



TEXAS
Health and Human
Services System



Texas

DEPARTMENT OF FAMILY AND PROTECTIVE SERVICES



SELF-EVALUATION REPORT

SUBMITTED TO THE SUNSET COMMISSION

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I. AGENCY CONTACT INFORMATION

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Exhibit 1: Agency Contacts				
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II. KEY FUNCTIONS AND PERFORMANCE

A. Provide an overview of your agency's mission, objectives, and key functions.

MISSION

Department of Family and Protective Services (DFPS) operates within a coordinated Health and Human Services (HHS) System. In 2003, the Legislature consolidated a fragmented health and human services delivery structure consisting of 12 separate agencies into five restructured agencies. The resulting HHS System improved client services by clearly defining individual agency responsibilities to implement client-focused services. The Health and Human Services Commission provides oversight and consolidated administration services to eliminate duplication and ensure the five agencies operate as one integrated health and human services system.

Within this structure, DFPS works to protect children, persons aged 65 or older, and people with disabilities from abuse, neglect, and exploitation by involving clients, families, and communities.

OBJECTIVES

DFPS has a broad range of objectives and goals related to children, persons who are 65 years and older, and persons who are disabled as detailed in state law. The agency's main objectives include the following:

- **Reduce Child Abuse and Neglect.** Protect children from abuse and neglect by working with public and private entities to provide an integrated service delivery system. Provide professionals and the public the ability to report abuse, neglect, or exploitation 24 hours a day, seven days a week, via phone, fax, email or the Internet.
- **Reduce Adult Maltreatment.** Protect the persons aged 65 years or older and adults with disabilities from abuse, neglect, and exploitation by investigating reports in certain facilities and in-home settings, and working with public and private entities to provide or arrange for services to alleviate or prevent maltreatment.
- **Child-Care Regulation.** Protect the health, safety, and well-being of children in out-of-home care through a system of licensing, regulation, and enforcement of minimum standards of care.

KEY FUNCTIONS

- By working with communities to protect children, persons aged 65 years and older, and people with disabilities from abuse, neglect, and exploitation, DFPS “protects the unprotected.” The Department also works to protect the health and safety of children in daycare, as well as foster care and other types of 24-hour care, by regulating such facilities, and providing services, referrals, and prevention programs. DFPS has three major programs that do this important work:
 - Child Protective Services,
 - Adult Protective Services, and
 - Child Care Licensing.

In addition, the Statewide Intake division operates the Texas Abuse and Neglect hotline and website. These main divisions perform the following key functions.

Child Protective Services

The Child Protective Services (CPS) division protects children from abuse and neglect and works with families to prevent future abuse and neglect. DFPS does this in several ways. The most common is investigating complaints of abuse or neglect, which can require getting involved in the decisions of families and parents.

State law requires anyone who suspects child abuse or neglect to report it to DFPS, if the suspected abuse involves a person responsible for the care, custody, or welfare of a child.

CPS works with families in several ways to protect the safety and welfare of children. Through the investigation process, CPS identifies at-risk parents and takes steps to protect those children from possible abuse and neglect. For services needed beyond investigation, DFPS caseworkers serve the family through one of two programs: Family Based Safety Services (FBSS) or Substitute Care. FBSS is an option in cases when children do not appear to be in immediate danger. FBSS caseworkers try to improve the home environment and parents’ skills so their children can stay home without future abuse or neglect. CPS opens a substitute care case when a court decides the safety risk is so great that children must be removed from their homes. Caseworkers try to improve the home environment and the skills of parents so children can safely rejoin their families. If a home cannot be made safe, the agency may ask a court to permanently remove that child from the parents’ custody. DFPS then seeks an adoptive family or other long-term placement for the child.

Adult Protective Services

The Adult Protective Services (APS) division protects adults and persons aged 65 or older or have disabilities, from abuse, neglect, and financial exploitation. More than 4.5 million Texans are older than 65 years or have a disability. Much of the agency’s work is done during in-home investigations. APS conducted 87,487 in-home investigations in FY 2012 and confirmed 59,601

victims of abuse, neglect, or financial exploitations. APS investigations are different from CPS investigations, as they involve adults who presumably have the capacity to make their own decisions. Also, APS cases often involve victims who neglect themselves when they are either unable or unwilling to obtain food, medicine, or other basic necessities. APS caseworkers specialize in helping clients find the resources they need, often from community organizations.

APS also protects people with disabilities by investigating complaints of abuse, neglect, and exploitation in contracted or state-operated settings that serve children and adults with mental illness or mental disabilities. APS acts as an independent investigator of allegations in facilities such as State-Supported Living Centers and state hospitals, and turns its findings over to the facility administrator. In the case of settings operated or contracted by the Department of Aging and Disability services (DADS), APS also provides the case findings to DADS for appropriate action (except for cases in community centers).

Child Care Licensing

The agency's Child Care Licensing (CCL) division licenses and regulates daycare operations, child-placing agencies, and 24-hour residential childcare facilities. The agency licenses and regulates daycare operations ranging from small-home daycare to large licensed childcare centers. Together these daycare operations have the capacity to care for more than 1,000,000 children.

The CCL division performs the following main activities:

- Conducts initial licensing inspections on all licensed and registered childcare operations.
- Performs criminal background and central registry (database of confirmed abuse and neglect findings) checks on all persons 14 years of age and older who are working or living in childcare operations.
- Investigates allegations of abuse or neglect and minimum standard violation in childcare.
- Conducts regular unannounced inspections at all licensed and registered childcare centers.

In addition, CCL creates, announces, and enforces minimum standards for childcare facilities to help ensure the safety and well-being of children in out-of-home care.

B. Do your key functions continue to serve a clear and ongoing objective? Explain why each of these functions is still needed. What harm would come from no longer performing these functions?

Yes, each of DFPS's key functions serves a clear and ongoing objective. The need to protect Texas's children from abuse and neglect continues to be an important State priority, and DFPS serves as the State's primary agency responsible for responding to such allegations. The populations that DFPS protects and serves (children, adults with disabilities, and persons aged

65 or older) continue to grow, as do the number of allegations of abuse, neglect, and exploitation.

For example, the increasing number of confirmed child abuse victims clearly indicates that abuse and neglect remains a prominent problem in our state. While much of this increase can be attributed to an increased child population and long-term trends of better reporting and public awareness of child abuse, some of the increase is related to societal trends such as increasing poverty and generational patterns of drug abuse. Studies show that adults who were abused and neglected when they were children perform worse in nearly every social measurement, from poverty rates to teen pregnancies to drug use to incarceration. As the agency that intervenes in this cycle of abuse, DFPS's role is central to preventing children from suffering maltreatment and then repeating these destructive behaviors when they become adults. While other agencies contribute to the Texas child welfare system, DFPS is the sole agency charged with finding and protecting children who are being abused or neglected.

Similarly, the population of people in Texas who are persons aged 65 or older or have disabilities also continues to grow. From 2002 to 2012, abuse, neglect, and exploitation investigations for people living at home grew substantially. If DFPS did not investigate such allegations of abuse, the State would be unable to protect these vulnerable groups from abuse, neglect, and exploitation.

DFPS is the only state agency in Texas that regulates childcare and the demand for childcare within the state continues to grow. Picking a quality daycare facility can be a difficult choice; however, DFPS supports working parents by ensuring that childcare facilities meet minimum standards that promote the safety of children in childcare.

If the agency no longer performed these functions, there would be no regulation and little, if any, oversight of daycare and foster care homes and facilities to promote the health and safety of children in out of home care.

Finally, contracting for prevention services is an important part of the agency's efforts to break the cycle of child abuse and poor outcomes described earlier in this section. The need for these services will continue to grow as the Texas child population soars. The Texas Legislature created the Prevention and Early Intervention (PEI) division at DFPS to consolidate prevention and early intervention programs in one agency and eliminate fragmentation and duplication of contracted services for at-risk children, youth, and families. PEI oversight provides accountability and efficiency. Without coordinated prevention programs it is likely that at-risk families would become less stable, more at-risk youth would drop-out of school and run away from home, and abuse and neglect would increase.

C. What evidence can your agency provide to show your overall effectiveness and efficiency in meeting your objectives?

In addition to the Legislative Budget Board-approved performance measures, DFPS uses various means to determine its effectiveness and efficiency in meeting objectives. The following information describes some of those methods.

Surveys

DFPS uses a number of surveys to collect stakeholder and employee feedback, which help evaluate effectiveness. For example, DFPS participated in the 2010 HHS Report on Customer Service, which focused on clients who are children with special healthcare needs. Through this report, DFPS identified 13,950 youth with special healthcare needs in the agency's care (foster care or other forms of substitute care). The biennial State Employee Engagement (SEE) also offers insights from an internal perspective. In the 2012 survey, DFPS scored well on quality of supervision, teamwork, working well with other organizations, and for delivering the services that match the needs of clients. In 2012, Child Care Licensing conducted a website survey on childcare center ratio and group size, and a review of the potential impact on stakeholders of reducing childcare giver ratios and maximum group sizes. CCL also held a stakeholder forum to get input from childcare providers, parents who use childcare services, and others. The purpose of both the survey and the forum was to offer an opportunity for parents, childcare providers, and other stakeholders to share their ideas, concerns, and recommendations about current ratios and group sizes and assess the need for any changes.

Federal Reviews

The Children's Bureau of the U.S. Health and Human Services Department reviews the child welfare systems in all states to ensure they are providing effective, quality services to children and families. States develop and implement program improvement plans after each review. The latest Texas Program Improvement Plan was negotiated during 2009 and the approved plan was implemented in 2010. The Texas Program Improvement Plan focused on four key cross-cutting themes:

- Strengthening critical decision-making skills;
- Removing barriers to permanency;
- Enhancing placement capacity by redesigning the Texas foster care system; and
- Strengthening the Family Based Safety Services program.

Audit Findings

Internal Audit is an independent, objective function that provides a systematic, disciplined approach to evaluating the effectiveness of agency controls. Internal audits include findings and recommendations that help agency management address potential risks and improve the efficiency and effectiveness of internal controls. DFPS Internal Audit conducted 14 audits of program processes in FY 2011 and 2012, which gave management opportunities to improve the efficiency and effectiveness of agency processes.

The State Auditor’s Office also performed audits on CPS caseload and staffing analysis, CPS expenditures for direct delivery staff, and residential childcare providers. These audits gave DFPS management additional opportunities to improve the effectiveness of policies and procedures.

Performance Management Review

DFPS uses a performance management system to enhance employee and manager performance and, ultimately, improve outcomes for clients. This system includes performance planning, monitoring, mentoring, and evaluating. The process includes routine manager-employee conferencing, using employee development notes throughout the evaluation period.

Complaints and Quality Assurance

The DFPS Office of Consumer Affairs (OCA) reviews case-specific complaints against agency programs, including Child Protective Services, Adult Protective Services, and Child Care Licensing. Consumer Affairs handles complaints in an unbiased manner and determines if DFPS staff followed policy and procedures. The Office also performs a quality assurance role by providing feedback to programs on the quality of their investigations and services.

Also, the HHSC Office of the Ombudsman compiles complaint data for the entire HHS System and reports such information to the Executive Commissioner on a monthly basis. Beyond addressing agency-specific issues, this system-wide reporting process allows HHSC, in its leadership and oversight role, to identify trends or systemic issues that may need to be addressed comprehensively across the HHS System.

Statistics and Management Reports

The agency publishes the DFPS Annual Report and Data Book, an extensive description of DFPS programs and statistics on the services DFPS provides to the people of the Texas. This publication covers the most frequently asked statistical questions about DFPS programs and helps measure the agency’s effectiveness. Also, DFPS systematically runs a wide array of other statistical management reports that allow it to analyze how it is performing key functions and services. These reports demonstrate both effectiveness and efficiency and enable management to make adjustments to improve both. These reports include everything from the timeliness of completing investigations to how safe children are in foster care.

D. Does your agency’s enabling law continue to correctly reflect your mission, objectives, and approach to performing your functions? Have you recommended changes to the Legislature in the past to improve your agency’s operations? If so, explain. Were the changes adopted?

Yes, created in Chapter 40, Human Resources Code, the Department’s enabling law correctly reflects its mission, objectives, and functions. Section 40.002 summarizes the agency’s core

functions. The Department's core mission (to protect children and vulnerable adults from abuse, neglect, and exploitation and to regulate childcare providers) has not changed since the 1996 Sunset review, although state and federal law have significantly reshaped the agency's approach to performing such functions. Before each legislative session, lawmakers ask DFPS to identify barriers to the efficient and effective operation of its programs, and together with the Health and Human Services Commission (HHSC), the agency makes legislative recommendations. The following is a summary of the most significant developments related to DFPS or HHSC recommendations in the 79th, 80th, and 81st Legislative Sessions.

79th Legislative Session

Senate Bill 6 is the most comprehensive legislation affecting DFPS over the past decade. Although S.B. 6 includes changes that originated from other sources as well, key HHSC and DFPS recommendations contained in S.B. 6 include the following major initiatives:

- Systemic CPS program reform by:
 - Restructuring investigations;
 - Improving caseworker performance;
 - Increasing the number of kinship care (families and family friends) placements;
 - Supporting youth aging out of the foster-care system;
 - Improving medical services for children in state care; and
 - Requiring review of CPS actions to identify disproportionate effects on certain racial and ethnic groups.
- Systemic Reform of the APS program by:
 - Transferring the APS guardianship program to the Department of Aging and Disability Services (DADS);
 - Improving client safety through a new APS risk-assessment tool;
 - Improving caseworker performance; and
 - Improving outcomes in complex cases through use of specialized experts and increased community partner involvement.
- Strengthened protections for children in regulated childcare by:
 - Mandating random licensing inspections of foster homes;
 - Requiring background checks for 24-hour care facilities;
 - Creating a new license requirement for child-placing agency administrators;
 - Requiring 24-hour care providers to report certain serious incidents involving children in care; and
 - Enhancing CCL enforcement tools.

80th Legislative Session

Senate Bill 758 contained many DFPS recommendations that built on the successes of S.B. 6 of the 79th Legislature. While S.B. 6 focused primarily on improving investigations, this round of DFPS recommendations improved other services to children and families. While S.B. 758 includes changes originating from other sources, key DFPS recommendations enacted in S.B. 758 include the following.

- Requiring DFPS to develop and implement a plan for improving services for children and families that will:
 - keep families together through an enhanced In-Home Support program and other measures;
 - include a new post psychiatric hospitalization step-down rate for certain foster youth;
 - improve the quality and accountability of foster care; and
 - reduce the rate of growth of foster care, as well as the length of time children spend in foster care.
- Mandating access by CPS to medical and other records relating to a report of child abuse or neglect.
- Improving the Child Care Licensing (CCL) function by:
 - adding safety specialists, risk analysts, and a performance management unit to improve accountability;
 - requiring agency representatives to meet, face-to-face, with daycare directors during annual unannounced inspections; and
 - requiring all daycare center applicants to get a fingerprint-based criminal history check.

Additional recommendations made by DFPS and enacted by the 80th Legislature were as follows.

- Authorizing DFPS to designate the child's parent or foster parent to approve medical care (medical consentor) when DFPS has the authority to consent for a child's medical care (H.B. 2580).
- Amending Chapter 263 of the Texas Family Code on notice, attendance, and participation by children and other interested parties at required court hearings in order to satisfy federal funding requirements (S.B. 759).

81st Legislative Session

DFPS recommended numerous changes to implement portions of the federal Fostering Connections to Success and Increasing Adoptions Act of 2008. Key recommendations enacted under both S.B. 2080 and H.B. 1151, were as follows.

- Creating a guardianship assistance program, named the Permanency Care Assistance Program, which provides benefits similar to adoption assistance for extended family members who become verified foster parents for at least six months before assuming permanent custody of a foster child.
- Extending foster care eligibility to age 21. Expanding adoption and permanency care assistance eligibility until a youth's 21st birthday for youth who left DFPS custody after turning 16.

In addition, DFPS recommended numerous changes, enacted in S.B. 939, in response to findings in Texas' 2008 federal Child and Family Services Review (CFSR), including the following.

- Expanding eligibility for the college tuition waiver benefit to youth who are placed in permanent custody of a person other than the parent and increasing the maximum age for enrollment up to age 25.
- Requiring that a child's permanency plan include concurrent permanency goals and that the Department shows a compelling reason why adoption or transferring permanent custody to another individual is not in the child's best interests.
- Modifying requirements for judicial findings in various hearings conducted under Chapter 263 of the Texas Family Code to ensure conformity with federal funding laws.

Finally, the agency recommended a number of initiatives to improve its Licensing functions, enacted in S.B. 68, including:

- creating statutory exemptions to exempt these programs by rule;
- enhancing the agency's investigatory powers; and
- providing a clear statutory framework for finger-print based criminal history background checks for childcare workers and other persons, including those required to undergo such checks under the federal Adam Walsh Act.

82nd Legislative Session

Senate Bill 218, sought to redesign the foster care system. The system was structurally flawed, so in January 2010, DFPS joined other child welfare leaders to redesign Texas' foster care system and improve outcomes for children and their families. Senate Bill 218 streamlined and enhanced the foster care system, focusing on changing the ways that DFPS contracts and pays for services. DFPS recommendations contained in S.B. 218 include the following initiatives.

- Systemic Redesign of the Foster Care system by:
 - having a flexible funding plan that neither precludes nor requires additional foster care funding, except for what is necessary for normal caseload growth;
 - using competitively procured Single Source Continuum Contractors (SSCC) to provide a full range of paid foster care services in each of several geographic areas;

- being open to both in-state and out-of-state for-profit and not-for-profit entities with preference for providers that already offer quality services in Texas;
 - holding contractors accountable for well-being and permanency outcomes by using performance-based contracts that include financial incentives and remedies;
 - allotting purchased-services funds to each SSCC to coordinate and deliver services to the families of the children in their care;
 - implementing a blended rate that is similar to an average per diem payment rate for all children in paid foster care regardless of service level or placement type;
 - implementing a staged roll-out of the redesigned foster care system across the state and a staged implementation within each geographic area; and
 - allowing CPS caseworkers to retain the responsibility of case management instead of privatizing case management.
- Enhanced placement options for children by:
 - increasing the number of children and youth placed with their siblings and in their home communities;
 - increasing the number of children who remain in their school of origin;
 - decreasing the average time children spend in foster care before achieving permanency (such as adoption or living with relative who accepts legal responsibility, and so on);
 - decreasing the number of times children move to new homes while in foster care;
 - decreasing the duration and intensity of services that children need while in foster care due to improved well-being and behavioral functioning;
 - creating incentives for continuous improvement of the services offered by the SSCC; and
 - creating robust and sustainable service continuums in communities throughout Texas.

83rd Legislative Session

During the 83rd Legislature, DFPS recommended numerous changes to ensure the safety of children, train and retain staff, and strengthen our infrastructure to improve service delivery. An important recommendation enacted this session was the creation of the alternative response track (S.B. 423) for Child Protective Services (CPS).

Key points of S.B. 423 include:

- allowing CPS to create an alternate track, called “alternative response,” for low-risk cases;
- allowing CPS to conduct an assessment rather than an investigation, when responding to less serious allegations of abuse or neglect;

- ensuring that DFPS does not designate an alleged perpetrator in alternative response cases but does link these families to the appropriate services; and
- permitting DFPS to implement and study this system in certain regions before deploying statewide.

The agency also recommended a number of Child Care Licensing (CCL) initiatives that were enacted in S.B. 427, including the following.

- Creating a new exemption for certain emergency shelters that provide shelter, care, or services to alleged victims of human trafficking.
- Allowing for certain licensed childcare centers or homes with good compliance histories to receive biennial inspections.
- Requiring the same fingerprint criminal history checks for general residential operations, child-placing agencies, licensed foster homes, and licensed administrators as for all other childcare operations licensed by DFPS.
- Allowing DFPS to impose immediate monetary penalties on operations that fail to take certain actions related to background checks.
- Adding new grounds for remedial action against an administrator's license to prevent a person from being a licensed administrator if the person is ineligible to be a controlling person at an operation.

Additional recommendations made by DFPS that were enacted by the 83rd Legislature Session:

- Senate Bill 886 clarifies the Family Code regarding young adults who remain in foster care and must be under the extended jurisdiction of a court to qualify for Title IV-E foster care reimbursement. The bill clarifies provisions that are essential to maximizing federal funding.
- Senate Bill 1236 allows emergency orders for protective services obtained by the APS program to stay in place for up to 70 days, compared to the current maximum of 60 days.

Recommendations Not Enacted in the 83rd Legislative Session

- Clarifying the federal Child Abuse Prevention and Treatment Act (CAPTA). These recommendations were included in S.B. 768, which was a technical clean-up bill that ensured the compliance of Texas code with CAPTA by amending current law relating to suits affecting the parent-child relationship.
- Enhancing certain agency regulatory enforcement actions designed to:
 - improve agency access to financial records in financial exploitation cases;
 - clarify agency authority to purchase services for relatives and other caretakers of APS clients in order to protect the client;
 - clarify agency authority to investigate self-neglect without a client's permission; and

- provide greater flexibility for obtaining emergency orders for protective services for vulnerable adults.

E. Do any of your agency's functions overlap or duplicate those of another state or federal agency? Explain if, and why, each of your key functions is most appropriately placed within your agency. How do you ensure against duplication with other related agencies?

While DFPS interacts and coordinates with many state agencies, its protective services functions do not overlap and are not duplicated by any other state agency. For example, federal law requires, funds, and guides protective services, and DFPS is the primary state agency charged with protecting both children and persons aged 65 or older or persons with disabilities from abuse, neglect, and exploitation. Although many other federal, state, and local agencies are involved in agency functions, DFPS is the primary entity required by law to protect these populations.

For example, at a local level, DFPS works closely with law enforcement agencies and prosecutors across Texas, coordinating investigations. When allegations of abuse or neglect that result in death, serious injury, sexual abuse, or other crimes occur, DFPS handles the civil side of the case and law enforcement handles the criminal side. These functions complement, but do not duplicate, each other. While the criminal justice system determines innocence or guilt of accused persons, DFPS protects children and youth from abuse and neglect.

Also, at the state level, DFPS also works closely with the Department of Aging and Disability Services (DADS) and the Department of State Health Services (DSHS). DFPS serves as the only investigative arm for alleged cases of abuse and neglect occurring in State-Operated facilities, including:

- State Supported Living Centers;
- State Hospitals;
- State Centers;
- privately operated intermediate care facilities (ICFs) for those with intellectual or developmental disabilities (IDD);
- community centers for people with intellectual or developmental disabilities; and
- facility and community center contractors, including home and community-based waiver programs.

In addition to this inter-agency coordination effort, the Legislature, through H.B. 2292, reorganized the state health and human services system to improve client services, consolidate organizational structures and functions, eliminate duplicative administrative systems, and streamline processes and procedures to maximize efficiencies across the agencies. This legislation realigned operations of the existing 12 health and human services agencies by

consolidating similar functions into five agencies. The purpose was to center service delivery in a few agencies rather than offering fragmented services across many agencies.

DFPS also guards against duplication of services by other state and federal agencies through memorandums of understanding and by building close working relationships through its community engagement model.

For Child Care Licensing, no other state agency regulates, inspects, and investigates complaints to assure the safety and quality of care provided in either daycare or residential childcare. DFPS coordinates with state and local fire and sanitation officials, as well as law enforcement when DFPS staff uncover evidence of possible crimes. However, no duplication of services exists.

Finally, DFPS contracts for certain prevention services. No other state or federal agency contracts for services directly intended to reduce delinquency, abuse, and neglect of children and youth.

F. In general, how do other states carry out similar functions?

All states protect children and adults from abuse and neglect through similar functions of those housed at DFPS; however, the methods and organizational structures of doing so vary.

Child Protective Services

Some states, like Florida and Texas, have centrally administered state-based child welfare systems. Other states, like California and Pennsylvania, have county-based systems for protecting children and working with families to prevent abuse and neglect in the future. Some areas even use city-based welfare systems, like the one in New York City. However, all states have child protective services within their borders in one form or fashion, and must follow the same federal standards to receive a substantial portion of their budgets.

Adult Protective Services

Some states have centrally administered systems to protect people who are persons aged 65 or older or who have disabilities from abuse, neglect, and exploitation. Other states have county-based systems. For example, Minnesota and Colorado counties provide protective services for adults, while Michigan and Tennessee have state-administered programs like Texas.

Child Care Licensing

Childcare regulation and licensing is administered at different levels of government in different states. For example, in Colorado, the regulation of childcare is state-supervised and county-administered. In California, Florida, and Texas, the regulatory program is located in the states' protective service agencies. In Kansas and Utah, the regulatory program is located in the state's department of health. And, in Ohio, the childcare regulatory program is located within the department of jobs and family services.

G. What key obstacles impair your agency's ability to achieve its objectives?

The Department faces a variety of obstacles that impair its ability to most effectively and efficiently achieve its strategic objectives. These include the following.

GAPS IN MENTAL HEALTH RESOURCES AND OTHER COMMUNITY SERVICES

Child Protective Services (CPS) and Adult Protective Services (APS) provide services to certain children, youth, and adults because other, more appropriate avenues are unavailable to them.

Child Protective Services

CPS and the Department of State Health Services (DSHS) are partnering to address the need for mental health services for Texas' children without turning to CPS to obtain placement for residential treatment. DSHS received substantial funding, in the 83rd Regular Legislative Session, to improve mental health services, which should positively impact APS and CPS clients. Sometimes parents of children with serious emotional disorders cannot access mental health services for their child because of waiting lists for community-based services or because they either (1) lack health insurance that covers comprehensive mental health treatment, or (2) because their health insurance caps the amount of mental health care provided. Some families find themselves with no other options than to turn to CPS to obtain placement for their child in a residential treatment center, or as a way to receive other intensive mental health services. Unfortunately, for a child in such circumstances to receive those services from the State, CPS must take custody of the child, based on a finding of abuse or neglect. In addition, the juvenile justice system often discharges their clients to CPS.

Such cases strain an already taxed State system and county budgets, as the county must fund legal representation and court time.

Adult Protective Services

The vast majority of APS investigations involve allegations of client self-neglect. Many older Texans, often socially isolated, do not connect with social services until their situation deteriorates to the point someone calls APS because they notice potential self-neglect. For adults with mental illness or other disabilities, the local social service agencies, such as a mental health authority, often depend on APS to help meet the basic living or other needs of their clients. In essence, in many communities, APS is a service provider of last resort.

UP-FRONT DUE PROCESS FOR CPS AND APS INVESTIGATIONS

DFPS's ability to share information outside the agency to protect children and vulnerable adults is hampered by the lack of timely due process in findings of abuse, neglect, or exploitation.

Statutory gaps and inconsistencies related to due process exist between CPS and APS cases. When CPS makes a finding that a person committed abuse or neglect that person is a “designated perpetrator” (DP). Statute entitles the DP to an administrative review of the finding, but not to a due-process hearing to contest the finding. The administrative review is primarily a desk review conducted by a CPS employee not involved in the initial investigation. Some cases also receive a secondary review by the Office of Consumer Affairs (OCA). While the administrative review helps ensure evidence supports the finding, it does not include important procedural protections afforded in a due process hearing, such as the right to present and cross-examine witnesses. In contrast, statute provides that some APS cases DPs receive a due process hearing.

The lack of up-front due process in CPS and some APS cases delay DFPS’s ability to share findings outside the agency for the protection of children or vulnerable adults. Under most circumstances, the Department must provide a due process hearing before releasing the finding to an outside entity, such as an employer. For example, a designated perpetrator might apply to work in a childcare facility years after the finding; however, the passage of time unfairly disadvantages both the Department’s ability to present evidence to support the finding as well as the DPs’ ability to defend themselves.

In response to a lawsuit in 2009, and in a second opinion issued in August 2013, the Third Court of Appeals urged the Legislature to fix this problem by requiring that due process be offered more timely. These decisions have signaled that a future challenge on somewhat different facts may result in the Department’s process being declared constitutionally invalid. DFPS’s current strategic plan lays out a long-term strategy for providing up-front due process hearings to address this barrier, but this strategy is dependent upon the Legislature to appropriate additional resources.

IMBALANCE IN GEOGRAPHIC DISTRIBUTION OF SERVICES

Many Texas communities lack services for both children and adults who have been abused or neglected.

The CPS and APS programs are frequently called upon to serve children, families, and vulnerable adults, either because communities lack local resources or services. For example, finding services for children in their own communities can be difficult. Too often, CPS must move children in foster care to far away cities because the services they need do not exist in their local communities. These children leave behind siblings, peers, families, schools, churches, and other support networks. To a large extent, the current foster care system structure does not encourage providers to establish services where the services are needed. DFPS uses an “open enrollment” process to procure residential childcare (foster care) services for specific placement types.

While DFPS does enlist a sufficient number of qualified providers, the process offers no assurance that providers will locate in communities where residential services are needed. As a

result, there is an imbalance in the geographic distribution of foster care services throughout the state. For example, one area of Texas may have a large number of basic foster care homes but few, if any, therapeutic settings such as residential treatment centers. This is problematic for DFPS caseworkers who want to place children close to home, for providers who must care for children from other communities and, most importantly, for the children being served.

Differences in resources in rural and urban communities also affect both CPS and APS. For APS, rural communities tend to have fewer resources available to support older Texans, APS service maybe the only resource available. In urban communities, services for adults with mental illness or other disabilities may exist but are often overwhelmed by the demand. When a community lacks resources, APS intakes often increase, as does the demand for APS to purchase client services to compensate for the lack of services in the community.

USE AND DETECTION OF ILLEGAL AND LEGAL SUBSTANCES

DFPS faces obstacles in dealing with clients and caregivers with substance abuse problems due to the difficulty of detecting new illegal substances, the high cost of testing, and the need for ongoing training.

DFPS serves many families who have substance abuse problems, as using alcohol and drugs is also one way that families and youth try to cope with the trauma of abuse, neglect, removal, and separation. Substance abuse, including synthetic substances, poses a threat to child safety and can lead to serious harm. While drug testing continues to improve and advance, new substances are continually introduced into the drug culture that either cannot be detected or are expensive and difficult to detect. DFPS continues to face obstacles related to the difficulty of detecting new substances, the ways the substances are packaged, and the cost of drug testing for a wide variety of substances.

Some APS clients are also affected by the medical and psychiatric effects of long-term substance abuse. This usually manifests in self-neglect or medical neglect and APS staff are not sufficiently trained or versed in the effects of alcohol and drugs on persons age 65 or older and persons with disabilities, nor is there any specific funding to provide treatment to family or significant others who provide care. While APS is allowed to purchase treatment for family members, it rarely does so because of the high cost and need to prioritize the limited amount of APS service funding.

LACK OF NEEDED INFORMATION AND TECHNOLOGY SKILLS

The competition for technology workforce is an obstacle to DFPS's ongoing efforts to give frontline staff the tools and related services they need to work most efficiently.

Competition in both the private and public sectors and less desirable state salaries are compounded by the fact that DFPS salaries are, on average, more than 13.5 percent below other state agencies for the same job description.

RURAL NETWORK CONNECTIVITY

Many DFPS offices lack the network bandwidth to meet the daily business needs of staff.

DFPS has 293 office locations across the state of Texas. Approximately 40 percent, or 120 mostly rural offices, do not have sufficient network bandwidth, which reduces staff productivity. For example, one person attending a small multimedia distance learning training session on their computer at a low bandwidth site will use all the bandwidth for that location, which prevents any other network traffic for other work to be performed.

H. Discuss any changes that could impact your agency's key functions in the near future (such as changes in federal law or outstanding court cases).

One pending court case has the potential to significantly impact agency operations. In March 2011, Children's Rights of New York, a national child welfare advocacy group, filed a federal class action lawsuit against the Texas Governor, the Health and Human Services Commission (HHSC), and the Department of Family and Protective Services (DFPS). Children's Rights seeks to establish a super-class and four smaller subclasses of children for whom Texas has permanent managing conservatorship (PMC), totaling more than 12,000 children. Specifically, Children's Rights seeks to establish the following.

1. A class on behalf of all children in Texas's PMC, alleging that Texas maintains an insufficient number of caseworkers.
2. A subclass on behalf of PMC children in licensed foster care, alleging that Texas has an insufficient number, geographic distribution, and array of placements for children, fails to oversee and monitor its licensed foster care placements, and children are denied the right of familial association because sibling groups are separated and children are moved far from family members.
3. A subclass of PMC children in foster group homes, alleging that Texas fails to ensure that foster group homes meet "accepted professional standards" of staffing ratios, caregiver training, and requiring "waking caregivers" (caregivers awake around the clock).
4. A subclass of PMC children at a basic level who are placed in a general residential operation (GRO), alleging that placing basic level children in a non-emergency GRO does not provide them the least restrictive environment.
5. A subclass of PMC children in unverified, kinship placements, alleging that Texas' decision to not require kinship placements to be verified deviates from "accepted professional standards" of licensing and verification, caregiver training, and providing monthly foster care financial support.

As a remedy for their complaint, Children’s Rights seeks broad injunctive relief against DFPS. The specific relief Children’s Rights seeks consists of requiring:

1. Texas to ensure that all PMC children have a Child Protective Services (CPS) caseworker whose caseload does not exceed standards established by the Child Welfare League of America or the Council on Accreditation (lower than CPS’s current caseload levels).
2. An assessment by unknown “qualified professionals” to determine the aggregate need of all PMC children in licensed foster care “for additional placements that will provide the necessary number, geographic distribution, and array of placement options,” the time period by which these placements will be developed, and the steps necessary to implement those placement options.
3. An assessment by unknown “qualified professionals” to determine “the resources and processes necessary to ensure that [Texas] has the capacity to monitor and enforce compliance” with licensing standards for licensed foster care placements, the time period by which the resources and processes will be developed and implemented, and the steps necessary to develop and implement the resources and processes.
4. Texas to stop placing children in foster group homes until they comply with “accepted professional standards.”
5. Texas to stop placing basic level children in general residential operations.
6. Texas to license, train, and pay all kinship homes in the same manner that it does other licensed foster care providers.

Children’s Rights also seeks the appointment of a court monitor to oversee implementation of this relief and attorneys’ fees.

If the court grants the relief requested by Children’s Rights, agency operations will be affected in a number of ways, depending on the order. The agency would likely be subject to long-term oversight by the court, as well as unknown expert panels empowered to make recommendations regarding agency operations. In the 19 or so states Children’s Rights sued before Texas, the average length of litigation exceeds 15 years. Only one state has exited its consent decree with Children’s Rights in less than ten years.

I. What are your agency’s biggest opportunities for improvement in the future?

1. MAINTAINING HIGH QUALITY WORKFORCE

Additional resources provided by the Texas Legislature provide unique opportunities to increase staff retention and improve the quality of the DFPS workforce.

Recruiting and retaining high-quality talent remains one of the largest challenges for DFPS. Thanks to a significant infusion of resources by the 83rd Texas Legislature, the agency has a new opportunity to begin addressing this long-standing concern.

2. IMPROVING STAKEHOLDER ENGAGEMENT AND COMMUNITY PARTNER ENGAGEMENT

The Department should engage stakeholders to assist the agency in serving clients more effectively.

The Department works to engage and include stakeholders in identifying agency operations, programs, or policies that could be strengthened in order to better serve clients. Stakeholders, including advocates, law enforcement, judges, family members, providers, philanthropic foundations, non-profit organizations, therapists, and legislators, care deeply about issues their community faces and the well-being of the families in those communities.

The Department has worked to improve communication with stakeholders by proactively releasing information on the agency's public website, regularly visiting with stakeholder groups, and developing public education campaigns. The Department has improved its responsiveness to inquiries and provides many ways for stakeholders to influence rulemaking and policy, including participation in workgroups, stakeholder forums, and by joining regional advisory groups, as well as by submitting public comments via the Texas Register.

The Department also puts a high priority on State Office interaction with regional staff and stakeholders through meetings and forums across the state. The agency has the opportunity to enhance its effectiveness through the engagement of these stakeholders, some with substantial expertise and resources, in the work of the Department and with families in their communities.

3. CLARIFY JURISDICTIONS IN APS INVESTIGATIONS

Clarification of state law to give the APS Facility program responsibility for investigating all providers of services for persons with IDD.

Chapter 48 of the Human Resources Code authorizes APS to investigate abuse, neglect, and exploitation through two distinct programs: the APS In-Home program and the APS Facility program. The purpose of the APS In-Home program is to determine if older adults (age 65 and older) or adults with disabilities who live in their own homes and communities are suffering abuse, neglect, or exploitation, and to provide or arrange for services to protect them. The purpose of the APS Facility program is to investigate abuse, neglect, or exploitation of individuals with intellectual and developmental disabilities (IDD) who are receiving state-funded services. Under an APS Facility investigation, the agency provides investigative reports to the service provider with operational authority of the facility and can take action to protect the individual client.

The APS Facility program was initially established to provide independent investigations in state facilities operated by the former TDMHMR. As TDMHMR's services expanded beyond the state-run facilities, the Facility program's investigative scope expanded to include providers of services in the community. However, APS's authorizing language has not evolved along with the move to community-based IDD services provided by the Department of Aging and Disability

Services (DADS). As a result, there are now providers of services to individuals with IDD (such as through the Consumer Directed Services model, among others) that are investigated by the APS In-Home program instead of the Facility program. Therefore, the service provider does not receive the investigative report that would provide information necessary for the service provider to take personnel action that may be appropriate to protect the client.

In addition, there are two waiver programs for persons with IDD, which originated in the Texas Department of Human Services (TDHS), that the APS Facility program has never had authority to investigate. The In-Home program currently conducts investigations of providers in these waiver programs.

State law could clarify that the APS Facility program investigates all providers of services for persons with IDD, including community-based services such as waiver programs, to ensure appropriate actions can be taken to protect these clients.

4. CONTINUED IMPROVEMENT IN ADULT PROTECTIVE SERVICES

APS should develop a more effective assessment tools to help APS caseworkers make better case decisions.

The APS State Office obtains direct input from field staff through two program improvement committees and conducts periodic regional reviews of each APS region. APS also participates in activities with the National Association of Adult Protective Services, and the APS management team develops an annual business plan to determine improvement projects. Two current priorities of particular note are the following.

- APS identified the need to better target who it serves, in part, to help address the tension in its safety net function and to get ahead of the demographic curve of rapidly increasing target populations.
- APS In-home caseworkers currently use the IMPACT-based Client Assessment and Risk Evaluation (CARE) tool to assess client risk. After using the CARE tool for six years, APS determined caseworkers needed a new assessment model to best protect APS clients from the risk of ongoing abuse, neglect, and exploitation (ANE). APS is implementing a process to develop new assessment tools. (This is described further in the major issues section of the report because of a needed legislative change to fully implement the new casework practice model.) New assessment tools will help APS caseworkers, particularly the less experienced workers, make better decisions at critical points in a case.

5. ENHANCING INTERAGENCY PARTNERSHIP, COORDINATION, AND INFORMATION SHARING

While interagency partnerships, coordination, and information sharing improved greatly since HHS consolidation, there are still opportunities for improvement.

- Effective collaborations help align goals, priorities, and resources between agencies; minimize the duplication of efforts; and provide increased protection and support for

vulnerable Texans. DFPS has identified the following ways to enhance interagency partnership, coordination, and information sharing.

- The APS program works with the Department of Aging and Disability Services (DADS) to ensure compliance with a Department of Justice settlement agreement on State Supported Living Centers. Improved communications are needed between APS, DADS, the Health and Human Services Commission (HHSC), and the Office of the Attorney General (OAG) on the status of the monitoring process and the evolving nature of the interpretations of the settlement requirements.
- The APS program collaborates with DADS, the Department of State Health Services (DSHS), and Disability Rights Texas to improve APS facility investigations. This includes a Process Improvement workgroup to address issues and coordinate effective service delivery. APS has and will continue to talk with the workgroup about the scope of facility investigations and sharing reported information with other agencies. The APS program, DADS, and HHSC need to work together to clarify jurisdiction in APS abuse, neglect, and exploitation investigations as they relate to the implementation of S.B. 7, 83rd Legislature, Regular Session, 2013, since this was not specifically addressed in the legislation.
- The APS program works with DADS on issues related to regulatory responsibilities. An example is the problem of investigating allegations of abuse, neglect or exploitation in unlicensed boarding homes. Unlicensed boarding homes fall into an area of overlapping responsibility. APS handles abuse, neglect, and exploitation investigations and DADS licenses boarding homes under certain criteria. Meanwhile, some cities and counties regulate such homes and others do not. APS makes referrals to DADS on a case-by-case basis, but also has the opportunity to improve coordination and communication with DADS to ensure the protection of people living in these settings.
- DFPS and the Texas Juvenile Justice Department (TJJD) serve youth who are jointly involved with both agencies to ensure coordination of services for CPS youth involved with the TJJD. There is a monthly automated exchange of data to assist the staff of both agencies in monitoring the CPS youth involved with TJJD. In 2010, the Georgetown University's Center for Juvenile Justice Reform began a pilot project with Travis County Juvenile Probation Department and the local CPS office to implement the Crossover Youth Practice Model. Since then, the pilot effort has expanded into five more counties: Bexar, Dallas, Tarrant, McClennan, and El Paso. Other counties with populations of these youth have expressed an interest in implementing the practice model.
- DFPS relies on agency and community collaboration in the area of substance abuse treatment to improve child safety and support families. DSHS's success in an effort to expand abuse and provider treatment capacity is critical to keeping families out of the child welfare system and reunifying families. Other opportunities include:
 - working with the Texas Office for Prevention of Developmental Disabilities to develop training for CPS caseworkers on fetal alcohol spectrum disorders;
 - collaborating with the Texas Alliance for Drug Endangered Children to create and maintain Drug Endangered Children Teams; and

- working with DSHS and the Texas Supreme Court Children’s Commission to establish new family drug-treatment courts.
- DFPS collaborates with DADS to ensure the well-being and safety of youth with special needs and who are aging-out of foster care by referring the youth to the DADS guardianship program and helping the youth to secure benefits such as a Home and Community-based Services Medicaid waiver. In fiscal year 2013, DADS allocated 10 waivers for DFPS children with intellectual and developmental disabilities in General Residential Operations facilities. Access to services and supports enabled these children to relocate into family-like settings in the community such as HCS foster family homes. DADS will increase the allocation of Home and Community-based Services waivers for DFPS children in general residential operations to 25 in the FY 2014-2015 biennium. This collaboration is an ongoing opportunity and DFPS will continually determine the need for additional HCS GRO slots.
- Maintaining communication about services, issues, and areas for improvement has been an on-going hallmark of STAR Health stakeholders, which include the CPS program, HHSC and their contractors. Maintaining a high level of communication and input is critical to meeting the unique needs of children in foster care as additional services are offered, such as increasing medical transportation, benefits for children dually eligible for Medicaid and Medicare, and continuing Medicaid eligibility for youth transitioning out of foster care.
- For almost three decades, DSHS has conducted sanitation inspections at licensed childcare centers in areas where there was no local health inspector. DSHS will no longer conduct these inspections due to resource constraints. So, DFPS’s day care licensing program will now evaluate a center’s compliance with minimum standards relating to health and sanitation in these situations. DFPS sees an opportunity for enhanced collaboration with DSHS to ensure the people who conduct sanitation inspections have specific education and experience. This would result in better outcomes in licensed childcare centers and ultimately benefit children.
- Due to funding limitations and policy changes, DFPS launched an initiative to manage the expenditure of funds for daycare services to ensure they fall within budget and are properly authorized. Electronic interface between DFPS and the Texas Workforce Commission (TWC) is necessary to replace the current process, which relies on manually entering information from a form that DFPS staff email to TWC. Efficiency is dependent on the Texas Workforce Commission giving DFPS input on TWC system requirements and TWC’s commitment to supporting the interface. Once the interface is completed, DFPS sees a need for regular communication to ensure ongoing collaboration and communication between regional daycare coordinators and local workforce development boards on issues such as data corrections and notifying DFPS when children are absent. Joint training is one way to address these issues.
- DFPS is on the cutting edge of mobile casework and technology. DFPS sees an opportunity for greater efficiencies and less administrative burdens on frontline staff. This opportunity lies in updating the Comptroller of Public Accounts’ requirements on accounting for state property (Statewide Accounting Requirements) to meet today’s technology landscape.

Specifically there is a need to adjust the negligence-review processes and thresholds to fit higher-volume scenarios. The current requirements fit an old model of agency organization and assets (e.g. TVs, desks, and single office locations) and do not take into account a modern workforce with multiple pieces of mobile technology assigned to thousands of caseworkers statewide.

6. IMPROVED REVENUE GENERATION AND FEE COLLECTION:

Statute lacks needed flexibility in setting Child Care Licensing fees.

Statute requires Child Care Licensing (CCL) to collect licensing and background check fees and deposit them into the General Revenue Fund. Fee amounts are set in statute and DFPS does not have authority to adjust fees to support the cost of childcare regulation. Fees on childcare operations have not increased in more than 25 years and fee collections do not meet or exceed appropriations for the CCL program. If specific licensing fee amounts were removed from statute, DFPS could adjust fees so that the childcare industry would pay a greater share of its regulatory costs and potentially make more revenues available to provide greater protection to the public.

7. ECHNOLOGY INNOVATION AND INTEGRATION

Investment in technology would increase operational efficiency and improve services.

GoMobile Initiative

The DFPS GoMobile helps front line staff work more flexibly and efficiently. Direct delivery staff has several tools that allow them to update their cases on the go. These tools include tablet PCs, laptops, printers, scanners, and copiers, as well as tools that keep them connected (such as smart phones, WiFi) and mobile applications that let them access documentation, resources, and tools. DFPS also revised its office space template to incorporate mobility concepts and reduce the agency's footprint by combining or closing small offices and saving space when feasible.

Using Video Conferencing, Virtual Desktop Infrastructure and Social Media

DFPS is currently expanding the agency's video conference capability to assure it works with iPhone 4S smartphones and other consumer-grade video conference technologies to enable face-to-face conversations with clients, service providers, and courts - anywhere, any time, and on any device.

Another possible innovative technology DFPS could leverage is Virtual Desktop Infrastructure (VDI), the practice of hosting a desktop operating system within a virtual machine running on a centralized server. By leveraging VDI, caseworkers could access training and perform information related work efficiently and quickly.

IMPACT Modernization

Information Management Protecting Adults and Children in Texas system (IMPACT) is the core casework application used by every program within DFPS. This application is used to record an intake, and then document the investigation and all other subsequent case actions from placement in foster care through adoption. A four-year modernization initiative (the first two years of which were funded by the 83rd Legislature) will transform this 17-year-old system into a modern web application, and enable DFPS and approximately 12,000 external partners (Judicial, CASA, Law Enforcement, CPAs, and so on) to efficiently and effectively enter, process, and analyze case information. The benefits of a modernized IMPACT include the following.

- Less training for new staff.
- Quicker entry and access to case data.
- Dashboards to quickly identify time-sensitive tasks.
- A new security framework that allows external partners to access appropriate data.
- An application that is easier to modify as changes occur in Department policy or state and federal law.

Updating Technology as Statewide Intake

Statewide Intake (SWI) uses an automatic call distributor (ACD) system to route all incoming calls for the contact center. This system routes according to skillset (such as English-speaking, Spanish-speaking, Administrative Line, and so on), and chooses an available employee who has been ready to take a call for the longest period of time. DFPS purchased the ACD in 2006 and these systems are typically designed to last for 10 years.

J. In the following chart, provide information regarding your agency’s key performance measures included in your appropriations bill pattern, including outcome, input, efficiency, and explanatory measures.

Department of Family and Protective Services			
Exhibit 2: Key Performance Measures — Fiscal Year 2012			
Key Performance Measure	FY 2012 Target	FY 2012 Actual Performance	FY 2012 Percent of Annual Target
Average Hold Time: SWI (English)	8.7	8.5	97.7%
Percent Absence Repeat Maltreatment 6 Months (CPS)	96.70%	97.10%	100.4%

Department of Family and Protective Services
Exhibit 2: Key Performance Measures — Fiscal Year 2012

Key Performance Measure	FY 2012 Target	FY 2012 Actual Performance	FY 2012 Percent of Annual Target
Percent Legal Resolution in 12 Months	59.90%	59.60%	99.5%
CPS Caseworker Turnover Rate	23.80%	26.10%	109.7%
Percent CYD Youth Not Referred to JPC	98.00%	98.10%	100.1%
Percent Abused Adults Served	80.70%	80.90%	100.3%
Incidence of MHMR Abuse per 1,000 Served	5.1	5.4	105.9%
APS Caseworker Turnover Rate	18.00%	19.50%	108.1%
Percent Validated Occurrences Placing Children at High Risk	43.60%	43.60%	100.0%
Number of CPS Child Abuse and Neglect Reports	229,382	206,200	89.9%
Number of Complete CPS Investigation	171,371	166,211	97.0%
Number of Confirmed CPS Cases	39,347	38,725	98.4%
Number of FPS Children Adopted	4,868	5,040	103.5%
CPS Daily Caseload: Investigation	27.4	24.7	90.0%
CPS Daily Caseload: Family Based	17.5	14.3	81.6%
CPS Daily Caseload: Substitute Care	29.2	33.7	115.4%
Average Number of Days TWC Foster Daycare	27,948	42,616	152.5%
Average Cost Per Day: TWC Foster Daycare	\$21.46	\$21.94	102.2%
Average Number of Days TWC Relative Daycare	35,968	34,829	96.8%

Department of Family and Protective Services
Exhibit 2: Key Performance Measures — Fiscal Year 2012

Key Performance Measure	FY 2012 Target	FY 2012 Actual Performance	FY 2012 Percent of Annual Target
Average Cost Per Day: Relative Daycare	\$20.13	\$20.71	102.9%
Average Monthly Foster Care Days	517,455	500,324	96.7%
Average Monthly Number of Foster Care FTES	16,966	16,404	96.7%
Average Monthly Foster Care Expenditures	\$32,357,956	\$31,160,924	96.3%
Average Monthly Payment for Foster Care FTE	\$1,907.25	\$1,899.56	99.6%
Average Monthly Number of Adoption Subsidies	35,722	35,973	100.7%
Average Monthly Number of Children: Permanency Care Assistance	211	420	199.2%
Average Monthly Payment: Adoption Subsidy	\$425.01	\$429.09	101.0%
Average Monthly Payment: Permanency Care Assistance	\$418.15	\$397.59	95.1%
Average Monthly Number of Children Caregiver Monetary Assistance	706	1,080	153.0%
Average Monthly Cost Per Child Caregiver Monetary Assistance	\$857.40	\$727.80	84.9%
Average Monthly Number of STAR Youth Served	5,359	5,863	109.4%
Average Monthly Cost of STAR Youth	\$284.32	\$243.84	85.8%
Average Monthly Number of CYD Youth Served	4,136	5,530	133.7%
Average Monthly Cost of CYD Youth	\$101.53	\$69.91	68.9%
Number of Complete APS Investigations	87,605	87,487	99.9%
Number of Confirmed APS Investigations	56,778	59,595	105.0%

<p style="text-align: center;">Department of Family and Protective Services Exhibit 2: Key Performance Measures — Fiscal Year 2012</p>			
Key Performance Measure	FY 2012 Target	FY 2012 Actual Performance	FY 2012 Percent of Annual Target
APS Daily Caseload: In-Home	35.1	29.6	84.2%
Number of MH&ID Investigations	9,854	10,803	109.6%
APS Daily Caseload: MH and ID	3.3	3.6	108.5%
Number of Completed Inspections	46,377	40,491	87.3%
Number of Completed Child Abuse and Neglect Investigations	3,969	3,970	100.0%

III. HISTORY AND MAJOR EVENTS

Provide a timeline of your agency’s history and key events, including:

- the original purpose and responsibilities of your agency;
 - major changes in responsibilities or statutory authority;
 - changes to your policymaking body’s name or composition;
 - significant changes in state/federal legislation, mandates, or funding;
 - significant state and federal litigation that specifically affects your agency’s operations;
- and
- key changes in your agency’s organization (such as a major reorganization of the agency’s divisions or program areas).

The Legislature established the Department of Family and Protective Services (DFPS) by renaming the Department of Protective and Regulatory Services.

The following history contains major events related to the programs delivered by DFPS today, as well as organizational changes that lead up to its creation. Events relating to the establishment today’s Health and Human Services system are highlighted in bold.

1939

Senate Bill 26, known as the Public Welfare Act of 1939, creates the Texas Department of Public Welfare.

1977

The Legislature renames the Texas Department of Public Welfare the Texas Department of Human Resources.

1991

The Legislature creates the Department of Protective and Regulatory Services (PRS). PRS assumes all responsibilities for child and adult protective services and Child Care Licensing from the Department of Human Services (DHS). In addition, investigations of abuse and neglect in TDMHMR facilities are transferred from MHMR to PRS.

The Legislature abolishes the Health and Human Services Coordinating Council and creates the Texas Health and Human Services Commission (HHSC), to oversee the state's major health and human services agencies: Texas Department on Aging, Commission on Alcohol and Drug Abuse, Commission for the Blind, Commission for the Deaf and Hearing Impaired, Interagency Council on Early Childhood Intervention, Department of Health, Department of Human Services, Juvenile Probation Commission, TDMHMR, Department of Protective and Regulatory Services, and the Rehabilitation Commission. The Legislature originally placed the Texas Youth Commission under HHSC, but removed it in 1993.

1992

The Texas Department of Protective and Regulatory Services assumes all responsibilities for child and adult protective services and Child Care Licensing from the Department of Human Services on September 1, 1992.

1995

The Legislature transfers responsibility for investigations of abuse, neglect, and exploitation in community MHMR centers from MHMR to the Texas Department of Protective and Regulatory Services.

2003

As part of H.B. 2292, the Legislature renames the Department as the Department of Family and Protective Services and places it under the oversight of the Health and Human Services Commission.

2004

The Governor directs HHSC to review and reform DFPS' Adult Protective Services (APS) and Child Protective Services (CPS) programs.

2005

The Legislature substantially reforms CPS and APS', as well as changes the Child Care Licensing (CCL) program, focusing on strengthening investigative processes.

2007

The Legislature continues to improve the CPS program, by directing the agency to hire more caseworkers, improve response to reports of abuse, and form a pilot program to privatize 10 percent of case management (a directive that did not receive funding).

2009

The Legislature charges APS with investigating abuse, neglect, and exploitation in a new setting – private intermediate care facilities.

The Legislature also codifies licensing exceptions in statute that had previously been handled by rule and expands services and benefits for youth in foster care.

2011

The Legislature significantly reduces funding for many DFPS programs and Prevention and Early Intervention (PEI) services are particularly affected.

The Legislature did support CPS' Foster Care Redesign project, which authorizes DFPS to change the way it contracts with and pays for foster care services so as to create incentives for improving outcomes for children.

2013

The 83rd Legislature provides funding to DFPS targeted to improve the safety of children, strengthen staff retention, expand prevention services, improve kinship services, and enhance agency infrastructure. DFPS receives an additional 1000 staff to lower caseloads for CPS Investigations, Conservatorship, and Kinship workers, maintain caller hold time in Statewide Intake, and investigate illegal childcare. The Legislature also funds an update to the DFPS automated casework systems, changes in the caseworker career ladder program and an increase in relative caregiver monetary assistance one-time integration payments for sibling groups.

The Legislature also passes several large initiatives to improve outcomes for children, and enhance safety at residential childcare facilities.

IV. POLICYMAKING STRUCTURE

Department of Family and Protective Services			
Exhibit 3: Policymaking Body			
Member Name	Term/ Appointment Dates/ Appointed by ___ (Such As Governor, Lt. Governor, Speaker)	Qualification (Such As Public Member, Industry Representative)	City
Kyle L. Janek, M.D. Executive Commissioner	Appointed on September 1, 2012, by Governor Perry. Term expires February 1, 2015.	Board-certified anesthesiologist. Former State Senator and former member of the Texas House of Representatives.	Austin
Family and Protective Services Council			
Gigi Edwards Bryant (Chair)	Appointed by Governor Perry on 07-10-2006 Term Date: 2-1-2013	Public Member, also meets Human Resource Code, Section 40.021 mandate that one person be a person who was a child in foster care	Austin
Imogen Sherman Papadopoulos (Vice Chair)	Appointed by Governor Perry on 07-28-2004 Term Date: 2-1-2015	Public Member	Houston
Patricia Cole	Appointed by Governor Perry on 05-26-2011 Term Date: 2-1-2017	Public Member	Fort Worth
Debbie Epperson	Appointed by Governor Perry on 03-26-2007 Term Date: 2-1-2013	Public Member	Dallas
Christina "Tina" Rawls Martin	Appointed by Governor Perry on 04-06-2009 Term Date: 2-1-2015	Public Member	Mission
Benny Morris	Appointed by Governor Perry on 05-26-2011 Term Date: 2-2-2017	Public Member	Cleburne

Department of Family and Protective Services			
Exhibit 3: Policymaking Body			
Member Name	Term/ Appointment Dates/ Appointed by ___ (Such As Governor, Lt. Governor, Speaker)	Qualification (Such As Public Member, Industry Representative)	City
Linda Bell Robinson	Appointed by Governor Perry on 11-09-2004 Term Date: 2-1-2013	Public Member	Houston
Scott Rosenbach	Appointed by Governor Perry on 04-06-2009 Term Date: 2-1-2015	Public Member	Amarillo
VACANT			

Appointed by the Governor, with the advice and consent of the Senate, nine Family and Protective Services Council members serve staggered six-year terms, with the terms of three members expiring February 1 of each odd-numbered year. While Council members represent the general public, individuals eligible for appointment must demonstrate an interest in and knowledge of programs administered by the Department of Family and Protective Services.

A. Describe the primary role and responsibilities of your policymaking body.

Appointed by the Governor, with the advice and consent of the Senate, the Executive Commissioner is the rulemaking and policymaking authority for the entire Health and Human Services (HHS) system. The following five HHS system agency councils assist the Executive Commissioner in this system oversight role:

- Health and Human Services Council,
- Aging and Disability Services Council,
- Assistive and Rehabilitative Services Council,
- Family and Protective Services Council, and
- State Health Services Council.

Statutorily created by the 78th Legislature as part of the H.B. 2292 reorganization, the Family and Protective Services Council supports the Executive Commissioner in developing policy and

in rulemaking decisions specific to the functions of the Department of Family and Protective Services.

In addition to the Policy Council, the Executive Commissioner selects a Commissioner to act as an Executive Director of the agency. The DFPS Commissioner provides regular briefings to the Family and Protective Services Council at each quarterly meeting and works with the Council Chair to call subcommittee meetings as appropriate.

Another primary role and responsibility of the Family and Protective Services Council is providing an effective forum for public input into the Department of Family and Protective Services rules, policies, and budget priorities. Open public comments are a standing agenda item for each Council meeting.

Rules and policies affecting service delivery and programs originate within the Department. Once drafted, the DFPS Commissioner vets the change, seeking guidance from the Family and Protective Services Council; forwarding final recommendations to the HHSC policy advisor for review and final recommendation to the Executive Commissioner. The Executive Commissioner may make changes to the draft policy or rule and ultimately adopts the final product.

B. How is the chair selected?

The Governor appoints a member of the Family and Protective Services Council as the presiding officer (Council Chair) who serves in that capacity at the pleasure of the Governor. DFPS' Council has chosen to nominate a vice chair annually, in January. Per Council bylaws, the Council may also elect other officers, such as a secretary or committee chairs when they are necessary.

C. List any special circumstances or unique features about your policymaking body or its responsibilities.

The Executive Commissioner serves as the ultimate rule and policymaking authority for the entire HHS system. However, as previously discussed, five advisory councils support this decision-making process. This structure – a single Commissioner overseeing an enterprise of five system agencies – is unique in Texas government. The approach of having standing advisory councils that represent each agency's functions is also unique.

According to statute, one of the members of the Family and Protective Services Council must be a person who was a child in the foster care system under DFPS. If, after conducting a search, the Governor determines that no qualified individual under this subsection is available, the Governor may appoint another qualified person.

D. In general, how often does your policymaking body meet? How many times did it meet in FY 2012? In FY 2013?

Statute requires the Family and Protective Services Council to meet at least quarterly. The Council met quarterly in fiscal year 2012. In addition to regular meetings, Council members attended a variety of other meetings and agency events, and the chairs of each council met twice, and members from all five councils attended an annual coordination meeting.

E. What type of training do members of your agency's policymaking body receive?

Statute requires Family and Protective Services Council members to complete training before participating as an official Council member. Training program consists of information on the following subject areas:

- enabling legislation for the Council;
- roles and functions of the Department and the Council, including its advisory responsibilities;
- divisions of responsibility between the Executive Commissioner and the other HHS system agencies; and
- agency programs, rules, budget, and audit findings.

In addition, to agency-specific subject matter training, each Council member completes ethics training, as well as a review of procedures relating to the Open Meeting Act, Public Information Act, and the Administrative Procedures Act.

F. Does your agency have policies that describe the respective roles of the policymaking body and agency staff in running the agency? If so, describe these policies.

The Legislature created the Family and Protective Services Council to assist the DFPS Commissioner and Executive Commissioner in developing rules and policies for DFPS, including policies and rules governing the delivery of services and the rights and duties of individuals served by DFPS.

Purely advisory in nature, and unlike the boards that oversaw the legacy agencies pre-consolidation, the Family and Protective Services Council does not have a direct role in agency operations. To ensure Council members understand this unique role, training covers guiding principles, operating procedures, as well as roles and responsibilities.

G. What information is regularly presented to your policymaking body to keep them informed of your agency's performance?

During each regularly scheduled quarterly meeting, the DFPS Commissioner and senior agency staff brief the Family and Protective Services Council on a variety of subject matters, including the agency's performance, current priorities, and ongoing projects. Agency staff also apprises the Council of changes in federal law that affect service and program delivery at the state level. These briefings occur as part of the items presented for Council action or as items strictly for the purpose of informing the Council.

The Council also reviews and recommends the agency's annual operating budget and audit plans developed by the Internal Audit division. Council members also receive email updates, weekly at minimum, informing them of agency activities or issues, as well as legislative updates as needed.

H. How does your policymaking body obtain input from the public regarding issues under the jurisdiction of the agency? How is this input incorporated into the operations of your agency?

Negotiated Rulemaking and Stakeholder Groups

All rulemaking initiatives include a comment period wherein the agency receives comments on proposed draft rules or rule revisions. Often, as a part of this process, the agency may initiate a stakeholder working group to solicit feedback before actual draft rules, and the formal public input comment period, begins. Before implementing a major new initiative, staff may conduct stakeholder meetings across the state to gain additional feedback. For example, the Department utilized the Public Private Partnership advisory group, held multiple public meetings, and met with additional stakeholder groups to receive input on development of the Foster Care redesign model. Also, the agency formally responds to all comments submitted.

Advisory Committees and Task Forces

An advisory committee assists in developing policy and rule. A complete listing of all advisory committees is listed on the following page.

Open Council Meetings

Obtaining input from the public and stakeholders is a primary Family and Protective Services Council responsibility. The input presented to the Council by the public and stakeholders informs the advice the Council provides on rules and policymaking. The Council's guiding principles include a focus on the concerns and interests of consumers and constituents. The Council's guiding principles include a focus on hearing the concerns and interests of consumers and constituents.

To ensure stakeholder input is included in all Council functions, open public testimony, including written testimony, is a standing agenda item.

Since the DFPS Commissioner and senior staff members attend Family and Protective Services Council meetings, they also directly benefit from hearing public and stakeholder input. So public input not only helps the council shape its final advice and recommendations but also allows the DFPS Commissioner and senior staff to work with stakeholders to address their concerns.

I. If your policymaking body uses subcommittees or advisory committees to carry out its duties, fill in the following chart.

Department of Family and Protective Services			
Exhibit 4: Subcommittees and Advisory Committees			
Name of Subcommittee or Advisory Committee	Size/Composition/How Are Members Appointed?	Purpose/Duties	Legal Basis for Committee
Advisory Committee on Promoting Adoption of Minority Children	12 members appointed by the Executive Commissioner; at least six of the 12 members must be ordained clergy.	Facilitate increased adoptions of African-American and other minority children; study, develop, and evaluate programs and projects relating to community awareness and education, family support, counseling, parenting skills and education, and reform of the child welfare system.	House Bill 2468, 74 th Legislative Session
Parental Advisory Committee	The number of members and membership is determined by the Governor. When the committee last met, there were six members. The committee will reconvene when the Governor appoints a chair.	The Parental Advisory Committee shall advise the Department on policies affecting parents and their involvement with the Department including: (1) investigations of allegations of abuse or neglect;	TX. Human Resources Code; Title 2, Subtitle D, Chapter 40, §40.073

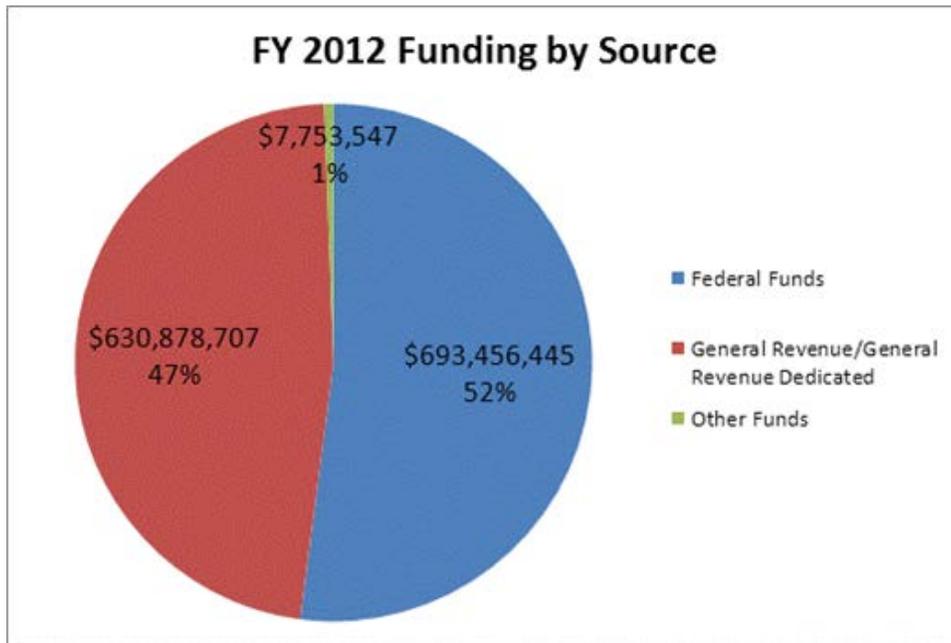
Department of Family and Protective Services
Exhibit 4: Subcommittees and Advisory Committees

Name of Subcommittee or Advisory Committee	Size/Composition/How Are Members Appointed?	Purpose/Duties	Legal Basis for Committee
		(2) designations of alternative placements for children; and (3) standards for persons who investigate reports of abuse or neglect on the state or local level.	

V. FUNDING

A. Provide a brief description of your agency's funding.

The Texas Department of Family and Protective Services (DFPS) operates almost exclusively on federal funds and State General Revenue. Less than one percent of the Department's funding comes from other sources. The DFPS appropriation for FY 2012 consisted of 52 percent federal funds, 47.4 percent General Revenue and General Revenue-Dedicated funds, and 0.6 percent other funds.



- **Federal Funds.** \$692,456,445: DFPS receives both entitlement funding and block grants from the U.S. Department of Health and Human Services. DFPS receives funding from 15 Catalog of Federal Domestic Assistance (CFDA) programs. All but one is under the authority of the Administration for Children and Families (ACF). ACF programs include entitlement funding for foster care, adoption assistance, guardianship assistance, and block grant funding such as Temporary Assistance for Needy Families, Social Services Block Grant, Child Care and Development Fund, and various child welfare programs. Medicaid is another funding source. DFPS is not a Medicaid operating agency but is allowed to claim Medicaid administration for certain activities. Most of these federal programs require state matching funds or a state maintenance of effort.
- **State Funds.** \$630,878,707: DFPS receives General Revenue funds to satisfy the state match requirements for federal funds as well as to fund costs that exceed block grant funding and to cover costs that federal funds are not allowed to cover. DFPS also receives dedicated-General Revenue funds from the Child Abuse and Neglect Prevention Trust Fund account. This account comes from county fees on marriage licenses and recording declarations of

informal marriage. \$20 of the \$60 marriage license fee and \$12.50 of the \$25 declaration of informal marriage fee must be sent to the Comptroller who deposits the money into the trust fund account. This trust fund (Account 5085) is dedicated to child abuse prevention programs. Appropriated amounts are transferred to the Child Abuse and Neglect Prevention Operating Account 5084, from which expenditures are made.

- **Other Funds.** \$7,753,547: Other funds consist primarily of interagency contract receipts, receipts from counties who augment appropriated child welfare staff by funding extra positions, and a portion of the child support collected by the Office of the Attorney General.

B. List all riders that significantly impact your agency's budget.

The FY 2012–2013 General Appropriations Act contain riders that affect DFPS. Below is a summary of those that significantly contribute to or affect the Department's budget. For a complete listing of all agency-specific riders, please see the General Appropriations Act.

Rider 3. Limitation on Expenditures for Conservatorship Suits. Prohibits general revenue from being used to pay for legal representation for children or their parents in suits in which the Department is seeking to be named conservator, unless the Governor has declared it an emergency. Without this rider, DFPS may be expected to pay for such costs by county governments.

Rider 6. Foster Care Rates. Restricts the Department's ability to transfer funds out of the foster care strategy by requiring prior written approval. For the FY 2014-2015 biennium, it also includes legislative intent that foster care redesign rates may not result in total expenditures for any fiscal year that exceed the appropriation, except for caseload growth.

Rider 15. Limitation on Transfers: CPS and APS Direct Delivery Staff. Restricts the Department's ability to transfer funds or FTEs out of the two direct delivery staff strategies (B.1.1 CPS Direct Delivery Staff and D.1.1 APS Direct Delivery Staff) by requiring prior written approval.

Rider 18. Medicaid and Title IV-E Federal Funds. Restricts the Department's ability to spend general revenue and TANF federal funds that are freed up when federal entitlement revenues exceed the amounts appropriated by requiring prior written approval.

Rider 20. CPS Investigative Pay. Authorizes the Department to pay a supplemental amount to Child Protective Services program investigative caseworkers and supervisors to help recruit and retain staff for those jobs.

Rider 30. Limitation on Appropriations for Daycare Services. Prohibits the Department from spending more than the amounts appropriated for Child Protective Services daycare without prior written approval.

C. Show your agency's expenditures by strategy.

Department of Family and Protective Services			
Exhibit 5: Expenditures by Strategy — FY 2012 (Actual)			
Goal/Strategy	Amount Spent	Percent of Total	Contract Expenditures Included (Actual)
A.1.1 Statewide Intake Services	\$18,127,344	1.36%	N/A
B.1.1 CPS Direct Delivery Staff	\$412,205,667	30.97%	N/A
B.1.2 CPS Program Support	\$43,541,394	3.27%	\$432,400
B.1.3 TWC Foster Daycare	\$11,786,827	0.89%	N/A
B.1.4 TWC Relative Daycare	\$9,100,605	0.68%	N/A
B.1.5 TWC Protective Daycare	\$18,574,704	1.4%	\$37,064,453 ¹
B.1.6 Adoption Purchased Services	\$6,245,863	0.47%	\$5,713,000
B.1.7 Post-Adoption Purchased Services	\$2,446,100	0.18%	\$2,415,179
B.1.8 PAL Purchased Services	\$8,868,194	0.67%	\$8,304,867
B.1.9 Substance Abuse Purchased Services	\$4,873,960	0.37%	\$2,848,759
B.1.10 Other CPS Purchased Services	\$22,684,200	1.70%	\$22,684,200
B.1.11 Foster Care Payments	\$381,926,525	28.69%	\$ 359,124,423
B.1.12 Adoption Subsidy Payments	\$193,981,339	14.57%	N/A
B.1.13 Relative Caregiver Monetary Assistance	\$7,859,926	0.59%	\$40,998
C.1.1 STAR Program	\$17,284,083	1.30%	\$16,792,154
C.1.2 CYD Program	\$4,815,652	0.36%	\$4,692,711
C.1.3 Texas Families Program	\$2,549,382	0.19%	\$2,281,924
C.1.4 Child Abuse Prevention Grants	\$4,183,643	0.31%	\$3,845,267 ²
C.1.5 Other At-Risk Prevention Programs	\$2,092,770	0.16%	\$2,092,770
C.1.6 At-Risk Prevention Program Support	\$848,180	0.06%	N/A
D.1.1 APS Direct Delivery Staff	\$50,981,192	3.83%	\$7,248,497
D.1.2 APS Program Support	\$5,196,635	0.39%	N/A
D.1.3 MH and MR Investigations	\$9,569,572	0.72%	N/A
E.1.1 Child Care Regulation	\$32,871,973	2.47%	N/A

Department of Family and Protective Services
Exhibit 5: Expenditures by Strategy — FY 2012 (Actual)

Goal/Strategy	Amount Spent	Percent of Total	Contract Expenditures Included (Actual)
F.1.1 Central Administration	\$14,253,012	1.07%	\$3,625,483 ³
F.1.2 Other Support Services	\$5,388,226	0.40%	\$2,713,098 ²
F.1.3 Regional Administration	\$355,366	0.03%	N/A
F.1.4 IT Program Support	\$23,715,309	1.78%	\$2,690,305
F.1.5 Agency-wide Automated Systems	\$14,761,056	1.11%	\$14,761,056
GRAND TOTAL:	\$1,331,088,699	100%	\$518,935,674⁴

Notes:

1. Except where noted, contract expenditure totals are FY 2012 actual dollars extracted from HCATS (see note 2). Expenditure data is interfaced into HCATS from the HHSC HHSAS system. Note that daycare strategies B.1.3, B.1.4 and B.1.5 are totaled together.
2. Contract expense totals are taken from the 8/16/2012 Legislative Appropriations Request projection where HCATS dollars are not cleanly traced to a single strategy. This may be due to timing differences in billing or program expense that is attributed to multiple program account codes.
3. Contract dollars for Strategy F.1.1, Central Administration, includes office supply costs attributable to strategies F.1.1 and F.1.3. The entire amount is shown in Strategy F.1.1.
4. Total contract dollars for all strategies includes both client service contracts and administrative service contracts. The total includes \$540,553 in various small administrative contracts under \$25,000 that are attributable to various strategies. One example is electronic work paper software for internal audit - total contract amount is under \$12,000.

D. Show your agency's sources of revenue. Include all local, state, and federal appropriations, all professional and operating fees, and all other sources of revenue collected by the agency, including taxes and fines.

Department of Family and Protective Services	
Exhibit 6: Sources of Revenue — Fiscal Year 2012 (Actual)	
Source	Amount
Appropriated Receipts – Child Support Collections	\$1,239,613
Appropriated Receipts – Other	\$5,452,277
Interagency Contracts	\$1,061,657
General Revenue	\$625,181,407
General Revenue-Dedicated	\$5,697,300
Federal Funds	\$692,456,445
TOTAL	\$1,331,088,699

E. If you receive funds from multiple federal programs, show the types of federal funding sources.

Department of Family and Protective Services				
Exhibit 7: Federal Funds — Fiscal Year 2012 (Actual)				
CFDA Title	State/ Federal Match Ratio	State Share	Federal Share	Total Funding
Title IV-E Guardianship Assistance – Administration	50/50	\$40,487	\$40,487	\$80,974
Title IV-E Guardianship Assistance – FMAP	FMAP (FFY)	\$683,225	\$952,067	\$1,635,292
Title IV-B, Part 2 Promoting Safe and Stable Families	25/75	\$9,769,902	\$29,309,706	\$39,079,608
Title IV-B, Part 2 Promoting Safe and Stable Families- Caseworker Visits	25/75	\$542,070	\$1,626,211	\$2,168,281
Temporary Assistance for Needy Families			\$232,348,853	\$232,348,853
Refugee and Entrant			\$3,662,485	\$3,662,485

Department of Family and Protective Services
Exhibit 7: Federal Funds — Fiscal Year 2012 (Actual)

CFDA Title	State/ Federal Match Ratio	State Share	Federal Share	Total Funding
Assistance State Administered Programs				
Child Care and Development Block Grant			\$30,050,098	\$30,050,098
Community-Based Child Abuse Prevention Grants			\$4,179,622	\$4,179,622
Title IV-E Chafee Education and Training Vouchers Program (ETV)	20/80	\$914,391	\$3,657,563	\$4,571,954
Adoption Incentive Payments			\$5,600,000	\$5,600,000
Children's Justice Grants to States			\$41,229	\$41,229
Title IV-B, Part I Child Welfare Services State Grant	25/75	\$6,246,686	\$18,740,058	\$24,986,744
Adoption Opportunities			\$274,963	\$274,963
Title IV-E Foster Care	25/75	\$5,754	\$17,262	\$23,016
Title IV-E Foster Care – Administration	50/50	\$88,025,694	\$88,025,694	\$176,051,388
Title IV-E Foster Care – FMAP	FMAP (FFY)	\$86,073,025	\$119,941,874	\$206,014,899
Title IV-E Foster Care – Training – 75%	25/75	\$2,514,150	\$7,542,450	\$10,056,600
Title IV-E Adoption Assistance – Administration	50/50	\$7,280,205	\$7,280,205	\$14,560,410
Title IV-E Adoption Assistance – FMAP	FMAP (FFY)	\$62,478,294	\$87,062,859	\$149,541,153
Title IV-E Adoption Assistance – Training – 75%	25/75	\$16,576	\$49,727	\$66,303
Title XX – Social Services Block Grant			\$33,585,895	\$33,585,895
Child Abuse and Neglect State Grants			\$3,210,939	\$3,210,939

Department of Family and Protective Services
Exhibit 7: Federal Funds — Fiscal Year 2012 (Actual)

CFDA Title	State/ Federal Match Ratio	State Share	Federal Share	Total Funding
Chafee Foster Care Independent Living	20/80	\$1,982,619	\$7,930,475	\$9,913,094
Title XIX Medicaid – Medical Assistance Program	50/50	\$7,325,723	\$7,325,723	\$14,651,446
TOTAL		\$273,898,800	\$692,456,445	\$966,355,245

Notes:

1. The non-federal share for this program is met by the state-funded cost of tuition for former foster care youth in state-supported institutions of higher education (reported by the Higher Education Coordinating Board)
2. Title IV-B regulations allow a state to use state fund expenditures that are not used to satisfy the required state funding match for any other federal title (but not to exceed the amount used for match in federal FY 2005).
3. Expenditures at the FMAP ratio in a given state fiscal year would be subject to two FMAP rates, depending on the month of the expenditure. Federal FY 2011 FMAP ratio - 39.44/60.56. Federal FY 2012 FMAP ratio - 41.78/58.22. State or non-federal share amounts above are based on projected collections in appropriation year 2012 and assume a rate of 41.78.
4. The non-federal share of this program is met in part by state General Revenue and also by cash or in-kind services reported by contracted service providers as allowed by federal statute.

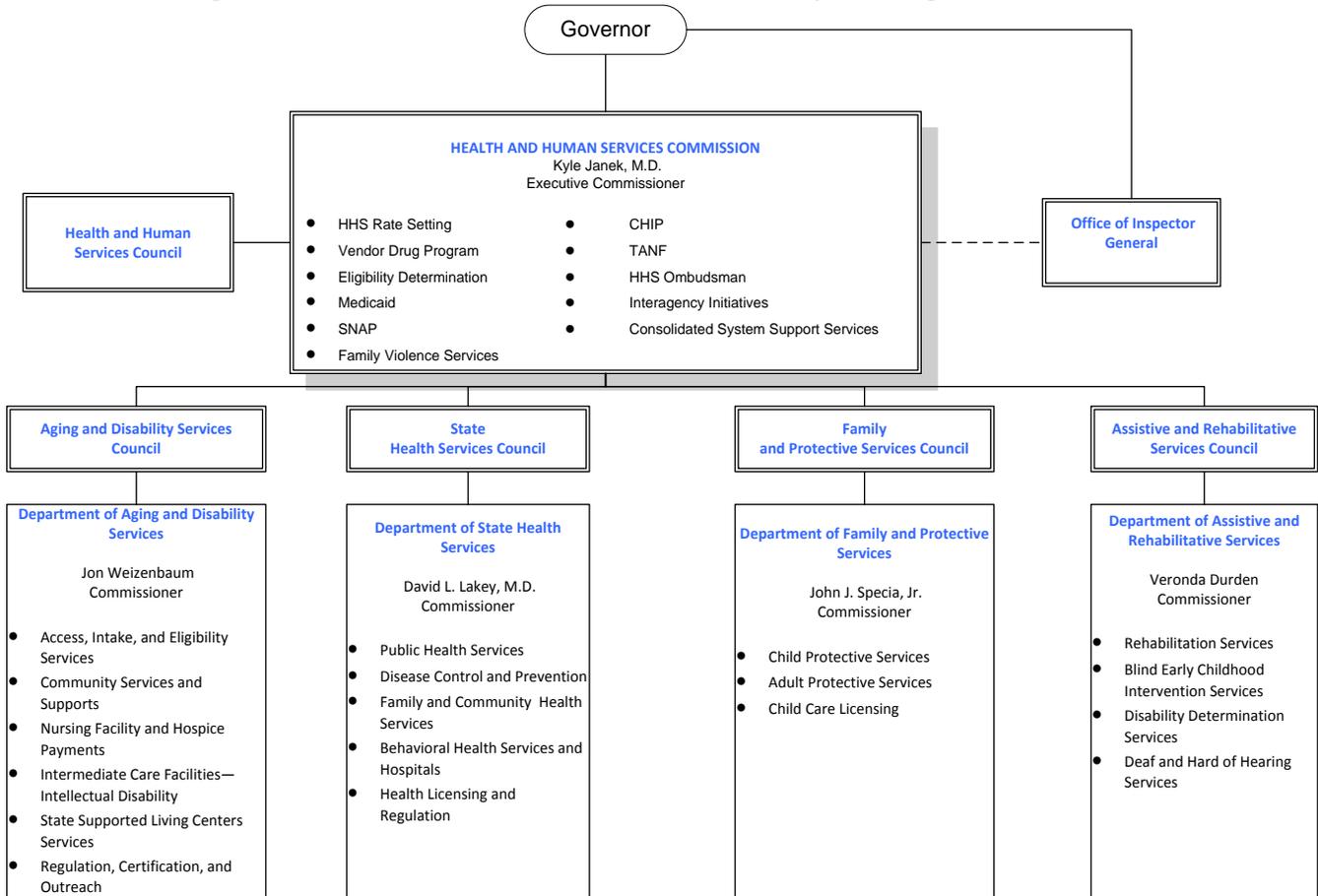
F. If applicable, provide detailed information on fees collected by your agency.

Department of Family and Protective Services Exhibit 8: Fee Revenue — Fiscal Year 2012				
Fee Description/ Program/ Statutory Citation	Current Fee/ Statutory Maximum	Number of Persons or Entities Paying the Fee	Fee Revenue	Where Fee Revenue is Deposited
Childcare Facility or Child Placing Agency/ HR Code §42.054	\$20-\$100	NA	\$1,852,289.00	General Revenue Fund
Child Care Institution Administrator/ HR Code §43.006	\$20-\$50	NA	\$51,712.00	General Revenue Fund
Adoption Registry/ Family Code §162.411	\$15	NA	\$195.00	General Revenue Fund
Fees for Copies or Filing of Records/ General Appropriations Act, 81 st Leg., RS 2009, Art. IX §12.02	Various	NA	\$2,662.00	General Revenue Fund
Criminal History Checks/ HR Code §42.056	\$2-\$24	NA	\$283,862.00	General Revenue Fund
Conference, Seminars, and Training Registration Fees/ General Appropriations Act, 81 st Leg., RS 2009, Art. IX §8.08	Various	NA	\$49,799.00	General Revenue Fund

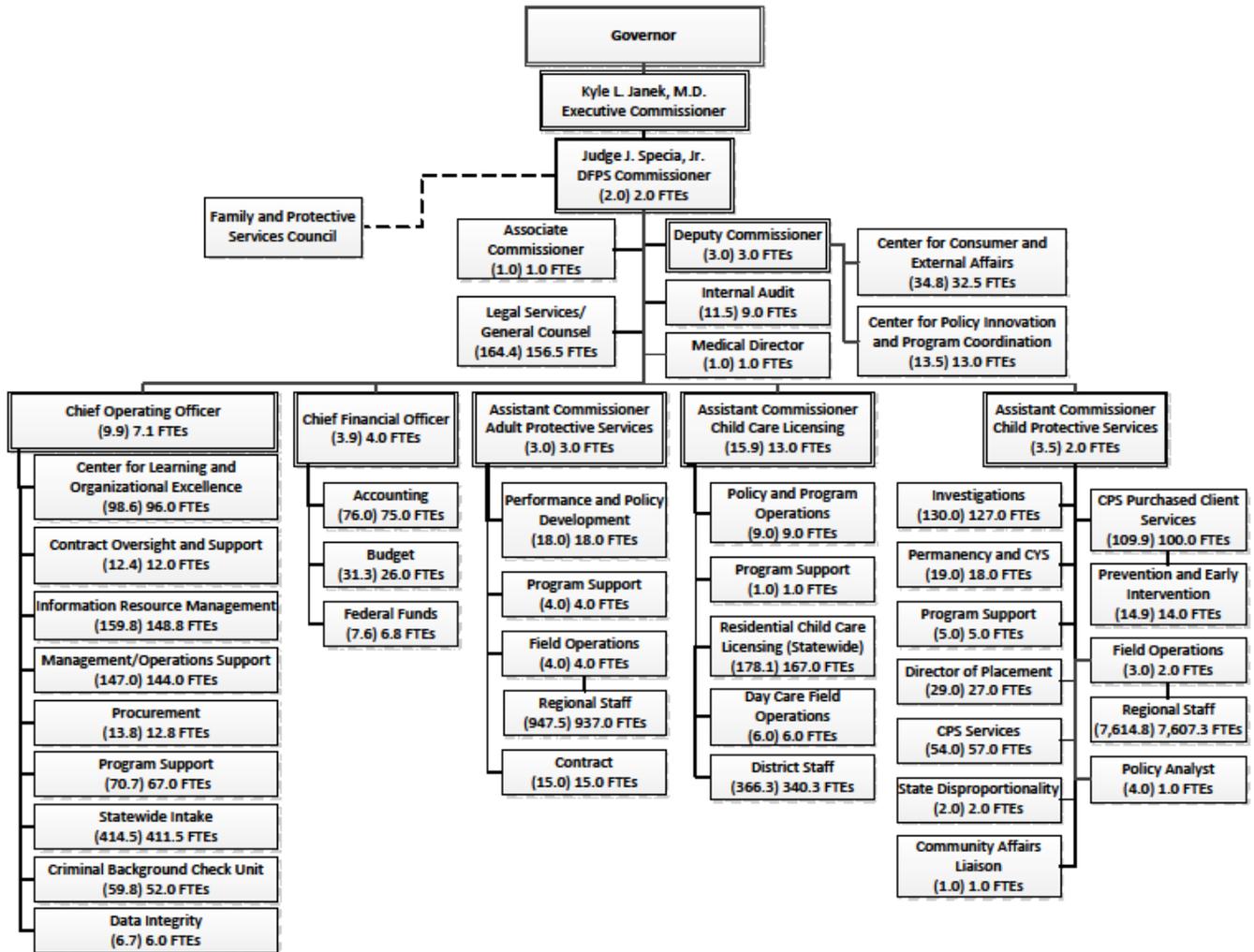
VI. ORGANIZATION

A. Provide an organizational chart that includes major programs and divisions, and shows the number of FTEs in each program or division. Detail should include, if possible, Department Heads with subordinates, and actual FTEs with budgeted FTEs in parenthesis.

The following chart shows the Health and Human Services System organization.



The following chart depicts the Department of Family and Protective Service’s organizational structure, including the number of full-time equivalent (FTE) positions as of June 1, 2013 and the number of budgeted FTEs in parenthesis.



B. If applicable, fill in the chart below listing field or regional offices. See Exhibit 9 Example

Department of Family and Protective Services				
Exhibit 9: FTEs by Location — Fiscal Year 2012				
Headquarters, Region or Field Office	Location	Co- Located? Yes/No	Number of Budgeted FTEs, FY 2013	Number of Actual FTEs as of June 1, 2013
Region 1 Lubbock				
01-Lubbock	Lubbock	Mixed	256.4	259.8
01-Lubbock	Amarillo	No	178.5	179.5
01-Lubbock	Borger	Yes	14.0	14.0
01-Lubbock	Brownfield	No	6.0	6.0
01-Lubbock	Childress	Yes	5.0	5.0
01-Lubbock	Dimmitt	Yes	1.0	1.0
01-Lubbock	Dumas	Yes	5.0	5.0
01-Lubbock	Hereford	Mixed	9.0	9.0
01-Lubbock	Levelland	No	12.0	12.0
01-Lubbock	Littlefield	Yes	7.0	7.0
01-Lubbock	Pampa	Mixed	15.0	15.0
01-Lubbock	Plainview	Yes	20.0	20.0
01-Lubbock	Tulia	Yes	1.0	1.0
01-Lubbock	Wellington	No	4.0	4.0
Region 2 Abilene				
02-Abilene	Abilene	Mixed	133.0	136.0
02-Abilene	Ballinger	No	5.0	7.0
02-Abilene	Bowie	Yes	14.0	14.0
02-Abilene	Breckenridge	Yes	3.0	3.0
02-Abilene	Brownwood	Yes	41.0	40.0
02-Abilene	Coleman	Yes	0.0	1.0
02-Abilene	Eastland	Yes	16.0	16.0
02-Abilene	Graham	Yes	14.0	14.0
02-Abilene	Haskell	Yes	7.0	8.0
02-Abilene	Seymour	Yes	2.0	2.0
02-Abilene	Snyder	Yes	7.0	7.0
02-Abilene	Sweetwater	No	10.0	10.0
02-Abilene	Vernon	Yes	15.0	15.0
02-Abilene	Wichita Falls	Mixed	104.3	102.0
Region 3 Arlington				
03-Arlington	Arlington	Mixed	181.9	184.0
03-Arlington	Bonham	Yes	6.0	6.0

Department of Family and Protective Services
Exhibit 9: FTEs by Location — Fiscal Year 2012

Headquarters, Region or Field Office	Location	Co- Located? Yes/No	Number of Budgeted FTEs, FY 2013	Number of Actual FTEs as of June 1, 2013
03-Arlington	Carrollton	No	20.0	20.0
03-Arlington	Cleburne	No	70.0	70.0
03-Arlington	Corsicana	Yes	21.0	21.0
03-Arlington	Dallas	Mixed	669.5	669.5
03-Arlington	Decatur	Yes	19.0	19.0
03-Arlington	Denton	Mixed	99.5	99.5
03-Arlington	Ennis	Yes	7.0	7.0
03-Arlington	Fort Worth	Mixed	340.5	340.5
03-Arlington	Gainesville	Yes	20.0	20.0
03-Arlington	Granbury	No	20.0	20.0
03-Arlington	Grand Prairie	Yes	26.0	26.0
03-Arlington	Greenville	Mixed	49.5	49.5
03-Arlington	Hurst	No	61.0	61.0
03-Arlington	Irving	No	8.0	8.0
03-Arlington	Kaufman	Yes	36.0	36.0
03-Arlington	Lake Worth	No	16.0	16.0
03-Arlington	Lewisville	No	27.0	27.0
03-Arlington	Mansfield	No	1.0	1.0
03-Arlington	McKinney	Mixed	12.0	12.0
03-Arlington	Mineral Wells	Yes	13.0	13.0
03-Arlington	Plano	Mixed	112.0	112.0
03-Arlington	Richardson	No	1.0	1.0
03-Arlington	Rockwall	No	15.0	15.0
03-Arlington	Rowlett	No	1.0	1.0
03-Arlington	Sherman	Mixed	44.0	44.0
03-Arlington	Stephenville	Yes	12.0	12.0
03-Arlington	Watauga	No	81.0	81.0
03-Arlington	Waxahachie	No	22.0	22.0
03-Arlington	Weatherford	Yes	36.0	36.0
Region 4 Tyler				
04-Tyler	Athens	No	34.0	34.0
04-Tyler	Atlanta	Yes	6.0	6.0
04-Tyler	Canton	Mixed	27.0	27.0
04-Tyler	Carthage	Yes	8.0	8.0
04-Tyler	Clarksville	Yes	5.0	5.0
04-Tyler	Daingerfield	Yes	5.0	5.0

Department of Family and Protective Services
Exhibit 9: FTEs by Location — Fiscal Year 2012

Headquarters, Region or Field Office	Location	Co- Located? Yes/No	Number of Budgeted FTEs, FY 2013	Number of Actual FTEs as of June 1, 2013
04-Tyler	Gilmer	Yes	17.0	17.0
04-Tyler	Henderson	Yes	19.0	19.0
04-Tyler	Jacksonville	Mixed	27.0	27.0
04-Tyler	Linden	Yes	10.0	10.0
04-Tyler	Longview	No	55.0	56.0
04-Tyler	Marshall	Yes	26.0	26.0
04-Tyler	Mount Pleasant	Yes	15.0	15.0
04-Tyler	Mount Vernon	Yes	5.0	5.0
04-Tyler	Palestine	Yes	23.0	23.0
04-Tyler	Paris	Yes	25.0	25.0
04-Tyler	Quitman	Yes	20.0	20.0
04-Tyler	Rusk	Yes	12.0	12.0
04-Tyler	Sulphur Springs	Yes	16.0	16.0
04-Tyler	Texarkana	Yes	35.0	36.0
04-Tyler	Tyler	Mixed	105.5	103.0
Region 5 Beaumont				
05-Beaumont	Beaumont	Yes	89.0	88.0
05-Beaumont	Buna	Yes	3.0	3.0
05-Beaumont	Center	Yes	13.0	13.0
05-Beaumont	Coldspring	Yes	5.0	5.0
05-Beaumont	Crockett	Yes	6.0	6.0
05-Beaumont	Hemphill	Yes	4.0	4.0
05-Beaumont	Jasper	Yes	13.0	13.0
05-Beaumont	Livingston	Yes	21.0	21.0
05-Beaumont	Lufkin	Yes	42.0	44.0
05-Beaumont	Lumberton	No	10.0	10.0
05-Beaumont	Nacogdoches	Yes	41.0	47.0
05-Beaumont	Orange	Yes	34.0	34.0
05-Beaumont	Port Arthur	Yes	30.1	35.0
05-Beaumont	Silsbee	Yes	7.0	7.0
05-Beaumont	Trinity	Yes	7.0	7.0
05-Beaumont	Woodville	Yes	7.0	7.0
Region 6 Houston				
06-Houston	Alvin	Yes	9.0	9.0
06-Houston	Angleton	No	42.0	42.0
06-Houston	Bay City	Yes	12.0	12.0

Department of Family and Protective Services
Exhibit 9: FTEs by Location — Fiscal Year 2012

Headquarters, Region or Field Office	Location	Co- Located? Yes/No	Number of Budgeted FTEs, FY 2013	Number of Actual FTEs as of June 1, 2013
06-Houston	Bellville	Yes	12.0	12.0
06-Houston	Columbus	Yes	2.0	2.0
06-Houston	Conroe	No	130.0	130.0
06-Houston	Crosby	Yes	9.0	9.0
06-Houston	Galveston	Mixed	60.0	60.0
06-Houston	Hempstead	No	5.0	5.0
06-Houston	Houston	Mixed	1,389.4	1,363.0
06-Houston	Humble	No	28.0	28.0
06-Houston	Huntsville	Yes	13.0	13.0
06-Houston	Liberty	Yes	31.0	31.0
06-Houston	Pearland	No	48.0	48.0
06-Houston	Rosenberg	No	88.0	88.0
06-Houston	Texas City	Yes	31.0	31.0
06-Houston	Wharton	No	9.0	9.0
Region 7 Austin				
07-Austin	Austin	Mixed	455.2	438.5
07-Austin	Bastrop	Yes	31.0	31.0
07-Austin	Belton	No	87.0	87.0
07-Austin	Brenham	Yes	20.0	20.0
07-Austin	Bryan	Mixed	57.0	57.0
07-Austin	Burnet	Yes	22.0	22.0
07-Austin	Cameron	Yes	3.0	3.0
07-Austin	Centerville	Yes	3.0	3.0
07-Austin	Copperas Cove	Yes	26.0	26.0
07-Austin	Georgetown	No	36.0	36.0
07-Austin	Giddings	No	4.0	4.0
07-Austin	Hamilton	Yes	5.0	5.0
07-Austin	Hearne	Yes	2.0	2.0
07-Austin	Hillsboro	Yes	8.0	8.0
07-Austin	Killeen	No	86.0	86.0
07-Austin	Lampasas	Yes	13.0	13.0
07-Austin	Lockhart	No	19.0	19.0
07-Austin	Madisonville	Yes	3.0	3.0
07-Austin	Marlin	Yes	3.0	3.0
07-Austin	Mexia	Yes	24.0	24.0
07-Austin	Round Rock	Yes	31.0	31.0

Department of Family and Protective Services
Exhibit 9: FTEs by Location — Fiscal Year 2012

Headquarters, Region or Field Office	Location	Co- Located? Yes/No	Number of Budgeted FTEs, FY 2013	Number of Actual FTEs as of June 1, 2013
07-Austin	San Marcos	Yes	38.0	38.0
07-Austin	Taylor	Yes	23.0	23.0
07-Austin	Waco	Mixed	130.0	130.0
Region 8 San Antonio				
08-San Antonio	Boerne	Mixed	12.0	12.0
08-San Antonio	Carrizo Springs	Yes	8.0	8.0
08-San Antonio	Cuero	Yes	10.0	10.0
08-San Antonio	Del Rio	Yes	12.0	12.0
08-San Antonio	Eagle Pass	Yes	11.0	11.0
08-San Antonio	Floresville	Yes	9.0	9.0
08-San Antonio	Gonzales	Yes	7.0	7.0
08-San Antonio	Hallettsville	Yes	3.0	3.0
08-San Antonio	Hondo	Yes	27.0	27.0
08-San Antonio	Jourdanton	No	21.0	21.0
08-San Antonio	Kerrville	Yes	33.0	33.0
08-San Antonio	New Braunfels	Yes	38.0	38.0
08-San Antonio	Pearsall	Yes	15.0	15.0
08-San Antonio	Port Lavaca	No	3.0	3.0
08-San Antonio	San Antonio	Mixed	1,034.7	1,026.0
08-San Antonio	Seguin	Yes	38.0	38.0
08-San Antonio	Uvalde	Yes	11.8	11.7
08-San Antonio	Victoria	Yes	57.0	57.0
Region 9 Midland				
09-Midland	Andrews	Yes	4.0	4.0
09-Midland	Big Spring	Yes	17.0	17.0
09-Midland	Brady	Yes	9.0	9.0
09-Midland	Fort Stockton	Yes	4.0	4.0
09-Midland	Lamesa	Yes	6.0	6.0
09-Midland	Midland	Mixed	65.0	65.0
09-Midland	Monahans	Yes	4.0	4.0
09-Midland	Odessa	No	74.0	74.0
09-Midland	San Angelo	Yes	138.5	108.0
09-Midland	Seminole	No	1.0	1.0
Region 10 El Paso				
10-El Paso	Alpine	Yes	3.0	3.0
10-El Paso	El Paso	Mixed	238.2	244.5

Department of Family and Protective Services				
Exhibit 9: FTEs by Location — Fiscal Year 2012				
Headquarters, Region or Field Office	Location	Co- Located? Yes/No	Number of Budgeted FTEs, FY 2013	Number of Actual FTEs as of June 1, 2013
10-El Paso	Marfa	No	4.0	4.0
10-El Paso	Presidio	Yes	2.0	2.0
10-El Paso	Socorro	Yes	24.0	24.0
10-El Paso	Van Horn	Yes	1.0	1.0
Region 11 Edinburg				
11-Edinburg	Alamo	Yes	10.0	10.0
11-Edinburg	Alice	Yes	29.0	29.0
11-Edinburg	Aransas Pass	Yes	20.0	20.0
11-Edinburg	Beeville	Yes	23.0	23.0
11-Edinburg	Brownsville	No	85.0	85.0
11-Edinburg	Corpus Christi	Yes	226.1	217.0
11-Edinburg	Edinburg	Mixed	171.5	171.5
11-Edinburg	Harlingen	Yes	88.0	88.0
11-Edinburg	Kingsville	Yes	21.0	21.0
11-Edinburg	Laredo	Mixed	107.0	109.0
11-Edinburg	McAllen	Mixed	97.0	97.0
11-Edinburg	Raymondville	Yes	10.0	10.0
11-Edinburg	Rio Grande City	Yes	16.0	16.0
11-Edinburg	Robstown	Yes	9.0	9.0
11-Edinburg	Sinton	Yes	19.0	19.0
11-Edinburg	Weslaco	Yes	26.0	26.0
Headquarters	Austin	Mixed	1,170.0	1,098.1
Total			10,901.1	10,767.6

C. What are your agency's FTE caps for fiscal years 2012-2015?

FY 2012: 11,175.3

FY 2013: 11,175.3

FY 2014: 12,251.5

FY 2015: 12,305.1

D. How many temporary or contract employees did your agency have as of August 31, 2012?

DFPS had 7.1 contract employees as of August 31, 2012.

E. List each of your agency's key programs or functions, along with expenditures and FTEs by program.

Texas Department of Family and Protective Services			
Exhibit 10: List of Program FTEs and Expenditures - FY 2012			
Program	Budgeted FTEs FY 2012	Average Filled FTEs As of August 31, 2012	FY 2012 Expenditures
Commissioner	4.8	3.8	\$823,646
Deputy Commissioner	51.3	47.9	\$3,468,766
Internal Audit	11.5	10.9	\$858,288
Legal Services	164.4	156.7	\$12,484,889
Operations:			
Chief Operating Officer	9.9	7.9	\$1,021,409
Center for Learning and Organizational Excellence	98.6	95.2	\$11,425,326
Contract Oversight and Support	12.4	11.9	\$804,566
Information Resource Management	165.3	148.6	\$40,319,373
Management/Operations Support	143.5	140.4	\$10,701,732
Procurement	13.8	12.3	\$837,737
Program Support	70.7	64.2	\$3,636,039
Criminal Background Check Unit	58.8	54.8	\$4,292,654
Data Integrity	6.7	6.6	\$394,971
Finance:			
Chief Financial Officer	1.9	2.1	\$241,845
Accounting	80.4	71.9	\$3,864,540
Budget	31.3	29.0	\$1,947,001
Federal Funds	7.6	7.8	\$554,268
Statewide Intake	423.5	406.9	\$19,712,433
Child Protective Services:			
Investigations	2,820.7	2,671.7	\$149,959,691
Family-Based Safety Services	1,181.9	1,112.7	\$55,766,813
Substitute Care	2,874.9	2,706.6	\$142,474,872
Program Operations	1,248.9	1,213.9	\$74,342,014

Texas Department of Family and Protective Services
Exhibit 10: List of Program FTEs and Expenditures - FY 2012

Program	Budgeted FTEs FY 2012	Average Filled FTEs As of August 31, 2012	FY 2012 Expenditures
Foster Care Payments			\$381,926,525
Adoption/Permanency Care Assistance Payments			\$193,981,339
Relative Caregiver Monetary Assistance			\$7,859,926
Purchased Client Services			\$84,580,454
Prevention and Early Intervention	14.9	13.0	\$31,569,019
Adult Protective Services:			
APS In-Home	815.4	780.2	\$52,344,306
APS Facility Investigations	182.5	175.2	\$10,010,572
Child Care Licensing:			
Day Care Licensing	391.4	367.1	\$19,240,991
Residential Child Care Licensing	184.8	171.3	\$9,642,694
TOTAL	11,071.8	10,490.6	\$1,331,088,699

VII. GUIDE TO AGENCY PROGRAMS

Narrative Descriptions

4 FTEs

Office of the DFPS Commissioner – Judge John J. Specia, Jr.

A full-time Commissioner, appointed by the Health and Human Services Executive Commissioner with the approval of the Governor, oversees operations of the Department of Family and Protective Services. The Commissioner’s responsibilities include establishing goals and objectives as well as overseeing the development and implementation of strategic plans; policy development; performance monitoring; and executive level reporting. The Commissioner also assists the Executive Commissioner in policy and rule changes specific to the Department’s functions.

The Commissioner’s Office also houses the DFPS Medical Director and the Associate Commissioner. The DFPS Medical Director provides leadership, direction, and oversight on health issues that affect DFPS clients and services. The Medical Director integrates knowledge of the agency’s mission with best healthcare practices to help shape DFPS policies and ensure comprehensive health care to the children DFPS serves. For example, one of the Medical Director’s major tasks is overseeing psychotropic medication use by children in foster care.

The Associate Commissioner works with staff to implement the Commissioner’s executive direction, ensuring that policy, programs, and operations of the agency are strategically focused, properly aligned with the goals and priorities of state leadership, and responsive to the needs of clients and stakeholders.

48.5 FTEs

Deputy Commissioner Division – Jennifer Sims

The Deputy Commissioner works with the Commissioner on the day-to-day operations of the agency, providing vision, leadership, and strategic direction to the Department in administration, operations, and budget decision-making processes. The Deputy Commissioner also provides leadership and oversight to the Department’s Center for Consumer and External Affairs (CCEA) and the Center for Policy, Innovation, and Program Coordination (CPIPC). CCEA coordinates consumer and external affairs activities with elected officials, HHSC offices, community stakeholders, the media, clients and members of the public who have complaints. CCEA also coordinates DFPS’s compliance with the customer service functions required in the Texas Government Code, Chapter 2114. CCEA consists of four offices: the Office of Consumer Affairs, Office of External Relations, Office of Communications, and Office of Media Relations. CPIPC coordinates the rule development process for the Department. CPIPC also coordinates cross-program activities, conducts management reviews, and ensures the Department’s critical projects are aligned with the mission, vision, and values of the Department.

9 FTEs

Internal Audit – Ed Pier

The Internal Audit division provides an independent appraisal function within DFPS, objectively providing independent assessment on risk management, control, and governance processes for the organization and its unique clientele. Internal Audit provides management with recommendations designed to strengthen and improve internal controls and agency operations. For example during fiscal year 2013, Internal Audit conducted audits of the Development of Information Resources Projects, Budget Processes, Child Death Investigations and Reporting, Reporting of Missing Children, and Search Texas Child Care website, in addition to other reviews and consulting engagements requested by the Commissioner and DFPS management.

156.5 FTEs

Legal Services – Cynthia O’Keeffe

Legal Services provides legal counsel, training, and services to support the agency’s mission and to ensure that the agency complies with all applicable state and federal laws. Legal Services contains two units: the Office of General Counsel and Program Litigation. While the Office of General Counsel performs the legal support tasks that are typical of most state agency legal divisions, the Program Litigation unit serves a somewhat unique role within state government by providing direct in-court representation in CPS lawsuits and, to a lesser extent, APS lawsuits, under deputation by the Office of Attorney General.

545.7 FTEs

Operations – Terri Ware

The Operations division includes Information Resource Management (IRM), the Program Support unit (PS), the Management Support unit (MSD), the Center for Learning and Organizational Excellence (CLOE), Contract Oversight & Support (COS), and the Centralized Background Check Unit (CBCU). The Operations division also includes Statewide Intake. Due to the size and complexity of the Statewide Intake program, it is addressed in its own Section VII report.

Information Resource Management

IRM supports the agency’s information technology (IT) needs by providing the technology and services required to enable DFPS staff to fulfill the agency’s mission around the clock, 365 days a year. The agency’s information includes case and non-case related work products that are stored and secured in databases, applications, or computing and mobile devices.

Program Support

PS is responsible for multiple functions that directly support DFPS programs, including testing and ensuring security of the agency's automated-case management, licensing-support systems, and other core applications.

Management Support Division

MSD provides day-to-day direction, guidance, and coordination for the agency's management activities. This group works with DFPS executives and management to identify and resolve cross-agency operational issues, coordinate internal communication to the agency's mission and operational goals, and give direct support to the field through many services. MSD's major areas of responsibility include: Human Resources; Management Reporting and Statistics; Performance Management; and Records Management.

Center for Learning and Organizational Excellence

CLOE works with DFPS programs and divisions to provide staff with training and professional development opportunities. CLOE plays a key role in equipping staff with the knowledge and skills needed to protect the unprotected.

Contract Oversight and Support

COS develops and maintains the internal DFPS Contract Handbook, which is the central organizational framework for all agency policies and procedures for administrative and client services contracting. Additionally, COS coordinates with the Health and Human Services Commission (HHSC) to promote standardization and efficiencies across Enterprise agencies for both contractors and clients. In FY 2012, the Department had 2,791 contracts to assist us with achieving the agency's mission and goals.

Centralized Background Check Unit

CBCU is responsible for internal agency or requested background checks that support Child Care Licensing, client service contracts, internal and external volunteers, in-state and out-of-state requests for central registry checks and agency new hires. CBCU integrates cross-divisional and program background check policies, procedures, staff, and related resources to provide improved quality, more efficient service, and greater consistency of agency performed or requested background checks. Between June 2012 and June 2013, CBCU processed 914,147 background checks.

111.8 FTEs

Finance – Cindy R. Brown

The Office of Finance's primary objectives are to:

- Provide DFPS with support in the three areas of budget, federal funds management, and accounting.
- Ensure that DFPS complies with the oversight regulations of other state and federal agencies, including the maintenance of internal controls to safeguard DFPS's resources and assets.
- Help DFPS obtain funding and manage its resources effectively.
- Serve as the agency's fiscal liaison to external leadership offices such as the Legislative Budget Board, the Governor's Office, and the Comptroller of Public Accounts.

Activities are organized in separate divisions within the Office of Finance. An explanation of each division's primary responsibilities is described below.

Budget Division

The Budget division develops and monitors the agency's annual operating budget, prepares DFPS's biennial legislative appropriations request, prepares fiscal impact analysis on proposed legislation and agency rule changes, and provides management insight critical for agency divisions to operate within allocated resource levels.

Federal Funds Division

The Federal Funds division provides analytical support, consultation, and technical assistance to agency program areas to maintain current federal funding initiatives, and to seek out and work with programs to design new initiatives. The Federal Funds division reviews and analyzes costs, programs, and federal claims to ensure reimbursement for all eligible federal costs. The division tracks and analyzes federal legislation related to funding and participates in the design and review of cost allocation methodologies.

Accounting Division

The Accounting division manages the agency's financial transactions and ensures the integrity of all accounting records. The Accounting division processes travel claims, provides travel support, processes payments to vendors, processes requisitions, and provides cash management, cost allocation, and financial system support.

VII. GUIDE TO AGENCY PROGRAMS – CONTINUED

A. Provide the following information at the beginning of each program description.

Name of Program or Function	Statewide Intake (SWI)
Location/Division	2401 Ridgpoint Drive, Austin, Texas/ Operations
Contact Name	Ric Zimmerman – Director Sherrie Hardie – Program Administrator
Actual Expenditures, FY 2012	\$19,712,433
Number of Actual FTEs as of June 1, 2013	411.5
Statutory Citation for Program	Chapters 40, 42, and 48, Human Resources Code; Chapter 261, Family Code Texas Youth and Runaway Hotline: Chapter 265, Family Code

B. What is the objective of this program or function? Describe the major activities performed under this program.

Statewide Intake (SWI), a sub-division of DFPS Operations, serves as the “front door to the front line” for all DFPS programs. Through a multi-channel contact center, SWI processes all intakes of reports of abuse, neglect, or exploitation and then routes reports to the appropriate local program office. This centralized process allows for consistency, accountability, and efficiency in intake and referral for all types of reports, including:

- abuse or neglect of children;
- abuse, neglect, and exploitation of persons aged 65 or older or adults with disabilities; and
- abuse, neglect, and exploitation of person in State Supported Living Centers, State Hospitals, state centers, and community based centers licensed by the Department of Aging and Disability Services (DADS) or Department of State Health Services (DSHS) when employees in those facilities are alleged perpetrators.

SWI is also responsible for:

- assessing reported information, based on state law;
- determining the correct DFPS program with jurisdiction to investigate;
- entering the information into a specialized computer application, IMPACT (Information Management Protecting Adults and Children in Texas), which is used by all DFPS programs’;
- routing the report to the correct location;

- serving as a referral center when information reported is not within DFPS jurisdiction; and
- completing emergency background checks when requested by CPS staff without access to IMPACT.

SWI operates the toll-free, nationwide, Texas Abuse Hotline, 24 hours a day, 365 days a year, including holidays. SWI also provides a prioritized toll-free hotline number that is solely for the use of law enforcement personnel and another line dedicated for individuals in facilities for mental health or intellectual and developmental disabilities. For all calls, translation services are available whenever needed. To assist those who are hearing or speech impaired, intake specialists can also access the Relay Texas interpreter service. SWI also receives reports via an internet reporting system and by fax or mail.

Separate from Abuse Hotline, the SWI division also operates a toll-free Texas Runaway Hotline and Texas Youth Hotline. These services offer crisis counseling and referrals for troubled youth and families. Volunteers answer the phones and interact with callers facing a variety of problems including family conflict, delinquency, truancy, and abuse and neglect issues. The program also increases public awareness through media efforts and printed materials. In 2013, the two hotlines and their websites were merged into the Texas Youth and Runaway Hotline.

C. What evidence can you provide that shows the effectiveness and efficiency of this program or function? Provide a summary of key statistics and performance measures that best convey the effectiveness and efficiency of this function or program.

DFPS measures SWI program success in a variety of ways. Statistics include measures of quality as well as the average number of calls handled per hour, total number of calls handled, and time engaged in various activities including breaks, email, training, technical problems, unit meetings, and so on. Intake specialists can compare their performance to their peers and the statistics for each specialist is available for all of DFPS to view. The following tables highlight key performance measures.

Total Number of Contacts Received			
FY	Hold Time In Minutes*	Number of Total Contacts**	Percent Change in Total Contacts (From Prior FY)
2008	11.4	678,330	4.7%
2009	10.6	690,430	1.8%
2010	8.9	748,277	8.4%
2011	7.3	780,023	4.2%
2012	8.5	773,577	- 0.8%

**Phone calls - English queue only.*

***Includes all contacts (phone, internet, fax, mail and walk-in).*

The Texas Legislative Budget Board (LBB) has set the measure for SWI performance on the English queue at an annual average hold time of 8.7 minutes (+/- 5 percent).

Total Number of Contacts Received by Method of Receipt FY 2012		
Contact Type	Number of Contacts	Percent of Total
Phone	618,422	79.9%
Internet	120,802	15.6%
Mail/Fax	33,099	4.3%
Other	1,200	0.2%
Walk-in	54	0.0%
TOTAL	773,577	100.0%

In 2010, DFPS purchased an improved system for call recording and scoring (Telstrat Engage COACH). Two COACH tools are used to measure the quality of work performed by those who answer hotline calls. For most evaluations, a tool with 21 questions is used to focus on the outcome of the contact. For newer staff and when more in-depth evaluations are needed, a tool with 120 questions is used. Inter-Rater Reliability Exercises are conducted on a quarterly basis, to ensure that the tool is being scored consistently.

D. Describe any important history regarding this program not included in the general agency history section, including how the services or functions have changed from the original intent.

1974

The Legislature requires all 254 Texas counties to have 24-hour reporting capability for cases involving child abuse or neglect; the agency now known as DFPS responds by creating the Texas Abuse Hotline.

1984

The Legislature mandated that the Adult Protective Services also have 24-hour reporting capability. SWI added staff and trained them to handle calls concerning abuse, neglect, and exploitation of persons aged 65 or older and adults with disabilities.

1993

SWI began a pilot program in Region 7 (Austin) designed to test the effectiveness of centralizing the intake system throughout the state.

1999

SWI began handling all intake functions for the Child Protective Services, Child Care Licensing, and Adult Protective Services programs for the entire state of Texas.

2002

SWI launched a secure agency website for professionals to report abuse and neglect. The website was developed by DFPS's Information Technology (IT) division in partnership with Statewide Intake leadership management, allowing professionals to make non-emergency reports to SWI without a phone call.

2004

At the request of Texas legislators, DFPS and the Texas Department of Public Safety (DPS) agreed on a plan to give DFPS employee access to crime records in order to assist workers in determining the appropriateness of kinship placements. In 2005, the Statewide Intake Expedited Background Check (EBC) unit began providing a centralized service to CPS caseworkers for certain emergency child placements.

2005

The internet reporting site was expanded to allow non-emergency reports from the general public.

2008

DFPS launched a redesigned internet reporting website called the Texas Abuse, Neglect, and Exploitation Reporting System; commonly known as the Texas Abuse Hotline website (www.TxAbuseHotline.org).

2012

The DFPS Texas Youth and Runaway Hotlines were transferred from Child Protective Services division to Statewide Intake.

E. Describe who or what this program or function affects. List any qualifications or eligibility requirements for persons or entities affected. Provide a statistical breakdown of persons or entities affected.

Anyone can report concerns about the safety of a child, person with disabilities or person who is elderly in Texas – whether they reside in Texas or not. No restrictions exist relating to such reports. However, statute requires certain professionals to report suspected instances of abuse or neglect. Specifically, pursuant to Chapter 261 of the Texas Family Code all persons are required to report child abuse and neglect. Professionals are mandated to report within 48

hours. Pursuant to Chapter 48 of the Human Resources Code, all person are required to report abuse, neglect, and exploitation of a person with disabilities or person who is elderly.

The following table shows the source of all reports as combined for CPS, both APS programs, and Child Care Licensing during FY 2012.

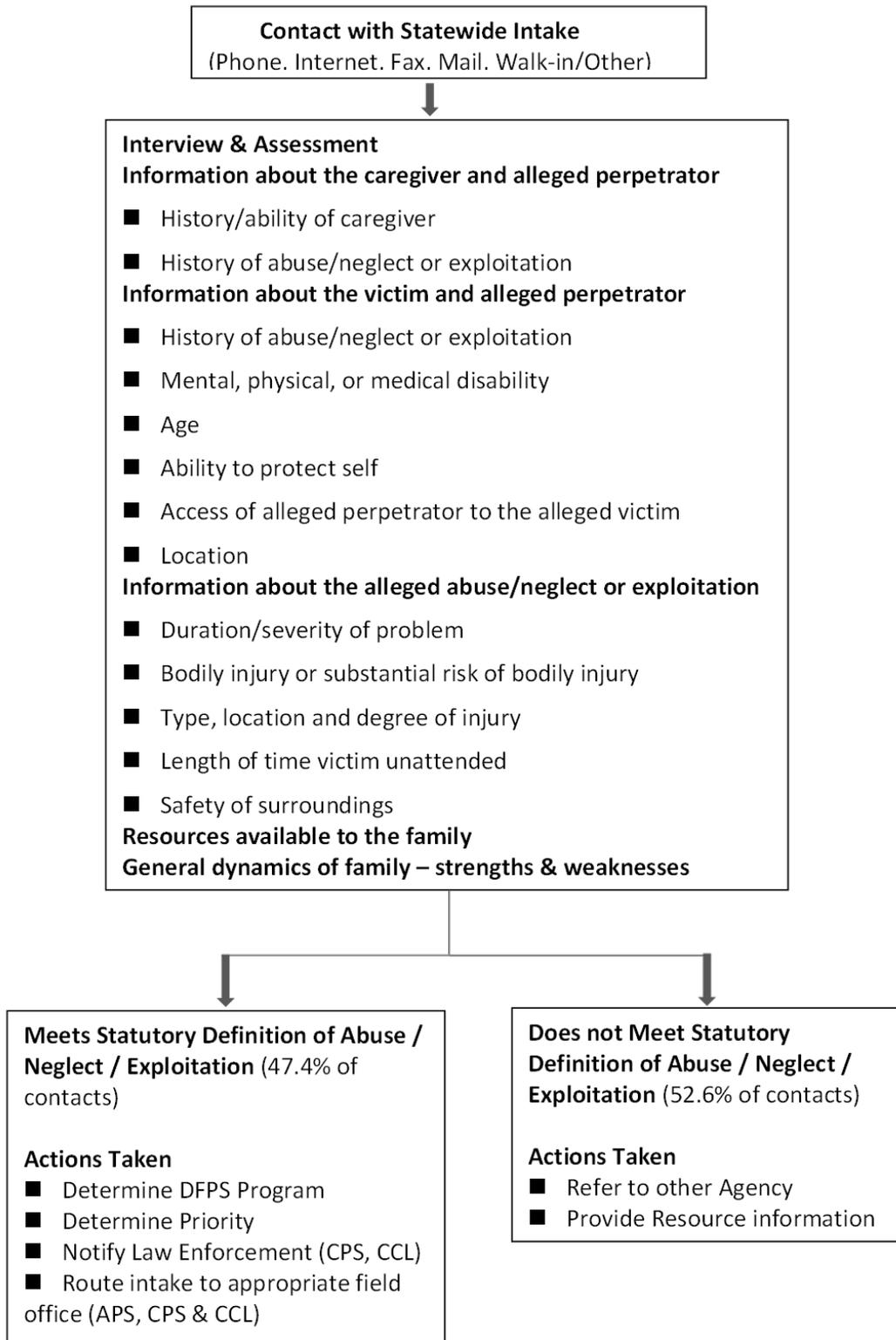
FY2012 Reporting Source		
Total (FY 2012) – Source of Report	Number	Percent of Total
Medical Personnel	66,023	18.0%
Relative	45,913	12.5%
School	44,381	12.1%
Law Enforcement	40,107	10.9%
Other	27,586	7.5%
Parent	25,704	7.0%
Community Agency	23,505	6.4%
Friend-Neighbor	20,849	5.7%
Victim	18,853	5.1%
Anonymous	16,380	4.5%
DFPS Staff	11,234	3.1%
Provider	7,906	2.2%
Legal/Court	4,209	1.1%
Institutional Personnel	3,953	1.1%
Daycare Provider	2,844	0.8%
State Agency	2,203	0.6%
Financial Institution	1,312	0.4%
Unrelated Home Member	1,110	0.3%
Parent’s Paramour	1,066	0.3%
24-Hour Care Provider	739	0.2%
Religious Entity	649	0.2%
Blank/Unknown	277	0.1%
TOTAL	366,803	100.0%

F. Describe how your program or function is administered. Include flowcharts, timelines, or other illustrations as necessary to describe agency policies and procedures. Indicate how field and regional services are used, if applicable.

The Chief Operating Officer manages SWI. The Statewide Intake management team includes a SWI director, four intake program administrators, a division administrator for quality assurance, a division administrator for operations, and a division administrator for training. The Youth and Runaway Hotlines are managed by a program specialist.

The public can access multiple avenues to contact SWI - phone, secure internet, mail, fax, and walk-in. The following flowchart illustrates an overview of the intake process.

SWI Intake Process



G. Identify all funding sources and amounts for the program or function, including federal grants and pass-through monies. Describe any funding formulas or funding conventions. For state funding sources, please specify (such as general revenue, appropriations rider, budget strategy, fees and dues).

Please see Appendix A.

Alternate Exhibit Provided For Section VII. Item G.

H. Identify any programs, internal or external to your agency, that provide identical or similar services or functions to the target population. Describe the similarities and differences.

The Department of State Health Services (DSHS) and the Department of Aging and Disability Services (DADS) perform intake functions within the scope of their licensing or regulatory roles. Neither agency provides intake services 24-hours a day, 365 days a year or for the types of cases handled by DFPS.

I. Discuss how the program or function is coordinating its activities to avoid duplication or conflict with the other programs listed in Question H and with the agency's customers. If applicable, briefly discuss any memorandums of understanding (MOUs), interagency agreements, or interagency contracts.

SWI does not replicate services performed by any other agency. No other entity in Texas serves as the single point of contact for the reporting and referral of all allegations of abuse, neglect, and exploitation of children, persons aged 65 or older, adults with disabilities, persons in State Supported Living Centers, State Hospitals, State Centers, and community-based centers licensed by the Department of Aging and Disability Services (DADS) or the Department of State Health Services (DSHS).

J. If the program or function works with local, regional, or federal units of government, include a brief description of these entities and their relationship to the agency.

Statewide Intake does not work with local, regional, or federal units of government in ways other than what has already been discussed.

SWI coordinates with other state agencies to receive intakes through the methods described above and sends information to the Department of Aging and Disability Services (DADS) and Department of State Health Services (DSHS) when it is not within DFPS jurisdiction and appears to be within the responsibility of those agencies.

K. If contracted expenditures are made through this program please provide:

- a short summary of the general purpose of those contracts overall;
- the amount of those expenditures in FY 2012;
- the number of contracts accounting for those expenditures;
- top five contracts by dollar amount, including contractor and purpose;
- the methods used to ensure accountability for funding and performance; and
- a short description of any current contracting problems.

SWI had no contracts for FY 2012.

L. Provide information on any grants awarded by the program.

Statewide Intake does not award grants.

M. What statutory changes could be made to assist this program in performing its functions? Explain.

Statewide Intake (SWI), the centralized DFPS division designated to receive all reports of abuse or neglect, is one of the largest contact centers of its kind nationally and experiences a high volume of calls. Current performance measures established by the Legislative Budget Board for SWI require SWI not to exceed an “average hold time” of 8.7 minutes, and appropriations to DFPS are calculated to achieve that performance measure. However, the higher the average hold time, the greater the abandonment rate from persons attempting to report abuse or neglect, which may result in urgently needed reports of suspected abuse or neglect not being made or investigated. House Bill 304, introduced in the 83rd session, proposed the addition of Section 40.0529, Human Resources Code, to mandate that average hold times for SWI not exceed five minutes, and abandonment rates not exceed 25%, which, if fully funded, would have significantly improved SWI’s ability to provide prompt assistance to reporters, thereby enhancing safety for children and vulnerable adults. To address this concern, the legislature might consider amending Chapter 40, Human Resources Code, in a manner similar to the proposed amendments in HB 304, or might direct the LBB to revise the performance measures associated with this function. For additional discussion, see Section IX, Major Issue #3.

N. Provide any additional information needed to gain a preliminary understanding of the program or function.

Not applicable.

O. Regulatory programs relate to the licensing, registration, certification, or permitting of a person, business, or other entity. For each regulatory program, if applicable, describe:

- Why the regulation is needed;
- The scope of, and procedures for, inspections or audits of regulated entities;
- Follow-up activities conducted when non-compliance is identified;
- Sanctions available to the agency to ensure compliance; and
- Procedures for handling consumer and public complaints against regulated entities.

Statewide intake does not perform licensing, registration, nor certification duties.

P. For each regulatory program, if applicable, provide the following complaint information. The chart headings may be changed if needed to better reflect your agency's practices.

Not applicable.

VII. GUIDE TO AGENCY PROGRAMS – CONTINUED

A. Provide the following information at the beginning of each program description.

Name of Program or Function	Child Protective Services
Location/Division	701 West 51 st Street, Austin, Texas/ Child Protective Services
Contact Name	Audrey Deckinga, Assistant Commissioner Child Protective Services
Actual Expenditures, FY 2012	\$ 1,090,891,634
Number of Actual FTEs as of June 1, 2013	7,963.3
Statutory Citation for Program	Chapter 40, Human Resources Code and Title 5, Family Code

Introduction to Child Protective Services

Responsibilities

The responsibilities of Child Protective Services are to:

- conduct civil investigations of reports of child abuse and neglect;
- protect children from abuse and neglect;
- promote the safety, integrity, and stability of families; and
- provide permanent homes or living arrangements for children who cannot safely remain with their families.

Investigation and Placements

State law requires anyone who believes a child is being abused or neglected to report the situation so that CPS can investigate. CPS interviews children, parents, and others who know about the family. CPS determines if child abuse or neglect occurred, if the children are safe, and if they are at risk of future harm.

CPS may refer families for services in the community, such as individual or family therapy, parenting classes, medical assistance, mental health services, substance abuse assessment and treatment facilities, or programs offering financial assistance for utilities, rent, or childcare.

When CPS is concerned about a child's ongoing safety, it refers the family to one of two types of ongoing services. If a child can remain safely in the home while issues are resolved, the family is referred for family based safety services. If services cannot ensure the child's safety in the home, CPS may petition the court to remove the child from the parents' custody and place the child in a relative's care or foster care. When this occurs, CPS provides a variety of substitute care services tailored to achieve the permanency goals for the child.

What Happens in a CPS Case?

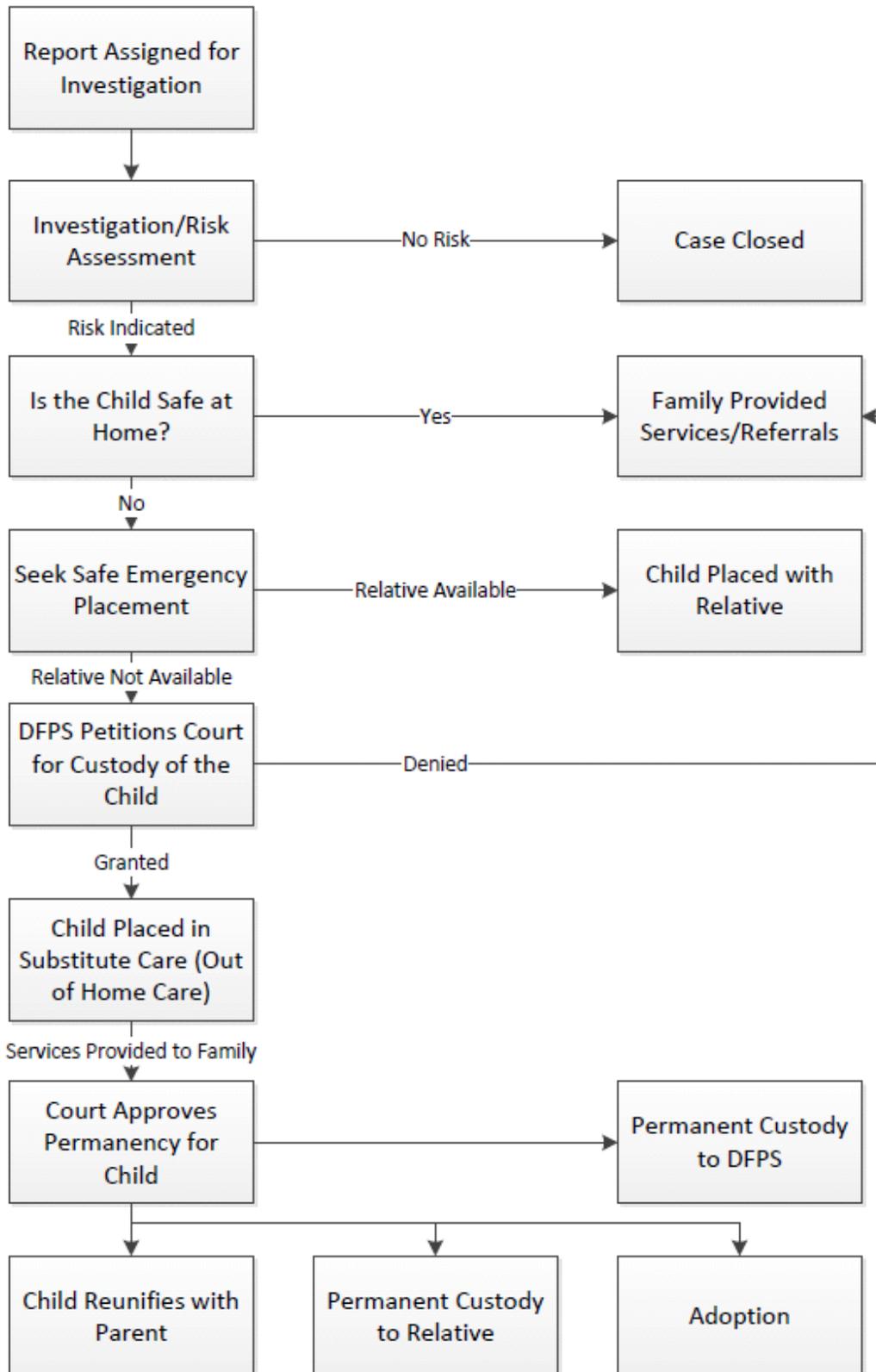
Generally, a CPS case follows one of three main paths described below after the investigation.

- **Case Closed** – CPS closes the case when there is no future risk to the child or risk can be managed without services from the agency.
- **Family Based Safety Services** – CPS works with parents and refers them to services to help keep families together and children safe in their homes.
- **Substitute Care** –A court removes a child from home and gives CPS legal custody. The child usually lives in foster care or with a relative until permanency goals are achieved. Permanency is achieved when the child:
 - returns home when it is safe;
 - lives with a relative long-term;
 - is adopted by a new family; or
 - lives in foster care until becoming an adult.

The flowchart, shown on the following page, illustrates the many possible paths of a CPS case.

CPS Flow Chart

This chart is for reference and does not necessarily represent the flow of a case.



CPS Programs

Child Protective Services has the following three major programs and many smaller ones, to process the thousands of reports it receives each year.

- Investigations
- Family Based Safety Services
- Substitute Care
 - Kinship Care
 - Foster Care and Placement Services
 - Conservatorship Services (case management)
 - Foster and Adoption Development
 - Transitional Living Services and Extended Foster Care
 - Permanency Care Assistance

CPS does not protect children all by itself. The Department works within a child welfare system. Only a court can issue an order to remove a child from home. Once that happens, the courts play a critical role in determining their future and make the final decisions on what happens to them. No child enters or leaves foster care without a court order. A judge decides where the child will live and for how long. Every day, Texas courts decide whether a child goes home or to live with a relative, visits a sibling, or becomes eligible for adoption. In addition to the courts, CPS works with many other people and organizations, including but not limited to:

- law enforcement agencies statewide;
- foster parents and private child-placing agencies;
- various service providers and service organizations;
- HHSC (healthcare services for children in foster care);
- U.S. Department of Health and Human Services; and
- child and family advocates and stakeholders.

The remainder of this section will look at each of these three programs (investigations, family based safety services, and substitute care) in greater detail and explain how CPS staff in each of these programs work to get the best possible outcomes for children and families.

B. What is the objective of this program or function? Describe the major activities performed under this program.

Investigation – 2,708.9 FTES

FTE numbers provided in the following section are Average Filled FTEs as of 6/1/2013.

Whenever suspected child abuse or neglect by parents, caregivers or household members is reported to DFPS and meets the statutory definitions of abuse or neglect, it becomes an investigation intake that is the responsibility of CPS's Investigation staff. CPS is responsible for conducting civil investigations of reported child abuse and neglect. The objectives of the investigation are to:

- ensure child safety;
- determine whether abuse or neglect occurred;
- assess whether the child may be at risk of abuse or neglect in the future;
- provide the family or child with needed safety services; and
- refer the family for services available in the community or through the agency that reduce the risk of abuse and neglect and enhance the well-being of the family.

Since the primary purpose of the investigation is the protection of children, investigators seek to identify whether the child is safe, how vulnerable the child is, and whether or not any parent has the capacity to protect the child. CPS determines this early in the investigatory process and ends the investigation once it is possible to determine the child is safe.

Investigation intakes are either routed through a screening process or sent directly to investigation units.

Screened Intakes

Mandated by S.B. 6, the main CPS Reform bill from 2005, investigation screeners review a subset of reports received at intake. To be eligible for screening, the intake must be a report in which the victims are ages six and older and involve a family with no open cases in other stages of service, and the intake does not require an immediate CPS response (these are Priority 2 intakes). Screeners review the case information received at intake as well as information available in the IMPACT system for prior CPS and criminal history. Additional calls may be made to determine if a traditional investigation is necessary. Screeners must contact a professional or other credible source that can provide additional information on the child's situation. The intake is closed if the child's safety can be assured without further investigation, and the screener refers the family to community resources. Screening allows caseworkers to only investigate cases that warrant CPS involvement. In FY 2012, approximately 41 percent of the Priority 2 intakes were formally screened. Of those, approximately 27 percent were closed

after the screening process and the remaining 73 percent were assigned to receive an investigation.

Traditional Investigations

For any intakes involving children under the age of six or any intakes that involve serious abuse or neglect allegations which are not eligible for screening, these intakes are immediately sent for a traditional investigation. CPS uses a flexible approach to investigations that provides for different methods of investigation based on the safety concerns for the child.

- Thorough Investigations incorporate the full range of investigative procedures and outcomes.
- Abbreviated Investigations begin as thorough investigations but are shortened and do not include the full range of investigation procedures due to case-specific reasons consistent with child safety. For example, an abbreviated investigation may be used when initial contacts with the alleged victim or family provide enough information to clearly indicate the abuse or neglect allegations will be ruled out even before all investigative steps in policy would have been finished.
- Preliminary Investigations are administratively closed because it is determined that CPS lacks jurisdiction. For example, an initial interview conducted by the CPS caseworker could yield information that the alleged perpetrator was a neighbor and that there are no concerns about the parent's supervision of the child. In this instance, the worker would tell law enforcement about the new information and close the investigation.

CPS investigates reports of child abuse and neglect to determine whether any child has been abused or neglected, is unsafe, or is at future risk of being abused or neglected by a parent or household member. If the report alleges a child has been or may be the victim of a crime and is in immediate danger of physical or sexual abuse that could result in death or serious harm, CPS must request a joint investigation with law enforcement.

The investigator must complete investigation actions within 30 days from the date the report was received by the agency, unless the supervisor approves an extension. At the end of the investigation, the investigator must assign a disposition to each allegation identified in the investigation. A disposition is a finding that states whether an allegation of abuse or neglect occurred. Each disposition that the investigator gives to an individual allegation is considered when finalizing the overall investigation disposition. There are four categories of findings: reason to believe, ruled out, unable to complete, and unable to determine. For FY 2012, overall investigation dispositions included the following:

Fiscal Year 2012 Investigation Disposition	
Disposition	Number
Reason to Believe	38,725
Ruled Out	107,757

Fiscal Year 2012 Investigation Disposition	
Disposition	Number
Unable to Complete	3,534
Unable to Determine	16,195
Total Completed Investigations	166,211

If the investigator concludes that the children are safe and not at risk of future harm, then the case may be closed. However, if the investigator concludes that the children are not safe, the investigator may refer the case to ongoing services. If the child can remain safely in the home while the services are provided, the case is referred to Family Based Safety Services. If the investigator determines that the children are in immediate danger, the investigator may file a petition to initiate civil court action to protect the children which may include removal of children from the home. If a child is removed from the home, Substitute Care services are provided.

Family Based Safety Services (FBSS) – 1,138.2 FTEs

When a case comes to FBSS from investigations, the goal of the services is to ensure child safety and reduce risk while helping families remain intact. When a case comes to FBSS from substitute care, the goal of the services is to help reunite the family and to ensure that the conditions that led to the child’s removal no longer pose a threat to that child’s safety. There are two types of services: Family Based Safety Services (formerly known as Family Preservation Services) and Family Reunification Services. Both types of services can be voluntary or court-ordered, although court-ordered Family Based Safety Services occur without DFPS having conservatorship of the child. Typically, Family Reunification Services occur during a monitored return while the child remains in DFPS conservatorship. In FY 2012, of the cases opened for services after a completed investigation, 69.7 percent received either Family Based Safety Services or Family Reunification Services.

Family Based Safety Services

In most cases opened for services after a CPS investigation, children remain with the family. Consistent with federal regulations, CPS works with families to improve conditions to keep a child safe in the child’s own home. Family based safety services are child-safety centered, family focused, and home-based and most often involve children who are not in the legal conservatorship of DFPS. At all times, the safety and welfare of children are of paramount concern. If at any point staff determine the safety of a child can no longer be ensured, CPS implements an immediate plan for the child’s safety, including court-ordered services or, if necessary, removal.

Family Reunification Services

CPS provides reunification services to families immediately before and after a child returns home from an out-of-home placement, while DFPS still has legal conservatorship of the child.

The purpose of reunification services is to provide support to the family and the child during the child’s transition from having been previously removed and living elsewhere to once again living at home. CPS provides family reunification services directly or through contracted providers.

All of the following criteria must be met for a family to be eligible for family reunification services.

- At least one child has been removed from the home.
- The parents have a reasonably stable living arrangement.
- The parents are working to complete goals listed on the family service plan.
- A target date has been set for the child to make his or her transition to the home, or the transition process has begun.

Goals and Objectives of FBSS and Family Reunification Services	
Goals	Objectives
Ensure child health and safety	<ul style="list-style-type: none"> • Ongoing assessment of factors that impact child health and safety. • Services target issues that impact family violence. • Ongoing assessment and provision of basic needs.
Provide family-focused services	<ul style="list-style-type: none"> • Strengths-based assessment and services. • Respect and work in partnership with families. • Culturally sensitive. • Meet the family’s unique needs. • Impact the family system.
Strengthen families through home and community based services	<ul style="list-style-type: none"> • Primarily provide services in the home, when possible. • Link families with formal and informal community resources. • Increase family support systems. • Increase family stability and self-sufficiency.
Establish permanency (a permanent living arrangement or home) for children	<ul style="list-style-type: none"> • Establish permanency when safety can be ensured: <ul style="list-style-type: none"> ○ by keeping children with their families, and ○ by reuniting them with their parents • Work towards other planned living arrangements for children when families are not willing or able to ensure the safety of their children.

A Family Based Safety Services caseworker conducts a family assessment and develops a service plan with the family to identify the services needed to ensure the long-term safety and well-being of the child and family. Each family is provided with a family service plan that details the specific services discussed during the family assessment. Services may be provided to any member of the family responsible for the child’s safety including parents, paramours, or caregivers. Additionally, services can be provided to the child to address their needs. Services

available may include purchased client services (such as daycare, counseling, parenting classes or homemaker services) or referral to community resources.

Substitute Care – 2,775.9 FTEs

If, during the course of an investigation or during the provision of family based safety services, CPS determines it is not safe for a child to live with his or her own family, CPS petitions the court to remove the child from the home. Although “DFPS” is the entity provided the conservatorship role and referenced in statute, it is CPS staff that provide the substitute care services (unless otherwise stated in this section).

There are two types of legal custody typically granted by the courts to DFPS: temporary (TMC) and permanent managing conservatorship (PMC). Both are granted to DFPS as a result of a court hearing and written court order and continue until a judge issues another court order changing the legal status of the child. Most often, children enter conservatorship when DFPS is awarded temporary managing conservatorship. In TMC cases, a final order must be determined within 12 months, although statute allows for a six month extension. Permanent managing conservatorship is considered one type of final order. Other final orders can include dismissal of conservatorship (occurs with reunification or when a child enters adulthood), transfer of permanent managing conservatorship to another (such as a relative), or (if termination of parental rights has already occurred) adoption. The legal status for children typically progresses from TMC to PMC. The judicial review process and responsibilities are guided by state and federal statute.

In general, there are specific court reviews and hearings for children in DFPS conservatorship, of which the following provides more detail.

Temporary Managing Conservatorship

- An ex parte order may be granted prior to the first hearing in the event of circumstances requiring emergency involuntary removal of a child from their parent or caretaker. If the circumstances do not allow a full adversary hearing prior to removal, CPS is authorized to obtain a court-ordered removal after an emergency ex parte hearing or conduct the emergency removal without a court order.
- The adversary hearing is the first hearing. In it, the judge makes decisions about whether a child should be removed (either before removal or, if emergency removal took place, within the first 14 days after removal).
- A status hearing is held within 60 days of the child being placed in temporary managing conservatorship. In this hearing, the judge reviews the service plan and makes findings regarding reasonable efforts made by parties, progress made and other actions.
- Permanency hearings are held regularly in which the judge reviews the conservatorship appointment, status of the child and circumstances, placement, and makes other determinations. Statute outlines a schedule, but judges may hold hearings more frequently. Permanency hearings continue until a final order about the case is determined.

Permanent Managing Conservatorship

- If the final order appoints DFPS as the permanent managing conservator, placement review hearings are held. Statute requires the court to hold such hearings for each child in the PMC of DFPS. The purpose is to review the legal status, consider whether DFPS has taken actions to achieve permanency for the child, review the appropriate placement, and review other information central to the child's safety, permanency and well-being.

CPS substitute care staff participate in the hearings, providing required information to the judge and other parties as required in statute.

In cases where DFPS has temporary managing conservatorship, two permanency planning meetings are typically scheduled. The first is within 45 days of a child entering DFPS care and the second within five months. A meeting is also held within three months of DFPS assuming permanent managing conservatorship and then annually. At a minimum, the following people are notified of a permanency planning meeting:

- the child's parents and the parents' attorney (invited at the same time),
- family and extended family members,
- the child,
- the child's caretaker,
- the child's attorney and guardian ad litem,
- the child's court appointed special advocate (CASA), and
- relevant professionals and other persons who can contribute to identifying and securing a permanent placement that meets the child's needs and is in the child's best interest.

Permanency is not achieved until all of the following occur.

- The child is in a safe living situation.
- The child is in a placement intended to be a permanent living situation.
- The child is with a family committed to the child.
- There is an enduring, nurturing family relationship to meet the child's needs.
- The child has a sense of security.
- A legal status has been achieved for the child that protects the rights of the child without DFPS maintaining conservatorship.
- In the case of a youth whose permanency goal is another planned, permanent living arrangement, the youth has a connection to a caring adult who will be supportive into adulthood, during and after the transition to independent living.

During the time a child is in the conservatorship of CPS, CPS staff rely on the substitute care setting best suited to a particular child's needs. Substitute care placements can include kinship care, foster care, placement in residential care facilities, adoption, or transition to independent living.

When courts put a child in DFPS's TMC, CPS evaluates the family's situation and the parents' ability to care for the children. The family and CPS then have 12 months to resolve the case. During this time, substitute care staff must find the best placement for that child while also attempting to help repair the family. Services may include kinship assessments and home studies, behavioral health assessments, therapeutic services for children and families, parenting classes, substance abuse counseling, substance abuse testing, placement services, and more. Many of these services are court ordered, and their affordability and statewide availability are continuous challenges.

The goals of substitute care are to ensure that children are protected and get the care they need to achieve. Substitute care is a temporary living arrangement and provides or arranges for social and remedial services appropriate to each child's needs; and makes reasonable efforts to reunite children with their families by assessing each child's and family's situation. CPS develops and implements a time-limited, reunification service plan to change the conditions that have placed the child at risk, and to prepare the child and the family for the child's return home or to find alternative permanent placements for children who cannot safely go home.

When a child cannot safely return home, CPS may recommend to the court that the parent-child relationship be terminated and the children be placed with permanent families or caregivers. The parental rights of both parents must be relinquished or terminated before a child is free for adoption. If the court does not terminate the parental rights of a child but it is unsafe for the child to return home, DFPS or a kinship family may be named permanent managing conservator of the child. If there are not appropriate alternatives, the child remains in foster care.

In addition to services described above that are provided directly to the child in conservatorship, substitute care staff provide important services to these children and their families. The services provided during the substitute care stage include:

Kinship Care Services

Kinship care is an important option for children in DFPS conservatorship. Kinship care is when relatives or other fictive kin care for a child who cannot live safely with a parent. Kinship placements meet children's needs for safety while preserving connections to family, community, and culture. Children in kinship placements have shorter stays in substitute care, fewer placement disruptions, and better outcomes compared with children in traditional, paid foster care. Financial assistance is available to eligible relative caregivers to help support the integration of their relative child into their home. Available funds include an integration payment when the placement first occurs and reimbursements for specific expenses.

Additionally, relative and fictive kin are told of the ability to become verified foster parents. That means the relative or fictive kin, upon verification, is trained and paid as other foster parents. If eligible relative or kinship caregivers become verified and take permanent custody of the child, Permanency Care Assistance can be provided. Kinship care services are typically provided by CPS Kinship Development Workers.

Foster Care Services

Foster parents provide children with a safe, nurturing environment and receive a daily reimbursement for the costs of caring for children. CPS substitute care staff and foster parents arrange all educational, medical, dental, and therapeutic services needed by the child. CPS provides services to the biological parents until the family is reunited or the courts approve another permanent living arrangement for the children. The court has ongoing oversight while a child is in foster care and will ask CPS to place the child temporarily in a foster care setting such as a:

- foster home or foster group home verified by a licensed child-placing agency;
- general residential operation licensed by DFPS; or
- facility under the regulatory authority of another state agency.

Foster and Adoptive Home Development Services

CPS substitute care staff verify foster and adoptive families to help ensure there are enough foster and adoptive homes for children in CPS custody. CPS develops an annual recruitment plan to address the need for homes based on the child population each region serves. Substitute care staff and foster parents work as a team to develop and find the best permanent home possible for children in substitute care. Foster parents may also become approved as an adoptive home. Substitute care staff verify CPS foster homes while private child-placing agencies verify their foster homes. Each of the 11 CPS administrative regions holds a license issued by Residential Child Care Licensing to operate as a child-placing agency. As a child-placing agency, CPS adheres to the same minimum standards and is monitored in the same way as any other child-placing agency. Currently, DFPS has 1,375 homes while private child-placing agencies have 7,574 homes (as of July 2013). DFPS adoptive families who are willing to accept children who are not legally free for adoption, but whose permanency plan is adoption, are also required to meet foster home minimum standards and be verified as a foster home.

Transitional Living Services

Although CPS tries to find a permanent home for every child, sometimes that is not possible. In those cases, substitute care staff provide Transitional Living Services, including the Preparation for Adult Living (PAL) program. These services help youth prepare for adult life and assist with the initial transition to adult living. PAL services ensure that DFPS foster youth and those aging out of care receive the tools, resources, supports, and personal and community connections

they need to become self-sufficient adults. Supportive services and benefits are provided to eligible youth ages 16 to 21, and in some cases up to age 23 for certain educational/vocational needs, to assist youth when they leave foster care.

Experiential Life Skills Training for Youth 14 and Older

Foster parents and other childcare or residential providers are required to include training in independent living skills through practical activities such as meal preparation, use of public transportation, money management, and basic household tasks for youth ages 14 and older. Providers have access to resource guides and other training information at the DFPS Residential Contracts website. The youth's experiential learning while in care and PAL activities complement one another and are discussed and addressed in each core life skill area within the youth's service and transition plan.

Preparation for Adult Living (PAL) Program

PAL helps older youth in foster care prepare for their departure and transition from DFPS care and support. Supportive services and benefits are provided to eligible youth up to age 21. PAL is funded by the federal Chafee Foster Care Independence Program, state general revenue funds and community match (20 percent). The PAL program includes the PAL Life Skills Assessment and Life Skills Training in the following core areas.

- Health and safety.
- Housing and transportation.
- Job readiness.
- Financial management.
- Life decisions and responsibility.
- Personal and social relationships.

Medical Services

In addition to the services discussed above, DFPS ensures all medical, behavioral and dental health needs are met for children in DFPS conservatorship. The CPS Medical Services division works in concert with CPS substitute care staff to ensure that each child in substitute care receives accessible, coordinated, comprehensive, and continuous health care. CPS well-being specialists coordinate with STAR Health representatives to troubleshoot complex cases, analyze process effectiveness, and recommend solutions and to provide training for CPS staff. Regional nurses consult with CPS caseworkers. Representatives from STAR Health participate with CPS in the Trauma Informed Care initiative, including a workgroup to identify trauma screening and assessment measures for use in psychosocial assessments STAR Health would provide for children in DFPS conservatorship.

Recruitment Services

The Texas Adoption Resource Exchange (TARE) is one tool substitute care staff use to find adoptive homes for children who are not adopted quickly. TARE is a web-based referral and photo listing service that CPS operates to provide information on children waiting for adoption. It also contains a free, self-registration listing of adoptive families and individuals across the United States that are approved for adoption. TARE was established so that children with special needs and families who wish to adopt them are brought together in an expeditious manner.

The DFPS “Why Not Me” campaign directs the public to TARE website using a redirected URL of www.adoptchildren.org. DFPS launched this campaign in FY 2007, featuring TV and radio ads designed to inspire Texans to adopt older and minority children. CPS also participates with other adoption organizations during national recruitment campaigns and promotes children registered on TARE on organizational websites, including the AdoptUSKids national website.

The Adoption Family Network brings approved adoptive families with a current and approved home study to the attention of substitute care staff and increases placement options for children. The Adoption Family Network is an extension of TARE. It is a quick and easy way for adoptive families in Texas and throughout the United States to tell CPS about their adoption preferences and interest in adopting Texas children. CPS substitute care staff may consider these families for adoption of children who may or may not yet be photo listed on TARE.

Monthly adoption assistance payments and Medicaid coverage are provided on behalf of children who would not be adopted in a timely fashion without assistance. In addition to the monthly subsidy, non-recurring payments are provided after consummation of the adoption to reimburse families for certain adoption related expenses. Those expenses include home study costs, attorney fees, court costs and travel expenses related to the placement. CPS normally reimburses the family for their allowable expenses but can reimburse the attorney directly when requested by the family. Inter-country adoption of special needs children qualify for the non-recurring program when the parents have an adoption assistance agreement with DFPS before legal completion of the adoption.

DFPS Provides Enhanced Adoption Assistance, which increases the monthly adoption assistance DFPS pays for families who are adopting a child who would otherwise remain in foster care through age 18. The maximum amount of enhanced assistance is the amount that DFPS would pay foster parents for care of a child based on that specific child’s foster care service level. The purpose of Enhanced Adoption Assistance is to create an incentive for increasing adoptions of children with such pervasive and intensive needs that they are not expected to exit state care.

Extended adoption benefits were added in October 2010 for youth who were 16 or older when the adoption agreement was signed.

Post-Adoption Services

Post-adoption services support adoptive families by helping with the periodic and ongoing adjustments to adoption, helping the child cope with a background of abuse. These services are designed to increase the success of adoptions and have been available since 1990. CPS supports adoption of special needs children through the adoption assistance programs.

CPS contracts service providers throughout Texas to provide post-adoption services. Currently, there are four primary providers, and several providers serve more than one region. Available services include service planning and casework services, inpatient and outpatient therapeutic treatment, parent training, support groups, and intermittent alternate care. Intermittent alternate care comes in a variety of settings, both in and out of the adoptive family home, including summer camps. Intermittent alternate care is sometimes used in a crisis intervention. Post-adoption service providers report that families who can access and routinely use intermittent alternate care are better able to cope with the special stresses the children present the family. Residential treatment through post-adoption services is normally limited to 12 months.

CPS Support Functions

In addition to the three main program areas of investigation, family based safety services, and substitute care, there are other areas within CPS that help facilitate the casework involving children and families.

Purchased Client Services

- Purchased Client Services (PCS) is a division within CPS that assists in purchasing direct services for CPS children and families served by CPS. PCS plans for services, assists with the procurement of services, manages and monitors contracts, and resolves contracting issues. PCS includes the Regional Contracts, Residential Contracts, Prevention and Early Intervention, and Contract Performance Divisions.
- PCS monitors contractor performance based on risk and document monitoring activity in the Statewide Monitoring Plan. Contract monitoring may include on-site visits, desk reviews, and billing reviews. Fiscal monitoring includes a review of the contractor's financial operations, which may include a review of internal controls for program funds in accordance with state and federal requirements, an examination of principles, laws and regulations, and a determination of whether costs are reasonable and necessary to achieve program objectives. Programmatic monitoring includes a review of a contractor's service delivery system to determine if it is consistent with contract requirements, including the quality and effectiveness of programs.

Residential Contracts

The Residential Contracts division manages contracts with 24-hour residential childcare facilities that provide substitute care to children in DFPS conservatorship. Through these

contracts, DFPS establishes the qualifications, standards, services, expectations, and outcomes for 24-hour childcare facilities and child-placing agencies across the state. Residential contracts work with CPS staff, Residential Child Care Licensing, and a third-party service level system contractor to ensure compliance and oversight. Residential contract managers are regionally based CPS staff and are responsible for assessing, monitoring, and managing residential contracts. Residential contract managers serve as liaisons between CPS field staff and providers.

Regional Contracts

The Regional Contracts division manages purchased client services contracts throughout the state. DFPS enters into regional contracts to provide clients additional protective services and to support and expand DFPS's capacity to serve the community. Regional contract staff manage direct and support service contracts. Examples of direct services include: post-adoption services, evaluation and treatment services, Preparation for Adult Living (PAL) services, and adoption services. DFPS enters into Support Services contracts to improve the effectiveness of direct client services and to support organizations that provide indirect assistance to clients. Examples of support services contracts include memoranda of understanding (MOU's) with other state agencies, Title IV-E county and university contracts, and burial services for deceased children in the managing conservatorship of DFPS. One centralized unit at the DFPS headquarters in Austin manages state office contracts for CPS. These contracts may provide direct services for CPS clients, support services, or grant-supported demonstration projects. These agreements can be contracts or interagency agreements with other state agencies.

Contract Performance

Contract Performance supports performance-based contracting practices for all client services contracts. Contract Performance seeks to improve contract accountability and the oversight of agency client service contracts by establishing performance outcomes and quality of service standards. While Contract Performance is organizationally under CPS, it also provides support for purchased client services supporting Adult Protective Services clients. Contract Performance also provides external client service contractor staff with technical assistance and training on PCS-specific Internet-based applications, including the Performance Management Evaluation Tool (PMET) and the PEI and STAR Data Systems.

Research and Evaluation

The Research and Evaluation unit informs CPS leadership about practice and policy outcomes through evaluative assessment of legislative initiatives and pilot projects. The unit also conducts research on child welfare outcomes related to policy. Staff also coordinates and manages requests from external entities for CPS research data as well as coordinates with external entities and internal staff interested in applying for grant funding opportunities. Research and Evaluation conducts systemic data, policy and process analyses at the state, regional and local level to better understand how children and families are moving through the

CPS system. The analyses assist CPS divisions in identifying ways to streamline and improve policies and processes.

Continuous Quality Improvement

To make sure CPS is as effective as it can be working the thousands of cases it receives each year, there are two support functions in place designed to ensure the quality of CPS casework across all three major program areas (investigations, family based safety services, and substitute care).

Child and Family Services Review (CFSR)

The Child and Family Services Review team is a part of the Accountability division under the Director of CPS Services and consists of a team of 18 Quality Assurance Specialists, five Quality Assurance Leaders, one Program Specialist, one Child and Family Services team lead and one Division Administrator. CPS models this quality assurance process after the federal review process, in which Texas has experienced two federal reviews (2002 and 2008). After each federal review, Texas and each other state, has participated in the required program improvement plan process to address areas needing improvement. The CPS Accountability staff perform quarterly case reviews using the federal onsite instrument (a statistically-valid, randomly selected sample of Family Based Safety Services and Substitute Care cases). Each case is debriefed with staff and regional and statewide reports are produced. CPS disseminated the reports to all applicable staff and posted them on DFPS employee website. These reviews and feedback allow regional staff to continuously learn about how casework actions affect outcomes to children and families. The team is also responsible for implementing the federal onsite reviews, which approximately every five years.

Investigation Quality Assurance (INV QA)

The Investigation Quality Assurance team consists of six staff who conduct quarterly reviews of closed investigations that did not move on to ongoing services. The team uses a guide primarily based on child safety and investigation policy to reinforce consistent application of investigation practices across the state and to regularly identify areas that are working well and areas that need improvement. The team reviews a random, statistically-significant sample of approximately 4,000 closed investigations annually. The team also reviews a sample of screened intakes where priority levels were downgraded and the intake not progressed for traditional investigation. The review analyzes decisions for adherence to policy and assessment of child safety. This process provides quarterly reports with feedback to regional staff on both compliance and quality issues, and it notes investigation trends specific to individual regions. Any cases that require immediate action are referred back to the region.

C. What evidence can you provide that shows the effectiveness and efficiency of this program or function? Provide a summary of key statistics and performance measures that best convey the effectiveness and efficiency of this function or program.

Investigations:

In FY 2012, CPS received 241,681 reports through Statewide Intake with 275,961 alleged victims of child abuse or neglect, confirming 64,366 unique victims in FY 2012.

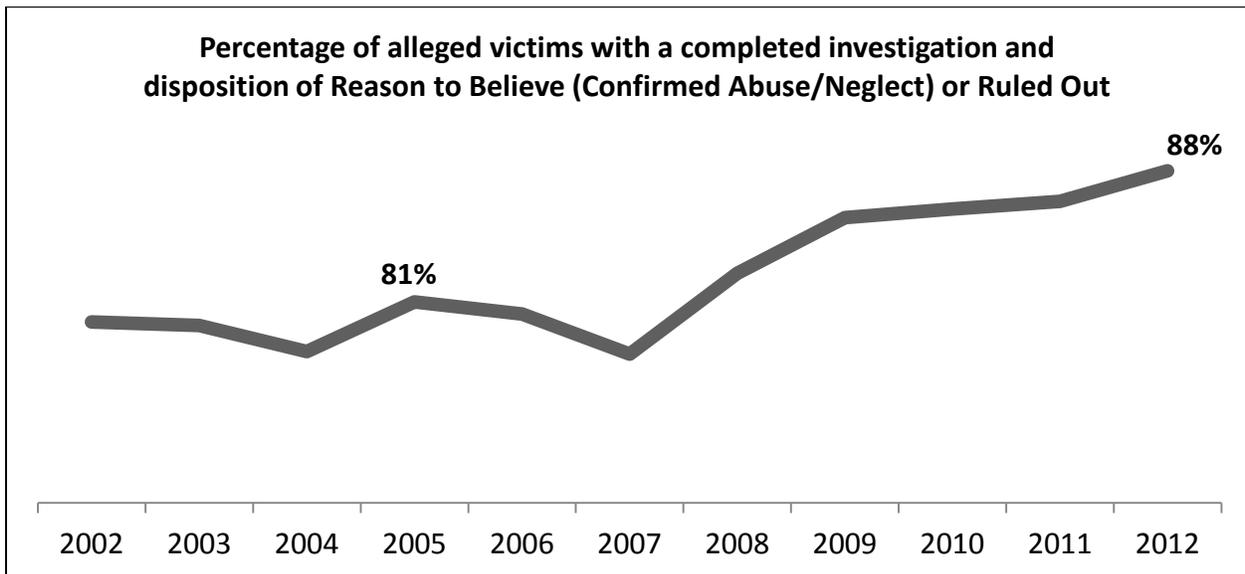
CPS Total Initial Intakes and Screened Out Cases		
Fiscal Year 2012	Total Initial Intakes – Number	Total Initial Intakes – Percentage
Priority 1	65,203	27.0%
Priority 2	171,182	70.8%
Priority None	5,296	2.2%
Total	241,681	100%

Total P2 Intakes		
Total P2 Intakes	Number	Percentage
Not eligible for screening	100,700	58.8%
Eligible and assigned to Screeners	70,482	41.2%
Total	171,182	100%

Eligible and Assigned to Screeners		
Eligible and Assigned to Screeners	Number	Percentage
Not Screened Out	51,273	72.7%
Screened Out (P2 to PN)	19,209	27.3%
Total	70,482	100%

Child Protective Services Completed Investigations, FY 2012	
Region	Completed Investigations
Region 1 Lubbock	7,244
Region 2 Abilene	4,370
Region 3 Arlington	41,455
Region 4 Tyler	8,881
Region 5 Beaumont	6,207
Region 6 Houston	30,473
Region 7 Austin	21,136
Region 8 San Antonio	20,592
Region 9 Midland	4,276

Child Protective Services Completed Investigations, FY 2012	
Region	Completed Investigations
Region 10 El Paso	4,561
Region 11 Edinburg	16,984
Unknown	32
Total	166,211



Since 2002, enhanced practices with engaging families, collateral contacts and community resources has increased the ability of staff to find clear evidence to confirm or negate allegations of abuse and neglect on the majority of investigations. The remaining 12 percent are unable to complete or unable to determine investigations.

Confirmed Allegations of Child Abuse or Neglect by Type, FY 2012						
<i>Table Includes Abuse or Neglect Types: Physical Abuse, Sexual Abuse, Emotional Abuse, Abandonment, Medical Neglect, and Physical Neglect</i>						
Region	Physical Abuse	Sexual Abuse	Emotional Abuse	Abandonment	Medical Neglect	Physical Neglect
1 Lubbock	629	299	28	7	48	349
2 Abilene	396	175	30	8	49	222
3 Arlington	3,328	1,528	77	48	336	1,057

Confirmed Allegations of Child Abuse or Neglect by Type, FY 2012

Table Includes Abuse or Neglect Types: Physical Abuse, Sexual Abuse, Emotional Abuse, Abandonment, Medical Neglect, and Physical Neglect

Region	Physical Abuse	Sexual Abuse	Emotional Abuse	Abandonment	Medical Neglect	Physical Neglect
4 Tyler	577	325	25	4	69	251
5 Beaumont	424	186	26	8	65	215
6 Houston	1,756	998	60	25	245	557
7 Austin	1,305	645	46	13	138	347
8 San Antonio	1,320	727	55	25	236	593
9 Midland	421	159	35	5	56	219
10 El Paso	425	143	22	2	68	164
11 Edinburg	1,207	745	74	14	273	705
Unknown	1	1	0	0	0	0
State Total	11,789	5,931	478	159	1,583	4,679

Confirmed Allegations of Child Abuse or Neglect by Type, FY 2012

*Table Includes Abuse or Neglect Types: Neglectful Supervision, Refusal to Accept Parental Responsibility, Total Confirmed Allegations of Child Abuse or Neglect, Percent of Child Abuse or Neglect, and *Unduplicated Confirmed Victims*

Region	Neglectful Supervision	Refusal to Accept Parental Responsibility	Total Confirmed Allegations of Child Abuse or Neglect	Percent of Child Abuse or Neglect	*Unduplicated Confirmed Victims
1 Lubbock	2,849	49	4,258	5.7%	3,654
2 Abilene	1,696	13	2,589	3.5%	2,212
3 Arlington	11,985	114	18,473	24.9%	15,930
4 Tyler	2,213	31	3,495	4.7%	2,951
5 Beaumont	1,792	16	2,732	3.7%	2,375
6 Houston	5,826	112	9,579	12.9%	8,358
7 Austin	6,204	105	8,803	11.9%	7,831
8 San Antonio	7,043	64	10,063	13.6%	8,931
9 Midland	1,493	15	2,403	3.2%	1,983
10 El Paso	1,615	25	2,464	3.3%	2,116
11 Edinburg	6,269	96	9,383	12.6%	8,009
Unknown	14	0	16	0.0%	16
State Total	48,999	640	74,258	100.0%	64,366

*Victims have been unduplicated by investigation stage.

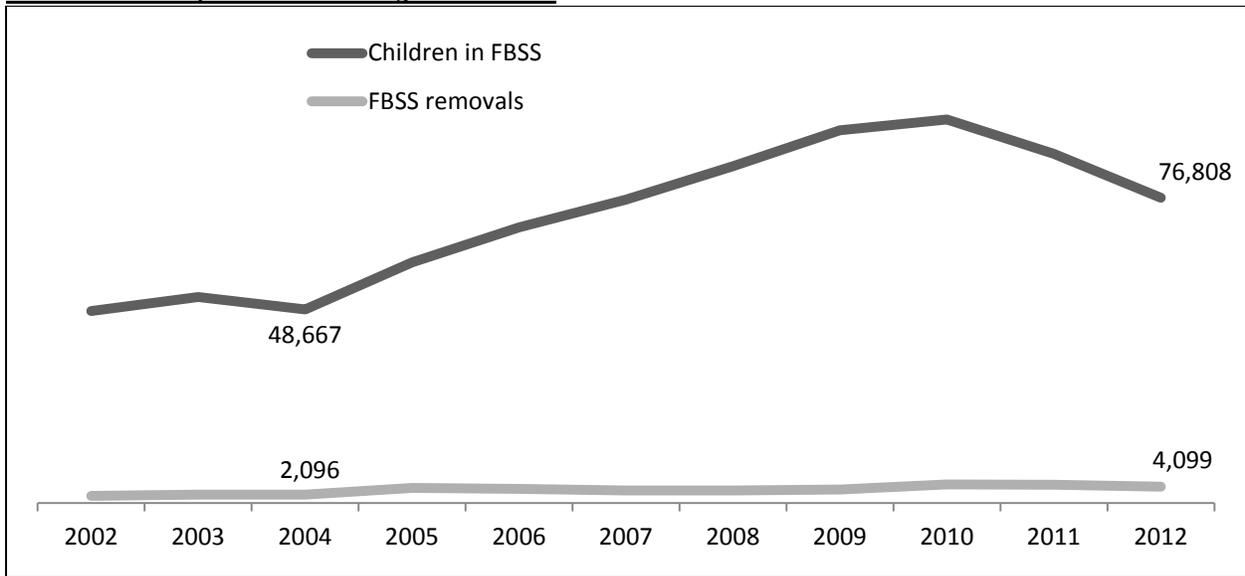
Family Based Safety Services:

The annual number of families receiving FBSS increased 20 percent from 22,767 families in FY 2005 to 33,258 families in FY 2012, demonstrating the cultural shift to a more family-focused practice model. In FY 2012, FBSS staff made over 265,123 visits with families across the state of Texas.

Family Based Safety Services: Annual Number of Families Receiving Preservation Services in FY 2012					
Region	Regular	Moderate	Intensive	Contracted	Total
1 Lubbock	1,158	478	9	0	1,645
2 Abilene	540	498	0	0	1,038
3 Arlington	3,788	1,807	19	3	5,617
4 Tyler	867	201	0	0	1,068
5 Beaumont	557	129	3	0	689
6 Houston	3,584	897	118	0	4,599
7 Austin	1,626	593	46	0	2,265
8 San Antonio	4,480	168	4	0	4,652
9 Midland	559	331	3	0	893
10 El Paso	800	108	0	0	908
11 Edinburg	3,927	982	20	1	4,930
Out of State	1	1	0	0	2
Total	21,887	6,193	222	4	28,306

Annual Number of Families Receiving Reunification Services in FY 2012					
Region	Regular	Moderate	Intensive	Contracted	Total
1 Lubbock	292	2	0	0	294
2 Abilene	203	2	0	0	205
3 Arlington	934	3	0	0	937
4 Tyler	248	2	0	0	250
5 Beaumont	170	2	0	0	172
6 Houston	722	4	2	0	728
7 Austin	751	3	3	0	757
8 San Antonio	693	1	0	0	694
9 Midland	157	0	0	0	157
10 El Paso	108	2	0	0	110
11 Edinburg	574	62	5	0	641
Out of State	6	1	0	0	7
Total	4,858	84	10	0	4,952

FBSS Is Successful at Preventing a Removal



In Family Based Safety Services (FBSS), CPS works more collaboratively with families making it possible for the parents to retain legal custody. In 2012, about 70 percent of the new children coming into CPS were served by this type of service. FBSS is usually successful at preventing a removal.

Substitute Care:

Whenever CPS determines that a child cannot remain safely at home, CPS petitions the court to remove that child. For children who have been removed, CPS provides substitute care services that best meet a particular child’s needs. On August 31st, 2012, there were 27,919 children in DFPS substitute care.

Substitute Care - Number of Children Removed from Home as a Result of CPS Abuse/Neglect Investigation				
Fiscal Year	As a Result of an Investigation	From Family Based Safety Services*	From Family Substitute Care Services	Total
2012	12,538	4,220	214	16,972

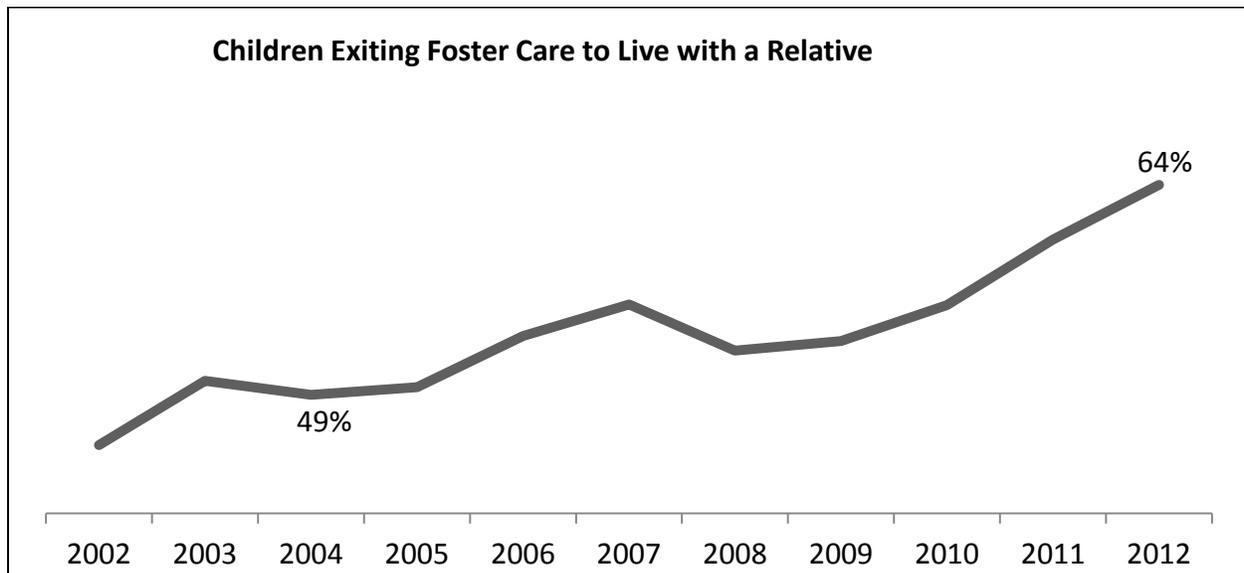
* Removals from Family Based Safety Services includes Family Preservation and Family Reunification.

Legal Status of Children in DFPS Legal Responsibility as of August 31, 2012		
Type	Number	Percent
Care, Custody & Control*	49	0.2%
Temporary Managing Conservatorship (TMC)	17,332	58.2%
Permanent Managing Conservatorship (PMC)	12,368	41.5%
Possessory Conservatorship**	26	0.1%
Total	29,775	100.0%

* Care, Custody and Control - In some counties in Texas, this type of custody is given rather than appointing a temporary managing conservator. This provides legal authority for DFPS to ensure a child's safety and meet a child's basic needs for shelter, food, and education.

** Possessory Conservatorship - A judge appoints a parent as Possessory Conservator who is not appointed as a sole or joint managing conservator, unless this appointment is not in the best interest of the child. Possessory Conservators are provided with visitation orders, unless access would endanger the child physically or emotionally.

When Reunification is not Possible, More Children Are Going to a Relative



Children* in Substitute Care Placements by Living Arrangement Categories as of August 31, 2012

Region	CPA Foster - Group Homes & Independent Homes	DFPS Foster & Foster Group Homes	DFPS Adoptive Homes	Private Adoptive Homes	Kinship	General Residential Operation	Emergency Shelters	Residential Treatment	Other	Total
Lubbock (1)	506	150	11	22	518	148	53	137	56	1,601
Abilene (2)	341	97	3	4	256	10	17	37	15	780
Arlington (3)	2,412	294	20	81	1,848	55	47	246	118	5,121
Tyler (4)	593	114	33	13	506	59	26	92	43	1,479
Beaumont (5)	349	162	8	4	277	29	19	39	19	906

Children* in Substitute Care Placements by Living Arrangement Categories as of August 31, 2012

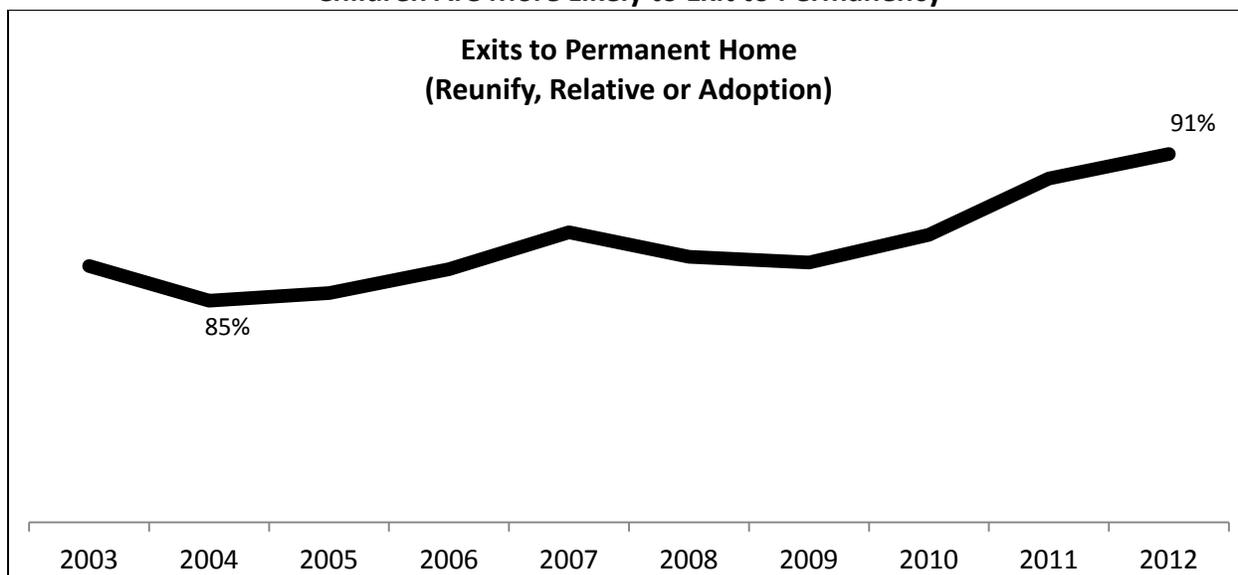
Region	CPA Foster - Group Homes & Independent Homes	DFPS Foster & Foster Group Homes	DFPS Adoptive Homes	Private Adoptive Homes	Kinship	General Residential Operation	Emergency Shelters	Residential Treatment	Other	Total
Houston (6)	2,442	305	180	184	2,188	42	81	302	176	5,900
Austin (7)	1,137	249	21	29	1,255	37	37	224	73	3,062
San Antonio (8)	1,728	179	27	67	2,040	237	195	209	173	4,855
Midland (9)	425	99	8	9	325	13	41	68	42	1,030
El Paso (10)	202	73	1	1	140	1	21	26	13	478
Edinburg (11)	1,044	99	11	19	629	63	59	120	61	2,105
Out of State	0	0	0	0	0	0	0	0	0	0
Total	11,179	1,821	323	433	9,982	694	596	1,500	789	27,317

*Excludes 602 young adults over 18 who have aged out of DFPS conservatorship but remain in DFPS care.

**Permanency Goal of Children in Substitute Care for Whom DFPS had Legal Responsibility
Fiscal Year End 2012**

Goal	Count	Percent
Adoption	10,893	48.8%
Reunification	7,213	32.3%
Permanent Placement with Relatives/Other Caregivers	2,030	9.1%
Alternative Long Term Living	1,206	5.4%
Adult Living	966	4.3%
Total Children	22,308	100%

Children Are More Likely to Exit to Permanency



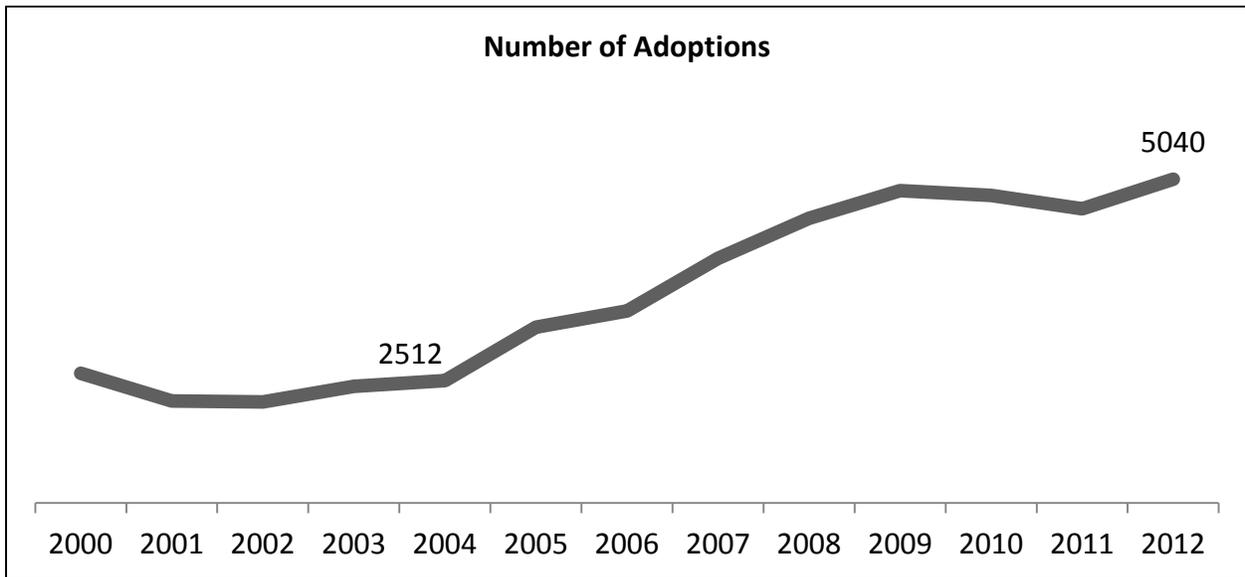
Of all children who exited DFPS custody in 2012, 91 percent exited to reunification, relative PMC or adoption. All of this translates into more children finding forever homes, primarily because of the increase in using relatives whether for adoption or permanent custody.

Adoption Incentive Funds

In FY 2005, CPS undertook Operation Placing Us in Safe Homes (or Operation PUSH) to clear a backlog of adoptions by eliminating legal roadblocks and other obstacles delaying finalizing adoptions. As a result, adoptions increased 26.3 percent in FY 2005, prompting national recognition and an adoption incentive award in FY 2006 from the U.S. Department of Health and Human Services. Texas has received this award annually since 1998 when the Adoption Incentives Program began as part of the Adoption and Safe Families Act of 1997 (ASFA). The Department reauthorized the award to continue through September 2013. The award recognizes innovative programs that are implemented by states to remove barriers to adoption.

To be eligible for adoption incentive awards, a state must exceed its baseline performance in at least one of the following three categories: total adoptions placed by the agency; older youth public agency adoptions; or exceeding their highest-ever foster child adoption rate.

CPS experienced a large and sustained increase in adoptions after the launch of the “Why Not Me?” media campaign in FY 2007. The campaign included radio and TV public service announcements aired statewide, along with billboards and direct mail that targeted predominantly minority neighborhoods in key markets. The broadcast ads were aired through a contract with the Texas Association of Broadcasters for three months each in 2007, 2008, and 2009. In the first year of the ads, public interest soared and adoptions increased 19.2 percent, and another 12.3 percent the following year. Overall, between 2002 and 2012, the number of children adopted has more than doubled.



National Youth in Transition Database (NYTD)

The National Youth in Transition Database (NYTD) is another indicator of the effectiveness of substitute care in CPS. In 1999, Congress established the John H. Chafee Foster Care Independence Program, giving states flexible funding to assist youth in transitioning out of foster care. The law required the Administration for Children and Families (ACF) to develop a data collection system. The National Youth in Transition Database (NYTD) was created in February 2008, by federal regulation (45 CFR 1356.80 through 1356.86). It requires states to:

- Track basic demographic data and the independent living services provided to youth.
- Collect data on outcome measures that may be used to assess state performance in operating independent living programs.

Texas conducts a baseline survey of youth who are in foster care within 45 days after their 17th birthday and conducts a follow up survey for some of those youth at age 19 and again at age 21. During the initial baseline year, any youth in foster care reaching their 17th birthday from October 1, 2010 to September 30, 2011 were surveyed. Subsequent baseline surveys of 17-year-olds will be conducted every three years thereafter (for example, October 1, 2013 to September 30, 2014).

D. Describe any important history regarding this program not included in the general agency history section, including how the services or functions have changed from the original intent.

Investigations

Following the passage of Senate Bill 6 that resulted in the CPS Reform of 2005, investigation units moved to a uniform unit structure. Currently, each investigation unit consists of six caseworkers and one supervisor. Each investigations unit also has one position, depending on local needs, that is used as a casework assistant or as clerical support, to assist caseworkers in meeting the workload demands of their jobs. Each uniform unit is led by an investigation supervisor.

Special Investigator positions were created to provide support and assistance to investigators in the methods of forensic interviewing of victims and suspected perpetrators in gathering evidence and coordination of criminal or civil case actions. The special investigator's role focuses on the forensic components of the investigation and coordinating with law enforcement. When working with other CPS investigators the special investigator takes on a mentoring role, ensuring that they are training and developing the investigator's forensic investigation skills. Special Investigators may mentor new investigators or other investigators who would benefit from further skill development. Because Special Investigators do not conduct entire investigations, they are able to accompany and partner with investigators during certain portions of high-risk, high-profile investigations.

Family Based Safety Services

In 2009, the 81st Texas Legislature allocated resources to expand the use of family group decision making in FBSS cases. CPS began utilizing family group decision making in FBSS in 2010.

Family group decision making is used in the FBSS stage of service to address two primary needs:

Increasing the parent's participation in safety and service planning, and strengthening an extended family's ability to provide safe and permanent living arrangements.

Family group decision making describes a variety of practices within CPS to work with, and engage families in, problem solving and case resolution. Specialized Family Group Decision-Making staff provide the service, tailored to the individual circumstances, to engage families and guide safety and service planning. These include:

- Family team meetings are a rapid response to child safety and placement concerns used to achieve positive outcomes for children in the earliest stages of a case. It is used with families when a child is at risk of removal and, though used in all stages, is most common during Investigation and Family Based Safety Services.
- Family group conferences occur after a child has been removed and are used for case planning. In the conference, families join with relatives, friends, and others in the community to develop a plan to ensure children are cared for and protected from future harm. This more broadly defined "family" convenes with caseworkers and others in a unique partnership that empowers the "family group" with a high degree of decision-making authority and responsibility. A permanency conference is held, when it is not

possible or appropriate to hold a Family Group Conference, for the purposes of case planning. Family group decision-making strategies are used, to the extent possible.

- Circles of support are held soon after a youth who has been removed from the home reaches age 16. It is directed by the youth and focuses on the development of a transition plan to help the youth be prepared for adulthood and to connect the youth to supportive and caring adults who can help when the youth ages out of care. A transition plan meeting (shorter and more DFPS-driven, with fewer participants) is used as an alternative to a circle of support.

Substitute Care

CPS reforms that started in 2005 targeted the educational outcomes for children and youth in foster care with the development of an educational portfolio, the creation of regional and State Office education specialist positions, and collaboration with community stakeholders, including judiciary and education.

The Centralized Placement team structure was created in September 2005. The teams facilitate and expedite foster care placements, while ensuring placements meet best practice, policy, and minimum standards. The teams consider the child's individual needs to identify placement options that will best meet those needs to assure safety and well-being.

In 2007, the Legislature created the Intensive Psychiatric Transition Program, which is a step-down program for youth transitioning from psychiatric hospitals to residential treatment, and subsequent placement in less restrictive environments.

Congress passed the Fostering Connections to Success and Increasing Adoptions Act of 2008. This legislation included components that:

- Provide a state option for a subsidized kinship guardianship program (known in Texas as Permanency Care Assistance).
- Give states the option to provide Title IV-E foster care maintenance payments for youth that want to stay in extended foster care up to their 21st birthday. Youth must meet certain educational or employment related requirements unless a medical condition makes that impossible.

In 2009, the Texas Legislature passed legislation and funding to allow Texas to implement the optional subsidized guardianship program, and provide Title IV-E foster payments of youth up to their 21st birthday.

Permanency Care Assistance, the Texas kinship guardianship assistance program, allows eligible kinship caregivers to receive financial and health benefits for a child when they are granted permanent managing conservatorship by a court of a relative child who has been in the temporary or permanent managing conservatorship of DFPS. Since 2010, more than 1,000 children have been the subjects of a Permanency Care Assistance agreement where the kinship family retained legal custody of the children.

Also in 2009, the Texas Legislature amended the Texas Family Code to further define the Transitional Living Services Program for youth in foster care. The goal is to ensure that starting at age 14, each youth has an individualized transition plan, and receive experiential hands-on life skills training in the foster care placement. The legislation also set requirements to make sure youth have access to important personal documents. Further, the legislation required DFPS to develop a comprehensive transitional living services plan to describe the efforts DFPS will make to continue to help foster youth make the transition to adulthood successfully. The comprehensive transition plan addressed required elements laid out in H.B. 1912, include the following.

- Efforts to further individualize independent living skills assessment and transition planning.
- Modifying the Preparation for Adult Living (PAL) program training curriculum to include online training options that meet the individual needs of each youth.
- Ensuring that transitional living services are appropriate and meet the needs of each youth in foster care with disabilities.

In 2010, as part of the Patient Protection and Affordable Care Act (P.L. 111-148), DFPS implemented policy to ensure that youth aging out of foster care receive information about the importance of having a healthcare power of attorney and the importance of designating an individual to make healthcare treatment decisions on behalf of the youth. Discussion of this information is incorporated into permanency planning meetings for youth or other meetings such as circles of support, the transition plan meeting, or a regular meeting between the youth and the caseworker.

E. Describe who or what this program or function affects. List any qualifications or eligibility requirements for persons or entities affected. Provide a statistical breakdown of persons or entities affected.

Investigation

Investigation services are provided to all children determined to be alleged victims of abuse or neglect as defined in the Texas Family Code, Chapter 261. There is no waiting list maintained or other eligibility criteria, such as age, race/ethnicity or income. CPS investigations has jurisdiction if the alleged abuse occurred within a family or household or allegations refer to a volunteer or staff member of a private or public school.

Profile of Confirmed Child Abuse/Neglect Victims Fiscal Year 2012 - Age and Gender								
Age	< 1 yr	1 – 3 yrs	4-6 yrs	7-9 yrs	10-12 yrs	13-17 yrs	Unk	All ages
Female	4,654	7,480	6,526	4,971	4,215	5,219	7	33,072
Male	4,976	8,193	6,737	4,794	3,458	2,988	15	31,161
Unknown	31	39	34	13	10	6	0	133
Total	9,661	15,712	13,297	9,778	7,683	8,213	22	64,366

Profile of Confirmed Child Abuse/Neglect Victims Fiscal Year 2012 – Race/Ethnicity							
Race/Ethnicity	Anglo	African American	Hispanic	Native American	Asian	Other	All
Total	20,095	10,151	30,034	41	306	3,739	64,366

Family Based Safety Services

All of the following criteria must be met for a family to be eligible for FBSS.

- At least one child is at risk of abuse or neglect in the foreseeable future or may be at risk of removal from the home.
- Services are likely to provide a safe alternative to DFPS obtaining conservatorship.
- A written, time limited, realistic safety plan is in place.
- Services are likely to protect the family’s children from abuse or neglect in the immediate or short-term future.
- Reducing the risk of abuse or neglect to a child is likely to be achieved with CPS services within 60 to 270 days.

The annual number of families receiving FBSS increased 20 percent from 22,767 families in FY 2005 to 33,258 families in FY 2012, demonstrating the cultural shift to a more family-focused practice model. In FY 2012, FBSS staff made over 265,123 visits with families across the state of Texas.

Substitute Care

There were 27,919 children in DFPS substitute care on the last day of FY 2012.

- 16,697 children were in foster care.
- 11,222 children were in other types of substitute care.

Of the 16,697 children in foster care:

- 11,552 were in CPA foster homes;
- 1,839 were in DFPS foster homes;
- 765 were placed in basic childcare - typically cottage and campus type settings;
- 1,527 were placed in residential treatment centers (RTC), a structured setting for children with serious emotional disturbance or mental health issues;
- 620 children were placed in emergency shelters intended for stays of less than 30 days; and
- 394 were placed in other types of foster care such as camps, maternity homes hospitals, juvenile detention, intermediate care facilities for individuals with intellectual disabilities (ICF-IID), home and community-based services (HCS) homes, State Supported Living Centers, and hospitals.

Of the 11,222 children in other types of substitute care:

- 9,982 were placed in kinship care;
- 433 were in pending adoptions in CPA adoptive homes;
- 323 were in pending adoptions in DFPS adoptive homes; and
- 484 were placed in other substitute care which includes independent living programs, unauthorized absences (runaways), and court ordered placements.

Demographics of Children in Foster Care at End of Year – Age and Gender, Fiscal Year 2012									
Age	< 2 yrs	3-5 yrs	6-9 yrs	10-13 yrs	14-17 yrs	18-21 yrs	Grand Total	Female	Male
Total	3,614	2,766	2,948	2,820	3,947	602	16,697	7,667	9,030
Percent	21.6%	16.6%	17.7%	16.9%	23.6%	3.6%	100%	45.9%	54.1%

Demographics of Children in Foster Care at End of Year - Race/Ethnicity, Fiscal Year 2012							
Race/Ethnicity	Anglo	African American	Hispanic	Native American	Asian	Other	All
Total	5,048	3,825	6,813	22	38	951	16,697
Percent	30.2%	22.9%	40.8%	.1%	.2%	5.7%	100%

Once a child is removed from their home and it is determined that the child cannot return home, parental rights may be terminated by the courts, making the child eligible for adoption. CPS provides adoption services to those eligible children regardless of age, race, ethnicity, or special needs when a child in DFPS managing conservatorship needs to be adopted or a district court appoints DFPS to complete a home study when a petition is filed to adopt a child. CPS also provides selected adoption services to children in the managing conservatorship of other states when CPS receives requests for services under the Interstate Compact on the Placement of Children.

Eligibility Criteria to Receive Adoption Assistance

CPS provides adoption assistance to children who qualify as special needs. The qualification for eligibility for adoption assistance begins the day before the date of the adoptive placement agreement is signed. The child must be in the managing conservatorship of DFPS or an authorized entity, and meet at least one of the following conditions.

- The child is at least 6 years old.
- The child is at least 2 years old and a member of a racial or ethnic group that exits foster care at a slower pace than other racial or ethnic groups.
- The child is being adopted with a sibling or joining a sibling who has been adopted by the parents or for whom the parents already have permanent managing conservatorship or an equivalent arrangement in another state.

- The child has a verifiable physical, mental, or emotional handicapping condition, as established by an appropriately qualified professional's diagnosis that states what the condition is and that it is handicapping.
- The child has been determined by the Social Security Administration to meet all the medical or disability requirements with respect to eligibility for Supplemental Security Income (SSI) benefits.

Demographics of Children in Consummated Adoptions FY 2012

There were 5,079 children placed in an adoptive home FY 2012 and 33.7 percent of the children had a disabling condition. This means a physical or mental impairment that substantially limits one or more of an individual's major life activities including emotionally disturbed, drug or alcohol abuse, physical handicaps, medically involved, and learning disabled.

F. Describe how your program or function is administered. Include flowcharts, timelines, or other illustrations as necessary to describe agency policies and procedures. Indicate how field and regional services are used, if applicable.

When it comes to the three main program areas of CPS (investigations, family based safety services, and substitute care), the vast majority of positions are in the field, spread across the 11 Health and Human Service regions that comprise the state of Texas. Each of these CPS regions is headed by a Regional Director. These field operations are overseen by a Director of Field position located in State Office in Austin. Many of the specialist positions that support field operations are also overseen by staff in State Office in an attempt to ensure consistency in the delivery of the support services.

Investigation Staff

Texas Human Resources Code Section 40.031 establishes an Investigations division, to be headed by a director with a background in law enforcement. The CPS Investigations division ensures that policy and practice methods incorporate the use of forensic investigation techniques into CPS investigations and improve working relationships with law enforcement entities throughout the state.

In addition to investigation screeners, screener supervisors, investigators, supervisors, case aides, and clerical staff, CPS has several positions and programs to assist caseworkers and supervisors with the knowledge, skills and abilities to ensure child safety and to make sound casework decisions in investigations.

Child safety specialists and lead child safety specialists provide expert consultation and review of cases that involve a high risk to the health or safety of a child to ensure that risk assessment tools are correctly used and best practice is followed.

The Forensic Assessment Center Network was implemented in FY 2006 as a joint project of DFPS and the University of Texas Health Science Center - Houston. There are numerous medical center sites in the network. The network provides 24-hour support for CPS investigative staff via a toll-free number and a web-based system. Physicians have expertise in determining whether illnesses and injuries are the result of abuse or neglect and provide ongoing education to CPS workers.

Resolution specialists conduct the administrative reviews of investigative findings, preponderance reviews, legal and factual sufficiency reviews, and aid in the administrative hearings process, including testifying when necessary. They help to identify trends and develop recommendations to improve the developmental and training needs of CPS investigation staff to achieve and enhance quality investigations.

Risk managers were created in FY 2008 and placed in the regions to collaborate with CPS program and the child safety specialists to develop and implement strategies to enhance child safety across all stages of service. These 13 staff members are also responsible for working with all levels of staff to build skills in safety knowledge, decision making, and methods to focus on child safety issues.

Timeframes

Reports of child abuse or neglect are classified in one of two priority groups and the priority of the intake determines how quickly an investigation begins. Trained intake staff at DFPS Statewide Intake (SWI) assign the appropriate priority based on the information available at the time they get the report. A CPS field supervisor or investigation screener may specify a more exact timeframe for starting the investigation.

Priority I Reports

Priority I reports include all reports of children who appear to face an immediate risk of abuse or neglect that could result in death or serious harm. Investigations of these reports must start within 24 hours of receiving the report.

Priority II Reports

Priority II reports include all reports of abuse or neglect that are not assigned as Priority I. These investigations must start within 72 hours of receiving the report. Reports that are formally screened must either be progressed to investigations within 72 hours of receiving the report (which will provide the investigator an additional 72 hours to make initial contact), or closed as a Priority None within 72 hours of receiving the report.

Priority None Reports

Some reports do not meet the legal definition of abuse or neglect, as defined in the Texas Family Code, and are not assigned for investigation. Reasons for not assigning a report for investigation include:

- situations that do not appear to involve a reasonable likelihood that a child will be abused or neglected in the foreseeable future;
- allegations that are too vague to determine if a child has been or is likely to be abused or neglected;
- reports with too little information to locate the child or the child's family or household; and
- situations that are already under investigation.

Family Based Safety Services

Family Based Safety Services (FBSS) are designed to maintain children safely in their homes--or make it possible for children to return home--by strengthening the family's ability to protect their child and reduce threats to their child's safety. FBSS staff are specialized to provide this service and most regions have FBSS Program Administrators to supervise all regional FBSS units. If the region is not large enough to warrant a specialized FBSS Program Administrator, an Investigations or FBSS Program Administrator supervises specialized Investigation or FBSS Program Directors who supervise FBSS units.

FBSS services can be provided either directly by CPS FBSS staff, through contracted service providers, or through referrals to community-based providers. Currently, FBSS caseworkers may also provide one-on-one parenting and homemaker skills in areas where community-based services are not available.

Three levels of family-based safety services (regular, moderate and intensive) are offered to families, based on the family's level of need, as assessed by CPS staff. The level of service a family receives is determined by the degree of risk to the child based on the identified safety threats, the child's vulnerability to those safety threats, and the sufficiency of parental protective capacities.

When determining how many regular family based safety services cases to assign to a caseworker, the supervisor tries to limit the caseworker's caseload to a size that gives the caseworker enough time to address each family's needs. On average, counting all casework activities, an FBSS caseworker spends two to four hours per month on each family's case for regular services; most FBSS cases require regular services. At least once a month, the visits must address issues regarding needed medical, social, educational, and other services. Moderate FBSS services require four to seven hours per month while Intensive FBSS services require seven to ten hours per month on each family's case.

At a minimum, the FBSS caseworker sees, at least once a month, each child at risk (including those children in parental child safety placements); and each parent or caregiver who receives services. The majority of contacts must occur in the home.

In FBSS, permanency is considered achieved when the family is able to care for the child safely with risk factors controlled, and DFPS can close its case; or finalizes arrangements to have

someone other than DFPS, care for the child on a permanent, legal basis. DFPS closes FBSS cases if CPS services are no longer needed or there is a basis for administrative closure. The case is not closed until the threats to the child's safety have been mitigated or eliminated; or the parent's capacity to protect the child is sufficient to control the safety threats. Before closing an FBSS case, the caseworker must hold a final meeting with the family, through a Family Group Conference (if possible); or a face-to-face contact with the family in the home. During the final meeting with the family, the caseworker must address the following items.

- The community resources, the culturally relevant support systems, and the services that are available to the family without CPS assistance.
- The family's achievements, strengths, and protective capacities.
- The family's plans to handle current or future safety issues.
- The family members' feelings about the caseworker's pending departure.

Substitute Care Staff

Substitute care staff perform specialized roles, determined by regional need, including the following.

- Conservatorship staff are responsible for case management and primary casework duties required to ensure safety, permanency, and well-being.
- Foster and Adoptive Home Development staff, who recruit, verify and provide resources to foster and adoptive parents providing care to children and youth in conservatorship.
- Preparation for Adult Living staff, who provide transitional living services to older youth and serve as a resource for young adults who have aged out of care.
- Kinship Development workers, who train, support and assess relative and kinship caregivers.
- I See You staff, who serve as secondary caseworkers in proximity to children who are placed outside of their home region. I See You staff provide an accessible caseworker to a child (meeting face-to-face with the child and caregiver, supervising visitation, attending required medical appointments when needed, and other services) while reducing travel costs.
- Adoption or Adoption Preparation staff, who help identify a potential family and prepare a child for adoption consummation once the child is legally free for adoption.

Additionally, specialized staff provide consultation or technical assistance, or provide a specialized function typically without carrying an assigned caseload. These include the following positions.

- Centralized Placement Team staff assist workers in obtaining placements that match the child's individual needs. Residential Treatment Placement coordinators are members of the Placement team that focus specifically on obtaining residential treatment center placements for children who need them.

- Family Group Decision-Making staff convene and facilitate family group conferences and circles of support.
- Eligibility staff determine individual eligibility of children in substitute care in order to comply with federal funding requirements.
- Accounting and Bookkeeping staff, as well as daycare coordinators, monitor regional expenditures and use of regional resources.
- Education Specialists serve as regional experts for issues associated with schools, special education, and resources for meeting each child’s educational needs.
- Developmental Disability Specialists serve as regional experts regarding children with developmental disabilities. Some Developmental Disability Specialists carry a small caseload of children with specialized needs placed in facilities to ensure their medical requirements are addressed.
- Youth Specialists serve as the “youth voice” for staff and community stakeholders, articulating the view of youth who are in conservatorship and assisting with youth development.
- Permanency Practitioners who serve as regional experts and facilitators for Permanency Roundtables.
- Regional Nurses, who, in partnership with Well Being Specialists, serve as regional experts for issues related to a child’s physical and behavioral health needs.
- Permanency Care and Adoption Assistance Negotiators who work with potential families to determine eligibility for financial assistance available after the child exits to their permanent home.
- On the Job Training Supervisors who provide supervision for staff in training prior to assignment to their new unit.
- Volunteer Coordinators and Community Initiative Specialists who recruit and liaise with volunteers and community stakeholders who work closely with CPS; they also assist in obtaining resources to meet individualized needs of children in care.

Substitute care is provided from the time a child is removed from his or her home and placed in DFPS conservatorship until the child returns home safely or is placed in another living arrangement that does not require DFPS supervision. Specifically, substitute care consists of the residential care and support provided to the child; and the supportive and therapeutic services provided to the child, the child’s parents, and the child’s substitute caregiver.

When a child is removed from the home and placed in DFPS conservatorship, DFPS legally assumes parental responsibility for the child. When CPS places the child in substitute care, the child’s substitute caregiver works with CPS to help the Department meet its parental responsibility. The Department’s parental responsibility for the child does not end until the child leaves DFPS conservatorship.

As a result, the child's permanency goal, child and family needs, and unique circumstances require development of a child's plan of service and, unless rights have been terminated, a family plan of service to guide the steps to be taken while the child or youth is in substitute care. While efforts are continuous to ensure a child's safety, there are also specific time requirements for casework actions such as:

- face-to-face contacts with each child, parent, and caregiver;
- assessment and services to address physical, mental and behavioral health needs;
- assessment and services to address educational needs;
- court and legal actions;
- placement review;
- service plan development; and
- contact and visitation with siblings and parents,

The child's permanency goals determine additional services. For example, a child with a permanency goal of adoption would have casework efforts dedicated to adoption preparation or recruitment and matching to a potential adoptive home. A child for whom reunification is the permanency goal would experience casework focused on strengthening the parent's ability to provide a safe home for the child and to reduce risk of future harm.

G. Identify all funding sources and amounts for the program or function, including federal grants and pass-through monies. Describe any funding formulas or funding conventions. For state funding sources, please specify (e.g., general revenue, appropriations rider, budget strategy, fees/dues).

Please see Appendix A.

Alternate Exhibit Provided For Section VII. Item G.

H. Identify any programs, internal or external to your agency, that provide identical or similar services or functions to the target population. Describe the similarities and differences.

Investigations

Law Enforcement Agencies

Law enforcement agencies routinely receive reports and perform criminal investigations of child abuse and neglect. Law enforcement agencies refer appropriate reports to CPS for civil investigations and may conduct joint investigations with CPS. While both entities may investigate circumstances regarding child abuse and neglect, the jurisdiction and law are different.

Children's Advocacy Centers

Children's Advocacy Centers are community-based programs that coordinate the activities of agencies responsible for the investigation and prosecution of child abuse cases, and the delivery of services to child abuse victims and their families. At the heart of the mission of the Children's Advocacy Centers of Texas is a commitment to support the sustainability of local centers so that they may continue to help young victims rebuild their lives. CPS supports the philosophy of Children's Advocacy Centers and encourages the expansion of new centers throughout Texas. CPS works collaboratively as a member of the child protection team coordinated by Children's Advocacy Centers.

Military Bases

Military bases have social work departments that conduct their own investigations of child abuse and neglect. The departments also provide counseling and other resources to the military families they serve. CPS liaisons coordinate with military bases to ensure effective coordination of investigation activities.

Family Based Safety Services

Purchased Client Services

CPS contracts for most services provided to children and families served in the family based safety services stage. Examples of these services include psychological evaluations, group counseling, and protective daycare. Additionally, caseworkers may locate private and non-

profit organizations to offer some of the specific services needed to address child safety. Traditionally, families are linked to these providers through CPS and their progress is then monitored through collaboration with the provider and the caseworker. In areas where a needed service is not available or cannot be purchased, some FBSS staff are able to provide the needed service. Examples of services provided by staff include assessments, homemaker services, or parenting skills training.

Referral to Early Childhood Intervention (ECI) Services

If abuse or neglect is substantiated (Reason to Believe) and the case is open for FBSS, caseworkers refer all designated victims younger than three to ECI for screening within 10 business days of the case being transferred to the FBSS unit to determine the need for a full evaluation.

If a disability or developmental delay of a child younger than three is suspected at any time during the course of FBSS, caseworkers refer to ECI within two business days of identifying the need. By federal law, there is a two-day timeline for referring a child with a disability or developmental delay.

Substitute Care

Child-Placing Agency

Child-placing agencies licensed by DFPS offer adoption services and activities include recruiting, training, and verifying, approving, monitoring, and admitting children for placement in foster and adoptive homes. The DFPS Child Care Licensing division is responsible for issuing permits to and regulating the activities of all child-placing agencies in Texas (public and private). Private child-placing agencies may or may not have a contract with DFPS to provide foster care and adoption services for children in DFPS conservatorship.

Transitional Living Services

There are private providers in the community that offer differing degrees of transitional living services. Some require fees or may be funded through foundations or grants. The Texas Workforce Commission (TWC) provides funds to several transition centers in some parts of the state. These centers provide a central clearinghouse of one-stop services that serve the diverse needs of older foster youth. Some of the transition centers offer a housing component and contract with CPS for PAL services.

American Indian Tribes

There are three federally recognized American Indian Tribes in Texas: the Kickapoo Traditional Tribe of Texas, the Ysleta Del Sur Pueblo/Tigua Tribe, and the Alabama-Coushatta Tribe of Texas. Federal law (Indian Child Welfare Act) requires CPS to provide:

1. identification of Indian children;
2. notification of Indian parents and Tribes of CPS proceedings involving Indian children and

their right to intervene;

3. special placement preferences for placement of Indian children;
4. active efforts to prevent the breakup of the Indian family; and
5. use of Tribal courts in child welfare matters, Tribal right to intervene in state proceedings, or transfer proceedings to the jurisdiction of the tribe.

Other Situations

State agencies, other than DFPS, are also authorized to provide residential substitute care-type services for selected populations of children (children involved in the criminal justice system and children with developmental and intellectual disabilities, for example). In these circumstances, the other state agency also performs their own investigations of children under their authority who report incidents of abuse or neglect while in facilities operated, licensed, certified, or registered by the agency. To avoid overlap or duplication, roles are clearly delineated. The state agency that controls the facility usually makes the placement but DFPS remains responsible for meeting the obligations of a managing conservator. As an example, juvenile courts may adjudicate children in DFPS's managing conservatorship as delinquent and commit them to the Texas Juvenile Justice division. When this occurs, while the child is committed to the custody of the Texas Juvenile Justice division, DFPS continues to monitor the child's placement. And as soon as the child is discharged from the custody of the Texas Juvenile Justice division, DFPS must resume its responsibilities for the child's placement and service planning.

I. Discuss how the program or function is coordinating its activities to avoid duplication or conflict with the other programs listed in Question H and with the agency's customers. If applicable, briefly discuss any memorandums of understanding (MOUs), interagency agreements, or interagency contracts.

Investigations

Joint Investigations with Law Enforcement

DFPS strengthens investigations with the use of forensic investigation techniques and forensic training and works to ensure that there is increased collaboration and joint investigations with law enforcement in appropriate cases.

Texas Family Code Section 261.3011 requires DFPS to collaborate with law enforcement to develop guidelines for conducting joint investigations and training. Special Investigators with law enforcement investigation experience were hired by CPS to assist in the investigation of serious child abuse cases and help support investigation caseworkers in forensic investigation techniques. CPS recognizes that joint investigations of child abuse result in higher-quality investigations, improved protection of children and services to families, and increased prosecution of perpetrators.

Memoranda of understanding have been signed by DFPS and hundreds of local law enforcement agencies. These agreements spell out the commitment to joint investigations and collaboration from both entities.

Children's Advocacy Centers

CPS supports the philosophy of children's advocacy centers and encourages the expansion of new centers throughout Texas. Children's advocacy centers use a cooperative, multidisciplinary team approach to handling child abuse cases that is built on a partnership that includes representatives from CPS, law enforcement, prosecution, mental health providers, and medical services providers. CPS has established memoranda of understanding with local children's advocacy centers in order to clearly delineate roles. Other entities participating in the center's team approach also typically are a part of the memorandum of understanding.

Military Bases

CPS establishes written agreements with the base commander giving CPS staff around-the-clock access to the base to investigate reports of child abuse and neglect, coordinate counseling and other services for CPS clients, and discuss sharing information and maintaining confidentiality. These agreements are reviewed periodically and as needed.

Family Based Safety Services

Purchased Client Services

CPS utilizes the contract process in order to appropriately procure and purchase client services. Regional contract monitors review and oversee the contract to ensure compliance.

Referral to Early Childhood Intervention (ECI) Services

Federal law (the Child Abuse Protection and Treatment Act) requires that all children younger than 3 who are confirmed victims of abuse or neglect are referred to Early Childhood Intervention (ECI). In Texas, the ECI program is administered by the Department of Assistive and Rehabilitative Services (DARS). DFPS and DARS signed a revised memorandum of understanding (MOU) in August 2011, outlining new procedures for referring children under the age of three to ECI for services. This MOU aligned both agencies' practices for reporting and making referrals for ECI screenings and services, and clarified information sharing between the agencies.

Substitute Care

Child Placing Agency

Families seeking to become approved adoptive homes may choose to be approved by DFPS or a private child placing agency. The approving agency is responsible for the adoptive applicant's training and home screening process. The private agency also works with DFPS to identify children who may be a good match for the family. When DFPS has an adoption contract with

the private child placing agency, then the contract outlines the roles and responsibilities related to adoptive placement and supervision of the placement.

Transitional Living Services

DFPS renewed an interagency memorandum of understanding with the Texas Workforce Commission for FY 2011–2016. The Texas Workforce Commission reports the number of youth referred and receiving a workforce service in calendar years. The first report was for 2012 and included youth counted as being served in Transition Centers receiving funds from the Texas Workforce Commission. According to the Statewide Preparation for Adult Living staff, an estimated 1,125 youth in calendar year 2012 received employment services through local workforce centers and Transition Centers as a result of a Preparation for Adult Living referral.

Providers who serve CPS youth ages 14 and older. These contracts include provisions for caregivers to help CPS youth and young adults with experiential life skills trainings and transitional living services and available resources.

American Indian Tribes

Current policy details specific child-placing requirements of the Indian Child Welfare Act and related guidelines and regulations to ensure compliance in any court action involving an American Indian child. Training is periodically presented to staff on these issues. Caseworkers are given an overview of the legal implications of the Indian Child Welfare Act and a checklist summarizing the major points, and are advised to immediately notify the attorney representing DFPS if a case may involve an American Indian child subject to the Indian Child Welfare Act. DFPS caseworkers are trained to ask about possible American Indian heritage both initially and as a case progresses and new family members become known. An Indian Child and Family Questionnaire has been distributed in training to facilitate getting the critical information a Tribe needs to verify a child's status under the Indian Child Welfare Act. This information is obtained through self-disclosure from the parent, any child old enough to report, or other relative. In order to track which CPS cases are subject to the Indian Child Welfare Act, caseworkers must document if any, and which, family member reports or denies American Indian heritage.

DFPS has a memorandum of understanding with both the Ysleta Del Sur Pueblo/Tigua tribe and Alabama-Coushatta tribe of Texas. These agreements delineate the procedures that must be taken when CPS receives referrals involving tribal members. When a referral is received involving a child residing on a reservation, DFPS staff contact the tribe's designated Indian Child Welfare Worker to inquire how the tribe wishes to proceed. If the tribe wants to handle the referral, DFPS gives the tribe the information provided.

With the location of the three federally registered tribes, a formal liaison process with specified CPS staff are established in Region 5 (containing Livingston, location for the Alabama-Coushatta tribe of Texas), Region 8 (containing Eagle Pass, location for the Kickapoo Traditional tribe of Texas), and Region 10 (containing El Paso, location for the Ysleta Del Sur Pueblo/Tigua tribe). In

addition, the CPS state office Indian Child Welfare Manager acts as a liaison to the three Texas tribes and representatives from tribes from other states.

DFPS works with the designated Indian Child Welfare Worker, employed by the tribe, to ensure the following.

- Indian parents and the tribe receive proper notification of CPS involvement, and staff work with DFPS regional attorneys to ensure statutory notices required under Indian Child Welfare Act are properly served on all appropriate persons and entities.
- Indian parents and the tribe participate in the development of a service plan with culturally appropriate and effective services to resolve the referral issues.
- Active efforts are made to prevent a child's removal if the child's safety can be maintained.
- If a child must be removed, active efforts are made by DFPS staff to work with tribal representatives and family members to have the child returned to the family; this includes identifying specific hurdles and impediments to reunification and developing an appropriate service plan as noted above.

J. If the program or function works with local, regional, or federal units of government, include a brief description of these entities and their relationship to the agency.

Administration for Children and Families (ACF)

The Administration for Children and Families is a federal agency that funds state, territory, local, and tribal organizations to provide child welfare services. This includes DFPS. The Administration for Children and Families assists DFPS with funding, policy direction, and information services. It audits and reviews of the actions and outcomes of the organizations it funds. Under Title IV-E, DFPS administers federal matching funds for adoption assistance payments for children with special needs.

In response to a Family Connection "No Place Like Home" grant from ACF, DFPS entered into a partnership with Casey Family Programs, the Kempe Center for the Prevention of Child Abuse and Neglect, and two child welfare agencies (Colorado and South Dakota) in October 2011. This grant is one of seven three-year federal grants from the U.S. Department of Health and Human Services, Administration for Children & Families, to implement and evaluate Family Group Decision Making in child welfare.

Court System

CPS works with local county and district courts for judicial review and approval of decisions made in investigations that are needed to ensure child safety. Depending on the circumstances, CPS seeks court orders for removal.

In order to remove a child from the home, DFPS must file a suit affecting the parent child relationship with a court having family law jurisdiction, requesting managing conservatorship of the child. If the court grants conservatorship to DFPS, the suit affecting the parent child

relationship remains pending with the court, with periodic hearings conducted under the Family Code, until the child is reunited with parents, managing conservatorship is transferred to another person, the child is adopted, or the child reaches adulthood.

Unless the court indicates that it does not want to be notified, DFPS staff must notify the court or the court's designee of the following actions and events involving a child in DFPS's managing conservatorship: circumstances that may be harmful to the child, temporary care in a CPS office, change of jurisdiction, subsequent removal, and medical consent.

Children's Commission

The Texas Supreme Court's Permanent Judicial Commission for Children Youth and Families or "Children's Commission" is a multidisciplinary executive-level group led by judges created by The Supreme Court of Texas in 2007 to develop and coordinate efforts to improve court performance in child abuse and neglect cases. The Children's Commission administers the federal Court Improvement Program (CIP) grant that funds its projects and staff. Under the leadership of Justice Eva Guzman, members include officials from CPS, non-profit foundation and state bar leaders, private attorneys, legislators, judges and other elected officials, and other child welfare stakeholders.

The Children's Commission includes a 40-plus-member, general advisory group called the Collaborative Council. Members include foster families, attorneys, CASAs, parent advocates, and former foster youth. Representatives from institutions of juvenile justice, mental health and education are also included, as well as representatives from the private provider community, children's advocacy centers and many other child-protection and child and family advocacy groups.

Three standing committees – Basic Projects, Technology and Training – oversee issue-specific workgroups and projects. In June 2010, the Supreme Court formed an Education Committee to work toward improving education outcomes for foster children. In addition to CIP grant-funded projects, the Commission directs several other ad hoc committees and workgroups and numerous staff-led projects.

Child Welfare Boards

The commissioners' court of a county may appoint a child welfare board for the county. A county child welfare board is an entity of DFPS for purposes of providing coordinated state and local public welfare services for children and their families and for the coordinated use of federal, state, and local funds for these services. The commissioners' court of a county may appropriate local funds for the administration of its county child welfare board.

National Resource Center for Youth Development

CPS is currently working with the federal National Resource Center for Youth Development (NRCYD) for technical assistance as the state implements Supervised Independent Living (SIL) living arrangement options for CPS young adults who have volunteered to stay in extended foster care in a less-supervised setting.

Responses to the Department’s request for proposal regarding SIL placements were received in August 2012. Tentative awards were announced in January 2013, and the first two SIL contracts with providers became effective in April 2013 and placements began in May 2013. Work continues in expanding the program and looking at ways to find additional SIL placement options for young adults.

K. If contracted expenditures are made through this program please provide:

- A short summary of the general purpose of those contracts overall;
- The amount of those expenditures in FY 2012;
- The number of contracts accounting for those expenditures;
- Top five contracts by dollar amount, including contractor and purpose;
- The methods used to ensure accountability for funding and performance; and
- A short description of any current contracting problems.

CPS contracts for direct, administrative and support services through a wide variety of goods and services for children, families and adults. The contracted services are administered on a central (state office) and regional basis. Contracted services consist of: substitute care by licensed-residential childcare providers to children in DFPS’s managing conservatorship; residential care for unaccompanied refugee minors; independent living services; home screenings and assessments; substance abuse testing; evaluation and treatment; diagnostic consultation; childcare services; supervised visitation; supervision; homemaker; community and parent groups; family group decision making; diligent recruitment (kinship placement); parent-caregiver training; adoption (post, in-state and out-of-state); and reimbursement of administrative services of a county government associated with child welfare services.

For Fiscal Year 2012, CPS purchased client services expenditures were \$554,217,644, which accounted for 3,378 contracts. This total includes 1,348 CPS managed contracts with \$83,546,115 in total expenditures for Fiscal Year 2012 and 2,030 Residential Child Care managed contracts with \$470,671,529 in total expenditures for Fiscal Year 2012.

The top five contracts were with child placing agencies who recruit foster families to provide 24-hour residential childcare (substitute care) to children in DFPS’s managing conservatorship as follows:

Top Five Contracts by Dollar Amount – Fiscal Year 2012		
Contractor	Purpose	Expenditures*
The Bair Foundation	24-hour residential childcare	\$50,508,659.31
A World For Children	24-hour residential childcare	\$46,427,288.26
Lutheran Social Services of The South, Inc.	24-hour residential childcare	\$41,181,198.65

Top Five Contracts by Dollar Amount – Fiscal Year 2012		
Contractor	Purpose	Expenditures*
Life Support Counseling and Research, Inc.	24-hour residential childcare	\$37,541,615.51
Arrow Child and Family Ministries	24-hour residential childcare	\$35,550,410.96

* The "Total Contract Value" is based on either the Maximum Contract Budget Amount for the full contract term or, for contracts without a specified budget, the Total Expenditures across the life of the contract (FY 2006 forward).

Contract Oversight and Support (COS) is the designated division responsible for developing the infrastructure to support contract management staff and to promote compliance with spending federal and state dollars appropriately, in adherence to applicable statutes and rules. Contract management staff are responsible for conducting ongoing contract management and monitoring activities to promote accountability for funding and performance of CPS purchased goods and services. Contract management staff monitor for programmatic and fiscal accountability using performance measurement and specific processes with associated risk assessment and monitoring instruments. Identification of risk is primarily achieved by utilization of an agency-wide risk assessment tool and internal control questionnaire, evaluation of performance measures and surveillance of evolving conditions that represent risk. Contract monitoring may include on-site, desk, or billing reviews of fiscal, programmatic and administrative areas. Deterrents for contracting with DFPS include constraints created when meeting the unique needs of the population served and funding restraints; and insufficient quantity of contractors for needed services in regions of the state where they are needed.

L. Provide information on any grants awarded by the program.

CPS does not award grants.

M. What statutory changes could be made to assist this program in performing its functions? Explain.

CPS in Harris County. CPS has identified several statutory changes that might improve workload management in Harris County and result in better permanency outcomes for children in conservatorship. Changes could be made to Chapter 264, Family Code, to establish specialty courts that handle all child abuse and neglect cases in Harris County. Additional amendments may be needed to Chapter 24, Government Code, which establishes the state district courts and assigns certain preferences to those courts, as well as Chapter 155 and Section 262.203, Family Code, relating to discretionary and mandatory transfer of cases among courts with family law jurisdiction. In addition, CPS conservatorship caseworkers could devote more of their time to working directly with children and families to achieve more timely permanency if changes were made to Chapter 263, Family Code, to expressly permit the assigned conservatorship worker in a case to be "on call" for all non-contested hearings conducted under

Chapter 263, rather than waiting in the courtroom to testify, provided a CPS court liaison was present in all such hearings. For additional discussion, see Section IX, Major Issue #1.

Legal Representation in CPS Suits. To improve legal representation in all CPS legal suits, revisions to Section 264.009, Family Code, could be enacted to no longer allow counties over a certain threshold population to decline to represent the department by citing “special circumstances”, and to prohibit any county from declining to handle representation without sufficient advance warning to the state. For additional discussion, see Section IX, Major Issue #2.

Preventing Child Fatalities. CPS has identified a number of possible statutory changes that might serve to reduce child fatalities in Texas. For additional discussion, see Section IX, Major Issue #6. Possible changes include the following.

- Ensure a stable source of funding for child abuse and neglect prevention programs by creating a dedicated funding source in Chapter 265, Family Code, or in Subchapter D, Chapter 40, Human Resources Code.
- Reduce the incidence of child fatalities from physical abuse and shaken baby syndrome with amendments to some or all of the following:
 - Subchapter T, Chapter 161, Health and Safety Code, concerning information to be provided to newborn parents by hospitals and other providers concerning shaken baby syndrome, post-partum depression, and other topics.
 - Subchapter G, Chapter 264, Family Code, concerning the duties and responsibilities of the statewide Child Fatality Review Team Committee;
 - Section 40.0523, Human Resources Code, concerning the Infant Mortality Prevention Education Program;
 - Section 29.085, Education Code, concerning life skills programs for student parents.
- Expand the scope of the Child Safety Check Alert List with amendments to Sections 261.3022 and 261.3033, Family Code.
- Strengthen the duty to report certain child deaths to medical examiners with amendments to Section 264.513, Family Code.
- Mandate the creation of additional Child Fatality Review Teams in counties not presently served by a team with amendments to Section 264.505, Family Code.

Increasing Permanency. CPS has identified several legislative changes that might shorten the length of time that children spend in substitute care. For additional discussion, see Section IX, Major Issue # 7.

- Expand eligibility for adoption assistance by amending Section 162.304, Family Code, to direct the department to ensure that rules defining a child with special needs include

consideration of whether placement in substitute care, in and of itself, makes it less likely that a child will be adopted.

- Promote reunification of children with parents whose rights were previously terminated by amending Chapter 161, Family Code, to allow reinstatement of parental rights for certain parents.
- Promote more timely reunification of children with their parents by amending Section 263.403, Family Code, to clarify that a case whose deadline for dismissal was extended by 180 days for purposes of monitoring a return to the parent may be dismissed before the expiration of the 180 day period when additional monitoring is no longer deemed necessary to ensure the safety of the child.

Up-Front Due Process for CPS investigations. To better ensure the safety of children and to better protect the due process rights of persons found to have committed abuse or neglect of a child, amendments could be made to Section 261.309, Family Code to require that perpetrators be offered a due process hearing at the time the finding is made. For additional discussion, see Section II, Subsection G, Obstacles.

N. Regulatory programs relate to the licensing, registration, certification, or permitting of a person, business, or other entity. For each regulatory program, if applicable, describe:

- why the regulation is needed;
- the scope of, and procedures for, inspections or audits of regulated entities;
- follow-up activities conducted when non-compliance is identified;
- sanctions available to the agency to ensure compliance; and
- procedures for handling consumer/public complaints against regulated entities.

CPS is not a regulatory program.

O. For each regulatory program, if applicable, provide the following complaint information. The chart headings may be changed if needed to better reflect your agency's practices.

Not applicable.

VII. GUIDE TO AGENCY PROGRAMS – CONTINUED

A. Provide the following information at the beginning of each program description.

Name of Program or Function	Prevention and Early Intervention (PEI), CPS
Location/Division	2401 Ridgepoint Drive, Austin, Texas/ Child Protective Services
Contact Name	Sasha Rasco
Actual Expenditures, FY 2012	\$31,569,019
Number of Actual FTEs as of June 1, 2013	14
Statutory Citation for Program	Chapter 40, Human Resources Code and Title 5, Family Code

B. What is the objective of this program or function? Describe the major activities performed under this program.

Unlike investigations, family based safety services, or substitute care, the Prevention and Early Intervention (PEI) division within CPS does not work cases. Instead the focus of their activities is to reduce and prevent intakes from coming into the child welfare and juvenile justice systems in the first place. The Texas Legislature created the PEI division within CPS to consolidate prevention and early intervention programs into a single state agency. The goal is to eliminate fragmentation and duplication of prevention and early intervention services for at-risk children, youth, and families. PEI contracts with community-based agencies and organizations to provide services designed to prevent the abuse, neglect, delinquency, and truancy of Texas children. Services are voluntary and are provided at no cost to participants, however all services are not available statewide. The following provides an overview of PEI programs.

Community Youth Development

The Community Youth Development (CYD) program contracts with community based organizations to provide juvenile delinquency prevention services in 15 areas of the state with a high incidence of juvenile crime. Communities prioritize and develop prevention services according to local needs. Approaches include youth-leadership development, life-skills classes, character education, conflict resolution, tutoring, mentoring, career preparation, and recreation.

Client Eligibility: Youth ages 6-17, with a focus on youth 10-17, who live in or attend school in one of the designated ZIP codes.

Services to At-Risk Youth

The Services to At-Risk Youth (STAR) program contracts with community agencies to offer family crisis intervention counseling, short-term emergency respite care, and individual and

family counseling. These services are available in all 254 Texas counties. Each STAR contractor also provides universal child abuse prevention services, such as informational brochures and parenting classes.

Client Eligibility: Youth and children younger than 18 who are runaways or truant, are living in family conflict, or have been accused of delinquency or misdemeanor or state felony offenses but have not been adjudicated by a court.

Texas Families: Together and Safe

Texas Families: Together and Safe (TFTS) funds evidence and community-based programs designed to alleviate stress and promote parental competencies and behaviors that increase the ability of families to become self-sufficient and successfully nurture their children. The goals of the program are to:

- improve and enhance access to family support services;
- increase the efficiency and effectiveness of community-based family support services;
- enable children to remain in their own homes by providing preventative services; and
- increase collaboration among local programs, government agencies, and families.

Client Eligibility: Any family in Texas within a service area that has a child (or children) younger than 18 living in the household or whom is expecting a child (or children) and are assessed as having multiple issues and risk factors may be served. Targeted families may include teen parents, first-time parents, parents with young children, and parents with children who have disabilities, developmental delays, emotional, school or health problems, or who are at high risk of abuse, neglect.

Community-Based Child Abuse Prevention

The Community-Based Child Abuse Prevention (CBCAP) program seeks to increase community awareness of existing prevention services, strengthen community and parental involvement in child abuse prevention efforts, and encourage families to engage in available services. CBCAP funds community-based organizations to provide a variety of child abuse and neglect prevention services. The Family Support program focuses on counties with a higher than state-average rate of child abuse and neglect, with special focus on rural counties. The program includes home visiting, case management, crisis intervention, and an evidence-based parent education component. This program targets families with children ages birth through 5 years, as these children are statistically at greater risk for abuse and neglect. The Family Support program began providing services in Tom Green, Runnels, Crockett, and Concho Counties in July 2009 and in Atascosa, Bandera, Frio, Karnes, and Real counties in August 2009 and continued through FY 2012.

In FY 2012, the Respite/Parent Education program began providing services through two contractors serving El Paso and Bexar counties. The program provides emergency day and overnight respite to children of at-risk families, as well as parent education to mitigate the risk of child abuse and neglect.

The Basic Parent Education program began in late FY 2012. Currently provided by once contractor serving Bexar County, the program focuses on providing parent skills training to at-risk families. CBCAP also funds various special initiatives and public awareness campaigns as noted in other sections of this report.

Statewide Youth Services Network

These are evidence-based, prevention services provided by established statewide networks of community-based prevention programs that must work to prevent juvenile delinquency and create positive outcomes for youth by increasing protective factors.

Client Eligibility: At-risk youth between the ages of 6-17 years of age, with an emphasis on youth 10-17 years.

Special Initiatives

The division also develops and implements a variety of initiatives to prevent child maltreatment and juvenile delinquency and to support contracted service providers.

Outreach and Awareness Efforts

The FY 2012 outreach focus was the launch of a new Child Abuse Prevention campaign, “Help for Parents, Hope for Kids.” The goal of the campaign is to prevent abuse from ever occurring by helping parents deal with the stresses that contribute to child abuse and neglect.

Public Education Efforts

Prevention and Early Intervention develops and supports specific projects and initiatives that focus on preventing child abuse and juvenile delinquency. PEI launched a new Child Abuse Prevention campaign, “Help for Parents, Hope for Kids” on July 1, 2012. This included a new website in both English and Spanish (HelpandHope.org or AyudayEsperanza.org). The campaign featured:

- A statewide advertising campaign involving television, radio, billboard, transit, movie theatres, and online ads.
- A social media campaign that included a presence on Facebook, Pinterest, and YouTube.
- Video testimonials from parents who had abused or neglected their children and sought help to change.
- Outreach to other organizations to participate by distributing campaign materials or providing services or resources to parents through HelpandHope.org.

Annual Conference

Each year, DFPS hosts the annual Partners in Prevention training conference. The conference brings together social services professionals, parents, advocates, educators, law enforcement professionals, childcare professionals, community leaders, and faith leaders interested in improving programs and sharing expertise.

Evaluation and Research

The University of Texas at San Antonio initiated research on family and youth resiliency to help PEI continually improve its assessment of outcomes for youth and families using prevention services. To complete this earlier work, PEI contracted with Prairie View A&M University to:

1. Develop and validate survey instruments that PEI will use to determine the effectiveness of its juvenile delinquency prevention programs.
2. Evaluate the Community Youth Development (CYD) program.

Prairie View A&M University will continue its work through FY 2013.

The University of Houston conducted an evaluation of child abuse and neglect prevention and early intervention programs and services in the state, including research on streamlining funding and improving service delivery. The University of Houston team analyzed the cost effectiveness and efficiency of state-funded child abuse and neglect prevention and early interventions programs, which are key elements to implementing performance-based client service contracting.

C. What evidence can you provide that shows the effectiveness and efficiency of this program or function? Provide a summary of key statistics and performance measures that best convey the effectiveness and efficiency of this function or program.

Performance Measures

PEI requires every provider to meet two types of performance measures, outputs and outcomes, while delivering contractually-specified program services. Both types of measures reflect the criteria a provider must meet on a monthly and annual basis to successfully administer PEI-funded programs.

Outputs are concerned with reaching certain quantitative goals. PEI employs outputs that measure a program's capacity to recruit and retain clients, and to deliver services over a period of time to ensure effective client participation. For example, on a monthly basis, PEI contractors track and report the number of unduplicated clients served, as well as the number of clients that complete the pre- and post-protective factors survey.

Outcome measures are used to assess whether participation in a PEI-funded program result in changes for clients. By completing the child maltreatment prevention program, for example, did clients show measureable change in their knowledge of child development or their attitudes toward parenting? This is measured through the Protective Factors Survey discussed below.

Protective Factors Survey

Protective factors are conditions that, when present in families and communities, increase the health and well-being of children and families. An increase in protective factors help parents who might otherwise be at risk of abusing their children to find resources, support, or coping

strategies that help them parent effectively while under stress. Research shows successful interventions must both reduce risk factors and promote protective factors. The goal of Prevention and Early Intervention child abuse prevention programs is to prevent child abuse and neglect by increasing protective factors and decreasing risk factors in at-risk families. Therefore, one of the outcome measures PEI uses within its programs is tracking whether caregivers experience an increase in protective factors related to child abuse and neglect.

The Protective Factors Survey (PFS) is a “pre-post” evaluation tool used with caregivers who receive prevention services. The survey measures protective factors in five areas 1) Family functioning and resiliency 2) Social support 3) Concrete support 4) Nurturing and attachment 5) Knowledge of parenting and child development

PEI played an active role in the development of the Protective Factors Survey. The survey has undergone four national field tests for establishing reliability and validity. It is also recognized as an evidence-based tool by the California Clearinghouse on Evidence Based Practices. The survey results are designed to help agencies measure changes in protective factors and identify areas where practitioners can focus on increasing individual family protective factors.

PEI currently requires all child abuse prevention contractors to administer a pre-service and post-service Protective Factors Survey to caregivers. Contractors enter Protective Factors Survey data into the PEI Database along with client registration information. The PEI Database allows both contractors and DFPS to observe at the individual and program level the increase by each protective factor.

Sample Performance Measures

In addition to protective factors, PEI employs other outcome measures such as the number of children served by contracted providers that enter the child welfare system after program discharge. Following are examples of output and outcome measures for some PEI programs. Additional information is available in the DFPS Databook.

Juvenile Delinquency Prevention Programs					
Community Youth Development (CYD)	2008	2009	2010	2011	2012
Percent of CYD youth not referred to juvenile probation	98.0	97.8	98.3	98.8	98.1
Annual number of youth served	18,074	19,390	17,799	19,731	16,900
Average monthly number CYD youth served	4,563	5,668	5,930	6,158	5,530
Average monthly cost per CYD youth served	\$138.97	\$84.06	\$75.14	\$82.77	\$69.91

Child Abuse and Neglect Prevention Programs					
Texas Families: Together and Safe (TFTS)	2008	2009	2010	2011	2012
Annual number of families served	3,136	3,040	3,410	2,110	1,870
Average monthly number of families served by TFTS Program	1,061	991	1,087	573	586
Average monthly cost per family served in the TFTS Program	\$289.49	\$275.62	\$249.52	\$433.71	\$362.54
Children will remain safe	N/A	N/A	N/A	N/A	99%
Increase in Protective Factors for families completing the program	N/A	N/A	N/A	N/A	67% of families had an increase in the Family Functioning subscale

Child Abuse Prevention Outreach and Awareness	
Output Measures:	
Number of Calendars distributed in FY 2012	535,000

Annual Partners in Prevention Training Conference	
Output Measures:	
Number of people attending the FY 2012 conference	300

D. Describe any important history regarding this program not included in the general agency history section, including how the services or functions have changed from the original intent.

While much of the recent history of CPS applies to the PEI division as well since they are part of the larger CPS program, there are some unique elements to PEI's history that are worth noting.

In 1999, the Legislature created PEI as a new division of DFPS to consolidate prevention and early intervention programs within the jurisdiction of a single state agency.

By 2002, PEI administered 18 programs, managed a division budget of \$63 million, and supported 69 staff positions.

In 2003, the Legislature eliminated funding for six of these programs and reduced the remaining prevention program funding by approximately 16 percent. The Communities in Schools (CIS) program was transferred to the Texas Education Agency during the same legislative session.

In 2005, the Legislature increased prevention funds for the remaining PEI programs, in an effort to restore them to their prior funding levels. However, instead of funding individual programs as had been done before 2003, the Legislature combined funds into a new prevention strategy, A.2.16 - "Other At-Risk Prevention Services."

With the addition of the Family Strengthening and Youth Resiliency programs, funded through budget strategy A.2.16, PEI shifted from a focus on defined program models to a broader approach of seeking effective services capable of achieving the desired outcomes in participants (prevention of child abuse and neglect, and prevention of juvenile delinquency, respectively). This allows communities to determine which program approach is best suited to their needs and population and the best fit for the organization delivering the services. PEI now funds a combination of programs ranging from the diverse model described above, to those that provide great latitude within a prescribed program model (such as Texas Families: Together and Safe and Community Youth Development) and those with more specific requirements (such as Services to At-Risk Youth [STAR]).

In addition, PEI is moving toward increased funding of evidence-based programs and services in response to the following laws and factors:

- Texas Family Code §265.004 requiring funding of evidence-based services.
- Changing federal requirements for the Community Based Child Abuse Prevention program (funded through CAPTA II) to increase evidence-based services.

In 2007, the Legislature increased prevention funds by appropriating \$3 million for evidence-based programs that are now called the Statewide Youth Services Network (SYSN) and \$1.6 million for the Community-Based Family Support program. In 2009, the Legislature further increased funds for the SYSN program, to \$4.5 million for the biennium, and increased funds for Other At-Risk Prevention Services by \$2,850,086 for the biennium.

The budget constraints of the 2011 Legislative Session resulted in funding cuts to prevention programs that provide an array of services to alleviate stress and factors leading to child abuse and neglect and delinquency. Overall, this group of programs was reduced by 32 percent from the FY 2011 appropriated funding level. Individually, the reductions ranged from 13 percent to

74 percent. The STAR program received a 13 percent reduction of \$6.2 million, the CYD program received a 36 percent reduction of \$5.9 million, and the Texas Families program received a 37 percent reduction of \$3.2 million. In addition, funding cuts in 2011 eliminated the three following PEI programs:

- ***Tertiary Prevention Services*** program provided community-based, volunteer-driven prevention, intervention, and aftercare services to children who have been or are at risk of being, abused or neglected. The goals of the program included reducing child maltreatment and the number of families re-entering the Child Protective Services system.
- ***The Family Strengthening*** program offered a variety of evidence-based services that had been evaluated and proven to effective in the prevention of child abuse and neglect. The strengths-based focus was aimed at increasing protective factors while reducing risk for child maltreatment by building upon caregiver knowledge and resiliency. Programs fostered strong community collaboration to provide a continuum of family services.
- ***Youth Resiliency Services*** offered a variety of evidence-based services that have been evaluated and proven effective in the prevention of juvenile delinquency. The strengths-based focus was aimed at increasing known protective factors while reducing risk for juvenile delinquency by building upon caregiver or youth knowledge and resiliency. Programs fostered strong community connections with other service providers in the area to provide a continuum of needed services and supports for the youth and families that they serve.

In April 2012 the DFPS Texas Youth and Runaway Hotlines were transferred from the Prevention and Early Intervention division of Child Protective Services to Statewide Intake. The purpose of the transfer was to promote improved efficiency and effective service delivery including allowing the Youth and Runaway Hotlines access to more modern technological such as the ability to work from a remote location.

E. Describe who or what this program or function affects. List any qualifications or eligibility requirements for persons or entities affected. Provide a statistical breakdown of persons or entities affected.

PEI prevention programs are available across the state, although not all programs are available in all areas. The STAR program provides services to every county in Texas. Services are provided to children less than 18 years of age and to families with at least one primary caregiver and one child under 18 as well as to families who are expecting a child or are in the process of adopting.

Number of Families (Primary Caregivers) Served in the Child Abuse and Neglect Prevention Programs FY 2012								
Unduplicated Families Served by Program	2009 n	2009 %	2010 n	2010 %	2011 n	2011 %	2012 n	2012 %
Community-Based Child Abuse Prevention (CBCAP)	699	13.8%	372	6.4%	461	12.0%	577	21.7%
Community-Based Family Services (CBFS)	110	2.2%	337	5.8%	280	7.3%	206	7.8%
Texas Families: Together and Safe (TFTS)	3,040	59.8%	3,410	58.8%	2,110	55.0%	1,870	70.5%
Family Strengthening Program (FSP)	1,200	23.6%	1,616	27.9%	938	24.5%	0	0.0%
Tertiary Child Abuse Prevention (TPP)	32	0.6%	61	1.1%	44	1.1%	0	0.0%
Total	5,081	100.0%	5,796	100.0%	3,833	100.0%	2,653	100.0%

Number of Youth Served in the Juvenile Delinquency Prevention Programs, FY 2012								
Program	2009 n	2009 %	2010 n	2010 %	2011 n	2011 %	2012 N	2012 %
Services to At Risk Youth (STAR)	29,406	51.6%	30,042	54.8%	30,168	53.2%	26,834	54.8%
Community Youth Development (CYD)	19,390	34.0%	17,799	32.5%	19,731	34.8%	16,900	34.5%
Statewide Youth Services Network (SYSN)	6,548	11.5%	5,513	10.1%	5,720	10.1%	5,273	10.8%
Youth Resiliency Program (YRP)	1,654	2.9%	1,445	2.6%	1,066	1.9%	0	0.0%
Total	56,998	100.0%	54,799	100.0%	56,685	100.0%	49,007	100.0%

Age of Youth Served in the Juvenile Delinquency Prevention Programs, FY 2012						
Age Group	STAR	CYD	SYSN	YRP	Total	Percent
Under 6	2,343	27	305	0	2,675	5.5%
6-9	4,889	2,136	135	0	7,160	14.6%
10-17	19,602	14,025	4,833	0	38,460	78.5%
Over 17	0	712	0	0	712	1.5%
Total	26,834	16,900	5,273	0	49,007	100.0%

F. Describe how your program or function is administered. Include flowcharts, timelines, or other illustrations as necessary to describe agency policies and procedures. Indicate how field and regional services are used, if applicable.

PEI delivers prevention services through contracts. PEI Staff manages contracts, processes contractor reimbursements, develops programmatic policies and procedures, and provides training and technical assistance to contractors. The work follows the contracting lifecycle outlined in the DFPS Contract Handbook and is conducted in accordance with agency policies and state and federal regulations. PEI staff members are located in DFPS's State Office in Austin. PEI staff includes program specialists, contract managers, and contract technicians.

G. Identify all funding sources and amounts for the program or function, including federal grants and pass-through monies. Describe any funding formulas or funding conventions. For state funding sources, please specify (e.g., general revenue, appropriations rider, budget strategy, fees/dues).

Please see Appendix A.

Alternate Exhibit Provided For Section VII. Item G.

H. Identify any programs, internal or external to your agency, that provide identical or similar services or functions to the target population. Describe the similarities and differences.

DFPS is the primary agency that delivers prevention programs designed to prevent child abuse and neglect and juvenile delinquency. There are other state agencies that deliver prevention services (for example, substance abuse prevention). However, the prevention of child abuse and neglect or juvenile delinquency is not the primary function of these programs. While not the primary function of Health and Human Services Commission (HHSC), it implements the Nurse Family Partnership (NFP) program in eight communities for pregnant women who are Medicaid eligible. NFP is an evidence-based, nurse home-visitation program aimed at preventing child abuse and neglect. The HHSC also oversees the Texas Home Visiting program, funded through the U.S. Department of Health and Human Services Health Resources and

Services Administration Maternal, Infant and Early Childhood Home Visiting grant. The grant supports the development and implementation of home visiting program in communities selected through a needs assessment. One objective of the program is improving the prevention of child injuries and reduction in child maltreatment among program participants. There are also private, non-profit entities within the state that deliver services such as Healthy Families, Parents as Teachers, Home Instruction for Parents of Pre-school Youngsters, and other programs that affect child abuse and neglect and receive funding from sources other than through DFPS.

DFPS was identified as the key state agency working to prevent child abuse and neglect through an inventory of policies, programs, and activities undertaken by the Interagency Coordinating Council for Building Healthy Families. Created in 2005 by the Legislature, part of the Council's charge was to create an inventory of state-funded child abuse and neglect prevention efforts. The Council's inventory report, published June 1, 2006, summarized results from 269 surveys submitted by entities delivering family services with either a direct or indirect effect on the prevention of child maltreatment, using funding from state agencies. Of the 83 surveys reporting programs directly related to the prevention of child abuse and neglect, 77 identified DFPS/PEI as the funding source.

Community-Based Organizations

The most common types of services provided by the identified direct-impact programs were parent education and training, home visitation, public awareness campaigns, and life skills development. The majority of the programs supported by Council agencies, represented by 167 survey respondents, are indirect-impact programs or services. These programs include services such as child health insurance, food stamps, housing, domestic violence shelters, juvenile delinquency prevention programs, life skills programs for youth, school dropout prevention, employment, case management, and substance abuse treatment programs.

Texas Juvenile Justice Department

For juvenile justice programs, early intervention and treatment programs are funded through the Texas Juvenile Justice Department. There are other programs, such as 21st Century, Weed and Seed, and Communities in Schools that have some common ground with PEI juvenile delinquency prevention programs as they address truancy and school dropout, but these focus more on academic achievement rather than juvenile delinquency prevention. The Communities in Schools program was formerly administered through PEI and transferred to the Texas Education Agency as a result of legislation passed during the 2003 legislative session.

21st Century Program

The 21st Century program is a grant program funded through the U.S. Department of Education that provides academic-based enrichment opportunities during non-school hours for children who attend high poverty and low-performing schools. The program helps students meet state and local student standards in core academic subjects, such as reading and math, offers students a broad array of enrichment activities that complement their regular academic

programs, and offers literacy and other educational services to the families of participating children. The focus is on school-aged youth and there is a greater focus on middle to high school students because of their risk factors. The majority of the program is based on recreational type of services for youth to improve basic life skills such as social skills, decision-making skills and peer pressure-refusal skills, as well as tutoring and parenting classes.

Weed and Seed

Weed and Seed is a community-based strategy sponsored by the U.S. Department of Justice (DOJ) focused on law enforcement, crime prevention, and community revitalization. A strategy, rather than a grant program, Weed and Seed aims to prevent, control, and reduce violent crime, drug abuse, and gang activity in designated high-crime neighborhoods across the country. The strategy involves a two-pronged approach: law enforcement agencies and prosecutors cooperate in “weeding out” violent criminals and drug abusers and public agencies and community-based private organizations collaborate to “seed” much-needed human services, including prevention, intervention, treatment, and neighborhood restoration programs. A community-oriented policing component bridges the weeding and seeding elements.

Communities in Schools

Communities in Schools helps students stay in school and make right choices by connecting schools with needed community resources. By bringing resources, services, parents, and volunteers into schools, the program creates a community of caring adults who work hand-in-hand with educators. Plans are made to meet student needs, using existing resources. Young people are connected with services in a variety of ways. Services are made available to all students and their families in some schools, while in other schools CIS connects services with particular students in need, either on a one-time basis or as part of a carefully monitored case management system. CIS also brings community resources to students and families through after-school programs

I. Discuss how the program or function is coordinating its activities to avoid duplication or conflict with the other programs listed in Question H and with the agency’s customers. If applicable, briefly discuss any memorandums of understanding (MOUs), interagency agreements, or interagency contracts.

At the local level, PEI works to ensure that duplication or conflict is avoided by requiring all potential service providers to address this issue in their proposal as part of the procurement process. They are asked to specify how they will ensure that services do not duplicate those already provided in the community through other funding sources, as well as how they would enhance, compliment, or fill gaps in other services. In addition, PEI providers are required to address ongoing collaboration with local social service providers to provide effective referrals for clients served through the PEI contract to other service providers as appropriate. PEI

providers are also required to register their services with the 2-1-1 referral system and to keep this information updated to better support access to services and appropriate referrals.

At the state level, PEI led the Interagency Coordinating Council for Building Healthy Families. This Council is charged with ensuring services and programs for preventing child abuse and neglect and building healthy families are coordinated at the state level and complement one another to ensure families get the support they need. Eleven agencies have participated, including all HHS agencies. While the Council itself expired at the close of FY 2009, the effort continued through a memorandum of understanding between the agencies. To further prevention duplication and promote collaboration PEI staff participates in several interagency workgroups and initiatives.

J. If the program or function works with local, regional, or federal units of government, include a brief description of these entities and their relationship to the agency.

PEI contracts with many units of government, such as cities, counties, and independent school districts to provide prevention and early intervention services in their local communities. At the federal level, PEI staff has participated on several committees and workgroups for the Community Based Child Abuse Prevention (CBCAP) Program, one of PEI's funding sources.

K. If contracted expenditures are made through this program please provide:

- a short summary of the general purpose of those contracts overall;
- the amount of those expenditures in FY 2012;
- the number of contracts accounting for those expenditures;
- top five contracts by dollar amount, including contractor and purpose;
- the methods used to ensure accountability for funding and performance; and
- a short description of any current contracting problems.

The PEI program delivers prevention and early intervention services through contracts. In FY 2012, total expenditures were \$27,862,496.26. The number of contracts accounting for expenditures was 62. The top five contracts by dollar amount are as follows in the chart below.

Top Five Contracts by Dollar Amount – Fiscal Year 2012					
Program	HHSAS Legal Contractor Name	Subject	Contract Begin Date	Contract End Date	Total Contract Value* (as of 6/17/2013)
PEI	Big Brothers Big Sisters of North Texas	DFPS Statewide Youth Services Network (SYSN)	6/1/2008	8/31/2012	\$7,433,685.00
PEI	Texas Alliance of Boys and Girls	DFPS Statewide Youth Services Network (SYSN)	6/1/2008	8/31/2012	\$7,036,692.00
PEI	Connections Individual & Family Svcs Inc	DFPS Services to At-Risk Youth	9/1/2008	8/31/2012	\$5,678,565.02
PEI	North Texas Youth Connection	DFPS Services to At-Risk Youth	9/1/2008	8/31/2012	\$4,976,806.68
PEI	High Sky Children's Ranch	DFPS Services to At-Risk Youth	9/1/2008	8/31/2012	\$4,176,900.43

* The "Total Contract Value" is based on either the Maximum Contract Budget Amount for the full contract term or, for contracts without a specified budget, the Total Expenditures across the life of the contract (FY 2006 forward).

There is a system in place to ensure the accountability of contracted service providers in terms of both funding and performance. The system includes a competitive procurement process, risk assessment, and ongoing, formal on-site monitoring of fiscal, administrative and programmatic operations and day-to-day contract management.

In addition, program service data is collected through the Prevention and Early Intervention Services database (PEIS), a web-based system that contractors are given access to in order to submit information on client registrations and monthly services. Data reports allow both the individual contractors and PEI staff to monitor performance on an ongoing basis.

L. Provide information on any grants awarded by the program.

PEI does not award grants.

M. What statutory changes could be made to assist this program in performing its functions? Explain.

Statutory changes related to data sharing between agencies to support assessment of client outcomes would assist the division in more thoroughly determining the impact of prevention services on the children, youth, and families that are served. PEI receives an annual data report

from the Texas Juvenile Justice Department with client outcomes for the STAR and CYD program. The report indicates the number of participants of the programs referred to juvenile probation. A report indicating the number of participants in all PEI programs referred to juvenile probation would assist the division in evaluating the long term effect of child abuse prevention services to juvenile delinquency outcomes.

In addition, sharing of client level data from the Texas Education Agency and Department of State Health Services would help assess prevention outcomes. Data matching PEI clients served by these entities would give insight on outcomes across areas closely related to child abuse prevention such as substance abuse, mental health and domestic violence.

N. Provide any additional information needed to gain a preliminary understanding of the program or function.

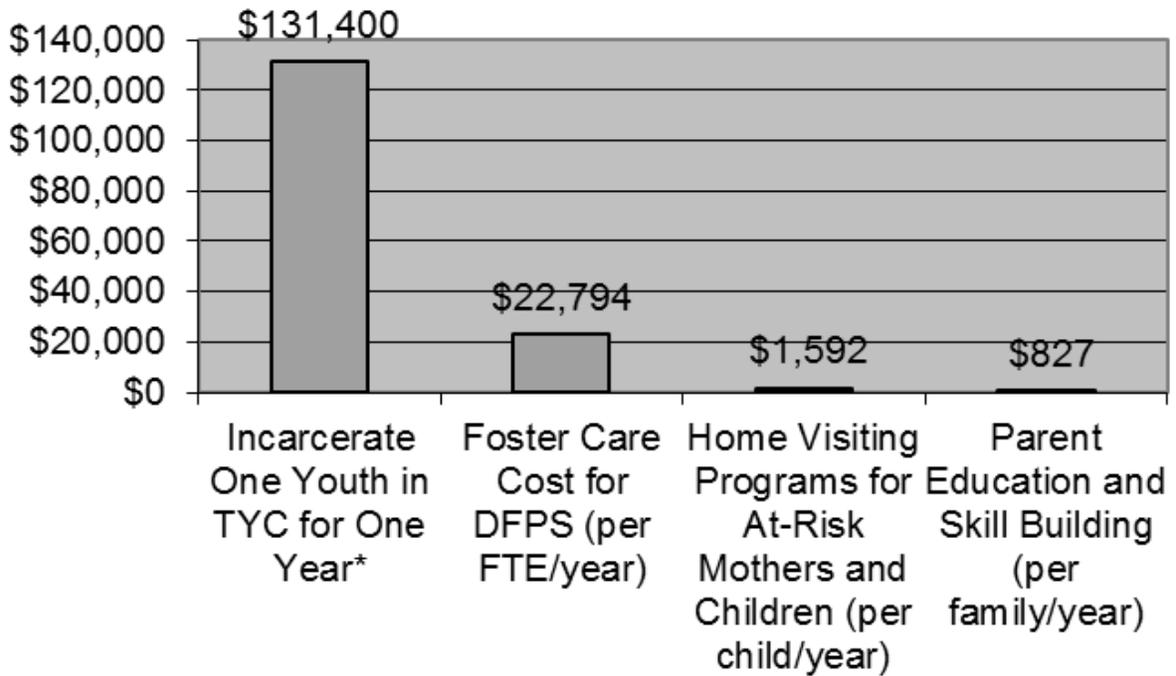
Investment in well-planned and effectively implemented prevention efforts is cost efficient, and PEI works to ensure that the prevention funds authorized by the Legislature are well spent.

The costs of child abuse and neglect are high and increasing. According to an assessment conducted by the University of Houston, child maltreatment cost Texas more than \$6.3 billion in 2007. Direct costs associated with child welfare system costs, mental health care, hospitalization, law enforcement, and judiciary costs totaled \$1.1 billion. The remaining \$5.2 billion included indirect costs related to special education, juvenile delinquency and juvenile probation, mental and physical health care, substance abuse, adult criminal system and lost productivity.

Prevention programs can be cost-effective. If Texas prevented or even reduced the incidence of child maltreatment, this would result in better short and long-term outcomes for children and families and would produce significant cost savings to the state. For example, for FY 2013, home-visiting programs for an at-risk mother and child have an average annual cost of approximately \$1,592.00. In addition, the average annual costs of parent education and skill-building programs are approximately \$830 per family.

In contrast, the costs to provide remedial care are much higher as illustrated by the chart on the following page. For example, in Texas the average annual cost of foster care per full time equivalent (FTE) in FY 2012 was \$22,794, while the cost to incarcerate a youth for one year in the former Texas Youth Commission (TYC) was approximately \$131,400.

How much will Texas pay?



O. Regulatory programs relate to the licensing, registration, certification, or permitting of a person, business, or other entity. For each regulatory program, if applicable, describe:

- why the regulation is needed;
- the scope of, and procedures for, inspections or audits of regulated entities;
- follow-up activities conducted when non-compliance is identified;
- sanctions available to the agency to ensure compliance; and
- procedures for handling consumer/public complaints against regulated entities.

PEI is not a regulatory program.

P. For each regulatory program, if applicable, provide the following complaint information. The chart headings may be changed if needed to better reflect your agency's practices.

Not applicable.

VII. GUIDE TO AGENCY PROGRAMS – CONTINUED

A. Provide the following information at the beginning of each program description.

Name of Program or Function	Adult Protective Services In-Home Investigations and Services Facility Investigations
Location/Division	701 West 51 st Street, Austin, Texas/ Adult Protective Services
Contact Name	Beth Engelking, Assistant Commissioner Adult Protective Services
Actual Expenditures, FY 2012	In-Home – \$52,344,306 Facility – \$10,010,572
Number of Actual FTEs as of June 1, 2013	In-Home – 795.5 Facility – 185.5
Statutory Citation for Program	Chapters 40 and 48, Human Resources Code; Subchapter E, Chapter 261, Family Code

B. What is the objective of this program or function? Describe the major activities performed under this program.

Adult Protective Services (APS) consists of two program areas: In-Home Investigations and Services (In-Home), and Facility Investigations. Statute requires that anyone who believes that a person age 65 or older or adult with a disability is being abused, neglected, or financially exploited to report it.

In-Home

The APS In-Home program protects adults in the community, as opposed to a facility setting, who are 65 and older or who have disabilities. APS does this by investigating reports of abuse, neglect, and financial exploitation and providing or arranging for services to alleviate or prevent further maltreatment. APS works with vulnerable adults who reside in their own homes or in unregulated “room-and-board” homes. APS also investigates allegations of financial exploitation of vulnerable adults living in nursing homes who may be financially exploited by someone outside the facility.

The APS In-Home program performs the following major activities.

- Investigates reports of abuse, neglect, and financial exploitation.
- Refers reports to other state agencies when DFPS is not the appropriate investigating agency.

- Provides or arranges for services to prevent or alleviate abuse, neglect, and financial exploitation.
- Assesses factors that may indicate an adult's lack of capacity to consent to services and pursue a medical evaluation if indicated.
- Refers adult victims to the Texas Department of Aging and Disability Services (DADS) for guardianship services when they appear to lack the capacity to consent to services and when guardianship is the least restrictive alternative to ensure their safety and well-being.
- Uses the least restrictive alternative when providing protective services.
- Seeks court orders (when necessary) to gain access to individuals, prevent interference with voluntary protective services, provide emergency protective services, and to access records or documents.
- Initiates emergency protective services (e.g., removal) after hours and on holidays without a court order when necessary.
- Notifies law enforcement if APS suspects the client is the victim of a crime, or if an APS client is removed from their home under a court order and the client's home is left unattended.
- Makes referrals to the Employee Misconduct Registry of certain validated perpetrators.
- Enhances and develops community resources in an effort to increase awareness of abuse, neglect, and financial exploitation and to address increasing needs of APS clients.
- Conducts a community satisfaction survey to solicit information regarding the Department's performance in providing protective services for adults.

APS also organizes a public awareness campaign (www.EveryonesBusiness.org) to address important issues in protecting persons age 65 or older and people with disabilities in Texas. The program targets law enforcement, judiciary partners, and service providers to increase their knowledge of APS programs and the needs of vulnerable adults.

Facility Investigations

The APS Facility Investigations program investigates allegations of abuse, neglect, and financial exploitation of persons receiving services in state operated or contracted programs that serve adults and children with mental illness or intellectual disabilities.

APS' role in protecting facility clients from abuse, neglect, and financial exploitation is to:

- notify the provider of the allegations and conduct an unbiased investigation of reported allegations; and
- notify the provider of the objective findings of the investigation so the provider can take appropriate action to protect clients.

APS does not:

- proactively investigate or regulate providers; or
- have operational authority over the providers.

Major activities performed by the Facility Investigations program include:

- Investigating reports of abuse, neglect, and financial exploitation allegations in appropriate facility settings;
- Initiating investigations by notifying the facility or provider agency within one hour of receiving the report; and
- Referring reports to other state agencies when APS is not the appropriate investigating agency (e.g., the allegation does not meet the definition of abuse, neglect or financial exploitation).
- Notifying local law enforcement when an investigation indicates that a crime may have been committed.
- Notifying the HHS Office of Inspector General (OIG) if the investigation indicates a client in a State Hospital or State Supported Living Center has been abused, neglected, or exploited in a manner that may constitute a criminal offense.
- Completes an investigative report with findings for the facility or provider and, if appropriate, law enforcement, the OIG, and DADS.
- Makes referrals to the Employee Misconduct Registry of certain confirmed perpetrators.

Investigations are conducted in the following settings:

- State Supported Living Centers;
- State Hospitals;
- Rio Grande State Center that provides mental health and intellectual and developmental disability services;
- privately operated intermediate care facilities for individuals with intellectual disabilities (ICF/IID);
- community centers that contract with DADS and DSHS to provide mental health and intellectual and developmental disability services; and
- facility and community center contractors, including Home and Community-based Services (HCS) and Texas Home Living waiver programs.

C. What evidence can you provide that shows the effectiveness and efficiency of this program or function? Provide a summary of key statistics and performance measures that best convey the effectiveness and efficiency of this function or program.

In FY 2012, the APS In-Home average daily caseload was 29.6, with 540 caseworkers completing 87,487 investigations, validating abuse, neglect, or financial exploitation in 59,595 cases, and providing services in 46,083 cases. In Facility Investigations, 121 caseworkers completed 10,803 investigations and confirmed 1,259 cases of abuse, neglect, or financial exploitation.

Monthly Reports

In addition to the required LBB performance measures, executive management receives and reviews a monthly high-level report that provides information for both In-Home and Facility Investigations, including the following measures.

Additional APS Performance Measures	
Program Area	Measure
In-Home	Average number of In-Home intakes assigned for investigation per month
In-Home	Average daily caseload of APS caseworkers
In-Home	Monthly average number of completed In-Home investigations
In-Home	Percentage of In-Home initial face-to-face contacts completed on time
In-Home	Percentage of investigation standards met during Quality Assurance Case Analysis
In-Home	Percentage of client outcome standards met during Quality Assurance Case Analysis
In-Home	Average number of days that investigation stages remain open
In-Home	Percentage of investigation stages progressed to service delivery
In-Home	Average number of days that service stages remain open
In-Home	Percentage of investigation and service delivery contacts that are documented timely (case initiation, initial face-to-face, and monthly status contacts)
In-Home	Monthly average number of filled APS In-Home caseworker FTEs
Facility	Average number of facility intakes assigned per month
Facility	Average daily caseloads
Facility	Percentage of initial face-to-face contacts completed timely
Facility	Monthly average number of completed investigations
Facility	Percentage of facility investigations completed timely (excludes investigations having extensions)
Facility	Percentage of state supported living center investigations completed within 10 Days (not including extension requests)
Facility	Percentage of contacts documented timely
Facility	Monthly average number of filled APS facility caseworker FTEs
In-Home and Facility	APS caseworker vacancies (In-Home and Facility)
In-Home and Facility	APS worker annualized turnover rate

Case Reading and Quality Analysis

APS assesses casework quality through case reading and ad hoc quality analysis. Through this process, APS quality assurance analysts select a sampling of cases to review whether caseworkers followed DFPS policy and verify appropriate case outcomes. A comprehensive reporting system and database provides management with timely performance updates on casework quality and enables the central office to review quality of work statewide.

Regional Reviews

In addition, APS conducts two regional reviews each year in coordination with the DFPS Center for Policy, Innovation, and Program Coordination, focusing on program effectiveness and efficiency.

Community Satisfaction Survey

DFPS conducts a community satisfaction survey every two years for feedback on APS's performance. In 2011, DFPS sent the survey to 2,477 APS stakeholders, including 400 judiciary members, 552 law enforcement agents, 1,282 community organizations, and 243 APS community board members. The Community Satisfaction Survey Results Reports are available for review on-line at:

http://www.dfps.state.tx.us/Adult_Protection/About_Adult_Protective_Services/survey.asp

Source: 2011 Community Satisfaction Survey Results Report

D. Describe any important history regarding this program not included in the general agency history section, including how the services or functions have changed from the original intent.

The APS program began in Texas in the mid-1970s when amendments to the Title XX (Social Services Block Grants) portion of the Social Security Act required that states using these funds assure protection of children, persons age 65 or older, and adults with disabilities from abuse and neglect, and financial exploitation. In 1981, the Legislature passed Human Resources Code, Chapter 48 (HRC 48), establishing the state's authority and responsibility for protecting vulnerable adults age 65 and older from maltreatment. Lawmakers amended Chapter 48 in 1983 to extend protection to younger adults (age 18 to 64) who have disabilities.

The APS program has experienced many changes to its mandate since 1983. Below is a description of some of the recent changes that affect the way the program operates.

Business Plan

APS started a formal annual business plan process with the goal of continuing to improve services to the APS client population. Recent business plan projects include:

- quality assurance and performance management changes;
- evaluation of and adjustments to supervisor consults;

- evaluation of and changes to the APS training model; and
- development of new assessment tools for the In-Home program.

In-Home

“As You Go” Documentation

In recent years APS has made other efforts to enhance its effectiveness and efficiency, such as the “As You Go” Initiative. The “As You Go” Initiative grew out of recommendations from APS’ Case Management Efficiency Workgroup in FY 2008. The goal was to improve the management of APS documentation, including more efficient and effective use of mobile technology, and to provide tools for supervisors to support and encourage more efficient methods. DFPS developed and launched a training program to teach workers how to maximize the potential of tablet PCs and more efficiently manage workloads. DFPS trained caseworkers to document their cases on their tablet PCs in “real time”, which improves the timeliness of documentation and the quality of the information gathered. It also allows workers to spend more time working directly with clients. The standard for timely documentation, formerly 14 days, was changed to one day. In FY 2012, 88.6 percent of In-Home case documentation was being completed within one day, and 91.1 percent of facility investigations documentation was completed within one day.

Defining Abuse, Neglect, and Financial Exploitation

In 2011, the 82nd Legislature passed S.B. 221. It gave the HHSC Executive Commissioner authority to define abuse, neglect, and financial exploitation for the In-Home program in rule rather than law. APS asked for this authority for two reasons. First, APS wanted to target In-Home services to the people who needed them the most and reduce duplication with other community service providers (such as first responders). Second, APS wanted to hold paid caretakers to a higher standard of duty than unpaid caretakers. APS developed the rule changes with stakeholder input and HHSC adopted them on September 1, 2012. APS worked with community partners to carefully put the changes into effect and has carefully assessed and monitored the affect.

Facility

The 81st and 83rd Legislatures passed several bills that directly affected the APS Facility Investigations program.

SSLC Investigations – S.B. 643 (81st Legislature) – This bill focused primarily on the programs overseen by the Department of Aging and Disability Services (DADS) for persons with intellectual disabilities. A significant portion of the bill dealt with abuse, neglect, and financial exploitation investigations in state-supported living centers (SSLCs) and the Rio Grande State Center. The bill established an independent ombudsman for SSLCs. It formalized the role of the HHS Office of Inspector General (OIG) in abuse, neglect, and financial exploitation investigations that rise to the criminal level and it transferred the responsibility for investigations in privately operated ICF/IID to DFPS beginning in June 2010. It required an interagency memorandum of understanding among the Health and Human Services Commissioner, DFPS, DADS, HHS OIG, Office of Independent Ombudsman, and the Department

of State Health Services (DSHS) regarding abuse, neglect, and financial exploitation investigations. It also required a combined database of DADS regulatory data and APS investigation data for SSLCs, privately operated ICF/IID, ICF/IID operated through community MH/MR centers, and HCS settings (that are not adult foster care programs), which would be maintained by DADS.

DOJ Settlement – S.C.R. 77 (81st Legislature) – This resolution formalized the settlement between the State of Texas and the U.S. Department of Justice regarding the protection of residents of SSLCs from abuse, neglect, and financial exploitation. The agreement specified three major changes to APS facility investigations:

- 10-Day SSLC investigations – All SSLC investigations were required to be completed within 10 days, rather than the previous 14- and 21-day timeframes. APS successfully began 10-day investigations in June 2010.
- Supervisor review of all facility investigations – Supervisors were required to review and approve all facility investigations in SSLCs and Rio Grande State Center before closing cases. APS implemented this in **all** facility investigations in June 2010.
- Prior History Review – APS was required to review the past case history of the alleged victim and alleged perpetrator in an APS investigation. APS began reviewing and recording past case history in the case files in June 2010.

Employee Misconduct Registry Changes – S.B. 806 (81st Legislature) – This bill made State employees working in SSLCs, state centers, state hospitals, and community centers who are confirmed as perpetrators of serious abuse, neglect, or financial exploitation subject to listing in the Employee Misconduct Registry (EMR). This would bar them from direct care employment for life. APS investigators, effective September 2010, began referring designated perpetrators to the registry as they were already doing in home and community-based services cases. DFPS Legal Services works together with HHSC to process the EMR appeal cases in conjunction with the current state employee grievance hearing process.

APS continues to work with DADS and DSHS to improve the quality of investigations. APS is committed to continuing and expanding its efforts to improve the quality of facility investigations.

While APS received resources to implement the legislatively mandated changes, APS continues to examine and monitor workload to determine whether the resources are sufficient to successfully implement the changes. APS is concerned that the cumulative effect of the changes fundamentally altered program dynamics in a way that has only become clear over time. Discussions with APS field staff, key stakeholders, and internal reviews and appeals provide anecdotal information that the program is struggling to find a balance between timeliness and quality. The DOJ requirements, particularly 10-day investigations, combined with the addition of processes (like review of video evidence) and increased numbers of cases involving EMR referrals (which are usually more involved investigations) and increased

investigations in community settings, have created workload stress for APS Facility employees. The program continues to be concerned that investigators may shortcut some investigations. APS is working with DFPS Office of Finance to conduct a time management study of activities in the program to see if better indicators of workload can be developed.

State Hospitals Investigations – S.B. 152 (83rd Legislature) – This bill was filed as a result of the findings in an HHSC Interagency Facility Workgroup. It expands protections for patients at state hospitals by increasing oversight, improving employee training (including specialized training), and strengthening abuse, neglect, and financial exploitation reporting requirements. It authorizes the Office of Inspector General (OIG) to investigate criminal offenses. It also permits federal background checks based on risk assessments, and requires professional boards to report suspected allegations of abuse, neglect, and financial exploitation.

Facility Investigations are managed through the regional DFPS structure. This structure creates accountability at the local level, but creates challenges for ensuring consistency in investigations. To address these challenges, APS:

- created a Program Improvement Committee consisting of staff from all levels of the Facility program and from all regions;
- instituted quarterly Facility supervisor meetings;
- worked on additional ways to enhance communication about casework decisions and to provide consultation on complex cases; and
- initiated revision of quality assurance standards to focus more on quality of investigations.

E. Describe who or what this program or function affects. List any qualifications or eligibility requirements for persons or entities affected. Provide a statistical breakdown of persons or entities affected.

In-Home

APS In-Home program clients are adults age 65 and older or who have a disability and reside in the community. The population base served by APS is growing significantly. Based on the Texas State Data Center's estimates for 2012, Texans who are aged 65 or older or who are adults with a disability made up about 17.2 percent of the state's population. In 2012, there were more than 2.8 million Texans 65 years of age or older and nearly 1.7 million Texans with a disability between 18 and 64 years old. Many of these individuals live alone and depend on others for care.

Chapter 48 of the Texas Human Resources Code authorizes APS to investigate reports of abuse, neglect, and financial exploitation of persons age 65 and older, and adults with disabilities. Validated victims of abuse, neglect, or financial exploitation are eligible for services to alleviate the maltreatment.

In 2012, APS completed 87,487 In-Home investigations. Of those, APS validated 59,595 cases of abuse, neglect, or financial exploitation. 49.8 percent of these validated victims were adults with disabilities and 50.2 percent were adults age 65 or older. For all cases, 60.5 percent were women and 39.4 percent were men and ethnic groups were represented as follows:

- 51.0 percent Anglo,
- 22.9 percent African American,
- 22.7 percent Hispanic,
- 0.2 percent Native American,
- 0.6 percent Asian, and
- 2.6 percent were listed as Other

Facility

Chapter 48 of the Texas Human Resources Code and Chapter 261 of the Texas Family Code authorizes APS to investigate reports of abuse, neglect, and financial exploitation of persons age 65 and older, adults with disabilities, and persons receiving mental health or intellectual disabilities services from a State Supported Living Center, State Hospital, community center, state center, or Home and Community-based Services and Texas Home Living waiver programs.

In FY 2012, APS completed 10,803 Facility Investigations: 2,693 were in state hospitals, 3,724 in state supported living centers, 179 in Rio Grande state center, 1,048 in privately operated ICF/IID, 2,623 in Home and Community-based Services and Texas Home Living waiver programs, and 536 in community centers.

F. Describe how your program or function is administered. Include flowcharts, timelines, or other illustrations as necessary to describe agency policies and procedures. Indicate how field/regional services are used, if applicable.

APS is administered through two major functional areas: Field Operations and Performance and Policy Development, a central office support program for both APS In-home and Facility Investigation cases.

APS Field Operations

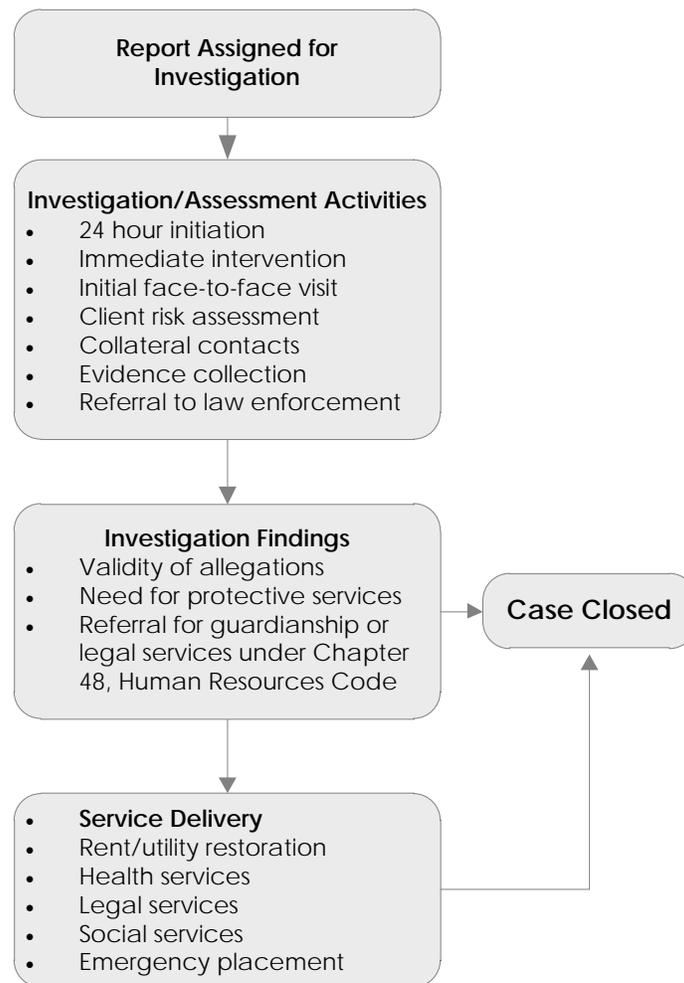
APS is administered in eleven regions through nine regional offices. Nine regional directors and 18 program administrators supervise field staff. The regional program administrators manage supervisors.

In-Home

The APS In-Home program protects the unprotected through a statewide investigation and service delivery system. The division employed more than 540 caseworkers and 85 supervisors in FY 2012. Caseworkers investigate reports of abuse, neglect, or financial exploitation and coordinate support services within the community to alleviate or prevent further maltreatment.

APS may provide or arrange for emergency services to alleviate abuse, neglect, and financial exploitation. This includes short-term assistance with shelter, food, medication, health services, heavy cleaning, financial assistance for rent and to restore utilities, transportation, and minor home repair. APS also refers clients to other social or community services, and APS refers cases that may require guardianship services to the Texas Department of Aging and Disability Services or local guardianship programs (Houston/Galveston). Individuals with the capacity to do so may refuse APS services but they may not refuse an investigation.

The flowchart shown on the next page is a high-level In-Home case diagram, which is a useful reference but does not show all details of the flow of an In-Home case.



APS In-Home program supervisors consult with caseworkers at specific points during the investigation and delivery of services. Supervisors review and approve all cases before closure.

APS has specialized staff in each region that have expertise in financial exploitation and self-neglect cases. These experts provide a critical resource for staff in gathering key evidence that may lead to legal action and in addressing complex medical and social factors to ensure the

safety of clients. Staff specializing in community engagement increase community partnerships and collaborations with service providers, law enforcement agencies, the judicial community, civic organizations, and volunteers. These staff members interact with the community on a daily basis and foster an environment of positive relationships between the community and all APS staff.

Facility

The APS Facility Investigations program included more than 121 caseworkers and 22 supervisors in FY 2012. Facility Investigations staff in the regions investigate abuse, neglect, and financial exploitation of clients receiving services in state operated or contracted settings and programs that serve adults and children with mental illness or intellectual disabilities.

The following flowchart is a high-level Facility investigation diagram, which is a useful reference but does not show all details of the flow of a Facility investigation.



APS Facility Investigations supervisors direct investigative teams, mentor investigators, and approve all investigations before they are closed. Each region has subject matter experts in evidence-driven investigation, and in the investigation of risk and exploitation. While these staff primarily focus on In-Home investigations, they are available to assist with complex Facility investigations.

APS State Office

Headquarters provides professional expertise, program support, policy and performance management, strategic planning, and management of field operations. The State Office

supports field services through these main divisions: Performance and Policy Development Division, the Field Operations Division, and the Program Support unit.

The Performance and Policy Development Division is responsible for:

- developing, interpreting, and maintaining policy handbooks for In-Home and Facility investigations;
- conducting policy training and staff development activities;
- providing case reading and quality assurance analysis;
- conducting reviews and appeals of Facility cases; and
- providing case consultation to field staff on policy issues.

Field Operations:

- provides overall statewide management of regional activities;
- coordinates regional strategic planning efforts;
- facilitates communication with nine regional offices;
- assists with the purchase of direct services for APS clients;
- manages and coordinates grants to the Department; and
- coordinates community-engagement activities.

The Program Support unit:

- provides support in legislative efforts and response to external requests;
- manages projects and conducts research activities;
- coordinates professional development and training opportunities for the program;
- provides support in reports and data analysis based on the client case-management system; and
- leads development of APS content in agency publications.

G. Identify all funding sources and amounts for the program or function, including federal grants and pass-through monies. Describe any funding formulas or funding conventions. For state funding sources, please specify (e.g., general revenue, appropriations rider, budget strategy, fees/dues).

Please see Appendix A. Alternate Exhibit Provided For Section VII. Item G.

H. Identify any programs, internal or external to your agency, that provide identical or similar services or functions to the target population. Describe the similarities and differences.

The APS program conducts investigations of abuse, neglect, and exploitation for defined target populations, described below, in the In-Home and Facility Investigations programs. APS may also provide or arrange services in In-home cases.

Facility Investigations

The APS Facility Investigations program investigates reports of abuse, neglect, and financial exploitation of clients receiving services in state operated and/or contracted programs that serve adults and children with mental illness or intellectual disabilities. Although other programs provide investigations, there are no other programs at the state or local level that provide the same function as APS.

The APS Facility Investigations program reports allegations of abuse, neglect, and financial exploitation that may constitute a criminal offense to local law enforcement. APS also notifies and coordinates investigations in State Supported Living Centers (operated by DADS) with the Health and Human Services Office of Inspector General (OIG) when abuse, neglect, and financial exploitation allegations are possibly criminal in nature. APS works in tandem with local law enforcement and the OIG.

The Office of the Attorney General (OAG) protects senior Texans and other health-care service consumers from abuse, neglect, and financial exploitation by pursuing civil actions against long-term care facilities and investigating incidents for criminal prosecution. The Attorney General's Consumer Protection and Public Health Division takes civil legal action to ensure quality treatment in nursing homes, assisted living facilities, and home health agencies.

The federal ICF/IID program requires investigation of all "serious incidents." Serious incidents can include abuse, neglect, and financial exploitation. The provider investigates incidents not investigated by APS. ICF/IID providers (both state and privately operated) use the results of the APS investigation to meet federal requirements as well as any additional internal investigation or review of the incident investigated by APS. DADS regulatory staff oversees compliance with the federal requirements.

In-Home Investigations

The APS In-Home program performs two major functions: investigating allegations of abuse and providing or arranging for services. Other state agencies or programs also investigate allegations, although not for the same population.

DADS has the responsibility to investigate activities in assisted living, adult foster care facilities with four or more residents, and nursing homes. When APS discovers boarding homes providing services that appear to meet the definition of an assisted living facility, APS makes a referral to DADS regulatory for investigation of the licensure status. APS In-Home investigates

allegations of financial exploitation involving vulnerable adults living in nursing homes who may be financially exploited by someone outside the facility who has an ongoing relationship with the client.

In-Home Service Delivery

The service delivery function performed by APS In-Home caseworkers often involves clients of area agencies on aging, local MHMR authorities, domestic violence programs, and other community organizations. These programs, however, are not providing protective services. As described in the following section, APS refers clients to or coordinates with these organizations to connect or reconnect them to address the root cause of abuse, neglect, or exploitation, while providing service necessary for their immediate health, safety, and protection. APS communicates and coordinates with these organizations to avoid duplication or conflict whenever possible.

Senate Bill 6 (79th Legislature) transferred the Guardianship program from DFPS to DADS. APS refers victims of abuse, neglect, or exploitation to DADS for guardianship services when the client appears to lack the capacity to consent to services, there is no other potential guardian available, and guardianship is the least restrictive alternative that will ensure the client's safety and well-being. Guardianship is a legal decision that establishes a relationship between a person who can no longer make effective decisions for themselves (ward) and a person or entity named by the court (guardian) to assist the ward by making decisions for the ward.

I. Discuss how the program or function is coordinating its activities to avoid duplication or conflict with the other programs listed in Question H and with the agency's customers. If applicable, briefly discuss any memorandums of understanding (MOUs), interagency agreements, or interagency contracts.

DFPS has established several memorandum of understanding to avoid duplication and conflict with programs conducting similar investigations or providing similar service, and coordinates services in the best interests of clients.

Facility Investigations

To reduce duplication, APS maintains MOUs with HHSC OIG, DADS, DSHS, and the Office of Independent Ombudsman to define roles and responsibilities in facilities operated by DADS and DSHS. To reduce duplication, APS has MOUs with DADS and the OAG, clarifying roles and responsibilities in investigations involving Medicaid fraud, waste and abuse investigations.

For potentially overlapping abuse, neglect, or exploitation and serious incident investigations in State Supported Living Centers and privately operated ICF/IIDs, in general, incident management staff let APS staff take the lead on serious incidents involving ANE and then usually rely on the APS investigation to comply with federal requirements. If the facility disagrees with the APS abuse, neglect, or exploitation finding, it may investigate the abuse, neglect, or exploitation aspect of the incident further. It will also investigate the non-abuse, neglect, or exploitation aspects of the incident.

APS coordinates a meeting every quarter with staff from DADS, DSHS, and Disability Rights Texas to discuss policy and operational issues in the Facility Investigations program. Disability Rights Texas is the federally designated legal protection and advocacy agency for people with disabilities in Texas. APS communicates on an as needed basis with staff from both agencies to address issues. APS works closely with DADS and DSHS on communication and training issues for contracted providers.

In-home Service Delivery

To avoid duplication and conflicts, APS community engagement staff work closely with a variety of other service organizations and agencies such as local MHMR authorities, domestic violence shelters, hospital social work and discharge planning departments, and area agencies on aging to build sound working relationships, clarify mutual roles and responsibilities, and address conflicts. At the state level APS participates with CPS, HHSC, and the Texas Council on Family Violence on an interagency steering committee to address concerns related to domestic violence against CPS and APS clients. DFPS maintains and periodically renews MOUs with domestic violence shelters. APS staff members participate at the state and local level in numerous regional or local groups when current or potential APS clients have needs that require coordination across multiple organizations. Examples include APS Special Task Units, HHSC Community Resource Coordinating Groups for Adults, the HHSC *Colonias* Initiative, and Money Follows the Persons meetings, among others.

The organization that most closely mirrors the APS service delivery function is area agencies on aging. APS and area agencies make referrals to each other based on ability to meet client needs in a specific case and, on occasion, will work together to develop and deliver a service plan for a client.

DFPS and DADS have a MOU outlining the coordination of policies and procedures, clarifying operational issues, and the formation of a joint workgroup to continue discussing policy and procedural concerns affecting the referral of clients, assessment processes, and the delivery of guardianship services. Representatives from both agencies served on a joint committee set up to ensure services were coordinated to effectively serve and protect clients. The MOU establishes a joint staffing and appeal process for cases in which DFPS makes a referral for guardianship but DADS does not agree a guardianship is needed.

J. If the program or function works with local, regional, or federal units of government, include a brief description of these entities and their relationship to the agency.

The APS program does not have a federal partner. As part of healthcare reform, Congress passed the Elder Justice Act but has yet to appropriate funds for implementation. Until the Elder Justice Act is implemented, there is no direct federal involvement in the APS program. APS staff members have proactively worked with the federal Government Accountability Office on the planning for implementation of the Elder Justice Act.

The APS program works with regional quasi units of government to coordinate services for clients with multiple needs as described in Question I. Regional governments include local MHMR authorities and the Councils of Governments that are home to area agencies on aging.

The APS program coordinates services with many parts of local governments for services for clients, ranging from housing authorities to health and human services departments. APS may make referrals to various regulatory functions of local governments if it discovers code violations during the course of an investigation. APS works closely with many local law enforcement jurisdictions, coordinating investigations as appropriate. Finally, APS works with local probate and other courts when seeking an emergency order for protective services or other necessary legal action to protect clients.

Chapter 48 of the Texas Human Resources Code instructs APS to conduct a community satisfaction survey of members of the judiciary, law enforcement agencies, community resource groups, and APS community boards to solicit feedback on APS performance in their communities.

K. If contracted expenditures are made through this program please provide:

- a short summary of the general purpose of those contracts overall;
- the amount of those expenditures in FY 2012;
- the number of contracts accounting for those expenditures;
- top five contracts by dollar amount, including contractor and purpose;
- the methods used to ensure accountability for funding and performance; and
- a short description of any current contracting problems.

In-Home

In coordination with the DFPS Contract Oversight and Support (COS) and the Procurement Divisions, APS identified 22 core services. Some of the services procured to date include: money management/representative payee, mental and medical health assessments, heavy cleaning, mental health services (counseling), claims processing, and ongoing services support. Another service procured is nursing facility care in which APS utilizes provider enrollment to contract with licensed nursing homes that take Medicaid patients.

APS services are client-specific and varied. Due to the very targeted nature of the APS purchased services, it is often difficult to procure and contract for services, and this problem results in a need to use procurement cards or claims processing for multiple small purchases within a region. APS continues to make efforts to procure and contract for services where feasible.

In FY 2012, APS had 350 client-services contracts that expended \$2,684,578.03. The table below contains information about the top five contracts by dollar amount, including contractor and purpose.

Highest Value APS Client Services Contracts – Fiscal Year 2012				
Legal Contractor Name	Purpose	Contract Begin Date	Contract End Date	Total Contract Value* (as of 6/17/2013)
Texas Visiting Nurse Service Inc.	<p>Personal Assistance Care (APS) – Regular, non-skilled, non-technical service provided in a client’s home by a licensed home and community support services agency. Tasks performed for the client may involve basic tasks, which include personal care, housekeeping, meal preparation, and other activities of daily living; high-risk clients may also need assistance with transferring into or out of bed, chair, or toilet, eating, getting to or using the toilet, taking self-administered medication, preparing a meal, etc. Additionally, if the caseworker determines that there is a high likelihood that the client’s health, safety, or well-being would be jeopardized if the services were not provided on a single given shift, and if no one else can be identified by the caseworker as being capable or willing to provide the needed assistance, services for high-risk clients may be required outside normal work hours.</p>	9/1/2010	8/31/2014	\$244,503.46

Highest Value APS Client Services Contracts – Fiscal Year 2012				
Legal Contractor Name	Purpose	Contract Begin Date	Contract End Date	Total Contract Value* (as of 6/17/2013)
U.T. Health Science Center at S.A.	Medical and Mental Health Assessments – Contracted home or office visits by a physician, psychiatrist, registered nurse, or other health professional to evaluate a client’s capacity to consent, mental health condition, and need for treatment. May also include home and/or office visits by a psychologist to evaluate the client’s mental status and competency. The service must include provision of a written assessment, consultation to the caseworker, and court testimony.	9/1/2009	8/31/2014	\$198,000.00
Bio-Klenz LLC	Heavy Cleaning (APS) – Restoration of a safe living environment by clearing trash, debris, accumulated grime, insects, rodents, animal feces, and dead animals from inside or outside a client’s home. Does not include normal housekeeping or home maintenance services.	5/5/2012	8/31/2013	\$190,000.00

Highest Value APS Client Services Contracts – Fiscal Year 2012				
Legal Contractor Name	Purpose	Contract Begin Date	Contract End Date	Total Contract Value* (as of 6/17/2013)
Ignacio Valdez	Medical and Mental Health Assessments – Contracted home or office visits by a physician, psychiatrist, registered nurse, or other health professional to evaluate a client’s capacity to consent, mental health condition, and need for treatment. May also include home and/or office visits by a psychologist to evaluate the client’s mental status and competency. The service must include provision of a written assessment, consultation to the caseworker, and court testimony.	11/1/2008	5/31/2013	\$185,000.00
U.T. Health Science Center at Houston	Medical and Mental Health Assessments – Contracted home or office visits by a physician, psychiatrist, registered nurse, or other health professional to evaluate a client’s capacity to consent, mental health condition, and need for treatment. May also include home and/or office visits by a psychologist to evaluate the client’s mental status and competency. The service must include provision of a written assessment, consultation to the caseworker, and court testimony.	9/1/2007	8/31/2012	\$175,697.00

* The “Total Contract Value” is based on either the Maximum Contract Budget Amount for the full contract term or, for contracts without a specified budget, the Total Expenditures across the life of the contract (FY 2006 forward).

DFPS contract staff monitors contractor performance based on risk and document monitoring activity in the Statewide Monitoring Plan. Contract monitoring may include on-site visits, desk reviews, and billing reviews. Fiscal monitoring includes a review of the contractor's financial operations, which may include a review of internal controls for program funds in accordance with state and federal requirements, an examination of principles, laws and regulations, and a determination of whether costs are reasonable and necessary to achieve program objectives. Programmatic monitoring includes a review of a contractor's service delivery system to determine if it is consistent with contract requirements, including the quality and effectiveness of programs.

Facility

Unlike APS In-Home, the APS Facility Investigations program area only conducts investigations, and does not provide services to clients. As a result, the Facility Investigation program does not contract out functions or services.

L. Provide information on any grants awarded by the program.

APS does not award grants.

M. What statutory changes could be made to assist this program in performing its functions? Explain.

Provision of APS Services Based on Client Risk of Future Harm. APS is in the process of designing new assessment tools for In-home cases. Section 48.002(5), Human Resources Code, allows APS to provide protective services to victims of abuse, neglect and exploitation and their caretakers only after a valid finding is made in an investigation. APS would like the statutory authority to provide services to these individuals based on the alleged victim's safety needs and risk of recidivism regardless of whether a finding is made in a particular investigation. For additional discussion, see Section IX – Major Issue #5.

Functions and Purpose of APS Special Task Units. Section 48.1521, Human Resources Code, requires the establishment of Special Task Units (STUs) in counties with a population of 250,000 or more to monitor the investigation of complex APS cases. The statute specifies the membership for these groups and tasks the counties with appointing STU members; however, many counties have been unable to enlist the participation of the statutorily mandated members. Moreover, since the enactment of Section 48.1521 in 2005, APS has significantly increased its use of ad hoc multidisciplinary teams to address complex cases, the membership of which are tailored to the location and issues presented in the particular case. The legislature may wish to examine the continued viability and effectiveness of the STU's and make statutory changes, as needed, to repeal these provisions, limit them to more populous counties, or allow alternative mechanisms of accomplishing the same goals.

Clarify Jurisdiction in APS Investigations. The APS Facility program was initially established to provide independent investigations of abuse, neglect, or exploitation in state facilities operated by the legacy TDMHMR. As TDMHMR’s services expanded beyond the state-run facilities, the Facility program’s investigative scope expanded to include providers of services in the community. However, as the community-based system of services for persons with intellectual and developmental disabilities (IDD) has evolved, the authorizing language for the APS Facility program has not. As a result, there are now providers of services to individuals with IDD – such as through the Consumer Directed Services model operated by the Department of Aging and Disability Services, among others – that are investigated by the APS In-Home program instead of the Facility program. Amendments to Chapter 48, Human Resources Code, are needed to ensure a uniform system for investigation of abuse, neglect, and exploitation across similar settings and programs. For additional discussion, see Section II, Subsection G, Obstacles.

Up-Front Due Process for APS investigations. To better ensure the safety of vulnerable adults and to better protect the due process rights of persons found to have committed abuse, neglect, or exploitation of an adult, amendments could be made to Chapter 48, Human Resource Code, to require that perpetrators be offered a due process hearing at the time the finding is made. For additional discussion, see Section II, Subsection G, Obstacles.

N. Provide any additional information needed to gain a preliminary understanding of the program or function.

For additional program information, please visit the APS website:

http://www.dfps.state.tx.us/Adult_Protection/About_Adult_Protective_Services/

O. Regulatory programs relate to the licensing, registration, certification, or permitting of a person, business, or other entity. For each regulatory program, if applicable, describe:

- why the regulation is needed;
- the scope of, and procedures for, inspections or audits of regulated entities;
- follow-up activities conducted when non-compliance is identified;
- sanctions available to the agency to ensure compliance; and
- procedures for handling consumer/public complaints against regulated entities.

APS In-Home and Facility Investigations programs are not regulatory programs.

P. For each regulatory program, if applicable, provide the following complaint information. The chart headings may be changed if needed to better reflect your agency’s practices.

APS In-Home and Facility Investigations programs are not regulatory programs. While APS Facility investigations are not a regulatory program, they contribute to state compliance with

federal regulatory requirements for ICF/IID providers. The Department of Aging and Disability Services regulates these providers.

VII. GUIDE TO AGENCY PROGRAMS – CONTINUED

A. Provide the following information at the beginning of each program description.

Name of Program or Function	Child Care Licensing
Location/Division	701 West 51 st Street, Austin, Texas/ Child Care Licensing
Contact Name	Paul Morris, Interim Assistant Commissioner
Actual Expenditures, FY 2012	Day Care Licensing – \$19,240,991 Residential Child Care Licensing – \$9,642,694
Number of Actual FTEs as of June 1, 2013	Day Care FTEs – 363.3 RCCL FTEs – 173.0
Statutory Citation for Program	Chapters 40, 42, and 43 Human Resources Code

B. What is the objective of this program or function? Describe the major activities performed under this program.

Child Care Licensing (CCL) program protects the health, safety, and well-being of children, ages birth through 17 years of age, who attend daycare or reside in residential childcare operations. CCL consists of two program areas: Day Care Licensing and Residential Child Care Licensing.

Major program activities include the following:

- developing minimum standards which daycare and residential childcare operations must comply with in order to promote the health, safety, and well-being of children in out-of-home care;
- inspecting daycare and residential childcare operations to ensure compliance with minimum standards;
- investigating allegations of violations of minimum standards or licensing law to assess if child-care operations are in compliance;
- investigating allegations of abuse and neglect in daycare and residential childcare operations; and
- ensuring appropriate enforcement action is taken.

To oversee out-of-home daycare and residential childcare, CCL responsibilities and activities include, but are not limited to the following activities.

- Regulating childcare through the development and monitoring of statewide rules and minimum standards to regulate daycare and residential childcare operations. Minimum

standards are the base-level health and safety requirements below which no regulated operations should fall.

- Processing applications and issuing permits to operations that meet minimum standards.
- Inspecting daycare and residential childcare operations for compliance with minimum standards.
- Investigating complaints alleging violations of minimum standards and reports of abuse or neglect in daycare and residential childcare operations.
- Ensuring criminal background checks (both FBI if applicable and DPS) and DFPS abuse and neglect Central Registry checks are conducted on all owners, directors and employees of daycare and residential childcare operations prior to permit issuance and every two years thereafter. These checks are also performed on anyone 14 years old or older who will regularly be present at an operation while children are in care.
- Educating parents and other caregivers on how to choose daycare through publications, public service campaigns, and by providing the specific compliance histories of daycare and residential childcare operations through the DFPS web site: www.txchildcaresearch.org and a toll-free information line: 1-800-862-5252.
- Providing technical assistance to daycare and residential childcare operations to help them comply with minimum standards.
- Licensing childcare administrators and child placing agency administrators who manage the different types of residential childcare operations.
- Taking remedial actions against daycare and residential childcare operations as necessary.

Day Care Licensing

The Day Care Licensing (DCL) program is responsible for protecting the health, safety, and well-being of children from birth through 13 years of age who attend childcare centers and childcare homes for part of the 24-hour day. This program regulates operations that care for children on a daily basis while their parents are working, going to school, etc.

In FY 2012, approximately 5.5 million children, from birth through 13 years of age, lived in Texas. Many of these children were in the care of a daycare provider on a regular basis for a substantial part of the day. The chart below provides a description of each type of setting for which DCL has statutory oversight.

DCL is responsible for regulating 9,601 licensed childcare centers (which includes before and after-school programs and school-age programs), 1,774 licensed childcare homes, 5,837 registered childcare homes, and 6,774 listed family homes, with a combined capacity to serve more than one million Texas children. CCL also issued a combined 4,488 new licenses, registrations, and listings and conducted 35,755 inspection visits in daycare operations.

Daycare Operations and Permit Type		
Daycare Operations	Description of Operation	Type of Permit
Licensed Childcare Center	An operation providing care at a location other than the permit holder's home, for seven or more children under 14 years of age, for less than 24-hours per day, but at least two hours a day, three or more days a week. A licensed childcare center is also referred to as a daycare center.	<p>License. Applicants for a license must complete an orientation on regulation, clear background checks, and have a DCL onsite inspection prior to permit issuance.</p> <p>DCL inspects licensed operations at least annually or more often if there are reports of alleged abuse, neglect or violations of minimum standards.</p> <p>Licensed providers have specific minimum standards they must follow and increased training requirements.</p>
Licensed Childcare Home	The primary caregiver provides care in the caregiver's own residence for children from birth through 13 years. The total number of children in care varies with the ages of the children, but the total number of children in care at any given time, including the children related to the caregiver, must not exceed 12. Licensed childcare homes are known in statute as group daycare homes.	License
Before or After-School Program	An operation that provides care before, and/or after the customary school day and during school holidays, for at least two hours a day and three days a week, to children who attend pre-kindergarten through grade six.	License

Daycare Operations and Permit Type		
Daycare Operations	Description of Operation	Type of Permit
School-Age Program	An operation that provides supervision and recreation, skills instruction, or skills training for at least two hours a day and three days a week to children attending pre-kindergarten through grade six. A school-age program operates before or after the customary school day and may also operate during school holidays, the summer period, or any other time when school is not in session.	License
Listed Family Home	A caregiver at least 18 years old that provides care in her own home for compensation, for three or fewer children unrelated to the caregiver, birth through 13 years, for at least four hours a day, three or more days a week, and more than nine consecutive weeks. The total number of children in care, including children related to the caregiver, may not exceed 12.	<p>Listing. Listed family home providers must be at least 18 years old and pass a criminal background check.</p> <p>These providers do not have to meet minimum standards or take training.</p> <p>While DCL does not inspect listed homes, it does investigate allegations or abuse, neglect, caring for too many children, or immediate risk to a child's health or safety.</p>

Daycare Operations and Permit Type		
Daycare Operations	Description of Operation	Type of Permit
Registered Childcare Home	The primary caregiver provides care in the caregiver's own residence for not more than six children from birth through 13 years, and may provide care after school hours for not more than six additional elementary school children. The total number of children in care at any given time, including the children related to the caregiver, must not exceed 12.	<p>Registration. Applicants must complete an orientation on regulation, be cleared by background checks, and have a DCL onsite inspection prior to permit issuance.</p> <p>These providers have fewer minimum standards to meet and fewer training hours required.</p> <p>DCL inspects these operations every one to two years and will conduct an investigation if there are allegations of abuse, neglect, or non-compliance with minimum standards.</p>
Employer-Based Childcare	A small employer providing care for up to 12 of the employees' children that are under 14 years of age, for less than 24 hours per day. The care is located on the employer's premises and in the same building where the parents work.	<p>Compliance Certificate. Applicants must complete an application, clear background checks, and pass an onsite inspection conducted by DCL.</p> <p>These operations do not have to comply with minimum standards and are not inspected after receiving their certificate.</p> <p>DCL will investigate allegations of abuse, neglect or violation of statute or administrative rules.</p>

Daycare Operations and Permit Type		
Daycare Operations	Description of Operation	Type of Permit
Temporary Shelter Childcare	A childcare program at a temporary shelter, such as a family violence or homeless shelter, providing care for seven or more children under 14 years of age while the resident parent is away from the shelter. The childcare program operates for at least four hours a day three days a week.	Compliance Certificate

Residential Child Care Licensing

The Residential Child Care Licensing (RCCL) program is responsible for protecting the health, safety, and well-being of children birth through 17 years of age who reside in residential childcare operations. This program regulates operations responsible for the care, custody, supervision, assessment, training, education, or treatment of an unrelated child or children through 17 years of age, for 24 hours a day in a place other than the child’s own home across the State of Texas.

In FY 2012, the number of Texas children ages birth through 17 years was over seven million. Some of these children lived in residential childcare operations due to being abused, neglected, or because of other family circumstances that didn’t permit the child to live in his or her own home. The chart below provides a description of each type of setting for which DCL has statutory oversight.

Texas has the capacity to serve over 41,000 children needing placement in residential childcare operations regulated by RCCL. The RCCL program was responsible for regulating 237 general residential operations, 209 child placing agencies (plus 153 branch offices), and five independent foster or foster group homes. RCCL issued 41 new permits and conducted 4,736 total inspection visits.

Residential Childcare Operations and Permit type		
Residential Childcare Operations	Description of Operation	Type of Permit
General Residential Operation	An operation that provides childcare for 13 or more children up to the age of 18 years. The care may include treatment or emergency services. Residential treatment centers and emergency shelters are examples of general residential operations.	<p>License. Applicants for a license must complete an orientation on regulation, clear background checks, and have an RCCL onsite inspection prior to permit issuance.</p> <p>RCCL inspects licensed operations at least annually or more often if there are reports of alleged abuse, neglect or violations of minimum standards.</p> <p>Licensed providers have specific minimum standards they must follow and increased training requirements.</p>
Child Placing Agency	A child placing agency is a business that places or plans for the placement of a child in agency foster or agency adoptive homes that are studied, verified/approved, and monitored by the child placing agency. A child placing agency is responsible for ensuring that its agency foster and/or agency adoptive homes comply with all applicable licensing laws and minimum standards. Child placing agencies may be licensed to provide any type of services, except emergency care and therapeutic camp services. A child placing agency is the only facility type licensed to provide adoption services.	License

Residential Childcare Operations and Permit type		
Residential Childcare Operations	Description of Operation	Type of Permit
Independent Foster and Foster Group Homes	Independent Foster Homes are independent businesses licensed by RCCL that care for children in a home-like setting. Independent foster homes may offer childcare, treatment, and/or programmatic services, except for emergency care and therapeutic camp services. They may not provide adoption services. Most independent foster homes are staffed by employees rather than foster parents that live in the home. There are two categories of foster homes: (1) foster <i>family</i> homes that may care for up to six children, and (2) foster <i>group</i> homes that may care for up to 12 children. There are very few of these operations as the vast majority of foster homes in Texas are verified and monitored by child placing agencies.	License

Licensed Administrators:

In addition to licensing entities, RCCL also licenses individuals known as licensed administrators. Licensed child placing administrators manage child placing agencies and licensed childcare administrators manage general residential operations.

Child Placing Administrators and Permit Type		
Person Licensed	Description of Person Licensed	Type of Permit
Licensed Childcare Administrator	A licensed childcare administrator is an individual who manages a general residential operation.	License. Applicants must meet higher education requirements, clear a background check, pass an exam, maintain 15 training hours annually, and renew the license every two years.
Licensed Child Placing Agency Administrator	A licensed child placing agency administrator is an individual who manages a child placing agency.	License

C. What evidence can you provide that shows the effectiveness and efficiency of this program or function? Provide a summary of key statistics and performance measures that best convey the effectiveness and efficiency of this function or program.

In addition to the LBB-required performance measures, both the DCL and RCCL programs use additional measures to review performance and provide quality assurance.

Surveys

To improve the inspection process, DCL and RCCL solicit feedback from caregivers about the most recent licensing inspection at their operation. Questions relate to the professionalism, fairness, and helpfulness of the inspector. Respondents may include general comments about the inspector or inspection process. In addition, the survey provides an outlet, other than the administrative review process, for caregivers to document any non-regulatory concerns about an inspection or investigation. Results are monitored on a monthly basis and comments about specific inspectors are shared with their managers. The survey is located on the DFPS Public Website and caregivers are provided with the web address on each inspection report and may complete the survey at their convenience after each inspection. The raw data for FY 2012 shows that, for both programs, caregivers are generally satisfied with their inspector or investigator and that inspections and investigations are positive experiences.

Unique to RCCL and as required by statute, in addition to inspecting general residential operations, child placing agencies, and independent foster homes, RCCL inspects a random sample of foster homes affiliated with a child placing agency. The Human Resources Code directs RCCL to periodically conduct inspections of a random sample of child placing agency foster homes, and this gives RCCL the opportunity to assess the child placing agency's effective oversight of its foster homes. RCCL asks foster home caregivers to fill out a survey, which is different than the survey for all operations described above, and includes such questions as whether the inspection helped improve an understanding of minimum standards, whether the inspector was professional, and whether the provider feels the inspector assessed the foster home fairly. For FY 2012, a total of 2,470 surveys were sent out. Of the 2,470 surveys sent, 586 surveys were returned and of those, 570 reported positive experiences.

Statewide Review

In November 2012, the DCL and RCCL programs expanded efforts to look at program outcomes at both a regional and statewide perspective. Each month, field staff provides specific information designed to help identify trends and patterns related to the LBB measures, performance compliance, and quality. Examples of these reports include timely initiation and completion of investigations, average time spent by staff conducting inspections, and percent of technical assistance provided. These reports are now compiled by field staff monthly with the results sent to CCL State Office staff. CCL is currently developing a process for how results from these monthly reports can be rolled up on a regular basis to allow for an on-going, thorough assessment of statewide performance-related trends and patterns.

D. Describe any important history regarding this program not included in the general agency history section, including how the services or functions have changed from the original intent.

1997

With legislative approval, DCL begins “listing” family homes. The Legislature also approves using administrative penalties or fines as if an operation is deficient in meeting minimum standards or violates administrative rules or statute.

1998

DCL begins conducting criminal background and Central Registry (abuse/neglect) history checks on all licensed daycare staff and persons living in a registered childcare home. The new law requires name-based criminal background checks every two years and providers must pay for the cost of the new background checks unless otherwise exempted.

2003

DFPS revises several hundred minimum standards for daycare operations. The rules in the Texas Administrative Code (TAC) were written in plain language using a question and answer format. Relevant administrative codes are: TAC Chapter 746 *Minimum Standards for Licensed Childcare Centers* and TAC Chapter 747 *Minimum Standards for Registered Childcare Homes*.

2005

Senate Bill 6 adds the requirement for RCCL to license child placing agency administrators. Prior to this, only administrators of general residential operations were required to be licensed.

2006

Congress enacts the Adam Walsh Child Protection and Safety Act of 2006, prohibiting child placing agencies from placing a child in DFPS conservatorship in a foster or adoptive home until the foster or adoptive parents and all adult (18 years old and older) residents of the home complete a Federal Bureau of Investigations (FBI) fingerprint check.

2007

Senate Bill 758 strengthens RCCL oversight of residential childcare operations through more thorough, objective, and specialized monitoring and investigations.

RCCL completes the first major evaluation and revisions of minimum standards for residential childcare in more than 18 years.

2008

The Legislature revises the Human Resources Code to require FBI fingerprint checks, in daycare operations, for each person required to have a name-based check.

CCL implements its weighted enforcement system along with its mobile technology system. Each of the DFPS minimum standards were evaluated and assigned a weight (high, medium high, medium, medium low, or low) based on the risk to children.

2009 – 2011

CCL makes significant enhancements from 2009 through 2011 through a series of initiatives. CCL invested \$4,000,000 in federal economic stimulus funds to enhance high-quality daycare programs for infants and toddlers through the following initiatives.

- Technical Assistance (TA) Library – Topics include best practices and ways to comply with minimum standards and promote the health, safety, and well-being of children in childcare. CCL staff use tablet PCs to download helpful documents from the library and share them with providers during onsite inspections. The TA Library is continuously updated and is available to everyone via the DFPS public website. Tutorials: Working with AgriLife Texas Cooperative Extension (Texas A&M University system), CCL develops comprehensive online tutorials for childcare providers, parents, caregivers, and CCL staff on the health and safe care of infants. These tutorials are available on the Texas A&M University website.
- Public Awareness Campaigns – DFPS revamps two CCL campaigns featuring radio and TV public service announcements, social media, and news media coverage.
 - Don't Be in the Dark – Educates the public on the importance of selecting regulated daycare and improving communication with caregivers (www.DontBeInTheDark.org)
 - Baby Room to Breathe – Educates parents and caregivers on ways to minimize the risk of Sudden Infant Death Syndrome (SIDS) and co-sleeping deaths, and improve the health, safety, and development of infants and toddlers (www.BabyRoomToBreathe.org)
- Pre-Application Online Course – In July 2011, CCL releases an online pre-application course that is an introduction to becoming a daycare provider. The course is for prospective registered and listed family homes.

2010

The 81st Legislature passes S.B. 68 in 2009, DCL begins regulating three new care types:

- before and after-school care programs;
- school-age programs; and
- temporary shelters providing daycare services.

RCCL revises standards to:

- clarify that suspected abuse, neglect, or exploitation must be directly reported to DFPS; and
- specify that foster homes with lower risk can now have a safety evaluation conducted by child placing agency staff rather than a fire inspection by a certified fire inspector or local fire authority.

DCL conducts its statutorily required six-year review of minimum standards for licensed childcare centers and licensed childcare homes and revises numerous standards including:

- limiting the amount of screen time (which includes television, video, and computers) to no more than two hours a day for children two years old and older; and
- requiring all children younger than 8 years old (unless taller than 4'9") to be restrained in the appropriate child safety seat system when riding in a passenger vehicle.

The eApplication is a tool available on the DFPS website that lets a daycare applicant submit an online application to become a licensed daycare home, registered childcare home, or listed family home.

2011

The 82nd Legislature passes S.B. 1178, which expands “controlling persons” to apply to daycare operations. Until then, this only applied to residential childcare operations. A “controlling person” is the person at a daycare or residential childcare operation responsible for keeping children safe, complying with CCL standards and regulations, and accountable for actions that lead CCL to revoke a childcare permit.

2012

To better meet the statutory requirement to collect licensing fees and deposit the fees in the General Revenue fund, CCL creates new fee forms, enhances manual workflow processes and strengthens procedural controls to help ensure permits are not issued without a daycare or residential childcare operation paying their required fees.

RCCL responds to an emergency request from the federal Office of Refugee Resettlement (ORR) to increase the allowed capacity of ORR-contracted facilities due to an unforeseen influx in the number of unaccompanied and undocumented immigrant children into the United States.

RCCL participates as a key stakeholder in a united public/private effort to develop a redesigned foster care system to address problems with the current system and support improved outcomes for children, youth, and families.

2013

CCL receives funding from the 83rd Legislature for 40 additional staff to address the risk to children in unregulated care settings. Additional staff provides the resources needed to proactively find, investigate, and regulate illegal childcare operations, as well as provide technical guidance to individuals wishing to become licensed, registered or listed.

The 83rd Legislature passes S.B. 427, and creates the possibility of biennial inspections for licensed daycare centers and daycare homes that have a good compliance history. This bill also allows CCL to immediately impose a fine on an operation for failing to take certain actions related to background checks, without first resorting nonmonetary administrative penalties.

E. Describe who or what this program or function affects. List any qualifications or eligibility requirements for persons or entities affected. Provide a statistical breakdown of persons or entities affected.

DCL regulates the following categories of daycare operations: licensed childcare centers and licensed childcare homes, registered childcare homes, listed family homes, and operations with a compliance certificate (small employer-based childcare and temporary shelter daycare). Please see Section B for a description of each daycare operation and Section O for information on the scope of regulation.

Daycare Operations in Texas				
Daycare Operations	FY 2011 Count	FY 2011 Capacity	FY 2012 Count	FY 2012 Capacity
Licensed Childcare Centers	9,519	965,718	9,601	975,868
Licensed Childcare Homes	1,743	20,771	1,774	21,147
Listed Family Homes	7,477	14,124	6,774	12,831
Registered Childcare Homes	6,302	73,221	5,837	68,126
Small Employer-Based Childcare	4	48	6	72
Total Daycare Operations	25,045	1,073,882	23,992	1,078,044

RCCL regulates three categories of residential childcare operations:

- general residential operations;
- child placing agencies; and
- independent foster and foster group homes.

Please see Subsection B for a description of each residential childcare operation and Subsection O for information on the scope of regulation.

Residential Childcare Operations in Texas				
Licensed Residential Operations	FY 2011 Count	FY 2011 Capacity	FY 2012 Count	FY 2012 Capacity
General Residential Operations	245	11,007	237	11,268
Independent Foster Family Homes	1	6	1	6
Independent Foster Group Homes	3	32	4	38
Total	249	11,045	242	11,314

Residential Childcare Operations in Texas				
Child Placing Agencies*	FY 2011 Count	FY 2011 Capacity	FY 2012 Count	FY 2012 Capacity
Main Offices	205	NA	209	NA

Residential Childcare Operations in Texas				
Child Placing Agencies*	FY 2011 Count	FY 2011 Capacity	FY 2012 Count	FY 2012 Capacity
Branch Offices**	145	NA	153	NA
Total	350	NA	362	NA****

Residential Childcare Operations in Texas				
Child Placing Agencies Homes*	FY 2011 Count	FY 2011 Capacity	FY 2012 Count	FY 2012 Capacity
Agency Foster Homes ***	7,138	22,392	7,240	21,849
Agency Group Homes ***	429	3,781	404	3,547
CPS Foster Homes	1,822	5,300	1,525	4,525
CPS Foster Group Homes	20	116	12	73
CPS Adoptive Homes	758	NA	668	NA
Total	10,167	1,589	9,849	29,994

*Includes 11 DFPS Regional Child Placing Agencies.

** Branch Offices operate under the license authority of the main office.

*** Adoptive only homes are not included in the number of private agency homes.

****CCL does not capture total capacity for child placing agencies as the child placing agency verifies its own homes and determines capacity for each.

RCCL is also responsible for regulating licensed childcare administrators (individuals who manage general residential operations and independent foster homes), and licensed child placing agency administrators (individuals who manage child placing agencies). In FY 2012, there were 746 active licensed childcare administrators and 465 active licensed child placing agency administrators.

F. Describe how your program or function is administered. Include flowcharts, timelines, or other illustrations as necessary to describe agency policies and procedures. Indicate how field/regional services are used, if applicable.

Through two programs, Day Care Licensing and Residential Child Care Licensing, CCL regulates operations that care for children in out-of-home care. Both of these programs are supported by three State Office divisions, which are the Policy and Program Operations division, the Performance Management unit, and the CCL Professional Development division.

Policy and Program Operations

The Policy and Program Operations division is responsible for overall leadership in promulgating minimum standards, developing policies and procedures, and providing oversight of program operations. Functions include the following.

- Promulgating minimum standards for all regulated operation types.
- Developing concise, user-friendly policies and procedures.

- Developing and maintaining forms and automated processes to facilitate the work of both direct delivery licensing staff and management staff.
- Acting as a liaison between CCL divisions and the DFPS Information Technology.
- Developing, maintaining, and sharing knowledge and expertise internally and with program stakeholders.
- Monitoring and providing oversight of program operations through quality assurance reporting, case reading, and solution-based approaches to program challenges.
- Developing technical assistance materials for childcare providers.
- Developing consumer education materials for parents, caregivers, and other stakeholders.

Performance Management Unit

The Performance Management Unit is dedicated to reducing risk to children in care through:

- assisting in program accountability;
- identifying issues with qualitative and quantitative program performance;
- conducting neutral assessments of operational compliance;
- making recommendations on actions in accordance with licensing policy and law;
- identifying gaps in CCL training or policy and procedures; and
- making recommendations for change.

CCL Professional Development Division

The CCL Professional Development division (PDD) is a centralized program designed to provide:

- standardized training practices to promote consistent program expectations statewide;
- quality, comprehensive training programs for CCL staff to ensure training material is consistent with the Licensing Policy and Procedures Handbook (LPPH); and
- opportunities to refresh or improve their job performance and professional skills.

Child Care Licensing Field Operations

Daycare and residential childcare operations must complete the following process in order to provide regulated childcare in Texas. More detail can be found in Subsection O of this section.

Permit Application and Issuance

DCL or RCCL inspectors evaluate the applicant's staffing and operational plans to determine if they meet required standards according to the type of childcare operation for which they are applying.

Unique to the residential child care program, certain applicants seeking a residential license in a county with a population of less than 300,000 are statutorily required to provide a public notice and comment period as well as hold a public hearing. The notice must include the following information.

- The name and address of the applicant or permit holder.
- The name and address of the childcare operation or where the applicant proposes to provide services.
- The date, time, and location of the public hearing.
- The name, address, and telephone number of the inspector to contact with comments.
- A statement that a person may submit written comments to the inspector concerning the application or the request to amend the permit to increase capacity.
- A description of the population to be served, the services to be provided, and the licensed capacity requested.

The applicant or permit holder subject to public notice and hearing requirements must:

- hold the hearing no later than one month after the date the application is accepted, if applying for a license. If the hearing is for a request to amend the permit to increase capacity, hold the hearing after RCCL has evaluated the request for an amendment;
- hold the hearing in a location in or easily accessible to the community where the services are or will be provided;
- schedule the hearing and open it for at least four hours during the normal business day (Monday through Friday) or early evening hours;
- facilitate the hearing;
- provide a copy of the notice to the school district superintendent, the governing body of the community, and the local law enforcement agency at least 10 work days before the hearing;
- publish the notice at least 10 days before the date of the public hearing in a newspaper of general circulation in the community where the childcare services are or will be provided; and
- notify the inspector of the time, date, and location of the hearing at least 10 days before the hearing.

Both DCL and RCCL programs conduct background checks, provide technical assistance to help the applicant understand applicable minimum standards, and conduct an inspection (for all types except the DCL program's listed family homes) to determine the applicant's compliance with minimum standards. CCL must either issue or deny the permit within 60 days from accepting the application.

When the applicant passes inspection, the DCL or RCCL program issues an initial permit for a period of six months. If the operation is still compliant with minimum standards, the DCL or RCCL program issues a non-expiring permit (which does not require renewal other than paying licensing fees as applicable). If the applicant is not compliant at the end of the six months, and depending on nature of the applicant's non-compliance, the Department may extend the initial

permit period for an additional six months or deny the application and the operation must close.

Ongoing Monitoring

Inspectors in both programs conduct more frequent inspections of new operations, during the first 12 months after issuing a permit, offering technical assistance and establishing a record of compliance with minimum standards, rules and licensing laws. The DCL and RCCL programs continue to inspect operations to evaluate ongoing compliance with minimum standards. Minimum standards are assigned a weight, from low to high, based on the risk to children and this information is contained in CLASS, which is CCL's automated case management system. Inspectors then use a risk-based inspection schedule, based on the operation's ability to stay in compliance. The frequency for an operation's next inspection is recommended by CLASS based on the operation's violations from the most recent inspection as well as the operation's overall compliance record.

At minimum, DCL and RCCL inspectors conduct statutorily required annual inspections in their respective licensed operations. DCL inspectors conduct inspections of registered childcare homes every two years. When daycare or residential childcare operations are cited for serious or a significant number of deficiencies, cited for repeat deficiencies, or fail to make corrections in a timely fashion, DCL and RCCL inspectors conduct inspections more frequently to monitor the level of risk to children. In FY 2012, DCL conducted 35,755 total inspections and RCCL conducted 4,736 total inspections.

When operations are cited for deficiencies, DCL and RCCL inspectors provide a time frame to correct each deficiency based on reasonable judgment and direction from their supervisors as needed. After the time limit to correct a minimum standard deficiency expires, DCL and RCCL inspectors re-inspect the operation either in person, by phone, or by mail as appropriate, to determine if corrections were made. In FY 2012, the DCL program conducted over 9,000 follow-up inspections in regulated daycare operations. For this same time period, the RCCL program conducted 300 follow-up inspections in regulated residential childcare operations.

Investigations

The DCL and RCCL programs investigate reports alleging abuse, neglect, or alleged violations of minimum standards, administrative rules, or licensing law. In FY 2012, the DCL program conducted 13,127 investigations in regulated daycare operations. For this same time period, the RCCL program conducted 5,139 investigations in regulated residential childcare operations. Both programs have clear policies and procedures that specify timeframes for initiating investigations based on risk to children and for finishing investigations in a timely manner.

Enforcement Actions/Remedial Actions

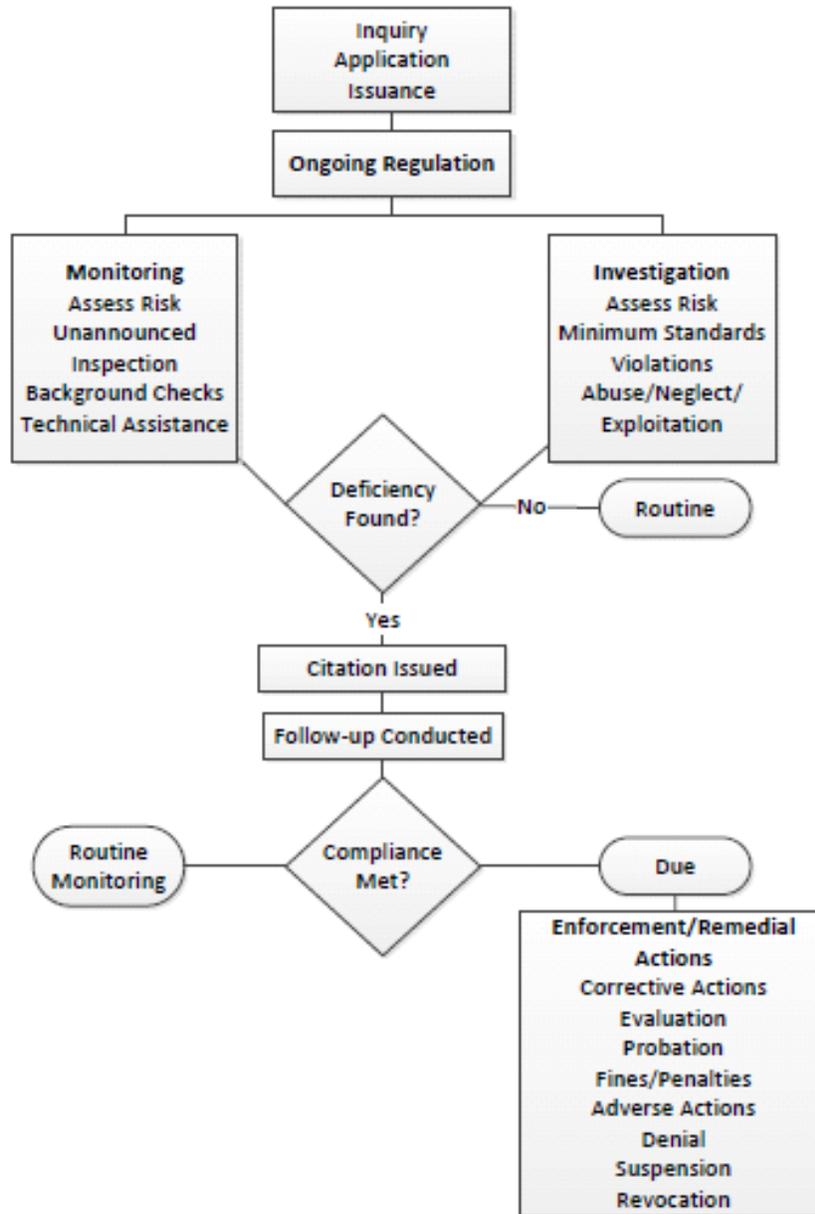
Remedial Actions are actions the DCL or RCCL program may impose if an operation is deficient in complying with a minimum standard, administrative rule, statute, specific term of a permit, or conditions related to corrective or adverse action taken against the operation. Depending on the seriousness of the deficiencies and on the operation's compliance history, an operation may voluntarily make corrections or DCL and RCCL staff, in conjunction with the DFPS Legal

division, may impose remedial actions. The Human Resources Code specifies a range of penalties.

Technical Assistance and Consumer Education

During the inspection and investigation process, DCL and RCCL inspectors and investigators provide ongoing technical assistance promoting long-term compliance by helping providers understand how to meet and exceed minimum standards requirements. In addition to offering explanations about the standards or suggestions for how to comply, DCL and RCCL staff relies on a Technical Assistance Library as a centralized source of approved technical assistance documents. DFPS also provides detailed results of inspections in daycare and residential childcare operations on the DFPS website (www.txchildcaresearch.org) along with more general information for consumers on how to search and choose appropriate and safe childcare.

The following flowchart shows the process that CCL uses to regulate childcare operations.



G. Identify all funding sources and amounts for the program or function, including federal grants and pass-through monies. Describe any funding formulas or funding conventions. For state funding sources, please specify (e.g., general revenue, appropriations rider, budget strategy, fees/dues).

Please see Appendix A.

Alternate Exhibit Provided For Section VII. Item G.

H. Identify any programs, internal or external to your agency, that provide identical or similar services or functions to the target population. Describe the similarities and differences.

No other state or local programs regulate daycare and residential childcare operations. However, Texas children may also live in facilities regulated by other state agencies, such as the Texas Juvenile Justice Department or the Department of State Health Services (chemical dependency programs and programs for children with intellectual disabilities).

CCL staff does not monitor operations for compliance with minimum standards when another state agency or political subdivision has inspected it for compliance with equivalent or similar standards (for instance, a fire inspection conducted by a local fire authority). However, CCL always investigates reports of alleged violations of minimum standard rules, regardless of whether another state agency or local entity has inspected the operation.

The entities that may inspect daycare and residential childcare operations, as applicable, for compliance with standards that are similar to Licensing's minimum standards are as follows.

- The General Sanitation Program of the Department of State Health Services may inspect the kitchen areas in childcare operations that receive federal dollars for serving meals to children.
- The Child and Adult Care Food Program (CACFP) of the Texas Department of Agriculture, regarding whether nutritious food, subsidized by TDA, is being appropriately utilized by daycare programs participating in the program.
- Local Fire Marshal/Fire Authorities, regarding fire inspections conducted in daycare and residential childcare operations.
- The Texas Education Agency (TEA) regulates some educational aspects of a licensed childcare center, such as the curriculum being offered.
- The Texas Workforce Commission (TWC), when assessing the performance of TWC-subsidized childcare in daycare operations.

I. Discuss how the program or function is coordinating its activities to avoid duplication or conflict with the other programs listed in Question H and with the agency's customers. If applicable, briefly discuss any memorandums of understanding (MOUs), interagency agreements, or interagency contracts.

In FY 2002, the Legislature amended the Human Resources Code §42.0442 to require that DFPS coordinate monitoring inspections that might be performed by another state agency to eliminate redundant inspections. As the law required, DFPS, the Department of State Health Services, and the Texas Workforce Commission formed an interagency task force and

developed a protocol for the inspections, including fire and health inspections to eliminate the redundancy. In FY 2003, the Legislature required DFPS to provide a data base of information collected by the Department to other state agencies regarding the inspections of childcare operations. This data base is available through the DFPS website (www.txchildcaresearch.org).

The RCCL program coordinates activities with other DFPS divisions to avoid duplication or potential conflict in the following ways.

- RCCL notifies Child Protective Services (CPS) if a child in CPS conservatorship is involved in a RCCL investigation.
- CPS Purchased Client Services (PCS) staff notifies RCCL of concerns found during contract monitoring inspections.
- RCCL coordinates with CPS and PCS regarding placement holds or removals, or the need to move children when serious minimum standard violations or abuse and neglect findings are made.

J. If the program or function works with local, regional, or federal units of government, include a brief description of these entities and their relationship to the agency.

CCL works with the following agencies on specific activities such as the following.

- *Local Law Enforcement* – collaboration and coordination of investigations involving allegations of abuse and neglect of children by a daycare or residential childcare operation.
- *Local Health Departments* – collaboration and technical assistance regarding local health codes and standards.
- *Local Fire Marshal/Fire Departments* – collaboration and technical assistance regarding local fire safety standards.
- *Texas Workforce Commission and Local Workforce Boards* – provide information regarding corrective or adverse actions taken by DCL against childcare operations receiving Texas Workforce Commission Childcare Management funds.
- *Department of State Health Services* – policies related to developing childcare training, TB elimination, immunizations, general sanitation and environmental health, childhood lead-prevention programs, infectious disease control, injury prevention, public awareness of infant co-sleeping and SIDS, and comprehensive disaster response.
- *Early Childhood Intervention* – collaboration and coordination on policies related to early childhood development and minimum standards.
- *Department of Public Safety* – car seat safety, bus, and multi-purpose bus safety.
- *Texas Department of Insurance/State Fire Marshal's Office* – coordination and collaboration on statewide policies related to fire inspections in daycare and residential childcare operations.

- *Texas Department of Agriculture* – collaboration and coordination of statewide policy and procedures related to daycare operations participating in the Child and Adult Care Food Program. CCL also provides information regarding corrective or adverse actions taken by DCL against childcare operations receiving funds from the Child and Adult Care Food Program.
- *Texas AgriLife Cooperative Extension* (a part of the Texas A&M University system) – developing childcare–related training and additional training opportunities for providers, staff, and parents.
- *Office of Attorney General* – represents both DCL and RCCL in litigated cases in which the Department took corrective or adverse action against a daycare or residential childcare operation.
- *Texas Education Agency* – Coordination and collaboration on standards and rules related to childcare operations in schools, school-age programs, and before and after-school programs.
- *HHSC Office of Early Childhood Coordination and HHSC Family Violence Program* – coordination and collaboration on standards and rules related to daycare operations in family violence shelters.
- *The federal government’s Office of Refugee Resettlement (ORR), Immigration and Customs Enforcement (ICE), or Division of Unaccompanied Children’s Services (DUCS)* – addressing the residential care needs of unaccompanied and undocumented children coming into the United States.

K. If contracted expenditures are made through this program please provide:

- a short summary of the general purpose of those contracts overall;
- the amount of those expenditures in FY 2012;
- the number of contracts accounting for those expenditures;
- top five contracts by dollar amount, including contractor and purpose;
- the methods used to ensure accountability for funding and performance; and
- a short description of any current contracting problems.

There were no contracted expenditures made through the DCL program in FY 2012.

In FY 2012, the RCCL program had two contracts with the University of Texas at Arlington (UTA), totaling \$29,091, for developing and administering licensed administrator exams.

Contract Oversight and Support (COS) is the DFPS division responsible for developing the infrastructure to support contract management staff and to promote compliance with spending federal and state dollars appropriately, in adherence to applicable statutes and rules. Contract

management staff and CCL program staff are responsible for conducting ongoing contract management and monitoring activities to promote accountability for funding and performance of DFPS purchased goods and services.

To ensure accountability, the CCL program support officer receives invoices submitted by UTA and verifies with RCCL staff that the service reflected in the invoice was delivered satisfactorily before authorizing payment for the service. Contract management staff are responsible for the ongoing management of the contract, assessing contractor performance, and completing amendments when needed. For example, in July 2012, contract management staff executed amendments to reflect new requirements for the contractor to inform applicants of their right to request reasonable modifications, if needed, to help the applicant in the examination process for the licensure or certification sought. The contractor has performed its responsibilities under the interagency contracts and there are no associated contracting problems.

L. Provide information on any grants awarded by the program.

CCL does not award grants.

M. What statutory changes could be made to assist this program in performing its functions? Explain.

Keeping Siblings in Foster Care Together and Close to Home. Federal and state laws generally require that children who must be removed from their homes be placed together, as close to their home as possible, because this minimizes trauma to children and promotes better permanency outcomes. Federal and state laws also require that a child be placed in the least restrictive, most family-like setting that can meet the needs of the child. However, CPS often has difficulty placing large sibling groups together in the desired location because there is no foster home or foster group home who can serve the group without exceeding their capacity limits, which are statutorily set in Section 42.002, Human Resources Code. Amendments to Chapter 42, Human Resources Code, could be made to specifically authorize foster homes and foster group homes to exceed capacity when approved to do so in order to accommodate placement of a sibling group. For additional discussion, see Section IX, Major Issue # 4.

Improved Revenue Generation and Fee Collection in Child Care Licensing. Chapter 42, Human Resources Codes, authorizes the collection of fees from childcare operations to help defray the costs of state regulation. DFPS sets the fees for conducting background checks by rule, per Section 42.056(c), but other fees are set by statute in Section 42.054 and have not been increased in over 25 years. Changes to Section 42.054 to increase these fees would provide needed revenue to the state to better fund childcare regulatory oversight. For additional discussion, see Section II, Subsection I, Opportunities.

Increasing Compliance with Background Check Requirements. Although statutory law and CCL minimum standards require the timely completion of background checks on persons present in childcare operations, some operations do not submit background checks timely or fail to submit checks on all persons who need them. Failure to comply with background check requirements poses significant risk to children in the care of the operation and carries the potential for significant federal financial penalties when the non-compliant operation is a residential childcare operation. Compliance could be enhanced with the use of an online tracking system that would alert childcare operations to resubmit required checks when due. Assuming sufficient resources for the development of an online tracking system, a statutory change to Chapter 42, Human Resources Code, would be needed to require childcare operations to utilize this tracking system.

Meeting Immediate Short-Term Demand for Child Care During an Emergency. Currently, CCL does not have statutory authority to issue temporary permits when a natural disaster or other emergency creates a critical, short-term need for additional daycare or residential childcare services. Chapter 42, Human Resources Code could be amended to authorize an expedited and streamlined process for issuing a temporary license that will enable providers to address immediate and urgent needs for child care that result from a hurricane or other unanticipated catastrophe. The streamlined process would allow the childcare provider to begin serving children after certain critical health and safety criteria are met - such as a fire inspection, staffing plan, and background checks - while the provider continues the regular application process and comes into full compliance with all minimum standards within a reasonable time frame.

N. Provide any additional information needed to gain a preliminary understanding of the program or function.

The expected state population growth presents a continuing challenge to CCL to support and improve capacity and quality, while maintaining availability and affordability of daycare and residential childcare services. It is vital that CCL continues to ensure stakeholder participation in the process of identifying licensing outcomes for children in out-of-home care and use these as guiding principles when proposing changes to minimum standards.

Unique to RCCL

RCCL is responsible for regulating the residential childcare operations it licenses. RCCL does not regulate or license the foster or adoptive homes that are verified or approved by child placing agencies. Each child placing agency is responsible for regulating the foster and adoptive homes it verifies (approves) for compliance with CCL minimum standards, law, and the child placing agency's own policies. However, RCCL is responsible for regulating licensed child placing agencies. This includes a child placing agency's oversight of its verified foster and adoptive homes. As part of regulating a child placing agency, RCCL:

- reviews foster and adoptive home records during child placing agency monitoring inspections;

- reviews foster and adoptive home records at other times deemed necessary; and
- conducts random inspections of child placing agency foster homes as required by law.

O. Regulatory programs relate to the licensing, registration, certification, or permitting of a person, business, or other entity. For each regulatory program, if applicable, describe:

- why the regulation is needed;
- the scope of, and procedures for, inspections or audits of regulated entities;
- follow-up activities conducted when non-compliance is identified;
- sanctions available to the agency to ensure compliance; and
- procedures for handling consumer/public complaints against regulated entities.

Why regulation is needed

Daycare has become part of the daily routine for families. Daycare is provided during a child's most vulnerable developmental stages, so that the regulation of those providing this care is critical to ensuring healthy development. State regulation also protects the health and safety of children who are most vulnerable during early years to illness and injury.

Residential childcare providers have increased in numbers and in size, resulting in a capacity of 41,420 children to live in regulated, residential childcare in Texas at any given time. Therefore, the quality of that care is critical and many of the children in residential childcare are healing from past abuse and neglect.

Initial Inspections

- Human Resource Code Chapter 42 requires daycare operations to become licensed, certified, registered, or listed.
- Human Resources Code Chapter 42 requires residential childcare providers to be licensed.
- As part of the application process, CCL completes an inspection (for all operation types except listed family homes in the daycare program) to determine compliance with minimum standards. This must be done within 60 days of receiving a complete application.
 - DCL does not complete an inspection of listed family homes during the application process as the Human Resources Code does not grant DCL the authority to inspect these homes, only to investigate them.
- When the applicant passes inspection, CCL issues an initial permit for a period of six months. During those six months, CCL inspects the operation at least three times.
 - The exception to this is in the DCL program, as while DCL investigates allegations of abuse and neglect in listed family homes, it does not have authority to inspect them.

- If the operation is still compliant with minimum standards, CCL issues a non-expiring permit (which does not require renewal other than paying annual licensing fees unless otherwise exempt).
- If the operation is not in compliance, CCL may extend the initial permit period for an additional six months or deny the application and the operation must close.

Ongoing Inspections

- During the first 12 months of a non-expiring permit for a daycare or residential childcare licensed operation, statute requires the operation be inspected once every six months with all of the minimum standards evaluated within the 12-month period.
 - In the daycare program, these inspections are only done on licensed daycare centers and licensed daycare homes; and not Listed family homes, registered childcare homes, employer-based childcare, or temporary shelter-care operations.
- After the first 12 months, CCL must conduct at least one unannounced inspection annually and evaluate all standards within a two-year period for licensed operations.
 - The DCL program must conduct one unannounced inspection on registered childcare homes every two years and evaluate all standards within each two-year period.
- CCL determines the monitoring frequency based on the operation's history of deficiencies with minimum standards using the weighted standards enforcement recommendation contained in CLASS, the agency's automated case management system.
- CCL cites deficiencies when violations of minimum standards are found and provides a specific time frame in which to correct each deficiency. Follow-up inspections are made in person, phone, or by mail if appropriate, to determine if corrections were made.
- Both programs continually assess the daycare or residential childcare performance and the monitoring frequency is adjusted accordingly for the duration of the permit. If a daycare or residential childcare operation is not performing well and meeting minimum standards, they are inspected more frequently until performance improves.
- DCL staff must meet with the designated director of a licensed daycare or residential childcare operation at least once annually to determine if the director meets qualifications and complies with minimum standards. This requirement does not apply to the RCCL program.

Unique to the RCCL Program

Team Inspections of Residential Childcare Operations

RCCL is statutorily required to conduct an unannounced team inspection at least once annually, with at least two residential childcare monitoring staff.

Random Sample Monitoring of Child Placing Agency Foster Homes

- RCCL primarily inspects a child placing agency to determine if the child placing agency itself is complying with minimum standards. In turn, the child-placing agency is responsible for

approving and monitoring its own foster and foster group homes to ensure the homes are complying with Licensing's minimum standards, applicable law, and the child-placing agencies own policies.

- The Human Resources Code requires the RCCL program to periodically conduct inspections of a random sample of child placing agency foster and foster group homes. The percentage of homes is not defined in statute, and RCCL inspects 25 percent of child placing agency foster homes each year to determine compliance with applicable law, administrative rules, and Licensing's minimum standards.
- During these inspections, the RCCL inspector ensures the child placing agency has correctly determined that an agency foster home meets verification requirements and that the child placing agency has made appropriate decisions about the following issues.
 - Foster home's ability to work with children of a certain age or gender.
 - Foster home's ability to care for children who have special needs or supervision requirements.
 - Services the foster home is able to provide.
 - Foster home's capacity.
- RCCL primarily inspects active homes, where children in foster care are currently placed. Beginning in FY 2011, the RCCL program inspects a percentage (up to, but not more than 10 percent) of inactive homes. RCCL conducted 3,125 agency home random sample inspections in FY 2011 and 2,470 in FY 2012.

Enforcement Team Conferences

- Enforcement team conferences are conducted on child placing agencies and residential treatment centers at least annually.
- The purpose of the conference is to monitor a child placing agency and residential treatment center's compliance with the law, rules, and minimum standard rules.
- The team consists of the inspector and supervisor assigned to the residential treatment center or main child-placing agency, the inspector or supervisor assigned to each of the child-placing agency's branch offices, and an investigation supervisor or investigator if there have been any investigations related to the residential treatment center or child-placing agency.
- The team conducts a comprehensive assessment based on a review of all inspections and investigations of the residential treatment center, main child-placing agency, the child-placing agency's branch offices, and the foster homes it verifies. At the conclusion of the conference, the team recommends an enforcement plan for the residential treatment center or child placing agency based on the results of the assessment.

Investigations Overview

- CCL investigates reports alleging violations of the law, administrative rules, or minimum standard rules by inspecting operations, interviewing children, parents, childcare staff or

any persons who may have knowledge of the situation. CCL monitoring representatives routinely conduct investigations of allegations of standard violations. CCL investigators, who are trained in forensic investigation techniques, conduct investigations of allegations of abuse and neglect.

- CCL investigates complaints that allege abuse or neglect or contains allegations of minimum standards violations. The investigation determines whether a violation of rule or statute occurred and, if so, the degree of risk of further harm. Such reports alleging possible risk to children come from many different sources: parents, caregivers, children, the media, law enforcement, and the general public. Also, childcare operations are required by minimum standards to self-report serious incidents, such as when a child falls at a daycare or residential childcare operation and requires stitches.

Types of Complaints against Regulated Entities

Licensing investigates two types of reports that fall into two categories: allegations of abuse and neglect and reports of allegations of minimum standard violations. All reports are assigned a priority based on the severity and immediacy of alleged harm or risk to children. Specially trained investigators conduct abuse and neglect investigations in childcare operations. The following information details the prioritization schedule and maximum time allowed to respond to a report, according to CCL policy and administrative rule.

Priority 1 Reports

Priority 1 is assigned to any report about a regulated or illegal operation that alleges:

- a child's death;
- immediate risk of death, serious injury, or life threatening abuse or neglect of a child; or
- deficiencies in compliance with the law or minimum standard rules that pose an immediate risk to children.

Priority 1 reports are assigned for investigation after a supervisor's review. Licensing staff initiate Priority 1 investigations as soon as possible, but no later than 24 hours after the date and time on the intake. An unannounced inspection of the operation initiates the investigation. In an abuse/neglect investigation, the alleged victim must be observed or interviewed as soon as possible but within five days of the date on the intake. Other acceptable initiation methods include: face-to-face contact with a child, an interview by a local child advocacy center or law enforcement agency, or contact with a professional or individual who can provide additional information about the current state of the health and safety of the victim child. If the investigation starts without an inspection, then an inspection must be conducted within 15 days of the intake.

Priority 2 Reports

Assigned to any report about a regulated or unregulated operation that alleges one of the following scenarios.

- Abuse or neglect of a child that does not indicate an immediate risk of death or serious harm.
- Serious supervision problems that do not indicate an immediate risk of death or an immediate risk of serious harm. Example: Two children within 2 years of age were involved in a physical altercation with each other and one sustained a black eye as a result. The child that caused the injury has been moved to another setting and a safety plan has been implemented for the child.
- Serious accidental injury that does not indicate an immediate risk of death or an immediate risk of further serious harm. Example: A child has broken his leg from falling off of the slide on the playground, has received medical attention and there is no danger in any further harm occurring to the child.
- Serious safety or health hazards that do not indicate an immediate risk of death or serious harm, including that a person listed on the sex offender database has the same address as an operation or home. Example: when the address is that of an apartment complex but not the specific unit.
- Injury or serious mistreatment of a child that does not indicate an immediate risk of death or an immediate risk of serious harm. Example: A child was injured by the daycare provider in a non-vital area of the body, however, the child sustained a minor injury and the daycare

operation has placed the provider on administrative leave pending the outcome of the investigation.

After a supervisor's review, Priority 2 reports are assigned for investigation. CCL staff initiate Priority 2 reports that allege abuse or neglect as soon as possible but no later than 72 hours of the date and time of the intake report. Initiation should be made by an unannounced inspection to the operation. Licensing staff must observe or interview the alleged victim as soon as possible but within seven days of the date on the report. Other acceptable initiation methods include: face-to-face contact with a child, an interview conducted by a local child advocacy center or law enforcement agency, or contact with a professional or individual who can provide additional information about the current state of the health and safety of the victim child. If the investigation starts without an inspection, an inspection must be conducted within 15 days of the intake.

For Priority 2 reports that allege minimum standards violations and are assigned for investigation, the initiation must be as soon as possible but no later than five days of the date of the intake report. Initiation should be made by an unannounced inspection to the operation. Other acceptable initiation methods include face-to-face contact with a child, or contact with an individual who can provide additional information about the report. If the initiation is conducted by a method other than inspection, then an inspection of the operation must be conducted within 15 days of the intake.

Priority 3 Reports

Priority 3 is assigned to any report that alleges:

- minor violations of the law or minimum standard rules that involve low risk to children in care;
- illegal operations when there are no allegations of violations of minimum standard rules, nor any allegations or indications of abuse or neglect; or
- a person listed on the sex offender database lives within proximity of a childcare operation or home.

After a supervisor's review and assignment, a Priority 3 investigation is initiated as soon as possible but no later than 15 days of the date on the report. Initiation can be made by an unannounced inspection of the operation; however an inspection is not always required. If an inspection is required, the inspections must be completed within 30 days of the date of the intake report.

For Priority 1 and Priority 2 reports of both abuse/neglect and minimum standards violations, DFPS must complete investigation actions within 30 days and send notifications to the operation and any alleged perpetrator within 30 days. Investigators are expected to document the inspection and contacts related to the investigation within the following day. However, investigators must complete all investigation documentation within 45 days of the intake for

Priority 1 and Priority 2 reports. For Priority 3 reports, investigators must complete the investigation within 60 days of the date of intake and notify the operation and complete documentation of the investigation within 60 days of the date of the intake.

Risk Analysts

- The Texas Human Resources Code, Chapter 42, §42.0211 was revised by the 80th Legislature to require specially-trained investigation analysts to review and evaluate intakes with allegations associated with a higher risk of harm to children, and to consult with the investigator assigned to the case to provide specialized guidance to assist in the investigation.
- There is currently one lead investigation analyst housed in the CCL Policy and Program Operations division. Other analysts are located in the DCL and RCCL district offices who are responsible for consulting and reviewing higher risk investigations.

Sanctions to Ensure Compliance and Due Process

Before issuing a sanction, CCL gives all non-compliant operations an opportunity to comply. If operations continue to be non-compliant, CCL’s next action could range from asking the operation to voluntarily develop a plan for correcting deficiencies to imposing corrective or adverse actions for more serious deficiencies or failure to correct a deficiency within the given time limit. CCL may notify an operation of a corrective or adverse action when one of the following situations is found.

- A single serious deficiency, such as a child death or serious injury.
- Several deficiencies that create a risk to children.
- A repetition or pattern of deficiencies that demonstrate that compliance is not being maintained.
- An operation with an initial permit is cited for failure to comply with law or minimum standard rules.

Depending on the seriousness of the situation and the operation’s compliance history, an operation may voluntarily make corrections or CCL staff may recommend or impose remedial action. Actions and remedies include those listed in the table below.

Child Care Licensing Actions and Remedies	
Action Type:	Voluntary Actions by an Operation
Explanation:	CCL may recommend that an operation voluntarily take an action or develop a plan for correcting deficiencies to reduce the risk to the health and safety of children in care. There is no consequence for an operation not completing a voluntary action, however if the operation continues to experience non-compliance, corrective or adverse actions may follow.
Possible Outcomes:	Withdraw application – Applicant has the option to withdraw at any time before issuance.

Child Care Licensing Actions and Remedies	
Action Type:	Voluntary Actions by an Operation
	Temporary relocation – Operation moves to a temporary location.
	Voluntary suspension – Operation ceases operating for a limited time.
	Voluntary closure – Operation voluntarily closes.
	Operation plan of action – Voluntary plan to correct deficiencies.
Action Type:	Corrective Actions
Explanation:	Conditions placed on an operation when the operation is repeatedly deficient in complying with minimum standard rules that do not endanger the health and safety of children. If an operation does not comply with conditions imposed as part of evaluation CCL may seek to extend the evaluation period or may move to probation or adverse action. If the operation is on probation and fails to follow conditions, the operation may be subject to adverse actions.
Possible Outcomes:	Evaluation – Conditions placed on an operation for 30 days to six months with the possibility of renewing once for a maximum of one year.
	Probation – Conditions placed on an operation for 30 days to 12 months. Failure to follow the conditions could result in an adverse action.
Action Type:	Monetary Actions
Explanation:	Fines to operations that violate Chapter 42 of the Human Resources Code (HRC) or rule adopted under chapter 42 HRC. Administrative penalties do not apply to listed homes. If penalties are not paid the matter is referred to the Attorney General of CCL may revoke the permit or implement an adverse amendment.
Possible Outcomes:	Administrative penalty – Fines imposed for violation of minimum standards or law. Penalties range from \$1 to \$150 per a day.
	Civil penalty – Fines imposed on an individual ranging from \$50 to \$100 per a day.
Action Type:	Adverse Actions
Explanation:	Actions that CCL may impose on an operation due to violation of law, minimum standard rules or failure to correct a deficiency. This action removes an operation’s ability legally operate. If the operation continues to operate they are treated as an illegal operation.
Possible Outcomes:	Denial of permit – Permit is not issued to applicant due to concerns for the health and safety of children.
	Revocation of permit – Operations permit to operate legally is revoked.
	Suspension of permit – Operations permit to operate legally is suspended for a defined amount of time.
	Adverse amendment to permit – Operations permit is amended to affect its operating capacity or other factors such as age or gender.

Regulated entities may appeal an administrative penalty, adverse action of denial, revocation, suspension, or an adverse amendment to a license, certification, or registration, to the State Office of Administrative Hearings (SOAH). For cases involving abuse or neglect, the individual may request a Release Hearing, held by SOAH.

P. For each regulatory program, if applicable, provide the following complaint information. The chart headings may be changed if needed to better reflect your agency's practices.

Department of Family and Protective Services		
Exhibit 11: Information on Complaints Against Regulated Daycare Operations - Fiscal Year 2011 and 2012		
Measurement	FY 2011	FY 2012
Total number of regulated entities	25,045	23,992
Total number of inspections conducted	35,771	35,755
Abuse/Neglect Complaints (by the public)	3,309	3,132
Non Abuse/Neglect Complaints (by the public)	14,943	12,746
Abuse/Neglect Complaints (initiated by DCL)	2,754	2,475
Non Abuse/Neglect (initiated by DCL)	14,900	12,654
Number of complaints pending from prior years	1	1
Abuse/Neglect Complaints (found non-jurisdictional)	216	198
Non Abuse/Neglect Complaints (found non-jurisdictional)	432	365
Abuse/Neglect (jurisdictional complaints without merit)	1,822	1,516
Non Abuse/Neglect (jurisdictional complaints without merit)	7,516	7,271
Abuse/Neglect Complaints Resolved (citations and abuse/neglect)	2,061	1,799
Non Abuse/Neglect Complaints Resolved (citations and abuse/neglect)	14,276	12,147
Abuse/Neglect (Average # of days for complaint resolution)	109.7	107.8
Non Abuse/Neglect (Average # of days for complaint resolution)	31.4	30.7
Complaints Resulting in Disciplinary Action		
Administrative penalty	0	0
Reprimand	N/A	N/A
Probation	83	62
Evaluation	142	146
Suspension	2	1
Revocation	742	52
Other – denial of permit	198	122

Department of Family and Protective Services
Exhibit 11: Information on Complaints Against Regulated by Residential Child Care Licensing

Measurement	FY 2011	FY 2012
Total number of regulated persons with active Administrator Licenses	1,177	1,211
Total number of regulated entities	10,774	10,459
Total number of inspections conducted	5,374	4,736
Number of complaints pending from prior years	3	11
Abuse/Neglect Complaints (by the public)	3,689	3,447
Non Abuse/Neglect Complaints (by the public)	9,527	10,394
Abuse/Neglect Complaints (initiated by RCCL)	2,862	2,849
Non Abuse/Neglect (initiated by RCCL)	2,983	3,211
Abuse/Neglect Complaints (found non-jurisdictional)	288	240
Non Abuse/Neglect Complaints (found non-jurisdictional)	6,366	6,780
Abuse/Neglect (jurisdictional complaints without merit)	1,997	2,079
Non Abuse/Neglect (jurisdictional complaints without merit)	2,165	2,327
Abuse/Neglect Complaints Resolved (citations and abuse/neglect)	2,066	2,171
Non Abuse/Neglect Complaints Resolved (citations and abuse/neglect)	2,774	2,997
Abuse/Neglect (Average # of days for complaint resolution)	79.1	88.8
Non Abuse/Neglect (Average # of days for complaint resolution)	46.3	46
Complaints Resulting in Disciplinary Action		
Administrative penalty	0	0
Reprimand	NA	NA
Probation	3	3
Evaluation	13	13
Suspension	1	0
Revocation	0	0
Other – denial of permit	1	0

VIII. STATUTORY AUTHORITY AND RECENT LEGISLATION

A. Fill in the following chart, listing citations for all state and federal statutes that grant authority to or otherwise significantly impact your agency. Do not include general state statutes that apply to all agencies, such as the Public Information Act, the Open Meetings Act, or the Administrative Procedure Act. Provide information on Attorney General Opinions from FY 2009 – 2013, or earlier significant Attorney General Opinions, that affect your agency's operations.

Department of Family and Protective Services Exhibit 12: Statutes/Attorney General Opinions	
<i>Statutes</i>	
Citation/Title	Authority/Impact on Agency (e.g., "provides authority to license and regulate nursing home administrators")
Titles IV-B and IV-E of the Social Security Act; 42 U.S.C. 621 et seq.	Provide federal funding to states with an approved state plan for provision of child welfare services. The IV-E and IV-B state plans must also ensure compliance with the Child Abuse Prevention and Treatment Act (CAPTA) (discussed below). Together with CAPTA, these federal laws impose very significant mandates that the states must comply with in order to retain eligibility for federal funding, and many of the provisions in the Texas Family Code, Chapters 261–264 are intended to ensure compliance with these federal laws.
Child Abuse Prevention and Treatment Act (CAPTA), as amended; 42 U.S.C. 5101 et seq; 42 U.S.C. 5116 et seq.	Provides federal funding to a state with an approved state plan that complies with CAPTA Title IV-B, and IV-E requirements.

**Department of Family and Protective Services
Exhibit 12: Statutes/Attorney General Opinions**

Statutes

Citation/Title	Authority/Impact on Agency (e.g., “provides authority to license and regulate nursing home administrators”)
The U.S. Constitution	<p>Many of the provisions in the Family Code applicable to DFPS are intended to ensure constitutional rights – most particularly:</p> <ul style="list-style-type: none"> • the constitutional protections applicable to the parent-child relationship under the First Amendment. • the right to be free from unreasonable search and seizure under the Fourth Amendment, and • the rights to procedural and substantive due process and to equal protection under the Fourteenth Amendment. <p>Recent court decisions under the First and Fourth amendments have had significant impact on DFPS.</p>

**Department of Family and Protective Services
Exhibit 12: Statutes/Attorney General Opinions**

Statutes

Citation/Title	Authority/Impact on Agency (e.g., “provides authority to license and regulate nursing home administrators”)
Human Resources Code, Chapter 40.	<p>This chapter is the primary enabling legislation for DFPS. This chapter:</p> <ul style="list-style-type: none"> • creates DFPS and sets forth Department core duties (§42.002); • establishes DFPS as the “single state agency” responsible for administering Titles IV-B and IV-E of the federal Social Security Act; • establishes the Family and Protective Services Council to make recommendations to the HHSC Executive Commissioner (EC) and the DFPS Commissioner on management and operation of the Department (§§40.021-40.027); • establishes a Commissioner, to be appointed by HHSC EC and to serve as the CEO subject to control of the HHSC EC; and • provides miscellaneous administrative provisions for the organization and staffing of the Department, the use of funds, delivery of services, and interaction with other agencies and the public.
Human Resources Code, Ch. 42	Establishes the authority of DFPS to regulate residential and non-residential childcare facilities, including child placing agencies and foster homes.
Human Resources Code, Ch. 43	<ul style="list-style-type: none"> • Establishes licensure qualifications for childcare administrators and child placing agency administrators. • Requires DFPS to issue and administer the required license.

**Department of Family and Protective Services
Exhibit 12: Statutes/Attorney General Opinions**

Statutes

Citation/Title	Authority/Impact on Agency (e.g., “provides authority to license and regulate nursing home administrators”)
Human Resources Code, Ch. 44	The “subsidized” daycare program created under this chapter is administered by the Texas Workforce Commission (TWC), not DFPS. However, programs eligible to contract with TWC under Ch. 44 must meet Child Care Licensing standards promulgated under Ch. 42 by DFPS.
Human Resources Code, Ch. 48	<p>Establishes the authority of DFPS to:</p> <ul style="list-style-type: none"> • conduct investigations of alleged abuse, neglect, and exploitation (a/n/e) of persons aged 65 or older and disabled adults, including the duty to conduct a/n/e investigations of persons served by state hospitals, state supported living centers, MHMR authorities, community centers, private Intermediate Care Facilities for the Intellectually Disabled (ICF-IDs), home and community-based services (HCS) programs, and home and community support services agencies (HCSSAs); and • also provides authority to provide protective services to adult victims of a/n/e who live in the community.

**Department of Family and Protective Services
Exhibit 12: Statutes/Attorney General Opinions**

Statutes

Citation/Title	Authority/Impact on Agency (e.g., “provides authority to license and regulate nursing home administrators”)
Chapter 531, Government Code	<p>Creates the Health and Human Services Commission, establishing DFPS as one of five health and human service agencies subject to the control of the HHSC Executive Commissioner.</p> <p>In addition to the general provisions in Ch. 551 applicable to all HHS agencies, provisions specific to DFPS include the following sections:</p> <p>§531.0162. Use of technology to improve the Adult Protective Services (APS) program;</p> <p>§§531.047 – .049. Outcome measures in substitute care contracts; caseload standards; caseload standards advisory committee;</p> <p>§531.088. Pools funds for prevention services;</p> <p>§531.165. Referrals by the Department of Aging and Disability Services (DADS) to DFPS of abandoned children in certain long-term care facilities;</p> <p>§531.02447. Creates Employment-First Task Force (effective 1/1/2014), of which DFPS is a member; and</p> <p>§531.802. DFPS a member of the Council on Children and Families.</p> <p>Subchapter D-1. Establishes a role for multiple state agencies, including DFPS, in permanency planning for persons in certain institutions.</p> <p>Subchapter U. Requires DFPS cooperation with mortality reviews of certain deceased persons.</p>

**Department of Family and Protective Services
Exhibit 12: Statutes/Attorney General Opinions**

Statutes

Citation/Title	Authority/Impact on Agency (e.g., “provides authority to license and regulate nursing home administrators”)
Family Code, Chapter 261	Provides definitions for child abuse and neglect, and requires reporting of same. It delineates responsibilities for investigation of child abuse and neglect among various state and local agencies – most particularly DFPS – and contains guidelines for investigations.
Family Code, Chapter 262	Describes circumstances and legal proceedings for taking possession and legal custody of a child by law enforcement or DFPS; it also contains “Baby Moses” provisions for abandoning a child up to 60 days of age with a “designated emergency infant care provider.”
Family Code, Chapter 263	Sets forth a schedule of periodic hearings to review the circumstances and permanency plans for children in the custody of DFPS, with a one-year legal permanency deadline (subject to one six-month extension); provides for continued hearings for current and former foster youth between the ages of 18 and 21.
Family Code, Chapter 264	Provides general provisions relating to the administration of the child-welfare system by DFPS, including provisions on payment of foster care and other benefits, provision of services to children and families, legal representation, etc. It also contains miscellaneous provisions relating to Services To At-Risk (STAR) youth prevention programs; Court-Appointed Special Advocates (CASA); Children’s Advocacy Centers (CACs), Child Fatality Review Teams (CFRTs), and Family Drug Court Programs.
Family Code, Chapter 265	Establishes Prevention and Early Intervention (PEI) services, administered by DFPS
Family Code, Chapter 266	Provides special provisions relating to medical care, including medical consent issues. It also requires the establishment of the Health Passport and Education Passport.

**Department of Family and Protective Services
Exhibit 12: Statutes/Attorney General Opinions**

Statutes

Citation/Title	Authority/Impact on Agency (e.g., “provides authority to license and regulate nursing home administrators”)
Code of Criminal Procedure, Art. 2.27	Requires law enforcement to cooperate with DFPS in investigation of certain abuse or neglect reports (See also related provisions in Family Code, Chapter 261.)
Code of Criminal Procedure, Art. 5.05	Creates a system for reporting to DFPS when law enforcement responds to a domestic violence call in the home of a foster parent.
Code of Criminal Procedure, Art. 42.12 (Sec. 5)	Authorizes DFPS to consider a deferred adjudication when considering whether to license a person to operate a childcare facility or child placing agency.
Code of Criminal Procedure, Art. 56.06	Requires law enforcement to request a sexual assault exam of a victim if requested by DFPS under certain conditions.
Code of Criminal Procedure, 57B.04	Exempts DFPS from requirement to use a pseudonym in Department records relating to certain victims of family violence.
Code of Criminal Procedure, Art. 63.009	Requires law enforcement to transfer to DFPS possession of a missing child listed in the missing person clearinghouse who is located by law enforcement.

**Department of Family and Protective Services
Exhibit 12: Statutes/Attorney General Opinions**

Statutes

Citation/Title	Authority/Impact on Agency (e.g., “provides authority to license and regulate nursing home administrators”)
The Education Code	<p>The Education Code contains many provisions of interest to DFPS in its role as managing conservator of children and youth enrolled in public schools and higher education. Provisions of special note include the following:</p> <p>§7.029. MOU between DFPS and TEA on educational outcomes for foster children;</p> <p>§25.001. Special provisions for admission/continuity of attendance of foster child;</p> <p>§25.002. Includes special procedures for enrollment of foster children in public schools;</p> <p>§25.007. Special provisions to support foster children transferring from one school to another;</p> <p>§29.08. Contracts with residential placement facilities for educational services; required interagency MOU;</p> <p>§29.015. Foster parents as “surrogate parents” for special education purposes;</p> <p>§29.081. Compensatory education/accelerated instruction for “at risk” students, the definition of which includes students in DFPS conservatorship (see other provisions throughout Ch. 29 designed to benefit “at risk” students as defined in 29.081(d));</p> <p>§29.153. Makes children in DFPS custody eligible for free pre-kindergarten (and see 29.1532, requiring private pre-K contracted programs to meet Child Care Licensing (CCL) minimum standards for childcare);</p> <p>§29.160. Requires DFPS to cooperate with State Center for Early Childhood Development in developing a quality rating system and waivers of minimum standards, if applicable;</p> <p>§38.04. Requires TEA to develop policy for reporting child abuse and neglect and requiring cooperation with DFPS in the investigation of child abuse and neglect; and</p> <p>§§54.211 & 54.2111. Tuition waiver provisions for higher education costs of former foster youth.</p>

**Department of Family and Protective Services
Exhibit 12: Statutes/Attorney General Opinions**

Statutes

Citation/Title	Authority/Impact on Agency (e.g., “provides authority to license and regulate nursing home administrators”)
Family Code, Chapters 32 and 33	Contains provisions relating to consent by a non-parent for medical treatment of a child, including special provisions for youth in the Texas Juvenile Justice Department (TJJD) and for suspected victims of abuse or neglect. It also describes DFPS’ role in assisting minors seeking abortion services and investigating suspected sexual abuse.

**Department of Family and Protective Services
Exhibit 12: Statutes/Attorney General Opinions**

Statutes

Citation/Title	Authority/Impact on Agency (e.g., “provides authority to license and regulate nursing home administrators”)
Family Code, Title V, Subtitles A – D	<p>Contains general provisions applicable to all “suits affecting the parent child relationship” (SAPCRs), including SAPCRs to which DFPS is a party. These subtitles cover issues relating to possession, access, and custody of a child, parental rights, adoption, and child support. Provisions of particular note include the following:</p> <ul style="list-style-type: none"> • Ch. 102 specifies who has “standing” to sue for custody, termination or adoption, including numerous provisions specific to DFPS; • Ch. 107 mandates appointment of guardian ad litem (GAL, can include CASA) and attorney ad litem (AAL) for child, and AAL for parent in DFPS suit seeking termination. Specifies requirements for social studies and requires DFPS to adopt rules relating to certain social studies; • Ch. 153 contains provisions relating to conservatorship, possession and access; including the rights of a “non-parent conservator” (e.g., DFPS); • §156.101 confers the ability to modify a custody order due to “material and substantial” change of circumstances; • §156.102 grants standing to a sibling of a child who is separated from the child due to actions of DFPS in a suit for modification of a custody order. • Ch. 160 provides for the establishment of paternity and the creation of the “paternity registry”; • Ch. 161 provides for the termination of parental rights, including grounds that are specifically directed at DFPS, and others that DFPS frequently uses. It outlines the duty of DFPS, in conjunction with DSHS, to adopt the form currently in use to provide medical history of a child who is voluntarily relinquished by a parent; • Ch.162 contains general procedures for adoption and the adoption of the Interstate Compact on the Placement of Children (ICPC)/Interstate Compact on Adoption and Medical Assistance, both of which are administered by DFPS for Texas. It also creates the adoption assistance program operated by DFPS, implements the mandatory federal Multi-Ethnic Placement Act (MEPA) in §162.308, and authorizes DFPS to pay an adoption incentive to a private child-placing agency (§162.601); • Ch. 201 establishes a system of associate judges to hear DFPS SAPCR cases; and • §231.010 requires cooperation between the Child Support division of the Office of the Attorney General and DFPS.

**Department of Family and Protective Services
Exhibit 12: Statutes/Attorney General Opinions**

Statutes

Citation/Title	Authority/Impact on Agency (e.g., “provides authority to license and regulate nursing home administrators”)
Government Code, §402.035	Makes DFPS a member of the Human Trafficking Taskforce and assigns certain duties to DFPS in connection with this taskforce.
Government Code Chapter 411, §411.081, §411.114	Grants DFPS access to criminal history records for certain purposes.
Government Code, §651.004	Exempts DFPS from certain management-to-staff ratios applicable to other state agencies.
Government Code, §662.054	Requires DFPS to promote Texas Adoption Day.
Government Code Chapter, Chapter 2155	Outlines: <ul style="list-style-type: none"> • §2155.144. The delegation of authority to HHS agencies to purchase goods and services (§2155.144); and • §2155.1442. Special procedures relating to foster care residential contract managers (§2155.1442).
Health and Safety Code; Subchapter C	Establishes a task force on domestic violence, of which DFPS is a member, effective 6/14/2013, and expiring 1/1/2016.
Health and Safety Code; §81.010; §81.023; §161.0101	<p>§81.010 requires DFPS membership on the Interagency Coordinating Council for HIV and Hepatitis.</p> <p>§81.023 requires the Department of State Health Services (DSHS) to cooperate with DFPS in developing immunization requirements for children in childcare.</p> <p>§161.0101 requires DSHS to work with DFPS to increase immunization awareness and participation among parents of children in childcare facilities.</p>
Health and Safety Code, Chapter 115	Creates the Interagency Task Force for Children with Special Needs, of which DFPS is a required member.

**Department of Family and Protective Services
Exhibit 12: Statutes/Attorney General Opinions**

Statutes

Citation/Title	Authority/Impact on Agency (e.g., “provides authority to license and regulate nursing home administrators”)
Health and Safety Code, Chapter 116	Requires DFPS membership on the Early Childhood Health and Nutrition Interagency Council, which studies and makes recommendations on improving childhood nutrition and health.
Health and Safety Code, §191.0047	Requires a DSHS MOU and cooperation with DFPS in furnishing birth information and certified birth certificates to DFPS for children in DFPS conservatorship.
Health and Safety Code, Chapter 252	Contains provisions of DFPS duty that are in addition to those in Chapter 48, Human Resources Code, to investigate allegations of abuse, neglect, and exploitation in private ICF-IDs.
Health and Safety Code, Chapter 253	Contains provisions relating to DFPS duty to submit the names of certain individuals to the Employee Misconduct Registry.
Health and Safety Code, Chapter 254	Defines a new type of Boarding Home Facility that is not subject to regulation as a long-term care agency by DADS, but may be regulated by a county or municipality. It requires DFPS to investigate abuse, neglect, and exploitation in such facilities.
Health and Safety Code, §461.0124; §461.017	Establish parents of foster children as a priority population for drug and alcohol treatment services and make DFPS a member of the Drug Demand Reduction Advisory Committee.
Health and Safety Code, Chapter 468, Subchapter C	Requires DFPS to establish a Drug Endangered Child initiative (it mirrors provisions in Human Resources Code, §§ 40.071 & 40.072).
Health and Safety Code, Chapter 555, Subchapter C	Creates the Independent Ombudsman for state supported living centers and requires certain cooperation and sharing of information with DFPS.

**Department of Family and Protective Services
Exhibit 12: Statutes/Attorney General Opinions**

Statutes

Citation/Title	Authority/Impact on Agency (e.g., “provides authority to license and regulate nursing home administrators”)
Health and Safety Code, Chapter 614	Requires an MOU and interagency collaboration, including DFPS, to ensure continuity of care and services for offenders with medical or mental impairments.
Health and Safety Code, Chapter 672	Authorizes the creation of Adult Fatality Review Teams at the county level, which may include DFPS as a member, and biennial reporting of such teams to DFPS.
Health and Safety Code, §1001.153	Requires participation by the DFPS medical director or designee on the MEDCARES advisory committee, which awards grants to improve assessment, diagnosis, and treatment of child abuse and neglect.
Human Resources Code, §31.002	Defines a “dependent child” for purposes of Aid to Families with Dependent Children to include certain foster children up to age 19. This definition, in combination with Title IV-E of the Social Security Act, makes foster children eligible for IV-E reimbursements categorically eligible for Medicaid under §32.024, Human Resources Code. Foster children not eligible for IV-E are eligible for Medicaid under the “medically needy” program authorized under §32.024.
Human Resources Code, §32.0247; §32.02471	Authorizes children who aged out of foster care at age 18, but who have not yet turned 21, as eligible for Medicaid; and makes these same youth eligible between 21 and 23 if attending higher education.
Human Resources Code, § 51.012	Requires DFPS to help coordinate the provision of violence prevention services for children.
Human Resources Code, Chapter 54	Relates to protective orders sought by DFPS on behalf of child abuse victims.

**Department of Family and Protective Services
Exhibit 12: Statutes/Attorney General Opinions**

Statutes

Citation/Title	Authority/Impact on Agency (e.g., “provides authority to license and regulate nursing home administrators”)
Human Resources Code, Ch. 61	Contains provisions relating to youth in DFPS conservatorship, most particularly the sections beginning at §61.0766, concerning collaborative service planning, reporting, sharing of data, and the role of TJJD in family court hearings involving foster youth.
Human Resources Code, Chapter 73	Creates the Interagency Council on Early Childhood Intervention and makes DFPS a member of the Board. [Although the statutory authorization for this council is still in current law, the Council no longer exists.]
Human Resources Code, §114.003	Makes DFPS a member of the Texas Council on Autism and Pervasive Developmental Disorders.
Human Resources Code, Chapter 142	Contains provisions (corresponding to provisions in HRC Chapter 48) relating to the DFPS duty to investigate allegations of abuse, neglect, and exploitation of adult clients by Home and Community Support Services Agency (HCSSA) workers.
Human Resources Code, Chapter 161	Contains numerous provisions regarding cooperation between DFPS and DADS, including: <ul style="list-style-type: none"> • §161.077 requires the development, with DFPS input, of an investigation database; • Subchapter E, Ch. 161 which, in combination with provisions in Chapter 48, Human Resources Code, reflects the 2005 legislative transfer of the guardianship program to DADS, which had previously been administered by DFPS (S.B. 6, 79 RS 2005. DFPS makes referrals to DADS for guardianship of both CPS and APS clients under these provisions.
Labor Code, Chapter 310	Creates the Childcare Resource and Referral Network and requires DFPS assistance.

**Department of Family and Protective Services
Exhibit 12: Statutes/Attorney General Opinions**

Statutes

Citation/Title	Authority/Impact on Agency (e.g., “provides authority to license and regulate nursing home administrators”)
Occupations Code, Chapter 55	Contains general provisions applicable to all agencies that issue a professional license to require special considerations for licensing applicants who are military members, spouses of military member, and veterans.
Occupations Code, §110.202	Establishes DFPS as a member on the Interagency Advisory Committee to the Council on Sex Offender Treatment.
Transportation Code, §504.642	Creates a specialty license plate, the proceeds of which must be deposited into a fund with DFPS to be used for services to abused and neglected children.
Government Code, §434.153	Adds DFPS to the membership of the Texas Coordinating Council for Veteran Services (effective 9/1/2013)

Attorney General Opinions

Attorney General Opinion No.	Impact on Agency
OR 2006-13929	Held that decisions and orders issued by SOAH regarding DFPS hearings in Child Care Licensing matters are not confidential.
OR 2004-5599	Affirmed the right of DFPS to withhold certain Child Care Licensing abuse or neglect information from the public based on confidentiality rules the agency adopts in compliance with the federal Child Abuse Prevention and Treatment Act.
OR 2003-5590	Established a “previous determination” under Government Code §552.301(a) that the records concerning a CPS investigation of an allegation of abuse or neglect of a child and the records used or developed in providing services as a result of that investigation are confidential, and the agency need not ask for a decision from the OAG each time they receive a request for such records.

**Department of Family and Protective Services
Exhibit 12: Statutes/Attorney General Opinions**

Statutes

Citation/Title	Authority/Impact on Agency (e.g., “provides authority to license and regulate nursing home administrators”)
OR 1999-3779	Held that information that would identify a foster care provider is confidential and must not be released to the public.
Opinion DM-476	Held that a local school district cannot interfere with a child abuse or neglect investigation by prohibiting a CPS worker investigating a report of abuse or neglect from interviewing a student (the alleged victim) in the school, or by requiring school personnel to be present at the interview.
Opinion GA-0476	Held that DFPS may not contract with a governmental entity to provide substitute care or case management services except in some circumstances.
Opinion GA-0649	Held that while DFPS’ authority to make rules concerning the regulation and licensing of childcare facilities, to the extent the agency rule exempts a certain kind of childcare programs not expressly exempted under Section 42.041, Human Resources Code, the rule conflicts with the statute and is therefore invalid.
Opinion GA-0678	Held that DFPS has the authority to make an initial fact determination regarding whether an agency is operating a childcare program that is subject to, or exempt from, licensure.
Opinion GA-0815	Held that DFPS’ rulemaking authority allows it to adopt minimum standards establishing minimum training hours for staff in certain daycare centers that exceeds the number of hours specified in §42.0421, Human Resources Code.
Opinion GA-0879	Held that a law enforcement entity is required by the Family Code to furnish information in its records relating to alleged abuse or neglect of a child by a person responsible for the child’s care, custody, or welfare to DFPS.

**Department of Family and Protective Services
Exhibit 12: Statutes/Attorney General Opinions**

Statutes

Citation/Title	Authority/Impact on Agency (e.g., “provides authority to license and regulate nursing home administrators”)
Opinion GA-0944	Held that under Subsection 261.101(b), Family Code, a professional is not required to report abuse or neglect that the professional believes occurred during an adult patient’s childhood.

B. Provide a summary of recent legislation regarding your agency by filling in the chart below or attaching information already available in an agency-developed format. Briefly summarize the key provisions. For bills that did not pass, briefly explain the key provisions and issues that resulted in failure of the bill to pass (e.g., opposition to a new fee, or high cost of implementation). Place an asterisk next to bills that could have a major impact on the agency.

Department of Family and Protective Services		
Exhibit 12: 83rd Legislative Session Chart		
<i>Legislation Enacted – 83rd Legislative Session</i>		
Bill Number	Author	Summary of Key Provisions
H.B. 748*	Raymond	The bill directs DFPS to pursue a Title IV-E waiver as authorized by the Child and Family Services Improvement and Innovation Act, which, under that law, must be revenue neutral and must accomplish one of the following goals: increasing permanency, increasing positive outcomes, and preventing abuse and neglect.
H.B. 843*	Lucio III	This bill amends the Family Code to require that children in DFPS conservatorship be provided with at least 10 days advance notice of every permanency and placement review hearing, provided the child is at least 10 years of age or the court directs that such notice be given.
H.B. 915*	Kolkhorst	This bill adds new duties related to the review of medical care by a guardian ad litem, attorney ad litem, and the court, for children in DFPS conservatorship. The bill directs CPS to ensure that a youth’s transition plan includes provisions to assist the youth in managing medication usage after exiting foster care. New requirements are added to the training for medical consenters. The bill outlines requirements for informed consent for psychotropic medications. Notification of the child’s parents at the next visit is required upon the initial prescription of a psychotropic medication, or any change in dosage of the medication. HHSC is directed to use Medicaid prescription drug data to monitor the prescribing of psychotropic drugs for children who are under the supervision of DFPS through the Interstate Compact on the Placement of Children (ICPC).

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

H.B. 1227*	Dukes	This bill provides CASA with electronic access to certain data stored in the DFPS IMPACT database system, as provided under rules to be adopted by the HHSC Executive Commissioner. CASA must maintain the confidentiality of the data. With funding appropriated in the 83 rd Session, DFPS will undertake a four year project to provide external access to key stakeholders, including CASA.
H.B. 1272*	Thompson of Harris	This bill continues the existence of the Human Trafficking Prevention Task Force headed by the Office of the Attorney General. In addition to continuing the Task Force until September 1, 2015, the bill would add a new duty to the Task Force’s current list of responsibilities, and would require the Task Force to work with DFPS, the Texas Education Agency and HHSC.
H.B. 1396*	King of Taylor	This bill directs DFPS and DSHS to conduct a study to determine whether certain data is available to identify the use of alcohol or controlled substances by children and parents involved in an investigation by DFPS. It also requires that if neither agency collects this data that they then determine which agency can compile the information most effectively and at the lowest cost and to provide a report on this study to the governor and legislative leadership.
H.B. 1648*	Raymond	This bill provides a confidentiality provision for any photograph, videotape, audiotape, or any other such audio or video depiction that DFPS made of a child during a licensing inspection or investigation conducted by DFPS. DFPS may only release such items if required by state or federal law or a rule adopted by the HHSC executive commissioner.
H.B. 1741	Naishtat	This bill requires licensed childcare centers to have an electronic child safety alarm system in a vehicle designed to seat eight or more persons that is used to transport children in the center’s care, if the vehicle is purchased or leased on or after December 31, 2013.

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

H.B. 2111*	Strama	This bill requires that experiential life-skills for youth transitioning out of foster care be strengthened in the area of nutrition education, including grocery shopping, meal preparation and cooking, performing basic household tasks, balancing a check book, and using public transportation. The bill also requires contracted providers of transitional living services to offer nutrition education and to assist youth in developing skills in food preparation.
H.B. 2619*	Naishtat	This bill expands education-related responsibilities for DFPS staff, guardians ad litem, attorneys ad litem, and school staff. The bill requires DFPS to identify the person who will be delegated responsibility for making education decisions for a child in conservatorship, file that information with the court, and provide a copy to the child’s school and court-appointed advocates. The bill outlines the appointment of a surrogate parent for children in special education programs, adds new duties to the guardian and attorneys ad litem regarding reporting to the court on whether the youth’s educational needs are being addressed, and requires each child to have an education stability plan. Additionally, the bill outlines what notices and information schools or TEA should send to educational decision-makers and adds mental health appointments, family visitations, and appointments with healthcare professionals to the list of excused absences.
H.B. 2620*	Collier	This bill creates a new task force on domestic violence, including a representative of the DFPS prevention and early intervention program. The task force will focus on topics such as the impact of domestic violence on children. The task force is directed to produce a report by September 1, 2015 and expires January 1, 2016.
H.B. 2683	Price	This bill relates to employment in certain consumer directed services (CDS) programs and by certain facilities and to the nurse aid registry and the employee misconduct registry. It ensures that employees hired through the CDS program are eligible to be listed on the employee misconduct registry.

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

H.B. 2725	Thompson of Harris	This bill concerns centers that provide shelter to trafficking victims, providing an exception to the public information requirement. The bill allows a government body to redact certain personal information maintained by one of these centers for an employee, volunteer worker, or board member. The bill also requires the adoption of minimum standards applicable to general residential operations that provide comprehensive residential and nonresidential services to persons who are victims of trafficking.
S.B. 33*	Zaffirini	The bill requires a State Supported Living Center to allow a resident to install electronic monitoring in the resident’s room, subject to agreement of any roommates also present in the same room. APS will investigate any resulting reports of abuse, neglect, and exploitation based on a tape or recording.
S.B. 44*	Zaffirini, West	This bill directs DFPS and DSHS to study ways to prevent families from relinquishing a child to DFPS in order to get mental health care, and requires DFPS to collect certain data related to the number of children who suffer from a mental illness and for whom DFPS is appointed managing conservator because a person voluntarily relinquished possession of the child solely to obtain mental health services for the child. The bill requires the Council on Children and Families to make recommendations to HHSC to eliminate the practice of including in the DFPS central registry the name of a person who relinquishes possession of his or her child to DFPS solely to obtain mental health services for the child.
S.B. 50*	Zaffirini	This bill makes changes to the composition and duties of the Children’s Policy Council and adds “mental health” to the issue areas the Council may study. Recommendations from the Council will influence service provisions for long-term care, health services, and mental health services to children with disabilities. DFPS continues as a member of the Council.
S.B. 64	Nelson	This bill requires the vaccination of childcare facility employees for certain diseases identified by the Centers for Disease Control and Prevention and based on the risk of exposure to the children in care.

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

S.B. 66*	Nelson	This bill adds two additional members to the State Child Fatality Review Team – an emergency medical services provider; and a provider of services to, or an advocate for, victims of family violence. The bill also changes the language about the frequency of the report that is produced by the State Child Fatality Review Team to be bi-annual rather than annual. Additionally, this bill included language to create the “Protect Our Kids Commission” which will focus on reducing child fatalities.
S.B. 152	Nelson	The bill expands protections for patients at State Hospitals by increasing oversight, increasing employee training, strengthening abuse and neglect reporting requirements, and authorizing the HHSC Office of Inspector General to investigate criminal offenses in State Hospitals. The bill also (1) adds professional licensing boards to the list of professionals with a duty to report, and (2) clarifies that a professional or other person with reason to believe that an adult was abused or neglected as a child must make a report if the report will protect the health or safety of another child, persons aged 65 or older, or person with a disability.
S.B. 245	West	This bill codifies new standards for Children’s Advocacy Centers (CACs) which were agreed upon by stakeholders and which reflect evidence-based standards of best practices in the field for the delivery of center services.
S.B. 330*	Huffman	This bill amends the Family Code, concerning the preparation of social studies for purposes of assisting the court in determining the issues of possession, access, and custody of a child in suits affecting the parent-child relationship. Under the bill a social study evaluator may have access to a complete, unredacted copy of the child abuse or neglect investigation regarding a person who is a resident of the home that is the subject of the social study. The information obtained by the evaluator remains confidential and is not subject to release under the Public Information Act.

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

S.B. 352*	West	This bill concerns visitation between parents and children who are in the temporary managing conservatorship (TMC) of DFPS, and for whom the permanency goal is reunification. DFPS is required to ensure that the parent who is otherwise entitled to possession of the child has an opportunity to visit the child within three days after DFPS is named TMC unless DFPS determines visitation is not in the child’s best interest or would conflict with a court order. A temporary visitation schedule must be developed in coordination with the parents prior to the adversary hearing and remains in effect until DFPS develops a visitation plan or until modified by court order.
S.B. 353	West	This bill exempts from licensure certain emergency shelters that provide care to an unaccompanied minor and any children of that minor, provided the facility contracts with a state or federal agency or meets the requirements to contract as a family violence shelter.
S.B. 423*	Nelson	This bill modifies the Family Code to broadens DFPS’ authority to use a flexible response system (AKA “Alternative Response”) to make the most efficient use of resources. The bill allows DFPS to use an assessment, rather than an investigation, when responding to less serious cases of reported abuse or neglect.
S.B. 425*	Nelson	This bill strengthens the requirement that DFPS consult with certain entities in a child’s case in making placement decisions. Specifically, the bill requires DFPS to consult with the attorney ad litem, guardian ad litem, and court-appointed volunteer advocate when making placement decisions, unless the placement is an emergency that does not allow time for the required consultations.

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

S.B. 427*	Nelson	<p>This bill:</p> <ul style="list-style-type: none"> • addresses inspections, background checks, and administrative penalties, and the grounds for taking remedial action against an administrator’s permit; • creates a new exemption for certain emergency shelters that provide shelter, care, or services to alleged victims of human trafficking; • creates the possibility of biennial inspections for licensed childcare centers or homes that have a good compliance history; • requires the same fingerprint criminal-history checks for general residential operations, child-placing agencies, licensed foster homes, and licensed administrators as for all other childcare operations licensed by DFPS; • allows for the immediate imposition of monetary administrative penalties, before imposing nonmonetary administrative penalties for the failure of operations to take certain actions related to background checks; and • adds new grounds for remedial action against an administrator’s license to prevent a person from being a licensed administrator if the person is ineligible to be a controlling person at an operation.
S.B. 428*	Nelson	<p>This bill eliminates redundant background checks that might make it more difficult for CPS to implement a mentoring program by which foster care providers help to mentor parents who are anticipated to be reunited with their children. Specifically, this bill relieves residential childcare facilities of the duty to conduct a background check on a parent or other relative of a child in care at the facility if: (1) DFPS has on file for the parent or relative a background and criminal history check; and (2) the background and criminal history check was conducted within the two-year period preceding the date the parent or relative visits the client at the facility.</p>

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

S.B. 430*	Nelson	This bill directs DFPS to implement a process to verify that each foster parent seeking monetary assistance to pay for daycare has attempted to find daycare services through community services. DFPS may provide the assistance without first requiring verification if DFPS determines the verification would prevent an emergency placement that is in the child’s best interest.
S.B. 502*	West	This bill requires DFPS to conduct a pre-placement visit between a child and a proposed kinship caregiver and to provide the caregiver with a form containing pertinent information about the child, including educational, medical, dental, and social history. The bill also allows DFPS to increase kinship integration payments from \$1,000 per sibling group to up to \$1,000 per child, subject to the availability of funds. DFPS is developing a kinship payment plan based on funds appropriated.
S.B. 534*	West	This bill directs DFPS to conduct a Permanency Planning Meeting (PPM) at 45 days after the award of Temporary Managing Conservatorship (TMC) and five months post-TMC. If DFPS determines that a multidisciplinary PPM will assist DFPS in facilitating permanency for a child, DFPS can conduct the 5-month PPM as a multidisciplinary PPM. The bill also directs that DFPS include the child in the PPM, if the child is at least 7 years old. This bill also requires DFPS to amend its placement review report to identify placement changes and describe barriers to sustaining the placement and requires contracted providers to include the reason and recommendations for a future placement in the discharge notice.
S.B. 717*	West	This bill allows certain children to consent to housing or care for themselves and their offspring through a transitional living program at an operation regulated by DFPS. To consent to such housing or care, the child must be 16 years old and either (1) reside independently and be financially independent, or (2) be unmarried and be pregnant or be a parent.

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

S.B. 769*	Uresti	This bill mandates a pilot program in Bexar County for specialized training of foster parents of children who have been traumatized or have serious mental health needs, if DFPS or another state agency can provide such training with existing resources, or local government or charitable organizations can provide the training at no cost. The training is to be part of community-based services and support provided by a “wraparound” individualized planning process as prescribed by the Texas Integrated Funding Initiative Consortium. DFPS must evaluate the pilot and submit a report by December 1, 2016.
S.B. 771*	Uresti	This bill mandates that Child Protective Services develop and implement a training program that all staff newly hired or promoted to a management position must take before assuming such a position. The training must promote development of skills in communication, decision-making and strategic thinking and prepare the employee to manage workloads, conduct effective unit meetings, manage a mobile workforce, implement program and operational policies, and complete performance plans.
S.B. 886*	Uresti	This bill makes amendments to clarify the Family Code regarding young adults who remain in foster care, and who must be under the extended jurisdiction of a court to qualify for Title IV-E foster care reimbursement. The bill clarifies provisions that are essential to maximizing federal funding, but that attorneys and courts have indicated are not sufficiently clear under the current law.
S.B. 939*	West	This bill amends the Education Code to explicitly delineate the mandatory abuse and neglect reporting requirements and address training requirements for mandatory reporting for employees at open enrollment charter schools and higher education institutions. The bill requires every public school and open enrollment charter school to post English and Spanish signs displaying the DFPS-operated abuse hotline. The bill also requires licensed childcare facilities to maintain verification of an employee’s attendance at training sessions on reporting requirements.

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

S.B. 1226*	Zaffirini	The bill establishes an Employment-First Task Force to promote competitive employment for individuals with disabilities who receive public benefits. DFPS will have a representative on the task force. Duties of the task force include making policy and program recommendations and the submission of a report.
S.B. 1236*	West	The bill modifies provisions relating to extensions of emergency orders for protective services obtained by the APS program so that the order may remain in place for up to 70 days from the date it was originally issued, as compared to the current maximum of 60 days.
S.B. 1404*	Patrick, Uresti	This bill is intended to help students in DFPS conservatorship secure course credit for a high school diploma. The bill allows TEA to develop a system for awarding partial credit to students in foster care who experience school disruptions. This bill also allows TEA to provide methods for students to complete coursework before the beginning of the next school year, and for school districts to offer an intensive program which allows students in DFPS conservatorship an opportunity to complete requirements for graduation. If a student in foster care satisfies all graduation requirements from a high school the student previously attended, the bill allows that previous school to issue the student a high school diploma, even though the student does not meet all diploma requirements from the school the student is attending at the time of graduation. School staff would also have to inform students of dual credit college courses, and students are allowed excused absences to attend court-ordered activities, such as family and sibling visitations.
S.B. 1589	Zaffirini	This bill is designed to improve the independent living skills of youth in foster care by strengthening the financial literacy of transitioning youth and expanding the required experiential life-skills foster care providers must deliver. It also requires the contractor of transitional living services to assist the youth with obtaining a savings or checking account if the youth is 18 or older.

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

S.B. 1759*	Uresti	This bill requires attorneys on an appointment list to serve as an attorney ad litem (AAL) for a child or parent in a CPS suit to obtain at least three hours annually of relevant training. In addition, it requires appointment of an AAL for an indigent parent or an alleged father in all suits where DFPS is seeking to be appointed as conservator, not just when DFPS is seeking termination of parental rights. Courts are directed to address the issue of appointment of the attorney ad litem prior to the commencement of a full adversary hearing and to postpone that hearing, if necessary, to give the AAL time to prepare for the hearing. The duties of an AAL appointed to represent an alleged father are clarified, and the court has an ongoing obligation to inform an indigent parent who is not already represented of their right to an AAL at the status hearing and at each permanency hearing.
S.B. 1769	Rodriguez	The bill directs the Texas Juvenile Justice Board to appoint an advisory committee to develop a plan to end the practice of fingerprinting children committed to the Juvenile Justice Department for delinquent conduct, other than felony conduct. DFPS is one of named participants on the advisory committee.
S.B. 1892	Garcia	The bill adds to the Texas Coordinating Council for Veteran Services an additional 17 members to include all of the HHS enterprise agencies. The council coordinates activities to assist veterans, service members, and their families by facilitating collaborative relationships among state, federal, and local agencies and private organizations.

Legislation Not Passed – 83rd Legislative Session

Bill Number	Author	Summary of Key Provisions/Reason the Bill Did Not Pass
H.B. 165*	Flynn	This bill proposed shortening the time frame until a foster parent has standing to file an original suit (or intervention in a pending suit) to six months for any child placed by DFPS with the foster parent, and to only three months for a child who was placed with the foster parent when the child was less than two months of age. Last Action: 04/29/2013 House Committee report sent to Calendars

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

H.B. 304*	Walle	<p>This bill proposed caseload and call processing standards that DFPS shall work towards ensuring to the extent appropriated money is available. This bill relates to employee caseload standards for child and adult protective services and Child Care Licensing services and call processing standards for certain of those services.</p> <p>Identical to S.B. 1748 by Senator Uresti, which did not pass and is included in this list.</p> <p>Last Action: 02/19/2013 House Left pending in Human Services Committee</p>
H.B. 445	Dukes	<p>This bill requires HHSC and DFPS to implement the federal Assets for Independence (AFI) Act, which targets foster youth and young adults ages 15 to 23. DFPS and HHSC would develop a matched savings account or IDA program for interested employed youth and young adults for expenses related to post-secondary education, buying a first home, or to start a business.</p> <p>Identical to S.B. 980 by Senator Davis, which did not pass and is included in this list.</p> <p>Last Action: 05/04/2013 House Considered in Calendars Committee</p>
H.B. 486	Dukes	<p>This bill proposed requiring each health and human services agency, except HHSC, to perform a cost analysis comparing the agency's costs of performing a service to the costs of outsourcing the service before awarding, amending, or extending a contract that would reduce state employees by 100 full-time equivalents or would cost \$10 million or more.</p> <p>Last Action: 04/23/2013 House Left pending in Human Services Committee</p>
H.B. 604	Lozano	<p>This bill proposed requiring DFPS and/or licensed child placing agencies to submit potential foster and adoptive parents (including foster parents of group homes) to a psychological evaluation before a child is placed under their care. It both requires a psychological evaluation prior to placement and prohibits placement without one.</p> <p>Last Action: 04/09/2013 House No action taken in Human Services Committee</p>

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

H.B. 743*	Miller of Fort Bend	<p>This bill amended HRC 42 to remove the current licensing exemption for a before-school or after-school program operated directly by an accredited education facility or operated by another entity under a contract with the educational facility. It then added a new exemption for a before-school or after-school program, childcare, or other extended day activity that is provided directly by a public school without charging tuition or an enrollment fee. In addition the annual licensing fee for a licensed childcare facility increased from \$1 to \$2 per child.</p> <p>Last Action: Postponed on second reading until June 3, 2013, dead by procedural action</p>
H.B. 831*	N. Gonzalez of El Paso	<p>This bill amended Family Code 266 to create new requirements and new documentation of information, consent, and informed consent for the administration of psychotropic drugs to foster children.</p> <p>Last Action: Introduced and referred to committee on House Human Services</p>
H.B. 838	Zerwas	<p>This bill amended Family Code 266 to require that the person authorized to consent to medical treatment for a foster child prescribed a psychotropic drug shall ensure that the child has an office visit with the prescribing physician at least once every 90 days to monitor the side effects and determine whether to continue use of the drug. Similar or same provisions were included in H.B. 915 which reached enrollment.</p> <p>Last Action: Referred to Senate Committee on Health and Human Services</p>
H.B. 932	Turner of Harris	<p>This bill amended Family Code 264 to require notification of legislators of the death of a foster child not later than 48 hours after the Department learns of the death.</p> <p>Identical to S.B. 728 by Senator Davis, which did not pass and is included in this list.</p> <p>Last Action: 05/14/2013 Committee action pending Senate Health and Human Services</p>

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Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

H.B. 1058*	Turner of Harris	<p>This bill amended Family Code 266 by adding a new section entitled Complaints Regarding Medical Care. Under this section, a parent, foster parent, managing conservator, possessory conservator, guardian, caretaker, custodian, court-appointed special advocate, or other person with knowledge of medical care, including medications, provided to a foster child could file a complaint with the Department outlining the individual’s concerns about the medical care of the child.</p> <p>Last Action: Committee action pending House Human Services</p>
H.B. 1143*	Strama	<p>This bill proposed that every child entering DFPS conservatorship to receive a developmentally appropriate, comprehensive psychosocial assessment within 45 days. The assessment would include a trauma screening and interviews with individuals who have knowledge of the child’s needs. DFPS would develop a schedule of approved assessment tools that can be used, and guidelines regarding the contents of an assessment report.</p> <p>Last Action: Referred to Senate Health and Human Services Committee</p>
H.B. 1180	Cortez	<p>This bill proposed that DFPS consult with certain entities in a child’s case in making placement decisions. Specifically, the bill would amend section 264.107(e) of the Texas Family Code (TFC) to require that DFPS consult with the child’s caseworker in any placement decision, regardless of whether the placement is an emergency. DFPS would also be required to consult with the child’s attorney ad litem (AAL), guardian ad litem (GAL) and court-appointed volunteer advocate (CASA) in making placement decisions, unless the placement is an emergency that does not allow time for the required consultations. If DFPS is unable to consult with the AAL, GAL or CASA prior to the placement change, DFPS is required to notify and consult with each entity no later than one business day following the placement change.</p> <p>Similar, but not identical to S.B. 425 by Senator Nelson, which did pass.</p> <p>Last Action: Referred to Senate Health and Human Services Committee</p>

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

H.B. 1323*	Zerwas	This bill mandates due process prior to placement of an individual’s name in the DFPS Central Registry for abuse or neglect. It also contains a variety of provisions relating to CPS investigations, internal administrative review procedures, and retention of records. Last Action: Referred to House Human Services Committee
H.B. 1452	N. Gonzalez of El Paso	This bill proposed an exemption for certain emergency shelters that provide shelter, care, or services for up to 15 days for children who are 13-17 years old and are alleged victims of human trafficking as defined in Penal Code 20A.02. Last Action: Referred to Senate Health and Human Services
H.B. 1502	Raymond	This bill proposed creating a criminal, misdemeanor penalty for using a stun gun, Taser, handcuffs or similar restraints on a child for disciplinary purposes. Last Action: The bill was heard and voted out of the House Criminal Jurisprudence Committee, but was never set on the House Calendar.

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

H.B. 1633	Dukes	<p>This bill proposed creation of the Commission to Eliminate Child Abuse and Neglect Fatalities. The commission would consist of 12 members (six appointed by Governor, three by Lieutenant Governor, and three by the Speaker of the House) to study:</p> <ul style="list-style-type: none">• the relationship between child protective services and child welfare services and the rate of child abuse and neglect fatalities;• the effectiveness of the Department’s policies and systems aimed at collecting accurate uniform data on child fatalities; and• any existing barriers to preventing fatalities from child abuse and neglect. <p>H.B. 1633 would have duplicated some efforts of the Statewide Blue Ribbon Task Force, enacted by S.B. 2080 in the 81st Legislature, to create a strategic plan to combat child abuse and improve child welfare. S.B. 2080 was authored by Sen. Uresti.</p> <p>Please note that while H.B. 1633 did not pass, similar language was added to S.B. 66 as a House floor amendment, and S.B. 66 did pass. The name of the new entity is the Protect Our Kids Commission. The charge to the new Commission is not exactly what was in H.B. 1633 but very similar. Rep. Dukes was the author of both the bill and the amendment.</p> <p>Last Action: 05-10-13 Senate Referred to Senate Committee on Senate Health and Human Services</p>
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Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

H.B. 1661	Thompson of Harris	<p>This bill proposed repealing all of Family Code 107, Subchapter D, titled Social Studies, and creating a new Subchapter E, titled Child Custody Evaluation, and a new Subchapter F, titled Adoption Evaluation. “Child Custody Evaluation” is a process ordered by a court. Evaluator would not be DFPS and would have access to all relevant records held by DFPS, including information confidential under HRC 40. “Adoption Evaluation” may be conducted by DFPS, depending on court’s order. Adoption evaluator also entitled to obtain confidential information under HRC 40.</p> <p>Identical to S.B. 1245 by Senator West, which did not pass and is included in this list.</p> <p>Last Action: 05/04/2013 House Considered in Calendars</p>
H.B. 1673	Perry	<p>This bill proposed amending Family Code Chapter 2, the chapter regarding marriages, and adding a new subsection 2.0105 that would require DFPS to prepare and provide family violence informational materials for marriage license applicants via all county clerks across the state. HHSC, rather than DFPS, has oversight of family violence programs.</p> <p>Last Action: 04-22-13 House Committee action pending House Judiciary and Civil Jurisprudence</p>
H.B. 1686	Farney	<p>This bill proposed amending Family Code 264 to require consultation between the child’s caseworker, attorney ad litem, guardian ad litem, and any court-appointed volunteer advocate for the child prior to change in placement (except when making an emergency placement that does not allow time for consultation).</p> <p>Similar to S.B. 425 (Nelson), H.B. 1681 (Raymond) and Section 1 of H.B. 1180 (Cortez).</p> <p>Last Action: 03-04-13 House Introduced and referred to Committee on House Human Services</p>
H.B. 2218*	Wu	<p>This bill proposed creating the Office of Independent Ombudsman to assist persons with complaints against DFPS regarding case-specific activities of the agency’s programs. The Governor would appoint the independent ombudsman and the office would be administratively independent from DFPS.</p> <p>Last Action: 04/23/2013 House Left pending in committee</p>

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

H.B. 2321	Parker	<p>This bill proposed amending the Family Code by adding a provision which would confer standing on a foster parent to file an original suit or to intervene in a suit affecting the parent child relationship (SAPCR) filed by the Department in six months if the Department has removed the child from the child’s home more than once.</p> <p>Last Action: 04/23/2013 House Committee report sent to Calendars</p>
H.B. 2374	Cortez	<p>This bill proposed bill amending the Health and Safety Code defining the abuse, neglect, and exploitation of recipients of home health services; creating an offense; providing penalties.</p> <p>Last Action: 03/11/2013 House Referred to Human Services</p>
H.B. 2773	Rodriguez of Bexar	<p>This bill proposed amending Section 102 of the Texas Family Code to require that a child be in a foster parent’s home for 12 months before a foster parent may intervene. It also proposed amending the section to require the continuation of the requirement that the court must determine that naming a parent as a managing conservator to the child would significantly impair the child’s physical health or emotional development.</p> <p>Last Action: Introduced and referred to Committee on House Judiciary and Civil Jurisprudence.</p>
H.B. 2774	Rodriguez of Bexar	<p>This bill proposed amending Section 102 of the Texas Family Code to add 102.0031 which states that a court may not permit a foster parent to intervene in a pending suit that involves the child unless the child has been in the foster parent’s home for at least 12 months. The committee substitute was vastly different in that it did not permit foster parents to intervene in a suit until 90 days after termination of parental rights. The timeframe means that all parental rights will be terminated AND any interested relatives will have an opportunity to intervene after termination before the foster parents are permitted to intervene.</p> <p>Last Action: Reported from Committee as substituted House Judiciary and Civil Jurisprudence.</p>

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

H.B. 2776	Rodriguez of Bexar	This bill proposed amending Sec. 102.006(c) of the Texas Family Code so that for 90 days after a termination of parental rights in a suit filed by DFPS a person related to the child within the 4th degree by consanguinity (blood relative) may file an original suit or suit for modification requesting managing conservatorship or adoption. DFPS would have to make efforts to locate and notify the relatives of the removal at removal and early in the case. Last Action: Committee action pending House Judiciary and Civil Jurisprudence.
H.B. 2844	Hernandez Luna	This bill proposed amending Section 162.302, Adoption Assistance Program (Texas Family Code), which currently states that it is the intent of the legislature that DFPS, in providing adoption services, when it is in the children’s best interest, keep siblings together and whenever possible place siblings in the same adoptive home by adding that there is a rebuttable presumption that removing a child from a home to place the child in another home with a sibling is not in the child’s best interest if the child has never resided or had significant prior contact with the sibling. Last Action: Introduced and referred to committee on House Judiciary and Civil Jurisprudence.
H.B. 2845	Hernandez Luna	This bill proposed amending Section 102.005 of the Family Code to state that a court shall grant a person who has standing leave to intervene in a suit affecting the parent-child relationship (SAPCR) filed by an authorized agency if the person’s motion to intervene includes a petition for adoption of the child. Last Action: 03/18/2013 House Referred to Judiciary & Civil Jurisprudence

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

H.B. 3399	Raymond	<p>This bill focused on placement stability for children in DFPS conservatorship. The bill proposed an amendment to the Family Code to require contracted substitute care providers to notify DFPS of a placement change. It required a placement tracking system to monitor placement changes with a focus on children with two or more placement changes during the preceding 12 months. There was no significant fiscal impact, as the data required for a monthly report is available through existing IT systems.</p> <p>Please note that a modified similar version of H.B. 3399 by Representative Raymond was amended to S.B. 534 by Senator West, which ultimately did pass.</p> <p>Identical to S.B. 1789 by Senator Uresti, which did not pass and is included in this list.</p> <p>Last Action: 05/13/2013 Senate Referred to Health & Human Services</p>
H.B. 3400	Raymond	<p>The bill would have amended the Family Code to require each entity to which reports of child abuse and neglect can be made to develop an anonymous reporting system. Reporters would receive a unique number or other identifier. The bill had a significant cost impact, as substantive changes to IMPACT are required.</p> <p>Last Action: Committee action pending House Human Services</p>
H.B. 3405	Raymond	<p>This bill proposed to exempt an emergency shelter providing services for children in the custody of the federal Office of Refugee Resettlement (ORR) to the list of childcare operations that are not subject to the mandatory license requirements generally applicable to persons operating a childcare facility of child-placing agency in Texas Human Resources Code Sec. 42.041(b). There was no fiscal impact on the agency.</p> <p>Last Action: Introduced and referred to Committee on House Human Services</p>

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

H.B. 3431	Dukes	This bill proposed amendments to the Family Code for guardians ad litem and court ordered services to address Foster Care Redesign. The bill attempted to define a Single Source Continuum Contractor (SSCC), as well as set contracting, monitoring, and auditing guidelines. Significant fiscal impact. Last Action: Introduced and 03/25/2013 referred to Committee on House Human Services
S.B. 419*	Zaffirini	This bill related to the creation of a reportable conduct central database for and health and human services agency investigations of alleged abuse, neglect, and exploitation violations and rights violations at certain facilities operated in this state, removed the exemption of licensed professionals to be listed on the Employee Misconduct Registry (EMR), required professional board reporting, and required DFPS to review personnel files in the course of an APS facility investigation. Last Action: 02/13/2013 Senate Referred to Health & Human Services

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

S.B. 424*	Nelson	<p>This bill proposed amending sections of the Texas Family Code regarding the administration and monitoring of psychotropic medications to children in DFPS conservatorship. Some of the provisions outlined in the bill include the following:</p> <ul style="list-style-type: none"> • ensuring that a youth’s transition plan includes provisions to assist the youth in managing medication usage after exiting foster care, including information that educates the youth about the use of the medication and information about the resources available to assist the youth in managing the medication, • requiring DFPS to notify the child’s parents of the initial prescription of a psychotropic drug or of any change in dosage of the drug at the first scheduled meeting between the parents and the child’s caseworker after the date the psychotropic drug is prescribed or the dosage is changed, and • requiring additional information added to Court Reports related to the non-pharmacological interventions that were tried before the child was prescribed a psychotropic medication, plans for discontinuing the medication, and the child’s prognosis with and without the medication. <p>Last Action: Introduced and referred to committee on Senate Health and Human Services.</p>
S.B. 429*	Nelson	<p>This bill proposed that before approving a dismissal or nonsuit of a suit to terminate the parent-child relationship filed by DFPS, the court must consider (1) whether the dismissal or nonsuit is in the child’s best interest, and (2) whether any orders for conservatorship, possession of or access to, or support of each child affected by the suit continue in effect after the dismissal or nonsuit. The bill also provides that before approving a dismissal or nonsuit the court may render an order for the conservatorship, possession of, or access to, or support of each child that will continue in effect after the dismissal or nonsuit.</p> <p>Identical to H.B. 1684 by Representative Raymond, which did not pass.</p> <p>Last Action: 06/14/2013 The bill was enrolled but vetoed by the Governor</p>

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

S.B. 728	Davis	<p>This bill related to the notification of certain legislators of the death of a child in foster care.</p> <p>Identical to H.B. 932 by Representative Turner, which did not pass and is included in this list.</p> <p>Last Action: 02/25/2013 Senate Referred to Health & Human Services</p>
S.B. 768	Uresti	<p>This bill proposed amendments to the Family Code relating to suits affecting the parent-child relationship. The bill would have changed procedures by which appointments of guardians and attorneys ad litem are made. The bill would have expended the grounds for the involuntary termination of parent-child relationships. The bill attempted to make technical corrections to sections of the Family Code dealing with case dismissals dates, as well as identification and notification of family members when a child is removed. No fiscal impact.</p> <p>Last Action: 05/22/2013 House Returned to Local & Consent Calendars Comm.</p>
S.B. 980	Davis	<p>This bill related to the creation of the individual development account program to provide savings incentives and opportunities for certain foster children to pursue home ownership, postsecondary education, and business development.</p> <p>Identical to H.B. 445 by Representative Dukes, which did not pass and is included in this list.</p> <p>03/12/2013 Senate Referred to Health & Human Services</p>
S.B. 1119*	West	<p>This bill proposed amending Human Resources Code 42 to change minimum standards for staff-to-child ratios for nonresidential, lowering the ratios to:</p> <ul style="list-style-type: none"> • one staff member per nine children who are 2 years of age; and • one staff member per 14 children who are 3 years of age. <p>Last Action: 03-12-13 Senate Introduced and referred to Committee on Senate Health and Human Services</p>

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

S.B. 1245	West	<p>This bill related to child custody evaluations and adoption evaluations conducted and testimony provided in certain suits affecting the parent-child relationship; providing penalties; authorizing fees.</p> <p>Identical to H.B. 1661 by Representative Raymond, which did not pass and is included in this list.</p> <p>Last Action: 03/13/2013 Senate Referred to Jurisprudence</p>
S.B. 1402	Carona	<p>This bill proposed amending the Family Code to provide that the records a prospective adoptive parent would have the right to examine include any records in which the child was “an alleged or confirmed” victim of sexual abuse while residing in a foster home or other residential childcare facility.</p> <p>Last Action: 05/21/2013 House Placed on General State Calendar</p>
S.B. 1748	Uresti	<p>This bill related to employee caseload standards for child and adult protective services and Child Care Licensing services and call processing standards for certain of those services.</p> <p>Identical to H.B. 304 by Representative Walle, which did not pass and is included in this list.</p> <p>Last Action: 03/25/2013 Senate Referred to Health & Human Services</p>
S.B. 1758*	Uresti	<p>This bill amended Government Code 531 by creating a new Subchapter X entitled “Task Force to Examine Child Protective Services Hiring and Management Practices”. The task force was to examine hiring and management practices, develop policy recommendations, and to design a comprehensive performance-based compensation and recognition system with the goal of increasing retention and reducing turnover of caseworkers.</p> <p>Last Action: Set on the House Calendar</p>
S.B. 1788	Uresti	<p>This bill proposed adding new duties to the Council on Children and Families and creates a new committee to advise the Council on child abuse prevention.</p> <p>Last Action: 03/25/2013 Senate Referred to Health & Human Services</p>

Department of Family and Protective Services

Exhibit 12: 83rd Legislative Session Chart

Legislation Enacted – 83rd Legislative Session

S.B. 1789	Uresti	This bill related to the stability of placements for children in the conservatorship of the Department of Family and Protective Services. Identical to H.B. 3399 by Representative Raymond, which did not pass and is included in this list. Last Action: 03/25/2013 Senate Referred to Health & Human Services
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IX. MAJOR ISSUES

Brief Description of Issue

Issue #1: How should Child Protective Services in Harris County be structured and administered to ensure optimal outcomes for children and families?

Discussion

The population and size of Harris County present unique challenges to CPS. In addition, outcomes in Harris County are often below the state average. Any effort to improve CPS in Harris County will need to take Harris County's unique characteristics into consideration.

Harris County, in Region 6, has the largest child population of any county in Texas. Harris County contains 17 percent of the children living in Texas and 16 percent of all children in CPS State custody at the end of the year. As a result, outcomes for children and families involved with CPS in Harris County significantly affect CPS outcomes for the state overall.

Harris County children stayed in CPS state custody about six months longer than children in the state overall (an average time to exit of 28 months compared to 22 months in the state overall).

This disparity exists for virtually every type of exit from care and across all 12 courts that hear CPS cases in Harris County.

Exits from State Conservatorship in FY 2012

Types of Exits	Number		Percent		Months	
	Harris	State	Harris	State	Harris	State
Reunification	663	5,873	26%	33%	17	13
Permanency Care Assistance with a relative	47	530	2%	3%	21	25
Relative as Permanent Managing Conservator	655	4,605	26%	26%	17	13
Relative Adoption	482	2,358	19%	13%	33	26
Non-Relative Adoption	460	2,682	18%	15%	36	32
Age out	218	1,363	9%	8%	64	58
Other	39	214	2%	1%	15	15
Total Exits	2,564	17,625				

At the end of 2012, 38 percent of Harris County children in state custody had been there two or more years as compared to 25 percent in the state overall.

Extended stays in state custody can be both problematic for the child and expensive. In Harris County, 62 percent of the children in state custody are in paid foster care, which costs the State

an average of about \$1,800 per month and totals more than \$10,000 for every child who stays in paid foster care an extra six months. With more than 4,400 children from Harris County in foster care during the year, the costs quickly add up.

Given the pervasiveness of the problem, the child welfare system in Harris County must be structured in a way that supports ensuring timely permanency on the front end.

Possible Solutions and Impact

Restructure the Child Welfare System in Harris County

Historically, CPS has treated Harris County like any other county – part of a geographic region with a regional director covering all the different counties. CPS allocates the region staff and resources, and regional management largely determines the staff and resource allocation among the various counties in the region.

Harris County, however, is not a typical county, as it is one of only a few counties in the nation that have more than one million children in its population — a number that surpasses many states. The next largest county in Texas is Dallas County and its child population is almost half that of Harris County. In addition to a large child population, Harris County covers a relatively large geographic area. In square footage, Harris County is as big as Dallas and Tarrant Counties put together.

CPS also has a unique relationship with Harris County in that there are both State CPS offices and a county-administered child welfare agency. The state CPS staff in Harris County perform the same functions as CPS state staff in other counties. The Harris County child welfare agency provides support services to enhance the efficiency of the State CPS program, and provides direct services to children in CPS State custody.

Unfortunately, no existing model seems to be achieving optimal results. National data compiled by Casey Family Programs shows that “super counties” (Los Angeles, Cook [Chicago], Harris, as well as the five boroughs that comprise New York) all struggle with timely permanency and have a relatively high rate of children in care more than two years. As a result, Texas may need to construct a new model for how the child welfare system should be structured and operated in Harris County. This will require a comprehensive evaluation of how to most effectively structure Harris County CPS regional management, staff, case management processes, procurement of services for children and families and coordination with the services offered by the county administered child welfare agency.

To improve outcomes, DFPS must also examine other components of the child welfare system such as the courts, attorneys, and service providers, as well as ways to improve case assignment and docketing in courts, relationships with attorneys and CASAs, availability of foster care placements, and community support of children and families.

Authorize Harris County to Create a Child Abuse and Neglect Division within Its District Courts

Courts play a vital role in the child welfare system. Once CPS removes a child, the court is the ultimate arbiter of what happens. Complying with court requirements (attending hearings, writing court reports, etc.) takes up a substantial amount of caseworker time. In Harris County, CPS cases are distributed across 12 different courts and 24 different judges (with each court having a district and associate judge who can hear CPS cases). This makes attending court more time consuming for caseworkers in Harris County, as they often have hearings scheduled in multiple locations on a given day, leaving them less time to be in the field with children and families.

To increase efficiency for the judges, caseworkers, attorneys and families, the Legislature may consider creating a new subchapter in the Texas Family Code that authorizes counties with more than 1,000,000 children to create a child abuse and neglect division of district courts to hear all CPS cases. The Texas Family Code sections authorizing the Family Drug Court Program could serve as a statutory guide and model.

The structure of this child abuse and neglect division could be modeled on the Los Angeles County Children's Court. In Los Angeles, one dedicated courthouse hears CPS cases and its waiting rooms and courtrooms are child and family friendly. This courthouse also has a childcare facility with staff that transport children to and from court and monitor visits with parents after the court hearing.

Allow CPS Caseworkers to be On Call for Uncontested Court Hearings where CPS has a Court Liaison

To help manage the court process in Harris County, CPS currently has court liaisons assigned to and physically located in some of the courtrooms that hear CPS cases. Despite the court liaisons, caseworkers (and often supervisors) still attend hearings in these courts. Attending these hearings takes up a significant amount of a caseworker's time, giving them less time to spend in the field with children and families. As caseworkers must prepare and submit a detailed report about the child and family before every court hearing and most hearings are not contested, the caseworker's presence often adds nothing of substance to the hearing.

To help maximize the amount of time caseworkers have to spend in the field with families and children, the Legislature could authorize caseworkers with a case in courts with a dedicated CPS court liaison to be on-call, unless the hearing is contested. If a judge or a party needs information at an uncontested hearing that is not in the court report, the CPS court liaison could contact the on-call caseworker to obtain the information.

Brief Description of Issue

Issue #2: What can be done to improve the quality and consistency of legal representation in CPS suits?

Discussion

The quality of legal representation in child welfare cases varies from county to county throughout the state, leading to inconsistent legal outcomes that can negatively affect a child's safety and permanency. Moreover, inconsistency in the drafting of legal pleadings and judicial orders threatens the State's ability to receive federal reimbursements for the costs of foster care that are dependent, in part, on whether or not a court order contains certain child-specific findings required by Title IV-E of the Social Security Act. In many crucial ways, the courts shape the lives of foster children. The courts decide whether or not the parent-child relationship will be terminated, and where and by whom the child will be raised. Consistency in legal representation for DFPS is essential to ensure that judges making these life-altering decisions have the necessary evidence and legal arguments before them to make sound decisions.

Currently, county and district attorneys have the primary responsibility for legal representation of the Department. However, if the county or district attorney is unable to represent the Department due to a conflict-of-interest or "special circumstances," the Office of Attorney General (OAG) has responsibility to represent the Department. If the OAG is unable to represent the Department, the OAG deputizes a DFPS-employed attorney or a contracted attorney.

In practice, when the county and district attorney decline to represent the Department for any reason, the OAG routinely authorizes DFPS attorneys to perform this function. At present, DFPS has primary responsibility for representation in 125 counties, and shares responsibility with local prosecutors in another 16 counties. DFPS handles the representation in other counties on a case-by-case basis, such as when a prosecutor identifies a conflict-of-interest that would prevent the prosecutor from handling a particular case in that county. Also, in counties that generally provide DFPS representation at trial, DFPS may handle an appeal when the county lacks the expertise to handle civil appellate matters.

In the various county and district attorneys' offices a substantial difference exists between the resources, experience level, and subject-matter expertise available to represent the Department in child welfare cases. The result is that DFPS receives very competent representation in some counties and less competent representation in others. Additionally, a significant number of counties decline representation under the "special circumstances" provision. While DFPS attorneys have the experience and expertise to provide competent representation, Department resources can be suddenly strained if a county decides to stop representation with little or no warning.

This situation was even more problematic before the 1996 Sunset Advisory Commission first looked at the issue. In its 1996 report, the Commission made recommendations to address this issue. However, the resulting legislation created the current overlapping responsibility for representation described above. Although the statutory clarification resulting from the previous Sunset Report improved representation in some respects, the current patchwork of representation throughout the state creates multiple risks to DFPS in accomplishing its mission. Additionally, the current structure jeopardizes federal Title IV-E funding when court orders do not uniformly contain the required elements.

Possible Solutions and Impact

Below are two steps that the Legislature could take to improve the quality and consistency of representation in child welfare cases.

- Prohibit a county from suddenly declining to handle representation without sufficient advance warning. This would give the state sufficient time to identify additional resources to competently assume the workload and ensure an orderly transition of cases to a department attorney.
- Prohibit counties over a certain population threshold to “opt out” of representation by citing special circumstances, but allow smaller population counties to continue to do so.

Regardless of county size, there will continue to be a need to refer some cases to the OAG (which will likely continue to delegate to the Department) based on a genuine conflict of interest that may exist in certain individual cases. The solutions listed above, if carefully crafted, would achieve the following results.

- Largely preserve the existing mix of county and state representation but could result in some realignment of resources between the counties and the state.
- Remove the uncertainty and grave risk that could result if a large county were to suddenly decline to handle representation.

In addition, to address vital concerns relating to the maximization of federal funds to Texas, the Legislature may consider amendments that require the legal representative consult with the Department to ensure legal representation is accomplished in a manner that complies with Title IV-E of the Social Security Act.

Brief Description of Issue

Issue #3: How can DFPS improve intakes of reports of abuse, neglect, and exploitation and other inquiries?

Discussion

Statewide Intake (SWI), commonly known as the Texas Abuse and Neglect Hotline, is one of the largest contact centers of its kind in the nation. When hold times are long, more callers hang up. A number of opportunities exist for DFPS to streamline, simplify, and standardize intake functions by changing the responsibilities, organization, and management of SWI. There are also opportunities to fully utilize the presence of a 24/7 operation in supporting field staff. Statewide Intake (SWI), a sub-division of the DFPS Operations Division, is the “front door” for all DFPS programs. SWI handles all intakes of abuse, neglect, or exploitation reports and then routes information to the appropriate program’s local office for investigation. SWI is the starting point for all abuse, neglect, and exploitation investigations.

The Legislature has funded SWI to meet the Legislative Budget Board measure of 8.7 minutes (+/- 5%) average hold time for the English telephone queue at the SWI call center. SWI fielded 773,577 calls in the English Queue in FY 2012.

In Fiscal Year 2012, the average hold time for the English queue was 8.5 minutes and the abandonment rate was 29.8 percent. Abandonment rates are dependent on hold times. Abandoned calls decline as hold times decrease. SWI is not able to determine if those who abandon a phone call eventually call back or use the E-report system to make a report. In FY 2012, SWI processed 116,594 internet reports (E-reports), which was an increase of 10 percent from FY 2011. Internet reporting began in 2002 and the system was last upgraded in 2008. The E-report site allows reporters to meet their obligation to submit non-emergency reports with no phone hold time. Additionally, intake specialists are able to process E-reports more efficiently than reports received by phone. However, the online reporting site has a number of limitations that could be addressed by a redesign.

SWI calls out emergency intakes to investigative field staff after normal business hours and on weekends and holidays. The investigators then usually contact their on-call supervisor for guidance on the case and to let them know where they are going for safety purposes. The investigator must consult with a supervisor before acting to remove a child from their home or pursuing any legal action in an APS case. This process means program supervisors must be on-call and available to staff statewide throughout nights, holidays, and weekends, which contributes to stress and burnout.

Possible Solutions and Impact

Call Abandonment Rates

SWI could reduce abandoned calls to the Texas Abuse and Neglect Hotline if DFPS were able to reduce average hold times to five minutes or less on the English queue, instead of 8.7 minutes. Under this scenario, abandonment rates would likely drop to 20 percent or less. House Bill 304, introduced during the 83rd Legislative Session would have mandated five minute average hold times for SWI. DFPS estimated that it would require an additional 67.75 new intake specialists (FTEs) to reach the five minute average hold time for fiscal years 2014-15. Increasing the utilization of e-reporting would likely reduce the number of new specialists needed to reach a five minute average hold time.

Redesign the Internet Reporting System

Use of the Texas Abuse and Neglect Hotline website is increasing steadily. However, as more and more people file reports of abuse and neglect online, the limitations of the website are magnified. The e-report system and all its users (primarily professional reporters) would benefit from a redesign to improve reliability, performance, ease of use, and support more types of devices (such as smart phones). A complete redesign of the system will require a significant investment of time and money which may benefit if added to DFPS' four-year IMPACT modernization project.

Explore Technology Solutions to Route Cases from SWI to Direct Delivery Units

While DFPS regional offices are open (hours vary), SWI sends completed intakes to a regional router. After hours, emergency (Priority 1) intakes are sent to on-call investigators. Each DFPS program (Adult Protective Services, Child Care Licensing, and Child Protective Services or APS, CCL, and CPS) has a designated router for each of the 254 Texas counties. Some routers cover more than one county and are administrative staff with other duties besides routing. It may be possible to use technology that considers factors such as tenure, caseload, geographical location, and leave status to simplify the routing process and equalize the workload.

Centralize Overnight Supervisor Support for Investigative Field Staff at SWI

Rather than keeping program supervisors on call nights, weekends and holidays all over the state, it may be more efficient for SWI to house (on-site or through telework) qualified program supervisors who could be available to staff statewide to coordinate after-hours intakes. These SWI supervisors would need the same education, experience, training, and skills as current program supervisors.

This change would relieve the burden on field supervisors but there are obstacles to recruiting a sufficient number of qualified supervisors to work primarily non-routine schedules, as well as concerns on worker safety and local unit cohesion. Centralized supervisors would need to be trained on best practices for worker safety, accessing resources, and assessing both the situation and the investigator's skills and needs. If pursued, it may be best to begin with a pilot for one or more DFPS regions where supervisory support is over-stretched.

Brief Description of Issue

Issue #4: What changes would help DFPS keep siblings in foster care together and close to home?

Discussion

Child Protective Services (CPS) strives to keep sibling groups together and in their communities when they must be removed from their homes. However, sometimes CPS is unable to find a foster home with enough capacity to keep a sibling group together and close to home. When this happens, siblings are placed in different foster homes, which may be a considerable distance from each other and from their parents' home. Often, this means children must change schools and leave familiar surroundings behind. A child-placing agency can ask Residential Child Care Licensing (RCCL) for a variance from minimum standards (authorized in rule) to keep children together in a placement in certain circumstances. However, RCCL cannot under any circumstances amend or waive the following statutory definitions and requirements.

The Human Resource Code, Section 42.002 (6), defines a *foster home* as "a child-care facility that provides care for not more than six children for 24 hours a day." This statutory definition strictly limits a foster home to having no more than six children living in the home and RCCL does not have authority to issue a variance. Human Resources Code, Section 42.002 (5) also defines a *foster group home* as "a child-care facility that provides care for seven to 12 children for 24 hours a day". However, challenges exist for CPS in using foster group homes, as currently defined, as this type of placement is generally considered an institutional setting rather than a "least restrictive" setting, particularly if the staff work shifts rather than act as "live-in" foster parents. As a result, sibling groups may be separated when foster homes, which are statutorily restricted from providing care for more than six children, are not available to accommodate the sibling group.

Foster homes and foster group homes are both required to follow minimum health and safety standards, although there are a few additional requirements for foster group homes to mitigate risks associated with having seven to 12 children in one home. For instance, there are risks associated with providing appropriate overall supervision, ensuring individualized attention to each child's specific needs, and managing stress when caring for large numbers of children in a foster group home. Therefore, a statutory limit restricts the number of children under age 5 in the home, and requires additional caregivers in group homes as opposed to foster homes.

The service level needs of each individual child are considered when making placement decisions. If a child has a specific need for a service, such as supervision or medical oversight, that service is provided despite the number of other children in the same placement.

Possible Solutions and Impact

Amend statute to allow a child-placing agency the opportunity to request a variance to allow more than six children to live in the foster home. This change would afford RCCL the ability to assess the agency's request to ensure any risk factors are mitigated. In addition, RCCL could place conditions on the variance to provide additional safeguards beyond what is required under minimum standards. This flexibility would facilitate sibling group placements closer to their family and community while maintaining RCCL's regulatory oversight to ensure risk factors are addressed. Conditions on the variance could also include increased child placing agency oversight or involvement with the placed sibling group.

Amend statute to add a definition of a foster home specific to sibling groups. This definition would specify that a foster home can exceed the capacity of six children living in the home to accommodate a sibling group within 50 miles of the children's home community. As part of this change, statute could also be amended to specify that RCCL may impose certain conditions to address risk factors. For example, conditions could include a time limit for exceeding capacity, not allowing more than three children under age 5 be placed in the home, and requiring the child-placing agency to make additional visits to the home to ensure the health and safety of the children and support the needs of the foster parents.

These proposed solutions would not result in a fiscal effect on RCCL, although they would result in minor fiscal implications to child-placing agencies, depending on conditions placed.

Brief Description of Issue

Issue #5: How can Adult Protective Services target services to reduce future harm?

Discussion

Caretakers and family members of Adult Protective Services (APS) In-Home clients may need services to reduce the risk of future abuse, neglect, or exploitation. However, APS lacks the statutory authority to provide caretakers such services unless there is a finding that abuse, neglect, or exploitation has already occurred. By comparison, Child Protective Services has the authority to provide services whether abuse has occurred or not.

Adult Protective Services is in the process of designing new assessment tools for In-Home cases. These tools will allow APS caseworkers to target protective services to victims of abuse, neglect, and exploitation who are at moderate or high risk of being abused, neglected, or exploited again in the near future. The Assessment and Decision Making project centers around three assessments that are designed to help caseworkers make better decisions at critical points in a case: the Safety Assessment; the Risk of Recidivism Assessment; and the Strengths and Needs Assessment. The Safety Assessment helps caseworkers identify immediate threats to health and safety. The Risk of Recidivism Assessment is an actuarially validated tool used to determine the likelihood that an alleged victim will be reinvestigated by APS within the next 12 months. The Strengths and Needs Assessment helps caseworkers identify both the strengths and needs of alleged victims and their primary caretakers, which informs service planning.

Texas Human Resources Code §48.002(5) defines protective services as “the services furnished by the Department or by a protective services agency to an elderly or disabled person who has been determined to be in a state of abuse, neglect, or exploitation or to a relative or caretaker of an elderly or disabled person if the department determines the services are necessary to prevent the elderly or disabled person from returning to a state of abuse, neglect, or exploitation.”

This law restricts APS to providing services only if it determines abuse, neglect, or exploitation has occurred. An APS investigation may find that an alleged victim has not yet experienced abuse, neglect, or exploitation, but it may reveal that the client could greatly benefit from protective services to prevent future abuse, neglect, or exploitation. With the changes to the In-Home practice model brought on by the Assessment and Decision Making project, APS will have the information needed to target services to alleged victims, their families, and their caretakers based on safety needs and risk of recidivism, regardless of the finding of the investigation.

Providing risk-based services alone is not unprecedented. Child Protective Services (CPS) has the ability to provide services to families without determining abuse or neglect occurred. In child welfare, this concept is called differential response. CPS currently has a limited

differential response system and is now in the process of implementing a more comprehensive version which will be referred to as “Alternative Response.” Nationally, a growing body of evidence exists indicating that differential response is cost effective, reduces recidivism, creates more positive relationships between the caseworker and the families, and improves job satisfaction for caseworkers. Senate Bill 423, 83rd Legislature, Regular Session, provides statutory authority to implement CPS’s Alternative Response for certain reports of abuse and neglect, and the Legislature approved an exceptional item request for associated automation changes.

Possible Solutions and Impact

Amend statute to allow APS to provide services based on safety needs and risk of recidivism. This change would grant APS the statutory authority to provide protective services to clients, as well as their families and caretakers, who need these services to prevent future harm. Other opportunities to further align statute with the Assessment and Decision Making practice model may also be identified.

Brief Description of Issue

Issue #6: How can the Department of Family and Protective Services work with other agencies, stakeholders and families to prevent child fatalities due to abuse and neglect?

Discussion

DFPS, specifically Child Protective Services (CPS), is responsible for intervening and potentially preventing child fatalities due to abuse and neglect. This work is equally important for the impact it has on reducing serious injuries that can have a life-long impact on a child's quality of life.

Reducing and preventing child fatalities requires comprehensively addressing child abuse and neglect. Recognizing that child fatalities are a community-wide concern, CPS actively collaborates with the Health and Human Services Commission, external review groups, prevention and early intervention service providers, and various stakeholders to continue to improve outcomes for children. DFPS also focuses on continuous prevention services, enhancing processes designed to quickly serve families who are in need before they are in crisis; giving families knowledge and resources to address concerns; and using processes that will reduce future risk of harm and the likelihood of abuse.

Additionally, it is critical to leverage information between various agencies in Texas such as CPS, law enforcement, medical examiners, the Department of State Health Services, and child fatality review teams. This helps each group to target and reduce fatalities due to specific causes, recognize or identify trends in child fatalities, and use data to highlight random or systemic issues that can be addressed to keep children safe.

Senate Bill 66 (83rd Legislature) created the Protect Our Kids Commission to study the relationship between CPS, child welfare services, and the rate of child abuse and neglect fatalities. The Commission may make recommendations that affect DFPS policy, best practices, and protocol.

Areas likely to have recommendations include:

- direct delivery casework;
- child fatality data collection and review;
- case reviews;
- stakeholder involvement; and
- prevention and intervention.

The Commission will develop recommendations and identify resources necessary to reduce fatalities from child abuse and neglect that can be implemented at the local and state level. The Commission's findings and recommendation will be available by December 1, 2015.

Possible Solutions and Impact

Prevention Continuum: Designate Permanent Funding Source

High-risk families, especially those with mental health, substance abuse, and domestic violence concerns, can benefit from prevention and early intervention services in their community. Also, one of the highest risk groups for child abuse and neglect are children under the age 5. Research suggests a strong correlation between publicly funded prevention services and childcare resources and prevention of child abuse and neglect. By providing services before child abuse or neglect occurs, families are able to address high-risk concerns that would otherwise significantly affect the child and require a more extensive intervention by DFPS and other state agencies such as medical services, juvenile justice, corrections, and court systems. Funding for such prevention and intervention services is vulnerable, as it has no dedicated, permanent funding source.

Addressing Child Fatalities from Physical Abuse/Shaken Baby Syndrome

While Texas has addressed Shaken Baby Syndrome in the Health and Safety Code (Texas Health and Safety Code §161.501 - Resource Pamphlet and Resource Guide Provided to Parents of Newborn Children), this section only requires the hospital or medical caregiver to provide a resource pamphlet and information on preventing Shaken Baby Syndrome. However, many parents who may be illiterate, have low functional literacy, or who may comprehend information best through audio/visual means may not be getting the message about postpartum depression or perinatal depression and the dangers of shaking infants.

Various stakeholder groups have suggested a more comprehensive plan to address child fatalities (or serious injuries) that involve physical abuse and Shaken Baby Syndrome. By creating a comprehensive plan to address Shaken Baby Syndrome, child fatalities that occur due to a one-time loss of control by the parent can be diminished. By providing the parent, family and general public with information and education on associated triggers, ways to address the infant's needs without aggression, and available local supports that the parent can turn to in time of crisis, child fatalities and general child abuse and neglect can be avoided.

Suggestions include legislation that:

- Instructs the Department to identify evidence-based models for reducing the incidence of abuse-related head trauma of infants, and develop a plan for implementing a model or models statewide to improve infant health outcomes.
- Requires collaboration between CPS, other state agencies serving families, and children, the medical community, law enforcement, human service providers, and child advocacy organizations to develop and implement a comprehensive, statewide initiative to reduce death and disability resulting from Shaken Baby Syndrome.

- Requires every licensed nurse midwife, licensed midwife, or hospital providing maternity care to make information available to mothers (and if possible fathers and other family members) about postpartum blues and perinatal depression and information to increase awareness of Shaken Baby Syndrome and the dangers of shaking infants. Medical professionals would also be required to discuss this information with the mother and the father of the infant, other relevant family members, or caretakers who are present at discharge. This information should include printed and audiovisual materials relating to Shaken Baby Syndrome, including identification and prevention of Shaken Baby Syndrome and the effect on babies such as:
 - the grave effects of shaking or throwing an infant or young child;
 - appropriate ways to manage crying, fussing, or other causes that can lead a person to shake or throw an infant or young child; and
 - a discussion of ways to reduce the risks that can lead a person to shake or throw an infant or young child.
- Requires Shaken Baby Syndrome instruction in correctional facility education programs for all inmates that covers the consequences of Shaken Baby Syndrome and how to prevent it.
- Requires Shaken Baby Syndrome instruction as part of an education program available to all students enrolled in life-skills or parenting classes.

Expand the Scope of the Child Safety Check Alert List

The Texas Family Code directs the Texas Department of Public Safety to use a child safety check alert list as part of the Texas Crime Information Center to help locate a family for purposes of investigating a report of child abuse or neglect (Texas Family Code § 261.3022 Child Safety Check Alert List). This law applies when CPS is unable to find and has exhausted all means to locate a family in an investigation.

When a law enforcement officer meets (1) a person on this list who is alleged to have abused or neglected a child or (2) a child who is the subject of a CPS investigation, the officer must seek information about the child’s wellbeing and current residence and inform CPS. The child safety check alert list only includes current CPS investigations and not ongoing stages of service where CPS is working with the family and the child may or may not be in the conservatorship of the State. During these stages of service, CPS may also be unable to find the child or family and may have severe safety concerns for the child’s wellbeing. Legislatively expanding the Child Safety Check Alert List to cover all stages of service would improve CPS’s ability to find these families and assume the safety of more children.

Strengthen Reporting of Child Deaths to Medical Examiner’s Office

The Texas Family Code requires a person who knows of the death of a child younger than age 6 to report the death to the medical examiner or to a justice of the peace. However, there is an exception if the death is a result of a motor vehicle accident. (Texas Family Code §264.513 Report of Death of Child).

Several stakeholder groups and research suggest legislation to require an autopsy for any child 6 years or younger, regardless of the cause of death, if the death was:

- the result of trauma;
- unexpected - including sudden, unexplained infant death; or
- suspicious, obscure, or otherwise unexplained.

These same guidelines for unexplained deaths should apply to all children, including those with chronic diseases. Exceptions would include deaths due to known terminal medical conditions that were not caused by abuse or neglect, or children who were under hospice care. Expanding this definition could result in autopsies that reveal abuse and neglect that would have been missed. Results that suggest child abuse and neglect would be reported to CPS and investigated. These investigations would help protect surviving siblings and help with ongoing efforts to prevent child fatalities.

Expanding Child Fatality Review Teams (CFRT).

The Legislature created the State Child Fatality Review Team Committee in 1995. The law also authorized counties to form local and regional child fatality review teams (Texas Family Code §264.501 - §264.515). A CFRT is a multi-disciplinary, multi-agency panel that reviews all child deaths regardless of the cause of death. The purpose of a review team is to:

- decrease the incidence of preventable child deaths by providing assistance, direction, and coordination to investigations of child deaths;
- promote cooperation, communication, and coordination among agencies involved in responding to child fatalities;
- develop an understanding of the causes and incidence of child deaths in team's county or counties;
- recommend changes to agencies (through the agency's team member) that will reduce preventable child deaths; and
- advise the committee on changes to law, policy, or practice that will assist the team and the agencies represented on the team in fulfilling their duties.

Currently, statute permits counties to form CFRTs instead of mandate that every county in Texas have or be included in a CFRT. Also, child fatality review teams lack state funding. As of 2013, only 191 counties out of the 254 counties in Texas were covered by a CFRT. By requiring every county to participate in a CFRT, every child fatality in Texas would have the potential to be reviewed which could provide vital information on how to decrease child fatalities. However, this level of coverage would require dedicated state and local funding to address the volume of child fatalities in some counties, as well as ensure proper data collection and analysis.

Brief Description of Issue**Issue #7: What can be done to move children in DFPS conservatorship into safe, permanent homes more quickly?****Discussion**

There are several areas where additional resources, supports, or legislative changes would help DFPS achieve permanency and improve outcomes for children and youth in State care. These include reducing the length of time it takes for a child to be reunified with their family, increasing support to adoptive families and reducing the time it takes to identify and place children and youth in adoptive homes. While DFPS has improved policies, practices, and services to reunify children with their families more quickly, move children to permanency, or prepare youth for life after foster care, more must be done to reduce the length of time before a child is reunified or goes to a permanent family. Such changes ultimately reduce the number of youth who grow up in foster care. DFPS believes all children deserve a legal, permanent family.

Children should remain in their communities if they are removed from their home and placed into a foster home or facility. This increases the likelihood of reuniting families, and improves educational outcomes and overall wellbeing. Conservatorship should be returned to parents as soon as child safety and well-being can be assured.

National research shows youth who grow up in foster care without permanent families and community connections are more likely to live in poverty, be unemployed, become homeless, have untreated serious medical and mental health issues, and become involved in the criminal justice system.

Adoption is a valuable opportunity for children when DFPS and the courts rule out family reunification. While Texas leads the nation in adoptions, there were still 6,452 children in DFPS care waiting for adoption as of June 2013. Adoption assistance is available to eligible adoptive families. To qualify for adoption assistance, a child must meet the criteria of special needs as defined by TAC RULE §700.804. This includes minority children over the age of two, non-minority children over the age of 6, any child being adopted with a sibling or joining a sibling who was previously adopted by the same parents, and children who have a verifiable physical, mental, or emotional handicapping condition, as established by an appropriately qualified professional. Adoption assistance has two tiers. Adoptive families can receive up to \$400 a month for a child who has a basic service level need and up to \$545 per month for a child who has a moderate or higher service level need. Even with adoption assistance, it is often a struggle to find permanency for some children because of their significant needs and history of trauma.

Possible Solutions and Impact

Provide Adoption Assistance to Every Child Who is Adopted From DFPS

While approximately 90 percent of all adoptive placements involve children who are eligible for adoption assistance, under current Texas law not all children qualify for adoption assistance. Many families cannot afford the medical insurance and other financial strains of caring for a child. As a result, adoption is often delayed until the caregiver can afford it. When children do not meet the criteria for adoption assistance, this can cause caregivers and others to delay permanency until a diagnosis can be made, or to delay permanency until the child is old enough to qualify. Provision of adoption assistance to every child adopted from DFPS would help offset costs for adoptive families and is far less expensive than long-term foster care. This change would result in positive outcomes that could help reduce the child or youth's need for public services in the future. Providing adoption assistance to every adopted child would also expedite permanency and decrease the amount of time the child spends in foster care. The average monthly cost of an adoption subsidy is \$430 or about \$1,500 less per month than the cost of foster care which averages \$1,937 per month.

Allow Parental Rights to Be Reinstated

Most children whose parents lose parental rights are adopted or achieve permanency with other relatives. Yet in some cases, DFPS reconnects children and youth with birth parents whose parental rights were terminated if it is **safe** and in the child's best interest. Sometimes the threat that originally required the child's removal and eventual termination of the parents' rights no longer exists. However, statute is silent on this issue and does not allow a court to reinstate parental rights, leaving the only legal option to name the parent permanent managing conservator. Some jurisdictions in Texas use this practice regularly, but others do not. Clearly defining this practice in statute would raise awareness of this permanency option. Other states successfully use this option.

Provide Flexibility to the Court During the Monitoring Period When A Child Or Youth Is Returned Home

Currently the Texas Family Code §263.403 allows a court to monitor a family for 180 days after a child or youth returns home. However, this is often interpreted to mean the case must remain open for the full 180 days. Statute could be clarified to ensure DFPS's involvement lasts no longer than absolutely necessary to ensure the safety and well-being of the child. One way to do this is to require a 90-day review of the case that is in the return-and-monitor stage, allowing DFPS to assess the need for continued involvement and make recommendations on ending or continuing court oversight. For those families who do not need extended court oversight, conservatorship of their children would be returned more quickly.

Increase the Number of DFPS Redaction Staff

An adoptive family must read the child's CPS case record before the child is placed in the home, which includes all records related to the child, as defined in Section 162.006 of the Texas Family Code. First, DFPS must redact these files to exclude confidential information, as required by Section 162.006 and 162.0065 of the Texas Family Code. Currently, DFPS redaction units have a six-month backlog. Additional redaction staff and technology would decrease the time a

prospective adoptive parent must wait to read the record and reduce the time the child must spend in paid foster care while waiting to enter an adoptive home.

Increase Foster Home Capacity In The Communities Where the Children Are Removed

Children who remain in their own community have an increased opportunity for family visitation, improving the likelihood of family reunification, allowing children to remain in their school, and providing more stability in therapy and other services. The Foster Care Redesign project focuses on these issues, however other efforts will be needed until the Project's statewide implementation.

Some solutions to increase foster care capacity are as follows.

- Collaborate with faith-based organizations and local schools districts to increase the number of foster homes. CPS currently works with members of the Advisory Committee on Promoting Adoption of Minority Children to increase adoption of children; the committee was established by statute. Subsequent community-based adoption forums resulting from that partnership were held, as a result, raising awareness and interest in not only adoption, but child welfare work from prevention to permanency. Presently, there is active work in various stages with more than 70 churches building support for families and children involved with CPS. Efforts include support for children at risk of entering care through transitioning services for youth exiting care.
- Increase availability of wraparound services that provide a family-centered, strengths-based approach to working with children and families where multiple agencies provide community-based services. The overall intent of this is to increase intervention services in the community for access by families in order to prevent abuse/neglect or to assist families as they complete CPS contracted services. More resources across the state would include services such as additional county family preservation programs, legal services, transitional living centers for youth and parents in recovery or re-entry from correctional facilities, day care services, church affiliated parenting programs, vouchers for public transportation, sliding-scale fee counselor and therapy services, etc. These services are usually not available in rural areas of the state. Increased availability of such resources would help children and youth who age out of foster care and return to the community or a kinship caregiver's home. The change would also assist with recidivism by giving families knowledge of and access to community resources to assist them with specific needs. Many times these services target children who have many complex behavioral and mental health issues.
- Increase the availability of community respite care. Community respite care provides parents and caregivers with short-term childcare services that offer temporary relief, improve family stability, and reduce the risk of abuse or neglect. Respite care can reduce the number of families that become involved with DFPS. It is a family-centered, strengths-based alternative to foster care and allows a family to identify their own needs and seek resources to address those needs.

X. OTHER CONTACTS

A. Fill in the following chart with updated information on people with an interest in your agency, and be sure to include the most recent e-mail address.

Department of Family and Protective Services			
Exhibit 13: Contacts			
INTEREST GROUPS			
(groups affected by agency actions or that represent others served by or affected by agency actions)			
Group or Association Name/ Contact Person	Address	Telephone	E-mail Address
Legislative			
Governor/Dianna Velasquez	P.O. Box 12428 Austin, TX 78711	512-463-1830	Dianna.Velasquez@governor.state.tx.us
Lt. Gov./Jamie Dudensing	P.O. Box 12068 Austin, TX 78711	512-463-0001	Jamie.Dudensing@ltgov.state.tx.us
Speaker's Office/Jennifer Deegan	P.O. Box 2910 Austin, TX 78768	512-463-1000	Jennifer.Deegan@house.state.tx.us
Attorney General/Jay Dyer	P.O. Box 12548 Austin, TX 78711	512-463-2100	Jay.Dyer@texasattorneygeneral.gov
LBB/Shaniqua Johnson	1501 N. Congress Austin, TX 78701	512-463-1200	Shaniqua.Johnson@lbb.state.tx.us
Interest Groups			
ADAPT – Bob Kafka, Organizer	1640A E. 2 nd Street Suite 100 Austin, TX 78702-4412	512-442-0252	bob.adapt@sbcglobal.net
A World for Children – Rebecca Allen	1516 Palm Valley Blvd. – Bldg. C Round Rock, TX 78664	512-218-4400	
Arrow Children and Family Ministries – Scott Lundy	2929 FM 2920 Spring, TX 77388	281-210-1500	scott.lundy@arrow.org
Azleway Children's Services	15892 County Rd. 26 Tyler, TX 75707	903-566-8444	

Department of Family and Protective Services

Exhibit 13: Contacts

INTEREST GROUPS

(groups affected by agency actions or that represent others served by or affected by agency actions)

Group or Association Name/ Contact Person	Address	Telephone	E-mail Address
The Bair Foundation – Stephanie Gray	304 E. 4 th St.-Suite D Lampasas, TX 76550	512-556-4100	sgray@bair.org
ACH Child and Family Services - Wayne Carson	3712 Wichita Street Fort Worth, TX	817-886-7103	wcarson@ACHservices.org
Baptist Child and Family Services (BCFS) - Asennet Segura	1506 Bexar Crossing San Antonio, TX 78232	210-832-5000	asegura@bcfs.net
Cal Farley’s Boys Ranch - Dan Adams	600 SW 11 th Ave, Amarillo, TX 79101	806-372-2341	danadams@calfarley.org
Center for Public Policy Priorities (CPPP)/ Scott McCown	7020 Easy Wind Dr. Suite 200 Austin, TX 78752		mccown@cphp.org
Community Now/ David Whitton	1640A East 2 nd Street, Suite 100 Austin, TX 78702		
Depelchin Children’s Center/ Erin Ferris	4950 Memorial Dr. Houston, TX 77007	713-730-2335	
Giving Texas Children Promise (GTCP)/ Nikkee Espree	2801 Swiss Avenue, Suite 110 Dallas, TX 75204	214-824-4591	nespree@gtcp.org
Casey Family Programs – Sarah Abrahams	5201 E. Riverside Dr. Austin, TX 78741	512-892-5890	SAbrahams@casey.org
Lutheran Social Services of the South, Inc./ Betsy Guthrie	8305 Cross Park Dr, Austin, TX 78754	512-459-1000	Betsy.guthrie@lss.org
Methodist Children’s Home/ Tim Brown	1111 Herring Ave, Waco, TX 76708	254-753-0181	tbrown@mchforhope.org
New Horizon’s Ranch/ Michael Redden	500 Chestnut, Ste. 1101 Abilene, TX 79602	325-437-1852	mjr@newhorizonsinc.com

Department of Family and Protective Services

Exhibit 13: Contacts

INTEREST GROUPS

(groups affected by agency actions or that represent others served by or affected by agency actions)

Group or Association Name/ Contact Person	Address	Telephone	E-mail Address
Parent Guidance Center/ Judy Powell	9600 Escarpment Blvd Suite 745-255 Austin, TX 78749		judy@parentguidancecenter.org .
Pegasus Schools Inc./ Robert Ellis	896 Robin Ranch Rd. Lockhart, TX 78644	512-376-2518	
Prevent Child Abuse Texas/ Wendell Teltow	13740 U.S. 183 Austin, TX 78750	512-250-8438	weltow@preventchildabuse.texas.org
Texans Care for Children/ Elaine Garcia Matthews	811 Trinity St. Austin, TX 78701	512-473-2274	egarcia@txchildren.org

Associations

Texas Association of Child Placing Agencies/ Larry Tonn			Tonn@austin.rr.com
Texas Association for Education of Young Children - Jackie Taylor	P.O. Box 4997 Austin, TX 78765-4997	512-215-8142	Jackie.taylor@texaseyc.org
Texas CASA/ Andrea Sparks	7701 N. Lamar Blvd. Austin, TX 78752	512-459-2272	asparks@texascasa.org
TexProtects/ Madeline McClure	2904 Floyd Street, Suite C2 Dallas, TX 75204	214-442-1672	madeline@texprotects.org
AARP – Amanda Fredrickson, Manager of Advocacy	98 San Jacinto Blvd. #750, Austin TX 78701	512-480-2425	afredricksen@aarp.org
Texas Association for Infant Mental Health/ Susan Craven	1199 S. Beltline Rd, Ste. 100 Coppell, TX 75019	512-694-8774	smcraven@texas.net
Texas Council of Child Welfare Boards (TCCWB)/ Sharon Ireland	PO Box 42363 Austin, TX 78704	512-484-8598	sireland@tccwb.org

Department of Family and Protective Services

Exhibit 13: Contacts

INTEREST GROUPS

(groups affected by agency actions or that represent others served by or affected by agency actions)

Group or Association Name/ Contact Person	Address	Telephone	E-mail Address
Texas Foster Family Association/ Irene Clements	18751 Castellani San Antonio, TX 78258	210-493-7567	<u>irene-clements@att.net</u>
Texas Alliance of Child and Family Services (TSCFS)/ Nancy Holman	409 West 13 th St. Austin, TX 78701	512-892-2683	<u>nholman@tacfs.org</u>
Texas Network of Youth Services/ Christine Gendron	2525 Wallingwood Dr Austin, TX 78746	512-328-6860	<u>CGendron@tnoys.org</u>
Texas Silver-Haired Legislature/ C. Bruce Davis	1071 N. Judge Ely #6464 Abilene, TX 79601	325-725-0031	<u>brucedavis@suddenlink.net</u>
Youth For Tomorrow (YFT)/ Janis Lehman	624 Six Flags Dr. Arlington, TX 76011	817-633-1900	<u>Janis.lehman@yft.org</u>
Liaisons at other state agencies			
TX Education Agency/MJ Nicchio	1701 N. Congress, Suite 2-110 Austin, TX 78701	512-463-9682	<u>MJ.Nicchio@tea.state.tx.us</u>
UT/Laura Hartmann	210 West 6 th Street, CTJ - 1 Austin, TX 78701	512-499-4717	<u>lhartmann@utsystem.edu</u>
A&M/David Rejino	1246 TAMU College Station, Texas 77843-1246	979-845-2217	<u>d-rejino@tamus.edu</u>
TX Supreme Court Commission/Tina Amberboy	P.O. Box 12248 Austin, TX 7871	512-463-7226	<u>Tina.Amberboy@txcourts.gov</u>
Office of Court Administration/David Slayton	P.O. Box 12066 Austin, TX 78711	512-463-1625	<u>David.Slayton@oca.state.tx.us</u>
TX Juvenile Justice Dept./Linda Brooke	P.O. Box 12757 Austin, TX 78711	512-490-7103	<u>Linda.Brooke@tjjd.texas.gov</u>

Department of Family and Protective Services

Exhibit 13: Contacts

INTEREST GROUPS

(groups affected by agency actions or that represent others served by or affected by agency actions)

Group or Association Name/ Contact Person	Address	Telephone	E-mail Address
TX Dept. of Criminal Justice/Kathy McHargue	P.O. Box 13084 Austin, TX 78711	512-463-9776	Kathy.Mchargue@tdcj.state.tx.us
TX Health & Human Services Commission/Molly Czepiel	P.O. Box 13247 Austin, TX 78711	512-487-3391	Molly.Czepiel@hhsc.state.tx.us
TX Dept. of Aging & Disability Services/Cindy Nottingham	P.O. Box 149030 Austin, TX 78714	512-438-3654	Cindy.Nottingham@dads.state.tx.us
TX Dept. of State Health Services/Amanda Broden	1100 W. 49 th Austin, TX 78756	512-776-2136	<u>Amanda.Broden@dshs.state.tx.us</u>
TX Dept. of Assistive & Rehabilitative Services/David Hagerla	4800 N. Lamar Blvd. Austin, TX 78756	512-377-0523	David.Hagerla@dars.state.tx.us
TX Dept. of Housing & Community Affairs/Michael Lyttle	221 E. 11 th St. Austin, TX 78701	512-475-4542	Michael.Lyttle@tdhca.state.tx.us
Head Start State Collaboration Office – LaShonda Brown	The Children’s Learning Institute Univ. of Texas 7000 Fannin, Suite 1920-C, Houston, TX 77030		

XI. ADDITIONAL INFORMATION

A. Texas Government Code, Sec. 325.0075 requires agencies under review to submit a report about their reporting requirements to Sunset with the same due date as the SER. Include a list of each report that the agency is required by statute to prepare and an evaluation of the need for each report based on whether factors or conditions have changed since the statutory requirement was in place. If the list is longer than one page, please include it as an attachment.

Please See Appendix B.

Alternate Exhibit Provided for Section XI. Item A

B. Has the agency implemented statutory requirements to ensure the use of “first person respectful language”? Please explain and include any statutory provisions that prohibits these changes.

Section 531.0227 of the Government Code requires the Executive Commissioner to ensure that HHSC and the HHS System agencies “use the terms and phrases listed as preferred under the person first respectful language initiative in Chapter 392 [of the Government Code] when proposing, adopting, or amending the commission’s or agency’s rules, reference materials, publications, and electronic media.” Section 531.0227 was effective September 1, 2011.

This statutory directive has been implemented at HHSC, both through the Executive Commissioner’s instructions to HHSC and the HHS System agencies and through HHSC’s own work developing or revising agency materials. Specific examples include the following.

Guidance Memorandum

The Executive Commissioner issued Health and Human Services (HHS) Guidance Memorandum GM-12-002, Person First Respectful Language in Communications, in December 2011. In it, the Executive Commissioner directs each agency to use appropriate person first terms and phrases when proposing, adopting, or amending agency rules, reference materials, publications, and electronic media. Executive management at HHSC and the HHS System agencies was notified directly of GM-12-002. In addition, the release of GM-12-002 was featured in The Connection, the HHS System newsletter available to staff at HHSC and the HHS System agencies. GM-12-002 was last updated in January 2013.

Communications to Staff

The Connection highlighted the legislation underlying section 531.0227 – House Bill 1481, 82nd Legislature, Regular Session, 2011 – and noted efforts of DADS and other agencies to encourage person first respectful language. A second article noted the passage of H.B. 1481 and the new requirements for HHSC and the HHS System agencies.

Rule Review

Staff uses rule drafting guidelines that include a specific reference to H.B. 1481 and examples of person first respectful language. As HHSC develops new rules or proposes to amend existing rules, the originating program and legal staff review to ensure the use of preferred terms.

HHS Style Guide

HHSC’s Communications staff updated the HHS Style Guide for Consumer Materials to include instructions on the use of person first respectful language. The style guide is intended to ensure consistency in the materials written for consumers of HHS services by the agency or contractors providing those services. Medicaid managed care organizations, for example, are required by HHSC’s Uniform Managed Care Manual to use the style guide in writing marketing or other materials for their members.

HHSC has not encountered any statutory prohibition on using person first respectful language.

Following upon the guidance from HHSC, DFPS has applied person-first language in the editing process of new websites and agency publications for many years. The Office of Communications applies these principles to each webpage and document edited. However, the DFPS website contains older historical reports and documents that do not contain person first language and for which editing would be impractical and in some cases inappropriate.

In addition, DFPS policy editors apply person-first language when editing new or revised policy for publication. A systematic review of all handbooks and operating policies to confirm the application of person-first language began in September 2011 and was completed in July 2013. Approximately 20 handbooks and 86 operating policies have been confirmed to contain person-first language.

C. Fill in the following chart detailing information on complaints regarding your agency. Do not include complaints received against people or entities you regulate. The chart headings may be changed if needed to better reflect your agency’s practices.

Department of Family and Protective Services		
Exhibit 14: Complaints Against the Agency — Fiscal Years 2011 and 2012		
	FY 2011	FY 2012
Number of complaints received	3,783	4,734
Number of complaints resolved	3,826	4,691
Number of complaints unsubstantiated and unable to substantiate	2,280	2,236
Number of complaints pending from prior years	57	14

Department of Family and Protective Services Exhibit 14: Complaints Against the Agency — Fiscal Years 2011 and 2012		
	FY 2011	FY 2012
Average time period for resolution of a complaint	16 business days	18 business days

D. Fill in the following chart detailing your agency's Historically Underutilized Business (HUB) purchases.

Department of Family and Protective Services Exhibit 15: HUB Data - Fiscal Year 2010					
Category	Total \$ Spent	Total HUB \$ Spent	Percent	Agency Specific Goal *	Statewide Goal
Heavy Construction		0	0		11.9%
Building Construction		0	0		26.1%
Special Trade	8,101	195	2.40%	57.2%	57.2%
Professional Services	2,034,674	0	0	20.0%	20.0%
Other Services	37,460,177	10,305,946	27.5%	33.0%	33.0%
Commodities	13,885,850	8,792,620	63.4%	12.6%	12.6%
TOTAL	53,358,804	19,098,761	35.7%		

Fiscal Year 2011					
Category	Total \$ Spent	Total HUB \$ Spent	Percent	Agency Goal	Statewide Goal
Heavy Construction		0	0		11.9%
Building Construction		0	0		26.1%
Special Trade	36,929	0	0	57.2%	57.2%
Professional Services	4,245,952	0	0	20.0%	20.0%
Other Services	45,034,182	11,875,522	26.37	33.0%	33.0%
Commodities	9,701,251	5,875,456	60.56	12.6%	12.6%
TOTAL	59,018,316	17,751,010	30.08		
Fiscal Year 2012					
Category	Total \$ Spent	Total HUB \$ Spent	Percent	Agency Goal	Statewide Goal
Heavy Construction		0	0		11.2%
Building Construction		0	0		21.1%
Special Trade	17,208	0	0		32.7%
Professional Services	1,210,153	0	0		23.6%
Other Services	31,169,551	6,143,410	19.71	24.6%	24.6%
Commodities	10,767,270	7,495,685	69.62	21.0%	21.0%
TOTAL	43,164,184	13,639,096	31.60		

E. Does your agency have a HUB policy? How does your agency address performance shortfalls related to the policy? (Texas Government Code, Sec. 2161.003; TAC Title 34, Part 1, rule 20.15b)

Yes, the Department of Family and Protective Services (DFPS) has a policy on the use of Historically Underutilized Businesses (HUBs). DFPS has adopted the Texas Comptroller of Public

Accounts (CPA) HUB rules by reference. The policy mandates that DFPS shall make a good faith effort to utilize HUBs or minority businesses in contracts for construction, services, and commodities; and to encourage the use of HUBs by implementing these policies through race-, ethnic-, and gender-neutral means.

DFPS is committed to promoting full and equal business opportunities for all businesses in state contracting in accordance with the goals specified in the State of Texas Disparity Study, which were effective September 14, 2011.

1. *11.29 percent for heavy construction other than building contracts;
2. *21.1 percent for all building construction, including general contractors and operative builders contracts;
3. 32.7 percent for all special trade construction contracts;
4. 23.6 percent for professional services contracts;
5. 24.6 percent for all other services contracts; and
6. 21.0 percent for commodities contracts.

*During fiscal years 2008, 2009 and 2010 heavy construction and building construction categories/goals were not applicable to the DFPS operations. DFPS does not have programs or strategies related to these categories.

DFPS and its contractors shall make a good faith effort to meet or exceed the goals and assist HUBs in receiving a portion of the total contract value of all contracts that DFPS expects to award in a fiscal year. It is the policy of DFPS to accomplish these goals either through contracting directly with HUBs or indirectly through subcontracting opportunities. DFPS' policy on the utilization of HUBs is related to all contracts with an expected value of \$100,000 or more, and whenever practical, in contracts less than \$100,000.

In order to address performance shortfalls, DFPS monitors its contracts on a monthly basis to determine the level of HUB and minority participation. DFPS strives to eliminate shortfalls by analyzing the expenditures and payments made to its vendors, improve the expertise of DFPS program/division staff in evaluating contract opportunities for HUBs or minority firms, and assist each Program/Division to implement good faith efforts to meet or exceed the goals. Because most of DFPS' contracts are highly specialized, DFPS is continuously demonstrating its commitment to the use of HUBs by:

- attending and co-sponsoring HUB vendor fairs;
- identifying and developing opportunities for HUBs;
- identifying potential HUB vendors who can provide the types of goods and services required by DFPS;
- recruiting new HUBs/minority vendors for potential opportunities in the procurement categories where there has been minimal contracting opportunities;
- offering HUBs assistance and training regarding state procurement procedures;

- advising HUBs of available state contracts;
- assisting and soliciting minority firms for current and new contract opportunities;
- advising HUBs to apply for registration on the CPA Centralized Master Bidders List (CMBL); and
- encouraging minority firms to become and maintain their certification status with the CPA as a HUB and a registered bidder on the CMBL, which also increases competition for the DFPS' contracts.

F. For agencies with contracts valued at \$100,000 or more: Does your agency follow a HUB subcontracting plan to solicit bids, proposals, offers, or other applicable expressions of interest for subcontracting opportunities available for contracts of \$100,000 or more? (Texas Government Code, Sec. 2161.252; TAC Title 34, Part 1, rule 20.14)

Yes, DFPS has an established process to ensure consideration is given to HUB goals when the agency enters into a contract with an expected value of \$100,000 or more. DFPS makes a determination whether or not subcontracting opportunities are probable under the contract before DFPS solicits bids, proposals, offers, or other applicable expressions of interest. DFPS HUB office reviews the solicitation document before advertisement to ensure the following.

- It allows for the greatest amount of competition possible.
- The bonding and insurance requirements are reasonable.
- It lists potential subcontracting opportunities.
- It lists the HUB percentage participation goal.
- It lists the prime contractor's performance requirements related to the HUB program.
- It includes in the HUB subcontracting plan.

In addition, the DFPS HUB office works with the division/program staff to establish a comprehensive HUB subcontracting plan that includes:

- reviewing the HUB subcontracting plan requirements during the pre-proposal conference;
- how and when the HUB compliance screens will occur after responses are received;
- post award meetings with the selected vendor which details the vendor performance expectations related to fulfilling the HUB requirements of the contract; and
- ongoing progress assessment monitoring to ensure the vendor maintains the agreed upon HUB participation percentage commitment.

During the solicitation process, all bidders or proposers are required to make a good faith effort to meet or exceed the HUB goals and submit a HUB subcontracting plan when applicable. If a good faith effort is not made or a subcontracting plan is not submitted or is incomplete, the

proposal/bid will be disqualified. If subcontracting will be used and a HUB is not a participating subcontractor, then the vendor will be required to demonstrate what effort was made to solicit a certified HUB subcontractor. If the subcontractor selected is not a Texas-certified HUB, the respondent must provide written justification of their selection process. After an evaluation of the HUB subcontracting information, the DFPS' HUB Program Coordinator determines whether the bidder made a good faith effort. DFPS utilizes the CPA HUB directory for the inclusion of HUBs in its contract opportunities.

In addition to the above efforts, the HHSC centralized Enterprise Contracts and Procurement Services (ECPS) Division (Purchasing Section) which conducts all administrative purchasing for DFPS makes a good faith effort to ensure HUBs are included in the procurement solicitations and resulting Purchase Order and Contracting processes.

G. For agencies with biennial appropriations exceeding \$10 million, answer the following HUB questions.

HUB Question	Response / Agency Contact
<p>1. Do you have a HUB coordinator? (Texas Government Code, Sec. 2161.062; TAC Title 34, Part 1, rule 20.26)</p>	<p>Yes, Procurement Director/DFPS HUB Program Coordinator: VACANT POSITION HUB Program Administrator: Joy Simmons 4405 North Lamar Blvd., Bldg. #1 Austin, Texas 78756 Phone (512) 206-4618 Fax (512) 206-4605 joy.simmons@hhsc.state.tx.us</p>
<p>2. Has your agency designed a program of HUB forums in which businesses are invited to deliver presentations that demonstrate their capability to do business with your agency? (Texas Government Code, Sec. 2161.066; TAC Title 34, Part 1, rule 20.27)</p>	<p>Yes, DFPS and the Health and Human services agencies conduct an internal HUB forum on a monthly basis where HUB vendors are invited to attend and give a presentation on their products, staff, and core capabilities. We also discuss potential contracting opportunities with the vendors. DFPS invites procurement, program, HUB staff, and related decision-makers to attend these forums.</p>

HUB Question	Response / Agency Contact
3. Has your agency developed a mentor-protégé program to foster long-term relationships between prime contractors and HUBs and to increase the ability of HUBs to contract with the state or to receive subcontracts under a state contract? (Texas Government Code, Sec. 2161.065; TAC Title 34, Part 1, rule 20.28)	Yes, DFPS has a mentor-protégé program. DFPS has sponsored three (3) mentor-protégé agreements thus far and continues to seek additional mentor-protégé relationships.

H. Fill in the chart below detailing your agency's Equal Employment Opportunity (EEO) statistics.

The Service/Maintenance category includes three distinct occupational categories: Service/Maintenance, Para-Professionals, and Protective Services. Protective Service Workers and Para-Professionals are no longer reported as separate groups. Please submit the combined Service/Maintenance category totals, if available.

Department of Family and Protective Services Exhibit 16: Equal Employment Opportunity Statistics							
Fiscal Year 2009							
Job Category	Total Position	Minority Workforce Percentage					
		Black		Hispanic		Female	
		Agency	Civilian Labor Force	Agency	Civilian Labor Force	Agency	Civilian Labor Force
Officials/ Administration	161	14.9%	7.5%	17.4%	21.1%	75.2%	37.5%
Professional	2,758	22.3%	9.7%	22.4%	18.8%	76.5%	53.3%
Technical	406	27.1%	13.9%	25.1%	27.7%	78.3%	53.9%
Administrative Support	1,341	25.6%	12.7%	37.1%	31.9%	96.0%	67.1%
Service Maintenance	6,229	29.8%	14.1%	26.4%	49.9%	84.4%	39.1%
Skilled Craft	1	0.0%	6.6%	0.0%	46.3%	100.0%	6.0%

-Source Data: Fiscal Year 2009 from Human Resources/PeopleSoft 08/31/2009

-The Service/Maintenance category includes three distinct occupational categories: Service/Maintenance, Para-Professionals, and Protective Services. Protective Service Workers and Para-Professionals are no longer reported as separate groups. Please submit the combined Service/Maintenance category totals, if available.

-Civilian Labor Force Figures from Texas Workforce Commission

Department of Family and Protective Services							
Exhibit 17: Equal Employment Opportunity Statistics							
Fiscal Year 2010							
Job Category	Total Position	Minority Workforce Percentage					
		Black		Hispanic		Female	
		Agency	Civilian Labor Force	Agency	Civilian Labor Force	Agency	Civilian Labor Force
Officials/ Administration	183	16.4%	7.5%	21.3%	21.1%	76.5%	37.5%
Professional	1,386	18.5%	9.7%	23.1%	18.8%	67.5%	53.3%
Technical	408	28.7%	13.9%	24.8%	27.7%	80.4%	53.9%
Administrative Support	1,294	25.8%	12.7%	38.3%	31.9%	95.4%	67.1%
Service Maintenance	7,845	28.4%	14.1%	26.6%	49.9%	84.6%	39.1%
Skilled Craft	1	0.0%	6.6%	0.0%	46.3%	100.0%	6.0%

-Source Data: Fiscal Year 2010 from Human Resources/PeopleSoft 08/31/2010

-The Service/Maintenance category includes three distinct occupational categories: Service/Maintenance, Para-Professionals, and Protective Services. Protective Service Workers and Para-Professionals are no longer reported as separate groups. Please submit the combined Service/Maintenance category totals, if available.

-Civilian Labor Force Figures from Workforce Commission

**Department of Family and Protective Services
Exhibit 17: Equal Employment Opportunity Statistics**

Fiscal Year 2011

Job Category	Total Position	Minority Workforce Percentage					
		Black		Hispanic		Female	
		Agency	Civilian Labor Force	Agency	Civilian Labor Force	Agency	Civilian Labor Force
Officials/ Administration	178	19.1%	8.99%	20.2%	19.5%	75.8%	39.4%
Professional	1,362	19.2%	11.33%	23.1%	17.4%	67.4%	59.14%
Technical	396	28.3%	14.16%	25.3%	21.63%	81.8%	41.47%
Administrative Support	1,195	26.9%	13.57%	38.0%	30.53%	95.3%	65.52%
Service Maintenance	7,483	28.9%	14.68%	27.2%	48.18%	84.6%	40.79%
Skilled Craft	1	0.0%	6.35%	0.0%	47.44%	100.0%	4.19%

-Source Data: Fiscal Year 2011 from Human Resources/PeopleSoft 08/31/2011

-The Service/Maintenance category includes three distinct occupational categories: Service/Maintenance, Para-Professionals, and Protective Services. Protective Service Workers and Para-Professionals are no longer reported as separate groups. Please submit the combined Service/Maintenance category totals, if available.

-Civilian Labor Force Figures from 2011-2012 EEO and Minority Hiring Practices Report prepared by Workforce Commission, 01/2013

I. Does your agency have an equal employment opportunity policy? How does your agency address performance shortfalls related to the policy?

Yes. Chapter 16, Equal Employment Opportunity, of the HHS HR Manual contains employment (EEO) policy for all system agencies. Employees who violate the HHS System policy on equal employment are subject to disciplinary action, including termination.

XII. AGENCY COMMENTS

The passage of House Bill 2292, in 2003, established a clear directive to transform the State's approach to the delivery of health and human services, with a particular focus on addressing the following issues.

- Access to services for individuals with complex health needs that required assistance from multiple agencies.
- Lack of integrated health and human services programs and agency policies.
- Redundant and/or inefficient administrative structures.
- Blurred lines of accountability.

Through the enactment of H.B. 2292, 12 stand-alone agencies were consolidated into an integrated system of four new departments under the leadership of the Texas Health and Human Services Commission (HHSC).

Today, nearly a decade post-consolidation, a coordinated HHS System services exists. Although continued improvements may be needed in areas, progress on addressing the issues originally identified can be seen in a myriad of ways, as highlighted by the following examples.

- **Improved Service Quality and Accessibility.** Integrated programs result in improved community health. For example, the Department of State Health Services (DSHS) developed a single agency focus on physical and behavioral health issues emphasizing multi-program collaboration to improve efficiency and enhance services. Also, through a collaborative effort, HHSC and DSHS promote the benefits of the Women's Health Program and DADS, DFPS, and DSHS continue to work together to improve services in HHS-operated facilities, such as State Supported Living Centers and State Hospitals. Integrating service delivery among physical and behavioral health providers improves outcomes. As a means to guide current and future planning and decision making, DSHS, in conjunction with external stakeholder efforts, developed a comprehensive approach to service integration by linking behavioral and physical health services. DSHS actively encourages the use of primary health care provision as a site for early screening and diagnosis of behavioral health problems.

Meeting the demand for services is a perennial challenge facing the HHS System. Although waiting and interest lists for programs and services remains long, the ability to consolidate funding requests to address waiting lists and to request those funds as HHS System priorities has resulted in unprecedented levels of new funding to address interest lists, especially for waiver services.

Managing long-term care services through one agency, the Department of Aging and Disability Services (DADS), leads to greater flexibility for individuals and families seeking services. For instance, previously some individuals rose to the top of a waiting list for one program, only to learn that another agency's waiver program was more appropriate for their needs than the waiver service for which they had originally applied. Unfortunately, sometimes that meant that the client would have to start over at the bottom of another

program's list. DADS now identifies, provides services and/or places the person on the most appropriate waiver list for meeting their needs.

Better alignment of guardianship responsibilities protects the public. The transfer of guardianship responsibilities to DADS reinforced the Department of Family and Protective Services' (DFPS) primary role of investigating and serving adults in need of protection. DADS' expertise with long-term services and support programs for persons who are older and for adults with disabilities made it the appropriate agency for assuming guardianship responsibilities. Transferring this program removed any appearance of conflict of interest for DFPS staff in assessing and providing services for individuals in need of guardianship. As a result of coordinated DADS and DFPS efforts, the transfer of the guardianship program was completed with no disruption in services to individuals served.

- **Strengthening Children's Services.** An integrated system allows for a comprehensive approach to improve children's health care. Three divisions within DSHS, along with the regional Education Services Centers, combined efforts and resources to promote a coordinated approach to improving children's physical and behavioral health. The comprehensive approach includes coordinated school health, obesity prevention, suicide prevention, mental health awareness, diabetes prevention and care, and abstinence education activities. In 2008, DFPS worked with HHSC to launch STAR Health, the Medicaid managed care plan for children in foster care. Under contract with HHSC, STAR Health coordinated oversight of psychotropic medication utilization and use of psychotropic medications decreased. Additionally, the Health Passport was developed as an electronic health information system that provides information about prescribed psychotropic medications and is used as a primary source for the Psychotropic Medications Utilization Review process.

Interagency efforts reduce psychotropic medications use for foster children. Soon after the consolidation of HHS agencies, concerns arose about possible overuse of psychotropic medications with the foster care population. DFPS and DSHS worked together using the services of a child psychiatrist to assess prescribing practices, develop prescribing guidelines, and recommend a process for ongoing clinical reviews of the use of psychotropic medications in the treatment of children in foster care.

Consolidation leads to enhanced support for Early Childhood Intervention (ECI). Before consolidation, ECI, as a small stand-alone agency, struggled with addressing specialized tasks such as assessing the implications of rules and setting rates. Now, as a division within DARS and the integrated HHS System, ECI receives valuable support on such matters as rules, rates, and state Medicaid plan amendments.

- **Efficient and Effective Service Delivery.** Unifying web support for blind and rehabilitation services replaced two redundant legacy agency systems, and reduces the technical support, need for modifications, and costs for hardware, software, and related maintenance. Using a single system also enhances consistency among programs, because program changes and modifications will now be applied to only one application, rather than the prior multiple applications. Eliminating the redundant rules of DARS legacy agencies resulted in the elimination of more than 100 redundant or unnecessary administrative rules from the

legacy agencies.

Consolidated pharmaceutical purchasing for the DSHS Pharmacy Branch, DSHS state hospitals, and DADS state schools saves millions of dollars annually in medication and medical supplies costs. Also, consolidated support services for such facilities save millions in personnel, operations, and supply costs for both DADS and DSHS.

- **Improving Information Accessibility Across the HHS System.** Coordinating long-term care licensing and regulatory activities yields coordinated, consistent, and direct oversight. Responsibility for long-term services and supports previously was split among DADS' three legacy agencies. The services and supports provided by the three agencies served various client populations. Many of the same regulatory issues were encountered for these services and supports. The agencies often addressed these issues in different ways and with limited coordination.
- **Adopting More Cost-Effective Business Practices.** House Bill 2292 assigned HHSC responsibility for delivering administrative services for the HHS System. Examples include centralized HR services, civil rights, and support services for regional offices. These improvements saved millions in overhead costs and resulted in consistent policies, practices, and services.

APPENDIX A. ALTERNATE EXHIBIT PROVIDED FOR SECTION VII. ITEM G

DFPS does not capture funding source information at the departmental level that was used to report expenditures in Section VII. This table shows funding sources and amounts by strategy. Since there are specific strategies for the programs described in Section VII, the reader can get an understanding of the types and proportion of federal and state funds used by each program contained in Section VII by looking at this table. Note however that expenditures for the program strategies in this table will not match the expenditures reported for those programs in Section VII. This is due to the fact that Section VII separated the agency administrative functions from the programs, and many administrative functions such as Legal and Budget are included in program strategies.

Expenditures by Strategy and Method of Finance – Fiscal Year 2012			
Strategy	Strategy Name		FY 2012 Expense
A.1.1	Statewide Intake Services	General Revenue	5,947,357
		GR- Medicaid Match	149,348
		GR Total	6,096,705
		Temporary Assistance to Needy Families (TANF)	9,668,655
		Child Care and Development Block Grant	58,166
		Title IV-E Foster Care - Administration	33,682
		Title XX Social Services Block Grant	2,120,787
		Medical Assistance Program 50%	149,349
		Federal Total	12,030,639
A.1.1 Total			18,127,344
B.1.1	CPS Direct Delivery Staff	General Revenue	206,877,780
		GR- Medicaid Match	1,971,835
		Specialty License Plate Revenue	11,598
		GR Total	208,861,213
		Title IV-E Guardianship Assistance - Administration	7,417
		Title IV-B, Part 2 Promoting Safe and Stable Families	7,032,585
		Title IV-B, Part 2 Promoting Safe and Stable Families-Caseworker Visits	1,546,433
		Temporary Assistance to Needy Families	112,677,444

Expenditures by Strategy and Method of Finance – Fiscal Year 2012			
Strategy	Strategy Name		FY 2012 Expense
		(TANF)	
		Community-Based Child Abuse Prevention Grants	
		Adoption Incentive Payments	5,600,000
		Title IV-B, Part 1 Child Welfare Services State Grant	17,008,676
		Title IV-E Foster Care - Administration	45,410,907
		Title IV-E Foster Care-Training-75%	3,660,769
		Foster Care Title IV-E Stimulus (FMAP)	
		Title IV-E Adoption Assistance - Administration	3,367,804
		Chafee Foster Care Independence Program	35,198
		Medical Assistance Program 50%	1,574,926
		Federal Total	197,922,159
		Appropriated Receipts	5,422,295
		Other Total	5,422,295
B.1.1 Total			412,205,667
B.1.2	CPS Program Support	General Revenue	10,619,672
		GR- Medicaid Match	95,664
		GR Total	10,715,336
		Title IV-E Guardianship Assistance - Administration	6,037
		Title IV-B, Part 2 Promoting Safe and Stable Families	1,083,508
		Temporary Assistance to Needy Families (TANF)	11,194,365
		Refugee and Entrant Assistance State Administered Programs	3,662,485
		Title IV-E Chafee Education and Training Vouchers Program ETV	193,537
		Children’s Justice Grants to States	41,229
		Title IV-B, Part 1 Child Welfare Services State Grant	25,830
		Adoption Opportunities	274,963
		Title IV-E Foster Care-Other FFP	17,262

Expenditures by Strategy and Method of Finance – Fiscal Year 2012			
Strategy	Strategy Name		FY 2012 Expense
		Title IV-E Foster Care - Administration	4,938,669
		Title IV-E Foster Care-Training-75%	3,881,681
		Foster Care Title IV-E Stimulus (FMAP)	
		Title IV-E Adoption Assistance - Administration	312,254
		Title IV-E Adoption Assistance-Training-75%	49,727
		Title XX Social Services Block Grant	455,205
		Child Abuse and Neglect State Grants	3,210,939
		Chafee Foster Care Independence Program	2,439,563
		Medical Assistance Program 50%	74,738
		Federal Total	31,861,992
		Appropriated Receipts	28,982
		Interagency Contracts	935,084
		Other Total	964,066
B.1.2 Total			43,541,394
B.1.3	TWC Foster Daycare	General Revenue	576,613
		GR-Title IV-E (FMAP)	3,851,771
		GR Total	4,428,384
		Child Care and Development Block Grant	1,760,561
		Title IV-E Foster Care - Administration	230,479
		Title IV-E Foster Care - FMAP	5,367,403
		Federal Total	7,358,443
B.1.3 Total			11,786,827
B.1.4	TWC Relative Daycare	General Revenue	6,676,530
		GR- TANF MOE	
		GR Total	6,676,530
		Child Care and Development Block Grant	2,424,075
		Federal Total	2,424,075
B.1.4 Total			9,100,605
B.1.5	TWC Protective Daycare	General Revenue	4,255,064
		GR- TANF MOE	8,124,749

Expenditures by Strategy and Method of Finance – Fiscal Year 2012			
Strategy	Strategy Name		FY 2012 Expense
		GR Total	12,379,813
		Child Care and Development Block Grant	6,194,891
		Federal Total	6,194,891
B.1.5 Total			18,574,704
B.1.6	Adoption Purchased Services	General Revenue	275,000
		GR Total	275,000
		Title IV-B, Part 2 Promoting Safe and Stable Families	5,970,863
		Federal Total	5,970,863
B.1.6 Total			6,245,863
B.1.7	Post-Adoption Purchased Services	General Revenue	
		GR Total	
		Title IV-B, Part 2 Promoting Safe and Stable Families	2,446,100
		Federal Total	2,446,100
B.1.7 Total			2,446,100
B.1.8	PAL Purchased Services	General Revenue	114,016
		GR Total	114,016
		Title IV-E Chafee Education and Training Vouchers Program ETV	3,464,026
		Chafee Foster Care Independence Program	5,289,152
		Federal Total	8,753,178
		Appropriated Receipts	1,000
		Other Total	1,000
B.1.8 Total			8,868,194
B.1.9	Substance Abuse Purchased Services	General Revenue	4,819,180
		GR Total	4,819,180
		Title IV-B, Part 2 Promoting Safe and Stable Families	

Expenditures by Strategy and Method of Finance – Fiscal Year 2012			
Strategy	Strategy Name		FY 2012 Expense
		Temporary Assistance to Needy Families (TANF)	54,780
		Title IV-B, Part 1 Child Welfare Services State Grant	0
		Federal Total	54,780
B.1.9 Total			4,873,960
B.1.10	Other CPS Purchased Services	General Revenue	10,657,063
		GR-Title IV-E (FMAP)	12,953
		GR Total	10,670,016
		Title IV-B, Part 2 Promoting Safe and Stable Families	6,561,235
		Title IV-B, Part 2 Promoting Safe and Stable Families-Caseworker Visits	79,778
		Temporary Assistance to Needy Families (TANF)	3,318,298
		Child Care and Development Block Grant	11,132
		Title IV-B, Part 1 Child Welfare Services State Grant	1,705,552
		Title IV-E Foster Care - Administration	319,851
		Title IV-E Foster Care - FMAP	18,338
		Federal Total	12,014,184
B.1.10 Total			22,684,200
B.1.11	Foster Care Payments	General Revenue	79,799,419
		GR-Title IV-E (FMAP)	81,109,104
		GR Total	160,908,523
		Temporary Assistance to Needy Families (TANF)	76,072,924
		Title IV-E Foster Care - Administration	29,149,332
		Title IV-E Foster Care - FMAP	114,556,133
		Title IV-E Foster Care-Training-75%	
		Federal Total	219,778,389
		Child Support Collections	1,239,613
		Other Total	1,239,613

Expenditures by Strategy and Method of Finance – Fiscal Year 2012			
Strategy	Strategy Name		FY 2012 Expense
B.1.11 Total			381,926,525
B.1.12	Adoption/PCA Payments	General Revenue	40,118,005
		GR-Title IV-E (FMAP)	62,643,968
		GR Total	102,761,973
		Title IV-E Guardianship Assistance - Administration	24,200
		Title IV-E Guardianship Assistance - FMAP	952,067
		Title IV-E Adoption Assistance - Administration	3,180,240
		Title IV-E Adoption Assistance - FMAP	87,062,859
		Federal Total	91,219,366
B.1.12 Total			193,981,339
B.1.13	Relative Caregiver Payments	General Revenue	5,816,448
		GR Total	5,816,448
		Temporary Assistance to Needy Families (TANF)	2,043,478
		Federal Total	2,043,478
B.1.13 Total			7,859,926
C.1.1	STAR Program	General Revenue	10,714,806
		Children’s Trust Fund	4,835,702
		GR Total	15,550,508
		Title IV-B, Part 2 Promoting Safe and Stable Families	0
		Title XX Social Services Block Grant	1,733,575
		Federal Total	1,733,575
C.1.1 Total			17,284,083
C.1.2	CYD Program	General Revenue	1,238,552
		Children’s Trust Fund	750,000
		GR Total	1,988,552
		Title IV-B, Part 2 Promoting Safe and Stable Families	2,827,100

Expenditures by Strategy and Method of Finance – Fiscal Year 2012			
Strategy	Strategy Name		FY 2012 Expense
		Federal Total	2,827,100
C.1.2 Total			4,815,652
C.1.3	Texas Families Program	General Revenue	35
		GR Total	35
		Title IV-B, Part 2 Promoting Safe and Stable Families	2,549,347
		Federal Total	2,549,347
C.1.3 Total			2,549,382
C.1.4	Child Abuse Prevention Programs	General Revenue	33,366
		GR Total	33,366
		Community-Based Child Abuse Prevention Grants	4,150,277
		Federal Total	4,150,277
C.1.4 Total			4,183,643
C.1.5	Other At-Risk Prevention Programs	General Revenue	2,092,770
		Children’s Trust Fund	
		GR Total	2,092,770
C.1.5 Total			2,092,770
C.1.6	At-Risk Prevention Program Support	General Revenue	496,017
		Children’s Trust Fund	100,000
		GR Total	596,017
		Title IV-B, Part 2 Promoting Safe and Stable Families	223,907
		Community-Based Child Abuse Prevention Grants	28,256
		Federal Total	252,163
C.1.6 Total			848,180
D.1.1	APS Direct Delivery Staff	General Revenue	26,354,728

Expenditures by Strategy and Method of Finance – Fiscal Year 2012			
Strategy	Strategy Name		FY 2012 Expense
		GR- Medicaid Match	2,101,218
		GR Total	28,455,946
		Title IV-E Guardianship Assistance - Administration	
		Title IV-B, Part 2 Promoting Safe and Stable Families	
		Temporary Assistance to Needy Families (TANF)	
		Title IV-B, Part 1 Child Welfare Services State Grant	
		Title IV-E Foster Care - Administration	
		Title IV-E Foster Care-Training-75%	
		Title IV-E Adoption Assistance - Administration	
		Title XX Social Services Block Grant	20,424,028
		Medical Assistance Program 50%	2,101,218
		Federal Total	22,525,246
D.1.1 Total			50,981,192
D.1.2	APS Program Support	General Revenue	1,920,955
		GR- Medicaid Match	409,999
		GR Total	2,330,954
		Title IV-B, Part 2 Promoting Safe and Stable Families	
		Temporary Assistance to Needy Families (TANF)	
		Title IV-B, Part 1 Child Welfare Services State Grant	
		Title IV-E Foster Care - Administration	
		Title IV-E Foster Care-Training-75%	
		Title IV-E Adoption Assistance - Administration	
		Title XX Social Services Block Grant	2,441,227
		Medical Assistance Program 50%	424,454
		Federal Total	2,865,681
D.1.2 Total			5,196,635

Expenditures by Strategy and Method of Finance – Fiscal Year 2012			
Strategy	Strategy Name		FY 2012 Expense
D.1.3	MH and ID Investigations	General Revenue	1,918,868
		GR- Medicaid Match	2,242,469
		GR Total	4,161,337
		Title XX Social Services Block Grant	3,165,766
		Medical Assistance Program 50%	2,242,469
		Federal Total	5,408,235
D.1.3 Total			9,569,572
E.1.1	Child Care Regulation	General Revenue	11,399,400
		GR- Medicaid Match	
		GR Total	11,399,400
		Title IV-E Guardianship Assistance - Administration	
		Title IV-B, Part 2 Promoting Safe and Stable Families	
		Temporary Assistance to Needy Families (TANF)	
		Child Care and Development Block Grant	18,137,359
		Title IV-B, Part 1 Child Welfare Services State Grant	
		Title IV-E Foster Care - Administration	2,332,674
		Title IV-E Foster Care-Training-75%	
		Title IV-E Adoption Assistance - Administration	
		Title XX Social Services Block Grant	896,743
		Medical Assistance Program 50%	
		Federal Total	21,366,776
		Interagency Contracts	105,797
		Other Total	105,797
E.1.1 Total			32,871,973
F.1.1	Central Administration	General Revenue	6,926,891
		GR- Medicaid Match	180,106
		GR Total	7,106,997

Expenditures by Strategy and Method of Finance – Fiscal Year 2012			
Strategy	Strategy Name		FY 2012 Expense
		Title IV-E Guardianship Assistance - Administration	438
		Title IV-B, Part 2 Promoting Safe and Stable Families	259,181
		Temporary Assistance to Needy Families (TANF)	3,967,402
		Child Care and Development Block Grant	492,743
		Community-Based Child Abuse Prevention Grants	0
		Title IV-E Foster Care - Administration	1,371,161
		Title IV-E Adoption Assistance - Administration	104,062
		Title XX Social Services Block Grant	712,943
		Chafee Foster Care Independence Program	60,138
		Medical Assistance Program 50%	177,947
		Federal Total	7,146,015
		Interagency Contracts	
		Other Total	
F.1.1 Total			14,253,012
F.1.2	Other Support Services	General Revenue	3,554,588
		GR- Medicaid Match	32,736
		GR Total	3,587,324
		Title IV-E Guardianship Assistance - Administration	59
		Title IV-B, Part 2 Promoting Safe and Stable Families	21,739
		Temporary Assistance to Needy Families (TANF)	840,066
		Child Care and Development Block Grant	99,638
		Community-Based Child Abuse Prevention Grants	
		Title IV-E Foster Care - Administration	393,257
		Title IV-E Adoption Assistance - Administration	15,855
		Title XX Social Services Block Grant	365,734

Expenditures by Strategy and Method of Finance – Fiscal Year 2012			
Strategy	Strategy Name		FY 2012 Expense
		Chafee Foster Care Independence Program	11,049
		Medical Assistance Program 50%	32,729
		Federal Total	1,780,126
		Interagency Contracts	20,776
		Other Total	20,776
F.1.2 Total			5,388,226
F.1.3	Regional Administration	General Revenue	195,121
		GR- Medicaid Match	5,917
		GR Total	201,038
		Title IV-E Guardianship Assistance - Administration	10
		Title IV-B, Part 2 Promoting Safe and Stable Families	78
		Temporary Assistance to Needy Families (TANF)	75,275
		Child Care and Development Block Grant	11,709
		Community-Based Child Abuse Prevention Grants	
		Title IV-E Foster Care - Administration	35,554
		Title IV-E Adoption Assistance - Administration	2,397
		Title XX Social Services Block Grant	23,357
		Chafee Foster Care Independence Program	1,435
		Medical Assistance Program 50%	4,513
		Federal Total	154,328
		Interagency Contracts	
		Other Total	
F.1.3 Total			355,366
F.1.4	IT Program Support	General Revenue	11,817,366
		GR- Medicaid Match	297,852
		GR Total	12,115,218
		Title IV-E Guardianship Assistance - Administration	556

Expenditures by Strategy and Method of Finance – Fiscal Year 2012			
Strategy	Strategy Name		FY 2012 Expense
		Title IV-B, Part 2 Promoting Safe and Stable Families	334,063
		Temporary Assistance to Needy Families (TANF)	6,333,373
		Child Care and Development Block Grant	859,824
		Community-Based Child Abuse Prevention Grants	1,089
		Title IV-B, Part 1 Child Welfare Services State Grant	
		Title IV-E Foster Care - Administration	2,279,460
		Title IV-E Foster Care-Training-75%	
		Title IV-E Adoption Assistance - Administration	153,404
		Title XX Social Services Block Grant	1,246,530
		Chafee Foster Care Independence Program	93,940
		Medical Assistance Program 50%	297,852
		Federal Total	11,600,091
		Interagency Contracts	
		Other Total	
F.1.4 Total			23,715,309
F.1.5	Agency-wide Automated Systems	General Revenue	6,525,996
		GR- Medicaid Match	210,112
		GR Total	6,736,108
		Title IV-E Guardianship Assistance - Administration	1,770
		Title IV-B, Part 2 Promoting Safe and Stable Families	
		Temporary Assistance to Needy Families (TANF)	6,102,793
		Child Care and Development Block Grant	
		Community-Based Child Abuse Prevention Grants	
		Title IV-E Foster Care - Administration	1,530,668
		Title IV-E Adoption Assistance - Administration	144,189

Expenditures by Strategy and Method of Finance – Fiscal Year 2012			
Strategy	Strategy Name		FY 2012 Expense
		Title XX Social Services Block Grant	
		Chafee Foster Care Independence Program	
		Medical Assistance Program 50%	245,528
		Federal Total	8,024,948
		Interagency Contracts	
		Other Total	
F.1.5 Total			14,761,056
Grand Total			1,331,088,699

APPENDIX B. ALTERNATE EXHIBIT PROVIDED FOR SECTION XI. ITEM A

Mandatory Reporting Requirements			
Report Name	Report Purpose	Legal Citation	Evaluation
QA Program for APS	Includes a comprehensive review of APS' performance during the preceding quarter; and a summary of APS' performance during the preceding quarter on each of the outcome measures established under the section.	Human Resources Code 40.0515(g)	Report is useful. APS management effectively uses the information provided in this report.
Advisory Committee Evaluation	To identify advisory committees to be considered for consolidation or abolishment. The guidance and format for this report comes from HHSC via HHS Circular C-022; however, the actual statutory requirement is found in Government Code 2110.006. HHSC consolidates the recommendations of all HHS agencies and makes a single report to LBB.	Government Code 2110.006	It is useful and efficient to have a process in place to regularly evaluate advisory committees and this requirement serves the purpose of providing authority for such a review.

Mandatory Reporting Requirements			
Report Name	Report Purpose	Legal Citation	Evaluation
Obsolete or Redundant Reporting Requirements Report	Examine the agency's reporting requirements established by state statute before January 1, 2009 and not amended since that date, and identify each reporting requirement that the executive director determines is not necessary, is redundant, or is required to be provided at a frequency for which data is not available. Each recommended deletion must include justification for the determination.	Government Code 2052.402(a)(1) and (2)	Report is useful. It is useful and efficient to have a process in place to regularly evaluate reporting requirements, and this requirement serves the purpose of providing authority for such a review.
Licensure and Childcare Facilities	Report regarding the Department's licensure and regulation of childcare facilities.	Human Resources Code 42.023	Report is useful. The information is reported as part of the Data Book. Effort to prepare is minimal and would likely be included in Data Book with or without this requirement so recommend that it be retained.
Federal Funds Report	Identify strategies to maximize the receipt and use of federal funds and to improve federal funds management.	Government Code 531.028(c)	Report is useful. The data is of great interest and the effort to prepare is minimal.
Information Resources Deployment Review	A state agency shall complete a review of the operational aspects of the agency's information resources deployment following instructions developed by DIR.	Government Code 2054.0965	This report is under the authority of DIR but it is deemed to be a useful tool for agencies.

Mandatory Reporting Requirements			
Report Name	Report Purpose	Legal Citation	Evaluation
Performance Report on Information Resource Technologies	DIR, on Nov. 15 every even-numbered year, reports on the use of IR technologies in state government.	Government Code 2054.055	This report is under the authority of DIR but it is deemed to be a useful tool for agencies.
Recruitment and Retention of Caseworkers	The Department shall study the salaries of each type of child protective services caseworker to determine the role salary plays in the recruitment and retention of caseworkers and in the turnover rate for each type of caseworker. The Department shall report the results of the study and any recommendations.	Human Resources Code 40.0328	This is a one-time report that came from H.B. 753, 82R by Rep. Raymond (Zaffirini). It has an expiration date already built in. Per HRC 40.0328(d), section expires September 1, 2013.

Mandatory Reporting Requirements			
Report Name	Report Purpose	Legal Citation	Evaluation
S.B. 758 Capacity- Building Progress Report	Details activities in implementing the recommendations described in Subdivision (8) of Improvement Plan. Must include regional numbers of children in foster care who are placed in their home region separated into classifications based on levels of care.	S.B. 758, 80R, SEC. 51(c)	DFPS recommends repeal of this reporting requirement as the Foster Care Redesign can replace and serve a similar purpose and avoid redundant reporting of same data. This requirement, found in a section of S.B. 758, 80R by Sen. Nelson (Rose) is related to expanding and improving provider capabilities to increase capacity. DFPS has moved past the reform phase that was underway at the time of this bill and this work has been infused into, and developed through, foster care redesign, authorized in H.B. 1, 82R, Article II, Rider 25. This Rider requires a report on expenditures and progress which will become duplicative of this S.B. 758 requirement.
Strategic Plan	A state agency shall make a strategic plan for its operations. Each even-numbered year, the agency shall issue a plan covering five fiscal years beginning with the next odd-numbered fiscal year.	Government Code 2056	Report is useful. This requirement is applicable to all state agencies and should be retained.

Mandatory Reporting Requirements			
Report Name	Report Purpose	Legal Citation	Evaluation
Advisory Committee on Promoting Adoption of Minority Children	Report on the recommendations of the Department's Advisory Committee on Promoting Adoptions of Minority Children.	Family Code 162.309(j)	Report is useful. This report serves to advise DFPS on policies and practices that affect the recruitment and licensing of families for minority children waiting for adoption. The Advisory Committee's report has a direct impact on continuing faith-based efforts in the child welfare system to help improve outcomes for minority children who are waiting for a permanent home through adoption.

Mandatory Reporting Requirements			
Report Name	Report Purpose	Legal Citation	Evaluation
Community-Based and Residential-Based Placements	Each health and human services agency shall report the number of community-based service placements and residential-care placements the agency makes.	Government Code 531.042(d)	This annual report which came from S.B. 367, 77R by Sen. Zaffirini (Naishtat) is redundant in regards to certain information reported in the semi-annual report on permanency planning which came from S.B. 368, 77R by Sen. Zaffirini (Maxey/Naishtat). The information in the S.B. 367 report is a subcategory of the information in the S.B. 368 report and therefore the same purpose could be served by eliminating this report and retaining the other. We have recommended this report for deletion in the past but have not been successful in accomplishing that perhaps partly because of certain complexities involved in doing so. The reporting requirement is embedded both in statute and also in HHSC rule (TAC Part 15, HHSC 351.15(d)) and is intertwined with other requirements including data to be reported by other HHS agencies. Both statute and rule would need amendment in order to fully repeal this reporting requirement.

Mandatory Reporting Requirements			
Report Name	Report Purpose	Legal Citation	Evaluation
Permanency Planning for Children - S.B. 368, 77R	Report on the number of children residing in institutions who have been recommended for community-based residence, the number of permanency plans developed for children residing in institutions, progress and barriers on implementing those plans.	Government Code 531.162(b)	This report is useful. This report contains same or similar data as found in the Community-based and Residential-based Placements Report (S.B. 367, 77R) which is recommended for repeal. This report on Permanency Planning (S.B. 368, 77R) should be retained and it will serve both its intended purpose and also serve as a replacement for the S.B. 367 report which basically reports on a sub-set of the same population. Repealing one and keeping the other will avoid duplicative reporting while still providing recipients of the report with the same information currently required.
Foster Children in Drug Research Programs	Report on the number of foster children who participated in a drug research program during the previous fiscal year; the purpose of each drug research program; and the number of foster children participating in a drug research program by court order.	Family Code 266.0041(l)	This report is useful. This data is of great interest and effort to prepare the report is minimal.

Mandatory Reporting Requirements			
Report Name	Report Purpose	Legal Citation	Evaluation
Local-Level Interagency Staffing Groups Biennial Report	HHSC CRCG prepares. The receiving agencies shall adopt a joint MOU to promote a system of local-level interagency staffing groups to coordinate services for persons needing multiagency services. The agencies shall ensure that a state-level interagency staffing group provides a biennial report to the executive director of each agency, the legislature, and the governor that includes: (1) the number of persons served through the local-level interagency staffing groups and the outcomes of the services provided; (2) a description of any barriers identified to the state's ability to provide effective services to persons needing multiagency services; and (3) any other information relevant to improving the delivery of services to persons needing multiagency services.	Government Code 531.055(e)	HHSC is responsible for this report. DFPS provides minimal input and information and has served as reviewer of the draft report in the past.

Mandatory Reporting Requirements			
Report Name	Report Purpose	Legal Citation	Evaluation
Placements That Fail for Financial Reasons	Report on placements that were not made during the previous fiscal year due to financial reasons (the relative or caregiver cannot afford to care for the child). Report should also include, if possible, the amount of monetary assistance that would be needed to make the placement affordable. [This report may be combined with other reports the Department is required to submit to the legislature.]	Family Code 264.759	DFPS recommends repeal of this reporting requirement which came from S.B. 723, 80R by Sen. Lucio (Rose). With implementation of the Permanency Care Assistance/ Fostering Connections (PCA) program, kinship caregivers are becoming verified as foster parents at higher rates than before. Therefore, kin caregivers who may have said in the past that they could not care for a child because of financial constraints are now able to apply to become foster parents and, if they satisfy the requirements, receive monthly foster care reimbursements. Based on the small number of reported placements that failed for financial reasons (10 in FY 2011) and the new resources available to relatives and caregivers, we recommend repeal.
Services to Young Texans Under 6	The exec head of each HHS agency shall report to HHSC on efforts to provide health and human services to kids younger than 6, including development of new programs or enhancement of existing programs.	Government Code 531.02492(a)	HHSC is responsible for compiling this report, originating from S.B. 54, 77R by Sen. Zaffirini (Noreiga/ Naishtat).

Mandatory Reporting Requirements			
Report Name	Report Purpose	Legal Citation	Evaluation
Statistical Report on the Abuse and Neglect of Children	Statistical report derived from information collected in the Department's central registry on reported cases of child abuse and neglect.	Family code 261.004(c)	This data is of great interest to stakeholders. Requirement to report this information is met through the publication of the annual DFPS Databook.
Foster Care Residential Contract Management	State Auditor prepares. Management review of the residential contract management employees of HHSC and DFPS; including recommendations regarding the organization of, and skills and educational requirements for, those employees. The state auditor shall also make recommendations regarding the implementation of financial accountability provisions and processes to ensure effective and efficient expenditure of state and other contract funds.	Government Code 2155.1442(a)	The audit provides DFPS a valuable function in reviewing a small sample of contractors each year.