



TexProtects
Champions for Safe Children

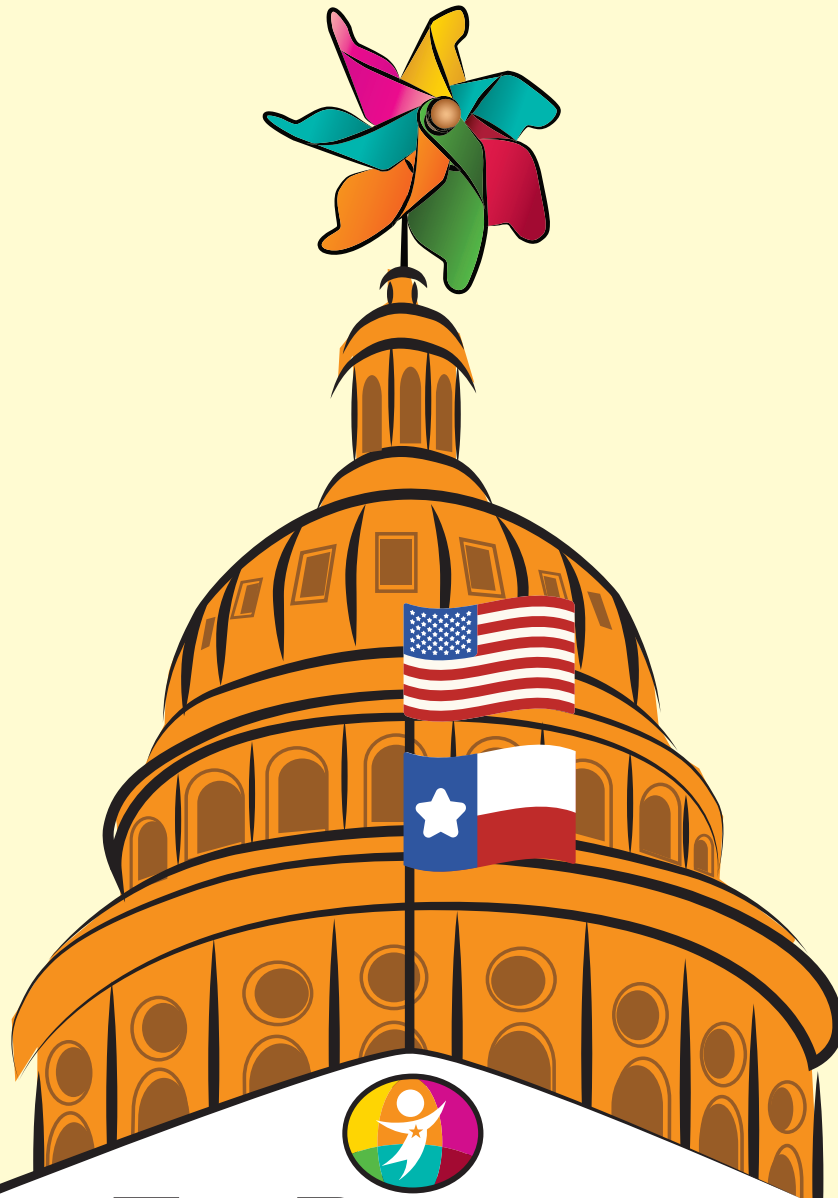
86th Texas Legislative Session

Wrap Up

July 2019

OUR MISSION

TexProtects protects Texas children from the trauma of abuse and neglect and empowers families to thrive through education, research, and advocacy.



TexProtects
CAPITOL CAMPAIGN 2019
Champions4SafeChildren



Table of Contents

The 86th Legislative Session Wrap-Up

- I. A Letter from our CEO
- II. How Texas Bills Become Laws
- III. The 86th Legislative Session at a Glance
- IV. An Overview of the 86th Legislative Session
- V. TexProtects in the 86th
- VI. Prevention and Early Intervention
- VII. Child Protection Systems
- VIII. Behavioral Health and Trauma
- IX. A Look Ahead — The 86th Interim
- X. A Look Back – Past Sessions

Additional Resources

- XI. TexProtects: Our Mission and Work
- XII. The Child Protection Roundtable
- XIII. Texas Prenatal to Three Infant Toddler Collaborative
- XIV. Texas Home Visiting Consortium



The 86th legislative session ended on May 27, 2019, and TexProtects staff worked tirelessly to advocate for Texas children and families. The session was a difficult one for child protection despite starting with more available revenue. Legislative leaders including Gov. Abbott, Lieutenant Gov. Patrick, and Speaker Bonnen made clear their intention to tackle school finance and property taxes, mental health, and disaster preparedness, and they made good on their promises. However, those complex and expensive issues meant that there was less money and political will available for other critical issues.

From the beginning, TexProtects laid out a robust public policy agenda, consistent with priority areas across the child protection continuum including:

- ✧ Investment in evidence-based prevention and early intervention programs such as Nurse-Family Partnership (NFP) and Project HOPES
- ✧ Investment in a full continuum of high-quality foster care services
- ✧ Support for older youth aging out of the foster care system as they transition into adulthood including pregnant and parenting youth
- ✧ Support for the integration of trauma-informed care into service delivery systems
- ✧ Access to healthcare to improve maternal and child health including mental health and substance use prevention and treatment
- ✧ Cross-sector collaboration to improve state-level efficiency and community access to funding and programs

In the end, the results were mixed, but there were some significant changes that will improve the safety of Texas children, the resilience of Texas families, and access to trauma-informed services for survivors of abuse and neglect.

- ✧ Despite cuts to the Health and Human Services budget overall, both NFP and Project HOPES received increased funding.
- ✧ Through Senate Bill 355, the Department of Family and Protective Services will engage in strategic planning on how best to utilize new federal funding so that families can access the services they need to be healthy and strong and avoid the foster care system.
- ✧ House Bill 3 has provided formula funding to providing full day prekindergarten to eligible students.
- ✧ Trauma-informed approaches will be integrated into our schools through HB 18 and critical conversations are taking place about how better to align systems and resource communities to prevent Adverse Childhood Experiences and mitigate their impacts.

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We should all take a moment to celebrate these significant victories, many of which would have been difficult to imagine only a few sessions ago. But there is work left to do. Over the interim, TexProtects, with your engagement and support, will be monitoring implementation of these policy changes and working with our partners, agencies, and lawmakers to begin the work of building the research and momentum for the next steps toward creating a better Texas tomorrow.

Thank you to our Board of Directors for their leadership and support and to our external lobbyist, Michelle Whittenburg who has provided invaluable connections and strategic consult. Thank you to our committed foundations, corporations, and individuals who support us financially which makes our work possible. In addition, I want to offer my sincere appreciation to all of you, our team of advocates and partner organizations, who sent letters, made calls, showed up for Child Protection Day, made visits, registered in support, and testified throughout session. We could not do this vital work without you.

This report highlights major legislative and budgetary decisions from the 86th Texas Regular Legislative Session that are relevant to the goals and priorities of TexProtects. We have focused on identified priorities and bills which we either led or supported along with our partners throughout the legislative session. The accomplishments from this session made a significant contribution to our overall impact as an organization, which now include 51 bills and \$140 million to invest in family support home visiting services. As such, we are proud that every dollar invested in TexProtects turns into \$21 for child abuse prevention programs, which is not only a positive ROI for our organization, but it's an investment in our children and families. We hope that you will find it helpful as you reflect on the 86th session and imagine how best to help us realize our vision where every Texas child is safe, nurtured, and resilient.



Best,

Sophie Phillips, LMSW
Chief Executive Officer
TexProtects

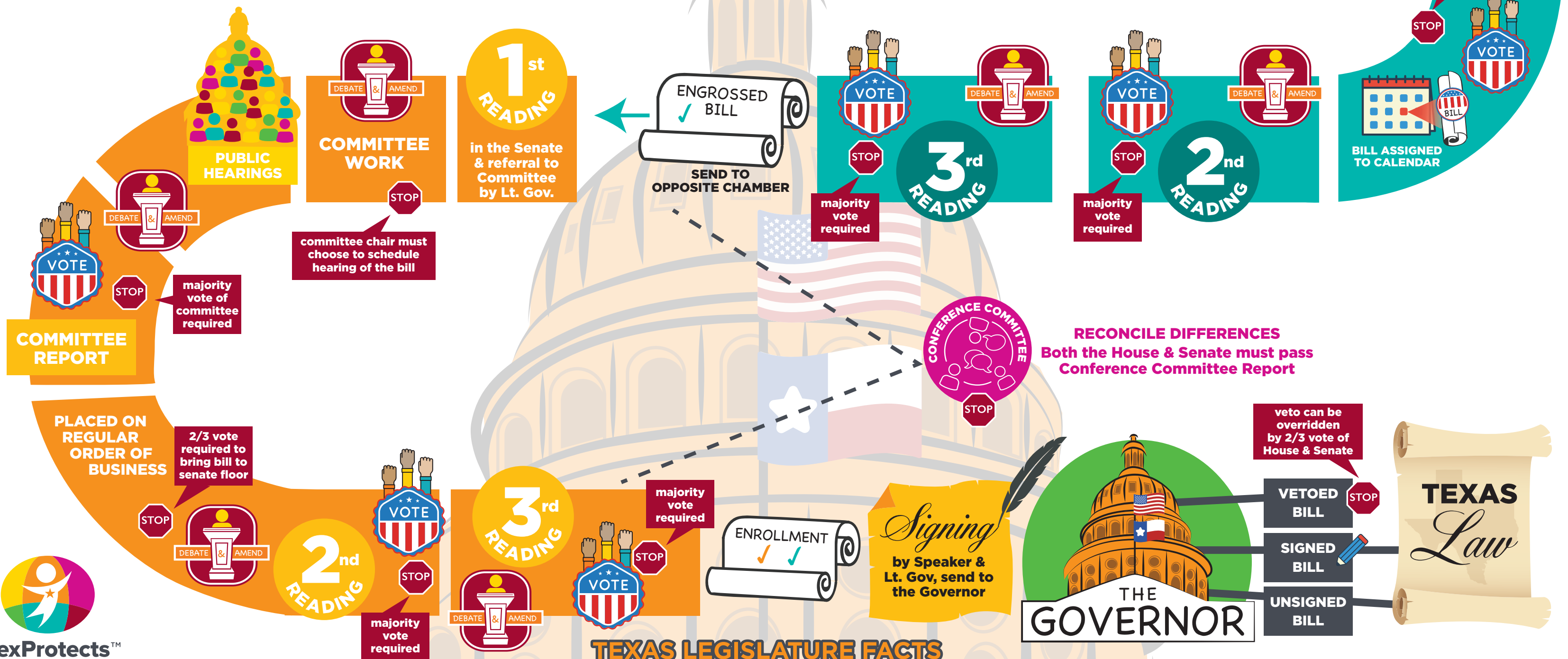
LEGEND

- HOUSE
- SENATE
- GOVERNOR
- POTENTIAL OBSTACLES



Bills can originate in either the House or the Senate

HOW TEXAS BILLS BECOME LAWS





Legislative Session at a Glance



House Speaker
Dennis Bonnen



Governor
Greg Abbott



Lt. Governor
Dan Patrick

7,324
Bills Filed

1,429
Bills Passed

56
Bills Vetoed

802
Child Protection Bills Filed

137
Child Protection Bills Passed

Brief Legislative Timeline

January 8th
Lege convenes
for 140 days of
session

March 8th
Bill filing
deadline

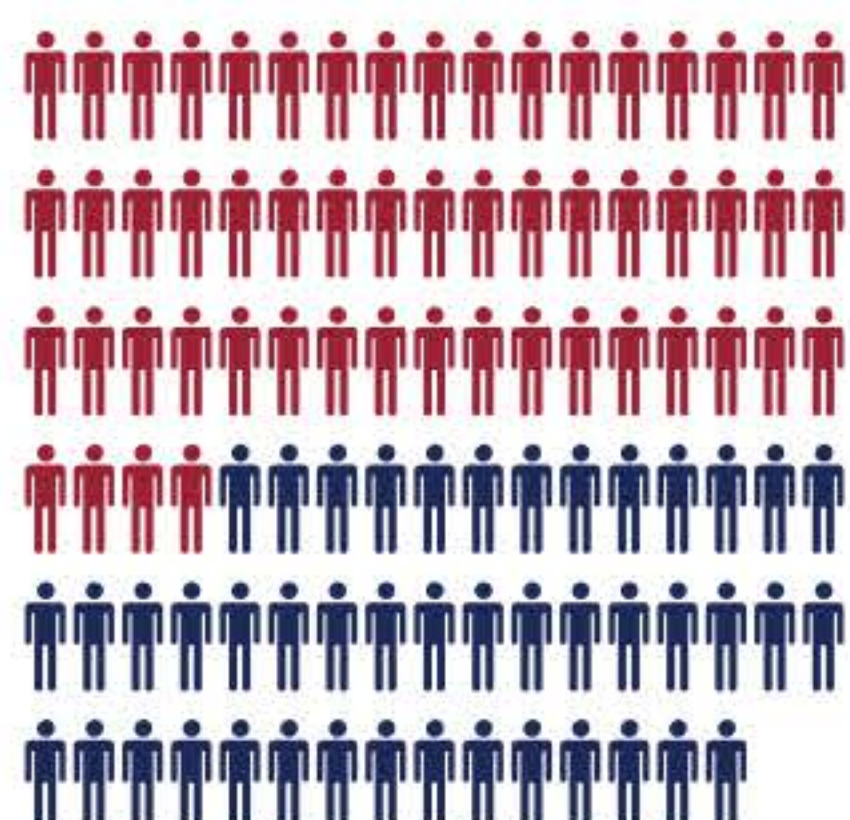
May 27th
Sine Die
End of
session

June 16th
Last day Gov. can
sign or veto bills

September 1st
Bills with this
effective date
become law

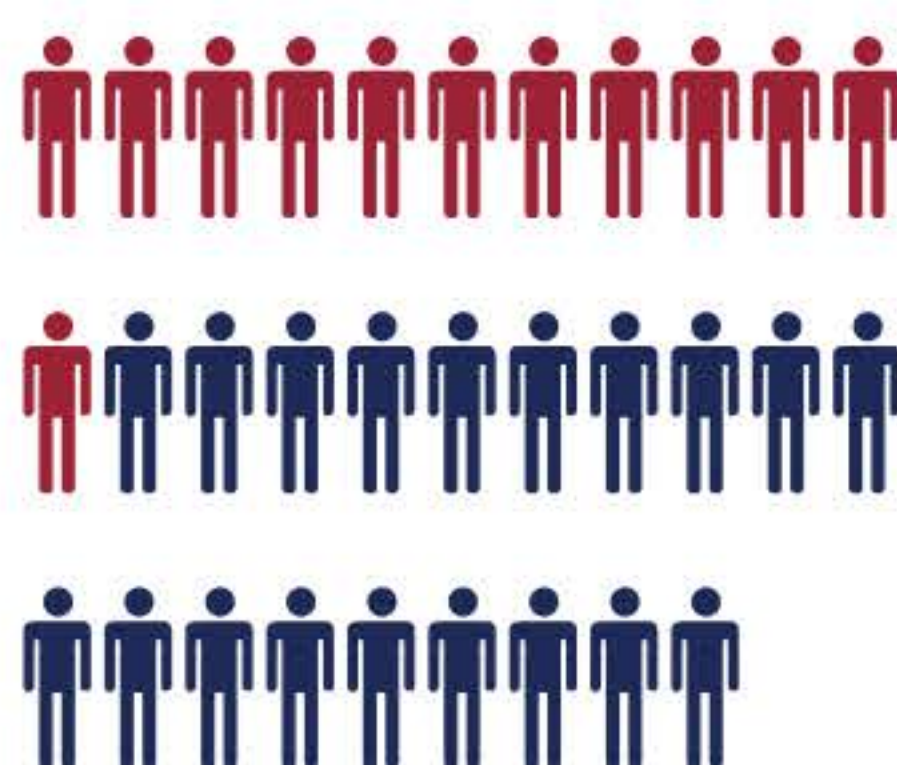
Party Breakdown

House Members



■ Republicans (55.33%)
■ Democrats (44.67%)

Senate Members



■ Democrats (38.71%)
■ Republicans (61.29%)

Priorities & Missed Opportunities



School finance reform and increased teacher pay – passed as HB 3



Increased school safety – passed as SB 11



Greater access to mental health care services – passed in SB 11, HB 18 & HB 19



Limited surprise medical billing - SB 1264



28 expanded disaster relief and recovery bills passed including HB 5, HB 6, HB 7 & SB 6



Extend Medicaid coverage for mothers in the critical postpartum period



Invest strategically to take proven child abuse prevention programs to scale for statewide impact



Reduce administrative burdens that result in eligible children losing access to healthcare



Create sustainable revenue source for education



Invest in successful prevention programs for older youth including STAR and CYD

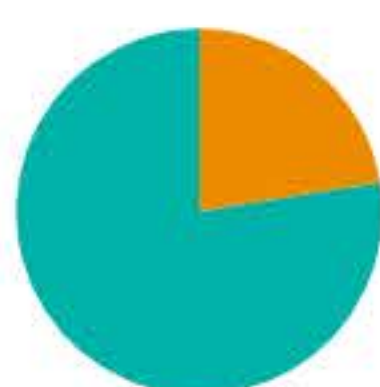
Membership Stats for the 86th Legislature

150
House Members

31
Senate Members

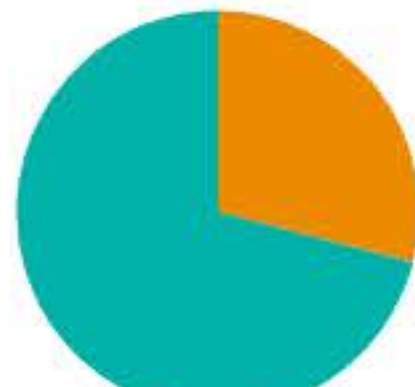
Gender

House Members



■ Female (22.45%)
■ Male (77.55%)

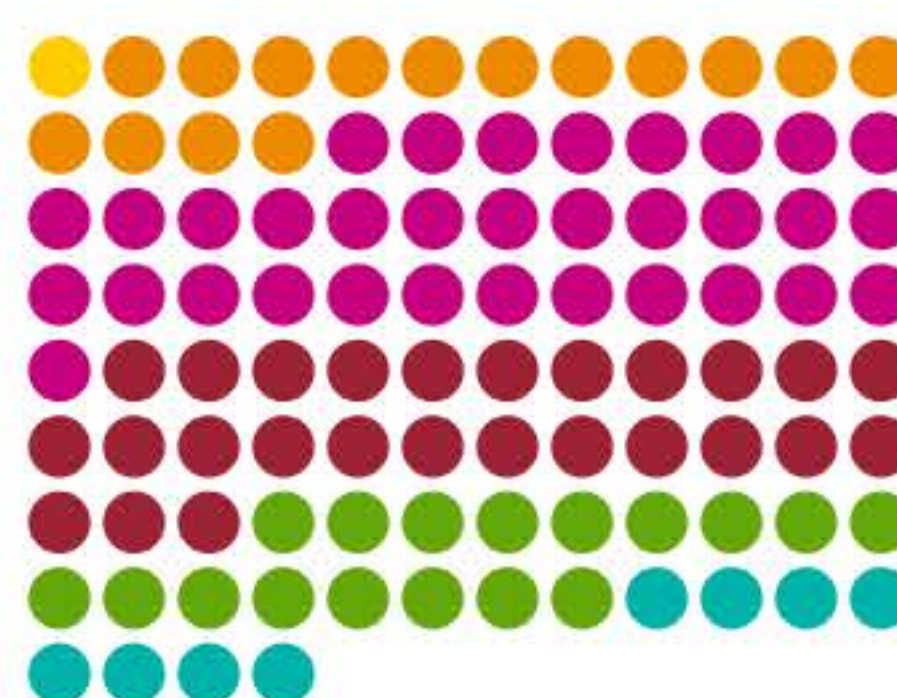
Senate Members



■ Female (29.03%)
■ Male (70.97%)

Age

House Members



■ Under 30 (0.68%)
■ 30-39 (14.97%)
■ 40-49 (33.33%)
■ 50-59 (25.85%)
■ 60-69 (17.01%)
■ 70+ (8.16%)

Senate Members



■ 40-49 (12.90%)
■ 50-59 (38.71%)
■ 60-69 (29.03%)
■ 70+ (19.35%)



An Overview of the 86th Legislative Session

The 86th Texas Legislative Session ended on May 27, 2019 after 140 days of largely collaborative, priority focused, efficient work on issues that are critical to Texas voters. It was a session of shared priorities where members stayed focused on bread-and-butter issues, found ways to work together creatively to move priorities across the finish line, and avoided fringe issues that commanded so much of the attention and time during the previous legislative session in 2017. The 2019 session began with money to spend, instruction from leadership on how to spend it, and the political will to tackle problems that have been long-standing and complex with a much more moderate legislative membership composition than the 85th. On January 9, the Governor, Lieutenant Governor, and Speaker of the House held a press conference to define their priorities for session and their commitment to getting the job done. When the session ended and they met again to speak to the press outside the Governor's Mansion, they had largely achieved those goals.

Property tax reform ✓ school finance ✓ school safety ✓
greater access to mental health care ✓ and improved disaster response systems ✓

While political commentators may have labeled the session nontheatrical, there is no doubt that the legacy of the 86th will be a legislature that got to work doing the state's business and made positive and lasting change.

The Texas Budget for Fiscal Years 2020 and 2021



HB 1, authored by House Rep. John Zerwas and sponsored in the Senate by Sen. Jane Nelson, is the general appropriations bill for the 2020-2021 biennium. It includes a total of \$250.7 billion (compared to \$216.8 billion in the 2018-2019 biennium). The budget is divided into 11 Articles that cover the various areas of government. With increased revenue forecasts from the comptroller, legislators appropriated more dollars than last session to most areas of government. However, Article II, which covers Health and Human Services, included a 2.8% (\$987.6 million in state funds) reduction. The only other area of government that received a decrease in state funds is Business and Economic Development. Article III, which covers Education, saw the largest increases with 17% (\$9.6 billion) more appropriated above the base budget than last session.

Biggest Winners of the 86th – Schools, Schools, Schools!



School Finance – HB 3 – Rep. Dan Huberty and Sen. Larry Taylor

HB 3 is a historic accomplishment. In addition to \$11.5 billion in state funds to provide school district property tax relief and increase public education funding, including salary increases for classroom teachers and other educators, and reductions in recapture, it funds full-day pre-k for eligible students and addresses the needs of economically disadvantaged students and communities by adjusting the funding formula to include additional funding for schools with concentrated poverty.



School Safety and Mental Health – SB 11 (Sen. Larry Taylor), HB 18 & 19 (Rep. Four Price)

SB 11 implements a comprehensive package of strategies to help prevent school shootings and to help schools improve their preparedness and response protocols to increase student safety. HB 18 and HB 19, together, dramatically increase student and staff access to mental health and substance use training while empowering teachers with more tools to ensure that students can engage productively in the classroom.

Biggest Losers of the 86th – Uninsured Texans



Despite significant energy over the interim, the 86th Legislature failed to take significant action to increase access to healthcare coverage. Texas has the highest uninsured rate in the country, 50,000 children lose coverage each year over burdensome renewal processes, and the Maternal Mortality and Morbidity Task Force made clear the need to extend postpartum health coverage for new mothers. Despite a number of champions and bills, meaningful change to address these issues was not prioritized or actualized in this legislative session.



Author: Rep. Four Price

HB 18 ✓**Integrate Trauma-Informed Practices into Schools**

Senate sponsor: Sen. Kirk Watson

Goal: Empower school staff to support student academic success and mental health.How we get there: Include trauma training as part of required continuing education credits every five years for teachers. Create a trauma-informed policy to address staff and parental awareness of the impact of trauma in each school district.

Author: Rep. Donna Howard

HB 475 ✓**Support for Pregnant and Parenting Foster Youth**

Senate sponsor: Sen. Kirk Watson

Goal: Promote maternal and child safety. Promote health in pregnant and parenting foster youth.How we get there: Ensure that pregnant and parenting foster youth receive basic information about ways to keep their child safe. Promote healthy attachment, child development, and maternal health if parents choose not to participate in Project HIP.

Author: Sen. Judith Zaffirini

SB 708 ✓**Data Collection On Child Care Safety**

House sponsor: Rep. John Raney

Goal: Report data on child safety in licensed child-care centers.How we get there: Collect and report child care safety data on violations that impact the health, safety and well-being of children as well as information on the number of children and caregivers in each classroom. Allow lawmakers, providers and parents to make better decisions to ensure the safety of children in care.

Author: Rep. Lois Kolchorst

SB 750 ✓**Address Prevalence of Maternal Mortality & Morbidity**

House sponsor: Rep. Angie Button

Goal: To maximize Texas' efforts to address maternal mortality and morbidity.How we get there: Improve maternal and newborn healthcare as detailed by the Health and Human Services Commission's report, State Efforts to Address Maternal Mortality and Morbidity in Texas. Improve access to healthcare during the prenatal and postpartum period for women enrolled in the Healthy Texas Women Program.



TexProtects in the 86th



Overview

This session, TexProtects worked diligently and strategically to advance our priorities and engage on issues across the child protection spectrum. Every child deserves the opportunity to grow up with a healthy family and a strong foundation. Our work this session better ensures that children are safe, families are resilient and communities have access to evidence-based programs that support prevention and healing.

Despite the fact that only 18.7% of the bills filed made it all the way to the finish line, TexProtects is thrilled that many of our legislative initiatives were successful and the session resulted in real improvements for Texas children. Since our inception in 2004, **TexProtects** has led and/or assisted the passage of **51 BILLS**, including **three omnibus bills** and has secured over **\$140 MILLION IN STATE FUNDS** for evidence-based family support home visiting services. In 2018, these funds provided services for **16,000+ children and families**.



Priority Bills

TexProtects works across the child protection spectrum to ensure safe childhoods and healthy futures for Texas children. This session's priorities focused on prevention, education and healing.

Bills that passed

Bills that did not pass



Author: Sen. Royce West

SB 355

Strategic Planning for Foster Care Prevention Dollars

House sponsor: Sen. Lois Kolkhorst

Goal: Keep every child with their family, when possible, so they can achieve their greatest potential.

How we get there: Improve coordination and effectiveness of services for children and families at risk of entering foster care by leveraging Family First federal funds. Integrate trauma-informed mental health, substance use and in-home parent programs. Improve access to resources for relative caregivers.



Author: Rep. Tan Parker

HB 4183

Toolkit to Address Adverse Childhood Experiences

Senate sponsor: Sen. Charles Perry

Goal: Connect Texas systems that prevent child adversity, facilitate healing from childhood trauma, and promote resilience in children.

How we get there: Develop and implement a statewide strategic plan to address causes and symptoms of Adverse Childhood Experiences (ACEs) by cross-systems collaboration; evaluation of prevention needs, strengths and gaps in services; and providing resources for communities to empower decision making and programming.



Budget Highlights

This session, our budget priorities focused on improving access to evidence-based prevention programming, quality behavioral and physical healthcare and ensuring that DFPS is able to provide high-quality services to children who have experienced abuse and neglect.

Priority No. 1

Strengthen investments in community-based, primary child abuse prevention programs for children in their most critical neurodevelopmental years.

TexProtects, in collaboration with Child Trends, created a strategy that would allow DFPS to reach at least 30% of the highest need families in the next 10 years. Aligned with that strategy, we asked for this biennium to include: \$12 million to serve an additional 1,200 families with Nurse-Family Partnership and \$18.5 million to serve an additional 2,400 families or more with HOPES (costs differ based on the evidence-based model chosen in the community).

Through our advocacy efforts, we helped secure an additional \$1.5 million (from \$39.9 million) for HOPES and an additional \$2.9 million (from \$30.2 million) in all funds for Nurse-Family Partnership.

Priority No. 2

Strengthen the Child Protective Services system and workforce.

TexProtects has a long-time record of advocating for investments to better ensure the protection and healing of abused children. This session, child protection advocates worked to secure an additional \$5.3 million (total \$50 million) for salary increases for statewide intake staff and \$8.6 million (total \$84.1 million) for adoption, post-adoption and post-permanency, preparation for adult living, and substance abuse client services.

With our support, stakeholders were successful in obtaining \$57.3 million more (total \$1.9 billion) for foster care, adoption subsidies, relative caregiver monetary assistance, and day care payments.

The budget includes a total of \$1.6 billion to maintain lower caseloads for caseworkers and to expand Community-based Care into two new regions and advance case management model in three existing regions.



TexProtects in Action

Our staff and advocates worked tirelessly this session to support legislation through testimony, face-to-face visits with legislators and a day-long advocacy event at the capitol. Here is just a snapshot of what we accomplished in the 86th.



117

Supported bills



38%

Bills we supported passed



349

Number of bills we tracked



16

Times we provided testimony



461

Visits to legislative offices by staff and advocates



22

Different committees where we registered support for bills

**12**Advocacy email
alerts sent**659**Advocate responses to
our legislation alerts**13,189**Letters sent to legislators
by our advocates**15**

Legislative briefings

538

Briefings participants

**105**Child Protection Day adult
participants**80**Child Protection Day middle
school participants

Thank You For Supporting Our Work



Let's Keep the Conversation Going

This legislative session resulted in significant policy changes; however, there is much more work to do as we move into the interim. We must continue strengthening relationships with lawmakers and begin looking ahead to the 87th legislative session.

Like any great endeavor, we do not do this work alone. We hope you will join TexProtects as we monitor the implementation of these new initiatives closely and collaborate with our partners to continue speaking up for our children, who often cannot speak up for themselves. The efforts of many advocates, partners, stakeholders and providers were critical to the work that was done this session. Thank you to each one of you who used your voice, experience and time to stand up for Texas children and families. Your efforts made a difference and we look forward to the steps we can take next as we move forward together.



Please stay engaged with our research, education and advocacy efforts throughout the year by checking our website at texprotects.org. You can sign up for advocacy alerts there. You can also connect with us on Facebook, Instagram, and Twitter.



DID YOU KNOW?

4 children die from abuse/neglect each week, and 80% of victims are 3 years of age and younger.

181 children are confirmed as abused/neglected every day.

The highest rates occur in children under age 5.

Evidence-based home visiting programs can reduce child maltreatment by up to 48% and have a positive return for each dollar invested.

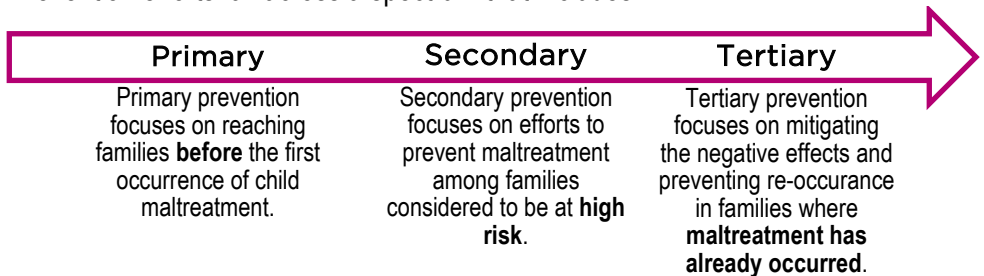
Currently, only 3.5% of families with the highest need have access to proven

Prevention and Early Intervention

The Adverse Childhood Experiences (ACEs) Study--as well as decades of subsequent, validated research--has made clear that the impact of severe childhood adversities, including child maltreatment, is a public health crisis.

In the absence of supportive relationships and environments, chronic and compound ACEs increase the likelihood of negative behavioral, educational, health and economic outcomes. Prevention strategies can reduce the prevalence and impact of ACEs and increase a child's opportunity for cognitive and emotional development, productivity, health, and economic wellbeing.

Prevention efforts fall across a spectrum that includes:



Evidence-based, in-home parenting programs (also known as home visiting) have proven to be the most effective and efficient model for prevention. These programs connect expectant and new parents who enroll voluntarily with a trained nurse, social worker, or early childhood specialist who promotes health, child development, parenting skills, education, and employment. By intervening to prevent adversity and build resilience during a child's most critical years of neurodevelopment, in-home parenting programs impact outcomes across multiple domains and generations. Evidence-based programs currently operating in Texas include **AVANCE, Early Head Start, Family Connects, Healthy Families America, Home Instruction Program for Preschool Youngsters, Nurse-Family Partnership, Nurturing Parenting, Parents as Teachers, SafeCare, Systematic Training for Effective Parenting, and Triple P - Positive Parenting Program.**

While some communities have been able to initiate programs with private and/or local funds, most in-home parenting programs implemented in Texas are funded through the Prevention and Early Intervention Division at the Department of Family and Protective Services. In 2018, funding was available to provide approximately 16,000 families with evidence-based in-home parenting support; however, 423,000 families in Texas have young children and three or more risk factors. Our goal is to continue working until many more of those families can access these beneficial programs.

ACEs and trauma do not dictate the future of a child. Children with protective factors (e.g. healthy attachment to parents, access to community resources, and supportive school and home environments) can build the resilience needed to thrive despite adversity. Evidence-based and effective solutions can strengthen families and help ensure that children start with a secure foundation of health and safety.

Evidence-based & Effective Solutions to Child Abuse Prevention



Voluntary in-home parenting programs



High quality childcare



Support for parenting teens



Treatment for mental illness



Substance use intervention



Prevention of domestic violence



Parent training



Quality healthcare



Prevention in the 86th Texas Legislature

HB 1 – The General Appropriations Act;
Champions – Sen. Jane Nelson & Rep. John Zerwas

In response to research, federal initiatives, and best practices, the landscape around prevention funding has changed within the past couple decades. The ACEs research makes clear the public health ramifications of severe adversities in childhood. Emerging brain science continues to demonstrate the importance of the development that happens in the first five years of a child's life. This has created new urgency and a growing and diverse group of stakeholders who are invested in improving access to proven programs. The federal Family First Prevention Services Act demonstrates an increasing prioritization by the federal government in programs that provide evidence-based services to ensure that, when possible, children can remain safely at home. Protecting a child's development by strengthening families to increase resilience and protective factors, and empowering communities to offer needed supports BEFORE a crisis occurs, have become the clear path forward.

Each session, TexProtects prioritizes increased investments in primary, evidence-based in-home parenting programs. Despite cuts to the Health and Human Services budget overall, the Legislature included funding to maintain Project HOPES and the Nurse-Family Partnership and appropriated an additional \$4.3 million to expand those programs.

Evidence-Based Prevention	2020-21 Base Budget	Add'l Investment & House Bill Final	% Difference
HOPES	\$39.9M GR/AF	\$1.5M; \$41.4M Total	3.8% +
NFP	\$30.2M AF (\$5.6M GR)	\$2.9M; 33.1M Total	9.6% +
TOTAL	\$70.1M All Funds	\$4.3M; \$74.4M Total	6.1% +

Healthy Outcomes Through Prevention and Early Support (HOPES) is a prevention approach developed to be a flexible and community-based solution to child abuse and neglect in high-risk counties by increasing protective factors of families served. It is currently serving families in 55 counties with children ages 0-5 at risk for child abuse and neglect. The evidence-based programs chosen by the communities each have proven positive outcomes across multiple domains and returns on investment that range from \$1.26 to \$8.08.

The Nurse-Family Partnership Program is an evidence-based, community health approach with over 40 years of evidence currently serving families in 43 counties. NFP works by having specially trained nurses regularly visit young, first-time expectant moms and fathers, starting early in the pregnancy, continuing through the child's second birthday. For every dollar invested, there is a return on investment of \$5.70 including savings on medical care, child welfare, special education, and criminal justice.



SB 355
Champions – Sen. Royce West & Rep. Stephanie Klick

SB 355 directs the Department of Family and Protective Services to develop a strategic plan to leverage federal funds made available through the Family First Prevention Services Act to increase access to mental health care, substance use treatment and in-home parenting programs that can prevent child maltreatment and keep children with their families. This will result in cost savings to the state and better outcomes for Texas children. For the first time, federal dollars previously only available for children in the foster care system will be made available to fund evidence-informed and community-based early interventions so that children can remain safely at home when possible rather than placing them in foster care. These prevention strategies address key drivers of child abuse and neglect: substance use, mental health issues, and parenting skills. Such services build on the knowledge that most children can be safely protected and remain within their own homes when parents are equipped with appropriate support and opportunities to care for their children.



SB 708
Champions – Sen. Judith Zaffirini & Rep. John Raney

SB 708 requires the Health and Human Services Commission to use existing procedures to collect, make publicly available, and report to the Legislature data on child safety in licensed child-care centers. Data must include violations that impact the health, safety, and well-being of children as well as information on the number of children and caregivers in each classroom. This data will allow lawmakers, providers, and parents to make better decisions to ensure the safety of children in care.

TexProtects Goal - Provide training to promote prevention and early intervention

HB111 Rep. Mary Gonzáles Sen. Pat Fallon

HB 111 requires that existing child abuse training for school staff must also include information on students with significant cognitive disabilities. Persons with disabilities are victimized at much higher rates than those without disabilities and are much less likely to report abuse.

HB 403 Rep. Senfronia Thompson Sen. Joan Huffman

HB 403 requires that the board of trustees and superintendent of a public school district complete one hour of training on identifying and reporting potential victims of sexual abuse, human trafficking, and other maltreatment of children every two years.

HB 2059 Rep. César Blanco Sen. Larry Taylor

HB 2059 equips health care practitioners who provide direct patient care with the training needed to help detect potential victims of human trafficking and provide them with adequate care, including referring them to additional support services. Ensuring that health care providers are knowledgeable and adequately prepared is vital in combating human trafficking in Texas. Approximately 80 percent of human trafficking victims are women, and health care providers are often the first professionals to have contact with trafficked women and girls.

TexProtects Goal - Improve Maternal and Newborn Healthcare

HB 25 Rep. Mary Gonzáles Sen. Judith Zaffirini

HB 25 creates a pilot program to allow pregnant and postpartum women utilizing the Medicaid medical transportation program to travel with their children to pregnancy-related appointments. Women enrolled in the STAR Medicaid managed care program during pregnancy or after delivery often miss prenatal or postpartum appointments because the medical transportation service program does not provide an option for women to bring their children along with them to appointments. This pilot could increase access to health care during this critical time for mom and baby.

HB 253 Rep. Jessica Farrar Sen. Lois Kolkhorst

HB 253 requires the Health and Human Services Commission (HHSC) to develop and implement a recurring five-year strategic plan to improve access to postpartum depression screening, referral, treatment, and support services. Postpartum depression (PPD) affects 1 in 9 mothers nationally, according to the Centers for Disease Control. PPD can affect a mother's capacity to attach and interact with her child. This can disrupt healthy development and family functioning. Depression is treatable and most mothers improve with access to adequate support.

HB 405 Rep. Ina Minjarez Sen. Lois Kolkhorst

HB 405 designates June as Neonatal Abstinence Syndrome (NAS) Awareness Month. Neonatal Abstinence Syndrome (NAS) is a group of conditions caused when babies withdraw from certain drugs that they have been exposed to before birth. Rates of NAS in Texas increased by more than half between 2010 and 2015. This bill would increase public awareness and access to information and resources to decrease stigma and encourage mothers to seek help.

HB 1576 Rep. Dade Phelan Sen. Dawn Buckingham

HB 1576 allows the Health and Human Services Commission (HHSC) and Medicaid managed care organizations to contract with transportation network companies (TNCs) and transportation vendors such as Uber and Lyft for the delivery of nonemergency medical transportation. The medical transportation program currently provides non-emergency transportation services to and from covered health care services--based on medical necessity--to recipients under Medicaid, the children with special health care needs program, and indigent cancer patients program who have no other means of transportation. This would increase options and flexibility and decrease the use of emergency medical transportation resources for non-emergency transport.

HB 1651 Rep. Mary Gonzáles Sen. Carol Alvarado

HB 1651 requires the Commission on Jail Standards to prohibit the use of restraints for women who are incarcerated during pregnancy and 12 weeks postpartum unless clearly required for the health and safety of the mother or staff. Shackling pregnant inmates is banned in Texas state prisons and was recently outlawed at the federal level. This bill extends the same protection to the inmates of our state's county jails. The bill also requires an annual report on any use of restraints on pregnant and postpartum women.

SB 436 Sen. Jane Nelson Rep. Four Price

SB 436 requires the Department of State Health Services (DSHS) to collaborate with the Maternal Mortality and Morbidity Task Force to develop and implement initiatives to improve screening and continuity of care for women with opioid use disorder, as well as newborns with neonatal abstinence syndrome, while increasing access to medication-assisted treatment and decreasing the number of opioids prescribed before, during, and following delivery. A report on these initiatives is due to the legislature by December 2020.

SB 748	Sen. Lois Kolkhorst	Rep. Sarah Davis
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SB 748 creates a general revenue dedicated account to fund newborn screenings conducted by the Department of State Health Services (DSHS). The public health laboratory at DSHS tests 400,000 infants per year for 53 disorders or medical conditions. Dedicated funds could be used to maintain the lab and add additional screenings to the panel to meet federal requirements.

SB 750	Sen. Lois Kolkhorst	Rep. Eddie Lucio
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SB 750 seeks to maximize Texas' efforts to address maternal mortality as detailed by the Health and Human Services Commission's report, *State Efforts to Address Maternal Mortality and Morbidity in Texas*, by improving access to healthcare during the prenatal and postpartum period for women enrolled in the Healthy Texas Women Program. This bill also renames the Maternal Mortality and Morbidity Task Force as the Texas Maternal Mortality and Morbidity Review Committee and extends its work until 2027.

TexProtects Goal – Increase Access to High-Quality Early Care and Education

HB 3	Rep. Dan Huberty	Sen. Larry Taylor
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HB 3 creates an early education allotment to fund full-day Pre-k for eligible students, provides additional funding for districts with high concentrations of poverty, increases funding per student, and provides funding for extended summer instruction.

HB 680	Rep. Joe Deshotel	Sen. Kirk Watson
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HB 680 requires the Texas Workforce Commission to assess and report the information on the quality and types of childcare being used by families receiving childcare subsidies. This information will include the average cost of childcare and the total number of providers and children participating in the state's quality rating system, Texas Rising Star. The Texas Workforce Commission (TWC) administers a federal program that provides childcare subsidies to low-income families so their parents can work or attend workforce training. The data collected can help decision makers better improve access to high quality care.

SB 1679	Sen. Royce West	Rep. John Turner
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SB 1679 authorizes children at the age of three who were eligible for enrollment in a free Pre-k class to remain eligible for enrollment for the following school year. This will eliminate confusion and the burden on families that can result in children not being enrolled.

TexProtects Goal – Increase Safety for Children in Childcare

SB 568	Sen. Joan Huffman	Rep. Greg Bonnen
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SB 568 transfers certain regulatory authority over childcare facilities and family homes from the Department of Family and Protective Services (DFPS) to the Health and Human Services Commission (HHSC). The bill creates a safety training account of dedicated funds, requires liability insurance unless it is cost-prohibitive, and establishes safe sleeping standards. A family home is a caregiver who provides regular care in their own residence for six or fewer children who are younger than 14, excluding children who are related to the caretakers.

SB 569	Sen. Joan Huffman	Rep. Greg Bonnen
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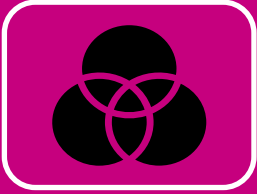
SB 569 transfers regulatory authority for listed family homes from the Department of Family and Protective Services (DFPS) to the Health and Human Services Commission (HHSC). The bill requires HHSC to adopt minimum standards for listed family homes, requires liability insurance unless it is cost-prohibitive, and requires certain trainings like safe sleep training. The bill requires the HHSC to inspect listed family homes whenever the commission receives a complaint. Listed family homes are adult caregivers that provide care in their own home for compensation for up to three children unrelated to the caregiver.

SB 706	Sen. Kirk Watson	Rep. Bobby Guerra
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SB 706 requires there be an investigative unit within the childcare licensing division at the Health and Human Services Commission to identify childcare facilities operating without a license, certification, registration, or listing and initiate appropriate enforcement actions against those facilities.



Missed Opportunities for Prevention and Early Intervention



Cross Sector Collaboration to Prevent Adverse Childhood Experiences

Research conducted by the Centers for Disease Control, the National Institutes of Health, the American Academy of Pediatrics, and others has made clear that ACEs are prevalent and can have lifelong consequences on health and behavior. Currently, prevention efforts in Texas are spread across multiple agencies. Communities do not have access to the information and resources they need to make strategic decisions toward safer and healthier families. HB 4183 would have facilitated a cross-agency strategic planning process to better coordinate statewide data and initiatives and give communities a better toolkit for providing services that can strengthen families and prevent trauma. The bill passed in the House but not in the Senate.



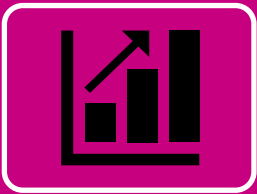
Strengthen ECI

Early Childhood Intervention (ECI) is a statewide program within the Texas Health and Human Services Commission for families with children from birth up to age 3 who have developmental delays, disabilities, or certain medical diagnoses that may impact development. ECI services recipients can access needed therapies and be school-ready. The agency made a \$72 million request for the funds needed to keep ECI sustainable; however, the budget appropriated only \$31 million. HB 12 would have strengthened the ECI program by addressing prior authorizations, requiring health benefit plans to cover services, and creating a tele-health pilot and ombudsman office. The bill passed the House but did not move in the Senate.



Extend Medicaid Coverage for Women Postpartum

Texas has the nation's worst uninsured rate for kids AND the nation's worst uninsured rate for women of childbearing age — with often devastating consequences for moms and babies. Extending Medicaid coverage for women postpartum up to 12 months post-childbirth, as proposed in HB 744, would have addressed the first recommendation from the state's Maternal Mortality and Morbidity Taskforce; however, the issue faced significant challenges prior to House passage and was not referred to committee in the Senate.



Strategically Expand Proven Prevention Programs

While we are relieved to see continued investment in evidence-based child abuse prevention programs, we still have a long way to go. HB 1549 in the 85th legislative session directed the department to develop a plan to take these programs to scale in order to impact statewide outcomes. Current investments are only providing services to 3.5% of those families in highest need. In order to move the needle, Texas needs to make strategic investments that outpace population growth and inflation and can move us toward a reality in which at least 30% of families in need have access to services.



DID YOU KNOW?

In 2018, there were 280,874 reports of suspected child abuse/neglect to Statewide Intake. 66,370 or 24% of those reports were confirmed.

Child maltreatment will cost Texas an estimated \$1.75 billion in CPS expenditures in FY 2019 and over \$55 billion in total costs across the victims' lifetimes.

43% of children who complete Family Based Safety Services programming with their families are reconfirmed as victims of

Child Protection Systems

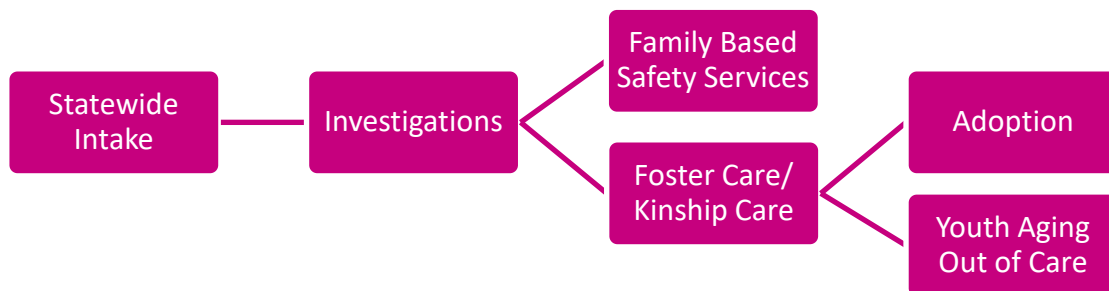
In the 85th Texas Legislative Session, Governor Greg Abbott declared child protection to be an emergency item. That session resulted in unprecedented child protective services (CPS) reforms and investments including:

- ✪ Increases in kinship care through enhanced financial assistance;
- ✪ Expansion of community-based foster care;
- ✪ Treatment-based foster family care in most regions;
- ✪ Salary increases; and
- ✪ Additional hires that lowered caseloads

While those reforms made real progress for the safety of Texas children, there was significant work left to do in the 86th Legislative Session and much less political will to do it. However, opportunities for continued investment in best practice and improvements to child safety were plentiful. Opportunities presented to the 86th Legislature included:

- ✪ **Maintenance** – In order to maintain the salary increases, caseloads, and investments in community-based care despite a growing child population and increasing number of reports and child abuse victims, lawmakers had to invest additional dollars or risk losing ground on the changes made last session.
- ✪ **Pressure from the federal class action lawsuit** – In 2015, Judge Janis Jack proposed significant changes to the CPS system to ensure the constitutional rights and due process of children in the care of the state in response to a class action lawsuit filed on behalf of 12,000 children in long-term foster care. While some of the proposals were overturned by the 5th Circuit Court of Appeals as overreach, the findings have consistently made clear that the state has work to do to ensure the safety, health, and constitutional rights of children in the conservatorship of the state.
- ✪ **Family First Prevention Services Act** – This session presented a new opportunity to leverage federal funds made available through the federal Family First Prevention Services Act in two significant ways. First, it makes available new prevention funding to help strengthen families before a crisis by investing in mental health, substance use prevention and treatment, and in-home parenting programs. Second, it requires that federal dollars for children in care be spent on family-like settings and treatment centers that are offering accredited and high-quality care. In order to leverage those dollars most effectively, the Legislature had the opportunity to invest in planning and improved quality that would ready the state for implementation.

CHILD PROTECTION SYSTEM AT A GLANCE



ACROSS THE SPECTRUM, TexProtects advocates on issues that create an effective child protection infrastructure, adequate capacity, evidence-based practices, and children's interactions with the legal, education, and healthcare system during and after abuse/neglect investigations.

Child Protection in the 86th Texas Legislature

HB 1 – The General Appropriations Act

Champions – Sen. Jane Nelson & Rep. John Zerwas; Sen. Lois Kolkhorst & Rep. Sarah Davis

General Overview – Although we did not see the urgent and comprehensive focus on child welfare this session that we did in the 85th, there was continued attention on child protection issues. Lawmakers viewed their role this session as one of a gatekeeper—ensuring that the large-scale changes of last session continued to move forward and that implementation was monitored closely. Despite a cut in state funds, when federal funds were included, the Department of Family and Protective Services (DFPS) budget grew by 6.1%. In their budget, lawmakers showed continued support for community-based care, increasing the use of kinship care, and the needs of older foster youth.

Area of Budget	2020-21 Base Budget	House Bill 1 FINAL	% Difference
Child Protective Services	\$3.7B	\$3.8B	2.2% +

Statewide Intake – At DFPS, statewide intake is the front door for the public to report suspected abuse. Additional investments will improve child safety by minimizing hold times on the statewide intake line. Long wait times can result in dropped calls and increase the risk of abuse going unreported. Investments in this biennium will support salary increases of \$6,000, resulting in lower turnover and subsequently, a higher level of experience in the workforce.

Area of Budget	2020-21 Base Budget	Additional Investment and House Bill Final	% Difference
Statewide Intake	\$45.9M	\$4.3M; \$50.2M Total	8.5% +

Caseloads – The maintenance of manageable caseloads is paramount to ensuring the safety of children who are interacting with the child protection system. Investments for CPS direct delivery staff will help to maintain lower caseloads for most caseworkers.

Area of Budget	2020-21 Base Budget and Avg. Daily Caseload	Additional Investment, House Bill Final, and Projected Avg. Daily Caseload	% Difference
CPS Direct Delivery Staff	\$1.4B	\$148.0M; \$1.6B Total	9.1% +
CPS Investigations	13.6 cases	13.6 cases	
CPS Family Based Safety Services	10.2 cases	9.3 cases	
CPS Conservatorship	25 cases	23.5 cases	

**Projected caseloads included in HB 1 are estimates from the Legislative Budget Board; DFPS will prepare its own analysis.*

Community Based Care – The Legislature provided funding to continue rolling out Community-Based Care (CBC), formerly named “Foster Care Redesign,” which changes the way the state delivers foster care services. Under CBC, a private contractor (called a “Single Source Continuum Contractor [SSCC]”) is responsible for building and managing foster care capacity and placements for a specific service region in the state. CBC has been rolled out in Regions 3B (seven-county area including Tarrant County), Region 2 (30-county area in North and North-central Texas that includes Wichita Falls and Abilene), and Region 8A (Bexar County). Additional investments this session will provide resources to expand into Region 8B (16 counties surrounding Bexar), and Region 1 (41 counties in Panhandle), as well as, add case management work to the existing contracts.

	2020-21 Base Budget	Additional Investment and House Bill Final	% Difference
Community-Based Care	\$434.5M	\$66.9M; \$501.4M Total	15.4% +

Foster Care Provider Payments – Foster care families and other providers are essential to building capacity in the foster care system so it meets current demand and ensures positive outcomes for children and youth in state conservatorship. The Legislature provided \$12 million additional investment in foster family support, certain residential providers, and emergency shelters.

Supervised Independent Living (SIL) and Preparation for Adult Living (PAL) – DFPS provides both SIL and PAL programs to assist older youth in their transition toward a successful and self-sufficient adulthood. Without supportive housing and access to training and resources, youth are more likely to be involved in the criminal justice system, are at higher risk of teen pregnancy, have lower high school graduation rates and are more likely to experience homelessness and unemployment. SIL increases of \$1.8 million will support case management services for children with more complex needs and increase the rates paid to providers for services. PAL increases of \$1.5 million will support 10 additional specialist positions.



HB 475

Champions – Rep. Donna Howard & Senator Kirk Watson

HB 475 will ensure that pregnant and parenting foster youth receive basic information about ways to keep their child safe and promote healthy attachment, child development, and maternal health if they cannot or choose not to participate in Project Helping through Intervention and Prevention (HIP). Project HIP makes available evidence-based, in-home parenting programs to pregnant and parenting foster youth; however, it is voluntary and not currently available statewide.

TexProtects Goal – Efficiency and Best Practices in CPS and Foster Care

SB 195 Sen. Charles Perry Rep. Tan Parker

SB 195 requires DFPS to update their case tracking system to allow DFPS to keep statistics regarding alcohol and controlled substances when funds are available. This detailed information will allow the department to better understand the correlations between substance use and child abuse/neglect as well as the impacts of prenatal exposure to alcohol and controlled substances on children.

SB 781 Sen. Lois Kolkhorst Rep. Ben Leman

SB 781 establishes regulations for child safety, runaway prevention, quality contracting, and strategic planning for facilities that provide 24-hour care to children such as residential treatment centers and emergency shelters. The strategic plan outlined in the bill will help ensure that state agencies are prepared for the implementation of the federal Family First Prevention Services Act.

TexProtects Goal – Increased Use of Kinship Care

HB 1884 Rep. Ina Minjarez Sen. Carol Alvarado

HB 1884 requires that when a child is placed with a relative or other designated caregiver, the caregiver is informed, by the court, of the option to become verified by a licensed child-placing agency and of the permanency care assistance program. This opportunity can make available additional resources to the caregiver and as a result, increase stability for children.

HB 3390 Rep. Scott Sanford Sen. Angela Paxton

HB 3390 ensures that adequate steps are taken to identify any potential caregiver for a child before that child is placed in foster care. The bill also expands the definition of a designated caregiver to include a person who had a longstanding and significant relationship with the family of the child and requires that the child and parent both be asked to share any relatives or potential caregivers.

TexProtects Goal – Improved Services to Foster Youth Aging Out of Care

HB 53 Rep. Ina Minjarez Sen. Beverly Powell

HB 53 requires DFPS to collaborate with the Office of Consumer Credit Commissioner and the State Securities Board to develop an expanded financial literacy education program for foster youth. Experiential training will include filing taxes, using insurance, identity and credit theft, budgeting and civic engagement.

HB 123 Rep. James White Sen. Kirk Watson

HB 123 eases the burden of obtaining personal identification documents for foster children by waiving the fee, exempting the requirement for a parent signature and allowing the use of the DFPS regional office in lieu of a permanent address.

HB 1702 Rep. Donna Howard Sen. Kelly Hancock

HB 1702 requires institutions of higher education to make publicly available the contact information for their foster care liaison officer and information regarding support services available to students who were formerly in conservatorship. In addition, the name of any student who was formerly in conservatorship will be provided to the foster care liaison officer by their institution at the beginning of each semester.

TexProtects Goal – Cross-Sector Collaboration and Child Protection Systems

HB 72 Rep. James White Sen. Angela Paxton

HB 72 allows adopted children with chronic health conditions to continue to have access to the healthcare they would have had if they had remained in conservatorship if the adoptive parents opt-in. Foster children who transition into adoptive placement often experience gaps in medical care, and these gaps can have serious negative health consequences for children with severe disabilities.

HB 621 Rep. Victoria Neave Sen. Judith Zaffirini

HB 621 expands existing statutory protections against employer retaliation for a professional's good faith reporting of child abuse or neglect by defining "adverse employment action" to mean any action that affected an employee's compensation, promotion, transfer, work assignment, or performance evaluation, or any other employment action that would dissuade a reasonable employee from making or supporting a report of abuse or neglect.

HB 1709 Rep. Mary González Sen. José Menéndez

HB 1709 requires school districts work closely with DFPS to notify when a surrogate parent is appointed to a child with disabilities in conservatorship. Surrogate parents are appointed by school districts when children with disabilities under managing conservatorship of DFPS do not have an available parent or foster parent willing or able to serve as the educational decision maker. When a surrogate parent is not properly performing their required duties, the district must consult with DFPS to review the appointment and, if appropriate, find a replacement. This bill expands the definitions of who can serve as a surrogate parent and ensures system transparency and accountability.

HB 1780

Rep. Rick Miller

Sen. Lois Kolkhorst

HB 1780 requires the court to consider a parent's good faith attempt to complete a drug rehab program when deciding whether to grant a 6-month extension before terminating parental rights. In light of the overwhelming majority of neglectful supervision cases that involve substance use and the complexity of treatment and recovery, this bill will give parents a chance to break the cycle of drug addiction and keep families together.

HB 2737

Rep. Gene Wu

Sen. Nathan Johnson

HB 2737 requires the Texas Supreme Court to provide annual guidance to judges who preside over juvenile or child protective services cases to establish greater uniformity across the state in how those cases are handled. The issues addressed could include the placement of children with severe mental health issues; changes in placement; final termination of parental rights; release of children detained in juvenile detention facilities; certification of juveniles to stand trial as adults; and commitment of children to the Texas Juvenile Justice Department.

HB 3809

Rep. Craig Goldman

Sen. Kirk Watson

HB 3809 allows suits for personal injury to be brought up to 30 years after the day the injury is discovered if the it arose from conduct involving offenses against children including sexual assault and aggravated sexual assault of a child, continuous sexual abuse of a young child, trafficking a child and causing the child to be involved in certain sex crimes, compelling prostitution of a child, and indecency with a child. Currently, the statute of limitations is 15 years. This bill allows more time for child victims to come to terms with their trauma enough to talk about it and bring a civil lawsuit.

HB 2229

Rep. Jarvis Johnson

Sen. John Whitmire

HB 2229 adds specific information to a report the Texas Juvenile Justice Department (TJJD) must submit to the Governor, Lt. Governor, and Legislature every even numbered year regarding foster children in the juvenile justice system. This bill requires the report to break down the number of foster children in TJJD custody by age, sex, race, conduct, and first-time offenders. This data will enable advocates and policymakers to better implement programs and practices that can prevent foster youth from entering the justice system.



Missed opportunities for Improving Child Protection Systems

Rate Increases



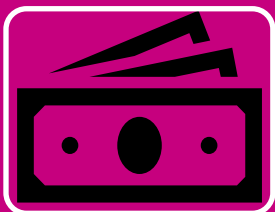
Children who cannot remain safely at home with their parents are removed by CPS. CPS places children in foster care placements when a suitable kinship option is not available. Foster care services may be provided through placement with foster families or through emergency shelters, residential treatment centers, and other programs. Foster care providers are reimbursed by the state at a daily rate based on the type of care that is required to meet the needs of each child. In Texas, these rates do not fully cover the cost of providing foster care services, and providers must secure philanthropic donations that subsidize the rates in order to provide quality foster care. While lawmakers did make some investments in rate increases, in most cases these increases did not keep pace with inflation and actual purchasing power decreased. Insufficient rates contribute to continuing problems in building sufficient capacity to serve children in need.

Trauma-Informed Care



Children who are interacting with the Child Protection System experience trauma at higher rates than their peers and often in patterns that are complex and chronic. Although DFPS currently includes trauma-informed training in programs made available to DFPS employees as well as foster, adoptive, and kinship caregivers, the comprehensiveness and accessibility of that training may not be sufficient to ensure staff and caregivers have the skills they need to recognize and address the ways that trauma may be affecting a child's behavior. Unfortunately, the Legislature failed to take action to ensure that the adults who are charged with decision making on behalf of traumatized children, have adequate training to understand the ways trauma can impact biology and behavior or strategies to increase resilience and healing.

Funding for Increased Quality in Foster Care



The Family First Prevention Services Act, which will go into effect in 2021, targets federal funding to evidence-based foster care prevention services and improved foster care that provides the best environment for each child's unique needs. For children with therapeutic needs, Family First dollars are available for providers who have third-party assessment, access to medical staff, and follow-up after transition to assure successful placement. Many Texas providers are not currently meeting the standards laid out by the bill. This session offered an opportunity to invest in programs and services that are being prioritized by Family First so that implementation will be efficient, federal dollars can be maximized, and children will have access to higher quality care.

DID YOU KNOW?

Behavioral health is a term used to refer to the connection between physical and mental health and a person's behavior

At least 25% of Texas children have experienced multiple adversities that are likely affecting their ability to succeed at school.

Half of all mental health conditions have presented before age 14.

68% of removals in 2017 were related to parental substance use.

Behavioral Health and Trauma



Challenges with mental health can be both a cause and a consequence of early childhood adversity. Therefore, both prevention and healing require adequate systems of care to ensure children and their parents have access to mental health care and services that incorporate trauma-informed approaches that can be both healing and protective.

In the 86th Legislative Session and in the wake of the shooting at Santa Fe High School and Hurricane Harvey, the momentum around school safety and trauma offered an opportunity to take a meaningful look at the capacity issues in our communities and the ways in which our schools might better facilitate access to care and incorporate strategies that allow children with a trauma history to engage productively and thrive.

Schools are often the first point of contact for students with behavioral health issues, and undiagnosed mental health conditions can negatively impact the academic performance, behavior, and school attendance of students.

Like all diseases, care works best with early intervention when symptoms are less severe and there is less need for more intense treatments, specialists, and medications. However, most schools lack adequate training or staff to address student needs, and most communities in Texas have a shortage of mental health and substance use providers to which families and children might be referred for treatment.

Stress and trauma, both acute (e.g. Hurricane Harvey) and chronic (e.g. abuse/neglect), can place children in “fight or flight” mode. This course overwhelms the brain, including its stress hormone cortisol, and impairs a child’s ability to self-regulate and engage in higher-order thinking. These adverse childhood experiences can disrupt normal development and lead to a higher risk of both mental challenges (e.g. depression and suicidality) and physical challenges (e.g. heart disease and stroke) throughout the lifespan. However, the negative impacts can be mitigated if students are equipped with protective factors through healthy relationships, safe environments and access to care, when needed.

Behavioral health care investments and programs are spread across state agencies including:



In addition to state entities, behavioral health services are provided at the local level in jails, hospital emergency departments, schools, local mental health authorities, various nonprofit agencies, public health clinics and other settings, with people frequently moving between service systems.

The goal of behavioral health policies is recovery. Recovery is an ongoing process that enables individuals to mitigate the negative effects of their challenges and trauma and become empowered to make beneficial choices, engage in healthy relationships and create a successful life.



Behavioral Health in the 86th Legislature

HB 1 - The General Appropriations Act

Champions – Sen. Jane Nelson & Rep. John Zerwas

HB 1 funding for behavioral health includes programs or services directly or indirectly related to the research, prevention, or detection of mental disorders and disabilities, and all services necessary to treat, care for, supervise, and rehabilitate persons who have a mental disorder or disability, including persons whose mental disorders or disabilities result from alcoholism or drug addiction. Funding for behavioral healthcare to support programs at 23 state agencies and associated costs within Medicaid and the Children's Health Insurance Program total \$7.8 billion for 2020-2021. Some of these services include:

- funding for inpatient client services at state hospitals and community hospitals;
- deferred maintenance projects at state mental health hospitals;
- outpatient services provided through local mental health authorities and local behavioral health authorities;
- substance abuse prevention, intervention, and treatment services for adults and children;
- mental healthcare and substance abuse treatment for incarcerated offenders;
- mental healthcare services for veterans; and
- Mental Health Care Consortium.

Some notable increases in investment are found in the table below:

Behavioral Health	2020-21 Base Budget	Additional Investment and House Bill Final	% Difference
Department of Family and Protective Services for Purchased Client Services	\$52.8M	\$24.4M; \$77.3M Total	46.2% +
Health and Human Services Commission	\$3.0B	\$303.7M; \$3.3B Total	10.3% +
University of Texas Health Science Center at Tyler	\$8.0M	\$5.5M; \$13.5M Total	68.3% +
*Higher Education Coordinating Board	\$0	\$100M Total	100% +
Department of Criminal Justice	\$515.8M	\$9.8M; \$525.6M Total	1.9% +
Juvenile Justice Department	\$175.5 M	\$3.6M; \$179.1M	2.0% +

**Funds available to the newly created Texas Mental Health Consortium to be distributed to health-related institutions of higher education for expanding the mental health workforce and for psychiatric fellowships. The Consortium is created through SB 11.*

Safe and Healthy Schools Initiatives

Funding for school safety programs includes an additional \$343.5 million to expand children's community mental health, grants to mental health professionals at local mental health authorities provided by HB 19, school safety infrastructure enhancements, a new school safety allotment provided by SB 11; school district reimbursement of post-disaster expenditures, and customized school safety programming and other services.



HB 18 - TRAUMA INFORMED SCHOOLS

Champions – Rep. Four Price & Sen. Kirk Watson

HB 18 will increase awareness of mental health among public school students and educators, reduce the stigma of mental health issues, and provide more resources on mental health and substance abuse for educators. Through integration in district policy, staff training and continuing education requirements, HB 18 ensures that school staff are adequately trained to understand the impact of trauma on students, implement strategies to minimize the negative impacts, and maximize academic opportunities in an environment of safety and connection, making referrals when needed and with parental consent.

TexProtects Goal – Address students’ mental health needs by increasing access to care and implementing trauma-informed approaches in school environments

HB 19 Rep. Four Price Sen. Kirk Watson

HB 19 requires local mental health authorities to employ a nonphysician mental health professional to serve as a mental health and substance use resource for school districts. These professionals will act as a resource for school district personnel by helping increase awareness of mental health and co-occurring mental health and substance use disorders, assisting with the implementation of mental health or substance use initiatives under state law or agency rules, and ensuring awareness of certain recommended programs and practices and treatment programs available in the district. The bill will also require the professionals to help personnel facilitate on a monthly basis training regarding mental health first aid, the effects of grief and trauma, and prevention and intervention programs that will help students cope with pressure to use illicit substances.

HB 811 Rep. James White Sen. Royce West

HB 811 requires that school districts take into consideration whether a child is in the conservatorship of the state or is homeless when making decisions concerning disciplinary actions including suspension, removal to a disciplinary alternative education program, expulsion or placement in a juvenile justice alternative education program, regardless of whether the decision concerned a mandatory or discretionary action.

HB 906 Rep. Senfronia Thompson Sen. Beverly Powell

HB 906 establishes the Collaborative Task Force on Public School Mental Health Services to study and evaluate state-funded mental health services provided at school districts or open-enrollment charter schools. The task force will also evaluate mental health services training provided to educators and the impact of the provided mental health services. The task force will share its findings and recommendations with the governor, lieutenant governor, House speaker, and the TEA by Nov. 1 in each even numbered year until 2025.

SB 11 Sen. Larry Taylor Rep. Greg Bonnen

SB 11 is the 86th Legislature’s answer to increasing school safety. It includes many provisions related to safety, security, and emergency preparedness and response. In addition, the bill requires a trauma-informed care policy to address methods for increasing staff and parent awareness of trauma-informed care and the implementation of trauma-informed practices and care by district and campus staff. The policy will also address available counseling options for students affected by trauma and grief. In addition, SB 11, amended with language from Sen. Nelson’s SB 10, creates the Texas Child Mental Health Care Consortium to leverage the expertise and capacity of the health-related institutions of higher education in order to address urgent mental health challenges and improve the mental health care system in this state in relation to children and adolescents.

SB 712 Sen. Eddie Lucio Rep. Morgan Meyer

SB 712 provides guidance by naming extreme aversive interventions that may not be used on any student, under any circumstances. By clarifying what behavior modification techniques are prohibited and providing direction on positive alternatives. SB 712 will improve the safety and wellbeing of students, especially those with special needs. The companion to this bill is HB 3630.

TexProtects Goal – Improve access to mental health care, substance use prevention and treatment, and evidence-based treatments and approaches for survivors of childhood adversity

HB 2813 Rep. Four Price Sen. Jane Nelson

HB 2813 ensures the continued existence of the Texas Statewide Behavioral Health Council by codifying it in statute. The council is charged with developing and monitoring the implementation of a five-year statewide behavioral health strategic plan and developing a biennial coordinated statewide behavioral health expenditure proposal. This work helps state agencies coordinate and reduces duplication of services, improves the quality and accessibility of services, and saves taxpayer dollars.

SB 429 Sen. Eddie Lucio Rep. Eddie Lucio III

SB 429 requires the Statewide Behavioral Health Coordinating Council, under the direction of the Health and Human Services Commission (HHSC), to develop a comprehensive plan to increase and improve the workforce in Texas to serve individuals with mental health and substance use issues. By Sept 1, 2020, HHSC will need to start implementing the plan.

SB 633 Sen. Lois Kolkhorst Rep. William Lambert

SB 633 requires HHSC to form local mental health authority (LMHA) groups in rural areas and develop a mental health services development plan for each group. Public mental health services are primarily provided through HHSC contracts with LMHAs. These entities provide or arrange crisis, community mental health, and substance use services; jail assessments; and services for individuals with intellectual and developmental disabilities. This bill increases service access, especially in rural counties, by requiring regional coordination and planning to reduce government costs and negative impacts to individuals in crisis.

SB 821

Sen. Jane Nelson

Rep. Four Price

SB 821 amends a children's advocacy center's duties and a multidisciplinary team's membership and response. These centers assess victims of child abuse and their families to determine their need for services related to the investigation of child abuse and provide those services. This bill updates the Family Code to more clearly align statute with current practices, standards, services, and operations of children's advocacy centers, increase accountability, and strengthen access to services.

SB 1177

Sen. Jose Menéndez

Rep. Toni Rose

SB 1177 permits a Medicaid Managed Care Organization to offer medically appropriate, cost-effective, and evidence-based services from a list approved by the state Medicaid managed care advisory committee and included in the contract in lieu of mental health or substance use disorder services specified in the state Medicaid plan. This will provide flexibility to providers and access to evidence-based and cost-effective services without additional cost to the state.

SB 1564

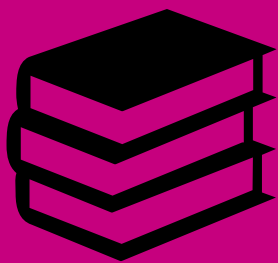
Sen. Royce West

Rep. Stephanie Klick

SB 1564 aligns Texas Medicaid policy with federal law by using the federal definition of a "qualifying practitioner." This will allow more practitioners to prescribe and be reimbursed for buprenorphine, a common medication-assisted treatment for substance use disorders. Currently, a large number of Texans who have a substance use disorder do not have access to providers who are able to prescribe them the common opioid antagonist buprenorphine.



Missed opportunities for Behavioral Health and Trauma



Creating the Texas Mental and Behavioral Health Research Institute

Through HB 10, this research institute would have been able to lead the charge on child and adolescent mental health by funding research, increasing awareness of best practices, and fostering statewide collaborations. This institute would coordinate with the Mental Health Care Consortium to accelerate community access to information, treatments, and training related to behavioral health and substance use. The related HJR 5 would have created a revenue source for this research and increased access to care.

A look ahead – The 86th Interim



A CHECKLIST FOR THE INTERIM

- ❑ Stay connected with partners such as TexProtects to stay up to date on the latest happenings with Texas and federal policy.
- ❑ Join local and statewide collaboratives on areas of interest to amplify your voice and inform your positions.
- ❑ Write a letter of thanks to legislative champions.
- ❑ Initiate research or public awareness campaigns to prepare for advocacy during next session.
- ❑ Make sure you know who represents you and find a way to get to know them and their staff.
 - Go to a campaign event or a town hall.
 - Schedule a visit to talk about topics of interest.
 - Invite them to an event that highlights critical issues and programs to build investment.

The Texas Legislative Session takes place for 140 days every two years; however, it may be a misconception to call it a part-time legislature. The laws passed during the session are the result of work that starts during the interim – the period between the end of one session and the beginning of another.

Despite the fact that the legislative session gets the majority of the attention, it's important for advocates to understand the significance of the interim. During the interim, advocates have the opportunity to strengthen relationships with legislators and their staff and educate them on issues that will inform and help prioritize their work next session.

The Governor and the Lieutenant Governor kick off the interim with interim charges that instruct committees in the House and Senate on what to monitor and examine before the next session. The committees will then engage in discussions, research, and hearings in order to produce an interim report and recommendations to the next legislature.

As TexProtects moves into the interim period, we will be able to capitalize on opportunities to engage with the committees in their efforts as well as work with legislators, agencies, partners, and stakeholders to build awareness on child protection issues, monitor implementation of existing policies and programs, and build momentum around critical issues that will need attention during the 87th Legislative Session.

Stay connected with us online, and join us for our legislative wrap-up and policy roundtable events as we work together to ensure that next session's work begins now.

Resources You May Find Helpful

TexProtects' Zip Risk Project:

a comprehensive child abuse and neglect risk assessment and ranking for all Texas zipcodes

ACEs Uncovered: Powerful Preventative Strategies to Promote Resilience and Brain Health for a Better Texas Tomorrow:

includes state specific data and research on Adverse Childhood Experiences

University of Texas Population Health Indicators

a series of reports and maps that document the health and risk factors for specific populations in Texas

Department of Family and Protective Services Data Book

allows you to search multiple years of child welfare data at the state and county level

Kids Count Data Book

16 areas of child well-being tracked across four domains at the state and national level

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TexProtects
Champions for Safe Children

A Look Back – Past Sessions

Since 2004, TexProtects has been at the forefront in addressing the need for increased investment in primary prevention. Through evidence-based, in-home parenting programs and child protective services reforms we hope to increase the quality of services provided to children and families, increase safety and protective factors, and decrease risk factors for abuse/neglect.

TexProtects Initiatives include:



Prevention

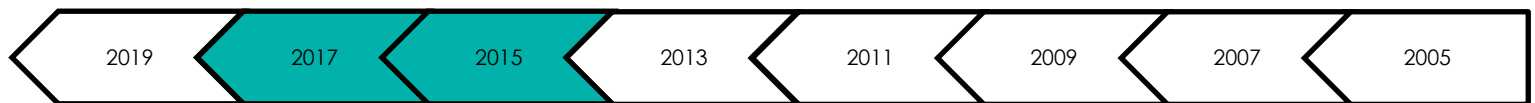


Reforms to Child
Protection Systems



Behavioral Health and
Trauma

See below for legislative accomplishments through the years.



2017

- ★ 11% funding increase for prevention strategies including \$10 million for evidence-based home visiting.
- ★ An omnibus Child Protection Act (HB 1549) to implement the recommendations of the Protect Our Kids Commission, evaluate child fatality data to create prevention strategies, increase access to and evaluate existing prevention programs, improve CPS work force issues, and strengthen foster care through innovative approaches.
- ★ Amended a maternal depression screening bill (HB 2466) to include changes to the Medicaid application so that health plans are better able to offer effective prevention services like NFP.
- ★ 1/2 million more dollars for Child Protective Services (CPS) in a session where other departments received cuts.
- ★ \$12K per year salary increases for CPS caseworkers and funding for hundreds of new hires to lower caseloads and turnovers.
- ★ SB 1758 standardized and improved the curriculum for the Preparation for Adult Living Program which is available to foster youth aging out of care.

2015

- ★ \$36 million for the Healthy Outcomes through Prevention and Early Support Project (HOPES), an increase of \$25 million over the previous biennium.
- ★ Secured funding for Nurse-Family Partnership: Renewal of \$17.8 million in State General Revenue and Temporary Assistance for Needy Families plus an additional \$5.4 million in State General Revenue, increasing total biennium funding to \$23.2 million.
- ★ Renewal of \$8 million in State General Revenue funding for the Texas Home Visiting Program, in addition to \$36 million at the federal level.
- ★ \$3.2 million to provide home visitation services to military families.
- ★ Secured up to \$2.8 million for an abusive head trauma prevention and safe sleep initiative.
- ★ Legislation enabling the creation of "Pay for Success" contracts, an innovative funding mechanism using public-private partnerships to bring promising programs to scale.
- ★ Legislation to improve the collection and reporting of key data regarding child abuse fatalities to inform targeted prevention interventions
- ★ Pay increases for frontline CPS caseworkers living in high-cost, high-turnover areas and funds to increase total staff and reduce caseloads per worker.

2019

2017

2015

2013

2011

2009

2007

2005

2013

- ★ Secured \$7.9 million in new State General Revenue for home visiting programs across Texas.
- ★ Established the Texas Home Visiting Trust Fund. This allows for voluntary donations to be made on copies birth certificates, marriage licenses, and divorce decrees as well as initial marriage license applications.
- ★ Required schools, charter schools, and institutions of higher education to train all staff on recognizing, reporting, and preventing child abuse and neglect. Required that they adopt and implement a reporting policy consistent with state mandatory reporting laws.
- ★ Advocated for the restoration of millions in funding cuts to Child Protective Services.
- ★ Increased access to protective orders for domestic violence victims.
- ★ Strengthened placement stability and permanency for foster youth.
- ★ Increased penalty for statutorily defined "professional reporters," failing to report child abuse, with intent to deceive. Penalties now range from Class A misdemeanor to a state jail felony.
- ★ Increased access to CPS records for court-appointed evaluators.

2011

- ★ Required schools and child-care facilities to provide child abuse and neglect prevention, recognition and reporting training.
- ★ Reversed 50% cut to Nurse-Family Partnership, maintaining services to thousands of families.
- ★ Enhanced provision that provides for the removal of a perpetrator, not a child, from a home.

2009

- ★ Secured \$17.8 million in funding (double the past funding level) for the Nurse-Family Partnership program and expanded the CPS budget by 8.1%, which included over \$4 million in new prevention program funding.
- ★ Continued the Blue Ribbon Task Force, which was charged with developing a statewide child abuse prevention strategy.
- ★ Provided financial support for relatives providing day care services.
- ★ Initiated a mandatory "no contact" policy with victims if perpetrators are released on bond.
- ★ Required courts to consider the impact that a continuance may have on victims of child abuse and the reason for the continuance request to be stated.
- ★ Strengthened services for youth transitioning out of foster care by authorizing seed funding for new transition centers, increasing staff, and improving technology.
- ★ Supported a task force to examine the intersection between child abuse and domestic violence.
- ★ Provided therapy for abused children as well as treatment and other services for their families.
- ★ Expanded Trauma-Informed Care training for professionals to better serve abused children and reduce placement "breakdown."
- ★ Provided training on the overlap between ADHD and PTSD to health professionals in the foster care system.

2007

- ★ Initiated statewide Nurse-Family Partnership program securing \$8.9 million.
- ★ Expanded the Dallas-piloted Nurse-Family Partnership Program.
- ★ Protected Child Abuse Trust Fund dollars for prevention programs exclusively.
- ★ Required increased training for Family Court judges on child abuse, attachment, bonding and appropriate placements for removals.
- ★ Provided Department of Family and Protective access to police records on domestic disturbance calls when performing foster home background checks.
- ★ Increased educational standards for CPS caseworkers.
- ★ Successfully advocated for new provisions in SB 758 - CPS Reform II.

2005

- ★ Advocated for in-home parenting programs, which replicate successful research-based programs, to be intensively piloted in specific areas of the state.
- ★ Increased protection of children by reducing caseloads through hiring more caseworkers, reinstating, and expanding the training academy "Just-in-time Replacement" pilot project.
- ★ Led 22/25 CPS recommendations incorporated in omnibus legislation SB 6 - CPS Reform I.



TexProtects: Our Mission and Work

OUR MISSION: TexProtects protects Texas children from the trauma of abuse and neglect and empowers families to thrive through education, research, and advocacy.



OUR VISION: That all children are safe, nurtured and resilient.

OUR VALUES: In all that we do, TexProtects will 1) be child- and family-driven, 2) prioritize prevention, 3) be innovative and results-oriented, 4) emphasize collaboration and transparency, 5) champion research-based solutions, and drive systemic change.

TexProtects advocates across the child protection continuum for better policies, reforms, and appropriate increases in federal, state, and local funding for three priority areas:



PREVENTION

Increasing investment in proven child abuse prevention programs.



PROTECTION

Strengthening and reforming the CPS system.



HEALING

Ensuring victims receive adequate and accessible treatment

Research

Our data-driven, comprehensive research on the evidence-based prevention programs, the cost-benefit and return on investment of these programs, child protective services system, risk factors for child maltreatment and adverse outcomes for abused children guides our organization's legislative agenda each session through policy recommendations.

Policy & Advocacy

Our research results are applied to our statewide advocacy efforts to help create systemic change through public policy innovations in the CPS system and to secure private and public funds for child abuse prevention programs and services for abused children. We lead three collaborations of experts and advocates in developing a consensus public policy agenda each session.

Education & Outreach

TexProtects educates advocates and policymakers on child abuse and neglect prevention, the consequences of maltreatment and how to advocate to their stakeholders. We keep our advocates informed through webinars, presentations, emails, and advocacy alerts to educate them on emerging research and bring attention to issues or legislation affecting the protection of children.

TexProtects has been the Texas chapter of Prevent Child Abuse America since 2017.



What We Do

Research

ZipRisk Project, a Child Maltreatment Zip Code-Level Risk Assessment

In partnership with Alliance Data, its Epsilon business, and the University of Texas at Dallas, TexProtects developed an online, interactive mapping platform to identify at-risk Texas communities in need of prevention services and the accessibility of community-based prevention services

Child Maltreatment Data Dashboard

This online tool uses child maltreatment data from sources such as the Texas Department of Family and Protective Services Databook and will allow advocates and other users to create a variety of data visualization images and identify child abuse trends. This tool will be available to advocates Fall 2019.

Reports

TexProtects has published many reports including original research projects, legislative position papers, literature reviews, and compilations of available secondary data.

Most recent reports and position papers:

- [The Opportunity to Invest in Dallas County Children: How Project H.O.P.E.S gives Hope for a Better Tomorrow for Dallas Families \(2019\)](#)
- [ACEs Uncovered: Powerful Preventative Strategies to Promote Resilience and Brain Health for a Better Texas Tomorrow \(2019\)](#)
- [Where Do We Go From Here? - Demystifying the Transitional Experiences of Texas Foster Youth \(2018\)](#)
- [Texas Maternal Health and Child Outcomes \(85th Legislative Session Interim\)](#)
- [Home Visiting in Texas \(2017\)](#)

Dallas Office

Sophie Phillips, Chief Executive Officer
1341 W. Mockingbird Ln., Suite 560W
Dallas, Texas 75247
(469) 399-6900

Policy & Advocacy

TexProtects Public Policy Committee

TexProtects' Public Policy Committee is the heart of where the organization launches its ideas and formulates its concepts on the broad-scale systemic change needed to improve the Texas child protection and judicial systems. The committee is comprised of key DFW community partners and stakeholders that meet monthly in the interim legislative session to develop proposals that result in legislative priorities.

Child Protection Roundtable (CPRT)

In 2008, TexProtects founded the Child Protection Roundtable (CPRT), which brings together statewide research experts, advocates, and program providers from 50+ organizations with child protection expertise. Prior to each legislative session, CPRT researches and shares information about the latest challenges within the child welfare system and uses these ideas to build a consensus on public policy and budget priorities.

Statewide Home Visiting Consortium

During the fall of 2012, TexProtects organized the Texas Home Visiting Consortium, consisting of representatives from evidence-informed home visiting programs throughout the state. The Consortium's mission is to bring together Texas programs to increase awareness and coordinate legislative efforts.

Prenatal-to-Three

TexProtects, Children at Risk, and Texans Care for Children have launched this collaborative effort to advocate and create policy that engages early childhood stakeholders and statewide coalitions in a shared effort to determine how to best raise awareness about the importance of children's early years and develop policies that support families and children in the prenatal to three stage.

Sign up for our advocacy alerts to stay updated on key child welfare issues at texprotects.org. Find us on social media on **Facebook**, **Twitter**, and **Instagram**!

Education & Outreach

Child Abuse Prevention Awareness

Through our Prevent Child Abuse Texas Chapter, along with our Home Visiting Campaign and advocacy efforts, TexProtects raises awareness of child abuse in the community and identifies result-proven solutions.

Dallas HOPES (Healthy Outcomes through Prevention and Early Support)

HOPES is a statewide child abuse and prevention program that was established during the 83rd Legislative session. TexProtects' child abuse prevention and family strengthening ecosystem design was chosen as the HOPES Dallas framework and road map. TexProtects helped the United Way of Metropolitan Dallas (UWMD) secure a \$3.4 million HOPES grant to build out the eco-system in three targeted West Dallas zip codes.

Adverse Childhood Experiences

Adverse Childhood Experiences (ACEs) are certain early life experiences such as child abuse & neglect and household dysfunction that can result in trauma that affects the physical, mental, and emotional health of individuals throughout the lifespan. Through legislative action and research, TexProtects is educating policy makers and the public on prevention solutions to combat ACEs.

Family Connects

Family Connects is an evidence-informed universal home visiting model that combines engagement and alignment of community services providers with short-term nurse home visiting for newborns and their families. TexProtects is working in partnership with United Way of Metropolitan Dallas, MHMR of Tarrant County, and the Early Learning Alliance to bring the program to North Texas.

Austin Office

Pamela McPeters, Vice President of Public Affairs
512 E. 11th Street, Suite 201
Austin, Texas 78701
(737) 209-8118

The Child Protection Roundtable

The Child Protection Roundtable is a consortium of more than 50 child welfare member organizations statewide. Members share a child-centered common vision and seek to leverage data, resources, and strategy to collaboratively build a better future for the children of Texas.

MISSION

We aspire to be the leading voice and driving force in child protection public policy and governmental action in Texas that:



Helps prevent child abuse and neglect before it occurs.



Ensures protection and well-being of children and youth who come into state care.



Heals the ongoing trauma and other adverse consequences experienced by children and youth as the result of maltreatment.

PURPOSE

The Roundtable was founded by TexProtects in 2008 as a means to convene the leading voices of child protection across Texas and to empower those diverse voices to speak with unity, shared purpose and maximum impact. The Roundtable serves as a convener for those organizations engaged in child welfare which share a child-centered common vision and seek to leverage data, resources and strategy to achieve more progress collectively than could be achieved individually.

COMMITTEES

By working to assure that our child protection system addresses all three mission priorities, we have the best hope of disrupting the intergenerational cycle of abuse and neglect through reducing and ideally eliminating the number of children and youth failed by the system, and increasing the chances that every Texas child has the same opportunity for lifelong success as those so fortunate as to have their upbringing be the top priority of their families. All three committees work on policies, programs, and practices to better the future of Texas children and convene on a regular basis.

Child Abuse Prevention and Early Intervention: Promotes the prevention of child abuse and neglect before it occurs, and early intervention in family circumstances that present elevated risk of abuse and neglect to children and youth.

Child Protection System Improvements: Addresses the protection and well-being of children and youth in substitute care, including those of the Texas Department of Family and Protective Services as well as those of other service providers and stakeholders in the system.

Child Health and Wellbeing Committee: Advocates for providing children and youth who have been maltreated or are at risk of maltreatment with integrated mental and physical health care services, education services, and substance use disorder services for their families.

Steering Committee

Texans Care for Children

Stephanie Rubin & Kate Murphy

Texas CASA

Andy Homer & Sarah Crockett

TexProtects | Prevent Child Abuse Texas

Sophie Phillips & Pamela McPeters

Upbring

Knox Kimberly

National Association of Social Workers – Texas Chapter

Will Francis



Each organization brings important knowledge, expertise, and passion to the field of child protection. We meet once a month as a full roundtable and as needed in our committees.

We are looking to expand our reach across Texas and are accepting new memberships throughout the year. Please email beth@texprotects.org if you are interested in becoming a member.

OUR MEMBER ORGANIZATIONS

Addy's Hope Adoption Agency
Arrow Child & Family Ministries
Casey Family Programs
Center for Public Policy Priorities
Center for School Behavioral Health at Mental Health America of Greater Houston
Child and Family Research Partnership, The University of Texas at Austin
Children at Risk
Children's Alliance of South Texas
Children's Defense Fund – Texas
Children's Health System of Texas
Children's Hospital Association of Texas
Cook Children's Medical Center
Dell Children's Medical Center
Dell Children's Trauma and Injury Research Center
Embrace Texas
Every Child, Inc.
Family Compass
Harris County Protective Services for Children and Adults
Mental Health America of Greater Dallas
National Alliance on Mental Illness (NAMI) Texas
National Association of Social Workers – Texas Chapter
Rees-Jones Center for Foster Care Excellence
Reissa Foundation
Resetting the Family
Texans Care for Children
Texas Alliance of Child & Family Services (TACFS)
Texas Appleseed
Texas CASA

Texas Children's Justice Act Program – Texas Center for the Judiciary
Texas Council of Child Welfare Boards
Texas Council on Family Violence
Texas Homeless Education Office
Texas Institute for Child & Family Wellbeing, University of Texas at Austin School of Social Work
Texas Lawyers for Children
Texas Network of Youth Services (TNOYS)
Texas Pediatric Society
Texas State Employees Union
TexProtects | Prevent Child Abuse Texas
The Deckinga Group, LLC
The SAFE Alliance
Travis County Civil Courts – Model Court for Children and Families
United Way of Metropolitan Dallas
United Ways of Texas
University of Texas Arlington School of Social Work
Upbring
Voices for Children of San Antonio
W.W. Caruth, Jr. Child Advocacy Clinic at SMU Dedman
Watermark Community Church



Texas Prenatal to Three (PN-3) Infant Toddler Collaborative

This project is led by Children at Risk, TexProtects, and Texans Care for Children with support by the Pritzker Children's Initiative and the Alliance for Early Success. Competitive planning grants were awarded to establish policy priorities and a unified vision focusing on cross-sector work that will prioritize infants, toddlers, and their families from the prenatal stage to age 3. This planning work will support the application for an additional grant from the Pritzker Children's Initiative, which would facilitate implementation and advocacy through 2023.

TexProtects, Texans Care for Children, and Children at Risk brought together a cross-sector group of stakeholders who touch or impact children and their families during the prenatal to age three stage as the Texas Prenatal to Three (PN-3) Collaborative. The PN-3 Collaborative currently includes 90+ individuals representing 70 organization, including:

- Early childhood education & care
- Home visiting
- Early Childhood Intervention
- Infant mental health
- Professional associations
- Business community
- Faith-based community
- Pediatrics
- Maternal health
- Health plans
- Hospital systems
- Respite providers
- Community colleges
- Research partners
- Funders and philanthropists
- Community-based nonprofits
- Local early childhood or home visiting coalitions
- Texas state agency partners

Over the next few months, the PN-3 Collaborative will work together to determine a policy agenda and action plan for Texas to achieve its vision for the prenatal to three population from the following areas:

- Health & Coverage
- Screenings, Referrals, & Home-Based Services
- Early Childhood Education & Care
- Family & Income Supports

For Questions or Interest in Becoming Involved, Please Contact: Andrea M. Payne

Andrea@texprotects.org
Office (469) 399-6900
Cell (214) 534-4064

The Steering Committee for the collaborative includes:

Sophie Phillips
TexProtects

Mandi Sheridan Kimball
Children at Risk

Stephanie Rubin
Texans Care for Children



Texas Home Visiting Consortium

Collaborative Members serve to provide information on community-based efforts that impact home visiting. They help inform the Consortium about activities and efforts around the state.

Any Baby Can

ChildCare Group, Inc.

Coalition of Health Services

Council for a Strong America

DePelchin Children's Center

Easter Seals Rio Grande Valley

Healthy Families of San Angelo

Momentous Institute

United Way of Greater Austin

San Antonio Children's Shelter

United Way of Coastal Bend

United Way of Metropolitan Dallas

**Texas Home Visiting Program
Dallas Early Education Alliance**

First3Years

For more information, please contact
Jennifer Lucy at
jennifer@texprotects.org



MISSION

To bring together Texas home visitation programs to increase the awareness of home visitation in Texas and to coordinate legislative efforts.



HISTORY

During the fall of 2012, TexProtects organized the Texas Home Visiting Consortium, consisting of representatives from the evidence-based and promising home visiting programs throughout the state of Texas.



ACCOMPLISHMENTS

Since 2012 the Consortium has participated in advocacy efforts resulting in over \$140 million in federal and state funds for home visiting programs in Texas. In 2018, there were over 16,000 Texas families benefiting from these investments.



VOTING MEMBERS

Membership is by invitation only and includes state home visitation programs that are evidence based and those that qualify as promising practices.





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