

Agenda for the Day

- 10:00Welcome1:15Policy Report-Out
- 10:15State of the State1:45T3C updates
- 11:15 Policy Round-Up

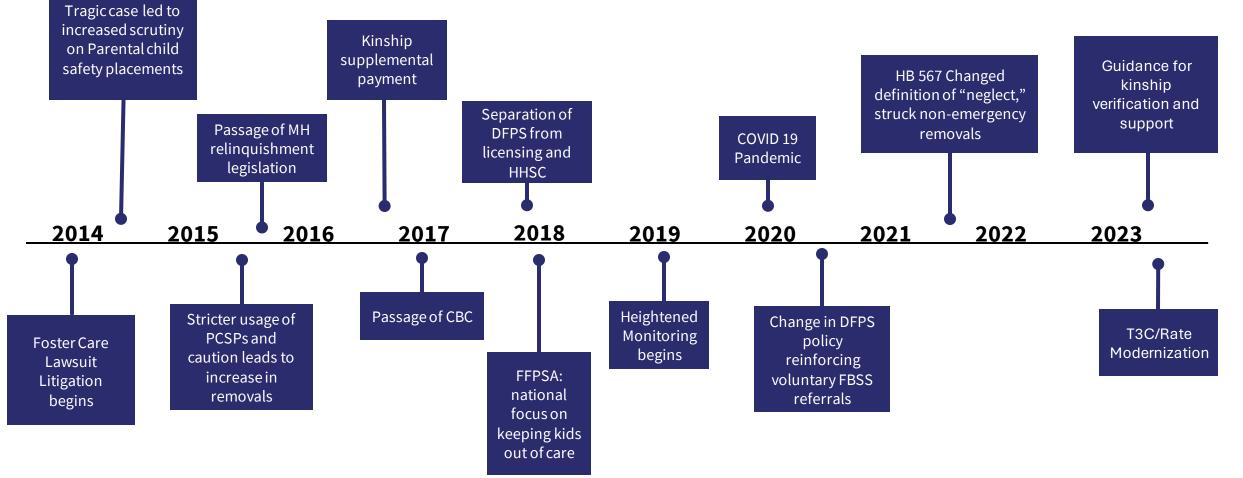
- 2:15 *Member Service Announcements*
- 12:05 Remarks from our Sponsor, AOC 3:00 Adjourn
- 12:15 Lunch
- 1:05 Remarks from our Sponsor, Binti

State of Texas Child and Family Well-being System

What do people want to know?

Key Metrics	FY 2023	FY 2021	Better or worse?
Removals	9965	16028	\checkmark
# kids in care	31475	45870	\mathbf{V}
Length of time in care	23 mo.	20.6 mo.	\wedge
Aged out of care	870/6.7%	1227/7%	\checkmark
Children subsequently alleged as a victim after 12 month	22.6%	22.3%	\uparrow
Placed with kin	33.7%	38.9%	\mathbf{V}
Reunified with parent	28.9%	33.3%	\mathbf{V}
Adoption (Relative, non-relative) & PCA	38%	32%	\wedge
Safe in care	99.28%	99.22%	\wedge
Children w/o placement (in August)	137	208	\checkmark
Placement changes	2.7	2.5	↑
Child abuse/neglect fatalities	164	251	\checkmark

These drivers, and many more impact the system of care



Key Themes:

Many key indicators show child and family well-being trends are improving But, in every stage of service, the needs of kids remain high & family needs complex

For youth in care this is exacerbated by extended stays and multiple placements

Families need community support to stay together safely

Oversight and workforce make it difficult to serve complex populations

The growth in prevention programs serving families has increased every year since 2014.

A separate PEI metric - youth served - is trending back up after declining between 2018-2021 HOPES served over 11,000 families last year – a 44% increase over two years

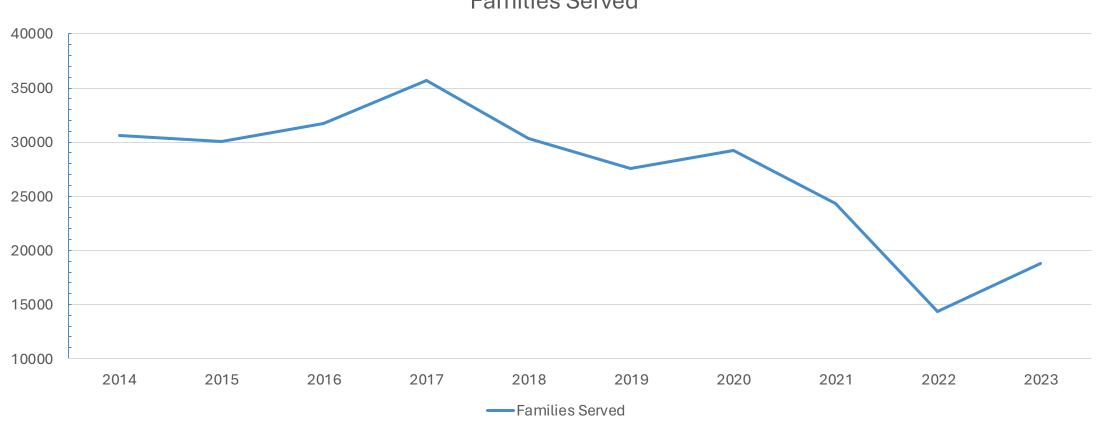
Last year, another 10,500 families were served through THV and TNFP

- Since 2016, the amount of contracted PEI expenditures has doubled
- The two biggest contracted programs are FAYS and HOPES at \$27m each
- Family Resource Centers are blossoming (18 PEI funded)

Texas is 1 of 3 states without an approved FFPSA prevention plan

- But questions remain statewide and nationally about the best way to implement/maximize funding and outcomes
- There remains a strong interest and focus on keeping kids out of foster care
- Texas' rate of foster care entries is 2.0 out of 1,000, which ranks about 7th lowest nationwide
- Recent updates:
 - Implementation of Texas Family First pilots
 - Serious discussion about the needs of families and services available and what makes sense for Texas's FFPSA plan
 - Digging into the data to better understand what's going on and next steps
 - Current statute requires FBSS services to transition to FFPSA eligible programs by 2025, but without funding or implementation guidance

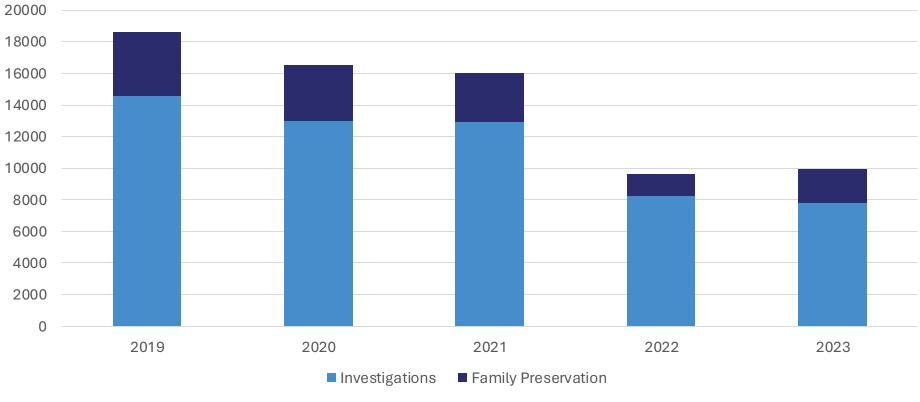
Families served in FBSS increased by 30% in 2023, after a significant decline in 2022.



Families Served

Member Meet

But removals from FBSS are increasing at a greater proportion rate.



Removals by Stage of Service

1 in 5 kids come back to the attention of CPS within 12 months after preservation or reunification.



From your perspective, what is driving the outcomes of families?

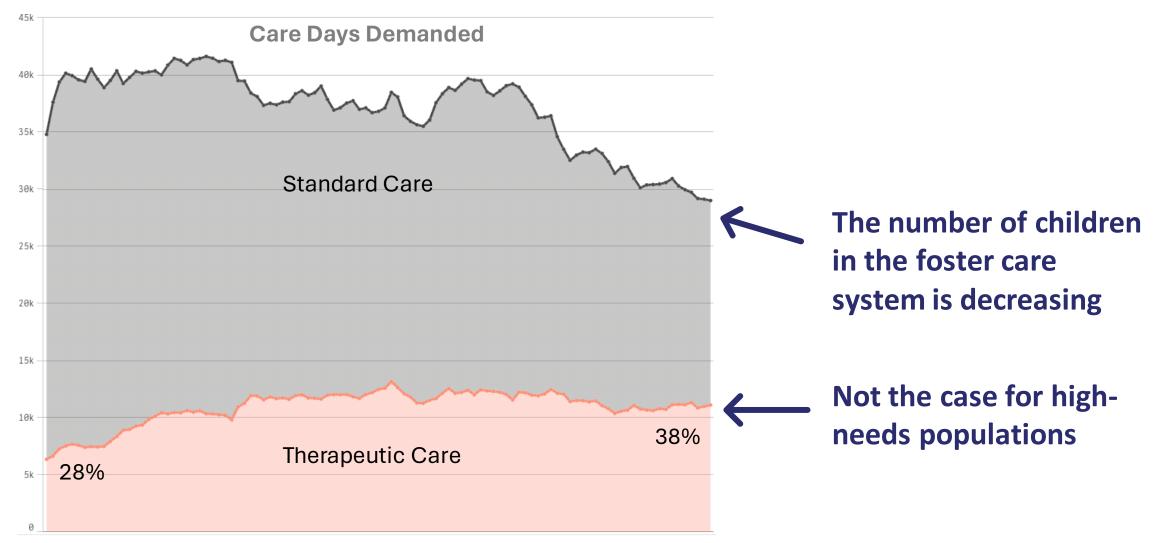
Do you see this reflected in your community? What could we be doing differently?

Why are children spending increasingly more time in care and moving more often?

- Less kids in care, TACFS members share that cases and/or needs are more complex
- More difficult in heightened and disorderly regulatory environment to keep kids stable in placements
- Mental health needs may be more acute and services less available post-pandemic

In FY23, youth who exited care spent an average of 23 months in care with 2.7 placements.

While number of kids in care declines, the needs of the population remains high: *Acuity Snapshot 3B*



pring Member Meeting

Data courtesy of OCOK, Region 3B

Children without placement (CWOP) remains a complex population

Good news: Children without placement has been a focus for DFPS, going into summer when numbers trend higher

• CWOP numbers are going down in legacy areas and <u>remain low</u> for SSCCs

But...

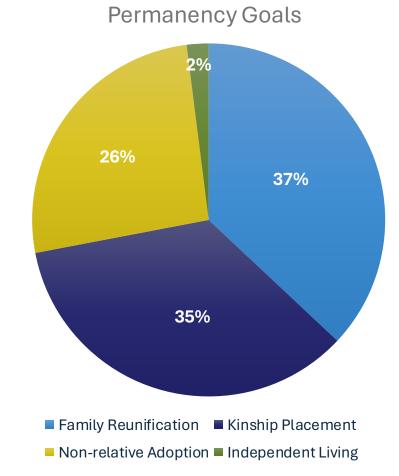
- Majority of CWOP cases were previously in a psychiatric hospitalization or on runaway status
- In FY 23, 40% of CWOP kids were long-stayers, there for longer than four weeks
- The setting with the most runaways in 2023 was from DFPS supervision
- High treatment needs: aggression, mental health diagnosis, psychiatric hospitalization, self-harm, runaway

- All regions saw improvements in the number of kids finding permanency in 1 year
- Reunification within 1 year also increased across the board
- OCOK (3W) has nearly doubled number of kinship placements over last 5 years
- 2Ingage (2) and Belong (8B) have 100% of youth receiving PAL training and big increases in the number of youth receiving IDs or driver's licenses.
- 3 new regions moving into Stage 2: 3 (Empower) 4 (4Kids 4Families), 5 (Texas Family Care Network)
- 92% of state workforce transferred to 4Kids 4Families

CBC regions improving in a number of key metrics

70% of youth are seeking permanency with family.

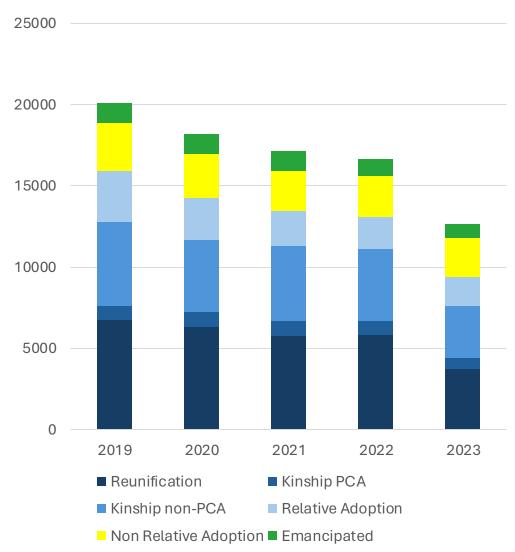
- More youth aimed for reunification last year than the prior year, but it has been trending downward since 2018 at 42%.
- Non-relative adoption continues to increase, it was 26% in 2023 compared to 21% in 2018.



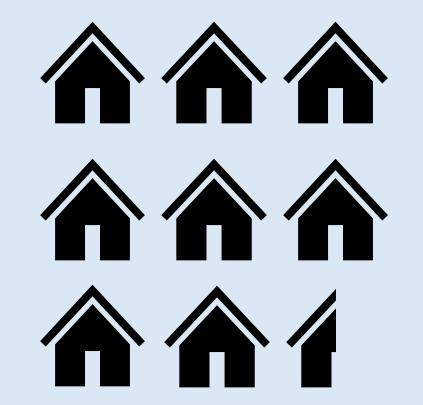
No Longer in DFPS Responsibility

Despite decreasing number of kids in care, exits remain on trend, with two exceptions:

- The rate of family reunification in FY23 was 28%, compared to 34% the year before
- 2. Rates of adoptions by nonrelatives increased by 4% from FY 22-23



870 Youth aged out of care in FY23



On average, they experienced **8.4 placement moves**

...and spent 4 1/2 years in care

What does this information tell us about what we can do to better serve kids and youth in care?

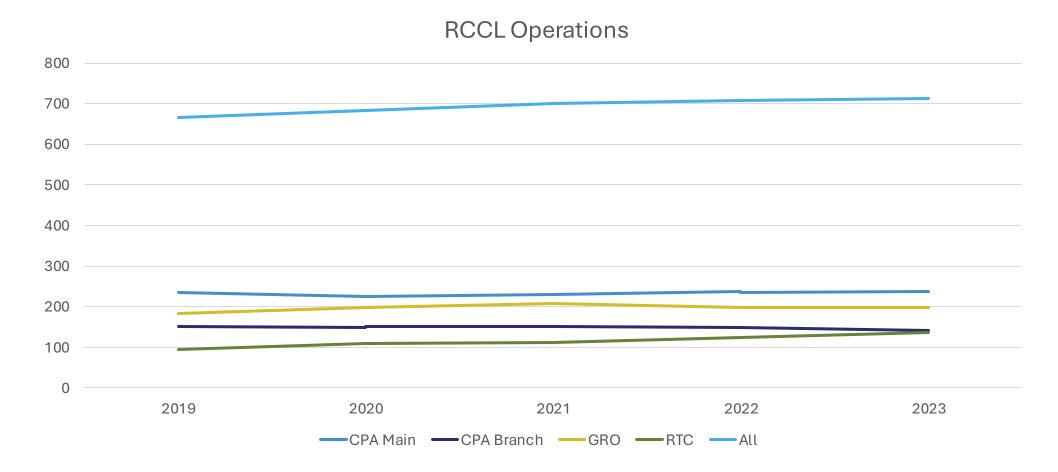
The child-serving workforce

- Almost 40% of residential child care employees have a tenure of 0-3 years
 - ➤ Turnover rate: 20.2%
 - ➢ "Every time a caseworker leaves the workforce, the cost to the agency is **approximately** 70% to 200% of the exiting employee's annual salary." (Casey Family Programs Report 8/23)
- 56% of supervisors have a tenure of 0-3 years

➤ Turnover rate: 7.4%

- 1,340 LCCA and LCPAA held active licenses in 2023
- The number of active license holders has steadily increased each year since 2019
- SSCCs and providers are investing in their professional workforce and former DFPS employees ARE sticking with SSCCs during CBC transition.

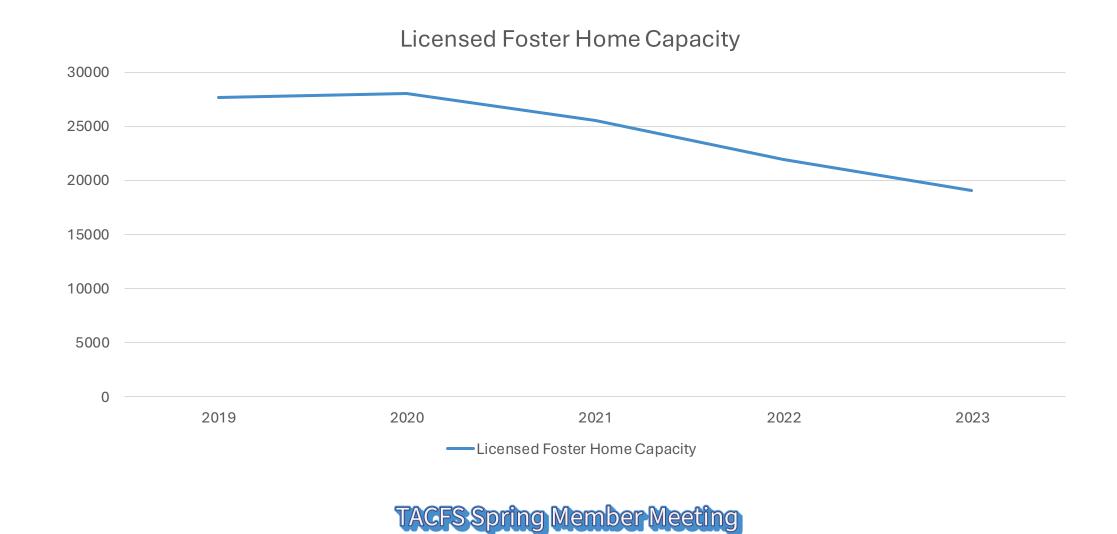
The total number of licensed operations slightly increased over the last five years...



But capacity has decreased in every category.



Foster home capacity has declined by 9,000 beds since 2019.

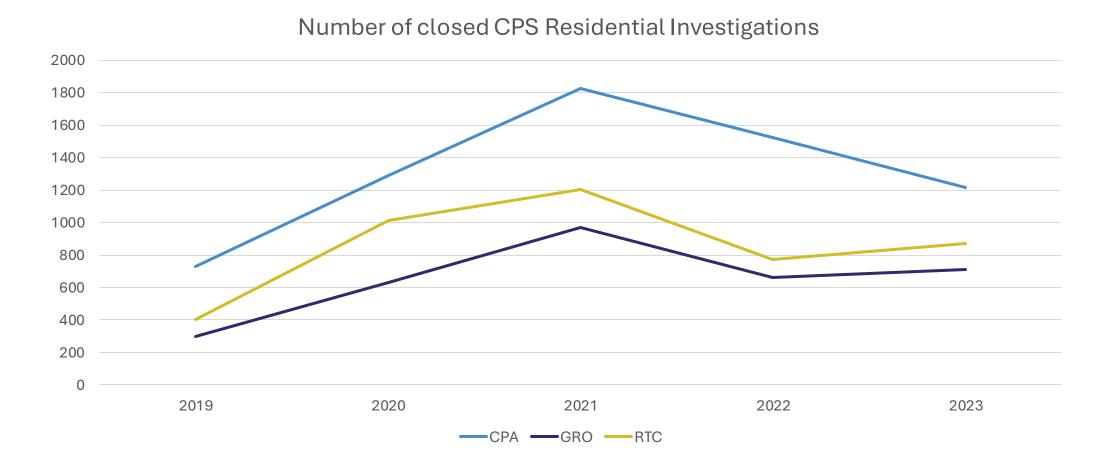


Closures and contract terminations

- 131 operations closed because the operation relinquished its license or because HHSC revoked the license
 - 125 operations voluntarily relinquished their licenses to HHSC, 6 had licenses revoked by HHSC
- 370 operations that had their contracts terminated by DFPS and SSCCs
- Factors impacting capacity loss:
 - Heightened monitoring
 - Increased risk for staff and orgs with investigations
 - Focus on keeping kids in least restrictive settings
 - Increased resource needs: cost of living, workforce, additional compliance needs, implementing new treatment models

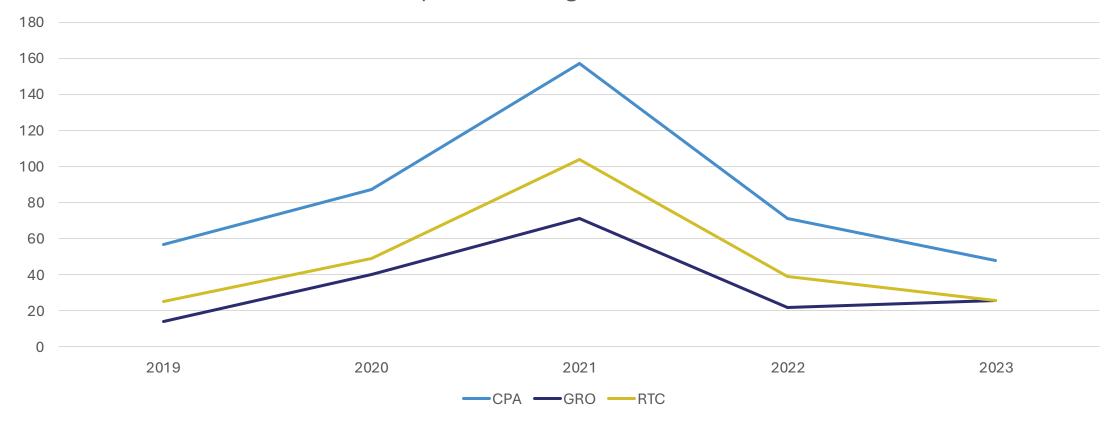
Member Mee

The amount of abuse and neglect provider investigations (DFPS) are down, but still higher than 2019.

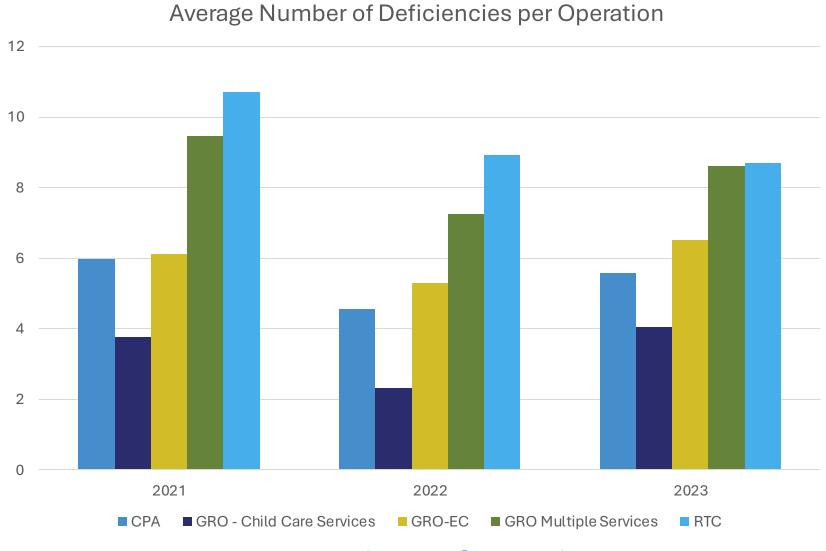


The number of validated licensing provider investigations (HHSC) appears to be back at 2019 numbers.

Completed Investigations, Validated



Child Care Regulation (HHSC) Deficiencies



TACFS Spring Member Meeting

Navigating the Current Environment – TACFS Strategy

Tune out the noise and focus on improved outcomes—child safety first and foremost, without losing sight of permanency and well-being. Examples of how:

- Online Learning Center
- Practical tools, trainings, and resources to elevate practice
 - Training requirements guide
 - T3C Webinars and associated CQI webinars
 - Who Does What, Deep Dive into

Investigations

- Strengthening Residential Series
- Medication management training
- Tailored TA & Consultation
- Informing State policy and legislation (i.e.: SB 593)
- Strategic communication

What stood out to you? What questions do you still have?

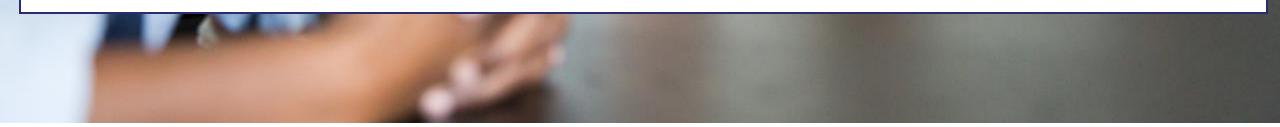
Advocacy Round Tables Pick 2

Mental Health

Prevention and Family Preservation

Permanency, Adoption, Post-Adoption Youth and Young Adult

Regulatory, Oversight, and Liability Kinship





OUTRÉACH SERVICES

/ /







State of the Nation

In the United States, <u>34.8 million children</u> (ages 0-17)—nearly half of American children—are exposed to adverse childhood experiences (ACEs) that can severely harm their future health and well-being.



AMERICA'S BREAKDOWN CONFRONTING OUR MENTAL HEALTH CRISIS



America's Response

Mn official website of the United States government



FOR IMMEDIATE RELEASE January 24, 2024 Contact: HHS Press Office 202-690-6343 media@hhs.gov

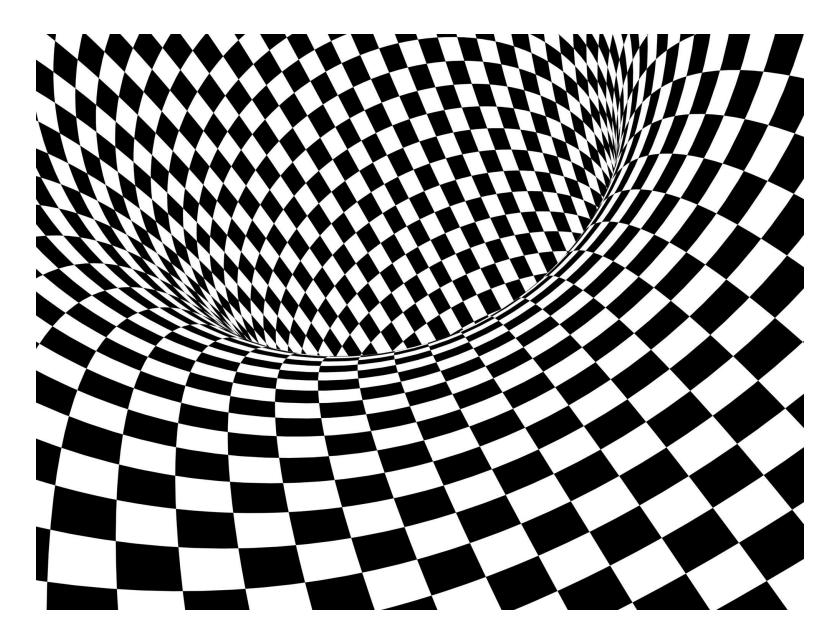
CMS Announces \$50 Million in Grants to Deliver Critical School-Based Health Services to Children

Grants will help up to 20 states implement or expand school-based health services for children enrolled in Medicaid and CHIP

Today, the U.S. Department of Health and Human Services (HHS), through the Centers for Medicare & Medicaid Services (CMS), announced \$50 million in grants for states to connect millions more children to critical health care services, particularly for mental health, at school. Made possible by the historic investments of the Bipartisan Safer Communities Act (BSCA), the grants will provide 20 states up to \$2.5 million each in funding that can help states implement, enhance, and expand the use of school-based health services through Medicaid and the Children's Health Insurance Program (CHIP).



The Great Illusion



What is AOC Outreach Services

A leading behavior health service provider servicing the Greater Houston area.

Servicing youth age ranging from 3-17 with behavioral issues and mental health disorders.

Credentialed with most major MCO'S in Houston Texas:

Medicaid, Texas Children Health Plan, Superior Health Plan, Molina Healthcare, United Healthcare



WE PROVIDE THE BEST SERVICES



Medication Management



Intensive Case Management



Psychosocial Rehabilitative Services





Crisis Intervention



Independent Living



Skills Training & Development



Coordination Services

LIFE CHANGING SERVICES IN HOUSTON, TEXAS AND SURROUNDING AREAS

FAMILY FOCUSED

MEDICAID FUNDED

INTENSIVE SERVICES

NO OUT-OF-POCKET COSTS

LEADING COMMUNITY MENTAL HEALTH



WE PROVIDE

★ WORLD CLASS SERVICE

WE MEET THE CLIENT WHERE THEY ARE.







QUESTIONS

Contact Us

24 HR Crisis Line: (832) 934-7770



Office Line: (855) AOC-6100



info@aocoutreachservices.com



6671 Southwest Freeway Ste 675 Houston, TX 77074



To Partner with AOC

Contact: Business Development Manager Leroy Dodd Direct Line: (713) 561-5530 Email: LDodd@aocoutreachservices.com



Scan Me



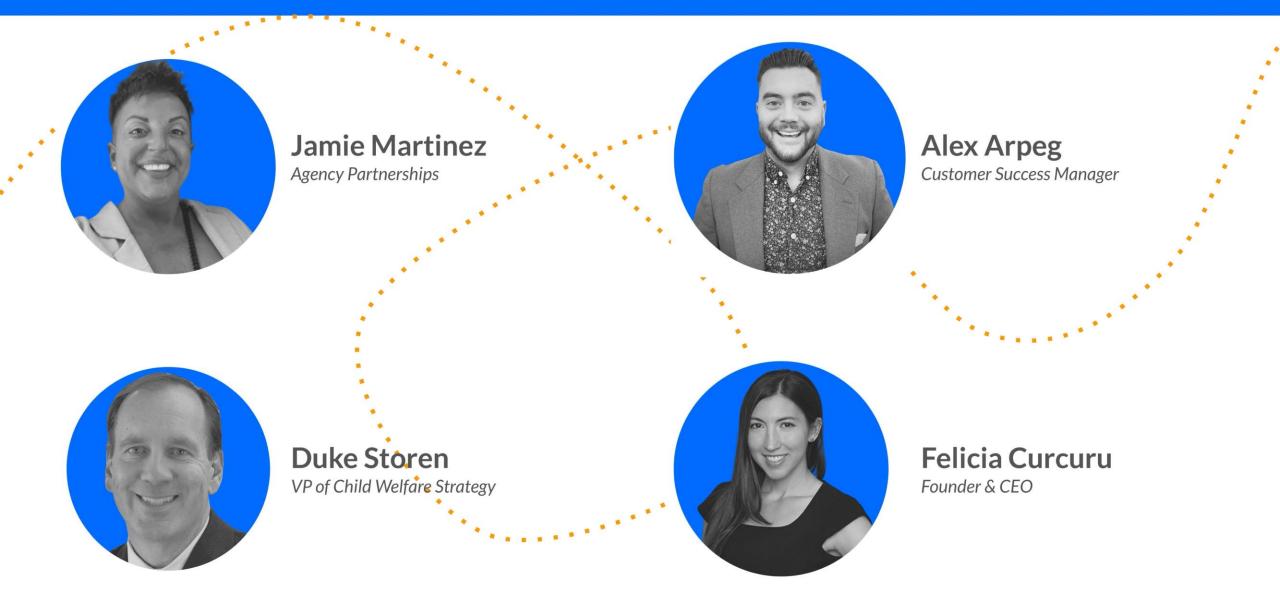


Time for Lunch



Thank you to each of you for the work you do daily to improve the lives of children and family!

Your Binti team



binti

Modern, mobile-friendly modules that can function independently, integrate seamlessly with other systems, or operate together as a full CCWIS solution. Since 2017, Binti has been on a mission to make child welfare more effective, efficient and equitable.

Each of Binti modules is specifically designed to drive improved outcomes, informed by extensive research and thousands of hours shadowing and learning from child welfare professionals, families, and children experiencing foster care.

These modules can function independently, integrate seamlessly with other systems, or operate as a full CCWIS solution.

Binti's Modules



Licensing

Empower families and professionals to complete applications and managing on-going requirements



Family Finding and Engagement

Improve child outcomes by searching, locating and outreaching to kin to enhance connections and kin placement.



Caregiver Preferences

Engage with caregivers to support strong placement matching and reduction of placement breakdown

n Intake

Screen, track, and assign allegations, with smart tech to help screen for duplicates and spot trends



Caregiver Management Empower stronger support of families and youth in care

Investigations

Assess safety, refer for services (if needed) and provide assistance to family units.

Eligibility Streamline Title IV-E eligibility and accurately calculate payments



Prevention

Refer prevention services to a network of private providers. track hours and effectiveness to maximize FFPSA funding.

Positive Outcomes Achieved





increase in foster/kin families approved year

reduction in days to licensing approval

time saved for child welfare professional each week

8-12

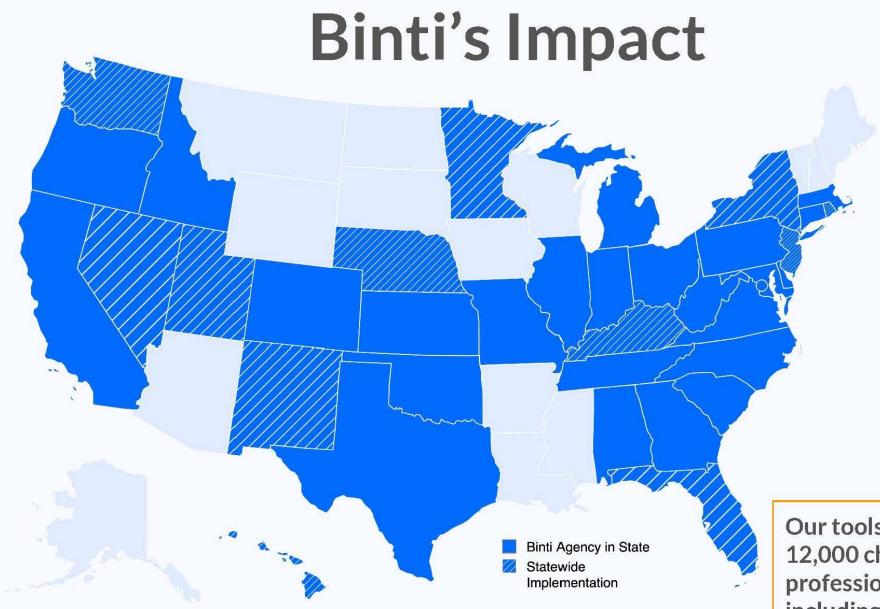
hours

ROI from better case tracking, reducing children in group homes, and reduced time on paperwork

3-10x

70k

families approved to support children



Our tools are used by more than 12,000 child welfare professionals across 36 states, including 12 statewide implementations. CONFIDENTIAL - Do Not Distribute

Learning from you:

How else can Binti and our technology support children, families, you, your agency and the State of Texas?

Let's chat further at the Binti table (or anytime)!



Q&A

<u>www.binti.com</u> Jamie.Martinez@binti.com

Thank You!





Policy Report Out



Grant Opportunities

Grant Overview

Funding for grants in both FY 24 and FY 25.

SSCCs will administer the FY24 grants in both SSCC catchments and legacy areas to support provider transition to T3C. For ease of administration, the SSCCs agreed for funding to be awarded to one SSCC. ACH Child and Family Services-Our Community Our Kids (ACH-OCOK) has agreed to be the lead SSCC for the project and has entered into a contract with the state to administer the FY 2024 funds. All SSCCs will provide support to the implementation and grant award process.

The Texas Center for Child and Family Studies (TCCFS) at TACFS will provide support to ACH-OCOK and facilitate a process for administration of the T3C provider grants.

Grant types

T3C Readiness Building Grants

Anticipate awarding 40-50 grants of up to \$20,000 per provider.

Support development of skills needed by providers in the T3C environment or in obtaining technical assistance and consultation to assist strategic planning and exploration of tools to meet T3C requirements.

T3C Operations Grants

Anticipate awarding 25-35 grants of up to \$150,000 per provider with an expected total distribution not to exceed \$4,650,000. **Grants to providers specifically targeted for organizations that are advanced in their ability to meet the requirements to apply to be credentialed to serve in the T3C service array in early 2025.**

Applicants can receive a grant award in only one category. Applicants for the T3C Operations Grants may also choose to submit for a T3C Readiness Building Grant simultaneously. Should a dual applicant not be selected for an Operations Grant, their application(s) for a Readiness Building Grant would be considered.

How grants may be used

Grants will fund initiatives in five categories and activities within those categories.

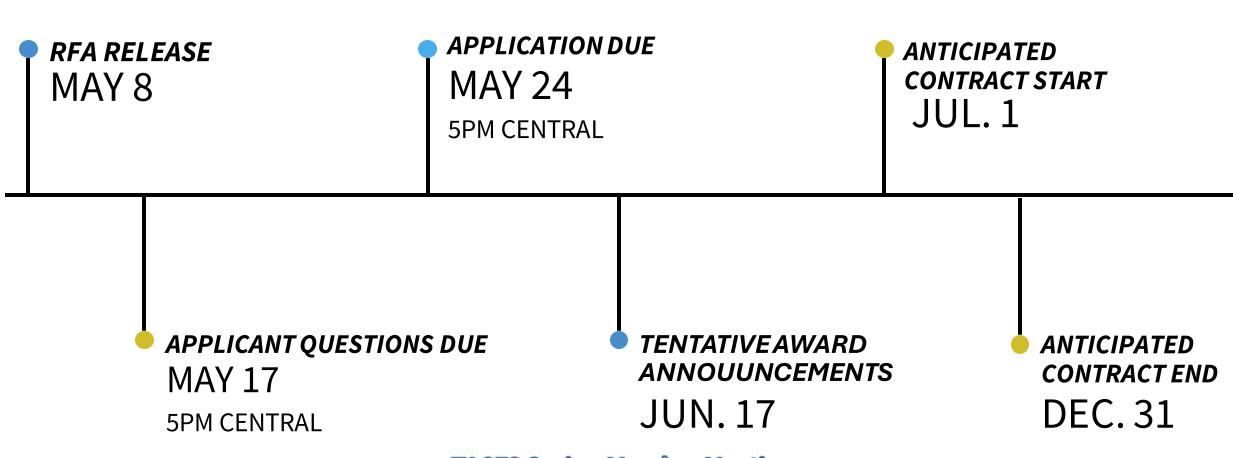
- Policies and procedures consistent with selected primary models and targeted service package(s) the provider will be delivering.
- New targeted and upfront training for intake, case managers, directors, foster parents (if applicable), direct delivery staff (if applicable), etc. on new primary models/service packages and CANS 3.0 assessment tool and process.
- Information Technology (IT) systems to support operating under the new service array.
- Data collection system to track and report changes.
- System to complete cost collection to populate a more robust cost report.



Examples of activities

- ✓ Clinical models
- ✓ Enhanced programming & treatment models
- ✓ Quality Assurance (CQI)
- ✓ Staffing
- ✓ Facility Readiness
- ✓ Training Development
- ✓ Billing/changes to cost reporting
- ✓ Implementation/Development/Refinement of data systems

Target Timeline



Expectations

 \odot Participation in grantee orientation

- \circ Pre- and post-assessment
- \circ Reporting
- For Operations Grantees: participation in a virtual conference
- \circ Financial records

Member Service Announcements



New Look

New Classes

Same Great Experience

. . .

SIGN IN

About Our Online Learning Center

Welcome to the Texas Alliance Online Learning Center (TAOLC), where child and family wellbeing professionals come for training and learning opportunities.

If your organization is interested in purchasing a course for your entire staff to access, please contact tgreco@dacfs.org to discuss pricing options.

TACFS member agencies and their staff receive a 25% discount on all courses with a member code.

Contact us at learning@tacfs.org for questions and technical support.

The TAOLC has something for everyone.

Child Welfare Providers
Supervisors
CSEY Professionals

Learn at your pace, on your schedule, wherever you are. Lifelong learning with the Center is easy and empowering.

Mental Health Providers

center-onlinelearning.tacfs.org/

Family Strengthening

Family Strengthening Defined

"AECF defines family strengthening as a deliberate process of giving parents the necessary opportunities, relationships, networks, and supports to raise their children successfully, which includes involving parents as decisionmakers in how their communities meet family needs" (FSPC, 2004, p. 3).

TACFS Mission

To work collectively to **support and strengthen children, youth, and families** in communities across Texas.

Family Strengthening Policy Center. (2004). Introduction to Family Strengthening (Policy Brief No. 1). Retrieved from https://assets.aecf.org/m/resourcedoc/fspc-introductiontoFamilyStrengthening-2004.pdf.



Strengthening Families is a team sport, and we all have a role to play.

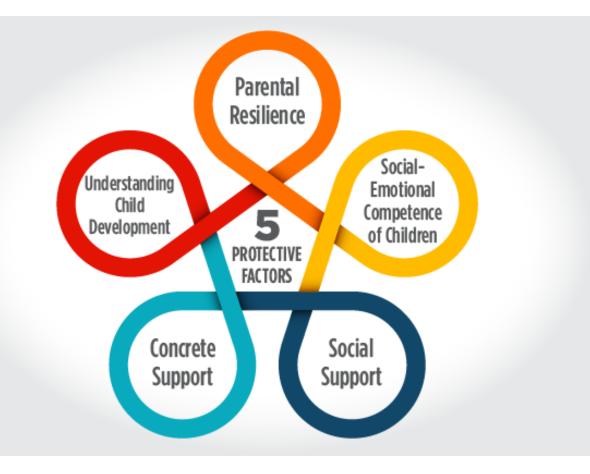




Connecting the Dots



CSSP Strengthening Families Framework



Standards of Quality for Family Strengthening & Support Certification Training

- 1. Family Centeredness
- 2. Family Strengthening
- 3. Diversity, Equity, and Inclusion
- 4. Community Strengthening
- 5. Evaluation

ring Member Meeting



Upcoming Training : June 26th-27th Sept. 25th-26th



Next Steps

- Explore the landscape of Family Strengthening services and supports with TACFS members
- Please stop by the Family Strengthening booth or contact us for additional information at <u>calexander@tacfs.org</u> and <u>tcaldwell@tacfs.org</u>

TACFS Spring Member Meeting

Learn more about the TACFS Equity & Access **Fund and** Workgroup

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SCAN or VISIT TACFS.ORG/EAF



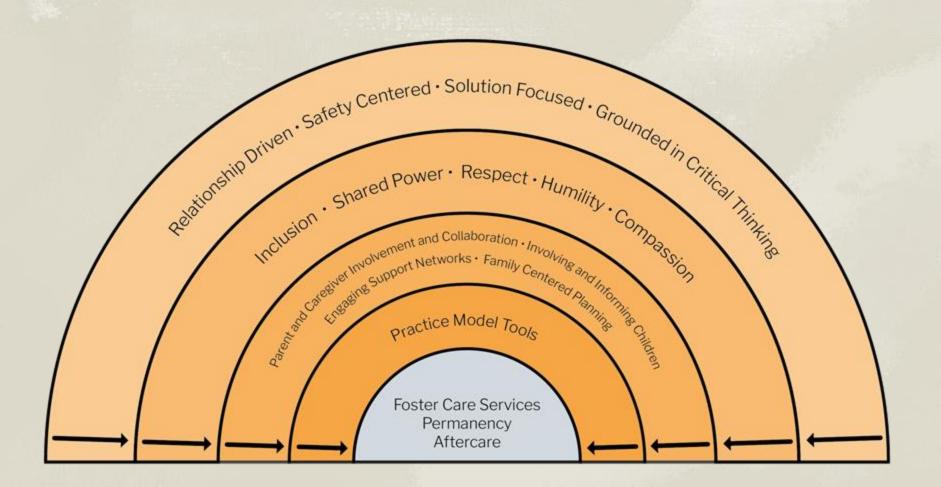
TXPOP Practice Model: Post Permanency

What is TXPOP?

Using various tools and trainings, ongoing case consultation, coaching and an online network of support this model:

- Puts children's input at the center of decision making and planning;
- Builds working partnerships between families and caregivers;.
- Increases involvement of families in the day to day lives of their children while the children are in foster care; and it
- Creates lasting safety and support networks around children and families;

TXPOP Practice Model



Post Permanency

- TXPOP Practice Model for Post-Permanency
- Six-hour training for professionals working in post adoption
- Case consultations and implementation meetings to integrate the practice

Practice Model Values

INCLUSION

RESPECT

COMPASSION

HUMILITY

SHARED POWER

Practice Model Strategies



TXPOP Post Permanency Tools

Tools at a Glance

Genogram	Chat Box	Family Introduction
Three Houses	Network Circles	Network Finding Matrix
Future House	Transition Object	Words & Pictures Explanation
Personal Support Plan		

Implementation

- Leadership buy in and support
- Training for staff at all levels
- Consultation process

Thank you!

ngraves@tacfs.org

Thank you! We our members. info@tacfs.org

TACFS Spring Member Meeting



TACFS Spring Member Meeting