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CPS Mission, Vision, and Values

Child Protective Services (CPS) responds to reports of child abuse or neglect to assess whether any child in the reported family is in danger. If danger is present, CPS determines whether parents are willing and able to keep children safe. If CPS concludes that children aren't safe, the caseworker opens the case for services.

CPS Mission
We partner with families and communities to address child abuse and neglect by practicing in a way that ensures safety, permanency, and well-being for the children and youth we serve.

CPS Vision
We partner with families and communities to address child abuse and neglect by practicing in a way that ensures safety, permanency, and well-being for the children and youth we serve.

CPS Values
Our values represent the ideals we share and serve as broad guidelines for every situation.

Respect
We show respect to the children, youth, and families we serve by demonstrating our understanding that they are more than the reason that brought them to us, and by seeking ways for them to guide the help they receive.

Commitment
We display our commitment though pursuit of the best outcome for each of the children, youth, and families we serve, knowing our interventions have important implications for them.

Integrity
We demonstrate integrity by communicating to the children, youth, and families we serve about our purpose and how we make decisions in a way that is easily understood, and when we follow through on our words and obligations to them.
Introduction from the Assistant Commissioner

For the past year, CPS has been engaged in efforts to transform the way we work so we can be more responsive to our staff, clients and stakeholders. Informed by a 2014 internal operational review and review by the Sunset Advisory Commission, both of which drew heavily on input from staff, CPS identified priority changes to improve the way CPS does business. In the summer of 2014, CPS began a comprehensive, field-driven effort to guide the transformation. Transformation challenged CPS to establish a culture of learning, constantly striving for improvement while remaining steady on our mission and vision for success. In fiscal year 2016, CPS continues to embrace these changes and to improve the most important outcomes for children and families: safety, permanency, and well-being.

Safety is our first objective. In fiscal year 2015, CPS implemented new Structured Decision Making® (SDM) safety and risk assessment tools to help investigative caseworkers and managers make difficult case decisions. SDM tools follow a structured series of steps that support consistent decision making based on historical data. With these tools, CPS aims to prevent removal when possible, and to direct resources to cases most in need of services. For fiscal year 2016, CPS will expand use of the safety assessments to other stages of service. (See Appendix B for a description of CPS stages of services). CPS will also develop three new SDM tools—a family strengths and needs assessment, risk reassessment, and reunification assessment. Along with training and guidance from experienced supervisors, these tools are a significant support to our caseworkers.

Children fare better when time spent in the foster care system is minimized. In 2015, CPS, in partnership with external stakeholders, set out to create a culture of permanency and improve key outcomes for children and youth. The Permanency Strategic Plan defines and focuses CPS’ efforts to more quickly achieve permanency for children in state custody. CPS works toward reunification with family, permanent placement with relatives, or adoption as successful permanency outcomes. Emancipation from foster care is not a positive outcome. The Permanency Strategic Plan outlines a goal to reach permanency more quickly for all children, with special focus on two specific groups of children—those under age six who have been in care for two or more years and youth aging out of the foster care system. In fiscal year 2016, CPS will implement action plans at the state and regional level in collaboration with stakeholder partners to work toward ambitious permanency targets in these areas.

The services we can make available to children while in our care make a difference. In addition to reducing the length of time children remain in foster care, CPS is improving the quality and stability of the foster care experience. CPS must thoroughly assess children’s needs as they enter care to ensure their physical and mental health needs are met. In fiscal year 2016, CPS will implement the Child and Adolescent Needs and Strengths (CANS) assessment, a result of the work of Senate Bill 125 passed during the 84th legislative session which mandates a standard assessment process. CANS is a developmentally appropriate, comprehensive evaluation that includes a screening for trauma. STAR Health, the Medicaid health plan for children in state custody, will administer the assessment. Enhancements to this health plan contract will also provide better coordination of services for all children and decrease the need for higher-end services for children with more intensive medical and behavioral needs. For example, STAR Health will increase psychiatric hospital diversion services and provide mobile crisis outreach services to more urban areas.

We must always listen for the voice of the child. CPS’ practice approach emphasizes the importance of engaging children to make sure they have a say both in what needs to change in their families and in shaping their foster care experience. Understanding each child’s worries and needs helps us support them and their family. Making sure children in foster care have access to the same activities and
opportunities as children not in foster care is part of this important responsibility. CPS will continue working with our residential partners in the year ahead to better meet normalcy expectations.

**We must engage families in the process.** At the heart of our work are the actions we carry out to engage with families to address danger and risk for children and create lasting safety beyond the time that our intervention has ended. Our values tell us the responsibility for creating safety for children lies primarily with the family. We use our authority to protect children while developing a relationship with caregivers based on respect and the belief that all individuals are capable of change. As part of the rollout of new Structured Decision Making® tools and assessments, CPS will conduct training that introduces staff to new techniques for engaging and assessing families, and the people they identify as safety networks, to create rigorous safety plans.

This principle of engaging families and safety networks in developing safety plans is part of our new Structured Decision Making® and evidence-based practice model (See Appendix C and [The CPS Practice Model](#)). These principles are also key components of Alternative Response, a new CPS stage of service, and Signs of Safety, a new practice approach CPS is implementing in all other stages of service. Alternative Response represents a philosophical shift in how CPSresponds to reports of alleged abuse and neglect that have no immediate safety issues and therefore do not require a traditional investigation and designation of a perpetrator. Instead CPS caseworkers focus on ways to strengthen family functioning and reduce risk of future abuse or neglect. Signs of Safety is a successful approach to child protection casework that focuses on family strengths and organizing case practice around safety. Signs of Safety provides staff with specific tools, training, and supervision to deepen clinical skills as they work directly with families to create positive change.

**Collaboration with internal and external partners is essential to produce good outcomes.** CPS is not alone in our work to protect children. Many internal and external partners support the Department of Family and Protective Services (DFPS). Within DFPS, we coordinate with our intake, adult protection, and prevention and early intervention programs, and rely on agency operational support. Within the child welfare community, we interact daily at the state and regional level to partner with advocates, community-based organizations, the judicial system, and contractors to serve children and families. This business plans highlights the significance of these partnerships and their vital function to our work.

Our contracted service providers are especially critical to our work. Foster Care Redesign remains a strategic long-term effort to improve the well-being of children and families in the child welfare system. The goal of redesign is to better partner with foster care and service providers to improve safety, reduce the time to permanency, increase stability in placements, and ensure the right capacity for children in foster care. In fiscal year 2016, CPS will continue to explore using performance-based contract management strategies for all contracted services to emphasize critical safety, permanency, and well-being outcomes, and introduce greater provider accountability in supporting those outcomes.

**To have the best system, we must have the best staff.** Our success relies on having a skilled and stable workforce. We must hire the right candidates, train them for field work, provide effective supervision and support, and give them opportunities to grow within the agency as the next generation of leaders. During fiscal year 2016, CPS will continue to strengthen the new continuous learning training model for caseworkers and to grow our mentoring program. We will assess how well we are meeting the basic training needs of supervisors and make changes that may be needed, continuing to build on Strengths-Based Supervision training implemented statewide in fiscal year 2015. Support from a strong supervisor is key to retaining staff, and it is incumbent on the rest of the organization to support our supervisors.
CPS will continue to evolve and identify new improvements because that is part of the vision of transformation. The CPS operational review conducted in spring 2014, along with the Sunset review, identified the issues and solutions that led to transformation. Moving forward, CPS has developed a Continuous Quality Improvement (CQI) program to help sustain positive change and drive ongoing systems improvement. Under a CQI structure, there is no point at which an agency can consider its improvement efforts done. Instead, the CQI structure helps us use data to evaluate where CPS currently stands, identify where we need to go, develop and implement key strategies to get there, and then start the process again. By developing a more robust CQI program, CPS will identify problem areas proactively and continue the work of transformation.

The following plan lays out CPS’ state-level goals, objectives, and action items for fiscal year 2016 and how we will measure success. The plan is comprehensive, ambitious, and includes state of the art tools and practices that will place Texas CPS at the forefront of child welfare. Subsequent plans will assess how well these strategies meet our goals, and detail course corrections or new strategies.
CPS Fiscal Year 2016 Business Plan

The goal of CPS is to achieve safety, permanency, and well-being for the children it serves. Metrics for measuring safety, permanency and well-being help CPS evaluate program goals. Appendix A provides definitions for each metric.

To achieve these goals for children, CPS needs to build and maintain a professional and stable workforce and continue the change efforts and momentum of transformation. To evaluate the strength of its workforce, CPS will track turnover by tenure and stage of service along with Survey of Employee Engagement results related to job expectations, communication practices, and feeling valued - all areas where CPS has historically scored low. Administered statewide to all government agencies every other year, the Survey of Employee Engagement will next be conducted in April 2016.

CPS must also further develop a culture of learning by developing its continuous quality improvement structure to assess progress and as the basis for ongoing change efforts. To evaluate the development of its continuous quality improvement efforts, CPS will track key milestones that need to be achieved.

For this initial business plan, CPS examined historical trends for safety, permanency, well-being, and workforce metrics to identify those that have been improving and those in decline. Historical trends over time allow CPS to understand where it has been, where it currently stands, and where it is headed if trends continue. This helps CPS to proactively and more effectively identify and target strategies to build on areas of strength and improve areas of weakness.

The specific strategies CPS is implementing are discussed in detail in the sections on Safety (Goal 1), Permanency (Goal 2), Well-Being (Goal 3), Developing a Professional and Stable Workforce (Goal 4) and Continuous Quality Improvement (Goal 5).

For each metric on safety, permanency, and well-being, CPS has identified aggressive targets for desired achievement. While the goal is always to deliver the best outcomes for children and families, and to produce the highest quality workforce, CPS identified targets that recognize the progress required to meet these goals while at the same time setting a high bar. CPS estimated continued trends based on recent data and identified targets based on these estimates as follows:

- For metrics that are already trending close to 100 percent, the target is 100 percent.
- For metrics that are not close to 100 percent but where the trend over time shows improvement, the target is to not only maintain but improve upon the estimated trend. (10 percent improvement)
- For metrics that have been declining over time, the target is to not only slow the negative trend but to turn the trend positive. (15 percent improvement).
- For time to permanency, the target is consistent with the DFPS permanency strategic plan goal to safely reduce the average time to achieve permanency by 25 percent by 2020.
- For the number of youth 18 and over in foster care, CPS initially wants to increase the number of youth who opt to stay in extended foster care beyond age 18 to support readiness for full independence. Over time, CPS will adjust the target to reflect the desired increase in the number of youth reaching permanency before they are 18.
- For turnover, the targets set an aggressive 5% improvement on the current estimated trend.

In its business plan for each succeeding year, CPS will identify how its actual performance compared to its targets and use that information to develop and adjust plans and strategies moving forward. The historical trends and fiscal year 2016 targets are detailed in the table below. Definitions for measures are in Appendix A.
## Performance Targets

### Safety

<table>
<thead>
<tr>
<th>Safety</th>
<th>FY12</th>
<th>FY13</th>
<th>FY14</th>
<th>FY15</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recidivism for Alternative Response*</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Recidivism for Investigations</td>
<td>7.0%</td>
<td>7.1%</td>
<td>7.5%</td>
<td>7.7%</td>
<td>6.8%</td>
</tr>
<tr>
<td>Recidivism for Family Based Safety Services</td>
<td>7.0%</td>
<td>7.2%</td>
<td>7.8%</td>
<td>7.6%</td>
<td>6.8%</td>
</tr>
<tr>
<td>Recidivism for Conservatorship</td>
<td>11.0%</td>
<td>11.6%</td>
<td>11.6%</td>
<td>11.5%</td>
<td>10.5%</td>
</tr>
</tbody>
</table>

### Permanency

<table>
<thead>
<tr>
<th>Permanency</th>
<th>FY12</th>
<th>FY13</th>
<th>FY14</th>
<th>FY15</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time to permanency (reunification, permanent placement with relative, adoption) in months</td>
<td>18.5</td>
<td>18.9</td>
<td>18.8</td>
<td>18.5</td>
<td>14.0</td>
</tr>
<tr>
<td>Visiting with parents and siblings in foster Care **</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Children in substitute care placed with relatives</td>
<td>39%</td>
<td>40%</td>
<td>41%</td>
<td>42%</td>
<td>47%</td>
</tr>
<tr>
<td>Average number of placements for children in foster care</td>
<td>3.4</td>
<td>3.4</td>
<td>3.2</td>
<td>3.2</td>
<td>2.8</td>
</tr>
</tbody>
</table>

### Well Being***

<table>
<thead>
<tr>
<th>Well Being***</th>
<th>FY12</th>
<th>FY13</th>
<th>FY14</th>
<th>FY15</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children’s educational needs are met</td>
<td>97%</td>
<td>97%</td>
<td>96%</td>
<td>93%</td>
<td>100%</td>
</tr>
<tr>
<td>Children’s physical health needs are met</td>
<td>93%</td>
<td>89%</td>
<td>91%</td>
<td>87%</td>
<td>100%</td>
</tr>
<tr>
<td>Children’s mental/behavioral health needs are met</td>
<td>94%</td>
<td>92%</td>
<td>91%</td>
<td>88%</td>
<td>100%</td>
</tr>
<tr>
<td>Youth completing PAL</td>
<td>75%</td>
<td>76%</td>
<td>76%</td>
<td>72%</td>
<td>80%</td>
</tr>
<tr>
<td>Youth 18 and older living in foster care</td>
<td>602</td>
<td>634</td>
<td>615</td>
<td>667</td>
<td>674</td>
</tr>
<tr>
<td>Siblings in substitute care placed together</td>
<td>63%</td>
<td>66%</td>
<td>66%</td>
<td>65%</td>
<td>73%</td>
</tr>
</tbody>
</table>

### Workforce

<table>
<thead>
<tr>
<th>Workforce</th>
<th>FY12</th>
<th>FY13</th>
<th>FY14</th>
<th>FY15</th>
<th>Target</th>
</tr>
</thead>
<tbody>
<tr>
<td>Turnover for CPS overall</td>
<td>26%</td>
<td>26%</td>
<td>25%</td>
<td>26%</td>
<td>24%</td>
</tr>
<tr>
<td>Turnover for Alternative Response**</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Turnover for Investigations</td>
<td>34%</td>
<td>32%</td>
<td>34%</td>
<td>33%</td>
<td>31%</td>
</tr>
<tr>
<td>Turnover for Family Based Safety Services</td>
<td>26%</td>
<td>25%</td>
<td>23%</td>
<td>28%</td>
<td>25%</td>
</tr>
<tr>
<td>Turnover for Conservatorship</td>
<td>24%</td>
<td>22%</td>
<td>23%</td>
<td>23%</td>
<td>21%</td>
</tr>
<tr>
<td>Time with Families****</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

* Preliminary data for Alternative Response will be available in fiscal year 2016.
** Visitation in foster care is a new well-being data measure for Round 3 of the Child and Family Services review that will be collected through case reads. No target is set this year as we gather baseline data in fiscal year 2016.
*** Fiscal Year 2015 data for educational, physical and behavioral health needs are based on Child and Family Service Case reviews through Quarter 3. Quarter 4 data was not available at the time of this report.
**** Time with families is being newly tracked in IMPACT, DFPS’ case management database, and will be reported for fiscal year 2016.
Goal 1: Maximize the Safety of Children and Youth Served by the CPS System

Outcome Measures
- Reduced recidivism after an investigation is closed without services.
- Reduced recidivism after termination of Family Based Safety Services.
- Reduced recidivism after exiting state custody to reunification.

At its core, CPS works to create safety for children and families. The ultimate measure of safety for children is when CPS decides that a child will be safe without ongoing CPS intervention and supervision and the child actually remains safe. CPS measures whether a child remains safe by whether a child in a case closed by CPS has a subsequent confirmed investigation or a family preservation or substitute care case, which is also referred to as recidivism.

CPS looks at recidivism for 12 months (the period of time used by the federal government in the Child and Family Services Review) after CPS supervision ends. Data captured in fiscal year 2015 is therefore a reflection of services delivered in fiscal year 2014. As a result, the data does not yet reflect the impact of transformation initiatives.

Recidivism over the last several years in Investigations and FBSS has generally increased but has remained relatively stable in Conservatorship.1

Bar chart showing recidivism rates for Fiscal Years 12, 13, 14, 15 with three categories: 1) recidivism for investigators 2) recidivism for FBSS 3) recidivism for CVS

CPS will take a number of actions over the next year to reduce recurrence of abuse or neglect. New Structured Decision Making® tools are a significant strategy toward this goal. These tools help assess immediate dangers and intervention needed to keep children safe, along with likelihood of future abuse or neglect. Since turnover across stages mirrors recidivism to some degree, CPS also remains committed to reducing turnover as a means of improving client outcomes including recidivism.
Goal 1: Maximize the Safety of Children and Youth Served by the CPS System

Objective 1.1: Improve Safety Decision Making Across All Stages of Service

Leads: CPS Investigations/Alternative Response/Family Based Safety Services Division and CPS Permanency Division

- DFPS Resources: CPS Systems Improvement, CPS Division of Practice Excellence, CPS Purchased Client Services, DFPS Center for Learning and Organizational Excellence, and DFPS Information Resource Management
- Stakeholder Resources: Domestic violence stakeholders, Children’s Advocacy Centers™ of Texas, and residential child care contractors.

Action Plan

- In September 2015, CPS began training staff on new disposition guidelines for domestic violence cases. The guidelines mark a significant shift in how CPS handles domestic violence cases and are the culmination of work between CPS and domestic violence stakeholders as a result of Senate Bill 434.
- In September 2015, CPS implemented Advanced Interviewing Skills training for all Investigations staff to support effective information gathering for effective decision making.
- Beginning October 2016, Child Safety Specialists provide real-time feedback on safety issues, including successful adoption of Structured Decision Making® concepts and assessments into practice, using a structured investigations case reading guide. The structured guide ensures more consistency across reviewers and allows CPS to identify issues at the individual case level as well as track system patterns and trends to target needed improvements.
- In fall 2015, DFPS and Children’s Advocacy Centers™ of Texas will expand the roll out of the Multi-disciplinary Team (MDT) Enhancement Program in 40 additional counties. The program involves children’s advocacy centers at the point of intake to facilitate joint investigations and coordinate services, including medical evaluations, forensic interviews, and MDT case review for physical and/or sexual abuse cases fitting within each county’s MDT Working Protocol.
- In August-October, 2015, caseworker early adopters will use a newly developed assessment tool for Parental Child Safety Placements (PCSP) to ensure consistency and structure in decision-making. PCSPs are temporary out-of-home placements identified by parents when CPS determines a child is not safe remaining in their own home. Feedback from the early adopters will inform statewide implementation in October. The new tool will be available in IMPACT, DFPS automated case management system, by January 2016.
- Beginning December 1, 2015, CPS will pilot the use of 18 dedicated PCSP staff in Region 3, and five state office staff through phone calls, to conduct “check-ins” on cases that were closed with a child still in a PCSP where the caregiver did not have legal custody to ensure child safety. Results will inform future resource needs.
- In spring 2016, CPS will test the use of predictive analytics to identify potential high risk residential child care contracts and target proactive monitoring and intervention strategies to minimize risk. Changes to contracting are a significant part of CPS’ efforts to improve child safety and elevate the quality of service provision to children in foster care.
- In fiscal year 2016, CPS will make Structured Decision Making® assessments available in every stage of service. CPS will implement the Structured Decision Making® safety assessment (rolled out to Investigators in 2015) into policy and practice in the Alternative Response, Family Based Safety Services, and Conservatorship stages. The safety assessment provides a structured set of steps to help assess immediate dangers and make interventions to keep children safe. Beginning January
2016, CPS will work with a contracted entity to develop a structured family strengths and needs assessment tool to aid in case planning, and a reunification assessment and risk reassessment to guide decisions about closing a case. The tools will be rolled out to early adopters as soon as March. All tools will be implemented statewide and available in IMPACT by early fall 2016.

- **In fiscal year 2016**, CPS will continue to conduct Family Based Safety Services real-time case reads statewide. The case reads target limited resources to cases that data show are at a higher risk of serious recidivism to identify critical safety issues, and communicate and address concerns.
Goal 1: Maximize the Safety of Children and Youth Served by the CPS System

Objective 1.2: Engage Families and Safety Networks to Keep Children Safe

Leads: CPS Investigations/Alternative Response/Family Based Safety Services Division and CPS Permanency Division

- DFPS Resources: CPS Investigation/Family Based Safety Services Transformation Team, CPS Division of Practice Excellence, CPS Systems Improvement, CPS Disproportionality Team, DFPS Management Reporting and Statistics, and DFPS Center for Learning and Organizational Excellence.
- Stakeholder Resources: Texas Department of State Health Services, Texas Council on Family Violence, Kempe Foundation, and Casey Family Programs, and purchased client services contractors.

Action Plan

- **In December 2016**, CPS will complete statewide rollout of a new case transfer process from Investigations to Family Based Safety Services that seeks to initiate family preservation services early on in an investigation to more urgently serve families while they are in crisis. The process pairs Investigations and Family Based Safety Services units, initiates Family Based Safety Services within 10 days of the start of the investigation, and includes joint visits with families.
- **By March 2016**, CPS, the Texas Council on Family Violence, and the Department of State Health Services will begin training new subject matter guides on Domestic Violence, Mental Health and Substance Abuse. The training will help caseworkers with how and when to access community and purchased services to support changes in family behaviors.
- **In spring 2016**, in tandem with roll out of the Structured Decision Making® safety assessment and family strengths and needs assessment to Family Based Safety Services and Conservatorship staff, CPS will train on strategies and tools for engaging families and safety networks in partnerships that support the co-creation of rigorous, immediate and long-term safety plans for children. The training will build on core practice competency training delivered in fiscal year 2015. These trainings support emerging practice competencies and lay the foundation statewide for implementation of Signs of Safety, which is about deepening clinical practice. See Appendix C for the core practice competencies and levels of skill acquisition (emergent, accomplished, and distinguished).
- **In fiscal year 2016**, CPS will roll out Signs of Safety training to Investigations, Family Based Safety Services, and Conservatorship early adopter units in Regions 3, 7, 8, and 11. Signs of Safety is an effective child protection approach that is organized around creating safety for children in partnership with families, communities, and safety networks. The model has helped other child welfare systems decrease out of home placement, improve time to case closure, increase reunification rates, and decrease recidivism². CPS piloted the effort, which involves intensive clinical training and coaching of staff and supervisors (practice residencies), in Regions 3 and 11 Family Based Safety Services units with positive preliminary results.
- **In fiscal year 2016**, CPS will implement Alternative Response in four new regions (Regions 3, 7, 8, and 9) for a total of six regions. Regions 1 and 11 rolled out in fiscal year 2015. Alternative Response is a family engagement approach used to respond to certain low risk cases. CPS does not identify alleged perpetrators or give case disposition (finding of abuse/neglect). Alternative Response and Signs of Safety use similar tools for engaging children, families, and safety networks.
Goal 2: Maximize Permanency for Children and Youth Served by CPS

Outcome Measures

- Reduced time to permanency (placement with relatives, reunification, and adoption).
- Increased exits to permanency for African American children.
- Increased placement stability.
- Increased visitation with parents and siblings for children in foster care.
- Increased placement of children in substitute care with relatives.
- Reduced average number of placements in foster care.
- Expand faith-based supports. Number of counties with care portals: short term goal of 100 and long term goal of 254.

Once CPS removes a child from their home and takes legal custody, the agency has a responsibility to keep the child in a safe and stable placement close to home and with their family, whenever possible. But a safe, stable placement, even if it is close to home and with family, might only be a temporary solution. CPS must ensure the child finds a safe, forever family as soon as possible.

The stability of children in substitute care has improved, meaning fewer placement moves for children in foster care and more children living with their relatives.

<table>
<thead>
<tr>
<th>Where children are situated</th>
<th>FY 12</th>
<th>FY 13</th>
<th>FY 14</th>
<th>FY 15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average number of placements in foster care</td>
<td>3.4</td>
<td>3.3</td>
<td>3.2</td>
<td>3.2</td>
</tr>
<tr>
<td>Children in substitute care placed with relatives</td>
<td>39%</td>
<td>40%</td>
<td>41%</td>
<td>42%</td>
</tr>
</tbody>
</table>

DFPS defines permanency as reunification, permanent placement with relatives or adoption. While aging out of care is a Federal permanency goal, for the state of Texas, real permanency is leaving the CPS system with a family. CPS will work to provide youth with the knowledge, skills and support to prepare them for adulthood and legal permanency, however, “aging out” of care to adulthood is not a positive permanency outcome.

With respect to quickly moving children out of CPS custody, time to permanency has remained relatively unchanged. CPS has, however, improved in finding permanency for children in care two or more years, although there is still much work to be done. In fiscal year 2015, one out of three children who had been in care two or more years at the start of the fiscal year exited CPS custody to a permanent home.

<table>
<thead>
<tr>
<th>Time to permanency (average months)</th>
<th>FY 12</th>
<th>FY 13</th>
<th>FY 14</th>
<th>FY 15</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>18.5</td>
<td>18.9</td>
<td>18.8</td>
<td>18.5</td>
</tr>
</tbody>
</table>

CPS remains committed to examining race and ethnicity data to determine outcome disparities for children of color. CPS data continues to show that African American children are less likely to reunify than Anglo and Hispanic children; are more likely to emancipate from child welfare; and experience longer periods of time to adoption. CPS acknowledges that an examination of data related to these outcomes is essential to develop and implement strategies. As CPS seeks to identify barriers to permanency, disparity for children of color will be analyzed.
Exits to reunification

<table>
<thead>
<tr>
<th></th>
<th>FY12</th>
<th>FY13</th>
<th>FY14</th>
<th>FY15</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>27%</td>
<td>27%</td>
<td>26%</td>
<td>27%</td>
</tr>
<tr>
<td>Anglo</td>
<td>33%</td>
<td>31%</td>
<td>31%</td>
<td>31%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>36%</td>
<td>36%</td>
<td>33%</td>
<td>31%</td>
</tr>
<tr>
<td>Native American*</td>
<td>33%</td>
<td>25%</td>
<td>23%</td>
<td>20%</td>
</tr>
<tr>
<td>Other</td>
<td>34%</td>
<td>33%</td>
<td>28%</td>
<td>33%</td>
</tr>
</tbody>
</table>

Exits to Relatives

<table>
<thead>
<tr>
<th></th>
<th>FY12</th>
<th>FY13</th>
<th>FY14</th>
<th>FY15</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>62%</td>
<td>64%</td>
<td>64%</td>
<td>65%</td>
</tr>
<tr>
<td>Anglo</td>
<td>63%</td>
<td>63%</td>
<td>62%</td>
<td>66%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>65%</td>
<td>66%</td>
<td>68%</td>
<td>68%</td>
</tr>
<tr>
<td>Native American*</td>
<td>64%</td>
<td>30%</td>
<td>50%</td>
<td>50%</td>
</tr>
<tr>
<td>Other</td>
<td>62%</td>
<td>59%</td>
<td>65%</td>
<td>65%</td>
</tr>
</tbody>
</table>

Adopted w/in 12 months of termination of parental rights

<table>
<thead>
<tr>
<th></th>
<th>FY12</th>
<th>FY13</th>
<th>FY14</th>
<th>FY15</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>39%</td>
<td>41%</td>
<td>40%</td>
<td>44%</td>
</tr>
<tr>
<td>Anglo</td>
<td>54%</td>
<td>57%</td>
<td>55%</td>
<td>55%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>49%</td>
<td>51%</td>
<td>53%</td>
<td>53%</td>
</tr>
<tr>
<td>Native American*</td>
<td>0%</td>
<td>25%</td>
<td>50%</td>
<td>33%</td>
</tr>
<tr>
<td>Other</td>
<td>60%</td>
<td>54%</td>
<td>52%</td>
<td>52%</td>
</tr>
</tbody>
</table>

*The number of Native American children in CPS is relatively small and, as a result, the percentages may fluctuate significantly making it difficult to draw conclusions about trends over time.

In fiscal year 2016, to further improve permanency outcomes, CPS will maximize kinship placements; implement the [Permanency Strategic Plan](#) to focus on specific target populations of children; and strengthen partnerships with advocates, communities, and contracted providers.
Goal 2: Maximize Permanency for Children and Youth Served by CPS

Objective 2.1: Maximize Placements with Kinship Families

Lead: CPS Permanency Division

- DFPS Resources: CPS Reunification and Permanency Transformation Team, CPS Investigations/Alternative Response/Family Based Safety Services Division, CPS Interstate Compact for the Placement of Children (ICPC) Division, CPS Disproportionality Team.
- Stakeholder Resources: Court Appointed Special Advocates and the Texas judicial system.

Action Plan

- **As of September 1, 2015**, all CPS regions assign Kinship caseworkers to conservatorship units to ensure effective internal communication and the ability to more quickly provide support to kinship caregivers so that children can maintain connections with families. CPS will continue to support the practice, rolled out as part of CPS Transformation, and evaluate its impact.
- **In fiscal year 2016**, DFPS will partner with Texas Court Appointed Special Advocates to develop a model for family finding and intensive trainings for both CPS employees and Court Appointed Special Advocates employees and volunteers.
- **In fiscal year 2016**, to increase permanency options, CPS will provide targeted training and support to Statewide Intake, Investigations, Family Based Safety Services, and Conservatorship staff on available resources to find relatives and absent parents. CPS will continue to examine data on race and ethnicity as it relates to kinship caregivers and barriers to kinship placements and use this information to train staff.
- **In fiscal year 2016**, CPS will continue to implement Kids to Kinship (K2K) to identify children waiting to be permanently placed with relatives whose cases could be expedited with more support for completing the outstanding requirements.
- **In fiscal year 2016**, CPS will use annual adoption savings to provide support to relatives who assume permanent custody of children through permanent managing conservatorship or adoption. A new “post permanency support” program (similar to the current post adoption support program for non-relatives) would provide monetary support for items such as case management and therapy as a strategy to support relatives and prevent placement breakdowns.
- **In fiscal year 2016**, CPS will continue to devote resources to support timely out of state relative/kinship homes studies and placements to keep children with families and support permanency.
Goal 2: Maximize permanency for children/youth served by CPS

Objective 2.2: Ensure Permanency Through Reunification, Permanent Placement with Relatives, or Adoption

Lead: CPS Permanency Division

- DFPS Resources: CPS Regional leadership teams, CPS Reunification and Permanency Transformation Team, CPS Systems Improvement, CPS Division of Practice Excellence, CPS Foster and Adoption Development Division, and CPS Disproportionality Team.
- Stakeholder Resources: Harris County Child Protective Services; Casey Family Programs; Chapin Hall; Court Appointed Special Advocates; Harris County Stakeholder Workgroup; parent advocates; and youth alumnae.

Action Plan

- **In September 2015**, CPS continued work on an effort begun in the spring of 2015 to establish statewide permanency goals and outcome targets. Each CPS region has identified region-specific barriers to permanency and developed strategic plans for fiscal year 2016. State office staff and the Reunification and Permanency Transformation Team (field-driven, cross regional team for generating and sharing practice solutions) support the regions in their permanency efforts. CPS also developed permanency action plans for legal staff, the Faith-Based Community, Child Placing Agencies, and residential child care contracts.
- **In September 2015**, CPS began regional adoption recruitment efforts focused on children with historically longer stays in foster care. The efforts are aligned with regional permanency strategic plans. The Reunification and Permanency Transformation Team will also look at ways to strengthen and ensure consistency in statewide adoption practices.
- **In September 2015**, DFPS began tracking data generated by permanency roundtables, including data on race and ethnicity, in IMPACT. Permanency Roundtables are internal case consultations to develop permanency action plans for children not in their intended permanency placements. Tracking data enables CPS to identify trends and barriers to permanency regionally and statewide to inform practice efforts.
- **In fiscal year 2016**, CPS will continue to provide permanency values training as part of ongoing caseworker certification and establish permanency proficiencies to help evaluate and develop caseworker and manager performance as they develop practice expertise.
- **In fiscal year 2016**, As noted earlier, CPS will provide core practice competency training on family engagement to all Conservatorship caseworkers and supervisors as part of training on new safety and family strengths and needs assessment tools. CPS will also begin implementation of Signs of Safety in the Conservatorship stage. (Regions 3, 7, 8, and 11).
Goal 2: Maximize Permanency for Children and Youth Served by CPS

Objective 2.3: Partner with Advocates and Communities to Help Achieve Permanency for Children and Families

Lead: CPS Permanency Division

- DFPS Resources: CPS Systems Improvement, CPS Foster and Adoption Development Division.
- Stakeholder Resources: Advisory Council for Promoting the Adoption of Minority Children; Supreme Court of Texas Permanent Judicial Commission for Children, Youth, and Families; Faith Communities; and Court Appointed Special Advocates; CPS Parent Collaboration Groups.

Action Plan

- **By November, 2015**, CPS will have held permanency summits in every region to raise awareness of the agency’s commitment to permanency for every child. The summits bring together CPS staff and community partners to work toward state and regional strategic plan goals.
- **By December 2016**, CPS will dedicate existing positions in every region to support faith-based work on a full time basis.
- **In fiscal year 2016**, CPS will continue to expand Texas’ faith-based initiative by supporting churches developing “orphan care” ministries for children and families served by CPS, increasing the capacity of communities to respond to the needs of children and families.
- **In fiscal year 2016**, CPS will expand the number of counties with care portals, an online church engagement tool that provides a platform for CPS staff to request church support to meet needs of children and families.
- **In fiscal year 2016**, DFPS will partner with Texas Court Appointed Special Advocates to develop a model for family finding and intensive trainings for both CPS employees and Court Appointed Special Advocates staff and volunteers.
- **In fiscal year 2016**, CPS will continue to work with CASA to support frequent and consistent visitation between parents and children including training on practices for establishing visit expectations and providing feedback to parents.
- **In fiscal year 2016**, CPS will continue to collaborate with the Supreme Court of Texas Permanent Judicial Commission for Children, Youth, and Families to examine practices that can improve permanency outcomes. Past work has resulted in improvements to court reports, court practices, notice to families and stakeholders, improved visitation practices, and consistency across the state.
- **In fiscal year 2016**, CPS will continue seek engagement of statewide and regional Parent Collaboration Groups on improvements to practice, policy and service provision.
Goal 2: Maximize Permanency for Children and Youth served by CPS

Objective 2.4: Contract for Services and Supports to Help Achieve Permanency for Children and Families

Leads: CPS Permanency Division, CPS Purchased Client Services Division

- Internal Resources: CPS Placement Division, CPS Foster Care Redesign Division, CPS Systems Improvement, CPS Reunification and Permanency Transformation Team, DFPS Prevention and Early Intervention, DFPS Management Reporting and Statistics.

Action Plan

- **As of September 1, 2015**, CPS updated the post-adoption services contract as part of the fiscal year 2016 procurement to provide more clarification and guidance to providers on DFPS expectations for meeting family’s needs. For example, the contract requires more face to face contact with families and 24 hour crisis support.
- **In fall 2015**, CPS will conduct a gap assessment and develop a plan for building residential child care quality and capacity in key areas of need across the state, including seeking evidence-based treatment programs that serve children in the least restrictive settings.
- **In fall 2016**, CPS will continue to implement Foster Care Redesign to promote a community-based approach to service coordination and delivery, increase capacity, ensure quality, and improve outcomes for children and families. CPS will procure for a Single Source Continuum Contractor (SSCC) in Region 2. CPS will also expand to stage 2 in Region 3 counties served by the SSCC. In stage 2, the SSCC provides the full continuum of contracted client services including treatment services for parents.
- **In January 2016**, CPS will launch a demonstration program to test an effort to improve the quality of residential foster care through the use of new performance measures. The demonstration will also use data to identify providers at risk of poor outcomes to enhance monitoring and enable CPS staff to provide technical assistance before problems occur.
- **In January 2016**, CPS will implement a Title IV-E demonstration waiver in Harris County to contract for new interventions for families based on needs identified through the Child and Adolescent Needs and Strengths (CANS) assessment (see page 20) and a comprehensive family assessment specific to Harris County where caseworkers team with families and clinicians to assess needs and plan services.
- **In fiscal year 2016**, CPS will expand residential contracted services to include sub-acute inpatient treatment.
- **In fiscal year 2016**, CPS will continue to collaborate with child placing agencies to develop a single Child Plan of Service to reduce duplication and improve service provision.
- **In fiscal year 2016**, CPS will conduct research on adoption dissolutions to identify factors contributing to dissolutions which will inform policy and practice related to adoption services including purchased services.
- **In fiscal year 2016**, CPS will develop new quality requirements for re-procurement of evaluation and treatment services and establish new contract monitoring processes that focus on quality outcomes for families.
- **In fiscal year 2016**, CPS will collaborate with DFPS Prevention and Early Intervention and plan for use of new purchased services dollars to serve Alternative Response families.
Goal 3: Maximize the Well-being of Children and Youth Served by CPS

Outcome Measures to meet their health needs

- Children receive adequate services to meet their behavioral health needs.
- Children receive adequate services to meet their physical health needs.
- Children receive adequate services to meet their educational needs.
- More youth complete Preparation for Adult Living services.

Ensuring a child is safe and finds a forever home is essential to children’s well-being. For children receiving CPS services, CPS must also ensure that their education, health and other needs are being met. To truly understand well-being, we need to comprehend the quality of the services we provide to children. As part of our federal Child and Family Services Review, CPS reads hundreds of cases every year with a structured case review tool to examine if we are meeting the needs of the children we serve. CPS reviews cases to see if the child was adequately assessed for needs in each area of education, and physical and mental health. If needs are present, the reviewer checks to see if the child was then provided with appropriately matched services. The process includes a review of the case file in IMPACT, the hard copy of the case file, and interviews with case-specific stakeholders. The CPS Division of Accountability reviews 180 cases per quarter.

Looking at trends in the past few years, although CPS continues to do a good job meeting children's basic educational needs, we have work to do on meeting children’s physical and behavioral health needs.

<table>
<thead>
<tr>
<th>Needs of the Child</th>
<th>FY 12</th>
<th>FY 13</th>
<th>FY 14</th>
<th>FY 15 To Date*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educational Needs of the Child (CFSR Item 16) -</td>
<td>97%</td>
<td>97%</td>
<td>96%</td>
<td>98%</td>
</tr>
<tr>
<td>Physical Health of the Child (CFSR Item 17)</td>
<td>93%</td>
<td>89%</td>
<td>91%</td>
<td>87%</td>
</tr>
<tr>
<td>Mental/Behavioral Health of the Child (CFSR Item 18)</td>
<td>94%</td>
<td>92%</td>
<td>91%</td>
<td>88%</td>
</tr>
</tbody>
</table>

*Child and Family Service Review quarter 4 data not available at the date of this report.

While finding a forever family for every child we serve and reducing the number of children who “age out” is our goal, permanency through family reunification, permanent placement with relatives or adoption is not always possible or appropriate. For youth who emancipate from foster care, CPS works to provide them with the skills and support to successfully transition to living on their own.

One way CPS provides support is through its Preparation for Adult Living (PAL) classes. Through PAL, youth not only learn how to successfully live on their own, they can complete certain required components and receive financial support after they age out. Roughly 75 percent of children who leave substitute care at age 18 or older complete the PAL classes required to receive financial support, although that rate dipped slightly lower in the past year.
Youth now have the option to stay in care beyond the age of 18 to receive additional supports as they prepare for independence. As a result, the number of youth remaining in foster care after age 18 has grown, which is a positive. By staying in foster care even after becoming a legal adult, these youth have a stable place to stay and a caseworker to arrange for needed services and provide ongoing support.

<table>
<thead>
<tr>
<th></th>
<th>FY 12</th>
<th>FY 13</th>
<th>FY 14</th>
<th>FY 15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Youth completing Preparation for Adult Living</td>
<td>75%</td>
<td>76%</td>
<td>76%</td>
<td>72%</td>
</tr>
<tr>
<td>Youth 18 and older living in foster care</td>
<td>602</td>
<td>634</td>
<td>615</td>
<td>683</td>
</tr>
</tbody>
</table>

In the next fiscal year, CPS will implement a new screening assessment for children, access enhanced managed health care services, work with education and community partners to improve education outcomes, and continue to expand and improve services for older youth.
Goal 3: Maximize the Well-being of Children and Youth Served by CPS

Objective 3.1: Support Children’s Physical and Behavioral Health

Lead: CPS Medical Services Division

- DFPS Resources: CPS Trauma Informed Care Secondary Traumatic Stress Workgroup, CPS Purchased Client Services, CPS Disproportionality Team, DFPS Medical Director, and DFPS Center for Learning and Organizational Excellence.
- Stakeholder Resources: Health and Human Services Commission (HHSC), Department of State Health Services, STAR Health / Superior Health Plan / Cenpatico, Dr. Karen Purvis and Dr. David Cross and staff from Texas Christian University (trauma-informed care), Dr. John Lyons, Chapin Hall (CANS), Senate Bill 125 committee of internal and external stakeholders, contracted residential child care and contracted residential care providers.

Action Plan

- In fall 2016, CPS will coordinate with HHSC enterprise partners to adapt the Child and Adolescent Needs and Strengths assessment (CANS), a developmentally appropriate comprehensive assessment with a screening for trauma, to agency needs. CPS will implement the new tool as early as March including training of super-skills users, such as CPS medical and other subject matter specialists. CPS will align the assessment with the new Structured Decision Making® family strengths and needs assessment that will be developed in spring 2016 and coordinate release of these two tools and training to the field. Together, these tools will provide a more comprehensive assessment of children and families at the start of the case to identify issues quickly and support effective case planning.
- In fiscal year 2015, CPS will continue to focus on Trauma Informed Care knowledge and practices so CPS leadership, caseworkers, and stakeholders act with an understanding of the influence of trauma, both from the child’s family history as well as from removal. CPS will begin rollout of a curriculum created specifically for DFPS related to trauma-informed care and secondary trauma for caseworkers. The curriculum will also include information about primary trauma.
- In fiscal year 2016, CPS will train stakeholders, including CPS staff, providers, caregivers, and youth on new health insurance benefits for children in CPS conservatorship as a result of a new contract for STAR Health, administered by Superior Health Plan effective September 1, 2015. Enhanced services include expanded value-added and case-by-case benefits. Stakeholders will be trained on how to more efficiently access the health insurance benefits.
- In fiscal year 2016, CPS will continue to oversee the Psychotropic Medication Utilization Review process to carefully monitor use of psychotropic medications to ensure that a psychotropic medication prescription is in the best interest of the child.
Objective 3.2 Support Children’s Education Outcomes

Lead: CPS Permanency Division

- DFPS Resources: CPS Division of Practice Excellence
- Stakeholder Resources: Texas Education Agency; School District Foster Care Liaisons and staff; Supreme Court of Texas Permanent Judicial Commission for Children, Youth, and Families; Casey Family Programs; faith communities; residential child care providers; kinship caregivers; and other providers and community partners.

Action Plan

- In fiscal year 2016, to ensure children in care receive services to meet their education goals, CPS will establish a minimum of one education consortium in every region. Education consortia are groups of internal and external stakeholders, including education partners, child welfare staff, contracted providers and other community supports, invested in resolving area-specific, system-level challenges to providing for the needs of students in foster care. Bringing multiple systems together recognizes that education outcomes cannot be looked at in isolation from other issues such as mental health.
- In fiscal year 2016, CPS will develop practice guides with strategies for education specialists and CPS staff to help improve school stability, troubleshoot school enrollment and withdrawal issues, and increase communication between caseworkers and education specialists.
- In fiscal year 2016, CPS will collaborate with the Texas Education Agency to adapt the nationally recognized “Endless Dreams” curriculum created by Casey Family Programs for Texas. The curriculum provides training to education and child welfare professionals and advocates on the impact of the foster care experience on academic achievement.
- In fiscal year 2016, CPS will continue to serve on the Children’s Commission Education Task Force. The goals for the task force are to improve post-secondary education outcomes, data exchange and analysis, community partnerships, and services to students receiving special education services. CPS will participate in all subgroups.
- In fiscal year 2016, CPS will collaborate with the Texas Education Agency to develop and improve trainings and supports for CPS Education Specialists and School District Foster Care Liaisons.
Goal 3: Maximize the Well-being of Children and Youth Served by CPS

Objective 3.3: Safeguard Children’s Other Well-being Needs

Leads: CPS Permanency Division, CPS Investigations/Alternative Response/Family Based Safety Services Division.

- DFPS Resources: CPS Youth Specialists, CPS Disproportionality Team, CPS Purchased Client Services, CPS Special Investigators, DFPS Information Resource Management, and DFPS Center for Learning and Organizational Excellence, DFPS Internal Audit
- Stakeholder Resources: Texas Chapter of the Center for Missing and Exploited Children, Texas Department of Public Safety, law enforcement, Court Appointed Special Advocates, CPS residential child care Contractors, Supervised Independent Living contractors, attorneys, parents, and youth.

Action Plan

- In September 2015, CPS established contracts with newly procured Supervised Independent Living providers. The program helps youth work toward independence while residing in a less restrictive, non-traditional living arrangement.
- In October 2015, CPS will hold a statewide meeting of PAL staff to address program improvements related to: PAL completion, additional PAL activities to support youth, funding for more teen conferences, and continued efforts to support youth opportunities for normalcy.
- In Spring 2016, CPS will collaborate with colleges and trade schools to hold a post-secondary education conference showcasing opportunities for youth to use Education and Training Vouchers to develop a broad range of vocational and technical skills.
- In fiscal year 2016, CPS will engage youth in voicing their needs through Youth Leadership Councils and use newly received funding to hold more teen conferences.
- In fiscal year 2016, CPS will continue to train on racial and ethnic identity to promote competencies around healthy racial and ethnic identity formation for children and youth.
- In fiscal year 2016, CPS will establish expectations for coordinated service plan meetings among residential providers, CPS, and the child to help facilitate planning around normalcy. Normalcy refers to the ability for children and youth to participate in age and developmentally appropriate activities similar to activities that children outside of foster care experience. Normalcy is not a new concept, but one CPS and providers have struggled with as they balance the need to keep children and youth safe. This effort includes tracking of service plans in IMPACT to better monitor and ensure accountability for following through on plans.
- In fiscal year 2016, DFPS will make changes to IMPACT to meet Title IV-E requirements for identifying, reporting and providing services to victims of sex trafficking.
- In fiscal year 2016, CPS will implement the Prevent Sex Trafficking and Strengthening families Act (HR 4980) to protect children and youth at risk of sex trafficking. CPS will continue collaboration with the Department of Public Safety, the Center for Missing and Exploited Children, the Federal Bureau of Investigations, and local law enforcement agencies, as well as leverage internal resources such as the Special Investigators, to find missing children.
- In fiscal year 2016, CPS will continue collaboration with state and community resources to provide human trafficking and internet safety training to youth participating in services to support a successful transition to adulthood (Preparation for Adult Living).
Goal 4: Maximize Staff Recruitment, Retention, and Development to Ensure a Professional and Stable Workforce

Outcome Measures
- Decreased combined turnover rate.
- Decreased turnover for Investigators.
- Decreased turnover for Family Based Safety Services caseworkers.
- Decreased turnover for Conservatorship caseworkers.
- Survey of Employee Engagement results (Spring 2016) on questions related to job expectations, communication practices and feeling valued, all areas where CPS has historically scored low.

To achieve the outcomes we want for children and families, we must have a professional and stable workforce. Doing so requires that we:
- identify and hire the right candidates;
- provide training that inspires confidence;
- ensure staff have strong supervision and support to grow and professionally develop into the next generation of leaders;
- project a long-term future with the agency by guiding staff with multiple career path opportunities; and
- mitigate the impact of turnover, which will always be present at some level, with tools: and supports for management and staff.

Looking at caseworker turnover in recent years, DFPS has not seen substantial and sustained improvement.

<table>
<thead>
<tr>
<th>Turnover</th>
<th>FY 12</th>
<th>FY 13</th>
<th>FY 14</th>
<th>FY 15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Turnover for CPS overall</td>
<td>26%</td>
<td>26%</td>
<td>25%</td>
<td>26%</td>
</tr>
<tr>
<td>Turnover for Investigations</td>
<td>34%</td>
<td>32%</td>
<td>34%</td>
<td>33%</td>
</tr>
<tr>
<td>Turnover for Family Based Safety Services</td>
<td>26%</td>
<td>25%</td>
<td>23%</td>
<td>28%</td>
</tr>
<tr>
<td>Turnover for Conservatorship</td>
<td>24%</td>
<td>22%</td>
<td>23%</td>
<td>23%</td>
</tr>
</tbody>
</table>

Assessing turnover since Transformation began, some timeframes show an increase; however, overall turnover is improving.

<table>
<thead>
<tr>
<th>Investigations</th>
<th>FY 14</th>
<th>FY 15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>34%</td>
<td>33%</td>
</tr>
<tr>
<td>0-3 Months</td>
<td>23%</td>
<td>34%</td>
</tr>
<tr>
<td>3-9 Months</td>
<td>51%</td>
<td>50%</td>
</tr>
<tr>
<td>9-18 Months</td>
<td>48%</td>
<td>42%</td>
</tr>
<tr>
<td>19-36 Months</td>
<td>28%</td>
<td>25%</td>
</tr>
<tr>
<td>37+ Months</td>
<td>21%</td>
<td>19%</td>
</tr>
</tbody>
</table>

Although overall turnover in investigations improved only slightly from FY 14 to FY 15, the timeframe for when caseworkers are leaving shifted, with turnover in the first three months increasing significantly. Turnover for more tenured workers actually improved. With the redesigned training, new caseworkers get a more realistic preview of the job in the early months and those for whom it is clearly not a good fit appear to be opting out early. Caseworkers leaving early-on is less of a loss on the agency’s initial
investment as caseworkers have not yet been assigned a caseload and, as a result, it has less of an impact on workload of those who remain.

<table>
<thead>
<tr>
<th>Family Based Safety Services</th>
<th>FY 14</th>
<th>FY 15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>23%</td>
<td>28%</td>
</tr>
<tr>
<td>0-3 Months</td>
<td>21%</td>
<td>22%</td>
</tr>
<tr>
<td>3-9 Months</td>
<td>20%</td>
<td>37%</td>
</tr>
<tr>
<td>9-18 Months</td>
<td>35%</td>
<td>42%</td>
</tr>
<tr>
<td>19-36 Months</td>
<td>26%</td>
<td>29%</td>
</tr>
<tr>
<td>37+ Months</td>
<td>18%</td>
<td>18%</td>
</tr>
</tbody>
</table>

In FBSS, turnover spiked in fiscal year 2015 driven in large part by significant increases in turnover for those employed three-18 months. The increase in FBSS turnover overall, however, is not a consistent trend throughout the state. About half of the regions (1, 3, 6, 7, 9, 11) experienced an increase in FBSS overall turnover while the other half (2, 4, 5, 8 and 10) had lower overall turnover.

<table>
<thead>
<tr>
<th>Conservatorship</th>
<th>FY 14</th>
<th>FY 15</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>23%</td>
<td>23%</td>
</tr>
<tr>
<td>0-3 Months</td>
<td>20%</td>
<td>23%</td>
</tr>
<tr>
<td>3-9 Months</td>
<td>30%</td>
<td>34%</td>
</tr>
<tr>
<td>9-18 Months</td>
<td>32%</td>
<td>31%</td>
</tr>
<tr>
<td>19-36 Months</td>
<td>26%</td>
<td>24%</td>
</tr>
<tr>
<td>37+ Months</td>
<td>15%</td>
<td>13%</td>
</tr>
</tbody>
</table>

In Conservatorship, turnover has remained relatively stable and lower than the other two major stages of service. Turnover among more tenured workers (nine or more months), however, improved while turnover among new workers (less than nine months) increased. As with Investigations, this may be, in part because of the redesigned training. As caseworkers get a more realistic preview of the job in the early months, those for whom it is clearly not a good fit appear to be opting out early.

Transformation laid a foundation for a strong CPS program that successfully attracts quality workers; provides them with the necessary training and leadership support; and creates effective systems for policy development, communication, and systems improvement. DFPS must build upon this foundation to create an environment that promotes retention and to manage and support the workforce with the expectation that there will always be some turnover. The Workforce Development Division is a new division in DFPS to support recruitment, hiring, training, retention, and leadership development. The Workforce Development Division and CPS program will work jointly in fiscal year 2016 to develop and support a professional and stable workforce.
Goal 4: Maximize Staff Recruitment, Retention, and Development to Ensure a Professional and Stable Workforce

Objective 4.1: Increase Quality of Job Candidates for Frontline Hiring

Lead: DFPS Workforce Development Division

- DFPS Resources: CPS Field, DFPS Office of External Relations, DFPS Office of Communications, DFPS Data Decision and Support.
- Stakeholder Resources: HHSC Human Resources, STARK Source Match (DFPS’ hire screening vendor), and University of Texas (DFPS survey consultants), and College Collaboration Workgroup.

Action Plan

- **By December 2015**, DFPS will market the unique value of CPS’ mission and competitive advantages of Texas state employment in recruitment materials and job postings. This includes state of Texas employee and retiree benefits and eligibility for the Public Service Loan Forgiveness Program as a full time state employee.
- **By February 2015**, DFPS will begin validation of the new hire screening process to ensure the process is delivering higher quality candidates. Create alignment between new hire screening processes, new hire survey instruments, training evaluations and annual employee performance evaluations to capture a continuum of data to comprehensively assess employee performance and ensure the screening and hiring processes is delivering high quality candidates.
- **In fiscal year 2016**, DFPS will implement the recommendations of the College Collaboration Workgroup (DFPS and Texas colleges and universities) to improve and expand partnerships for federally-funded education stipend programs for social work students who commit to employment.
- **In fiscal year 2016**, DFPS will implement active recruitment initiatives for the highest priority populations (e.g., social work and criminal justice degree holders, career changers, veterans) and to promote ethnic diversity among department staff.
- **By the end of fiscal year 2016**, DFPS will establish new employee sourcing strategies to increase the quality of job candidates. Strategies include a robust DFPS internship program, new externship program (short term experiential learning opportunities for potential employees), and increased partnerships with Texas educational institutions. DFPS will explore options to establish pathways to employment in caseworker positions for employees and candidates with less than a college degree.
Goal 4: Maximize Staff Recruitment, Retention, and Development to Ensure a Professional and Stable Workforce

Objective 4.2: Ensure Staff Are Adequately Trained and Prepared to do Their Job

Lead: Continuous Learning Team (CPS and DFPS Center for Learning and Organizational Excellence training coordination team)

- DFPS Resources: CPS Division for Practice Excellence, CPS Regional Operations Support Administrators, DFPS Workforce Development Division, DFPS Leads (Leadership, Excellence, Advancement, Distinction and Support), DFPS Office of Volunteer and Community Engagement.
- Stakeholder Resources: University of Texas at Austin Child and Family Research Partnership (evaluation consultant).

Action Item

- **On October 1, 2015**, CPS completed statewide implementation of the redesigned training model for new caseworkers and mentoring program. The new model combines traditional classroom training with field-based training and mentoring, using a competency-based model to adequately prepare new caseworkers for their duties and reduce new hire turnover rates.
- **In the fall of 2015**, DFPS will continue to strengthen the new mentor program by implementing a stipend program (up to $300 per month) effective September 2015. CPS will also develop the coaching and teaching skills of CPS mentors and field-based trainers through new training.
- **In December 2015**, DFPS will receive the first of three evaluation reports from the University of Texas, contracted to evaluate the new training model and its impact on producing better-trained caseworkers. Throughout the year, the Continuous Learning Team will meet with the evaluators to respond to findings and make adjustments to the model.
- **By February 2016**, DFPS Center for Learning and Organizational Excellence will use a newly revised competency-based classroom curriculum for caseworkers aligned with the CPS practice model.
- **By March, 2016**, the Continuous Learning Team will perform a gap analysis to identify supervisor training and development needs. Based on the findings, the team will redesign the model of supervisor training and development and create a pilot of the new model, with full statewide implementation to begin in fiscal year 2017.
- **In fiscal year 2016**, DFPS Center for Learning and Organizational Excellence and CPS will continue to strengthen supervisors’ skills through Strengths-Based Supervision training to new supervisors and group supervision sessions for supervisors to ensure that new and existing supervisors are adequately trained to effectively support and lead their teams.
- **In fiscal year 2016**, DFPS will continue to provide advanced leadership skills training to CPS supervisors and managers.
**Goal 4: Maximize Staff Recruitment, Retention, and Development to Ensure a Professional and Stable Workforce**

**Objective 4.3: Leverage Technology and Operational Supports**

**Leads: CPS Field, DFPS Chief Operating Officer**


**Action Plan**

- **In December 2015,** CPS will complete the streamlining of all policy related to the conservatorship stage of service as part of the effort to clarify all policy content to focus on tasks critical to improving safety, permanency, and well-being.

- **In the spring of 2016,** DFPS will issue new mobile iPhones to frontline workers and management. The rollout will include deployment of the iPhone SafetySignal app (zero button alert system). With this app, caseworkers can enable their phone to trigger an alarm and emergency call with the pull of a cord.

- **In the spring of 2016,** DFPS will upgrade the reporting and data management technology for IMPACT to improve efficiency, accountability, and decision-making. Data reports will help alert program staff in each stage of service about critical tasks (e.g., plans of service and face to face contacts), including tasks that are coming due and tasks overdue. There will also be reports with workload information and geographic visualization of case distribution that will help supervisors manage assignments. Finally, a new online, interactive data book will be available to staff and stakeholders for the first time.

- **In fiscal year 2016,** CPS will implement casework support centers in Region 3 and 7. Casework support centers pool administrative staff currently housed in individual units in an effort to create efficiencies and provide caseworkers consistent, readily accessible support. Additional center locations will be identified during the fiscal year and implementation will continue across the state based on successful implementation in the initial regions.

- **In fiscal year 2016,** CPS state office and field staff will participate in planning and design for enhancements to IMPACT. The changes will be made as part of IMPACT modernization, a multi-year effort to update the system to today’s technology. The enhancements will support CPS transformation and other key initiatives and deliver time savings to CPS caseworkers.
Goal 4: Maximize Staff Recruitment, Retention, and Development to Ensure a Professional and Stable Workforce

Objective 4.4: Create an Environment That Promotes Retention

Lead: DFPS Workforce Development Division

- DFPS Resources: CPS Director of Field, CPS Systems Improvement, CPS Division of Practice Excellence, CPS Regional leadership teams, DFPS Information Resource Management, DFPS Data Decision and Support, DFPS Executive Team, DFPS Office of Finance, DFPS Office of Communications, and DFPS Office of External Relations.
- Stakeholder Resources: college and university partners.

Action Plan

- **Each month during fiscal year 2016**, CPS regional leadership will continue to personally contact workers with six-24 month tenure.
- **By October 2015**, DFPS will develop a plan to establish a confidential employee feedback system to capture employee-driven solutions for organizational improvement as well as informal employee grievances.
- **By spring 2016**, DFPS will complete a salary study and assess correlation between compensation and retention rates compared to like industries.
- **In fiscal year 2016**, CPS will continue to deploy Master Investigators and new Master Conservatorship workers to understaffed areas of the state to support workload and build capacity.
- **In fiscal year 2016**, DFPS will use predictive analytics to forecast expected average tenure, promotion rates, terminations, resignations, retirements, and requisite training per position to identify typical career path timelines. DFPS will use the information to more actively guide employee expectations about career path opportunities and anticipate turnover and position changes within the agency.
- **In fiscal year 2016**, DFPS will continue to develop and expand a succession planning strategy to prepare for impending retirements and provide opportunities to emerging leaders within the workforce.
- **In fiscal year 2016**, DFPS will develop an agency action plan to reduce barriers to career path opportunities for existing employees, such as negotiation restrictions for agency employees applying for DFPS vacancies and lack of incentives to pursue continuing education in non-social work degree plans (to achieve parity with the IV-E incentive). DFPS will also support an enterprise-wide strategic vision for long-term career potential.
- **In fiscal year 2016**, DFPS will conduct virtual town hall meetings with state office executive staff to engage with employees and report results of staff surveys and other efforts to gather staff feedback and action taken.
- **In fiscal year 2016**, DFPS will use a monthly reporting map of turnover “hot spots” at the supervisor and business-unit levels as actionable data to focus retention efforts and leadership intervention.
Goal 5: Integrate Continuous Quality Improvement Across All Stages of Service

Success Measures:
- Hire and train Systems Improvement positions
- Implement annual Continuous Quality Improvement report and quarterly updates

To sustain Transformation moving forward, CPS needs to not only complete efforts already underway, but to solidify a continuous quality improvement (CQI) structure that supports a continual and strategic transformation and improvement process.

CPS started this process through its original state office restructure as part of Transformation. As recommended by The Stephen Group who DFPS contracted for the operational review, CPS organized state office into two operational groups, as follows.

- Functional support divisions focus on field and state office operations. The functional support divisions report directly to the CPS Assistant Commissioner and include: Investigations / Alternative Response / Family Based Safety Services division, Permanency Division, Purchased Client Services; Field; Disproportionality; Communications; and Community Affairs. These areas direct policy, oversee program operations, provide subject matter expertise, and coordinate with stakeholders.

- Systems support divisions focus on systemic change and improvement and report to the Deputy CPS Assistant Commissioner. The division includes Systems Improvement; Practice Excellence; Special Projects; Legislative Coordination; Federal and State Support, and Accountability.

Consolidating the Systems Support divisions under the Deputy CPS Assistant Commissioner was an important first step in creating a strong CQI structure. Operating within CPS but outside of the day-to-day operations, the Deputy CPS Assistant Commissioner can maintain the objectivity needed to ensure accountability while keeping critical connections to the work of CPS field and state office. The Deputy Assistant Commissioner works along with the functional support Directors to help the CPS Assistant Commissioner set, track and implement the strategic vision and plan for CPS.

To sustain transformation and extend the CQI structure into the field, CPS is creating a CPS Regional CQI or Systems Improvement Team within the Systems Support division under the Deputy CPS Assistant Commissioner. This team will work with CPS leadership to proactively and strategically make needed changes to further build an experienced and stable workforce and improve safety, permanency, and well-being for the children and families CPS serves. Using data and reports, the team will help regional leadership identify, for each stage of service, what parts of the system are working well and areas to target for improvement. The team will work with staff to explore regional details of the people, policy, process, training, and technology to find out why particular areas are performing well or need improvement. Working with regional leadership and, when appropriate, external stakeholders, the team will brainstorm what to do, help implement plans, and track and report on progress.

In fiscal year 2016, CPS will begin an annual planning process looking at key outcome measures at the state and regional levels. This effort will inform decisions about changes needed to CPS’ business plan for fiscal year 2017.
Goal 5: Integrate Continuous Quality Improvement Across All Stages of Service

Objective 5.1: Continue Development of an Integrated Continuous Quality Improvement System that Effectively Uses Data and Information to Improve Outcomes for Children and Families.

Lead: CPS Deputy Assistant Commissioner Division

DFPS Resources: CPS Systems Improvement, CPS Accountability Division, CPS Division of Practice Excellence, CPS Organization Effectiveness Team, and DFPS Management Reporting and Statistics.

Action Plan

- **By October, 2015**, CPS will report quality assurance and evaluation efforts for all transformation efforts in the CPS Transformation Progress Report.
- **In the fall of 2015**, CPS will complete organizational changes to support the CQI program. As of September 2015, CPS has hired a new Division Administrator of CPS Regional Systems Improvement (CQI) staff. By November 30, 2015, CPS will hire new CPS Regional Systems Improvement (CQI) Specialists. The new CQI staff will support state office and regions as they identify and explore root causes for emerging problems, develop plans to address the identified problems, and monitor implementation and effect.
- **By February 2016**, CPS will develop an integrated report for certification of CPS’ Continuous Quality Improvement program by the Children’s Bureau, Office of the Administration for Children and Families.
- **In April 2016**, CPS will participate in an administrative review to satisfy Round 3 Child and Family Services Review requirements. The Children’s Bureau conducts the reviews to assess compliance with federal child welfare standards and help States improve safety, permanency, and well-being outcomes for children and families.
- **In fiscal year 2016**, CPS will strengthen its continuous quality improvement program to sustain Transformation and proactively identify and make needed changes. CPS will consolidate and align available data and qualitative information at the state and regional levels, and produce an annual report and quarterly updates to assess progress and to identify emerging issues.
- **In fiscal year 2016**, The DFPS Commissioner will continue to meet individually with CPS Regional Directors to review key data indicators and address issues and concerns.
Appendix A: Definitions for Key Measures of Safety, Permanency, Well-Being, and Workforce

Safety

- **Recidivism for Alternative Response** – percentage of children in an Alternative Response case that is closed with no ongoing services that have a subsequent confirmed allegation for abuse or neglect or a case opened for Family Based Safety Services or Conservatorship Services within 12 months of case closure.

- **Recidivism for Investigations** – percentage of alleged victims in a traditional investigation that is closed with no ongoing services that have a subsequent confirmed allegation for abuse or neglect or a case opened for Family Based Safety Services or Conservatorship Services within 12 months of case closure.

- **Recidivism for Family Based Safety Services** – percentage of children in Family Based Safety Services case that is closed with no further ongoing services that have a subsequent confirmed allegation for abuse or neglect or a case opened for Family Based Safety Services or Conservatorship Services within 12 months of case closure.

- **Recidivism for Conservatorship** – percentage of children who exit conservatorship to reunification that have a subsequent confirmed allegation for abuse or neglect or a case opened for Family Based Safety Services or Conservatorship Services within 12 months of case closure.

Permanency

- **Time to permanency** – average number of months from removal to exit to one of the following: reunification, relative as a permanent managing conservator, relative adoption, or non-relative adoption.

- **Visiting with parents and siblings in foster care** – percentage of children in Child and Family Services Review case read that visited with their parents and siblings.

- **Children in substitute care placed with relatives** – percentage of children in DFPS conservatorship on August 31 that were placed with a relative.

- **Average number of placements for children in foster care** – for children age 17 or younger in foster care on August 31, average number of placements.

Well-Being

- **Educational needs of the child are met** – percentage of children in Child and Family Services Review case read that had educational needs met.

- **Physical health needs of the Child are met** – percentage of children in Child and Family Services Review case read that had their physical health needs met.

- **Mental/Behavioral Health of the Child** – percentage of children in Child and Family Services Review case read that had mental and behavioral needs met.

- **Youth completing Preparation for Adult Living (PAL)** – percentage of youth age 18 or older who completed PAL classes required to receive PAL funding at time youth left substitute care.

- **Siblings in substitute care placed together** – percentage of siblings groups in substitute care on August 31 with all siblings in the same placement.

Workforce

- **Turnover is calculated according to the State Auditor Office methodology.**
Appendix B: CPS Stages of Service

The figure below illustrates the roles of the DFPS/CPS divisions in responding to reports of abuse and neglect. Fiscal year 2014 statistics provide context on children and families affected and staff workload.

Intake and Screening

Does the report meet the statutory definition of abuse and neglect? Can the intake be closed without further action?

254,276 Intakes

Alternative Response and Investigations

What is the problem and what level of involvement is required?

168,164 Investigations

Family Based Safety Services (FBSS) and Conservatorship (CVS)

What services are needed to address the problem and create safety for the child?

19,717 FBSS Cases
8,079 CVS Cases

Intake / Referral

DFPS Statewide Intake receives reports of alleged abuse and neglect of children and vulnerable adults. Intakes are assigned to staff at CPS based on their priority level. Due to their severity, some intakes are assigned immediately for investigation. Approximately one third of all intakes received are assigned for screener review, and are considered low to moderate risk. About one third of received cases are closed before investigation if they do not meet the criteria to advance (34 percent in FY 2014).

Screener Review

Screeners conduct further review of the facts and determine whether to close the intake if it fails to meet criteria for CPS involvement, assign it to an Alternative Response caseworker, or send to Investigations.

Investigations

Investigations caseworkers investigate allegations of abuse and neglect within statutorily determined timeframes. They interview the child(ren) involved, the alleged perpetrators, and other key collateral contacts, and review pertinent evidence. They use tools that follow a series of structured steps to help reach consistent decisions about safety and risk (Structured Decision Making®). Best practice is to submit the completed investigation to their supervisor within 45 business days, and to close the case within 60 days from the point of intake. Over 80 percent of investigations are closed without providing any additional services. When allegations of abuse or neglect are substantiated, the case may be transferred to the Family Based Safety Services or Conservatorship (CVS) stages of service, depending on whether the child can remain safely at home. When children cannot remain at home safely, CPS removes the child from the home and assumes legal custody. In both Family Based Safety Services and Conservatorship cases, children may be placed with kinship caregivers or relatives.

Alternative Response

Alternative Response is a new practice that allows Child Protective Services to utilize multiple responses to address reports of alleged child abuse and neglect that are accepted for investigation. Alternative Response is a family-engagement approach designed to keep children and families safe and together whenever possible. While CPS continues to respond to severe higher risk reports using a forensic approach (traditional investigation), less immediately severe, lower risk reports will be handled through
the Alternative Response program. Alternative Response builds collaborative connections between state and local social services departments, community agencies, and the families themselves. All work together to identify issues and meet families’ needs using the supports and services in each community.

*Family Based Safety Services*

When investigators do not remove children, but identify the need for ongoing services, cases are opened in Family Based Safety Services. Family Based Safety Services caseworkers work with families to address the reasons for referral and may arrange to provide services. Family based safety services are child-safety centered, family focused, and home-based and most often involve children who are not in the legal conservatorship of DFPS. At all times, the safety and welfare of children are of paramount concern.

Family Based Safety Services differs from Alternative Response in that families have more identified risk and services are offered for a longer period of time. Alternative Response cases are opened for a maximum of 75 days and rely more heavily on referrals for community services. Family Based Safety Services cases may be open for six months and have access to purchased services. Cases are closed when parents address the safety issues involved in the case. If at any point staff determine the safety of a child can no longer be ensured, CPS implements an immediate plan for the child’s safety, including court-ordered services or, if necessary, removal. About five percent of children are removed from the home in Family Based Safety Services cases where their safety cannot be assured and the parents fail to address the underlying factors that led to abuse/neglect.

*Conservatorship*

When removals occur, DFPS assumes legal custody of the child(ren) and places them in paid foster care or with relatives. Conservatorship caseworkers work to achieve permanency for the child, whether it be reunification with parents when safe and possible, or permanent placement with relatives or in an adoptive home when returning home or permanent placement with relatives is not an option. Staff specializing in kinship care and adoption provide additional support to the conservatorship caseworker and relatives or adoptive caregivers to support a stable placement and achieve permanency.

As shown above, exits from the CPS system are possible throughout the life of a case. Once DFPS assumes legal custody of a child, the child exits DFPS custody through one of four primary paths: reunification, placement with relatives, adoption, and emancipation (known as “aging out”). When the permanency goal is emancipation, CPS provides Preparation for Adult Living Services.
Appendix C: Texas CPS Core Practice Competencies

CPS has established core practice competencies that cross every stage of service. These are the actions CPS carries out to achieve desired outcomes. CPS has designed training on CPS core competencies to support three levels of practice: emergent, accomplished, and distinguished. Emergent practice involves integration of skills, accomplished practice denotes consistent application, and distinguished practice is the point at which staff become practice leaders who sustain and continue to innovate on the model.

Engaging
Engaging means we develop trust-based relationships with children, youth, families, and safety networks for the purpose of driving positive change. Successful engagement is the basic building block of child safety, permanency, and well-being.

Assessing
Assessment of safety, permanency, and well-being is based on balanced, unbiased, and factually supported information. Our assessment tools are objective, reliable, and support consistency and accuracy in decision-making. Decisions are consistent across all stages of service. Although part of our work is helping families solve their problems, we must make impartial decisions about whether caregivers and families can change quickly enough to meet the child’s safety and permanency needs.

Teaming
Assembling a safety network to team with the child or youth and the family is the best way to achieve safety, permanency, and well-being. Constructive relationships between people are critical to effective child protection work.

Planning
Planning involves setting goals, developing strategies, and prioritizing tasks and schedules to meet goals. Developing plans requires us to first define the problem in a way that is solvable. This means we describe our worries to families and safety networks in behavioral terms that define the danger to the child or youth. We also help families and safety networks create a vision of what safety will look like in the family so that everyone knows what needs to happen to close the case.

Intervening
Our intervention is the least intrusive required for child safety. When we take a more intrusive course of action to address danger to the child, interventions are designed to be brief. Our goal is to mobilize caregivers and safety networks to take action quickly, knowing that each intervention has an impact on the long-term outcome for the child. The best permanency happens in the earliest stage of the case.

Evaluating
Plans are routinely evaluated with children, youth, families, and the safety network. Good evaluation requires us to continually consider why we are involved with a family and be able to describe what safety will look like in the family. Continued involvement with a family means that the child is unsafe.

For more information, visit The CPS Practice Model.
Appendix E: Organizational Charts

CPS includes five divisions, as shown in the following organizational chart. CPS employs approximately 9,000 full-time equivalent staff at the State Office and in the 12 regions. The Investigations/Alternative Response / Family Based Safety Services, Permanency, and Field Operations divisions provide policy direction to and operational oversight of the frontline regional staff conducting investigations, managing services for children and families, and working to achieve permanency outcomes for children in DFPS legal custody. Two divisions support these core service areas: the Deputy Director Division, which directs the systems improvement program and practice excellence at CPS; and the Contracts Division, which oversees residential foster care contracts and regional contracts for service providers.

Other DFPS divisions provide support services for CPS, including but not limited to: budget, hiring/recruitment, training, records management, management reporting and statistics, and information technology. The organizational chart for DFPS and DFPS operations shows many of the resources that support CPS and are referred to in this plan.
Department of Family and Protective Services

Commissioner

DFPS Council

Internal Audit

Executive Assistant

Legal Services/General Counsel

Deputy Commissioner

Medical Director

Associate Commissioner

Chief Operating Officer

Chief Financial Officer

Assistant Commissioner Child Care Licensing

Assistant Commissioner Adult Protective Services

Assistant Commissioner Child Protective Services

Assistant Commissioner Statewide Intake

Prevention and Early Intervention
Chief Operating Officer

- Operational Support Services
  - Centralized Background Check
  - Program Support
  - Records Management

- Workforce Development
  - Talent Acquisition Group
  - Center for Learning & Organizational Excellence
  - Employee Retention

- Data & Decision Support
  - Business Intelligence & Analytics
  - Management Reporting & Statistics

- Information Resource Management *
  - Management Services
  - Application Development & Maintenance
  - Field Operations
  - IT Operations
  - Information Security Officer

- Operations Support Officer
- Administrative Contracts Management

* These division directors report to HHS Enterprise equivalent functions, but continue to work closely with the DFPS COO to ensure services meet the needs of agency programs and administrative functions.
1 DFPS data warehouse report pmat_01
2 Wilder Foundation, Casey Family Programs
3 DFPS data warehouse report pmat_01
4 DFPS data warehouse report pmat_01
5 DFPS executive dashboard
6 DFPS data warehouse report pmat_01
7 DFPS data warehouse report pmat_01
8 DFPS data warehouse report pmat_01