

DFPS STATEMENT OF WORK

FOR

REGION 3B SINGLE SOURCE CONTINUUM CONTRACTOR

Article I. Definitions.

As used in this Agreement, the following terms and conditions have the meanings assigned below:

Ansell-Casey Life Skills Assessment: An assessment of a youth's independent living skills designed to be completed by both the youth and the caregiver. The youth and caregiver results are combined into a report which provides an indication of the skill level and readiness of the youth to live independently and creates the opportunity for the caregiver and youth to talk about the youth's life skills.

Authorized Service Level (ASL): A Basic, Moderate, Specialized, or Intense service level determined by the third party contractor or, a Basic service level determined by the DFPS caseworker and supervisor. The authorized service level is based on information regarding the child or youth's service needs.

Awaiting Adoption: A child who is legally free for adoption; the child's Permanency Goal is Adoption; and the child is not in an Adoptive Placement or own home placement.

Billing Service Level (BSL): Determined by the third party contractor or DFPS; establishes the reimbursement rate to a child care facility.

Blended Foster Care Rate: Foster care rate paid to the SSCC for each day of service provided to a child or youth in paid foster care, equal to the weighted average rate paid across all placement types.

Blended Foster Care Case Rate: Foster care rate paid to the SSCC for each day of service provided to each child or youth, includes application of rewards and remedies based on the average length of stay for children and youth served by the SSCC.

Caregiver: A person whose duties include the supervision, guidance, and protection of children and youth.

Case: For purposes of the contract, this references the average length of stay for children and youth in paid foster care in the designated catchment area.

Case Information: Case information is all abuse and neglect records, including records relating to reports, investigations, legal actions, and the provision of services to adults, children and families.

Case Management: Responsibility for placement and care as defined by Sections 471 and 472 of the Social Security Act.

Caseworker: A DFPS employee who provides casework services to children and youth in Substitute Care under the conservatorship of the State.

Child(ren)/ Youth: A person(s) eligible and referred by DFPS to the SSCC for services under this contract from birth through the end of the month in which the individual turns 22 years of age.

Child-Care Services: Services that meet a child or youth's basic need for shelter, nutrition, clothing, nurture, socialization and interpersonal skills, care for personal health and hygiene, supervision, education, and service planning.

Child Placing Agency: A person, including an organization, other than the natural parents or guardian of a child who plans for the placement of or places a child in a child-care facility, agency foster home, agency group home, or adoptive home.

Confidential Information: Personally Identifiable Information (PII), Protected Health Information (PHI), Case Information, Criminal History Record Information (CHRI), or Sensitive Personal Information.

Consortium: A group of providers who propose to jointly develop and implement a Single Source Continuum Contract proposal with different providers responsible for different parts of the proposal and resulting network. DFPS will only contract with one of the providers of a Consortium who will be directly responsible to DFPS for all services and performance outcomes under the SSCC Contract. DFPS will also contract with a separate business entity formed by Consortiums that all members have an ownership interest in.

Contract: A promise or a set of promises, for breach of which the law gives a remedy, or the performance of which the law in some way recognizes as a duty. It is an agreement between two or more parties creating obligations that are enforceable or otherwise recognizable at law. The term also encompasses the written document that describes the terms of the agreement. For state contracting purposes, it generally describes the terms of a purchase of goods or services from a vendor or service provider.

Contractor: Respondent who is awarded a contract pursuant to RFP #530-13-0070FCR.

Criminal History Record Information (CHRI): CHRI is arrest-based data and any derivative information from that record, such as descriptive data, FBI number, conviction status, sentencing data, incarceration, and probation and parole information.

Deliverable: A unit or increment of work required by the contract, including such items as services, reports, or documents.

Disproportionality: The over representation of a particular race or cultural group in a program or system.

Disparity: The inequitable or different treatment or services provided to one group as compared to another group. It is how one is treated or the types, quality, and quantity of services made available.

Education and Training Voucher (ETV) Program: A federally-funded (Chafee) and state-administered program. Under this program, Youth and young adults ages 16 to 23 years old may be eligible for up to \$5,000.00 financial assistance per year to help them reach their post-secondary educational goals.

Education Portfolio: The updated and maintained separate education binder that contains important school documents and is designed to follow school-age children and youth to each placement. This allows for the review of the most current educational records and documentation by school officials, residential child-care contractors, foster parents, family caregivers, children and youth.

Emergency Behavior Intervention: An intervention used in an emergency situation, including personal restraint, mechanical restraint, emergency medication, or seclusion.

Exceptional Foster Care Rate: Based on a pro forma approach which involves using historical costs of delivering similar services, where appropriate data are available, and estimating the basic types and costs of products and services necessary to deliver services meeting federal and state requirements.

Experiential Life Skills Activities: Activities which engage children and youth in learning new skills, attitudes, and ways of thinking through hands-on learning opportunities. Experiential life-skills training is tailored to the child or youth's skills and abilities and may include training in practical activities that include grocery shopping, meal preparation and cooking, using public transportation, performing basic household tasks, balancing a checkbook, and managing personal finances. http://www.dfps.state.tx.us/PCS/Residential Contracts/contract resources.asp

Extended Foster Care: A program for youth and young adults ages 18 to 22 years old that are eligible, and have signed an agreement to participate in this program. A youth who turns 18 years of age while in the conservatorship of DFPS who is continuing to receive Extended Foster Care services under the Extended Foster Care is eligible for Extended Foster Care services through the end of the month in which the Youth or young adult reaches the age limit referenced in A) through F), so long as sufficient documentation is provided on a periodic basis as required by the terms of the youth or young adult's Extended Foster Care Agreement to demonstrate that the Youth or young adult is:

- 1) Regularly attending high school or enrolled in a program leading toward a high school diploma or GED up to the youth or young adult's 22nd birthday;
- 2) Regularly attending an institution of higher education or a post-secondary vocational or technical program up to the youth or young adult's 21st birthday. These can remain in care to complete vocational-technical training classes regardless of whether or not the Youth or young adult has received a high school diploma or GED certificate. (40 TAC §700.316)
- 3) Actively participating in a program or activity that promotes, or removes barriers to employment up to the youth or young adult's 21st birthday;
- 4) Employed for at least 80 hours per month up to the youth or young adult's 21st birthday;
- 5) Incapable of doing any of the above due to a documented medical condition up to the youth or young adult's 21st birthday; or (40 TAC §700.316);
- 6) Accepted for admission to a college, or vocational program that does not begin immediately. In this case, the youth or young adult's eligibility is extended three and a half months after the end of the month in which the youth or young adult receives his/her high school diploma or Graduate Equivalency Diploma (GED) certificate.

Face-to-Face Contact: An in-person meeting or visit that does not require video conferencing or similar technology.

Family: For purposes of this contract, family is defined as the parents or other relatives (including fictive kin) of children in paid foster care who are referred by DFPS to the SSCC for services. Families may remain eligible for the SSCC service coordination and delivery after children have exited paid foster care so long as DFPS remains the legal conservator.

Fictive Kin: For purposes of this contract, fictive kin is an individual who has a longstanding and significant relationship with a child in DFPS conservatorship, or with the child's family and provides, or is anticipated to provide, care to the child.

Form 2054: DFPS Form which initiates invoicing process and contains, at a minimum the following information:

- 1) Name of the contractor and contract number;
- 2) Service Code;
- 3) Names of client or Family members who are to receive services;
- 4) Types services requested;
- 5) Number of units for each service requested; and
- **6)** Time limit for the service.

Full Continuum of Care: An array of least restrictive, most-family like placement services that meet the residential and treatment service needs of all children and youth in the care of a contractor.

General Residential Operation: A child-care facility that provides care for more than 12 children for 24 hours a day, including facilities known as children's homes, residential treatment centers, and emergency shelters.

Initial Coordination Meeting (ICM): Convened by DFPS and held within 7 days of referral to the SSCC for placement and/or services to a child or youth (Stages I-III) and/or family (Stages II-III). Purpose of ICM is to review child or youth/families history and identify service needs to be included in the child or youth and/or family plan(s) of service.

Intermittent Alternate Care: A planned alternative 24-hour care provided for a child or youth by a licensed Child-Placing Agency or Independent Foster Home as part of the agency or home's regulated child care and that lasts more than 72 consecutive hours.

Outcome: A measure that reflects or reveals change or impact.

Least Restrictive Placement: Most family-like setting (e.g. family foster home) based on the child's or youth's individual needs. (NOTE: Only Foster Family Homes, not Group Homes, are considered least restrictive.)

Legacy System: Current paid foster care system that utilizes the service level system as the method in which to pay for residential services for children and youth in DFPS conservatorship or who voluntarily agree to remain in care. In addition, current purchase of service funding mechanisms to access Family services that are coordinated and authorized through DFPS.

Level(s) of Need: Array of services (including both licensed child care and treatment services) required by an individual Child who resides in paid foster care, and are designed to support the achievement of safety, permanency and well-being.

Legal Conservator: Also known as the managing conservator, is an entity responsible (either temporarily or permanently) for a child or youth as the result of a district court order pursuant to the Texas Family Code Chapter 153. [TAC §700.501(9)]

Material Subcontractor: Any subcontractor who performs all or a portion of program component services (direct services) procured by DFPS in this solicitation. Subcontractors who perform indirect services which incidentally support program component services are not material subcontractors.

Minimum Standards: DFPS rules which are the minimum requirements for permit holders and which are enforced by DFPS to protect the health, safety, and well-being of children and youth. DFPS provides publications that contain the Minimum Standards and guidelines for compliance for each type of operation.

National Youth in Transition Database: The data collection system developed by the Administration for Children and Families (ACF) to track the independent living services provided to children and youth and to develop outcomes that measure the States' performance in preparing children and youth for their transition from foster care to independent living. More information is available at:

http://www.dfps.state.tx.us/Child_Protection/Youth_and_Young_Adults/Transitional_Living/nytd.asp

Performance-Based Contract: A contract that ties payment, financial incentives and financial remedies to performance. Additional performance measures may be included and used to make decisions to renew or terminate the contract.

Permanency Goal: The Department's permanency goals are subcategories of the four goals identified by the Texas Family Code §263.3026. The categories are as follows:

- Family Reunification;
- Adoption by a relative or suitable individual (Relative Adoption or Unrelated Adoption);
- Permanent Managing Conservatorship to a relative or suitable individual (Relative Conservatorship or Unrelated Conservatorship);
- Another planned permanent living arrangement (Foster Family DFPS Conservatorship, Other Family DFPS Conservatorship, Independent Living or Community Care).

Permanency Planning: The identification of services for a child or youth (and usually to the child or youth's family), the specification of the steps to be taken and the time frames for taking those steps so as to achieve the following goals:

- A safe and permanent living situation for the child or youth;
- A committed Family for the child or youth;
- An enduring and nurturing family relationship that can meet the child or youth's needs;
- A sense of security for the child or youth; and
- A legal status for the child or youth that protects the rights of the child or youth.

(40 TAC §700.1201 and DFPS policy §6200)

Personal Contact: A meeting, either face-to-face or by telecommunication, during which the parties' discussion and actions are not directed.

Personally Identifiable Information (PII): Any information that can be used alone or in conjunction with any other personal information to identify a specific individual. PII includes any information that can be used to search for or identify individuals, or can be used to access their records. Examples include name, SSN, DOB, Social Security benefit data, and state or government issued driver's license number.

Placement Change: Any change in placement location except for temporary breaks in service as further defined in the contract.

Possessory Conservator: A court-ordered appointment that specifies the right to possess and have access to a child or youth in accordance with the Texas Family Code and restrictions of the court order.

Preparation for Adult Living (PAL) Activities: Benefits and services provided to children and youth in DFPS-paid Substitute Care who are age 16 or older and likely to remain in foster care until at least age 18, who can qualify for services up to their 21st birthday. Services and benefits may include:

- 1) Ansell-Casey Life Skills Assessment to assess strengths and needs in life skills;
- 2) Life Skills training in core areas including financial management;
- 3) Job readiness and life decisions/responsibility;
- 4) Educational/vocational services;
- 5) Transitional Living Allowance (TLA) up to \$1000 (distributed in increments up to \$500 per month for children and youth who participate in PAL Life Skills training, to help children and youth with initial start-up costs in adult living); (Not included in the SSCC contract)
- 6) After Care Room and Board (ACRB) assistance, based on need, up to \$500 per month for rent, utility deposits, food, etc. (not to exceed \$3000 of accumulated payments per child or youth) (Not Included in the SSCC contract)
- 7) Case management to help children and youth with self-sufficiency planning and resource coordination:
- 8) Teen conferences:
- 9) Leadership development activities; and
- **10)** Additional supportive services, based on need and availability of funds, such as mentoring services and driver's education.

Pre-Placement Visit: Occurs before placement and allows the child or youth to visit with potential caregivers in an effort to determine if the child or youth feels that the placement is a good fit and allows time to process the change.

Protected Health Information (PHI): individually identifiable health information that is transmitted or maintained in any form or medium. Individually identifiable health information is data, including demographics, that relates to:

- the individual's past, present, or future physical or mental health or condition;
- the provision of health care to the individual, or the past, present, or future payment for the provision of health care to the individual; and
- information that identifies the individual or for which there is a reasonable basis to believe it can be used to identify the individual.

As a general rule, health information linked with any one of the following direct or indirect identifiers of the individual, relatives, employers, or household members is considered protected health information:

- Name
- Street address, city, county, precinct, zip code, and equivalent geocodes
- All elements of dates (except year) for dates directly related to an individual and all ages over 89
- Telephone number
- Fax number
- · Electronic mail address
- Social Security number
- Medical record numbers
- Health plan ID numbers;
- Account numbers
- · Certificate and license numbers
- · Vehicle identifiers and serial numbers, including license plate numbers
- · Device identifiers and serial numbers
- Web addresses (URLs)
- · Internet IP addresses
- · Biometric identifiers, including finger and voice prints
- Full face photographic images and any comparable images
- Any other unique identifying number, characteristic, or code

Purchased Services: Services designed to remedy abuse, neglect and exploitation of DFPS clients. For purposes of this contract, these services are purchased by the SSCC (through an allocation of funds) and offered to children and youth in the Department's conservatorship and their families to support the achievement safety, permanency and well-being.

Referral: Process by which DFPS notifies the SSCC of need to initiate foster care and/or others services to eligible children, youth and/or families.

Regular Job: Paid or unpaid work, excluding chores, that occurs weekly, over a period of at least 60 days.

Request for Proposal (RFP): A formal, advertised, competitive method of procurement (purchase of service) used by DFPS to solicit proposals from interested entities for the provision of services sought through the procurement, as specified in the RFP. An RFP includes statement of the criteria and factors that DFPS will consider in evaluating and determining best value to the state and the relative importance of the criteria and factors. Contract awards under an RFP are determined following the formal evaluation of proposals received, and after conducting any appropriate negotiations with one or more of the Respondents to the RFP.

Residential Child Care: The care, custody, supervision, assessment, training, education, or treatment of an unrelated child or youth for 24 hours a day that occurs in a place other than the child or youth's own home.

Respondent: Any individual or entity that submits a proposal pursuant to an RFP.

Response: A set of documents submitted in response to an RFP by a Respondent as a Proposal offering to provide the services solicited binding on the Respondent once accepted by DFPS.

Return to Care: A) A program designed for youth and young adults 18 to 22 years old that are eligible and sign an agreement to participate in this program. Eligible participants must have been in DFPS conservatorship at the time they turned 18 years old (or were on run away status at the time they turned 18 years old and their conservatorship case had not been dismissed), and want to return to foster care, and:

- 1) Attend high-school or a program leading toward a high school diploma and have not reached their 22nd birthday;
- 2) Are enrolled at or within 30 days of placement in a course of instruction to prepare for the GED and have not reached their 21st birthday;
- 3) Attend and, within two years, complete a certified vocational or technical program and have not reached their 21st birthday; or
- 4) Return on a break from college or a technical or vocational program for at least one month, but no more than 4 months and have not reached their 21st birthday. (40 TAC 700.316)
- B) The return to care program does not include youth and young adults over 18 years old who are overnight visitors or living in the homes of foster parents, and the foster parents are not receiving a foster care payment for the care of these youth and young adults. (40 TAC §745.601, §745.615, and §749.2653)

Sensitive Personal Information: Sensitive personal information means an individual's first name or first initial and last name in combination with any one or more of the following items, if the name and the items are not encrypted:

- · Social Security number
- · driver's license number or government-issued identification number
- account number or credit or debit card number in combination with any required security code, access code, or password that would permit access to an individual's financial account Sensitive Personal Information also includes data revealed directly or indirectly relating to:
 - · natural persons concerning their racial or ethnic origin;
 - · political opinion;
 - · trade union membership;
 - religious or philosophical beliefs;
- physical and mental health including state of health, illness, handicaps, pathological defects or medical treatments:
- · sexual orientation or activity;
- criminal records, including convictions, decisions of penalties and fines, or other information collected in judicial or administrative proceeding to ascertain an offense or regarding an alleged or suspected commission of an offense;
- · biometric or genetic data;
- · social welfare needs or benefits or other social welfare assistance received.

Sensitive information does <u>not</u> include publicly available information that is lawfully made available to the public from the federal, state, or local government.

Serious Incident: Any non-routine occurrence that has an impact on the care, supervision, or treatment of a child or youth. This includes, but is not limited to, suicide attempts, injuries requiring medical treatment, runaways, commission of a crime, and allegations of abuse or neglect or abusive treatment.

Service Plan: The contractor's developed plan that addresses the services that will be provided to a child or youth to meet the child or youth's specific needs while placed in the contractor's care.

Service Area: The designated area in which the SSCC will provide all services described in this contract. The SSCC will provide all services described in this contract in the lower southwestern portion of DFPS Region 3 which includes Erath, Palo Pinto, Parker, Hood, Johnson, Somervell and Tarrant counties.

Siblings: Children, youth, and young adults who have one or more parents in common either biologically, through adoption, or through the marriage of their parents, and with whom the child, youth or young adult lived before his or her foster care placement, or with whom the child, youth or young adult would be expected to live if he or she were not in foster care.

Single Source Continuum Contract/Contractor (SSCC): Entity with whom DFPS enters into a contract for the provision of the full continuum of care in a catchment area, as required in this contract.

Standard Terms and Conditions: The terms and conditions applicable to any contract resulting from this RFP #530-13-0070FCR that govern the Response and any resulting contract.

STAR Health: Statewide managed care program that provides comprehensive health care to children and youth in foster care and relative care, including medical, behavioral health, dental and vision care.

Supervised Independent Living (SIL): A living arrangement that is meant to serve young adults in foster care to allow them to practice independent living skills with minimum supervision and case management before leaving foster care.

Transition Placement Notification: Type of notification provided by DFPS to the SSCC when children or youth are moving from the legacy system into the care of the SSCC.

Trauma Informed Care: An approach to understanding the biological, developmental, relational and social effects of trauma and violence on children, youth and families which integrates the understanding of the impact of trauma into the provision of services and supports through a child-centered, strength-based perspective to care.

Treatment Services: A specialized type of child-care services designed to treat and/or support children or youth with Emotional Disorders, Mental Retardation, Pervasive Developmental Disorder, and Primary Medical Needs as described in 40 TAC §748.61.

Turnover: The activities that the SSCC is required to perform prior to or upon termination of the Contract, in situations where the SSCC will transition data and documentation to DFPS or a subsequent contractor.

Voluntary Extended Foster Care Agreement Form 2540: The Department's form which documents the youth or young adult's agreement to voluntarily remain in foster care and outlines the categories of activity which qualify a child or youth to remain in foster care.

Voluntary Return to Foster Care Agreement Form 2560: The Department's form which documents the youth or young adult's agreement to voluntarily return to foster care and outlines the categories of activity which qualify a child to return to foster care.

Article II. Mission Results/Scope of Work

Section 2.01 Project Scope/Need for Service. DFPS has identified the need to provide paid foster care and purchased services that support safety, permanency, and well-being of children in its legal conservatorship who reside in paid foster care. DFPS views a service delivery model that fully engages communities in serving children, youth, and families and that is provided through a performance-based Single Source Continuum Contract (SSCC), as the approach that can most effectively meet this need in a manner that achieves better outcomes for children in its conservatorship and in paid foster care. The SSCC provider will ensure the full continuum of paid foster care and purchased services for children and youth in DFPS legal conservatorship from the designated geographic catchment area and who are referred to the SSCC by DFPS. The SSCC will also ensure the delivery of purchased services, with necessary service coordination, to the families and/or any other individual or entity that is significant to the achievement of safety, permanency, and well-being of children in paid foster care. The SSCC must use a service delivery model that at a minimum:

- (A) ensures the effective and efficient delivery of a full array of services to improve outcomes for children and their families:
- **(B)** serves children in the least restrictive, most appropriate setting and minimizes moves in care:
- **(C)** ensures continuity of care provided to children and their families;
- (D) ensures the provision of timely and appropriate services to children and their families;
- (E) ensures services that engage communities in meeting the diverse and individual needs of referred children, youth and families in each particular community within the catchment area, and
- (F) does not preclude nor require additional foster care funding, with the exception of funding for normal entitlement caseload growth.

Section 2.02 Staged Implementation. Implementation of the SSCC will occur in three stages in the designated catchment area. Progression from Stage I to Stage II will depend upon the SSCC's demonstrated readiness, but will occur no sooner than 1 year and no later than two years from the date DFPS makes the first referral for paid foster care and purchased services for a child/youth to the SSCC as a part of implementation Stage I. Progression from Stage II to Stage III will depend upon demonstrated readiness, but will occur no earlier than 1 year and no later than two years from the date DFPS makes the first referral for purchased services [as described in Section 2.17(D)] to the SSCC as a part of implementation Stage II. All three stages are included as a part of this procurement.

Section 2.03 Stage I (Begins the day the first referral for paid foster care and/or purchased services for a child/youth is made to the SSCC following the Start-Up Period). For all children entering paid foster care and referred by DFPS, the SSCC must provide the full continuum of paid foster care in a manner that eliminates (to the degree possible and based on the child's individual needs) the necessity for change of placement as service needs evolve to ensure stability and reduce the number of moves a child or youth must make while in care and that provides necessary, individualized services within the child's own community and placement. Additionally, DFPS will refer children from the catchment area placed in paid foster care prior to implementation of redesign to the SSCC in the event that they require a change of placement. DFPS will not allow additional moves solely for the purpose of moving the child into the SSCC's continuum of paid foster care and purchased services. DFPS will reimburse the SSCC using a single blended foster care rate for each child served through this contract (excluding youth who are residing in a Supervised Independent Living (SIL) program and children/youth who the Department has approved for the Exceptional Foster Care Rate) for each day of service. The SSCC must provide Preparation for Adult Living (PAL) Life Skills training, Purchased Adoption Services,

and Foster Care Day Care in Stage I for children and youth who are served by the SSCC and meet appropriate criteria for these services.

Section 2.04 Stage II (Begins the day the first referral for purchased service). In addition to the requirement outlined in Stage I, the SSCC will receive an allocation of funds referred to as purchase of service funds, to provide services for families and other individuals that support the achievement of safety, permanency, and well-being for children in DFPS conservatorship.

Section 2.05 Stage III (Anticipated to occur no earlier than one (1) year and no later than two (2) years from the date of the first referral for Stage II services). The SSCC will be responsible for providing the services outlined in Stages I and II. In addition, DFPS will begin to hold the SSCC financially accountable through the use of incentives and remedies for the timely achievement of permanency for served children. DFPS will not use financial incentives and remedies in relation to performance measures during Stages I and II in order to allow the SSCC time to develop services. In the first year of Stage III, DFPS will not enforce financial remedies related to performance measures so that the SSCC will have the opportunity to gauge effectiveness of services related to the timeliness to permanency. This section does not waive the Department's right to seek any and all available remedies, including financial remedies, for breach of contract in Stages I - III.

Section 2.06 Designated Geographic Catchment Area. Contractor must clearly demonstrate a clear understanding of service demand, available resources, and service gaps within the catchment area and develop specific strategies for meeting the particular and unique needs of the stakeholders and communities within the Catchment Area. The designated geographic catchment area for this contract consists of the following seven counties: Erath, Hood, Johnson, Palo Pinto, Parker, Somervell and Tarrant. A map of the DFPS Administrative Regional Boundaries can be accessed by visiting:

http://www.dfps.state.tx.us/documents/about/pdf/regboundcounty.pdf

Section 2.07 SSCC Model Assumptions. The SSCC may deliver all services outlined in Stages I-III itself, as a single entity, or through the formation of a network or consortium of providers, which may include itself. DFPS will only contract with the SSCC. The SSCC must establish and maintain any network or consortium of services in the identified catchment area through subcontracts, community resources, and/or service agreements.

- (A) All SSCC and DFPS decisions will be made based on the best interests of the individual child.
- (B) The SSCC will have access to IMPACT, the state's information management system, which also serves as the Statewide Automated Child Welfare Information System (SACWIS).

 DFPS will be responsible for final approval of all data entered into IMPACT. All access and data entry requirements related to IMPACT will be granted to the SSCC and may not be delegated by the SSCC to a subcontractor.

 DFPS will make a pre-defined and scheduled data export available for use in the approved SSCC system. No interface/import of information from an SSCC information management system into IMPACT is available. Information on the pre-defined data export and the IMPACT System Design Documents are located in the Procurement Library on the ESBD website.
- (C) The SSCC will not have access to the DFPS licensing database.
- (D) DFPS is ultimately responsible for the proper operation of the foster care system and is, along with the Court, the final authority on all planning, placement and service decisions. The SSCC will have latitude to make placements and determine services as specified in the child and family service plans. Placement moves are made according to guidelines and policy approved by DFPS.

(E) DFPS intends to transition financial resources [see Section 3.01] to the SSCC for functions that will shift from DFPS in the current foster care model to the SSCC in the redesign model. Methods for determining financial resources available for transfer will include a catchment specific assessment of functions to be transferred, determination of resources currently being expended on those functions, and an evaluation of the functions required of DFPS to operate and maintain a legacy system during transition from legacy system to the SSCC. Methodology for determining resources and an estimate of resources to be transferred will be included as described in Section 3.01(A). The availability and quantity of these financial resources are dependent on the available financial resources related to the catchment area and the duration of the transition period. This should be considered by the SSCC when developing time frames for readiness and transition planning as outlined in Section 2.15(B).

Section 2.08 Eligible Population. In Stages I, II, and III, the SSCC must ensure the full continuum of paid foster care and purchased services for the children, youth and young adults referred by DFPS to the SSCC. Beginning in Stage II, the SSCC must ensure the service coordination and delivery of services in accordance with the agreed upon service plan and within purchase of service funding allocation to the families of children, youth and young adults who enter paid foster care and who are referred by DFPS to the SSCC. Families may remain eligible for the SSCC service coordination and service delivery after a child has exited paid foster care so long as DFPS is still the legal conservator.

Section 2.09 Client Characteristics. The SSCC must be prepared to serve individuals with characteristics including, but not limited to, the following:

- (A) Children in DFPS' legal conservatorship and in paid foster care whose county of conservatorship is within the designated catchment area and their families (including individuals that require services that have been determined essential to the achievement of safety, permanency and well-being for the individual child and for whom resources have been allocated). Some families may continue to require the SSCC services (funded through purchase of services allocation) once the child has exited paid foster care (see above).
- (B) Children from the catchment who have been removed from their homes but for whom an ex parte hearing has not yet been held.
- (C) Children for whom DFPS has joint managing or possessory conservatorship with family or any other individual or entity and require foster care and/or other services that support the achievement of safety, permanency, and well-being.
- (D) Children of youth who are in DFPS conservatorship or in extended foster care and the youth (parent) and child are placed together in paid foster care.
- **(E)** Youth who are eligible for foster care through an Extended and/or Return to Care Foster Care Agreement.
- (F) Young adults who are eligible for foster care and require Supervised Independent Living (SIL) services, this population includes all young adults who are in need of this service within the designated catchment area.
- (G) Relatives and other significant adults that DFPS, the court and/or the youth in care have determined have a long standing or significant relationship with the child or youth and who are important to the resolution of the case.
- (H) Person(s) to whom a court has ordered DFPS to provide services that support safety, permanency, and/or well-being of the Child referred within the context of an open conservatorship case.
- (I) Child, Youth and Young Adult characteristics may include but are not limited to:
 - (1) Active exhibition of psychotic behavior

- (2) ADD/ADHD
- (3) Autism
- (4) Anxiety Disorder
- (5) Assaultive behaviors or homicidal
- (6) Behavioral problems
- (7) Chronic Health Conditions
- (8) Criminal Background
- (9) Danger to Self or others
- (10) Depression
- (11) Developmental Disorders
- (12) Diabetes
- (13) DSM-IV Axis I & II Diagnosis
- (14) Eating Disorder
- (15) Emotional Disorders
- (16) Enuresis/Encopresis
- (17) Fire Setting
- (18) Gender Identity Issues/ Sexual Orientation
- (19) Impulse Control Disorder
- (20) Low to Moderate Risk of harming self or others
- (21) Maladaptive Behaviors
- (22) Medically Fragile
- (23) Intellectual Developmental Disability
- (24) Oppositional Defiant
- (25) Pervasive Developmental Disorder
- (26) Pregnant
- (27) Primary Medical Needs
- (28) PTSD/Complex PTSD
- (29) Runaway Behavior
- (30) Self Abuse
- (31) Sexual Perpetrator History
- (32) Sexually Acting Out
- (33) Substance Abuse/Use
- (34) Substance Abuse or dependence with the need for medical detoxification
- (35) History of Attempted Suicide
- (36) Suicidal Gestures
- (37) Suicidal Ideation
- (38) Other Special Needs, (e.g. dietary, language, etc.)
- (39) Additionally, children may:
 - **a.** Have experienced physical, sexual and/or emotional abuse, neglect and/or other severe trauma.
 - **b.** Have a history of multiple placement disruptions.
 - **c.** Have limited English-language proficiency.
 - **d.** Have been or currently are involved in the criminal justice system and are currently on probation and/or parole.
 - e. Have been or are currently involved in gang activity/ affiliation.
- (40) Family characteristics may include, but are not limited to:
 - **a.** Chronic unresolved conflicts between parental figures
 - **b.** Frequent unresolved conflicts between parental figures and Children

- c. History of Attempted Suicide
- d. Suicidal Gestures
- e. Suicidal Ideation
- f. Chronic economic distress
- g. Frequent changes in residence
- h. History of substance abuse or current dependence
- i. Untreated and/or diagnosed mental illness
- j. Poor parenting skills
- k. Criminal Background
- I. Involuntary participant
- m. Limited English-language proficiency
- n. Domestic violence/family violence
- o. Limited cognitive functioning

Section 2.10 Minimum Qualifications of the SSCC (Stages I-III)

(A) Licensing and Service Experience

- (1) Contractor obtain and maintain a separate DFPS Child Placing Agency (CPA) license for its SSCC contract within the designated catchment area, if awarded this contract.
- (2) The SSCC must have experience in delivering residential child-care and treatment services to children and youth in foster care.
- (3) The SSCC must be licensed as a Child Placing Agency (CPA) to provide foster care services by the DFPS Residential Child Care Licensing and must not be on probation under its CPA license as of the Proposal due date.

Section 2.11 Entity Qualifications

- (A) The SSCC may be a for-profit, not-for-profit, or governmental entity.
- (B) The SSCC may be an in-state or out-of-state entity; however, as stated in Section 2.10, the SSCC must be a DFPS licensed CPA. DFPS will give preference to providers who have experience providing residential child-care services in the State of Texas.

Section 2.12 Staffing Qualifications.

- (A) The SSCC must ensure compliance with minimum staffing requirements in applicable Minimum Standards for Child Placing Agencies serving children requiring both child care and treatment services.
- **(B)** The SSCC must ensure that residential child care and other providers responsible for providing services are appropriately licensed in the State of Texas to perform the type of service being provided.
- (C) The Texas Penal Code §32.52 prohibits the use of fraudulent or substandard degrees. Contractor must include a process to verify the education and degree requirements of all employees in its human resources policy. Education and degree information represent material facts upon which DFPS relies when entering into a contract. DFPS reserves the right to exercise all available remedies if Contractor submits fraudulent or substandard education information, including termination of any contract and other appropriate civil and criminal legal action
- (D) Purchase of Service Requirements. The SSCC must ensure purchase of service providers and staff responsible for their supervision and/or clinical decisions are individuals who are appropriately licensed by the State of Texas and have the necessary experience to

perform the service and, as applicable, are enrolled Medicaid providers. Interns or provisionally licensed individuals may provide mental health services under this contract as long as:

- (1) The client being served is not eligible for Medicaid;
- (2) The service being provided is not a Medicaid reimbursable service; and
- (3) The service is provided within any applicable Title IV-B guidelines.

The SSCC will identify and provide DFPS with the minimum qualifications or standards for each type of service provided utilizing purchase of service funds. All identified minimum qualifications must be approved by DFPS prior to implementation.

- (E) Trauma Informed Care Training. All direct delivery staff and caregivers providing services through the SSCC must have completed Trauma-Informed Care training. This training is currently provided by Cenpatico through their contract with STAR Health. However, providers may choose from other evidence-based trauma-informed training curricula at their own expense.
- (F) Medical Consenter. Anyone recommended by the SSCC as a medical consenter must receive and complete Medical Consent training offered by DFPS prior to DFPS designation as a Medical Consenter. The on-line training may be accessed by visiting the following:

http://www.dfps.state.tx.us/Child_Protection/Medical_Services/medical-consent-training.asp

Section 2.13 Major Deliverable # 1 - Achievement of Service Objectives/Quality Indicators. The SSCC's development, operation, oversight, and provision of the full continuum of paid foster care and purchased services, must be performed in a manner that provides services in the least restrictive, most family-like setting appropriate for the child, reduces the number of moves a child or youth must make while in care, and engages communities to assist children and youth in achieving safety, permanency, and well-being, specifically, the service objectives inherent in the following quality indicators:

- (A) Children are safe in their placements.
- **(B)** Children are placed in their home communities.
- (C) Children are appropriately served in the least restrictive environment that supports minimal moves for the child.
- (D) Connections to Family and others important to the child are maintained.
- (E) Children are placed with siblings.
- **(F)** Services respect the child's culture.
- (G) To be fully prepared for successful adulthood, children and youth are provided opportunities, experiences, and activities similar to those experienced by their non-foster care peers.
- (H) Children and youth are provided opportunities to participate in decisions that impact their lives.

It is understood that the individual needs of a child are paramount; not all indicators are appropriate for every child. In addition to the quality indicators listed above and the performance measures outlined in Section 2.20, the SSCC must ensure that overall average length of stay in paid foster care for children and youth served by the SSCC does not increase above a baseline predetermined by DFPS. In Stages I and II, DFPS will monitor the baseline average length of stay in paid foster care for children and youth served by the SSCC. Exceeding the baseline average may initiate a quality assurance process that could lead to a contract action. For Stage III, DFPS will calculate the initial baseline using the average length of stay for the previous two years, ending the day of the first referral to the SSCC in Stage I

implementation within the catchment area. DFPS will calculate the second baseline for Stage III using the average length of stay in paid foster care from the day of the first referral to the SSCC in Stage I implementation in the catchment area to the first day of second year of Stage III. DFPS will recalculate further baselines every two years.

Section 2.14 Major Deliverable #2 - Development and Management of a Continuum of Care and Service Delivery Model. The SSCC must develop and manage a continuum of care and service delivery model designed to facilitate achievement of the service objectives and quality indicators (see Section 2.14) using the staged implementation model (see Section 2.02). The SSCC must implement a community based model that fully engages stakeholders in achieving desired outcomes and, at a minimum, ensures, (1) the effective and efficient delivery of a full array of services provided in the least restrictive, appropriate setting that minimizes moves in care to improve outcomes for children and their families; (2) continuity of care provided to children and their families; and (3) the provision of timely and appropriate services to children and their families in their home communities. The SSCC model must address the diverse and individual needs of the particular local communities within the catchment area.

- (A) Start-Up Period. The SSCC will have a start-up phase prior to the start of Stage I, which will begin on the effective date of the SSCC contract with the Department and end no later than the first day of the seventh month from the contract effective date, or sooner with demonstrated readiness. During the start-up phase, the SSCC must actively engage communities in building the infrastructure and competencies necessary to provide the full continuum of paid foster care and purchased services required in Stage I of implementation and demonstrate readiness to implement the approved plans. The SSCC must employ and maintain sufficient staff during start-up to implement the selected service model and conduct necessary community engagement activities and ensure readiness. Please see Article IV for more information regarding readiness and transition requirements.
- (B) SSCC Management Plan. The SSCC must submit a final, completed Management Plan to DFPS for approval for Stage I within sixty (60) days of contract execution. The final Management Plan must build upon the preliminary Management Plan submitted with the response. The SSCC Management Plan must clearly identify all tasks and activities associated with each deliverable, dates of completion, and key staff responsible for, at a minimum, the following key elements:
 - (1) The schedule, processes and procedures for transition of children and youth from the catchment area who are already being served by the SSCC and/or the SSCC network (if applicable) in the legacy system to the SSCC model. DFPS anticipates a full transition between systems within 18 months of contract effective date. Any exceptions to transition will be determined by DFPS on a case-by-case basis and based on the best interest of the individual child;
 - (2) The schedule, processes and procedures for transition of legacy cases and foster homes from DFPS to the SSCC. Include plan for communicating with providers, foster parents, judiciary and the community. DFPS anticipates a full transition between systems within 18 months of contract effective date. Any exceptions to transition will be determined by DFPS on a case-by-case basis and based on the best interest of the individual child:
 - Ongoing development of services network/continuum, including plan for assessing need, recruiting, communicating with and training network providers;
 - (4) Quality management;
 - (5) Workforce development and training, which must include a plan for ensuring that all caseworkers, supervisors, caregivers and other direct care staff providing services through the SSCC complete training to support attainment of safety, permanency and

well-being for the children in their care. Trauma-informed training (as previously specified) and training on Disproportionality and Cultural Competency are required. Knowing Who You Are training delivered by DFPS is encouraged. Knowing Who You Are training consists of 6-8 hours e-learning which is completed before 12 hours of classroom training. The plan may propose phasing in this training;

- (6) Catchment area specific risk and issues management plan;
- (7) Disaster recovery and business continuity plan that is specific to the designated catchment area:
- (8) Policy and procedures to support all aspects of service delivery, finance and administration of the SSCC model;
- (9) Plan for how the SSCC will address situations in which a child referred to the SSCC is placed in the same home as a child in the DFPS Legacy system or vice versa;

The SSCC will be required to submit an updated version of the SSCC Management Plan at least 30 days prior to entering a new Stage of Implementation for DFPS approval.

- (C) Continuum of Paid Foster Care and Purchased Services (Stages I-III). The SSCC must build and maintain the infrastructure necessary to support the full continuum of paid foster care and purchased services for all children originating from the designated geographic catchment area that are referred to the SSCC by DFPS. The infrastructure must be sufficient to ensure services are provided in the child's or youth's home community, in the least restrictive, most family-like setting appropriate for the child or youth, and must reduce the number of moves children and youth make while in care.
- (D) Joint SSCC and Legacy Placements. Since it will take time to transition from the DFPS Legacy System to the SSCC System, situations might arise in which a child referred to the SSCC might be placed in the same home as a child in the DFPS Legacy system or vice versa. In such situations, the SSCC will work with DFPS in order to appropriately manage such placements and ensure the best outcome for all children.
- (E) Coordinated Purchased Service Delivery (Stages II-III). The SSCC must maintain the capacity to coordinate and deliver a timely array of services to families and/or individuals that DFPS determines eligible and refers to the SSCC according to agreed upon service plans and within the purchase of services allocation. Families of children who enter paid foster care and who are referred by DFPS to the SSCC are eligible for services. Families may continue to remain eligible for the SSCC service coordination and delivery (funded through purchase of services allocation) after their child has exited paid foster care so long as DFPS is still the legal conservator. The SSCC must also demonstrate its compliance with targeted performance measures and outcomes.
- **(F) Administrative Management.** The SSCC's administrative management of the continuum of care and service delivery system must, at a minimum, include the following:
 - (1) An integrated continuum of service providers to ensure the effective management and coordination for availability of an array of quality services necessary to meet the diverse and unique needs of children and youth in least restrictive settings and effectively reduce the number of move in care for children and youth in paid foster care and families (based on allocated funds) of those children who require services to support safety, permanency, and well-being.
 - (2) The necessary organizational structure, staff, capacity, policies, and procedures to manage and oversee a continuum of services and to arrange, conduct, and coordinate the child's placement within the continuum of care.
 - (3) Quality and Utilization Management (QM and UM) practices which continuously monitor operations and services in order to ensure quality services, progress towards

- service plan goals, and compliance with all contract terms, performance expectations, outcomes, and outputs.
- (4) The capacity to develop and maintain qualified staff that have the skills, education, experience, and training for the services they provide.
- (5) A system for tracking and reporting critical incidents as well as other safety, permanency, and well-being outcomes and mechanisms.
- (6) A system that alerts the SSCC of situations or issues that require immediate response, including issues which are likely to pose a threat to child safety.
- (7) Catchment specific disaster recovery and business continuity practices which ensure rapid, effective response and re-establishment of system operations and service delivery in the event of unplanned system outages or catastrophic occurrences.
- (8) A financial system that ensures timely payment, appropriate utilization, and on-going management of financial resources so that needed services are provided within the allocated funds.
- (9) Capacity to collect, manage, and report data on client services, network service providers, subcontractors, foster homes, outcomes, and outputs.
- (G) Partnerships with Stakeholders. The foster care redesign model is intended to provide each catchment area the opportunity to tailor the service delivery continuum and associated policies and procedures to the specific needs of the catchment area and of particular communities and/or population hubs within the catchment area.
 - (1) During the Start-Up Period [see Section 2.15(A)] the SSCC and DFPS senior management staff will collaborate to develop joint operational processes for implementation of the SSCC's model and to establish catchment-specific joint protocols, including but not limited to, methods and frequency of communication, jurisdictional expectations, and clarification of DFPS and the SSCC roles and responsibilities. The SSCC must ensure that staff participating in the joint protocol sessions have a thorough understanding of the Foster Care Redesign Initiative, the SSCC model, and contract and the communities served. The operations manual must be completed at least 60 days prior to the SSCC accepting its first referral from DFPS (Stage I). Using the same process, the operations manual must be updated at least 60 days prior to implementation of Stages II and III.
 - (2) The SSCC will work in collaboration with DFPS and stakeholders within the designated catchment area to develop and maintain exemplary relationships that support achievement of improved permanency outcomes for children, youth, and families.
 - (3) DFPS will work in collaboration with the SSCC to identify, develop, and expand needed services and resources within the designated catchment area in order to achieve the common goal of providing quality services to children and families.
- (H) SSCC Provider Manual. The SSCC must use the proposal submitted in response to HHSC Procurement #530-13-0070FCR as the basis for developing a Region 3B SSCC Provider Manual. The SSCC Provider Manual will serve as the guiding document for the SSCC and its network. The SSCC will provide copies of the SSCC Provider Manual to DFPS and each of its subcontractors who will provide services to DFPS referred clients. The SSCC will regularly update the SSCC Provider Manual as necessary. Each update must be provided to DFPS and the Department will retain the right to disapprove of any changes.

Section 2.15 Major Deliverable #3 - Compliance with General Requirements of the SSCC.

- (A) Accountability. The SSCC is ultimately responsible to DFPS for all contract requirements, including outcomes, regardless of whether the contract requirement is performed directly by the SSCC or indirectly by the SSCC through an agent, employee, volunteer, or subcontractor.
- **(B)** Legal/Regulatory. The SSCC will comply with all applicable DFPS Minimum Standards for 24-hour residential child-care operations and with state and federal laws and regulations, including but not limited to the following:
 - (1) Indian Child Welfare Act (ICWA) Information on ICWA can be found by visiting: http://uscode.house.gov/download/pls/25C21.txt
 - (2) Multiethnic Placement Act (MEPA) Information on MEPA- Information on MEPA can be found by visiting:
 - http://www.childwelfare.gov/systemwide/laws_policies/federal/index.cfm?event=federalLegislation.viewLegis&id=46
 - (3) The SSCC will work in partnership with DFPS to improve outcomes for Children as it relates to the Federal Child and Family Service Review (CFSR). Information on the CFSR can be found by visiting:
 - http://www.acf.hhs.gov/programs/cb/cwmonitoring/index.htm#cfsr
 - (4) National Youth in Transition Database (NYTD)- The SSCC shall assist children and support the necessary activities including on-going computer access required for entry of data into NYTD system. Information on NYTD can be found by visiting:

http://www.dfps.state.tx.us/txyouth/NYTD/default.asp

- (5) The SSCC will comply with all court orders regarding the provision of paid foster care and/or purchased services for children, youth, and families served through the SSCC.
- (6) Services (with the exception of placement) that are ordered by the court and fall outside the purchase of service funding streams will be reviewed by DFPS and the SSCC on a case-by-case basis to determine financial responsibility.
- The SSCC must report known critical incidents, licensing investigations, licensure board reports and investigations, suspected fraud or fraud investigations and violations that occur within the SSCC's service model to DFPS in accordance with Licensing Minimum Standards and contract requirements. For these circumstances in particular, and at all times in general, the SSCC must have operational procedures and mechanisms in place to ensure they are knowledgeable of and respond immediately to conditions or situations that may pose a threat to child safety. DFPS will regard any failure to disclose and report as a breach of the SSCC's contract. Residential Child Care Licensing's role with all licensed providers, including the SSCC subcontractors will remain unchanged.
- (8) The SSCC will make reasonable efforts to ensure services provided to children and families are offered in the individual's primary language.
- **(C)** Accreditation. The SSCC certifies that it has obtained, and will maintain, accreditation through the Council of Accreditation. DFPS relies upon this certification and representation from Contractor in signing this Contract.

- **(D) Community Engagement.** The SSCC must ensure that children and families receive the necessary services in their local communities. At a minimum the SSCC must:
 - (1) Develop and Implement a Community Engagement Plan for each stage of implementation that demonstrates the SSCC understands the role of the distinct communities and population hubs within the designated catchment area in meeting the unique and diverse needs of children, youth, and families. The SSCC must submit a Final Community Engagement Plan that has been developed with community stakeholders within sixty (60) days of contract execution. Plans must include strategies, activities, and timelines for engaging the community initially (during start-up), during initial implementation, and on an ongoing basis. Plans must include strategies for developing and supporting a local advisory committee that reflects the community. Include timeline and resources necessary to successfully implement the plan.
 - (2) Include targeted strategies (in the Preliminary and Final Community Engagement Plans) for engaging each of the following entities in the identified population hub and/or distinct community within the designated catchment area:
 - a. Children and youth in foster care, as well as alumni
 - **b.** Families of children in foster care, including non-custodial parents
 - c. Alumni families who have received DFPS services in the past
 - d. CPS local staff
 - **e.** Members of the judiciary
 - f. Attorneys representing parents, children and DFPS
 - g. Representative(s) of the Regional Disproportionality Advisory Committee
 - **h.** Law Enforcement (including juvenile justice agencies)
 - i. Child Welfare Boards
 - j. Local School Districts
 - k. Foster Parents
 - I. Residential Child Care Providers (including but not limited to other child placing agencies and general residential operations that provide: emergency care services, child-care services, treatment services, transitional living services and residential treatment services)
 - m. Purchased Service Providers
 - n. Local Community Service Providers
 - o. Transitional Living Centers (where available)
 - **p.** Texas Workforce Agencies (DFPS youth are priority population)
 - **q.** Faith-based organizations
 - r. STAR Health Providers
 - s. Tribal Representatives and Community
 - t. Non-traditional community resources and leaders,
 - u. Other county and/or community stakeholders
- **(E) Cultural Competency.** The SSCC must provide services to people of various cultures, races, ethnic backgrounds, and religions in a manner that recognizes, values, affirms, and respects the worth of the individuals, and protects and preserves their dignity. The SSCC will:
 - (1) Exhibit a clear understanding of the cultural beliefs of children and families in the distinct communities and population hubs within the designated catchment area.

- (2) Provide ongoing education in the form of orientation, training, workshops, and other educational opportunities to help staff, caregivers, and subcontractors understand the impact race, culture, and ethnic identity have on them and others and how they impact services to children and families.
- (3) Ensure that caregivers and subcontractors understand the impact of disproportionality and disparities in the child welfare system. Disproportionality is the over representation of a particular race or cultural group in a program or system and is an issue DFPS remains committed to addressing.
- (4) Coordinate and deliver services in a manner that is relevant to the culture of children and families served in the distinct communities and population hubs within the designated catchment area..
- (5) Develop and implement a plan to ensure the composition of the SSCC workforce reflects the race, ethnicity, and culture of the client population.
- **(H) Efforts to Address Disparities in Catchment Area.** The SSCC must ensure that the services offered and outcomes achieved by the SSCC are equal in proportion to the populations served.
 - (1) Families Residing Outside Catchment Area(s) (Stages II and III).
 - a. The SSCC will receive an allotment of purchase of service funding to serve families referred by DFPS, including families who may reside outside of the catchment area, when the child is referred to the SSCC by DFPS. The SSCC will deliver services commensurate with available services allotment.
 - **b.** The SSCC must have documented policies and processes that ensure timely delivery of services for families residing outside of the contracted catchment area(s).

Section 2.16 Major Deliverable #4 - Provision of Care and Performance of Services. The SSCC must coordinate and manage services to the child or youth in a manner that, at a minimum, conforms to and complies with the service and contract requirements stated, defined, and described in this contract.

(A) Notification Request for Paid Foster Care Services (Stages I, II, III).

(1) DFPS will:

- a. Provide final approval or reason(s) for denial of all placement decisions within 24 hours of request for approval. Approval may be assumed if notice of placement denial is not received by the SSCC within 24 hours of request. For emergency placements only, DFPS will evaluate the SSCC's recommended placement option within 1 hour of receipt of notification from the SSCC by telephone or electronic notification. For emergency placements, the SSCC may assume approval from DFPS if the Department does not provide notice of placement denial within 1 hour of the request.
- **b.** Notify the SSCC of all court orders regarding placement.
- **c.** Provide written notification to the court of all placement and medical consent activities, consistent with current statutory requirements.
- **d.** Determine eligibility and make appropriate referrals for the SSCC services.
- **e.** Provide notice to the SSCC within 2 business days, when DFPS becomes aware that a child is no longer eligible for the SSCC services.

(2) SSCC must:

- **a.** Maintain the capacity to accept referrals from DFPS for residential child care 24 hours per day, 365 days per year.
- **b.** Accept all referrals for paid foster care (No Reject) made by DFPS and continue to meet the individual needs of children referred (No Eject) until DFPS determines the individual is no longer eligible for the SSCC services.
- **c.** Adapt to and abide by requirements of local courts (if different from process listed in contract) regarding placement processes and/or notification requirements.
- d. Offer Supervised Independent Living (SIL) services in accordance DFPS Policy. The SSCC will be allowed maximum flexibility to choose subcontractors and develop contracts for supervised independent living services that will meet the needs of the youth to be served.
- Utilize the same parameters as DFPS when making recommendations to the Department on who a Child's medical consenter should be. These parameters are outlined in Chart 1.
- f. Ensure that all Foster Parents and employees who serve as Medical Consenters for a Child who is prescribed psychotropic medications facilitate an office visit with the prescribing physician, physician assistant, or advanced practice nurse in the STAR Health Network at least once every 90 days to allow the practitioner to:
 - appropriately monitor the side effects of the drug; and
 - **ii)** determine whether the drug is helping the Child achieve the treatment goals and whether continued use of the drug is appropriate.
- **g.** The SSCC must advise Children ages 16 to 22 of their right to request to become their own Medical Consenter.
- **h.** For all children recieveing psychotropic medication, the SSCC must assess the extent to which the Child:
 - i) has been provided appropriate psychosocial therapies, behavior strategies, and other non-pharmacological interventions; and
 - ii) has been seen by the prescribing physician, physician assistant, or advanced practice nurse in the STAR Health Network as described in Subsection 1.13(A)(2)(f) above.
- (3) The SSCC is responsible for all placement activities required under this contract. The SSCC cannot delegate this responsibility to any subcontractor or other agent.

Chart 1: Medical Consenter

Child's Placement	Recommended Designee	Recommended Back Up
GRO Providing Emergency Care Services	Professional employee of the GRO	Another professional employee of the GRO
CPA Foster family home	Foster parents, or Pre-consummated adoptive parents	Professional employee of the CPA

CPA Foster group home with foster parents (without shift staff)		
CPA Pre-consummated adoptive home		
GRO Child Care Facility (Cottage Model)	Cottage parents	Alternate cottage parents
Home and community based (HCS) family home	HCS-based support family caregivers	DFPS caseworker
GRO Residential treatment center	DFPS caseworker	DFPS supervisor/second DFPS caseworker
GRO Therapeutic Camp GRO Child Care Facility (Shift Staff Model)		
HCS-based group home (with shift staff)	DFPS caseworker	DFPS supervisor/second DFPS caseworker
Nursing home		
State school		
Intermediate care facilities for mental retardation (ICF-MR)		
GRO Treatment Services Intermediate Care Facility for Persons with Intellectual or Developmental Disability	Developmental disability (DD) specialist for children on their caseloads, or	DFPS caseworkers assigned as secondary worker to DD specialist caseloads, or
	DFPS caseworker for children on their caseloads	DFPS supervisor/second DFPS caseworker

- (4) Consider all applicable state and federal requirements and best practice when making recommendations of potential placements to DFPS. These areas include but are not limited to, the following:
 - **a.** The child's safety and best interest;
 - **b.** Preference for family;
 - **c.** Least Restrictive, most family-like setting (NOTE: Only foster family homes, not group homes, are considered least restrictive.);
 - d. Placement with siblings:
 - e. Child's individual circumstances;
 - **f.** Children are placed in their home communities and in close proximity (no more than 50 miles) to their parents home;
 - g. Maintaining the child in the school of origin and minimizing educational disruption;
 - h. Biological family's individual circumstances;
 - i. Substitute caregiver's individual circumstances; and
 - **j.** Placements respect and support the child's culture.

- (5) Continually review the appropriateness of the child's placement and make efforts to preserve the current placement.
- (6) Consider all applicable state and federal requirements when documenting the child's placement and submit to DFPS (see Chart 2 for time frames):
 - a. Date of placement
 - **b.** Date of discussion with child regarding initial and all subsequent changes in placement
 - c. Child's response to discussion regarding change of placement
 - d. Whether placement was emergency or planned
 - e. Whether pre-placement visit(s) occurred and if so, date(s) of pre-placement visit(s)
 - f. Name, address, and telephone number for current placement, including agency or facility name if service is delivered through a subcontract with the SSCC
 - g. Explanation as to why identified placement is most appropriate
 - **h.** If the placement is not with a foster family home document why a more restrictive setting is needed
 - i. If placement change resulted in a change of schools explanation as to the need for school change
 - **j.** If placement is more than 50 miles from child's home of origin, explanation for why the child is not in close proximity
 - k. If the child is not placed with siblings, reasons for separation
- (7) Immediately notify DFPS when the SSCC becomes aware that a child may no longer be eligible for SSCC services.

(B) Placement Referral Types for Paid Foster Care Services include:

- (1) DFPS Emergency Placement Process utilized when DFPS makes a referral to the SSCC for children/youth who are in immediate need of paid foster care services and are not currently served by the SSCC.
- (2) DFPS Non-Emergency Placement (New Referral to the SSCC) Process utilized when DFPS makes a referral to the SSCC for children/youth who are transitioning from a placement in the Legacy System to the SSCC's continuum of care.
- (3) DFPS Non-Emergency Placement (Change of Placement Request) Process utilized when DFPS has identified a need for a change in placement for children/youth already served by the SSCC.
- (4) SSCC Emergency/Non-Emergency Placement- Process utilized when the SSCC has identified a need for a change in placement for children/youth already served by the SSCC.
- (C) Placement Referral Types for Paid Foster Care Services (Stages I, II, III) and Required Notifications, Roles, Responsibilities and Documentation Requirements (see Chart 2):

Chart 2: Placement Referrals

Notification Type	DFPS Role	SSCC Role	SSCC Documentation Requirements

DFPS Emergency Placement

Notify the SSCC of the emergency need for placement by telephone or through electronic notification via IMPACT. (All telephonic notification will be followed by notification referral in IMPACT.)

Provide access to placement and other available case information within 2 hours of referral, if referral information is provided telephonically access to written documentation will follow.

Evaluate the SSCC's recommended placement option and medical consenter within 1 hour of receipt of notification from the SSCC by telephone or electronic notification. (If approval is granted by telephone, written approval will follow within 24 hours.) Approval is to be assumed if denial of placement is not provided to the SSCC within the designated timeframe.

Provide SSCC access to appropriate placement and other available information at the time of placement and as it becomes available over the course of the case, including but not limited to, information and documentation required by DFPS Residential Child Care Licensing Minimum Standards for Emergency Placements.

Accessible 24 hours a day and 365 days a year Takes physical possession of Children from DFPS within 4 hours of receipt of DFPS notification of emergency placement need.

Identifies and notifies
DFPS by telephone or
electronically of
appropriate placement
option including potential
medical consenter no later
than 7 hours of receipt of
DFPS notification of
emergency placement
need.

Ensure the child is involved and the child/youth's input is considered in decision as appropriate to the child's age and level of understanding. Place child as soon as possible following receipt of DFPS referral.

Provide required placement documentation via IMPACT to designated DFPS staff within 12 hours of receiving referral.

Must document (via IMPACT) required information regarding referrals and placement and provide to DFPS within designated time frame.

DFPS Non-Emergency Placement

New Referral to the SSCC:

Notify the SSCC of the need for placement through electronic notification and schedule placement staffing with the SSCC

Provide SSCC access to placement and other relevant case information with referral and as it becomes available over the course of the case, including, but not limited to, information and documentation required by DFPS Residential Child Care Licensing Minimum Standards for Non-Emergency Placements.

Evaluate the SSCC recommended placement option and medical consenter within 24 hours of receipt of notification from the SSCC electronically. Approval is to be assumed if denial of placement is not provided to the SSCC within designated timeframe.

Notify CASA and attorney ad-litem that change in placement has occurred.

Change of Placement Request:

Notify the SSCC of request to change placement.
Documentation should

Identify potential placement option(s) for child and schedule preplacement visit(s) for child with potential caregivers.

Ensure the child is involved and the child/youth's input is considered in decision as appropriate to the child's age and level of understanding.

May contact provider from which the child will be moved to gather relevant information.

Identifies and notifies
DFPS electronically of
appropriate placement
option, including potential
medical consenter as soon
as possible and no later
than 3 days prior to
placement needing to
occur.

Provide required placement documentation via IMPACT to designated DFPS staff within 12 hours of placement occurring.

Place a child within required timeframes.

Request joint staffing with DFPS if needed.

Must document (via IMPACT) required information regarding placement and provide to DFPS within designated time frame.

Must document potential placement

state reason for desired change in placement as well as time frame for change of placement.

Participate in joint staffing if requested by the SSCC.

Evaluate the SSCC recommended placement option and medical consenter electronically within 24 hours; approval is to be assumed if denial of placement is not provided to the SSCC within the designated timeframe.

Provide SSCC access to appropriate placement documentation and available information at the time of the placement and as it becomes available over the course of the case Identify potential placement option(s) for child and schedule preplacement visit(s) for child with potential caregivers.

Ensure the child is involved and the child/youth's input is considered in decision as appropriate to the child's age and level of understanding.

Identifies and notifies DFPS electronically of appropriate placement option, including potential medical consenter as soon as possible and no later than 3 days prior to placement needing to occur.

Provide required placement documentation via IMPACT to designated DFPS staff within 12 hours of placement occurring.

information provided to DFPS and time child was taken to actual placement location.

Must document (via IMPACT) required information regarding placement and provide to DFPS within designated time frame.

Maintain documentation of DFPS' placement approval.

SSCC Emergency Placement

(Emergency placement may only be initiated when there is a perceived or actual threat to the safety or well-being of the child.)

Evaluate the SSCC recommended subsequent placement option and medical consenter within 1 hour of receipt of notification from the SSCC by telephone or electronic notification (If approval is granted by telephone. written approval will follow within 24 hours.) Approval is to be assumed if denial of placement is not provided to the SSCC within the designated timeframe.

Provide the SSCC access to the appropriate

Immediately notify DFPS of need to evaluate current placement for appropriateness by telephone or electronically. Identifies and notifies DFPS electronically of appropriate placement option, including potential medical consenter.

Complete a pre-placement visit(s) for child with potential caregivers, whenever possible.

Ensure the child is involved and the

Must document required information regarding placement change via IMPACT and provide to DFPS within designated time frame.

Documentation must clearly support why the desired change in placement is necessary and in the best interest of the child.

placement documentation of approval or denial and access to available information at the time of the placement as it becomes available over the course of the case	child/youth's input is considered in decision as appropriate to the child's age and level of understanding. Provide required placement documentation via IMPACT to designated DFPS staff within 12 hours of placement occurring.	
Evaluate the SSCC recommended subsequent placement option and medical consenter within 24 hours; approval is to be assumed if denial of placement is not provided to the SSCC within the designated timeframe. Provide the SSCC access of appropriate placement documentation of approval or denial and as it becomes available over the course of the case, including, but not limited on, information and documentation required by DFPS Residential Child Care Licensing Minimum Standards for Non-Emergency Placements	Notify DFPS of need to evaluate current placement for appropriateness within 30 days of desired change in placement electronically. Documentation must clearly state reason for desired change in placement. Identifies and notifies DFPS electronically of appropriate placement option, including potential medical consenter as soon as possible and no later than 3 days prior to placement needing to occur. Complete a pre-placement visit(s) for child with potential caregivers. Coordinate communication between and among current and future caregivers. Ensure the child is involved and the child/youth's input is considered in decision as appropriate to the child's age and level of understanding.	Must document required information regarding placement change via IMPACT and provide to DFPS within designated time frame. Documentation must clearly support why the desired change in placement is necessary and in the best interest of the child.
	rapproval or denial and coess to available formation at the time of the placement as it ecomes available over the course of the case are decommended subsequent accement option and the decical consenter within 4 hours; approval is to be assumed if denial of accement is not provided to the SSCC within the esignated timeframe. To vide the SSCC access appropriate placement occumentation of approval recomes available over the course of the case, cluding, but not limited to, information and occumentation required by FPS Residential Child are Licensing Minimum tandards for Non-	considered in decision as appropriate to the child's age and level of understanding. Provide required placement documentation via IMPACT to designated DFPS staff within 12 hours of placement occurring. Waluate the SSCC prommended subsequent accement option and redical consenter within 4 hours; approval is to be assumed if denial of accement is not provided the SSCC within the resignated timeframe. Trovide the SSCC access appropriate placement occurrent placement occumentation of approval redenial and as it accomes available over the course of the case, cluding, but not limited on, information and occumentation required by FPS Residential Child are Licensing Minimum tandards for Nonmergency Placements Complete a pre-placement visit(s) for child with potential caregivers. Coordinate communication between and among current and future caregivers. Ensure the child is involved and the child/youth's input is considered in decision as appropriate to the child's age and level of understanding. Considered in decision as appropriate to the child's age and level of understanding. Provide required placement documentation via IMPACT to designated DFPS of need to evaluate current placement for appropriateness within 30 days of desired change in placement electronically. Documentation must clearly state reason for desired change in placement. Identifies and notifies DFPS electronically of appropriate placement option, including potential medical consenter as soon as possible and no later than 3 days prior to placement needing to occur. Complete a pre-placement visit(s) for child with potential caregivers. Coordinate communication between and among current and future caregivers. Ensure the child is involved and the child/youth's input is considered in decision as appropriate to the child's age and level of

placement documentation to designated DFPS staff within 12 hours of placement occurring.	

(D) Referral, Coordination, and Delivery of Services to Families (Stages II and III).

(1) DFPS will:

- **a.** Notify the SSCC of any court ordered instructions regarding services to the family.
- **b.** Provide referral to the SSCC for coordinated purchased services.
- **c.** Provide electronic notice to the SSCC when an individual or family is no longer eligible for services.

(2) SSCC must:

- **a.** Maintain the capacity to accept referrals from DFPS for services to families of children referred to the SSCC 24 hours per day, 365 days per year.
- **b.** Accept all referrals (No Reject) made by DFPS and continue to meet the individual needs of the family and other individuals referred (No Eject), until DFPS determines an individual is no longer eligible for the SSCC services. This includes families and other individuals who reside outside of the catchment area.
- **c.** Adapt to and abide by local jurisdictional requirements regarding services for children, youth, and families served through the SSCC.
- **d.** Notify DFPS when the client is no longer attending services or when authorization for additional or new services is needed.
- (3) Referral for Coordination and Delivery of Services to the Family (Stages II and III) Roles, Responsibilities and Documentation Requirements (see Chart 3).

Chart 3: Referral for Family Services

DFPS Role	SSCC Role	SSCC Documentation Requirements
DFPS will refer families who require services that support the achievement of safety, permanency and well-being for the individual child in paid foster care to the SSCC electronically. Note: Families may remain eligible for the SSCC service coordination and delivery after their child has exited paid foster care so long as DFPS is still the legal conservator.	Review referral of family and identify potential services needed.	Must document service recommendations via IMPACT (if available).

(E) Child/Youth Assessment/Service Planning (Stages I, II, III)

(1) DFPS will:

- a. Provide access to all available, relevant information on the child and family to be used in the assessment process at time of referral and as it becomes available over the course of the case, including, but not limited to, information and documentation required by DFPS Residential Child Care Licensing Minimum Standards for Emergency and Non-Emergency Placements.
- **b.** Approve assessment tool developed by the SSCC, prior to implementation of Stage I.
- **c.** Within seven (7) days of referral, schedule the Initial Coordination Meeting (ICM) with the SSCC to review child (Stages I-III) and family (Stages II-IIII) case history and discuss the SSCC's recommendations for services to be provided to the child and family.
- **d.** Provide final approval for services agreed upon and documented in the Child and Family Plans of Service and subsequent revisions.
- **e.** Establish the permanency and concurrent goals for children and youth and their families in collaboration with the SSCC and in accordance with Judicial requirements.
- **f.** Notify the SSCC of all court ordered services for all children and families served through the SSCC.

(2) SSCC must:

- **a.** Ensure that all assessments: (1) are conducted from a trauma-informed, child-and-family centered, strength-based perspective; (2) consider the unique culture, experiences, and beliefs of the child and their family; (3) incorporate all evaluation and assessments completed through STAR Health or other providers; and (4) conform to Minimum Standards.
- **b.** Develop and implement a child and youth assessment tool, approved prior to implementation of Stage I, which addresses the child's strengths and needs in the following areas: physical, psychological, behavioral, family, social, and educational.
- c. Ensure that the family receives appropriate testing and assessment(s) as indicated by their case history, which can include, but is not limited to, psychological testing and evaluation and a substance abuse screening and assessment.
- **d.** Ensure timely delivery and continuity in the provision of services to meet the assessed needs for foster care and Preparation for Adult Living Life Skills Training (Stages I-III) and family services (Stages II-III) in accordance with the requirements established by DFPS.
- **e.** Develop and implement a process by which children, youth, and families may elevate concerns about the provision and/or quality of services provided.
- f. Ensure that all services identified in the Child (Stages I-III) and Family (Stages IIII) plans of services are provided and documented in a timely manner and support the child's permanency goal.
- **g.** Attend conferences and case planning staffings as requested by DFPS, including but not limited to, Initial Coordination Meetings (ICM), Family Group Conferences, Permanency Conferences, Circles of Support Conferences, staffings with STAR Health and meetings required by the court.

(3) Service Planning Model Assumptions.

- **a.** DFPS and the SSCC will work collaboratively to develop plans of service for children (Stages I, II, III) and their families (Stages II-III).
- **b.** Services will be identified and designed to support the child's permanency goal, including concurrent permanency goals, and will sufficiently address the reasons for DFPS intervention.
- **c.** The SSCC must ensure children, youth, families, and caregivers have an opportunity to participate in the identification of needed services and in the development of service plans.
- **d.** The SSCC must utilize and maximize services offered through other state agencies, for which DFPS children, youth, and/or families are a priority population.
- **e.** The SSCC must maximize purchase of service funding by utilizing community based services for which DFPS families are eligible.

(4) Child and Youth Service Planning (Stages I, II, III) - Roles, Responsibilities and Documentation Requirements (See Chart 4).

Chart 4: Child and Youth Service Planning

DFPS Role	SSCC Role	SSCC Documentation Requirements
At Referral		
Provide the SSCC access to relevant case information in IMPACT prior to the ICM. ICM Meeting Within 7 days of referral, schedule the Initial Coordination Meeting (ICM) with the SSCC to review child (Stages I-III) and family (Stages II-IIII) needs and outline services to address the assessed needs. Provide the SSCC two business days' notice of meeting. Service Planning	Share the SSCC preliminary service recommendations for child with DFPS during Initial Coordination Meeting (ICM). Actively participate in ICM meeting.	Share all assessments, evaluations and medical reports related to the child (Stage I) and family (Stage II and III) with DFPS.
Work jointly with the SSCC and schedule Initial and Subsequent Service Planning Meetings to develop	Schedule Initial and all Subsequent Service Planning Meetings to develop child plans of service within timeframes	Provide timely documentation (via IMPACT) for service planning. Share all assessments, evaluations and medical reports related to the

service plans.

Establish permanency and concurrent goal with input from the SSCC

Provide written reason for denial, and required changes if Service Plan proposed by the SSCC is denied by DFPS. The response must be provided within 3 business days of receipt of service plan.

Share and/or grant access to information relevant to the case with the SSCC within 7 days of receipt including court documents and significant events impacting permanency plan.

Visitation Planning

Work with the SSCC to identify visitation plan with family members and siblings if placed separately.
Provide the SSCC access to Documentation of Approved Visitation Plan.

Conduct visits with Children and their caregivers.

Actively participates in all service plan meetings.

Audit/Monitoring

Monitors and assesses all services to ensure appropriateness and

required by Texas Family Code and applicable licensing standards. The SSCC provides 14 days notice to DFPS of Service Plan Meetings.

Develop the written Service Plan via IMPACT and in accordance with the Texas Family Code and DFPS minimum standards.

Make all reasonable efforts to ensure children, youth, families and caregivers participate in service planning.

Work with DFPS to identify visitation plan with family members and siblings if placed separately.

Assist in arranging and provide transportation for visitation (Stage I).

Arrange, monitor, and transportation for visitation with relatives and/or fictive kin as approved by DFPS (Stages II-III).

Evaluate and report on the effectiveness of service being provided to children,

child (Stage I) and family (Stages II and III) with DFPS

Provide written service plan (via IMPACT) to DFPS worker at conclusion of meeting for approval or denial.

Stage II and III - Provide written reports of visitation to DFPS as required.

effectiveness.	youth and families.	
Ensure case plans meet state and federal requirements.	Adjust the service type, frequency and duration of services based on input received through staffings.	
Discharge Planning		
Work jointly with the SSCC to determine when a child or youth and their family are ready for discharge from services and achievement of their permanency goal.	Work jointly with DFPS to determine when a child or youth and their Family are ready for discharge from services and achievement of their permanency goal.	
Approve or deny within 5 business days, the SSCC's recommendation for discharge.	Ensure that discharge planning including services to prepare a child and youth for permanency is incorporated with the child and youth's service plan.	
Schedule a family meeting when it is time to discharge the child or youth from the SSCC for the achievement of the permanency goal.	Participate in a family meeting when the child or youth is ready for discharge to permanency.	

(5) Family Services Planning (Stages II and III) - Roles, Responsibilities and Documentation Requirements (See Chart 5).

Chart 5: Family Service Planning

DFPS Role	SSCC Role	SSCC Documentation Requirements
Schedule the Initial Coordination Meeting (ICM) with the SSCC to review child (Stages I-III) and family (Stages II-IIII) needs and outline services within 7 days of referral.	Share the SSCC preliminary service recommendations for child (Stages I-III) and family (Stages II-III) with DFPS during Initial Coordination Meeting (ICM).	Provide a monthly report to DFPS that outlines services being provided, missed appointments, overall progress with services and treatment plans.
Work jointly with the SSCC and schedule Initial and	Schedule Initial and all Subsequent Service Planning	Provide timely documentation of all service plans via

Subsequent Service Planning Meetings to develop service plans.

Work with the SSCC to identify visitation plan with family members and siblings if placed separately.

Notify the SSCC of permanency and concurrent goal.

Visits with parent and/or family member who is the subject of the Family Plan of Service.

Actively participate in all service plan meetings.

Monitors and assesses all services to ensure appropriateness and effectiveness.

Ensure case plans meet state and federal requirements.

Work jointly with the SSCC to determine when a child or youth and their family are ready for discharge from services and achievement of their permanency goal.

Schedule a family meeting when it is time to discharge the child or youth from the SSCC for the achievement of the permanency goal.

Meetings to develop Child Plans of Service in accordance with time frames established by the Texas Family Code.

Work with DFPS to identify visitation plan with family members and siblings if placed separately.

Identify available services to meet the family's needs through the assessment of the family's history and individual needs.

Provide DFPS with the SSCC service recommendations to develop the Family Plan of Service.

Ensure all family members who are subject of the Family plan of service participate in service planning.

Evaluate and report the family's level of compliance with services offered

Evaluate and report on the effectiveness of services being provided to family.

Adjust the service type, frequency and duration of services based on input received through joint service plan meetings.

Work jointly with DFPS to determine when a child or youth and their family are ready for discharge from services and achievement of their permanency goal.

Ensure that discharge planning including services to prepare a family for their child or youth's permanency is incorporated in the Family's service plan.

IMPACT (if available) and changes in service array or delivery.

Document all meetings and visits with Family members.

Create and maintain individual client record which includes the following:

- Form 2054
- DFPS Child and Family Plans of Service
- Individual treatment or service plan with periodic updates documenting progress or lack of progress.
- All reports required by contract
- Court reports and orders received
- documentation to support services received such as who received the services, who provided the services, when and where they were provided, the duration and the outcome.:
 - Date and manner of submission of assessments, plans, or reports required by contract
 - Case notes, including documentation of complaint investigations, court-related services, diagnostic consultations with the DFPS caseworker and

Participate in a family meeting (for	translator and
youth aging out refer to	interpreter
Transitional Living Services	services.
section of this Contract) when	
their child or youth is ready for	
discharge to permanency.	

(6) Sample Array for Family Services. Chart 6 provides examples of services previously delivered to families served by DFPS. The SSCC will not be limited to providing only the services listed below and inclusion of this table is not meant to imply the availability of funds for each of these services (see Chart 6).

Chart 6: Sample Service Array

Article I. Service	Article II. Description
Evaluation and Treatment Services	Assessments: Psychosocial, substance abuse assessment Evaluation: Psychological, Developmental, or Psychiatric evaluation Treatment: Individual, Group or Family counseling to include substance abuse counseling
Substance Abuse Testing & confirmation	Testing to identify or confirm the existence of a drug in a person's system
Preparation for Adult Living (PAL) Services*	Life skills training and other services for the purpose of preparing a youth in substitute care to live independently when he or she becomes an adult or to assist the youth during transition to adulthood after leaving foster care.
Foster Care Day Care*	Foster Care Day Care is for children placed in a foster family or foster group home with foster parents who are employed full-time as funding is available.
Concrete Services	The purchase of goods or services to increase the safety of the home or better meet the needs of the child.
Translator and interpreter services	Communication services utilized when a client's ability to communicate is diminished due to Limited English Proficiency or some other communication disability.
Purchased Adoption Services*	To increase permanency placement options for children awaiting adoption by recruiting, training and verifying adoptive homes; handle adoptive placements of the children; provide post-placement supervision; and facilitate the consummation of the adoption.

^{*}These purchased services are required components of the SSCC Continuum of Care Child's Physical and Behavioral Health Needs (Stages I, II, III) - Roles, Responsibilities and Documentation Requirements (see Chart 7).

Chart 7: Health Needs

DFPS Role	SSCC Role	SSCC Documentation
		Requirements
Ensure proper consent is obtained for children in paid foster care placement for all physical, psychotropic medication and behavioral health and substance abuse treatment. Inform the SSCC of any known physical or behavioral health issues, medications prescribed and/or substance abuse issues that need to be addressed upon referral or as soon as DFPS becomes aware of health issues requiring special attention Monitor all physical and behavioral health services to ensure the child's individual needs are being met.	Coordinate all physical and behavioral health and/or prescribed medication(s) and/or substance abuse related services identified in the service plan. Ensure children in paid foster care placement receive initial and all follow-up Texas Health Steps, Early and Periodic Screening and Diagnostic and Treatment (EPSDT) exams, including Early Childhood Intervention (ECI) referral, and dental exams in accordance with STAR Health and DFPS Policy timeframes. Ensure the caregiver provides written consent for the child's ECI information to be entered into the child's Health Passport. All services identified will be	Maintain documentation in accordance with what is required in DFPS Minimum Standards.
	All services identified will be accessed through the STAR Health Network, with the exception of substance abuse services that are accessed through the Department of State Health Services (DSHS).	
	Provide or ensure the provision of all mental and behavioral health related services identified in the Child's Plan of Service.	
	Ensure proper oversight of any prescribed psychotropic medication.	
	Schedule and transport children to and from appointments.	
	Notify DFPS of any Texas Health Steps medical and dental appointments, medical emergencies, known significant physical or behavioral health concerns or changes, including when a child's psychotropic medications fall outside the	

Psychotropic Medication Parameters.	

(7) Transitional Living Services (Stages I, II, III) - Roles, Responsibilities and Documentation Requirements (See Chart 8).

Chart 8: Transitional Living Services

DFPS Role	SSCC Role	SSCC Documentation Requirements
Work jointly with the SSCC and schedule the initial planning meeting for transitional plan for youth	Jointly works with DFPS to initiate initial planning meeting for the development of a transitional plan for youth resulting in one plan followed by the SSCC and DFPS	Document services to help the youth meet identified needs to achieve Independent or Transitional Living.
Approves the youth's transitional plan	Use DFPS Transitional Plan template (Form 2500)	Provide completed 2540 Forms
Tracks all transitional living services for the Youth Identify youth to be surveyed and enter required data and maintain National Youth in	Work with each youth and family to develop and implement a Transition Plan and to attend and participate in all planning meetings	Document Life Skills Training as well as experiential Life Skills Learning
Transition Database (NYTD). Confirm eligibility for all transitional living services and financial supports to the SSCC.	Arrange for annual standardized Transitional Plan assessments (currently the Ansell-Casey Skills Assessment) and its interpretation to be shared and discussed with the youth and the caregiver.	Voluntary Extended Foster Care Agreement (Form 2540) must be completed within 30 days of the youth's 18 th birthday or 30 days after the youth's 18 th birthday.
Schedule and facilitate Circle of Support (COS) Meetings to develop the youth's Transition Plan. Determine the youth's (ages 18-22) eligibility for Extended	Assist DFPS in obtaining NYTD surveys from identified youth at ages 17, 19, and 21. Provide identified services to help the Youth achieve independence	Document and report by the 15 th of the month following the month of service all Preparation for Adult Living Life Skills
Care and/or Return to Care. Ensure that the youth signs the Voluntary Extended Foster	Assist the youth in applying for and securing services to transition from dependency to adulthood.	training completed by each youth to DFPS. More frequent reporting will be required during the some months to be incompliance
Care Agreement (Form 2540) in a timely manner. Ensure Life Skills training	Work with youth and other significant individuals to identify and foster lifelong connections to caring adults that can be sustained after	with NYTD.

completed by youth is	the youth leaves the system.	
documented in IMPACT.		
	Assist DFPS in obtaining the	
	Voluntary Extended Foster Care	
	Agreement (Form 2540), 7 days before child's 18 th birthday.	
	before cring's to birthay.	
	Participate in youth's Circle of	
	Support Meetings.	
	Arrange and ensure participation of	
	Arrange and ensure participation of all referred youth in Preparation for	
	Adult Living Life Skills Training.	
	Develop and deliver PAL Life Skills	
	Training utilizing the curriculum topics found in Appendix 10212:	
	Preparation for Adult Living Skills	
	Training Curriculum Outline at:	
	http://www.dfps.state.tx.us/handboo	
	ks/CPS	
	Include experiential and community-	
	based learning as a part of PAL	
	Services	
	http://www.dfps.state.tx.us/PCS/Res	
	idential_Contracts/contract_resourc es.asp	
	<u> </u>	
	The SSCC will assist the child/youth	
	in maintaining necessary	
	documentation for Voluntary Extended Foster Care/Return to	
	Care eligibility.	

(8) Adoption (Stages I, II & III) - Roles, Responsibilities and Documentation Requirements (See Chart 9).

Chart 9: Adoption

DFPS Role	SSCC Role	SSCC Documentation Requirements
Responsible for all legal/court activities related to termination of parental rights, legal risk placement, adoption, and eligibility for post-adoption subsidies and services.	Recruit and approve adoptive homes Place children in DFPS approved legal risk and/or adoptive home.	Provide documentation of these services.

Approve or deny the SSCC's selected adoptive home study; if selection is denied, provide in writing the rationale for the decision, including specific reasons that would indicate why the family was not an appropriate match and/or how the decision is not in conformity to the agreed upon placement guidelines.	Provide services to prepare and support adoptive placements. Obtain assessments and services needed to ensure placement stability in a legal risk and/or adoptive home prior to consummation.	
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(F) DFPS Court (Stages I, II, III). Court services are required of both DFPS and the SSCC whenever DFPS has legal conservatorship of a child. State and federal requirements mandate that children in DFPS' legal conservatorship have periodic court reviews. The court reviews include, but are not limited to, the review of the child's placement, child and family services, summary of medical care, and progress towards permanency. DFPS will provide the SSCC access to all available court orders, reports and information.

(1) SSCC must:

- a. Ensure that the SSCC's agents, employees, volunteers, and subcontractors appear and testify in judicial proceedings, depositions and administrative hearings relating to the child (Stages I-III) and family (Stages II & III), at the request of the Department or court.
- **b.** Notify or assist the Department in locating past agents, employees, volunteers or subcontractors when DFPS needs past agents, employees, volunteers, or subcontractors to appear and testify in accordance with services offered under the purview of this contract.
- **c.** Ensure that children and youth attend all court hearings as requested by DFPS or required by the court, unless excused by the presiding judge prior to the court hearing.
- **d.** Comply with and/or assist DFPS in complying with all court orders and jurisdictional requirements.
- e. If the SSCC fails to comply with any court order or other governmental requirement and a court imposes a monetary penalty upon DFPS, then the Department will recoup such damages against the SSCC in the amount attributable to the SSCC's noncompliance.

(2) DFPS Court (Stages I, II, III) - Roles, Responsibilities and Documentation Requirements (See Chart 10)

Chart	10:	Court	Requirements

DFPS Role	SSCC Role	SSCC Documentation Requirements
Prepare court report, attend court and testify	Attend court hearings and/or preparation meetings as requested	Maintain documentation of all court orders

Notify the SSCC of all scheduled court hearings

Provide the SSCC a copy of court orders, settings, notices, court reports, including CASA or guardian ad-litem reports and other relevant court information

by DFPS, CASA, child's attorney or other members of the judiciary

Notify DFPS of who will be attending court electronically prior to court hearing 20 days prior to scheduled hearing

Provide information necessary for preparation of court reports 20 days prior to scheduled hearing

Provide supplemental information for inclusion in court report when significant events occur prior to scheduled hearing

Ensure attendance of staff with personal knowledgeable of case at all court hearings unless excused by the presiding judge.

Provide notice to caregiver of all court hearings.

Notify DFPS immediately of any service of legal process including but not limited to summons, subpoena, or discovery notices related to performance under contract.

Ensure children and youth attend court hearings, unless excused by the presiding judge prior to the court hearing. Attendance may occur through video conference and/or teleconference when appropriate and if approved by the court

Document and provide all information requested by DFPS in order to complete court reports.

Section 2.17 SSCC Model's Fiscal Requirements (Stages I, II, III)

(A) The SSCC must:

(1) Develop and maintain comprehensive, accurate written financial operating procedures, subject to review and approval by DFPS.

- (2) The SSCC must have independent financial audits conducted annually and provide the results to DFPS within thirty (30) days from the receipt of findings provided by the independent auditor. Audits must be conducted by a Certified Public Accountant (CPA) licensed by the state regulatory body of the state in which the audit was performed. An audit conducted pursuant to Single Audit Requirements meets the conditions of this subsection.
- (3) Provide all financial information requested by DFPS in an appropriate format within 3 business days of the request.
- (4) Maintain sufficient cash management policies and procedures to produce cash flow reports that meet the requirements of DFPS.
- (5) Coordinate and pay for services, required in individual service plans for children and families referred to the SSCC by DFPS.
- (6) Ensure that financial and utilization management systems are in place to guarantee accountability for dollars spent and the capacity to manage financial risk.
- (7) Assume responsibility for any monitoring/audit exception or other payment irregularity regarding services provided under the contract.
- (8) Demonstrate the ability to manage funding to provide services within available resources.
- (9) In accordance with 1 TAC §355.7101(6), the SSCC must use an accrual accounting system that reflects the application of generally accepted accounting principles (GAAP) approved by the American Institute of Certified Public Accountants (AICPA).
- (10) Submit a detailed Accounting Policy Manual to DFPS within 60 days after contract execution that includes the following:
 - **a.** A detailed description of an accounting system capable of supporting the operation and management of a provider network, payroll, and subcontractor payments.
 - **b.** Fiscal policies and procedures that address payment, invoices, delinquencies, reconciliation, audits, and other standard accounting procedures.
 - c. A detailed description of an information system that supports the management and oversight of services and an information system that collects, integrates, and reports financial and outcome data.
 - d. The SSCC must update the Accounting Policy Manual at least 60 days before transition to Stages II and III. After Stage III, the SSCC will update the SSCC Accounting Policy Manual at least 30 days before each new state fiscal year unless such a date falls within 120 days of Stage III implementation, in which case the SSCC will update the SSCC Accounting Policy Manual 30 days before the next state fiscal year. DFPS must approve of each update to the SSCC Accounting Policy Manual

Section 2.18 Required Reports. The SSCC must ensure compliance with report requirements outlined in the SSCC contract and DFPS Residential Child-Care Minimum Standards. The SSCC must accurately complete cost reports, time studies, Internal Control Structure Questionnaires (ICSQs), Contract Monitoring surveys, Performance Measurement reports, and any other reports required and requested by the Department within time frames specified by DFPS. The SSCC must submit annual cost reports as required by 1 TAC §355, Subchapter H.

- (A) The number of subcontracts competitively procured,
- **(B)** The number of subcontracts that are performance-based,
- (C) The number of SSCC and subcontractor (if applicable to the SSCC model) staff that receive Trauma Informed Care training annually,

- (D) The number of children and youth who remain in their school after placement and during placement,
- (E) Monthly staffing reports (including but not limited to, the number of vacancies by position type, the turnover rate by position type, and the new hires by position type),
- **(F)** Monthly report of incidents and complaints,
- **(G)** Monthly report on status of complaints/resolutions.
- (H) Monthly report that includes the number of SSCC and subcontractor foster homes broken out by how many foster homes are verified by the SSCC and how many foster homes are verified by each individual subcontracting Child Placing Agency (CPA).
- (I) If the SSCC ties payment for care or placement to a utilization management review then the SSCC will provide a monthly report indicating the results of the utilization management review of each child in the SSCC continuum.

Section 2.19 Performance Measures and Associated Remedies. DFPS will monitor the performance of the contract. All services and deliverables under the contract shall be provided at an acceptable quality level and in a manner consistent with acceptable industry standard, custom, and practice. Contractor performance evaluation is based on assessment of the performance measures outlined in this section, compliance with the terms and conditions of the Contract, and compliance with Minimum Standards, as indicated by DFPS records and Contract Monitoring performed by Department staff.

- (A) Goal of the Contract. The goal of this Contract is to ensure the provision of the full continuum of services for all referred children and their families and/or any other individual or entity directly involved in supporting the achievement of safety, permanency, and well-being of the child by developing a community-based service delivery model that fully engages communities within the catchment area and ensures effective and efficient service delivery, continuity of care, and improved outcomes for children and their families.
- (B) Performance Measures. The contractor will achieve measures for the initial contract period. Measures for renewals are subject to change on an annual basis. DFPS may compute new baselines, and revise the indicators, targets, data sources, or methodologies for the measures during the contract period. The SSCC will be required to collect and report certain performance measure data in the DFPS Performance Management Evaluation Tool (PMET), which is an internet-based data collection and reporting system. The SSCC will be required to register an account in the PMET system within 30 days after the first service is provided, according to the instructions found at:

https://www.dfps.state.tx.us/application/PCSPMET.

Select Help, then PMET User Guide. Documentation must be maintained in a manner which allows for testing the validity of results reported for each performance period. Results for this contract must be reported quarterly, according to the following schedule.

Performance Period	Period Covered	PMET Entry Period
Quarter 1	Sept, Oct, Nov	December 1-30
Quarter 2	Dec, Jan, Feb	March 1-30
Quarter 3	Mar, Apr, May	June 1-30
Quarter 4	Jun, Jul, Aug	September 1-30

If, at any time during the term of the contract, changes to a measure are necessary due to changes in federal or state laws, rules, regulations, or code, the performance of the SSCC will be measured under the new requirements.

Performance measure data may be used by DFPS to make decisions about contract status, to adjust the nature and intensity of DFPS' contract monitoring and quality assurance activities, and to keep stakeholders informed about the success of the performance based contracting effort.

DFPS will track performance throughout the contract period. Any and all analyses can be used by DFPS to determine subsequent performance targets or the need for contract changes. The performance measures are defined below:

Outcome 1: Children/youth are safe in foster care.

Indicator: Percent of children/youth who do not experience an incidence of abuse, neglect or exploitation while placed with the SSCC.

Performance Period: Contractor performance for this outcome is determined for one or more of the following performance periods, wholly or partially, depending on the Contract start and end dates: September 1 through November 30, December 1 through February 28/29, March 1 through May 31, and June 1 through August 31. The quarterly measurements will be cumulative to determine the annual performance.

Target: 100%

Purpose: The purpose of this measure is to evaluate the Contractor's ability to safely place the children/youth referred to the SSCC. This outcome directly relates to DFPS' mission to protect children/youth from abuse/neglect and to Safety Outcome 2 measured by the Child and Family Services Review (CFSR) of the US Health and Human Services Administration for Children and Families.

Data Source: Information Management Protecting Adults and Children in Texas (IMPACT); information used for the performance period:

- Facility (operation) as described in 40 TAC §745.37(3)(A)-(I), with an active SSCC placement;
- Number of unduplicated DFPS placements with the SSCC that were active at any point during the performance period; and
- Number of unduplicated Designated Victims at the SSCC for which a disposition of Reason to Believe was upheld.

Methodology:

The numerator is the number of children/youth who are/were in DFPS managing conservatorship, placed with the SSCC, and Designated Victims as determined by a Residential Child-Care Licensing (RCCL) investigation, for which a disposition of RTB was Upheld during the performance period.

The denominator is the total number of children/youth in DFPS managing conservatorship placed with the SSCC during the performance period.

Divide the numerator by the denominator. Subtract the result from one (1) to give the complimentary "Children not Designated Victims" measurement. Multiply by 100 and state as a percentage.

Outcome 2: Children/youth have stability in their placement.

Indicator: Percent of children/youth who have two or fewer placements during a two-year performance period, counting only placements that occur while in the SSCC's care.

Performance Period: Contractor performance for this outcome is determined biennially but measured and reported for the following six month intervals, wholly or partially depending on the Contract start and end dates: September 1 through February 28/29 and March 1 through August 31.

The six month measurements will be cumulative to determine the biennial performance.

Target: [XX]%, based on the [statewide/regional/catchment area] average for [period].

Purpose: The purpose of this measure is to evaluate the SSCC's ability to improve placement stability. This relates to Item 6 of the Child and Family Services Review (CFSR) of the US Health and Human Services Administration for Children and Families.

Data Source: Information Management Protecting Adults and Children in Texas (IMPACT); information used for the performance period:

- Number of children/youth who are placed with the SSCC during the performance period and have two or fewer placements while in the SSCC's care and during the performance period.
- Number of children/youth who are placed with the SSCC during the performance period.

Methodology:

The numerator reports the number of children/youth from the denominator in the SSCC's care with two or fewer placements during the two-year performance period, as stated in the Data Source.

Two types of denominators will be used for this measure. The first type is the in care population. This denominator is the number of children/youth who are in the SSCC's care at the start of the two year window. The second type is the admission population- the number of children admitted in each 12 month entry year during the two year performance period, as stated in the Data Source.

Divide the numerator by the denominator. Multiply by 100 and state as a percentage.

Outcome #3: Children/youth are able to maintain connections to family and community.

Indicator a: Percent of children/youth placed within 50 miles of their home.

Performance Period: Contractor performance for this outcome is determined for one or more of the following performance periods, wholly or partially, depending on the Contract start and end dates: September 1 through November 30, December 1 through February 28/29, March 1 through May 31, and June 1 through August 31.

Target: XX%, based on the [statewide/regional/catchment area] average for [period].

Purpose: The purpose of this measure is to evaluate the SSCC's ability to serve children/youth closer to home, which increases the likelihood they will remain connected to their siblings, families, peers and schools. Close proximity makes it easier for parents, CPS case workers, and advocates to visit children/youth more frequently by reducing travel time and costs for all involved. This relates to Item 11 of the Child and Family Services Review (CFSR) of the US Health and Human Services Administration for Children and Families.

Data Sources:

- Information Management Protecting Adults and Children in Texas (IMPACT); information used for the performance period - number of children/youth who were in placement with the SSCC on the last day of the performance period.
- Mapping Software number of children/youth who were in placement with the SSCC on the
 last day of the performance period and placed within 50 miles of their home (removal address)
 using the shortest driving distance, or distance along networks as defined by software
 systems.

Methodology:

The numerator is the number of children/youth who were placed within 50 miles of their home, as stated in the Data Source.

The denominator is the number of children/youth who were placed with the SSCC, as stated in the Data Source.

Divide the numerator by the denominator. Multiply by 100 and state as a percentage.

Outcome #3: Children/youth are able to maintain connections to family and community.

Indicator b: Percent of cases where all siblings are placed together.

Performance Period: Contractor performance for this outcome is determined for one or more of the following performance periods, wholly or partially, depending on the Contract start and end dates: September 1 through November 30, December 1 through February 28/29, March 1 through May 31, and June 1 through August 31.

Target: [XX]%, based on the [statewide/regional/catchment area] average for [period].

Purpose: The purpose of this measure is to evaluate the SSCC's ability to place complete sibling groups together. This relates to Item 12 of the Child and Family Services Review (CFSR) of the US Health and Human Services Administration for Children and Families.

Data Source: Information Management Protecting Adults and Children in Texas (IMPACT); information used for the performance period:

- Number of sibling groups that were in placement with the SSCC on the last day of the performance period where all siblings were in the same placement.
- Number of sibling groups that were in placement with the SSCC on the last day of the performance period. (Only includes siblings placed with this SSCC.)

Methodology:

The numerator is the number of sibling groups that were placed with all other siblings, as stated in the Data Source.

The denominator is the number of sibling groups that were placed with the SSCC, as stated in the Data Source.

Divide the numerator by the denominator. Multiply by 100 and state as a percentage.

Outcome #3: Children/youth are able to maintain connections to family and community.

Indicator c: Percent of children/youth in foster care who have at least one monthly personal contact with a Family member who is not a parent or sibling but could be another person who has a significant, long-standing relationship with the Child or the Child's family and is identified as appropriate for contact by DFPS.

Performance Period: Contractor performance for this outcome is determined for one or more of the following performance periods, wholly or partially, depending on the Contract start and end dates: September 1 through November 30, December 1 through February 28/29, March 1 through May 31, and June 1 through August 31.

Target: Data will be collected during the first year of placements and used to set a target.

Purpose: The purpose of this measure is to evaluate the SSCC's ability to help the child/youth maintain connections with Family, other than parents or siblings, and others who are important to the child/youth. This directly relates to Item 14 of the Child and Family Services Review (CFSR) of the US Health and Human Services Administration for Children and Families.

Data Source: Performance Management Evaluation Tool (PMET); information reported by the SSCC:

- Number of children/youth under age 18 who have had at least one personal contact each
 month during the performance period with a Family member who is not a parent or sibling but
 could be another person who has a significant, long-standing relationship with the Child or the
 Child's family and is identified as appropriate for contact by DFPS.
- Number of children/youth under age 18 who had at least one Family member who is not a
 parent or sibling but could be another person who has a significant, long-standing relationship
 with the Child or the Child's family and is identified as appropriate for contact by DFPS.

Methodology:

The numerator is the number of children/youth who had at least one personal contact each month, as stated in the Data Source.

The denominator is the number of children/youth, as stated in the Data Source.

Divide the numerator by the denominator. Multiply by 100 and state as a percentage.

Outcome #3: Children/youth are able to maintain connections to family and community.

Indicator d: Percent of children/youth in foster care who have at least monthly personal contact with each sibling in foster care.

Performance Period: Contractor performance for this outcome is determined for one or more of the following performance periods, wholly or partially, depending on the Contract start and end dates: September 1 through November 30, December 1 through February 28/29, March 1 through May 31, and June 1 through August 31.

Target: Data will be collected during the first year of placements and used to set a target.

Purpose: The purpose of this measure is to evaluate the SSCC's ability to help the child/youth maintain connections with siblings who are also in foster care. This relates to Item 13 of the Child and Family Services Review (CFSR) of the US Health and Human Services Administration for Children and Families.

Data Source: Performance Management Evaluation Tool (PMET); information reported by the SSCC:

- Number of children/youth under age 18 who are part of a sibling group not placed together and have had at least one face-to-face contact with each sibling placed in the same region or within 50 miles, or at least two telecommunications contacts with each sibling placed in a different region and more than 50 miles away, for each month during the performance period.
- Number of children/youth under age 18 who are part of a sibling group not placed together for each month during the performance period. Exceptions to this include when sibling contact is prohibited by court order or contrary to the best interest of the child/youth as documented in any of the Plans of Service of a sibling or by a mental health professional treating any of the siblings. (Includes all siblings in any DFPS placement.)

Methodology:

The numerator is the number of children/youth who are part of a sibling group and had the specified contact(s) each month, as stated in the Data Source.

The denominator is the number of children/youth who are part of a sibling group, as stated in the Data Source.

Divide the numerator by the denominator. Multiply by 100 and state as a percentage.

Outcome #4: Youth are fully prepared for adulthood.

Indicator a: Percent of Youth in foster care who have a Regular Job at some time during the year.

Performance Period: Contractor performance for this outcome is determined annually but measured quarterly throughout the contract period, using the following quarters, wholly or partially, depending on the Contract start and end dates: September 1 through November 30, December 1 through February 28/29, March 1 through May 31, and June 1 through August 31. The quarterly measurements will be cumulative to determine the annual performance.

Target: Data will be collected during the first year of placements and used to set a target.

Purpose: The purpose of this measure is to evaluate the SSCC's ability to help the child/youth obtain job experience in preparation for adulthood.

Data Sources:

- Performance Management Evaluation Tool (PMET); information reported by the SSCC:
 Number of youth in care who are age 16 or older on or before the last day of the performance period and have had a Regular Job during the performance period.
- Information Management Protecting Adults and Children in Texas (IMPACT): Number of youth in care who are age 16 or older on or before the last day of the performance period.

Methodology:

The numerator is the number of youth in care who had a Regular Job during the performance period, as stated in the Data Source. Quarterly data will be added together.

The denominator is the number of youth in care, as stated in the Data Source. Quarterly data will be added together.

Divide the numerator by the denominator. Multiply by 100 and state as a percentage.

Outcome #4: Youth are fully prepared for adulthood.

Indicator b: Percent of 17-year-old youth who have completed PAL Life Skills Training.

Performance Period: Contractor performance for this outcome is determined for one or more of the following performance periods, wholly or partially, depending on the Contract start and end dates: September 1 through November 30, December 1 through February 28/29, March 1 through May 31, and June 1 through August 31.

Target: XX%, based on the [statewide/regional/catchment area] average for [period].

Purpose: The purpose of this measure is to evaluate the SSCC's ability to help the youth complete PAL training before his/her 18th birthday.

Data Source: Information Management Protecting Adults and Children in Texas (IMPACT); information used for the performance period:

- Number of youth in care who are age 17 at any time during the performance period and have completed PAL Life Skills Training.
- Number of youth in care who are age 17 at any time during the performance period.

Methodology:

The numerator is the number of youth in care who are age 17 and have completed PAL Life Skills Training, as stated in the Data Source.

The denominator is the number of youth in care who are age 17, as stated in the Data Source.

Divide the numerator by the denominator. Multiply by 100 and state as a percentage.

Outcome #4: Youth are fully prepared for adulthood.

Indicator c: Percent of youth age 16 or older who have a driver's license or state identification card. **Performance Period:** Contractor performance for this outcome is determined for one or more of the following performance periods, wholly or partially, depending on the contract start and end dates: September 1 through November 30, December 1 through February 28/29, March 1 through May 31, and June 1 through August 31. The quarterly measurements will be cumulative to determine the annual performance.

Target: Data will be collected during the first year of placements and used to set a target.

Purpose: The purpose of this measure is to evaluate the SSCC's ability to help the youth obtain a driver's license or a state identification card.

Data Sources:

Performance Management Evaluation Tool (PMET); information reported by the SSCC:
 Number of youth in foster care age 16 or older on the last day of the performance period who

have been issued a driver's license and/or state identification card.

 Information Management Protecting Adults and Children in Texas (IMPACT); information used for the performance period: Number of youth in foster care age 16 or older on the last day of the performance period.

Methodology:

The numerator is the number of youth in foster care age 16 or older who had been issued a driver's license and/or state identification, as stated in the Data Source.

The denominator is the number of youth in foster care age 16 or older, as stated in the Data Source.

Divide the numerator by the denominator. Multiply by 100 and state as a percentage.

Outcome #5: Children/youth in foster care are placed in the least restrictive placement setting.

Indicator: Percent of children/youth in foster care placed in a foster family home.

Performance Period: Contractor performance for this outcome is determined for one or more of the following performance periods, wholly or partially, depending on the Contract start and end dates: September 1 through November 30, December 1 through February 28/29, March 1 through May 31, and June 1 through August 31.

Target: [XX]%, based on the [statewide/regional/catchment area] average for [period].

Purpose: The purpose of this measure is to evaluate the SSCC's ability to place as many children/youth as possible in the least restrictive placement setting of a foster family home.

Data Source: Information Management Protecting Adults and Children in Texas (IMPACT); information used for the performance period:

- Number of children/youth in placement in a foster family home with the SSCC on the last day
 of the performance period.
- Number of children/youth in placement with the SSCC on the last day of the performance period.

Methodology:

The numerator is the number of children/youth placed in a foster family home with the SSCC, as described in the Data Source.

The denominator is the number of children/youth placed with the SSCC, as described in the Data Source.

Divide the numerator by the denominator. Multiply by 100 and state as a percentage.

Outcome #6: Children/youth participate in decisions that impact their lives.

Indicator a: Percent of children/youth age 10 or older who participated in development of any DFPS-approved Service Plan.

Performance Period: Contractor performance for this outcome is determined for one or more of the following performance periods, wholly or partially, depending on the Contract start and end dates: September 1 through November 30, December 1 through February 28/29, March 1 through May 31, and June 1 through August 31.

Target: Data will be collected during the first year of placements and used to set a target.

Purpose: The purpose of this measure is to evaluate the SSCC's ability to actively engage children and youth in the decision-making process with parties and providers on issues affecting their life. This relates to Item 18 of the Child and Family Services Review (CFSR) of the US Health and Human Services Administration for Children and Families.

Data Source: Information Management Protecting Adults and Children in Texas (IMPACT); information used for the performance period:

 Number of DFPS-approved Service Plans completed for children/youth age 10 or older during the performance period where the child/youth participated in the development of the Plan Total number of DFPS-approved Service Plans completed for children/youth age 10 or older during the performance period.

Methodology:

The numerator is the number of children/youth who participated in the development of their Service Plan as described in the Data Source.

The denominator is the number of DFPS-approved Service Plans, as described in the Data Source.

Divide the numerator by the denominator. Multiply by 100 and state as a percentage.

Outcome #6: Children/youth participate in decisions that impact their lives.

Indicator b: Percent of children/youth who participated in at least one discussion about the child's/youth's opinion regarding placement options.

Performance Period: Contractor performance for this outcome is determined for one or more of the following performance periods, wholly or partially, depending on the Contract start and end dates: September 1 through November 30, December 1 through February 28/29, March 1 through May 31, and June 1 through August 31.

Target: Data will be collected during the first year of placements and used to set a target.

Purpose: The purpose of this measure is to evaluate the SSCC's ability to include children/youth in placement decisions.

Data Sources:

- Performance Management Evaluation Tool (PMET); information reported by the SSCC: Number of placement changes during the performance period where the child/youth in foster care participated, to the extent of the child's ability, in at least one discussion regarding their placement change that occurred.
- Information Management Protecting Adults and Children in Texas (IMPACT); information used for the performance period: Number of placement changes during the performance period.

Methodology:

The numerator is the number of placement changes where children/youth were able to participate in discussions, as described in the Data Source.

The denominator is the number of placement changes, as described in the Data Source.

Divide the numerator by the denominator. Multiply by 100 and state as a percentage.

Outcome #6: Children/youth participate in decisions that impact their lives.

Indicator c: Percent of court hearings attended by children/youth age 10 or older.

Performance Period: Contractor performance for this outcome is determined for one or more of the following performance periods, wholly or partially, depending on the Contract start and end dates: September 1 through November 30, December 1 through February 28/29, March 1 through May 31, and June 1 through August 31.

Target: Data will be collected during the first year of placements and used to set a target.

Purpose: The purpose of this measure is to evaluate the SSCC's ability to include children/youth in the court process. This relates to Item 18 of the Child and Family Services Review (CFSR) of the US Health and Human Services Administration for Children and Families.

Data Source: Performance Management Evaluation Tool (PMET); information used for the performance period:

Number of court hearings attended by children/youth age 10 or older during the performance

period.

• Number of court hearings for children/youth age 10 or older during the performance period. A hearing spanning more than one day would be counted as one hearing. A hearing involving more than one child/youth would be counted for each child/youth age 10 or older.

Methodology:

The numerator is the number of court hearings attended by children/youth, as described in the Data Source.

The denominator is the number of court hearings for children/youth age 10 or older, as described in the Data Source.

Divide the numerator by the denominator. Multiply by 100 and state as a percentage.

Article III. Utilization and Compensation

Section 3.01 Resource Distribution. As DFPS and the SSCC move through the Stages of Implementation, some of the functions that have traditionally been the responsibility of DFPS will shift to the SSCC. These functions include child placement, contract management, and foster home development and maintenance. The DFPS budget for child placement and contract management staff resources allocated to the catchment area for FY2013 will be negotiated and transferred to the SSCC commensurate with the transfer of the functions. Resource transfer will be renegotiated as agreed and will be based on caseload related appropriations changes.

DFPS resources for recruiting, developing and maintaining foster care placements and functions are provided to the SSCC through the blended foster care per diem rate.

The estimated DFPS budget for child placement and contract management staff resources that allocated to the catchment area in FY2013 and FY2014 is referenced in the chart below.

	Estimated Annual Average Resource Transfer		
Catchment Area	Placement	Contract	Total
Salary	\$147,536	\$227,546	\$375,082
Consumable Supplies	\$3,665	\$5,492	\$9,157
Utilities	\$ 2,784	\$2,198	\$4,982
Travel	\$16,991	\$14,924	\$31,915
Rent - Machine & Other	\$ 2,999	\$ 4,509	\$7,508
Other Operating Expense	\$31,974	\$47,915	\$79,889
Total Annual Cost Allocation for Resource Transfer	\$205,949	\$302,584	\$508,533

	Annual Average Cost Per Resource Transfer		
Catchment Area	Placement Contract Total		
Salary	\$40,421	\$41,599	\$41,127
Consumable Supplies	\$1,004	\$1,004	\$1,004
Utilities	\$763	\$402	\$546
Travel	\$ 4,655	\$2,728	\$3,499
Rent - Machine & Other	\$822	\$824	\$823
Other Operating Expense	\$8,760	\$ 8,760	\$8,760
Total Annual Cost Per Allocation for Resource	\$ 56,424	\$ 55,317	\$55,760

Transfer			
Authorized FTEs	3.7	5.5	9.1

- (A) Resource Distribution and Purchased Services Allocation Methodology. The methodology used to allocate staff and purchased services for the agency is determined through the Equity of Service Statements (ESS) process based on the annual appropriated funding for the agency. The ESS is developed to determine an equitable distribution of agency resources to all regions of the state and is based on CPS workloads in each region. The agency collects case data and develops a workload allocation model that is based on specific caseload activity. The average full time equivalent (FTE) funding is then calculated for each region based on the total FTEs determined through the ESS process and is distributed by budget category (Salary, Travel and Overhead). The purchase services allocation is based on the annual appropriated funding distributed through the ESS process.
 - (1) The methodology used to determine the funding available for the resource distribution and purchased services allocations for the catchment area is based on the estimated FY2014 appropriated funding allocated to DFPS Region 3 through the ESS process. The Region 3 allocation is then distributed to the County level within Region 3 based on a historical 5-year average (FY2008-FY2012) of children and youth in paid foster care to determine the percentage of estimated resource transfer and purchased services allocation to the catchment area.
 - (2) The timing and amounts of resources will be in part dependent on the SSCC's proposed model, transition, and readiness plans as well as be commensurate with appropriated available funding. DFPS will negotiate the terms of the resource transfer with the SSCC prior to contract execution. DFPS and the SSCC will also meet at least thirty (30) days prior to the end of each state fiscal year in order to negotiate the resource transfer for the following fiscal year.
- (B) Initial Resource Transfer. DFPS will provide the SSCC with an upfront, one-time payment of \$208,262.00 for the purposes of building a provider network to manage DFPS referrals in the catchment area. Prior to the transfer of these funds, the SSCC must provide a Budget detail report to DFPS outlining how the SSCC will expend Initial Resource Transfer Funds. The SSCC may not use Initial Resource Transfer Funds to purchase equipment. Additionally, the SSCC must submit a final expenditure report to DFPS on or before September 30, 2014. If the total upfront funding is not expended by the SSCC by August 31, 2014, any unexpended funds must be returned to DFPS no later than September 30, 2014.
- (C) Resource Transfer for Staged Implementation. DFPS will retain the resources associated with the functions necessary to operate the catchment area legacy system, and the Department will provide a percentage of the appropriated dollar amount for resource transfer to the SSCC that reflects the corresponding level of functions that have transferred from DFPS to the SSCC. This function transfer percentage will be determined by using the percent of children/youth who originated from the catchment area who have moved into the SSCC network of care.
 - (1) Annual Resource Transfer for Staged Implementation Methodology. Upon commencement of Stage I, DFPS will make quarterly payments each state fiscal year to the SSCC for the cost reimbursement resource transfer funds. The amount of

- reimbursement will be determined by calculating the total days of care for children who originated from the catchment area during the given quarter and the percentage of the total days of care for children who originated from the catchment area for which the SSCC was responsible. DFPS will multiply one/fourth(1/4) of the appropriated dollar amount by this percentage, which will be the amount of resource transfer funds that DFPS will make available to the SSCC for the preceding quarter. When no legacy cases remain in the catchment area legacy system, the Department will pay all resource transfer funds to the SSCC in four payments each state fiscal quarter.
- (2) Cost Reimbursement. The SSCC must manage Resource Transfer for Staged Implementation funds on a cost reimbursement basis by submitting monthly invoices for allocable costs. The Department is not obligated to pay unauthorized costs or to pay more than the SSCC's reasonable, allowable, and actually incurred costs consistent with federal and state regulations. The SSCC is responsible for submitting invoices in an accurate and timely manner for each month and for notifying the Department of a need to expedite payment.
- (3) Physical Property Purchased with Resource Transfer Funds. The SSCC must assume responsibility for the protection of all physical property and equipment purchased under this contract and to take appropriate measures to meet this obligation. The SSCC must furnish the Department with a written, factual report of the theft of, or damage to, any equipment purchased under this contract, including circumstances concerning the loss. In addition, in the event of any theft, vandalism, or other offense against the properties, the SSCC will notify appropriate local law enforcement authorities.
- (4) Equipment Purchased with Resource Transfer Funds. Equipment will be defined as an article of tangible nonexpendable personal property having a useful life of more than one year and an acquisition cost which equals or exceeds the lesser of: the capitalization level established by the contractor for financial statement purposes; or \$5,000. The SSCC will follow the provisions of 45 CFR 74 and 48 CFR 31 regarding disposition of any equipment purchased under this contract with funds allocated to the SSCC or its subcontractor. The SSCC will not give any security interest, lien, or otherwise encumber any item of equipment purchased with contract funds. The SSCC will permanently identify all equipment purchased under this contract by appropriate tags or labels affixed to the equipment and to maintain a current inventory of equipment which is available to the Department at all times upon request. Cost reimbursement contractors must also follow the following guidelines when contracting with the Department:
 - a. For any equipment purchased with Resource Transfer Funds, the SSCC must add certain items that are classified as "controlled assets" as designated in the Comptroller's State Property Accounting User Manual to their inventory. The following equipment will be added to the inventory list based on the noted acquisition costs: Maintained irrespective of cost Firearms (i.e. hand gun, rifle); Maintained with costs of \$500 to \$4,999 (1) Stereo System, (2) Camera, (3) Video Recorder/Laserdisc Player (TV, VCR, Camcorder), (4) Desktop CPU (not Apple), (5) Printer (not portable), (6) CPU Desktop Apple, (7) Data Projectors, (8) Portable CPU not Apple (Laptop), and (9) Portable CPU Apple (Laptop). The SSCC should review the SPA manual, available on the Internet, periodically for the most current list.
 - **b.** The SSCC must follow the American Hospital Association's (AHA) "Estimated Useful Lives of Depreciable Assets" for equipment disposition purposes, except when federal or statutory requirements supersede.

- **c.** The SSCC must request prior DFPS approval before disposing of equipment or controlled assets prior to the end of the useful life for that item.
- **d.** Any change to the equipment category in a cost reimbursement budget will require prior approval from the Department.

Section 3.02 Advance Payment for Start-Up. In accordance with 40 TAC §732.238, DFPS will provide a one-time advance payment to the SSCC for use as operating capital prior to DFPS making the first referral for services in Stage I under the SSCC contract. The SSCC will repay the Advance Payment to DFPS during the first year of the contract. The guidelines and process for Advance Payment include:

- (A) DFPS will advance up to 1/12th of the projected contractual amount for paid foster care for the 1st vear of operation within 15 days of contract execution.
- **(B)** The SSCC will repay DFPS half of the Advance Payment amount nine (9) months after the effective date of the SSCC contract.
- (C) The SSCC will repay DFPS remaining balance of the Advance Payment amount twelve (12) months after the effective date of the SSCC contract.
- (D) The SSCC will remit repayment of the Advance Payment via check made out and submitted to DFPS.
- (E) Failure to repay the Advance Payment as outlined in Section 3.08(B)-(D) will result in DFPS proceeding to recoup payments in accordance with any and all available remedies under state and federal law and taking other appropriate actions. This includes, but is not limited to, placing the contract on a vendor hold concerning further reimbursement, reporting the SSCC to the Vendor Performance Tracking System (VPTS) in accordance with FCRUTC Section 6.6, and referral of the SSCC to the Office of the Attorney General.

Section 3.03 Quality and Utilization Management Contract Funds. As DFPS and the SSCC move through the Stages of Implementation, some of the quality and utilization management functions performed by DFPS (via a third-party contract) will transfer to the SSCC. As a result, a transfer of resources commensurate with the transfer of functions from DFPS to the SSCC will occur. DFPS will retain the resources associated with the functions necessary to operate the catchment area legacy system, and the Department will provide a percentage of total UM contract amount to the SSCC that reflects the corresponding level of functions that have transferred from DFPS to the SSCC. Both DFPS and the SSCC agree that this function transfer percentage will be determined by using the percent of children/youth who originated from the catchment area who have moved into the SSCC network of care.

- (A) Annual Quality and Utilization Management Transfer Methodology. At the end of each state fiscal year, DFPS and the SSCC will determine the number of children who originated from the catchment area and the percentage of those children who receive paid foster care services under the SSCC contract. DFPS will multiply the total UM contract amount by this percentage of SSCC Children in order to calculate the amount of DFPS transfer that will be paid to the SSCC.
- (B) Cost Reimbursement. The SSCC must manage Quality and Utilization Management Contract Funds for Staged Implementation funds on a cost reimbursement basis by submitting monthly invoices for allocable costs. The Department is not obligated to pay unauthorized costs or to pay more than the SSCC's reasonable, allowable, and actually incurred costs consistent with federal and state regulations. The SSCC is responsible for submitting invoices in an accurate and timely manner for each month and for notifying the Department of a need to expedite payment.

Section 3.04 Foster Care Rates. The Texas Health and Human Services Commission (HHSC) develops the reimbursement methodology rules for determining payment rates for DFPS contracted 24-

hour Residential Child Care. Foster care rates include funding for both provider administrative and direct service costs associated with the provision of foster care and do not include the allocation for purchase of services to children, youth, and families. Daily foster care rates are based on appropriated funds and the number of children projected to enter paid foster care.

Foster care redesign reimbursement has three components for each Catchment Area: A blended foster care rate; an exceptional foster care rate that may be applied to a limited number of days of care for children requiring extraordinary care; and, beginning in Stage III, a blended foster care case rate based on length of stay in paid foster care factors.

The catchment area specific Blended Foster Care Rates do not include the funding for Preparation for Adult Living-Life Skills Training, Purchased Adoption Services and Foster Care Day Care Services, which will all be provided by the SSCC beginning in Stage I and for which funding will be provided through a separate allocation. Similarly they do not include the financial resources which will transfer from DFPS to the SSCC commensurate with transfer of tasks as described in Section 3.01. The Blended Foster Care Rates are as follows:

(A) Blended Foster Care Rates for the Catchment Area. The Texas Health and Human Services Commission (HHSC) develops and establishes the majority of payment rates for all agencies under the HHSC's authority. HHSC will publish proposed rates and conduct the rate hearing for FY 2014 in July/August of 2013, including catchment-specific blended rates for FCR. Rates will be based on the 2014-2015 appropriation for foster care and the catchment-specific case mix as of April 2013. For more information on the proposed blended foster care rate for this catchment area, please visit the following:

http://www.hhsc.state.tx.us/rad/downloads/09-2013-24rcc.pdf

HHSC posted the rate packet to this site on June 28, 2013. All final adopted blended foster care rates for this catchment area will be posted on the HHSC Rate Analysis webpage which can be accessed by visiting the following:

http://www.hhsc.state.tx.us/rad/long-term-svcs/24rcc/index.shtml

- (B) Minimum Pass-Through Requirement. The SSCC must remit a minimum dollar amount of the daily foster care rate to foster parents to pay for child maintenance costs of children and youth placed pursuant to this contract. The minimum dollar amount will be determined by HHSC based on the most recent United States Department of Agriculture (USDA) Expenditures on Children by Families, Estimated Annual Expenditures on a Child by Husband-Wife Families, Urban South, with before tax income falling into middle USDA income bracket, inflated to the rate period, excluding expenditures on health care, child care and education. If HHSC implements a change in the applicable foster care rate(s), DFPS may change the minimum pass-through dollar amount(s). The SSCC must document the payment schedule for services provided through the SSCC demonstrating the provision of required pass through for foster families. The required minimum pass through dollar amount to a foster parent in all of the catchment areas is \$22.15 per day. If the appropriated foster care rates change as a result of the 83rd Texas Legislative Session, the amount of the required minimum pass through required will be adjusted.
- **(C)** Social Security Payments. Blended rate payments will be reduced by DFPS by the amount of Social Security payments and other income received from the state and federal government that are transferred to the SSCC by DFPS for specific children and youth.

Section 3.05 Blended Foster Care Rate.

- (A) Methodology. The blended foster care rate represents the weighted average per diem payment rate for all children and youth (excluding Supervised Independent Living (SIL) placement and children/youth who have been approved for the Exceptional Foster Care Rate (see Section 3.08) in paid foster care from the designated catchment area, regardless of service level or placement type in the legacy system. It is intended to cover direct service provider administrative overhead and direct service costs. The blended foster care rate will be re-based biennially, within available funding.
- (B) Financial Risk. DFPS will pay the established blended rate for each calendar day of placement in paid foster care provided under the SSCC's contract, mitigating risk associated with increased entries into paid foster care. Through the use of a single blended foster care rate, the SSCC will have flexibility to offer individualized services to children and youth and will continue to be reimbursed at the same rate as children and youth move down or up the continuum of care and require less intense or more intense services and/or a reduction or increase in the frequency of services.

In Stage III, DFPS will pay the SSCC the blended foster care rate for each day of service provided to each child and youth, but financial rewards and financial remedies will be applied based on the average length of stay (blended foster care case rate) for children and youth in paid foster care served by the SSCC (excluding SIL, Extended Foster Care, and children/youth who have been approved for the Exceptional Foster Care Rate).

For children served by the SSCC in paid foster care. DFPS will establish a length of stay baseline based on DFPS historical data pertaining to children from the SSCC catchment area. For each SSCC, HHSC will calculate a weighted average length of stay by taking the sum of the strata-specific number of care days used divided by the total number of children across all strata. The strata are based upon the age of the child upon entry into paid foster care and the amount of time the child has been in paid foster care: 1) less than one year old; 2) between one and thirteen years old and currently less than two years in paid foster care; 3) between one and thirteen years old and currently two or more years in paid foster care; 4) between fourteen and seventeen years old. The first baseline will be established from the average length of stay in paid foster care from the previous two years ending the first day that the SSCC receives the first referral for placement as a part of Stage I contract implementation in the catchment area. The second baseline will be established from the average length of stay in paid foster care from the day that the SSCC receives the first referral for placement as a part of Stage I implementation in the catchment area to the first day of second year of Stage III in the catchment area. Subsequent baselines are recalculated every two years based on most recently available, reliable length of stay in paid foster care data.

If children and youth served by the SSCC move to permanency in less time and at a higher rate, on average, than predicted by the SSCC baseline, then the SSCC will be able to reinvest funds equal to the general revenue amount that DFPS would have spent had children and youth served by the SSCC remained in paid foster care for the length of time predicted by the baseline. The SSCC will be required to expend all funds obtained through the leverage process in a manner that improves the quality of care delivered on behalf of DFPS children, youth and families in the catchment area.

If the average length of stay in paid foster care for children and youth served by the SSCC is higher than the historical baseline for average length of stay in paid foster care for the catchment area, the SSCC will pay DFPS an amount equal to the general revenue amount that DFPS spent for the foster care days in excess for failure to achieve the established outcome target. Compliance with length of stay expectations and calculation of rewards and remedies will be determined on an annual basis.

Section 3.06 Supervised Independent Living (SIL) Rates (Stages I, II, III).

- (A) The SSCC must offer Supervised Independent Living placements by the SSCC as a part of the continuum of paid foster care services.
- **(B)** DFPS will reimburse the SSCC a separate SIL rate for young adults residing in an SIL placement.
- (C) Young adults residing in an SIL placement will not be included in the blended foster care rate methodology and DFPS and HHSC will exclude young adults in SIL placements from the methodology used to determine incentives around length of stay in paid foster care in Stage III.
- (D) The SSCC must notify the Caseworker and the Caseworker's Chain of Command within 24 hours of the consent for placement by a minor in the Contractor's Transitional Living Program in accordance with the Texas Family Code §32.203.
- (E) The Texas Health and Human Services Commission (HHSC) develops and establishes the majority of payment rates for all agencies under the HHSC's authority. The Supervised Independent Living (SIL) Payment Rates may be accessed by visiting the HHSC Rate Analysis webpage:

http://www.hhsc.state.tx.us/rad/long-term-svcs/24rcc/index.shtml

Section 3.07 Extended Foster Care (excluding SIL placements) (Stages I, II, III).

- (A) DFPS will reimburse the SSCC the blended foster care rate for young adults who remain in paid foster care through the Voluntary Extended Foster Care Agreement (VEFCA) with the exception of those residing in an SIL placement.
- (B) DFPS and HHSC will exclude young adults in Extended Foster Care from the methodology used to determine incentives around length of stay in paid foster care in Stage III.

Section 3.08 Exceptional Foster Care Rate (Stages I, II, III). There will be a very small number of children and youth in the designated catchment area with exceptional needs that cannot be met appropriately through the use of a blended foster care rate. The Exceptional Foster Care Rate is based on a pro forma approach. This approach involves using historical costs of delivering similar services, where appropriate data are available, and estimating the basic types and costs of products and services necessary to deliver services meeting federal and state requirements.

The Exceptional Foster Care Rate is \$352.70 per day and a total of 405 days of exceptional care has been designated to the catchment area for FY 2014-2015. The SSCC will have latitude, within agreed upon guidelines, in determining for which children these days are used. The SSCC will have the option during contract negotiations to accept a reduced exceptional foster care rate in exchange for an extended number of designated days for which the exceptional foster care rate may be applied, so long as it does not exceed the appropriated funding amount. However, the Exceptional Foster Care Rate will be a single, flat rate applied to all designated days. The Exceptional Foster Care rate will not vary by child and DFPS will not provide the option of charging the Department various multiple rates. The SSCC may not apply the exceptional foster care rate to young adults in SIL.

The exceptional rate and ceiling will be updated at the beginning of the each biennium beginning with the 2015-2016 biennium, based on the most current twelve months of actual cost data used to calculate the original exceptional foster care rate.

Section 3.09 Preparation for Adult Living (PAL) - Life Skills Training (Stages I, II, III). PAL life skills training is used for the purpose of preparing youth in substitute care to live independently when he or she becomes an adult. These services are provided through the use of federal John H. Chafee Foster Care Independence Program (CFCIP) federal funds, referred to as Chafee funds. To learn more about these funds, please visit:

http://www.acf.hhs.gov/programs/cb/programs fund/state tribal/jh chafee.htm .

(A) Chafee Funds.

- (1) DFPS will allocate to the SSCC a fixed amount of Chafee funds [excluding Education Training Voucher (ETV) funds] each year of the Contract to be used in the delivery of PAL Life Skills services. The amount will be based on the catchment area's allocation of the federal award of Chafee funds to DFPS. DFPS will provide the SSCC with the projected amount of funds available for use by the SSCC 30 days prior to Stage I.
- (2) As annual federal awards of Chafee funds are provided to DFPS, allocations will be adjusted, and the SSCC will be provided the appropriate share.
- (3) Chafee funds may only be spent on Preparation for Adult Living (PAL) services and are restricted from use for any other purpose.
- (4) Changes to annual fixed amount of Chafee funds resulting from annual federal awards may require a change to the match rate and consequently, the amount of the match required.
- (5) No matching funds are currently required of the SSCC.

Section 3.10 Adoption Funds (Stages I, II, III). The SSCC will receive an identified amount of funding through their purchase of service allocation, which must be used for adoption services. Parameters for use of adoption funds will be defined during the Start-up phase and prior to implementation of Stage I. DFPS will provide the SSCC with the projected amount of funds available for use by the SSCC 30 days prior to Stage I.

Section 3.11 Foster Care Day Care (Stages I, II, III). The SSCC will provide foster care day care services to children and families who meet the appropriate DFPS eligibility criteria.

(A) Foster Care Day Care Requirements. The SSCC may only use the eligible Texas Workforce Commission day care providers for foster care day care services. The SSCC will coordinate with DFPS so that DFPS may initiate day care process and payment for eligible foster care day care services to the Texas Workforce Commission on behalf of the SSCC.

Section 3.12 Coordination and Delivery of Family Services - Allocation of Funds (Stages II and III). The SSCC must identify its own unmet service needs and either deliver the services directly, identify available community resources, or purchase the needed services. Processes and parameters established in this subsection are only applicable to those services offered by the SSCC through the use of the DFPS purchase of service allocation and do not apply to any services offered by the SSCC through the use of community resources or additional funding methods. DFPS will provide the SSCC with the projected amount of purchase of service funds available to the SSCC on an annual basis no later

than 60 days before Stage II and within 60 days of the start of each state fiscal year. The SSCC will be expected to make a determination of how best to use the POS allocation, including determining how to apportion its allocation. It is expected that the SSCC will manage within the funding allocation, yet maximize all available resources, including community services and other funding methods so that families referred to the SSCC can receive appropriate and effective services. Should POS funding be reduced, DFPS will discuss with the SSCC how other resources (e.g. DFPS staff) might be shared to cover gaps created by funding reductions.

Catchment Area									
Stage I				Stage II					
Chafee -	Purchased	Foster	Total	Substance	Other	Total	Total		
PAL Life	Adoption	Day Care	Stage I	Abuse	CPS	Stage II	Stages I		
Skills	Services	Services	Annual	Purchased	Purchased	Additional	and II		
Services			Allocation	Services	Services	Annual	Annual		

Allocation

\$928,624

Allocation

\$2,262,034

Fiscal Year 2014 Estimated Appropriated Purchase of Services Funding Allocations for

Note:

\$82.853

\$393.071

\$945.460

SSCC funding for purchase of services will be based on fiscal years 2014-2015 appropriated funding and allocated between legacy children and SSCC children. The estimated amounts provided in the table above represents funding for all children in the catchment area.

\$1,426,384

(A) DFPS will determine the budget allocation amount for purchased services in the catchment area based on an equitable distribution of services, workload activity, eligible clients, historical distribution, and case data with the goal of maintaining continuity of services and equal access to agency resources for all citizens of Texas.

\$770.387

\$158.237

- **(B)** DFPS will determine whether a service is allowable under the funding streams available and will create a service code to be used for billing purposes.
- (C) The SSCC must identify the types of purchase of services needed to meet the specific needs of clients in the catchment area.
- (D) The SSCC must provide sufficient information on the modality or service description, eligible population, and payment methodology prior to implementing a service.
- **(E)** The SSCC must access the purchase of service allocations by submitting a claim for service after the service is provided.
- **(F)** The SSCC must adhere to legislative mandates and requirements regarding flexibility in transfer of all purchase of service funding, including foster care day care allocations.
- **(G)** Allowable Purchased Services. To ensure federal financial participation, the SSCC must ensure that services offered as a part of the purchase of service allocation meet the criteria outlined in the following:
 - (1) Child Welfare Services, Title IV-B, Subpart 1 of the Social Security Act. For additional information:

http://www.acf.hhs.gov/programs/cb/programs_fund/state_tribal/ss_act.htm

(2) Promoting Safe and Stable Families, Title IV-B, Subpart 2 of the Social Security Act. For additional information:

http://www.acf.hhs.gov/programs/cb/programs_fund/state_tribal/ss_act2.htm

(3) Temporary Assistance for Needy Families (TANF). For additional information:

http://www.acf.hhs.gov/programs/ofa/

(4) Title IV-E. For additional information:

http://www.acf.hhs.gov/programs/cb/resource/safe2010draft

(H) Fee Schedule for Purchased Service Allocation (Stages II and III). DFPS service allocation payment and billing processes are dependent on the link between an established fee and identified service. DFPS must provide notices to the SSCC within two (2) business days of any change in an individual or family's eligibility. DFPS will pay the SSCC for days of care provided up until the time DFPS notifies the SSCC of a changes, even if an individual or family's eligibility ended prior to notification. The SSCC will provide DFPS payment methodologies and applicable fee schedules for services offered through the use of the purchased service allocation. Fees will be reasonable and comparable to those for similar services within the catchment area. Claims will be processed by DFPS in amounts not to exceed the rates on the fee schedule

Section 3.13 Invoice Process

- (A) Process for Payment of Foster Care
 - (1) DFPS will approve placement information in the IMPACT electronic system
 - (2) DFPS will generate invoices at the beginning of each month for prior month of service and will process payment to the SSCC for foster care services through the IMPACT system. Invoices will be reconciled with the SSCC prior to payment being made to assure accuracy.
 - (3) DFPS will submit monthly Itemized Provider Statement to the SSCC, after reconciling with the SSCC to assure accuracy.
 - (4) The SSCC must contact appropriate DFPS staff to inquire about errors in payment and/or the Itemized Provider Statement.
- (B) Process for Purchased Services to Children, Youth and Families. The SSCC will select and bill for services delivered in accordance with agreed upon service plans. The following table outlines the anticipated invoice process and documentation requirements for payment of services rendered through the use of the purchase of service allocation (see Chart 11). Procedures may be modified or further specified in the catchment specific operations manual.

Chart 11: Invoice Process for Purchased Services to Children, Youth and Families

DFPS Role	SSCC Role	SSCC Documentation Requirements

Receive form 2054 from SSCC to initiate the invoice process

Enters form 2054 into IMPACT to generate pre-bill based on services, service delivery time range, units of services

Generate and forward a form 2054 with sufficient information to initiate the invoice process to include but not limited to: the client name/client number, service type, number of units delivered and effective dates for CPS personnel to enter into IMPACT.

Obtains explanation of benefits from client when claiming for deductibles or services denied by the insurance carrier.

Maintains documentation of fees charged and paid by the client when utilizing a sliding scale.

Ensures claims submitted by subcontractors are accurate and complete.

Submits required invoice documentation to DFPS designated contract office by the 15th of the month following the month of service.

Submits invoice billing statement which includes:

- 1. Documentation to support any claim as a result of services or co-payment and deductibles not covered by the client's insurance.
- 2. Documentation to indicate clients who have been imposed a sliding scale fee and the associated service and fee charged to the contract and the client's share.
- 3. Medicaid denials
- 4. Signed Form 4116X, State of Texas Purchase Voucher (only submitted when situations warrant the need for a manual payment process.

Other supporting documentation which may be requested by DFPS.

Article IV. Startup Phase Requirements

Section 4.01 Introduction. This Section presents the scope of work for the Startup Phase of the Contract, which includes those activities that must take place between the time of Contract award and the Operational Start Date.

The Startup Phase will include a Readiness Review of the SSCC, which must be completed successfully prior to the SSCC's Operational Start Date. DFPS may, at its discretion, terminate the Contract, postpone the Operational Start Date, or assess other contractual remedies if the SSCC fails to timely correct all Startup Phase deficiencies within a reasonable cure period, as determined by DFPS.

If for any reason, a SSCC does not fully meet the Readiness Review prior to the Operational Start Date, and DFPS has not approved a delay in the Operational Start Date or approved a delay in the SSCC's compliance with the applicable Readiness Review requirement, then DFPS will impose remedies including actual or liquidated damages.

Section 4.02 Startup Phase Scope for SSCC. SSCC must meet the Readiness Review requirements established by DFPS no later than sixty (60) days prior to the SSCC accepting its first referral from DFPS (Stage I). SSCC agrees to provide all materials required to complete the Readiness Review by the dates established by DFPS.

Section 4.03 Startup Phase Schedule and Tasks. The Startup Phase begins on the effective date of the Contract. The Startup Phase must be completed no later than the Operational Start Date. The SSCC has overall responsibility for the timely and successful completion of each of the Startup Phase tasks. The SSCC is responsible for clearly specifying and requesting information needed from DFPS in a manner that does not delay the schedule or work to be performed.

- (A) Contract Start-Up and Planning. DFPS and the SSCC will work together during the initial Contract start-up phase to:
 - (1) define project management and reporting standards;
 - (2) establish communication protocols between DFPS and the SSCC;
 - (3) establish a schedule for key activities and milestones; and
 - (4) clarify expectations for the content and format of Contract Deliverables.

The SSCC will be responsible for developing a written work plan, referred to as the final SSCC Management Plan, which will be used to monitor readiness progress throughout the Startup Phase.

The SSCC's Plan must include a detailed description of the process it will use to ensure safe, timely and successful placement of referred children and youth, including successful transition of children and youth being served in the legacy system.. The SSCC's Plan must identify a designated SSCC staff member responsible for the facilitation and oversight of this process.

(B) Administration and Key SSCC Personnel. No later than the Effective Date of the Contract, the SSCC must designate and identify Key SSCC Personnel that meet the requirements of this contract and specify office location for each. The SSCC will supply DFPS with résumés of each Key SSCC Personnel as well as organizational information that has changed relative to the SSCC's Proposal, such as updated job descriptions, office locations and updated organizational charts, if applicable. If the SSCC is using a Material

Subcontractor, the SSCC must also provide the organizational chart for the Material Subcontractor.

- (C) Operations Readiness. The SSCC must clearly define and document the policies and procedures that will be followed to support day-to-day business activities, including coordination with subcontractors and/or other network providers. The SSCC will be responsible for developing and documenting its approach to quality assurance. DFPS or its designee will conduct a Readiness Review prior to the Operational Start Date. During Readiness Review, the SSCC must, at a minimum:
 - (1) Develop new, or revise existing, operations procedures and associated documentation to support the SSCC's proposed approach to conducting operations activities in compliance with the contracted Scope of Work.
 - (2) Submit to DFPS, a listing of all contracted and credentialed Providers, in a DFPS-approved format including a description of additional contracting and credentialing activities scheduled to be completed before the Operational Start Date.
 - (3) Prepare and implement a staff training curriculum and a Provider training curriculum, and provide documentation demonstrating compliance with training requirements (e.g., enrollment or attendance rosters dated and signed by each attendee or other written evidence of training.)
 - (4) Develop and submit to DFPS the SSCC's proposed complaint and appeals processes.

During the Readiness Review, DFPS may request from the SSCC certain operating procedures and updates to documentation to support the provision of services. DFPS will assess the SSCC's understanding of its responsibilities and the SSCC's capability to assume the functions required under the Contract, based in part on the SSCC's assurances of operational readiness, information contained in its Proposal and subsequent Provider's Manual, and in Startup Phase documentation submitted by the SSCC.

The SSCC is required to promptly provide a Corrective Action Plan or Risk Mitigation Plan as requested by DFPS in response to Operational Readiness Review deficiencies identified by the SSCC or by DFPS or its agent. The SSCC must promptly alert DFPS of deficiencies, and must correct a deficiency or provide a Corrective Action Plan or Risk Mitigation Plan no later than 10 calendar days after DFPS's notification of deficiencies. If the Contractor documents to DFPS's satisfaction that the deficiency has been corrected within 10 calendar days of such deficiency notification by DFPS, no Corrective Action Plan is required.

- (D) Assurance of System and Operational Readiness. In addition to successfully providing the Deliverables described in Section 4.03 ("Startup Phase Schedule and Tasks"), the SSCC must assure DFPS that all processes, MIS systems, and staffed functions are ready and able to successfully assume responsibilities for operations prior to the Operational Start Date. In particular, the SSCC must assure that Key SSCC Personnel, and network Provider staff are hired and trained, MIS systems and interfaces are in place and functioning properly, communications procedures are in place, Provider Manuals have been distributed, and that Provider training sessions have occurred according to the schedule approved by DFPS.
- **(E) Post-Startup.** The SSCC will work with DFPS, community stakeholders, and Network Members and other Providers, to promptly identify and resolve problems identified after the Operational Start Date and to communicate to DFPS, Providers, and Members, as applicable, the steps the SSCC is taking to resolve the problems.

If an SSCC makes assurances to DFPS of its readiness to meet Contract requirements, including MIS and operational requirements, but fails to satisfy requirements set forth in this Section, or as otherwise required pursuant to the Contract, DFPS may, at its discretion do any of the following in accordance with the severity of the non-compliance and the potential impact on Members and Providers:

- (1) Suspend referrals to the SSCC
- (2) Impose contractual remedies, including liquidated damages; or
- (3) Pursue other equitable, injunctive, or regulatory relief.

Article V. Turnover Requirements

Section 5.01 Introduction. This section presents the Turnover requirements. "Turnover" is defined as the activities that the SSCC is required to perform prior to or upon termination of the Contract, in situations where the SSCC will transition data and documentation to DFPS or a subsequent contractor.

Section 5.02 Turnover Plan. Twelve months after the start of the Contract, the SSCC must provide a Turnover Plan covering the turnover of the records and information maintained to either DFPS or a subsequent contractor. The Turnover Plan will be a comprehensive document detailing the proposed schedule, activities, and resource requirements associated with the turnover tasks. DFPS must approve the Turnover Plan.

Section 5.03 Transfer of Data and Information. The SSCC must transfer to DFPS or a subsequent contractor all data, documentation, and information necessary to transition operations. "Documentation" means all operations, technical and user manuals used in conjunction with Services, and Deliverables that DFPS determines are necessary. The SSCC must provide the documentation in the formats in which the documentation exists at the expiration or termination of the Contract. In addition, the SSCC will provide to DFPS the following:

- (A) Data, information, and services necessary and sufficient to enable DFPS to map all SSCC Program data from the SSCC's system(s) to the replacement system(s) of DFPS or a successor contractor, including a comprehensive data dictionary as defined by DFPS.
- (B) All necessary data, information, and services will be provided in the format defined by DFPS
- (C) The SSCC must provide all of the data, information, and services mentioned in this section using its best efforts to ensure the efficient administration of the contract. The data and information must be supplied in media and format specified by DFPS and according to the schedule approved by DFPS in the Turnover Plan. The data, information, and services provided as detailed in this section must be provided at no additional cost to DFPS.

All relevant data and information must be received and verified by DFPS or the subsequent contractor. If DFPS determines that data or information are not accurate and complete, then DFPS reserves the right to hire an independent contractor to assist DFPS in obtaining and transferring all the required data and information and to ensure that all data and information comply with applicable state and federal law. The reasonable cost of providing these services will be the responsibility of the SSCC.

Section 5.04 Turnover Services. Six months prior to the end of the Contract Period, including any extensions, the SSCC must update its Turnover Plan. If DFPS terminates the Contract prior to the expiration of the Contract Period, then DFPS may require the SSCC to update the Turnover Plan sooner. In these cases, DFPS's notice of termination will include the date the Turnover Plan is due. The Turnover Plan must be a comprehensive document detailing the proposed schedule, activities, and resource requirements associated with the Turnover tasks. The Turnover Plan describes the SSCC's policies and procedures that quarantees:

- (A) The least disruption in the delivery of Services children, youth and families who are being served by the SSCC during the transition to a subsequent vendor.
- (B) Cooperation with DFPS and the subsequent contractor in notifying stakeholders, including the community, members of judiciary, providers and others of the transition, as requested and in the form required or approved by DFPS.
- (C) Cooperation with DFPS and the subsequent contractor in transferring information to the subsequent contractor, as requested and in the form required or approved by DFPS.

- **(D)** DFPS must approve the Turnover Plan, which must include at a minimum:
 - (1) The SSCC's approach and schedule for the transfer of data and information, as described in this Section.
 - (2) The quality assurance process that the SSCC will use to monitor Turnover activities.
 - (3) The SSCC's approach to training DFPS or a subsequent contractor's staff in the operation of its business processes.

DFPS is not limited or restricted in the ability to require additional information from the SSCC or modify the Turnover Plan as necessary, including requiring the SSCC to submit an updated Turnover Plan at any point during the term of the contract based on performance or financial issues identified as a result of contract monitoring.

Section 5.05 Post-Turnover Services. Thirty (30) days following Turnover of operations, the SSCC must provide DFPS with a Turnover Results Report documenting the completion and results of each step of the Turnover Plan. DFPS will not consider Turnover completed until DFPS approves the Turnover Plan. If the SSCC does not provide the required data or information necessary for DFPS or the subsequent contractor to assume the operational activities successfully, the SSCC agrees to reimburse DFPS for all reasonable costs and expenses, including: transportation, lodging, and subsistence to carry out inspection, audit, review, analysis, reproduction, and transfer functions at the location(s) of such records; and attorneys' fees and costs. This section does not limit DFPS's ability to impose remedies or damages as set forth in the Contract.