatory training requirements for caseworkers. The training model is based on four weeks:

Week 1: Laws; Essential Factors of Family Life; Indicators of Physical Abuse, Sexual Abuse, and Neglect; "FamLife": SACWIS training

Week 2: Structured Decision Making and Safety Assessment Planning; clinical indicators.

Week 3: Field Competency

Week 4: Casework planning; Children & Youth in Care

Washington staff training includes introduction and continuing training in evidence-based practices including: Home Builders; Incredible Years; specific Mental Health Services; Parent Child Interaction Therapy; Family Functioning Therapy (in partnership with the University of Washington); SafeCare; and, Positive Parenting. Each identified service has extensive web-based links for continuous search access.

The Children's Administration maintains a training video library available to staff, families, and the general public that includes subjects such as: Behavior Challenges in Foster Care, Behavior Management: 11-18; Brain Development and Growing Minds, Bright Futures in Preventive Mental Health, Child welfare 101, Trauma and Children; and a series on "Working with Children": With Incarcerated Parents; With Physically Aggressive Behavior; With Sexual Behavior Problems.

## *Virginia*

The Virginia Department of Social Services, Division of Child Protective Services, has established a Core Competency training model based on three, 12, and 24-month educational intervals with additional requirements for annual continuous education. Supervisory training is required in four competency areas within the first year. Supervisors are responsible for assessing caseworker core competency upon completion of first 24-month core competency training requirements.

## Mississippi

The Division of Child and Family Services of the Mississippi Department of Human Services has developed caseworker and supervisor training in partnership with the University of Mississippi. Kim Shackelford, Ph. D. is the center point in the DCFS – University partnership. Secondary traumatic stress recognition and management is a key quality added component of caseworker and supervisory training. Additionally, the DCFS – University of Mississippi Child Protective Service Casework Supervision Project focused on: 1) assessment of supervisor competencies through cultural consensus analysis and development of supervisor-driven learning; 2) small group learning on a clinical casework supervision model; 3) establishment of a peer support system to promote transfer of learning and peer problem-solving. (Southern Regional Quality Improvement Center: University of Kentucky).

## Recommendations for Professional Development

### 27. Create a learning organization

Texas CPS provides lots of training, but as TSG reported in its Assessment, this does not always translate to solid skill development and repeat application. Articulating a clear vision, following a plan, and providing training will not transform CPS to perform at its best. Instead, CPS will have the best shot to succeed in the future by taking the attitude of a learning organization toward professional development.

The concept of a learning organization is not new and although not developed by Peter M. Senge, it was certainly amplified through his book *The Fifth Discipline*, published in the 1990s. Senge spurred numerous publications, conferences, and workshops all dedicated to helping organizations become learning organizations. Senge defined a learning organization as, “organizations where people continually expand their capacity to create the results they truly desire, where new and expansive patterns of thinking are nurtured, where collective aspiration is set free, and where people are continually learning how to learn together.”<sup>29</sup>

The Business Dictionary defines a learning organization as an organization that acquires knowledge and innovates fast enough to survive and thrive in a rapidly changing environment. Learning organizations create a culture that encourages and supports continuous employee learning, critical thinking, and risk-taking with new ideas.<sup>30</sup> Simply put a learning organization

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<sup>29</sup> The Fifth Discipline: The Art and Practice of the Learning Organization

<sup>30</sup> Business Dictionary.com/definition/learning-organization.html

is a group of people skilled at cultivating, acquiring, and transferring knowledge in a supported environment. The culture of learning is simply an environment that continually learns, supports learning, and advances a system of continuous improvement.

CPS operates in that sort of rapidly changing environment that requires learning.

One of Senge's five key elements for organizational practices is to plan and create the future versus reacting to the present. In order for Texas CPS to transform, TSG recommends Texas CPS consider adopting a culture of learning and truly becoming a learning organization:

- Adopt an organizational shift in how training and learning are approached
- Allow learning to become part of a larger framework of systems and processes of how the organization promotes, supports, and delivers training and professional development
- Inform and communicate this approach to staff to send a positive message that their work, job performance, and success is supported by the organization<sup>31</sup>
- Learning processes should be developed, monitored, analyzed, and aligned with CPS goals

The learning organization moves away from basic employee training and shifts its focus to problem solving, innovation, and real learning. Becoming a learning organization will allow Texas CPS to develop a group of people that have the opportunity for enhanced and continuous learning integrated into their culture and CPS Practice Model.

## Recommendations concerning BSD

Key findings from the operational review discovered employees recommended that training be redesigned to focus on skill development versus preparing for the class final. In addition, the overriding recommendation was to support more mentoring or shadowing for new investigators and CPS staff to supplement classroom and allow new CPS staff to apply what they are learning.

Feedback from CPS leaders and focus groups suggested that the most important aspects of the BSD training are the experiential activities that provide opportunities to practice skills and apply knowledge to cases and authentic work situations. In fact, there was a general consensus that practical and experiential training are the most effective method to prepare CPS staff for their role in assessing risk and ensuring safety for children and families. Focus group participants recommended that any curriculum redesign should provide more opportunities in the pre-service

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<sup>31</sup> Knowledge Advantage.biz Ruth Kustoff

training to practice with real cases, utilizing actual documents, and practice in the IMPACT system. In addition, the timing and sequencing of the pre-service training should provide CPS staff the opportunity to apply their learned knowledge on the job by staggering classroom and field training.

There was also consensus that the previous mentoring program was very successful in CPS development and would lead to higher retention rates, earlier skill proficiency, and improved critical thinking. Some regions provide shadowing opportunities for new CPS staff before to BSD training for up to a month. This practice was noted as effective in preparing CPS staff by providing them with experience on which to apply class content. Mentoring programs were described as not being consistent or formalized throughout the state. There is currently no structured mentor development program or incentive, and experienced CPS staff act as mentors. Focus group participants strongly suggested that each new CPS staff have access to an experienced mentor throughout their training period to provide additional coaching and offer guidance throughout the training period and beyond.

Between 2003 and 2008 the Administration for Children and Families (Children's Bureau) funded eight projects designed to improve the recruiting and training of child welfare workers. The Fordham University study in Connecticut found better training and mentoring improved retention of CPS workers.

CPS also provides some content specific in-service training opportunities for staff in the field (Level III & IV). Currently, CPS staff are required to complete additional programmatic skill/knowledge enhancement training courses for advancement to the next level. These include web-based training(s) and instructor lead training curriculum initiatives, such as the Advanced Techniques in Joint Child Abuse investigations and Trauma Informed Care.

In addition to responding to questions about BSD training, focus group participants were asked to provide suggestions to improve BSD training, particularly from the standpoint of relevance to the job. To elicit feedback, participants were asked what would make training more effective. The participants stated that BSD and additional in-service training should be practical, skill-based sessions provided by subject matter experts in the respective fields. A number of topic areas were identified as being job critical and currently either under provided or not provided. These areas include; Motivational Interviewing, Psychotropic Medications, and Human Trafficking.

Other general recommendations from focus group participants were to create leadership development programs for CPS staff that desire to move into supervisory and management roles. Participants also commented that there should be better links between recruitment and training and that there should be strategic and structured training plans for both Pre-Service and In-Service training for all CPS staff.

### ***28. Improve the sequential structuring and extend BSD training to a more practical experience***

Today, BSD is provided over a 13-week time frame. Formal classes are interspersed with light field exercises. TSG recommends that BSD be restructured so that the student experiences real case work between classroom sessions. For example, at the outset, BSD could rearrange the current curriculum so that the 13 weeks are divided evenly across a 26-week time-frame: week in class, week in the field. The curriculum could be arranged so that the case worker is prepared for some aspect of real field work immediately after the first week. This might only be pulling historical case material or information on collaterals<sup>32</sup>. During the week in the field, the trainee would report to one or more case workers to leverage actual case work. Then, back in class the next week, the trainee would have the opportunity to build on the real-world experience. This sequence is provided only as a model—restructuring the BSD curriculum for maximum effect will require direct involvement with field workers.

### ***29. Update BSD learning methods***

TSG reported in the Assessment that much of BSD is offered through classroom or computer-based training. The curriculum also includes webinars, blended-learning (on-line, journaling, discussion, etc. ), use of the iphone for assessing applications and use of the Tablet PC to complete narratives, and saving and submitting documents. However, there are other effective methods of learning that can be used. CPS should consider which of many new training methods can allow BSD to be taught in the most appropriate manner. These include:

- Developing Massive Open Online Courses (MOOC), possibly in collaboration with the CPS agencies of other major states
- WebEx or other multi-point video-based sessions such as Harvard Business School uses
- Using the virtual classroom tools used by Walden, Phoenix and the like
- Collaborating with on-line universities to adapt their existing courseware
- Collaborating with on-line universities to source some aspects of training
- Collaborating with on-line universities to develop certain courses

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<sup>32</sup> CPS refers to members of the family or community that know the family and children as “collaterals”

**30. *Deliver BSD through mixed methods***

Learners have different learning styles and respond to different learning modalities. Some are visual learners, some learn best by doing. BSD should be designed for best learning, not in a manner that prefers one learning style. BSD should be redesigned to assure that students with many learning styles can become good workers.

**31. *Redesign curriculum including competency-based learning***

Once BSD is restructured, each panel of every module of the course should be re-considered to assure that it is field-based and aligns with the new structure.

Today, BSD is based on “passing.” Because CPS is so desperate to put new workers in the field, few students are “failed”— whether or not they are really ready to take on cases. TSG recommends that CPS borrow from the concept of competency-based learning, as practiced by Western Governors’ University, one campus of which is in Texas.<sup>33</sup> Using this approach, learners move on to the next step when they have achieved a level of competence, not when they have put in the required time.

**32. *Validate competencies and topic areas of BSD***

TSG heard many references in the field that the contents of BSD are not aligned with the practical realities of case work. Furthermore, we heard that the curriculum lacks material drawn from real-life cases. In addition, we heard that BSD does not prepare new workers for being effective with the “people aspects” of case work. Accordingly, TSG recommends that every aspect of the curriculum be updated using direct input from active case workers.

Aligning with the practical realities of the work goes beyond aligning with approved competencies. CPS should assure that its professional development produces great caseworkers. This requires on-going research into the effectiveness of training curriculum and material. This alignment should be through direct assessment of the work performance of graduates, not through the indirect means of comparing to a list of competencies.

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<sup>33</sup> <http://texas.wgu.edu/>

**33. *Review existing OJT activities for relevance and identify the most appropriate topics for “field structured days” of experiential learning***

TSG reported in the Assessment the “scavenger hunt” or checklist nature of BSD’s current OJT days. TSG recommends instead that CPS use dedicated mentors for guided and supported experiential learning that is relevant to the real cases being managed in the trainees office at the time. Together with regional leadership, BSD should develop a meaningful set of field activities for trainees between classroom sessions. This should be staged to be coordinated with the class schedule. It should also be “real work” not "make-work" assignments. While the training curriculum is important, the revised model of involving trainees in case work would also reflect the practical realities of cases. Thus, trainees would learn that every week and every case is different — that real work does not conform to a training schedule.

**34. *Introduce “real” cases early in the BSD academy to trainees that will have direct oversight from a CPS mentor***

CPS should redesign training curriculum and training materials so that real cases are used rather than stylized ones. It is possible that some redacting might be necessary, or names changed. However, the objective should be to provide training material that is as close to real as possible. Furthermore, BSD should not “sugar coat” training material. Case work can be very challenging — as workers encounter challenging personalities and unfamiliar cultures. BSD should allow trainees instruction and a realistic (though safe) opportunity to build skill handling real case situations.

**35. *Develop a mentoring guide and progress tracking tool that provides real time feedback to CPS trainees and updates the unit supervisor***

A major part of the initial professional development of new hires is to familiarize them with CPS’ actual management process. To that end, TSG recommends that part of the BSD curriculum should provide clear direction and mentoring during the field parts of BSD. BSD should provide guidance to mentors, supervisors and caseworkers that are involved with trainees. Of course, learning to be a good coach will take a bit of time out of the busy caseworkers’ and supervisors’ days. However, the expectation is that a well-designed mentoring method during BSD will achieve the result of real case assistance that exceeds the time required of the experienced worker—not years later, but in that week.

***36. Assign BSD trainers to units so that they can stay close to the field work and keep their perspective fresh***

TSG recommends that BSD must be taught by individuals with fresh experience. Case work 20 or even two years ago is not the same as case work today. Instead of training new workers for the past, BSD should be preparing them for the future. Thus, trainers must have the most up-to-date experience possible. Today, BSD trainers are not assigned to any to the field. TSG recommends that ensuring that trainers are assigned to units within a region is a method for allowing some field workers (or supervisors) a chance to sharpen their skills by teaching. These trainers could participate in meetings; go on ride-a-longs, using the unit's cases as examples in training. Not all will want this, but some will.

Moreover, CPS may want to consider using training teams that include a mix of professional trainers and experienced program staff. While some professional trainers might teach more than they work in the field, CPS should rely much more heavily on instructors that know the work first hand. The current practice of assigning instructors to teach for 52 weeks straight should be reviewed. Allowing field supervisors or even more senior case workers to participate in training teams.

***37. Involve CPS unit supervisors in the BSD training progress of their new workers***

TSG reported in the Assessment the prevailing message from supervisors—that what you learn in BSD is not relevant to the field. That attitude is unhelpful to effective learning. This finding means that BSD curriculum should change, as TSG recommends. It also means that CPS supervisors should be “in the tent” as part of the professional development process. To that end, TSG recommends that part of the BSD curriculum be based in the unit. This could involve discussion sessions, role playing, and reviewing active cases, all to be determined by a refreshing of the curriculum. The objective is two-fold: trainees get more familiar with real supervision and supervisors become a focal point of the trainees’ education.

## **Professional Development Recommendations – Middle Management**

***38. Create leadership development programs for high performing CPS staff that desire to move into supervisory and management roles***

TSG recommends that CPS build a leadership development program that builds skill over a period of years before a worker is promoted to supervisor. Today, CPS tries to train supervisors

after they are promoted. Unfortunately, that is too late. That approach results in many cases in which supervisors lack the aptitude, and develop bad habits and relationships with subordinates before they can learn better approaches. TSG recommends that CPS identify potential leadership-track workers when they have been on the job about 24 months. Those candidates would then be developed over the next several years. Leadership development can include classes, minor leadership assignments and mentoring.

***39. Review and validate topics included in Beginner Manager Training***

CPS should refresh beginning manager training. The topics should be updated. The learning methods should be aligned with the challenge of learning to manage. Staffing should be reconsidered—TSG recommends that real managers should be heavily involved in teaching this course, not just professional educators. To this end, CPS should work with commercial management training organizations or Texas universities or college business schools.

***40. Offer ongoing professional development and not just the DFPS Beginning Manager course***

No one learns to be a manager in a short training class. TSG recommends that CPS include supervisors, program administrators, program directors, regional directors and state-office managers in a program for ongoing professional development.

***41. Promote informal opportunities and forums for supervisors to share innovative methods, practices, and brainstorm new ideas***

TSG acknowledges that good managers do not learn their trade in a classroom (and certainly not on a computer screen). Management is a *social* science. Learning management requires interacting with people. TSG recommends that CPS develop a regular (e.g. monthly) set of opportunities for managers of all levels to talk with peers about management challenges. Some offices are large enough to conduct regular discussions among supervisors. Others are too small and at least 30 miles from the next office. In the case of managers above supervisors, meeting with peers will certainly involve other offices. So, some adaptation will be required. Perhaps video chat can be used, though travel and face-to-face is vastly superior.

***42. Conduct a regular 360 degree program to help managers of all levels learn to lead better***

CPS should allow its managers of all levels to learn from their workers. CPS should adapt one of many commercially available 360 questionnaires. This should be part of CPS professional

development program. The 360 degree feedback program MUST NOT be part of CPS performance evaluation of managers, as that would destroy its effectiveness.

### **Professional Development Recommendations – Senior Leadership**

Senior leaders need to evaluate strategic options with thoughtful and dialectic executive decision-making. Leaders need to be inclusive and at other times be decisive. They have to manage, influence, and lead change, have the capability to build teams, coach and develop others, all while achieving desired and measurable results. This is only a sample of leadership characteristics and skills.

The list of desired leadership attributes is overwhelming and often causes an organization to become myopic and only focus on a few. TSG recommends a multi-tiered approach for ongoing senior leadership professional development.

#### ***43. Identify up and coming leaders, and prepare them for promotion through the ranks***

TSG recommends that succession planning and leadership development should not stop when a worker is promoted to supervisor. Each CPS leadership position should have a succession plan. Every manager identified as having potential to move up should be involved in leadership development.

#### ***44. Involve major universities in building CPS' leadership development program***

Most major universities offer leadership certificate programs that can be completed online or with instructor led options. Furthermore, CPS should explore the possibility of partnering with several on how best to create a leadership development program.

#### ***45. Develop an internal CPS leadership academy***

HHSC currently has an Executive Leadership Academy with a Chief Learning Officer (CLO) and a steering committee to guide its operations. There is no need to create a new leadership academy. However, CPS can build off of the existing HHSC Academy, leverage its resources, and work closely with the HHSC CLO in developing the structure that cultivates its own leadership learning experience. DFPS leadership should also be involved in this effort. The CPS academy should assign and rotate mentors to small groups of emerging leaders. Each

mentor would focus on a specified topic and include experiential learning with business case reviews/discussions and projects to advance leadership skill development.

**46. Encourage formal and informal opportunities and forums for senior leaders**

CPS middle and senior leadership should regularly get “offsite” to share innovative methods, practices, and brainstorm new ideas.

**Summary Benefit of Professional Development Recommendations**

	<b>Financial</b>	<b>Non-Financial</b>
<b>Quantitative</b>		<ul style="list-style-type: none"> <li>• Reduce turnover, especially among caseworkers</li> <li>• Increase case read accuracy</li> <li>• Increase measure of training performance</li> </ul>
<b>Non-Quantitative</b>		<ul style="list-style-type: none"> <li>• Create a learning organization</li> <li>• Increase workers’ ability to work cases earlier in their tenure</li> <li>• Raise capability and performance of supervisors and managers</li> </ul>

**Summary Timetable and Investment for Professional Development**

<b>Recommendation</b>	<b>Timetable</b>	<b>Cost</b>
Create a learning organization	Intermediate	\$500,000
Improve sequential structuring and make BSD training more practical	Near Term	\$250,000
Update BSD learning methods	Near Term	\$0
Deliver BSD through mixed methods	Intermediate	\$500,000
Adapt competency-based learning	Long Term	\$1,000,000
Validate competencies and topic areas of BSD	Near Term	\$100,000
Review existing OJT activities for relevance	Near Term	\$0
Introduce “real” cases early in the BSD academy	Near Term	\$0

<b>Recommendation</b>	<b>Timetable</b>	<b>Cost</b>
Develop a mentoring guide and progress tracking tool	Intermediate	\$0
Assign BSD trainers to units	Intermediate	\$0
Involve CPS unit supervisors in the BSD training progress	Near Term	\$0
Create leadership development programs	Long Term	\$0
Review and validate topics included in Beginner Manager Training	Intermediate	\$0
Offer ongoing professional development	Intermediate	\$0
Promote informal opportunities and forums for supervisors	Near Term	\$0
Conduct a regular 360 degree program	Long Term	\$0
Identify up and coming leaders, and prepare them for promotion	Long Term	\$0
Involve major universities in building CPS' leadership development program	Intermediate	\$100,000
Develop an internal leadership academy	Long Term	\$100,000
Encourage formal and informal opportunities and forums for senior leaders	Long Term	\$0

## 9. PROCESS

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### Vision for the Future

CPS will streamline the work for investigations, family based services, and conservatorship to focus on the actions that most directly affect safety, well-being, and permanency. CPS will eliminate the tasks that do not directly add value to these goals. The safety and risk assessment tool will be embedded into the case process. Caseworkers will complete necessary documentation efficiently with technology guiding and reinforcing the desired policy and practice. There will be review and approval processes strategically conducted by the person who has ultimate approval authority. Caseworkers will develop case work plans for each stage of the case. These will guide the work that is done. The supervisor will have a proactive responsibility to coach the worker on the next steps in the case and assist the caseworker to plan her/his week. Naturally, ad hoc events will occur and will take priority as required but the implication to other cases the caseworker is working on with now will be visible. Predictive analytics will help CPS leadership identify high-risk cases while they are still active and while CPS can intervene to do more to support these children.

The new processes for investigations, family based services, and conservatorship will assure that:

- Work is done close to families
- Time is managed effectively allowing field staff to work directly with children and families
- Work is optimized—eliminate unnecessary rework, delays, travel and paperwork
- Work steps are linked to a plan of action customized to the needs of each case
- Link between input and outcomes is measured and managed
- Work is assigned in a way that matches worker capability to case requirements
- Instances in which workers need help are quickly identified and support provided
- Process is well understood and continuously improving through a formal process

## Recommendations around the case work

### **47. *Create case guides that will be used to develop a case plan***

CPS should develop case guides (or checklists) that can be assembled to build a case plan. Ideally, these should be managed in IMPACT. Any checklist can be adjusted based on the specifics of the case. This reminds the worker of steps. Following these will assure both worker and CPS that the case was conducted according to best practice techniques. CPS currently uses checklists for individual events, such as removals, to help caseworkers remember what to do in high pressure situations. The concept of a case guide is actually a best practice TSG observed an investigations unit using in El Paso. It is a bigger picture plan for how the overall case progresses.

Casework planning is best done by assembling tried and true methods from a kit bag of consistent yet flexible steps/routines throughout the life of a case. TSG recommends that CPS develop a series of work routines that can be assembled into an overall case guide. These routines can be customized. Routines may be indicated as a result of structured decision-making (see SDM recommendation). Routines are the framework, not a substitute for thought.

In the decision-making recommendations, TSG suggests that CPS implement a series of decision-making instruments based on SDM. Those would be supported by and integrated into the case guides (checklist) developed through this recommendation. The guides would describe *the blueprint and direction of the case* while the instruments describe *the safety, and risk factors and the need for targeted services*.

### **48. *Revise case process based on SDM***

In the decision making recommendation section, TSG recommends implementing SDM. Once that is done, the casework process must be adjusted to accommodate the new approach to safety and risk assessment and the decision-making logic model. The new process will use the decision-making support from SDM at the point in the process when the worker is truly making the decision. Furthermore, the decision-making process, the technology support from IMPACT, the policy manual, and the local practices will all work together to help CPS caseworkers make the ideal judgment call in every situation.

### **49. *Conduct on-going study of the link between family situations, interventions at all case stages and family outcomes***

In line with the recommendation to develop instruments, casework plans, casework guides and SDM, TSG recommends that CPS not assume these will work into the future without adaptation.

Instead, CPS should assume that it must conduct ongoing research that will improve and update each of the above, based on experience. This will require an ongoing data analysis effort and should be a fundamental component of Quality Assurance.

## Casework Management Recommendations

### ***50. Develop metrics to determine how much time each caseworker is spending face to face with children and families***

CPS management at the regional level should have a system in place to assess the time management skills of each of the direct care caseworkers to ensure that they are effectively managing their time and, as a consequence, spending quality time with children and families. The average caseworker is juggling multiple families and cases and the work, by nature, involves a lot of start and stop. Time management and best practice techniques for managing in a multi-tasking environment will help the caseworkers have more time with children and families.

The time management campaign should include the casework plans, a model of effectively managing that caseworker day, improved travel time efficiencies at the regional level, and measures suitable for supervisors to assess caseworkers' time management. Thus, time management becomes a crucial element of supervision. This will fundamentally transform the nature of the supervisor's job from making decisions on behalf of caseworkers to managing them to ensure they spend quality time with children and families.

### ***51. Manage investigations by elapsed time to close***

Instead of managing to an arbitrary deadline of 60 days, CPS should be working to accelerate the case closure time once a thorough investigation is completed. Current caseload practice assumes that cases *should* build up when in truth they *need not*. Investigations should and can be completed in a more timely fashion based on total work force. The stress to the family of an open investigation should be brought to an end as soon as possible. The average investigation requires only 10-15 hours of actual work.<sup>34</sup> Instead of moving expeditiously to case closure, managing by caseload encourages caseworkers to keep cases open until as close to 60 days as possible. Then, if a case slides into the after-60 days column, the incentive is to keep the case open even longer, as the caseworker has already "paid the price" of the late closure. The performance metric for investigators, therefore, should not be the percentage of cases closed

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<sup>34</sup> Average 10-15 case closures per month for experienced investigators divided by 173 work-hours per month.

within 60 days, but, instead, the average time to close cases. (See Metrics section where we offer recommendation on executive dashboard).

TSG recommends that every case should be managed as expeditiously as possible — working to establish the facts and determine what action to take. Casework planning will facilitate this and should include a more practical method of distributing new cases.

Of course, federal guidelines about case load and time limits remain in place; they are for compliance purposes, not useful for day-to-day supervision of the work.

### ***52. Manage conservatorship cases to time to permanency***

Caseload is not the most meaningful metric of CVS performance. It does nothing to encourage the mission of CVS, to situate the child in a permanent home. Instead, the performance metric for CVS caseworkers should be the number of days to permanency for these cases. (See Metric section where we offer recommendation on executive dashboard). This would create the right incentive to focus on time to permanency.

### ***53. Encourage teamwork within a unit***

CPS supervisors should encourage teamwork within units in helping children and families. For example, if caseworker one travels 50 miles to see a child or family, and caseworker two's family is nearby, and caseworker two has not visited his or her family for some time, and may have to travel an even longer distance to do so, caseworker one should be encouraged to visit caseworker two's family. This is an example of working as a unit or team, and supervisors should encourage this type of work activity. When supervisors do their performance review for caseworkers, they should take into consideration the willingness of these caseworkers to take on their colleague's case to incentivize greater efficiency and more time with children and families. This recommendation is especially important to implementing the new approach to better use of new workers and better management of drive time to support families located farther away from the office to which the caseworker is assigned. This will be a fundamental change in the way CPS does business today.

### ***54. Revise all form letters so they communicate more clearly with families***

CPS should ensure that all form letters communicate clearly with families' case status, resolution, and/or follow up requirements, so as to remove any mixed messages. For example, current practice is for families to receive a letter that the "case is closed" at the end of an investigation. Then in some cases, an FBSS case is opened—to the confusion of the family, which was just notified that the case was closed. Every form of communication between CPS

and families should be reviewed for clarity, and all form letters and forms upgraded for clear communication.

CPS should not judge independently what is “clear”. That assessment requires input from actual families. Therefore, CPS should include families in the assessment and revision, either through survey, focus groups or individually.

### ***55. Develop a practice manual***

Develop content for a practice manual that is based on the Texas CPS basic principles and approaches to safety, permanency, and well-being, the Structured Decision Making framework, training that supports professional development, checklists as defined above, material taken out of the policy manual and is supported by mobility and modernized in IMPACT. Today, CPS has at least six disparate and unconnected guides to practice: IMPACT screens, BSD training, policy manual, PSAs, supervisor staffings (which are not written down yet involve decision making), and informal regional tradition.

TSG recommends that a practice manual be developed that addresses all programs. This would ideally be incorporated into modernized IMPACT as part of a workflow capability. In the short term, CPS needs to develop the text. This should happen through:

- Extract practice from the policy manual (consistent with the policy recommendation in this report)
- Reverse engineer IMPACT screens to document process
- Capture BSD and other training material
- Write down regional practices
- Research and adapt approaches from other states

The practice manual needs to be useable. Eventually, it needs to be part of IMPACT. Building process into a system like that is often done through what is called “workflow” functionality. This is available in many forms through Commercial Off The Shelf (COTS) sources.<sup>35</sup> and can be built into IMPACT.

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<sup>35</sup> See for example, <http://www.bplogix.com/workflow-software/workflow-management-software.aspx>. <http://www-03.ibm.com/software/products/en/ibmformfami>. [http://help.adobe.com/en\\_US/lifecycle/10.0/CorrespondenceManagementSolution/WS2e494a224ead1a185aafce1412b79119805-7ffe.html](http://help.adobe.com/en_US/lifecycle/10.0/CorrespondenceManagementSolution/WS2e494a224ead1a185aafce1412b79119805-7ffe.html).

Before implementing workflow software, CPS should develop a document that describes process. This document should be developed using collaboration software. Development should initially include field workers supported by statewide personnel. Eventually, it should be made available to increasingly more field workers until it is ready to roll out.

Delivery of the practice manual could initially be through web-based collaboration software and communicated internally and externally. As a next step, it could be delivered through a mobile phone app. Finally, it would be incorporated into IMPACT—while still available on the app.

***56. Find and eliminate any form of rework when cases are handed off to the next stage: for example duplicated forms or documentation, or home studies***

There are many opportunities to streamline the process and reduce the rework between stages of service and between CPS and the third parties used to provide services. These should be identified and eliminated so the caseworkers can spend more time with families. During our field assessment and in meetings with regional directors we were able to identify a number of duplicitous activities. Some will be remedied here with our Technology recommendations. As part of transformation, CPS should immediately ask each region to identify any rework steps that can be streamlined or eliminated.

***57. Complete the implementation of Mobility***

There are many points in the case process at which policy and practice decisions erode the concept of reducing drive time by having workers use tablets and smart phones in the field. For example, there are times when the caseworkers need to come back to the office to meet with their supervisor. There are times when they need to drive back to the office to print a form and then drive back to the family to obtain a physical signature. It is important to have a sense of teamwork within a unit and it is important for workers to have time to compare notes across cases and learn from each other. The process needs to support positive, quality-oriented contact between team members and not unnecessary drive times to support non-value-added activities. Our technology section addresses this issue.

***58. Support IMPACT Modernization***

CPS needs to devote the right resources to drive the prioritization and the detailed work required in IMPACT Modernization to ensure maximum results from the investment in technology. CPS needs to make sure the improved IMPACT system is responsive to the needs of the caseworker.

IMPACT Modernization is inextricably intertwined with the process that caseworkers go through daily and will be expanded upon significantly in the technology section.

**59. *Reduce the amount of documentation work required for each case with the courts. Eliminate paper.***

CPS can find ways to reduce the volume of printing, reformatting, copying and other clerical activities associated with internal work and with taking cases to court. The processes in all stages of service can be streamlined to reduce the amount of printing, faxing, scanning as well as the amount of duplicate information copied from email to IMPACT or from third party faxes into court documents. The information that is received electronically should be able to seamlessly move to the right places to support communication to the appropriate parties without excessive clerical activity. CPS should request courts to accept electronic documentation. Failing this, CPS should ask the Legislature to move forward on legislation ensuring a more paperless system for the courts and across stages of service. This will enhance the time spent with children and families.

**60. *Create a method for assigning cases based on the difficulty of the case and worker capabilities. This would include worker experience level, skills such as language and special abilities***

On an informal basis today, CPS considers the language skills, preference for working with newborns versus teenagers, and a number of other variables in assigning the work to caseworkers. There is an opportunity to get more sophisticated in the assignment of work and account for skills, complexity, location, and a host of other considerations. Supervisors are the best to know the competencies, skills and backgrounds of their caseworkers and should be given wider latitude to assign cases based on worker capabilities. In doing so, however, supervisors must assure that performance evaluations take into consideration the level of complexity of the cases assigned to a given caseworker.

**61. *Measure and track the cost of policy, and find ways to adapt policy in order to reduce the cost***

CPS should adopt an attitude of “fiscal neutrality” to changing policy where policy is evaluated for its impact on the number of hours it takes to complete an investigation, FBSS, or CVS case. Obviously, where there is a state or federal mandate, the policy change would have to be made regardless of any associated cost. Nevertheless, any policy that goes beyond a statutory mandate and introduces extra steps must be recognized for its impact on the need for more workers or on the unintended consequence of keeping cases open longer. (See policy section).

## Quick Steps to Streamline Process

In meetings with regional directors and state office personnel, we identified a number of opportunities for simple, readily implemented changes that will improve the process and allow more time to be focused on children and families. These include:

### ***62. Change the travel approval process from three people to one person***

Currently, CPS requires three levels of approval when travel reimbursement requests are over 90 days. This issue should be able to be handled by a supervisor or one elevated level of approval. The layers of approval sometimes create disincentive for employees that have to travel beyond normal distances which could cause them to spend less time face to face with children and families. This should only require one approval, even if the level escalates depending on the degree of lateness.

### ***63. Improve file redaction process in adoptions***

We are aware that the DFPS Commissioner has made expediting the case file redaction process in adoption cases a priority, so that case files can be reviewed and confidential information redacted prior to review by an adoptive family, and prior to the formal adoption. This is a required process prior to any adoption. This process has involved delays that could extend the adoption six months, while regions wait for the case file to be redacted. Currently, state office staff are hired to do the case file redacting, and the legislature has given DFPS additional funds to hire temporary staff. Progress is being made, but delays continue. DFPS should continue to look at this issue and immediately find additional ways to eliminate any unnecessary delay in the pre-adoption process, so as to increase the time to permanency.

In the past, regions were able to redact confidential information prior to having an adoptive family review the case file, and the regional directors and regional CVS staff we met with have all mentioned that the prior process was much faster. Whether the case redaction process is returned to the regions or not, the process needs to be streamlined so that it is not unnecessarily holding up the time for adoption. This could involve outsourcing, finding ways to allow regional administrative staff to be more involved, or even requesting legislation around the issue of confidentiality. Removing any unnecessary delay and shortening the time to permanency should continue to be the priority.

**64. *Eliminate rework at initial FBSS transfer visit***

CPS should eliminate need for obtaining background information already obtained by an investigator in initial transfer visit by FBSS - Before a family receives services from FBSS, they have gone through an investigation and have met with a CPS investigator, possibly several times. An FBSS caseworker is now required to go back into the home to get the same background information that has already been obtained by the investigator. Instead, the FBSS caseworker should build on what is in the case file and start immediately focusing on services the family needs.

**65. *Eliminate extra "staffings" recently added into practice***

Staffings are not an effective manner of making case decisions. (See separate recommendation on pushing decision-making to the field level).

**66. *Eliminate duplicative approvals on most situations thus freeing up Program Administrator and Program Director time***

These duplicate approvals are not only incompatible with the recommendation to push down decision making, they are rework that should be avoided and sometimes create additional rework in the case.

**67. *Review Family Law statutes for recommendations on streamlining***

A number of family law statute sections are unnecessarily burdensome, some are even duplicative of federal law, often out of date, and not based on best practice models nationally. Complying with these statutes, as well as federal statutes and state policy practices modeled after best practices adds a significant administrative burden to CPS staff. This requires additional staff to meet the demands as well as difficulties in the decision-making process that take caseworkers away from their focus on excellence and force them to spend considerable time focusing on compliance.

DFPS has recently started a review of the family law statutes to determine where they should be streamlined to support efficient staff usage and better decision-making, while ensuring the safety, well-being and permanency of the children of Texas. These efforts should continue, with a greater focus from leadership, and the Department should seek legislation in the 2015 session to support these findings. (see Appendix B for a sample of such legislation).

**Summary Benefit or Process Recommendations**

	<b>Financial</b>	<b>Non-Financial</b>
<b>Quantitative</b>	More effective use of new workers. 1,500 new workers would become more actively involved in cases earlier in their tenure. Well managed, this would have the effect of adding hundreds of new case workers.	CPS begins to build a model that links case situations through case actions to outcomes. This will take several years to be fully effective, but needs to get started somewhere
<b>Non-Quantitative</b>	Case work could be better optimized. For example, location could be taken more carefully into assignment. Also, case steps could be assigned to new workers to optimize travel	Cases achieve better outcomes because case workers are better matched to the family/child

**Summary Timetable and Investment for Process Recommendations**

<b>Recommendation</b>	<b>Timetable</b>	<b>Cost</b>
Create case guides that will be used to develop case work plans	Near term	\$0
Revise case process based on SDM	Near term	\$0
Study link between family situations, interventions and family outcomes	Intermediate	\$0
Develop family face time metrics	Near Term	\$0
Manage investigations by elapsed time to close	Near Term	\$0
Manage conservatorship cases to time to permanency	Near Term	\$0
Managers should encourage teamwork within a unit	Near Term	\$0
All form letters should communicate more clearly with families	Near Term	\$0
Develop a practice manual	Near Term	\$0
Find and eliminate rework when cases are handed off to the next stage	Near Term	\$0
Complete the implementation of Mobility	Intermediate	\$0
Support IMPACT Modernization	Near Term	\$0
Reduce documentation required for each case with the courts. Eliminate paper.	Near Term	\$270,000
Assigning cases based on the difficulty of the case and worker capabilities	Intermediate	\$0
Measure and track the cost of policy	Near Term	\$0
Change the travel approval process from three people to one person	Near Term	\$0
Improve file redaction process in adoption cases	Near Term	\$0
Eliminate rework at initial FBSS transfer visit	Near Term	\$0
Eliminate extra "staffings" recently added into practice	Near Term	\$0
Eliminate duplicative approvals	Near Term	\$0
Review Family Law statutes for recommendations on streamlining	Intermediate	\$0

## 10. TECHNOLOGY/MOBILITY

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### Vision for the Future

In the future, technology will support and reinforce the policies, regional practices, and local needs of the caseworkers. IMPACT validation will reinforce what the policy and new practice manuals say to do and what regional leaders have requested. It will minimize the effort to document a case, automate communication to and from third parties, and expedite preparation for court appearances. Technology will support leadership assigning work, communicating with caseworkers and understanding what the bottlenecks are that prevent caseworkers from closing cases. A tighter integration between policy, procedure, and technology will achieve the vision for mobility of less time spent traveling and more time with families. Technology will help provide better service to our Spanish-speaking families. Technology will support teamwork and mentorship and allow the necessary access to cases whenever necessary. It will support the goals of increasing time with families, reducing turnover, and shortening the learning curve for new workers. IMPACT Modernization will start some of the work required to implement these recommendations; however, it is likely that additional investments in technology will need to be made beyond the current budget.

### Recommendations on how IMPACT system enhancements will change operations to allow DFPS CPS to better assist families to improve child safety

IMPACT is an older technology application and has gotten out of sync with current needs of the front-line caseworkers. DFPS should bring IMPACT up-to-date to support the current policies, practices, and expectations for convenience of a large, frequently used application system. Some of the more significant recommendations are listed below.

#### **68. *Improve the ease of use of IMPACT in support of the caseworker's daily activities***

IMPACT should tightly mirror the practice model and SDM tool for assessing safety and risk at the point in time the caseworker makes the key decisions. The technology should assist humans in decision making providing intelligent guidance rather than after the fact onerous documentation requirements. There is significant work underway with IMPACT Modernization

to make the software easier to update and in sync with today's expectations of a user-friendly system. It is critical that the changes to support the new safety model receive high priority amongst all the other IMPACT priorities given the urgency of implementing the new decision making tool. Whenever technology is out of sync with the way leadership wants the process to work, technology will win and workers will continue to do things the "old way." CPS cannot effectively implement a safety and risk decision-making tool unless the logic for those decisions is reinforced by IMPACT.

There is potential to use the Business Intelligence initiative within IMPACT Modernization to better support the caseworker's daily work. IMPACT could provide predictive analytics to help supervisors and caseworkers focus on their activities on highest risk cases.

The caseworkers need a fast, efficient way to come up to speed on the background information on a case. They need easier navigation to find the relevant people associated with a case and to summarize all the history into an overview level of detail.

The caseworkers need a faster way to document information into IMPACT. The CVS workers counted over 100 windows they must use to document contact with their children and update on-going visitation information. There needs to be more pre-population of information, similar to the "easy" buttons users have grown to expect on retail websites where there is one box to check to indicate the shipping and billing addresses are the same. These "easy" buttons are needed for populating similar information across all the children in a case and for numerous places where information must be reentered across steps or stages in a case. The caseworkers should always go to IMPACT for any forms they need to use to document the case. Any forms separately stored in DFPS Forms should be incorporated into IMPACT.

The caseworkers need a faster way to upload photographs, audio files, and emails associated with the case. They need to stop the duplication between recording an interview with a child and then having to type up notes from that same interview. There either needs to be a speak-to-text tool that is efficient for the workers to use or elimination of the interview write-up if the audio recording is truly sufficient for long-term documentation. Law enforcement audio or video records every interview but they only transcribe the important ones.

There needs to be an easier way to correct errors made in entering information. There could easily be an audit trail of error corrections and even an "undo" function that supervisors could authorize. The overall process for correcting common mistakes needs to be simpler with fewer

calls to the help desk and elimination of the waiting period before the caseworker can continue the work to close the case.

Closing a case needs to be much easier. At this point, the caseworker has documented all the relevant information about a case. The current practice is to insist this documentation be done on a timely, if not real-time, basis. Closing a case should be a much faster process because the system has reminded the caseworker at every point in the process if there is anything missing and the system can pull the summary together without the need for repetitive entry. IMPACT could automatically generate the letters to the appropriate parties notifying them the case is closed. All the third-party information should already be in the electronic case file, so there should be no need for massive data gathering after the final safety and risk decisions have all been made and the contact with the family over.

For cases that involve going to court, there is a need to make the preparation of documents for court much easier and faster. It is typical that court requirements vary somewhat county by county, so it is unreasonable to expect IMPACT to automatically generate the documents in the formats the Judges expect. IMPACT could at least export key information to a Word document that is easily edited by the caseworker. This would automate the entry of simple information such as names, addresses, etc. The height and weight information could be extracted from the latest medical reports.

#### ***69. Improve requests for purchased family services***

As discussed in the Budget and Purchased Client Services section, the vision for future relationships between CPS and family service providers can be real-time, location centric and targeted to the niche services the family will benefit the most from. At the point of requesting services for a family, the information from IMPACT could be immediately integrated into a reverse auction or e-sourcing system to find the best service provider with capacity to service this family right now. The system would take the family's location into consideration as well as the caregiver's work hours and find the best possible match. The system would highlight areas of the state with insufficient capacity to serve the needs of the families of Texas. The service providers would use a portal to report the delivery of services to the family immediately – much like the home health care model where vendors call into an IVR and report the contact with the family the day it happens. CPS would then be able to evaluate the usage of services, and over time, the effectiveness of various service providers in connecting with families and making an impact on the safety of children. CPS would track recidivism of families to understand the long-term benefit of services.

In the short term, there should be work to eliminate the duplicate recording of information in IMPACT separate from the creation of 2054's to the service providers. There should be a standard form that is sent to the providers with a checklist of services requested. IMPACT should redact the case history information to send only the authorized information to the provider.

In the short term, there are third party data bases that provide information about all services in a location. Caseworkers could immediately have access to this type of information.

***70. Provide relevant information from other state systems to reduce time casework spends locating children and adults associated with the case***

The State of Texas pays for a great deal of information that is tracked across systems in various agencies including Medicaid information, TANF, SNAP, law enforcement, school systems, and child support. CPS should be able to tap into as much of this data interface information as possible to quickly identify where a child, a parent, an alleged perpetrator, an extended family member, or any other relevant party might be. It is a waste of valuable time for CPS to be searching for the right party or going to the wrong school in an attempt to investigate a report or find a permanent home for a child. This includes providing an adequate number of licenses for personnel distributed across the state to access useful information, such as ACCURINT, without creating bottlenecks by going through a small number of people. Reducing the caseworker time and drive time wasted hunting for children and adults will result in mileage cost savings, which may offset the increased license costs.

***71. Reduce need to print, scan and fax documents and increase system generated communication***

There should be an electronic case file for every CPS case that includes everything needed to support that case. The file should be accessible in the field and by employees, supervisors and third parties who are authorized to view and update it. The barrier between IMPACT documents and DFPS forms, third party faxes, medical records, photographs, audio files, emails, etc. must be eliminated. Appropriate attention should be paid to when encryption and decryption is required to protect and secure the transmission of personal data. TSG understands there is an effort underway called "One Case" that is moving in this direction. The recommendation can build on this existing effort.

The massive clerical effort at the end of a case to assemble large binders for archiving and permanent storage should be eliminated. The information should be placed in an electronic file when it is obtained, thus eliminating this after-the-fact printing and scanning activity.

Additionally, improvements are needed to the form letters generated to the clients. CPS should review the existing letters to make sure they are effective in keeping clients informed on the true status of the case and that information is presented in the most meaningful way. CPS should also make sure the generation of the letters is efficient from the point of view of the caseworker.

## **Recommendations on how to better communicate with stakeholders**

### ***72. Expand Spanish language versions***

Expand Spanish versions of forms, court documents, and other information given to the family. While there are many forms available in Spanish today, there is more needed to support providing all information to the family in Spanish and to expedite the effort by the caseworker to translate the content of the forms. Work should be done to determine the best way to provide meaningful information to our Spanish-speaking clients including support for various dialects and various levels of proficiency in reading Spanish not just speaking Spanish. There may be situations where a verbal recording of the required form is more helpful to the family than a printed version. CPS needs to address the most cost-effective way to provide the most useful content to the family.

### ***73. Linking email correspondence with the IMPACT case file***

Automate the linking of email correspondence about a case with the IMPACT case file. In today's world, emails contain a rich amount of information that is logically a part of the total case. Correspondence to and from caseworkers and third parties should be easily integrated into the electronic case file without the need for printing and scanning the information. There are efforts underway called the One Case project that may help in this area. TSG did not review the design of in-progress IT projects for potential overlap with this recommendation.

### ***74. Improve Outlook training, and email and text message distribution lists***

Improve training on Outlook to allow easier email setup on iPhone and other-user friendly features. Caseworkers and supervisors could benefit from more training on how to get the most out of Outlook calendars, filing emails into folders that can be seen on their phone and tablet, and setting up contacts to meet their local needs. Beyond mere training, caseworkers should understand that using Outlook is expected as part of doing their job. To assist in the

dissemination of technology, empower regional and county-level super-users—who can assist less technology savvy personnel in getting comfortable with the technical tools of CPS. CPS should create email distribution lists to allow customized communication to caseworkers at different stages of service. Today, workers pay more attention to texts than email, and there are urgent situations where broadcast text messages are merited. There should be text message broadcast distribution lists created as well and available for regional leadership to use.

## **Recommendations on how leadership can better manage the casework**

### ***75. Implement workflow management***

Implement workflow management to track progress of work and allow leadership to troubleshoot bottlenecks. Casework by nature is a stop and start business as caseworkers wait to find family members, wait on information from third parties, and wait for results from key activities like substance abuse testing. Currently, supervisors have a live conversation with employees to understand the cause of delay in closing a case or in getting to a key decision point in the case. The system should provide much more status information about whether the caseworker is working on their documentation or waiting for someone else to do their next step in the process. This would drive a very different management approach to expediting cases by focusing on the root cause of bottlenecks as opposed to sending out emails weekly just focused on the volume of open cases. In addition, this workflow management system would track the difference between cases a caseworker inherited because of another worker leaving versus cases they worked from their initiation. This would eliminate the caseworker feeling blamed for tardiness in closing cases they inherited from someone else yesterday.

### ***76. Adapt scheduling support software to assign by workload***

Support the assignment of cases to workers with greater insight into the actual workload the caseworker is carrying, skills needed, geography, and mentorship responsibilities. The regions today use a variety of methods to assign cases to caseworkers. They use the round-robin approach of simple rotation of “next one up”. They use a simplistic view of zip codes to try to keep caseworkers in a smaller geography. They lack the tools or formal models to take a sophisticated view of complexity of the current cases, geography, skills of the caseworker, and responsibility for mentoring another new worker. It would be easier to manage the workload with more sophisticated insight into what each caseworker is asked to do and where they are doing the work.

**77. *Use software to view work by geographic location***

Support a geographic view of the work. Today, CPS leadership does not have a view of how far and wide the geographic dispersion of the work for a particular caseworker really is. Since drive time is a significant contributor to time away from families, awareness of the magnitude of the issue is the first step to tackling the problem. As CPS evolves, there may be more opportunities for teamwork where a caseworker with a need to travel a long distance might combine her trip with seeing another child nearby that destination – even if the other child was assigned to another worker.

**Recommendations for using technology to better support the activities of the caseworker****78. *Create an IMPACT enhancement request process***

Create an on-going enhancement request process that actively solicits usability improvements from caseworkers. The Information Technology group has tried a variety of approaches to solicit input from the field. They regularly ask the regional directors and they use tools to allow submission and voting on ideas from the field. The challenge is that this is a volunteer activity. There should be a small number of people in each region who are good at thinking about how technology could make their life easier and they should be assigned this as a task with appropriate reduction in caseload to have time to think about the ideas they submit. In the prioritization process, the ideas that increase time with family should be counted as ideas that increase child safety.

**79. *Improve Mobility***

Coordinate the process, policy changes, and organizational changes to achieve the vision for mobility of reducing drive time to/from the office while supporting the need for teamwork and camaraderie. The caseworkers have tools to support a more mobile workforce and some of them use these tools to avoid going to the office first thing in the morning. Some of them are able to truly avoid the drive time to and from the office a good portion of the time. But requirements for face-to-face staffings, unit meetings, and other scheduled events at the office erode the possible reduction in drive time. Returning to the office to pick up faxes or to scan documents to fax erodes the potential reduction in non-essential drive time. CPS needs to look holistically at how best to encourage face-to-face activities that build morale while eliminating those face-to-face requirements that are holdovers from a prior work style.

**80. *Time with Families Tracking Tool***

TSG recommends that CPS begin to explicitly measure time with family by stage of service, and in a qualitative manner. Predictably, merely measuring is likely to increase the time. It is not intended that this metric be used as a means to add significant workload, or be added to the LBB performance measure list, but it be something CPS should measure internally to assure continued monitoring of a family-centric practice.

**81. *Keep forms in sync with practice***

Move to a model where technology continuously reinforces the process and procedures by keeping forms in sync with practice and the validation logic in sync with workflows used in the regions. Most IMPACT changes are released in quarterly increments as is common for large organizations. This creates a predictable rhythm of change for the organization. Policy and procedural changes could be combined into the same rhythm. Any policy change would be immediately supported by IMPACT – with an appropriate alert if the caseworker was doing work affected by the new policy and supporting validation so it was easy for the caseworker to be compliant with the new procedure.

**82. *Improve bandwidth***

Investigate bandwidth usage statistics to understand if there are significant IMPACT usage delays during peak load times from the regions and from the field. If so, and to save time for IMPACT users, CPS network personnel should design and develop a solution to ease the delays.

Reinstitute the concept of a super-user in each location to assist other users with technology questions. Designate a person in each location with interest in technology to have a little bit more training in IMPACT, iPhones, and other tools deployed so they can spread the word about how to get the most from technology. This person should be recognized for their additional duties in coaching their peers and adjustments made to their workload to allow them to be responsive to the needs of others. This would increase effective utilization of the technology tools the caseworkers have.

**83. *Train on expanded systems capabilities***

During and after implementation, CPS will provide training on updated and extended IMPACT and Mobility capabilities. This training will also support the creation and on-going support for having a super-user in each key location to help other caseworkers with technology questions.

**Summary Benefit of Technology/Mobility Recommendations**

	<b>Financial</b>	<b>Non-Financial</b>
<b>Quantitative</b>	<ul style="list-style-type: none"> <li>• Reduced turnover in caseworkers from shifting the focus to the family by making documentation easier</li> <li>• Better tracking of purchased client services requests and utilization</li> <li>• Reduction in printing and scanning costs</li> </ul>	<ul style="list-style-type: none"> <li>• Increase time spent with family</li> <li>• Increase case read quality metrics</li> </ul>
<b>Non-Quantitative</b>	<ul style="list-style-type: none"> <li>• Shorter time to close cases from the improved workflow and status tracking</li> </ul>	<ul style="list-style-type: none"> <li>• Better safety and risk decisions from having the technology reinforce the policy and procedures</li> <li>• Better support for court proceedings by improving ability to extract IMPACT information</li> <li>• Faster, seamless provisioning of services to families across stages</li> <li>• More informed, tailored assignment of cases to workers</li> <li>• Better support for Spanish speaking families</li> <li>• Lower frustration with using IMPACT</li> </ul>

**Summary Timetable and Investment for Technology/Mobility recommendation**

The following table shows the cost and timetable for each recommendation. These cost estimates are ballpark amounts to be used to evaluate the relative cost and benefit associated with each recommendation. Due to the short timeframe, TSG and DFPS Information Technology personnel have not completed the detailed work necessary to determine precise cost estimates. Similarly, the timelines are rough estimates provided to demonstrate relative complexity of the effort. DFPS personnel have not had the time to consider which recommendations require procurement of outside services or how these recommendations fit into the other technology priorities including legislative mandates. These cost estimates to support the technology work

associated with the recommendation to track time with families, as discussed in the metrics and process sections, is included here. Additional detail on the assumptions behind these estimates is available in Appendix D

<b>Recommendation</b>	<b>Timetable</b>	<b>Cost</b>
Improve IMPACT ease of use (including support for the new safety and risk practice model)	Long Term	\$7,830,000
Improve requests for purchased family services	Long Term	\$425,000
Provide information from other state systems	Long Term	\$700,000
Reduce need to print, scan and fax documents	Long Term	\$725,000
Expand Spanish language versions	Long Term	\$260,000
Link email correspondence with the IMPACT case file	Long Term	\$475,000
Improve Outlook training, and email and text message distribution lists	Near Term	\$90,000
Recommendations on how leadership can better manage the casework	Near Term	\$0
Implement workflow management	Long Term	\$3,550,000
Adapt scheduling support software to assign by workload	Near Term	\$650,000
Use software to view work by geographic location	Intermediate	\$300,000
Create an IMPACT enhancement request process	Near Term	\$50,000
Improve Mobility	Long Term	\$1,000,000
Time with Families Tracking Tool	Near Term	\$280,000
Keep forms in sync with practice	Intermediate	\$350,000
Improve bandwidth	Intermediate	\$75,000
Train on expanded systems capabilities	Intermediate	\$560,000

## 11. ORGANIZATION

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### Vision for the Future

The future CPS organization will be nimble and responsive to the changing nature of the work. It will be focused with clear, well-structured positions filled by people empowered to do their jobs. It will be a more stable organization able to retain more people despite the high-pressure of the key jobs. It will have a stronger team orientation across all the disciplines that support the day-to-day field operations. Regional directors will be empowered to use their people to focus on child safety, well-being and permanency as needed without waiting for lengthy management approvals. Specialists who are physically located in the regions will be incorporated into the regional leadership structure to increase the cross-pollination of expertise between the caseworkers and the deeper niche specialists. At the regional level, Investigations and FBSS will be more closely aligned to support the common safety decisions that are often made across these two stages of service. Investigations, FBSS, and CVS policy direction will be integrated at the state office level to improve consistency and assist in streamlining policy. Key Quality functions, such as Child Fatality Reviews, will be centralized at the State Office level rather than having separate quality silos that duplicate some of the other group's work. The new CPS organization will have close alignment and coordination of change initiatives to eliminate the crisis management nature of changes introduced to the organization.

### Recommendations

#### ***84. Improve the flexibility regional directors have to deploy personnel as needed based on current workload***

The regional directors should have the flexibility to move people and positions between stages of service to respond to local needs. If a particular county needs more FBSS caseworkers and fewer CVS caseworkers, there should be a rapid way to authorize this change of resource deployment. This action can be authorized within certain parameters including cost neutrality for the block of positions moved and consideration of training implications. This would give the Regional Directors more options for accommodating issues created by turnover, local court practices, and other ad hoc situations. This may require review of the statute to support the degree of flexibility that CPS needs.

***85. Move regionally located personnel to the regional organization***

CPS should consider moving the regionally located screeners to report to the regional directors. These individuals are housed in the regions, which makes close supervision by state office difficult and decreases the camaraderie with fellow workers. The screeners have valuable knowledge and experience in the Investigations area. The ability to have newer Investigators learn more from these experienced professionals is an extension of the mentoring concept discussed in the Hiring and Personnel Development recommendations. CPS leadership can monitor their work regularly to make sure there is sufficient state-wide consistency in the approach to screening.

***86. Continue to make use of the master and special investigators***

The master investigators are a relatively new role introduced in 2013 to provide personnel who can travel to wherever they are needed and act as a Rapid Recovery team to assist a particular location. These personnel have proven to be valuable in allowing CPS to be nimble in responding to ad hoc needs. They have also been very helpful in regions, such as Midland/Odessa, where the local market conditions make it difficult to hire a sufficient number of investigators.

The special investigators continue to contribute to CPS by building great relationships with law enforcement, assisting other caseworkers in finding people, and conducting some of the more forensic work. The regional directors have made great strides in helping the social worker and law enforcement cultures blend together into effective teams in the regions. CPS can continue to use these resources as part of an overall mentorship program where caseworkers can learn from each other and complement each other's skills.

***87. Review other specialist positions for numbers and usage***

CPS has a large number of roles that are filled by a small number of people. Theoretically, these people cover an entire region and provide niche expertise to the caseworkers in that region. Depending on the personality of the individual, these specialists can be well known and well utilized or somewhat unknown and underutilized. These positions should be evaluated for effectiveness and impact on the safety, well-being, and permanency of the children.

***88. Increase the HST and Administrative support until technology reduces printing, scanning and faxing workload***

Using existing funds from implementing quick wins suggested in this report, reinstitute the HST and/or Admin Support positions that were removed during recent cutbacks. These positions can

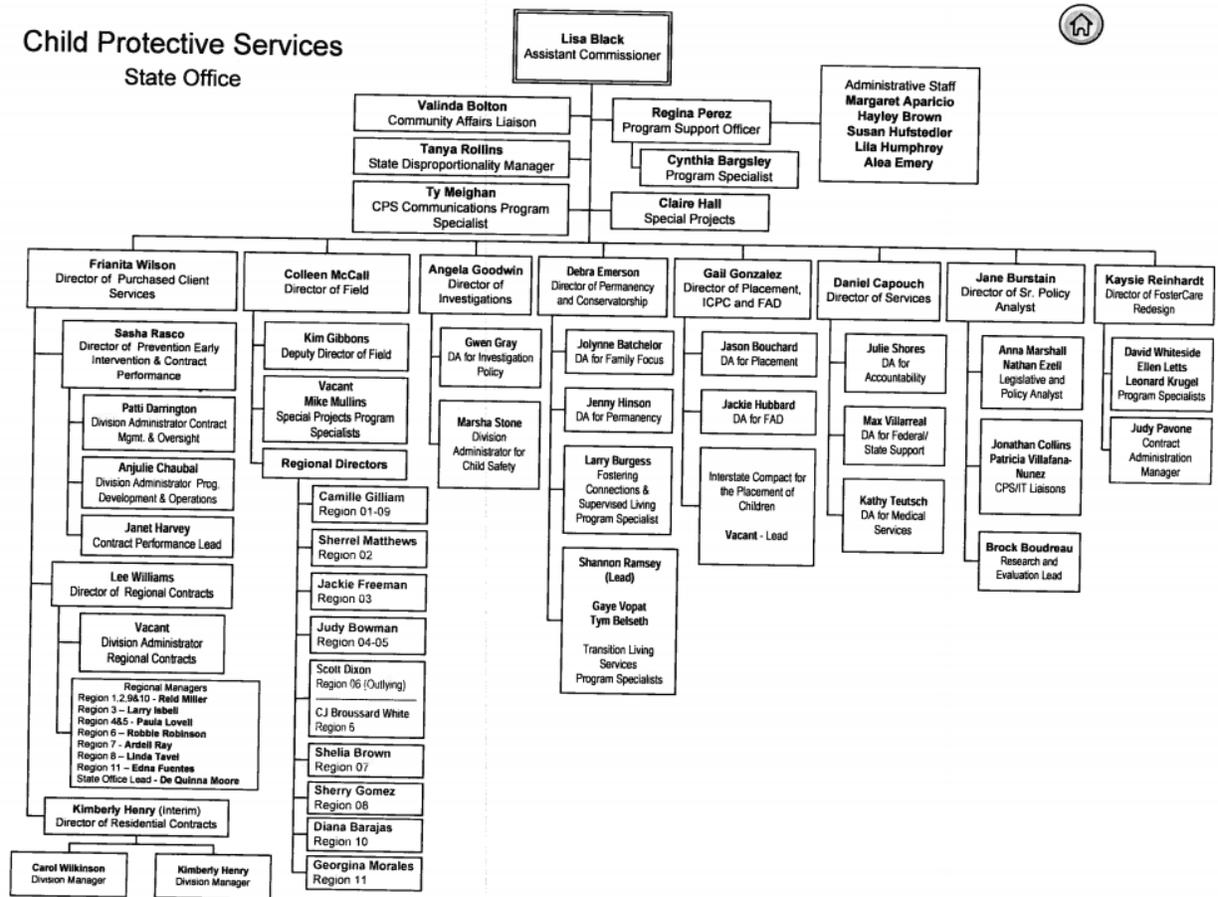
be considered temporary and can be reevaluated when IMPACT Modernization has delivered the necessary support to decrease the amount of faxing, scanning and printing required to process cases. In the meantime, the work is most economically supported by having greater clerical support and there will be an immediate morale boost to these units. The Investigations units were hit hardest by the recent cutbacks in the clerical support levels and the impact on morale would be felt immediately. This would also allow the investigators to spend more time with the families and less time on pure paperwork activities immediately.

As noted in the Findings, the regional organization charts vary slightly to meet the needs of the size and geography in that region. We support this regional flexibility.

### ***89. Restructure State Office***

There are a number of changes recommended at the current state office (see Figure 1) to decrease the organization silos, sharpen the focus on supporting the field, align and coordinate changes in policy, practice, and technology to be rolled out to the field, and enhance external communications.

Figure 1 - Current CPS State Office Organization Chart



Revised 06/01/2014

As mentioned in the Communications, Media and Stakeholder Relations section, DFPS needs a high-level senior staffer to improve external communications. The community affairs and communication program specialists should be a part of DFPS and this group.

CPS should fill the deputy assistant commissioner position underneath the assistant commissioner. The assistant commissioner would then be able to concentrate on supervising the operations on the vast majority of the 9,000 people in the CPS organization today and make sure the day-to-day execution of the mission is as flawless as possible.

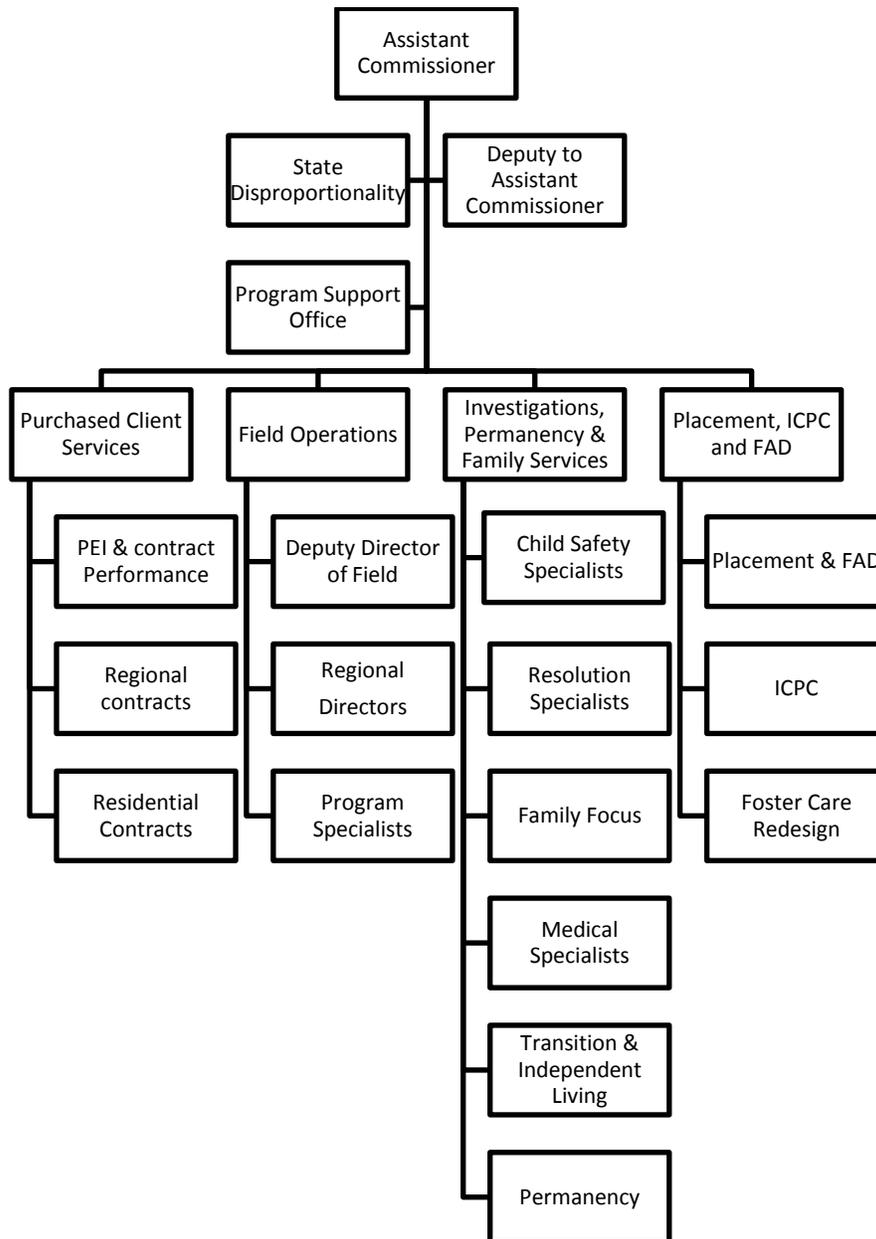
The deputy commissioner would focus on the evaluation of performance and incorporating that feedback into the next wave of change to be rolled out into the field. This deputy would have responsibility for coordinating all sources of change (policy, technology requirements, quality

improvements, special projects and transformation projects) to coordinate the timing and synergy between initiatives. The deputy would manage the alignment of project initiatives and the pace of change to make sure state office is not generating more change than the field can absorb. The deputy could also work closely with the assistant commissioner in determining future projects or initiatives decided to be placed in "timeout."

Foster Care Redesign should be moved closer to the rest of the Foster Care Program. Now that Foster Care Redesign is live in two regions, and is functioning well, it is transitioning from a new concept to a major part of the standard operating procedure.

There should be a clear separation of those individuals responsible for generating policy changes and those specialists who are responsible for escalations from the field. There should be a smaller number of people responsible for policy and their view should be an integrated one that crosses all stages of service. The state office specialists who serve the field as a mentor and backstop when the regions can't find a solution (such as an emergency placement) should be streamlined and moved more closely aligned to field support. Figure 2 depicts the Proposed State Office Organization Chart for Assistant Commissioner for CPS

Figure 2 - Proposed State Office Organization Chart for Assistant Commissioner



The deputy to the assistant commissioner would coordinate a number of initiatives that continually assess the progress CPS has made in its transformation journey and drive the change

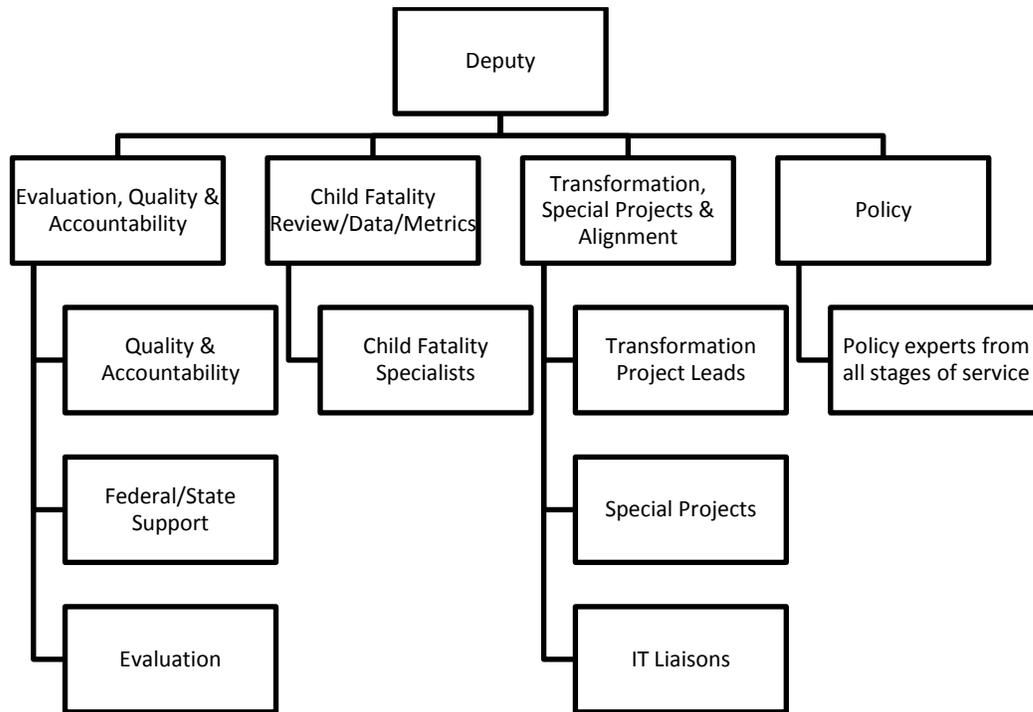
initiatives forward. This structure allows the assistant commissioner to focus on running the current operations while the deputy is focused on the next step in the evolution and continuous improvement of the agency.

The deputy would have the following key components of the organization report to them:

- Evaluation, Quality and Accountability. This would centralize the functions responsible for reviewing the quality of the work done in the regions and the evaluation and metrics of the organization. This keeps a level of independence between the day-to-day operational leaders and those responsible for performing the audit-like functions.
- Child Fatality Review. This should be a centralized organization as the lessons learned from each and every tragedy need to be shared quickly across the state. The group reviewing the lessons learned needs to be closely aligned with policy to make sure that any gaps identified in policy or practice can be remedied.
- Transformation, Special Projects and any other Change Initiatives. By centralizing these functions, the deputy is responsible for making sure all changes are coordinated and synergistic. There is a single person with insight into how many resources are deployed to the various change initiatives and whether the pace of change will make sense for the caseworkers when those initiatives are rolled out.
- Policy. This is a centralized, single source of policy creation and update across all stages of service. This is a much smaller number of people than those who can generate policy today and is closely aligned with the quality and child fatality groups to keep policy grounded in the child safety, well-being, and permanency objectives of CPS.

Figure 3 depicts the Proposed Organization Chart for Deputy to the Assistant Commissioner for CPS.

Figure 3 - Proposed Org Chart for Deputy to the Assistant Commissioner



### Estimated Cost of improvements

These recommendations are intended to be cost neutral. The pace of implementing the recommendation to increase administrative support will be driven by the availability of vacant positions. The pace of redeploying people across stages of service will be driven by the availability of training courses to support the new workload. As long as these variables are managed, there should be no incremental cost to these recommendations. There will need to be streamlining of some parts of the organization to staff the change initiatives and to provide the HST support needed to deliver this cost neutrality.

**Summary Benefit**

	<b>Financial</b>	<b>Non-Financial</b>
<b>Quantitative</b>	<ul style="list-style-type: none"> <li>• No added labor cost</li> <li>• Redeployment of specialist positions to roles closer to the field</li> </ul>	<ul style="list-style-type: none"> <li>• Flexibility to redirect the 5000 caseworkers to the stage of service where the need is the greatest at a particular point in time</li> </ul>
<b>Non-Quantitative</b>	<ul style="list-style-type: none"> <li>• Closer alignment between the screeners and the rest of the regional organizations</li> </ul>	<ul style="list-style-type: none"> <li>• Greater ability to offload some clerical work from the caseworker to the HST or Admin Assistant to improve sense of support the caseworker feels</li> </ul>

**Summary Timetable and Investment for Organization Recommendations**

<b>Action</b>	<b>Timetable</b>	<b>Cost</b>
Improve the flexibility regional directors have to deploy personnel	Near Term	\$0
Move regionally located personnel to the regional organization	Near Term	\$0
Continue to make use of the master and special investigators	Near Term	\$0
Review other specialist positions for numbers and usage	Near Term	\$0
Increase HST and Administrative support	Intermediate	\$0
Restructure State Office	Near Term	\$0

## 12. POLICY

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### Vision for the Future

CPS will simplify policy while also updating old policies. Going forward, CPS will have only those policy requirements that comply with federal and state law, or are critical to safety, well-being and permanency. Thus, other than following established law, policy would be developed by CPS state office and issued to staff in regular intervals. Whenever policy is implemented, it will be accompanied by an assessment of the likely practice and staffing impact.

Moreover, the statewide policy manual will be dramatically scaled back. PSAs will be eliminated, and policy will be rolled out along with a revised model of field practice and workload assessment. Policy will be specifically linked to compliance and expected outcomes. Impact will be measured periodically, and policy adjusted accordingly. Additionally, all policies will sunset every five years and will be reviewed to determine if it remains needed (some states enact policy through rulemaking, which expires every five years and requires re-authorization).

Policy should be developed through statewide oversight with field collaboration; quickly, without delay; in common English—no legalese; with the support of an Internet-based collaboration tool, so that everyone is working on the same document and there is no need for a multi-phase series of print/edit/revise/recirculate.

Policy will be implemented by text message broadcast to appropriate personnel, email blast to appropriate personnel, accompanied with training collateral, where necessary, including short video providing training, available on line (like YouTube).

Policy is provided in the context of practice guidelines:

- Concurrent with the policy re-write, another team will document process
- The policy and process projects will collaborate to develop the “right” delivery tool

Policy compliance will be supported by:

- A policy call center staffed by the policy group and provide active support for policy questions initiated at any level

- Contextual help in IMPACT
- Improved search capability, perhaps using google search tools<sup>36</sup>
- Evaluation for effectiveness in the field at three points:
  - Can caseworkers describe the policy and its implementation
  - Have caseworkers effectively implemented policy
  - Has policy increased child safety, well-being and permanency

Finally, regional adaptations are collected and considered for suitability, as well as transferability, to other regions:

- Clearly indicated as regional adaptation
- Authored and maintained regionally
- Wording is edited statewide

## Recommendations: Policy Strategy

### ***90. Develop a new policy strategy***

The strategy should be developed by the Commissioner in collaboration with legislative leadership and other key stakeholders. TSG recommends that the strategy describe a new approach to policy in which CPS policy is developed, issued and implemented consistent with the vision for the future articulated above.

### ***91. Eliminate PSAs as a method for developing and distributing policy***

PSAs will no longer be needed since the new strategy will result in leaner policy, and a calendar for releasing new policy will be issued on a quarterly basis. These are currently counterproductive to good strategy in Texas since they are not integrated into the policy manual, are not otherwise cataloged, and rarely are rewritten into official policy. In line with this recommendation, all historic PSAs will be sorted into those that fit under the new strategic policy definition, those that describe policy, and those that are out of date. They will be reviewed and rewritten as needed.

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<sup>36</sup> <https://www.google.com/cse/>

## Recommendations: Policy Development

### ***92. Create one statewide policy unit***

Create one statewide policy unit that writes policy in line with a new lean strategy of policy. Coordinate the virtual unit through a single statewide policy coordinator. This unit should employ significant regional input, and may include regionally-based team members.

### ***93. Refresh the entire policy handbook, and create a practice handbook***

Catalog all current policy to make sure that a clear judgment is made about what to keep (though rewrite), what to move into practice, and what to remove altogether. Compare policy to the new strategy and fundamentally rewrite to make policy consistent with the new strategy. The result should separate policy and practice handbooks. The practice handbook could be streamlined to include the case guides, casework plans, and some recommendations that are currently in the policy handbook

### ***94. Sunset policy every five years and completely review policy to update as needed***

Policy should never devolve into old pronouncements that are not aligned with current practice and family needs. CPS policy has done that—it has not been refreshed for many years. Instead, policy has simply been added to old policy to the effect that it is not a living, relevant, fresh document. TSG suggests that CPS should develop a standard by which policy is sunset every five years and must be completely reviewed and reauthorized.

### ***95. Accompany all new policy with an assessment of practice and staffing impact***

New policy will be accompanied by recommended adjustments to workload and by a subsequent analysis of the impact. The agency should report honest and comprehensive effects of policy to the Legislature, as well as any unintended consequences.

### ***96. Implement a collaborative writing tool and process***

Develop and use a new process for collaborative writing and editing. This could be as simple as using Google Docs. The new virtual unit will develop a method for using audio and video conferences to keep in synch. Develop and implement new roll-out tools using largely public domain tools including MP3, YouTube, email blasts and text messaging.

**97. *Manage to a policy calendar and timetable***

Policy should be released quarterly. Once new policy requirements are identified and approved, they should be added to a prioritized policy development calendar. Policy writing and editing should be managed so that it is completed timely.

**Recommendations: Policy Distribution and Support****98. *Distribute policy directly rather than “cascade” it***

CPS should develop a method to distribute new policy directly to workers rather than distribute through a series of handoffs down the organization. CPS should use text messages and distribution lists as well as other methods to alert caseworkers of new policy and provide the text.

**99. *Implement distribution lists for all aspects of email and text messages***

TSG heard repeatedly that CPS lacks the ability to send emails to targeted groups of workers. This ability is crucial not only to policy distribution, but many other aspects of communicating. TSG heard several stories about why CPS lacks “D lists,” including issues with WIFI and previous misuse. Issues notwithstanding, this shortcoming needs to be immediately corrected.

**100. *Link policy and practice manuals to IMPACT***

CPS should adapt the layout of IMPACT Modernization software to link screens to the policy manual and to the practice manual. IMPACT screens should provide context-sensitive navigation to the manuals.

**101. *Release training material along with new policy***

CPS should support supervisors and others that help promulgate new policy by providing training material. This should include text, PowerPoints and YouTube quality videos. All of this material should also be available through link from the policy manual.

**102. *Improve the policy manual navigation and search***

CPS should redesign the policy manual navigation to make it easier to find policy. The search engine should be upgraded. Navigation should be by relevant terms, not the numeric used today.

**103. *Develop a formal process of policy support***

CPS should have a clear method for caseworkers to clarify policy. This would likely be to (level 1) consult links to the policy manual on IMPACT as well as training material, (level 2) consult

supervisor, and (level 3) a contact number clearly available. Caseworkers should be strongly discouraged from relying on other caseworkers for informal policy interpretation.

**104. Evaluate policy distribution effectiveness**

CPS should develop a method for formally and completely assessing policy impact on field practice and workload, and on child safety, well-being and permanency. Policy should be evaluated for effectiveness in the field:

- Can caseworkers describe the policy and its implementation
- Have caseworkers effectively implemented policy
- Has policy increased child safety, well-being and permanency

**Summary Benefit**

	<b>Financial</b>	<b>Non-Financial</b>
<b>Quantitative</b>	<ul style="list-style-type: none"> <li>• No added labor cost</li> </ul>	<ul style="list-style-type: none"> <li>• Introduces measures policy training effectiveness</li> <li>• Specifies the link between policy and outcome metrics</li> <li>• Reduces compliance errors found through case reads because policy is simpler and caseworkers are better trained</li> </ul>
<b>Non-Quantitative</b>	<ul style="list-style-type: none"> <li>• Less rework in the field because policy requirements are clearer</li> <li>• Policy is developed faster</li> <li>• Fewer policies are developed and released, reducing the effort required</li> <li>• Caseworkers find answers to policy questions faster, reducing delays and errors in the field</li> </ul>	<ul style="list-style-type: none"> <li>• Caseworkers are happier about policy...it becomes less of an issue for them</li> <li>• Detractors have fewer confusing policies that they can use to criticize CPS</li> </ul>

**Summary Timetable and Investment for Policy Recommendations**

<b>Action</b>	<b>Timetable</b>	<b>Cost</b>
Develop a new policy strategy	Near Term	\$0
Eliminate PSAs as a method for developing and distributing policy	Near Term	\$0
Create one statewide policy unit	Near Term	\$0
Refresh the entire policy handbook	Intermediate	\$0
Sunset policy every five years	Long Term	\$0
Accompany policy with an assessment of practice and staffing impact	Near Term	\$0
Implement a collaborative writing tool and process	Near Term	\$0
Manage to a policy calendar and timetable	Near Term	\$0
Distribute policy directly rather than “cascade” it	Near Term	\$0
Implement distribution lists for all aspects of email and text messages	Near Term	\$0
Link policy and practice manuals to IMPACT	Long Term	\$100,000
Release training material along with new policy	Near Term	
Improve the policy manual navigation and search	Intermediate	\$100,000
Develop a formal process of policy support	Near Term	\$0
Evaluate policy distribution effectiveness	Intermediate	\$0

## 13. QUALITY ASSURANCE AND QUALITY MANAGEMENT

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### Vision for the Future

CPS will move far beyond federal compliance. Today, most of CPS' quality effort is designed to meet minimal federal requirements. In the future, most of CPS quality effort will be guided by improving quality through Quality Assurance (QA) and Quality Management (QM). QA will expand to provide several case reads for each caseworker each year, including real time case reads. It will change from a tool for disciplining non-compliance to part of the professional development process. QM will build on the metrics coming out of Quality Assurance, and will serve as the basis for evidence-based improvements. QM will drive down rework and delays through a formal QM methodology.

Both QA and QM will be heavily field-based. They will be staffed by field-based personnel, although they will follow standardized processes coordinated through state office. Thus, central (statewide) groups will guide field-based projects.

Federal compliance will be downsized so that the minimum allowable staff effort is expended on compliance—reinvesting the current resources from compliance into quality improvement.

### Background

Traditionally, quality assurance systems in child welfare agencies have been dominated by case-level audits designed to monitor procedural compliance with federal and state requirements. Such audits are typically completed by small quality assurance staffs, and their reports often had minimal impact on the services delivered by the agency.<sup>37</sup> Like many other states, Texas CPS has moved beyond such a compliance-based framework and instituted a process paralleling the federal review processes. The current system uses several disparate, segregated processes to collect a broad range of data pertaining to quality and works to implement improvements on an ongoing basis.

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<sup>37</sup> O'Brien, M. and Watson, P. (2002), *A Framework for Quality Assurance in Child Welfare*, National Child Welfare Resource Center for Organizational Improvement Edmund S. Muskie School of Public Service University of Southern Maine, Portland, Maine

Three separate teams have primary responsibility for various aspects of the QM process: 1) Investigations; 2) CFSR Reviews; and, 3) Child Safety (high risk reviews) constitute the major emphases of these teams and each team follows a distinct process for achieving their primary objectives. In brief, the following chart describes the focus of each team:

Table 4 - High Level Quality Process Description

QM Process	Intent	Disposition of Cases Reviewed
Investigations	Quality of investigative fieldwork and decisions	Cases closed for more than 1 month that were not referred for further services or result in a fatality
CFSR	Compliance with federal guidelines articulated in the federal Child and Family Services Review protocol	Cases open for services during a specific “period under review” (PUR). May be open or already closed at the time of assessment.
Child Safety – High risk cases	Review efficacy of decisions on cases concerning young children with multiple reports	Cases must be related to families with children younger than three (3) years of age with three (3) or more reports

Additionally, the following processes contribute to and support statewide QM-related activities: fatality reviews, organizational effectiveness reviews (using DAPIM techniques), ad-hoc reviews, internal audits, and agency / regional-specific quality assurance / improvement initiatives.

While these processes are independently effective at collecting and disseminating data, CPS has not effectively integrated them into a comprehensive Quality Management (QM) approach that effectively drives continuous improvement across the agency.

***Hallmarks of a Comprehensive Quality Improvement Approach***

QM builds upon the traditional model of compliance monitoring by 1) assessing practice and outcomes, as well as compliance; 2) using data, information and results to affect positive changes in policy and case practice as well as to endure compliance with federal, state and agency requirements, and; 3) engaging a broad range of internal and external partners in the quality improvement process, including top managers, staff at all levels, children and families served and other stakeholders.

Importantly, effective QM cycles:

- Are driven by culture of quality promoting service delivery excellence, customer satisfaction and continual improvement,
- Use data constructively to promote a high-learning, high-performance, results-oriented agency;
- Involve of a wide range of managers and staff;
- Are inclusive of external stakeholders and community members; and,
- Effectively report improvements in relation to strategic improvement goals set by the organization.

These components should be articulated in a clear plan that provides an overview of the agency's quality improvement program, defines procedures for operationalizing specific aspects of the program, and is clearly linked to long and short-term organizational goals and objectives. Further, the plan must include an inclusive approach to establishing measured performance goals, client outcomes, indicators, and sources of data that ensure broad-based support for useful performance and outcomes measurement.<sup>38</sup>

Further, effective organizational improvement is supported by management criteria articulated by the Baldrige Performance Excellence Program, which identifies the components of a highly effective continuous quality management approach as:

1. Leadership: How upper management leads the organization, and how the organization leads within the community.
2. Strategic planning: How the organization establishes and plans to implement strategic directions.
3. Customer and market focus: How the organization builds and maintains strong, lasting relationships with customers.
4. Measurement, analysis, and knowledge management: How the organization uses data to support key processes and manage performance.
5. Human resource focus: How the organization empowers and involves its workforce.
6. Process management: How the organization designs, manages and improves key processes.
7. Business/organizational performance results: How the organization performs in terms of customer satisfaction, finances, human resources, supplier and partner performance, operations, governance and social responsibility, and how the organization compares to its competitors

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<sup>38</sup> <http://coanet.org/standard/pa-pqi/>

It is within the frameworks established by accreditation and effective management criteria the recommendations for enhancing CPS' approach to quality management are developed and presented.<sup>39</sup>

## Recommendations to Refocus Quality Assurance (QA)

### *105. Integrate QA efforts into a single organizational unit, managed centrally and staffed regionally*

CPS should incorporate all aspects of QA into a single group that coordinates federal compliance reviews, internal QA to support QM projects, regional case reads, organizational effectiveness reviews (using DAPIM techniques), ad-hoc reviews, internal audits, and agency / regional-specific quality assurance / improvement initiatives. In this manner, resources can be redirected for optimal use. Also, this will allow a central unit to coordinate regionally-based case readers as part of one overall effort. All special quality-related projects should become part of one overall schedule and strategy.

Thus, TSG is recommending CPS consider designing and implement a regionally-based quality improvement model, which will drive local improvement and still permit (and even enhance) state office coordination. The model is based on successful quality management approaches in other states with privatized child welfare functions, such as Florida, and ensures local accountability by placing responsibility for regional oversight on regional directors while providing a methodology for statewide aggregation of data. This will allow improvement efforts to be readily identified, regionally focused, and locally monitored. It will also facilitate statewide alignment of planning and training activities while ensuring appropriate development of agency capabilities and deployment of capacity.

To develop a comprehensive QM approach, CPS must:

- Create a statewide Office of Evaluation, Quality and Accountability, responsible for developing and testing Quality Assurance procedures and tools, aggregating regional results, developing a statewide improvement plan, recognizing and sharing best practices, and monitoring improvement efforts / results;

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<sup>39</sup> See for example: <http://nistbaldrige.blogs.govdelivery.com/2014/02/11/whats-boosting-government-performance-in-tennessee/>, <http://www.wsqa.net/>, [http://www.dom.state.ia.us/planning\\_performance/tools\\_resources/baldrige.html](http://www.dom.state.ia.us/planning_performance/tools_resources/baldrige.html)

- Create an annual quality management plan detailing the responsibilities of various stakeholders, participants, review teams and process improvement committees;
- Create an annual operating plan to guide CPS' improvement initiatives that integrates findings from quality assurance process and includes strategic solutions to address these findings;
- Integrate continuous quality assurance processes into the statewide CPS strategic plan delineating major initiatives it must undertake in the next three to five years;
- Develop a single, comprehensive review tool integrating investigations and CFSR into an integrated process
- Establish regional QM teams to review performance data, develop process improvement initiatives and create performance improvement plans,
- Establish regional management of performance improvement plans
- Create a statewide Continuous Improvement Committee, which includes representative stakeholders from various levels of the organization, responsible for reviewing findings and plans developed by the Office of Evaluation, Quality and Accountability;
- Establish clear linkages between Quality Improvement and Training by:
  - Integrating quality assurance and quality management into the CPS training curriculum
  - Developing a plan for training quality management principles at all levels of the organization
- Refocus Quality Assurance (QA) by:
  - Rely more on regionally based QM teams responsible for implementing central office designed and managed QA processes
  - Expand QA quarterly reviews to include a sampling of open and closed cases including a representative sample of high-risk cases
  - Increase the number of reviews at local level to establish a *statistically valid* sample of all cases including those in Investigations, CVS, and FBSS.

To effectively execute this model, TSG recommends CPS consider moving existing Investigation Quality Assurance Specialists to the regions and adding sufficient FTEs to have a minimum of one specialist at each regional office. Additional FTEs will be available at no additional cost through the realignment of current staff to this function. Additionally, consider assigning CFSR Quality Assurance Leads and specialists to the Regional level. Each region should have enough specialists to ensure sufficient staff capacity to execute a statistically valid review of cases at the

regional level. Further, to facilitate the integration of case findings with regional improvement models, specialists should be cross-trained to review cases for all quality processes.

Conducting QA regionally would move quality closer to caseworkers. The statewide approach positions quality knowledge far from caseworkers, who can think of quality as something that happens somewhere else. Instead, caseworkers should know the quality personnel. They should see them at work, and talk directly to QA personnel about their findings. At the same time, QA should be tied to the field.

***106. Expand QA quarterly reviews to include a sampling of open and closed cases including a representative sample of high-risk cases***

QA should be part of operations, not merely a cost of federal requirements. Accordingly, QA should be conducted for the purpose of giving CPS assurance that all types of cases are following standard requirements. This would include a sampling of open cases as well as high-risk cases to take a snapshot of agency performance to identify any area of real time opportunity, and quality, and begin a culture of continuous improvement.

***107. Increase the number of reviews at local level to establish a statistically valid sample of cases rather than simply matching CFSR review levels***

QA should be patterned after widely used principles of QA used in industry—not limited to the lighter expectations of federal compliance. The purpose of statistical sampling is to provide statistical assurance that the sample represents the entire population of cases. CPS should develop a sampling method that exceeds federal requirements.

## **Recommendations to Develop a Program of Quality Management (QM)**

QA is a series of tests of compliance once case work is completed. On the other hand, QM is how CPS will organize its work effort to assure that cases are of high quality—that case work is done the same way every time, that work is done right the first time and that the result delivers quality service. TSG recommends the integration of information collected through child fatality reviews, DFPS audits, and other assessments into the quality management approach.

***108. Adapt a quality management approach to CPS***

Today, the quality groups use the Define, Assess, Plan, Implement and Monitor (DAPIM) method. This seems to be a proprietary method encouraged by the American Public Human Services Association. Given the close similarity in acronym, it may be adapted from the six

sigma method, Define, Assess, Plan, Implement and *Control*. The difference is consequential. DAPIC is based on hard quantitative evidence both of the issue and of the outcomes, while DAPIM seems to focus more generally on soft measures of achievement.

Over the years, many organizations in both industry and the public sector have developed approaches to quality management. The federal government has several. ASQC encourages Plan, Do Act, Check. Others promote Supplier, Input, Process, Output, Customer or SIPOC. CPS should select one that is evidence-based and encourages focus on the end customer, to use as a basis, and adapt it as needed. The approach CPS adapts should manage systemically against both delays and rework—that is, it should be a “lean, six sigma” approach. This should guide QM projects and be taught through the CPS professional development program.

Each function of the QM projects should be clearly defined in an overall Performance and Quality Improvement plan designed to operationalize the agency’s approach. The plan should<sup>40</sup>:

- Assign responsibility for implementation and coordination of activities and provision of technical assistance;
- Set forth the purpose and scope of PQI activities;
- Establish a periodic review of essential management and service delivery processes consistent with quality priorities;
- Outline methods and time frames for monitoring and reporting results;
- Includes provision for an assessment of the PQI program's utility, including any barriers to and supports for implementation;
- Define the role of stakeholders in the continuous improvement process; and
- Identify system metrics; including outcomes, outputs, indicators, and tools and instruments.

***109. Establish regional and state-wide QM projects to review performance data, develop process improvement initiatives and create performance improvement plans***

QM projects should be set up to respond to a particular quality finding, then disbanded when a correction to the problem has been rolled out. Quality projects will require training in the CPS quality process. Quality is not merely a problem of “the field”, or casework. Every aspect of CPS should be managed for quality. For example, Motorola applied quality management principles to their accounting (Budget) function and virtually eliminated accounting adjustments. Ford applied quality management to its Accounts Payable function (i.e. CPS’ process of paying

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<sup>40</sup> <http://coanet.org/standard/pa-pqi/>

family services providers) and concurrently improved accuracy while reducing the labor required by 99%.

While the QM process will be coordinated by Central Office, responsibility for implementation of specific quality improvement initiatives will be the responsibility of Regional staff. This will permit sufficient flexibility for the development of relevant, data-driven local improvement plans designed to address areas for improvement identified at a regional level.

**110. Adapt data sourcing so that CPS can collect and report data suitable for quality management**

IMPACT collects much more information about the quality of work that CPS currently uses. For example, each entry is time-stamped, providing a window into process delays—a key issue in quality management. In other areas, IMPACT is less useful. For example, key parts of the case history are captured through narrative comments that are less easily used to assess rework—another key aspect of quality management.

**Summary Benefit of Quality Recommendations**

	<b>Financial</b>	<b>Non-Financial</b>
<b>Quantitative</b>	<ul style="list-style-type: none"> <li>• QM projects should be expected to radically improve the resources required to complete case work. This should be measured in time per case (or month) to support a case</li> </ul>	<ul style="list-style-type: none"> <li>• QM projects should increase time spent with families</li> <li>• QM projects should develop a process manual that increases case read accuracy</li> <li>• QM projects should improve processes so they do a better job of increasing outcome metrics</li> </ul>
<b>Non-Quantitative</b>		<ul style="list-style-type: none"> <li>• Field caseworkers will have more control over case process improvements</li> </ul>

**Summary Timetable and Investment for Quality Recommendations**

<b>Recommendation</b>	<b>Timetable</b>	<b>Cost</b>
Integrate QA efforts into a single organizational unit	Near Term	\$0
Expand QA quarterly reviews	Near Term	\$0
Increase the number of reviews at local level	Near Term	\$0
Adapt a quality management approach to CPS	Near Term	\$0
Establish regional and state-wide QM projects	Near Term	\$0
Adapt data sourcing for quality management	Intermediate	\$0

## 14. METRICS

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### Vision for the Future

CPS will have a new way of looking at information. It will include a broad set of measures covering all five crucial *management* dimensions. Metrics will be presented with numbers, arrows and percentages, signaling where “hot spots” have developed. It will include narrative text. It will provide data structured appropriately for each level of the organization. Equally important, CPS managers will advise leadership through narrative explanations accompanying any metrics that are out of range.

Going forward, the vision is that management becomes more data-based, is able to identify hot spots and react accordingly in a data driven manner. In the future, CPS managers will explain issues with their metrics in narrative text. That way, there is a record for superiors and for review the next month.

### Recommendations about how to define a management metrics tool

The Assessment report provides a solid description of the need. To date, CPS has a collection of metrics that report largely outcome measures. While crucial, these lack a direct read of the management “hot spots”, or what CPS is doing to improve.

***111. Develop an executive dashboard that will inform CPS leadership about areas of immediate need, broken down by category and region, and associated with the key transformation goals***

During this Assessment, TSG interviewed DFPS Commissioner Specia regarding his existing management dashboard. The Commissioner identified areas where he wanted to see improvement within the document, including the ability to identify hot spots within the regional framework. These metrics could include time with families, regularly capturing caseworker turnover within regions, average time to case closure, time to permanency, and recidivism. TSG has included an example of such a dashboard in Figure 3

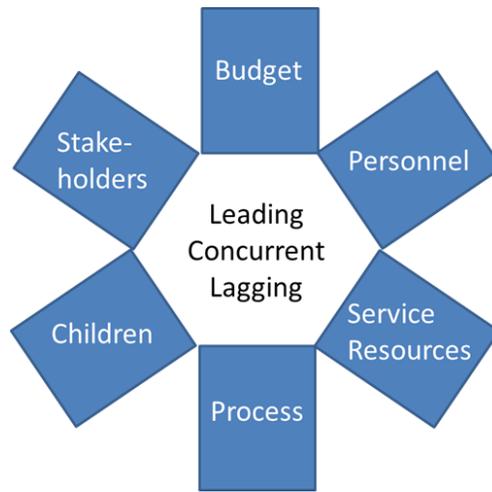
Figure 4 - Proposed DFPS Commissioner’s Dashboard

 <b>TEXAS</b> Department of Family and Protective Services				DFPS Commissioner's Dashboard												
Measures	CHILD PROTECTIVE SERVICES															
	Target	Red	Actual	Trend	Region 1	Region 2	Region 3	Region 4	Region 5	Region 6	Region 7	Region 8	Region 9	Region 10	Region 11	
% of CPS caseworker time with family	35%	20%	26%													
Investigations quarterly turnover rate	15%	25%		▼	37%											
CVS quarterly turnover rate	15%	25%			25%											
FBSS quarterly turnover rate	15%	25.0%														
Average time to close cases	45	61			65											
Average number of days to achieve Permanency	2,000	3,000														
Median length of stay for children reunified (months)	5.4	7.0														
% of children with no substantiated maltreatment within 6 months of termination of CVS & FBSS	97%	90.0%														
% of children with no substantiated maltreatment within 12 months of termination of CVS & FBSS	93%	90.0%														
% of children with no substantiated maltreatment within 24 months of termination of CVS & FBSS	90%	87.0%														
% of Children achieving Permanency who did Not Re-enter Out-of-Home Care within 12 mo.	92%	87%														
# of Removals per capita	0.167%	0.200%														
# of Intakes Received	16,667	20,000														

**112. Implement management reporting based on Balanced Score Card**

Management information includes a broad view into measures that go well beyond budget information, or child outcomes. In the Assessment, TSG described a view of what CPS should report loosely based on Balanced Score Card. These are repeated in Figure 4.

Figure 5 - CPS management metrics dimensions



Accordingly, CPS should have metrics providing support for the management decisions relating to:

Personnel	Does CPS have enough of the right people; are they well trained and motivated to do the job?
Processes	Are CPS processes designed adequately to support children and families? Are workers following the processes? Are processes improving constantly?
Service Resources	Do CPS caseworkers have access to enough of the right resources to help families? Are the available resources doing what needs to be done?
Children & Families	When CPS performs its case work, are children likely to be safer, achieving well-being and permanency?
Stakeholders	Is CPS working effectively with the other stakeholders involved in child welfare?
Budget	Is CPS performing its mission in a way that takes best advantage of the budget resources available?

Along each of those six dimensions, CPS should have data useful for management decisions at three time points:

Leading indicators	Making planning and budget decisions. These would be especially useful to the legislature, Governor’s office and CPS/DFPS/HHSC leadership
Concurrent indicators	Identifying “hot spots” that need immediate management attention
Lagging indicators	Looking back, did CPS manage to the results that were anticipated in advance? Obviously, the lagging indicators from one period tie closely to leading indicators in the next period

**113. Implement the tools needed for reporting management metrics**

CPS currently supports metrics reporting through a data warehouse. However, that tool lacks a report writer. As a result, CPS has 2,700 reports that are rerun periodically. This is so many that TSG heard operating management say they could not find the reports they need. Hundreds of reports are not management information.

Instead, CPS needs to create a data repository and report writing capability suited for regular management reporting. This will include a tool to Extract, Transfer and Load (ETL) data from PeopleSoft (budget), IMPACT (operating data) and other sources. TSG was told that CPS plans to acquire and use Informatics for that purpose as part of IMPACT Modernization. We understand that to be a tool well suited for the job. It will need a suitable data environment and CPS will also need a suitable reporting tool.

**114. Create a small project group to develop the management reporting capability over the next 12 months**

CPS has little experience with what management metrics will be most helpful, or how to use management metrics to improve agency management decisions. Accordingly, it is not possible to predict in advance how best to build the management information. Therefore, TSG recommends that CPS develop the management information reporting tool and process iteratively over the coming 12 months. This would involve a small team of analysts and IT developers to develop and redevelop taking input from CPS leadership along the way.

Developing and managing metrics is a “user” function, not a technical one. While the Management Reporting System (MRS) should continue to manage the data structure, metrics reporting is a function that should reside under leadership of DFPS and/or CPS. That team should be responsive to help Budget, regional directors or anyone with input on how to develop and use the metrics application. It is important that this be a user function NOT a technical one. The issue CPS faces is learning to manage with numbers, not how to create technology.

**115. *Develop tolerance levels for each concurrent and lagging metric***

At the time of this recommendation, CPS does not yet have agreement on metrics or how they will be used in regular management. Thus, it is premature to set tolerance levels. However, within 3-6 months, the development group should have enough data and experience with the questions CPS leadership has asked about reported metrics that it can begin to set tolerances. These will be reflected in how the numbers are presented: with arrows and colors in the report.

**116. *Recommendation of example management metrics***

The recommended metrics below are *indicative of the sort of metrics* CPS should adopt. They are not offered as the final ones. TSG expectation is that these would be revised and improved over the course of a year of observing how well the guide CPS management into the “hot spots”. In some cases, a metric is useful for more than one of the balanced scorecard dimensions.

***Personnel***

The purpose of metrics on personnel is whether CPS is investing correctly in building a strong personnel resource. Are there enough resources? Are they being hired and developed correctly? Are they aligned in the right way to deliver on CPS’ mission? Are they organized in the best way?

**Leading indicators – Personnel**

The purpose of leading indicators in the area of personnel is to allow CPS to plan for the correct level of investment in personnel. The issues are how to plan staffing levels and skill sets. It goes to answering questions such as: Do I need to start asking for more staff? Do I have a good pool of potential applicants?

- Case Trends – for each stage of service (INV, FPR, CVS, FAD and KIN) - # of incoming cases over some period of time compared to staffing level (growth in each)
- Unfilled positions – the number of authorized but not budgeted and budgeted but not filled – divided by the total number of budgeted position. Should be done by program and for state office
- Personnel resources supply – social service graduates in Texas, applications, offer rate, acceptance rate
- Projected retirements over the coming 2 years – This could be simply by age, or it could be a model based on historical early retirement (termination)
- Quantitative assessment of how well new hires meet target qualifications
- BSD pass rate – indicates how well new personnel are being prepared for duty

- Percent of workforce with a social work degree

## **Concurrent Indicators – Personnel**

- Overtime – indicates the “abuse level” of employees. High overtime indicates that the resource is in danger
- Caseload – indicates how effectively workers are being managed for performance
- Cases opened minus cases closed – gives a quicker read on potential overload issues
- Time to fill a position – addresses the quality of hiring practices, also indicates potential problems with unfilled positions
- Offer rate
- Acceptance rate among candidates that meet screening criteria
- Percent of new hires with a Social Work degree

## **Lagging Indicators – Personnel**

- Turnover – this is a summary indicator of how well people are being recruited, trained and supervised
- Promotion – indicates the extent to which CPS is providing a career path
- Case reads – this is both a measure of personnel and process. As a personnel measure, it tells whether workers are following process. These can be assessed in two ways: the level of errors a worker makes, and trends in errors. To be effective, CPS would need to make sure it reads several cases from each worker periodically
- Employees on “levels” – indicates the effectiveness of supervision and personnel performance
- Job satisfaction rating on exit – indicates employee satisfaction by measuring the unique population of those who chose to leave

## ***Process***

The purpose of measuring process is to assess whether process is designed well to achieve the mission, implemented effectively, followed, and ultimately whether it does what is necessary for CPS to meet the mission. Process measures reflect intermediate outcomes of CPS work, not ultimate child outcomes.

**Leading Indicators – Process**

- Effectiveness of continuous improvement projects results – this measures how well CPS is working to make its process more efficient and effective. The metric should measure both total results (e.g. labor hours saved) as well as a ratio (e.g. percent improvement)
- Number of times services are included in a safety plan, but not available through CPS-paid (on Form 2054) or community services – this is a key metric measuring whether CPS will have the resources to aid families in manners other than simply writing a safety plan. This will focus CPS on building services availability. Unfortunately, it might also have a “chilling effect” reducing caseworkers’ willingness to include services in the safety plan if they are not available. But frankly, if services are not available, then it is meaningless to include them in the plan anyway.

**Concurrent Indicators – Process**

- INV: Average time to close investigations – While investigations need to be in sufficient detail, most investigations are held up by time management issues, not actual facts of the case. In addition, timely initiating investigations, completing safety assessment in 7 days, making a substantive determination on INV (rule out or RTB), submitting INV within 45 days
- FBSS and INV: family compliance with aspects of safety plan – this is aimed primarily at FBSS, but may relate to Investigations as well. In one sense, FBSS does not directly control compliance. However, the point of FBSS is to manage a safety plan through services. If the services are not be used, then the plan is not being effectively managed.
- FBSS: timely initial contact, timely initial family plan, monthly contact
- CVS: timely initial child plan, monthly contact with child, final order within 12 months
- Time with family – this should not be 100%, but should increase from the current low level. This affects all programs, but each program may have different levels. There are two important numbers in the metric: average and variance by family
- Services provider reports provided timely – this measures whether services providers are taking their services seriously. Provider reports are a key window for the caseworker to understand family progress. There are two important numbers in the metric: average and variance by family

**Lagging indicators – Process**

- All the concurrent metrics

- Time to permanency – the average number of months before children are either reunited or adopted. Sometimes CPS agencies measure reunifications and adoptions separately— however, this measures permanency in whichever form
- Recurrence, or repeat reports – this should be a measure of process effectiveness, not personnel performance. The metric is calculated by summing the number of recurrences and dividing that by the number of cases. There are two important numbers in the metric: average and variance
- Case reads – as a lagging process indicator, it tells CPS whether the programs are finding and correcting systemic process issues. For this metric, CPS is interested in the trend of errors by type. That is, whether CPS has made effective systemic changes to assure that workers are better able to complete cases correctly

## *Children and Families*

This is a dimension that is heavily measured with current metrics. The current outcome metrics do not directly link case actions and outcomes. Even if there were a theoretical link, the agency does not measure the link to see whether there is a true connection. The measures in this management tool are for assessing and improving CPS' ability to perform.

Of course CPS must also measure outcomes. However, failing an established scientific link between family situation, CPS work and outcomes, metrics are merely a weak indicator of the effectiveness of CPS efforts. CPS should explore more direct methods of measuring its effect on children and families

### **Leading Indicator – Children and Families**

- Process concurrent indicators
- Adequacy of services available – this counts both percentage of the time a family can be referred to a capable provider, and the level of services provider quality reported after the service. These, we are told, are often gating factors in FBSS
- Number of children in foster care – indicates how well prepared CPS is to support FBSS case work
- Number of families ready to adopt – indicates how well prepared CPS is to support CVS
- Applications to adopt a child – This measures CPS' effectiveness in encouraging good families to adopt children. This, we understand is a gating factor in CVS

**Concurrent Indicators – Children and Families**

- INV – Percent Family Team Meeting before removal
- FBSS – Percent Family Team Meeting or Family Group Conference before removal, removal from Family Preservation
- CVS - placement with relatives, placement with sibling, placement in county, percentage of children in Permanent Managed Conservatorship with Termination of Parental Rights in a permanent placement
- Family feedback on services – this can be collected either through formal survey or through feedback such as you would find on Yelp. Both have their value and should be a crucial component of assessing performance. This is a concurrent, rather than lagging indicator because the data should be collected during the case process, instead of long after.
- Family compliance with safety plan – CPS is not effectively serving families that are not following the plan. Of course we can argue that is the family’s fault. However, if CPS is not being effective in changing family behavior, then why is CPS there?
- Time with family – while families might not consider a visit from CPS a positive thing, it is also true that given CPS is involved, then performing the service close to the family is better “customer service” than doing paperwork off site.

**Lagging Indicators – Children and Families**

- Customer service survey results – CPS should deliver measurably high customer service even in the environment where families do not want them around. They should develop and manage a survey that assesses whether families feel as though they were treated professionally and with respect. Rather than use average, TSG recommends “net promoter score” or the difference between the high and low scores. There are two important numbers in the metric: average and variance by family
- Compliance rate – How often a family uses the services recommended by CPS is indicative of outcome performance in two ways: relevance and persuasion. Families are less likely to use services that are not really effective. This metric will encourage caseworkers to recommend (provide) services that the family sees as irrelevant. Likewise, it will encourage caseworkers to adequately managing compliance. The metric should be percent of family compliance with safety plan. There are two important numbers in the metric: average and variance by family
- INV: Recidivism
- FPR: Recidivism

- CVS: Reunification, Relative exits, adoption within 12 months of TPR, perm for children in care 2 or more years, recidivism

## *Stakeholders*

Stakeholders include many outside organizations and individuals that are affected by CPS. This includes legislators, the Legislative Budget Board, advocacy groups, paid and community services providers and reporters. CPS is interested in how well it is managing its relationship with stakeholders as well as how stakeholders perceive CPS' services

### **Leading Indicators – Stakeholders**

- Media tracking – evaluation of any reference to the agency in public media, including press and the Internet. CPS will use automated tracking services to collect all references and a text mining tool (or service) to evaluate. The metric includes number of mentions and an adaptation of net promoter score.
- Temperature check – a periodic assessment of the quality and depth of relationship between CPS and key stakeholders. This would be qualitative and subjective.

### **Contemporary Indicators – Stakeholders**

- Number of services provider vendor compliance issues – this metric goes to how well CPS is managing its services providers. While it is the providers that are complying, CPS owns half of the responsibility for finding and working with vendors to correct issues. Note: this metric runs a risk of being under-reported by CPS in order to game the numbers. To normalize the number, divide vendor issues by number of services vendors. Variance is probably not that meaningful for this metric.
- Number of meetings with stakeholders – this metric assumes that any meeting helps build better working relationship. This could be reported by individuals. Perhaps in the future, CPS could read contacts from employees MSOutlook.

### **Lagging Indicators – Stakeholders**

- Survey – TSG should ask stakeholders about its role in the relationship. TSG should include two tools in develop the information for this metric: survey and interviews. Both would be conducted by a disinterested party and ask questions about the quality of CPS efforts to build a collaborative working relationship. Interviews would be used with key partners, like the LBB and would include numeric as well as qualitative input. The

survey would include comments, which CPS would analyze together with interview results. The quantitative metric would be an adaptation of “net promoter score.”

- Outcomes by provider – TSG would look at differential outcome metrics by provider. So, for example it would consider recurrence rate comparing all the providers of a like service (e.g. parenting training). Of course, many things go into outcomes—no one provider can be accountable for recurrence rate. However, CPS is looking for exceptional vendors as part of continuous improvement (good and bad). This should be done through a multi factor ANOVA analysis of several appropriate child outcome metrics for that type of service.

### **Budget**

There are two issues here: whether CPS is effectively “meeting the numbers” and whether CPS is managing its financial decisions.

#### **Leading Indicators – Budget**

These are used primarily for annual planning and budgeting. They are the most important assumptions in the budget model

- Investigation completed monthly per caseworker
- Caseload per FBSS caseworker
- Adoptions and reunifications per CVS caseworker. Percent of children move into permanency. Case load per caseworker
- Cost of services per case (by program)
- Travel per case

#### **Contemporary Indicators – Budget**

- Budget to actual – note that Budget should carefully explain any variance by going back to the budget model: is there an efficiency variance? Are there more cases than expected? Did prices for services change?
- Cost per investigation closed. Cost per month for FBSS. Cost per month for CVS. Cost per permanency (adoption or reunification)

#### **Lagging Indicators – Budget**

- Post-mortem assessment of all major decisions: IT, new staff, federal programs, etc.
- Amount of services paid from the prior year (i.e. late invoices)

- Budget assumptions that proved incorrect after-the-fact

### Summary Benefit of Metrics Recommendations

	<b>Financial</b>	<b>Non-Financial</b>
<b>Quantitative</b>	Better budget compliance	Increase in all metrics—you get the results you manage
<b>Non-Quantitative</b>	Increase budget creation accuracy	A new sense of managing to controllable management metrics rather than long-term outcome metrics that are not under anyone’s control

### Timetable and Investment for Metrics Recommendations

<b>Action</b>	<b>Time frame</b>	<b>Cost</b>
Develop an executive dashboard	Near Term	\$0
Implement management reporting based on Balanced Score Card	Intermediate	\$25,000
Implement the tools needed for reporting management metrics	Intermediate	\$200,000
Develop management reporting capability over the next 12 months	Intermediate	\$0
Develop tolerance levels for each concurrent and lagging metrics	Intermediate	\$0

## 15. BUDGET

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### Vision for the Future

In the future, DFPS will be able to provide CPS leadership with useful, easy to understand financial information early in the fiscal year with frequent updates of actual versus budget performance. CPS will present information to the Legislature in a clear fashion with well-documented assumptions and will proactively update the Legislature as circumstances change. CPS will analyze its needs from a bottom-up view as well as a top-down view and use the two views as a basis for informed discussion about priorities, resource allocation and budget allocation. CPS will be nimble and responsive in reacting to local needs during the year and will be empowered to manage the operation within the constraints of the authorized budget and last-minute major course corrections that will be unnecessary.

### Recommendations

#### ***117. Change culture to value transparency of assumptions, in-depth financial analysis, and proactive sharing of changes in assumptions***

Working with the rest of DFPS, CPS should strive to be more clear and transparent in the way they present information internally and externally. CPS has a lot of data available. CPS needs to work hard to first understand the assumptions behind every report they view and then to be clear and precise in discussing the numbers and assumptions with the Legislature. Leadership should make sure they know their numbers and present clear, consistent information to allow stakeholders to see the meaningful trends and develop more trust in the information provided by CPS.

#### ***118. Create a needs based budget request process from the regions***

CPS leadership should have a way for regional leaders to communicate with DFPS leadership what it will take to close the gap between the current performance of their region and the targeted performance level. Each region could create their view of what the budget would need to be for them to achieve the desired results. This view could then be compared to the ESS models to generate a dialogue of trade-offs for staffing levels between regions. This needs based

view of the budget would also apply to the funding for purchased client services. The purpose of this exercise is to increase ownership of the budget

***119. Improve timeliness of Regional Directors receiving financial information***

CPS regional directors should ideally receive the information about last month's performance within the first 10 days of the following month. In order to provide reliable information in this timely fashion, it is essential that employees submit travel reimbursements, service providers submit invoices, and the monthly financial processes are efficient. Many of these processes are controlled at the DFPS and HHSC levels and are outside the scope of this report.

***120. Empower Regional Directors to operate without individual Action Memos***

Once the regional budgets have been established, regional directors should be authorized to operate within the constraints of their budgets. They should be allowed to spend up to their budgets without the need for Action Memos. There may be a need for an audit trail of why decisions were made, but it should not delay the regional directors being able to take action.

***121. Create future incentives in regional budget allocations***

TSG recommends that CPS caseworkers work as effectively and efficiently as possible in closing cases in a timelier manner, while assuring safety, well-being, and decreasing time to permanency. Thus, DFPS could consider an option where CPS regions get to keep a certain portion of the savings for additional services within the region, while at the same time returning an amount back to the taxpayers. This way the incentives of the taxpayer and public expecting quality services are aligned. Alternately, if a region operates efficiently, closes cases quickly and demonstrates quality outcomes, the staff there could be given a bonus, which would ensure that the incentive structure is enabling strong performance.

The current budget allocation process at CPS gives no incentive for regions to move to close cases in a timelier fashion. If cases are closed quicker, some regional staff fear that their future regional budget allocations will be reduced because of a reduction in caseloads. While creating this value for taxpayers of Texas is a good thing, the disincentive this presents for regional staff could work against programmatic efficiency and ultimately hurt families who are left in limbo, waiting for a determination.

Moreover, we heard there are situations towards the end of the fiscal year where regions will have unspent funds and look to expend these funds for additional services in a rapid fashion,

possibly not always on the most appropriate services that a family needs because the funds are available to be spent, and “will be lost” in future years. This situation creates a disincentive for sound fiscally responsible management, but is an understandable human nature, given the incentive structure that currently exists.

Creating incentives for regions to meet positive metrics through the budget process, such as appropriately closing cases in a timely manner, reducing recidivism and lowering turnover, could result in future quality outcomes.

### Summary Benefit of Budget Recommendations

	<b>Financial</b>	<b>Non-Financial</b>
<b>Quantitative</b>	Better management of expenditures in the first half of the fiscal year from faster availability of budgets	More even expenditures across the fiscal year from having real time information available (avoiding knee jerk reactions late in the year)
<b>Non-Quantitative</b>		Fewer Action Memos means less senior leadership time spent analyzing each line item and more focus on managing to the overall budget

### Summary Timetable and Investment for Budget Recommendations

<b>Recommendation</b>	<b>Timetable</b>	<b>Cost</b>
Value transparency of assumptions, financial analysis, and assumptions	Near term	\$0
Create a needs based budget request process from the regions	Intermediate	\$0
Improve timeliness of Regional Directors receiving financial information	Intermediate	\$0
Empower Regional Directors to operate without individual Action Memos	Near Term	\$0

<b>Recommendation</b>	<b>Timetable</b>	<b>Cost</b>
Create future incentives in regional budget allocations	Near Term	\$0

## 16. PURCHASED CLIENT SERVICES

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### Vision for the Future

CPS will move to a real-time Purchased Client Services model where qualified, proven suppliers are matched with family needs based on a proven framework for efficacy of the services. CPS will have confidence the family will receive timely, relevant services. CPS will have awareness of all possible services in the community – from faith-based groups, privately funded sources, and publically funded sources. CPS will proactively work with local stakeholders to address gaps across the state in local availability of services. CPS will receive real-time information about the families using the services and be able to manage the expenditures in a timely fashion.

Besides real-time information, CPS will develop a more evidence-based understanding of the relationship between family needs, family services and outcomes. This will start with a theoretical model, based on best national evidence and thinking. The model will guide decision about the types and levels of care to include in the family plan. This model will provide the basis for additional data collection—to eventually validate the model.

### Recommendations

#### ***122. Move to an eSourcing model for service providers on available capacity to serve families***

There are many industries today that use a web portal and a simple system for matching their current needs with the supply of services in the marketplace. The natural gas, oil and electricity industries have used this model for years. CPS could apply this technique to the requests for FBSS services. Suppliers could pre-qualify to provide particular types of services. When a particular family needs a particular service in a particular location, CPS could get responses from service providers within a day regarding whether they have capacity to serve this family. This would eliminate the situation where requests are sent to providers but the providers can't fit this family into their schedule.

***123. Move to an integrated data source showing all types of services available in the local community***

CPS uses a number of services to assist families to provide a safer environment for their children. These include home studies, drug testing, group counseling, individual counseling, psychological testing, homemaker and hospital sitting services, kinship readiness assessments, preparation for adult living, substance abuse treatment, supervised visitation, and many others. There are groups within the community that provide similar services that CPS may not be aware of. CPS could create more relationships with the broader local community of providers. CPS may not be able to require as much documentation from the providers they don't pay to do the work and may not be able to evaluate the quality of the services real-time from every provider. Nevertheless, there may be situations where some services are better than no services to this family.

***124. Implement an IVR for services providers to report the actual provision of service***

There are examples in the home health care field where service providers must immediately report the fact they provided services in order to get paid by Medicaid for those services. In many cases, they use a simple phone number or web portal to report this information. CPS could provide a simple dial-in number where the provider would go through menu prompts to record the information about the family and the services provided that day. This would allow CPS to immediately know when the families missed an appointment or when a certain service provider is having difficulty connecting with families. This would dramatically expedite the feedback to the FBSS and CVS worker about the status of key activities that affect their assessment of the child's safety. It would also eliminate the time delay in CPS knowing how much they have spent on services. Today, they must wait until the invoice is received from the service provider, which may take a couple of months. While this may not work for all types of services and all service providers, CPS should strive to accelerate the timely delivery of information from the providers for as many services as possible.

***125. Develop an intellectual model for recommending the level and type of services to the family***

Today, CPS has a general concept for what services to offer what families, but they don't track data to know exactly what type of services work best in each situation. Today, CPS tracks whether the family starts the services and completes the course of service. They should also track whether the service is successful in preventing recidivism of each adult associated with the

case. Over time, CPS could refine the nature and duration of services offered and even spot trends with which service providers were most effective in helping the family deal move to a safer place.

***126. Work with providers and external stakeholders to attract attention to pockets of the state that are underserved by providers***

There are many locations across Texas that are underserved by particular types of service providers, particularly therapists, substance abuse counselors, and sexual abuse specialists. CPS can't fix this problem. However, CPS can do more to make their stakeholders aware of this problem and to solicit public support in attracting attention and solutions. CPS may also consider offering competitive rates to compensate providers for mileage in underserved areas where providers are willing to travel to provide quality service.

***127. Consider pricing incentives for service providers for families to complete the course of recommended service***

One way to attract quality service providers is to pay differently for the ones who are really good at motivating families to continue their services through completion. Today, CPS pays a standard rate per unit of work to a service provider. For example, a provider offering individual therapy receives a standard rate per session conducted. If the analysis proves that the adult perpetrator who completes a course of recommended sessions has a lower recidivism rate than an adult who drops out mid-way through the recommended number of sessions, then it makes sense to motivate the service provider to work really hard to help the adult finish what they started. This recommendation is dependent on having good data about what services are most effective at treating the issues and what the ideal duration of services should be in a given situation. Consequently, this recommendation should be implemented after CPS has more information about the best use of services in a given situation.

***128. Improve Child Well-Being, Health, and Primary Prevention***

TSG recommends that Texas CPS and HHSC take the opportunity to reduce life span developmental, mental health, and health care risks by taking the cooperative relationships embedded in the Star Health Medicaid benefits to the next level of care coordination integration between HHSC, Star Health MCOs, and CVS caseworkers.

Texas became a national leader in 2008 when HHSC launched the statewide Star Health managed care specialized carve out system for medical, pharmacy and behavioral health benefits for children under state care. Star Health required the MCOs to create an electronic "Health

Passport” medical history and record accessible by participating network providers in an effort to assure and augment coordinated and effective care. Texas augmented this national leadership in the provision of Medicaid pharmacy benefits through the successful implementation of its rigorous utilization, physician education and appropriate use program of anti-psychotic medications within the foster care child population dramatically reducing the alarming escalation of use among this population across the country. Multiple agent use and ancillary prescription overuse has been dramatically reduced. CPS has recently strengthened this best practice by requiring parental involvement in their child’s treatment and prescription process.

The Health Passport of each child in Star Health is available to their CVS caseworkers. TSG believes that CPS and HHSC have a greater opportunity to assure that appropriate developmental screens, EPSDT well child visits, chronic care and mental health services continuity are further improved by prioritizing CVS caseworker monitoring of the Health Passport of each child on their caseload, improving the coordination of effort on problematic cases identified by HHSC/Star Health, and engaging parents in an educative and preventative dialogue when scheduled services are missed or not followed up. TSG believes that improved care coordination among CPS, HHSC and Star Health MCOs will support life span global health risk reduction and primary prevention that increases long term child wellbeing and reduces cost.

***129. CPS should continue to expand its connection to the faith based community to fill in gaps in lack of or unavailability of contracted services***

Dedicated state faith leaders are currently organizing and working within their communities to build the capacity of wrap-around services for children and families that can be offered to augment some of the gaps in CPS contracted services. Faith-based communities across Texas have been offering some of the same services CPS offers through contracted services for many years and have also provided additional help to children and families, such as mentorship, counseling, transportation, and home repairs. These services are offered at no cost and can positively enrich the lives of children and families with a deep connection to the community.

Currently, CPS has a dedicated position in the Family and Adoption division (FAD) that coordinates these faith-based efforts, which today are focused on helping children find permanent homes. FAD is also working to create a web portal that will further connect faith-based supports across the state into one central database to be used by caseworkers. We applaud this effort and know that it can be used in the future to fill in gaps of services in all stages of service, not just adoption.

Thus, CPS should consider connecting this effort at the state office to all stages of services and provide the support needed to increase the availability of these faith-based communities to all CPS children and families. CPS state office should also work with the regional directors to coordinate their efforts so that all regions could benefit from a more enhanced faith-based community presence in offering wrap-around services to CPS children and families.

For CPS, enhancing faith-based connections leverages tremendous community resources for children that often extend well beyond permanency and into adulthood. They frequently provide strong, positive role-models and deliver connections with individuals who often have better connections and frequently spend more time with children and families that CPS staff can to offer mentoring and assistance. Building these relationships will go a considerable way to delivering better quality outcomes for cases statewide.

### Summary Benefit of Purchased Services Recommendations

	<b>Financial</b>	<b>Non-Financial</b>
<b>Quantitative</b>	<ul style="list-style-type: none"> <li>• Better management of Purchased Client Service spend by having real-time information on family utilization of service and more guidance on which service to use for each family</li> <li>• Lower recidivism of adults back into the child welfare system</li> </ul>	<ul style="list-style-type: none"> <li>• More incentive for the service provider to motivate the family to complete the plan of service.</li> </ul>
<b>Non-Quantitative</b>	<ul style="list-style-type: none"> <li>• Better coverage for providers in all areas of the state to serve all the families who need services</li> </ul>	<ul style="list-style-type: none"> <li>• Better performance by the worst performing regions from using a needs based budget to influence resource allocation</li> <li>• Fewer Action Memos means less senior leadership time spent analyzing each line item and more focus on managing to the overall budget</li> </ul>

**Timetable and Investment for Purchased Service Recommendations**

<b>Action</b>	<b>Timetable</b>	<b>Cost</b>
Move to an eSourcing model for service providers	Intermediate	\$300,000
Move to an integrated data source showing all types of services available	Long Term	\$30,000
Implement an IVR for services providers to report service provision	Long Term	\$150,000
Develop a model for recommending the level and type of services	Intermediate	\$0
Attract attention to pockets of the state that are underserved by providers	Long Term	\$0
Consider pricing incentives for service providers	Long Term	\$0
Improve Child Well-Being, Health, and Primary Prevention	Long Term	\$0
Expand its connection to the Faith Based community to fill in gaps in services	Near Term	\$0

## 17. COMMUNICATIONS AND GOVERNMENT RELATIONS

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### Vision for the Future

CPS will put together a messaging function that clearly articulates the need to keep children safe and secure. This function will accurately represent the agency in the eyes of the public, the Legislature and stakeholders. It will also build a perception of CPS that will expand awareness of child abuse and neglect, and give the public the confidence in CPS to investigate these cases.

Additionally, the communication has to build a strong positive public image of CPS to support the agency's ability to recruit and retain good workers, which is absolutely essential to CPS's ability to do its job effectively. A strong communications plan will also ensure a proactive outreach to legislators and other stakeholders so that they will know the direction and focus of the agency.

### Background

The TSG Assessment found that there is a tremendous opportunity for DFPS and CPS to take steps to ensure that the public and stakeholders, both inside and outside the government, gain a clear understanding of the critical work done by the agency in protecting children. TSG is aware that DFPS, under the leadership of Commissioner Specia, have recently taken significant steps to improve outreach across an array of public, stakeholder and legislative groups. These recommendations build upon those efforts.

The below recommendations are designed to offer both a long-term framework for successful reform as well as “easy wins” to benefit the communications function. Ultimately, these functions are critical to the forward-facing aspect of the organization, from the Commissioner at the state office to the smallest region.

If the public loses confidence in the value of CPS, they will be less likely to report cases of abuse or neglect. If the cultural view is negative, it will mean that some of the best possible applicants might seek work elsewhere, and it will make it harder to retain talented existing staff. There are real-world consequences to the agency not having a strong brand that can ultimately make children less safe across Texas.

**Recommendations: Systemic Changes to Create a Structure Built for Success*****130. Consolidate the messaging function under one senior staffer***

The ability of CPS (and DFPS) to have an accurate public perception depends on its capacity to project a consistent message, one that needs to be the same across all external communications. If the message projected by the media staff is not the same as that of the government relations, community engagement specialists, the website, social media, marketing materials or the Office of Consumer Affairs, it is easy for state leaders, stakeholders and the public to be unsure about the goals, focus or objectives of the agency.

Therefore, one important way to ensure that the agency begins to develop a consistent brand is to hire one senior staffer to manage the CPS message across all external platforms. These include public affairs, website, social media, marketing, government relations, community relations, as well as stakeholder communications.

By consolidating these activities under one staffer, it allows a unified message delivered to the public and interested groups about CPS' work, role in Texas and goals for keeping children safe. Unlike the current management structure, in which various public-facing functions report to different DFPS leaders, this change should ensure that the same message is delivered regardless of the method of external communication.

Because of the nature of the work, the senior staffer responsible for the messaging function must be a member of the DFPS Senior Management Team. This position is critical to understanding the various proposals, opportunities and challenges before the Department and how they will affect the agency's brand. Accordingly, this person must be fully integrated and engaged in high level decision-making, with the ability to know what future actions the Department may take with as much lead time as possible to prepare.

Moreover, while the optimal organizational structure would involve all forward-facing agency functions directly reporting to this senior staffer, it is critical that all of these groups (media, website, marketing, government relations, and consumer affairs) at the minimum have a matrix reporting responsibility. Without this, it will be a significant challenge to organize the various outreach components across the agency.

***131. Move all media managers to State Office to ensure work balancing, specialization and consistent message***

Currently, there are regional media managers across the state and a small state office media staff. While this environment may have made considerable sense in the days before the Internet, unlimited long distance calling and social media, it no longer represents the optimal arrangement to maximize the potential for producing proactive content about DFPS, balancing the work load of communications staff and ensuring a consistent message from the agency.

A model that is optimized for technology, workflow and expertise would be to locate the entire media staff in the state office. In addition to promoting message consistency and enhanced internal communication, this arrangement would allow a better opportunity for balancing work, as some media managers indicated they are overloaded and others suggest they have surplus capacity.

Additionally, this strategy will allow state office media staff to specialize in the various DFPS and CPS program areas. This will allow reporters a chance to ask more detailed and intricate questions from a communications staffer with deep program knowledge. This will increase the efficiency and effectiveness of the team.

The senior staffer responsible for the messaging function should work with existing staff resources to determine the appropriate staffing level as well as to develop transition plans to ensure a smooth conversion to a consolidated model.

***132. Provide media training to DFPS and regional leadership***

While there will be tremendous benefits to consolidating the media functions for DFPS, there will still be a demand for local media, particularly broadcast media, to talk to a local CPS (or other DFPS) voice. To ensure that they are both comfortable doing so and they are capable of effectively articulating the DFPS position, the agency should provide ongoing media training to regional leadership, so that they can be the local representative for DFPS. Moreover, this training should be an important component of training for all regional leadership positions, such as regional director and should keep up to date with best practices.

Additionally, other members of the state leadership team should also receive media training. Whether it is because they are traveling across the state where media will be attending similar events and will ask questions, holding a press conference or offering specific guidance on a particular programmatic item, these state leaders should have the opportunity to feel comfortable

when discussing important items with the media, with the understanding of how to deliver the Department's view consistently and reliably.

The senior staffer with responsibility for the messaging function should work to develop the criteria, scope and list of DPFS leadership who should receive this training and the management team should work to reinforce the significance of the training to all individuals that have been identified to receive it.

### ***133. Develop a robust social media capability***

The top targets for CPS recruitment efforts fall into an age cohort that uses social media (Facebook, Twitter, Pinterest, and LinkedIn) for news, networking and research. Failing to have a robust presence in these spheres represents a missed opportunity for reaching some of the best candidates for employment. This is especially true when other competitors for their services have embraced this technology.

Moreover, both traditional and new media also use social media regularly to find story ideas, put reporting in context and share work. Frequently, social media is now the first place where news breaks publicly and the place where many journalists look for an immediate response to an evolving story.

Accordingly, DFPS should reallocate resources towards expanding social media capacity and make having a strong presence in this space a top priority. The senior staffer for the Department's messaging function should work to develop a structure to coordinate this presence while ensuring that it is accurately representing the agency's position and has the appropriate level of resources.

## **Recommendations: Rapid Improvement Opportunities to Leverage Outreach**

### ***134. Accelerate and make regular an external newsletter***

CPS (and DFPS) has a chance to significantly improve communications with a number of external parties through a regular newsletter. While there are plans to move forward on a newsletter, that should be a priority, and the process should be consistent, whether bi-monthly, quarterly, etc. Ultimately, this would be an excellent way to ensure that interested groups like providers, legislators and other stakeholders have a chance to hear directly from CPS leadership about current initiatives and future plans.

This newsletter should be coordinated as part of an overall messaging strategy by DFPS and should fall within under the direction of the senior staffer mentioned above. This is a very important tool to inform critical constituencies and signal CPS' strategic direction.

***135. Produce simplified media guidelines for CPS***

CPS operates under significantly limiting laws designed to protect the privacy of children and families. However, other individuals and organizations associated with a case typically do not function under these restrictions. This leaves the media who attempt to cover stories on these subjects often receiving considerable information from one side and little from CPS. Moreover, we found that the media are frequently unclear on exactly what information that they can and cannot request under state law.

For these reasons, the agency should produce a one or two-page document showing bright-line guidance for information that cannot be divulged publicly as well as the legal or administrative basis for the restriction. This will simplify the process for reporters, who will know in advance those questions regarding CPS operations that cannot be offered.

***136. Create a weekly report to offer newsworthy stories to share***

Much of the outstanding work done by CPS staff to protect children under extraordinary circumstances could undoubtedly raise awareness of the importance of preventing and reporting child abuse and neglect. However, much of this flies under the radar, as these stories are not shared with media managers who could leverage these accounts into public knowledge working with local and state media outlets.

In order to find a way to bring attention to these stories, CPS should produce a weekly report, listing one to three of these reports per region. This will get regional leadership in the habit of collecting these types of anecdotes and provide field staff a place to offer stories they see daily that could help instruct the public about child abuse.

This will offer state office staff an inventory of 10 to 30 accounts each week that can be used locally or statewide as examples of abuse and knowing it when one sees it, of opportunities for support by CPS or within the community for families and of important safety measures that can protect children from knowable risk factors. These stories can translate into areas where CPS can partner with the media to inform the public and keep children safe.

***137. Build an updated stakeholder map***

Within the important goal of improving communications with external stakeholders, comes the need to understand the scope of the stakeholder community. In order to ensure that groups are part of a strong feedback mechanism, there needs to be a well-maintained, comprehensive list of stakeholders statewide. This list will be used for important task from getting the newsletter to invitations to public events with CPS.

As Texas is a large state, both in terms of geography and population, keeping these lists updated and encompassing will be a significant task that will likely require an online, cloud-based platform (such as Google Docs) or an internal database that can be updated across the network. Each region will need to designate an individual or individuals in that area to keep the list current, as personnel of groups, and occasionally the groups themselves will come and go.

***138. Encourage cross-training across numerous communications functions***

Communications personnel across DFPS are highly specialized. While this type of focus can provide highly detailed product knowledge, it can interfere with management's ability to balance work flow. Cross-training staff would allow the Department greater opportunities for synergies from somewhat similar outreach activities.

For example, allowing media managers to actively participate and collaborate with Communications staff on the agency's social media would create a tremendous chance to add value from DFPS public messaging. Another example would be allowing Media and Communications staff to join with Government Relations in participating in meetings with legislators to understand the regional or statewide concerns of elected officials.

***139. Increase active engagement with media with ride-alongs and other activities***

Both the media, and the public, would develop a greater appreciation of the important work of CPS if the agency works to engage reporters in the activities that CPS staff does daily. Having these experiences become public, and presenting the services that CPS can provide a family, as well as the process of explaining abuse and neglect, will help the public understand abuse and improve the reporting of these incidents.

Obviously, the reporters who would join a ride-along or stop by a home where services are provided would need to abide by state confidentiality requirements, but doing so will help them develop a better sense of understanding about how the system works. This experience will help develop a framework for reporting on abuse or neglect cases in the future.

## Recommendations: Government Relations

During its assessment TSG found that the agency's relationship with the Legislature and key policymakers has improved. Policymakers believe that the agency is being more transparent and candid about the CPS' progress, however, there are some areas where the agency can improve the manner in which it communicates with policymakers. The TSG recommendations that follow are designed to assist the agency in developing relationships with policymakers by portraying an open and educational image about the work that CPS performs. As discussed below, for the DFPS Government Relations office to be successful in accomplishing this, it must be aware of all contacts from policymakers that come into the office and be the lead the agency's response back.

### ***140. Coordinate better with Budget staff***

One of the main frustrations that TSG heard in our conversations with legislative staff and other policymakers focused on the DFPS Budget Office. The DFPS Government Relations team needs to better coordinate responses to policymakers with the Budget Office. The Government Relations team might be able to better understand what information the policymakers are requesting and assist the Budget Office staff in presenting information to policymakers in a manner that will be understood and useful.

### ***141. Ensure there is a well-thought out justification for every Budget request that everyone interacting with the Legislature understands and can articulate***

As mentioned in our findings, some legislative staff members feel that "there is no strategy when they ask for LAR." Another staff member that we interviewed said "one of our big questions is how did they come up with the LAR request? What is the process? Because it seems as though when they get to the legislature there are things in the LAR that they did not research or take into consideration. There is no pre-strategic planning."

TSG recommends that the DFPS Budget staff ensure that every budget request is well-thought out and clearly articulated in documents submitted to the legislature. The Government Relations team should play a "gatekeeper" role before information is sent to the Legislature to make sure that both the information and the reasoning for each request is presented in a manner that will be understood by the legislative staff. This will require increased coordination between the Budget Office and Government Relations.

***142. Government relations should maintain a thorough understanding of what the agency is requesting***

Legislative staff also expressed frustration that CPS either does not always seem to understand what they are requesting from the legislature or the justification for making the request. When the agency makes a Legislative Budget Request every person in the agency that is going to have any interaction with a legislator – including the Government Relations team – needs to have an understanding of what the agency is requesting, the justification for making the request and how it is going to assist the agency in advancing its mission. The justification and message from the agency should not vary depending on what individual a policymaker speaks with.

***143. Handle ALL legislative requests and make sure they are answered clearly and satisfactorily***

Every request that the DFPS Budget Office receives from legislative staff or another policymaker needs to be tracked by the Government Relations team. The Government Relations team should view each of the contacts as an opportunity to develop a relationship with a legislator, policymaker or key staff member. This can be accomplished by making sure the request is fulfilled timely, completely and in a manner that can be understood by the person making the request. After the response has been sent the Government Relations staff should follow up after a day or so to make sure the requester is satisfied with the response they received from the agency. None of this can happen if Government Relations does not even know a request has been made.

DFPS Government Relations should monitor the requests that come into the agency's Consumer Affairs Office from legislators and seek to follow up with legislators with cases that are more sensitive or legislators with whom the agency is not in regular in contact. This can be used as an opportunity to present a positive impression of CPS.

***144. Develop a key set of metrics for policymakers***

The legislative staff that we spoke with expressed frustration that the data the Legislature receives from the agency comes in such magnitude and format that makes the information extremely difficult to comprehend. One legislative staff member said that “in the past, we have asked for a one page document rolling up critical and important data – pick your five key benchmarks, spell them out and show me how they will address positive outcomes.”

TSG recommends that CPS develop a key set of metrics that can be updated on monthly basis that policymakers can use to determine whether the agency is moving in the right direction

towards effectively fulfilling its mission. For more on the discussion of metrics, see metrics recommendation.

***145. Periodically send out positive stories to legislators***

The DFPS Governmental Relations team should be periodically sending positive press stories to legislators. CPS staff should be encouraged to regularly submit positive stories or examples of CPS performing well to the Government Relations office. Whenever a regional director or program administrator hears of a story where a CPS worker (or group of workers) performs well in a certain case, the Government Relations team should communicate these examples to policymakers – particularly the legislators in that region.

By updating policymakers on these positive stories the agency will help an important audience understand that the negative stories are not the norm and educate legislative members that are not as familiar with CPS of the good work that the agency performs.

***146. Send positive press articles to Legislators in the District where the article appeared***

One source of positive stories about CPS could be from media coverage. During its assessment TSG learned that the media specialists in the regions pull press clips on a weekly basis. In conjunction with the previous recommendation, the Government Relations staff should send some of these positive stories to the legislators, particularly if the subject of the positive story occurred in the legislator's district.

***147. Offer legislators/staff Ride-Alongs –particularly in tough regions (ex. San Antonio)***

Legislators, their staff and other policymakers should be given the opportunity (and encouraged) to do ride-alongs with CPS investigators, FBSS specialists and CVS specialists. TSG found ride-alongs to be very informative during its assessment and believes that policymakers would also learn a great deal about the work that CPS performs by spending a half-day with a front-line CPS worker. It is difficult to truly understand the complexity of the work that these individuals do until it is experienced first-hand. This interaction will also allow the policymakers greater insight into about the impact the policy they are developing at the state level is having in the field.

***148. Proactively offer periodic briefings to legislators/staff with Q+A (don't wait for them to call the agency)***

DFPS Government Relations should offer periodic briefings to legislators, their staff and other policymakers and update them on recent progress in the agency. These sessions should have a question and answer phase and be in addition to any other hearings scheduled by the Legislature. These sessions will give the agency the opportunity to educate policymakers on the good work that CPS is doing, discuss issues that it is facing and convey a more transparent image.

***149. Set a goal to contact every legislator once per quarter***

During our Assessment, TSG found that there are a number of legislators that do not know that much about CPS or the work the agency performs. The first real impression they have of the agency is when a troubling case is in the media or occurs in their district. The Government Relations staff should set a goal to contact every member of the Legislature at least one time per quarter to help ensure that each member understands the difficult, yet important, work that CPS performs. This contact can be in different forms. It can mean a phone call from Government Relations staff to see if the legislature knows about an event that happened in their district (good or bad), being sent a note from the Commissioner, sending them a periodic update or stopping by their office.

The regional directors can play a big role in accomplishing this goal as well. The regional directors should know the members of the legislature that represent their region and be a part of communicating with them. If the regional directors do communicate with a legislator, the Government Relations staff should be notified.

***150. DFPS government relations needs to be contacted EVERY TIME CPS is contacted by a legislator or legislative staff***

Above we recommended that responses to legislative requests submitted to the Budget Office should be coordinated through Government Relations. During its assessment TSG found multiple examples of the DFPS Government Relations staff not being informed when a legislator contacts other parts of the agency, including CPS. For the DFPS to effectively communicate with the legislature, all communications with the legislature, and other policymakers, must be coordinated through the Government Relations office. This is important for a couple of reasons.

First, the Government Relations staff can track the response to ensure the request is followed up on completely, offer input on the format of the response and guarantee that the request is

completed in a timely manner. Second, each contact from the legislature, or other policymakers, is an opportunity to either develop a new relationship or further an existing relationship.

Each time a response is sent to a request from a policymaker or their staff, the DFPS Government Relations staff should follow up within 48 hours to make sure that policymaker is satisfied that they received the information they requested.

***151. DFPS program offices (including Budget Office) need to inform Government Relations every time they are contacted***

TSG also found that many of the program offices within CPS do not report to DFPS Government Relations when a legislator contacts them. For the same reasons listed for the previous recommendations, it is important that the Government Relations staff be aware of all legislative and policymaker contacts with the DFPS agency.

After an agency program office has responded to a request from a policymaker the Government Relations staff should follow up with the individual that made the request and report any feedback back to the CPS program office. This coordination will help the agency better respond to the current request, but also better prepare for future requests that may come from policymakers.

Additionally, Government Relations may be able to get a sense of what issues may be surfacing in the legislature if they are kept informed of the information that policymakers are seeking from the agency. It is always beneficial for the agency to know what issues are arising as early as possible.

***152. DFPS Government Relations should be informed by CPS of stakeholder contacts expressing concerns that could end up being shared with legislators***

Just as it is important for DFPS Government Relations to be informed of requests from policymakers, it is also important for them to be informed about CPS contacts from key stakeholder groups expressing concerns that could end up before policy makers. It is common for a stakeholder to communicate concerns with legislators at the same time they communicate concerns with the agency. It is helpful for DFPS Government Relations if they are aware of the information received from the stakeholder group before a member of the legislature contacts the agency.

**Timetable and Investment for Communications and Government Relations  
Recommendations**

<b>Action</b>	<b>Timetable</b>	<b>Cost</b>
Consolidate the messaging function under one senior staffer	Near Term	\$0
Move media managers to state office	Near Term	\$0
Provide media training to DFPS and regional leadership	Near Term	\$0
Develop a robust social media capability	Intermediate	\$0
Accelerate and make regular an external newsletter	Near Term	\$0
Produce simplified media guidelines for CPS	Near Term	\$0
Create a weekly report to offer newsworthy stories to share	Near Term	\$0
Build an updated stakeholder map	Near Term	\$0
Encourage cross-training for communications functions	Near Term	\$0
Increase media ride-alongs and other activities	Near Term	\$0
Coordinate better with Budget staff	Near Term	\$0
Ensure there is a well-thought out justification for every Budget request	Intermediate	\$0
Government Relations understand what the agency is requesting	Intermediate	\$0
Handle ALL legislative requests	Near Term	\$0
Develop a key set of metrics for policymakers	Near Term	\$0
Periodically send out positive stories to legislators	Near Term	\$0
Send positive press articles to Legislators	Near Term	\$0
Offer legislators/staff Ride-alongs	Near Term	\$0
Proactively offer periodic briefings to legislators/staff	Near Term	\$0
Set a goal to contact every legislator once per quarter	Near Term	\$0
Government Relations involved when CPS is contacted by a legislator or staff	Near Term	\$0
DFPS program offices to inform government when they are contacted	Near Term	\$0
Government Relations should be informed by CPS of stakeholder contacts	Near Term	\$0

## 18. CHILD FATALITY REVIEW

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### Vision for the Future

The State will conduct fatality reviews based on the improved structure, policy, and methods Texas CPS has in place today modified by new knowledge, law, and policy over time. The Texas CPS Child Fatality Review system would continue to evolve within a Quality Management and Prevention framework as unpredictable events and circumstances present themselves. The review will be for the purpose of finding and correcting systemic shortcomings instead of affixing blame.

### Background

Texas CPS has exerted admirable effort towards improving the Child Fatality Review process within the department over the past 18 months. Currently CPS related fatalities are reviewed by the Regional Child Death Review Committee (RCDRC), the Citizen Review Team (CRT), the multi-disciplinary Child Fatality Review Team (CFRT) sponsored by State Health Services (reviews all child fatalities and some CPS fatalities), and the Child Safety Review Committee (CSRC) focused on statewide issues and located within the CPS state office. The Protocol Guidebook to Child Fatality Investigations and Review Process was updated in the spring of 2014 with training provided statewide.

The CPS Regional Child Death Review Committee is charged with reviewing all child deaths due to abuse and neglect, includes external subject matter experts to review child deaths due to abuse and neglect, and provides feedback and analysis on each case for the purpose of preventing child deaths from abuse and neglect in the future. The RCDRC's work is guided by a comprehensive "root cause" based document (Form 2071). CPS developed this tool based on a review and integration of analytical methods addressing fatalities from medical services, military and law enforcement after case review processes, and high risk industry health, safety, and environment fatality reviews. The instrument is structured by four comprehensive case review sections: 1) Notification of Child Fatality (24 hours of notification); 2) Case History: (36 hours of notification); 3) Quick Response Team Meeting and Regional Staffing Notes (meets 48 hours of notification); and, 4): RCDRC Notes covering systemic review of the case and external

reports from autopsy/law enforcement, identified Practice Based Learning and Improvement, and identified Adverse Outcomes. TSG considers the Texas CPS approach to child fatality reviews reflected in effective completion of the Form 2071 content and process a best practice.

The Child Safety Review Committee currently meets quarterly and reviews recommendations from the Regional Child Death Review Committees, Citizen Review Team recommendations, and considers issues, concerns or improvements related to Policy, Training, Resource Development, Casework Practice, and coordination with external partners. The CSRC also makes recommendations for system wide improvements and prevention. The state office based CSRC has also added external representation from the Child Fatality Review Team (CFRT), an independent medical professional, and a person with expertise in domestic violence.

### *A logic model for CPS Child Fatality Reviews*

The Child Fatality Review process in many state child welfare systems is often driven by high public profile deaths with attending media and public concern. This should be expected as the loss of a child under state protection is a serious matter regardless of circumstances and the public has a right to know within the laws of confidentiality what happened, could the death have been prevented, and what can be done to improve child safety. What is critical for the success of Child Welfare/CPS Fatality Review processes and recommendations is the process be designed, implemented, and managed systemically, be consistent and transparent, and import learning and methods from death/morbidity processes in other systems, such as medical and law enforcement. Additionally, the CPS Child Fatality Review process should be a critical aspect of the practice model, and become inter-related with safety and risk assessment, case practice, quality improvement and exhibit transparency through a well thought out communications plan in a proactive way. Given that the development of the Practice Model is a work in progress CPS has an excellent opportunity to integrate the Child Fatality review values and process into the Practice Model as an aspect of Child Safety and Quality Management.

Child Death Reviews are a function of state Health Departments in 27 states, social service agencies in 11 states, Office of the Medical Examiner in four states, Attorney General Office/DOJ in two states, and other functions of seven state governments. All states now have Child Death Review programs (birth to 18 years of age). Generally, these collaborative programs cover accidents, homicides, suicides, and fatalities related to Child Welfare/CPS. Citizen Death Review programs cover birth to 18 years of age group associated with Child Welfare/CPS, are required by a 1996 CAPTA amendment, and overlap with state/regional Child Death Review programs. Additionally there are over 200 Fetal and Infant Mortality Review programs in 40

states and 144 state and local Domestic Violence Fatality Review programs across the country. There is considerable structure and attention focused on child deaths that is augmented by individual state Child Welfare – Child Protective Services internal Fatality Review systems and processes.

In 2012, the National Center for the Review and Prevention of Child Death (“Coordination of Child Death Reviews and Citizen Review Panels”) listed several “Shared Guiding Principles” between Child Death Review and Citizen Review Panels activities: “Death and serious injuries are sentinel events; Environmental, social, economic, health, and behavioral health factors impact the death or injury; these factors are so multi-dimensional that responsibility for a death or injury doesn’t belong to any one place; reviews focus on what went wrong and how we can fix it – not who is at fault and who we should blame; and, the best reviews are multi-disciplinary.”

### *Sentinel events and root cause analysis*

The Joint Commission defines a Sentinel Event as “an unexpected occurrence involving death or serious physical or psychological injury, or the risk thereof.” A Sentinel Event requires a Root Cause Analysis and Action Plan that responds to the findings.

The purpose of a root cause analysis is to identify systems, processes, communications, external factors, variances, and human factors involved with a Sentinel Event. The Joint Commission identifies the following factors in the root cause analysis process:

- Analysis Question
- Prompts
- Root cause analysis findings
- Root cause
- Plan of Action

The Joint Commission identifies the following “Analysis Questions”\* for each identified Sentinel Event:

- What was the intended process flow?
- Were there any steps in the process that did not occur as intended?
- What known factors were relevant to the outcome?
- What uncontrolled external factors influenced this outcome?
- Were there any other factors that influenced this outcome?

- How did actual staffing compare with ideal staffing?
- What is the plan for dealing with staff contingencies?
- Were such contingencies a factor in this case?
- Did staff performance during this event meet expectations? (The Stephen Group recommends that staff non-performance is managed through the state's Human Resources Policy for non-performance unless allegations of criminality are present.)
- To what degree was the communication among participants adequate for this situation?
- To what degree was all the necessary information available when needed? Accurate? Complete? Unambiguous?
- What systems are in place to identify environmental risks?
- How does the organization's culture support risk reduction?
- What are the barriers to communication of potential risk factors?
- How is the prevention of adverse outcomes communicated as a high priority?
- How can orientation and in-service training be revised to reduce the risk of such events in the future?
- Was available technology used as intended?
- How might technology be introduced or redesigned to reduce risk in the future?
- The Joint Commission identifies the following factors in the action plan process:
  - Action Plan
  - Organization Plan of Action, Risk Reduction Strategies
  - Position/Title, Responsible Party
  - Method: Policy, Education, Audit, Observation & Implementation

Given the current quality of the review process embedded in the Form 2071 method, The Stephen Group recommends that Texas CPS continue to assess the Joint Commission approach to root cause analysis and action plan steps. CPS may find that the development of casework process checklists, similar to the Joint Commission approach, will assist Committee members in their case reviews.

### ***Composition of the Child Safety Review Team (CSRT)***

As mentioned above, Texas DFPS/CPS focused attention on the Child Fatality Review process across the system over the past year resulting in a systemic reaffirmation of maintaining and improving the process within CPS. The creation of the Child Safety Review Team within the CPS state office is intended to prioritize and organize the fatality review process across the state, maximize the input of the Regional Child Death Review Committee (RCDRC), the Citizens

Review Team (CRT), and the multi-disciplinary Child Fatality Review Team, and take on the responsibility for oversight and preventive improvement. While progress has been made TSG suggests that CPS should consider the system in place as a work in progress towards a more independent Child Fatality Review process that distinguishes between management/operations and the child fatality review process itself.

Several states have taken actions to assure an independent review of government actions, management and outcomes. Child fatalities when the child is under state care is one of the most visible government responsibilities subject to public skepticism and generates significant media attention predictably in every questionable child fatality. Degree of independence is a challenge for state government given confidentiality statutes and rules as well as risk of liability.

In 2013, Colorado moved the Child Fatality Review process out of child welfare and placed the responsibility with the Administrative Review Division of the Department of Human Services. Although the ARD is not independent of government it is independent of the Department of Child Welfare and must issue an annual report on Child Maltreatment Fatalities to the Governor, Legislature, and general public. The report must address child characteristics, findings, and action steps.

Florida DCF issues a public report on “Lessons Learned” from the Child Fatality Review Process. The report covers domestic violence, documentation and contacts, and key factors for improvement and prevention.

In 2011, Washington passed a bill into law that clarifies the Child Fatality Review process in the Department of Social and Health Services and authorized public disclosure of child fatality reviews. DSHS now includes the release of Child Fatality Reviews as part of the overall Communications Plan supporting transparency. The Children’s Administration posts the result of Child Fatality Reports on its website.

In North Carolina, a statute requires the Division of Social Services to provide completed reports from the State child Fatality Review Team to the Citizens Review Teams as well as a requirement for DSS to release a public report on each incident and improvement plans.

In 2012, Kentucky established the independent Child Fatality Review Committee. Members are appointed by the attorney general and child advocate peer groups. The CFR is administratively supported by the Cabinet for Public Safety and Justice.

### ***Communications plan***

As noted above, many states child welfare programs have been evolving or legislatively directed towards more independence, transparency, public disclosure and action steps and prevention oriented improvements specific to the Child Fatality review process. Our recommendations concerning improvements in CPS communications with the legislature, the general public, media, families and staff are fundamentally driven by transparency, positive action that is implemented, trust, and public disclosure within the law. The Child Fatality Review process is a critical component of translating its subject matter, work, outcomes, and findings within the CPS-wide communications action strategy and transformation.

## **Recommendations**

### ***153. Add the child fatality review process logic model to the Protocol Guidebook***

CPS should add the child fatality review process logic model to the Protocol Guidebook of the Child Fatalities Investigation Review. The inclusion of the CPS child fatality review logic model used to improve the child fatality review process in the Protocol Guidebook would help set a framework of understanding for CPS staff on the importance of how the review process was conceptualized and operates.

### ***154. Enhance the child fatality review process embedded in Form 2071 by using guided checklists***

The child fatality review process embedded in Form 2071 could be enhanced by the use of guided checklists on process review for ease of use by the reviewer(s). The Joint Commission checklist approach to root cause analysis could be adapted to the Form 2071 section on “Analysis of Investigations/Service Delivery History” to guide the reviewer’s attention to expected process steps of case practice.

### ***155. Track, respond to and document all communications between and among Fatality Review Committees/Teams***

CPS should assure that recommendations and communications between and among the several Committees/Teams involved with child fatalities are tracked, responded to and documented. CPS can increase the value of recommendations from the several child fatality review teams/committees, such as the Citizen Review Team, by tracking and responding to all communications.

**156. Incorporate Child Fatality Review findings and prevention strategies in the CPS public communications plan**

CPS should continue to work on increasing transparency by determining what and how child fatality case review information can be released to the public as an on-going component of the CPS public communications plan.

**Summary Benefit of External communications Recommendations**

	<b>Financial</b>	<b>Non-Financial</b>
<b>Quantitative</b>		
<b>Non-Quantitative</b>		Increase objectivity and professional input into the review process  Increase the quality and usefulness of reviews

**Timetable and Investment for Child Fatality Review Recommendations**

<b>Action</b>	<b>Timetable</b>	<b>Cost</b>
Add the child fatality review process logic model to the Protocol Guidebook	Near term	\$0
Enhance the child fatality review process embedded in Form 2071 by using of guided checklists	Near term	\$0
Track, respond to and document all communications between and among Fatality Review Committees/Teams	Near term	\$0
Incorporate Child Fatality Review findings and prevention strategies in the CPS public communications plan	Intermediate	\$0

## 19. WORK SCHEDULING

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### Vision for the Future

This recommendation is about the difference between managing by caseload and workload. Caseload is not the only useful method for managing caseworkers. The new vision is to manage also to workload.

CPS will manage cases in a manner that proactively fits the work to caseworker abilities. This will require that supervisors have a solid handle on their workers' abilities. It will also require supervisors to gain a better understanding of the skills and experience likely required by each case.

Some dimensions of capability and requirement can be captured in IMPACT or the CPS HR system, for example language or cultural background. Other attributes are judgmental, but could still be captured in a system, such as the age of children a caseworker is especially good with, or experience with drug cases. Still other measures of the case requirements or caseworker abilities may be ill-defined and subject to simple judgment.

Reassignment is rare today. In the vision, this might become more frequent as the case unfolds, the supervisor might decide that a different caseworker is better suited to the situation. This aspect of the vision corresponds with the process recommendation that caseload also be managed at the unit and not only individual level.

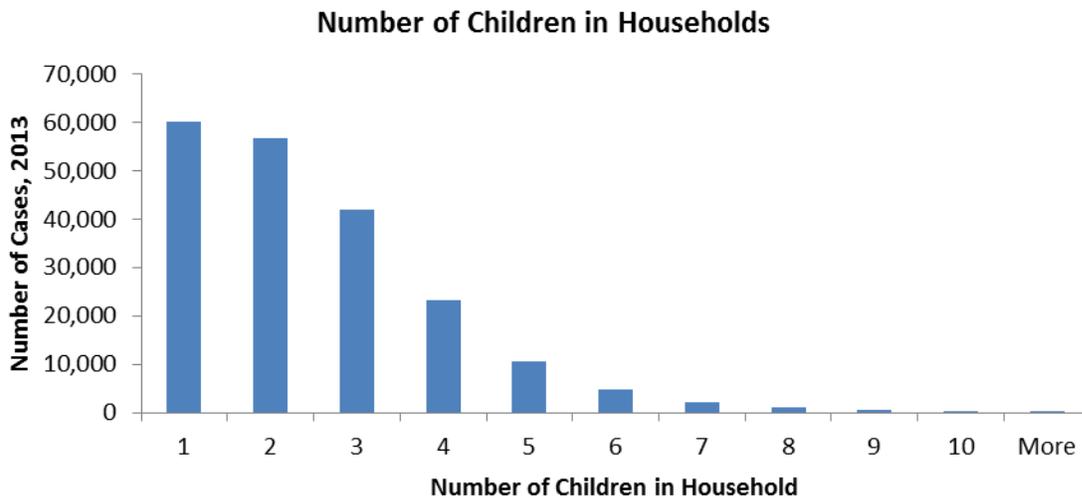
### Background

CPS currently manages cases largely in a "one size fits all" method. Supervisors have some flexibility to assign based on match, but largely assignment is on a round robin basis. One of the most glaring shortcomings of this approach is that it does not assure match on language. TSG reported in its Assessment that caseworkers have on occasion been forced to explain a safety plan in English, knowing full well that the parents speak only Spanish.

In addition to match, TSG reported in the Assessment that the current approach of assigning to caseload ignores that cases are not similar. One key dimension of which cases differ is number of children. Figure 5 shows that the number of children varied widely in 2013, but each case was

treated as the same level of work in a caseload. The work varies because each child could be at a different school, and each child must be interviewed separately. Each child could be located in a different place. Each child could involve a different set of safety issues.

Figure 6 - Number of Children per Household<sup>41</sup>



TSG considered other, more mechanical methods of adjusting assignments based on the factors. In the final analysis, the judgment was made that the characteristics of a “difficult” case are too complex to ascribe with CPS’ current weak understanding of variation. Perhaps after several years’ experience CPS will be in a better position to have a more formal method of weighting cases. For now, supervisor judgment will be used.

Assigning cases using this more subjective method will confound simplistic measures of individual performance based on caseload. However, in the Process recommendations, TSG recommends that cases be managed to different metrics anyway, more in line with subjective assignment:

- Investigations should be measured against time to close, not against caseload. As the caseworker and supervisor agree on a casework plan (see process recommendations), the time required by the case work plan should be reflected in the caseworker’s assignments. This could average out over an entire unit — but individual variation in time to case completion will be affected by the complexity of the cases they are assigned.

<sup>41</sup> TSG analysis of IMPACT data provided through the MRS data warehouse

- FBSS cases are likewise affected by number of children and individual worker caseload expectations should be adapted accordingly.
- CVS cases are generally by child, so that is not the determining variable. However, not all children are equally easy to place — including special needs, teen-aged, and those with history of dangerous behavior.

There is a prevailing notion that assigning cases randomly will “work out in the average.” That might be true across an entire region, or possibly a unit. It is clearly not true at the individual level. Consider it from a statistical point of view. The individual case worker only has about 20 “data points” (cases) and dozens or more key variables in case complexity. There are simply not enough degrees of freedom for an individual case load to “average out.” Over a unit of eight (160 or so cases), that could be true. Hence the lowest level that it makes sense to manage for caseload is at the unit (which is consistent with TSG’s recommendation in the process section).

## Recommendations

### *157. Supervisors assign cases based on judgment of the match between case and worker*

In other recommendations, TSG has recommended changes to the role of supervisor, from deeply involved in case “staffings” to developing and empowering workers. This recommendation is consistent with that. The supervisor exchanges hours of time in detail-leveled “staffings” about the details of a case with time up-front planning the best worker to assign the case to (and working with the worker to develop the case work plan). This recommendation assumes the related recommendation (in this section) that burden of caseload management from the individual to the supervisor—since some individuals will be assigned more time consuming cases.

TSG recommends that CPS develop an assignment guide based on supervisor input. This would be only for the purpose of helping the supervisor make an assignment. However, it would describe the data fields CPS should make available to supervisors (see data recommendation in this section). It would also provide the starting point for developing a better understanding of the data elements most useful for the match (see data analysis recommendation in this section)

**158. Encourage reassignment of cases if the facts suggest it**

Supervisors cannot always judge the complexity of a case on the surface. So, it is important that the supervisor have the ability to shift cases as appropriate. Again, the supervisor is working to balance cases to achieve the unit-wide caseload goals. If the supervisor finds that a case is too hard for the worker assigned, she can reassign the case, adjust the level of supervision, or even reduce the future case assignments to assure the worker a chance of working the case without reassignment.

**159. Conduct on-going study into the relationship between worker capabilities and case requirements**

The objective of the study is to develop an evidence-based understanding of the link between data recorded about caseworkers and the case factors so that sometime in the future a more nuanced assignment support tool can be developed.

**Summary Benefit of Work Scheduling Recommendations**

	<b>Financial</b>	<b>Non-Financial</b>
<b>Quantitative</b>		<ul style="list-style-type: none"> <li>• Increase unit performance by enabling the supervisor optimize worker performance</li> <li>• Increase unit performance by enabling workers to more easily share case assignments</li> </ul>
<b>Non-Quantitative</b>		<ul style="list-style-type: none"> <li>• Empower the caseworker to make decisions—leaving the supervisor to develop and supervise the worker, not the work</li> <li>• Build a foundation for more effective measures of workload (as opposed to caseload)</li> </ul>

**Timetable and Investment for work scheduling recommendations**

<b>Action</b>	<b>Timetable</b>	<b>Cost</b>
Supervisors assign cases based on judgment of the match	Near Term	\$0
Encourage reassignment of cases if the facts suggest it	Near Term	\$0
Study relationship between worker capabilities and case requirements	Intermediate	\$0

## 20. TITLE IV E REVENUE REVIEW

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### Background

In reviewing federal revenue, specifically revenue related to Title IV-E, DFPS was found to be operating at an efficient level. Claiming levels, though once high, have been subject to several changes over the past several years impacting the ability of the department to draw federal funds, specifically Title IV-E. Since 2006, the Title IV-E penetration rate (percentage of youth eligible for Title IV-E) has dropped from more than 70% to below 40%. As stated in the preliminary “as-is” report completed by TSG, this reduction is attributed to 1) changes to the calculation of the Title IV-E penetration rate made as part of the Deficit Reduction Act, which brought DFPS’ procedures into line with Federal requirements, 2) continued federal adherence to 1996 AFDC standards, 3) continued emphasis on relative placement, and 4) a federally required revision to procedures related to calculating AFDC income eligibility for families of children entering care.

In aggregate, the impact and rationale surrounding the reduction to the penetration rate is not unique to Texas and is resulting in similar declines to the penetration rates in similar states, nationally. According to a 2010 report by Casey Family Programs, “*Title IV-E Foster Care Penetration Rates, SFY 2010*”, Texas’ penetration rate (48% at the time of the report) was at the top of the second quartile nationally and was roughly equal to the national median (49%).

Texas has been cited by the Administration for Children and Families, Children’s Bureau for the strengths of its eligibility determination processes, which are largely automated and integrated into the IMPACT system.

“We believe that the State’s high level of compliance can be attributed to centralization of the eligibility function at the TDPRS regional level and use of specialized eligibility workers. It is apparent that the State has devoted a high level of management attention and training effort to title IV-E eligibility, including monitoring of title IV-E eligibility processes associated with juvenile justice placements under title IV-E agreements with the Texas Juvenile Probation Commission and Texas Youth Commission.”

Specifically, system strengths identified through the Federal Title IV-E review process included:

- Reviews and court orders are timely and more frequent than required,

- Improved child-specific and well-written court orders,
- Sophistication of CLASS licensing data system,
- The robust SACWIS system, and enhancements supporting IV-E eligibility determination functionality,
- Close coordination between the Court Improvement Program, State Agency and Judiciary, dissemination of suggested legal formats and expansion of specialized “Cluster Courts”, and;
- Well-trained, tenured regional title IV-E eligibility specialists.

Federal reimbursement is also claimed from other sources including Title IV-E Training, Adoption Assistance and Foster Care Candidacy, Temporary Assistance for Needy Families (TANF); and Supplemental Security Income (SSI). Policies and procedures surrounding claiming from these sources were reviewed and federal claiming analyzed in relation to the CPS budget. Overall, findings were in compliance with expected results and State Central Office Staff describe comprehensive procedures for ensuring claiming is appropriately maximized to the degree allowable under federal guidelines. Additionally, determinations surrounding TANF Emergency Assistance eligibility and use of SSI funds to support foster care are well supported by IMPACT. Redetermination timeframes are supported and ongoing eligibility is monitored effectively by the system.

Overall, TSG found the eligibility determination and claiming process to be complete and comprehensive in relation to federal requirements. The process appears to be sufficient for accurately identifying youth eligible for federal reimbursement and appropriately claiming them to the proper funding source. Quality assurance processes are relatively new, but sufficient in scope and content to determine whether eligibility requirements are accurately applied to each case.

#### ***160. Conduct a review of Title IV-E ineligible cases***

TSG recommends a one-time sample of ineligible cases be conducted. The purpose of this exercise will be to determine whether:

1. There are common, correctable issues leading to ineligibility for Title IV-E, such as court order language;
2. There are regional trends emerging related to eligibility; and,
3. Additional training or technical assistance may improve the penetration rate in the state.

Findings from the eligibility review process should be used to inform statewide training needs and incorporated into, the Statewide Training Plan. This could be facilitated through the “Office of Evaluation and Continuous Improvement” recommended in the *Continuous Process Improvement* section of this document.

## 21. BENEFITS CASE

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### *Benefit from reducing turnover*

The real cost of turnover is more straightforward than national average calculations. Today, CPS spends about \$100,000 during the first two years of a new caseworker's tenure, including salary, benefits, training, supervision and other costs. During that time, the worker closes fewer cases than an experienced worker. For example, during the first 12 months AFTER an investigator starts actually closing cases, that worker averages only two case closures per month. This contrasts with 10 to 15 for an experienced worker.

In total, 4Q2013 caseworker terminations were 434 out of 5,397, or an annual rate of 32%. Thus, while CPS has 5,400 caseworkers today, it hires 1,200 caseworkers per year to retain an *experienced* workforce of only about 3,000 who actually close most of the cases. If CPS were to retain 500 of the 1,200 lost workers one extra year, it could save \$25 million<sup>42</sup> on a one-time basis.

Accordingly, if CPS could keep workers with two years' experience one extra year, they would each close 120 to 180 cases in the following year. Accordingly, CPS would have 500 more experienced case workers the next year. Then, assuming they began to leave at a rate of about 10-15% per year like other experienced workers, CPS would have experienced permanent shift in productivity that saved the cost of 500 case workers. The same cases could be closed with 500 fewer case workers. This would be an on-going savings of \$25 million.

Turnover has measurable costs, outlined above. It also creates a negative environment that reduces productivity as well as feeds more turnover. Reducing turnover should help:

- Improve worker attitude and self-image
- Make CPS a more attractive employer, which will improve the quality of new-hires
- Encourage the best workers to stay, not merely those who cannot "get out", raising the overall worker quality
- Reduce stress on the professional development system—increasing training quality
- Allow supervisors to spend more time with workers, better developing their skills
- Improve casework, because fewer cases will be handed off from employees that left

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<sup>42</sup> 500 \* \$50,000

### *Increased productivity of new caseworkers*

Today, caseworkers spend their first months with CPS with limited results. They attend BSD, then enter the field with limited skills. TSG has recommended a different approach through which new caseworkers begin contributing to cases within the first weeks. They do not take cases on themselves, but are training to immediately contribute to cases. This happens through pairing them with experienced workers, who expect substantial contributions to cases. We recommend that new caseworkers can search for collaterals, complete file documentation, assist with scheduling and routing, transport, attend visitations, and so forth. In other words, they can quickly support an experienced caseworker by off-loading real work. This would allow the pair to do more case work than the experienced worker could do alone, thus increasing the unit's productivity.

If a new caseworker were able to add 10% productivity to the experienced worker in the pair, over the 6 months of training, that would add the equivalent of 1/10<sup>th</sup> of a caseworker. Accordingly, the roughly 2,000 case workers with less than 18 months experience would contribute the effect of 200 case workers during the first year. Annualized at the rate of \$50,000 fully loaded, that equates to a savings of \$1,000,000. This is in addition to the benefit of receiving better training by being involved in actual cases during the training period.

### *Purchased services targeted on higher child and family outcomes*

Today, CPS needs to improve its purchased services to determine:

- Whether the services in the plan correspond historically with better outcomes
- Whether families are complying with the services plan, and should expect benefit
- The quality of services being performed – i.e. whether the best services providers are being used to achieve ideal family outcomes

TSG has proposed several changes that will improve use of purchased services:

- Developing a model that conceptually links services to outcomes
- Developing an instrument that helps caseworkers determine the best services for the family
- Increased performance by services vendors to submit reports and invoices in a timely manner
- Better vendor compliance management, to increase vendor performance
- Tying vendor services to outcome measures to identify vendor best practices
- Studying outcomes data to refine the model, instruments and vendor contracts

Assuming these recommendations are successful, the result will be services that are targeted to help families achieve better outcomes. This could result in lower need for services, or (much better) high outcomes through more leveraged use of services.

In order to estimate the potential financial benefit of these recommendations, TSG considered the effect of a percentage increase in effective use. This is challenging since CPS does not yet measure services impact on outcomes. Thus, TSG is forced to deal with assumptions. It seems reasonable that given the low level of services management today, CPS could achieve a 10-25% better use of services through these improvements to services management. CPS spent \$95 million in purchased services in 2013<sup>43</sup>. Saving 10-25% would equate to saving \$10-25 Million annually.

### *More time spent with family*

CPS is in the business of helping families improve the environment for children. That is not directly supported by travel time, time completing paperwork, or time entering data into IMPACT. Accordingly, CPS is likely to serve families better by spending relatively more time with families. What is not clear at this point is whether that means more family time per case, or less time spent administration per case, allowing the caseworker to complete more cases. TSG recommends creating decision-support, case work guides and SDM.

Thus, at the present, TSG assumes that the best model is both.

- A balance of more actual time per case and less administration per case, AND
- Less total time per case because administration decreases more than actual family time increases

When CPS survey respondents indicated that those who actually work in the field only spend 26% of their time with families, no one seemed surprised by the number. Everyone agrees that this important metric needs to be higher.

TSG recommends that CPS begin to explicitly measure time with family by stage of service, and in a qualitative manner. Predictably, merely measuring is likely to increase the time. It is not intended that this metric be used as a means to add significant workload, or be added to the LBB performance measure list, but it be something CPS should measure internally to assure continued monitoring of a family-centric practice.

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<sup>43</sup> See Table 20 in the TSG Assessment Report

A series of QM projects will identify specific systemic changes that can increase actual time with family. TSG anticipates that these will include:

- Travel optimized through better scheduling and unit case coverage
- Efficiencies from having a new caseworker supporting the experienced caseworker
- Completing implementation and improving the mobility tools
- Better use of tools to discover family and child whereabouts, which lead to fewer wasted trips

### ***Better focus on the child and family***

Shifting to a model that spends more effort “listening to the customer” will allow CPS to shift its focus from complying with rules to working more in line with what families really want and need.

TSG anticipates that will lead to:

- Higher compliance
- Services better tailored to achieving high family outcomes
- Lower caseworker stress since they are more attuned to the families
- Lower recidivism, since families better understand and respect the assistance CPS provides

### ***Cases that are better planned reduce caseload and workload***

Today, the work in support of a case is generally understood, but not specifically planned. Accordingly, the worker is never clear when the work is done—until the supervisor and regional director sign off. Furthermore, the work is all incremental, not a deliberately planned set of steps (except as required by policy). TSG makes several recommendations to plan the work of cases with the expectation that this will improve:

- Time spent with family
- Timeliness of case steps
- Completeness of case work
- Ability to take advantage of opportunities to share work with other caseworkers in a synergistic (additive) manner
- Less stress on the family, because the steps are clearer
- Less stress on the caseworker, because the steps are clearer
- Less stress on the supervisor, because the steps are clearer

- Less risk to CPS and the worker in the event that there is an adverse trend in the case— because the worker did what has agreed upon, and because CPS is supported by a plan
- More clear when there are issues of personal misconduct vs. systemic breakdown

### ***Better trained caseworkers work smarter and to better outcomes***

Improving training will assure better consistency and better caseworker preparation.

### ***Clearer policy and practice allow caseworkers to deliver consistently higher quality***

CPS has little visibility into how effective it is in managing casework to rules of policy and practice. Case reads provide a window into policy adherence. However, practice is not completely documented and not directly the subject of case reads. Furthermore, too few cases are read to test individual performance, and there is no practice of using case reads as part of a QM process. Thus, TSG recommendations create a new environment of practice and policy management.

Furthermore, TSG recommendations make policy clearer, assure that workers have better understanding of policy and can easily follow both policy and accepted practice.

### ***Structured decisions allow casework to deliver consistently higher quality***

SDM will increase outcomes, so the evidence says. In addition, it will reduce worker stress as they will be better supported if things go wrong with a case.

### ***A learning organization improves without major external investment every few years***

Following the TSG recommendations will allow CPS to fundamentally change its workforce:

- From receiving modestly relevant “head knowledge” to being trained both in the classroom and through experience
- From workers who receive little training after BSD to workers that actively seek out opportunities to improve themselves
- From a culture that rejects BSD as being irrelevant to one that participates in new worker development
- From learning to be a supervisor after promotion to developing leadership

## ***Lower stress, better supervision, less fear all increase work capability and reduce turnover***

Following the recommended transformation, CPS will have clearer case responsibilities, better guidance for personal performance improvement, mentors to help individuals grow in the organization, better supervision, and a more professional Child Fatality Review process (as child deaths are a leading source of the fear.)

## ***Closing investigations as soon as possible reduces caseload and stress on the child and family***

Today, investigations are open too long. TSG found no one that thought otherwise. Long investigations hurt:

- The caseworker by stressing the workload
- CPS by adding cost
- Both because open cases expose them to risk that a bad event will happen “on their watch”
- The child and family, because the open case creates a pall over the family concerning what might happen as a result of the investigation

## ***Investment Note***

While TSG’s recommendation will result in substantial long-term savings for CPS, an important component of the efforts are the re-organization changes and technology advancements that will improve efficiency and allow greater productivity. To accomplish this, there needs to be a meaningful commitment to improving the organizational structure and technology that may require up-front costs. Without this investment, CPS will be hard-pressed to meet other significant aspects of the Transformation.

## ***Implementation Strategy***

TSG has identified 160 recommendations across all areas of CPS. There are over 90 of these recommendations classified as Near Term which means it is possible to implement them in six months or less. However, TSG does not recommend CPS attempt to implement all of these recommendations. DFPS and CPS leadership should decide which subset of these recommendations will have the highest return on investment and will most directly impact the areas of greatest need. During implementation, TSG recommends CPS introduce change at the pace the front-line caseworkers can accept.



**22. TRANSFORMATION PRIORITY MATRIX**

Area	Recommendation #	Recommendation	Timetable	Investment	Benefit Areas			
					Better management/relationships	Time with Family & Safety	Turnover	Quality
On-Going Initiative Assessment	1	Immediately Implement Sunset Advisory Commission Timeout Advice	Near Term	\$0	✓	✓		
Decision Making	2	Develop and implement a Practice Model	Near Term	\$0	✓	✓		✓
Decision Making	3	Implement SDM	Intermediate	\$2,000,000		✓		✓
Decision Making	4	Update definitions of "safety"	Near Term	\$0		✓		✓
Decision Making	5	Develop a family services instrument	Intermediate	\$0		✓		✓
Decision Making	6	Collaborate on research into predictive analytics	Intermediate	\$0		✓		✓
Decision Making	7	Evaluate effectiveness of instruments and SDM	Long Term	\$0		✓		✓
Decision Making	8	Push decision-making to the field level	Intermediate	\$0	✓	✓		✓
Decision Making	9	Revise supervision of decision-making	Intermediate	\$0	✓	✓		✓
Retention	10	Ease new employees into the job through mentoring	Near Term	\$0	✓	✓	✓	✓
Retention	11	Create performance pairs with new workers	Intermediate	\$0		✓	✓	✓

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Area	Recommendation #	Recommendation	Timetable	Investment	Benefit Areas			
					Better management/relationships	Time with Family & Safety	Turnover	Quality
Retention	12	Talk with every worker in the 18 to 30-month experience range	Near Term	\$0	✓	✓	✓	✓
Retention	13	Put turnover on the critical metrics list for Regional Directors	Near Term	\$0	✓		✓	✓
Retention	14	Announce a 360 feedback program within the next 30 days and conduct it within 60 days	Near Term	\$50,000	✓		✓	✓
Retention	15	Launch a performance recognition campaign	Near Term	\$0	✓	✓	✓	
Recruiting	16	Create and hire to a staffing model, in advance of need	Near Term	\$0		✓	✓	✓
Recruiting	17	Work with Texas higher education schools of social work to promote CPS	Intermediate	\$0			✓	
Recruiting	18	Develop a strategic marketing and recruitment plan	Near Term	\$0			✓	
Recruiting	19	Revalidate the job expectations for the CPS positions	Near Term	\$0			✓	✓
Recruiting	20	Improve the job preview process	Intermediate	\$0	✓		✓	
Recruiting	21	Revalidate and broaden candidate profiles	Near Term	\$0			✓	✓

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Area	Recommendation #	Recommendation	Timetable	Investment	Benefit Areas			
					Better management/relationships	Time with Family & Safety	Turnover	Quality
Recruiting	22	Source hiring process management to vendor	Intermediate	\$0			✓	
Recruiting	23	Improve interviewer preparation	Near Term	\$0			✓	
Recruiting	24	Develop and manage to a standardized and expanded interviewing process	Intermediate	\$0			✓	
Recruiting	25	Refine selection process	Near Term	\$0			✓	✓
Recruiting	26	Improve tracking and management of recruitment	Near Term	\$0	✓		✓	
Prof Development	27	Create a learning organization	Intermediate	\$500,000		✓	✓	✓
Prof Development	28	Improve sequential structuring and make BSD training more practical	Near Term	\$250,000		✓	✓	✓
Prof Development	29	Update BSD learning methods	Near Term	\$0		✓	✓	✓
Prof Development	30	Deliver BSD through mixed methods	Intermediate	\$500,000		✓	✓	✓
Prof Development	31	Redesign curriculum including competency-based learning	Long Term	\$1,000,000		✓	✓	✓
Prof Development	32	Validate competencies and topic areas of BSD	Near Term	\$100,000		✓	✓	✓
Prof Development	33	Review existing OJT activities for relevance	Near Term	\$0		✓	✓	✓
Prof Development	34	Introduce "real" cases early in the BSD	Near Term	\$0		✓	✓	✓

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Area	Recommendation #	Recommendation	Timetable	Investment	Benefit Areas			
					Better management/relationships	Time with Family & Safety	Turnover	Quality
Prof Development	35	academy Develop a mentoring guide and progress tracking tool	Intermediate	\$0		✓	✓	✓
Prof Development	36	Assign BSD trainers to units	Intermediate	\$0		✓	✓	✓
Prof Development	37	Involve CPS unit supervisors in the BSD training progress	Near Term	\$0		✓	✓	✓
Prof Development	38	Create leadership development programs	Long Term	\$0	✓		✓	✓
Prof Development	39	Review and validate topics included in Beginner Manager Training	Intermediate	\$0	✓		✓	
Prof Development	40	Offer ongoing professional development	Intermediate	\$0	✓		✓	
Prof Development	41	Promote informal opportunities and forums for supervisors	Near Term	\$0	✓		✓	
Prof Development	42	Conduct a regular 360 degree program	Long Term	\$0	✓		✓	
Prof Development	43	Identify up and coming leaders, and prepare them for promotion	Long Term	\$0	✓		✓	
Prof Development	44	Involve major universities in building CPS' leadership development program	Intermediate	\$100,000	✓		✓	
Prof Development	45	Develop an internal leadership academy	Long Term	\$100,000	✓		✓	

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Area	Recommendation #	Recommendation	Timetable	Investment	Benefit Areas			
					Better management/relationships	Time with Family & Safety	Turnover	Quality
Prof Development	46	Encourage formal and informal opportunities and forums for senior leaders	Long Term	\$0	✓			
Process	47	Create case guides that will be used to develop case work plans	Long Term	\$0		✓		
Process	48	Revise case process based on SDM	Long Term	\$0		✓		
Process	49	Study link between family situations, interventions and family outcomes	Long Term	\$0		✓		✓
Process	50	Develop family facetime metrics	Long Term	\$0	✓	✓		✓
Process	51	Manage investigations by elapsed time to close	Long Term	\$0	✓	✓		✓
Process	52	Manage conservatorship cases to time to permanence	Long Term	\$0	✓	✓		✓
Process	53	Encourage teamwork within a unit	Near Term	\$0	✓	✓		✓
Process	54	Revise all form letters so they communicate more clearly with families	Near Term	\$0		✓		✓
Process	55	Develop a practice manual	Long Term	\$0	✓	✓		✓
Process	56	Find and eliminate rework when cases are	Near Term	\$0		✓	✓	✓

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Area	Recommendation #	Recommendation	Timetable	Investment	Benefit Areas			
					Better management/relationships	Time with Family & Safety	Turnover	Quality
		handed off to the next stage						
Process	57	Complete the implementation of Mobility	Intermediate	\$0		✓	✓	
Process	58	Support IMPACT Modernization	Near Term	\$0		✓	✓	
Process	59	Reduce documentation required for each case with the courts. Eliminate paper.	Long Term	\$270,000		✓	✓	✓
Process	60	Assigning cases based on the difficulty of the case and worker capabilities	Near Term	\$0	✓	✓	✓	✓
Process	61	Measure and track the cost of policy	Intermediate	\$0		✓	✓	✓
Process	62	Change the travel approval process from three people to one person	Intermediate	\$0	✓	✓	✓	
Process	63	Return file redaction to regions	Intermediate	\$0		✓		✓
Process	64	Eliminate rework at initial FBSS transfer visit	Near Term	\$0	✓	✓	✓	✓
Process	65	Eliminate extra "staffings" recently added into practice	Near Term	\$0	✓	✓	✓	✓
Process	66	Eliminate duplicative approvals	Near Term	\$0	✓	✓	✓	✓
Process	67	Review Family Law sections for recommendations on streamlining	Intermediate	\$0	✓	✓		

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Area	Recommendation #	Recommendation	Timetable	Investment	Benefit Areas			
					Better management/relationships	Time with Family & Safety	Turnover	Quality
Technology/Mobility	68	Improve IMPACT ease of use	Long Term	\$7,830,000		✓	✓	
Technology/Mobility	69	Improve requests for purchased family services	Long Term	\$425,000	✓	✓	✓	
Technology/Mobility	70	Provide information from other state systems	Long Term	\$700,000		✓	✓	
Technology/Mobility	71	Reduce need to print, scan and fax documents	Long Term	\$725,000		✓	✓	
Technology/Mobility	72	Expand Spanish language versions	Long Term	\$260,000		✓	✓	✓
Technology/Mobility	73	Link email correspondence with the IMPACT case file	Long Term	\$475,000		✓	✓	✓
Technology/Mobility	74	Improve Outlook training, and email and text message distribution lists	Near Term	\$90,000		✓	✓	
Technology/Mobility	75	Implement workflow management	Long Term	\$3,550,000	✓	✓	✓	✓
Technology/Mobility	76	Adapt scheduling support software to assign by workload	Near Term	\$650,000	✓	✓	✓	
Technology/Mobility	77	Use software to view work by geographic location	Intermediate	\$300,000	✓	✓	✓	
Technology/Mobility	78	Create an IMPACT enhancement request process	Near Term	\$50,000	✓	✓		

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Area	Recommendation #	Recommendation	Timetable	Investment	Benefit Areas			
					Better management/relationships	Time with Family & Safety	Turnover	Quality
Technology/Mobility	79	Improve Mobility	Long Term	\$1,000,000		✓	✓	
Technology/Mobility	80	Time with Families Tracking Tool	Near Term	\$280,000	✓	✓		
Technology/Mobility	81	Keep forms in sync with practice	Intermediate	\$350,000		✓	✓	
Technology/Mobility	82	Improve bandwidth	Intermediate	\$75,000		✓	✓	
Organization	83	Train on expanded systems capabilities	Intermediate	\$560,000	✓	✓	✓	✓
Organization	84	Improve the flexibility regional directors have to deploy personnel	Near Term	\$0	✓	✓	✓	
Organization	85	Move regionally located personnel to the regional organization	Near Term	\$0	✓	✓	✓	
Organization	86	Continue to make use of the master and special investigators	Near Term	\$0		✓	✓	
Organization	87	Review other specialist positions for numbers and usage	Near Term	\$0		✓	✓	
Organization	88	Increase HST and Administrative support	Intermediate	\$0		✓	✓	
Organization	89	Restructure State Office	Near Term	\$0	✓			
Policy	90	Develop a new policy strategy	Near Term	\$0		✓		✓
Policy	91	Eliminate PSAs as a method for developing and distributing policy	Near Term	\$0		✓		✓

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Area	Recommendation #	Recommendation	Timetable	Investment	Benefit Areas			
					Better management/relationships	Time with Family & Safety	Turnover	Quality
Policy	92	Create one statewide policy unit	Near Term	\$0	✓	✓		
Policy	93	Refresh the entire policy handbook, and create a practice handbook	Intermediate	\$0		✓		
Policy	94	Sunset policy every five years	Long Term	\$0		✓		
Policy	95	Accompany policy with an assessment of practice and staffing impact	Near Term	\$0		✓		
Policy	96	Implement a collaborative writing tool and process	Near Term	\$0		✓		
Policy	97	Manage to a policy calendar and timetable	Near Term	\$0	✓	✓		
Policy	98	Distribute policy directly rather than "cascade" it	Near Term	\$0	✓	✓		
Policy	99	Implement distribution lists for all aspects of email and text messages	Near Term	\$0	✓			
Policy	100	Link policy and practice manuals to IMPACT	Long Term	\$100,000	✓	✓		
Policy	101	Release training material along with new policy	Near Term		✓	✓		
Policy	102	Improve the policy manual navigation and	Intermediate	\$100,000		✓		

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Area	Recommendation #	Recommendation	Timetable	Investment	Benefit Areas			
					Better management/relationships	Time with Family & Safety	Turnover	Quality
		search						
Policy	103	Develop a formal process of policy support	Near Term	\$0	✓	✓		
Policy	104	Evaluate policy distribution effectiveness	Near Term	\$0	✓	✓		✓
Quality	105	Integrate QA efforts into a single organizational unit	Near Term	\$0	✓	✓		✓
Quality	106	Expand QA quarterly reviews	Near Term	\$0	✓	✓		✓
Quality	107	Increase the number of reviews at local level	Near Term	\$0		✓		✓
Quality	108	Adapt a quality management approach to CPS	Near Term	\$0		✓		✓
Quality	109	Establish regional and state-wide QM projects	Near Term	\$0		✓		✓
Quality	110	Adapt data sourcing for quality management	Intermediate	\$0		✓		✓
Metrics	111	Develop an executive dashboard	Near Term	\$25,000	✓			
Metrics	112	Implement management reporting based on Balanced Score Card	Intermediate	\$200,000	✓			
Metrics	113	Implement the tools needed for reporting	Intermediate	\$0	✓			

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Area	Recommendation #	Recommendation	Timetable	Investment	Benefit Areas			
					Better management/relationships	Time with Family & Safety	Turnover	Quality
		management metrics						
Metrics	114	Develop management reporting capability over the next 12 months	Intermediate	\$0	✓			
Metrics	115	Develop tolerance levels for each concurrent and lagging metric	Intermediate	\$0	✓			
Metrics	116	Recommendation of example management metrics	Intermediate	\$0	✓	✓	✓	✓
Budget	117	Value transparency of assumptions, financial analysis, and assumptions	Near term	\$0	✓			
Budget	118	Create a needs based budget request process from the regions	Intermediate	\$0	✓			
Budget	119	Improve timeliness of Regional Directors receiving financial information	Intermediate	\$0	✓			
Budget	120	Empower Regional Directors to operate without individual Action Memos	Near Term	\$0	✓			
Budget	121	Create future incentives in regional budget allocations	Near Term	\$0	✓			
Purchased Client Services	122	Move to an eSourcing model for service providers	Intermediate	\$300,000	✓			

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Area	Recommendation #	Recommendation	Timetable	Investment	Benefit Areas			
					Better management/relationships	Time with Family & Safety	Turnover	Quality
Purchased Client Services	123	Move to an integrated data source showing all types of services available	Long Term	\$30,000		✓		
Purchased Client Services	124	Implement an IVR for services providers to report service provision	Long Term	\$150,000	✓	✓		✓
Purchased Client Services	125	Develop a model for recommending the level and type of services	Intermediate	\$0	✓	✓		✓
Purchased Client Services	126	Attract attention to pockets of the state that are underserved by providers	Long Term	\$0		✓		✓
Purchased Client Services	127	Consider pricing incentives for service providers	Long Term	\$0		✓		
Purchased Client Services	128	Improve Child Well-Being, Health, and Primary Prevention	Long Term	\$0	✓	✓		
Purchased Client Services	129	Expand its connection to the Faith Based community to fill in gaps in services	Near Term	\$0		✓		
Communications and Government Relations	130	Consolidate the messaging function under one senior staffer	Near Term	\$0	✓			
Communications and Government	131	Move Media Managers to State Office	Near Term	\$0	✓			

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Area	Recommendation #	Recommendation	Timetable	Investment	Benefit Areas			
					Better management/relationships	Time with Family & Safety	Turnover	Quality
Relations								
Communications and Government Relations	132	Provide media training to DFPS and regional leadership	Near Term	\$0	✓			
Communications and Government Relations	133	Develop a robust social media capability	Intermediate	\$0	✓			
Communications and Government Relations	134	Accelerate and make regular an external newsletter	Near Term	\$0	✓			
Communications and Government Relations	135	Produce simplified media guidelines for CPS	Near Term	\$0	✓			
Communications and Government Relations	136	Create a weekly report to offer newsworthy stories to share	Near Term	\$0	✓			
Communications and Government Relations	137	Build an updated stakeholder map	Near Term	\$0	✓			

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Area	Recommendation #	Recommendation	Timetable	Investment	Benefit Areas			
					Better management/relationships	Time with Family & Safety	Turnover	Quality
Communications and Government Relations	138	Encourage cross-training for communications functions	Near Term	\$0	✓			
Communications and Government Relations	139	Increase media ride-alongs and other activities	Near Term	\$0	✓			
Communications and Government Relations	140	Coordinate better with Budget staff	Near Term	\$0	✓			
Communications and Government Relations	141	Ensure there is a well-thought out justification for every Budget request	Intermediate	\$0	✓			
Communications and Government Relations	142	Government relations understand what the agency is requesting	Intermediate	\$0	✓			
Communications and Government Relations	143	Handle ALL legislative requests	Near Term	\$0	✓			
Communications	144	Develop a key set of metrics for	Near Term	\$0	✓			

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Area	Recommendation #	Recommendation	Timetable	Investment	Benefit Areas			
					Better management/relationships	Time with Family & Safety	Turnover	Quality
and Government Relations		policymakers						
Communications and Government Relations	145	Periodically send out positive stories to legislators	Near Term	\$0	✓			
Communications and Government Relations	146	Send positive press articles to Legislators	Near Term	\$0	✓			
Communications and Government Relations	147	Offer legislators/staff Ride-Alongs	Near Term	\$0	✓			
Communications and Government Relations	148	Proactively offer periodic briefings to legislators/staff	Near Term	\$0	✓			
Communications and Government Relations	149	Set a goal to contact every legislator once per quarter	Near Term	\$0	✓			
Communications and Government	150	Gov't Relations involved when CPS is contacted by a legislator or staff	Near Term	\$0	✓			

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Area	Recommendation #	Recommendation	Timetable	Investment	Benefit Areas			
					Better management/relationships	Time with Family & Safety	Turnover	Quality
Relations								
Communications and Government Relations	151	DFPS program offices to inform government when they are contacted	Near Term	\$0	✓			
Communications and Government Relations	152	Government Relations should be informed by CPS of stakeholder contacts	Near Term	\$0	✓			
Child Fatality Review	153	Add a child fatality review process logic model to the Protocol Guidebook	Near Term	\$0	✓			
Child Fatality Review	154	Enhance child fatality review process by using of guided checklists	Near Term	\$0	✓			
Child Fatality Review	155	Track, respond to and document all communications Committees/Teams	Near Term	\$0	✓			
Child Fatality Review	156	Incorporate findings in the CPS public communications plan	Near Term	\$0	✓			
Work scheduling	157	Supervisors assign cases based on judgment of the match	Near Term	\$0	✓	✓	✓	✓
Work scheduling	158	Encourage reassignment of cases if the facts suggest it	Near Term	\$0	✓	✓	✓	✓

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Area	Recommendation #	Recommendation	Timetable	Investment	Benefit Areas			
					Better management/relationships	Time with Family & Safety	Turnover	Quality
Work scheduling	159	Study relationship between worker capabilities and case requirements	Intermediate	\$0	✓	✓	✓	✓
IV-E	160	Review Title IV-E ineligible cases	Near Term	\$0	✓			
Total Investment				<u>\$23,095,000</u>				

**APPENDIX A: STEPHEN GROUP ASSESSMENT PROJECT TEAM**

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The Stephen Group (TSG) assessment project team consists of the following experienced professionals:

- John Stephen – Project lead, former Commissioner of New Hampshire’s Department of Health and Human Services and Assistant Commissioner of the Department of Safety. Led similar projects in a number of states
- Will Oliver – Expertise in business process re-engineering, improved child protection and sourcing strategy for six states including Florida and Indiana
- John Cooper – CEO of a child welfare not-for-profit and former Assistant Secretary of Operations for Florida CPS. Led the Florida CPS reengineering project
- David DeStefano – Consultant for public/private partnerships, performance based contracting, program evaluation, SACWIS, and revenue maximization
- Jeff Schilz – Former policy advisor and budget director to Governor Mark Sanford, SC, focusing on HHS, Social Services, and Department of Juvenile Justice
- Richard Kellogg – Served as Commissioner, Deputy Director, and Director of Integrated Services for the states of Virginia, Tennessee, New Hampshire and Washington – Medicaid, MH/DD/SAS, LTS, Comprehensive IV-E, SE, and JJ Services
- Martha Tuthill – Senior Consultant for Florida CPS Transformation project, assisting team with vendor management, systems support and organizational improvements, former Accenture partner
- Art Schnure – Technology lead with state government health and human services technical initiative experience over the last 17 years, including modernizations of the protective services system in Rhode Island and a child care systems in Massachusetts
- Greg Moore - Served as a former state public affairs, legislative and policy director for divisions of children youth and families and juvenile justice
- Stephanie Anderson – Editorial and Project Assistant, former Executive Assistant with Texas Department of Protective and Regulatory Services

Some relevant recent projects of the TSG team include:

- Florida Department of Children and Families – CPS Transformation
- Indiana Family and Social Service Administration – Process improvement and sourcing

- Texas Department of Protective and Regulatory Services – Decrease child fatalities; reduce caseworker turnover; coordinate community-based organizations; sourcing
- Pennsylvania Department of Human Services – Improve child welfare documentation, eligibility, and federal claiming
- New Hampshire Department of Health and Human Services – Reorganization of Department of Health and Human Services
- South Carolina Department of Social Services – Budgeting and process improvement
- Mississippi – IAPD and business case for SACWIS integration with Medicaid)
- Maine – budget cost savings and best practice analysis for Governor’s Office of Policy Management
- Florida – Benefit Recovery Assessment and Implementation

## APPENDIX B: REVIEW OF PRACTICE MODELS AND DECISION MODELS

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### Practice Models

A Child Welfare Practice Model is simply defined as the basic principles and approaches that guide a child welfare agency's work.

“Child Safety, first and foremost” is the essential reason why Child Protective Services is one of the most important and most difficult of “Human Services” to conceptualize, plan, implement, and evaluate. The challenge includes deciding on the degree of risk for immediate and emergent danger to a child's safety and must take into account many factors in a compressed period of time including child/family environment, family constellation and dynamics, developmental factors key to child wellbeing, family strengths for and approaches to assuring protective capacity, permanency planning, cultural competence, and community resources. Given the importance and breadth of the child protection mission it is critical that agency leadership and staff have a clear understanding of how to get the job done right and a common focus on standardizing best practice across the enterprise.

It is critical to assure organizational effectiveness of a CPS Practice Model that there is an on-going integration strategy with operational case practice, on-going assurance of safety and risk management, continuous learning/training, linkage with Quality Assurance and Quality Improvement, use of mission important data, and IT operability.

The Children's Bureau (DHHS/Administration for Children and Families) states that “Having a clearly defined practice model can help child welfare agencies **better direct their work**, partner with families, service providers and other stakeholders, **and achieve positive outcomes.**”

The National Child Welfare Resource Center for Organizational Improvement in partnership with the Muskie School of Public Service (University of Southern Maine) released “The Guide for Developing and Implementing Child Welfare Practice Models” in October, 2012. This report articulates a comprehensive pathway to conceptualizing and implementing a useful Practice Model framework targeted at positive outcomes as follows:

- Practice models guide the work of a child welfare agency and improve outcomes for children, youth and families.

- A clearly articulated practice model: helps child welfare executives, administrators and managers
- identify the outcomes they hope to achieve;
- develop a vision and consistent rationale for organizational and policy decisions
- Decide how to use agency resources;
- Define staff performance expectations;
- Develop an array of services;
- Create a qualitative case review system;
- Collaborate with families and youth
- Work across systems.
- Help supervisors fulfill their role as keepers of the agency's culture with responsibility for training, guiding and supporting frontline staff;
- Monitoring and assessing staff performance and child/family outcomes;
- Modeling the agency's values and approach to working with families; and observing and advocating for needed change.
- Gives child welfare workers
  - A consistent basis for decision making;
  - Clear expectations and values for their approach to working with families, children, and youth;
  - A focus on desired outcomes;
  - Guidance in working with service providers and other child-serving systems; and
  - A way to evaluate their own performance
  - Encourages the community, the agency's network of stakeholders, and children, youth and families to engage with the agency in fulfilling its mission.
- Ensure effective and consistent practice

Each state has taken a somewhat different approach to the development and content of a Practice Model. The Stephen Group recommends a comprehensive approach, such as the Iowa and New Hampshire models, as they address and integrate an implementation strategy that addresses safety and risk, staff and supervisor casework practice, staff qualifications, training in a learning environment, operational academic partnership, aligned Quality Assurance and Improvement actions, and effective SACWIS modifications to support the enterprise.

The entire Child Welfare Agency organization needs to be completely dedicated to the implementation of a Practice Model in order to attain a high probability of success. The National Child Welfare Resource Center for Organizational Improvement housed at the Muskie School of Public Service (University of Southern Maine) recommends a dynamic strategic planning approach for Practice Model implementation:

**Leadership:** commitment to the Practice Model; pace implementation and be flexible; be inclusive and transparent

**Capacity:** train managers, supervisors, staff, and stakeholders; designate staff and support champions; align staff selection and evaluation systems

**Organization:** evaluate progress and outcomes through Quality Improvement; use feedback loops at all levels of the organization and externally; revise Policy and create relevant tools.

Regardless of the approach chosen it is critical that a Texas CPS Practice Model be vibrant, transparent, meaningful to staff, children, families, Legislators, Judges, and the public; used on a day to day basis; and periodically evaluated based on outcomes for adaptation, changes in Federal and state law, and new knowledge.

## **The Iowa Child Welfare Practice Model**

The Iowa Child Welfare (DHS) represents a comprehensive approach “to define who we serve and the intended outcomes of child welfare services, as well as the guiding principles for our work and expectations related to practice and program and organizational capacity.” The Iowa model is basically strengths based and family centered model of practice at all levels.”

Iowa Child Welfare states its responsibility as “providing child welfare services to those children in which child abuse has occurred and those at high risk for abuse and neglect.” Iowa defines four factors to determine whether the state should open a case: 1) Age of Child; 2) Outcome of abuse investigation (which includes a safety assessment completed based on the initial face to face home visit within 24 hours); 3) Continuing risk factors; and 4) Court Action for Children in Need of Assistance (CINA Assessment) and state/DHS supervision.

Child Welfare Outcomes are clearly articulated in the Iowa Model of Practice:

- Safety for Children
  - Children are, first and foremost, protected from abuse and neglect.

- Children are safely maintained in their homes whenever possible and appropriate.
- Permanency
- Children have permanency and stability in their living situations.
- The continuity of family relationships and connections is preserved for children.
- Academic Preparation and Skill Development Child and Family Well-Being
  - Children receive appropriate services to meet their educational needs.
- Well-Being Child and Family Well-Being
  - Families have enhanced capacity to provide for their children’s needs.
  - Children receive adequate services to meet their physical and mental health needs

Iowa’s Guiding Principles for their work with “children and families, each other, and the community” are Customer Focus, Excellence, Accountability, and Teamwork.

“Frontline Practice” is clearly stated for Intake and Assessment (ongoing); Case Planning and Review, Services Provision In and Out of Home, Social Worker Visits, Child Health, Family Relationships, Health and Education, Permanency and Stability, Transition for Older Youth, Standards for Cultural Competency, and Standards Related to Transitions and Case Closure.”

It is important to note that the Iowa Employee’s Manual (12/16/11) for Child Welfare includes a comprehensive listing and explanation of all forms with linkages as well as “How Do I” guides (Case Planning, Case Management, CPS Assessment, etc.) that are linked to concise employee guidance clearly articulated by Policy, Procedure, and Practice guidelines consistent with the Iowa Child Welfare Practice Model.

### **The New Hampshire Practice Model**

New Hampshire assertively connected a CFSR PIP project with a comprehensive Practice Model Development Strategy that was designed to provide the fundamental case work practice foundation, increase efficiency and assure sustainability. The NH Department of Children, Youth, and Families established “Guiding Principles” (Safety, Permanency, Well Being, Family Choice, Family Voice, Prevention, and Restorative Justice) designed to inform the planning process charged with developing the Practice Model. A Design Team was chosen from across all district offices in the state and extensive external stakeholders and Youth representation. DCYF

augmented a partnership relationship with the Center for Professional Excellence in Child Welfare of the University of New Hampshire. A participative process focused on Safety Assessment, Family Engagement, and Culture and Climate within the context of the Guiding Principles.

New Hampshire's approach to Safety Assessment is noteworthy. Rather than getting stuck in the actuarial versus clinical judgment debate the Design Team chose to integrate and update the Structured Decision Making process in place with the clinical judgment aspects of the Signs of Safety model, with safety being the primary focus throughout the case. In fact, DCYF requires a safety review every 14 days for as long as danger exists in a child's home. Additionally, the New Hampshire Practice Model operationally integrates Safety Assessment, Family Assessment and Inclusive Reunification, Solution Based Casework (SBC is an evidence based case work approach that focuses on family partnership, consensus safety related problem identification, focus on everyday life patterns specific to safety risks, and consensus target solutions for prevention and safety enhancement. Christensen, University of Louisville), Solution Based Family Meetings, a "Youth Pool" for children in care direct participation, and Practice and Supervisory Standards and Training into one integrated Practice Model.

Integration, sustainability, and professional development have been augmented by updating SACWIS to accommodate new safety and risk assessment instruments. Sustainability is anchored through the DCYF Bureau of Organizational Learning and Quality Improvement based on staff training being provided by the UNH Center for Professional Excellence in Child Welfare. Professional development is supported by a continuous learning environment, targeted supervisory training and an integrated approach to quality assurance and improvement based on data analytics.

### **The Florida Practice Model**

Florida has taken a brief and direct systemic approach to defining and communicating its practice model. The model is based on Vision, Goals, and Seven Practices as follows:

**Vision:** Every child in Florida thrives in a safe, stable and permanent home, sustained by nurturing relationships and strong community connections.

**Goals:** Safety; Permanency; Child Well-Being; Family Well-Being

Seven Professional Practices: Engage the family; Partner with all involved; Gather information; Assess and understand information; Plan for Child Safety; Plan for family change; Monitor and adapt case plans

## Survey of the Literature Concerning Decision Models

There is an ample body of knowledge, research, and state experience regarding the important process of assessing safety risks and protective capacities from the initiation of a CPS investigation. Texas CPS has substantial professional knowledge regarding risk factors, assessment methods, and statistical analysis. These assets will be a key component, along with leadership and direction, supporting the success of moving forward in the development and implementation of a comprehensive Safety and Risk Assessment methodology, associated decision making logic that supports critical thinking and in the field decision-making.

Fundamentals are important. The Center for Disease Control and Prevention (CDC Website/Child Maltreatment and Protective Factors) explains the following Risk and Protective Factors:

### *Risk Factors for Child Maltreatment*

A combination of individual, relational, community and societal factors contribute to the risk of child maltreatment. Although children are not responsible for the harm inflicted upon them, certain characteristics have been found to increase their risk of being maltreated. Risk factors are those characteristics associated with child maltreatment—they may or may not be direct causes.

#### Risk Factors for Victimization: Individual Risk Factors

- Children younger than 4 years of age
- Special needs that may increase caregiver burden (e.g., disabilities, mental retardation, mental health issues, and chronic physical illnesses)

#### Risk Factors for Perpetration: Individual Risk Factors

- Parents' lack of understanding of children's needs, child development and parenting skills
- Parents' history of child maltreatment in family of origin
- Substance abuse and/or mental health issues including depression in the family

- Parental characteristics such as young age, low education, single parenthood, large number of dependent children, and low income
- Non-biological, transient caregivers in the home (e.g., mother's male partner)
- Parental thoughts and emotions that tend to support or justify maltreatment behaviors

## Family Risk Factors

- Social isolation
- Family disorganization, dissolution, and violence, including intimate partner violence
- Parenting stress, poor parent-child relationships, and negative interactions

## Community Risk Factors

- Community violence
- Concentrated neighborhood disadvantage (e.g., high poverty and residential instability, high unemployment rates, and high density of alcohol outlets), and poor social connections.

## *Protective Factors for Child Maltreatment*

Protective factors buffer children from being abused or neglected. These factors exist at various levels. Protective factors have not been studied as extensively or rigorously as risk factors. However, identifying and understanding protective factors are equally as important as researching risk factors. There is scientific evidence to support the following protective factor:

### Family Protective Factors

- Supportive family environment and social networks

Several other potential protective factors have been identified. Research is ongoing to determine whether the following factors do indeed buffer children from maltreatment.

### Family Protective Factors

- Nurturing parenting skills
- Stable family relationships
- Household rules and child monitoring
- Parental employment

- Adequate housing
- Access to health care and social services

Caring adults outside the family who can serve as role models or mentors

Community Protective Factors

- Communities that support parents and take responsibility for preventing abuse”

### *New York State Definitions of Safety, Immediate and Impending Danger*

As a state New York has been challenged by many similar and some dissimilar challenges to assuring a safe and protected life for each child that comes in contact with the Child Welfare function.

The New York Child Welfare system is structured by counties so it was critical for the state to have operational definitions of “Safety” and “Immediate” and “Impending” Danger as a foundation for standard practice in the field.

**Safety:** “A child is SAFE when there is no immediate or impending danger of serious harm to a child’s life or health as a result of acts of commission or omission (actions or inactions) by the child’s parents or caregivers.”

**Safety Factor:** “A behavior or condition, or circumstance that has the potential to place a child in immediate or impending danger of serious harm.”

**Immediate Danger:** “A child is in immediate danger when presently exposed to serious harm. In deciding whether the child(ren) is in immediate or impending danger, consider the following:

- The seriousness of the behaviors/circumstances reflected in the Safety Factor;
- The number of Safety Factors present; The degree of the child(ren)’s vulnerability and need for protection; and
- The age of the child(ren).

**Impending Danger:** “A child is in Impending danger when exposure to serious harm is emerging, about to happen, or is a **reasonably foreseeable** consequence of current circumstances. In deciding whether the child(ren) is in immediate or impending danger, consider the following:

- The seriousness of the behaviors/circumstances reflected in the safety factor;

- The number of safety factors present;
- The degree of the child(ren)’s vulnerability and need for protection; and
- The age of the child(ren).”

(Diane DePanfilis, Ph. D., MSW, University of Maryland School of Social Work: 10/29/13)

***Consensus –Clinical Judgment and Actuarial Based Safety and Risk Assessment Methods***

In many respects the debate concerning the choice of Consensus/Clinical Judgment based assessment and/or Actuarial based assessment is not the point. States need to decide on what works best for their Child Welfare systems and many states have chosen a mix or hybrid of consensus/clinical judgment and actuarial assessment methods. Nevertheless, actuarial based assessments have repeatedly been proven to be more accurate in predictive validity specific to prediction of future violence (“Sixty Six Years of Research on the Clinical versus the Actuarial Prediction of Violence”: N Zoe Hilton, Grant T Harris, Marnie E Rice; Counseling Psychologist, 5/2006); “The Actuarial Model of Violence Risk Assessment for Persons with Mental Disorders”; John Monahan, et al; Psychiatric Services; 7/2005).

Breitenstein (2011) considers the matter “Settled Science” in Child Welfare and notes the following cites in this regard: 1) B. Rittner (Children and Youth Service Review, Vol. 24, No. 3, March 2002, pages 189-207); 2) Evidence for Practice: “Risk and Safety Assessment in Child Welfare: Instrument Comparisons, No. 2, July 2005 3) W. Johnson: Child Abuse and Neglect, 35, 1, pages 18-28: “The Validity and Utility of the California Family Risk Assessment Under Practice Conditions in the Field: A Prospective Study”; and 4) A. D’Andrade, MJ Austin, and A. Benton: Journal of Evidence-Based Social Work, 5 (102), pages 31-56; 2008, “Risk and Safety Assessment in Child Welfare: Instrument Comparisons”.

Table 5 - The Debate over Actuarial Based Judgment<sup>44</sup>

Attributes of Actuarial Based Judgment	Actuarial Instruments Criticized for:
<ul style="list-style-type: none"> <li>• Less Bias (Fontes, 2008)</li> <li>• Use statistics to weight factors to predict the future</li> <li>• Often statistical analysis is done in locality where the instrument is used</li> </ul>	<ul style="list-style-type: none"> <li>• Not using or curtailing the clinical judgment of the caseworker</li> <li>• Basis for judgment on a factor that is statistically associated with recurrence of maltreatment, and may not appear to be causally related to the outcome. This may cause caseworkers to</li> </ul>

<sup>44</sup> “Safety Assessment” PowerPoint: L. Breitenstein, Ph. D. 2011. Stephen Group Adaptation

<ul style="list-style-type: none"> <li>• Uses fewer factors than Consensus Based</li> <li>• Factors are scored and summed into an overall risk score</li> <li>• Families are rated low, medium and high (or numerical scale) and receive different service responses</li> <li>• More reliable and valid questions</li> </ul>	<p>discount the value because they cannot understand the theory, math, or reason behind the score.</p> <ul style="list-style-type: none"> <li>• (Evidence for Practice, UC Berkley, 2009)</li> </ul>
<p>Attributes of Consensus Based Judgment</p>	<p>Consensus Instruments Criticized for:</p>
<ul style="list-style-type: none"> <li>• Takes a comprehensive approach</li> <li>• Items based on maltreatment theories</li> <li>• Items often shared across instruments (safety/risk)</li> <li>• Sometimes numerical scores are given</li> <li>• Tend to use a single tool for all types of maltreatment reports</li> <li>• Can structure information for clinical assessments of risk</li> <li>• Helps document the decision</li> </ul>	<ul style="list-style-type: none"> <li>• Some argue that more information equates to better decisions</li> <li>• Poorly defined measures (nebulous, ambiguous, subjective)</li> <li>• Inconsistency in types of variable</li> <li>• Use some variables to predict all types of abuse, neglect, sexual abuse</li> <li>• Less weight given to recurrence of maltreatment</li> <li>• Reliance on variables for which there is no research</li> <li>• (Evidence for Practice; UC Berkley, 2009)</li> </ul>

In a proprietary presentation to the Florida Department of Children and Families (9/14/2011) IBM-Q Linx presented a “Proof of Concept” research model on the New York State Child Protection Safety Assessment. The model utilized historical intake data, an analysis of the data set to identify children “at risk of harm”, compared the assessment data produced by the analysis to the assessments of the OCFS staff for the same data set and discussed the findings with OFSC key staff. The results indicated 90% accuracy in the prediction of substantiated and unsubstantiated cases of child abuse and neglect from the data set analysis model. The vendor noted the inclusion of the following 22 data elements in the model:

- Caretaker previously committed or allowed others to abuse or maltreat child
- Caretaker’s current alcohol abuse seriously affects his/her ability to care for child
- Caretaker’s current drug abuse seriously affects his/her ability to care for child
- Child has or is likely to experience physical or psychological harm due to domestic violence
- Caretaker’s mental illness/developmental disability impairs ability to supervise, protect or care for child

- Caretaker is violent and appears out of control
- Caretaker is unable/unwilling to meet child's basic needs for food, clothing, shelter and/or medical care
- Caretaker is unwilling/unable to provide adequate supervision of child
- Caretaker caused serious physical harm to child or has made a plausible threat of serious
- Caretaker views/describes/acts negatively toward child and/or has extremely unrealistic expectations of child
- Child's whereabouts are unknown, or the family is about to flee or refuse access to the child
- Caretaker caused serious physical harm to child or has make a plausible threat of serious harm
- Caretaker views/describes/acts negatively toward child and/or has extremely unrealistic expectations of child
- Child's whereabouts are unknown, or the family is about to flee or refuse access to the child
- Current allegation or history of sexual abuse and caretaker is unable/unwilling to adequately protect child
- Physical living conditions are hazardous
- Child is afraid of or extremely uncomfortable around people living in or frequenting the home
- Child has Positive Toxicology for drugs and/or alcohol
- Child is on sleep apnea monitor
- Weapon noted in CPS report or found in the home
- Other/criminal activity (specify):
- No safety factors identified

## Safety and Risk Assessment Methods

Approximately 40 state Child Welfare agencies have implemented Safety and Risk Assessment models that represent well-designed and tested instruments that provide a platform for implementation, training, fidelity, some adaptation, and, potentially, a multi-state data base that can be adapted to a predictive analytical assessment method for further research and refinement.

SDM is used in 23 states. Eleven states use SDM alone while 12 states use SDM in combination with Signs of Safety and 5 states use SDM in combination with Action/NRCCPS. Signs of

Safety is used in 11 states. Action/NRCCPS is used in 17 states, 11 alone. Ten states use other instruments or self-developed tools, Texas being one. (Source: SACHS/Casey Family Foundation; 11/2012) The Texas Safety and Risk Assessment instruments were initiated in the mid-1990s and have been updated several times.

### ***Structured Decision Making***

SDM was created by the Children's Research Center of the National Council on Crime and Delinquency. NCCD was started in 1907 and launched the Center for research in 1993 for the purpose of implementing actuarial risk based assessment in child welfare. In 2011 CRC started an initiative to incorporate research based assessments into a unified practice approach for child welfare.

The SDM model is consistent with the TSG recommendation that CPS makes a decision on and implement a comprehensive Practice Model. The conceptualization of the SDM framework is based on a state's Practice Model and identification of the elements of critical thinking with and without assessment instruments through the life of a case. Implementation in a county, region, or state starts by the development of a partnership "Plan for Success" between the state and NCCD Center for Research/SDM with both parties bringing knowledge to the table. Identified work groups field test and may adjust the instrument to some degree to fit local conditions based on data analysis. A mutual agreement based on Practice Model, Organization Support from leadership, Policy and Procedure, Staff Development and the Implementation/Roll-Out Plan are elements of the Plan for Success. Local capacity and leadership are important factors in a successful implementation effort. Depending on scope and size three to six months are achievable time period for both developing Plan for Success, Implementation/Roll-Out strategy and timeline and staff training. The SDM implementation may include the entire framework or specific elements. Implementation planning, support, and data management/analytics training and assistance services are available. Cost depends on what the state wants NCCD/SDM to do on the ground, time, and travel. NCCD/CRC/SDM is a non-profit entity.

SDM strongly believes that assessment and assurance of Safety begins on "the first day" and is compatible with the TSG recommendation that CPS adopt and implement a revised Safety Assessment instrument and decision logic model that is completed within 24 hours of the initial face to face home visit. The SDM model includes two suites of assessment tools. The SDM Child Protection model includes the following assessment functions: Intake, Safety, Risk, Family Strengths and Needs, Risk: in-home services, and Reunification. The Foster Care/Placement model includes: Support, Placement, Provision of Care and Placement Safety.

The SDM model of child safety and risk assessment includes two suites of assessment tools. The SDM Child Protection model includes the following assessment functions: Intake, Safety, Risk, Family Strengths and Needs, Risk: in-home services, and Reunification. The Foster Care/Placement model includes: Support, Placement, Provision of Care and Placement Safety.

### *Signs of Safety*

The Signs of Safety Model was developed in Western Australia (Turnell/Edwards) and focuses on casework practice. Based on a close working with the family, the model focuses on danger and strengths/safety factors in the family throughout the case. The model has been researched in several settings with positive findings in recent adaptation in Minnesota. The model is highly adaptive to an individual state or country's (implemented in Australia, England, Denmark, and the United States) needs. There are at least ten Signs of Safety licensed consultants/trainers available in the US.

### *Action/NRCCPS*

The Action (for Child Protection)/NRCCPS (National Resource Center for Child Protective Services) is based on a comprehensive Practice Model that is integrated through organization/systems, leadership, decision making solutions, and work process and systems. Design, implementation, model improvement, and staff development services are available.

### *The Iowa Model of Safety and Risk Assessment*

Iowa's approach to safety, risk assessment, and decision making is of note based on the state's integrated Practice Model noted above.

### **Safety Assessment:**

Iowa conducts Safety Assessments on reported cases within 24 hours and utilizes a Safety Assessment Instrument (Form 470-4132; Rev. 7/09) that consists of:

- Signs of Present or Impending Danger: 3 questions (All questions are Yes/No in format)
- Current Parent/Caretaker Capabilities: 3 questions
- Current Family Safety: 6 questions
- Current Family Interactions: 1 question
- Current Home Environment: 1 question
- Narrative Sections: Threats, Child, Vulnerability, Protective Capacity
- Safety Decision:
- Safe: No Risk

- Unsafe: High Risk
- Conditionally Safe: Moderate to High risk with an implemented safety intervention
- The safety assessment instrument is completed within 24 hours and staffed with supervisor
- The safety assessment instrument is also enacted as the end assessment on Unsafe Situations; Unsupervised Visitation; Reunification; prior to case closure.

## **Risk Assessment:**

Iowa conducts as Family Risk Assessment (Form: 470-4133, Rev.: 5/10) after the Safety Assessment process decision is resolved. The instrument is highly structured and consists of:

- Neglect: 11 Y/N questions
- Abuse: 9 Y/N questions; one weighted question on number of Prior Assessments: 0, 1-3, 4 or more
- Second Risk level Neglect and Abuse Score Matrix: Low, Moderate, High
- Policy Over-riders: 4 questions; any Y answers is a High Risk
- Discretionary Over-rider: written narrative: any Discretionary concern raises the level of risk; cannot be lowered.
- Supervisor's approval

## **Decision Making**

Iowa utilizes a CPS/CINA (Child in Need of Assistance) Intake Decision Tree. The model is designed in three sections. The first section requires "Yes/No" decision making on the presence/absence of: Physical Abuse, Mental Injury, Sexual Abuse, Child Prostitution, Denial of Critical Care, Presence of Illegal Drugs, Manufacture of Dangerous Substances, Bestiality in the Presence of a Minor, and Cohabitation with a Reported Sex Offender. The second section requires Supervisor Decision Time on whether case requires one hour or 12 hour action. The third section requires a decision on the need for a CINA assessment, which is the step before child removal from the home.

## ***Alternative Response Program Development***

Alternative Response programs are designed to provide safety and risk assessment based assurance that a family/caregiver is lower risk compared to cases where abuse/neglect has been confirmed or at higher risk. The program essentially results in an investigation not being opened and a service support model involving extended family, community/neighborhood and targeted

services designed and implemented in a “partnership” approach between CPS and the family/caregiver. The program has met with documented success in Minnesota (Differential Response), Ohio (10 counties), and California (Alameda County) among others.

The National Center on Substance Abuse and Child Welfare (SAMHSA/ACYF – DHHS) has identified that between 40% and 80% of families involved with Child Welfare impacting up to 66% of the children in Child Welfare are seriously impacted by substance abuse. Clearly the field Investigators across Texas know this and expressed focus and the need for drug screens throughout regional office focus groups conducted by TSG. Given the high risk correlation of substance abuse and child safety TSG recommends drug screening for all cases being considered for Alternative Response, should the Alternative Response program continue, prior to the determination of not opening an investigation.

The Hays County Alternative Response pilot model includes the testing of a new “Safety/Risk” assessment instrument that is understood to combine elements from the existing Safety and Risk Assessment instruments that this report recommends be replaced by a Safety Assessment instrument administered and documented within the initial 24 hour in-home assessment and a Risk Assessment instrument based on actuarial principles thereafter and focused on throughout the life of a case.

**APPENDIX C: AN EXAMPLE OF BURDENSOME FAMILY LAW LEGISLATION**

The list below is a sample of the types of statutes in Texas Family Law that can be construed as burdensome and bear a disproportionately minimal relationship to child safety, permanency or well-being.

**Chapter 261**

Cite	Substance	Comments
TFC § 261.3021	Subject to the appropriation of money for these purposes, DFPS must: (1) identify critical investigation actions that impact child safety and require department caseworkers to document those actions in a child's case file not later than the day after the action occurs; (2) identify and develop a comprehensive set of casework quality indicators that must be reported in real time to support timely management oversight; (3) provide department supervisors with access to casework quality indicators and train department supervisors on the use of that information in the daily supervision of caseworkers; (4) develop a case tracking system that notifies department supervisors and management when a case is not progressing in a timely manner; (5) use current data reporting systems to provide department	This section represents unnecessary legislative micromanagement of the department, and could be made more general in nature (e.g. The department shall encourage the prompt documentation of critical caseworker tasks and shall use data effectively to manage the timeliness and effectiveness of its caseworkers). In particular, the required time frame for casework documentation is unduly prescriptive.

Cite	Substance	Comments
	<p>supervisors and management with easier access to information; and(6) train department supervisors and management on the use of data to monitor cases and make decisions.</p>	
<p>TFC § 261. 311</p>	<p>Unless a notice would endanger someone’s life or safety or is delayed at the request of law enforcement:</p> <ul style="list-style-type: none"> <li>• Make a reasonable effort to notify a child’s parents/legal guardian within 24 hours of an interview or examination of a child as part of an investigation of the nature of the allegation and the fact that the interview or examination was conducted.</li> <li>• Make a reasonable effort to notify a child’s parent/guardian of the disposition of an investigation within 24 hours of an investigation that is administratively closed without an interview or examination of a child.</li> </ul>	<p>Notifying a parent that a preliminary investigation of allegations was conducted and closed is appropriate, but there is no reason that this notice must be provided within 24 hours of case closure. This notification duty does not further the safety of any child, and could have the unintended consequence or requiring that a caseworker postpone another duty that does potentially impact child safety in order to attend to this statutory time frame for notification to the parents of a closed investigation.</p>

**Chapter 264**

Cite	Substance	Comments
TFC § 264.016	<p>Mandates that for each child ages 16 and older in DFPS conservatorship, DFPS must:</p> <ul style="list-style-type: none"> <li>(1) Obtain a free credit report; and</li> <li>(2) Provide information on how to interpret the credit report the process for correcting inaccuracies.</li> </ul>	<p>This is one area of responsibility that could easily be shifted from caseworkers to the child's external advocates, and only fall to the department if at age 16 or older the child has no AAL/GAL/CASA to perform this service. While again the legislation had the aim of protecting vulnerable foster children from identity theft the implementation is exceedingly difficult. Each credit bureau has different requirements for obtaining the credit report of a minor. In addition, resolving inaccuracies is a complex workload for which the child-protective agency is not necessarily equipped, as recognized in the comparable federal provision quoted below.</p> <p>This duplicates, with some minor and confusing differences, a federal Title IV-E mandate at 42 U.S.C. 675(5)(I), which requires that each state have a "case review system" for ensuring, among many other things, that:</p> <ul style="list-style-type: none"> <li>(I) each child in foster care under the responsibility of the State who has attained 16 years of age receives without cost a copy of any consumer report (as defined in section 603(d) of the Fair Credit Reporting Act) pertaining to the child each year until the child is discharged from care, and receives assistance (<b>including, when feasible, from any court-appointed advocate for the child</b>) in interpreting and resolving any inaccuracies in the report.</li> </ul>

Cite	Substance	Comments
TFC § 264.107(e)	<p>Requires the department, when making a placement decision to:</p> <p>(1) consult with the child's caseworker, AAL, GAL, and CASA, unless making an emergency placement; and</p> <p>(2) use "clinical protocols" to match children with the best placement resource</p>	<p>Subsection (e) was initially added to 264.107 by SB 6 in 2005 to support outsourcing of case management services; however, as originally enacted the duty to consult with the listed persons in Subdivision (e)(1) was "when possible". In 2013 external advocates successfully lobbied to change this requirement to make it more rigid by replacing the "when possible" language with the less flexible "except in an emergency" language (SB 425, 83<sup>rd</sup> Leg.). This is the type of overly-prescriptive provision that reflects the external view that CPS workers fail to adhere to best practices because they don't care, rather than as a result of multiple competing priorities, and represents an additional incursion into the decision making authority of the legally responsible conservator because of mistrust of the agency's decision making.</p> <p>In addition to the statutory language, external stakeholders are actively pressing the agency to implement a protocol that calls for the following protocol in contracted placements (along with a similar protocol for kinship placement moves):</p> <ul style="list-style-type: none"> <li>• caseworker sends discharge notice to CASA/AAL/GAL within 2 business days of receipt</li> <li>• caseworker asks for responses from CASA/AAL/GAL within 3 business days</li> <li>• DFPS MUST take the input received into account and include any requested criteria in its placement search</li> <li>• IF criteria determined infeasible, caseworker must provide an</li> </ul>

Cite	Substance	Comments
		<p>explanation of why such criteria are not feasible</p> <ul style="list-style-type: none"> <li>• Once a placement is identified, the caseworker must notify CASA/AAL/GAL of the choices, explain the caseworker's intended choice, and discuss any concerns the CASA/AAL/GAL may have</li> <li>• Once the placement is made, the caseworker must give notice of the placement to the CASA/AAL/GAL within 3 business days</li> </ul> <p>DFPS understood the enacted language as a compromise that would allow for input by some of the persons/entities with the best knowledge of the child's needs and characteristics, but still permit the caseworker and the agency to carry out its business. What reads in the statute as one consultation will, in the view of DFPS' external stakeholders, be a minimum of THREE separate consultations with the three listed entities, and potentially more. This is a deeply burdensome workload for a choice that, ultimately, rests with the child's legal representative.</p>

**Chapter 266**

Cite	Substance	Comments
TFC § 266.004(c)	If DFPS or its agent is authorized to consent, file with the court and each party the name of the individual who will exercise the duty and responsibility of providing consent	Unnecessary to provide notice of the medical consent designation to the court and all the parties within 5 days of initial designation and within 5 days of any changes. The court does not need that information for any

	on behalf of the department within 5 days of the court authorizing DFPS or its agent. File notice of any changes within 5 days of the change.	purpose at that time. Notice could be provided to the court at the next hearing when the summary of medical care is provided, or within ten days of any designation or change. Unclear why other parties need the information within 5 days either, with exception of attorney ad litem or guardian ad litem. Extreme paperwork burden with regular changes in medical consenters for some children.
TFC § 266.004(h)	Develop or approve mandatory training for medical consenters (other than biological parents whose rights are not terminated, unless the court orders the biological parent to participate in such training).	Mandatory training for all medical consenters is burdensome. Training as currently implemented by policy can be several hours long. The estimate posted on DFPS' public website is that consenters should allot 2.5 hours for the training that includes 105 slides (with an additional 57 in a supplemental module for DFPS staff). Training does add some value, but may not be realistic, particularly for kinship caregivers who do not voluntarily seek out the foster care system, but are effectively conscripted by events in their family, may not be able to read at the grade level required for the training (though efforts were made to make the training as readable as possible), and may not have access to the Internet, in which case they have to review a paper copy.
TFC § 266.004(h-2)	Each person required to complete a training program under Subsection (h) must acknowledge in writing that the person:(1) has received the training described by Subsection (h-1);(2) understands the principles of informed consent for the administration of psychotropic medication; and (3) understands that non-pharmacological interventions should be considered and discussed with the prescribing physician, physician assistant, or	Burdensome implementation. Additional documentation requirements with possibly little value added to caregiver's decision-making capability.

	<p>advanced practice nurse before consenting to the use of a psychotropic medication.</p>	
<p>TFC § 266.007</p>	<p>Provide at each hearing under Chapter 263 a summary of medical care that includes information regarding:</p> <ul style="list-style-type: none"> <li>(1) the nature of any emergency medical care provided to the child and the circumstances necessitating emergency medical care, including any injury or acute illness suffered by the child;</li> <li>(2) all medical and mental health treatment that the child is receiving and the child's progress with the treatment;</li> <li>(3) any medication prescribed for the child and the condition, diagnosis, and symptoms for which the medication was prescribed and the child's progress with the medication;</li> <li>4) for a child receiving a psychotropic medication:             <ul style="list-style-type: none"> <li>(A) any psychosocial therapies, behavior strategies, or other non-pharmacological interventions that have been provided to the child; and</li> <li>(B) the dates since the previous hearing of any office visits the child had with the prescribing physician, physician assistant, or advanced practice nurse as required by Section 266.011;</li> </ul> </li> <li>(5) the degree to which the child or foster care provider has complied or failed to comply with any plan of medical treatment for the child;</li> <li>(6) any adverse reaction to or side</li> </ul>	<p><b>Summary of comment:</b> Overly prescriptive requirement in terms of amount and detail of medical information to be provided to the court; judges wanted additional information provided so the summary in the court report is even lengthier than that required by statute. Partially duplicative of federal law.</p> <p><b>Detailed comment:</b> State law is also (partially) duplicative of federal law. "Case plan" is defined in federal law to include certain information regarding the child, including the child's educational and health records. The educational and health records must at least contain the most recent information available regarding: names and addresses of the child's health and educational providers; the child's grade level performance the child's school record; a record of the child's immunizations; the child's known medical problems; the child's medications; and any other relevant health information concerning the child determined to be appropriate by DFPS. 42 U.S.C. 675(1)(C) 42 U.S.C. 675 and 42 U.S.C. 671</p> <p>The law further requires a "case review system" whereby a child's health and education record is reviewed and updated, with a copy supplied to the caregiver with whom the child is placed. The record is also provided to the child when the child ages out of foster care. 42 U.S.C. 675(5) 42 U.S. Code 675 and 42 U.S.C. 671</p> <p>Texas also has an assurance in the state plan on point: ...The State assures that it is operating, to</p>

	<p>effects of any medical treatment provided to the child;                  (7) any specific medical condition of the child that has been diagnosed or for which tests are being conducted to make a diagnosis;                  (8) any activity that the child should avoid or should engage in that might affect the effectiveness of the treatment, including physical activities, other medications, and diet; and                  (9) other information required by department rule or by the court.</p> <p>The summary must be provided to the court, the medical consenter, the GAL or AAL, the child’s parent, and any other person determined necessary or appropriate for review by the court or DFPS.</p>	<p>the satisfaction of the Secretary...a case review system (as defined in section 475(5) of the Act) for each child receiving foster care under the supervision of the State/Tribe                  Attachment C, Title IV-B, subpart 1 Assurances. 1.b.  <a href="#">Attachment C - Assurances</a></p>
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**APPENDIX D: DETAILED COST ESTIMATE OF TECHNOLOGY RECOMMENDATIONS**

#	Mos.	D/M	Technology / Tasks	Low Hours Estimate	Low Cost Estimate	High Hours Estimate	High Cost Estimate	Comments	
<b>DEVELOPMENT ITEMS</b>									
1	18	D	Improve the ease of use of IMPACT in support of the caseworker's daily activities in Items 2-9 below.	See below items for the components to accomplish the overall IMPACT ease-of-use goals					
2	12	D	- Incorporate the logic from the practice model for assessing safety & risk into IMPACT	9,200	\$1,288,000	10,950	\$1,533,000	Support the actual decision making process for safety and risk assessment at the time the decision is made rather than an after the fact documentation.	
-			Integrate the logic from the safety and risk practice model into the IMPACT process flows	1,500	\$210,000	2,000	\$280,000	Assessing safety and risk is a difficult process, so additional time is needed to research other states efforts and adapt the design to meet TX needs. Integration with IMPACT may be tricky, if new database fields are needed. Regional differences may need consideration in the design.	
-			Safety & risk tool analysis and design including investigation of potential external tools and the integration into IMPACT.	1,500	\$210,000	1,700	\$238,000		
-			Safety & risk tool development including unit testing of tool and its IMPACT integration	2,000	\$280,000	2,500	\$350,000		
-			Safety & risk tool testing	1,500	\$210,000	1,600	\$224,000		
-			Safety & risk tool documentation and training	2,000	\$280,000	2,000	\$280,000		
-			Safety & risk tool rollout	300	\$42,000	500	\$70,000		
-			Safety & risk tool stabilization	300	\$42,000	500	\$70,000		
-			Before and after measurement of the effects.	100	\$14,000	150	\$21,000		
3	6	D	- Fast way for users to come up to speed on the background of the case via an improved Family History Summary.	3,320	\$464,800	6,768	\$947,520	Must determine the appropriate level of family history summary required.	
-			Family history summary outreach to determine user interface elements	120	\$16,800	192	\$26,880	Users need the ability to "get" a family's situation fast when they've been assigned the work. Caseworker input is essential so the right data is presented in a clear fashion. This is a "pure" IMPACT change and requires the developers to thoroughly understand the app.	
-			Family history summary analysis & design	400	\$56,000	720	\$100,800		
-			Family history summary development	1,700	\$238,000	4,080	\$571,200		
-			Family history summary testing	600	\$84,000	960	\$134,400		
-			Family history summary documentation & training	120	\$16,800	180	\$25,200		
-			Family history summary rollout	120	\$16,800	180	\$25,200		
-			Family history summary stabilization	200	\$28,000	360	\$50,400		
-			Before and after measurement of the effects.	60	\$8,400	96	\$13,440		
4	15	D	- Add needed forms to IMPACT to mesh with practice and validation logic in use at the regions.	2,280	\$319,200	4,296	\$601,440	Also see associated Maintenance Item M1 below.	
-			Determine a definitive list of forms to be put into IMPACT.	120	\$16,800	240	\$33,600	Documentation shows 313 paper forms used now state-wide and in Harris & Bexar Counties, with 199 forms now listed in IMPACT - a difference of 114. Further analysis will determine those forms that should be placed into IMPACT. 40 forms are assumed for this estimate, at 30/50 hours (low/high) per form for development.	
-			New forms development and integration into IMPACT	1,200	\$168,000	2,400	\$336,000		
-			New forms testing	400	\$56,000	720	\$100,800		
-			New forms training & needed documentation	120	\$16,800	216	\$30,240		
-			New forms rollout	300	\$42,000	480	\$67,200		
-			New forms stabilization	80	\$11,200	144	\$20,160		
-			Before and after measurement of the effects.	60	\$8,400	96	\$13,440		
5	18	D	- Faster way to document information (data intake) in IMPACT.	7,590	\$1,062,600	13,176	\$1,844,640		
-			Additional outreach to determine appropriate data intake fields and format	200	\$28,000	360	\$50,400	Make the app easier to use, remove duplicate data entry, make data entry easier via better screen layouts, require fewer keystrokes, and populate data from other areas of the app to eliminate/reduce double entries. The key is to minimize data entry time in IMPACT. This could be a substantive change in the way IMPACT works, so it will require careful up-front design. A revised user interface will require additional training to enable users to adapt.	
-			Revised intake/reduced data entry analysis and design	700	\$98,000	1,200	\$168,000		
-			Revised intake/reduced data entry development	4,000	\$560,000	6,960	\$974,400		
-			Revised intake/reduced data entry testing	1,300	\$182,000	2,160	\$302,400		
-			Revised intake/reduced data entry training & documentation	750	\$105,000	1,320	\$184,800		
-			Revised intake/reduced data entry rollout	400	\$56,000	720	\$100,800		
-			Revised intake/reduced data entry stabilization	120	\$16,800	240	\$33,600		
-			Before and after measurement of the effects.	120	\$16,800	216	\$30,240		

This report contains Recommendations that are the second section of a two part CPS Operational Assessment. The first section is contained in The Stephen Group's CPS Operational Assessment: Findings, completed April 28, 2014.

6	6	D	- Faster way to upload photos, audios, emails by field personnel	<b>1,840</b>	<b>\$257,600</b>	<b>3,276</b>	<b>\$458,640</b>	
-			Additional outreach to ascertain user uploading needs	80	\$11,200	144	\$20,160	Bandwidth is not the only issue, it's making it easier (faster) for users to "attach" disparate information to a case. Once an artifact is connected to a case, need ways to quickly transmit all items up to IMPACT.
-			Improved upload analysis & design	300	\$42,000	480	\$67,200	
-			Improved upload development	800	\$112,000	1,440	\$201,600	
-			Improved upload testing	400	\$56,000	720	\$100,800	
-			Speedier upload training & documentation	60	\$8,400	120	\$16,800	
-			Speedier upload rollout	100	\$14,000	168	\$23,520	
-			Speedier upload stabilization	60	\$8,400	108	\$15,120	
-			Before and after measurement of the effects.	40	\$5,600	96	\$13,440	
7	6	D	- Easier error correction in IMPACT for field personnel	<b>3,520</b>	<b>\$492,800</b>	<b>6,504</b>	<b>\$910,560</b>	
-			Outreach to determine a prioritized list of serious errors where correction is needed in the field	80	\$11,200	144	\$20,160	The data collected in IMPACT is inherently complex, making some corrections of mistakes difficult. Thus, the most common/problematic mistakes should be categorized, with effort focused on those items providing the biggest improvements for caseworkers.
-			Mistake correction analysis & design	400	\$56,000	720	\$100,800	
-			Mistake correction development	2,000	\$280,000	3,600	\$504,000	
-			Mistake correction testing	700	\$98,000	1,440	\$201,600	
-			Mistake correction training & documentation	120	\$16,800	216	\$30,240	
-			Mistake correction rollout	80	\$11,200	144	\$20,160	
-			Mistake correction stabilization	80	\$11,200	144	\$20,160	
-			Before and after measurement of the effects.	60	\$8,400	96	\$13,440	
8	6	D	- Easier closing of cases	<b>4,880</b>	<b>\$683,200</b>	<b>8,688</b>	<b>\$1,216,320</b>	
-			Outreach to fully understand the work required to close a simple and difficult case.	60	\$8,400	144	\$20,160	The job of closing a case can be complicated. There may be a need to streamline policy and process that would be reflected in this design, but early analysis will determine the path to take. The app needs to help a user get through the closing process.
-			Easier case closing analysis & design	400	\$56,000	720	\$100,800	
-			Case closing development	2,800	\$392,000	4,440	\$621,600	
-			Case closing testing	1,200	\$168,000	2,640	\$369,600	
-			Case closing training & documentation	200	\$28,000	360	\$50,400	
-			Case closing rollout	80	\$11,200	144	\$20,160	
-			Case closing stabilization	80	\$11,200	144	\$20,160	
-			Before and after measurement of the effects.	60	\$8,400	96	\$13,440	
9	6	D	- Support preparation of documents for court by exporting information from IMPACT to Word.	<b>1,485</b>	<b>\$207,900</b>	<b>2,280</b>	<b>\$319,200</b>	
-			Via outreach, determine the definitive list of court documents to be exported to Word.	60	\$8,400	96	\$13,440	Inventory the number of forms that would save significant time for field workers. Documentation of the presently used paper forms reveals a total of 24 Legal and Court forms. Assume 15 forms will need to be exported from IMPACT at 40/50 hours per form needed in development. Expect the design to be straight-forward, but forms will need to be well-tested to filter out errors that can result from unusual cases.
-			Court doc Word extract - do needed outreach to determine special form circumstances, to allow good integration w/ IMPACT.	120	\$16,800	180	\$25,200	
-			Court doc Word extract. Analysis & design of form export process.	75	\$10,500	180	\$25,200	
-			Court doc Word extract. Develop the export of forms from IMPACT, formatting the paper document, and placing data on the pages.	600	\$84,000	900	\$126,000	
-			Court doc Word extract testing	350	\$49,000	480	\$67,200	
-			Court doc Word extract rollout	120	\$16,800	192	\$26,880	
-			Court doc Word extract stabilization	120	\$16,800	180	\$25,200	
-			Before and after measurement of the effects.	40	\$5,600	72	\$10,080	
10	18	D	Automate the request for purchased client services	<b>1,620</b>	<b>\$226,800</b>	<b>3,024</b>	<b>\$423,360</b>	
-			Investigate client service automation tools & techniques	100	\$14,000	240	\$33,600	Need ways to electronically access information on available client service organizations & personnel, searchable from IMPACT. Will most likely require real-time usage of new external data sources.
-			Client service automation analysis & design	280	\$39,200	480	\$67,200	
-			Client service automation development & unit testing	480	\$67,200	792	\$110,880	
-			Client service automation testing	200	\$28,000	384	\$53,760	
-			Client service automation documentation & training	240	\$33,600	480	\$67,200	
-			Client service automation rollout	120	\$16,800	216	\$30,240	
-			Client service automation stabilization	120	\$16,800	240	\$33,600	
-			Before and after measurement of the effects.	80	\$11,200	192	\$26,880	

11	18	D	Reduce time caseworker spends locating children and adults. Implement the best solution(s) in TX.	1,900	\$266,000	5,040	\$705,600	
-			Check out existing data interfaces, tap internal CPS knowledge, and outreach to other state systems to find the best data for person search solutions	160	\$22,400	528	\$73,920	The low estimate is based on utilization of existing data interfaces. The high estimate assumes the addition of two significant new data interfaces.
-			Improved person search analysis & design	320	\$44,800	600	\$84,000	
-			Improved person search development & unit test, with potential new data interfaces needed	720	\$100,800	2,160	\$302,400	
-			Improved person search testing	240	\$33,600	600	\$84,000	
-			Improved person search documentation & training	120	\$16,800	288	\$40,320	
-			Improved person search rollout	160	\$22,400	456	\$63,840	
-			Improved person search stabilization	80	\$11,200	240	\$33,600	
-			Before and after measurement of the effects.	100	\$14,000	168	\$23,520	
12	18	D	Reduce need to print, scan, and fax documents and increase system generated communication. Include creation of electronic 2054's that now must be separately faxed to the provider.	2,800	\$392,000	5,184	\$725,760	Assumes the State does needed policy changes to allow electronic communications
-			Outreach to determine those docs that can be made paperless.	120	\$16,800	192	\$26,880	Assume 50 communications at 30/50 hours per item to develop.
-			Paperless form communication analysis & design	160	\$22,400	240	\$33,600	
-			Paperless form communication develop & unit test	1,500	\$210,000	3,000	\$420,000	
-			Paperless form communication testing	480	\$67,200	768	\$107,520	
-			Paperless form communication documentation & training	140	\$19,600	240	\$33,600	
-			Paperless form communication rollout	160	\$22,400	264	\$36,960	
-			Paperless form communication stabilization	160	\$22,400	360	\$50,400	
-			Before and after measurement of the effects.	80	\$11,200	120	\$16,800	
13	15	D	Expand the Spanish language version of forms, court documents, and other information that is given to the family to be more complete.	800	\$112,000	1,848	\$258,720	See associated Operations & Maintenance Item M2 below.
-			Determine the list of artifacts that should be translated to Spanish for distribution to clients.	60	\$8,400	96	\$13,440	Assume 20 initial items at 25/50 hours per artifact to develop.
-			Analyze and design the needed Spanish language	200	\$28,000	480	\$67,200	
-			Development of artifacts.	500	\$70,000	1,200	\$168,000	
-			Make needed changes to IMPACT.	40	\$5,600	72	\$10,080	
14	15	D	Automate the linking of email correspondence concerning a case with the IMPACT case records.	2,020	\$282,800	3,384	\$473,760	
-			Email-IMPACT linkage analysis & design	320	\$44,800	576	\$80,640	The linkage of emails to a case must be as easy as possible. It requires linking Outlook and IMPACT, which may well be tricky.
-			Email-IMPACT linkage development & unit test	480	\$67,200	768	\$107,520	
-			Email-IMPACT linkage testing	320	\$44,800	528	\$73,920	
-			Email-IMPACT linkage documentation & training	300	\$42,000	480	\$67,200	
-			Email-IMPACT linkage rollout	200	\$28,000	360	\$50,400	
-			Email-IMPACT linkage stabilization	320	\$44,800	528	\$73,920	
-			Before and after measurement of the effects.	80	\$11,200	144	\$20,160	
15	6	D	Improve documentation & training on Outlook and other mobility tools to allow easier email setup on iPhone, regional email lists and other user friendly features.	400	\$56,000	660	\$92,400	
-			Determine best ways to inform users of ways to improve their use of current CPS technology	40	\$5,600	60	\$8,400	Technology training can yield big benefits, so the State can more fully use the tools already in place.
-			Outlook training course/artifacts design	60	\$8,400	96	\$13,440	
-			Create needed Outlook training materials	120	\$16,800	192	\$26,880	
-			Do Outlook training	120	\$16,800	192	\$26,880	
-			Outlook training follow up	40	\$5,600	72	\$10,080	
-			Before and after measurement of the effects.	20	\$2,800	48	\$6,720	
16	24	D	Implement workflow management in IMPACT - to track the progress of work associated with a case and allow leadership to spot bottlenecks and help the organization continuously learn how to expedite.	10,520	\$1,472,800	25,320	\$3,544,800	Integrating workflow with IMPACT could prove to be complicated, resulting in a wider range between the low and high.
-			Outreach to determine the workflow mgmt tasks to be tracked, including coordination of CPS organizational needs.	200	\$28,000	480	\$67,200	A resulting workflow system should allow the tracking of time between milestones and provide details on who/where is responsible for the task. The high figures result from placing foundational workflows within the existing IMPACT app.
-			Workflow mgmt analysis & design including needed management reporting artifacts and investigation of external workflow management tools amenable to integration with IMPACT	400	\$56,000	960	\$134,400	
-			Workflow mgmt development & unit test	5,800	\$812,000	13,920	\$1,948,800	
-			Workflow mgmt testing	2,900	\$406,000	6,960	\$974,400	
-			Workflow mgmt documentation & training	300	\$42,000	720	\$100,800	
-			Workflow mgmt rollout	400	\$56,000	960	\$134,400	
-			Workflow mgmt stabilization	400	\$56,000	960	\$134,400	
-			Before and after measurement of the effects.	120	\$16,800	360	\$50,400	

This report contains Recommendations that are the second section of a two part CPS Operational Assessment. The first section is contained in The Stephen Group's CPS Operational Assessment: Findings, completed April 28, 2014.

17	24	D	Support the assignment of cases to workers with greater insight into the actual workload the worker is carrying, skills needed, and mentor responsibilities. Purpose: create a non-GPS technical system to assign workers to cases.	2,400	\$336,000	4,668	\$653,520	Note: also see Item 20 covering a GPS system that could work in conjunction with this system and Item 18 to show workload in a geographic view.
-			Outreach to various regions to get the input and variables needed to make a case assignment system work correctly	200	\$28,000	336	\$47,040	Suggest low-hanging fruit be tackled first, since there may be factors that could be hard to computerize. Assigning workers to tasks involves a variety of decisions, some which are quantifiable (eg. drive time) and some that are less so (eg. worker skill sets). Regions will have their way of doing things that must be taken into account by the system.
-			Search for external case assignment tools that may be suitable for use with IMPACT	160	\$22,400	288	\$40,320	
-			Case assignment analysis & design	400	\$56,000	720	\$100,800	
-			Case assignment development & unit test	600	\$84,000	1,440	\$201,600	
-			Case assignment testing	320	\$44,800	624	\$87,360	
-			Case assignment documentation & training	300	\$42,000	540	\$75,600	
-			Case assignment rollout	160	\$22,400	288	\$40,320	
-			Case assignment stabilization	160	\$22,400	240	\$33,600	
-			Before and after measurement of the effects.	100	\$14,000	192	\$26,880	
18	9	D	Support a geographic view of workload through a visual display of field workload.	1,160	\$162,400	2,172	\$304,080	Note: also see Item 17 covering a case assignment system and Item 21 for a GPS-based drive-time reduction system.
-			Outreach to determine the best geographic view approach	40	\$5,600	96	\$13,440	Assumes IMPACT will need to integrate a tool to display a geographic graphics view for TX. Also assumes that IMPACT presently has sufficient workload information to produce the view. If not, hours will go up to collect and store the additional data.
-			Select, acquire, and understand how to integrate a graphics tool into IMPACT	200	\$28,000	408	\$57,120	
-			Workload geographic view analysis & design	120	\$16,800	192	\$26,880	
-			Workload geographic view development & unit test	400	\$56,000	696	\$97,440	
-			Workload geographic view testing	180	\$25,200	360	\$50,400	
-			Workload geographic view documentation & training	20	\$2,800	36	\$5,040	
-			Workload geographic view rollout	80	\$11,200	144	\$20,160	
-			Workload geographic view stabilization	80	\$11,200	144	\$20,160	
-			Before and after measurement of the effects.	40	\$5,600	96	\$13,440	
19	6	D	Create an on-going enhancement request process	180	\$25,200	348	\$48,720	The process would actively solicit usability improvements from the front line caseworkers and considers time away from the family as a cost of not doing these types of enhancements.
-			Outreach to recruit interested & qualified people to prioritize proposed IMPACT & technical improvements	60	\$8,400	108	\$15,120	Expect this would largely require state personnel to set up the system. Nonetheless, potential vendor hours are shown in the estimate.
-			Establish CPS enhancement request process	40	\$5,600	96	\$13,440	
-			Convene sessions on a regular basis each year	80	\$11,200	144	\$20,160	
20	24	D	Complete the vision for mobility of reducing drive time to/from the office. Create a GPS-based technical solution.	4,140	\$579,600	7,308	\$1,023,120	Note: also see Item 17 covering a case assignment system that could work in conjunction with this system.
-			Perform the needed process, policy, & organizational changes for a GPS Drive-Time system to work.	180	\$25,200	288	\$40,320	Coordinate with process, policy, and organizational changes to achieve the vision for mobility of reducing drive time to/from the office while still supporting the need for team and supervisory support to the caseworker. This modification will require the usage of caseworker addresses, traffic information, and destination GPS data to produce an effective result.
-			Investigate available external GPS Drive-Time tools that	100	\$14,000	192	\$26,880	
-			GPS Drive-Time analysis & design	280	\$39,200	600	\$84,000	
-			GPS Drive-Time development & unit test	1,200	\$168,000	1,920	\$268,800	
-			GPS Drive-Time testing	1,000	\$140,000	1,680	\$235,200	
-			GPS Drive-Time documentation & training	500	\$70,000	960	\$134,400	
-			GPS Drive-Time system configuration with required TX	160	\$22,400	288	\$40,320	
-			GPS Drive-Time rollout	300	\$42,000	540	\$75,600	
-			GPS Drive-Time stabilization	220	\$30,800	480	\$67,200	
-			Before and after measurement of the effects.	200	\$28,000	360	\$50,400	
21	6	D	Time with families tool	1,500	\$210,000	2,000	\$280,000	Support submission and aggregation of time caseworkers spend with families

SELECTED ONGOING OPERATIONS & MAINTENANCE ITEMS								
M1	M	M	Move to a model where the technology continuously reinforces the process and procedure by keeping forms in sync with practice and the validation logic in sync with the regional workflows.	865	\$121,100	1,752	\$245,280	Ideally, the State should establish a process to ensure form changes are routinely synched up with IMPACT and to add/remove forms as needed from usage. Also see associated Development Item above.
-			Continued analysis of forms throughout the year.	60	\$8,400	120	\$16,800	Based on figures from above, assume 20 forms annually at 30/50 hours/form
-			Ongoing forms development and integration into IMPACT	600	\$84,000	1,200	\$168,000	
-			Ongoing forms development testing	125	\$17,500	240	\$33,600	
-			Ongoing forms development rollout	40	\$5,600	96	\$13,440	
-			Ongoing forms development stabilization	40	\$5,600	96	\$13,440	
M2	M	M	Ongoing Spanish language document updates and additions	310	\$43,400	744	\$104,160	See associated Development Item above.
-			Analyze and design the needed Spanish language artifacts, whether they're new or translations from existing artifacts.	10	\$1,400	24	\$3,360	Assume 10 new or revised documents annually at 30/60 hours per form
-			Development of artifacts.	300	\$42,000	720	\$100,800	
M3	M	M	Potential upgrade of bandwidth infrastructure to resolve peak usage loads	270	\$37,800	558	\$78,120	The work will likely be done by the State. Nonetheless, the potential hours are estimated at a vendor rate.
-			Investigate usage statistics to determine if periodic slow ness (latency) negatively impacts CPS field workers in a significant way.	30	\$4,200	72	\$10,080	
-			Design a solution to mitigate broadband slow ness	20	\$2,800	60	\$8,400	
-			Develop/implement a bandwidth solution	80	\$11,200	168	\$23,520	
-			Bandwidth solution testing	40	\$5,600	66	\$9,240	
-			Bandwidth solution rollout	40	\$5,600	72	\$10,080	
-			Bandwidth solution stabilization	40	\$5,600	72	\$10,080	
-			Before and after measurement of the effects.	20	\$2,800	48	\$6,720	
M4	6	D	Training and support for Super-Users in each office	2,000	\$280,000	4,000	\$560,000	