

# Standardizing Assessments of Children in the Child Welfare System

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*Charge #13 - Study the type, duration, frequency and effectiveness of mental health services available to and accessed by abused and neglected Texas children. Recommend strategies to address the impact of the trauma and enhance therapeutic services available to this population in an effort to eliminate the cycle of abuse and neglect.*



**TEXANS CARE**  
*for* **CHILDREN**

### *MISSION*

Texans Care for Children is a statewide nonpartisan, nonprofit advocacy organization dedicated exclusively to the children of Texas. We look to our broad base of community-based experts—our partners who together represent thousands of Texas children—to inform our work and help us in developing our legislative agenda. We facilitate various stakeholder forums including the Texas Children’s Mental Health Forum and Partners in Child Protection Reform. Our areas of focus are: family economic security; infant, child and maternal health; children’s mental health; child welfare; and juvenile justice.

# Partners in Child Protection Reform

## (formerly Partners in CPS Reform)

### ***Mission***

Partners in CPS Reform studies the issues related to reform, facilitates communication between child welfare organizations and the Department of Family and Protective Services, and advocates as necessary to ensure that CPS reform is in the best interest of the children it serves. We strive to make Texas CPS reform a model for the rest of the country, and to ultimately increase child safety and enhance quality of life for the vulnerable children of Texas. Though Partners is intended to support effective advocacy of participants, it is not dedicated to developing consensus around legislative priorities. Participation is open includes providers, advocates and public agency staff.

### **Improvement Circles**

In the Fall 2009, Partners in Child Protection Reform moved to a structure of collectively working to improve outcomes and close gaps between policy and practice across the private and public components of the child welfare system. The areas of focus, called Improvement Circles, are based on our common understanding that reform is a continuous process of feedback and response between policy and practice, and between stakeholders, providers, and constituents. The group overwhelmingly selected two priority areas for immediate focus – one of which was behavioral assessments.

## What is an assessment?

According to the Substance Abuse and Mental Health Services Administration, a professional review of child and family needs that is done when services are first sought. The assessment of the child includes a review of physical and mental health, intelligence, school performance, family situation, and behavior in the community. The assessment identifies the strengths of the child and family.

## What is an assessment within CPS?

*Assessment Process currently under review by DFPS.*

## What is an evaluation?

**CPS Policy Manual 8242**

### **Psychological/Psychiatric Evaluation:**

- Formal, face-to-face clinical interview and assessment by a psychologist/psychiatrist to determine the level of functioning of the individual, including issues such as IQ, propensity to violence or suicide, ability to adapt to situations, whether or not the placement or continued living with a family of a particular race or ethnicity would be detrimental to a child, etc. This interview may also include the administration of psychological and developmental tests; and
- A written evaluation made by the psychologist /psychiatrist interpreting the client's level of functioning, and, if appropriate, providing a diagnosis.

A worker may authorize a psychological evaluation to:

- Assess a client's level of functioning;
- Assess a child's safety in the home;
- Develop a service plan that addresses the client's needs; or
- Determine an appropriate placement for a child in the managing conservatorship of DFPS, including a determination as to whether or not the placement or continued living with a family of a particular race or ethnicity would be detrimental to the child.

# Why It Matters

- Relied upon by
  - Judges
  - Caseworkers
  - Providers
- Used to determine
  - Services needed
  - Medications
  - Appropriate placement

# Emerging Issues

- Quality of assessments vary
- Variety of tools used by clinicians completing initial and subsequent evaluations
- Triggers for ordering evaluations vary widely
- Written evaluations vary
  - Content
  - Format
  - Length
  - Depth of analysis

## Preliminary Recommendations

- Reevaluation of purpose of assessments and evaluations
- Comprehensive front end assessment
- Inclusion of trauma-informed tools
- Standardized process for determining when any follow up evaluations should occur
- Uniform determination of major components of evaluations
- Menu of accepted tools that can comprise an assessment and evaluation
- Standardized format for reports produced by clinicians
- Conforming changes in the CPS Policy Manual

# *Reevaluation of purpose and practice- Comprehensive front-end assessment*

## **Goals of front end assessments as defined by Assessment Improvement Circle**

The initial assessment process should identify:

- \* Immediate child service and treatment needs
- \* Family needs
- \* Trauma
- \* Best placement option

## **Who is best able to make that determination?**

*Potential participants identified by Assessment Improvement Circle:*

- Child
- Parent
- Whomever child identifies
- Caregiver child is placed with
- Child placing unit
- Caseworker
- Educators/school officials
- Clinicians



# Multi-disciplinary Teams

- Nationally: Illinois Department of Child and Family Services' Integrated Assessment Program
- Within Texas: Child Protective Services of Harris County's Children's Crisis Care Center

## Trauma-Informed Assessment

- **CONCERN:** Assessments made without sensitivity to trauma experienced due to abuse and removal from home can provide an inaccurate view of a child's general mental health, needs, and most appropriate placement
- **RECOMMENDATION:** Require that assessments be trauma-informed (e.g. trained clinicians, use of tools that assess trauma)

## Standardization of Evaluations

- **CONCERN:** Over-evaluating, under-evaluating and lack of quality control in assessment process lead to costly evaluations that do not necessarily provide the information needed to make good service and placement decisions
- **RECOMMENDATION:** Review of current timing guidelines for assessments, development of more objective triggers for ordering of follow up evaluations , and development of a menu of select tools that clinicians can use in evaluations
- **CONCERN:** Current evaluation reports vary in depth, scope and analysis
- **RECOMMENDATION:** Development of standardized template

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