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The Honorable Joe Straus  
Speaker, Texas House of Representatives  
Members of the Texas House of Representatives  
Texas State Capitol, Rm. 2W.13  
Austin, Texas 78701  

Dear Mr. Speaker and Fellow Members:  

The Select Committee on Child Protection of the Eighty-third Legislature hereby submits its interim report including the findings and policy recommendations of the committee for consideration by the Eighty-fourth Legislature. The committee held four public hearings, logging in 30 hours, on the interim charges and gathered a broad requisite of knowledge from leading experts and advocates in policy areas outlined by the interim charges. We hope this report will be a valuable guide and point of reference for the policies developed and considered by the Eighty-fourth Legislature.  

Protecting children from abuse and neglect is one of the essential functions of government and the core mission of Child Protective Services. We thank you for providing this committee the opportunity to serve Texans by studying these important issues related to child protection.  

Respectfully submitted,  

Dawnna Dukes  

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ACKNOWLEDGEMENTS

The House Select Committee on Child Protection would like to extend our gratitude to the members and staff who invested their time and energy into the development of this interim report. The committee also thanks the numerous expert witnesses, state agency representatives, stakeholder organizations and members of the public who provided vital testimony to the committee while working every day to promote the safety and well-being of Texas children. Your input was critical to the creation of this report.
On May 15, 2014, House Speaker Joe Straus appointed nine members to the Select Committee on Child Protection, a legislative committee charged with studying the incidence of child abuse and neglect fatalities in the state. Leadership in the House of Representatives charged the Select Committee with conducting a broad review of practices and procedures that aim to protect the well-being of children under the purview of state agencies, from family-based preventative programs to out-of-home placements. The goal of the Select Committee was to identify statutory opportunities to improve outcomes for children in state care through streamlined practices, accountability, and strengthening a culture of community partnership to safeguard vulnerable children. The appointment of members to the Select Committee on Child Protection followed the creation of the Protect our Kids Commission during the 83rd session of the Texas Legislature that along with the Select Committee will seek ways to address the alarming number of Texas children who die from preventable causes each year. The fifteen-member appointed Commission is comprised of community members with substantial knowledge of child protection efforts in Texas. A report of the findings of the Commission is due to the Legislature by the end of 2015.

The Select Committee held interim hearings on July 1st, July 24th, September 10th, and September 30th. Committee members heard testimony from numerous stakeholders representing governmental agencies, provider organizations, child advocacy organizations, former foster youth, and members of the public. Additionally, staff conducted informational site visits at locations such as Statewide Intake (SWI) and the Office of Consumer Affairs (OCA) as well as the Center for Child Protection to strengthen the recommendations of the Select Committee with a better understanding of the day-to-day practices performed by workers monitoring the care of children.

Pursuant to House Rule 4 Section 61, the Select Committee has submitted this final report with its statutory recommendations in advance of the December 15, 2014 deadline. The recommendations outlined in this report will be of interest to a variety of governmental and non-governmental organizations involved with protecting the interests of the most vulnerable population at-risk children under the scope of state agencies.
INTERIM STUDY CHARGES

1. Monitor the ongoing efforts of the Department of Family and Protective Services (DFPS), the work of the Protect Our Kids Commission and the National Commission to Eliminate Child Abuse and Neglect Fatalities, and any relevant Sunset Commission recommendations.

2. Assess the efficacy of ongoing prevention and early intervention efforts that target resources to families at-risk.

3. Consider ways to encourage consistent, transparent, and timely review of abuse and neglect fatalities.

4. Monitor ongoing efforts to stabilize the CPS workforce, placing specific emphasis on improving the work environment, enhancing the quality of supervision, and addressing the unique challenges facing different regions of the state.

5. Suggest improvements to the screening, assessment, training, and support of potential foster and kinship families.

6. Evaluate the ability of children and youth within the system to report maltreatment.

7. Monitor ongoing efforts to enhance the use of data to improve outcomes.

8. Consider strategies to ensure better coordination and collaboration among local agencies, faith-based organizations, the private sector, non-profits, and law enforcement to reduce the incidence of abuse and neglect fatalities.
EXECUTIVE SUMMARY

To reduce negative, and far too often fatal, outcomes for children, the state must continue to approach the Department of Family and Protective Services (DFPS) as critical in the development of healthy and resilient youth whose success is ultimately tied to future growth of Texas. Prevention and early intervention of abuse and neglect will ensure that children never enter the child welfare system and can thrive for a lifetime. For youth in kinship and foster care, our state must make their safety and well-being and permanency a priority to ensure long-term success. Unfortunately, many youth who age out of foster care face poor outcomes as adults, including poverty, homelessness, criminal justice system involvement, and child protection services interactions as parents. Without the parental financial, emotional, and social supports that often remains in place once a child reaches 18 years of age, many former foster youth are ill-equipped to lead a fully productive life as an adult. Mariam Krinsky, a former prosecutor with the U.S. Department of Justice reported in 2010 that “within the first couple of years after young people emancipate from foster care, commonly at the ill-prepared age of eighteen… 25 percent will be incarcerated.”

The state has a duty and responsibility to maximize their potential which in turn has an economic benefit to the State of Texas. The stakes could not be higher given long-standing reports demonstrating that children with sub-optimal outcomes in care often do not mature into stable adults that maximize their labor force potential, or otherwise become economically self-sufficient. Recent research has found that foster youth who age out of care have a higher rate of public assistance receipt. Furthermore, a recent Chapin Hall brief reported that less than 10 percent of former foster youth graduate from college in comparison to the approximately 30 percent of young adults in the general population with a bachelor’s degree. The Perryman Group estimates that the lifetime impact of the 2014 incidence of child maltreatment will cost Texas 2,134,185 person-years of employment due to lost earnings and other social costs, and that “investment in education and other programs aimed at reducing root causes of child maltreatment and expanded services for its victims can be helpful and are well worth the expenditures involved.” Integrating child protection into a broader discussion around overall child welfare is the first step in recognizing that the short-term safety needs of children in care are inextricably connected to their future development and long-term success as Texans.

The following recommendations put forth by the Select Committee on Child Protection reflect the committee’s attention to eight interim charges identified by the Speaker of the Texas House of Representatives. Committee members and staff held information gathering meetings with stakeholders in all stages of service, from DFPS Commissioner John Specia to faith-based community leaders who work with vulnerable families and children in the community. The committee identified prioritized needs and divided these into areas for growth that based on invited and public testimony provided over the four committee hearings. The areas are:

- prevention and early intervention,
- investigation,
- workforce,
- information sharing,
• assessment and screening of providers, and
• normalcy and child rights.

A detailed description of the recommendations in each area can be found in the Findings & Discussion section of this report. The committee anticipates that recommendations from the Protect Our Kids Commission will provide additional insight on safeguarding Texas children while informing implementation efforts of the recommendations established in this report.
BACKGROUND

By the Numbers
More than 7 million children currently reside in the state of Texas, a figure that has climbed steadily since 2004. Roughly 17,000 of those children were removed from their homes in fiscal year 2013 as a result of confirmed abuse or neglect investigations, or during an open service stage with a DFPS division such as Family Preservation. The removal of a child from the home of their primary caretaker(s) carries serious implications for the family and the state, and is ultimately determined based on the interest of the safety and well-being of the child.

The Child Protective Services (CPS) division of the Department of Family and Protective Services (DFPS) received 229,138 reports of suspected child abuse or neglect in 2013 with a workforce of approximately 1,800 investigative caseworkers according to figures reported in the DFPS Annual Report & 2013 Data Book. At the organizational hearing of the committee on July 1st, DFPS Commissioner Judge John Specia testified that among the approximately 260,000 alleged victims of child abuse and/or neglect, 26 percent of the children were confirmed. As of August 31, 2013, approximately 28,000 children are in the substitute care of DFPS, including foster and kinship homes.

Partners in Child Protection
CPS staff operates on the frontlines to respond to incidents of child maltreatment. The mission of CPS is “to protect children and to act in the children’s best interest. To seek active involvement of the children’s parents and other family members to solve problems that lead to abuse and neglect.” Keeping Texas children safe from maltreatment is a shared responsibility of families, community leaders, businesses, organizational partners, and state and federal public servants. CPS is funded through state and federal revenue streams. Under the Health and Human Services Commission (HHSC), the Department of Family and Protective Services operated with an annual budget of $1.37 billion dollars in fiscal year 2013. Nearly half, ($645.3 million dollars) was provided through the general revenue fund and the remaining $713 million dollars from federal funds.

At the state level, the Department of Family and Protective Services is the central institution whose work systematically aims to prevent maltreatment and restore the safety of children who are found to be living in harmful situations.
A skilled group of providers facilitate DFPS programs by delivering local services governed in part by standards established in the Texas Family Code as well as the DFPS Child Care Licensing and the CPS Handbooks. The figure above (Figure 1) depicts the avenues of support a child under the supervision and/or care of DFPS may receive. DFPS operates in various capacities to provide protective services based on the needs of a child. The divisions within DFPS include Child Protective Services (CPS), Prevention and Early Intervention (PEI), Statewide Intake (SWI), and Residential Child Care Licensing (RCCL). Residential Child Care Licensing is responsible for overseeing Child Placing Agencies across the state and the foster homes, residential treatment facilities and group homes where children in foster care are placed. Child Placing Agencies also partner with DFPS to find permanent homes for children through adoption or permanent placement with relatives. The child protection system also involves critical partners such as the legal system, court appointed advocates and other community partners including not-for-profit and faith based organizations, businesses, volunteers and advocates.
The Hard Facts on Child Fatalities

When gaps in child protection occur, the consequences can be fatal for children. More than 800 fatalities resulting in the accidental or preventable death of a child were reported in Texas during the last fiscal year. An estimated 156 of those 800 child fatalities were found to be the result of child abuse or neglect as recognized in the 2014-2015 Sunset Advisory Commission staff report on DFPS. Moreover, nearly half of those children had prior history with CPS and one-third were connected to an open CPS investigation at the time of the death of a child. While accidents may occur, it is the duty of DFPS to educate the public about child safety risks, better identify vulnerable families at-risk of child abuse, close gaps in the child protection system, and enhance protective factors that will ensure children are safe from abuse and neglect. Strategies to reduce child fatalities begin with preventative efforts and span all DFPS programs, including the foster care system of the state. Children removed from their own home and placed in foster care should be safe from further maltreatment.

Trends in Child Protection

During the course of the hearings of the committee, members were provided with a broad overview of the circumstances related to why children receive DFPS services for cases involving child abuse and/or neglect. The most common form of child maltreatment was neglectful supervision (66.5 percent) followed by physical abuse (15 percent). DFPS defines neglectful supervision as “placing a child in a situation that requires judgment or actions beyond what the child is physically or mentally capable of doing and that results in bodily injury or a substantial risk of immediate harm to a child.” Growing evidence points to caregiver substance abuse as a considerable contributing factor in reported cases of child maltreatment. Texas leads the nation in the proportion of children removed from the home (more than 50 percent) due to factors associated with parental abuse of alcohol or drugs according to testimony provided by representatives of the Department of State Health Services. Geographically, the rate of confirmed child abuse and neglect was highest in the Lubbock, Abilene, Midland, Tyler, and Edinburg regions with a diminishing differential between regions according to Annual Report & 2013 Data Book of DFPS.

According to national research approximately 30 to 60 percent of the families where either domestic violence or child abuse is identified, it is likely that both forms of abuse exist. Studies show that for victims who experience severe forms of domestic violence, their children are also in peril of suffering serious physical harm. They confirm that perpetrators of domestic violence who were abused as children are more likely to physically harm their children. A national survey shows fifty percent of men who frequently assault their spouses also abused their children. Children who live with domestic violence may face many dangers, including exposure to traumatic events, neglect, physical abuse, and loss of parent(s).

56.6 percent of perpetrators are female and predominately fall between the ages of 18 and 35 years with varied marital statuses. Approximately four out of five perpetrators in confirmed investigations are a parent to the child. While mothers represent slightly more than half of all perpetrators and fathers account for 28 percent, a troubling 6.2 percent of male perpetrators are a paramour of the parent. These paramours raise concerns for DFPS prevention and supervision strategies as their presence in the household may fluctuate and go without attracting notice from caseworkers.
One quarter of all child abuse and neglect investigations were confirmed in the most recent fiscal year\textsuperscript{13}. Confirmed victims of child abuse were equally male and female, and the prevailing racial/ethnic groups were Hispanic, Anglo, and African American – reflecting the current population of Texas children, with the exception of African American children who were found to be confirmed victims at a disproportionate rate than the overall state population. Children who are age three years and under comprise 80 percent of child fatalities from abuse or neglect, according to testimony from DFPS Commissioner John Specia during the September 30th hearing. The limited verbal abilities of these children combined with challenges of caring for small children can create situations where unsafe sleeping arrangements, medical negligence, and a lack of supervision lead to the approximately 60 percent of child neglect fatalities reported by the commissioner.

This sample of data points is provided to call attention to dominant attributes of perpetrators and victims in child maltreatment cases across the state. In no way do these findings reflect the myriad of circumstances that abused and neglected children present within DFPS investigations. The committee recommends that interested parties review the most recent DFPS Annual Report & Data Book to obtain additional background information.
RECOMMENDATIONS

Prevention and Early Intervention

1. DFPS should explore the use of evaluative indicators associated with clients served through Prevention & Early Intervention programs who are found to have subsequent confirmed cases with Child Protective Services to support efforts to provide the most intensive services targeted to the highest risk clients.

2. DFPS should include strategies in their annual updates to the Senate Committee on Finance, Senate Committee on Health and Human Services, House Committee on Appropriations and the House Committee on Human Services to expand the HIP and HOPES preventative projects to additional areas and populations identified as high risk.

3. The Department of State Health Services (DSHS) should identify opportunities to improve the report by Child Fatality Review Teams while monitoring the impact of services gaps in areas without teams.

4. DFPS and DSHS should collaborate to identify additional funding opportunities to address individual and community-level factors that contribute to parental substance abuse and domestic violence.

Investigation

1. DFPS should improve tracking Child Protective Services investigations in IMPACT by using a broader family model that seamlessly links other cases to the current household composition including sibling groups, paramours, and relatives. The Department should consider extending the retention rate of records to improve child safety.

2. DFPS should track the incidence of subsequent investigations and use of agency services for children involved in ‘unable-to-determine’ Child Protective Services cases.

3. DFPS should strengthen location efforts for children labeled as missing who are alleged victims with an open CPS investigation and those who are under the direct supervision of DFPS, including children in foster care and Family Based Safety Services (FBSS). The Department should also expand the Children's Advocacy Centers of Texas pilot program with Statewide Intake and law enforcement in order to safeguard cases from being overlooked in the system.

Workforce

1. DFPS should extend caseworker retention strategies to include timely annual reviews and merit-based advancement opportunities.
2. DFPS should pilot a differential salary for Child Protective Services caseworkers based on the local job market, the extent to which caseworker salaries meet the cost-of-living expenses, and other factors related to location.

3. DFPS should expand caseworker co-location with Child Advocacy Centers that has been shown to support caseworker retention.

4. DFPS should implement recommendations made by various stakeholders to restructure tasks of caseworkers in a manner that maintains child safety, maximizes time spent with the child, acknowledges workload over caseload, and better reflects the ability to successfully manage workload.

5. DFPS should track higher education indicators that assist in evaluating worker retention by the type of degree held and participation in the Title IV-E University Degree and Stipend Program. The committee supports additional opportunities for caseworkers to receive student loan repayment assistance.

**Information Sharing**

1. The committee supports ongoing efforts of DFPS to modernize the IMPACT database that will advance transparency for stakeholders involved in the care of foster children while reducing discrepancies that lead to duplicative or erroneous record keeping.

2. DFPS should consider extending read-only access to IMPACT for Child Placing Agency caseworkers and coordinators in fiscal years 2016 and 2017.

3. DFPS should bridge components of IMPACT and CLASS databases to improve the investigative abilities of Residential Child Care Licensing and Child Protective Services to respond in a timely manner to complaints of abuse and/or neglect made by children in care.

4. The committee supports the DFPS initiative to simplify the policies and procedures manual that can be easily employed by caseworkers.

5. DFPS should strengthen efforts associated with the Texas Faith Based Model by evaluating the cost-effectiveness of the Care Portal in meeting the local needs of children and families through direct services provided by the faith community.

6. DFPS should implement recommendations made by the Internal Audit Division to phase-in implementation of a revised risk assessment tool that utilizes empirically-driven predictive analytics to monitor contracts across DFPS offices and Child Placing Agencies.
Assessment and Screening of Providers

1. The RCCL division of DFPS should conduct a study of the types of curriculum used for and the number of hours of pre-service training provided to foster parents for all Child Placing Agencies.

2. DFPS should review providers who deliver online training to potentially increase the availability of training opportunities for current and prospective foster parents. DFPS should also expand its efforts to target and recruit all types of foster care providers.

3. DFPS should consider including an annual home study update for all approved foster homes in its Minimum Standards for Child Placing Agencies.

4. DFPS should educate all qualifying kinship care providers about the licensing requirements associated with pursuing verification as a kinship care provider compared to a foster parent provider.

5. The committee supports the inclusion of a mandatory self-care module for prospective foster parents in pre-service and annual training that addresses the potential effects of caregiving on the family and recommendations to maintain household stability including respite care and stress relief techniques. The Department should also evaluate the impact of reimbursement for part-time day care to certain foster and kinship providers.

Normalcy and Child Rights

1. DFPS should ensure adequate staff in order to use Family Team Meetings more frequently to engage the family in making critical decisions regarding the placement of a child. The Department should also expand permanency roundtables and make them available earlier in the process to support better collaboration among foster families, biological families and providers, and to improve coordination of service plans.

2. DFPS should amend the Preparation for Adult Living Program guidelines to extend mandatory college preparation services to youth beginning at age 14.

3. DFPS should strengthen its support system for youth in the foster care system and the inclusion of youth in its decision-making processes related to normalcy.

4. DFPS should define the “prudent parent standard” to promote the decision-making ability of caseworkers and foster parents. It should also assess cultural competency training of caseworkers and other direct care providers.

5. DFPS should consider procedural and content revisions related to the Foster Care Bill of Rights. It should promote different methods of explaining the rights to the foster child, including technology solutions for ongoing communication.
6. The committee recommends DFPS establish policies to ensure the autonomy of the Office of Consumer Affairs (OCA) and to make the office more available to youth and children in foster care. The agency should have a dedicated staff person within OCA based in Houston to make regular visits with youth residing in Residential Treatment Centers.

7. DFPS should improve caseworker accountability by amending the Services to Children in Substitute Care section of the CPS handbook to include reporting monthly face-to-face visits with children in foster care.
DISCUSSION & FINDINGS

Prevention and Early Intervention

Discussion

Prevention and early intervention was a topic of recurring discussion during each of the four hearings of the committee and was specifically discussed during the initial hearing. On July 1, 2014 leadership of the Department of Family and Protective Services provided a high-level overview of the work of Child Protective Services and affirmed prevention and early intervention as the first stage of service. Preventative operations fall under the Prevention and Early Intervention (PEI) Division that works to strengthen families by contracting with community-based organizations to provide services to birth parents and their children. These services fall within the five-factor approach to protection of DFPS:

1) nurturing and attachment,
2) child development education,
3) promoting resilience,
4) social support, and
5) reliable access to supportive resources.

The various PEI programs together serve more than 45,000 youth and families annually according to testimony submitted by the Department of Family and Protective Services. These preventative services, however, are not universally available throughout all counties in part due to a shortage of service providers and/or funding. At the current funding levels, PEI programs can only serve a fraction of the families that could benefit the most from supportive services. PEI programs are currently functioning on a budget of $43,048,471, a 30 percent funding increase in comparison to fiscal year 2013 yet short of the 2010 operating budget of the Division. As of September 1, 2014, the PEI Division reports directly to the DFPS Commissioner in response to recent recommendations made by the Sunset Advisory Commission.

The following findings and recommendations represent the most salient themes related to prevention and early intervention that emerged from the hearings of the committee. Each of the items discussed below represent opportunities to reduce the incidence of child abuse and neglect while potentially reducing the direct costs of foster care and other systems where abused children are disproportionately represented.

Findings

DFPS should explore the use of evaluative indicators associated with clients served through Prevention & Early Intervention programs who are found to have subsequent confirmed cases with Child Protective Services to support efforts to provide the most intensive services targeted to the highest risk clients.

PEI requires every contracted provider to meet two types of performance measures: outputs and outcomes. Outputs are concerned with reaching certain quantitative goals, e.g., total number of
unduplicated clients served. Outcomes are used to assess whether participation in a PEI-funded program results in changes for the clients. One outcome measure employed by PEI assesses the ability of the provider to keep children safe by not having any substantiated cases of child abuse or neglect among clients served during or after reception of services through the contract year.

PEI is currently evaluating existing performance measures to assess whether revisions are necessary or additional measures should be employed. PEI has hired the University of Texas at Austin to examine its historic data and explore national models of outcome evaluations for prevention work. DFPS is requesting additional funding to build a modern database which could greatly expand the potential for reporting and evaluation.

The committee heard testimony on September 10, 2014 from DFPS Commissioner Judge John Specia related to the interim charge, monitoring ongoing efforts to enhance the use of data to improve outcomes. Commissioner Specia highlighted the decision to consolidate data analysis and program evaluation under the auspices of the recently implemented Strategic Decision Support Division within CPS. This division will strengthen the functionality of the program data of DFPS by using predictive analytics and data mining in part to identify emerging problems within DFPS. Testimony provided before the committee pertained to the goals of the division for improving CPS investigations and contracted care outcomes.

The committee urges DFPS to expand the evaluative authority of this division to include PEI programs which operate on the front lines of CPS services, and serve in an opportune position for averting additional DFPS costs associated with bringing children into state care. Data from PEI could also assist in identifying the characteristics most often associated with birth parents that subsequently return to the attention of CPS through investigations and/or child removals. This information could help support DFPS efforts to provide the most intensive services targeted to the highest risk clients in PEI programs.

DFPS should include strategies in their annual updates to the Senate Committee on Finance, Senate Committee on Health and Human Services, House Committee on Appropriations and the House Committee on Human Services to expand the HIP and HOPES preventative projects to additional areas and populations identified as high risk.

The Health and Human Services Commission (HHSC) operates the Nurse Family Partnership program and the Texas Home Visiting program. SB 426 83R amended chapter 531 of the Government Code regarding criteria of HHSC home visiting programs as referenced during the September 30th testimony of Sarah Abrahams of the Health and Human Services Commission.

DFPS provides home visiting services offered through a variety of prevention programs. Funding for additional home visiting programs at DFPS was appropriated last session. Between hearings, this committee was provided with details regarding two newly implemented preventative projects utilizing a home visiting approach, Healthy Outcomes through Prevention and Early Support (HOPES) and Help through Intervention and Prevention (HIP). Both projects aim to serve families with children at greatest risk of abuse and/or neglect through community-based programs founded on evidence-based practices.
Project HIP is a voluntary program targeted to new parents with a history of preventable child death related to abuse or neglect and parents whose parental rights have been previously terminated by the state. The project also supports services for females in foster care who are pregnant or recently gave birth within the last twelve months.

The committee recommends that DFPS extend HIP services to foster youth who have given birth within the last five years. Foster youth are particularly vulnerable to becoming teenage parents due to their trauma history, instability, and inconsistent therapeutic services and supports. Prioritization of prevention and early intervention services for this vulnerable population will ensure young parents in foster care have the skills and supports to provide a safe and permanent home environment for their children. This recommendation is also based on testimony provided on September 30th by Commissioner Susan Dreyfus of the National Commission to Eliminate Child Abuse and Neglect Fatalities, DFPS Commissioner John Specia, and advocates. Commissioner Specia reported that children age three and under represent eighty percent of all child fatalities from abuse or neglect. All of the expert witnesses testified to the increased incidence of child fatalities from abuse or neglect in the period between birth and age five of the child when verbal abilities are limited and parents are adjusting to the newness of being a full-time caregiver. These stress-factors may leave young mothers in foster care vulnerable to becoming perpetrators of maltreatment. Therefore, they should be supported in making safe and healthy parenting decisions. The Information Technology system used by Project HIP for identifying eligible populations and generating referrals would require further automation to save time and improve efficiencies in order to serve a larger population.

Project HOPES specifically targets at-risk families with children from birth to age five and provides community-based services including home-visiting programs. Services are currently limited to eight targeted counties of Potter, Webb, Gregg, Ector, Cameron, Hidalgo, Travis, and El Paso. Written testimony referenced the benefits of home-visiting programs that are validated and tested using randomized control trials. Findings from the trials included double digit percentage reductions in the incidence of child abuse and/or neglect incidences and fatalities between the control and experimental groups. DFPS is requesting funding from the Legislature for the expansion of the HOPES program beyond the eight counties it currently serves. The committee recommends that evaluations from the HOPES and HIP programs include cost savings estimates for families that avert future DFPS intervention. Cost savings as a result of successful prevention and early intervention could be re-allocated to further extend HOPES and HIP services to additional counties ranked at greatest risk for familial behaviors that lead to child abuse and/or neglect.

The Department of State Health Services (DSHS) should identify opportunities to improve the report by Child Fatality Review Teams while monitoring the impact of services gaps in areas without teams.

Dr. David Lakey, Commissioner of DSHS provided testimony at July 1st and September 30th hearings regarding Child Fatality Review Teams (CFRT) at the state and local levels. The role of a CFRT is to conduct retrospective reviews of child deaths based on representational geographic areas. Findings from these reviews are additionally helpful as the information is in turn reported
to DFPS to inform preventative practices that incorporate evolving safety risks faced by children across the state. At the Committee hearing on September 30th, Commissioner Specia provided data found in Appendix B. The data shows in 2013 there were 804 reported child fatalities statewide. Nearly twenty percent of the reported child fatalities were confirmed as child abuse and/or neglect related. Almost half of the cases confirmed as child abuse and/or neglect related fatalities included children with prior CPS history.

DFPS revealed that statewide child fatalities have declined steadily since fiscal year 2008; however, the rate of decline is slower for deaths confirmed to be related to abuse or neglect. Ensuring that child fatalities are captured and measured accurately is integral in targeting prevention and early intervention efforts appropriately and assessing the effectiveness of the CPS system as a whole. Testimony from advocates on September 30th noted that fatality data currently reported does not encompass child fatalities where abuse and neglect did occur, but did not conclusively result in the death of the child. Including these fatalities as a reported measurement, along with a larger breakdown of all child fatality investigations by their dispositions, can further offer more insight into fatality prevention efforts.

CFRTs serve a critical role in the efforts of the Department to combat preventable child injuries and deaths. Commissioner Specia provided a preliminary figure of 149 deaths for fiscal year 2014 which demonstrates the ongoing need to strengthen practices that support the safety of children. A recent DFPS internal audit noted opportunities to improve agency response to fatalities through streamlined procedures and trend identification. The committee supports these ongoing efforts and recommends that DFPS collaborate with DSHS to identify practices that reduce the one year or more delay in local CFRTs receiving the information necessary to review child fatality cases for potential abuse or neglect classification. A reduction in amount of time for reviews to be conducted would support the informed decision-making ability of community-based practitioners providing preventative services. DFPS and DSHS should also evaluate how the 48 counties without a local CFRT impact overall reviews and services provided in those local communities. Findings from these reviews are additionally helpful as the information is in turn reported to DFPS to inform preventative practices that incorporate evolving safety risks faced by children across the state.

DFPS and DSHS should collaborate to identify additional funding opportunities to address individual and community-level factors that contribute to parental substance abuse and domestic violence.

According to testimony provided by DSHS Commissioner Lakey, addressing substance abuse by birth parents is critical to reducing the number of children that enter state care due to confirmed cases of abuse or neglect. As previously mentioned, written testimony submitted to the committee included national figures from the National Data Archive on Child Abuse and Neglect that ranked Texas second in child removals due to parental substance abuse. A DSHS memo provided to the committee following the September 30th hearing reported the top substances abused by DFPS clients (admitted to DSHS-funded substance abuse services) were marijuana, methamphetamines, alcohol, and cocaine. Additionally, roughly 63 percent of these DFPS clients reported heavy usage of a secondary substance with a third also noting usage of a tertiary
substance. In addition, DSHS reported a significant increase in the number of children exposed to harmful substances in utero with the highest rates in Bexar, Harris, and Dallas counties.

The DSHS Substance Abuse Prevention and Treatment programs for DFPS clients with substance abuse disorders (SUDs) were appropriated $10.14 million during the 83rd legislative session. These funds were appropriated by the 83rd Legislature to be used for the timely screening, assessment, and treatment of DFPS clients in need of timely intervention due to their status as parental caregivers. DFPS caseworkers have been trained on the DSHS referral process and treatment services for families with SUDs, resulting in a reported eighteen percent increase in the number of DFPS clients referred to the DSHS services. DSHS substance use prevention and treatment services support the Pregnant Postpartum Intervention (PPI) and Parenting Awareness and Drug Risk Education (PADRE) programs that provide targeted support to parents with young children under the age of six. These programs provide a range of evidence-based SUD services such as motivational interviewing and parental education.

The DSHS services noted above are funded primarily through general revenue and the federal Substance Abuse Block Grant. The funding supports several thousand clients annually but covers only a portion of the identified statewide need of the Department. Initially, the committee recommends that DFPS and DSHS identify additional opportunities to partner with academic institutions that can make use of federal and private funding to support research and pilot programs in underserved regions in the state. Currently PADRE and PPI operate in limited capacity across the state with the exception of multiple PPI programs located in Region 6 and most of 6a. The committee supports a research-driven approach as well as the request of DSHS to fund additional Neonatal Abstinence Syndrome (NAS) services that without intervention will significantly increase costs associated with hospital care for mothers and their babies.

Pregnant women are at nearly twice the risk of experiencing domestic violence. For an unborn child, many harmful fetal outcomes—including miscarriage, still-born birth, preterm labor and delivery, direct fetal injury, fetal hemorrhage, and placental abruption—are directly attributable to the physical trauma that stems from domestic violence perpetrated against the mother. DFPS has begun planning partnerships with DSHS in prevention and intervention around domestic violence, particularly with pregnant and new mothers. PEI is also a member of the HB 2620 Task Force on Domestic Violence to address best practice for accessing this same population through their pre- and post-natal health care visits.

Under a pilot program aimed at assisting families who are experiencing domestic violence, CPS workers are trained and educated on how to most effectively communicate with parents who are victims of domestic violence and their perpetrators. They also learn how to best offer assistance to these families. The pilot has proven to be successful with caseworkers being able to intervene early and effectively assess the family and the strengths of the survivor who can ultimately protect the children. The committee recommends expanding the program to other regions of the state. It also recommends DFPS and DSHS increase their efforts to identify pregnant women and families who are at risk of domestic abuse and make available effective prevention and early intervention services.
Investigation
Discussion

The DFPS units responsible for investigative functions include CPS Investigations, Statewide Intake, and Residential Child Care Licensing. An overview of DFPS operations related to investigations was provided during the July 1st hearing and can be reviewed in Appendix A.

The committee supports recent legislative action and internal DFPS enhancements to improve investigative operations while acknowledging several additional opportunities for advancement. Recommendations provided in this section represent ongoing concerns raised by stakeholders during committee testimony that relate to data reporting and investigative partnerships.

Findings

DFPS should improve tracking Child Protective Services investigations in IMPACT by using a broader family model that seamlessly links other cases to the current household composition including sibling groups, paramours, and relatives. The Department should consider extending the retention rate of records to improve child safety.

Committee staff participated in several follow-up conversations and site visits with agency staff and DFPS was able to provide in-depth responses to questions related to investigative tracking and reporting of cases of abuse and neglect. IMPACT Modernization should include improving the functionality of searching CPS history on a family to automatically link principal and collateral individuals involved in the case for caseworkers. It came to the attention of the committee that cases of suspected abuse or neglect are typically tracked by the perpetrator and principal child only. This finding raised concerns given the increasing presence of blended families in American society. A 2009 brief by the U.S. Census Bureau highlighted far-reaching changes in the living arrangements of children as more and more reside with one parent, grandparents, step parents and siblings, or non-relative caregivers. Implementing a broader family model to case identification would provide a better depiction of the child's life, allow caseworkers to discover similarities that may have otherwise been overlooked related to past or future cases involving the collateral(s) and children within the same family or other families, and assist caseworkers in linking confirmed cases of abuse and/or neglect to co-habituating adults and children. This sensitive information would be available as needed to caseworkers conducting any future investigations in a home. The committee recommends that DFPS explore the feasibility of implementing this model with respect to workload, privacy, the potential to better identify likely offenders, provide a more accurate picture, and better protect children at-risk for victimization.

According to the agency Records Retention Schedule and CPS Policy, when the overall disposition of a closed-after-investigation case is Reason to Believe, Unable to Determine, or Unable to Complete, the case retention period that applies is whichever of the following lasts longer: until the 18th birthday of the youngest child involved in the investigation or until five years after the case is closed. Members of the committee have serious concerns the current
retention schedule is not adequate in keeping children safe, especially since disposition of cases are not always accurate for many reasons and the records could prove vital in future cases involving paramours and other families. The committee recommends the agency consider extending the current retention rate of records related to principal and collateral individuals to ensure vital information is available to caseworkers in order to protect children and preserve families.

**DFPS should track the incidence of subsequent investigations and use of agency services for children involved in ‘unable-to-determine’ Child Protective Services cases.**

In fiscal year 2013, DFPS classified approximately 16,000 investigative cases as “unable-to-determine.” This finding highlights the complex nature of investigative work and the level of information required to make definitive determinations related to the safety and well-being of children. The report of the Sunset Advisory Commission on DFPS also identified that “caseworkers in practice sometimes assign findings of unable to determine when the evidence is sufficient to indicate the abuse or neglect occurred, but the identity of the perpetrator is unclear.” It is evident that DFPS needs to improve upon the appropriate use and consistency of the unable-to-determine disposition.

The committee acknowledges unable-to-determine findings are part of the investigative process that would be difficult to eradicate; however, it is concerned about the safety risks associated with this determination. The committee is unaware of the expectations of DFPS regarding what constitutes an appropriate number of cases that reach the unable-to-determine disposition each year. It is the recommendation of the committee that DFPS use existing data and analysis to predict an appropriate ceiling for unable-to-determine case disposition. In addition, the Department should provide data to the Legislature regarding the number of children confirmed as victims of maltreatment who also were identified in previous unable-to-determine cases.

**DFPS should strengthen location efforts for children labeled as missing who are alleged victims with an open CPS investigation and those who are under the direct supervision of DFPS, including children in foster care and Family Based Safety Services (FBSS). The Department should also expand the Children’s Advocacy Centers of Texas pilot program with Statewide Intake and law enforcement in order to safeguard cases from being overlooked in the system.**

On September 30th the committee heard testimony from Susan Dreyfus with the National Commission to Eliminate Child Abuse and Neglect Fatalities, child protection stakeholders, and family members of Colton Turner all of whom recommended that DFPS implement better practices to locate missing children under the responsibility of DFPS, including children in foster care, FBSS, and alleged maltreatment victims during an investigation. Susan Dreyfus testified about the need for better partnerships between organizations and state agencies that cross the lives of vulnerable children. Dreyfus encouraged DFPS to secure a memorandum of understanding with the National Center for Missing and Exploited Children (NCMEC) to strengthen the ability of DFPS to act quickly in locating missing children. In September 2014,
DFPS became the third state to enter into a formal agreement with NCMEC to assist caseworkers in finding missing children.

Emotionally poignant testimony offered by relatives of Colton Turner, a young boy who died in Travis County during a period in which CPS investigative caseworkers were unsuccessful in determining his whereabouts, demonstrates the possible consequences for missing children. Although DFPS pursued corrective action against staff involved in the case of Colton Turner, it underscores the need to pursue these cases early and with urgency. The committee recommends that DFPS strengthen partnerships with local law enforcement agencies and the regional and national Center for Missing and Exploited Children with regard to information sharing and response expectations.

The Child Safety Alert File was created to help DFPS locate a family for purposes of investigating a report of child abuse or neglect. If DFPS is unable to locate a family for purposes of investigating a report of child abuse or neglect, it may seek assistance from the appropriate county attorney, district attorney, or criminal district attorney with responsibility for representing DFPS. If it becomes necessary for DFPS to request assistance, the county attorney, district attorney, or criminal district attorney, as applicable, may file an application with the court requesting the issuance of an ex parte order requiring the local police Department or sheriff’s office to place the alleged offender and victim into the Texas Crime Information Center’s Child Safety Check Alert List. Since children in the DFPS system who are slated for additional services, but are deemed missing do not receive adequate attention it would be prudent for the Legislature to amend the statute to apply the Child Safety Check Alert list to include all stages of service.

DFPS should also expand throughout the state the Children's Advocacy Centers of Texas pilot project with the Statewide Intake division. The pilot has been successful in enhancing communication and collaboration between DFPS, law enforcement and other stakeholders in order to safeguard cases from being overlooked in the system. The pilot has not only increased forensic interviews of abused children by sixty-two percent, but it has been effective in correctly identifying cases as sexual abuse that were initially received as neglectful supervision.
A skilled workforce is the greatest asset of DFPS in its ongoing efforts to protect Texas children from abuse and/or neglect. The strength and effectiveness of a workforce is embodied in measurable competency, organizational knowledge, and aptitude of the staff that enables them to fulfill the challenging responsibilities associated with daily functions of the agency. More than $400 million dollars, thirty seven percent of the total DFPS budget, is invested annually in CPS employees to provide direct service, yet the return on this investment is lost with high rates of caseworker turnover and low morale. The impact extends beyond taxpayer dollars and DFPS operations to directly threaten the level of service received by the vulnerable children and families the agency serves. Testimony submitted to the committee included a 2005 study that showed the likelihood of permanency for a child is drastically reduced as the number of caseworkers assigned to the care of the child increases. Workforce retention and the creation of a resilient organizational culture are challenges at all staff levels within many child welfare agencies across the nation. Today, the difference in Texas is the recent review by the Legislature and redesign of DFPS services which affords a window of opportunity to implement short- and long-term policies and changes in culture that produce returns in the form of improved child safety and a stabilized workforce.

It is the position of the committee that instability among the DFPS workforce, especially within the ranks of CPS, creates a domino effect within the agency that impacts all levels of service. Caseworker turnover becomes the tipping point which in turn contributes to the reported ‘crisis culture’ complete with high stress and job frustration (Figure 2). The committee supports current efforts of DFPS to develop and stabilize the CPS workforce as identified in the CPS Transformation report released on October 17, 2014. This document outlines agency steps to implement workforce recommendations found in recent DFPS reviews by the Sunset Advisory Commission and The Stephen Group. Additionally, this committee heard invited and public testimony on September 10, 2014 from a range of DFPS staff and community stakeholders with valuable input on supplementary opportunities to strengthen the DFPS workforce. The testimony included recommendations for caseworker mentorship and supervisor support, increase in salary, and locality-based pay. Testimony also called for performance metrics that evaluate the quality of case management, a reduction in duplicate documentation, and improved method for assignment of cases.
Findings

DFPS should extend caseworker retention strategies to include timely annual reviews and merit-based advancement opportunities.

A key area to support staff retention and moral is to reinforce career building opportunities within DFPS. During expert testimony heard on September 10th, Jennifer Wiederhold with the State Auditor's Office (SAO) presented recent findings showing that more than 40 percent of CPS staff had not received an annual performance evaluation although this is required by DFPS to determine any merit awards. The CPS Transformation report noted the need for ongoing implementation of a “360-degree performance feedback” for program directors and administrators. The committee encourages DFPS to include the completion of staff evaluations and appropriate referrals for merit award as a major criterion in the evaluation of management.

DFPS should pilot a differential salary for Child Protective Services caseworkers based on the local job market, the extent to which caseworker salaries meet the cost-of-living expenses, and other factors related to location.

The August 2014 report of the Sunset Advisory Commission on DFPS services referenced “agency estimates that each caseworker who leaves has a total cost impact of $54,000 to the agency. In fiscal year 2013, CPS lost 1,346 caseworkers, resulting in an overall $72.7 million impact to the agency.” More specifically, caseworker exit interview data obtained by the committee showed that salary was a significant contributing factor leading to caseworkers leaving the job within the first three years. In FY2013, locality pay was introduced in select counties in the Permian Basin as a result of the high cost of living associated with the oil industry. The initial amount of the additional pay was $500 per month. The amount was increased to $1000 in FY2015 after yielding positive results. Since implementation, CPS turnover in the four counties has decreased from 42.7% in FY2013 to 24.6% in the last quarter of FY2014.

Piloting differential pay based on locality is an opportunity for DFPS to reduce the costs associated with frequent hiring, recruitment, and training. Differential pay could not only vary based on the job market of the locality but based on differences in workload in the area as well. A May 2013 audit report on CPS staffing found regional workload differences with respect to the number of investigations and removals which play a role in caseworker turnover.

DFPS should expand caseworker co-location with Child Advocacy Centers that has been shown to support caseworker retention.

During the first hearing on July 1st the committee heard testimony from Joy Rauls with Children’s Advocacy Center of Texas detailing the roles of member organizations. Child Advocacy Centers (CACs) are independent non-profit organizations that provide streamlined investigative services for children in cases of suspected abuse. CACs are funded with public and private dollars and currently operate in 183 counties and serve 40,000 children annually. On August 26, 2014, committee staff visited the Center for Child Protection, the CAC serving Travis County, for a briefing on numerous benefits for children and staff in using a joint
multidisciplinary approach to investigations. Section 261.3126 of the Texas Family Code encourages co-location of DFPS investigative caseworkers at CAC locations when appropriate. To date, less than 400 CPS caseworkers are co-located at CACs across the state. Reported turnover for caseworkers who share an office with CAC staff is better than caseworkers who are not co-located with CACs. The successful relationship between DFPS and Child Advocacy Centers can serve as one of the building blocks for reducing turnover by providing support for staff and enabling more efficient investigations and casework.

**DFPS should implement recommendations made by various stakeholders to restructure tasks of caseworkers in a manner that maintains child safety, maximizes time spent with the child, acknowledges workload over caseload, and better reflects the ability to successfully manage workload.**

The committee heard a significant share of testimony from child protection stakeholders urging DFPS to acknowledge caseworker job responsibilities from a workload perspective. Staff caseloads are counted according to the number of families a caseworker is assigned to assist. In addition to ensuring caseworkers are not responsible for too many children and families at one time, workloads should be based on specific tasks associated with each family and child as well as the size of sibling groups served by a CPS caseworker. Doing so can positively and significantly impact worker retention and improve outcomes for children. Administrative tasks vary not only by case but the respective status of each case. Inefficiencies have also been identified in burdensome, and often duplicative, paperwork required of each caseworker. The Stephens Group assessment found that caseworkers only spend on average 26 percent of the workday with families. DFPS began to address many of the Stephens Group recommendations and others detailed in the Sunset Advisory Commission review by implementing a range of new initiatives under CPS Transformation. Priorities A and C described in the CPS Transformation report to the Sunset Advisory Commission detail the current status of many agency-wide improvements DFPS is undergoing which the committee applauds. The committee also agrees with stakeholders favoring a workload viewpoint that better encompasses daily job responsibilities and encourages DFPS to include this perspective in future efforts and reports related to workforce improvements. The committee strongly urges the Department to develop an improved system for the assignment of cases by supervisors that reflects the ability of caseworkers to successfully manage workload. The committee also would like to see a better method for requesting and deploying master caseworkers and investigators in a region when needed prior to crisis situations placing children in danger.

Caseworkers expressed to the committee the strain they experience when taking vacation or other leave due to visits with children and families not being made while they are away. They dreaded returning to piles of work and they believed that no one would be able to step in and do their job while they are gone. Forfeiting their vacation time comes at the expense of their overall health, well-being and job performance. The costs of burnout and overwork of caseworkers are great to the state, especially in terms of turnover and productivity. The department should examine making available master caseworkers or other workers to conduct child and family visits while caseworkers are on vacation.
Additionally, DFPS should take into consideration the impact that administrative staff have on the workload issue. Support from case aides and administrative techs can play a vital part in reducing workload. The numbers of aides and techs was drastically reduced after the 81st Legislative Session. Staff were essentially required to provide the same level of service with only two thirds going into fiscal year 2011. It is recommended that DFPS review the appropriate staffing of these positions to ensure continuity of services and appropriate workload balance.

**DFPS should track higher education indicators that assist in evaluating worker retention by the type of degree held and participation in the Title IV-E University Degree and Stipend Program. The committee supports additional opportunities for caseworkers to receive student loan repayment assistance.**

The CPS Transformation report affirms one of the goals of DFPS is “to raise caseworkers’ professional standing.” To do so, the agency began intensifying their recruitment and hiring practices on college campuses around the state during the fall of 2014. The committee fully supports these efforts and acknowledges the ongoing need to collaborate with institutions of higher education to support the development of a skilled workforce. To better prepare for and evaluate this outreach goal, the committee recommends that DFPS amend their evaluative measures to include the type of degree held by staff along with their length of service. In addition, the Department should strengthen their tracking of success rates for staff that join the agency through the Title IV-E University Degree and Stipend Program. Staff in this program receive financial benefits while pursuing their undergraduate or graduate degree in exchange for a minimum length of service with DFPS following graduation. Nationally, Title IV-E training programs have been shown to promote a more skilled and stable child welfare workforce. Since July of 2009, the committee has learned that the agency has retained two thirds of employees that join the agency through the Title IV-E program. There is no known evidence as to whether employees who leave the agency have met the minimum service requirement or which attributes best predict success in the program such as university-specific training or staff specialization within DFPS. These measures would support the efforts of the agency to provide a well-rounded picture of best practices in recruitment.

The Title IV-E University Degree and Stipend Program in Texas is very limited. Not only do few universities contract with DFPS to participate in the program, but the stipend is only available to a student who has obtained or will acquire a degree in social work and who is employed by or commits to work for the Department in a narrowly defined eligible position. The committee supports additional opportunities for student loan repayment assistance for certain classes of employees at DFPS similar to that of the Teach for Texas Loan Repayment Assistance Program (Sections 56.352 - 56.355 and 56.3575-56.358, Education Code).
Information Sharing

Discussion

The committee views information sharing as the timely and accurate exchange of data used to inform DFPS decisions related to the care of vulnerable children. Care coordination is a complex task joining together the efforts of several stakeholders often at different points in time over the duration of the case of a child. As a result, information sharing as a core agency function is critical to both child outcomes and the efficient use of DFPS resources.

No single committee hearing addressed information sharing across DFPS; however, the topic did often rise to the forefront as information underlined many of the discussions between members and witnesses. For instance, committee testimony pertaining to information sharing was raised during statements about cross-Departmental services, placement transfers, and investigations. Committee staff also held follow-up conversations with DFPS representatives and child placing agencies at the Capitol to better evaluate data processes. Lastly, the September 10th hearing solicited testimony from DFPS staff on the use of data to improve child outcomes.

Findings

The committee supports the ongoing efforts of DFPS to modernize the IMPACT database which will advance transparency for stakeholders involved in the care of foster children while reducing discrepancies that lead to duplicative or erroneous record keeping.

The committee has identified information sharing as an area with pronounced potential for growth within the agency. The overwhelming sentiment from stakeholders internal and external to DFPS was that information inefficiencies impact every level of care for children and families. The most prevailing inefficiencies lead to data duplication, mishandling or gaps in vital information that impacts the care coordination of a child. Moreover, disruptions to the flow of information were found to translate to increased workload demands for CPS caseworkers and less time spent with children in care.

A major component of information-related functions of DFPS is the Information Management Protecting Adults and Children in Texas (IMPACT) system. IMPACT is the web-based information database in which DFPS case information is retained for agency use. DFPS has recognized opportunities to improve the nearly two decade old software and have begun modernization efforts as of fall 2014. Improvements to IMPACT include updates to the software’s architecture that allow staff to request more accurate queries and evaluative reports in a timely manner. IMPACT modernization efforts will continue through fiscal year 2017. The committee supports IMPACT modernization and the recommendations provided below are meant to supplement current efforts of the Department through identification of ongoing needs.

The committee identified information sharing needs between agency partners during the final hearing on September 30, 2014. At this hearing testimony was provided from a number of professionals in the medical, law enforcement, and judicial fields with roles in protecting Texas
children. Witnesses spoke to similarities in information sharing needs which were best summarized in the following statement from Dr. Anu Partap with Children’s Medical Center Dallas: “What I see is that each system has a high set of standards, but lacks the ability or policies to share information quickly when safety is in question.” Judge Peter Sakai of the 225th District Court identified better upfront information sharing and data clarity between stakeholders as key to reducing costs associated with time spent in court hearings.

In order to share accurate data with stakeholders, the IMPACT system must be modernized. IMPACT modernization is important because a more interactive data management tool is the first step in stimulating information sharing between users and stakeholders external to DFPS. First, upgrades to IMPACT will allow DFPS staff to better manipulate data for workload management and respond to inquiries from stakeholders regarding the progress of a case of a child. Secondly, IMPACT modernization includes extending read-only access to staff and volunteers with Court Appointed Special Advocate (CASA) offices. CASA offices and volunteers support the interests of abuse and neglected children in several settings, including family court, and IMPACT access empowers these advocates to be informed of key developments related to the case of a child while reducing the information sharing burden of caseworkers. CASA access to IMPACT is expected in fiscal year 2015 with the agency planning to explore additional read-only access for other child protection stakeholders in fiscal years 2016 and 2017.

**DFPS should consider extending read-only access to IMPACT for Child Placing Agency caseworkers and coordinators in fiscal years 2016 and 2017.**

Child Placing Agencies manage the majority of private foster care placements and access to IMPACT would improve information sharing between DFPS caseworkers and CPA case managers both of whom share a role in monitoring the safety of children in care. On August 6, 2014, a meeting was held between committee staff and CPA directors from across the state where a consensus was shared that CPA case managers often duplicate the work of DFPS caseworkers as there is no shared information system between the stakeholders. Child Placing Agencies similarly experience occasions when cases must be transferred to another caseworker or changes are made in the placement of a child. Providing CPA case managers with read-only access to IMPACT would not only enable private agencies to have more accurate and timely information but would allow them to invest in their own initiatives to improve staff workload management.

**DFPS should bridge components of IMPACT and CLASS databases to improve the investigative abilities of Residential Child Care Licensing and Child Protective Services to respond in a timely manner to complaints of abuse and/or neglect made by children in care.**

Discussions related to DFPS investigations often defer to practices within CPS, however another division is tasked with a significant share of the investigative responsibilities associated with protecting the well-being of children in care - Residential Child Care Licensing. All Statewide Intake cases of suspected abuse or neglect perpetrated against a child in the care of a licensed provider are referred to RCCL for investigation by one of the 45 investigators of the division
operating throughout the state. RCCL investigations include a safety risk assessment, substantiation of abuse or neglect, and documentation of violations to the Minimum Standards for Child Placing Agencies. Committee staff learned from representatives of RCCL during a conference call held in August of 2014 that pertinent data about the placement of a child housed in IMPACT is difficult to locate because it is not arranged in an easily identifiable manner. In addition, the child placement information contained in the IMPACT and CLASS databases, respectively used by CPS and RCCL, are not mirrored to include details such as all CPS caseworker concerns related to the placement. Thus, RCCL investigators are reliant on verbal information exchanges between the investigator and caseworker should concerns arise during the course of the investigation.

Currently, a single incident of abuse and/or neglect in a licensed facility can generate a report for CPS and RCCL but the reports may contain different response times which results in multiple interviews with the family requesting the same information. When investigators from RCCL and CPS cannot coordinate their schedules to meet with families together this requires duplicative efforts to receive the same information. In addition, using two separate systems to store data makes it difficult for caseworkers to share information easily and in a timely manner. Accessing information in the same system would not only be more efficient for caseworkers, but it would allow them to have the information readily accessible in the same system forgoing requests to have documents sent by email or fax.

To promote transparency between CPS and RCCL, streamline transmission of information across divisions within DFPS, and to strengthen the investigative tools available to RCCL, the committee recommends that the agency evaluate opportunities to bridge information between the two databases upon completion of IMPACT Modernization.

The committee supports the DFPS initiative to simplify the policies and procedures manual that can be easily employed by caseworkers.

According to findings described in the Sunset Advisory Commission report and The Stephen Group assessment, DFPS Minimum Standards include approximately 2,400 standards to guide the practice of care for DFPS stakeholders. In addition, the Department issues practice guidance through use of the DFPS Handbook, routine memos, and contract requirements. The report of the Commission acknowledged that the burdensome and in some instances outdated procedural documents, in addition to various rulemaking authorities, are ineffective at supporting the activities of caseworkers and their supervisors.

The third priority of the CPS Transformation Plan, Establishing Effective Organization and Operations, calls for clarity in the procedures guiding organizational operations. The plan states:

“CPS has a clear definition of policy as critical tasks essential to ensuring safety, permanency, and well-being. Using this definition, CPS has begun streamlining and updated its current policy handbook – separating policy from best practice and improving the content, clarity, and accuracy of policy provisions. CPS has also created a better process for communicating policy changes in a more coordinated and effective manner, so that staff can more readily digest and understand agency policies…CPS assigned additional resources to the effort and is moving forward quickly
to coordinate this work with development of the new practice model and the modernization of CPS’ data system, IMPACT, which will reinforce policies and practice and make case documentation easier.”

**DFPS should strengthen efforts associated with the Texas Faith Based Model by evaluating the cost-effectiveness of the Care Portal in meeting the local needs of children and families through direct services provided by the faith community.**

The partnership between DFPS and members of the faith-based community is far reaching with more than 200 churches across the state reportedly working in collaboration with the state to support the needs of vulnerable families from “prevention to permanency.” Some faith-based responses to the needs of local children include intervention counseling for fragile families while others use their congregant platform to educate about the need for additional foster and adoptive families. On the 30th of September, the committee heard testimony from several of these partners including leaders associated with The Phased In Project in Region 9 who work with youth transitioning out of care, to clergy efforts in Region 8 to address the disproportionate rate of adoption for children from racial/ethnic minority backgrounds. The overwhelming sentiment expressed by clergy at the hearing was a motivation to do more to strengthen families in their communities.

The latest addition to this service model is the August 2014 launch of the web-based Care Portal which enables CPS staff to connect directly to local members of the faith community who are willing to provide support and services to needy families and children. The portal is being piloted in the counties of Bell, Williamson, and Travis with DFPS plans to expand in the near future. To support this initiative, the committee recommendation to evaluate cost-effectiveness of the Care Portal, including the implications of a subsequent statewide rollout, will aid DFPS in assessing the added benefit of this model to overall service delivery. If additional funding is appropriated for enhanced preventative or permanency services this evaluation can inform DFPS on the benefits of bolstering this model to reduce agency expenditures in other divisions.

**DFPS should implement recommendations made by the Internal Audit Division to phase-in implementation of a revised risk assessment tool that utilizes empirically-driven predictive analytics to monitor contracts across DFPS offices and Child Placing Agencies.**

Testimony provided during the second hearing of the committee on July 24th began with an overview of the $480 million dollars in contracts that DFPS manages. Senior staff from the Legislative Budget Board, State Auditor’s Office, HHSC Procurement and Contracting, and DFPS provided insightful evidence about the various operations, some collaborative, that work to monitor and evaluate contracts. Through testimony, committee members were made aware of opportunities to improve contracting service within the legacy system of care which is expected to be operational for an extended period of time as foster care redesign implementation has only recently begun. A 2014 report by the Internal Audit Division of DFPS found that current Residential Foster Care Contract Monitoring risk assessment strategies rely heavily on reactive measures that often target high-cost contracts and administrative procedure compliance rather than strategies that proactively promote the safety and well-being of children in foster care.
DFPS is implementing an phase-in approach for predictive analytics. In August 2014, a revised Residential Child Care Risk Assessment Instrument was used to assess the risk level of contractors. The revised Risk Assessment Instrument included seven new risk factors that are potentially predictive of risk:

- Age of children in care,
- Child fatalities in placement based on abuse and neglect,
- Investigation disposition in residential facilities,
- Licensing minimum standard deficiencies,
- Emergency behavior intervention deficiencies, such as restraints of children,
- Background check deficiencies, and
- Licensing corrective or adverse action.

The Residential Child Care contractors selected for Fiscal Year 2015 monitoring is based on the results of the revised Risk Assessment Tool.

Developing a more sophisticated risk assessment tool that integrates data from a variety of sources to ascertain the likelihood of a primary contractor not being able to successfully meet contract outcomes would strengthen the safety and continuity for vulnerable children who may be sensitive to changes related to their care. In the event of a pending severe breach of contract, DFPS will be better able to align an alternative provider or to prepare to regain control of services in the contracted area. This information could be helpful not only to the administration of legacy contracts, but also for the rollout out of foster care redesign throughout the state.
Assessment and Screening of Providers

Discussion

As part of the interim charges, the committee heard invited and public testimony on July 24th from a variety of stakeholders involved in the screening, assessment, training, and support of foster and kinship families. Committee members learned there is a critical shortage of all types of foster care providers which can force DFPS and CPAs to make decisions that are not in the best interest of the safety, well-being and permanency of the child.

The committee also acknowledges the direct role that foster home verification plays in securing successful permanency outcomes for children. If caseworkers and administrators are the body of DFPS, foster care providers are certainly the lifeblood that sustains a core agency function. Together these stakeholders provided testimony related to best practices and areas for development in the verification process. Expert witnesses for this hearing included DFPS Commissioner John Specia and Child Protective Services Assistant Commissioner Lisa Black, Wendy Bagwell of Texas MENTOR, and Dan Johnson with Pathways Youth and Family Services. Numerous public witnesses also spoke to safety concerns regarding foster families, children in care and private child placing agencies.

Foster care providers enable agency representatives to respond quickly when a child is taken into custody, by identifying alternative living arrangements in the community for the child, or in a significant number of cases, siblings groups. Of the 16,676 children in foster care in fiscal year 2013, approximately 70 percent resided in homes approved by private child placing agencies with the remaining children living in a DFPS approved foster home or another approved placement setting. The verification process for foster families involves several steps before a household is able to receive a foster child into their home. From the point of recruitment, foster home verification typically requires between 90 and 120 days to complete, which includes the written home assessment, supporting documentation, and pre-service training. Families are also expected to complete additional annual training as part of their service as described in section §749.931 of the Minimum Standards. Recommendations in this section would strengthen the verification process by using best practices to address ongoing needs.

Findings

The RCCL division of DFPS should conduct a study of the types of curriculum used for and the number of hours of pre-service training provided to foster parents for all Child Placing Agencies.

According to the Minimum Standards for Child Placing Agencies there is only a minimum of eight pre-service training hours required for foster parents who are licensed through private agencies. Testimony on July 24th offered by the Department outlined the Parent Resource for Information, Development and Education (PRIDE) pre-service training, a national curriculum modified for use by DFPS and some Child Placing Agencies in Texas to prepare foster and adoptive families for caregiving. Texas PRIDE training is thirty five hours while a shortened version of the training is available for kinship families based on their level of educational needs.
Subsequent testimony offered by private CPAs revealed significant variance in the pre-service training requirements between DFPS and CPAs that fluctuate based on individual needs or internal standards of the provider.

The lack of consistency in how Texas evaluates appropriateness of a prospective caregiver for service raised concerns among members of this committee. Moreover, concerns related to training inconsistency were raised during the hearing by groups such as Texans Care for Children, the Texas CASA Mental Health Task Force, and Texas MENTOR. The committee desired more clarity as to how Child Placing Agencies set pre-service training requirements and to what extent financial considerations factor into those decisions. The recommendation of the committee for DFPS to document aspects of pre-service training by CPAs could be beneficial in evaluating the success of training components or educational gaps. Identified best practices related to pre-service training could then be used to implement a standardized program that equitably serves the needs of Texas caregivers and in turn the well-being of children in care.

**DFPS should review providers who deliver online training to potentially increase the availability of training opportunities for current and prospective foster parents. DFPS should also expand its efforts to target and recruit all types of foster care providers.**

Texas is in significant need of more community members willing to serve as foster parents. DFPS and Child Placing Agencies strive to meet the placement needs of children but options can be limited, which may lead some private providers to make sub-optimal placement decisions, such as placing too many children in one home, not placing children in the least restrictive environment as required, and/or placing children with a caregiver who is not appropriate for the specific needs of that child.

Moreover, education is an ongoing need for foster parents to be able to support the healthy development of children in a stable environment. Manifestation of post-traumatic behavior or developmental challenges of a child may not all present at the time of placement. As a child grows and adjusts to the placement, challenges (normal or abnormal in child development) may be revealed to the caregiver for which they feel ill-equipped to handle. To address these respective challenges and offer accessible training opportunities, a robust training network must be made available to foster parents.

Although in-person classroom training provides an opportunity for support and socialization among fellow foster parents, online training resources give families options to choose what works best for them. In order to ensure the availability of training to caregivers with limited time and ability to meet in-person it is important to offer web-based support. Technological advances related to web-based education have grown exponentially since broadband Internet services spread through the country. For instance, Foster Parent College is an online service provider of pre-service training and endorsed by The National Foster Parent Association\(^{30}\). If vetted web-based opportunities exist to incentivize caregivers to become verified by offering training options; the committee supports the exploration of such services by the Department.
Under RCCL rules, no more than one-third of the annual training hours required may come from self-instructional training. Emergency behavior intervention, first aid and CPS training are not allowed through self-instructional training. Foster parents should be able to complete a greater proportion of their training online.

DFPS has not conducted an informal or formal assessment of online classes that are available for foster parents and cannot state with any certainty whether there are enough online classes available to help reduce burdens on foster parents. The committee recommends that DFPS determine and assess by region: caregiver capacity, training needs and availability of training, and barriers to accessing training. The Department should use the information to launch robust outreach efforts to increase the capacity of foster care providers, to evaluate the use of web-based pre-service training providers, and to ensure sufficient education is available to caregivers to address challenges they encounter.

**DFPS should consider including an annual home study update for all approved foster homes in its Minimum Standards for Child Placing Agencies.**

Foster home verification should not be an onerous process on the caregiver; however, the practice of unbounded verifications and approvals raises the risks for some children in caregiver situations that deteriorate or drastically change over time. Sections 749.2453 and 749.2655 of the Minimum Standards identifies that a home assessment only requires an update if the approving agency closes or a “major life change” is reported. Major life change in the foster home would include: marriage, divorce, separation, death, or birth in the foster family; a serious health problem in the foster family; or extended absences by a foster parent. While the caseworker is expected to document any reported or visible major life changes during quarterly visits to the home, it is ultimately left up to the caregiver(s) to self-report such changes which may not serve in their best interest.

An annual home study places a greater share of the responsibility on CPAs to monitor major changes, but also is a deliberate event where children are encouraged to report any long-standing serious concerns about their placement. Victims of child abuse and/or neglect are one of the least likely groups to report maltreatment. It is essential that youth in foster care understand that maltreatment is not normal and that these children have every opportunity to report placement concerns related to abuse and/or neglect, and to have these reports acknowledged and investigated in a timely manner. Several statements offered by former foster youth during public testimony noted that agency and CPA responses to changes in the foster home were untimely and inequitably applied across caregivers. These inconsistencies resulted in situations where foster youth felt they were placed at risk of physical or emotional harm, and feared retribution if they reported their concerns to a caseworker.

**DFPS should educate all qualifying kinship care providers about the licensing requirements associated with pursuing verification as a kinship care provider compared to a foster parent provider.**

Kinship care gives children more stability and a connection to family than foster care does children cannot live with their birth parents. Of the 27,924 children in DFPS substitute care on
August 31, 2013, 10,059 children were placed in kinship care. Kinship care providers whose family income does not exceed 300 percent of the federal poverty limit can receive a one-time “integration payment” of $1,000 for the first child placed in the home and $495 for each sibling. Kinship caregivers also can receive up to $500 reimbursement (provided once a year on the anniversary of the placement of the child) for expenses related to the child in their home. Alternatively, the federal Fostering Connections to Success and Increasing Adoptions Act of 2008 amended title IV of the Social Security Act to include new opportunities and funding related to the support of children and caregivers in kinship care arrangements. Subsequently, the 81st Texas Legislature enacted the permanency care assistance (PCA) program which offers some children in kinship care settings a permanency option (outside of adoption and reunification) while providing the caregiver with a monthly financial stipend and abbreviated home verification requirements until the child ages out of care. Between fiscal years 2011-2013, only 1,318 families received PCA.

Families may have varying safety requirements and levels of financial support provided to them depending on their long-term care arrangement (kinship care providers, kinship care providers with a PCA agreement, and foster care providers). Along with higher financial assistance for verified foster homes comes more specific licensing criteria that the home must meet. Many low-income kinship placements (that represent the majority of kinship placements), are willing to change their home environment to meet increased safety requirements, but cannot do so without help. Although DFPS says caregivers are provided the Kinship Manual and the Kinship Agreement which explains the benefits through the Relative and Other Designated Caregiver Program, several current and former kinship care providers testified on July 24th to the financial struggles associated with making ends meet and not being made aware of the reimbursement differences based on the type of license pursued at placement.

The Department should offer to caregivers an understandable explanation of the long term care arrangements available to them, including the conditions. It should not only assist families in meeting the additional requirements, but encourage them to become verified because it ensures additional safety measures are in place for the child(ren).

The committee supports the inclusion of a mandatory self-care module for prospective foster parents in pre-service and annual training that addresses the potential effects of caregiving on the family and recommendations to maintain household stability including respite care and stress relief techniques. The Department should also evaluate the impact of reimbursement for part-time day care to certain foster and kinship providers.

Self-care relates to the purposeful actions of DFPS-supported caregivers to maintain all aspects of their personal health – physical, emotional, and mental. Caregiving can often be a rewarding experience for foster and kinship care providers, however challenges may arise that strain their ability to provide quality care over lengthy periods of time. Caregiver stress and exposure to secondary trauma is a significant threat to the quality of a placement that is well-documented in research literature. Several states include self-care directives in statute or make available foster parent training modules that support practical guidance to caregivers on how to properly care for
themselves while also caring for others. It is the belief of the committee that supporting the well-being of caregivers ultimately supports the well-being of the child(ren) placed in their care.

In order to receive day care services, part-time or full-time services, a parent must work at least 40 hours per week. Part-time day care is provided primarily for before and/or after school care or when less than a full day is needed. Members of the committee heard from foster and kinship providers who expressed difficulty in caring for children who have been traumatized, especially with few options for respite. The committee believes the state should explore the advantages to offering part-time day care services to children of parents who work part-time in order to provide much needed respite, including attracting and retaining families and improved outcomes.
Normalcy & Child Rights

Discussion

The sixth charge tasks the committee with exploring mechanisms available to children to report maltreatment during their time in substitute care. It is essential that children in substitute care understand their rights and know where to turn if these rights are violated.

The committee found the topic of child rights goes hand-in-hand with a conversation about normalcy. Normalcy endorses age-appropriate activities for children in foster care that empower youth to experience typical developmental opportunities, such as participating in extracurricular activities, visiting friends, or summer employment. Children and youth in substitute care who have the opportunity to engage in activities available to other children their age, may be more likely to identify situations in care that violate their rights and more prepared to make appropriate decisions as an independent adult. Figures obtained from Statewide Intake reveal that less than two percent of reported cases of abuse or neglect by children in DFPS are made by the child. Given the testimony heard by the committee from foster care alumni and risk factors associated with maltreatment while in care, this rate is concerning and raises questions about the sense of empowerment of a child and his ability to report placement concerns to figures of authority.

DFPS provides children in foster care with a document listing their rights while in care, often referred to as the “Foster Care Bill of Rights”. The number of rights starts at 39 and increases to 49 once a child in care reaches the age of sixteen. The list begins with, “I have the right to good care and treatment that meets my needs in the least restrictive setting available. This means I have the right to live in a safe, healthy, and comfortable place. And I am protected from harm, treated with respect, and have some privacy for personal needs.” Caseworkers are expected to review these rights with children within seven days of their placement or transfer in foster care.

The committee hearing held on July 24, 2014 included invited and public testimony pertaining to the ability of children in care to report maltreatment and the scope of discussion broadened to include other child rights and normalcy. Expert witnesses from DFPS and the Texas Juvenile Justice Department (TJJD) provided an overview of maltreatment reporting options. A number of former foster youth also provided sensitive testimony pertaining to their experiences in care. The committee targeted recommendations that could be implemented in the short-term and provide lasting benefits to children in foster care.

Findings

DFPS should ensure adequate staff in order to use Family Team Meetings more frequently to engage the family in making critical decisions regarding the placement of a child. The Department should also expand permanency roundtables and make them available earlier in the process to support better collaboration among foster families, biological families and providers, and to improve coordination of service plans.
A range of factors may influence the placement stability of a child in substitute care from attachment with a caregiver to the age of a child. Family Group Decision Making (FGDM) describes a variety of practices to work with and engage children, youth, and families in safety, service planning and decision making. Results from a 2010 study of FGDM services found that Family Group Conferencing (FGC) reduced the odds of placement disruptions by 8 percent and supported permanency outcomes for children receiving DFPS services. More than 8,000 FGCs were conducted in fiscal year 2013 with more than half taking place in the Houston, San Antonio, and Edinburg regions.

Although current CPS policy states that placement must contribute to the achievement of the permanency plan of the child, preventable placement disruptions occur. On August 6th, committee staff heard from several Child Placing Agency directors who expressed frustration with placement failures resulting from the untimely resolution of conflicts in the home. Placement disruptions cost DFPS valuable staff time and resources which could be diverted to other uses within the agency. Disruption Specialists within FGC teams are a lower-cost option to promote stability for children while supporting the evolving needs of caregivers. Considerably more households vulnerable to placement failures stand to benefit from engagement with Disruption Specialist given the high average of 6.9 placements per child who ages out of care.

Limited resources, including an inadequate number of workers, negatively affects the ability for the Department to use Family Team Meetings, part of the FGDM philosophy, as an option to engage the family and community in making critical decisions regarding the placement of a child.

A permanency roundtable (PRT) is an internal case consultation designed to help the child achieve a positive permanency and to examine barriers to permanency. Specialized staff, known as permanency practitioners organize, facilitate and follow-up on action plans developed during a PRT. It provides an opportunity for collaboration among biological and foster families, child welfare experts and service providers as they share vital information about the child(ren) and improve service coordination among the participants. A PRT not only fosters partnership among the participants but it can reduce the time a child spends in foster care.

DFPS should amend the Preparation for Adult Living (PAL) Program guidelines to extend mandatory college preparation services to youth beginning at age 14.

Essential to normalcy promotion for youth in foster care is support of their capacity to develop into responsible adults with career opportunities. Current and former youth in foster care should be able to pursue post-secondary studies following high school graduation if doing so aligns with their desired career path. Sections 54.355 and 54.367 of the Texas Education Code authorize state supported institutions of higher education to exempt tuition and fee requirements for certain youth formerly in foster care that are admitted to state-supported higher education institutions. The state operated Education and Training Voucher (ETV) Program also provides financial support to youth pursing higher education. These resources are vastly underutilized raising concerns about college preparedness, academic achievement, and overall social and emotional well-being of foster youth during their time in care.
It is the position of the committee that children in foster care should be better prepared for success, especially due to the decision to remove them from their home and place them in the care, custody and control of the state. As the parent, the state has a responsibility to protect and prepare children in foster care for adulthood and the workforce.

The Preparation for Adult Living (PAL) Program began almost thirty years ago with a mission to prepare older youth in foster care with the skills and knowledge needed to function as healthy adults upon their departure from state care. PAL support services geared toward higher education include tutoring, vocational assessment and/or training, GED courses, and preparation for college entrance exams. In fiscal year 2013 the program served 7,265 youth, an estimated 85 percent of the eligible youth in foster care. During the course of the July 24th hearing the committee learned that PAL transitional services are directed toward youth in care aged 16 or above. However, it is the position of the committee that successful preparation for college begins earlier as youth enter high school. Expanding PAL services related to higher education to youth aged 14, will give children in foster care the best chance to prepare for college by ensuring their academic preparation aligns with their post-secondary education goals as they begin high school classes, thus increasing their opportunities to succeed.

**DFPS should strengthen its support system for youth in the foster care system and the inclusion of youth in its decision-making processes related to normalcy.**

It is critical to support youth in the foster care system, make available opportunities for them to engage with other foster youth, and provide them with life skills to prepare them to be successful. Through the Preparation for Adult Living (PAL) Program, DFPS should expand activities, seminars, and conferences for older youth who are aging out of foster care. These services will not only better prepare youth for their transition from foster care to adult living, but will provide occasions for fellowship with other youth in care and provide opportunities for youth to engage with agency staff. Group activities, seminars, and conferences for youth encourages and strengthens the voice of foster children to report on DFPS policies that support normalization.

**DFPS should define the “prudent parent standard” to promote the decision-making ability of caseworkers and foster parents. It should also assess cultural competency training of caseworkers and other direct care providers.**

Young adults formerly in foster care testified to feeling restricted or less than “normal” because of their inability to participate in everyday extracurricular activities and events like their peers. Often these everyday opportunities do not readily align within existing placement guidelines, licensing standards, and/or require a lengthy approval process. The ongoing DFPS Placement Exit Survey recently reported that Texas foster youth report higher levels of placement satisfaction when barriers to normalcy promotion activities are less-restrictive. Moreover, recent research suggests that children in foster care afforded developmentally-appropriate opportunities like those of their peers feel empowered, fare better behaviorally, and are more successful as adults after foster care. Both Texas CASA and the Texas Foster Family Association identified the need for a stronger definition of prudent parenting that empowers caregivers to better support the development of youth in substitute care. The committee recommends that DFPS adopt the
“prudent parent standard” definition as addressed in recent bipartisan legislation at the federal level which states: “The term reasonable and prudent parent standard means the standard characterized by careful and sensible parental decisions that maintain the health, safety, and best interests of a child while at the same time encouraging the emotional and developmental growth of the child, that a caregiver shall use when determining whether to allow a child in foster care under the responsibility of the State to participate in extracurricular, enrichment, cultural, and social activities.” Additionally, the Legislature should create in statute a legal presumption that foster children should be able to participate in normalcy activities that meet the prudent parent standard.

In 2005 the Legislature passed Senate Bill 6 which required DFPS to provide cultural competency training to all service delivery staff, target recruitment efforts to ensure diversity among Department staff and develop collaborative community partnerships to provide culturally competent services to children and families of every race and ethnicity. It also required the Department to analyze child welfare data, examine removal rates and other enforcement actions to determine whether disproportionality exists in the system. The study found when the analysis was controlled for both poverty and family structure Latino and African-American children spend more time in foster care, are less likely to be reunited with their families, and wait longer for adoption than other ethnic groups. The report also found that these families are less likely to receive aid that can help prevent the removal of a child from the home. Although much progress was made in reversing these trends after the passage of SB 6, in more recent years advances have been waning.

DFPS requires CPS caseworkers to complete Knowing Who You Are: Racial and Ethnic Identity cultural competency training. This training has been updated by Casey Family Programs and facilitators are being trained in December 2014 on the updates. Pursuant to the 2010 disproportionality report, caseworkers had difficulty differentiating between poverty and neglect. As a result, CPS has rolled out two workshops: Poverty Simulation and Working with Families Who Are Impoverished. The Poverty Simulation is also open to external stakeholders. CPS continues to explore expansion of cultural competency offerings. The committee applauds DFPS in its efforts to improve cultural competency training of caseworkers and other direct care providers. It encourages the Department to take additional steps to address disproportionality in the system.

**DFPS should consider procedural and content revisions related to the Foster Care Bill of Rights. It should promote different methods of explaining the rights to the foster child, including technology solutions for ongoing communication.**

Vital to the smooth transition of children into care is ensuring they understand their rights in foster care and feel empowered to use them when appropriate. Section §749.1005 of the Minimum Standards for Child Placing Agencies requires caseworkers to inform a child of their rights within seven days of entering care, in addition to obtaining a signed statement from the child “indicating that the person has read and understands these rights.” The committee conversely heard personal accounts from several witnesses who could not recall the event of being informed of their rights by a caseworker. Perhaps the age or traumatic events associated with entering into care impeded the memory of events for these young adults, even so, this
discovery raised questions among the committee about the effectiveness of current notification practices. As a result, the committee suggests that DFPS consider using multiple developmentally appropriate versions of the Foster Care Bill of Rights that conveys the seriousness of the topic in a language that meets the non-technical guidelines set forth in the Minimum Standards. The committee also encourages DFPS to evaluate the effectiveness of current delivery practices of communication to youth among staff.

The committee recommends DFPS establish policies to ensure the autonomy of the Office of Consumer Affairs (OCA) and to make the office more available to youth and children in foster care. The agency should have a dedicated staff person within OCA based in Houston to make regular visits with youth residing in Residential Treatment Centers.

Commissioner Specia testified about a list of eleven individuals involved in child protection to whom youth in care can potentially report maltreatment, including caseworkers, Statewide Intake, and the Office of Consumer Affairs (OCA). The latter body, OCA, is considered to be a neutral office that is responsible for investigating and responding to complaints involving DFPS policy and/or procedure or if consumers do not feel their case was handled fairly. The office also responds to inquiries for information. The OCA review process involves an investigation and if a complaint is substantiated, communication with DFPS regional program administrator about the outcome and remedies. OCA also provides information to DFPS executive management about violations of policy that occur.

OCA complaint investigations rely primarily on information provided by DFPS and in some instances cases may be resolved using only information obtained from DFPS internal reporting systems. The perspective of DFPS is critical to resolving complaints related to children in care but cannot guarantee a holistic assessment of the grievance. The committee encourages DFPS to establish policies to ensure a level of autonomy of OCA in order to impartially resolve complaints.

Committee members learned that OCA recently began an outreach campaign to inform youth in foster care about the availability of their services. During a follow-up conference call with OCA representatives on August 26th, committee staff were also informed of a recent project to educate CASA partners about the process for handling complaints by OCA. The committee is supportive of these outreach efforts and supports policies to make OCA more available to children and youth in care.

Thirteen or more children reside in Residential Treatment Centers (RTCs) which provide treatment services for children with emotional disorders. They have experienced trauma, some acute and some chronic; many have experienced both. Children with the highest and most intensive needs find themselves in residential care. Often times they have been in care for a long period of time, experienced dozens of placements, and are greatly impacted by the instability which causes them to lose trust and hope. The committee heard from former foster youth who resided in RTCs where they felt isolated and believed they had no adult in their lives to whom they could confide or report maltreatment. The number of reports from foster children to OCA is abysmal and proves there are problems with the system. These children in highly restrictive
settings of residential care need the best understanding and response from the state. In order to make needed improvements, the committee believes DFPS should dedicate one staff person based in Houston to make regular face-to-face visits with youth residing in RTCs.

**DFPS should improve caseworker accountability by amending the Services to Children in Substitute Care section of the CPS handbook to include reporting monthly face-to-face visits with children in foster care.**

During a committee staff briefing with administrators of Residential Child Care Licensing (RCCL), the division reported difficulties with investigating claims of abuse or neglect made by children in DFPS care. RCCL administrators noted difficulty in determining case credibility when the allegations involved previous foster home placements or when the claims were not reported in a timely fashion which hindered the collection of evidence and potential witness statements. Youth formerly in foster care testified that they reported finding it difficult to relay sensitive information regarding maltreatment to caseworkers when meeting in groups or environments that did not provide adequate privacy between the caseworker and youth in foster care as well as when caseworkers did not regularly visit their placement. According to the youth, caseworkers are not following current policy requiring them to have a face-to-face visits with the child at least monthly and privately.

To support the timely ability of children in care to report placement concerns related to sensitive topics such as abuse and neglect, the Committee recommends that the Services to Children in Substitute Care section of the Child Protective Services Handbook (code 6311) be revised to include a reporting mechanism to hold caseworkers accountable to meet one-on-one with each child. The meeting should take place in an area that does not include the caregiver or additional foster children. One-on-one regular visits are particularly important in congregate settings such as in Residential Treatment Centers or group foster homes which can serve up to 12 children.
APPENDIX A

DFPS Child Data

7,159,172
Children Living in Texas for FY 2013

27,924
Children were in the state’s conservatorship on August 31, 2013

229,138
Total CPS Initial Intakes of Abuse/Neglect

160,240
Abuse/Neglect Investigations Completed by CPS

66,398
Confirmed Victims of Abuse/Neglect

16,676
Children were in paid foster care

10,059
Children were in Kinship Care

1,189
Children were in Other Settings

Stages of Service

CPS Stage of Service

Prevention
Prior to continuation of abuse/neglect by CPS or preventing recurrence

Investigation
Determination of whether abuse/neglect occurred and assessment of future safety threats

Family Based Safety Services
Support for families to address safety threats while the parents maintain legal custody

Conservatorship
The state has custody of the children

Support for birth families
Basic Needs Support
Substance Abuse
Mental Health
Domestic Violence
Safety Needs
Transportation
Clothing/Supplies
Job Skills

Support for relatives/kin who do not receive state support
Family Group Decision Making
Transportation
Clothing/Supplies
Basic Needs
Support groups

Foster Family Support
Child Care
Appreciation
Family Group Decision making

Adoption Support
Recruitment
Child Care
Parent Training/Education (trauma informed)

Support for children in care or aging out of care
Basic needs
Transition services
Normal life experiences (camp, band)
Birthday/holiday
Mentoring
Specialized services
APPENDIX B

Child Fatalities in FY 2013

804
Reported Child Fatalities Statewide
(Includes CCL, CPS, RCCL)

648
Fatalities unsubstantiated as child abuse or neglect

156
Confirmed child abuse or neglect related fatalities

84
No prior CPS history

72
Prior CPS history

49
No CPS case at time of death

23
Open CPS case at time of death

In FY 2013, CPS completed 160,240 investigations of abuse or neglect.
ENDNOTES


2 Krinsky, M. A. (2010). Disrupting the pathway from foster care to the justice system-a former prosecutor's perspectives on reform: Disrupting the pathway from foster care to the justice system. Family Court Review, 48(2), 322-337.


21 State Auditor’s Office. May 2013. Caseload and Staffing Analysis for Child Protective Services at the Department of Family and Protective Services


24 Information obtained from the Department of Family and Protective Services in response to a data request submitted prior to the September 10, 2014 Select Committee on Child Protection hearing.


37 Texas Department of Family and Protective Services. (2014). Rights of Children and Youth in Foster Care. Retrieved from https://www.dfps.state.tx.us/Adoption_and_Foster_Care/About_Foster_Care/rights.asp.


44 HR 4059. Preventing Sex Trafficking and Improving Opportunities for Youth in Foster Care Act, Sec. 201; Supporting Normalcy for Children in Foster Care.
