



# Texas Department of Family and Protective Services

**Commissioner**  
*Stephanie Muth*

DFPS Advisory Committee Meeting Minutes:  
Committee on Advancing Residential Practices (CARP)  
Thursday, January 12, 2023  
4900 N. Lamar Blvd., Austin, TX 78751  
Brown-Heatly Building, Public Hearing Room

## **Meeting Minutes**

### Joint PPP and CARP Meeting:

Erica Banuelos, Associate Commissioner for CPS reported that January 27, 2023 is the Foster Care Litigation hearing in Dallas, Texas, and gave an overview of DFPS' progress towards identified goals on the remedial orders, although the Court Monitors' Report 5 has not been released yet. There has been work with the court monitors, including monthly and quarterly reports and arranging case readings and interviews with staff.

In response to a question, it was confirmed that \$50 million was allocated in the last legislative session for compliance by DFPS and HHS. Most of the money went to caseworker and specialized staff positions, but any information gained from quality assurance performed is actively shared with the SSCC's. Funds will be requested during the upcoming session for SSCC compliance.

Providers reported thorough multi-day visits from court monitors and there was a question of whether regulatory visits can be streamlined or not. Natalie Taylor, CPS Director of Heightened Monitoring, explained that all HM visits have been streamlined and it's still the same number of visits but just with one person every other week.

In response to a questions, it was confirmed that the court monitors and their staff carry court orders and a letter of their authorization, and a memo was previously sent to providers via email identifying them. A discussion will be had with FCL about sharing the authorization letter with providers so that staff can confirm their identities and allow them appropriate access.

Jillian Bonacquisti CPS Director of Placement, reporter that there have been no QRTP applications since it was posted on 4/1/22 and in August 2022, amendments were made to it. There are providers interested, but the staffing ratios are presenting challenges.

Debra Malone Renelt, CPS Associate Director of Placement, reported on the status of the 23 awarded HB5 capacity building grants. The posted closed in October 2022, but DFPS is in the process of posting for remaining funds in March. Each provider is eligible for up to \$100,000, which can go towards a number of uses, including accreditation costs as long as the provider demonstrates direct relationship to accreditation costs, for either new accreditation or reimbursement for maintenance since 2019.

Data from the Child Watch(CWOP) study results, covering the period from January 2022 to November 2022 were shared, and will be publicly available soon. It was confirmed that most children in Child Watch are there less than 2 weeks.

In response to a question about the number of children in Child Watch as a result of Refusals to Accept Parental Responsibility (RAPR), it was verified that HHSC has been approved for in lieu of services for partial hospitalization and outpatient programs through Medicaid. CPI used to have staffings for all RAPR's, but it is unknown if this practice remains in place.

Subject

Date

Page 2

### CARP Meeting

The meeting was called to order by the CARP Committee Chair Scott Lundy, who welcomed all of the attendees, and the Committee members along with the new appointees introduced themselves. Scott recommended Death by meeting to the group which talks about how to have a better meeting, more engagement, transparency and being okay with conflict.

Bill Walsh, Director of Purchase Client Services, explained Incentives and Remedies will roll out later due to changes in leadership and decisions being made in regards to timing of payments under appeal, and some remedies have been loosened. Beginning in Fiscal Year 2022, Safe in Care Remedies with an associated Reason to Believe disposition will not be due until all appeals have been exhausted. A thorough analysis of Incentives and Remedies will be completed and if better outcomes and provider performance are the result, next steps will be determined based on what occurs with legislation session, as there is some latitude provided in current legislation on how it is implemented.

A status report with provider workgroup updates will go out soon, with a discussion about next steps, and how DFPS and HHS have addressed some recommendations, but some ongoing issues are complicated to resolve. DFPS Leadership have met with HHSC and Alliance to make a training matrix. HHSC will publish FAQ's on the process to get through background checks faster. It was explained that FBI checks do not cover abuse/neglect central registry checks and some States are still using paper records which have to be sorted through by hand. It suggested that HHS provisional status for hiring new employees is similar to waivers in other States and should be used more.

Clint Cox, Deputy Assistant Commissioner for Investigations, reported that the investigation backlog is done, timeframes are being met, and they are focusing on quality investigations and training. They are focusing on utilizing a QA process within CCI and reading investigations timely. HHS Inspectors do not evaluate abuse/neglect dispositions, but can escalate concerns to leadership to ensure the first review was done properly.

Caroline Sinha with Contract Performance under Date and Systems Improvement presented on regulatory trends related to Investigations and citations. Abuse/neglect investigations since FY19, have stayed consistent with the number of Reason To Believe (RTB) over time. The number of investigations are slowly increasing, but proportionally still the same RTB rates. There was a FY21 spike is due to the investigation backlog being addressed. Changes in policies and criteria may have caused the trend upwards.

Providers expressed that they would like to see what counts towards HM and what doesn't to be able to monitor themselves. There is frustration over the lack of transparency, ownership of data and getting approvals for release. More training is needed for providers regarding what regulators want to see. A concern was brought up that since the SSCC's in Regions 2 and 3B don't utilize YFT, they have an advantage in fewer opportunities for HM qualifying points. It was pointed out that the HM team has made strides in educating providers and moving towards better literacy. Currently there are 57 operations on HM, 45 are in plan and effect stage, 12 in post plan monitoring and 23 have successfully completed.

The meeting was adjourned at 1:27pm.