Child Protective Services
Business Plan
Fiscal Year 2018

Texas Department of Family and Protective Services
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## CPS Mission, Vision, and Values

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<th><strong>CPS Mission</strong></th>
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<tr>
<td><strong>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.</strong></td>
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<th><strong>CPS Vision</strong></th>
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<td><strong>Children First: Protected and Connected</strong></td>
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<th><strong>CPS Values</strong></th>
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<td><strong>Our values represent the ideals we share and serve as broad guidelines for every situation.</strong></td>
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**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.

**Equity**
We achieve equity in outcomes by applying our methods fairly and consistently, and customizing our interventions to the unique cultural and community context of the children, youth, and families we serve.

**Urgency**
We work with a sense of urgency to reach safety, permanency, and well-being concurrently for every child and youth we serve, and this is reflected in each of our interventions.
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.
Introduction from Kristene Blackstone, the CPS Associate Commissioner

The past fiscal year saw remarkable changes at Child Protective Services (CPS). With the Governor’s vision of CPS becoming the best child welfare program in the country, the inspirational leadership of Commissioner Hank Whitman, and the generous support of the Texas Legislature providing much-needed resources, CPS is making real, measurable improvements.

In December 2016, DFPS, with legislative support, added staff and gave much-earned raises for most direct-delivery positions. In addition to these resources, during the past year, we improved training for front-line caseworkers and supervisors, making it more hands-on and supportive. We installed new, innovative regional leaders to manage and support our local programs, bringing fresh ideas and novel ways of doing this critical work. We provided specific training to all levels of regional management on creating a culture of change and building high-performing teams. We trained front-line management on the use of data to improve outcomes. Every day, we see the results of the combined impact of these changes. Our employees stay longer, caseloads are down, and caseworkers see children and families more often and on time. We have come a long way in a short time, but we have a long way to go – and we are eager to build on our successes.

Governor Abbott designated CPS as the number one priority emergency item during the 85th Legislative Session. Lawmakers filed a record number of bills concerning agency operations. Significantly, House Bill (HB) 5 made the Department of Family and Protective Services (DFPS) a stand-alone agency so it can innovate more effectively and quickly. This change took effect on September 1, 2017. Other significant bills, including Senate Bill (SB) 11, HB 4, and HB 7 give the agency clear legislative direction for our future. We are excited about the impact this legislation will have on outcomes for children and families, and this Business Plan incorporates many of the actions we will take to implement the new laws.

One of the differences you will note in this year’s Business Plan is that while we report on our fiscal year (FY) 17 achievements related to CPS investigations, we do not lay out the Business Plan items for FY 18 related to investigations of child abuse and neglect. As of September 1, 2017, CPS Investigations moved to the newly created DFPS Division of Investigations. This division will set the course for DFPS Investigations for FY 18 and going forward. This new organizational structure will allow CPS to focus specifically on safety, permanency and well-being for children in our conservatorship and those we serve in Family Based Safety Services (FBSS) cases.

Lastly, Hurricane Harvey arrived just at the close of FY 17. Like other organizations serving Texas children and families, the agency faced a challenge responding to the storm. But CPS employs caring, committed staff and is a stronger organization than it has been in recent years. Our robust and coordinated response to the catastrophe reflected that strength and commitment. CPS staff and our partners in the child welfare system across the state rose to the challenge in an inspiring way. Despite the unknown impacts and challenges we may yet experience due to Harvey, we work to mitigate those challenges we have identified. Today, CPS and its partners are in a healthier position to acknowledge and address those challenges. As was apparent during the response to Harvey, all entities in the child welfare system play a role in the outcomes for our children and families and our success depends on being innovative, efficient and collaborative.
FY 18 will bring many changes to the delivery of CPS services in Texas. We look forward to working with our numerous partners and communities across the state to continue and build on the improvements of this past year. We know that continuous self-improvement and collaboration are critical to the future of the children and families we serve. CPS appreciates all who have supported its work in the past fiscal year and looks forward to meeting tomorrow’s challenges with its partners.

**Accomplishments for FY 2017**

**Safety**
- All Special Investigators (SIs) received a specialized training on forensic interviewing and advanced child abuse investigations. DFPS further developed the curriculum and the SIs have used it to train investigation staff.
- The Office of Child Safety provided advanced physical abuse training for all investigation staff. The trainings occurred in October and November 2016.
- The Office of Child Safety coordinated a Safety Summit for all FBSS managers with a focus on family engagement as well as gathering and using vital information to make critical safety decisions.
- FBSS program directors began conducting random case-quality reviews.
- Child Safety Specialists continued to provide real-time feedback on safety issues, including the proper use of Structured Decision Making® concepts and assessments into practice, using a structured investigations case reading guide to broaden caseworker skills.
- Children’s Advocacy Centers™ of Texas (CACTX) continued the statewide rollout of the Multi-disciplinary Enhancement Program (MEP) with an additional 10 Children’s Advocacy Centers (CACs). This brought the total number of CACs participating in the MEP to 58 of the 70 centers in Texas. The additional 10 centers joining MEP began receiving Statewide Intake (SWI) reports on September 1, 2016, with more than 400 law enforcement agencies participating.
- DFPS and CACTX continued to explore the viability of creating a portal or other form of access into the IMPACT system for the CACs across the state. As a result, DFPS now provides more information to CACTX daily to support the work of the local CACs.
- CPS conducted FBSS real-time case reads statewide. Case reads seek to identify critical safety issues and communicate and address concerns in cases where data indicates that the family is at a higher risk of serious recurrence while the FBSS case is open.
- CPS continued to evaluate the rollout and use of the Structured Decision Making Safety and Risk Assessments to ensure the tools were successfully assisting caseworkers as they make decisions about the safety and risk of children. In December 2016, CPS completed a statewide rollout of a new case-transfer process from Investigations to Family Based Safety Services. This process seeks to start family preservation services early in an investigation in order to serve families while they are in crisis. To further support this process, CPS has requested the ability to open the FBSS stage in IMPACT while the Investigation is still open. This is part of IMPACT modernization.
• In March 2017, CPS provided staff with new subject matter guides on Domestic Violence, Mental Health and Substance Abuse.

• CPS continued to implement Alternative Response (AR) in three additional regions (Regions 4, 5 and 10) for a total of eight regions. Regions 1 and 11 rolled out in fiscal year 2015, and Regions 3, 7, and 9 rolled out in fiscal year 2016. Alternative Response is a family engagement approach that caseworkers use to respond to certain low-to-moderate-risk cases. CPS does not identify alleged perpetrators or give case disposition (finding of abuse/neglect). Work continues to embed the AR practice in the regions that have already implemented.

• CPS continued to work with DFPS staff and external stakeholders to increase the understanding of vulnerable populations, specifically children and families who are impoverished. The CPS Disproportionality Division facilitated poverty simulations with the Greater Houston Community Foundation, Alief Independent School District, City of Mission employees, Calhoun County United Way, DFPS Central Background Check Unit, and the Galveston County Mutual Assistance Partnership. CPS also partnered with The Office of Minority Health, Statistics, and Engagement to train judicial partners. The CPS Disproportionality Division guided approximately 400 individuals through poverty simulations.

• CPS began contracting for Battering Intervention and Prevention Program services to ensure appropriate services are available to address domestic violence issues.

• In December 2016, DFPS began formally tracking youth who exhibit sexual behavior problems and who are sexually aggressive to ensure that staff make appropriate placement decisions to keep children safe and ensure they receive needed services.

• DFPS revised the policy to clarify responsibilities of the CPS caseworker, Special Investigator, and Special Investigation program directors relating to Child Safety Check Alert List (CSCAL). CSCAL is an automated program operated by the Texas Department of Public Safety to assist DFPS in: Locating families that move and cannot be found for purposes of investigating a report of child abuse or neglect; providing protective services to a family receiving family based support services; or in limited circumstances, providing protective services to the family of a child in DFPS managing conservatorship. In July and August 2017, DFPS trained 826 Investigation, Family Based Safety Services, Alternative Response, and Special Investigation staff across the state on the new CSCAL policy.

Permanency
• On September 1, 2016, CPS implemented the Family Strengths and Needs Assessment (FSNA). This tool helps prioritize services on the family plan of service to identify and address the most critical needs. The tool assesses changes in family functioning over time.

• On September 1, 2016, CPS implemented the Child and Adolescent Needs and Strengths (CANS) assessment. CANS is a comprehensive, trauma-informed behavioral health assessment of a youth’s strengths and needs. The information helps decision-making, drives service planning, facilitates quality improvement, and allows for outcomes monitoring. During fiscal year 2017, over 7,700 CANS were completed.
• In March 2017, CPS began a statewide cleanup of the TARE system using existing data warehouse reports. This included ensuring children who should be registered on TARE had profiles published within the established timeframe, as well as making sure outdated profiles and pictures are updated according to policy.

• CPS continued development of the suite of Structured Decision Making tools for conservatorship, which will lead to better identification of reunification readiness.

• In March 2015, DFPS began working with external stakeholders to create a single child plan of service, which seeks to increase collaboration between DFPS and stakeholders and allow for the development of one document by both DFPS and the residential care provider. In April 2017, all residential care providers began using a uniform child plan template. In July 2017, DFPS began working towards making technology improvements so that residential care providers and CPS caseworkers can co-develop a child plan of service in IMPACT.

• CPS and the Supreme Court of Texas Permanent Judicial Commission for Children, Youth and Families and child welfare judges presented at the annual child welfare judicial conference. The presentation included information on ways the judiciary can improve and support regional permanency efforts.

• CPS conducted a thorough data analysis to identify factors contributing to adoption dissolutions, which will inform policy and practice related to adoption services, including purchased services. The CPS Systems Improvement Division provided technical assistance.

• CPS posted a new procurement for evaluation and treatment services. The goal was to implement changes to ensure CPS procures quality services that positively impact child safety, permanency, and well-being. Some improvements made to the statement of work include payment of travel to underserved areas of the state, payment for “no-shows” at a reduced rate of fee-for-service, strengthening minimum provider qualifications, and revising performance measures to focus on quality to support child safety, permanency, and well-being.

• Initiated “Clergy in the Court” in Harris, El Paso, Williamson and Bell counties to provide opportunities for community faith groups to become involved with the local child welfare system.

**Well-being**

• CPS continued to oversee the Psychotropic Medication Utilization Review process to ensure that a psychotropic medication prescription is in the child’s best interest. CPS will continue to participate in a Psychotropic Medication Monitoring Workgroup that meets quarterly to review the prior quarter’s data and review trends. Participation includes CPS Director of Services, CPS Medical Services staff, HHS doctors and data staff, Superior HealthPlan doctors, and pharmacists.

• CPS partnered with STAR Health and Medicaid/CHIP Division of HHS to work to a goal of 90% of foster children having timely Early and Periodic Screening, Diagnosis, and Treatment visits within the first 30 days of entering care. Activities were completed within the areas of increasing monitoring
and oversight, training, and communication. Efforts have focused on all partners involved in a youth’s care: CPS staff, healthcare providers, direct caregivers and contracted agencies.

- CPS successfully piloted 72-hour medical exams for children entering care in Dallas and Lubbock.
- CPS provided a series of best practice guides to caseworkers and staff in identifying and implementing strategies to improve education outcomes for children and youth in foster care.
- CPS education specialists provided training and presentations to internal and external stakeholders, and participated in local and statewide education forums. They also participated on education-related committees and workgroups at the Children's Commission.
- CPS education specialists participated in meetings or strategy sessions with local school districts on implementing the Every Student Succeeds Act (ESSA). The ESSA addresses more protections for students in foster care and establishes a system of joint responsibility for school districts, the state education agency, and the state child welfare agency to ensure the educational stability of students in foster care.
- CPS collaborated 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.
- CPS engaged youth in voicing their needs through Youth Leadership Councils and used newly received funding to hold more teen conferences.
- CPS began the Disproportionality Webinar Series. The series consisted of topics that intersect with CPS’s ongoing commitment to reducing disproportionality in child welfare and were presented by CPS staff and external stakeholders. The Center for Public Policy Priorities examined the significant disparities in child well-being by race and ethnicity. The Office of Minority Health, Statistics, and Engagement studied the historical and future use of the Latino voice in race-equity work. CPS Disproportionality Division explored race-based trauma and its inclusion in the trauma conversation. Webinar attendance gained momentum throughout the year topping out at 380 participants, including external stakeholders and DFPS staff from all divisions.
- CPS provided normalcy training to all child-placing staff. Normalcy refers to the ability of children and youth to participate in age and developmentally appropriate activities similar to those of children outside of foster care. To assist licensed caregivers with supporting this effort, CPS provided several guides and resources to residential care contractors. Information included Normalcy and Experiential Activities Guide; resources guide to Aid Caregivers in Providing Experiential Life Skills Training and Normalcy Activities to Foster Youth; and Tips for Providing Experiential Life Skills Training and Normalcy Activities in Residential Treatment Settings. Activities include reinforcing Preparation for Adult Living (PAL) life-skills training in health, general safety, and fire safety practices; money management; transportation skill; accessing community and other resources, and health and safety, child development; and parenting skills. CPS will provide training on normalcy annually, including tracking of service plans in IMPACT to better monitor and ensure accountability for following through on plans.
• CPS expanded the *Knowing Who You Are* project to child-placing agencies in Lubbock and San Antonio.

• CPS continued implementing the Prevent Sex Trafficking and Strengthening Families Act (HR 4980) to protect children and youth at risk of sex trafficking. CPS worked 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 internal resources such as the Special Investigators, to find missing children.

• CPS collaborated 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).

• In February 2017, CPS participated in the Annual Mid-Winter Conference for the Title IV-E University Stipend Program. This conference is a collaboration between the state and IV-E university partners to promote information sharing and knowledge transfer for IV-E best practices.

• CPS established a state faith manager and reorganized so that all the faith specialists report to one manager. CPS continues to grow faith-community relationships. Over 183 new churches joined the Care Portal in fiscal year 2017, which helps meet the needs of children and families involved with CPS. CPS has a total of 866 church partnerships, adding over 500 of those this past fiscal year.

**Workforce**

• DFPS received approval to hire 828.8 new FTEs starting December 1, 2016. All direct delivery staff have been hired.

• DFPS received approval to award substantive salary increases to CPS direct delivery staff.

• CPS turnover overall went from 25.4% for FY 16 to 18.4% for FY 17.

• DFPS developed a behavioral assessment for CPS competencies and leadership attributes in order to screen candidates for supervisory positions.

• DFPS marketed 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.

• All CPS field management participated in training regarding cultural changes and creating high-performing teams.

• Regional directors and many regional leadership teams participated in the Leadership Challenge Training, which includes a 360 evaluation for each manager, and two days of classroom instruction and activities around five foundational leadership practices. DFPS will continue the training for other designated regionals teams in 2018.
• CPS continued the mentoring program in coordination with the revised CPS Professional Development (CPD). The model combines traditional classroom instruction with field-based training and mentoring, using a competency-based model to prepare new caseworkers for their duties and reduce new-hire turnover rates.

• DFPS continued to strengthen the new mentor program by maintaining a stipend program (up to $300 per month). CPS continues to develop the coaching and teaching skills of CPS mentors and field-based trainers through ongoing training.

• DFPS received the last of three evaluation reports from the University of Texas, contracted to evaluate the new training model and its impact on producing better-trained caseworkers. Findings indicate staff believe the new model better prepares caseworkers for the job and analysis of caseworker quality shows their skills are stronger. The report stated that the CPD model is achieving the intended goals and contributing to building a higher-quality, more stable CPS workforce that will support the agency’s mission to protect children from abuse or neglect. CPD-trained caseworkers are 18 percent less likely to leave within their first year than caseworkers trained under the old Basic Skills Development (BSD) training model, resulting in approximately 340 fewer caseworkers leaving the agency. This is a cost savings of about $18 million a year. CPD-trained investigators are more likely than their BSD-trained counterparts to meet critical casework deadlines, resulting in about 6,000 more children being contacted in a timely manner and having their investigation stages resolved more quickly. CPS staff consistently report that the CPD training model, which emphasizes field-based learning, mentoring, and individualized training and supervision, is the right approach for training new caseworkers. Staff say that CPD-trained new caseworkers receive a more realistic understanding of their job responsibilities earlier in their training, begin developing skills more quickly, and are more prepared when they become case assignable than their counterparts trained under the previous BSD training model.

• CPS implemented an overhauled 30-day training program for new supervisors. The new model reinforces classroom training with hands-on learning from a mentor.

• CPS made top-level leadership development a priority as it is vital to overall success. 360 evaluations have been initiated for program director, program administrator and regional directors. CPS worked with Casey Family Programs in certain areas of the state to develop training and support specifically targeted to this level of field management. This effort will continue into fiscal year 2018.

• CPS streamlined the remaining sections of the CPS Handbook. These sections included Placement, Conservatorship Services, Foster and Adopt, Services to Older Youth in Care, and Health Care.

• DFPS expanded the use of the SafeSignal app (zero button alert system) statewide. SafeSignal, the hands-free emergency alert system for frontline caseworkers, tested successfully in Harris, Travis, and Williamson counties with staff reporting a marked impact on their safety confidence and management reporting more peace of mind over staff safety.

• The University of Houston Graduate School of Social Work completed a compensation effectiveness study. The report included 21 recommendations such as increased pay for current and newly hired
caseworkers, locality pay, and a regular merit program. Other recommendations included more frequent payment of overtime, regular use of compensatory time, and more flexible schedules for appropriate positions.

**Continuous Quality Improvement**
- CPS completed the case-review component of the federal Child and Family Services Review (CFSR) for federal Round 3. The Administration for Children and Families (ACF) issued a final report that identified areas of improvement. DFPS and the ACF are negotiating a CFSR Program Improvement Plan with targets and action steps designed to achieve the required amount of improvement. The Accountability Division also maintains a quarterly schedule of structured case reviews, designed to provide information regarding outcomes for children and families associated with changes made within the Texas child welfare system.
- Every CPS region developed a regional business plan with identified and measurable goals and targets. CPS regional directors, director of field and associate commissioner conduct quarterly business reviews.
- All regions held regular quarterly system improvements meetings to analyze data, discuss trends and identify practices to inform performance improvement.
- CPS began a time-limited review to ensure the CANS assessment and the FSNA are completed timely and entered into the child’s Health Passport and IMPACT case record. The review concluded in February 2017 and helped identify adjustments needed to the CANS process. Efforts to strengthen the protocol are ongoing.
- CPS developed and delivered training on strategic planning and data analysis to supervisors and regional management.
- CPS Systems Improvement coordinated a data exchange with the Texas Higher Education Coordinating Board and conducted analysis of post-secondary educational outcomes.
- CPS developed a system for tracking and collecting information on runaway youth.

**Capacity Building**
- CPS completed the Foster Care Needs Assessment in January 2017 and it was posted to the DFPS website and Facebook pages. It is an analysis of historical trends and forecast for FY17-18 anticipated foster care placements. The Foster Care Needs Assessment was presented to multiple stakeholder groups and CPS is currently gathering input on how useful the data was to plan for future assessments. The Foster Care Needs Assessment was presented to:
  - Texas Alliance of Children and Family Services (TACFS) members
  - Texas Network of Youth Services (TNOYS) – shelter task force
  - Committee for Advancing Residential Practices (CARF)
  - Public Private Partnership (PPP) Committee
  - Regional Provider Meetings
  - CPS Regional Program Directors
  - Organizations interested in developing or expanding children’s services in certain geographic areas
• DFPS hired a capacity building specialist, who works with residential care providers around the state to determine what barriers exist for capacity and expansion and to negotiate additional capacity. The specialist also follows up on previous outreach to residential care providers that are currently operating without current contracts with DFPS. CPS is communicating with out-of-state residential treatment providers in New Mexico, Oklahoma and Arkansas to target potential for increased capacity. In fiscal year 2017, CPS entered into contracts with facilities in Arizona and Oklahoma.

• DFPS helped facilitate two faith-based summits. These summits provided excellent opportunities for the faith community to share experiences regarding involvement with the child welfare system and to grow the participation of the faith community in work with families and children in the child welfare system in Texas. As a result of the summits, CPS has communicated with a number of existing and proposed providers who want to expand their ability to serve the children in state care.

• CPS worked with provider and faith partners across the state to hold regular information meetings throughout the calendar year to encourage communities to foster and adopt.

• DFPS partnered with Texas First Lady Cecilia Abbott in rolling out a plan to engage faith communities in providing temporary respite services.

• The Governor’s Office and DFPS developed a plan to establish care coordination and case management to provide proper services to families and children, targeting high-needs foster children in a specific area of the state. In Fiscal Year 2018, DFPS will pursue the Integrated Care Coordination (ICC) pilot, which will increase coordination among all medical and behavioral health service providers, school personnel, foster parent(s), biological family and any other significant individuals or systems in the child’s life that will result in a better experience for that child.

• CPS worked with The Governor’s Office to develop a temporary emergency placement program, in the framework of no-eject, no-reject placements, to reduce the number of children sleeping in CPS offices due to a lack of placement options that can meet their needs. DFPS will continue to pursue this program in Fiscal Year 2018.
CPS Fiscal Year 2018 Business Plan

The goal of CPS is to achieve safety, permanency, and well-being for the children we serve. Metrics for measuring safety, permanency and well-being help CPS evaluate program goals.

To achieve these goals for children, CPS needs to maintain a professional and stable workforce and continue the change and momentum sparked by the transformation effort. To evaluate the strength of its workforce, CPS will continue to track turnover by tenure and stage of service along with Survey of Employee Engagement (SEE) results related to job expectations, communication practices, and feeling valued— all areas where CPS has historically scored low. The most-recent SEE, which is administered statewide to all government agencies every other year, was in April 2016. CPS analyzed the results by region to develop meaningful plans to address areas of concern and build on our strengths. Similarly, CPS will participate in and evaluate SEE results in fiscal year 2018.

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

In fiscal year 2018, CPS is adding a goal of increasing foster care capacity to ensure that children in all levels of care have a safe, home-like setting and/or a setting that can meet their therapeutic needs. Providing an appropriate environment where a child can heal and grow is critical to the CPS mission and purpose.

For the fiscal year 2018 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. In the FY 2018 CPS Business Plan, the current status of metrics relating to Investigation and Alternative Response stages of service were included. However, goals and metrics associated with those programs will be set forth independently by the DFPS Division of Investigations (See Appendix A: CPS Stages of Service and Appendix B: Organizational Charts).

The specific strategies CPS is implementing for FY 2018 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), Continuous Quality Improvement (Goal 5), and Increase Foster Care Capacity (Goal 6).
## Historical Trends and Future Targets

The following table reflects historical trends and future targets associated with the goals of CPS. For fiscal year 2018, CPS is reporting historical data for the Division of Investigations, which includes Alternative Response. Future targets relating to those programs will be set by the Division of Investigations.

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<tr>
<td>Alternative Response</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>.87</td>
<td>1.65%</td>
<td>1.4% 1.76%</td>
</tr>
<tr>
<td>Investigations²</td>
<td>6.6%</td>
<td>7.1%</td>
<td>7.5%</td>
<td>7.7%</td>
<td>7.5%</td>
<td>7.5% 8.4%</td>
</tr>
<tr>
<td>Family Based Safety Services</td>
<td>7.5%</td>
<td>7.2%</td>
<td>7.8%</td>
<td>7.6%</td>
<td>7.6%</td>
<td>7.2% 10.0%</td>
</tr>
<tr>
<td>Conservatorship</td>
<td>11.1%</td>
<td>11.6%</td>
<td>11.9%</td>
<td>11.5%</td>
<td>11.7%</td>
<td>11.1% 11.2%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>FY 20</th>
<th>FY 22</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Timely Face-to-Face Contacts with Children</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Initial Contact INV³</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ongoing monthly contact FBSS⁴</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ongoing monthly contact CVS</td>
<td>94.5%</td>
<td>94.7%</td>
</tr>
<tr>
<td></td>
<td>95.0%</td>
<td>96.6%</td>
</tr>
<tr>
<td></td>
<td>95%</td>
<td>98.2%</td>
</tr>
<tr>
<td></td>
<td>95%</td>
<td>98%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>FY 17 (Preliminary)</th>
<th>FY 18 Target</th>
<th>FY 20 Target</th>
<th>FY 22 Target</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Permanency</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time to permanency in months</td>
<td>18.5</td>
<td>18.9</td>
<td>18.8</td>
<td>18.4</td>
</tr>
<tr>
<td>Time to reunification</td>
<td>13.3</td>
<td>13.2</td>
<td>13.2</td>
<td>13.3</td>
</tr>
<tr>
<td>Time to Relative PMC (no PCA)</td>
<td>12.8</td>
<td>13.3</td>
<td>13.1</td>
<td>13.3</td>
</tr>
<tr>
<td>Time to Relative PCA</td>
<td>25.7</td>
<td>25.7</td>
<td>24.2</td>
<td>24.9</td>
</tr>
<tr>
<td>Time to Relative Adoption</td>
<td>25.7</td>
<td>25.7</td>
<td>26.6</td>
<td>24.9</td>
</tr>
<tr>
<td>Time to Non-Relative Adoption</td>
<td>32.3</td>
<td>32.1</td>
<td>30.8</td>
<td>29.0</td>
</tr>
</tbody>
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1 Final data for FY2017 is not available at the time of publishing. Preliminary data is reflected in the table. When 2017 data is final, CPS will publish an amended version of the CPS Business Plan.

2 For Fiscal Year 2018, CPS is reporting historical data for the Division of Investigations, which includes Alternative Response. Future targets relating to those programs will be set by the Division of Investigations.

3 Data reflects April-August 2017. The methodology behind the data changed in April 2017 to be more accurate with the requirements of face-to-face visits in that stage.

4 Timely Face-to-Face contact for FBSS cases was not available at the time of publishing. Data will be published in an amended CPS Business Plan when data is available.
## Historical Performance

<table>
<thead>
<tr>
<th>Metric</th>
<th>FY12</th>
<th>FY13</th>
<th>FY14</th>
<th>FY15</th>
<th>FY16</th>
<th>FY 17 Target</th>
<th>FY17 (Preliminary)</th>
<th>FY 18 Target</th>
<th>FY 20 Target</th>
<th>FY 22 Target</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Exits to permanency for children in care 2 or more years</strong></td>
<td>28%</td>
<td>31%</td>
<td>32%</td>
<td>33%</td>
<td>34%</td>
<td>37%</td>
<td>35%</td>
<td>38%</td>
<td>44%</td>
<td>50%</td>
</tr>
<tr>
<td><strong>Visits with parents/siblings in foster care</strong></td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>81%</td>
<td>89%</td>
<td>Pending</td>
<td>95%</td>
<td>95%</td>
</tr>
<tr>
<td><strong>Placed with relatives (sub care)</strong></td>
<td>39%</td>
<td>40%</td>
<td>41%</td>
<td>42%</td>
<td>43%</td>
<td>47%</td>
<td>44%</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Average number of placements for children in foster care</strong></td>
<td>3.4</td>
<td>3.3</td>
<td>3.2</td>
<td>3.2</td>
<td>3.1</td>
<td>2.8</td>
<td>3.1</td>
<td>2.8</td>
<td>2.6</td>
<td>-</td>
</tr>
<tr>
<td><strong>Percent of time in sub care spent in least restrictive setting</strong></td>
<td>82.5%</td>
<td>83.2%</td>
<td>83.4%</td>
<td>83.6%</td>
<td>85.0%</td>
<td>-</td>
<td>86.7%</td>
<td>87.6%</td>
<td>88.5%</td>
<td>90%</td>
</tr>
</tbody>
</table>

### Well-Being

<table>
<thead>
<tr>
<th>Metric</th>
<th>FY12</th>
<th>FY13</th>
<th>FY14</th>
<th>FY15</th>
<th>FY16</th>
<th>FY 17 Target</th>
<th>FY17 (Preliminary)</th>
<th>FY 18 Target</th>
<th>FY 20 Target</th>
<th>FY 22 Target</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Children’s educational needs are met</strong></td>
<td>97%</td>
<td>97%</td>
<td>96%</td>
<td>93%</td>
<td>99%</td>
<td>100%</td>
<td>Pending</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Children’s physical health needs are met</strong></td>
<td>93%</td>
<td>89%</td>
<td>91%</td>
<td>87%</td>
<td>91%</td>
<td>100%</td>
<td>Pending</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Children’s mental/behavioral health needs are met</strong></td>
<td>94%</td>
<td>92%</td>
<td>91%</td>
<td>88%</td>
<td>97%</td>
<td>100%</td>
<td>Pending</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td><strong>Youth completing PAL</strong></td>
<td>75%</td>
<td>76%</td>
<td>76%</td>
<td>73%</td>
<td>76%</td>
<td>80%</td>
<td>80%</td>
<td>85%</td>
<td>88%</td>
<td>90%</td>
</tr>
<tr>
<td><strong>Siblings in substitute care placed together</strong></td>
<td>64%</td>
<td>66%</td>
<td>66%</td>
<td>65%</td>
<td>65%</td>
<td>68%</td>
<td>64%</td>
<td>68%</td>
<td>70%</td>
<td>70%</td>
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</tbody>
</table>

### Workforce

<table>
<thead>
<tr>
<th>Metric</th>
<th>FY12</th>
<th>FY13</th>
<th>FY14</th>
<th>FY15</th>
<th>FY16</th>
<th>FY 17 Target</th>
<th>FY17 (Preliminary)</th>
<th>FY 18 Target</th>
<th>FY 20 Target</th>
<th>FY 22 Target</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Turnover for CPS overall</strong></td>
<td>26%</td>
<td>26%</td>
<td>25%</td>
<td>26%</td>
<td>25%</td>
<td>21%</td>
<td>18.4%</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Turnover for Investigations</strong></td>
<td>34%</td>
<td>32%</td>
<td>34%</td>
<td>33%</td>
<td>33%</td>
<td>28%</td>
<td>24.9%</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Turnover for Family Based Safety Services</strong></td>
<td>26%</td>
<td>25%</td>
<td>23%</td>
<td>28%</td>
<td>25%</td>
<td>21%</td>
<td>16%</td>
<td>16.5%</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Turnover for Conservatorship</strong></td>
<td>24%</td>
<td>22%</td>
<td>23%</td>
<td>23%</td>
<td>23%</td>
<td>19%</td>
<td>16.5%</td>
<td>16.5%</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

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5 Data is sourced from the Summary of CFSR case review prepared by CPS Accountability Division. As of the date of publishing, this data is not available. Data will be published in an amended CPS Business Plan when data is available.

6 Data is sourced from the Summary of CFSR case review prepared by CPS Accountability Division. As of the date of publishing, this data is not available. Data will be published in an amended CPS Business Plan when data is available.

7 Data is sourced from the Summary of CFSR case review prepared by CPS Accountability Division. As of the date of publishing, this data is not available. Data will be published in an amended CPS Business Plan when data is available.

8 Data is sourced from the Summary of CFSR case review prepared by CPS Accountability Division. As of the date of publishing, this data is not available. Data will be published in an amended CPS Business Plan when data is available.

9 For Fiscal Year 2018, CPS is reporting historical data for the Division of Investigations, which includes Alternative Response. Future targets relating to those programs will be set by the Division of Investigations.
Definitions for Key Measures of Safety, Permanency, Well-Being, and Workforce

**Safety**

- **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. (Source: DFPS Executive Dashboard)

- **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. (Source: DFPS Executive Dashboard)

- **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. (Source: DFPS Executive Dashboard)

- **Timely face-to-face with children in investigations** – percentage of alleged victims with face-to-face contact within required timeframes (Source: df86004)

- **Timely face-to-face with children in FBSS** – percentage of children on a family plan of service, or a child principal if there is no family plan of service, that had monthly face-to-face contact (Source: pending)

- **Timely face-to-face in conservatorship** – percentage of children in conservatorship with monthly face-to-face contact. (Source: DFPS data warehouse report SA_42).

**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. (Source: DFPS Executive Dashboard)

- **Time to reunification, relative Permanent Managing Conservatorship (PMC), relative Permanency Care Assistance (PCA), relative adoption and non-relative adoption** – average number of months a child spends in care from the time of removal until they exit the CPS system. (Source: DFPS data warehouse report PP_20)

- **Permanency for children in care two or more years** – percentage of children in care two or more years at the beginning of the fiscal year who exit to one of the following during the year: reunification, relative as a permanent managing conservator, relative adoption, or non-relative adoption. (Source: DFPS Executive Dashboard)

- **Visiting with parents and siblings in foster care** – percentage of children in Child and Family Services Review (CFSR) case read that visited with their parents and siblings. The CFSR defines this as, “whether, during the period under review, concerted efforts were made to ensure that visitation between a child in foster care and his or her mother, father, and siblings is of sufficient frequency and quality to promote continuity in the child’s relationship with these close family members”. (Source: Summary of CFSR case review prepared by CPS Accountability Division)

- **Children in substitute care placed with relatives** – percentage of children in DFPS conservatorship on August 31 (of each year) that were placed with a relative including relatives verified as foster parents. (Source: DFPS Executive Dashboard)
- **Average number of placements for children in foster care** – average number of placements for youth in foster care. (Source: DFPS Executive Dashboard)

- **Percentage of time spent in family like settings** – for all children who spent at least one day in conservatorship, the percentage of their total days in conservatorship that were spent living at home, with a relative or in a foster family home. (Source: DRIT 86028)

**Well-Being**

- **Educational needs of the child are met** – percentage of children in Child and Family Services Review (CFSR) case read that had educational needs met. The CFSR defines this as, “whether, during the period under review, the agency made concerted efforts to assess children’s educational needs at the initial contact with the child (if the case was opened during the period under review) or on an ongoing basis (if the case was opened before the period under review), and whether identified needs were appropriately addressed in case planning and case management activities”. (Source: Summary of CFSR case review prepared by CPS Accountability Division)

- **Physical health needs of the child are met** – percentage of children in CFSR case read that had their physical health needs met. The CFSR defines this as, “whether, during the period under review, the agency addressed the physical health needs of the children, including dental health needs”. (Source: Summary of CFSR case review prepared by CPS Accountability Division)

- **Mental/behavioral health of the child** – percentage of children in Child and Family Services Review case read that had mental and behavioral needs met. The CFSR defines this as, “whether, during the period under review, the agency addressed the mental/behavioral health needs of the children”. (Source: Summary of CFSR case review prepared by CPS Accountability Division)

- **Youth completing Preparation for Adult Living (PAL) life-skills training** – percentage of youth who leave substitute care at age 18 or older and completed PAL Life Skills classes required to receive the PAL Transitional Living Allowance (up to $1,000) funding after a youth left substitute care. (Source: DFPS Executive Dashboard)

- **Siblings in substitute care placed together** – percentage of siblings groups in substitute care on August 31 (of each year) with all siblings in the same placement. (Source: DFPS Executive Dashboard)

- **Children in foster care placed in county** – percentage of children in foster care on August 31 placed in their legal county. (Source: DFPS Executive Dashboard)

**Workforce**

- **Turnover** – calculated according to the State Auditor Office methodology. (Source: DFPS Executive Dashboard).
Goal 1: Maximize the Safety of Children and Youth Served by the CPS System

Outcome Measures

- Reduced recidivism after termination of Family Based Safety Services
- Reduced recidivism after exiting state custody to reunification
- Maintain quality face to face contact with families being served in Family Based Safety Services
- Maintain quality face to face contact with children in substitute care

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 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 recurrence.

CPS looks at recidivism for 12 months after CPS supervision ends. As a result, this is a "lagging" measure, meaning it reflects past rather than current services and decisions.

Objective 1.1: Improve Safety Decision Making While Engaging Families and Safety Networks to Keep Children Safe

Leads: CPS

- DFPS Resources: DFPS Systems Improvement, CPS Division of Practice Excellence, DFPS Purchased Client Services, DFPS Office of Child Safety, DFPS Center for Learning and Organizational Excellence, DFPS Office of the Chief Financial Officer, and DFPS Information Resource Management
- HHS Resources: Procurement Operations
- Stakeholder Resources: Domestic violence stakeholders and Casey Family Programs

Action Plan

- CPS will work to develop and plan for implementation of the Structured Decision Making (SDM) tools: Risk Re-Assessments for FBSS and CVS, Family Reunification Assessment, and Safety and Risk Assessments for Alternative Response. Updates to IMPACT to support these tools will be complete in FY 2019.
- CPS will contract with a vendor in Region 10, which covers El Paso, Brewster, Culberson, Hudspeth, Jeff Davis, and Presidio Counties. The vendor will be responsible for providing a full array of needed services for children and families in the FBSS stage. The model will use a performance-based contract, and will include a comprehensive evaluation to assess effectiveness of service provision.
• CPS will work to improve FBSS through training and staff development, live case reads, and strengthening of the case transfer process between Investigations and FBSS. CPS will partner with Casey Family Programs to specifically target performance improvement.
• CPS will enhance how staff work with and engage families where domestic violence is a safety and risk factor by increasing the use of Battering Intervention and Prevention Projects, completing the Domestic Violence Practice Guide, increasing accessibility of resources to CPS staff and our partners by posting to internal and external facing websites, and strengthening relationships with partners to bolster prevention and intervention.

Goal 1: Maximize the Safety of Children and Youth Served by CPS

Objective 1.2: Work to address risks to foster youth relating to Human Trafficking

Leads: DFPS Division of Human Trafficking and Child Sexual Exploitation, Division of Investigations, CPS Field Operations and CPS Conservatorship Services.

• DFPS Resources: DFPS Division of Human Trafficking and Child Sexual Exploitation, Division of Investigations, CPS Field Operations and CPS Conservatorship Services, DFPS Information Resource Management, Preparation for Adult Living, DFPS Center for Learning and Organizational Excellence
• Stakeholder Resources: Human Trafficking stakeholders, Department of Public Safety, the Center for Missing and Exploited Children, the Federal Bureau of Investigations, and local law enforcement agencies

Action Plan

• DFPS will analyze data relating to Human Trafficking victims reported to DFPS and create a model to identify populations that are high risk of becoming victims. DFPS will release a report in January 2018.
• DFPS will make changes to IMPACT to meet Title IV-E requirements for identifying, reporting and providing services to victims of sex trafficking.
• CPS will continue implementing the Prevent Sex Trafficking and Strengthening Families Act (HR 4980) to protect children and youth at risk of sex trafficking. The Division of Investigations and CPS will continue collaborating 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 use internal resources such as the Special Investigators, to find missing children.
• CPS will continue working 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).
• CPS will participate in community task forces addressing local issues associated with child sexual exploitation.
• CPS will work with the DFPS Division of Human Trafficking and Child Sexual Exploitation to develop training curriculum for staff regarding Commercially Sexually Exploited (CSE) youth and to increase institutional knowledge in identifying and responding to CSE youth.
Goal 2: Maximize Permanency for Children and Youth Served by CPS

Outcome Measures
- Reduced time to permanency (reunification, placement with relatives, 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

When CPS removes a child from their home and takes legal custody, the agency is responsible for keeping 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, permanent home as soon as possible.

CPS remains committed to examining race and ethnicity data to determine outcome disparities for children of color. There has been some improvement in Texas over the last three years. The removal disparity between African Americans and Anglos is declining. African Americans and Latinos were more likely to exit to a relative. Even with the higher rate of relative placement, children of color are less likely to be adopted within 12 months of termination of parental rights; the disparity is especially apparent for African Americans. African American families are less likely to regain custody of their children. CPS acknowledges that a study of data related to these outcomes is essential to develop and implement strategies. As CPS seeks to identify barriers to permanency, it will continue to analyze disparity for children of color.

Objective 2.1: Maximize Placements with Kinship Families

Lead: CPS Conservatorship Services Division
- DFPS Resources: CPS Field Operations, CPS Interstate Compact for the Placement of Children (ICPC) Division, CPS Disproportionality Division.
- Stakeholder Resources: Court Appointed Special Advocates, Star Health, Superior, Cenpatico, Supreme Court of Texas Permanent Judicial Commission for Children, Youth, and Families, and the Texas judicial system.

Action Plan
- DFPS will continue to partner with Texas Court Appointed Special Advocates (CASA) to support Collaborative Family Engagement. The goal of Collaborative Family Engagement is to create better outcomes for children in the Texas child protection system by identifying, locating and engaging
family members and other committed adults so they can be involved in the child’s care and permanency planning.

- CPS will analyze information from the Post Permanency Program for Kinship families that began in 2017 in regions 6A, 6B, and 11 to assist in expanding this service statewide. The Post-Permanency Program supports families who obtained Permanent Managing Conservatorship (PMC) from CPS. This service provides support through: information and referrals, casework service and planning, parent groups, parenting programs, counseling services, respite care reimbursement, and crisis intervention for relatives who assume PMC of children in foster care.

- CPS will hold quarterly meetings with the Kinship Collaboration Group comprised of adults serving in the role of kinship caregiver. This group informs CPS efforts to improve the kinship program by identifying ways to better support kinship caregivers.

- CPS will analyze findings for the Quality Improvement Center for Adoption & Guardianship Support and Preservation (QIC-AG) Project. The findings will help guide kinship program development. The QIC-AG Project is targeting children in Texas Permanent Managing Conservatorship in Region 7 and is designed to evaluate models of support and intervention to guardianship caregivers with the ultimate goal of achieving long-term, stable permanency in guardianship homes. The University of Texas at Austin is evaluating the QIC-AG grant through the National Quality Improvement Center for Adoption and Guardianship Support and Preservation (QIC-AG). The QIC-AG is funded through a cooperative agreement with the U.S. Department of Health and Human Services Administration for Children and Families, Children’s Bureau. This is a five-year initiative (2014-2019). When the initiative ends, the QIC-AG will have rigorously evaluated evidence-based models of support and intervention so the most effective programs and methods can be replicated in child welfare systems nationwide.

- CPS will implement a monthly payment process for kinship caregivers. During the 85th Legislative Session, House Bill 4 passed, allowing DFPS to provide monthly reimbursements to eligible kinship caregivers caring for children in DFPS conservatorship.

- CPS will create an appeal process for potential kinship caregivers who are denied a placement due to low-risk criminal history.

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### 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 Conservatorship Services Division**

- DFPS Resources: CPS Field Operations, DFPS Systems Improvement, CPS Division of Policy and Practice, CPS Foster and Adoption Development Division, and CPS Disproportionality Team.

- Stakeholder Resources: Children’s Commission, 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

- CPS will increase photo listings of available children on the Texas Adoption Resource Exchange (TARE). CPS will conduct specific targeted work to ensure TARE is a viable tool for increasing permanency options for children.
- CPS will use information from the Post-Permanency pilots in Regions 6A, 6B, and 11 to enhance support to families statewide.
- CPS will continue targeted permanency activities for children who have been in care two or more years.

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 Conservatorship Services Division & Faith Initiative State Manager

- DFPS Resources: DFPS Systems Improvement, CPS Disproportionality Division, CPS Foster and Adoption Development Division, CPS Faith Based Specialists
- 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

- CPS will expand Texas faith-based initiatives by supporting congregations that wish to participate in the care portal, a system that allows churches to provide goods and services to children and families in need in their own communities.
- CPS will expand the “adopt a family” initiative to faith communities that wish to support youth and families in need in their own communities. This initiative is targeted for areas with no care portal.
- CPS will expand the “clergy in court for kids” initiative, which allows clergy members to attend court hearings and provide additional support to youth and families.
- CPS will increase the diversity of faith communities involved in foster care initiatives.
- CPS will continue to engage statewide and regional Parent Collaboration Groups on improvements to practice, policy and service provision.
- CPS will expand involvement of direct-delivery service volunteers in various capacities, including hospital sitting, parent transportation, and mentor/life coaches.
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 Conservatorship Services Division

- DFPS Resources: CPS Placement Division, CPS Community Based Care, DFPS Systems Improvement, CPS Reunification and Permanency Transformation Team, DFPS Prevention and Early Intervention, DFPS Information Resource Management, DFPS Contracts Division, DFPS Management Reporting and Statistics.
- HHSC Resources: Residential Child Care Licensing

Action Plan

- CPS will implement a single Child Plan of Service to reduce duplication and improve service provision. A uniform single child plan document is required of contracted providers. IMPACT functionality to support the single Child Plan of Service will be complete in fiscal year 2018.
- A performance-based residential contract, which aims to improve the quality of residential foster care through new performance measures has been implemented.
- CPS will shift from Foster Care Redesign to Community Based Care (CBC), as per Senate Bill 11, 85th Texas Legislature, to promote a community-based approach to service coordination and delivery, increase capacity, ensure quality, case management and improve outcomes for children and families. Major milestones include:
  - In October 2017, CPS will release the Region 2 CBC Request for Application. Posting, evaluation, and contract negotiation is anticipated to be a five-month process.
  - In November 2017, CPS will release a second CBC Request for Application for Bexar County.
  - Two additional CBC Request for Applications are planned for release in FY 2019. Catchment areas are to be determined.
  - By November 2017, CPS expects to renew its contract with Our Community Our Kids, the Single Source Continuum Contractor in Region 3b, to include all provisions of Community-Based Care.
  - Anticipated rollout of CBC in Region 3b in April 2018.
Goal 3: Maximize the Well-being of Children and Youth Served by CPS

Outcome Measures

- 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 met. To truly understand well-being, CPS must understand the quality of the services provided to children. As part of the continuous self-improvement process, CPS reads hundreds of cases every year with the federal Child and Family Services Review 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 education and physical and mental health. If there are needs, the reviewer checks to see if the child was 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 126 cases per quarter.

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.

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, DFPS Purchased Client Services, CPS Disproportionality Division, DFPS Division of Investigations, and DFPS Center for Learning and Organizational Excellence.
- Stakeholder Resources: Health and Human Services Commission (HHSC), STAR Health / Superior Health Plan/Cenpatico, Children's Hospital Association of Texas, Dr. David Cross and staff from Texas Christian University (trauma-informed care), Dr. John Lyons, Chapin Hall (CANS), contracted residential child care and contracted residential care providers.
**Action Plan**

- CPS will strengthen the use of the Child and Adolescent Needs and Strengths (CANS) assessment to:
  1) ensure that every child ages 3-17 entering the conservatorship of CPS is receiving this assessment or an annual update if they remain in conservatorship; 2) CANS assessments are completed timely; 3) the recommendations from CANS are incorporated into the service planning process for the child; and 4) the Texas-specific CANS tool and algorithm continue to be valid and reliable assessment tools.
- CPS will improve compliance of the initial Texas Health Steps checkups for youth in foster care. The Texas Health Steps checkup is due within 30 days of a child entering care to assess their overall physical health.
- CPS will implement a three-day medical exam for all children entering foster care. The new medical exam will be conducted within three business days of a child entering foster care and will be critical to determining if the child has any immediate medical needs. Used in conjunction with the CANS assessment and the Texas Health Steps checkups, the medical exam will provide a thorough assessment of each child’s physical, emotional, behavioral, and developmental needs upon entry to DFPS conservatorship. CPS will use the three tools to tailor services for each child.
- CPS will 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 update the current Professional Development and annual refresher trainings. CPS will review and update the Trauma Informed Strategic Plan.

**Goal 3: Maximize the Well-being of Children and Youth Served by CPS**

**Objective 3.2 Support Children’s Education Outcomes**

**Lead: CPS Conservatorship Services Division**

- DFPS Resources: CPS Division of Policy and Practice, and the CPS Disproportionality Division
- Stakeholder Resources: Texas Education Agency; Texas Association of School Boards; School Districts, including 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**

- CPS education specialists will conduct a minimum of three regional education consortiums to address the multiple education-related issues, including behavior and mental health, associated with the challenges that children and youth in foster care face.
- Regional education specialists will track credit progress in completing requirements for a high school diploma for 11th and 12th grade students in foster care.
- CPS will create an internal multidisciplinary group to develop and implement strategies to improve education outcomes.
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

- DFPS Resources: CPS Youth Specialists, CPS Disproportionality Division, and Preparation for Adult Living staff.
- Stakeholder Resources: Residential Child Care contractors, Supervised Independent Living contractors, and youth.

Action Plan

- CPS will implement program improvements related to PAL Life Skills training completion.
- CPS will train CPS staff and external stakeholders on racial and ethnic identity to promote competencies around healthy racial and ethnic identity formation for children and youth.
- CPS will implement a four-year pilot summer internship program for current or former foster care youth ages 15 and older.
- CPS will work with stakeholders and youth to develop a plan to standardize the curriculum for the PAL program to ensure that youth 14 years of age or older receive relevant and age-appropriate information and training.
- CPS will work with stakeholders and youth to develop procedures to ensure each foster youth gets a driver’s license or personal identification card before leaving DFPS conservatorship.
- CPS will expand training of racial, ethnic and LGBTQ identity beyond the State Teen Conference to the Regional Teen Conferences.
- CPS will continue expanding Knowing Who You Are: Racial and Ethnic Identity training to child-placing agencies.

Goal 4: Maximize Staff Recruitment, Retention, and Development to Ensure a Professional and Stable Workforce

Outcome Measures

- Decreased combined turnover rate
- Decreased turnover for Family Based Safety Services caseworkers
- Decreased turnover for Conservatorship caseworkers

To achieve the outcomes we want for children and families, CPS 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
• Mitigate the impact of turnover, which will always be present at some level, with tools and supports for management and staff.

Objective 4.1: 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, DFPS Systems Improvement, DFPS Center for Learning and Organizational Excellence, DFPS Workforce Development Division, DFPS Leads (Leadership, Excellence, Advancement, Distinction and Support), and the CPS Disproportionality Division.

Action Item

- DFPS will provide advanced leadership skills training to CPS supervisors and managers.
- CPS will develop and provide training designed specifically for new program directors.
- CPS will provide program directors and program administrators with training specific to data and strategies relating to interpreting data.
- CPS will provide critical-thinking training to FBSS program directors, program administrators, and regional directors that will focus on policy and practice around PCSPs, safety decision making, risk assessment and family dynamics, including domestic violence and substance abuse. CPS will establish regional plans for program directors to train supervisors on these topics.
- CPS will engrain exemplary leadership behaviors that provide a framework for positive culture and workforce retention as a part of the ongoing Leadership Challenge training for regional executive leadership.
- CPS will continue to expand cultural responsiveness training for staff at all levels. This will include developing a course related to working with Latino families, creating disproportionality computer–based training, statewide implantation of poverty simulations, and statewide implementation of the Working with Families Who Are Impoverished course.
- CPS will expand secondary-trauma training. The training will be included in the second year of training curriculum for new supervisors and mentors. Staff will learn the differences and correlations between primary trauma, secondary trauma, and compassion fatigue. The training also will teach staff how to prevent, recognize, and address symptoms of each.
- CPS will develop a plan to sustain the mentoring program.
- CPS will add hiring boards to the screening assessment for supervisor promotion to support fair and objective hiring practices.
- 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 review the current Trauma Informed Care training to determine if current curriculum needs updating. CPS will begin rollout of a secondary trauma curriculum for CPS field staff, including mentors and supervisors.

**Goal 4: Maximize Staff Recruitment, Retention, and Development to Ensure a Professional and Stable Workforce**

### Objective 4.2: Leverage Technology and Operational Supports

<table>
<thead>
<tr>
<th>Leads: CPS Field, DFPS Chief Operations Officer</th>
</tr>
</thead>
<tbody>
<tr>
<td>DFPS Resources: DFPS Operational Support Services, DFPS Information Resource Management, multiple CPS divisions, Division of Investigations</td>
</tr>
</tbody>
</table>

**Action Plan**

- CPS will complete the rollout of INSIGHT, an upgrade to the reporting and data management technology for IMPACT, which will 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 overdue. There will also be reports with workload information that will help supervisors manage assignments.
- CPS state office and field staff will continue to participate in planning and design for enhancements to IMPACT. CPS will make the changes as part of IMPACT modernization, a multi-year technology update to the system. The enhancements will support CPS Transformation and other key initiatives and save time for CPS caseworkers.

**Goal 4: Maximize Staff Recruitment, Retention, and Development to Ensure a Professional and Stable Workforce**

### Objective 4.3: Create an Environment That Promotes Retention

<table>
<thead>
<tr>
<th>Lead: DFPS Workforce Development Division</th>
</tr>
</thead>
<tbody>
<tr>
<td>DFPS Resources: CPS Director of Field, DFPS Systems Improvement, CPS Division of Practice Excellence, CPS Regional leadership teams, DFPS Data Decision and Support, DFPS Executive Team, DFPS Office of Communications, and DFPS Office of External Relations.</td>
</tr>
</tbody>
</table>
Action Plan

- Each month during fiscal year 2018, CPS regional leadership will continue to personally contact workers with six-24 months tenure at regular intervals to gather feedback on what is working well for staff and what support is needed to ensure staff success.
- CPS will continue to deploy master conservatorship workers to understaffed areas of the state to support workload and build capacity.
- CPS will continue the Leadership Challenge Training for regional leadership teams.
- CPS will promote employee recognition and retention efforts, including leadership recognition awards, such as the Commissioner’s Award of Excellence, CPS Executive Leadership Award of Distinction, and Regional Director Award of Distinction.

Goal 5: Integrate Continuous Quality Improvement

Success Measures:

- Implement annual Continuous Quality Improvement report and quarterly updates
- Continue to utilize the federal Child and Family Services Review process and other structured case reviews to support the improvement process

CPS has worked to solidify a continuous quality improvement (CQI) culture that supports a continual and strategic transformation and improvement process.

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 Divison
\[ \text{DFPS Resources:} \text{ DFPS Systems Improvement, CPS Accountability Division, CPS Division of Practice Excellence, CPS Organization Effectiveness Team, and DFPS Management Reporting and Statistics.} \]

Action Plan

- CPS will initiate the Child and Family Services Review Program Improvement Plan, as negotiated with the Children's Bureau, Office of the Administration for Children and Families, to improve outcomes related to safety, permanency and well-being.
• CPS will continue continuous quality improvement efforts through quarterly Child and Family Service Reviews of FBSS and Conservatorship cases and the investigations and Alternative Response cases attached to those cases across all regions.
• CPS will strengthen ongoing continuous quality improvement efforts through regular case reviews in FBSS and Conservatorship.
• CPS will continue to do special ad hoc reviews to measure outcomes of practice changes or to address areas of potential concern.
• CPS will continue its continuous quality improvement efforts to sustain improvements and proactively identify and make needed changes by continuing to use predictive analytics to target resources, aggregate information into usable formats, evaluate all new initiatives and conduct quarterly system improvement meetings with regional leadership.
• The CPS associate commissioner and director of field will continue quarterly business performance reviews with each regional director to review key data performance indicators and address issues and concerns.

Goal 6: Increase Foster Care Capacity

Success Measures:
• Net gain/loss in foster family bed capacity
• Percentage of basic/moderate youth in foster family homes
• Children in substitute care placed in county, in region

When a child enters foster care, it is CPS’ responsibility to ensure that the child has a safe, home-like setting that can care for the child until they can safely reunite with their family, or achieve permanency through the transfer of custody to a relative or through adoption. CPS contracts with a network of residential care providers across the state that range from basic foster homes to residential treatment centers that provide services to youth with the highest and most complex needs. Over the past few years, CPS has struggled to grow and retain capacity to serve youth with complex needs. To address this issue, CPS has implemented a number of strategies to increase foster care capacity statewide.

Community Based Care
Community Based Care (CBC) is a new initiative that is closely aligned with the Foster Care Redesign model. CBC provides substitute care (foster and kinship) services that relies on a single contractor, within various geographic areas. The Single Source Continuum Contractor (SSCC) is responsible for finding foster homes or other living arrangements for children in state care and providing them and their families a full continuum of services, including case management. The purpose is to improve the overall well-being and permanency of children in substitute care and keep children closer to home and connected with their communities and siblings.

Treatment Foster Care
Treatment Foster Family Care Program will serve children and youth age 10 and younger, who have mental health and/or socio-behavioral needs that cannot be met in traditional foster care settings and who might otherwise be served in residential treatment settings. Treatment Foster Family Care Program will include innovative, multi-disciplinary treatment services that are evidenced-based and research-
supported. This is a time-limited program intended to stabilize and prepare children for successful transition into less restrictive or permanent placements. Treatment Foster Family Care foster parents and contractors will receive a higher reimbursement but will have additional expectations such as additional training, more frequent treatment plan reviews, and ongoing support following discharge.

Integrated Care Coordination
DFPS created this program to improve outcomes and coordination of care for children and youth in foster care with specialized needs, including behavioral health needs. The purpose of this program is to shift highly complex and time-consuming cases from caseworkers to a vendor, Pathways Youth and Family Services, that will focus on them exclusively under a no eject/no reject contract. This program will allow children with more complex needs to get the attention they deserve, while allowing caseworkers to focus more time on the other children on their caseload.

In Fiscal Year 2018, DFPS will pursue the pilot, which will serve up to 150 children and youth whose legal county of residence is Harris County and who meet one or more of the following criteria:

- Was admitted to a hospital and stayed longer than medically necessary.
- Was admitted to a psychiatric hospital and stayed longer than medically necessary.
- Is currently or would need to be served through a child-specific contract.
- Had at least two residential treatment center admissions in the past 12 months.
- Had at least two psychiatric admissions over the past 12 months.

Temporary Emergency Placement
The Temporary Emergency Placement (TEP) program was designed to provide highly structured quality residential care and services for children without placement on an emergency and short-term basis while placement staff continue searching for a more suitable and longer-term placement. This is a no eject/no reject program. Providers who participate in the TEP program have specialized training and experience providing services to high-needs children in DFPS conservatorship. In Fiscal Year 2017, DFPS purchased 20 beds from four providers across Texas who provide emergency care, including 24-hour supervision to ensure child safety, frequent one-to-one monitoring, a care staffing within 24 hours of admission to discuss the child’s needs, daily observation notes, weekly progress notes, and immediate on-site crisis response. DFPS will continue to pursue the TEP program in Fiscal Year 2018.

Goal 6: Increase Foster Care Capacity

Objective 6.1: Increase Foster Care Capacity to ensure that children in all levels of care have a safe, home-like setting and/or a setting that can meet their therapeutic needs.

Lead: CPS Conservatorship Services Division

- DFPS Resources: DFPS Contracts Division, DFPS Division of Human Trafficking and Child Sexual Exploitation
- HHSC Resources: Residential Child Care Licensing, HHSC Procurement Office
- Stakeholder Resources: Committee for Advancing Residential Practices, Public Private Partnership, University of Texas School of Social Work
## Action Plan

- In fiscal year 2017, a statewide Foster Care Needs Assessment was finalized. The Occupancy Analysis has been completed and shared with external providers. HHS provided forecasting data which, in conjunction with the Occupancy Analysis, produced the statewide needs assessment. In FY 2018, CPS will use this data to project the locations and types of foster care services needed and determine its annual procurement schedule.
- CPS will continue to implement 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.
- CPS will shift from Foster Care Redesign to Community-Based Care to promote a community-based approach to service coordination and delivery, increase capacity, ensure quality, case management, and improve outcomes for children and families. CPS will procure for a SSCC in four additional catchment areas through 2019.
- CPS will implement the Treatment Foster Care program.
- CPS will pursue the Integrated Care Coordination pilot in Harris County.
- CPS will work with the DFPS Division of Human Trafficking and Child Sexual Exploitation to increase the continuum of care for placement and services to commercially sexually exploited youth.
- In each region where community-based care has not been implemented, CPS will create a plan to assess substitute care capacity needs.
- Using the completed needs assessments, CPS will develop plans to address the substitute care capacity needs in each region.
- CPS will pursue the use of the Temporary Emergency Placement program when a child is without a placement.
- CPS will implement the Intense Plus service level for residential care providers to receive an increased rate for providing an additional level of services for youth with complex needs.
- CPS will increase participation in Supervised Independent Living foster care placements.
- CPS will contract for training relating to Motivational Interviewing. Specific CPS staff will be trained in motivational interviewing using the curriculum from the University of Texas, School of Social Work; children who refuse placement will be reduced as a result of trained staff using motivational interviewing to work with children to go to approved placements.
Appendix A: 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 2016 statistics\(^\text{10}\) provide context on children and families affected and staff workload.

**Figure 1: Stages of Service**

**Intake and Screening**

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

289,334 intakes

**Alternative Response and Investigations**

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

166,753 investigations

**Family Based Safety Services and Conservatorship**

What behavior changes are needed to address the problem?

21,031 FBSS
8,079 Conservatorship

**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 fiscal year 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 assign it to an Investigations caseworker.

**Investigations**

Investigations caseworkers investigate allegations of abuse and neglect within statutorily determined timeframes. Investigators interview the child(ren) involved, the alleged perpetrators, and other key collateral contacts, and assess all pertinent information. 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 days, and to close the case within 60 days from the point of intake. Over 80 percent of investigations are closed without the case being progressed for additional services. When allegations of abuse or neglect are substantiated, the case may be closed, transferred to Family Based Safety Services, or CPS may assume legal custody and transfer the case to the Conservatorship (CVS) stage of service.

\(^{10}\) Data for FY2017 is not available at the time of publishing. Data will be published in an amended CPS Business Plan when data is available.
Alternative Response
Alternative Response allows caseworkers to approach families in a different way to use solution-focused practice to address a subset of reports of alleged child abuse and neglect that are accepted for investigation. Alternative Response is a strength-based, family centered process that allows for a more flexible, family engaging approach while still focusing on the safety of children. While CPS continues to respond to severe higher-risk reports using a forensic approach (traditional investigation), lower-to-moderate-risk reports are handled through the Alternative Response program. Alternative Response builds connections between state and local social services departments, community agencies, and the families. 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, CPS opens cases in Family Based Safety Services. FBSS caseworkers work with families to address the behavior changes needed to create safety for the child 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.

FBSS 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, which can include court-ordered services or, if necessary, removal. About 5 percent of children are removed from the home in FBSS cases when their safety cannot be assured and the parents fail to make the behavior changes needed to ensure child safety.

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 B: Organizational Charts

DFPS employs over 12,000 full-time equivalent staff at the State Office and in the 12 regions. CPS State Office divisions provide policy direction to and operational oversight of the frontline regional staff managing services for children and families, and working to achieve permanency outcomes for children in DFPS legal custody.

Other DFPS divisions provide support services for CPS, including but not limited to: budget, general counsel, contract management, 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.
FIGURE 2: DFPS ORGANIZATIONAL CHART

Department of Family and Protective Services

DFPS Commissioner

- Deputy Commissioner
- Assistant Deputy Commissioner
- Internal Audit
- Chief of Staff
- Legal Services/General Counsel
- Executive Assistant

- Chief Operating Officer
- Chief Financial Officer
- Associate Commissioner Investigations
- Associate Commissioner Adult Protective Services
- Associate Commissioner Child Protective Services
- Associate Commissioner Statewide Intake
- Associate Commissioner Prevention and Early Intervention
FIGURE 3: CPS ORGANIZATIONAL CHART

Child Protective Services

- Associate Commissioner
- Director of Field Operations
  - Regional Directors
    - Region 1 & 2
    - Region 3 West, Region 3 East
    - Region 4 & 5
    - Region 6A (Barnes)
    - Region 6B (Outlying)
    - Region 7
    - Region 8
    - Region 9 & 10
    - Region 11
- Director of Policy, Family, Youth Services, PAD, & ICPC
  - Division Administrator for Permanency
  - Division Administrator for FAP & ICPC
  - Transitional Living Services Lead
- Director of Conservatorship Services
  - Contract Administration Manager
  - Capacity Building Specialist
- Director of Placement
  - Division Administrator for Placement (2 LAs)
  - CQI Lead
- Deputy Associate Commissioner
- Outreach & Engagement Team
  - State Disproportionality Manager
  - Faith Based Initiative Manager
  - Communications Program Specialist
  - Community Affairs Liaison
- Division Administrator for Federal/State Support
  - Legislative Coordinator & Special Projects
  - Division Administrator for Policy & Practice
  - CPS Special Projects Program Specialist
Figure 4: Chief Operating Officer Organizational Chart