



TEXAS
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Services

Texas Department of Family
and Protective Services
Prevention and Early Intervention

Progress Report on Implementation of Five-Year Strategic Plan Fiscal Year 2017

September 2017

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This report is required by Senate Bill 206, 84th Legislative Session,
Texas Family Code §265.005.

Executive Summary

One year ago Prevention and Early Intervention (PEI) formalized its public health approach to preventing child abuse and neglect with publication of a five-year strategic plan. At the same time, PEI completed its merger with the Texas Home Visiting program, making 2017 the first full fiscal year (September 1, 2016 - August 31, 2017) for the restructured division of the Department of Family and Protective Services (DFPS).

Prioritizing key themes of effective use of data and efficient use of resources, in fiscal year 2017 PEI re-procured half of its 11 programs, taking a fresh assessment of where the highest risk communities are and increasing the number of evidence-based programs funded. By September 1, 2018, 100 percent of PEI's home visiting and parent education provider contracts will require use of one or more evidence-based models or promising practices.

With funds appropriated by the 84th Legislature, DFPS also launched an entirely new data system (PEIRS) in 2017 that is transforming the way PEI collects, analyzes, and reports data. While the previous PEI and STAR data systems (both more than a decade old) allowed users to enter data for reporting purposes, the systems were not user-friendly and provided no systematic checks on data validity. PEIRS, on the other hand, facilitates entry of high-quality data through built-in checks on data quality, tasks and alerts that prompt users to collect assessments. It also enables real-time reports that include data visualizations and detailed client breakdowns. The new system will help PEI ensure that the data being collected is valid, reliable, and transparent.

PEIRS is easily adaptable when it comes to data analysis and outcomes reporting. The new system will enable PEI to look at outputs and outcomes by disability status, homelessness status, gender, race, and ethnicity. A detailed look at trends and gaps in service provision, retention, and outcomes will help PEI improve programs for all Texans, especially those most at-risk of maltreatment. The real-time nature of PEIRS also will contribute to PEI's continuous quality improvement processes with providers and communities. This significant and smart investment by the Legislature will pay dividends for years to come.

The improvements do not stop there. PEIRS also enables automated billing, which allows PEI staff greater ability to audit financial reports based on reported data and conduct in-depth cost-benefit analyses. It also makes possible real-time access for providers seeking budget and billing information. In fiscal year 2018, work will begin to integrate Texas Home Visiting into PEIRS so data can be compared and analyzed across all PEI programs.

Innovation is alive in programmatic initiatives as well. First-of-its-kind research commissioned by PEI is laying the groundwork for more effective approaches to engaging fathers in parenting programs — and ultimately parenting. Research completed in fiscal year 2017 found it does not take father-specific or fathers-only programs to engage fathers in parent education. Instead,

direct contact and relevant messages were shown to be key elements of engaging fathers. The report recommends general parent education and support programs make their programs more welcoming and relevant to fathers. PEI will support its providers in making this cultural shift.

PEI also rolled out a new initiative to support school readiness. LENA Home is an evidence-based intervention used in conjunction with home visiting programs to enhance school readiness in children zero to 3 years old. By evaluating verbal exchanges between parents and children, as well as electronic sounds present in the home (e.g. television), home visitors can take steps to increase positive parent-child dialogue. Reports are shared with parents over the 12-week intervention period to show measurable change. PEI launched this intervention in seven communities, and feedback from sites is expected by December 2018. PEI also will look at benchmark data related to school readiness to identify changes potentially resulting from the intervention.

Community providers across Texas are demonstrating innovation through efforts to increase program enrollment and retention. Local efforts include partnerships with managed care organizations, welcome baskets, participation incentives, program graduation ceremonies, and community baby showers.

Amidst all this rebirth and organizational change, PEI staff continued to ensure the division's 125 contracted service providers receive the guidance and support necessary to meet their obligations to their communities and the State of Texas. PEI revised its contract monitoring processes to better focus oversight activities on meaningful measures of program effectiveness and adopted a more supportive approach to helping providers achieve and maintain compliance. The results of this effort are enhanced stewardship of public resources, less exposure to risk and improved relations with providers.

Further stepping into its role as a statewide hub for communication, knowledge sharing, and technical assistance for stakeholders engaged in strengthening children and families, PEI's providers have experienced the benefit of merging Texas Home Visiting with PEI in the form of more training and technical support available for everyone. PEI hosted numerous events for PEI providers and other family-serving professionals, including the annual Partners in Prevention conference, which has become the largest annual gathering of prevention and early intervention professionals in Texas. Drawing nearly 800 people, Partners in Prevention is an education and networking event for parent educators, youth service providers, civic leaders, researchers, and others with a professional interest in child- and family well-being, youth development, and juvenile justice.

PEI also hosted smaller events for more specific audiences, including regional mini conferences for early childhood practitioners, safety summits for Child Protective Services staff, an annual meeting for STAR providers, a fatherhood summit for professionals seeking to engage fathers in

healthy parenting, and community impact meetings for civic leaders working on local systems-change initiatives across the state.

Beyond face-to-face gatherings, PEI frequently shares and receives information through its electronic newsletters, websites, and social media platforms, as well as webinars, and the growing Texas Prevention Network email distribution list.

Of course none of this would matter if PEI's programs were not helping children, youth, and families live safe, healthy, and productive lives. In fiscal year 2016 (most recent year for which data is available) PEI served more than 62,000 unique families — an increase of 23 percent over the previous fiscal year. Nearly all (99.7 percent) of children and youth remained safe from maltreatment while receiving services. More than 95 percent of youth engaged in services did not become involved with the juvenile justice system. In addition, families involved with evidence-based home visiting services had better overall health outcomes than the general Texas population and individuals served by comparable programs. This includes no preterm births in fiscal year 2016, higher breastfeeding rates, and more than half of all clients served increased self-sufficiency through education, employment, or both.

In the year ahead, PEI will continue implementing its five-year plan with emphasis placed on the following six priority initiatives:

1. Working under the direction of the 85th Legislature and DFPS Commissioner Hank Whitman, PEI will organize and support a Prevention Task Force for the purposes outlined in H.B. 1549 and on page 17 of this report. PEI will propose a plan to provide the research, data mapping, and project facilitation necessary to meet the task force's legislative charge.
2. Consistent with HB 1549, the Office of Child Safety will take all necessary steps to include near fatality child abuse or neglect cases in the child fatality annual review and report, for cases in which child abuse or neglect is determined to have been the cause of the near fatality. The Office of Child Safety will also produce an aggregated report relating to child fatality and near fatality cases resulting from child abuse or neglect.
3. PEI will further explore best practices in program implementation and expansion, including how to implement adaptations without jeopardizing effectiveness, and how to enhance peer learning across the state.
4. PEI will plan for potential program transitions based on funding cycles, contract expiration dates, and programmatic data as a component of its growth plan.

5. To further improve and sustain productive relationships with communities, PEI will create additional opportunities and mechanisms for dialogue with community leaders, faith-based organizations, and other stakeholders.
6. PEI will take steps to integrate its new data tracking and processing capabilities into strategic and operational decision-making processes.

Intro

In September 2016, the Department of Family and Protective Services (DFPS) released its five-year strategic plan on child abuse prevention and early intervention. The plan was developed by DFPS's Prevention and Early Intervention division in collaboration with hundreds of stakeholders. This document is the first annual progress report on that plan. This report is required by Senate Bill 206, 84th Legislative Session, Texas Family Code §265.005.

Progress toward Goals in Fiscal Year 2017

In its five-year strategic plan for prevention and early intervention, DFPS established seven overarching goals. Progress toward those goals is summarized below.

Goal 1: PEI will adopt a public health framework to prevent child maltreatment and fatalities and support positive child, family, and community outcomes.

Targeting Resources to those Most in Need

In its ongoing effort to target limited resources to the highest-risk communities, PEI has been and will continue to use geographic risk assessments. In 2017, PEI updated its geographic risk assessments for Texas Home Visiting, HOPES, and Community Youth Development programs. In some cases this resulted in a new list of eligible communities. As additional programs are re-procured, PEI will take the same steps to ensure services are being provided where they are most needed.

Evidence-based Programs and Practices

In 2017, PEI worked closely with providers, model developers, and research and evaluation experts to expand use of and fidelity to evidence-based models. Beyond simply championing evidence-based programs, PEI drew on the expertise of its Research Roundtable members to approve additional models for use in Texas and to vet models for specific needs and desired outcomes. In addition, PEI partnered with model developers to host model-specific trainings for many of its staff members. By September 1, 2018, all of PEI's home visiting and parent education providers will use one or more evidence-based models or promising practices. PEI will publish an updated list of funded evidence-based programs in its fiscal year 2017 [outcomes report](#) in December 2017.

Preventing Child Fatalities

The Office of Child Safety, a unit of PEI, continued to evaluate long-term and emerging trends related to child maltreatment and fatalities, as well as community, and programmatic needs. Taking a public health approach, PEI responded to ongoing concerns about preventable drownings by partnering with Colin's Hope to educate communities about water-related risks

inside and outside the home. Similarly, to reduce sleep-related deaths, particularly among African-American and Latino families, DFPS used research commissioned by PEI to develop messaging in English and Spanish for new award-winning “Room to Breathe” television spots and educational videos. In addition, Safe Babies, a research and implementation project conducted in partnership with UT Population Health and Baylor College of Medicine, is taking steps to reduce fatalities resulting from abusive head trauma. Safe Babies is described more fully under Goal 4 on page 10.

PEI as a Hub

Using a mix of remote and in-person formats to gather and share information with providers and other stakeholders, PEI stepped further into its role as a statewide hub for communication, knowledge sharing, and technical assistance.

PEI’s annual flagship event, the Partners in Prevention conference, continued to grow with nearly 800 people attending in September 2016. Looking ahead to the October 2017 conference, at least as many attendees are expected, and PEI will test a new preconference format to better engage service providers in peer learning and dialog with PEI staff. In addition, PEI will convene a new provider roundtable for the first time at the conference.

PEI also hosted numerous smaller events, including regional mini conferences for early childhood practitioners, safety summits for Child Protective Services staff, an annual meeting for STAR providers, a fatherhood summit for professionals seeking to engage fathers in healthy parenting, and community impact meetings for civic leaders working on local systems-change initiatives across the state. PEI also shares examples of successful implementations and promising practices with providers, funders and other external stakeholders through its newsletters, community-of-practice meetings and peer-learning sessions.

Goal 2: PEI will maximize the impact of current investments, and seek additional resources to serve more children, youth and families, and strengthen communities.

PEI’s contract monitoring and program staff work year round to ensure every dollar is spent as intended. In addition to routine contract monitoring processes, PEI staff conduct midyear budget reviews to estimate annual program spend for each contractor and make adjustments within and across contracts to make the best use of available funds. PEI’s new database will enhance this effort, and eventually automated billing functions and more timely information will help PEI’s staff focus on more complex matters.

At a strategic level, PEI and its community partners continue to balance investments in direct services to children with necessary investments in client outreach, public awareness, research and evaluation and other essential program support functions recommended by implementation

science experts. PEI is working with its service providers and expert advisers to identify the best approach to maximizing funding for direct services while also recognizing that communities have varying stages of readiness and unique needs that must be addressed for programs to be successful. In fiscal year 2018-2019, PEI's allocation for program support will be only 7 percent of its total state and federal funding.

Public-Private Funding Strategies

To increase local commitment and meet long-term program sustainability goals, PEI has engaged 10 Texas philanthropic organizations in facilitated conversations about public- and private-sector investments in early childhood. Discussions focused opportunities to align philanthropic investment goals with PEI's five-year strategic plan, as well as identifying opportunities to leverage investments to maximize resources. Future meetings will focus on identifying action steps moving toward more coordinated investments in family support services.

Partnering with Local Governments

PEI also is working with city and county governments to make strategic investments in prevention programming in their communities. In 2017, PEI began testing a new funding strategy for home visiting in two counties. Rather than funding 100 percent of a project at inception, with the intention of reducing the state's investment (and increasing local contribution) over time, state investments will start at a lower level and increase as the project matures.

This experimental approach is being developed in response to challenges communities face when asked to rapidly develop the infrastructure necessary to stand-up and bring a new program to scale. It is also an attempt to incentivize community-based providers and local funders to increase their commitment to sustaining prevention programs with local resources. Generally speaking, providers have little incentive to claim an ownership role in their programs when the state funds 100 percent of the program at the outset. Furthermore, local funding organizations have been reticent to backfill funding being withdrawn from the state. In the model being tested, the state investment will grow commensurate with a local match.

Community Collaboration

Community coalitions and local initiatives have taken root in a number of communities as a result of requirements in PEI's early childhood contracts. These coalitions are each charting their own path under local leadership with support provided through PEI staff and technical assistance providers. United Ways of Texas is one of PEI's technical assistance providers. In fiscal year 2017, United Ways of Texas began helping coalitions adopt business practices necessary to sustain and amplify their work. Through webinars, consultations and toolkits, coalitions are now better equipped to engage community champions that can leverage additional resources and spearhead changes to early childhood policies, practices and systems.

First 5 Permian Basin is one of those organizations. First 5 Permian Basin is a PEI-funded early childhood program housed at The University of Texas of the Permian Basin. It hosts an early childhood coalition composed of members of the education, health, government, social services and faith communities. In 2017, First 5 Permian Basin received a four-year, \$1 million grant from the Midland-based Abell-Hanger Foundation to expand services to Midland families. This will support the addition of two home visitors and one fatherhood program coordinator. First 5 also received a three-year, \$51,000 grant from United Way of Midland County to further support the fatherhood coordinator's work.

Another example is in San Antonio. Under the leadership of United Way of San Antonio, Bexar County stakeholders developed a children's agenda. Using the Results-Based Accountability™ framework, more than 60 partners devoted three to four hours per week for 12 weeks to develop a shared vision and metrics. By creating a common agenda for children, United Way of San Antonio can now implement other alignment strategies, including common enrollment forms, common assessments, a shared and integrated database to capture families' information, and public buy-in of shared goals and values for children zero to 8 years old and their families.

Federal Grants

Through a mix of competitive and formula grants, PEI receives substantial financial support from the federal Maternal, Infant, Early Childhood Home Visiting (MIECHV) grant program and the Community-Based Child Abuse Prevention (CBCAP) grant program of the federal Administration for Children and Families. In fiscal year 2017, MIECHV funding accounted for approximately 35 percent of PEI's early childhood home visiting budget, and the CBCAP grant supported PEI's father-focused initiatives, HEAL (Home Visiting, Education, and Leadership) program, and vital public awareness and education efforts. MIECHV legislation is up for reauthorization at this time. Should MIECHV funding levels change as a result of the reauthorization process, the impact in Texas would first be felt in fiscal year 2020.

In fiscal year 2017 PEI applied for four federal grants and was awarded three: a MIECHV grant to support home visiting, a CBCAP grant to serve targeted populations and sustain public awareness and education efforts, and a Children's Justice Act grant to provide safety trainings for Child Protective Services staff and stakeholder groups.

Goal 3: PEI will make and share decisions about investments in families and communities based on an analysis of community risk and protective factors as well as community-developed needs assessments.

In fiscal year 2017, PEI made a number of advancements related to assessing risk and protective factors and implementing needs and readiness assessments. To better inform decision-making regarding selection of communities for program implementation, PEI uses publically available

data to build community profiles and risk assessments. This includes using data from the Department of State Health Services (DSHS), Texas Education Agency (TEA), Texas Juvenile Justice Department (TJJD), US Census Bureau, and other state and federal data sources. The purpose of these risk assessments is to apply a standardized and measurable methodology that demonstrates the needs of individual communities. It also ensures that funding-eligible communities include high-risk and hard-to-engage populations and that the needs of families in urban, rural and geographic diverse areas are considered.

In addition, PEI is providing training and technical assistance to communities on how to select and implement needs assessments and readiness assessments and how to use the data in decision-making. When appropriate, community needs assessments are now a required component of PEI's procurement process. And to better target services for PEI's Community Youth Development program, Texas A&M University developed logic models in fiscal year 2017 to help define needs for this ZIP-code based youth program.

PEI also funds community-specific training, coaching and facilitation to support local collective impact initiatives and provides comprehensive education and training at its statewide community impact meeting. In 2017, through a contract with Clear Impact, three early childhood coalitions funded in part by PEI (Hidalgo, Willacy, Cameron and Starr counties; Ector and Midland counties; and Bexar County) began using Results-Based Accountability™ tools and methods to plan, track and monitor progress toward their shared goals. The framework helps coalitions establish and strengthen priorities, assess and forecast program performance, identify contributing and restricting factors, define clear strategies, and develop and execute action plans that lead to measurable impact. Each of the three coalitions is organizing around a common agenda, defining shared means to measure progress, and effectively collaborating with stakeholders.

In late fiscal year 2017, PEI contracted with SUMA Social Marketing to conduct focus groups about the STAR program. Focus group were held with STAR staff, potential clients, referral sources, physicians and rural community members to gain an understanding of perceived community needs, barriers to services, knowledge of the STAR program and assessment of strategies currently being utilized. This report will be available in October 2017.

Goal 4: Utilize research findings to improve program implementation, to direct program funding toward the most effective programs and ultimately to achieve better results for children and families.

Research Roundtable

PEI relies heavily on the research capabilities and expertise available through Texas' institutions of higher education. To ensure data collection and measurement are coordinated and uniform across institutions, PEI hosts quarterly roundtable meetings for its academic research partners. Members include researchers from The University of Texas at Austin, Baylor College of Medicine, UT Health Northeast and Texas A&M University. The University of Washington is also represented through a partnership with Casey Family Programs. The group considers strategies for measuring service quality, fidelity and outcomes, including ways to display data and how to more regularly review data for continuous quality improvement. In 2017, the roundtable helped PEI evaluate the Protective Factors Survey and assess alternatives. The roundtable also is helping PEI define and vet evidence-based practices and develop a validated tool for assessing outcomes.

Safe Babies

PEI is also linking de-identified public health data with child welfare data to better understand how to increase parental competencies, reduce depression among parents, increase coping skills among fathers and increase positive experiences in the postnatal period. Identified as "Safe Babies," this five-year research project was funded by the 84th Legislature and is being conducted by UT Population Health and Baylor College of Medicine. The purpose of the project is to evaluate hospital and clinic-based interventions designed to prevent maltreatment, especially abusive head trauma in infants, and to develop a strong evidence base that leads to wide-scale implementation of education that supports positive parenting and provides tools to help parents cope with the difficult aspects of caring for an infant.

A report outlining the implementation and program fidelity of the Period of PURPLE Crying® in Texas hospitals will be available September 1, 2017. Additional studies include a randomized control trial evaluating the Period of PURPLE Crying and other evidence based prevention programs targeted directly at fathers (Paternal PURPLE); a randomized trial evaluating the Period of PURPLE Crying with additional supports that focus on maternal depression, maternal/infant sleep, and infant safe sleep practices (PURPLE Plus); and developing a mobile application for fathers to provide them with education and information about pregnancy, delivery, and postpartum issues, such as parenting issues. Further, the project will study whether the app can provide a way to approach population-level reach of prevention education for fathers.

Year-One Evaluation of HOPES I

An evaluation of the first cohort of Project HOPES led to a number of [recommendations from The University of Texas at Austin School of Social Work](#), including a recommendation to shift to an evidence-informed framework for prevention and early intervention services. While the UT School of Social Work and PEI's other research partners recommend policies that encourage, if not require, research-based approaches, they also say strict requirements for adherence to a specific evidence-based model must be balanced with individual community and client needs. As part of its year-one evaluation of HOPES I, researchers at the UT School of Social Work offered the following reasons for its recommendation to transition to an evidence-informed approach:

- The standards for determining what is evidence-based are varied, and programs designated with the label of evidence-based may not continue to produce evidence over time.
- Many programs are developed for a certain target population and might not be best-suited for non-traditional participants with certain needs and risk factors.
- Strong evidence-based models do not always exist for every issue and topic area. Thus, communities might be forced to select suboptimal models that are not tailored to their specific needs.

The report also documents the time and support necessary to “stand up” a home visiting program, enroll clients, maintain fidelity to evidence-based models and meet contractual requirements. The report underscores the need for significant and ongoing guidance and support from PEI and model developers, and PEI works every day to ensure that support is provided.

The table below summarizes PEI-commissioned research started or completed since 2014.

Table 1: Research and Evaluation Projects Completed or Underway

PEI Program/Initiative	Research & Evaluation Partner	Currently Available Reports	Upcoming Reports
Texas Home Visiting	The University of Texas at Austin, LBJ School of Public Affairs, Center for Child and Family Research Partnership	Father Participation Evaluation, December 2014 Process-Implementation Evaluation, Interim Report, September 2015 Process Implementation Evaluation, Final Report, Fall 2016 Father Participation and Retention Evaluation, Preliminary Report, Fall 2016 Systems-Level Change Evaluation, Preliminary Report, Fall 2016	Systems-Level Change Evaluation, Final Report, December 2017
Healthy Outcomes through Prevention and Early Support (HOPES)	The University of Texas at Austin, School of Social Work, Texas Institute for Child & Family Wellbeing	HOPES Evaluation Plan, January 2015 Literature Review: Evaluation of Child Maltreatment Prevention Developing Strategies for Child Maltreatment Prevention: A Guide for Community Needs Assessments, June 2015 Analysis of Ten Years of Prevention Outcomes, Fall 2016 Preliminary Effectiveness Report on HOPES I, Fall 2016	HOPES I FY17 Final Report, Fall 2017 HOPES I FY18 Final Report, Fall 2018 HOPES I Final Evaluation Report, Fall 2019
Military and Veterans Family Program	SUMA	Literature Review Focus Group Report	
Military and Veterans Family Program	The University of Texas at Austin, LBJ School of Public Affairs, Center for Child and Family Research Partnership	Preliminary Report, Fall 2016	Final Report, Fall 2017
Fatherhood Programs	SUMA	Literature Review Focus Group Report	

PEI Program/Initiative	Research & Evaluation Partner	Currently Available Reports	Upcoming Reports
Fatherhood Programs	The University of Texas at Austin, LBJ School of Public Affairs, Center for Child and Family Research Partnership	Literature Review, Fall 2015 Fatherhood Evaluation Report, Summer 2017	Fatherhood Evaluation, 2018
Safe Sleep Public Awareness	SUMA	Literature Review Focus Group Report	
Youth Programs - Recruitment and Branding	SUMA		Focus Group Report, Fall 2017
Services to At-Risk Youth (STAR) Community Youth Development (CYD) Program	Texas A&M University, Department of Recreation and Tourism	Review of programs for STAR population, Fall 2016 Review of assessments related to measuring outcomes, Fall 2016 Literature Review for CYD, Fall 2016	CYD Evaluation Plan, Summer 2017 STAR Referral Sources Report, December 2017 CYD Evaluation Preliminary Report, Summer 2018 CYD Evaluation Final Report, Summer 2019
Safe Babies Project	The University of Texas Health Science Center at Tyler		Legislative report, Fall 2017 PURPLE Plus Study, Spring 2018 Paternal PURPLE Study, Fall 2018 Final Report, Summer 2020

Goal 5: PEI will measure and report on the effectiveness of its programs on an annual basis and will make timely course corrections based on available data.

In December 2016, PEI reported on the effectiveness of its programs as required by the 2016-2017 General Appropriations Act, H.B. 1, 84th Legislature, Regular Session, 2015 (Article II, Health and Human Services Commission, Rider 38). The report includes data required by Rider 38 and also fulfills reporting requirements for Texas Home Visiting (Senate Bill 426, 83rd Legislative Session, Texas Government Code §531.9871) and for parent education programs (Senate Bill 2630, 84th Legislative Session, Texas Family Code §265.1035). A separate report was issued at the same time for the Texas Nurse-Family Partnership program (Texas Family Code §265.109). These and other program evaluations are available on the PEI website.

Through an array of services designed to serve the most vulnerable and highest risk children, PEI has and continues to build a network of evidence-based and promising-practice programs that led to the following positive outcomes in fiscal year 2016 (most recent data available):

- Nearly all (99.7 percent) of children and youth remained safe from maltreatment while receiving services.
- More than 95 percent of youth engaged in services did not become involved with the juvenile justice system.
- Families involved with evidence-based home visiting services had better overall health outcomes than the general Texas population and individuals served by comparable programs. This includes no preterm births in fiscal year 2016, higher breastfeeding rates, and more than half of all clients served increased self-sufficiency through educational programs and/or employment.

Beginning with fiscal year 2018, PEI will begin reporting on a revised set of outcomes measures established by the Legislative Budget Board.

Table 2. Legislative Budget Board Outcome Measures for Fiscal Year 2018-2019

Measure	Status
Percent of STAR Youth Have Better Outcomes 90 Days after Termination	Current
Percent of STAR & CYD Youth Not Referred to Juvenile Probation	Expanded
Children Remain Safe during PEI Services Provided to Parents	New
Children Remain Safe 12 months after PEI Services Provided to Parents	New
Children Remain Safe Three Years after Services Provided to Parents	New

PEI’s program evaluations in 2017 have already led to changes and more are ahead. Specifically, recommendations from the Child and Family Research Partnership at The University of Texas at Austin have helped providers identify and implement new strategies to improve recruitment and retention for home visiting and parent education programs. A separate body of research also conducted by the Child and Family Research Partnership has improved PEI’s collective understanding of fathers’ motivations for enrolling in parent-support programs and how best to engage with them. Finding from the same research are also being used to develop parent-support videos that appeal to fathers.

In addition to providing effective direct services to families, PEI’s online parenting resource page, HelpandHope.org, drew more than 468,000 pages views in 2016. Parents and other caregivers are tapping into this rich collection of videos and other educational content designed to help them better understand child and youth development and adopt positive parenting behaviors. Help and Hope videos released in fiscal year 2016 were watched more than 1.6 million times.

Goal 6: PEI will maximize its impact by collaborating with other state entities and external organizations working with similar populations.

The Legislature and DFPS recognize the importance of collaboration across state agencies and with external organizations. To that end, PEI leads several cross-agency initiatives and participates in many others, including the Interagency Safe Sleep Workgroup, the Texas Perinatal and Infant Oral Health Quality Improvement Expansion Project, Texas Project LAUNCH and the Texas Behavioral Health Institute's annual conference planning committee, all of which are coordinated by the Department of State Health Services.

PEI also collaborates extensively with the Office of the Texas Attorney General on trainings and educational initiatives related to child support and fathers' rights and responsibilities. In addition, PEI participates in meetings of the Cross-Agency Mental Health Liaison Group organized by the Health and Human Services Commission and the Adolescent and Young Adult Health Collaborative Innovation and Improvement Network (CoIIN) sponsored by the Association of Maternal and Child Health Programs.

Early Childhood Systems Integration Group

The Early Childhood Systems Integration Group is a collaboration of Texas state agencies working together to identify, coordinate and implement cross-sector initiatives for young children and their families. The work group addresses issues and opportunities related to service delivery, systems design and data coordination. Members include representatives from the Department of Family and Protective Services, Health and Human Services Commission, Department of State Health Services, Texas Education Agency, Texas Workforce Commission and Office of the Attorney General. PEI provides leadership and staff support for the group.

In 2017, the group developed a crosswalk to show current performance measures and accountabilities across all member agencies. The crosswalk has been used to identify areas of shared priorities and areas of distinction and will be the basis for a multi-agency strategic planning process. Through the previously mentioned partnership with Clear Impact, the interagency group underwent training on Results-Based Accountability™ and is creating a statewide scorecard to track progress toward shared goals.

Fatherhood Interagency Group

On behalf of PEI, UT's Child and Family Research Partnership facilitates quarterly meetings and coordinates activities among agencies serving fathers. This Fatherhood Interagency Group includes representatives from Women, Infant and Children (WIC), Office of Attorney General, Texas Education Association, Child Protective Services, PEI, and other state human service programs and organizations. The meetings are opportunities to provide updates on respective programs and research activities, as well as contribute to the planning of PEI and CFRP's annual

Fatherhood Summit. As a result of this collaboration, the Office of the Attorney General conducted child support information sessions for PEI's Fatherhood EFFECT providers. In addition CFRP worked with group members to catalog initiatives in Texas that aim to increase and improve fathers' involvement with their children.

Juvenile Justice Prevention Group

The Texas Department of Family and Protective Services, the Texas Juvenile Justice Department, the Texas Education Agency, and the Texas Military Department work together to coordinate the delivery of juvenile delinquency prevention and dropout prevention and intervention services aimed at preventing academic failure, failure on state assessments, dropout, juvenile delinquency, truancy, runaways and children living in family conflict. The group meets to learn about one another's programming; to identify key considerations in the coordination, planning and delivery of services; and to identify opportunities to enhance the coordination, planning and delivery of prevention and intervention services.

PEI continues to work with DSHS to implement action steps in the DSHS-DFPS Strategic Plan to Reduce Child Abuse and Neglect Fatalities. This includes ongoing work related to safe sleep practices, water safety and vehicle safety. Additionally, both agencies are currently involved in Project S.A.F.E, an initiative created by the Office of the Governor and overseen by the Texas Council on Family Violence. Project S.A.F.E. (Survivors are Fundamental to the Equation) is focused on improving collaboration between child welfare agencies and family violence centers in Texas to improve safety for children and families. PEI is working with DSHS to complete a second round of data collaboration that will match child welfare data for all confirmed maltreatment with state health records. This level of matching will replicate the original DSHS-DFPS Strategic Plan but also provide a wider assessment of the risk factors and protective factors that can be leveraged to address all maltreatment, not just child fatalities.

Goal 7: PEI will be transparent and inclusive in its planning and operations and will proactively publish its strategic plan and progress towards its goals.

PEI does a number of things to keep its stakeholders informed and involved in planning and operations. In addition to the major efforts described below, PEI regularly conducts surveys and hosts conference calls, webinars and in-person meetings with providers, advocates, researchers and other stakeholders. These points of contact are used to guide policy decisions, identify training needs and address implementation issues.

Prevention Roundtable

DFPS created the Prevention Roundtable in 2016 in response to recommendations contained in the 2015 Protect Our Kids Commission report. The roundtable met for the fifth time and final

time in July 2017. It has provided input to the agency regarding prevention and early intervention services, including PEI's five-year strategic plan.

DFPS will replace the current Prevention Roundtable with the new Prevention Task Force created by HB 1549. Per HB 1549, the task force will focus on helping DFPS develop a growth strategy for prevention and early intervention services and implementing elements of PEI's strategic plan. The task force is required to submit a report with recommendations to the commissioner no later than August 31, 2018. The task force will then continue to exist in statute until August 31, 2019, presumably to represent its work in the 86th legislative cycle.

Prevention Task Force

Pursuant to HB 1549, 85th Texas Legislature, Regular Session, PEI will establish a Prevention Task Force to make recommendations to the department for changes to law, policy, and practices regarding:

- the prevention of child abuse and neglect;
- the implementation of the changes in law made by HB 1549; and
- the implementation of the department's five-year strategic plan for prevention and early intervention services developed under Section 265.005, Family Code.

DFPS Commissioner Hank Whitman is expected to appoint task force members and designate a chair in September 2017. The group will have its first meeting in the first quarter of fiscal year 2018.

Provider Roundtable

In late 2017, PEI formed a provider roundtable from its network of contractors and grantees to serve as a readily available planning partner and sounding board. The group will meet in person for the first time at the 2017 Partners in Prevention conference and thereafter at the conference each year and by phone and electronic means an estimated three times per year. The organizational leaders selected for the roundtable will give voice to the realities of serving children and families in diverse communities across the state.

Regional Meetings in Fiscal Year 2018

Building on the positive response to a series of regional meetings in fiscal year 2016, PEI is planning another round of community conversation in fiscal year 2018. These meetings will further PEI's efforts to develop a deeper understanding of the on-the-ground realities of establishing, sustaining and expanding voluntary family support programs in the diverse communities of Texas. Knowledge gained will inform planning initiatives, policy proposals and grant applications.

Outcomes of the 85th Texas Legislature, Regular Session

With an overriding tone of fiscal restraint, PEI’s budget for fiscal year 2018-2019 includes increases for four programs (shown below) and flat funding for all other programs. Table 3 outlines increases in program funding for the fiscal year 2018-2019 and how the funding will be used.

Table 3: Expanded Funding Summary

Program	Additional Allocation FY17-18	Implementation Plan
STAR	\$1.34 million	Add additional money to current contracts with requirement to serve more families and increase evidence base and level of innovation.
HIP	\$1.6 million	Take a hybrid approach to expanding provider base and capacity to serve more families through the existing provider enrollment and possibly a request for proposals. Test a cost-reimbursement approach in areas where HIP is not currently available.
Texas Home Visiting	\$800,000	Select additional community from most recent request for applications (RFA) to provide services and test progressive funding strategy described on page 7.
Nurse-Family Partnership	\$5 million	Allocate funding across 10 current NFP sites to hire more home visitors, serve more families and support infrastructure development.

Table 4 compares funding for the fiscal year 2016-2017 and fiscal year 2018-2019 biennia. Fiscal year 2018-2019 funding includes new funding shown in Table 3 above. The decrease in home visiting funding and the increase in funding for program support are due to an accounting reclassification. Fiscal year 2018-2019 funds for home visiting also reflect a decrease in federal funding.

Table 4: Total Funding Summary

Program	FY16-17	FY18-19
STAR	\$42,004,158	\$48,624,721
Community Youth Development Program	\$14,537,665	\$16,845,118
Texas Families: Together and Safe	\$5,220,565	Included in other strategies
Child Abuse Prevention Grants (includes HEAL)*	\$6,311,115	\$7,214,315
Other At-Risk Prevention Programs (HOPES, HIP, CBFS, SYSN, Military)	\$45,867,189	\$59,179,394
Home Visiting Programs (THV & NFP)*	\$67,065,960	\$62,980,670
At-Risk Prevention Program Support	\$3,805,651	\$15,050,279
TOTAL	\$184,812,303	\$209,894,497

* Federal funds are anticipated, not guaranteed.

PEI also received several new directives, with most new provisions codifying or supporting the direction the division is already headed. Together, Senate Bill 11 and House Bill 1549 take steps to help PEI put a growth plan in place and increase local capacity for serving more families. HB 1549 also establishes a two-year task force to make recommendations to the department regarding implementation of the bill and PEI's five-year strategic plan released last fall.

In addition, House Bill 5 moves the Department of Family and Protective Services outside of the Health and Human Services system. Effective September 1, 2017, DFPS will be an independent agency, and PEI will continue to be part of it.

As directed by House Bill 1549, DFPS will establish a two-year Prevention Task Force and work with its members to develop a growth strategy for prevention and early intervention services. PEI will also seek counsel from the task force on how best to meet other directives from the 85th Legislative Session. PEI will provide administrative and technical support to the task force throughout its information-gathering and deliberation stages and in the production of its report, which is due to the DFPS commissioner August 31, 2018.

Strategic Priorities for Fiscal Year 2018

PEI has prioritized the following six strategic initiatives for fiscal year 2018. These are operational improvements or legislative directives that fall within the scope of PEI's current five-year strategic plan.

1. Working under the direction of the 85th Legislature and DFPS Commissioner Hank Whitman, PEI will organize and support a Prevention Task Force for the purposes outlined in H.B. 1549 and on page 17 of this report. PEI will propose a plan to provide the research, data mapping and project facilitation necessary to meet the task force's legislative charge.
2. Consistent with HB 1549, the Office of Child Safety will take all necessary steps to include near fatality child abuse or neglect cases in the child fatality annual review and report, for cases in which child abuse or neglect is determined to have been the cause of the near fatality. The Office of Child Safety will also produce an aggregated report relating to child fatality and near fatality cases resulting from child abuse or neglect.
3. PEI will further explore best practices in program implementation and expansion, including how to implement adaptations without jeopardizing effectiveness and how to enhance peer learning across the state.
4. PEI will plan for potential program transitions based on funding cycles, contract expiration dates and programmatic data as a component of its growth plan.
5. To further improve and sustain productive relationships with communities, PEI will create additional opportunities and mechanisms for dialogue with community leaders, faith-based organizations and other stakeholders.
6. PEI will take steps to integrate its new data tracking and processing capabilities into strategic and operational decision-making processes.