Foster Care Advocacy Center: a new approach to representation in Harris County

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A nonprofit
multidisciplinary
office that provides
holistic
representation for
children and parents
involved in the child
welfare system in the
greater Houston area.

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Executive Summary

Adversarial relationships often develop between families and child protection services employees because of the way in which the former come into contact with the foster care system. Parents and children, especially youth who have been in the system for a long time, can tend to feel isolated and ignored. Furthermore, the complicated nature of the child welfare system and the multitude of problems it is responsible for are overwhelming and technically difficult to navigate, particularly for individuals who have developmental, intellectual, physical, or emotional disabilities. Add in high caseloads and limited resources, and the probability of positive permanency outcomes, including reunification, decreases. This is concerning because of the detrimental human and economic cost growing up in foster care can have on children.¹ While it may never be possible to make the system and the problems with which it deals less complex, it is possible for the interests of the most vulnerable to be protected.² Research has indicated this occurs in large part not only through quality legal representation, but through multidisciplinary teams that allow for holistic representation of children and parents involved in the child welfare system. According to the American Bar Association, multidisciplinary child welfare representation "isn't just the right thing to do. It's also the smart thing to do."³

Foster Care Advocacy Center (FCAC) started with only \$60,000, 30 clients, and one attorney, and the intention of improving the foster care system by focusing on five activities. These key areas include providing quality legal services, reducing the time children spend in foster care, helping individuals access services to stabilize families, preventing unnecessary removals of children, and advocating for systemic change. As of January 2022, they are a staff of eight, have approximately 100 closed cases, and are currently working on almost 200 more. Early indications are that the organization is actively utilizing the elements of evidence-based practice associated with an interdisciplinary model of representation, and their work has made a positive impression on child welfare stakeholders, the courts, and their child and parent clients. Available data also has positive signs that outputs are trending in the right direction. Areas for improvement include FCAC resources matching their growth so the Executive Director has the ability to fully engage in public relations and community outreach and ongoing collection of detailed data. The organization's completion of their data tracking system (LegalServer) was more arduous than expected which hindered the completion of an outcome evaluation for this report. That being said, this is not unusual for such a young organization and going forward, LegalServer is equipped to collect activities separate from billing entries that will be useful in running reports and conducting data analysis.

¹ Kay, J. 2019. Advocating for Children with Disabilities in Child Protection Cases. *Touro L. Rev. 35, no 1: 345-366.*; Casey Family Programs. August 2018. *What impacts placement stability?* Available at: https://www.casey.org/placement-stability-impacts/.

² Zinn, A. and Slowriver, J. 2008. "Expediting Permanency: Legal Representation for Foster Children in Palm Beach County." Chapin Hall Center for Children at the University of Chicago; Courtney, M. and Hook, J. 2012. Evaluation of the impact of enhanced parental legal representation on the timing of permanency outcomes for children in foster care. *Children and Youth Services Review.* 34: 1337-1343. Brandon-Friedman, RA. And Fortenberry, JD. 2019. The Impact of Adverse Childhood Experiences on Sexual Well-being among Youth Formerly in the Foster Care System. *Child Welfare.* 97(6): 165-186.

³ American Bar Association. 2017. ABA National Project to Improve Representation for Parents: Investment that Makes Sense. Available at https://www.americanbar.org/content/dam/aba/administrative/child law/ParentRep/At-a-glance%20final.authcheckdam.pdf.

FCAC was created to meet an ongoing need across the child welfare spectrum; and over their short operating period they have built a strong team of experts and a model that is new to Texas.⁴ While continuing the good work that is evident in the process and preliminary outcome evaluation in this report, for FCAC's work to expand in the future the organization must improve its capacity to capture information on their work that can be adequately measured and must engage other child welfare stakeholders more closely. All indications are they will be able to do this as they've laid a good foundation over the last several years.

Key Findings and Conclusions

FCAC is serving its intended target population.

The organization indicates that "one of [its] primary functions...is to accept court appointments for complex cases that require traditional legal advocacy during the state child welfare proceedings and additional time and attention to ancillary issues that affect the wellbeing of the child and the outcome of the case." It is clear through the perceptions of stakeholders as well as the data about their clients that FCAC is meeting this goal.

Input of data into LegalServer needs to be a top priority.

The greatest limitation of this study was the inability to fully evaluate the impact of FCAC's work. That was due to the lack of data comprehensively recorded in one location throughout most of the time period allotted for this evaluation. As of the completion of this report, FCAC has a full-time data entry clerk that is working to ensure all their data is located in LegalServer. This is critical to future evaluations that can more definitively illustrate FCAC's work is producing intended results. The cost, careful consideration, and arduous amount of hours needed to build and enter data into a system of this nature are important lessons for those who want to develop an organization like FCAC.

❖ The limited available data indicates FCAC's work is trending in the right direction.

FCAC staff have the tenure and subject matter expertise to appropriately handle the nature of the cases appointed to them and provide both legal and social services support through the Social Services Director, Parent Partner, and social work interns. Despite the limited data, survey results and client output data (sibling placement, placement type) indicate FCAC is adhering to criteria of good practice. Both child and parent clients overall reported feeling heard, having their wishes respected, understanding their rights, and receiving support necessary to get the help they needed. Although the client sample populations were not large enough to generalize results to the whole population preliminary results are positive.

❖ FCAC needs to increase its capacity to collect and enter data and expand stakeholders' knowledge of and relationship with the organization.

The literature recommends anywhere from 50-100 cases depending on attorney capacity, types of cases, and in the case of children, whether there are multiple children per case. The Family Justice Initiative recommends no more than 60 to ensure quality representation.⁵ Currently FCAC staff attorneys are averaging 50 cases apiece with the supervising attorney and ED at 40. While not over the limit, context is important. As part of an interdisciplinary best practice model, they must have the time necessary to integrate all the information they receive to meet their clients' legal and social service needs which are considerable given they navigate incredibly difficult systems for some of the most vulnerable populations of children in foster care. As knowledge of their work grows, demand for their services will probably grow so additional staff will be needed in the near future.

⁴ The Travis County Office of Child Representation and Office of Parent Representation exist as a multidisciplinary office as they have one caseworker each. However, they are not a non-profit and the model is different than FCAC.

⁵ https://familyjusticeinitiative.org/wp-content/uploads/sites/48/2019/01/FJI-Attributes-Fact-Sheet.pdf.

Additional staff will also allow the ED to offload some of her cases so she can conduct more outreach. Indications from the surveys point to a need for greater awareness about how FCAC's interdisciplinary model extends beyond quality legal representation. Outreach can also help to expand funding streams which will assist in the increase in appointments and referrals that will undoubtedly come with increased awareness about the organization. One additional improvement that may assist in this endeavor is building reporting and communication protocols that relay the work of the Social Services Team to other stakeholders on the case (within the bounds of confidentiality).

FCAC should limit its expansion into Community Legal Advocacy cases particularly those with kinship caregivers until it has additional staff.

One of the primary areas of FCAC's Community Legal Advocacy work is with kinship caregivers who need legal and other supports to sustain the placement of a relative child in their home. There is a significant need for this service in Harris County and across the state of Texas. However, there is only one legal staff attorney assigned to these cases and she currently carries a post-petition caseload. FCAC needs to cautiously approach making the public more knowledgeable about this service until the organization is fully prepared to address the workload.

Literature Review

Foster Care

The Annie E. Casey Foundation reports that in 2018, there were slightly under 630,000 cases of child abuse in the United States and, of those victims who received some sort of follow up services, 37% were taken into foster care. In 2018, there were almost 425,000 children in foster care systems across the country. The overwhelming majority of adult perpetrators of this maltreatment were under 44 years of age and the victim's parent(s). In Texas, 44% of perpetrators were between the ages of 25 and 34. Over half of child maltreatment perpetrators in the United States were female, and 50% were Caucasian, with Texas seeing a slightly higher percentage of perpetrators who are Hispanic. Harris County confirmed over 33,214 perpetrators in 2018, tracking national numbers in terms of age and gender, but seeing a higher number of African American perpetrators followed by Hispanic and Caucasian.⁶

The factors underpinning maltreatment are complex and interrelated and include single parenthood, untreated mental health problems and substance abuse intertwined with financial stress and isolation.⁷ These are the issues which must be addressed by child welfare stakeholders in order to pursue safety and permanency for a child. Numerous rounds of Child and Family Services Reviews⁸ over the years have found that frequent visits between parents and children, individualized needs assessments, services, and adequate resources as well as low caseloads in courts and government child welfare agencies assist in achieving positive permanency outcomes.⁹

⁶ U.S. and Texas statistics taken from the U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth, and Families, Children's Bureau 2018 Child Maltreatment Report. Harris County statistics drawn from the DFPS Data Book: CPS Completed Child Abuse/Neglect Investigations: Perpetrators 2018.

⁷ UT Austin study; Systematic Review of Child Abuse Perpetrators Worldwide: Characteristics and Risk Factors.

⁸ The Children's Bureau defines these evaluations as "periodic federal reviews of state child welfare systems conducted to ensure conformity with federal child welfare requirements, determine what is actually happening to children and families as they are engaged in child welfare services, and assist states in helping children and families achieve positive outcomes."

⁹ Child Welfare Information Gateway: Family Reunification: What the Evidence Shows. 2011. Positive permanency outcomes refer to a child being returned to their biological parents, adopted, or placed in permanent guardianship with kin versus ending their tenure in foster care through aging out of foster care.

At a national level, the majority of children had a permanency goal (a plan for their exit from foster care) of reunification, and 43% were in the state's care for less than a year. In the state of Texas, the average number of months in care for children who exited during the 2018 fiscal year was 19.1, and in Harris County 26 months.

Children in Foster Care - 2018				
	United States	Texas ¹⁰	Harris County ¹¹	
Total	437,283 ¹²	32,797	3,802	
Gender ¹³				
Male	52%	51%	52%	
Female	48%	49%	48%	
Race/Ethnicity				
Hispanic or Latino	21%	41%	32%	
Non-Hispanic American	2%	<.5%	<.5%	
Indian				
Non-Hispanic Asian/Non-	1%	<.5%	.5%	
Hispanic Native Hawaiian				
Non-Hispanic Black	23%	22%	47%	
Non-Hispanic multiple race	8%	5%	N/A	
groups				
Non-Hispanic White	44%	20%	15%	
Race Unknown (other)	1%	2	5%	
Age				
<1	8%	7%	5%	
1-5	32%	41%	41%	
6-10	23%	25%	24%	
11-15	23%	18%	18%	
16-20 ¹⁴	14%	9%	11%	

The majority of children (49%) who exited foster care in the United States were reunified with the parents from whom they were removed, while 25% were adopted, 11% placed in the permanent custody of relatives, and 7% aged out. ¹⁵ In Texas, there is an interesting divergence from national statistics with 33% of children exiting due to reunification and 32% to the permanent custody of relatives, which can be with or without the termination of the parents' rights. Harris County has higher adoption rates than state or national percentages and a comparable number of children aged out of foster care at all three geographic levels. ¹⁶

Where children spend their time in foster care and how long it takes them to exit can have tremendous negative impacts on the previously mentioned permanency outcomes and long-term wellbeing. Research has shown that the more placements a child experiences, the worse their outcomes, that the number of placements is more likely to

¹⁰ DFPS Data Book 2018; Children in DFPS Legal Responsibility as of 8/31/18.

¹¹ DFPS Data Book 2018 Children in DFPS Legal Responsibility as of 8/31/18.

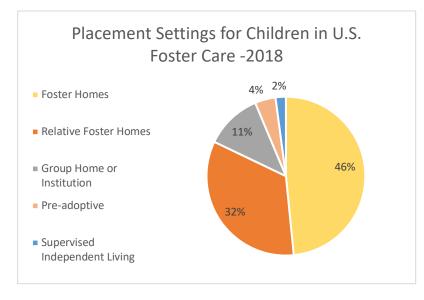
¹² As of 9/30/18. Children's Bureau.

¹³ Currently, gender identity data is only collected by the federal government on a binary basis.

¹⁴ For Harris County the DFPS Data Book only collects information on this population up to the age of 18.

¹⁵ Annie E. Casey Foundation. Kids Count Data Center. 2018. Children Exiting foster care by exit reason in the United States.

¹⁶ Data obtained from Kids Count Data Center 2018 and DFPS Data Book Children Exiting DFPS Legal Custody 2018.



increase the longer a child is in foster care, and that ultimately these factors decrease the probably of a positive permanency outcome such as reunification, adoption, or guardianship.¹⁷ In 2018 at the national level, over a third of children in foster care had more than two placements, over 30% of children had been waiting in foster care for one to almost two years to be adopted, and a quarter for two to three years.¹⁸ Youth who aged out of foster care in Texas and in Harris County had been in the system longer than their peers in foster

care: 47 and 64 months respectively with 6.5 placements at the state level and 7.4 at the county level. The reason the least restrictive and most family-like settings¹⁹ are recommended for children in foster care is because of the poorer outcomes associated with their congregate care counterparts.²⁰ While congregate care cannot always be avoided due to a child's behavioral health needs, lack of other appropriate placements, or a youth's desire for a type of congregate care setting such as a group home, it is generally a placement of last resort. National, state, and local statistics, for the most part, mirror each other with the majority of children in foster homes, followed by kinship placements, licensed kinship foster homes, residential treatment, or other congregate care facilities (shelter, group home), and finally pre-adoptive homes. Placement statistics unfortunately do not reflect children's moves in and out of settings but rather a point in time. Literature suggests approximately 20% of children are placed in congregate care at some point in time during their foster care stay.²¹

Children with disabilities are at particular risk of placement instability and poor permanency outcomes but are also two times as likely to be removed from their biological placements and placed in institutional care. Research has also found these children are less likely to be placed with relatives, take twice as long to be adopted, and tend to age out of foster care.²² While being adequately prepared for adulthood is challenging for many youths in care, those with disabilities face additional barriers when approaching independence from the foster care system. Children with intellectual disabilities in particular were found to spend more days in foster care and be more likely to age out of foster

 $^{^{17} \} Casey \ Family \ Programs. \ October \ 2018. \ What impacts placement stability? \ Available \ at: \ https://www.casey.org/placement-stability-impacts/#:~:text=Placement%20characteristics, higher%20average%20number%20of%20moves.$

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¹⁹ These terms refer to placement with parents, biological family, or persons with whom the child has an existing relationship. This helps a child maintain some sense of security and normalcy versus being placed with strangers (foster care) or in a more institutionalized setting such as a residential treatment center or group home.

²⁰ Casey Family Programs. 2018. What are the outcomes for youth placed in congregate care settings? Hyde, J. and Kammerer, N. 2009. Adolescents' perspectives on placement moves and congregate care settings: Complex and cumulative instabilities in out-of-home care. Children and Youth Services Review. 31: 265-273.; Shah, M. Liu, Q., Eddy, J., Barkan, S., Marshall, D., Mancuso, D., Lucenko, B., and Huber, A. 2016. Predicting Homelessness among Emerging Adults Aging Out of Foster Care. American Journal of Community Psychology. 60(1-2): 33-43.

²¹ Wulczyn, F., Alpert, L., Martinez, Z., and Weiss, A. 2015. Within and Between State Variation in the Use of Congregate Care. The Center for State Child Welfare Data. ²² Kay. J. 2019. Advocating for Children with Disabilities in Child Protection Cases. *Touro Law Review*. 35(1): 345-366; Children and youth services review. 83 December 2017 285-293 Medical complexity and placement outcomes for children in foster care. Seltzer, R. Johnson, S. and Cynthia Minkovitz.

care.²³ The same is true for children with medically complex needs, with a greater likelihood of multiple placements and a longer time to permanency than other children in foster care.²⁴ For this population and the broader population of children in foster care, early identification of their needs is essential.²⁵ Only then can early intervention potentially address the developmental, mental, and physical health problems often found in children in the system.

Correct identification of needs and associated appropriate services are also important for biological parents and can have an impact on case outcomes and long-term child wellbeing. Research has found the factors that positively influence reunification include individualized needs assessments, services that address emotional/psychological factors, and shared, but parent-driven goal setting.²⁶ This is particularly true for parents who have disabilities as mandated services or other requirements for reunification may not be as easily accessible. Despite the fact that the Americans with Disabilities Act applies to the child welfare system, targeted advocacy is needed to ensure equal treatment and prevent a parent's disability from being a reason a child remains in foster care longer than necessary.²⁷ Of course identifying a parent with a latent disability requires meaningful engagement that engenders trust and openness on the part of the parent.

In addition to efforts focused on the parent as an individual, emphasis should also be on the parent-child bond. Early and frequent visitation is a critical component to reducing the negative effects of separation and keeping parents focused on their goal.²⁸ The Texas Family Code (TFC) reflects this as it requires the Department of Family and Protective Services (DFPS) to provide an opportunity for the parent to visit their child no later than the fifth day after the date the department is named temporary managing conservator unless it is not in the child's best interest or it would conflict with an existing court order.²⁹ However, frequent visitation is not codified in the TFC and mostly left up to the discretion of DFPS and the courts. This can lead to some child welfare professionals regarding visitation as a privilege to be earned as opposed to a critical tool for reunification. Parents realizing their right to visitation and successfully navigating the rest of the system is difficult. However, outcomes are thought to have the best chance at being "accurate and just" if the parents also have legal representation.³⁰ And, while it stands to reason that the state is supposed to act in the best

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²³ Foster Care Outcomes for Children with Intellectual Disability – Elspeth Slayter. Intellectual and Developmental Disabilities. 54(5) October 2016. 299-315.

²⁴ Seltzer, R., Johnson, S. Minkovitz, C. 2017. Medical Complexity and placement outcomes for children in foster care. *Children and Youth Services Review*. 83: 285-293.

²⁵ Leslie, L., Gordon, J., and Gist, K. 2005. Addressing the Developmental and Mental Health Needs of Youth Children in Foster Care. *Journal of Development and Behavioral Pediatrics*. 26(2): 140-151; Agathis, N., Raphael, J. and Greeley, C. 2018. Improving the Health Care of Foster Children Through the US: Texas, a Case Example. *Journal of Applied Research on Children*.

²⁶ Child Welfare Information Gateway. 2011. Family Reunification: What the Evidence Shows; Jedwab, M. Chetterjee, A., and Shaw, T. 2018. Caseworkers' insights and experiences with successful reunification. *Children and Youth Services Review*. 86: 56-63; Corwin, Ty. 2012. "Strategies to Increase Birth Parent Engagement, Partnership, and Leadership in the Child Welfare System: A Review." Casey Family Programs; Cheng, T. 2010. "Factors Associated with reunification: A longitudinal analysis of long-term foster care." *Children and Youth Services Review*. 32(10): 1311-1316.

²⁷ National Council on Disability. 2012. "Rocking the Cradle: Ensuring the Rights of Parents with Disabilities and Their Children."; Center for Advanced Studies in Child Welfare. Spring, 2017. "Parental Disability in Child Welfare: Policy strategies for improving child welfare services for parents with disabilities and their children."

²⁸ Partners for our Children. April 2011. "Family Visitation in Child Welfare: Helping Children Cope with Separation while in Foster care." Available at: https://partnersforourchildren.org/sites/default/files/2011. family visitation..... helping children cope brief.pdf; Administration for Children, Youth, and Families. February 2020. "Family Time and visitation for children and youth in out-of-home care."; Georgia Supreme Court Committee on Justice for Children and the J4C Court Improvement Initiative. May 2019. "Family Time Practice Guide: A Guide to Providing Appropriate Family Time for Children in Foster Care."

²⁹ Texas Family Code §262.115.

³⁰ Lassiter v. Department of Social Services, 452 U.S. 18 (1981).

interests of the child, quality legal representation is also necessary to ensure the actions taken by the court truly represent the child's best interests.

Child and Parent Legal Representation

The American Bar Association and numerous publications³¹ have clearly defined high quality legal representation of parents and children with the following themes:

- Protecting parents' rights to information and decision-making
- Consistent and quality meetings with clients outside of and well in advance of court hearings
- Independent investigations of claims made in the case
- Pursuing what is in the best interests of the client or zealously representing the client's wishes (depending upon AAL or GAL appointment)
- Attending hearings
- Communicating with clients about what is happening in the case so they are aware and can make informed decisions
- Empowering clients to attend court and speak up for themselves

Two essential threads that run through all these responsibilities³² are attention to detail and bringing crucial facts and conclusions to the attention of other stakeholders in the system. This practice is only possible with frequent, substantive client contact, persistence in locating and reviewing records and other documentation, and ensuring clients have appropriate evaluations to determine needs, barriers to services, and targeted solutions. The attorney's knowledge of their client and the former's expertise is particularly important in specialty areas, such as intellectual or physical disabilities, where complexities in the case can be missed or misdiagnosed and the right services hard to find.

Juxtaposed with the clear ABA definitions of quality representation is the systemic barriers against which they must operate. A study done in Texas points to the structural problem of attorney appointment methods which can prevent clients from ever having the opportunity for quality representation.³³ The timing of attorney appointment can also impact the outcomes of a case. The TFC requires appointment of an attorney *ad litem* for a child in a termination suit at some point between the filing of the suit and the full adversary hearing which is set for 14 days after the state takes legal possession of the child.³⁴ However, parents do not enjoy the same expediency. The TFC has criteria for mandatory appointment of an attorney for a parent, but the burden is not on the court to appoint an attorney nor to do so within a certain time frame.³⁵ However, if a parent appears at a hearing in opposition to the suit and is indigent, the court must inform the parent of the right to a court-appointed attorney and postpone the hearing to allow the court-appointed attorney to prepare.³⁶ The consequences of delayed appointment can include longer periods of separation

³¹ Casey Family Programs. July 2019. "How does high-quality legal representation for parents support better outcomes?" Available at: https://caseyfamilypro-wpengine.netdna-ssl.com/media/SF Quality-parent-representation fnl.pdf; American Bar Association. 2015. "Indicators of Success for Parent Representation."

³² American Bar Association Center on Children and the Law. 2018. "Legal Representation in Child Welfare Proceedings." Available at: www.americanbar.org/child.

³³ Supreme Court of Texas Children's Commission. 2018. "2018 Study of Legal Representation in Child Protective Services Cases."

 $^{^{34}}$ Texas Family Code §107.012 and §262.201(a).

³⁵ Texas Family Code §107.013(a-1); §262.201(c).

³⁶ Texas Family Code §262.201(d-e1).

between child and parent, longer stays in foster care for a child, and a delay in identification of and participation in services. Furthermore, the delay of appointing a competent attorney can result in the child being removed from the home, additional trauma of placement in foster care, and the absence or delay of critical evaluations and services that affect positive permanency outcomes.³⁷

Other structural barriers to quality representation include low compensation and high caseloads for attorneys, relatively short legal time limits, as well as scarcity of services, appropriate placements, and other resources for attorneys to access on behalf of their clients. These boil down to one critical fact, which is that complex child welfare cases require a significant number of resources to appropriately address. The American Bar Association states that attorneys achieve better case outcomes not by taking on responsibilities for meeting all of the clients' needs, but by effectively utilizing parent partners and other professionals in their practice through an interdisciplinary team approach.³⁸ A primary reason for this recommendation is that child welfare cases are complex, and successful outcomes depend on the variety of competent perspectives available to assist parents and children both in and outside of the courtroom. Therefore, descriptions of high-quality legal representation often include working as part of an interdisciplinary team.³⁹ "An interdisciplinary approach incorporates additional professionals into the legal team...These team members can address issues outside the courtroom to support the family unit."⁴⁰ The team can include the aforementioned parent partner, social workers, and other experts who are familiar with education, housing, medical care, and other matters that frequently impact families in the child welfare system.

Interdisciplinary Models

The theory of change behind an interdisciplinary model is that a team of professionals who bring varying areas of needed expertise to a complicated and time-limited case are together more likely to have the skills and resources to support a family in and outside of the courtroom. In part, this model addresses the conflict in the child welfare system or the "dual role" of the caseworker in child protection systems—to police and to help, to protect children from their parents and to support parents in taking care of their children is a fundamental dichotomy in child welfare. To earn a parent's trust to provide them with support services and, simultaneously, to measure the information the parent is entrusting to you to determine whether to remove their children is a challenging task."⁴¹ Legal representation is still the foundation of the model and still includes an attorney appointed as a Guardian *ad Litem* to address the client's best

³⁷ Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice. (2008). Court Performance Measures in Child Abuse and Neglect Cases: Technical Guide at 107 (D.O.J. Technical Guide). Available at: http://www.ncjrs.gov/pdffiles1/ojjdp/223570.pdf; American Bar Association Center on Children and the Law. 2015. "Indicators of Success for Parent Representation."

³⁸ American Bar Association. January 2010. Working with Parent Partners to Achieve Better Case Outcomes for Families. *Child Law Practice: Helping Lawyers Help Kids*. 28(11).

³⁹ Thorton, E. and Gwin, B. Spring 2012. High Quality Legal Representation for Parents in Child Welfare Cases Results in Improved Outcomes for Families and Potential Cost Savings. *Family Law Quarterly*. 46(1): 139-154; Courtney, M. and Hook, J. 2012. Evaluation of the impact of enhanced parental legal representation on the timing of permanency outcomes for children in foster care. *Children and Youth Services Review*. 34: 1337-1343; Family Justice Initiative.

⁴⁰ Gerber, L., Pang, Y., Ross, T., Gugenheim, M. Pecora, P., and Miller, J. 2019. Effects of an Interdisciplinary approach to parental representation in child welfare. *Children and Youth Services Review*. 102: 42-55.; Gerber, L.A., Pang, Y.C., Ross, T., Guggenheim, M., Mayevskaya, Y., Jacobs, S. & Pecora, P.J. (2020). Understanding the effects of an interdisciplinary approach to parental representation in child welfare. *Children and Youth Services Review*, Volume 116.

⁴¹ Gerber, L.A., Pang, Y.C., Ross, T., Guggenheim, M., Mayevskaya, Y., Jacobs, S. & Pecora, P.J. (2020). Understanding the effects of an interdisciplinary approach to parental representation in child welfare. *Children and Youth Services Review*, Volume 116.

interests, or an Attorney *ad Litem* who represents the client's expressed wishes. The social work team brings the skills to assess the needs of the client, work in partnership with them to determine their goals, and locate the necessary services such as mental health counseling or substance abuse treatment. Any number of other disciplines can be included on the team, including medical doctors, psychiatrists, or other specialized attorneys such as those that deal with appeals.

A critical member of the team is a parent partner or peer mentor who provides a targeted resource for meaningful engagement between biological parents whose children are currently in foster care and those who have successfully worked through prior system engagement. Parent partners serve as a concrete reminder that significant life obstacles can be overcome, ⁴² and they also serve as a role model and partner in accountability to ensure the parent identifies and remains true to their goals. ⁴³ Program evaluations of parents partners have found positive results in areas such as higher reunification and lower re-entry rates with key factors including relationship building, connecting parents to resources to meet self-identified goals as well as those in their service plan, and the provision of emotional support and encouragement. ⁴⁴ Parent partners provide greater insight for the legal team into the complex needs of biological parents involved in the child welfare system. They also foster parent engagement and better assist clients in understanding the foster care and court systems in which they are embroiled. Casey Family Programs' highlighted benefits include instilling hope, encouraging the parent's awareness of their rights and responsibilities, and connecting them to services. ⁴⁵

There have been several studies highlighting the value of interdisciplinary models of child welfare representation⁴⁶ as well as the challenges that impact their efficacy. The value includes higher rates of reunification, shorter periods of time in foster care with higher rates of positive permanency, fewer removals, and while in foster care more frequent parent-child visitation and fewer and less restrictive placements. Several models that have achieved these outcomes include:

New York: Center for Family Representation

- Non-profit organization
- team includes a lawyer, social worker, and a parent advocate
- work with parents includes accessing services, support at case planning meetings, and increasing meaningful visitation

⁴² Casey Family Programs. 2019. "How do parent partner programs instill hope and support prevention and reunification?" Available at: https://caseyfamilypro-wpengine.netdna-ss.com/media/HO Parent-Partner-Program fnl.pdf.

⁴³ Minnesota Supreme Court-Minnesota Department of Human Services. 2005. "Parent Partners: Here to support your success! A Handbook. Framework to Forming a Parent Partner Network." Available at: https://ncsacw.samhsa.gov/files/MN ParentPartnerHandbook.pdf.

⁴⁴ Chambers, J., Lint, S., Thompson, M., Carloson, M., and Graef, M. 2019. Outcomes of the Iowa Parent Partner program evaluation: Stability of reunification and reentry into foster care. *Center on Children, Families, and the Law.*; Capacity Building Center for States. 2016. Parent Partner Program Navigator: Designing and implementing parent partner programs in child welfare. Washington, DC: Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services.

⁴⁵ Casey Family Programs ibid.

⁴⁶ Gerber, L., Pang, Y., Ross, T., Guggenheim, M., Pecora, P., and Miller, J. 2019. Effects of an interdisciplinary approach to parental representation in child welfare. *Children and Youth Services Review*. 102: 42-55.; Gerber, L., Guggenheim, M., Pang, Y., Ross, T., Mayevskaya, Y., Jacobs, S., Pecora, P. 2020. Understanding the effects of an interdisciplinary approach to parental representation in child welfare. *Children and Youth Services Review*. 116: 1-11.; Courtney, M. and Hook, J. 2012. Evaluation of the impact of enhanced parental legal representation on the timing of permanency outcomes for children in foster care. *Children and Youth Services Review*. 34: 1337-1343.

Washington State: Office of Public Defense Parent Representation Program

- governmental agency
- provides legal representation and support services for parents whose children are in foster care statewide
- team includes an attorney and a social worker
- · contracts with attorneys who represent indigent parents, custodians, and legal guardians

Children's Law Center of California

- non-profit organization
- provides legal representation for children in foster care in three California counties
- includes a multidisciplinary advocacy team including social work investigators, child welfare law specialists, mental health advocacy team, peer advocates, and staff experts specialized in areas of immigration, education, juvenile justice, transition age youth, and commercial sexual exploitation
- work on policy and legislative reform

Michigan: Detroit Center for Family Advocacy⁴⁷

- provides legal advocacy and social work services to families in order to prevent children from placement in foster care
- also takes cases where children are in foster care, but their permanency goal is no longer reunification
- team includes a lawyer, social worker, and family advocate
- the center closed in 2016 because it could no longer get enough funding⁴⁸

The complexity of the child welfare system and the consequences of its failures are so dire that many advocates argue for models, such as the Detroit Center for Family Advocacy in Michigan, in order to prevent children from ever entering foster care. This "pre-petition" work targets populations such as low-income families whose lack of resources puts them at risk for intervention from Child Protective Services (CPS) or kinship caregivers who took in or had relative children placed in their home by CPS before an investigation was closed. Specific legal work that can occur in this arena includes: modification to an existing custody agreement; an Authorization Agreement for Nonparent Adult Caregiver (in Texas sometimes referred to as a Chapter 34 agreement due to its placement in the Family Code); legal intervention to give kinship caregivers formal custody rights after having a child placed with them during a CPS investigation or Family Based Safety Services; assistance with a protective order, eviction, or obtaining public benefits; and/or special education assistance.

Despite the mounting evidence that these models work, and the fact that many states and major cities outside of Texas have been successfully employing this model for decades, Texas still relies almost exclusively on solo practitioners for the representation of children and parents. There are barriers to creating a multidisciplinary office that include establishing relationships with court and child welfare staff, availability of resources in the surrounding community, limited diverse funding sources, and unwillingness of government to invest in the model.⁴⁹ Another

⁴⁷ While the Michigan model is only a pre-petition legal program, it is included here as an alternative approach that can be included with post-petition work as FCAC does in their model.

⁴⁸ Vivek Sankaran. 10/30/18. What We Need to Protect American Families. The Imprint: Youth and Family News.

⁴⁹ Washington Office of Public Defense https://www.opd.wa.gov/program/parents-representation; CENTER FOR FAMILY REPRESENTATION, INC. FINANCIAL STATEMENTS DECEMBER 31, 2018 AND 2017.

challenge for existing interdisciplinary models is the availability of resources for evaluating the short-term and long-term outcomes of the model. Ideally, an evaluation of this model would follow families from the earliest point at which the attorney is appointed, or becomes involved in the case, to when risk is ameliorated (pre-petition case) or the court's involvement is terminated. The evaluation would also follow families six and twelve months out from the closure of their case in order to examine the long-term impact of the social work and legal services they were provided. The sample population would need to be significant in order to conduct a multivariate quantitative analysis to control for other factors that could impact case outcomes. This type of evaluation was done to compare the multidisciplinary offices that represent parents in New York City to the panel of attorneys used in conflict cases, but it required almost a decade of tracking tens of thousands of cases.

Foster Care Advocacy Center

The only nonprofit multidisciplinary law office that represents children and parents in the state of Texas is Foster Care Advocacy Center (FCAC). Foster Care Advocacy Center is a nonprofit legal services organization founded in June of 2018 by now Executive Director Tara Grigg Green (formerly Garlinghouse), and Alex Hunt, a family law attorney who is now chair of the FCAC board. FCAC was founded to provide interdisciplinary and holistic child welfare representation, particularly in complex cases that require additional time and attention to secure positive case and child wellbeing outcomes. Examples of these cases include, but aren't limited to those where:

- parents or children have physical disabilities, chronic illnesses, or debilitating symptoms from mental illness
- parents or children have intellectual and developmental disabilities
- children's healthcare needs covered by Medicaid are not being met
- children's education needs that should be addressed through special education services are going unmet
- ❖ youth are dually involved in the foster care and juvenile justice systems
- the client is a pregnant or parenting teen
- ❖ youth are in the Permanent Managing Conservatorship of the state with 10 or more placements
- the youth will be aging out of foster care

Community-Based Clients

One staff attorney is also currently allocating approximately 20% of her time to Community Legal Advocacy practice that addresses legal barriers in order to prevent children from coming into foster care, or the pre-petition work mentioned previously. While FCAC does not currently have formal criteria to evaluate whether to accept a case, intakes are staffed to determine whether the case aligns with the mission and vision of the organization, and whether success in the case can prevent unnecessary child welfare involvement or help address systemic issues. More specifically, this work can involve:

- helping kinship or fictive kin caregivers to temporarily or permanently gain custody of a child
- addressing challenges with housing that could otherwise lead to a petition for custody by the state, by connecting the clients with civil legal aid organizations

- providing legal guidance for a parent with a Reason to Believe finding on applying for an Administrative Review of Investigation Finding (ARIF) or a parent seeking custody/legal rights in an ongoing dependency case who is not already represented
- addressing needs of parents/children that if unaddressed could lead to a Refusal to Accept Parental Responsibility
- assisting with an appeal of a family/juvenile court decision
- helping a nonoffending biological parent get primary custody and a protective order after the other parent has harmed the child in a way that resulted in a DFPS investigation

In addition to an attorney, a Social Services Director and Legal Operations Specialist work on these cases with the Legal Operations Specialist responsible for conducting intake and entering a brief summary of the needs in the data management system. The staff attorney then calls the referral source to get more detailed information on the need and to determine if the case meets criteria, including if there is a conflict of interest or the party lives outside of Harris County. The next step is for the family to meet with the FCAC attorney and a member of the Social Services team, if appropriate. The attorney enters into a contract with the party that outlines the scope of FCAC's representation. Social Services staff is included in the case on an "as needed" basis, but since the contract is between the attorney and the client, the work of the social services team is covered by attorney-client privilege. The work is intended to involve short-term interventions, so the scope is limited to discrete tasks. If the children involved in one of these cases were to enter into foster care, FCAC could be appointed to their case if other parties were amenable, it was in alignment with the court's appointment practices, and there was no other conflict of interest.

Court-Appointed Cases

At the heart of any legal representation model is the attorney, and FCAC has four who can be appointed as Attorneys or Guardians *ad Litem* for either a parent or a child. In active CPS cases they perform standard legal activities for parents, including filing an answer within the first 30 days after the appointment, filing discovery, and filing objections or making arguments regarding appropriate service plan requirements. For parent or child clients, the attorneys will also review records, make recommendations regarding services, and attend meetings at CPS offices or with service providers, including at a child's school. Additional activities FCAC expects of its attorneys align with quality representation and ABA Standards. For example, FCAC attorneys observe parent-child visits and work to be in regular communication with case stakeholders such as CPS staff, the Harris County Attorney that represents CPS, and other attorneys appointed to the case.

However, what drives the activities of these attorneys to a higher level is their engagement as members of an interdisciplinary team. FCAC attorneys staff the case with the Social Services Team at the very beginning and, if scheduling permits, meet with the parent/child at the same time as the Social Services Director or Parent Partner. The Social Services Team member assesses the client's needs and goals and shares this assessment and the resulting level of intervention with the attorney, as well as tasks developed with the client. FCAC team members continually update each other on the progress of the case and case issues, communicating every week and discussing cases with the entire staff

every month. Decisions made about placements, visits, and family reunification are made by the attorneys in conjunction with social services staff, as well as community professionals, such as substance use counselors or child psychologists whose reports are integrated into the work FCAC attorneys and the Social Services Team do with their clients.

FCAC Social Services Levels of Intervention			
Level 4	Requires weekly face to face contact in the home.		
	Participation and attendance at court hearings, DFPS		
	meetings, and other case related services are required.		
	Observation of at least one family visits per month is		
	required.		
Level 3	Requires biweekly face to face contact in the home.		
	Participation and attendance at court hearings, DFPS		
	meetings, and other case related services are required.		
	Observation of at least one family visit per month is		
	required.		
Level 2	Requires monthly face to face contact in the home.		
	Participation and attendance at court hearings, DFPS		
	meetings, and other case related services are		
	recommended as needed. Observation of at least one		
	family visit is required.		
Level 1	Requires at least one home visit during the case.		
	Participation and attendance at court hearings, DFPS		
	meetings, and other case related services are		
	recommended as needed. Observation of at least one		
	family visit is required.		

In CPS legal cases, the Social Services Team provides support by assessing the needs of parents and children, connecting clients to community resources, evaluating potential child placements with relatives, communicating clients' needs and progress to DFPS, and other ancillary tasks. Ultimately, it is the goal of the Social Services Team to "engage the clients, by building rapport and determining not only challenges and needs, but strengths as well." The information the team collects from the parent or child aligns with the CPS services plan but is more intimately connected with identifying supports that will prevent future CPS involvement and building on the goals of the parent or child. In the case of the latter, the assessment looks at school/academic performance, the caregiver setting/placement, and the child's desires or concerns, as well as their understanding of the DFPS case plan goals and other aspects of their case. The team member can also attend court and Family Group Conference meetings to help advocate for the client's needs and explain the services in which the client has been engaged. The Social Services Team also assists the client and attorney in following up on court orders and service plan requirements.

As discussed in the literature review, the use of a social services team acknowledges the complexity of needs, dynamics, and limited resources available to parents, children, and CPS staff involved in child welfare cases. One of the most important persons on this team, in terms of engagement, is the Parent Partner. FCAC began using a Parent Partner in November of 2019. The Parent Partner is assigned to parents who are receiving legal representation from an FCAC

attorney and is responsible for assessing the parent's needs, goals and challenges, meeting with them on a weekly basis, assisting them in achieving their established goals, and mitigating crises. The following information is recorded by the Parent Partner:

- parent's understanding of the maltreatment of the children and conditions for reunification or case closure
- parent's perception of goals/concurrent plans
- progress the parent made towards their goals and their additional needs
- identified risk factors and what is being done to reduce the risk
- parent's understanding of safety threats to the child and the parent's ability to control those conditions
- protective and/or diminished capacities demonstrated by the parent
- parent's input on their service plan
- parent's perception of parent/child visits
- parent's participation in services:
 - o attendance and participation
 - o skills learned
 - o progress/concerns
 - o medications prescribed or diagnosis conferred
 - o drug test results
 - o adequacy of housing or progress towards stable, adequate housing

FCAC has been assigning every other case to their Parent Partner for research purposes in an attempt to make the Parent Partner's "intervention" as randomized as possible. After the assessment and discussion with the parent, the Parent Partner communicates the recommended service plan to the attorney (who in turn communicates it to CPS) and engages in communicating with the parent on a weekly basis and seeing them (face-to-face or virtually since the start of the pandemic) monthly. However, the exact details of how often the client is engaged may vary depending on the level of intervention assigned to the case. The Parent Partner also assists clients in locating and connecting to services and prepares a report for the appointed attorney to detail work with the parent and, ideally, the parent's progress along with any recommendations for the court. The Parent Partner is assigned to the case until such time as the court renders a final decision. Another unique aspect of FCAC's Social Services Team is that if the court does not terminate a parent's rights, but grants PMC to the state, they see this as a possible opportunity to reengage the child's parent (if they aren't represented by an attorney) in cases where FCAC represents the child.

Process Evaluation

A process evaluation of FCAC was conducted to determine whether the core components of FCAC and the activities associated with them have been implemented as intended and resulted in certain outputs. Information used to compose the logic model and evaluate its components was collected from the following sources:

• Eleven meetings (facilitated focus groups and discussions) with FCAC staff and Executive Director. These meetings involved staff brainstorming their interpretation of the FCAC mission and vision, the problems FCAC addresses, what resources go into the work (inputs), what tasks and activities the work consists of (outputs), those factors outside of

their direct control (external) that inhibit or contribute to the work of FCAC, and what outcomes they believe FCAC achieves.

- FCAC web page
- FCAC Handbook (employee manual)
- Satisfaction surveys of:
 - o Court staff (judges, associated judges, court coordinators)
 - o DFPS attorneys
 - o Attorneys who represent children and parents in the child welfare system
 - o DFPS staff (caseworkers, supervisors, adoption preparation, kinship workers)
 - Service providers
 - Caregivers (foster parents and kinship caregivers)
 - Biological parents (current and former clients)
- Virtual focus groups of youth currently and previously in foster care
- Review of social services forms including:
 - Case activity log
 - o Referral form
 - o Foster child and caregiver visit form
 - o Parent partner activity tracking
 - o Parent visit form

LOGIC MODEL

Inputs	
	Activities
Full-Time Staff	✓ Monthly all-staff meeting
-Executive Director -1 Supervising Attorney -2 Staff Attorneys	✓ Weekly case staffing
-1 Social Services Director -1 Parent Partner	✓ Biweekly attorney-client contact
-1 Legal Operations Specialist -1 Case Support Specialist	✓ Monthly attorney-client meeting
Staff expertise in:	✓ Weekly parent partner-client contact
-Foster care -Medicaid -Special Education -Home & Community Based Services Social work interns for every staff	✓ Social Services o assessment: identification of needs, challenges, and goals o referrals for services o contributions to family plan of
attorney	service o parent groups
Funding billable hours (50%) fundraising (50%)	case management crisis management
 grants consulting fees donations	✓ Legal Filings/motions/proceedings ✓ Court hearings
Community Social Service Partners	
Data Collection -Legal Server -My Case	 ✓ DFPS Meetings ○ Family Group Conference / PC ○ Circle of Support ○ observation of parent-child visits
-Case Organizational Spreadsheet Heavily discounted office space located in a geographically	✓ In-person and other contact with stakeholders
convenient space related to courtrooms	 ✓ Community Advocacy ○ intake ○ assessment ○ service agreement with intervening party and parent ○ referrals ○ legal guidance & intervention

Innute

Outputs Outcomes Results Short/Medium Term Long-Term

- Quality representation of *parents* whose children are in state custody
- encouragement & support to attend and participate in court hearings & DFPS meetings
- o frequent & timely meetings with client
- o crisis mitigation
- o identification of complex case issues
- ✓ Quality representation of children who are in the custody of the state
- encouragement to & support in attending and participating in court hearings & DFPS meetings
- o frequent & timely meetings with client
- o crisis mitigation
- o placements in least restrictive settings
- o fewer placements
- positive permanency outcomes
- identification of complex case issues
- ✓ Safeguarding interests of parents and children where there are concerns about mental/intellectual capacity
 - identification of necessary services and supports
 - o advocacy in school and other settings
- ✓ Social services support of parent & child clients
- more detailed information on client challenges and needs
- o identification of clients' goals
- connections to services that meet clients' goals
- o support in completing goals
- o greater participation in services
- Collaboration with stakeholders (judges, CPS caseworkers, Harris County Attorneys, Child Advocates, other attorneys, and service providers) to support case goals
- Mitigating risk factors that could lead to petition for custody

 Increased client awareness of legal rights, CPS/court process, and court/DFPS decisions

- Clients better prepared for DFPS meetings & court hearings
- Clients participate in decisions that impact their lives
- Clients legal rights are protected
- Client participation in services, court hearings, and DFPS meetings
- Judicial and DFPS decision making based on FCAC input
- Children move to a less-restrictive placement
- Children are placed with family
- Clients have more frequent and/or unsupervised visitation
- Community cases do not result in CPS involvement six months after FCAC intervention.
- Children in community cases are stable in a relative placement or with their parents.

- Children maintain placement in the least restrictive environment
- Children are in fewer placements over the life of a case
- Children are in foster care for a shorter period of time than their counterparts in care
- Children experience positive permanency outcomes relative to their case (reunification, adoption, PMC to family)
- Youth who age out of care have stable living arrangements, necessary documentation, and opportunities for future success
- Clients feel they had a voice in their case
- High stakeholder satisfaction with:
- o FCAC's impact on case
- legal representation and support from Parent Partner or Social Services Director
- Clients have support to meet their goals
- Parents are less likely to have their rights involuntarily terminated
- Stakeholders perceive productive partnerships & improved communication between FCAC and themselves
- Community cases do not result in CPS involvement one year after FCAC intervention.

Inputs

1) Staff

Executive Director — has a J.D. and a Master in Public Policy and worked for three years as a staff attorney at Disability Rights Texas providing direct representation to foster children with disabilities in state child welfare proceedings and ancillary proceedings, such as special education litigation and Medicaid appeals. She has also spent a number of years consulting with state and national organizations on child welfare policy. The ED has ultimate responsibility for the agency's legal activities as well as day-to-day operations and fundraising. She is also the official spokesperson for the organization, including community outreach, public relations, and legislative advocacy. At the time of this report, she has approximately 40 cases, but is supposed to have between 10 and 15 in order to address other responsibilities. The ED's self-assessment of her caseload is that it fills approximately 65% of her time which only leaves 35% for staff, stakeholders, and fundraising.

Supervising Attorney – has a JD and approximately ten years of experience in child welfare law, part of which was spent in private CPS practice. She also has expertise in special education matters, Medicaid denials, and family law issues. The Supervising Attorney oversees and manages all legal matters which include supervision of all staff attorneys, legal fellows, and legal interns. This includes staffing cases referred to FCAC and determining which attorney has the time and/or specific expertise to handle the specifics of a case. The Supervising Attorney also emails the court coordinator to get the petition, affidavit, and appointment order, conducts weekly staffings throughout the life of the case, and attends monthly staff meetings. At the time of the writing of this report she has a caseload of approximately 40.

Social Services Director – is a Licensed Master of Social Work (LMSW) and has over 13 years of experience working in child welfare and mental health. She is currently working on a doctorate and is certified as a mediator and in Trust Based Relational Intervention (TBRI). She supervises social work/services interns and is responsible for conducting assessments with clients.

Staff Attorneys – there are two staff attorneys who, along with the Supervising Attorney, each carry a caseload of approximately 50 cases apiece.

- The first staff attorney hired at FCAC has a JD, was a member of the Child Welfare/Family Justice Clinic at Howard University, and served as a CASA in DC. She represents court-appointed clients (currently about 80% of her time) and manages the Community Legal Advocacy clients.
- The second staff attorney and the most recent addition to the team in December 2019 has approximately 20 years of experience as an attorney in the areas of family, workers' compensation, and personal injury law, with six years representing families involved with CPS, including taking appointments from Harris County Star Family Drug Court when she was in private practice.

Parent Partner – has lived experience navigating the child welfare and criminal justice systems as well as the process of substance abuse recovery. She has previous experience as a recovery coach and as a case manager for runaway and homeless youth and is currently pursuing her licensure as a Licensed Chemical Dependency Counselor (LCDC).

Legal Operations Specialist - has experience as a legal secretary including at Disability Rights Texas where she was exposed to parent and child welfare cases in family and juvenile courts. She manages hearings and filings for all the attorneys and serves an administrative role for the Executive Director. She also conducts intake for the Community Legal Advocacy clients. If necessary, she will participate in CPS and other meetings in order to take notes.

Case Support Specialist – has 15 years of experience working in child welfare and also has experience as a legal secretary and working on insurance claims. Because of her ability to work on very detailed issues, she helps manage the attorneys' hourly billing and invoices to the county. Going forward, she is also responsible for making sure case information in LegalServer is correctly entered and updated.

2) *Funding* - FCAC's positive funding efforts are evidenced by their sustained operations and staff growth over the last two years, including the addition of a Parent Partner. The Executive Director also secured funding to build LegalServer, a data system, and recently added a permanent person to the team to assist with data entry and case management. Fundraising efforts are critical to the model which cannot be sustained through billable hours alone. Additionally, one challenge of legal representation in child welfare consistently cited in the literature is attorney compensation. A 2018 survey conducted by The Texas Children's Commission cited problems across Texas with caps on the total amount of hourly rates, lack of payment for out of court time, and low reimbursement rates. Fortunately, Harris County does not have a cap on total billable hours and pays an hourly rate that is at the maximum level for most counties, but still far below market rate for what the attorneys could make in a different sector. Attorneys in Harris County are also able to bill for any out-of-court time spent on case activities, including research, reviewing records, and preparation of the case. In addition, there is a flat fee paid for court hearings. In addition to a salary, FCAC pays its attorneys and social services team a travel stipend of \$300 a month, which in a geographic area as large as Harris County is important compensation.

Not billable to Harris County, but also critical to the attorneys' success, is administrative work, data entry, and preparation of billing. Even more important, and essential to the interdisciplinary model, is time spent on social services and team staffing. Therefore, the Parent Partner's assessment of a client and identification of the treatment program that best meets their needs is work FCAC must fundraise in order to cover. Also dependent on fundraising is prepetition work essential to keeping children out of foster care, but not currently reimbursable through Harris County. Ultimately, billable hours only cover approximately 50% of the organizational budget while other work must be paid for through grants, consulting fees, and donations. It is important to note that FCAC does not get any state or other governmental funding apart from what the attorneys earn through billable time on court-appointed cases in Harris County.

A recent development at the federal level may be of benefit to FCAC and other organizations around the state that wish to pursue an interdisciplinary model of representation or, at a minimum, provide better financial support to child welfare attorneys. In 2018, the Children's Bureau began permitting states to use Title IV-E money to provide "independent legal representation by an attorney for a child who is a candidate for title IV-E foster care or in foster care and his/her parent." Later, the policy included the costs of social workers, support staff, and peer partners. While the Children's Bureau intended this money to be used by states to improve the quality of representation or pilot innovative projects, states can determine how they want to use the funds. Since Texas is a county-funded system, IV-E money would have to go to DFPS, who would then in turn contract with Harris County to whom they would send the eligible funds. Harris County can then determine how those extra funds are utilized which for FCAC could include a contract to create an office of representation or to fund pre-petition work. If the county chose to move to the model of a

⁵⁰ National Association for the Counsel for Children. "U.S. Children's Bureau Permits Funding for Child and Parent Legal Representation." Available at: https://www.naccchildlaw.org/page/TitleIVforLegalRepresentation.

representation office, this would of course require judges to relinquish control of fee setting and voucher approval; however, it would allow for additional resources to be used for parent and child representation in the child welfare system.

3) Data Collection – FCAC's speedy growth did not occur on track with administrative support, including data entry. In addition, the funding to build a data system wasn't available until last year and it took at least one year to build out LegalServer so it would be prepared to hold and report all the necessary data. The organization is now able to track all case associated data for community and active CPS cases, run reports, and utilize the information in future outcome evaluations. The data (see Appendix A) includes a list of activities (i.e., hearings, meetings, visitation with clients etc.), tasks, and a range of client information all of which can be tracked by date allowing for comparison of pre and post FCAC involvement. This will allow for a future analysis of short, medium, and long-term outcomes.

Outputs:

FCAC holds monthly all-staff meetings and weekly case staffings to ensure attorneys and the Social Services

Team have collective support and the opportunity to share detailed and complex case information. Attorneys and the

Social Service Team also have a practice of attending initial client meetings together (as scheduling permits), as well as

hearings and DFPS staff meetings. What they have not integrated into their process as of the writing of this evaluation is

a formal social services report to the appointed attorney. This would create a more efficient process that would save

time for staff and possibly provide the court a clearer picture of the involvement social services has in the case to the

extent a report cannot be considered attorney work product and shared with the court.

Activities and Results

While the ABA has clearly identified standards of practice for attorneys representing children and parents in abuse and neglect cases, it also recognizes it is unrealistic for attorneys to fulfill these obligations on their own. This is one reason for the ABA's support of the Interdisciplinary Legal Model (ILM). However, it is important to recognize that quality legal representation is the foundation of an ILM. The chart below outlines the way in which the FCAC Model operationalizes the high-quality legal representation in child welfare proceedings⁵¹ and interdisciplinary legal components that enable FCAC staff to meet those standards.

⁵¹ ABA Center on Children and the Law. 2018. *Legal Representation in Child Welfare Proceedings*.

Standards of Practice	Operationalization	FCAC Model			
Understand the client's preferences, strengths, needs, and resources Promote tailored,	Communicate regularly (at least monthly and after all significant developments or case changes) with clients and in-person when possible	✓ Attempt to contact CPS caseworker, CASA, and other attorney (if GAL) within first week of appointment ✓ Review cases at onset for potential conflicts of interest	✓ Initial assessment conducted by Social Services Team and ongoing updates ✓ Attorney		
specific case plans and services Help the parent	Regularly ask all clients what would be most helpful for their case, what is working, and whether there is any service or arrangement that is not helpful,	✓ Bi-weekly attorney-client contact✓ Monthly attorney-client face-to-face meetings	assessment of Community Legal Advocacy cases ✓ Joint legal and social		
problem solve and meet case goals Build a	and why Have meaningful ongoing conversations with clients outside	✓ Identification of complex case issues ✓ Staff expertise in child welfare,	services staffing ✓ Review of affidavit by Social Services		
relationship of trust and ensure the client experiences	of court Independently verify facts contained in allegations and	✓ Regular contact with case stakeholders	Manager ✓ Case management by Social Services		
fairness Ensure the client has the	reports ✓ Explain the child welfare system and the client's rights	✓ Contact with and evaluation of kinship placements✓ Legal assessment of Community Legal	Team ✓ Informal report from Social Services		
opportunity to participate in court hearing and agency meetings	Communicate regularly with clients and in-person if possible	Advocacy referral sources and parents	staff to attorney ✓ Holding parent support groups		
Ensure the client's voice is heard and understood in proceedings Advocate for the	 ✓ Thoroughly prepare for and attend all court hearings and reviews ✓ Work with every client to identify helpful relatives for support, 		✓ Service agreements with parents and intervening parties in Community Legal Advocacy Cases		
child to maintain contact with parents, siblings, and kin	safety planning and possible placement Advocate for visitation between		✓ Engagement of Parent Partner ✓ Weekly contact		
Work with collateral contacts including education and community	parent and child Connect client with community resources		between Parent Partner/Social Services Team and client		
supports Address collateral legal issues that may affect the child welfare case			✓ Observation of parent-child visits by Social Services Team		
Ciliu wellare case			✓ Social Service Team identification of connections, family resources, and supportive resources.		

Outcomes

Survey Results (gift certificates were offered to all caregivers and biological parents who completed the full survey)

Stakeholder survey results (see Appendix B):

Stakeholders' contact information was obtained from a list of FCAC contacts, which included DFPS staff, attorneys from the Harris County Attorney's Office as well as those who are court-appointed to represent children or parents, Child Advocates, and service providers. In total, there were 59 respondents, the majority of whom were attorneys for children/parents in CPS cases (34%) followed by DFPS staff (32%). Stakeholders scored FCAC attorney competence very highly:

Attorney Areas of Competence Over 80%	Social Services Areas of Competence Over 60%
knowledge of parent and youth rights	assessing client need
familiarity with clients	supporting clients so they can be more successful in achieving goals
knowledge of the law	knowledge of available and appropriate social services clients can access
being prepared for hearing/trial	

What is most interesting to note about the difference in answers between the attorney and social services staff is the percentage of respondents who indicated that for the latter they did not know what their competencies were. This was only 3% for the attorneys (2 respondents) but 20% for social services (12 respondents). This aligns with the question regarding FCAC's model. Twenty-four percent of respondents indicated "don't know" when asked if FCAC's model of attorneys and social services staff working together promotes positive outcomes in CPS cases. This suggests that FCAC needs to devote more time to educating stakeholders about their model beyond quality legal representation and ensuring people understand how social services staff add to the work. However, 70% of respondents indicated agree or strongly agree which is a testament to the relationships FCAC has formed over the relatively short period of time they have been in operation. There were also several positive comments about social services staff from those who understood their role:

"I worked with Matilda Saragosa [Parent Partner] and she did the best she could with the client. She was responsive to me when I called. I think she went out of her way for the client."

⁵² 70% of respondents indicated agree or strongly agree.

"I think this person [social services staff] had a big impact for this mother and influenced our agreement to a reunification."

Out of 59 respondents, there were only two respondents who provided consistently negative feedback. These two individuals indicated they did not value FCAC's expertise over that of other attorneys and commented that the funding FCAC receives as a non-profit was "double dipping" in light of payments for their billable hours. These statements point to a lack of understanding about the amount and/or type of funding necessary to support quality legal representation much less an interdisciplinary model. As mentioned earlier in this report, many activities are not billable including the activities of the social services team. Therefore, it is necessary for FCAC to fundraise which does not qualify as being "paid double." Also, FCAC does not get any state funding.

The elements of the statements that refer to the quality of FCAC's work do not reflect those of the other 57 respondents. The majority of stakeholders (61%) indicated they agree or strongly agree that FCAC provides valuable advocacy and assistance for parents who have intellectual or mental disabilities, and 76% agree or strongly agree this is true when appointed for children. In addition, over 70% of respondents indicated FCAC has valuable expertise on complex issues.

Court Survey Results (see Appendix B):

Several attempts were made to reach out to court stakeholders, including family and juvenile court judges, associate judges, and court coordinators. The FCAC Executive Director also reached out with a personal request to complete the survey; however, ultimately there were only 13 responses: three from judges, four from associate judges, four

Court	Child Cases	Parent Cases
245	3	
246		1
247	4	5
257	1	
280	3	
308	1	
309	3	10
310	1	3
311	6	
312	7	4
313	5	1
314	25	19
315	64	47
Impact	42	2
Drug	1	
Gulf Coast	14	

respondent who chose to remain anonymous.
Therefore, the results cannot be generalized to all the courts. It is possible that the lack of response is due to the fact that FCAC has few open cases that crossed (either through appointment or transfer) through other courts

besides the 314th and 315th. Two points should be noted here. The first is that FCAC cannot ultimately control what court appoints them and the second is that the Harris County Juvenile Courts regularly have more CPS cases than the

Family Courts. That being said, there are opportunities for FCAC to conduct more outreach to other courts to ensure they are aware of the expertise and advanced practice FCAC can bring to CPS cases.

Those who responded to the court survey strongly agreed that the quality of legal representation FCAC provides parent clients and child clients is high.

"The court appoints FCAC on our most difficult and trouble cases and feels that upon doing so the children under our care will receive the best possible representation."

"FCAC and its attorneys are always prepared. We often appoint with our most challenging cases."

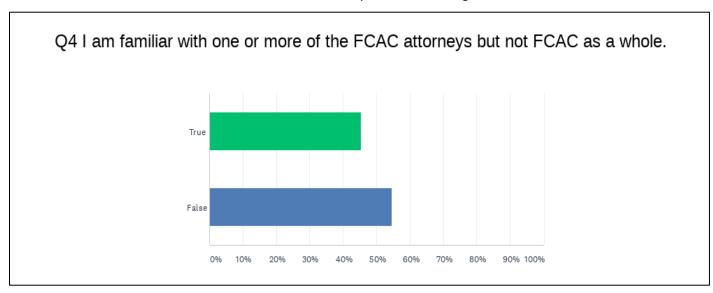
More specifically, the areas of competence that received the highest responses (above 80%) include:

- Knowledge of parental and youth rights
- Familiarity with their client
- Being prepared at hearings/trials
- Knowledge of the foster care system

Respondents also noted the areas where FCAC attorneys stood in contrast to their legal counterparts such as FCAC:

- Having greater knowledge of their parent or youth clients (58%)
- Communicating more regularly with their clients (67%)
- More clearly identifying their clients' strengths (58%)
- Being more holistic in terms of the approach they take in their cases (50%)
- Handling more complex cases (75%)

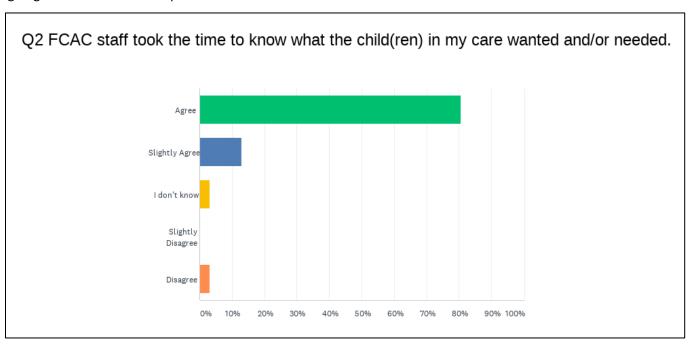
While the court surveys were positive about the performance of legal staff and indicated knowledge about the role social services staff play in obtaining information the court receives about FCAC clients, they also revealed a lack of knowledge about the FCAC model as a whole as seen in the graph below. Almost 46% of respondents indicated they were more familiar with one or more of the individual attorneys, but not the organization as a whole.

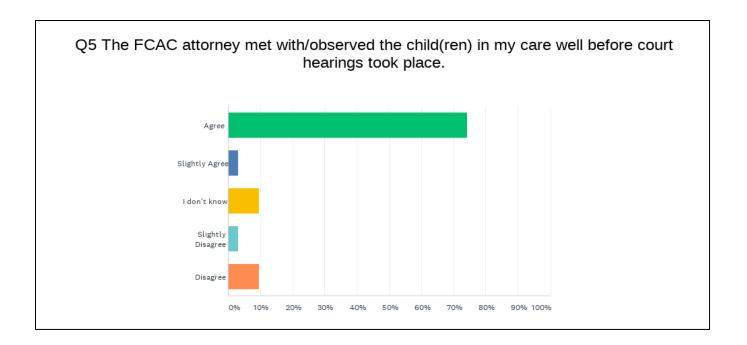


This suggests the need for additional work to be done in educating courts about what the FCAC model is and what it brings to child welfare cases that is unique from legal representation alone. This may also assist in additional courts appointing FCAC to child and parent cases. However, FCAC should ensure they have the capacity to handle the additional load that this could bring.

Caregiver survey results (see Appendix B):

There were 31 respondents including foster parents and kinship caregivers. This set of questions was directly related to FCAC's work with child clients and, overall, the results were again positive. One area that was different from previous surveys was the respondents' clear indication they understood what FCAC does that is different from other attorneys who work in the foster care system. Respondents also highlighted ways in which FCAC attorneys are aligning with evidence-based practice.





Client Survey Results:

Client surveys and focus groups give some insight into output results that have the potential to create better outcomes for clients. FCAC wanted to answer three questions regarding their clients' satisfaction:

- 1) Do our clients believe we provide quality legal representation?
- 2) Are we successful in helping clients get the services they need?
- 3) Are we successful in achieving the best case outcomes possible?

Biological Parents (see Appendix B)

The survey size of available parents (N=13) was relatively small because it excluded those who were incarcerated, for whom there was no contact information, or who had severe emotional or intellectual disabilities that precluded their ability to participate in a survey. All except one survey respondent is a current client and they all have/had the Parent Partner on their case. Survey results are followed by those qualities of representation to which they correspond.

Overall, responses were positive⁵³ and indicated that the clients surveyed believe FCAC provides quality legal representation and was helpful in connecting them to services.

"The whole team has been very helpful with both of my cases and they've given me a lot of resources."

"Matilda [Parent Partner] has been with me through the good and the bad. I really appreciate everything she does for me and the fact that she has held my hand throughout this journey."

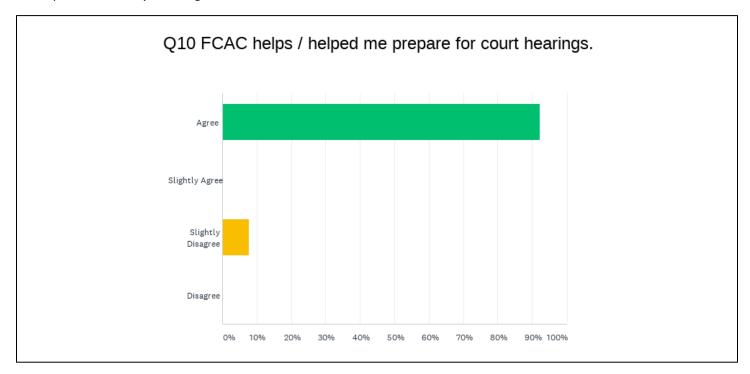
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⁵³ Only two out of thirteen respondents provided negative responses with one person responsible for three of those responses. The negative comments included not being contacted prior to a court hearing/DFPS meeting, not receiving assistance in understanding parental rights in dealing with CPS and the court, not being prepared for court hearings, and not disagreeing that the parent partner helped the individual feel they could grow or improve as a parent. While the sample is not big enough to qualify this as an anomaly the other respondents were overwhelmingly positive and it is reasonable that a parent's opinions of their attorney could heavily depend on the outcome of the case.

"[My attorney] always checks on me for updates information and lets me know if there's gonna [sic] be any changes."

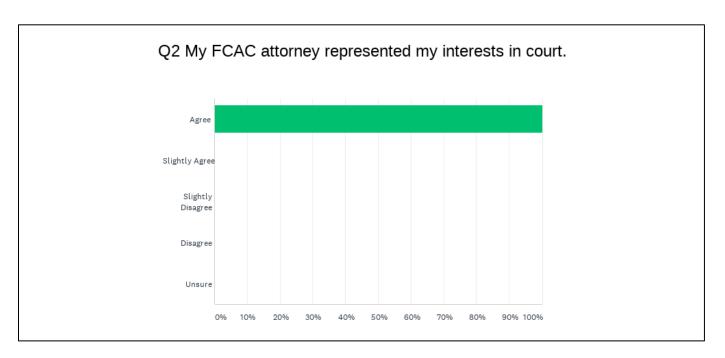
Quality Representation of Parents Whose Children are in State Custody

- Encouragement and support to attend and participate in court hearings and DFPS meetings
- Frequent and timely meetings with client



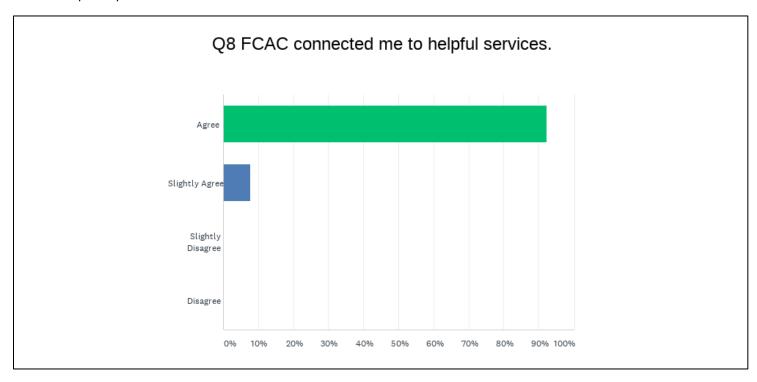
Safeguarding interests of parents and children where there are concerns about mental/intellectual capacity

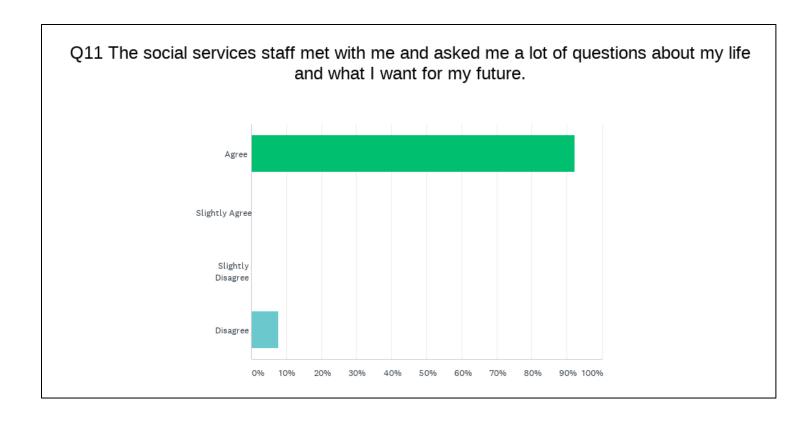
- Identification of necessary services and supports
- Advocacy in school and other settings



Social services support of parent clients

- Identification of clients' goals
- Connections to services that meet clients' goals
- Support in completing goals
- Greater participation in services





While the data necessary to illustrate the best outcomes was not available in time for this evaluation, the survey results suggest a positive trend and are clearly connected to elements of quality representation.

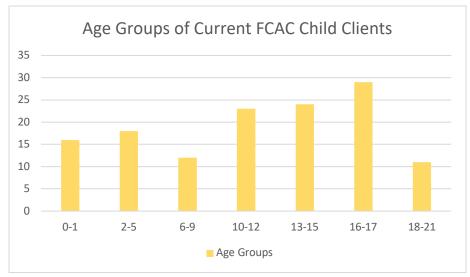
More intensive interviews and follow up would be necessary to obtain information on the nuances of biological parents' experiences with FCAC attorneys and the Social Services Team. It would also be essential to obtain a larger sample size to understand if the few negative responses were due to FCAC staff performance or to negative outcomes in the case that were associated with a CPS or court decision that was not in FCAC's control.

Child Clients (all youth who participated in the focus groups were provided a gift certificate):

The same questions posed by FCAC about parent clients were applied to child clients as well. Due to the COVID-19 pandemic it was necessary to hold virtual focus groups in order to answer the following questions:

- 1) Do our clients believe we provide quality legal representation?
- 2) Are we successful in helping clients get the services they need?
- 3) Are we successful in achieving the best case outcomes possible?

There were several other limitations associated with the youth focus groups. One was that the sample population was small given the average age of the children. Almost 70 child clients (open cases) are age 12 and under. There were a few youths under 12 selected to participate in the focus groups if they did not have significant social, emotional, or intellectual disabilities that would impede their ability to do so. There were 54 clients making up the total population of youth clients age 13 and up; however, this population was reduced again due to social, emotional, or intellectual



limitations that did not make them good candidates for a virtual focus group.

Forty-one youth and/or their caregivers were contacted by staff attorneys to notify them of the focus group to ensure they considered contact from the focus group leader as legitimate. There were three different focus groups held in order to accommodate schedules and forgotten appointments and in total 22 youth

engaged in the groups. The focus groups were conducted by the lead researcher and a young adult with personal experience in foster care.

Demographics of Focus Group Participants							
Case Status		Ages		Race/Ethnicity		Gender	
Open / trial independence	3	10	2	Black	59%	Female	50%
Open	11	11	1	Hispanic	41%	Male	50%
Closed	8	12	5				
		13	2				
		14	1				
		15	3				
		16	1				
		17	2				
		18	4				
		19	1				

Youth were presented with the following questions verbally and the questions were left on the screen. In addition, they were given the options to answer questions in the chat box and/or verbally. Questions were explained in a number of ways and youth were encouraged to ask questions if the facilitators were not clear. Follow up questions were asked if youth gave short responses. Youth were told at the beginning of the process that nothing they said would be associated with their names and it was repeated, as they were initially told by their attorneys, that nothing about their case or placement would be negatively impacted by them participating and giving certain feedback or not participating.

- 1. What do you know about the Foster Care Advocacy Center?
- 2. Do you know/remember the name of the attorney who represents you or represented you when you were in foster care?
- 3. How did you find out an attorney represented you?
- 4. My FCAC attorney made me feel... (can be more than 1)
 - 1. Important, because my attorney really listened to what I had to say
 - 2. Positive, because my attorney helped me understand what was going on
 - 3. Powerful, because my attorney helped me get some things that I wanted
 - 4. Helpless, because my attorney didn't do what they were supposed to do
 - 5. Confused, because my attorney didn't explain things to me
 - 6. Sad, because my attorney didn't visit me or answer my calls
 - 7. Prefer not to say
- 5. Did you have a way of contacting your attorney?
- 6. Did they respond to your calls, texts, emails?
- 7. Did your attorney share information such as when your court hearing was happening, when CPS was meeting, and what was happening in the case?
- 8. Did your attorney explain the rights you have in foster care?
- 9. Do you feel your attorney listened to your concerns? What did they do or say to make you feel that way?
- 10. What positive things happened to you that your attorney helped happen? How do you know that?
- 11. If you didn't feel what you wanted happened did your attorney help you understand why?
- 12. Did your attorney meet/talk with you in private (no one else but you in the room)? If not, who else was there?
- 13. Could you trust your attorney to tell CPS or the judge what you wanted them to know? How did you know they did that?
- 14. Is there anything else you would like to say?

Two major themes developed out of the focus groups: communication and understanding. Youth provided the most feedback on questions related to what, how, and when their attorneys communicated with them. Texts and phone calls were the two most frequently reported methods of communication, which the youth preferred. They seemed very clear on the role the pandemic played in preventing their attorneys from frequently visiting them in person but reported effective use of virtual and video communication as well as socially distanced visits. There were no reported problems with getting in touch with their attorney, although two youth indicated their attorney did not always get in touch with them as quickly as they would like. Those youth followed up by indicating they did not think the messages they left suggested to their attorney the matter was important to them and was not something they felt could wait. Several youths reported that their attorney talked with them on weekends or in the evening and they felt they had the freedom to reach out to their attorney any time they needed to do so. One sibling group reported their attorney eating lunch with them at school. Two different youth who were in residential treatment centers indicated their attorney consistently visited and communicated with them while they were there. Youth reported being updated on what had happened in court or at DFPS meetings and their attorneys providing them with the opportunity to attend. However, two youth indicated they felt there was more occurring in their case between hearings and they were not getting more minor details their attorney may not have felt were important. One youth reported they would like their attorney to provide more connections between everything that was happening in their case. Another youth also indicated they did not feel things that were happening in the case were being explained. Although this youth has a

diagnosed intellectual disability which may hinder their ability to understand what is being communicated, it is important for staff to examine multiple ways of attempting to communicate more nuanced information. Another youth who reported a negative experience stated that when she got in trouble at school, her attorney supported the decision the judge made to require her to attend an alternative school. She stated one of her triggers is decisions being made for her and she wishes she had been given an opportunity to make a better decision as a second chance.

The focus group participants indicated several ways they knew they were being listened to and understood by their attorney. These included their attorney writing things down and at later visits repeating details, such as friends' names or things they were previously upset about. Youth reported knowing their attorney was involved in making things happen because the youth talked a lot about seeing their siblings or living with a relative and the attorney shared details with them about how they were trying to make those things a reality. One youth commented that their attorney made them feel they were "more than just someone in foster care" because of the way she listened and provided the opportunity to ask a lot of questions.

Evaluation of Outcomes:

The data necessary to directly evaluate the impact of FCAC on its clients and their cases was not available in time for the writing of this report for several reasons. The first is that the evaluator did not have a clear understanding of how FCAC was storing time entries such as activities and other inputs. These data are necessary to determine FCAC's impact on their cases; however, based on the way it was stored over the last several years, it would have been necessary to manually review and hand-code information in hundreds of cases. The second reason the data could not ultimately be included in the evaluation is that it was not possible for FCAC to hire a full-time data entry staff person until November of 2020. Attorneys with full-time caseloads could not have devoted the hundreds of hours of staff time necessary to complete the data entry. This is particularly true in light of the fact that LegalServer did not come online until July of 2020 and the data migration process moved slowly. A positive outcome of this process is that going forward, LegalServer is equipped to collect activities separate from billing entries that will be useful in running reports and conducting data analysis.

Important missing data that could have been included but was produced too late was data on closed cases (N=100) that are essential for determining FCAC's ultimate impact.⁵⁴ In particular, the focus of future evaluations should be on longitudinal data of closed cases. For closed and open cases, data is needed on the case activities of FCAC staff (attorneys and social services), as well as the points in time in which those activities were completed. These activities include attendance at hearings and meetings (DFPS, ARD etc.), observations of parent-child visits, etc. Social service data tracking goals parents establish at the beginning of the case and the progress made on those goals is very important as well. FCAC is in the process of developing and tracking performance measures (listed below) that, paired

⁵⁴ Inputting the data into LegalServer in a timely manner would have involved manually reviewing thousands of hours of billable time and activities across over 100 closed cases.

with the thorough collection of data in LegalServer and longitudinal data, will allow for a future in-depth analysis of their impact on client outcomes.

Performance Measures

Community-Based Clients

- 1. FCAC is able to achieve the goals set by the client in 90% of cases.
- 2. The children of community clients do not enter the foster care system or the juvenile justice system.
- 3. 60-70% of determinations are changed for clients with Administrative Review of Findings hearings.
- 4. 60% of investigations are closed without DFPS removal.
- 5. A finding of Refusal to Accept Parental Responsibility (RAPR) will be prevented in 60% of the investigations opened because the child is at-risk.
- 6. Removals prevented in 75% of Family Based Safety Services cases.
- 7. 60% of clients get full custody in ongoing dependency cases.
- 8. 80% of clients have some sort of legal rights in ongoing dependency cases.
- 9. 50% of appeal cases result in successful decisions.
- 10. Clients in pre-petition cases have no CPS involvement after 1 month.
- 11. Clients in pre-petition cases have no CPS involvement after 1 year.

Court-Appointed Parent Clients

- 1. 80% of cases close with positive resolution within a year after CPS is involved (positive resolution is determined by the client).
- 2. Parent clients are able to engage in high-quality services tailored to their needs.
- 3. All parents have opportunities for meaningful engagement with their children.
- 4. A majority of parents are able to transition to unsupervised and/or home-based visitation within 6 months.
- 5. A majority of parents with substance abuse issues are able to have consistent, clean drug screens, understanding that relapse is part of recovery.
- 6. Parent clients are able to accomplish personal goals they set for themselves.

Court-Appointed Child Clients

Short-Term Success

- 1. Clients involved with the juvenile justice system do not violate the terms of their probation.
- 2. 75% of clients are able to achieve a Basic or Moderate level of care within one year.
- 3. Child clients are able to engage in meaningful and appropriate services, including receiving 100% of services denied by STAR Health.
- 4. All child clients are able to have opportunities for success in school, including an appropriate Individual Education
- 5. 60% of children are able to stay in their school of origin.
- 6. Children with a history of psychiatric hospitalizations are hospitalized no more than 1 time in the year.
- 7. 60% of clients with siblings are able to live with all siblings; 75% of clients with siblings live with at least 1 sibling.
- 8. At least 75% of child clients had no more than 1 placement move in the preceding year.
- At least 75% of child clients live in foster homes or kinship homes instead of Residential Treatment Centers or congregate care facilities.
- 10. Clients 16 and older have all vital documents, including ID, Social Security Card, and Birth Certificate.
- 11. Sibling visitation occurs regularly.

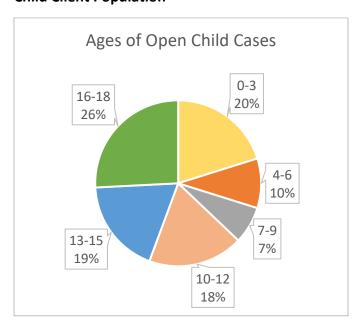
Long-Term Success

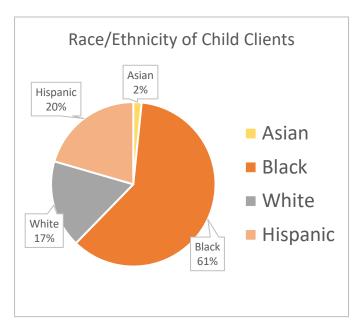
- 1. Clients are completely satisfied with FCAC representation.
- 2. FCAC clients feel like they had a voice in their case.

- 3. Once a case is closed, there are no new CPS intakes of abuse or neglect.
- 4. Children do not experience abuse or neglect while in foster care.
- 5. Children are able to thrive in their current placement.
- 6. Clients aging out of care are able to successfully transition to adulthood.
- 7. Clients only in the juvenile justice system do not enter the foster care system, and clients only in the foster care system do not become involved in the juvenile justice system.
- 8. Children have the community-based mental and behavioral health supports to be safe and stable in their community.
- 9. Children are able to exit the foster care system more quickly to a permanent family.
- 10. More children are able to be safely reunified with their parents.
- 11. Children live in their community of origin.

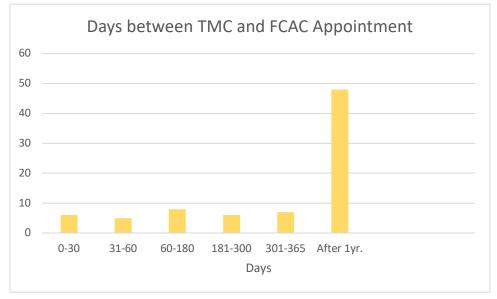
The data that was available for parents, including client demographics as well as case information, included: date the case was opened, the nature of representation (attorney *ad litem* or guardian *ad litem*), complex case issues, the stage of the case when it was opened (Temporary Managing Conservatorship [TMC], Permanent Managing Conservatorship [PMC] etc.), the originating court, any specialty court, reason for CPS involvement, disability, immigration concerns, and the Social Services Level resulting from the client's assessment. For child clients the same information was available, as well as the child's placement, level of care, and placement with siblings. In addition to better understanding FCAC's client population, select statistics were analyzed for a first glimpse at whether FCAC is serving its target populations and if there are indications its work is trending in the right direction.

Child Client Population





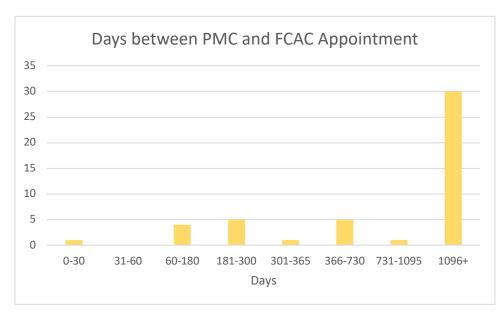
The negative impact of long-term foster care calls for the best efforts on a case to be made as soon as possible after a child comes into the state's custody. The passage of time makes it more difficult to achieve a positive permanency outcome for a child and for attorneys appointed later in a case to navigate all the previous decisions that were made. Appointment late in a case is also challenging for other stakeholders involved. One comment in the stakeholder surveys was that "it would be very helpful if the FCAC staff representing the children are appointed when the case starts and not during the middle of the case. It adds work to CPS staff by having to provide A-Z records before they can review and



start. I think if we were able to work together from the beginning of the case, the outcome may be better, and faster for purpose of offering services which can help our children." It should be noted that FCAC cannot control when they are appointed to a case.

Of those cases with a TMC date, the majority involved FCAC being appointed a year after DFPS was granted Temporary Managing

Conservatorship (TMC). However, there were 28 cases where they were appointed prior to the TMC date and three on the date of TMC.

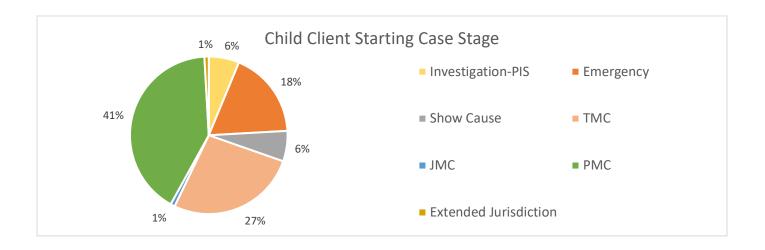


FCAC had 66 open cases with a PMC date and of those FCAC was appointed after the PMC date in 47 and before in 19. The chart to the left examines the days between PMC and FCAC appointment and indicates that in the majority of those cases, FCAC was appointed over three years after PMC was granted.

While stakeholders who know FCAC associate them with work on more

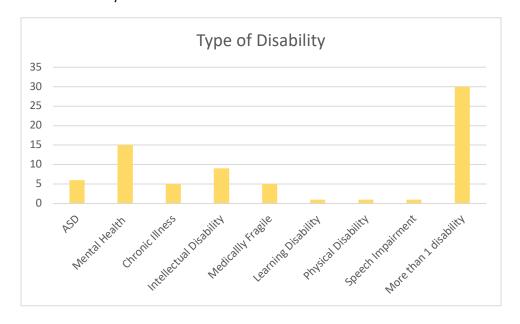
challenging cases, the case may be less challenging for everyone involved if FCAC were appointed towards the beginning of TMC or PMC and could mitigate some of the issues that make a child's placement and permanency more difficult.

While FCAC cannot control when they are appointed, better education and awareness of judges about FCAC could result in their attorneys being appointed to more cases.

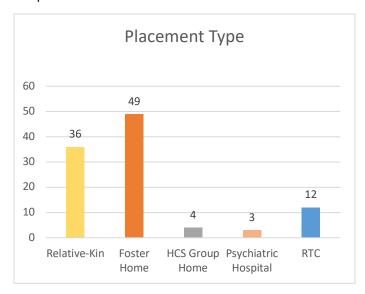


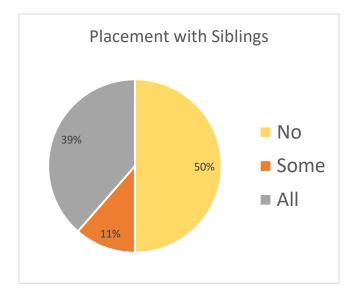
FCAC is appointed as the child's attorney in the majority of their cases followed by Co-AAL. Although a different role in the case, their appointment as guardian *ad litem* (the third highest number of their open cases) is due to a similar reason as Co-AAL, which is the judge's perception that specialized knowledge and access to resources are needed.

There is clearly a need for specialization as 61% of their child clients have a disability and the majority of those cases consist of more than one disability.



This is also reflected by the point in time level of care data as only 30% are at a Basic Level of Care. What is interesting is that despite the special needs of their clients, half are placed with some or all of their siblings and 82% (of all clients) are placed with kin or in a foster home.

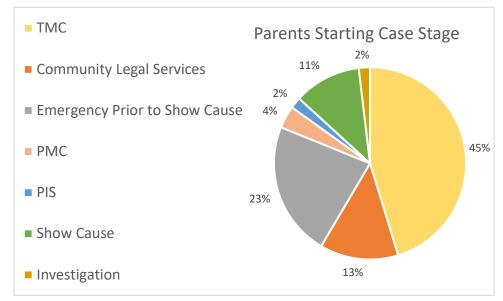




So, while FCAC is often appointed to some of the most difficult cases, the placement type and high number of children placed with siblings does not suggest that. While this evaluation cannot draw causation due to the lack of available data outlining FCAC's impact, these numbers do suggest they are trending in the right direction.

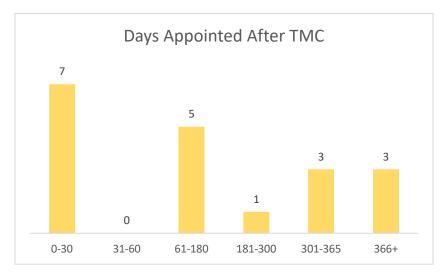
Parent Client Population

Demographics of FCAC Open Parent Client Cases								
Race		Gender		Age Range		Disability		
Black	32	Female	46	15-18	1	Yes	26	
Caucasian	7	Male	10	19-21	3	No	19	
Hispanic	6			22-29	14			
Vietnamese	1			30-40	15			
				41-50	5			
				51-60	2			



FCAC had a total of 53 open parent client cases at the time this report was written. There were seven (13%) open at the Community Legal Services Stage which represents an opportunity to prevent children from becoming involved (or involved for a second time) in the CPS system. And 23% were opened at the Emergency Hearing prior to the Show Cause, ideally providing more of an

opportunity for the children to return home or have a more positive placement. The majority started in the TMC stage, which is to be expected; however, of the cases where the state was granted TMC (N=33) 36% became FCAC clients 60 days after the TMC date. FCAC cannot control when the courts appoint them, so it is important for the courts to note the expertise of the FCAC attorneys and Social Services Team that are going unused for that time period. A lot of critical events take place within the first 60 days after DFPS is granted TMC including development of service plans and visitation schedules. And there are relatively short time frames in place for parents to address very serious issues. The positive outcomes research associates with a model such as FCAC, make it desirable for the courts to appoint them as soon as possible in the life of a case.



Almost every current open parent case includes multiple complex case issues with 18 listed with substance abuse, 29 as mental/behavioral health, and 11 as an Intellectual or Developmental Disability (IDD). This illustrates the type of challenging issues parents present with when on the cusp of or in the child welfare system; complex issues that require a great deal of specialized time and attention to increase the possibility of positive outcomes. FCAC appears

to judiciously recognize this need as almost 40% of the parent clients have some level of social services involvement with the majority of those at level four. This means that the client requires weekly face to face contact in the home and the Parent Partner or Social Service Director must participate and attend court hearings, DFPS meetings, and other case related services. FCAC staff also ensure they observe at least one family visit per month. Nineteen of the 54 cases are assigned to the Parent Partner although that is due to randomization and not assessment conclusions that determined there was not a need for a Parent Partner in other cases.

Key Findings

***** FCAC is serving its intended target population.

The organization indicates that "one of [its] primary functions...is to accept court appointments for complex cases that require traditional legal advocacy during the state child welfare proceedings and additional time and attention to ancillary issues that affect the wellbeing of the child and the outcome of the case." It is clear through the perceptions of stakeholders as well as the data about their clients that FCAC is meeting this goal.

Input of data into LegalServer needs to be a top priority.

The greatest limitation of this study was the inability to fully evaluate the impact of FCAC's work. That was due to the lack of data comprehensively recorded in one location throughout most of the time period allotted for this evaluation. As of the completion of this report, FCAC has a full-time data entry clerk that is working to ensure all their data is located in LegalServer. This is critical to future evaluations that can more definitively illustrate FCAC's work is producing intended results. The cost, careful consideration, and arduous amount of hours needed to build and enter data into a system of this nature are important lessons for those who want to develop an organization like FCAC.

❖ The limited available data indicates FCAC's work is trending in the right direction.

FCAC staff have the tenure and subject matter expertise to appropriately handle the nature of the cases appointed to them and provide both legal and social services support through the Social Services Director, Parent Partner, and social work interns. Despite the limited data, survey results and client output data (sibling placement, placement type) indicate FCAC is adhering to criteria of good practice. Both child and parent clients overall reported feeling heard, having their wishes respected, understanding their rights, and receiving support necessary to get the help they needed. Although the client sample populations were not large enough to generalize results to the whole population preliminary results are positive.

FCAC needs to increase its capacity to collect and enter data and expand stakeholders' knowledge of and relationship with the organization.

The literature recommends anywhere from 50-100 cases depending on attorney capacity, types of cases, and in the case of children, whether there are multiple children per case. The Family Justice Initiative recommends no more than 60 to ensure quality representation.⁵⁵ Currently FCAC staff attorneys are averaging 50 cases apiece with the supervising attorney and ED at 40. While not over the limit, context is important. As part of an interdisciplinary best practice model, they must have the time necessary to integrate all the information they receive to meet their clients' legal and social service needs which are considerable given they navigate incredibly difficult systems for some of the most vulnerable populations of children in foster care. As knowledge of their work grows, demand for their services will probably grow so additional staff will be needed in the near future.

Additional staff will also allow the ED to offload some of her cases so she can conduct more outreach. Indications from the surveys point to a need for greater awareness about how FCAC's interdisciplinary model extends beyond

⁵⁵ Family Justice Initiative. 2019. *Attributes of High-Quality Legal Representation for Children and Parents in Child Welfare Proceedings*. Available at: https://familyjusticeinitiative.org/wp-content/uploads/sites/48/2019/01/FJI-Attributes-Fact-Sheet.pdf.

quality legal representation. Outreach can also help to expand funding streams which will assist in the increase in appointments and referrals that will undoubtedly come with increased awareness about the organization. One additional improvement that may assist in this endeavor is building reporting and communication protocols that relay the work of the Social Services Team to other stakeholders on the case (within the bounds of confidentiality).

FCAC should limit its expansion into Community Legal Advocacy cases particularly those with kinship caregivers until it has additional staff.

One of the primary areas of FCAC's Community Legal Advocacy work is with kinship caregivers who need legal and other supports to sustain the placement of a relative child in their home. There is a significant need for this service in Harris County and across the state of Texas. However, there is only one legal staff attorney assigned to these cases and she currently carries a post-petition caseload. FCAC needs to cautiously approach making the public more knowledgeable about this service until the organization is fully prepared to address the workload.

Evaluation Limitations and Conclusion

This evaluation is unique in that it provides an in-depth review of the way in which the first nonprofit multidisciplinary model of child welfare representation in Texas has been implemented. However, the organization is relatively young and has had little time to build the breath of resources needed for capacity to match demand. At the start of this evaluation, FCAC had only been operating since June of 2018 with the full complement of staff since December of 2019.⁵⁶ The most accurate analysis of outcomes should ultimately come from longitudinal data associated with the complete model including follow up six months and a year after the case has been closed. Another limitation related to resources is that the Executive Director of FCAC has a caseload which limits the time she can dedicate to the growth of the organization, including organizing the data the staff collect. This includes client contact information, which was not centrally located and easily accessed by the evaluator, as well as all of the data items necessary for an outcome analysis. Time constraints of staff, all carrying full caseloads, contributed to these delays as they needed to compile the contact information they had on hand and engage in several meetings to customize and develop all the components of LegalServer. LegalServer was not fully online until July of 2020 and it was not possible for FCAC to hire a full-time data entry person until December of 2020. Prior to LegalServer, staff were keeping data in Excel spreadsheets as well as a data system called MyCase, which is primarily where closed case information was held. Neither of these systems had the capacity to contain the breadth and depth of information contained within each case, including the multitude of events, tasks, activities, issues, goals and outcomes, and performance measures. The pandemic further impacted the evaluation due to shutdowns and shifts in operations. Moving to a completely virtual environment also impacted the efficacy of the youth focus groups. Utilizing Zoom did not allow for the facilitator to fully interact with the youth using the variety of methods that would have provoked a more detailed response.

However, this evaluation has provided the first overview of the way in which FCAC operates and points to changes they can make in the future to strengthen their work and the evaluation of it. Despite the challenges they have

⁵⁶ Tara Grigg Green (formerly Garlinghouse) began operating FCAC in June of 2018 and hired her first staff attorney six months later. The head of social services began in January of 2019, her supervising attorney in March of 2019, the Legal Operations Specialist in August 2019, and the Parent Partner and the most recent staff attorney both in December of 2019.

faced and need to overcome, FCAC has accomplished a great deal for an organization that is a little over two years old. It started with one attorney with the idea of an interdisciplinary model and has grown to a comprehensive legal and social services staff with an annual budget of over \$750,000 in income⁵⁷ operating in the largest county in the state. The research is clear that models of this kind benefit children and parents involved in the child welfare system and lead to better and quicker outcomes. In a system that is constantly taxed and berated for poor outcomes, it may be time for a new look at expanding interdisciplinary models such as the one operated by the Foster Care Advocacy Center.

⁵⁷ For Fiscal year 2020 and expenses totaling \$607,685.25.

Appendix A

Data for Entry into LegalServer

COURT CASE

Case-Specific Information

- Cause number
- Individual Number
- County
- Court
- Case style
- Case stage
 - Investigations
 - o FBSS
 - Participation in Services
 - Adversary
 - o Status
 - Permanency
 - o Trial Bench Trial
 - o Trail Jury Trial
 - o PMC
 - o Trial Independence
 - Extended Foster Care
 - Adoption
- Date initial petition filed
- Date removal granted
- Date parents' rights terminated (if applicable)
- Date PMC to agency (if applicable)
- Dismissal date
- Extended (Y/N)
- Date appointed
- All parties (ideally these people are contacts somewhere else that can be plugged in)
 - County Attorney
 - Child's Attorney
 - Guardian Ad Litem child
 - Mother's Attorney
 - Father's Attorney
 - Father 2 Attorney
 - Unknown Father Attorney
 - o GAL for Parent
 - DFPS worker
 - DFPS supervisor
- Nature of representation
 - Attorney for child
 - Co-attorney for child
 - Guardian ad litem for child
 - o Co-guardian ad litem for child

- Attorney for mother
- o Co-attorney for mother
- o Guardian ad litem for mother
- Co-guardian ad litem for mother
- Attorney for father
- Co-attorney for father
- Guardian ad litem for father
- o Co-guardian ad litem for father
- o Amicus for adoption
- Attorney for adoptive parent
- o Retained for mother
- Retained for father
- Reasons for DFPS involvement
 - Parent drug use
 - Alcohol
 - Marijuana
 - Opioids
 - Other
 - Neglectful supervision
 - Child injured
 - Child abused
 - Left child unattended
 - Parent disability
 - Mental illness
 - Intellectual disability
 - Physical disability
 - Chronic illness
 - Parent incarcerated
 - Physical abuse/unexplained injury
 - Sexual abuse
 - o Medical abuse
 - Dental abuse
 - Educational neglect
 - Medical neglect
 - Inadequate housing
 - Dirty house
 - Homelessness
 - Child abandonment
 - Refusal to accept parental responsibility
 - Left child in psych hospital
 - Left child in JJ facility
 - Child behavior
 - Needs medical services
 - Parent hospitalized
 - Pysch hospital
 - Medical hospital

- o Domestic violence
- o Other
- Aggravated circumstances
 - o Yes
 - o No
- Date case closed

CHILD CLIENTS

Child Information (collect at beginning of case)

- Date of birth
- Age
- Race/ethnicity
- Gender
- Country of citizenship
- Primary language
- Other Languages
 - o Spanish
 - o Other
- Zip code of removal
- Number of placements before FCAC appointment
- Level of care at FCAC appointment
 - o Basic
 - Moderate
 - Specialized
 - o Intense
- Placement type at FCAC appointment
 - Parents
 - Relative
 - Authorized
 - Unauthorized
 - Fictive Kin
 - Authorized
 - Unauthorized
 - o Foster Home
 - o Group Home
 - o RTC
 - Psych Hospital
 - Medical Hospital
 - Without Placement
 - o HCS Home
 - HCS Group Home
- Placement zip code
- Placed with sibling(s)
 - Yes
 - o No
 - o NA
- Case stage at FCAC appointment

- o Investigations
- o FBSS
- Participation in Services
- o TMC
- o Trial
- PMC with termination
- PMC without termination
 - Mother
 - Father
 - Both
- o Adoption
- Number of psych hospitalizations before FCAC appointment
- Type of case at appointment
 - Serious mental illness/Emotional Disturbance
 - o IDD/Developmental Disability
 - o Refusal to accept parental responsibility
 - o Juvenile Justice involvement
 - Serious Medical Needs
 - Medicaid denied services
 - Therapy
 - Private Duty Nursing
 - Durable Medical Equipment
 - Special education
 - School discipline
 - Teen parent
 - o Placement Issues
 - Psychiatric hospitalization
 - o Services needed
 - Teen drug use/infant drug addiction
 - Youth aging out of care
 - Sexual abuse
 - o Trafficking
 - o Physical abuse
 - o GLBTQ
 - o Regular wheel appointment

Child Data to Collect During Case (ongoing and changing)

- Issues that arise during case
 - o IDD
 - Juvenile Justice involvement
 - Medicaid denied services
 - Therapy
 - Private Duty Nursing
 - Durable Medical Equipment
 - Medical Procedure
 - Special education
 - School discipline

- Teen parent
- Child in psych hospital
- Child without placement
- Needs psychological evaluation
- Needs psychiatric evaluation
- Needs therapeutic services
- Teen drug use
- Sexual abuse
- Trafficking
- o Physical abuse
- o GLBTQ
- Level of care
 - o Basic
 - Moderate
 - Specialized
 - o Intense
- Placement type
 - Parents
 - Relative
 - Authorized
 - Unauthorized
 - Fictive Kin
 - Authorized
 - Unauthorized
 - Foster Home
 - o Group Home
 - o RTC
 - o Psych Hospital
 - Medical Hospital
 - Without Placement
 - o HCS Home
 - HCS Group Home
- Number of placement moves
- Placement zip code(s)
- Placed with sibling(s)
 - o Yes
 - o No
- Case stage
 - Investigations (date)
 - Participation in Services (date)
 - o TMC (date)
 - o PMC with termination (date)
 - o PMC without termination (date)
 - Mother
 - Father
 - Both
 - Trial independence (date)
 - Extended foster care (date)
- Number of psych hospitalizations
 - Length of stay
 - o Reason of admission

- Number of runaway attempts
- Juvenile Justice involvement
 - o Reason
 - Disposition
- Abuse while in care
 - o Physical abuse
 - Sexual abuse
- Perpetrator of abuse
 - o Parent
 - o Relative/Kin
 - Foster Parent
 - o RTC Staff
 - Sibling
 - Foster Sibling
 - o Child in RTC
 - o Child in Shelter
 - Child in Point of Entry/Office
 - Other child
 - Stranger
- Location of abuse
 - o Home
 - o Relative/Kinship home
 - o Foster home
 - o RTC
 - o Shelter
 - Point of Entry/Office
 - Runaway
 - JJ Facility
- Diagnoses
 - Bipolar
 - o PTSD
 - o ADHD
 - Autism
 - o IDD
 - \circ ODD
 - o IED
 - o Schizophrenia
 - Asthma
 - Diabetes
 - Other
- Medication (What Medication)
- Type and frequency of therapy
- Serious behavioral incidents in the home
- Serious behavioral incidents at school
- Grade level
- School
- Special education
 - o Needs evaluation
 - o 504 services
 - o IEP because:
 - ED

- IDD
- Autism
- ST
- SLD
- Has a BIP
 - Yes
 - No
- ST frequency
- OT frequency
- Counseling frequency
- School discipline issues/disciplinary placement

Child Case Goals – Short-Term – (Include a box to check when complete and a box for completed date)

- Stable placement
 - o Same placement for 6 months
 - Same placement for 1 year
 - Same placement for 1.5 years
 - Same placement for 2 years
 - Same placement for 2.5 years
 - Same placement for 3 years
 - Same placement for 5+ years
- Length of time without psych hospitalization
- Length of time without serious behavioral incident
- Secure appropriate psychological evaluation
- Secure appropriate psychiatric evaluation
- Medication review
- New treatment provider
 - Therapy
 - o PCP
 - Psychiatrist
 - o OT/PT/ST
- Connect with state services
 - Mental Health Authority
 - o ECI
 - o DID evaluation
 - DADs application
- In-home support
- Wraparound services
- Special education
 - Initial evaluation
 - o New FIE
 - o IEE
 - o BIP
 - o Additional or different services
 - Different educational setting
 - Services in psych hospital
- Secure services

- ST/OT/PT
 - Eval
 - Services
- Private duty nursing
- Durable medical equipment
- o ABA
- Play therapy
- Trauma-based therapy
- Personal care services
- Family therapy
- o Well-woman
- Other medical treatment
- New placement
 - o HCS home
 - HCS group home
 - Therapeutic foster home
 - o Different RTC
 - Regular foster home
 - o Pre-adoptive home
 - Exit psych hospital
- Placement with sibling(s)
- Placement with relative
- Placement with kin
- Placement with parent
- Contact with parent
 - o Phone
 - Family therapy
 - Supervised visitation
 - o Unsupervised visitation
 - Day visits
 - Weekend visits
- Sibling visitation
- Family visitation
- Normalcy activity
- School stability with ESSA
- SSI application
- Job/vocational development
- GED
- Post-CPS housing/transitional living

Child Case Goals - Long-Term

- Avoid removal
- Family safety plan
- Reunification with parents
- Placement with relatives
 - o PMC
 - o Adoption
- Placement with kin
 - o PMC

- o Adoption
- Unrelated adoption
- Long-term community placement (IDD)
- Successful transition to adulthood

PARENT CLIENTS

Parent Information (collect at beginning of case)

- Date of birth
- Age
- Race/ethnicity
- Gender
- US Citizen/National origin
- Primary language
- Zip code
- Custodial/offending parent
- Former foster youth
- Teen parent
- Prior CPS involvement
 - Investigations
 - o FBSS
 - o Participation in Services
- Prior removals
- Prior terminations
- FBSS in this case
- Safety plan in place
- Number/age of children in this case
- Parent disability
 - o IDD
 - Autism
 - Mental illness
 - Physical disability
 - Chronic illness
- · Other parent disability
 - o IDD
 - o Autism
 - Mental illness
 - Physical disability
 - Chronic illness
- Child(ren) disability
 - o IDD
 - o Autism
 - Mental illness
 - Physical disability
 - o Chronic illness
- Educational attainment
- Employment
- Income
- Marital status

- Household size
- Kinship support at beginning of case
- Child placement at FCAC appointment
 - Parents
 - o Relative
 - Authorized
 - Unauthorized
 - Fictive Kin
 - Authorized
 - Unauthorized
 - Foster Home
 - o Group Home
 - o RTC
 - o Psych Hospital
 - o Medical Hospital
 - Without Placement
 - o HCS Home
 - HCS Group Home
- Case stage at FCAC appointment
 - Investigations
 - o FBSS
 - Participation in Services
 - o TMC
 - Trial
 - PMC without termination
 - Mother
 - Father
 - Both
 - Adoption
- Type of case at appointment/retention
 - o Retained investigations
 - Retained FBSS
 - Retained adversary/removal
 - o Retained TMC
 - o Retained trial
 - Retained PMC
 - Serious mental illness
 - o IDD
 - Physical disability/chronic illness
 - Refusal to accept parental responsibility
 - Left child in psych hospital
 - Left child in JJ facility
 - Child behavior
 - Needs medical services
 - Physical abuse
 - Sexual abuse
 - o Parent incarcerated
 - Drug abuse
 - o Regular wheel appointment

Service Plan

- Components
- Date completed
- Provider
 - DFPS referrals
 - o Client selected
- Accommodations requested
- Accommodations received
- Objections to service plan

Drug Test Results

- Has client missed a drug test?
- Hair
 - o Fill in the blank
- Urine
 - o Fill in the blank
- Other
 - o Fill in the blank

Parent Case Goals Short-Term

- Accommodated services
- Visitation
 - Increased supervised visitation
 - Supervised by friend/relative
 - Unsupervised visitation
 - o Increased unsupervised visitation
 - o Day visits
 - Weekend visits
 - Restrict other parent access
- Monitored return
- Participate in medical decisions
- Participate in educational decisions
- Complete parenting classes
- Complete individual therapy
- Complete drug rehab
- Drug counseling
- Find community resources
 - Mental health
 - o IDD
 - Other support services
- Find housing
- Employment
- Obtain psych meds
- Medication management
- SSI application
- Medicaid application
- Apply for other government benefits

- Successful discharge from psych hospital
- Successful discharge from medical hospital
- Complete terms of probation
- Family therapy
- Participate in treatment with child
- Identify treatment providers for child

Parent Case Goals Long-Term

- Avoid removal
- Family safety plan
- FBSS
- Participation in Services
- Reunification
- Placement with relatives
- Placement with kin
- PMC to agency
- JMC without agency involvement
- Relinquish for adoption
- Adoption (if representing parent in adoption proceeding)

STAFF ATTORNEY TASKS

- Phone call/electronic communication
 - Client
 - Attorneys
 - Co-counsel
 - Child's AAL
 - Child's GAL
 - Mother's AALMother's GAL
 - Father's AAL
 - Father's GAL
 - County Attorney
 - Other attorney
 - o DFPS
 - Investigator
 - FBSS worker
 - DFPS worker
 - DFPS supervisor
 - DFPS PD
 - DFPS regional staff
 - DFPS state office staff
 - Parent
 - Foster parent
 - o Family/kinship resource
 - Family/kinship placement
 - RTC staff
 - Psych hospital staff

- Medical provider
 - PCP
 - Therapist
 - OT/ST/PT
 - Psychiatrist
 - Treatment coordinator
 - Other treating physician
- School
 - School official/Sped director
 - Teacher/school counselor
 - School attorney
- Medicaid
 - Superior staff
 - Superior attorney
 - HHSC staff
 - Hearings Officer
- Email
 - Client
 - o Attorneys
 - Co-counsel
 - Child's AAL
 - Child's GAL
 - Mother's AAL
 - Mother's GAL
 - Father's AAL
 - Father's GAL
 - County Attorney
 - Other attorney
 - o DFPS
 - Investigator
 - FBSS worker
 - DFPS worker
 - DFPS supervisor
 - DFPS PD
 - DFPS regional staff
 - DFPS state office staff
 - Parent
 - Foster parent
 - Family/kinship resource
 - Family/kinship placement
 - o RTC staff
 - Psych hospital staff
 - Medical provider
 - PCP
 - Therapist
 - OT/ST/PT
 - Psychiatrist
 - Treatment coordinator
 - Other treating physician
 - School
 - School official/Sped director

- Teacher/school counselor
- School attorney
- Medicaid
 - Superior staff
 - Superior attorney
 - HHSC staff
 - Hearings Officer
- Conversation/case staffing
 - o Client
 - o Attorneys
 - Co-counsel
 - Child's AAL
 - Child's GAL
 - Mother's AAL
 - Mother's GAL
 - Father's AAL
 - Father's GAL
 - County Attorney
 - Other attorney
 - o DFPS
 - Investigator
 - FBSS worker
 - DFPS worker
 - DFPS supervisor
 - DFPS PD
 - DFPS regional staff
 - DFPS state office staff
 - Parent
 - Foster parent
 - o Family/kinship resource
 - Family/kinship placement
 - o RTC staff
 - Psych hospital staff
 - Medical provider
 - PCP
 - Therapist
 - OT/ST/PT
 - Psychiatrist
 - Treatment coordinator
 - Other treating physician
 - School
 - School official/Sped director
 - Teacher/school counselor
 - School attorney
 - Medicaid
 - Superior staff
 - Superior attorney
 - HHSC staff
 - Hearings Officer
- Visit
 - Client

- Foster parent
- Biological parent
- o Family/kinship
- Service provider
- Observe child-parent visitation
- Review records
 - Juvenile Justice
 - Therapy
 - Psychological
 - o Psychiatric/mental health
 - OT/PT/ST eval/treatment notes
 - Medical records
 - Educational
 - Other service provider
- Prepared records request
 - Juvenile Justice
 - Therapy
 - Psychological
 - o Psychiatric/mental health
 - OT/PT/ST eval/treatment notes
 - Medical records
 - Educational
 - Other service provider
- Prepare/file legal documents
 - o File answer
 - File counterpetition
 - File motion
 - Services
 - Visitation
 - Placement
 - Sanctions
 - Other
 - Brief
 - Proposed order
 - Discovery
- Review case documents
 - Pleadings
 - o DFPS reports
 - CASA reports
 - Discovery
- Prepared for hearing
 - Uncontested
 - Contested
 - Subpoenaed witnesses
 - Deposition
 - Bench trial
 - o Jury trial
- Participate in court proceeding
 - o Mediation
 - Contested Adversary
 - Adversary

- Status
- Permanency
- o PMC
- Adoption
- Special Status Hearing
- o Entry
- Bench Trial
- Jury Trial
- Prepared demand letter/letter for services
 - o School
 - Psych hospital
 - o HHSC
 - Superior
 - Medical hospital
- Special education
 - o Requested initial evaluation
 - o Participated in initial ARD
 - Participated in transfer ARD
 - o Participated in Annual/30-day ARD
 - o Participated in other ARD
 - o Participated in MDR
 - Requested IEE
 - Requested new FIE
- School discipline
 - o MDR
 - o Informal meeting
- Medicaid Fair Hearing
- Administrative Hearing
- Case planning/treatment team meeting
 - HCS Person Developed Plan
 - o RTC treatment team
 - Team staffing
- Participate in DFPS meeting
 - Family Group Conference
 - o Family Team Decision Making
 - Circle of Support
 - Permanency Conference
 - o Transition Plan Meeting

STAFF SOCIAL WORKER TIME TRACKING

- In take
- Referrals
 - Housing
 - o Mental Health
 - Substance Abuse
 - Employment
 - Legal
 - o Education
 - Advocacy

- o Other
- Home visits
- Counseling
- Education
 - Advocacy
 - o Applications
 - o Other
- Medicaid/Medicare
- Income Assistance
 - o Public Benefits
 - o Employment
 - o Other
- Paperwork
 - o Client Paperwork
 - Internal

INVOICES

- Billable time to county
 - Out of court time to one-tenth of an hour
 - Flat fee for court appearances
- Low-bono and pro-bono clients
 - Sliding scale retainer/fees
- Expert fees
- Consulting fees

COLLECT AT END OF CASE

- Length of time FCAC on the case
- Total length of time in care
- Placement moves before and after FCAC
- Hospitalizations before and after FCAC
- Case closure
 - o Reunification
 - Case dismissed
 - o Parent relinquishment
 - o Parent terminated
 - o Appointment dismissed by court
 - o Child adopted
 - o PMC to relative
 - o Child aged out
- Does child come back into care?
- Unmet Goals, Why?

DONORS

- Contact information
- Donation amount

- Frequency of donation
- Methods/date of contact?

GRANTS

- Date of application
- Project requested
- Length/amount/purpose of award
- Officer contact

COMMUNITY RESOURCES/CONTACTS

Appendix B

Stakeholder Survey Questions

1)	/hat is your role? .CPS .Harris County Attorney's Office Child Advocate .parent attorney .child attorney service provider other (please specify):
2)	you answered CPS in the first question, please select your more specific role: FBSS Investigator Kinship Development Worker CVS Adoption Prep Supervisor, PD, or PA
3)	am more familiar with one or more of the attorneys but not FCAC as a whole. true false
4)	knowledge of parental and youth rights familiarity with their client knowledge of the law bringing important issues to the attention of the judge being prepared at hearings/trial knowledge of the foster care system knowledge of other systems, like Medicaid, education, and Home and Community Based Services I don't know none of the above
5)	CAC social services staff show competence in the following areas (select all that apply): assessing client need supporting clients so they can be more successful in achieving goals knowledge of available and appropriate social services clients can access knowledge of the foster care system keeping stakeholders aware of what is happening with the parent or child I don't know none of the above

- 6) Overall, the quality of legal representation FCAC provides parent clients is high.
 a. Strongly agree
 b. Agree
 c. I don't know
 d. Disagree
 e. Strongly disagree
- 7) Overall, FCAC provides high quality legal representation to child clients.
 - a. Strongly agree
 - b. Agree
 - c. I don't know
 - d. Disagree
 - e. Strongly disagree
- 8) FCAC attorneys seem to:
 - a. have greater knowledge of their parent or youth clients
 - b. communicate more regularly with their clients
 - c. more clearly identify their clients' strengths
 - d. be more holistic in terms of the approach they take in their cases
 - e. handle more complex cases
 - f. I don't know
 - g. none of the above
- 9) FCAC's model of attorneys and social services staff working together promotes more positive outcomes in CPS cases
 - a. Strongly agree
 - b. Agree
 - c. I don't know
 - d. Disagree
 - e. Strongly disagree
- 10) Please insert any additional comments below

Court Survey Questions

- 1) What is your role?
 - a. Judge
 - b. Associate judge
 - c. Court staff
- 2) I preside over/work in the following court (you may leave this blank if you wish to remain anonymous):
- 3) Please incdicate which FCAC attorneys you are familiar with:
 - a. Tara Grigg Garlinghouse
 - b. Dani Rosenblum
 - c. Celina Recalde
 - d. Tiffany Cebrun

- 4) I am familiar with one or more of the FCAC attorneys but not FCAC as a whole.a. trueb. false
 - 5) FCAC attorneys show competence in the following areas (circle all that apply)
 - a. Parental and youth rights
 - b. Knowledge of their client
 - c. Knowledge of the law
 - d. Bringing important issues to the attention of the judge
 - e. Prepared at hearings/trial
 - f. Knowledge of the foster care system
 - g. Knowledge of other important systems, like Medicaid, education, and HCS services
 - 6) Overall, the quality of legal representation FCAC provides parent clients is high
 - a. Strongly Agree
 - b. Agree
 - c. I don't know
 - d. Disagree
 - e. Strongly Disagree
 - 7) Overall, the quality of legal representation FCAC provides child clients is high
 - a. Strongly Agree
 - b. Agree
 - c. I don't know
 - d. Disagree
 - e. Strongly Disagree
 - 8) I understand the role the FCAC social services staff plays in the information the court receives
 - a. Strongly Agree
 - b. Agree
 - c. Slightly Agree
 - d. Slightly Disagree
 - e. Disagree
 - f. Strongly Disagree
 - 9) In contrast to their legal counterparts, FCAC attorneys seem to
 - a. have greater knowledge of their parent or youth clients
 - b. communicate more regularly with their clients
 - c. more clearly identify their clients' strengths
 - d. be more holistic in terms of the approach they take in their cases
 - e. handle more complex cases
 - f. IDK
 - g. none of the above
- 10) Please provide any additional comments about FCAC staff and/or the work of the organization.

Caregiver Satisfaction Survey

(all potential responses were Agree; Slightly Agree; I don't know; Slightly Disagree; Disagree)

- 1) I understand what FCAC does, that is different from other attorneys who work in the foster care system
- 2) FCAC staff took the time to know what the child(ren) in my care wanted and/or needed
- 3) FCAC staff helped the child(ren) in my care get the services and supports they needed
- 4) If I had other choices, I would still have selected FCAC to represent the child(ren) in my care.
- 5) The FCAC attorney met with/observed the child)(ren) in my care well before court hearings took place
- 6) The FCAC attorney privately met with children) in my care NA (if child was/is non-verbal)
- 7) The children in my care were able to get in touch with FCAC staff when they needed to do so NA (if child was/is non-verbal)
- 8) FCAC attorneys were more helpful than other attorneys who've worked with children I've cared for
- 9) It was easier for me or the children in my care to have contact with the FCAC social services team than with their FCAC attorney
- 10) Please include any additional comments about FCAC in this box.

Parent Satisfaction Survey

(all potential responses for question 2-11 were: Agree; Slightly Agree; Slightly Disagree; Disagree; Unsure)

- 1) FCAC staff I had/have contact with (select all that apply):
 - a. Matilda was/is my parent coach
 - b. Shantrell connected me to social services
 - c. I was/am represented by an FCAC attorney
 - d. Name of FCAC Attorney
- 2) My FCAC Attorney Represented my Interests in court.
- 3) My FCAC attorney kept me informed about what was happening in my case.
- 4) I felt FCAC staff respected my wishes about what I wanted for myself and my child(ren).
- 5) My FCAC lawyer did not wait until the day of the court hearing or CPS meeting to meet with me. They met with me in advance.
- 6) My FCAC lawyer helped me understand my rights in dealing with CPS and the court.
- 7) My FCAC lawyer helped me understand my rights in dealing with CPS and the court.
- 8) I could get in touch with FCAC when I really needed to do so.
- 9) FCAC connect me to helpful services.
- 10) My FCAC Parent Partner helps/helped me feel I can grow or improve as a parent.

- 11) FCAC helps/helped me prepare for court hearings.
- 12) The social service staff met with me and asked me a lot of questions about my life and what I want for my future.
- 13) Please include any additional information about your FCAC attorney, social service staff or parent partners.