

*Protective Services for
Families and Children*

The legal definitions of abuse and neglect are as follows:

Abuse includes the following acts or omissions:

- ◆ mental or emotional injury to a child that results in an observable and material impairment in the child's growth, development, or psychological functioning;
- ◆ causing or permitting the child to be in a situation in which the child sustains a mental or emotional injury that results in an observable and material impairment in the child's growth, development, or psychological functioning;
- ◆ physical injury that results in substantial harm to the child, or the genuine threat of substantial harm from physical injury to the child, including an injury that is at variance with the history or explanation given and excluding an accident or reasonable discipline by a parent, guardian, or managing or possessory conservator that does not expose the child to a substantial risk of harm;
- ◆ failure to make a reasonable effort to prevent an action by another person that results in physical injury that results in substantial harm to the child;
- ◆ sexual contact, sexual intercourse, or sexual conduct, as those terms are defined by Section 43.01, Penal Code, sexual penetration with a foreign object, incest, sexual assault, or sodomy inflicted on, shown to, or intentionally practiced in the presence of a child if the child is present only to arouse or gratify the sexual desires of any person;
- ◆ failure to make a reasonable effort to prevent sexual contact, sexual intercourse, or sexual conduct, as those terms are defined by Section 43.01, Penal Code, sexual penetration with a foreign object, incest, sexual assault, or sodomy being inflicted on or shown to a child by another person, or intentionally practiced in the presence of a child by another person if the child is present only to arouse or gratify the sexual desires of any person;
- ◆ compelling or encouraging the child to engage in sexual conduct as defined by Section 43.01, Penal Code; or

- ◆ causing, permitting, encouraging, engaging in, or allowing the photographing, filming, or depicting of the child if the person knew or should have known that the resulting photograph, film, or depiction of the child is obscene (as defined by the Penal Code) or pornographic.

Neglect includes:

- ◆ the leaving of a child in a situation where the child would be exposed to a substantial risk of harm, without arranging for necessary care for the child, and a demonstration of an intent not to return by a parent, guardian, or managing or possessory conservator of the child; or
- ◆ the following acts or omissions:
 - placing the child in or failing to remove the child from a situation that a reasonable person would realize requires judgment or actions beyond the child's level of maturity, physical condition, or mental abilities and that results in bodily injury or a substantial risk of immediate harm to the child;
 - the failure to seek, obtain, or follow through with medical care for the child, with the failure resulting in or presenting a substantial risk of death, disfigurement, or bodily injury or with the failure resulting in an observable and material impairment to the growth, development, or functioning of the child;
 - the failure to provide the child with food, clothing, or shelter necessary to sustain the life or health of the child, excluding failure caused primarily by financial inability unless relief services had been offered and refused; or
 - the failure by the person responsible for a child's care, custody, or welfare to permit the child to return to the child's home without arranging for the necessary care for the child after the child has been absent from the home for any reason, including having been in residential care or having run away.

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efforts, coupled with worker advisory committees in the department's regions, were part of PRS' Total Quality initiative.

Child Protective Services

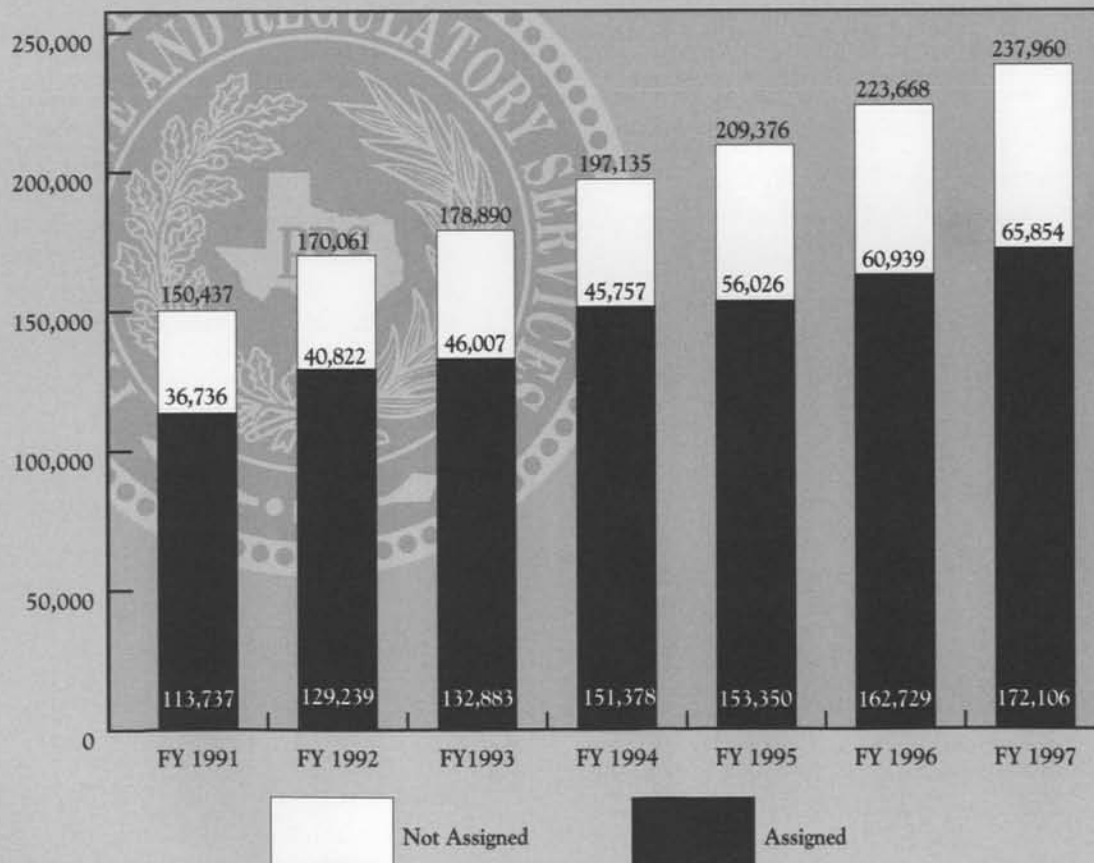
Child Protective Services (CPS) is the oldest and largest of PSFC's programs. It began with the establishment of the Child Welfare Division, which was created by the Texas Legislature in 1931 as a program within the Texas Board of Control. In 1939, the Child Welfare Division was transferred to the newly created Texas Department of Public Welfare.

During the next three decades, federal, state, and county participation in services to abused and neglected children increased gradually. When the Texas Family Code became effective Jan. 1, 1974, citizens were mandated to report suspected child abuse to the department. Statutory definitions of abuse and neglect were enacted in 1987 by the Texas Legislature.

In fiscal year 1994, the CPS program implemented major changes in its policies and procedures for intake and investigation of reports of child abuse and neglect.

The program began a pilot project during fiscal year 1993 involving a centralized intake

Reports of Child Abuse and Neglect by Fiscal Year



system that covers 30 central Texas counties. The pilot puts to use the already existing centralized abuse hotline, which also takes reports of abuse, neglect, or exploitation of adults who are elderly or have disabilities and reports of abuse and neglect in child-care facilities. The hotline has been expanded to handle an increasing number of calls and has replaced phone intake at the department's local offices in the pilot region. Under the pilot, the hotline not only receives all reports of abuse or neglect in central Texas, but decides whether the reports should be investigated. As in the past, hotline calls are also received from regions outside the pilot area. These reports, however, are still referred back to the region of origin, where local staff decide if they should be investigated.



Despite initial difficulties with this process, CPS believes that the idea of a statewide intake system is a good way to improve the consistency of the program's assessment of abuse and neglect at intake. In addition, a statewide intake system should enhance the department's capability to deliver the most appropriate services to clients.

Intake, Investigation, and Risk Assessment

Over the last five years, PSFC has moved toward establishing a more structured and consistent method for making decisions about the risk of abuse and neglect in families. In fiscal year 1993, the program implemented the Structured Model for Assessment of Risk in Texas (SMART). SMART is a service delivery system that gives staff a structured approach to assessing the risk of child abuse and neglect. The system is based on advances in casework practice and continuing research.

Under the SMART system, staff begin to assess the risk of abuse and neglect at intake by gathering information on risk-related areas that indicate how a family functions. Staff weigh such factors as whether abuse or neglect has already occurred, children's vulnerability, the parents' history, the way parents view their children, and the family's interactions and functioning. If staff believe that there is a reasonable likelihood that children will be abused or neglected in the foreseeable future, the report is assigned for investigation.

During the investigation, staff determine whether the children are at risk of abuse or neglect. If a child is in immediate and serious jeopardy, staff try to work with the family to establish and implement a plan to ensure the child's immediate safety. If that is not possible, PRS may petition the court to remove the child from the home.

When a child is currently safe but at risk in the foreseeable future, PSFC may offer in-home services to help the family manage the factors that place the child at risk. If the investigation

indicates that none of the children in the home currently face a significant risk of abuse or neglect, the investigation worker closes the investigation without further action.

During fiscal year 1994, PSFC staff were involved in evaluating, monitoring, improving, and refining the SMART system. Statewide and regional work groups met quarterly to address issues and challenges identified with use of the system.

PSFC is in the second year of a three-year federal project funded by the U.S. Department of Health and Human Services to design, test, and implement refinements to the risk system. The project will result in improved decision-making skills of staff at all levels. The department hopes that the information gathered

through this project will ultimately enable the state to direct resources where they are needed the most—to those families and children who are at the greatest risk of abuse and neglect.

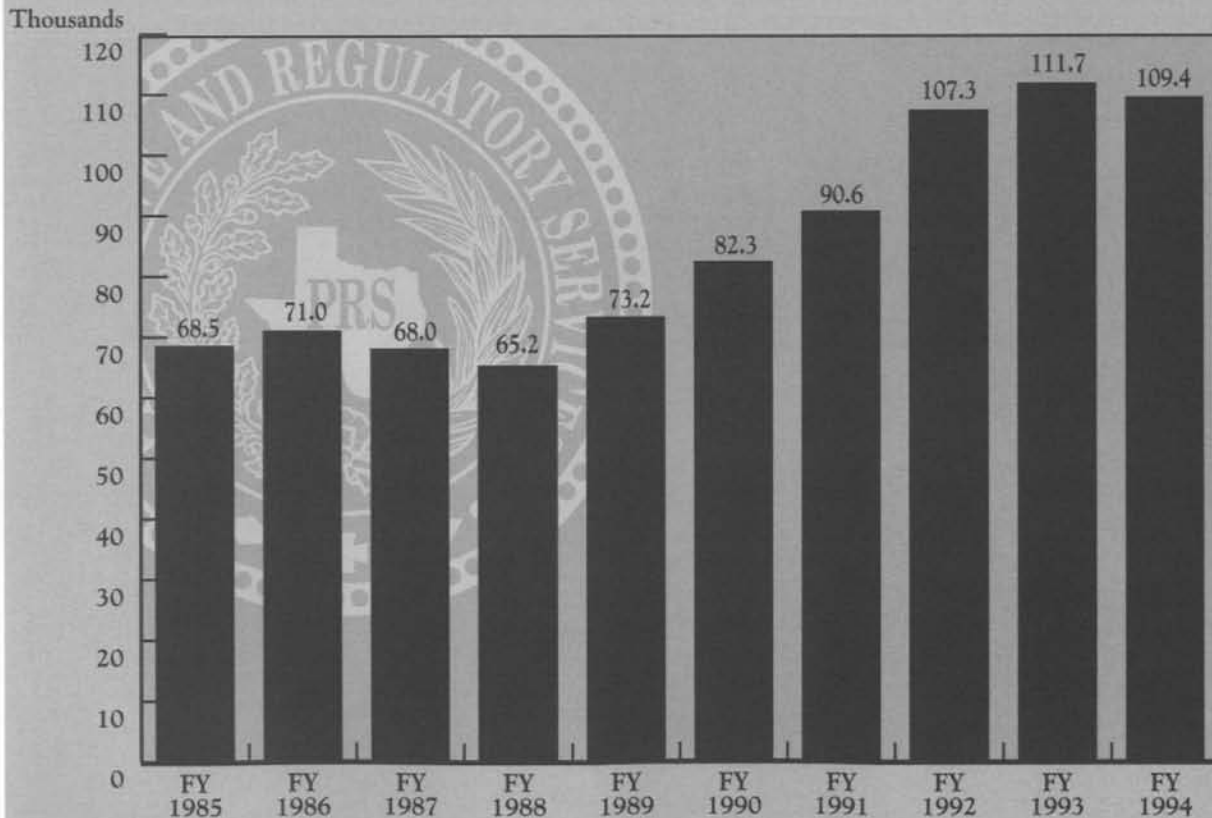
CPS believes children are at risk of abuse or neglect when there is a reasonable likelihood that they will be abused or neglected in the foreseeable future.

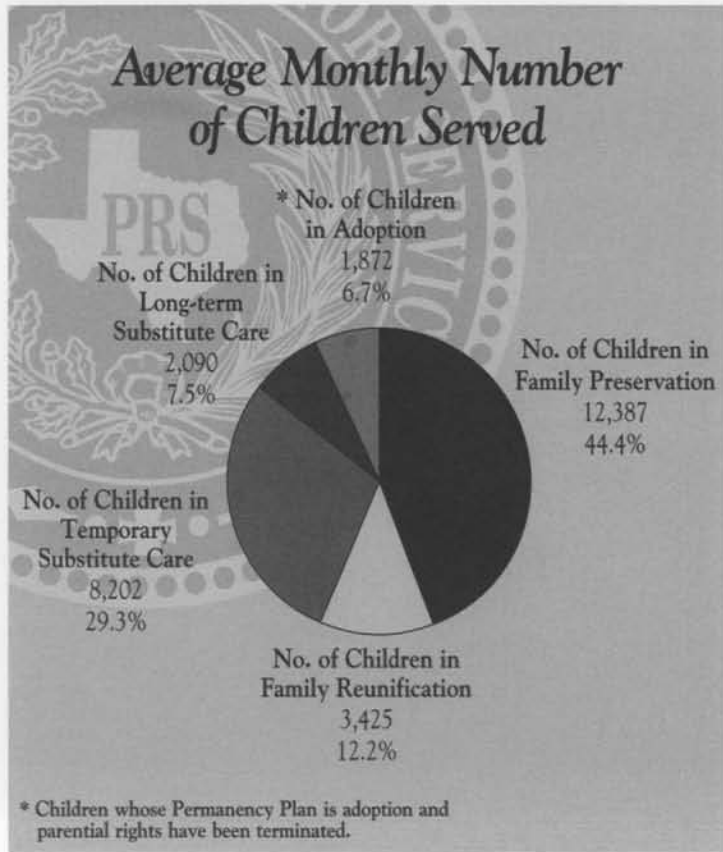
When reports of maltreatment are received, CPS staff assign them with a priority that determines how soon the case must be handled.

To establish time frames for investigations, CPS assigns each report of child abuse or neglect to one of two priority groups. CPS must initiate an investigation:

Investigation of Child Abuse and Neglect by CPS

Fiscal Years 1985-1994





to meet the children's needs so the children can remain in or safely return to their own homes. More than 73 percent of the children removed return to their own homes.

Workers focus on factors contributing directly to the abuse or neglect. Often, the parents do not use appropriate and effective nonviolent discipline methods, have minimal knowledge of child development and appropriate expectations for children, and do not know how to handle family or individual crises or find available support. Some parents may have emotional disturbances and require more intensive services from medical or mental health professionals. Some may have health or financial difficulties, problems with drugs or alcohol, or other behaviors that prevent the children from being safe and properly cared for. Many of the families who have entered the CPS system are affected by more than one of these factors.

Both CPS staff and professionals from other disciplines participate in case planning with families. Where available, a variety of community resources may provide services for the family.

Once the safety and risk reduction plans are established, CPS staff provide and arrange for the planned services, continue to assess the family dynamics creating the risk, monitor the children's safety, and assess the effectiveness of the services and appropriateness of the plans. If changes in the families occur, staff establish new plans with the families. If children's safety appears to be unattainable in their homes, staff make recommendations about other options to the families and appropriate authorities.

Families who are receiving these services may still have unmet needs when their cases are closed, but the safety of their children will be controlled and risk of abuse or neglect reduced. Staff will refer families to other appropriate resources to address their remaining unmet needs.

CPS provides intensive family preservation services to families who need intensive assistance to protect a child from abuse or neglect in the immediate or short-term future. CPS provides

- ◆ within 24 hours of receiving a Priority I report; and
- ◆ as soon as possible, but no later than 10 days of receiving a Priority II report.

Priority I reports concern children who appear to face an immediate risk of abuse or neglect that could result in death or serious harm.

All reports of abuse or neglect that are not assigned to Priority I are assigned to Priority II.

Family Preservation Services

When staff identify the need for continuing protective services and believe that children's safety can be maintained in their own homes, they develop service plans with the families with the goal of preventing further abuse or neglect. In a situation where children must be temporarily placed in foster care for their safety, the department also provides services to the parents that enable the children's return as soon as safety is ensured. In providing services, workers try to strengthen the families' abilities

reunification support services to families whose children are returning home at the end of court-ordered placements in substitute care.

In 1994, staff solicited comments on service capacity, service needs, target populations, and goals for the state's family preservation and support services. Staff held a series of meetings in more than two dozens cities across the state over a period of four months. State and community leaders gave their insights on how the services should be delivered. Staff also adopted "Texas Families: Together and Safe" as the name for the program.

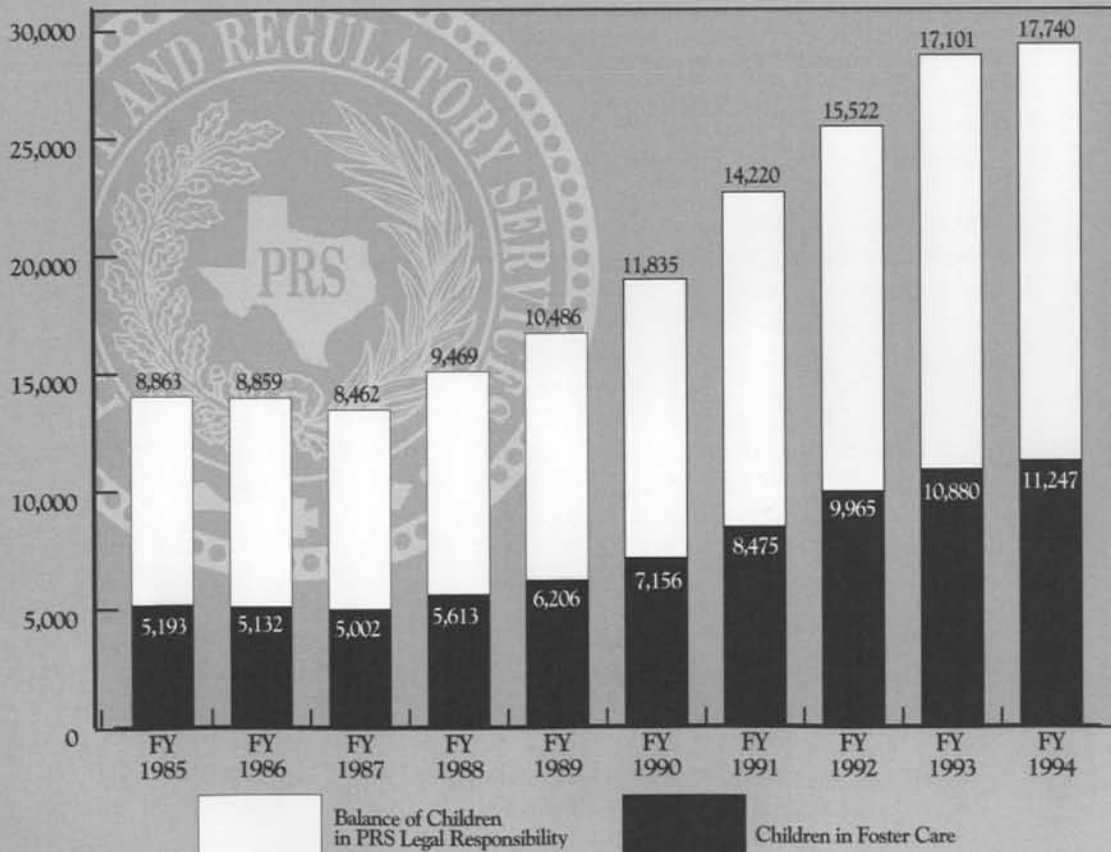
Prior to 1994, intensive family preservation services have been available in Houston, Dal-

las, Fort Worth, and San Antonio. By the end of fiscal year 1994, the program had been implemented on a statewide basis.

Resources are available when there are problems in a family that do not meet the statutory definitions of child abuse and neglect but need attention. These include Parents Anonymous, Family Outreach, Communities in Schools, and other child abuse prevention programs serving families at-risk of abuse and neglect.

Family Outreach is a community-based program that aids families in stress. Its main objective is to enlist volunteers in the prevention of child abuse and neglect and strengthening of family life. Casework managers funded by the depart-

Children in Legal Responsibility of PRS, Including Children in Foster Care Placement, at the End of Each Fiscal Year



ment supervise the work of highly-trained volunteers who provide support, encouragement, and parenting information to troubled families. There were 33 Family Outreach centers in Texas at the end of fiscal year 1994.

Foster Care

When CPS staff determine that children are not safe with their families because of abuse or neglect, they work with the courts to obtain managing conservatorship of the children. This court authorization allows staff to remove children from their families and place them temporarily with others and work with the families to make their homes safe for the children's return. Children may be placed with relatives, in foster homes, or in child-care facilities during their stay in the foster care system.

The increasing number of abuse and neglect reports result in a corresponding increase in the number of children entering foster care. At the end of fiscal year 1993, the number of children in care was 10,880. The end of fiscal year 1994 found 11,247 children living in out-of-home placement because their families were unable to provide them with a safe environment.

When children initially enter the foster care system, their needs are evaluated to determine which resources can best support normal growth and development while they are awaiting resolution of their families' problems. Staff continually work with the private sector to encourage the development of assessment centers that can receive children on an emergency basis and start medical, psychological, and developmental assessments almost immediately. The goal of assessment centers is to reduce the number of times children are moved while in care.

The great majority of children can, with support and understanding, be helped to live with families in the community. These volunteers, generally referred to as foster families, make caring for an extra child a part of their daily lives. Foster families assist in taking the children to appointments with professionals such

as dentists, doctors, and psychologists. Additionally, foster children can have visits with their biological families that may also include participation by their foster parents. At the end of fiscal year 1994, there were 3,684 Texas foster families certified by PRS to care for abused and neglected children, including 33 families residing out-of-state.

Foster parents are called upon to deal with very difficult situations and children who may be experiencing intense grief due to being separated from their parents. They need support to do this type of work. A survey of foster parents conducted in fiscal year 1993 identified the need for staff to provide foster parents with clear expectations about foster parent roles and feedback on how they are meeting expectations. During fiscal year 1994, detailed guidance was given to all foster home development staff about the type of issues to discuss with foster parents on visits and how to document the information. This policy was developed jointly by foster parents and staff to assure concerns from both sides were addressed. Foster parents now receive written copies of staff's quarterly narrative documentation as feedback of the worker's perception of them. This policy has greatly improved communication between foster parents and the department and is just one example of how foster parents and staff working together have improved the program.

For years, CPS staff have struggled to recruit and train sufficient volunteers to become foster families. The "Dare To Love" recruitment campaign began in June 1990 to recruit and retain specialized foster and adoptive families, focusing on children with disabilities and recruitment of minority families. Through this campaign, staff have produced various advertisements, public service announcements, videos, brochures, posters, and other materials statewide to promote foster and adoptive care. The Texas Recruiters Coalition, which is made up of foster and adoptive parents and recruitment specialists from across the state, meets regularly to discuss innovative strategies for recruitment. There is also a statewide, toll-free foster care and adoption inquiry line (1-800-233-3405).

In an effort to provide children with appropriate levels of structure and supervision within the least restrictive environments, staff use a levels of care system. It defines what type of foster care each child needs and is eligible to receive. The billing rates and levels correspond to the child's behavioral and emotional problems, developmental disabilities, and the intensity of service needed.

Services to Children with Disabilities

The Children with Disabilities Team, which is based at the department's state headquarters, was begun in 1993 to assist staff and caregivers in providing specialized services to children in substitute care who have disabilities. These



children are disabled in the areas of mental health or intellectual functioning, or have medical disabilities or physical impairments. Staff help caregivers acquire in-home resources such as medical equipment and communication devices to help care for children who have been placed with them. The department is planning to develop Children with Disabilities Teams in each region so that staff and caregivers can have access to expertise and consultation for services within their communities.

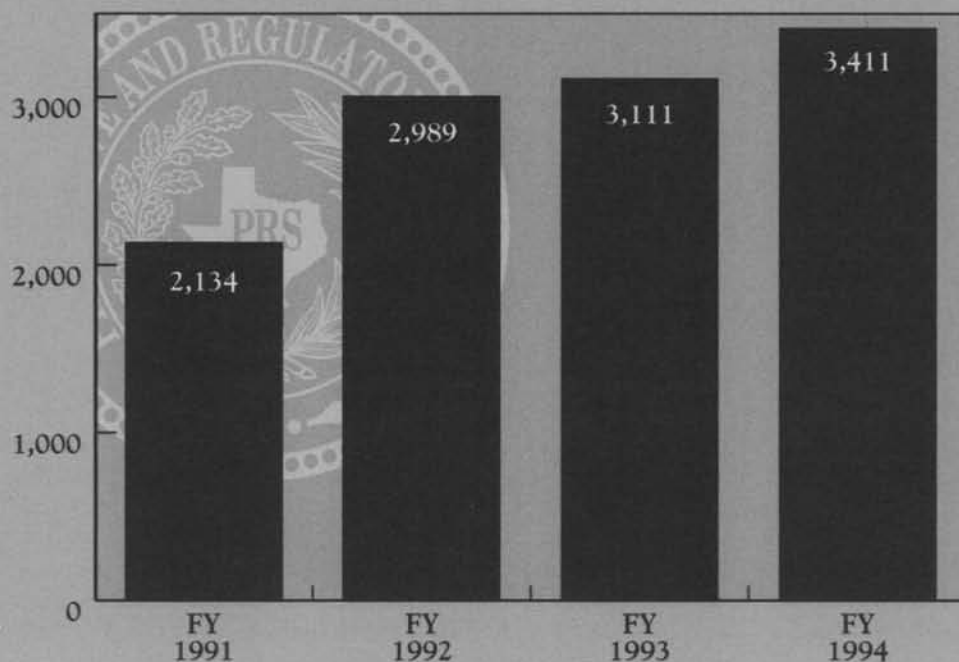
Permanency Planning

After assessing families and weighing the results of periodic court reviews, staff determine if it is possible to return children to their homes. When staff conclude that it isn't possible to return children in the near future, they make arrangements through the court system for children to grow up in a consistent, stable environment that will provide them with long-term nurturing relationships. The process of finding and developing such environments is part of permanency planning.

Permanency planning involves selecting goals and establishing plans of service for cases to ensure that children have the most appropriate placements and don't linger in the system. Permanency planning also includes the legal steps taken on children's behalf while they are in care. PRS adopted new policy on permanency planning that provides a structure for decision making when choosing a permanency plan for a child. The department began an intensive training initiative in the last part of this fiscal year that will continue into 1995. All staff, with the exception of clerical workers, will receive training on this policy to increase cooperative efforts that will result in a faster resolution of cases.

During fiscal year 1994, PRS was awarded a federal grant that focuses on improving the placement process for children waiting to be adopted who are in CPS' custody. This three year project, called Children Awaiting Permanent Placement (CAPP), focuses on children entering foster care, as well as those in

Clients Receiving Post-adoption Services



foster care and free for adoption. Staff across the state and in residential treatment centers are coordinating efforts to establish more appropriate initial and permanent placements. They are also working toward improving training and communication to better meet the needs of children.

Adoption Services

The permanency plan for most children in PRS' managing conservatorship is for the children to return home and for the department's responsibility to be dismissed. But when a child cannot return home safely, adoption is the most frequently selected permanency plan.

Once PRS determines that adoption is in the best interest of a child, staff ask the court to terminate the parental rights of the child's parents. When the child is legally freed for adoption, staff begin work towards placing the child with a permanent adoptive family.

Most of the children in PRS' conservatorship who are awaiting adoptive placements have

special needs. They generally are school-age, have physical or mental disabilities, belong to racial minorities, or need to be placed together with their brothers or sisters. These children have a great need for acceptance and nurturing to help them grow and flourish. The PRS adoption program finds adoptive families for these children. During fiscal year 1994, the department placed 791 children in adoptive homes.

PRS encourages private adoption agencies to help the department place children into adoptive homes. As a result of a collaboration between PRS and Texas Association of Licensed Children's Services (TALCS), in fiscal year 1995, the department will expand adoption services for children through open enrollment. By reformatting purchased adoption services in this manner, child-placing agencies can make their waiting families more generally available to children across the state. These services will include placement into approved private child-placing agency homes and supervision of the placement through consummation. The goal of this mutual effort is to increase the number of adoptive families avail-

able for children and reduce the length of time children wait for adoptive homes.

To enhance adoption services for children who are waiting to be adopted, PSFC has continued to make a special effort to recruit adoptive parents. Through the "Dare to Love" campaign, recruitment activities are both general and specific to a child's identified special needs. Activities involve efforts such as adoption booths and fairs at malls and other public facilities, public service announcements, news media campaigns, community task forces, recruitment of churches and private industry to help locate prospective adoptive families, and airport billboards.

Another resource used is the Texas Adoption Resource Exchange (TARE), which is an information exchange and photo-listing service published by PRS. TARE includes both the children who are available for adoption and families who are interested in adopting through the department. Private adoption agencies can also register their approved adoptive families in TARE. Registrations can be matched by specific criteria and referred to the child-placing staff. TARE registers children in the National Adoption Network to match with prospective adoptive families across the United States. TARE is distributed to about 550 agencies in Texas and other states. TARE received national recognition in fiscal year 1994 for registering the largest number of children from any of the 45 states that are members of the National Adoption Exchange. TARE ranked second in the nation in creating adoption matches for children.

Another initiative that gained momentum and has had positive results in fiscal year 1994 was the One Church, One Child recruitment campaign. The department provides funding for a liaison to work with this project, which is based in the Houston-area where there are a large number of African-American children waiting for adoption. African-American ministers involved in the project believe that if a family from each African-American church would adopt a child or sibling group, there would not be any African-American children waiting for permanent families.

Once recruited, prospective adoptive families attend a training program. The training gives staff and families the opportunity to explore their abilities to care for children who are waiting to be adopted. After adoptive parents complete the training, PSFC staff complete a home study of the parents. The study includes an assessment of the adoptive family's flexibility in all areas of life and their sensitivity, understanding, and ability to deal with the children's unique needs.

After completing the home study and approving families for adoption, adoption staff work with other CPS staff to identify children awaiting adoption who may benefit by a particular family's skills. When an adoptive family is selected for a child, CPS staff help the family understand the child's readiness for adoption and evaluate the family's ability to provide for the child's specific needs. The first step in this process involves providing the adoptive family with a copy of the child's case record, including a detailed Health, Social, Educational, and Genetic History (HSEGH) report. The department requires a family to review a HSEGH report before meeting a child. Reports do not include information that might identify individuals whose identity is confidential.

Staff arrange a placement after several pre-placement visits between the child and adoptive family and provide support services to help them develop their relationship. The adoption can be consummated after the child has been in the adoptive placement for six months.

Children in foster care may be adopted by their foster parents, although they are assessed in a similar fashion to any other prospective adoptive families entering the CPS program. As with new placements, foster-adoptive placements receive support from adoption services staff to prepare the child and foster family for the transition.

Adoption assistance is available for eligible children to enable lower income families to adopt and otherwise help families provide for the adopted children's service needs. Adoption subsidy benefits include medical assistance and

when needed, financial assistance. The subsidies are provided from either federal or state funds depending on a child's eligibility. For fiscal year 1994, the average monthly total of adoption subsidies provided was 4,690. Another resource to alleviate financial barriers associated with adopting children through the department is the nonrecurring adoption expenses benefit. According to the Tax Reform Act of 1986, PRS reimburses nonrecurring adoption expenses such as attorney's fees, court costs, and adoption study costs.

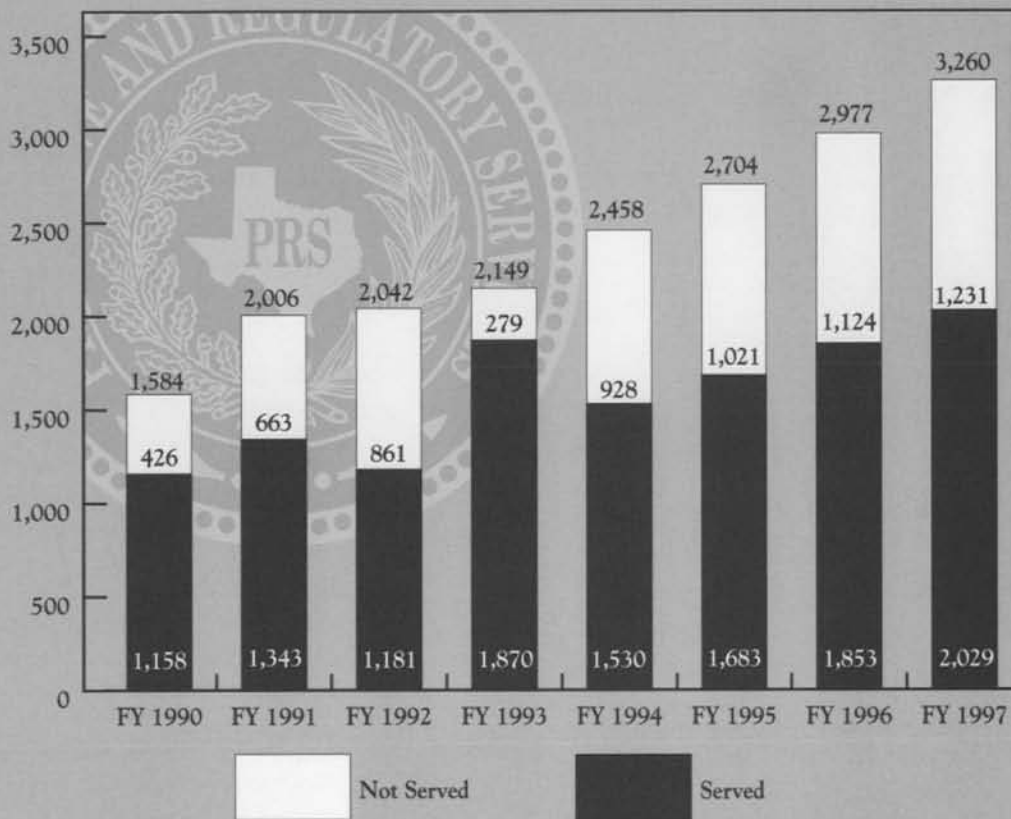
Adoption was once considered an exit service, with no further services needed after a child was placed with a suitable family. As the department gained more experience placing children in its custody, it became apparent that the need for services did not end with the adoption. Placement in loving homes did not always heal the scars of abuse and parental separation. Often, as children placed by the department grew older, their needs increased and the adoptive families had to turn to mental health professionals for help. The traumatic

effects of abuse and neglect were so powerful and lasting that the children often required chronic treatment. To address the situation, the 71st Texas Legislature authorized PSFC to provide post-adoption services to children and families whom the department was serving prior to adoption. The program was implemented in the spring of 1990 through the development of contracts with private child-placing and social service agencies. Services provided include case management, parent training and support groups, respite care, and therapeutic services. The purpose of the post-adoption service program is to help the adopted child and family adjust to the adoption, cope with any history of abuse in the child's background, and avoid permanent or long-term removal of children from their family's home. While inpatient/residential treatment is available through the program, it is limited to acute care situations. Post-adoption services were provided to 3,411 people during fiscal year 1994.

Project ENABLE was funded through a federal grant to develop a curriculum to train mental



Preparation for Adult Living Eligibles and Youth Served Fiscal Years 1990-97



health and adoption professionals. Further developed in fiscal year 1994, the focus of the training was post-adoption dynamics and services. Two-day training workshops were held in five sites across Texas. Nearly 600 professionals and adoptive parents attended the training.

To ensure the protection of children and adoptive families when working across state lines, Texas abides by the Interstate Compact on the Placement of Children. The compact promotes cooperation between the 50 states, the District of Columbia, and the U.S. Virgin Islands in foster and adoptive placements.

The compact ensures that each interstate placement is in the best interest of the child, policies and applicable laws have been followed, the child's legal and financial responsibilities will continue to be met by the sending agencies or individuals, and the child actually

relocates to the receiving state. During fiscal year 1994, 1,222 children were approved by interstate compact to be placed into Texas and 1,437 were approved for placement out of the state.

Preparation for Adult Living

Becoming an adult is a frightening and challenging experience, but these factors are compounded further for youths who have been raised by the state in the foster care system. Many of these youths will not be able to depend on their biological family for emotional and financial support while they are making the transition. PRS provides the Preparation for Adult Living (PAL) program to help such youths assume the responsibilities of adulthood.

PAL services include independent-living assessment and skills training; group and indi-

vidual counseling; sex education; money management classes; vocational assessment and training; General Educational Development (GED) or college preparation courses; and other services aimed at preparing youths for responsible adulthood. During fiscal year 1994, 1,695 clients participated in the PAL program. The 73rd Legislature passed House Bill 1356, which exempts youths who are leaving foster care from having to pay tuition and most fees at state-supported universities, colleges, and vocational schools. This legislation opens doors of opportunity that these youths previously had little or no hope of entering. A number of youth took advantage of the legislation in fiscal year 1994.

In fiscal year 1994, the statewide Youth Advisory Council, which is made up of youths in foster care who are ages 16 to 19, met several times. This group solicits input and ideas from youth in substitute care and works with department staff to improve services to this population.

Gang Activity Prevention Program

In fiscal year 1994, PRS funded the Gang Activity Prevention Demonstration Project in Baytown, Texas, which was developed in

response to increased violence in the community. Former gang members and parents of former gang members serve as staff on the project. The program provides after-school activities including tutoring, cultural enhancement, and recreation to children ages 9 to 11. Fifty children from four elementary schools are targeted for services; however, 191 children participate in the program on a regular basis. As of the end of fiscal year 1994, Baytown's two major African-American gangs disbanded.

Services to Runaways and At-risk Youth

Commonly referred to as the STARS program, Services to Runaways and At-risk Youth makes services available to youth and families who would otherwise fall through the cracks. They are experiencing family conflict related to a youth running away, threatening to run away, or skipping school. The pressures resulting from these family conflicts often create the potential for violence. Unfortunately, the situation must escalate before CPS or juvenile probation will intervene.

Thirty-three contractors across the state maintain 24-hour availability of services to provide crisis intervention and counseling services to youths and families in hopes of resolving conflicts so youths can remain with their families. Contractors have emergency residential care (shelter or emergency foster homes) available in the event that it is not advisable for youths to return home immediately. Follow-up counseling is made available to all youth and their families and a follow-up contact is made with the family 90 days after termination of services.

Texas Runaway Hotline

In April 1993, operation of the toll-free Texas Runaway Hotline transferred from the Governor's Office to PRS. An experienced team of volunteers headquartered in Austin provides an array of services aimed at reducing the number of runaway children living on the streets. These services include assessment of



callers' problems, information and referral, conference calls to parents, and a message relay service to runaways and their families. Over the past two years, calls to the Texas Runaway Hotline have increased by 60 percent. In fiscal year 1994, about 59,450 calls were processed by program volunteers in Texas.

Community Development and Volunteer Initiatives

PSFC had a number of initiatives in fiscal year 1994 that addressed increasing community and volunteer participation in the CPS program. One initiative, known as the Community Services Coordination Project, supported regionally-based projects across the state that promote volunteer opportunities for communities and organizations to address the prevention of child abuse and neglect.

Examples of these community projects are Volunteers in Service to America (VISTA) projects in Regions 1 and 6, Adopt-a-Caseworker projects in several locations, the Dare-to-Love sponsorship program for children in foster care, respite/crisis nursery programs that support families by offering safe alternatives for children during times of family crisis, and the annual statewide Child Abuse Prevention Month campaign in April. Each of these projects resulted in thousands of hours of volunteer service to the families and children served by CPS, as well as valuable donations of goods and services. Without the help of these community partners, CPS would not be nearly as effective.

Other Program Directions

The Children's Protective Services Training Institute operates through a cooperative agreement between PRS and four graduate schools of social work in different metropolitan areas. The program identified caseworker competencies and helped a professional development coordination team create a supervisor training plan. The participating universities are the University of Texas at Austin, the University of Texas at Arlington, the University of Houston, and Our

Lady of the Lake University of San Antonio.

Staff began a quality control process in fiscal year 1994 to ensure that the right clients are being served with the right services for the right amount of time. The first stage was an audit process in the department's regions that involved interviews with clients, community, and staff. The second stage will involve redesigning the case-reading process with a focus on outcomes for families. The third stage will use information gained from prior studies to show the relationship between resources and outcomes so that resources can be better managed.

Beginning in the fall of 1994, PSFC staff began a pilot project that will test revisions to the current risk assessment system. The project, which will end by the summer of 1995, is integrating information on cases, caseworkers, and the organization into decision-making models for intake, investigation, and post investigation. Staff are also studying the use of intake information to help screen-in or screen-out some of the cases for investigation.

PSFC staff worked with the PRS Office of the Ombudsman to coordinate responses and actions when complaints from clients were received. This has improved responsiveness to the individuals whose lives are affected by the department.

PSFC developed child death review teams in various parts of the state, as a result of the Children's Justice Act Grant. The goals of this multi-disciplinary team approach are to identify causes of child deaths in Texas, change laws and develop educational programs as needed, and reduce the number of preventable child deaths in Texas. Children's Justice Act staff completed production of two instructional videos during fiscal year 1994. The videos covered CPS specialists in court and a mock trial of a case involving child sexual abuse.

PSFC will continue to support prevention efforts targeting at-risk families. PSFC is committed to building a strong community of advocates for children.