

From: [Sunset Advisory Commission](#)
To: [Janet Wood](#)
Subject: FW: Form submission from: Public Input Form for Agencies Under Review (Public/After Publication)
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-----Original Message-----

From: sundrupal@capitol.local [<mailto:sundrupal@capitol.local>]
Sent: Monday, June 30, 2014 7:55 PM
To: Sunset Advisory Commission
Subject: Form submission from: Public Input Form for Agencies Under Review (Public/After Publication)

Submitted on Monday, June 30, 2014 - 19:55

Agency: DEPARTMENT FAMILY AND PROTECTIVE SERVICES DFPS

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Organization you are affiliated with: Texans Care for Children

City: Austin

State: Texas

Your Comments About the Staff Report, Including Recommendations Supported or Opposed:

Thank you for the opportunity to provide comment on the Sunset Commission Staff Report on the Texas Department of Family and Protective (DFPS) and the Texas Department of State Health Services (DSHS). I am Josette Saxton, Mental Health Policy Associate of Texans Care for Children, a nonprofit organization that works solely to improve outcomes for Texas children through policy change. We come by our recommendations and policy positions through active dialogue with our network of members throughout the state who together represent thousands of Texas children. We also co-convene various stakeholder groups, which bring together a wide range of organizations, families, and advocates around our areas of focus: early opportunity; infant, child and maternal health; children's mental well-being; child protection; and juvenile justice.

We agree with Sunset staff findings that DFPS should elevate its prevention and early intervention efforts and do a better job of evaluating the true impact of prevention and early intervention program effectiveness. We do not agree with the statement that the Legislature has "endorsed" DFPS as the state's primary prevention and early intervention agency. DFPS may be the de facto prevention agency, but this is not due to the any strategic or intentional planning process.

The state supports prevention efforts in various systems, each aimed at improving targeted outcomes specific to an agency's mission. Examples include prevention efforts targeting mental health, suicide, substance abuse, delinquency, and school dropout rates. These "problems" are not discrete and siloed. In fact, they are often co-occurring. They share common root causes and are impacted by programs and interventions that largely promote a set of common protective factors and reduce common risk factors. Home visiting programs are a perfect example of a prevention and early intervention strategy that impacts child well-being broadly, producing positive outcomes in areas of child and youth development, child health and safety, school readiness and success, and delinquency. If Texas wants to effectively and efficiently address these interconnected issues associated with poor outcomes for children and youth, it needs to stop siloing them across agencies and systems. It needs to identify common

outcomes that can be measured across agencies to allow policy makers to understand which services and strategies are most effective in assisting youth into developing into healthy and successful adults. It needs to measure the return on investment of prevention and early intervention strategies beyond short term and discrete outcomes that are currently tracked and reported.

Unfortunately, children in the child welfare system, the juvenile justice system, the education system, and others are often served in a non-integrated manner that is not working towards common outcomes. Continuing the status quo of addressing adverse outcomes in silos without acknowledging the strong interconnectedness between them prevents policymakers from recognizing the true impact of effective prevention strategies. This results in wasted opportunities for our state and communities to grow more young children into healthy successful adulthood, and to avoid the high personal and economic costs that come in both the short and long run when people experience adversity in childhood.

The gaps in Texas prevention efforts have been recognized, with various reports and recommendations having been drafted to improve the delivery of prevention services in the state (see below). While little policy action has yet resulted in response to these identified concerns and strategies to address them, these resources can guide Texas in doing a better job of coordinating, planning, and providing prevention services to children and youth.

Resources, Reports, and Recommendations related to Prevention Services for Children and Families

Texas At-Risk Youth Services Project: A Second Look Texas Legislative Budget Board (2013)
http://www.lbb.state.tx.us/Public_Safety_Criminal_Justice/Reports/Texas At Risk Youth Services Project A Second Look.pdf

Senate Health and Human Services Committee Interim Report to the 82nd Legislature Texas Senate Health and Human Services Committee (2010)
<http://www.senate.state.tx.us/75r/senate/commit/c610/c610.InterimReport81.pdf>

Committee Charge No. 2: Study the benefits, efficiencies and costs, and effectiveness of the social service related prevention and early intervention programs at the health and human services agencies, the juvenile and adult criminal justice agencies and other government agencies that have programs that address mental illness, substance abuse, child abuse and neglect, domestic violence, single-parent families, absentee fathers, early pregnancy, and unemployment. Study other states' prevention programs and efforts to administer these programs through a merged prevention department. Make recommendations to improve the efficiency and effectiveness of these programs.

The Texas Statewide Blue Ribbon Task Force Final Report (2011)
<http://www.blueribbontaskforce.com/brtfdrupal/sites/default/files/Statewide%20BRTF%20Final%20Report.pdf>

The Statewide Blue Ribbon Task Force (SBRTF) was enacted in 2009 by SB 2080 (81st Legislature) to establish a strategy for reducing child abuse and neglect and improving child welfare.

Recommendations for Improving Coordination and Collaboration of Child Abuse and Neglect Prevention and Early Intervention Programs and Services Among State Agencies Interagency Coordinating Council (ICC or Council) for Building Healthy Families. (2008)
http://www.dfps.state.tx.us/documents/Prevention_and_Early_Intervention/pdf/2008-12-01_ICC-Report.pdf

Strategic Plan for Child Abuse and Neglect Prevention Services The Department of Family and Protective Services (2008) http://www.dfps.state.tx.us/documents/Prevention_and_Early_Intervention/pdf/2008-12-01_ICC-SP.pdf
Promotion and Prevention in Mental Health: Strengthening Parenting and Enhancing Child Resilience. Report to Congress US Dept of Health and Human Services (2007) <http://store.samhsa.gov/shin/content/SVP07-0186/SVP07-0186.pdf>

Any Alternative or New Recommendations on This Agency:

The Sunset process presents the opportunity for the Legislature to be thoughtful and strategic in in how it promotes prevention and early intervention across systems, not just within DPFS. Prevention and early intervention strategies need to be elevated across ALL agencies within the enterprise, including coordinated strategic planning and better measuring and reporting and outcomes to capture and reflect the broad outcomes and cost savings accrued as a

result of prevention and early intervention programs.

Decisions and considerations about the state's infrastructure related to prevention and early intervention programs should be a Health and Humans Services Commission and cross-system issues, which are still under Sunset review. The recommendation to move home visiting from HHSC to DFPS does not move Texas towards breaking down these silos. HHSC is much better positioned to coordinate, collaborate, and strategically plan with other HHS agencies, as well as non-Enterprise agencies like Texas Education Agency and the Texas Juvenile Justice Development.

My Comment Will Be Made Public: I agree