

TO A BETTER CPS



Jescus

DEPARTMENT OF FAMILY AND PROTECTIVE SERVICES



PROGRESS REPORT TO THE SUNSET ADVISORY COMMISSION:

CHILD PROTECTIVE SERVICES
TRANSFORMATION

FEBRUARY 2015



TEXAS HEALTH AND HUMAN SERVICES COMMISSION

KYLE L. JANEK, M.D. EXECUTIVE COMMISSIONER

February 9, 2015

Mr. Ken Levine, Director Sunset Advisory Commission 1501 North Congress, 6th Floor Austin, Texas 78701

Dear Mr. Levine:

We are pleased to present this Child Protective Services (CPS) Transformation progress report, which details ongoing work and accomplishments since our October 2014 plan.

CPS Transformation, which began in August 2014, initially focused primarily on reducing turnover by improving morale and engaging staff. Efforts included Department of Family and Protective Services (DFPS) and CPS leaders touring each region to discuss transformation with staff, creating workgroups led by field staff, and performance-recognition efforts. CPS also began implementation of priority initiatives such as new recruitment and hiring practices, a new training model, structured decision making, new supervisor training, and revamped performance evaluations for all staff.

From the beginning, I asked our field-driven transformation teams to quickly identify and test practice improvements through regional pilot programs. Staff succeeded in doing so and many of their efforts have already begun to have a positive impact on both the way we do our work and the results for our clients. At the start of the new year, Commissioner Specia asked regional directors and leadership staff to put into practice all successful pilot initiatives. They responded with a statewide implementation plan that will be fully completed by next fall. Transformation is moving fast and we will face challenges along the way. Even so, we are confident staff identified the right solutions to get services more quickly to families in crisis, to work together across our teams, and make it easier for caseworkers to do their jobs and spend more time with children and families.

In December, CPS completed a dramatic streamlining of policy for Investigations and Family Based Safety Services. The policy changes take effect February 15, and CPS will streamline other stages of service in the future. Essentially, the policy now clearly states what CPS must do

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and leaves the rest to training and practice guides. This effort gives staff a clearer path to follow as they do their job of protecting children and strengthening families.

CPS transformation is a field-driven effort and staff feedback and input are vital to our success. To measure the impact of transformation so far, CPS surveyed staff in early January 2015 using questions from the Survey on Employee Engagement (SEE) regarding job expectations, communication, and feeling valued. All state agencies conduct the SEE every two years, with the most recent survey conducted at DFPS in April 2014.

Compared to the April survey, CPS found improvements in some areas while others remain a challenge. For example, staff feels more satisfied with their job expectations, that their efforts at work count, and that they have a career with the organization. Yet, they still do not feel the organization sufficiently values staff or their input. We are listening to staff and will work diligently to correct deficiencies.

We are seeing progress in worker turnover and reducing caseloads but have yet to see statewide positive change on case outcomes because initiatives supporting this work are just now being implemented across the state. CPS expects even more improvement in turnover and caseloads when its revamped caseworker training and Strengths-Based Supervision model take effect statewide.

As you will see in this update, CPS transformation is moving forward with new and exciting changes, and we expect many more accomplishments in coming months. We look forward to working with you as we build a bridge to a better CPS.

Sincerely,

Kyle L. Janek, M.D.

Executive Commissioner, HHSC

John J. Specia, Jr. Commissioner, DFPS

Enclosure

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Summary of Major Accomplishments

Develop a Professional and Stable Workforce

- Increased recruitment efforts to military bases, colleges and universities September -December 2014
- Began consultations with universities to strengthen college collaborations and promote the CPS protective services profession – December 2014
- Improved screening and hiring processes and realigned roles of outsourced human services contractor, CPS supervisors, and DFPS hiring specialists – December 1, 2014
- Completed mentoring pilot (Regions 1, 3, 4/5, and 8) and incorporated lessons into plans for new statewide mentoring program August 27 December 1, 2014
- Redesigned CPS core (now called CPS professional development) and specialty training curriculum, established core competencies, and tested field-based delivery model – September 1 - December 15, 2014
- Launched new learning model, which combines mentoring, revised CPS professional development curriculum, and field-based specialty training in Region 8 – January 1, 2015
- Provided Strengths-Based Supervision training to CPS statewide leadership and initiated supervisor training in Regions 6 (Harris County) and 8 (San Antonio) – December 15, 2014
- Began roll out of Strengths-Based Supervision training to all CPS supervisors statewide by region
 January 2, 2015
- Rolled out new job descriptions for frontline positions February 1, 2015

Ensure Child Safety, Permanency, and Well-being

- Adapted Structured Decision Making (SDM) safety assessment instrument for Texas December 1, 2014.
- Began use of SDM safety assessment in early adopter units January 26, 2015
- Established new comprehensive CPS practice model framework and trained statewide leadership team January 6, 2015
- Completed pilots of multiple field-identified process and practice improvements in the Investigations, Family-Based Safety Services (FBSS), and Conservatorship (CVS) stages of services in designated regions and developed plans for statewide adoption – January 8, 2015
- Harris County moved to permanency 288 children in care more than two years, most of whom had a goal of adoption January 15, 2015.

Establish Effective Organization and Operations

- Implemented a plan to use predictive analytics to anticipate high-risk events and allow staff to make real-time interventions across all stages of service – October 1, 2014
- Completed streamlining of Investigations and FBSS policy December 11, 2014
- Transformation teams identified and tested organizational changes in the field to better align stages of service and expedite services to clients October 2014 January 2015

CPS Transformation Implementation Update

Priority A: Develop a Professional and Stable Workforce

Improving quality outcomes for children and families depends on CPS' ability to build a high-quality, professional, and stable workforce. CPS caseworkers help Texas' children in complex environments by performing protective work that demands a specialized set of intellectual and behavioral skills, appropriate and effective training, and ongoing support. DFPS launched a comprehensive initiative that includes redesigning recruiting and hiring practices, overhauling the current learning model for workers, and providing additional support through mentoring, strengthened management capabilities, and improved employee performance evaluation and recognition efforts. A better understanding of the characteristics of high-performing workers and the essential competencies needed for success on the job now informs the continuum of activity from recruitment and hiring to training and retention.

Recruitment and Hiring

This initiative establishes a strategic approach to recruiting the highest-quality individuals for the job; seeks to increase collaboration with targeted colleges and universities to develop child welfare professionals; improves DFPS hiring practices to identify successful candidates and expedite hiring; and establishes early outreach to staff within the first two years of service to ensure long-term retention.

DFPS surveyed CPS workers identified by management staff as the "best of the best." The survey revealed that almost 80 percent of these workers had degrees other than social work, and only in the conservatorship stage of service was social work the most common degree (29 percent). The agency also found that 40 percent came to the job with more than three years of other job experience. DFPS is using this and other information to guide outreach and recruitment efforts. Survey results will also help create a research-proven tool that identifies the essential characteristics and traits of individuals who will provide high-quality service, demonstrate a higher degree of commitment, and have the resilience to make protective services a career. DFPS will use this tool in the enhanced application, screening, and hiring process, (i.e. the design of interview questions).

	Implementation	
Initiative	Status	Comments
University Collaboration: Collaborate with colleges and universities to attract and develop qualified students through: Recruitment and outreach from diverse degree plans course curriculum development, and continuous learning.	In Progress	 December 2014 – Approved plan to establish collaborative program with selected colleges and universities. Began implementation by consulting Texas State University and The University of Texas at Austin (UT). January 30, 2015 – Conducted a focus group with current Title IV-E university

Specific focus on enhancing current collaborations with Title IV-E partner colleges and universities. The Title IV-E Child Welfare Training Program is an initiative, funded through Title IV-E of the Social Security Act, which supports tuition stipends designed to prepare social work students for careers in the child welfare profession and to develop the skills of current workers.		partners, including Texas State and UT, to develop recommendations to strengthen partnerships, increase the number of Title IV-E partners, and explore the possibility of expanding use of Title IV-E funds. • February 28, 2015 - Finalize short-term recommendations from initial focus group session. Establish a college collaboration workgroup. • Summer 2015 - Finalize long-term recommendations from college collaboration workgroup.
Recruitment: Expand recruiting and marketing efforts and opportunities to educate job seekers about protective services careers at DFPS.	In Progress	 October 2014 – Conducted a survey of CPS staff chosen by their managers for their exceptional knowledge, skills, and performance to get insight into the ideal candidate profile, including which degrees are most common for each stage of service. Results of this survey were used to inform the agency's strategic recruitment plan. December 1, 2014 – Began implementation of strategic recruitment plan. Intensified recruiting efforts with Texas colleges, universities, and military bases, and established key recruitment contacts who can match candidates from their recruitment pool with the agency's ideal candidate profile for each stage of service. February 28, 2015 – Finalize the Basic Recruiting Skills Toolkit which will provide hiring specialists the components of an effective recruiting strategy and include a standardized PowerPoint presentation, fact sheets, informational packets, narrative, career posters, job preview videos, social media content, and event banners. March 31, 2015 –Complete training of hiring specialists in their new recruitment roles and responsibilities.

The DFPS Retention Specialist will analyze detailed turnover data,

contact current and former staff and

support problem identification and

solutions in target areas of the state.

December 2014 - The DFPS Retention

Specialist began targeted support to

Region 7.

Continuous Learning

CPS Transformation launched the wholesale redesign of CPS training and is implementing a new continuous learning model that begins the first day on the job and extends throughout a caseworker's career. The new model includes using mentors, revised classroom CPS professional development training (formerly known as basic skills development training) and three tracks of field-based specialty training (Investigations, Family Based Safety Services and Conservatorship). Whereas the current model was largely classroom-based, the new model provides more field-based training focused less on task-specific knowledge and more on growing measurable competencies. Each new caseworker (now called protégé) receives a customized training plan the first week on the job that provides for up to nine months of focused and continuous development. New staff are certified as "case assignable" once they demonstrate specific competencies (as opposed to predetermined graduation dates). Ongoing training requirements support advancing practice. (See Appendix A for a flow chart of the model.)

From November 3 - December 15, 2014, CPS piloted the field-based specialty training component of the model for 18 new investigators in Region 7. The pilot tested use of individualized training plans, coordination and training delivered by field staff (as opposed to professional trainers), and case assignability based on achieved competencies. Preliminary evaluation of the Region 7 pilot found that staff were excited about the new competencies, the approach to determining case assignability, and the shift of training to the field. Supervisors liked the support they received during the pilot through weekly calls but feedback suggested a need for greater support/tools to assist the supervisors in delivering the field-based training. Design of the new continuous learning model incorporated this feedback. Region 8 is the first region to implement the new model as of January 1, 2015 for all new hire classes.

	Implementation		
Initiative	Status	Comments	
Overhaul the CPS core and specialty training program and curriculum. Change delivery of specialty training to be primarily field-based, delivered by staff with field experience.		November 3, 2014 - December 15, 2014 – Conducted pilot for investigator specialty training in Region 7.	
Implement the revised training model and new mentoring program as one program. Evaluate the program at key stages of	In Progress	 January 1, 2015 – Launched new CPS professional development (formerly core), specialty training, and mentoring program in Region 8. Will complete assessment by March 31, 2015. 	
implementation to address barriers and make practice improvements for successful implementation.		 May 1, 2015 – Begin statewide rollout to be completed by October 1, 2015. 	
		December 31, 2015 – Conclude one- year evaluation.	

Mentoring

CPS is implementing a statewide mentoring program to ensure protégés receive technical and personal support before and after training. CPS tested different features of mentoring programs in four pilots (Regions 1, 3, 4/5, and 8) from September 1 – November 30, 2014. CPS followed 34 protégé-mentor pairs in the investigation stage of service and completed an evaluation of the mentoring program on December 1, 2014. Feedback from the pilot included the importance of matching workers based on personality and location. Only two of the 34 protégés left CPS during the pilot. CPS finalized the statewide mentoring program and combined mentoring with the revised training components. The new continuous learning model launched January 1, 2015, in Region 8. Under this approach, protégés work with their mentor for the first four weeks after hire, again after classroom training, and throughout periods of specialty field training (up to the first nine months after hire). (See Appendix A for a flow chart of the model.)

	Implementation		
Initiative	Status	Comments	
Implement a statewide mentoring program in which experienced workers are paired with new workers, beginning with pilot sites to test the design. Key features of the pilot include a shared caseload between mentor and protégé and financial compensation for the mentors (paid overtime).	In Progress	 August 27, 2014 - November 30, 2014 Conducted and evaluated pilot mentoring programs in Regions 1, 3, 4/5, and 8. January 1, 2015 - Implemented new continuous learning model (combined mentoring, CPS professional development and specialty training) in Region 8. May 1, 2015 - Begin statewide rollout to be completed by October 1, 2015. December 31, 2015 - Conclude one- year evaluation. 	

Management Training

The success of transformation heavily depends on supervisors' ability to become proficient in their new responsibilities, including an increased level of decision-making, moving towards a field-based learning model for staff training, and new safety and risk assessment tools. Effective supervisors are also critical to improving staff retention. DFPS is implementing Strengths-Based Supervision (SBS) as the optimal program for management and supervisor training and support. Through a combination of classroom sessions and group coaching led by management (program directors and program administrators), the curriculum provides practical and emotional support and highlights the importance of clinical supervision essential to the complex work of child welfare.

In this area.	Implementation		
Initiative	Status	Comments	
Implement Strengths-Based Supervision training model statewide to improve management and supervisor capabilities in three essential areas: critical thinking and analysis; guidance and support; and administrative responsibilities.	In Progress	 September 24, 2014 – Launched SBS training for more than 100 frontline supervisors in Harris County (Region 6). November 14, 2014 – Completed delivery of SBS training to all CPS management staff statewide. December 2014 – Preliminary assessment of management staff and Region 6 staff and supervisors, found supervisors were successfully implementing the tenets of the model. Further evaluation is underway. December 9-10, 2014 – Trained selected CPS program directors to deliver SBS training statewide. December 11, 2014 – Launched SBS training for management and supervisors in Region 8 in anticipation of new continuous learning model rolled out to new staff in Region 8 on January 5, 2015. January 2, 2015 – Launched rollout of SBS training beginning in Regions 1, 4, 5, and 11 to all supervisors, with statewide completion scheduled for March 31, 2015. 	

Performance Evaluation and Recognition

Improving performance evaluation, increasing feedback, and expanding recognition efforts are part of the broader objectives of elevating the professionalism of CPS' workforce and improving the agency's culture, work environment, and staff retention.

CPS successfully piloted the "e-Rewards" recognition program in Region 2 and is now implementing the program, which enables CPS employees to earn rewards like wearing blue jeans to work or administrative leave, statewide. DFPS also implemented the Commissioner's employee recognition program known as "DFPS Stars" statewide for all DFPS staff.

CPS will use "360-degree" performance feedback for the ongoing development of management staff. CPS completed "test marketing" of the concept on October 1, 2014 and worked with Health and Human Services Commission staff to develop the tool. CPS will implement the tool starting February 2015 with the ten CPS regional directors, approximately 30 Program Administrators and other management staff of the same classification.

DFPS is developing new performance evaluations for all staff. CPS tested new caseworker evaluations in Regions 2 and 6 (excluding Harris County) in all stages of service. The revised evaluation measures tasks for quality as well as completion and incorporates practice model components and structured decision-making requirements. Supervisors unanimously agreed that the redesigned evaluation was more useful toward developing and training caseworkers on critical thinking, outcomes and quality. CPS is finalizing new evaluations for all CPS direct delivery staff, subject matter experts, administrative staff, supervisors and managers.

	Implementation		
Initiative	Status	Comments	
Evaluate successful regional recognition campaigns for expansion statewide.		October 31, 2014 – Identified successful recognition program for replication and launched statewide.	
Implement 360-degree performance feedback for CPS regional management.		November 5, 2014 – Implemented "DFPS Stars" employee recognition program.	
Revise performance evaluation tools for all caseworkers that incorporate qualitative and quantitative	In Progress	February 1, 2015 – Began 360-degree performance feedback with Regional Directors and program administrators. About 1, 2015 – Level a support response.	
indicators and correspond to new job descriptions, competencies established in training, and practice model guidelines.		 March 1, 2015 – Launch new performance evaluations for investigation, FBSS, and CVS caseworkers to align with new training model. Staged rollout for all other staff April- July 2015. 	

Priority B: Ensure Child Safety, Permanency, and Well-being

The CPS mission and mandate is to protect children from abuse and neglect; provide services so children can live with their families when possible or in another permanent setting; and ensure the health and well-being of children in the state's care. , Ensuring positive outcomes for children and families requires giving caseworkers the right tools and consistent training to aid in judgment and decision-making from beginning to end of a case. In addition, a signature goal of transformation is to improve operational efficiency to give staff more time to spend with children and families they serve. Meeting this goal is essential to retaining staff and providing quality services.

Structured Decision Making Safety and Risk Assessment

CPS is implementing "state of the art" safety and risk assessment instruments that guide and support caseworker decision-making in a manner consistent with the agency's mission of protecting children. While many states have safety and risk assessment tools, Texas has become a national leader by adopting a 24-hour safety assessment tool and integrating the tool with its Practice Model.

CPS worked with the National Council on Crime and Delinquency (NCCD) to adapt their Structured Decision Making (SDM) safety assessment tool for use in Texas and develop a comprehensive training plan and curriculum. Early adopters began using the new tool on January 26, 2015. Supervisors are already reporting that the new assessment better guides worker's decisions, provides structure to their staffings, and allows them to focus on those areas most critical to making decisions. Statewide rollout for all investigations caseworkers will be completed by March 29, 2015.

CPS is now developing a risk assessment tool to help caseworkers determine the likelihood of future abuse and neglect. This is an actuarial tool that will categorize situations as very high, high, moderate, or low risk for future maltreatment. Rollout to early adopters will begin in May 2015, with statewide implementation by August 23, 2015.

	Implementation	
Initiative	Status	Comments
Safety Assessment Implement a 24-hour safety assessment to be used during initial contact with the child or children. Aspects of the safety assessment tool can be completed on site, with additional factors being completed within 24 hours.	In Progress	 December 1, 2014 – Finalized 24-hour safety assessment tool. Development included rigorous "inter-rater reliability" testing of tools to determine consistency of rating of test cases by users. January 26, 2015 – Began rollout of SDM safety assessment training to early adopter units. March 29, 2015 – Deploy statewide.

Risk Assessment		December 18, 2014 – CPS completed the first draft of the risk assessment
Implement a new risk assessment for use within 30 days from the start of		tool.
the case. This new tool will be more objective and based on actuarial principles that have been scientifically accepted and adapted for Texas.		February 6 - 27, 2015 – CPS will complete work with NCCD to adjust the SDM tool to incorporate Texas' unique case information.
TO T	In Progress	May 7, 2015 – Deploy SDM risk assessment to early adopter units
		August 23, 2015 – Deploy statewide.
		June 2016 – Data Analysis showing actual performance of the new risk assessment tool nine months from implementation.

Practice Model

CPS developed a practice model framework that defines the organization, its values, and approach to serving children and families. As of December 2014, the practice model concepts have been integrated into all transformation-related initiatives, such as Structured Decision Making (SDM), performance evaluation tools, strengths-based supervision, mentoring, and the practice competencies created for the training model. The alignment between the practice model and other transformation initiatives is the most critical piece of implementation and what "brings the practice model to life" in the day-to-day work of child protection.

The practice model implementation also includes creating practice guides and critical-thinking tools available for the first time to workers to support all aspects of child protection work. Supervisors and mentors will also use these guides to train new workers. CPS began drafting practice guides in January 2015 to support policy streamlining for investigations and FBSS as well as implementation of SDM. CPS will release practice guides related to safety decision-making, safety planning, locating families, and using case history to coincide with the SDM safety assessment rollout. Other practice guides will be made available roughly in conjunction with streamlining policy in other stages of services and rollout of the SDM risk assessment tool. Parent-child visitation, working with domestic violence cases, presenting in court, and service planning are just a few examples of practice guides that will be completed in 2015 (beginning with highest-priority guides).

	Implementation		
Initiative	Status	Comments	
Implement a practice model, including a consistent framework for the standards, approaches, and methods that define the essential elements of how CPS interacts with children and families, as well as expectations of the child/family's experience with CPS.	In Progress	 October 14, 2014 – Finalized the practice model framework document and communication strategy. Published framework document November 15, 2014. Will publish web page in early 2015. December 31, 2014 – Completed integration of practice model with transformation-related initiatives January 6, 2015 – Trained regional directors, program administrators, and state office leadership on the practice model at the quarterly leadership meeting. Throughout 2015 – Complete practice guides. 	

Investigation and Family-Based Safety Services (FBSS)

The CPS operational review identified process, practice, organizational, and technology issues that were obstacles for investigations and FBSS caseworkers. These issues ranged from minor nuisances to major time-consuming activities. Subsequent to the operational review, two regional leaders organized a team with field staff from every region and state office subject experts to generate solutions.

The team prioritized ideas into three groups: those that could be implemented immediately, those that needed to be tested and evaluated before implementation, and those that required technology changes and could be considered for future IMPACT modernization efforts.

Immediate solutions CPS implemented included eliminating duplicate approvals for non-safety-related activities, decreasing the number of required staffings thereby giving more discretion to supervisors and workers, and changing practice to support more frequent contact with parents when children are safely placed with relatives.

	Implementation	
Initiative	Status	Comments
Decrease time spent on activities that can be eliminated or handled by other staff and adopt practice improvements increasing the amount of time spent with families, and getting families needed and tailored services faster while maintaining a priority focus on child safety.	In Progress	October 2014 – Implemented immediate solutions. Began testing select process and practice changes in specific areas. Between November 2014 and January 2015, pilots expanded to additional regions (See chart next page).
The team generated 320 process and practice changes and prioritized those for immediate implementation or pilot testing in the regions.	Ü	 December 2014 - January 2015 – CPS evaluated the pilots using focus groups, surveys, and data. January 8, 2015 – Developed statewide rollout schedule to implement successful pilots as practice.

INV/FBSS Pilot Efforts

Description	Implementation Status	Outcome / Evaluation
Ease of Case Transfer between INV & FBSS — Pairs Investigations and FBSS units to accelerate service provision; Requires joint visits for cases referred to services. Requires investigations to involve FBSS within 10 days of the start of the investigation. Triaging Cases — Improve triaging and assessment of cases before assignment to an investigator to allow CPS to focus on cases where the child is more likely to be at risk. This pilot reinforces the existing policy for allowing administrative and abbreviated closures where the situations fit these standards and tries to bring regional practice closer in line with the policy. Training consisted of reinforcement of the existing policy and practical case examples of administrative and abbreviated closures.	Pilots in Regions 8, 3, 10 (All INV/FBSS units) Pilots in Region 10 (All INV units)	Accelerates services to families by approximately 35 days by building relationship with the family and starting the family's long-term services while the investigation is still open and therefore closer to when allegation occurred rather than up to two months later. Focus group feedback from Region 10: The concept has been well-received by caseworkers. The concept has the potential to decrease caseload. The training was well-received. Survey data from Region 10 found: Since the rollout of the pilot, 45 percent of respondents had seen changes. Given the cultural resistance to close an investigation more quickly, this degree of change within the pilot timeframe is considered positive. 54 percent of respondents believed the
Caseworker Support Center – Create a one-stop/one-call shop where the best of case records management, administrative support, and workspace design converge to meet frontline worker needs. Some examples of tasks performed: "scan as you go" digital imaging of case records that omits the need for paper files and facilitates availability of records in IMPACT, and initiation of daycare services and drug testing.	Pilot in progress in Region 7 (8 units: five Investigations and three Conservator- ship units)	effort had reduced caseloads. Worker feedback has been positive in terms of assistance provided by administrative staff and regarding access to the redesigned, collaborative workspace. As of January 2015, staff scanned 376 cases/581 volumes.
OneCase Mobile Application – Deploy an application so caseworkers can directly upload photos and audio recordings from iPhones into the IMPACT case file.	Testing in progress with pilot to begin in February and statewide deployment scheduled for completion March 31, 2015.	The mobile application allows caseworkers to quickly upload photos and audio files into the case record while the worker is still in the field. It also allows for quicker access to photos by supervisors and others who need to assess case information. This application will improve worker efficiency and reduce caseworker frustration.

Reunification and Permanency

CPS believes that all children deserve a lifelong connection to a family and it is CPS' responsibility to find safe, permanent, family relationships for each child and youth in foster care. Because of this, DFPS is dedicated to creating a practice that supports developing family connections for children and youth, and quickly exiting children and youth to positive permanency. Towards this goal, two regional leaders organized a cross-functional team with field staff from every region and state office subject matter experts to identify CPS system improvements to move children more quickly to permanency. The group targeted agency practices that inadvertently delay reunification and other exits to positive permanency. The team also focused on field-driven ideas to reduce time spent on activities that could be eliminated or streamlined to allow workers more time for critical casework. Together, these efforts seek to improve time to permanency for children and increase caseworker morale and retention.

The team prioritized ideas into three groups: those that could be implemented immediately, those that needed to be tested and evaluated before implementation, and those that required technology changes and could be considered for future IMPACT modernization efforts.

	Implementation	
Initiative	Status	Comments
Increase the average number of children who can be reunified with their families in less than a year, and reduce the average time to permanency by involving field staff in identifying immediate solutions. The team generated 95 process and practice changes and prioritized 17 ideas for immediate solutions that can be implemented statewide and practice changes for testing and replication.	In Progress	 October 2014 – Began testing select process and practice changes in specific areas. Between November 2014 and January 2015, pilots expanded to more regions. (See chart next page). December 2014 - January 2015 – CPS evaluated the pilots using focus groups, surveys, and data. January 8, 2015 – Developed statewide rollout schedule to implement successful pilots as practice. February 20, 2015 – Permanency Summit with CPS regional directors and CVS program administrators to review permanency data and plan for regional summits to target problem areas specific to each region based on data, such as timeliness of adoptions.

Reunification and Permanency Pilot Efforts

Description	Implementation	Outcome / Evaluation
Single Child Plan of Service – CPS workers collaborate with child placement agencies (CPAs) in developing the Child Plans to reduce duplication and improve collaboration between CPS and CPAs.	Pilots in Regions 1, 2, 7, 9 (All CVS units)	Better coordination of services to children.
Include Kinship staff in CVS units — Pair Kinship and CVS workers to improve communication and expedite service/support to kinship placements. This pilot tested both embedding a Kinship worker in a CVS unit where they report to the CVS supervisor and a paired model where they retain their original supervisor. Based on feedback from the pilots, CPS decided to select option 2.	Pilots in Region 2 (three units), Region 3 (four units), and Region 6A (six units)	Participants in both models reported some positive results. Participants in the paired model (Region 6A) reported faster approvals of home studies compared to existing policy due to better communication between the program director and Kinship workers, and better communication with all caregivers of all siblings. Travel costs for Kinship workers may increase as they now cover the same geography as the CVS worker.
Family Reunification (FRE) pilot — This initiative seeks to identify appropriate cases for early reunification. Criteria were developed for program administrators, supervisors, and CVS workers to identify cases that can be closed within 60 days.	Pilot in Region 8 (4 CVS units)	The pilot has already successfully identified multiple cases for reunification and expanded to the remaining CVS units in Region 8 that were not a part of the pilot. Some feedback was that the criteria for case selection were too subjective and that workers should be involved in the decision for early reunification.
Complete Family Group Conference (FGC) within 30 days of removal – Add three permanency round table questions to the FGC to gather additional information, accelerate the creation of the Family Plan of Services, better assess cases, and involve CVS workers in the case sooner.	Pilot in Region 2 (All CVS units), Region 3 (5 CVS units), and Region 8 (10 CVS units)	Feedback from the pilots has been that the change has resulted in quicker completion of Family Plans and has saved two hours per FGC.
CVS worker at removal or adversary hearing – Assign the CVS worker earlier in the process to enable them to attend the Adversary Hearing. This will allow the CVS worker to understand the case more quickly, meet family members (potential kinship placements), and expedite services for the children.	Pilot in Region 5 (4 CVS units), Region 6B (All CVS units), and Region 11 (All CVS units)	Region 11 has been using this model previously. Focus group feedback from CVS workers and region leadership was that they could not imagine handling cases another way. One CVS worker said that even though the process requires more time in court on the front end, workers can better assist families long-term with this model.

Harris County Transformation

Transformation is a statewide effort. But with a child population of over 1 million and a monthly average of almost 4,500 children in CPS care, Harris County's challenges are especially acute. Children living in Harris County remain in foster care longer than the statewide average (29 months compared to 24 months) and are less likely to reunite with their families (22 percent compared to 32 percent statewide). Recognizing the specific needs of this urban area, CPS requested that Casey Family Programs assess the issues in Harris County and make recommendations. Casey Family Programs recommended a targeted permanency campaign and structured effort toward making long-term practice improvements.

Over the past six months, CPS has worked toward the high-level goal of moving to permanency a targeted group of 600 children who have been in care for more than two years, most of whom have a goal of adoption. During this process, CPS continued to develop a deeper understanding of barriers to permanency and engaged staff in taking ownership of the work needed to affect internal change. Harris County has now implemented a transformation management structure that includes the state transformation efforts in this plan along with initiatives specific to Harris County. This structure will develop, lead, track, and evaluate efforts designed to improve child welfare practice, increase the professional skills of the workforce, improve operational efficiencies, and effectively communicate a permanency-based vision within the agency and throughout the community. Strategies being developed include initiatives to reunify children and families earlier, improve child and family visitations, prevent children from staying in state care for extended periods of time, and engage community stakeholders as partners in permanency for children in Harris County.

	Implementation	
Initiative	Status	Comments
IV-E Demonstration Waiver		October 1, 2014 – The U.S. Department of Health and Human
Implement five-year child welfare		Services granted DFPS a Title IV-E
demonstration project in Harris County.		waiver. Casey Family Programs and
The project allows DFPS to waive certain		Chapin Hall at the University of
IV-E requirements to use funding more		Chicago will help the state plan and
flexibly on new service approaches.		implement the waiver project.
	In Progress	a lanuary 2015 Cooura an oytarnal
For the target population, CPS will		January 2015 – Secure an external evaluator to conduct the initial
implement the Child and Adolescent		
Needs and Strength (CANS) assessment		process evaluation, annual outcome
tool, and provide coaching on how to		evaluation reports upon
develop effective service plans and		implementation per federal requirements, and cost analysis.
identify interventions that meet the		requirements, and cost analysis.
specific needs of the child and family.		

Harris County Transformation

Move a targeted group of 600 children who have been in care for more than two years, most of whom have a goal of adoption, to successful permanency by December 31, 2014.

Reduce the length of stay in foster care and the time to permanency in Harris County by identifying key barriers and making practice improvements.

Implement geographically driven case distribution. Harris County was divided into four quadrants (north, south, east and west).

- December 31, 2015 CPS moved 288 children to permanency as of the target date and will continue to monitor progress toward this goal through 2015.
- January 9, 2015 Completed an analysis of the barriers to moving "long stayers" to permanency to inform Harris County transformation initiative priorities and solutions.
- February 6, 2015 First meeting of external stakeholder committee formed to engage key stakeholders in the process. The committee includes CASA, the Harris County Attorney's Office, and education, health, and mental health representatives.
- September 1, 2015 One-year evaluation for new methods of geographic case referral for investigators begun in September 2014. Already, the effort has improved the morale of caseworkers who feel they now have a more efficient way of meeting their work demands. Caseworkers also report gaining a better understanding of available resources in a geographic area and are working to build stronger and more effective relationships with resource and service providers.

Purchased Family Preservation and Reunification Services

CPS purchases a number of family preservation and reunification services such as counseling, substance abuse, and mental health treatment. In response to Sunset Advisory Commission concerns about the need to track outcomes of these services, CPS has begun using data to better drive contracting and referral decision-making. CPS will use data to identify the most-effective types of services, the providers with the best outcomes, and service capacity needs. To improve services and client outcomes, CPS intends to strengthen training, communication and access to information for all parties involved in the contracting, referral, and delivery of these services, including CPS management and workers, CPS contract monitoring staff, and providers.

	Implementation	
Initiative	Status	Comments
Develop a method to assess the efficacy of services using data on removals from FBSS and client recidivism at the region, unit, and provider level. Implement strategies to improve service delivery including the quality and array of services available and families' completion of services. Implement strategies to improve communication and partnership among program, contract, budget, and provider staff.	In Progress	 December 1, 2014 – Completed analysis of existing data available in the DFPS data warehouse, from contract management staff, and through quality assurance processes. Identified correlation between low service completion rates and poor client outcomes. Conducted focus groups in December 2014, to get more information in select regions based on data analysis. December 31, 2014 – Recommended practice, contract and communication improvements, including continued need for data analysis. March 1, 2015 – Begin implementing practice, contract, and communication process improvements through August 31, 2015. September 1, 2015 – Incorporate provider outcome and other contracting data into continuous quality improvement process, ensuring that it informs procurement and CPS program and contract management decisions.

Foster Care

Foster Care Redesign is the competitive procurement of performance-based contracts with a single provider to create sustainable placement resources in communities and keep children close to home. The Sunset Advisory Commission identified a need for long-range planning for Foster Care Redesign. Planning for statewide rollout (pacing and location) will take place in the larger context of CPS transformation. Sunset also identified the need to develop a consistent approach to measuring and monitoring provider quality in the "legacy" foster care system.

la tainti na	Implementation	
Initiative	Status	Comments
Develop a long-range plan for fully implementing foster care redesign informed by thorough evaluation, cost-analysis of redesign to date, and a Request for Information (RFI) to solicit information on procurement and implementation approach for DFPS to consider in preparing Request for Proposals (RFPs) for the Single Source Continuum Contracts (SSCC) in designated catchment areas.	In Progress	 January 1, 2014 – DFPS contracted with ACH Child and Family Services in Region 3 to serve as the SSCC for Tarrant, Palo Pinto, Parker, Erath, Johnson, Somervell, and Hood counties. As of December 13, 2014, 842 children were being served under ACH's Our Community-Our Kids model. This represents approximately 63 percent of all children from the catchment area. ACH is on track to serve all children in the catchment area by March 2015. September 19, 2014 – Public Consulting Group (PCG) completed an SSCC cost analysis (published in October 2014). The PCG cost analysis supported proceeding with the foster care redesign model. CPS will report on the analysis and recommendations to the 84th Texas Legislature. December 15, 2014 – DFPS received 16 responses to an RFI posted November 12, 2014 to solicit information for the Foster Care Redesign Implementation Plan due in February 2015. February 2015 – DFPS will publish a long-range Foster Care Redesign implementation plan.

Other Foster Care Initiatives

CPS Purchased Client Services division is changing from the traditional approach:

- Reactive
- Compliance-focused
- Annual assessment of risk

To an improved approach:

- Proactive
- Outcome focused
- Continuous risk assessment

A July 24, 2014, DFPS Internal Audit report on Residential Foster Care Contract Monitoring identified the traditional "one size fits all" monitoring approach to one using predictive analytics to improve how the agency identifies residential childcare providers and foster homes that present the greatest risk to child safety.

- August 2014 As an interim measure, CPS updated the current risk assessment tool and oversight practices contract staff use to monitor residential childcare contractors to be more safety-focused and include additional financial reviews to determine providers' overall operational health.
- August 31, 2015 CPS will establish a detailed work plan for full implementation of a predictive contract monitoring system (contingent on funding request).

Office of Child Safety

Abuse/neglect fatalities and near-fatal events occur in every program within DFPS. Historically, CPS, Adult Protective Services (APS), and Child Care Licensing (CCL) have been independently responsible for identifying and addressing issues relating to fatalities affecting persons served in their programs. There has not been a centralized mechanism for ensuring an independent case review, coordination of efforts, development of an agency perspective of systemic issues, or for targeting prevention efforts to reduce fatalities. This has resulted in fragmented responses from the agency and a perception that the agency is unable to provide unbiased reviews of its own work. The new Office of Child Safety (OCS) will instill a laser-focused and objective approach needed to research systemic problems, identify areas of prevention and intervention, initiate enhancements to practice, and bolster increased collaboration opportunities among DFPS, Department of State Health Services (DSHS), other agencies, and stakeholders. With this new office, Texas can be a model for other states and a national leader in addressing child fatalities and serious injury.

	Implementation	
Initiative	Status	Comments
Establish Office of Child Safety to house the child fatality review process within the Prevention and Early Intervention Division. This office will support independent data analysis, identification of systematic issues, and support cross-program (CPS, APS, CCL) initiatives to address preventable child fatalities, serious injuries and increase overall child safety. Policies and procedures for both investigations and reviews will be centralized and made available to all staff and the general public.	In Progress	 September 1, 2014 – DFPS created the Office of Child Safety and staffed first positions as of January 6, 2015. November 12, 2014 – DFPS produced a draft DFPS/DSHS strategic plan to reduce abuse/neglect fatalities. The final will be available to stakeholders and the legislature in early 2015. December 2015 – DFPS participated in the Forum on Improving Safety and Preventing Child Fatalities: Application of Predictive Risk Modeling along with the Department of State Health Services, Health and Human Services Commission, and the Honorable Judge Karen Sage. December 15, 2014 – DFPS produced draft Child Fatality Annual Report also scheduled for release in early 2015 January 2015 – Begin developing a public webpage to proactively post/house publically releasable child fatality information and data.

Prevention and Early Intervention

The Sunset Advisory Commission recommended prioritizing prevention programming at DFPS, which until recently has been a contracting function within CPS Purchased Client Services. Elevating Prevention and Early Intervention (PEI) to report directly to the Commissioner allows prevention to administer programs that maintain a connection to both the agency's critical child welfare function and with community and public health partners who participate in broader prevention efforts. PEI will benefit from data and research provided by the Office of Child Safety. Better use of data and partner involvement in the agency's prevention strategy will improve programs serving at-risk families.

	Implementation	
Initiative	Status	Comments
Reorganize DFPS' organizational structure to elevate Prevention and Early Intervention efforts as a direct-report to the Commissioner. Better use existing data to focus on programmatic outcomes, and develop a comprehensive strategic plan for PEI programs.	In Progress	 October 31, 2014 – Developed a plan for five-year strategic planning including stakeholder participation. October 1, 2014 – Executed contract with UT Austin, Center for Social Work Research to study and benchmark data elements currently collected and analyzed by DFPS against those collected by other states that are known to help prevent abuse and neglect. November 1, 2014 – Reorganized PEI Office to report directly to the DFPS Executive Commissioner. January 16, 2015 – Conducted a literature review on the best evaluation methods for prevention program effectiveness. May 29, 2015 – Assess current data measure collection and develop a plan for evaluation of HOPES program.

Faith-Based Programs

DFPS collaborates with faith-based organizations and faith-based community partners across the state to serve children and families involved with or at risk of involvement with the CPS system. In the Texas faith-based model, faith organizations conduct outreach to churches and faith leaders within their same faith community, while DFPS provides technical assistance. Local churches receive data specific to the needs of children, youth, and families in their area that help inform the type of ministry they are called to develop from "prevention to permanency." DFPS is chronicling the effort, which is receiving national attention for its success in galvanizing the resources of faith-based communities.

One opportunity for faith communities to provide tangible support to children and families is through a web-based engagement tool – Care Portal – that allows CPS staff to connect with the faith community. CPS staff use the portal to request church support for the needs of children and families. The portal launched on August 1, 2014, in Bell, Williamson and Travis Counties. It has since expanded to other Region 7 counties and will expand to Wichita Falls and El Paso in February 2015.

La Maria de la companya de la compan	Implementation	
Initiative	Status	Comments
Increase the number of churches establishing ministries to serve children and families involved with the child welfare system. Recent faith-based expansion efforts: CPS Director, Gail Gonzalez, Bishop Aaron Blake and Missionary Eric Porter have been appointed to the Child Welfare League of America Faith-Based Advisory Committee. My Brother's Keeper in Dallas/Fort Worth is collaborating with CPS to connect youth to mentoring and services, such as jobs skills development. Twenty-five churches identified. Continue the work of the Advisory Committee for the Promotion of Adoption of Minority Children (ACPAMC) to support faith-based work.	In Progress	 August 1, 2014 – Launched the Care Portal. To date, 45 requests have been submitted to the portal. November 20, 2014 – ACPAMC approved proposal to expand its ability to collaborate with faith-based organizations and extend its work beyond adoption to all stages of services from prevention to permanency. December 31, 2014 – Completed a chronicle of the evolution of the Texas faith-based model and collaborative work underway between churches and the state child welfare system. The document will be published in early 2015 as a national resource. August 31, 2015 – Will complete an evaluation of faith-based collaboration and portal in initial target sites.

Priority C: Establish Effective Organization and Operations

One recommendation of the Sunset Commission was for CPS to get back to the business of effective management and do a better job of planning, communicating, and listening. To do so, CPS has taken the following steps:

- reorganized state office to align with the field's organizational structure and maximize use of existing resources,
- tested restructuring of direct delivery functional units to improve services to children and families,
- paused non-critical policy updates and adopted a more effective policy development and communication strategy,
- prioritized information technology changes that will most significantly improve casework in the field as the agency works toward modernization of CPS' data system, IMPACT, and
- expanded the use of predictive analytics to address emerging problems more strategically and is developing a comprehensive quality improvement system.

Organization and Operations

The operational review found that CPS needs a stronger team focus across disciplines to support day-to-day field operations. For state office, CPS must eliminate silos; sharpen the focus on supporting the field; align and coordinate changes in policy, practice, technology, and training for the field; and enhance communications. These efforts will result in a more mission-focused state office that fosters greater regional support.

	Implementation	
Initiative	Status	Comments
Organization Restructure state office and regional functional units to better align stages of services and functions.	In Progress	 August 28, 2014 – CPS adopted a new state office organizational structure: Consolidated permanency functions Consolidated quality management functions Positions to coordinate and guide policy development and best practice innovation Integrated Alternative Response, investigations and family reunification services October 2104 - January 2015 – Piloted solutions to better integrate stages of services in the field now being implemented as practice. (See pages 14 and 16)

Operations Pause non mission-critical CPS policy updates and training and realign quality initiatives and projects with transformation goals. Eliminate duplicate approvals across points in a case shifting more decision-making to workers and supervisors and freeing time for management staff.	In Progress	 September 1, 2014 – CPS ended non-critical policy updates and paused non-critical training to the field outside of transformation efforts. October 1, 2014 – Eliminated non-safety-related duplicative approvals. Also identified safety-related duplicative approvals for possible elimination as part of transitioning more critical decision-making to workers and supervisors once new supervisor training is completed.
Information Technology Prioritize current and future technology projects that support transformation efforts or improve worker efficiency. IMPACT Modernization will provide a new technology platform for easier and less costly system enhancements in the future and a better user experience.	In Progress	 December 2104 – New data fields created in IMPACT to capture "time with families." User testing is occurring in Region 3 with training statewide April 2015. December 2014 – Identified exceptional items for technology improvements that support transformation goals and workers spending more time with families. April 2015 and August 2015 – Implement new SDM safety tool and assessment tool into IMPACT.
Communication Communicate transformation efforts to internal and external stakeholders. Revise form letters to parents, youth and reporters so they communicate DFPS involvement and decisions in plain language and align with the CPS practice model.	In Progress	 September 2014 - January 23, 2015 - Held 11 regional staff meetings and 13 stakeholder meetings and webinars. October 2014 - January 2015 - Released four CPS "Meeting in a Box" to implement change in the field through supervisor led communication and training. October 31, 2014 - Inventoried and prioritized form letters for revision. May 2015 - Revise priority form letters. The Parent Collaborative Group, a statewide group of parents who have successfully navigated the CPS system, will support the review.

Policy Strategy

CPS has enacted a new policy strategy to improve the clarity and accuracy of resources for staff by establishing a centralized process for policy review, development, and dissemination. Staff no longer receive frequent emails about policy changes. More coordinated and strategic distribution of policy enables staff to identify key changes and more effectively incorporate those into their daily work.

CPS completed review and streamlining of the existing policy handbook for Investigations and Family-Based Safety Services staff in December 2014. The revised handbook is a concise, accurate resource that focuses on critical tasks to achieving safety, permanency, and well-being. The policy review resulted in substantive changes, including improvements identified by field staff as part of transformation. The new policy takes effect February 15, 2015. CPS trained staff from December 2014 - January 2015 in anticipation of the rollout. CPS will review and streamline the Conservatorship policy handbook, with anticipated completion on October 31, 2015 and rollout in January 2016. CPS will engage stakeholders in the process.

	Implementation				
Initiative	Status	Comments			
Streamline the current CPS policy handbook by separating policy from practice and create a more effective and efficient process for revising, disseminating and implementing policy and practice in the future.	In Progress	 August 11, 2014 – Revised definitions of policy and practice and established a new process of policy development including centralized review. October 31, 2014 – Implemented a new process for dissemination of policy to field staff. December 11, 2014 – Completed streamlining of policy and practice for Investigations and Family-Based Safety Services. New policy takes effect February 15, 2015 February 2015 – Begin streamlining of policy and practice for Conservatorship. October 31, 2015 – Complete streamlining of policy and practice for Conservatorship. New policy will take effect January 2016. 			

Using Data to Improve Outcomes for Children and Families

DFPS maintains hundreds of data reports along with data and information gathered through the regional, investigation and Child and Family Services Review (CFSR) case reads. To effectively use this information to improve outcomes, CPS must integrate and analyze the data and information in a way that supports field and state office in effectively using it to manage staff and implement improvements. An important part of this is expanding the use of predictive analytics to support data-driven decisions.

To maintain the critical connection to field and state office, while ensuring objectivity, DFPS consolidated this work within CPS but outside of day-to-day operations. The CPS deputy assistant commissioner supports the Quality Management and Accountability and Systems Improvement divisions. Together, these divisions are implementing CPS' new Continuous Quality Improvement (CQI) program. The program will help field leadership and state office staff interpret quality information and data and use it to drive change, as well as help ensure accountability. CPS change efforts are currently largely focused on transformation. In the future, DFPS will engage in annual planning in line with Sunset Commission staff recommendations and will tie annual planning to quality management timeframes and practices.

	Implementation				
Initiative	Status	Comments			
Coordinate and align investigation CFSR quality assurance case reads. Integrate information and data gathered through investigation and CFSR quality assurance case reads, data analysis, predictive analytics, and program evaluation. Dedicate staff to support field and state office in strategically using the integrated information for planning and decision-making. Expand the use of data analysis and predictive analytics to identify emerging problems and high-risk cases. Support evaluation of CPS Transformation efforts through	In Progress	 August 28, 2014 – Systems Improvement and Quality and Accountability divisions established. October 15, 2014 – Produced first FY 2015 executive dashboard and CPS dashboards for each stage of service to help field and state office staff understand local system performance. Supporting customized analyses and additional reports for projects supporting specific outcomes (e.g., Educational Outcomes for Youth in Foster Care). October 1, 2014 – Developed annual plan to use predictive analytics to predict high- risk events and allow staff to make real-time interventions. Examples include: Region 8 Family Based Safety Services Critical Case Read and Master Investigator Deployment Model. 			

short-term analysis that allows CPS to	•	November 25, 2014 – Completed		
make adjustments during the course		evaluation plans for all transformation		
of implementation and evaluation of	activities. Key evaluation activity to			
outcome data over time.		date:		
		 Mentoring pilots 		
		 Recognition campaigns 		
		 Survey of Employee Engagement 		
		(SEE) interim survey results		

Evaluation of Transformation Efforts as of January 2015

CPS started its transformation efforts in earnest in August 2014. Initial transformation efforts have been aimed primarily at improving morale and engaging staff and, thereby, reducing turnover. Efforts have included Commissioner Specia and CPS management conducting Transformation tours in each region, creation of Transformation workgroups led by field staff, and performance recognition campaigns. Many of these efforts have been implemented simultaneously and, as a result, CPS has evaluated the impact of these efforts collectively.

Staff Are More Satisfied with Their Job and Turnover and Caseloads Have Declined

Every two years, all state agencies conduct a Survey on Employee Engagement (SEE) that measures staff feedback on a variety of issues. The most recent SEE was in April 2014. To measure the impact of Transformation on these areas, CPS surveyed staff in early January 2015 using questions from the SEE relating to early Transformation efforts including staff job expectations, communication and feeling valued.

The individual SEE questions and responses are in Appendix A. Looking at the results overall, there have been improvements in some areas while others are still a challenge.

- Staff are feeling more satisfied that their job meets their expectations, that their efforts at work
 count and that they have a career with the organization but still do not feel that the
 organization sufficiently values staff or their input.
- The Transformation tours seem to have had a positive impact as staff are more satisfied with upper management communication and visibility. They also feel there is more of an open and honest communication atmosphere. But staff still feel that the right information is not getting to the right people at the right time.

Although there are still challenges, overall morale seems to have improved as turnover for the period of September through December has declined for CPS overall and in each stage of service.

Turnover	FY 14*	FY 15*
Overall	25.8%	23.8%
Investigation	33.1%	29.6%
Family Based Safety Services	29.9%	25.6%
Conservatorship	21.3%	20.9%

^{*}FY data reflect September through December of each year

Caseloads have declined as well.

Caseloads	FY 14*	FY 15*
Investigation	19.5	17.6
Family Based Safety Services	15.6	14.9
Conservatorship	31.1	28.7

*FY data reflect September through December of each year

CPS anticipates further improvements in turnover and caseload as its revamped caseworker training and Strength Based Supervision model roll out statewide.

Outcomes for Children and Families Have Improved Slightly

As detailed in the Transformation plan, CPS has initiated several different practice change pilots to increase the time caseworkers can spend with families and improve outcomes. Most of these pilots started in the fall of 2014 and have been localized to a few geographic areas. CPS conducted focus groups in each pilot area in December 2014 and, using the feedback provided, is modifying the pilots as needed and expects a statewide rollout of each pilot to be fully completed by October 2015.

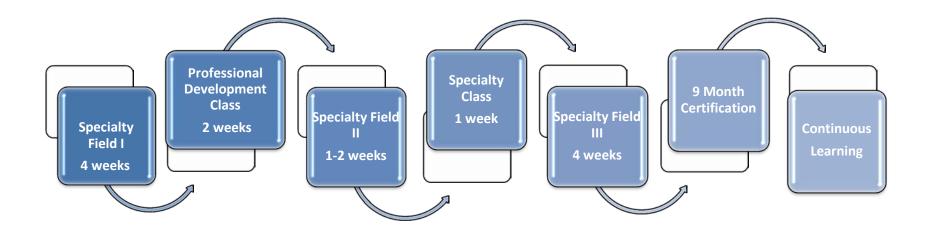
At this point, comparing statewide outcomes for children and families from September through December 2014 to September through December 2015, there has been some slight improvement.

Outcomes	FY 14*	FY 15*
Recidivism from Investigation	7.6%	7.7%
Recidivism from Family Based Safety Services	8.3%	7.0%
Recidivism from Reunification	12.6%	12.0%
Average Time to Investigation Closure (in days)	51.1	49.2
Average Number of Placements for Children in Foster Care	3.2	3.2
Exits to Permanency	92.3%	93.1%
Average Time to Exit to Permanency (in months)	19.4	19.0

*FY data reflect September through December of each year

But turnover and caseloads have only recently declined and most pilots have been in place for a fairly short period of time and in limited areas. Moreover, many of the outcomes, especially recidivism which is measured over a 12 month period, will not reflect the practice changes for some time. As a result, CPS does not anticipate that there will be a significant statewide change on outcomes until early fiscal year 2016.

Appendix A: Continuous Learning Model



Protégés work with a mentor for the first four weeks after hire, again after classroom training, and throughout periods of specialty field training (up to the first nine months after hire).

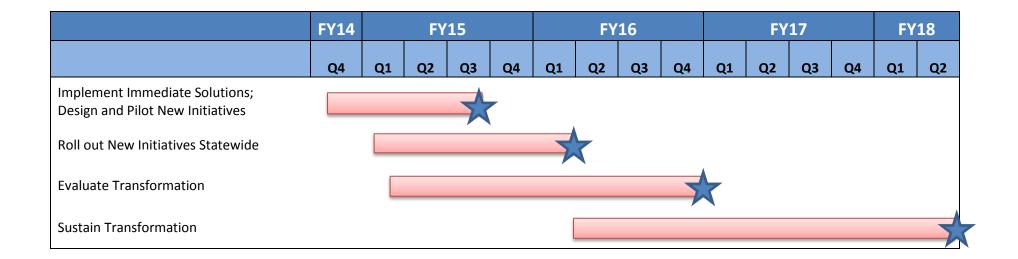
Appendix B: CPS Transformation Survey Results

Question	Apr-14	Jan-15
My job meets my expectations.	3.2	3.5
I feel my efforts count.	3.4	3.5
I believe I have a career with this organization.	3.7	3.8
Every employee is valued.	3.1	3.2
State Office Leadership demonstrates that every employee is valued.	3.3	3.2
My regional/district management demonstrates that every employee is valued.	3.4	3.4
My ideas and opinions count at work.	3.5	3.5
An effort is made to get the opinions of people throughout the organization.	3.4	3.3
I believe we will use the information from this survey to improve our performance.	3.3	3.2
When possible, decision making and control are given to employees doing the actual work.	3.4	3.2
Upper management (i.e. Executive and/or Senior Leadership) effectively communicates important information.	3.5	3.6
Upper management (i.e. Executive and/or Senior Leadership) tries to be accessible and visible.	3.4	3.5
My work atmosphere encourages open and honest communication.	3.4	3.6
I know how to elevate concerns or ideas for improvement.	3.7	3.8
The right information gets to the right people at the right time.	3.3	3.2

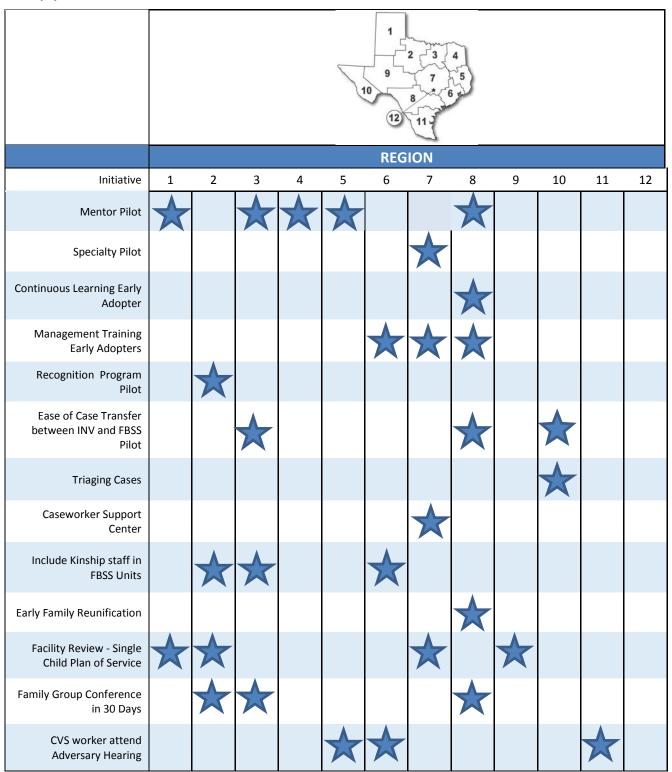
The April 2014 SEE response rate was about 70% while the response rate for the January 2015 survey was 41%. The higher response rate in April 2014 is likely due to staff having longer to respond to the survey and an extensive agency wide publicity campaign to encourage participation.

Staff are asked to respond to each question on a 5 point scale with options of Strongly Agree (5), Agree (4), Neutral (3), Disagree (2) and Strongly Disagree (1). The scores are averaged across all respondents. A score above 3.7 reflects an area of strength and that staff are generally satisfied and a score below 3.3 reflects an area of concern and that staff are generally dissatisfied.

Appendix C: Transformation Timeline



Appendix D: Transformation Pilot Sites



Pilot sites are now early adopter sites as all practices changes are implemented statewide with the exception of the caseworker support center which is contingent on successfu evaluation and funding.

Appendix E: Transformation Full Implementation Impact

Figure 1: CPS Staff Impact of Transformation Initiatives, Over Time

			CPS Staff Using New Approach, by:				
Transformation Initiative	Total number of CPS staff affected		1/31/2015	3/31/2015	6/30/2015	9/30/2015	12/31/2015
		# staff	323	394	1,295	2,083	3,352
Continuous Learning	3,352	% staff	10%	12%	39%	62%	100%
Strengths-based		# staff	483	1,005	-	-	-
Supervision	1,005	% staff	48%	100%	-	-	-
360 Feedback		# staff	-	63	-	-	-
300 Feedback	63	% staff	0%	100%	-	-	-
6-24 Month Calls		# staff	1,629	1,689	1,779	1,869	1,959
0-24 MONUTE Cans	1,959	% staff	83%	86%	91%	95%	100%
Performance Recognition		# staff	267	8,434	-	-	-
Program	8,434	% staff	3%	100%	-	-	-
Performance Evaluation		# staff	-	4,816	7,836	8,053	-
Tools	8,053	% staff	0%	60%	97%	100%	-
SDM - Safety Assessment	2,644	# staff	176	2,644	-	-	-
SDIVI Surety / ISSESSITIETT		% staff	7%	100%	-	-	-
SDM - Risk Assessment		# staff	-	-	1,272	3,817	-
3DIVI NISK 7133C33ITICITE	3,817	% staff	0%	0%	33%	100%	-
INV/FBSS Policy		# staff	-	3,876	-	-	-
Streamlining	3,876	% staff	0%	100%	-	-	-
OneCase Mobile App		# staff	-	6,874	-	-	-
One case Woodie App	6,874	% staff	0%	100%	-	-	-
Triaging		# staff	516	1,178	2,057	2,804	-
111061116	2,804	% staff	18%	42%	73%	100%	-
Case Transfer INV to FBSS		# staff	29	373	2,028	3,446	4,613
	4,613	% staff	1%	8%	44%	75%	100%
Visitation Matters		# staff	760	2,039	2,679	-	-
	2,679	% staff	28%	76%	100%	-	-
Realignment of		# staff	250	1,463	2,280	2,789	-
Kinship/CVS staff	2,789	% staff	9%	52%	82%	100%	-

Transformation Initiative	Estimated Number of CPS staff affected		1/31/2015	3/31/2015	6/30/2015	9/30/2015	12/31/2015
FRE focus to identify		# staff	38	589	1,431	2,209	-
appropriate cases for early reunification	2,209	% staff	2%	27%	65%	100%	-
Family Group		# staff	328	2,409	4,578	5,675	-
Conference in 30 Days	5,675	% staff	6%	42%	81%	100%	-
CVS Worker – Timing of		# staff	537	2,042	2,209	-	-
Assignment – Attend Adversary Hearing	2,209	% staff	24%	92%	100%	-	-

Notes:

- 1) This figure reflects select transformation initiatives with regional impact. It does not include all initiatives that may have regional impact e.g., recruitment and hiring efforts and faith-based initiatives.
- 2) This figure reflects all staff to be affected directly by these initiatives including direct delivery, management, and specialist staff, as well as certain state office staff. The figure does not capture staff with secondary impact e.g., quality assurance, policy, and program evaluation.
- 3) The estimated number of staff affected is based on analysis of the current CPS work force, as of the 1/16/15 Active Position Report and assumes the regional rollout schedule as of 1/31/15. Because the data constantly fluctuate, the figure is an estimate of the staffing impact. In the future, if an updated report was used, it would be expected that the total staff affected by an initiative would change. Similarly, rollout plans are subject to change.
- 4) CPS is rolling out new performance evaluation tools for all staff according to the timeframes represented in this chart. The count, however, reflects the number of staff for whom a new evaluation tool is available and not how many employees will be reviewed that month. Supervisors will evaluate employees at the point that their evaluation is due over the course of the next year.
- 5) All regional employees are eligible to participate in the employee recognition program; the count does not reflect the actual number of employees that will be recognized.
- 6) Impact of Facility Review Single Child Plan cannot be determined and is therefore not included in this chart. This initiative depends on successful collaboration with Child Placement Agencies. Regions have a plan for when they will begin to engage CPAs but the extent to which it will rollout cannot be determine at this time.

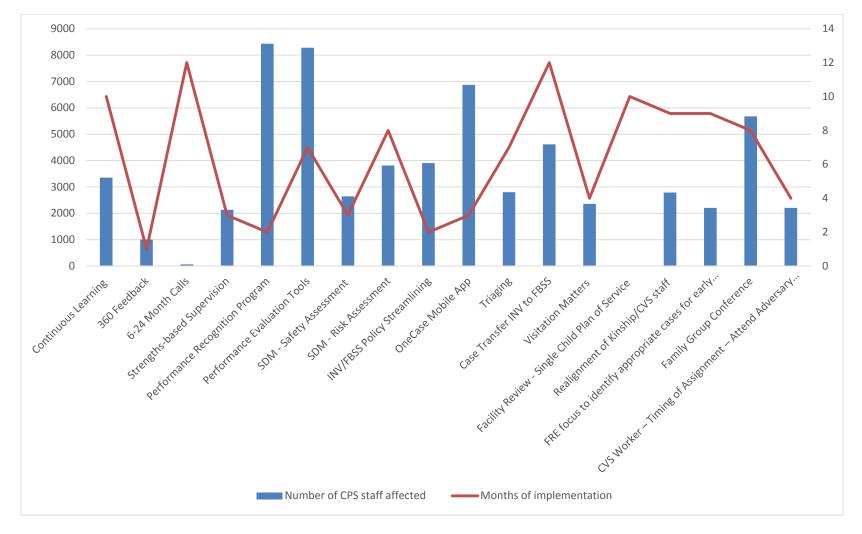


Figure 2: Staff Impact and Implementation Timeframe (in months)

Notes: Months to implement reflect remaining months of implementation in calendar year 2015, beginning in January. The 6-24 month calls initiative was fully implemented for the initial list of staff but will continue each month through the end of 2015, with increasing numbers of persons affected. Facility-Review - Single Child Plan of Service is dependent on collaboration with Child Placing Agencies and cannot be determined at this time.