

AN ACT

relating to the provision of services by the Department of Family and Protective Services, including child protective services and prevention and early intervention services.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Section 261.204(a), Family Code, is amended to read as follows:

(a) Not later than March 1 of each year, the ~~[The]~~ department shall publish an ~~[annual]~~ aggregated report using information compiled from each child fatality investigation for which the department made a finding regarding abuse or neglect, including cases in which the department determined the fatality was not the result of abuse or neglect. The report must protect the identity of individuals involved and contain the following information:

(1) the age and sex of the child and the county in which the fatality occurred;

(2) whether the state was the managing conservator of the child or whether the child resided with the child's parent, managing conservator, guardian, or other person entitled to the possession of the child at the time of the fatality;

(3) the relationship to the child of the individual alleged to have abused or neglected the child, if any;

(4) the number of any department abuse or neglect

1 investigations involving the child or the individual alleged to
2 have abused or neglected the child during the two years preceding
3 the date of the fatality and the results of the investigations;

4 (5) whether the department offered family-based
5 safety services or conservatorship services to the child or family;

6 (6) the types of abuse and neglect alleged in the
7 reported investigations, if any; and

8 (7) any trends identified in the investigations
9 contained in the report.

10 SECTION 2. Section 261.301, Family Code, is amended by
11 adding Subsection (j) to read as follows:

12 (j) In geographic areas with demonstrated need, the
13 department shall designate employees to serve specifically as
14 investigators and responders for after-hours reports of child abuse
15 or neglect.

16 SECTION 3. Section 264.1075, Family Code, is amended by
17 amending Subsection (b) and adding Subsection (c) to read as
18 follows:

19 (b) As soon as possible after a child is placed in the
20 managing conservatorship of the department [~~begins receiving~~
21 ~~foster care under this subchapter~~], the department shall assess
22 whether the child has a developmental or intellectual disability.

23 (c) If the assessment required by Subsection (b) indicates
24 that the child might have an intellectual disability, the
25 department shall ensure that a referral for a determination of
26 intellectual disability is made as soon as possible and that the
27 determination is conducted by an authorized provider before the

1 date of the child's 16th birthday, if practicable. If the child is
2 placed in the managing conservatorship of the department after the
3 child's 16th birthday, the determination of intellectual
4 disability must be conducted as soon as possible after the
5 assessment required by Subsection (b). In this subsection,
6 "authorized provider" has the meaning assigned by Section 593.004,
7 Health and Safety Code.

8 SECTION 4. Subchapter B, Chapter 264, Family Code, is
9 amended by adding Section 264.1261 to read as follows:

10 Sec. 264.1261. FOSTER CARE CAPACITY NEEDS PLAN. (a) In
11 this section, "community-based foster care" means the redesigned
12 foster care services system required by Chapter 598 (S.B. 218),
13 Acts of the 82nd Legislature, Regular Session, 2011.

14 (b) Appropriate department management personnel from a
15 child protective services region in which community-based foster
16 care has not been implemented, in collaboration with foster care
17 providers, faith-based entities, and child advocates in that
18 region, shall use data collected by the department on foster care
19 capacity needs and availability of each type of foster care and
20 kinship placement in the region to create a plan to address the
21 substitute care capacity needs in the region. The plan must
22 identify both short-term and long-term goals and strategies for
23 addressing those capacity needs.

24 (c) A foster care capacity needs plan developed under
25 Subsection (b) must be:

26 (1) submitted to and approved by the commissioner; and

27 (2) updated annually.

1 (d) The department shall publish each initial foster care
2 capacity needs plan and each annual update to a plan on the
3 department's Internet website.

4 SECTION 5. Sections 264.502(a) and (b), Family Code, are
5 amended to read as follows:

6 (a) The child fatality review team committee is composed of:

7 (1) a person appointed by and representing the state
8 registrar of vital statistics;

9 (2) a person appointed by and representing the
10 commissioner of the department;

11 (3) a person appointed by and representing the Title V
12 director of the Department of State Health Services; ~~and~~

13 (4) a person appointed by and representing the speaker
14 of the house of representatives;

15 (5) a person appointed by and representing the
16 lieutenant governor;

17 (6) a person appointed by and representing the
18 governor; and

19 (7) individuals selected under Subsection (b).

20 (b) The members of the committee who serve under Subsections
21 (a)(1) through (6) ~~(3)~~ shall select the following additional
22 committee members:

23 (1) a criminal prosecutor involved in prosecuting
24 crimes against children;

25 (2) a sheriff;

26 (3) a justice of the peace;

27 (4) a medical examiner;

- 1 (5) a police chief;
- 2 (6) a pediatrician experienced in diagnosing and
3 treating child abuse and neglect;
- 4 (7) a child educator;
- 5 (8) a child mental health provider;
- 6 (9) a public health professional;
- 7 (10) a child protective services specialist;
- 8 (11) a sudden infant death syndrome family service
9 provider;
- 10 (12) a neonatologist;
- 11 (13) a child advocate;
- 12 (14) a chief juvenile probation officer;
- 13 (15) a child abuse prevention specialist;
- 14 (16) a representative of the Department of Public
15 Safety;
- 16 (17) a representative of the Texas Department of
17 Transportation;
- 18 (18) an emergency medical services provider; and
- 19 (19) a provider of services to, or an advocate for,
20 victims of family violence.

21 SECTION 6. Section [264.503](#), Family Code, is amended by
22 amending Subsections (d) and (e) and adding Subsection (h) to read
23 as follows:

- 24 (d) The Department of State Health Services shall:
 - 25 (1) recognize the creation and participation of review
26 teams;
 - 27 (2) promote and coordinate training to assist the

1 review teams in carrying out their duties;

2 (3) assist the committee in developing model protocols
3 for:

4 (A) the reporting and investigating of child
5 fatalities for law enforcement agencies, child protective
6 services, justices of the peace and medical examiners, and other
7 professionals involved in the investigations of child deaths;

8 (B) the collection of data regarding child
9 deaths; and

10 (C) the operation of the review teams;

11 (4) develop and implement procedures necessary for the
12 operation of the committee; ~~and~~

13 (5) develop and make available training for justices
14 of the peace and medical examiners regarding inquests in child
15 death cases; and

16 (6) promote education of the public regarding the
17 incidence and causes of child deaths, the public role in preventing
18 child deaths, and specific steps the public can undertake to
19 prevent child deaths.

20 (e) In addition to the duties under Subsection (d), the
21 Department of State Health Services shall:

22 (1) collect data under this subchapter and coordinate
23 the collection of data under this subchapter with other data
24 collection activities; ~~and~~

25 (2) perform annual statistical studies of the
26 incidence and causes of child fatalities using the data collected
27 under this subchapter; and

1 (3) evaluate the available child fatality data and use
2 the data to create public health strategies for the prevention of
3 child fatalities.

4 (h) Each member of the committee must be a member of the
5 child fatality review team in the county where the committee member
6 resides unless the committee member is an appointed representative
7 of a state agency.

8 SECTION 7. Subchapter F, Chapter 264, Family Code, is
9 amended by adding Sections 264.5031 and 264.5032 to read as
10 follows:

11 Sec. 264.5031. COLLECTION OF NEAR FATALITY DATA. (a) In
12 this section, "near fatality" means a case where a physician has
13 certified that a child is in critical or serious condition, and a
14 caseworker determines that the child's condition was caused by the
15 abuse or neglect of the child.

16 (b) The department shall include near fatality child abuse
17 or neglect cases in the child fatality case database, for cases in
18 which child abuse or neglect is determined to have been the cause of
19 the near fatality. The department must also develop a data
20 collection strategy for near fatality child abuse or neglect cases.

21 Sec. 264.5032. REPORT ON CHILD FATALITY AND NEAR FATALITY
22 DATA. (a) The department shall produce an aggregated report
23 relating to child fatality and near fatality cases resulting from
24 child abuse or neglect containing the following information:

25 (1) any prior contact the department had with the
26 child's family and the manner in which the case was disposed,
27 including cases in which the department made the following

1 dispositions:

2 (A) priority none or administrative closure;

3 (B) call screened out;

4 (C) alternative or differential response
5 provided;

6 (D) unable to complete the investigation;

7 (E) unable to determine whether abuse or neglect
8 occurred;

9 (F) reason to believe abuse or neglect occurred;

10 or

11 (G) child removed and placed into substitute
12 care;

13 (2) for any case investigated by the department
14 involving the child or the child's family:

15 (A) the number of caseworkers assigned to the
16 case before the fatality or near fatality occurred; and

17 (B) the caseworker's caseload at the time the
18 case was opened and at the time the case was closed;

19 (3) for any case in which the department investigation
20 concluded that there was reason to believe that abuse or neglect
21 occurred, and the family was referred to family-based safety
22 services:

23 (A) the safety plan provided to the family;

24 (B) the services offered to the family; and

25 (C) the level of compliance with the safety plan
26 or completion of the services by the family;

27 (4) the number of contacts the department made with

1 children and families in family-based safety services cases; and

2 (5) the initial and attempted contacts the department
3 made with child abuse and neglect victims.

4 (b) In preparing the part of the report required by
5 Subsection (a)(1), the department shall include information
6 contained in department records retained in accordance with the
7 department's records retention schedule.

8 (c) The report produced under this section must protect the
9 identity of individuals involved in a case that is included in the
10 report.

11 (d) The department may combine the report required under
12 this section with the annual child fatality report required to be
13 produced under Section 261.204.

14 SECTION 8. Sections 264.505(a) and (c), Family Code, are
15 amended to read as follows:

16 (a) A multidisciplinary and multiagency child fatality
17 review team may be established for a county to review child deaths
18 in that county. A [~~review team for a~~] county [~~with a population of~~
19 ~~less than 50,000~~] may join with an adjacent county or counties to
20 establish a combined review team.

21 (c) A review team must reflect the diversity of the county's
22 population and may include:

23 (1) a criminal prosecutor involved in prosecuting
24 crimes against children;

25 (2) a sheriff;

26 (3) a justice of the peace or medical examiner;

27 (4) a police chief;

1 (5) a pediatrician experienced in diagnosing and
2 treating child abuse and neglect;

3 (6) a child educator;

4 (7) a child mental health provider;

5 (8) a public health professional;

6 (9) a child protective services specialist;

7 (10) a sudden infant death syndrome family service
8 provider;

9 (11) a neonatologist;

10 (12) a child advocate;

11 (13) a chief juvenile probation officer; and

12 (14) a child abuse prevention specialist.

13 SECTION 9. Section 264.506(b), Family Code, is amended to
14 read as follows:

15 (b) To achieve its purpose, a review team shall:

16 (1) adapt and implement, according to local needs and
17 resources, the model protocols developed by the department and the
18 committee;

19 (2) meet on a regular basis to review child fatality
20 cases and recommend methods to improve coordination of services and
21 investigations between agencies that are represented on the team;

22 (3) collect and maintain data as required by the
23 committee; ~~and~~

24 (4) review and analyze the collected data to identify
25 any demographic trends in child fatality cases, including whether
26 there is a disproportionate number of child fatalities in a
27 particular population group or geographic area; and

1 (5) submit to the vital statistics unit data reports
2 on deaths reviewed as specified by the committee.

3 SECTION 10. Section [264.509](#), Family Code, is amended by
4 adding Subsection (b-1) to read as follows:

5 (b-1) The Department of State Health Services shall provide
6 a review team with electronic access to the preliminary death
7 certificate for a deceased child.

8 SECTION 11. (a) Section [264.514](#), Family Code, is amended by
9 adding Subsection (a-1) and amending Subsection (b) to read as
10 follows:

11 (a-1) The commissioners court of a county shall adopt
12 regulations relating to the timeliness for conducting an inquest
13 into the death of a child. The regulations adopted under this
14 subsection must be as stringent as the standards issued by the
15 National Association of Medical Examiners unless the commissioners
16 court determines that it would be cost prohibitive for the county to
17 comply with those standards.

18 (b) The medical examiner or justice of the peace shall
19 immediately notify an appropriate local law enforcement agency if
20 the medical examiner or justice of the peace determines that the
21 death is unexpected or the result of abuse or neglect, and that
22 agency shall investigate the child's death. The medical examiner or
23 justice of the peace shall notify the appropriate county child
24 fatality review team of the child's death not later than the 120th
25 day after the date the death is reported.

26 (b) A county must attempt to implement the timeliness
27 standards for inquests as described by Section [264.514\(a-1\)](#), Family

1 Code, as added by this Act, as soon as possible after the effective
2 date of this Act.

3 SECTION 12. Section 264.903, Family Code, is amended by
4 adding Subsection (a-1) to read as follows:

5 (a-1) The department shall expedite the evaluation of a
6 potential caregiver under this section to ensure that the child is
7 placed with a caregiver who has the ability to protect the child
8 from the alleged perpetrator of abuse or neglect against the child.

9 SECTION 13. Section 265.005(b), Family Code, is amended to
10 read as follows:

11 (b) A strategic plan required under this section must:

12 (1) identify methods to leverage other sources of
13 funding or provide support for existing community-based prevention
14 efforts;

15 (2) include a needs assessment that identifies
16 programs to best target the needs of the highest risk populations
17 and geographic areas;

18 (3) identify the goals and priorities for the
19 department's overall prevention efforts;

20 (4) report the results of previous prevention efforts
21 using available information in the plan;

22 (5) identify additional methods of measuring program
23 effectiveness and results or outcomes;

24 (6) identify methods to collaborate with other state
25 agencies on prevention efforts; ~~and~~

26 (7) identify specific strategies to implement the plan
27 and to develop measures for reporting on the overall progress

1 toward the plan's goals; and

2 (8) identify strategies and goals for increasing the
3 number of families receiving prevention and early intervention
4 services each year, subject to the availability of funds, to reach
5 targets set by the department for providing services to families
6 that are eligible to receive services through parental education,
7 family support, and community-based programs financed with
8 federal, state, local, or private resources.

9 SECTION 14. Subchapter A, Chapter 265, Family Code, is
10 amended by adding Sections 265.007 and 265.008 to read as follows:

11 Sec. 265.007. IMPROVING PROVISION OF PREVENTION AND EARLY
12 INTERVENTION SERVICES. (a) To improve the effectiveness and
13 delivery of prevention and early intervention services, the
14 department shall:

15 (1) identify geographic areas that have a high need
16 for prevention and early intervention services but do not have
17 prevention and early intervention services available in the area or
18 have only unevaluated prevention and early intervention services
19 available in the area; and

20 (2) develop strategies for community partners to:

21 (A) improve the early recognition of child abuse
22 or neglect;

23 (B) improve the reporting of child abuse and
24 neglect; and

25 (C) reduce child fatalities.

26 (b) The department may not use data gathered under this
27 section to identify a specific family or individual.

1 Sec. 265.008. EVALUATION OF PREVENTION AND EARLY
2 INTERVENTION SERVICES. (a) The department may enter into
3 agreements with institutions of higher education to conduct
4 efficacy reviews of any prevention and early intervention services
5 provided under this chapter that have not previously been evaluated
6 for effectiveness in a research evaluation. The efficacy review
7 shall include, when possible, a cost-benefit analysis of the
8 program to the state and, when applicable, the return on investment
9 of the program to the state.

10 (b) The department may not enter into an agreement to
11 conduct a program efficacy evaluation under this section unless:

12 (1) the agreement with the institution of higher
13 education is cost neutral; and

14 (2) the department and institution of higher education
15 conducting the evaluation under this section protect the identity
16 of individuals who are receiving services from the department that
17 are being evaluated.

18 SECTION 15. Subchapter B, Chapter 40, Human Resources Code,
19 is amended by adding Section 40.038 to read as follows:

20 Sec. 40.038. SECONDARY TRAUMA SUPPORT FOR CASEWORKERS. (a)
21 In this section, "secondary trauma" means trauma incurred as a
22 consequence of a person's exposure to acute or chronic trauma.

23 (b) The department shall develop and make available a
24 program to provide ongoing support to caseworkers who experience
25 secondary trauma resulting from exposure to trauma in the course of
26 the caseworker's employment. The program must include critical
27 incident stress debriefing. The department may not require that a

1 caseworker participate in the program.

2 SECTION 16. Subchapter C, Chapter 40, Human Resources Code,
3 is amended by adding Section 40.0516 to read as follows:

4 Sec. 40.0516. COLLECTION OF DATA; ANNUAL REPORT. (a) The
5 department shall collect and compile the following data on the
6 state and county level:

7 (1) the following information for reports of abuse and
8 neglect in residential child-care facilities, as defined by Section
9 42.002:

10 (A) the number of reports of abuse and neglect
11 made to the department hotline;

12 (B) the types of abuse and neglect reported;

13 (C) the investigation priority level assigned to
14 each report;

15 (D) the investigation response times, sorted by
16 investigation priority;

17 (E) the disposition of each investigation;

18 (F) the number of reports of abuse and neglect to
19 which the department assigned a disposition of call screened out or
20 alternative or differential response provided; and

21 (G) the overall safety and risk finding for each
22 investigation;

23 (2) the number of families referred to family
24 preservation services, organized by the risk level assigned to each
25 family through structured decision-making;

26 (3) the number of children removed from the child's
27 home as the result of an investigation of a report of abuse or

1 neglect and the primary circumstances that contributed to the
2 removal;

3 (4) the number of children placed in substitute care,
4 organized by type of placement;

5 (5) the number of children placed out of the child's
6 home county or region;

7 (6) the number of children in the conservatorship of
8 the department at each service level;

9 (7) the number of children in the conservatorship of
10 the department who are pregnant or who are a parent;

11 (8) the number of children in the managing
12 conservatorship of the department who are the parent of a child who
13 is also in the managing conservatorship of the department;

14 (9) the recurrence of child abuse or neglect in a
15 household in which the department investigated a report of abuse or
16 neglect within six months and one year of the date the case was
17 closed separated by the following type of case:

18 (A) cases that were administratively closed
19 without further action;

20 (B) cases in which the child was removed and
21 placed in the managing conservatorship of the department; and

22 (C) cases in which the department provided family
23 preservation services;

24 (10) the recurrence of child abuse and neglect in a
25 household within five years of the date the case was closed for
26 cases described by Subdivisions (9)(B) and (C); and

27 (11) workforce turnover data for child protective

1 services employees, including the average tenure of caseworkers and
2 supervisors and the average salary of caseworkers and supervisors.

3 (b) Not later than February 1 of each year, the department
4 shall publish a report containing data collected under this
5 section. The report must include the statewide data and the data
6 reported by county.

7 SECTION 17. Subchapter C, Chapter 40, Human Resources Code,
8 is amended by adding Section 40.0529 to read as follows:

9 Sec. 40.0529. CASELOAD MANAGEMENT. (a) Subject to a
10 specific appropriation for that purpose, the department shall
11 develop and implement a caseload management system for child
12 protective services caseworkers and managers that:

13 (1) ensures equity in the distribution of workload,
14 based on the complexity of each case;

15 (2) calculates caseloads based on the number of
16 individual caseworkers who are available to handle cases;

17 (3) includes geographic case assignment in areas with
18 concentrated high risk populations, to ensure that an adequate
19 number of caseworkers and managers with expertise and specialized
20 training are available;

21 (4) includes a plan to deploy master investigators in
22 anticipation of emergency shortages of personnel; and

23 (5) anticipates vacancies in caseworker positions in
24 areas of the state with high caseworker turnover to ensure the
25 timely hiring of new caseworkers in those areas.

26 (b) In calculating the caseworker caseload under Subsection
27 (a)(2), the department shall consider at least the following:

- 1 (1) caseworkers who are on extended leave;
- 2 (2) caseworkers who worked hours beyond a normal work
3 week; and
- 4 (3) caseworkers who are on a reduced workload.

5 SECTION 18. Subchapter C, Chapter 40, Human Resources Code,
6 is amended by adding Section 40.078 to read as follows:

7 Sec. 40.078. PREVENTION TASK FORCE. (a) In this section,
8 "task force" means the Prevention Task Force.

9 (b) The commissioner shall establish the Prevention Task
10 Force to make recommendations to the department for changes to law,
11 policy, and practices regarding:

- 12 (1) the prevention of child abuse and neglect;
- 13 (2) the implementation of the changes in law made by
14 H.B. 1549, Acts of the 85th Legislature, Regular Session, 2017; and
- 15 (3) the implementation of the department's five-year
16 strategic plan for prevention and early intervention services
17 developed under Section 265.005, Family Code.

18 (c) The commissioner shall determine the number of members
19 on the task force and shall appoint members to the task force
20 accordingly. Members of the task force may include:

- 21 (1) a chair of a child fatality review team committee;
- 22 (2) a pediatrician;
- 23 (3) a judge;
- 24 (4) representatives of relevant state agencies;
- 25 (5) prosecutors who specialize in child abuse and
26 neglect;
- 27 (6) medical examiners;

1 (7) representatives of service providers to the
2 department; and

3 (8) policy experts in child abuse and neglect
4 prevention, community advocacy, or related fields.

5 (d) The commissioner shall select the chair of the task
6 force.

7 (e) The task force shall meet at times and locations as
8 determined by the chair of the task force.

9 (f) A vacancy on the task force shall be filled in the same
10 manner as the original appointment.

11 (g) A member of the task force is not entitled to
12 compensation or reimbursement of expenses incurred in performing
13 duties related to the task force.

14 (h) The department shall provide reasonably necessary
15 administrative and technical support to the task force.

16 (i) The department may accept on behalf of the task force a
17 gift, grant, or donation from any source to carry out the purposes
18 of the task force.

19 (j) Chapter 2110, Government Code, does not apply to the
20 task force.

21 (k) Not later than August 31, 2018, the task force shall
22 submit a report to the commissioner. The report must include:

23 (1) a description of the activities of the task force;
24 and

25 (2) the findings and recommendations of the task
26 force.

27 (l) The task force is abolished and this section expires

1 August 31, 2019.

2 SECTION 19. As soon as practicable after the effective date
3 of this Act, the commissioner of the Department of Family and
4 Protective Services shall appoint members to the Prevention Task
5 Force created by this Act under Section 40.078, Human Resources
6 Code, as added by this Act.

7 SECTION 20. This Act takes effect September 1, 2017.

President of the Senate

Speaker of the House

I certify that H.B. No. 1549 was passed by the House on May 6, 2017, by the following vote: Yeas 142, Nays 1, 2 present, not voting; that the House refused to concur in Senate amendments to H.B. No. 1549 on May 25, 2017, and requested the appointment of a conference committee to consider the differences between the two houses; and that the House adopted the conference committee report on H.B. No. 1549 on May 28, 2017, by the following vote: Yeas 141, Nays 1, 2 present, not voting.

Chief Clerk of the House

H.B. No. 1549

I certify that H.B. No. 1549 was passed by the Senate, with amendments, on May 23, 2017, by the following vote: Yeas 31, Nays 0; at the request of the House, the Senate appointed a conference committee to consider the differences between the two houses; and that the Senate adopted the conference committee report on H.B. No. 1549 on May 28, 2017, by the following vote: Yeas 31, Nays 0.

Secretary of the Senate

APPROVED: _____

Date

Governor