



Implementation Plan for the Texas Community-Based Care System

December 2023

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Background

Beginning in 2007, DFPS engaged in an effort known as Foster Care Redesign (FCR), which further expanded the role of community providers to include placement services, capacity/network development, community engagement, and the coordination and delivery of a network of services to children in foster care and their families under a Single Source Continuum Contractor (SSCC). FCR was developed by DFPS, in partnership with stakeholders in Texas as a community-based, shared-decision making model that relied on collaboration between Child Protective Services (CPS) and the SSCC at the individual case level. The 82nd Texas Legislature passed Senate Bill 218, which endorsed this transformative model and directed the agency to establish FCR in two areas of the state. Under FCR, the role of the SSCC was limited to only children and youth in paid foster care. All legal case management responsibilities remained those of the public child welfare caseworker.

In 2017, the 85th Texas Legislature through Senate Bill 11, built from the foundation of the Foster Care Redesign (FCR) model to further advance the system through the establishment of the Community-Based Care (CBC) model. Under the CBC model, the Department of Family and Protective Services (DFPS) is required to purchase case management and substitute care services from the SSCC for children, youth, and young adults who are in the department's conservatorship, or who are receiving services through the extended foster care program. Substitute care includes all foster care, relative/kinship care, family reunification, and adoption services. Implementation of the CBC model transitions the Texas child welfare system from a statewide, "one-size-fits-all" approach to a community-based model designed to meet the individual and unique needs of children, youth, and families in Texas at the local level.

In 2021, the 87th Texas Legislature, as part of Senate Bill 1896, formally established the Office of Community-Based Care Transition (OCBCT); the office is administratively attached to DFPS and along with the Health and Human Services Commission (HHSC), will work together with the OCBCT on the statewide implementation of CBC. The 88th Texas Legislature provided funding for DFPS to create an internal CBC team which is designed to continue implementation of CBC after OCBCT is abolished, per Senate Bill 1896. The CBC Operations Division's goal is to focus on the future state of DFPS once CBC is fully implemented. DFPS' role will change to one of quality assurance, oversight, and technical assistance for SSCCs. This team works together with the OCBCT to transition SSCCs through the staged implementation of CBC. OCBCT's responsibilities are to educate stakeholders about CBC, to contract on behalf of DFPS with SSCCs, and to support SSCCs through each step of implementation of CBC. DFPS and OCBCT are focused on process improvement as well, as knowledge gained from current and previous implementations.



Purpose of the Plan

Texas Family Code, Subchapter B-1, Section 264.153 requires DFPS to develop and maintain an implementation plan for CBC that accomplishes the following:

1. Describes the department's expectations, goals, and approach to implementing CBC.
2. Includes a timeline for statewide implementation, addresses limitations, and provides progressive intervention and contingency plans to provide continuity of services if an SSCC contract ends prematurely.
3. Delineates and defines case management roles and responsibilities of DFPS and the SSCCs, as well as the duties, employees, and related funding that will be transferred to the contractor by DFPS.
4. Identifies training needs and on-going training plans, including plans to train caseworkers using the standardized curriculum created by the human trafficking prevention task force.
5. Describes a plan for evaluation of the initial and on-going procurement costs and tasks.
6. Describes the contract monitoring approach and plan for evaluation of the performance of each SSCC and the CBC system, including an independent evaluation of each SSCC's processes and fiscal and qualitative outcomes.
7. Includes transition issues resulting from implementation of CBC.

Community-Based Care Expectations/Goals

The guiding principles for CBC, were created with the support of the Public Private Partnership (PPP), which is an advisory committee that represents Texas stakeholders and advocates, which continues to serve as the guiding body for informing the CBC model. Since 2010, members of the PPP have invested substantial time and resources in developing and modifying the CBC model. The PPP will continue analyzing implementation of the CBC model and making recommendations to the OCBCT and DFPS regarding changes to the model to support successful rollout. All meetings and communication with the PPP are open and meeting agendas and content are posted to [DFPS Advisory Committees](#) page on the public website. These guiding principles are aimed at improving quality of care and include:

- Keeping children and youth safe from abuse and neglect;
- Placing children and youth in their home communities;
- Placing children and youth in the least restrictive setting that meets their needs;
- Minimizing moves that disrupt children's or youth's personal connections and educational progress;



- Placing children and youth with siblings;
- Maintaining connections to family and others important to the child or youth;
- Respecting the culture of each child and youth;
- Providing children and youth with opportunities, experiences, and activities similar to those enjoyed by their peers who are not in foster care;
- Preparing youth for successful adulthood;
- Providing children and youth opportunities to participate in decisions that affect their lives;
- Reunifying children and youth with their biological parents when possible, and
- Placing children and youth with relatives or kinship caregivers if reunification is not possible.

Implementation of the CBC system is expected to:

- Increase the number of children and youth placed with their siblings and in their home communities;
- Increase the number of children and youth who remain in their school of origin;
- Decrease the average time children and youth spend in foster care before achieving positive permanency;
- Decrease the number of moves children and youth experience while in foster care;
- Decrease the duration and intensity of services that children and youth need while in foster care due to improved well-being and behavioral functioning; and
- Create robust and sustainable service continuums in communities throughout Texas.

Community-Based Care Implementation Approach

CBC changes how Texas cares for children and families that are involved in the foster care system by giving local communities the flexibility to leverage their strengths and local resources to find innovative ways to meet the unique needs of each child and family. CBC is designed to give children more stability by keeping them closer to home and connected to their schools, friends, and families as much as possible. CBC provides many services that DFPS currently provides, including foster care, case management, kinship care, and reunification services. A single organization in each community area creates a network of services, foster homes, and other living arrangements for children and youth. When ready, this organization also provides case management for each child as well. DFPS works with each SSCC to carefully manage the transition from traditional foster care to CBC.



Stakeholder Involvement

Success of CBC is dependent upon the full engagement and support of internal stakeholders, which includes DFPS staff at local, regional, and state office levels. All staff, regardless of region or job function, must have a clear understanding of the CBC model, the role they play in its success, and the positive outcomes that are gained by making such a systemic change. Ensuring there is transparency and partnership with both DFPS and SSCC staff will continue to be an integral task as CBC expands across the state. To do this, the OCBCT has made a concerted effort to spread awareness and education of CBC to DFPS staff of all levels, including hosting region-specific town halls, attending unit meetings, and presenting on CBC to stakeholders when requested. More information on these outreach efforts can be found in the Quarterly Report on Implementation Status, located on the Community-Based Care [website](#)¹.

Competitive Procurement

In 2010, the PPP recommended changing the contracting process from open enrollment contract to competitive contract, whereby the state procures for the full continuum of services from a single provider in a designated community area. Considering and building on this recommendation, CBC requires:

- Competitive procurement for full continuum of substitute care and case management services from a single provider known as the Single Source Continuum Contractor (SSCC) to serve a designated community area in the state.
- An SSCC must be an entity based in Texas, licensed by Health and Human Services (HHS) as a Child Placing Agency (CPA) and in good standing in Texas before they can serve as the SSCC.
- DFPS gives preference to providers that have a history of offering like-services in Texas.
- Procurement to be open to not-for-profit organizations, governmental entities and allows for a consortium of providers to bid.
- Includes a full Texas county or contiguous counties.

Additionally, DFPS will not contract with any entity for more than two (2) SSCC contracts, except in instances where early SSCC contract termination is necessary in an existing community area.

The CBC model is community-based, and strategies employed to provide services may differ among community areas. Although required tasks, roles, and responsibilities will be detailed in each Request for Application (RFA), DFPS seeks to give maximum flexibility to each local community in determining how the SSCC and DFPS community area staff will

¹[www.dfps.texas.gov.CBC/default.asp](http://www.dfps.texas.gov/CBC/default.asp)



put the SSCC’s model into operation. To continue the charge of providing flexibility to communities, OCBCT has worked with DFPS and HHSC to formalize a process for accepting unsolicited proposals. Texas Family Code §264.157(b) states that the department must “accept and evaluate unsolicited proposals from entities based in this state to provide community-based care services in a geographic service area where the department has not implemented community-based care. For more information about unsolicited proposals, visit the [SSCC Unsolicited Proposal Grants webpage](#)².

Performance-Based Contracting

The CBC model requires that SSCC contracts be performance-based. Performance-based contracting focuses on achieving outcomes for children and families, as opposed to effort, and meeting prescribed design specifications. This allows the SSCC and the community more flexibility to be innovative and create a child welfare system that meets the unique needs of the children, youth, and families from the designated community area. The increased flexibility under the performance-based contract is matched with increased responsibility and accountability for overall safety, permanency, and well-being outcomes.

- All children and families who require SSCC services from the community area or are placed in the community area, via inter-regional agreements or Interstate Compact on the Placement of Children (ICPC) become the responsibility of the SSCC under a no eject, no reject contract.
- Under a no eject, no reject contract, the SSCC contractor may not refuse to accept a properly referred child, youth, young adult, or family member for services nor may the contractor cease to serve, or request DFPS remove an eligible child, youth, young adult, or family member from its referred client list.
- Outside of state and federal requirements and statutory obligations, SSCCs have the flexibility to identify programs and service models to best support outcomes and are responsible for ensuring successful implementation and quality of service delivery, and for establishing continuous improvement processes.
- OCBCT and DFPS will assess and hold SSCCs accountable to established performance measures. A multi-disciplinary oversight team regularly reviews case and performance data and uses a Continuous Quality Improvement (CQI) process to work with the contractor to understand performance trends and effectiveness of SSCC strategies. When data indicates intervention is required, progressive contract action is taken beginning with technical assistance support, providing training or request for a CQI plan. The SSCC identifies the action steps in the plan, including additional root cause analysis and changes to program or strategy. See [Appendix B: Progressive Intervention Plan](#).

² <https://www.hhs.texas.gov/business/grants/single-source-continuum-contractor-unsolicited-proposal-grants>



- Contract performance measures and other quality indicators are derived from the guiding principles, as well as the federal Child and Family Services Review (CFSR) measures. Outcome expectations are directly tied to service requirements and resources provided to the SSCC under the contract.

In Stage III, financial incentives and remedies will be tied to performance on reducing the number of days children spend in paid foster care. A contracted entity (currently Chapin Hall, affiliated with the University of Chicago) will independently evaluate and establish baseline values for anticipated paid foster care days and track actual performance against baseline targets. Continuously reducing the number of paid foster care days, through exits toward positive permanency including reunification, placement with a kinship caregiver, or in an adoptive placement, will result in payment of financial incentives. Conversely, using more than the baseline days of foster care will result in financial remedies. Chapin Hall will track re-entries into paid foster care following a permanent exit to ensure that any improvements to the permanency outcomes are not offset by an increase in the re-entry rate to foster care. The OCBCT, DFPS, and the SSCCs will continue to work to finalize the parameters and process of Stage III and will implement Stage III during this fiscal year.

Designated Community Areas

CBC moves from operating one statewide foster care model to administering foster care through a multiple community-based models designed to fill community-specific gaps and build on that community's existing strengths. As such, the boundaries for geographic communities must be defined. [See Appendix A: Geographic Community Areas](#) for a county listing in each community area and for a map of Texas depicting the community areas. The OCBCT along with DFPS will continue to evaluate the alignment requirements for these areas to ensure the optimal outcomes for the communities they serve. The Texas Family Code allows that, in expanding CBC, DFPS may change the geographic boundaries of designated community areas as necessary to align with specific communities.

Rollout Sequence

In the past, DFPS has taken a planned approach to implementation, choosing to implement the CBC model in stages rather than implement simultaneously statewide. Based on an evaluation of similar efforts in other states, this strategy is intended to limit risk by using experience and evaluation to guide implementation.

Historically, DFPS has considered the following factors when selecting community areas for implementation:

- Geographic location and proximity to existing designated community area(s).
- Service capacity which includes the continuum of care and services available in the designated community area, location of resource hubs, and trends of children



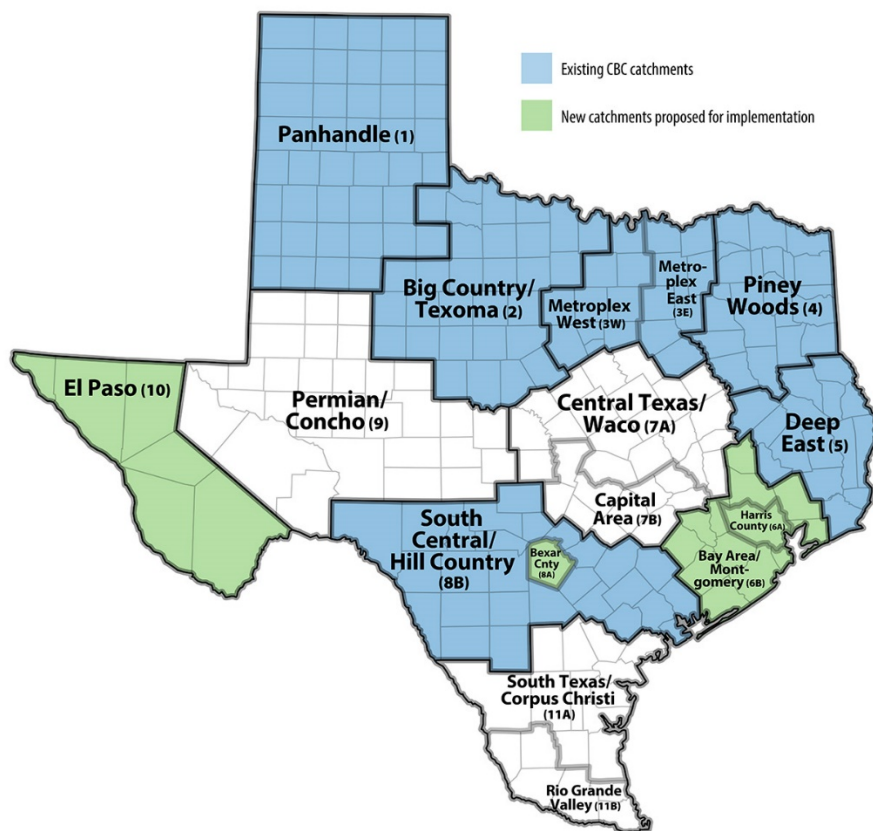
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placed in and out of the community area.

- Child and family outcomes in the community area(s).
- Level of community and stakeholder investment which includes collaboration among stakeholders, the number of child welfare boards, child protection courts, and other entities impacted in the designated community area.
- Stability of DFPS workforce.
- Funding availability and sufficient resources to support expansion.

The 88th Texas Legislature funded the implementation of CBC into four new designated community areas in the 2023-25 biennium. DFPS will release RFAs in the following designated community areas: Harris County (6A), Bay Area/Montgomery (6B), Bexar County (8A), and El Paso (10). Additionally, DFPS was funded to expand CBC into Stage II in the following designated community areas: Metroplex West (3W), Metroplex East (3E), Piney Woods (4), and Deep East (5); bids were received for all of these areas with the exception of Permian/Concho.

Figure 1 FY24 Existing and Proposed Catchment Areas for CBC Implementation



The OCBCT, along with DFPS, remains committed to supporting communities across the state as they work to build capacity and prepare to transition to CBC. DFPS supports coordinated regional efforts to better understand the specific strengths and challenges of communities, establish local goals and priorities for a community-based model, and begin fostering collaboration among providers. While much attention is given to placement services and creating a network of foster care and services, Stage II and implementation of case management and kinship services (as outlined below) requires equal attention to how an area can understand and prepare for hiring, training, and retaining a workforce of case management and other staff, as well as the accompanying organizational knowledge and structures required.

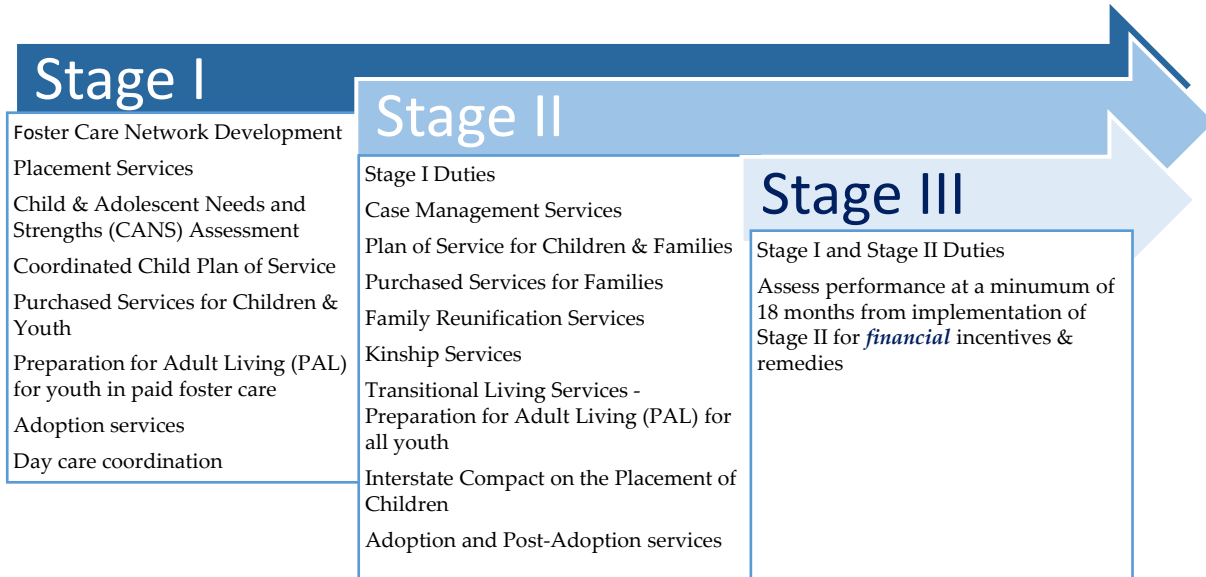
Staged Implementation

A staged implementation within each community area ensures steady progress occurs and allows the SSCC to demonstrate adequate ability before the SSCC is given more responsibilities. After a thorough readiness review, the SSCC will move into a subsequent stage of rollout:

- **Stage I-** The SSCC is responsible for ensuring the full continuum of paid foster care services, as well as Preparation for Adult Living (PAL) Life Skills Training and purchased adoption services. While the transition from Stage I to Stage II is based on DFPS and SSCC Readiness, DFPS anticipates that Stage I implementation could last up to 12 months following contract execution (including the six-month start-up period).
- **Stage II-** The SSCC continues responsibility for all Stage I services and becomes responsible for the provision of all substitute care services (kinship, reunification, etc.), Interstate Compact on the Placement of Children (ICPC), as well as all case management services, such as establishing the permanency goal for the family, face-to-face visits with children and families, permanency/case planning activities, court activities, kinship services, etc. The advance from Stage II to Stage III will occur 18 months after the SSCC begins serving all children and families in the community area.
- **Stage III** includes: The provision of services outlined in Stage I and II and financial accountability through the use of incentives and remedies for the timely achievement of permanency for children.



Figure 2 Staged Implementation



Readiness Process

Readiness is a formal review process to assess the ability of an SSCC to satisfy the responsibilities and administrative requirements based on the stage of CBC implementation.

The readiness review of the SSCC, as well as overall continual oversight activities, is a multi-disciplinary effort, led by DFPS along with OCBCT. The SSCC must assure, and OCBCT/DFPS must verify during the operational readiness review, that all processes, systems, and staffing functions are ready and able to successfully assume responsibilities prior to the operational start date.

During the readiness review the SSCC must, at a minimum:

1. Provide documentation of operating policies, procedures, and plans that detail the tasks, activities, and staff responsible for provision of services and overall implementation of CBC. Start-up and readiness documentation includes:
 - SSCC Management Plan (Accounting Manual, Joint CPS-SSCC Operations Manual, SSCC Provider Manual, Network Development Plan, SSCC Quality Assurance and Service Utilization Plan);
 - SSCC Administration Plan (Staffing and Workforce Development Plan, Training Plan, Child Placement (Stage I) and Case Management Transition (Stage II) Plans, IT Security Plan);



- SSCC Community Engagement Plan (engagement of key child welfare stakeholders and the general community, includes Cultural Competency efforts); and
 - SSCC Conflict of Interest Plan (Case Management Conflict of Interest, Contracting Conflict of Interest).
2. Submit to OCBCT/DFPS a complete listing of network contracted and credentialed providers, including a description of credentialing activities scheduled to be completed before the Operational Start Date.
 3. Prepare and implement a staff training curriculum, a provider training curriculum, and provide documentation demonstrating compliance with training requirements.
 4. Submit to OCBCT/DFPS the Utilization Management Process used to identify the level of care provided to children and youth referred under the Contract, including exceptional care, capacity utilization, and a cross walk of SSCC service levels to the corresponding DFPS legacy service levels.
 5. Submit to OCBCT/DFPS a Case Management Manual that provides detail on how the SSCC will build and maintain the infrastructure and staff capacity necessary to implement graduated caseloads for newly hired staff and to deliver direct Case Management services for all children who are referred to the SSCC by DFPS. (Stage II only)
 6. Submit to an initial IT Security review. The SSCC must resolve any critical and high-risk items identified by OIS prior to readiness certification.
 7. Submit to OCBCT/DFPS the SSCC's proposed complaint and appeals processes.

OCBCT, DFPS, and the SSCCs utilize a robust work plan to ensure that the transition to Stage II is methodical and preserves safety and supports continuity of services to children, youth, and families. The work plan deliverables include:

- Performance and Oversight
- Case Management Oversight (CMO) and CQI Processes
- Purchased Client/Community Services Provider Network and Payment Processes
- CPS Staff Transition and Joint-Hiring Processes
- CPS Case Transition
- Internal and External Communication
- Joint DFPS-SSCC Protocols
- DFPS and SSCC Training
- IT/Technology set up to support Stage II activities
- Administrative, including the Contract Readiness and Certification Tool (Stage II requirements added)



Like Stage I, the OCBCT and DFPS coordinate the Stage II readiness review process. The OCBCT Director and DFPS CPS Associate Commissioner will submit the recommendation to advance to full implementation to the DFPS Commissioner for final approval.

Timeline for Implementation

Key Implementation Activity

The following key tasks and activities are required for successful implementation of CBC in any given community area. The OCBCT is reviewing the current process of staged implementation.

Statewide CBC Preparedness

1. CPS Business plan and continued foster care capacity building efforts in all regions.
2. Presentations at conferences and to community groups.
3. Support for local community preparedness assessments and activities as requested.
4. Internal Cultural change efforts. Includes release of “Change is the Only Constant” and “Introduction to CBC” trainings.
5. CPS leadership preparation. Includes annual updates at CPS leadership conferences as well as local presentations as requested.

Community Area Selection

1. OCBCT/DFPS will select community areas based on analysis of selection criteria data and information.
2. Announce community area.
3. Hire CBC Administrator and CBC Contract Administration Manager as needed.
4. Commence regular meetings of local cultural change team.
5. Deploy internal Communications Plan within the community area.
6. Establish forecasts and Blended Foster Care Rate for the community area.
7. Establish purchased services funding allocations and resource transfer amounts (as applicable) for the community area.
8. Develop community area training plan in coordination with Center for Learning and Organizational Excellence (CLOE).
9. Deploy plan for IT Readiness.

Procurement of SSCC(s)

1. Announce intent to procure in a community area (as soon as possible, with at least 30 days in advance of RFA release).



2. Continue outreach and planning activities and community engagement (simultaneous with announcement of intent to procure).
3. Develop statement of work.
4. Release RFA.
5. Evaluation of Responses.
6. Contract Negotiations.
7. Award/Enter into SSCC Contract (once negotiations are complete).

Start-Up Phase: Stages I and II (6 months)

1. Implement “Change is the Only Constant” and “Introduction to CBC” training.
2. Hire CMO staff (Stage II only).
3. Begin joint weekly calls between OCBCT, DFPS CPS Associate Commissioner or designee, SSCC and CPS Regional leadership (within first week of Start-Up).
4. Develop and deploy joint Communications and Community Engagement Plan (within two weeks of contract effective date).
5. Begin IT systems readiness.
6. Develop schedule and identify participants for joint protocol development and finalize training plan (within first month of contract effective date).
7. Conduct workgroups and develop joint protocol Operations Manual (within first three months of Start-Up).
8. Train DFPS staff including regional contracts, billing coordinators and other impacted staff on systems changes (within first three months of Start-Up).
9. Establish appropriate tracking and reporting processes for SSCC and regional related challenges (within first three months of Start-Up).
10. Complete draft of joint operations manual for review (within one week of final protocol session).
11. Review, edit and approve joint protocol Operations Manual Draft (within two weeks after receiving).
12. Finalize and deploy joint protocol and IT trainings (within one month of go-live)
13. Assess SSCC readiness according to the readiness requirements established for each stage of implementation.
14. Test IT systems and finalize processes for reporting of any issues encountered after go-live date (within one month of go-live).
15. Establish final plan for transition of activities (within one month of go-live).
16. Establish a child watch agreement plan for children and youth in child without placement prior to the start of Stage I go-live to remain under DFPS supervision until placement is secured. DFPS and the SSCC will staff and complete dual searches in order to secure safe placements for these children and youth. Once a non-temporary placement is found, the child fully transitions under the SSCC and the SSCC is responsible for subsequent placements.



17. Establish an action plan template to address concerns of FCL compliance with the generally applicable caseload standards (GACS) during the transition to Stage II. These plans are shared and agreed upon by both DFPS and SSCC.
18. Agree on general timeframes for the use of Master CVS workers for at least ninety days post Stage II go-live. These positions will help with post-transition stabilization as some workers move from the SSCC back to other DFPS roles, allowing the SSCC time to hire and train caseworker staff on the federally mandated CPD model.
19. Establish baseline historical performance for contract performance measures established for each stage of implementation.
20. Establish average care days anticipated for children from the community based on historical community performance for performance tracking toward earned incentives.
21. CPS Professional Development is adjusted to incorporate training within the community area (Stage I only; before go-live.)
22. Once the six-month Start-Up period is complete and readiness to go live has been certified by OCBCT, DFPS, and the SSCC, services begin.
23. Execute transition plan for paid placements in IMPACT (Stage I).
24. Execute DFPS resource and case management transfer plan (Stage II).
25. Increase communication to daily calls and meetings to resolve potential issues at the local level.

Stage III (18 months)

At least 18 months after the contactor has begun providing case management services to all children and families in the community area (Stage II), assess contractor *financial* incentives or remedies for children in the SSCC's care. The OCBCT, DFPS, and the SSCCs are working together to finalize the process for Stage III with the goal of Stage III implementation in the next fiscal year.

Statewide Implementation

The length of time it will take to fully implement CBC across the state is dependent on many factors which include, but are not limited to the following:

- Final number of community areas determined across the state;
- State resources (both funding and staff) to support implementation;
- Unsolicited proposal interest, submissions, and funding;
- Information derived from both the process and outcome evaluations;
- SSCC demonstrated readiness to advance to each stage of implementation;
- Appropriation of funds to support CBC roll-out in new community areas, and
- Appropriation of funds to maintain existing SSCCs and support advancement into subsequent stages of implementation.



- The SSCC contract requires that all SSCC's comply with court orders and jurisdictional requirements in areas that they are responsible for serving as an agent of the department (SOW Article II, 2.17, 3(b)). OCBCT/DFPS will adjust the CBC model, SSCC contract, readiness process, reporting processes, training processes, and regional operations guides as needed. Since 2011, DFPS has been involved in a class action lawsuit (*M.D. vs. Abbott*) concerning the constitutional rights of children in the permanent managing conservatorship (PMC) of CPS; the SSCCS, per contract terms, must comply with orders issued in that case. For more information about the class action lawsuit (*M.D. vs. Abbott*), see DFPS [Foster Care Litigation](#) webpage. DFPS will continue to operate the legacy foster care system until all community areas have been transitioned to CBC.

DFPS, OCBCT, and SSCC Roles and Responsibilities

DFPS Role

DFPS maintains responsibility for the following functions and services as a part of the current CBC model:

- Intake
- Investigations (both Child Protective and Child Care)
- Family-Based Safety Services
- Eligibility determination (*as federally required*)
- Subject matter expertise to ensure compliance with all state and federal regulatory/statutory requirements (*as federally required*)
- Contract management and monitoring for SSCC and all remaining OCBCT/DFPS contracts
- Quality assurance and oversight of the foster care system (*as federally required*)
- PAL aftercare and post-adoption services
- Maintaining the Information Management Protecting Adults and Children in Texas (IMPACT) case management system, which serves as the system of record.

SSCC Scope of Service

The scope of services under the CBC model includes the purchase of *all* substitute care and child welfare case management services from a SSCC, as well as some administrative services DFPS provides as a part of the legacy system.

- **Substitute care services** includes an array of services provided to children once they are removed from the home, including kinship care, foster care, treatment foster care,



emergency shelters, cottage home and other general residential operations, residential treatment care, post-placement supervision, and supervised independent living services. Under CBC, DFPS transitions all responsibility for foster care placement and services to the SSCC. All DFPS foster and adoptive homes that are serving children from the community area prior to implementation transition to private child placing agencies.

- **Case management services** are defined as the services to a child from the community area for whom DFPS has been appointed temporary or permanent managing conservator, the family of such a child, a young adult in extended foster care, or a child who has been placed in the community area through the Interstate Compact on the Placement of Children. There may also be situations in which the SSCC provides case management and/or supervision to children and family members who are located or placed in the community area from other areas of the state. Through a staged implementation, DFPS will transfer all case management services to the SSCC including:
 - Caseworker-child visits.
 - Family and caregiver visits.
 - Convening and conducting permanency planning meetings.
 - Development and revision of the child and family plans of service, including the permanency plan and goals for a child or young adult in care.
 - Coordinating and monitoring services required by the child and the child's family.
 - Assumption of court-related duties including, but not limited to:
 - Providing required notification and consultation.
 - Preparing court reports.
 - Attending judicial hearings and permanency hearings, trials and mediations.
 - Complying with applicable orders issued by the court.
 - Ensuring the child is progressing toward the goal of permanency within state and federal mandated guidelines.
- **Administrative services** to support capacity building, community engagement, and quality assurance activities. This includes building and maintaining foster care and other service capacity designed to meet the specific and unique needs of children and family members through the development of a network of providers, developing and managing subcontracts (if applicable) with service providers, and referring/ matching children with appropriate placements. The SSCC will provide training and technical assistance to network providers, maintain data systems to track and report performance data, and monitor performance to ensure achievement of desired outcomes for children and families.
- **Other services** the SSCC must provide as part of the full continuum of substitute care and conservatorship case management services including Adoption, PAL



(both Life Skills and some Aftercare), Day Care Coordination, Post Adoption Services, and Interstate Compact on the Placement of Children services.

Given the direction of Senate Bill 1896 regarding evaluation of Family Based Safety Services (FBSS), the OCBCT worked in collaboration with DFPS and the SSCCs to complete the Senate Bill 910 study, which provides insight into the options for including family preservation services into the CBC model.

OCBCT Role

The OCBCT provides consultation and support throughout all stages and staged of CBC implementation. In 2021, the 87th Texas Legislature, as part of Senate Bill 1896, formally established the OCBCT; the office is administratively attached to DFPS and along with the Health and Human Services Commission (HHSC), will work together with the OCBCT on the statewide implementation of CBC. The two OCBCT implementation teams work alongside DFPS and the SSCC(s) to move CBC forward in each community area. The Community-Based Care Administrators (CBCAs) are local to the community area and serve as liaisons between regional DFPS programs and the SSCC. The CBCAs help facilitate the physical transition to CBC. The OCBCT Contract Administration Managers (CAMs) are responsible for managing the acquisition of contractors including but not limited to contract renewals, unsolicited proposals, and Request for Application submittals. After the initial contracting phase, the OCBCT CAM hands off the signed contract to the DFPS CAM for ongoing contract monitoring and enforcement. The Community Outreach and Legislative team focuses on reports, special projects, project management, education and outreach, and legislative inquiries.

Funding and Payment

The funding structure for CBC is complex and includes a variety of different payment methods. The table below describes the current funding components included in Stage I and Stage II.

Legacy System Funds Transferred to SSCCs

Type of Funding	Purpose	Methodology
Resource Transfer	On-going annual cost paid to the SSCC for performing tasks and functions performed by DFPS staff in the legacy system.	Transfers funding to the SSCC commensurate with the transfer of functions.
Foster Care Payments	Reimbursement for foster care for children served by	Blended daily foster care rate unique to the case mix of



Type of Funding	Purpose	Methodology
	the SSCC in a given community area.	children from each community area and a statewide exceptional daily foster care rate for services for children whose needs exceed what can be met through use of the blended rate. Supervised Independent Living Services are reimbursed at the statewide rates.
Purchased Client Services	Funds services to children, youth and families from a given community area to facilitate the achievement of the service plan. Stage I includes PAL Life Skills and purchased adoption services; Stage II includes all family services for children in substitute care.	Annual allocation of the portion of the purchased client services dollars the department would have spent to procure like services in the legacy system.
Quality and Utilization Management	Supports SSCC monitoring of services to ensure quality, progress towards child service plan goals, and compliance with all contract terms, performance expectations, outcomes and outputs of the SSCC's provider network.	Annual allocation of the portion of the dollars the department would have spent to procure like services in the legacy system.

Additional Funding

Type of Funding	Purpose	Methodology
Start-up	One-time payment for readiness activities such as local protocol development and workforce development and training; software purchases; and office leases.	Stage I - \$997,000 Stage II - amount varies by community area; amounts informed by methodology developed through an external analysis.



Type of Funding	Purpose	Methodology
Network Support	Supports new costs to the system for capacity/network development and oversight, community engagement and IT systems requirements.	\$2,500 per child full time equivalent.
Child and Adolescent Needs and Strengths Assessment	Supports care planning for children receiving therapeutic services; assessment statutorily required every 90 days.	Specified amount per child full time equivalent.
Stage II Additional Resource Transfers	Additional resource transfers above agency resource transfer to enhance case management services in Stage II per Rider 29, House Bill 1, General Appropriations Act, and 86 th Legislature.	Appropriated amount varies by community area.

The addition of performance incentives in Stage III is a funding component that continues to be developed by OCBCT/DFPS as a part of the CBC model. In Stage III, the SSCC will be financially incentivized to safely move children out of paid foster care settings to placements with their own parents, with kinship caregivers and/or adoptive placements. The SSCC will receive the average general revenue portion of what the state would have paid for children to remain in foster care when SSCCs improve upon the baseline. Additionally, if the SSCC’s strategies do not work and on average, children remain in paid care longer, the SSCC will be assessed remedies. Currently, the outcome evaluation contractor is helping establish the model for annual assessment of incentives and remedies through their contract as the independent evaluator for CBC.

Additionally, the Texas Child-Centered Care (T3C, formerly Rate Modernization) will provide a fully funded foster care rate methodology that aligns payment with the cost of care.



Progressive Intervention and Contingency Plans

The Progressive Intervention Plan outlines the contract enforcement process or progressive intervention DFPS will employ, in coordination with the OCBCT should the SSCC contractor fail to operate in compliance with the terms and conditions set forth in the SSCC contract.

Progressive intervention actions include monetary and other forms of remedies, such as:

- Obtaining technical assistance or trainings.
- Requiring CQI plans of action.
- Requiring corrective action plans.
- Increasing the nature and intensity of contract monitoring and quality assurance activities.
- Payment of financial remedies in certain circumstances outlined in the contract.
- Payment of liquidated damages (see specific situations defined and noted below).
- Suspending and/or placing conditions or limitations of services when applicable.
- Removing from the provision of services any employee of the Contractor or subcontractor.
- Suspending or terminating all or part of the SSCC contract.

See [Appendix B - Progressive Intervention Plan](#).

The OCBCT and DFPS are committed to CBC as the right approach for partnering with providers to improve service delivery and outcomes. However, OCBCT/DFPS must be prepared with a plan of action in the event a SSCC contract is terminated early in a community area. The OCBCT/DFPS contingency plan is a comprehensive document detailing the proposed schedule, activities, and resource requirements associated with the turnover tasks based on the SSCC's stage of implementation.

The SSCC must also be prepared for contract closure and in rare situations, early termination of the contract. The SSCC is required to submit a turnover plan, 12 months after the start of the contract that outlines the responsibilities and activities that the SSCC is required to perform prior to or upon termination of the contract. The turnover plan is a comprehensive document detailing the proposed schedule, activities, and resource requirements associated with the turnover tasks. This plan is required to be updated six months before the end of the contract period, including any extensions. OCBCT/DFPS must approve the turnover plan.



OCBCT/DFPS will use the SSCC's turnover plan as well as the DFPS contingency plan to ensure the least disruption in the delivery of services to children, youth and families who are being served by the SSCC during any transition to a subsequent vendor.

See [Appendix C – Contingency Plan](#).

Training Plan

OCBCT/DFPS developed CBC training plans for each community area based on the stage of implementation. Included in these plans are timeframes and tasks related to:

- Protocol development
- Operations Manual development
- Curriculum development for existing CPS and SSCC staff
- Training delivery for existing CPS and SSCC staff
- Curriculum development for new SSCC staff
- On-going training delivery for new SSCC staff
- Mentoring SSCC staff

In collaboration with the DFPS Center for Learning and Organization Excellence (CLOE), the CPS Professional Development training program for new DFPS caseworkers was revised to include all components of CBC. The curriculum addresses the goal, foundational principles, and anticipated outcomes of CBC, including the key components of the model that differ from the legacy system. This will ensure that new staff understand the differences in each stage of CBC and what to expect when CBC is implemented in their community area. Community-specific protocols will require modification of the CBC training curriculum for new caseworkers for each community area based on the stage of implementation.

As noted in the community-specific timeline, training on community-specific protocols will be conducted before each stage rollout for all existing CPS staff. This is an opportunity for the region to receive in person training on the CBC protocols specific to their community and get to know more about the operations and plans of the designated SSCC in their area. OCBCT/DFPS will also train SSCC staff on changes to the State Automated Child Welfare Information System (SACWIS) system known as IMPACT.

In addition to training on community-specific protocols, in CBC Stage II, SSCCs must develop training models to ensure that all caseworkers, supervisors and other direct care staff providing conservatorship services through the SSCC complete training to support attainment of safety, permanency, and well-being for the children, youth, and families served under their continuum of care. Generally, SSCCs have leeway to develop trainings specific to their CBC model while incorporating all DFPS federal and state statutory requirements and licensing standards.



However, some DFPS trainings will be required of SSCCs, such as the CPS' Professional Development (CPD) training model for all caseworkers, supervisors and other direct care staff providing conservatorship services through the SSCC to support the state's compliance with remedial orders from the foster care class action lawsuit (*M.D. vs. Abbott*).

OCBCT and DFPS Oversight Structure

CBC changes the child welfare landscape in Texas. To ensure successful implementation and sustainability, OCBCT and DFPS must establish effective structures with clearly defined responsibilities for planning, decision making, implementation and on-going operations. CBC governance and organization builds on structures currently in place within OCBCT and can be adjusted over the course of CBC implementation as OCBCT, on behalf of DFPS, contracts with more SSCCs.

Governance

The OCBCT is responsible for providing direction and in coordination with DFPS making critical decisions to support CBC implementation. This includes DFPS executive level support and commitment of resources from within Child Protective Services, Purchased Client Services, Finance, Legal, Information Technology, Data and Systems Improvement, Center for Learning and Organizational Excellence, Communications, Human Resources, and External Relations.

Implementation of Senate Bill 1896 and the Enumerated Duties

The 87th Texas Legislature passed Senate Bill 1896, which is an omnibus bill that impacts many divisions within DFPS, including the OCBCT. This bill created the OCBCT and appointed a Statewide CBC Director.

The OCBCT is charged with 10 duties:

1. assess CBC areas in this state where community-based care services may be implemented,
2. develop a plan for implementing community-based care in each community area in this state, including the order in which community-based care will be implemented in each community area and a timeline for implementation,
3. evaluate community-based care providers,



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4. contract, on behalf of DFPS, with community-based care providers to provide services in each community area in this state,
5. measure contract performance of community-based care providers,
6. provide contract oversight of community-based care providers,
7. report outcomes of community-based care providers,
8. identify the employees and other resources to be transferred to the community-based care provider to provide the necessary implementation, case management, operational, and administrative functions and outline the methodology for determining the employees and resources to be transferred,
9. create a risk-sharing funding model that strategically and explicitly balances financial risk between this state and the community-based care provider and mitigates the financial effects of significant unforeseen changes in the community-based care provider's duties or the population of the community it serves, and
10. require the annual review and adjustment of the funding based on updated cost and finance methodologies, including changes in policy, foster care rates, and community service usage.

For charges one through three, OCBCT's outreach efforts help promote and support these charges through interactions with current and potential future CBC providers to plan for CBC in communities across Texas. OCBCT continues to partner with DFPS to plan CBC roll out in the remaining community areas and ensures that innovation in planning the next areas of CBC is supported.

For charges four through seven, OCBCT works closely with DFPS and HHSC to ensure procurement regulations are followed, adherence to state and federal statutes regarding the administration of the foster care program, and compliance with the federal foster care remedial orders. The CBC Quarterly Implementation Report and the Rider 15 Report help to ensure that outcomes are reported to internal and external stakeholders. The OCBCT is committed to transparency and will continue to meet statutory requirements for sharing implementation plans, implementation updates, and performance data and measures.

For the final charges, eight through ten OCBCT continues to work with external partners to ensure the best methods of supporting the SSCCs and community-based care. Given the direction of Senate Bill 1896 regarding evaluation of Family Based Safety Services (FBSS), OCBCT worked in collaboration with DFPS and the SSCCs to complete the Senate Bill 910 study, which provides insight into the options for including family preservation services into



the CBC model. OCBCT continues to collaborate with DFPS and the SSCCs on the House Bill 3041/Texas Family First family preservation service pilots.

Single Source Continuum Contract Oversight

Contract oversight for CBC is based on the review of critical SSCC performance areas. Throughout the contract period, the OCBCT/DFPS multi-disciplinary team reviews performance outcomes and other administrative, fiscal, and programmatic data and information related to compliance with contract terms and conditions and service delivery in accordance with the service delivery model. Data sources include DFPS data system reports (IMPACT, CLASS), SSCC self-reported data and information, ad hoc reports, case record reviews, financial reports, single audit, data security audits, and third-party reviews.

The multi-disciplinary team meets with the SSCC quarterly to conduct a formal review of performance. Together, OCBCT, DFPS, and the SSCC identify trends, areas for improvement, and technical assistance needs. During stage transition, the team conducts oversight activities more frequently to ensure successful transition and continuity of services for children and families. In Stage I, this involves oversight of placement activity and ensuring DFPS and SSCC staff understand and are following the established case protocols, including adjusting as needed. In Stage II, oversight activities focus on ensuring that case management activity continue for all cases based on case stage: children and families are seen, case documentation is maintained, court dates are met, existing services are not interrupted, and new services are not delayed. Over time, as SSCCs demonstrate compliance, oversight moves to focus on quality and the achievement of permanency outcomes.

An annual review by DFPS is also conducted with the purpose of ensuring the SSCCs have proper oversight mechanisms in place of their provider network that ensure compliance with the terms and conditions set forth in the SSCCs contract with DFPS. The nature and intensity of contract monitoring and quality assurance activities may be adjusted at any time during the contract period based on performance and risk. OCBCT/DFPS may impose a contract intervention at any time. Contract interventions range from technical assistance support, training and requesting CQI plans to Contract Corrective Action Plans (CCAP), and up to and including contract termination and financial remedies, when necessary.

Contract Performance Measures

SSCC contract performance measures are aligned with the CBC guiding principles and quality indicators, as well as state and federal requirements and performance outcomes.

- The percentage of children/youth who do not experience a validated incidence of abuse, neglect, or exploitation.



- Foster care placements per child/youth.
- The percentage of days that are in a least restrictive placement.
- The percentage of children/youth in foster care placements within 50 miles of their home.
- The percentage of sibling groups placed together in foster care.
- The percentage of youth aged 16 or older who have a driver's license or state identification card.
- The percentage of youth who turned 18 and have completed required PAL Life Skills Training.
- The percentage of court hearings attended by children/youth, when not excused by the court.
- The percentage of children placed in kinship care. (Stage II)
- The percentage of classified regular full- and part-time SSCC caseworkers who voluntarily and involuntarily separate from the SSCC agency. (Stage II)

Stage III activates fiscal incentives and remedies tied to permanency outcomes. Continuously reducing the number of paid foster care days, either by having more permanent exits or shorter foster care stays, will result in payment of financial incentives. Baseline targets for each SSCC reflect an average performance of the legacy foster care system in the defined community area during an established performance window (e.g., two years) before implementation. The target is performance at or above the historical community baseline, except for safety, with an expectation of 100% of children safe. DFPS produces additional data related to performance measures to better understand what may be driving trends. The goal is to use data prospectively to identify where change can be made to adjust practice or respond to population changes in support of positive outcomes.

Programmatic Oversight

The SSCC service delivery system is reviewed and assessed to determine if it is consistent with contract requirements, including outputs, outcomes, quality, and effectiveness of programs. Service-related data and information is reviewed to ensure:

- **Compliance with Critical Tasks, Procedures, and Practices:** OCBCT/DFPS/SSCC policies and procedures, agreed upon protocols, documentation requirements, HHSC minimum standards, and other process or practice expectations as required by state or federal statute or identified in the contract.
- **Quality Services:** degree to which the identified need is being met and the quality of the service being provided.

Oversight during the transition is necessary to ensure child safety and continuity of service provision. Oversight staff review data and case records to ensure that children and families



are being seen by caseworkers, that assessments and case planning are continuing timely, and that no services are disrupted.

Administrative Oversight

Administrative oversight includes a review of the contractor's operations to ensure:

- **Administration and Operational Capacity:** policies, procedures, and overall organizational structure
- **Compliance:** systems for ensuring compliance with all applicable state and federal regulations, quality assurance, and utilization management practices
- **Workforce:** capacity to hire, train, and maintain qualified staff
- **Network Accountability and Oversight:** subcontractor monitoring plans and timelines
- **Network Capacity:** full continuum of provider services for children and families
- **Stakeholder Engagement:** community outreach and engagement plans, as well as complaints processes for internal and external stakeholders

Fiscal Oversight

The CBC contract requires the SSCCs to submit residential provider cost reports and external financial statements, as well as undergo annual independent and single audits. OCBCT/DFPS will use the findings of the independent audit to assess the organization's overall financial viability. OCBCT/DFPS will use the single audit to assess the SSCC's financial viability and contract compliance relating to the requirements of the SSCC contract.

On-going fiscal oversight includes, but is not limited to, a review of the contractor's:

- **Financial Controls:** financial management systems to ensure accountability, proper documentation, standard accounting procedures and internal controls
- **Financial Stability:** viability of the organization, such as internal and external financial statements, annual independent audit, single audit, and invoices

Additional Oversight

In addition to contract oversight as outlined above, OCBCT, DFPS, and the SSCC are subject to the following oversight:

State Auditor's Office (SAO)

The State Auditor's Office (SAO) is the independent auditor for Texas state government that operates with oversight from the Legislative Audit Committee, a six-member permanent standing committee of the Texas Legislature, jointly chaired by the Lieutenant Governor and the Speaker of the House of Representatives. The SAO is authorized, by Chapter 321, Texas Government Code, to perform audits, reviews, and investigations of any entity receiving state funds, including state agencies and higher education institutions. SAO performs audits with



Generally Accepted Government Auditing Standards, including those issued by the American Institute of Certified Public Accountants.

DFPS Internal Audit

DFPS Internal Audit performs a retrospective review of selected contracts based on a risk assessment methodology. Accordingly, a provider must be operating for a period of time prior to the internal audit review. This is typically one year with a report not being available until six months later.

Contract Oversight and Support (COS)

DFPS has an independent Contract Oversight and Support (COS) Division separate from the OCBCT Contracts. The COS division consists of two teams:

- Policy, Training, and Technical Assistance
- Data, Risk Management, and Quality Assurance

The goals and objectives of COS are to mitigate contract risk by:

- Providing timely and relevant communication and technical assistance to all levels of staff, from contract management to the executive level.
- Identifying contracting issues and best practices to facilitate the development and track progress of contracting initiatives.
- Developing well-written and easy to follow policies and procedures that meet all contracting requirements.
- Delivering relevant contract training through multiple formats to staff of all levels of contracting experience.
- Development of internal control processes, risk assessment tools, and the agency's contract monitoring plan.
- Reduce agency contracting risk through the development of robust internal control processes, risk assessment tools, and the agency's contract monitoring plan.
- Reporting comprehensive contract information to enable data-driven decisions.
- Ensuring the integrity of contract management by testing data and the adherence to policies and procedures.

DFPS Federal Title IV-E Oversight

Each child in Texas foster care is under the conservatorship of DFPS, and ultimately the responsibility of the DFPS Commissioner. CPS will continue to work directly with each SSCC regarding compliance with federal and state law and to facilitate and ensure the safety, permanency, and well-being of each youth in foster care.

These key actions heavily involve DFPS through its budget, personnel, and forecasting. To reach an informed, appropriate decision, DFPS input and collaboration is necessary. DFPS



should have input and collaboration regarding contracting with SSCCs as said contracting is expressly “on behalf” of DFPS.

It is through this oversight mechanism, as required by Title IV-E, that CPS monitors the SSCCs through case review processes which evaluate quality case management and compliance with federal child and family services requirements. The DFPS CMO staff provide direct training and technical assistance to support best practice in SSCC programs and to ensure placement and other actions meet federal requirements. This is required by DFPS’ duty to serve as conservator of children in care; this cannot be delegated to SSCCs.

Evaluation

Performance Measure Comparative Analysis

The OCBCT/DFPS publishes performance data biannually as a requirement of Rider 21, in Article II of the General Appropriations Act, 85th Texas Legislature (Rider 15, 86th). The data includes both SSCC contract measure performance and performance on select Legislative Budget Board Child Protective Services Performance Measures over time. The OCBCT/DFPS reports the performance of each SSCC, along with the performance of the state, and the performance of the combined non-CBC regions. The report allows for a comparative analysis between the legacy foster care and CBC systems.

As CBC progresses through a staged, statewide implementation, OCBCT, DFPS, and stakeholders can use the data to assess individual SSCC performance over time; whether CBC areas are improving over their historical performance more or less than legacy areas are improving over theirs; and whether there may be statewide trends influencing performance across both legacy and CBC systems.

Major systemic changes take time, often a year for statistics to normalize after a big transition. Improved performance may not be observable in a community, or statewide, until more community areas become a part of the redesigned system and advance to Stage II. The agency publishes biannual CBC performance [Rider Reports](#)³ for each SSCC on its public website.

Independent Outcome Evaluation

Texas Family Code Section 264.153 requires OCBCT/DFPS to describe, as part of a CBC implementation plan, its plan for evaluating “the performance of each contractor and the community-based system as a whole that includes independent evaluation of each contractor’s processes and fiscal and qualitative outcomes.” OCBCT contracts to establish the CQI

³ www.dfps.texas.gov/CBC/reports



framework which serves to evaluate how well SSCC-driven, community-specific change strategies succeed in improving outcomes, specifically improved performance.

Chapin Hall currently provides independent data analysis of each SSCC's performance on reducing paid foster care days. Continuously reducing the number of paid foster care days, either by having more permanent exits or shorter foster care stays, will result in payment of financial incentives in Stage III. Conversely, utilizing more than the baseline days of care will result in financial remedies. Using "Baseline-Target-Actual" data, Chapin Hall defines the differences between identified baseline values and actual performance, and reports if the differences are changing for each SSCC. Chapin Hall and OCBCT/DFPS work with the SSCCs to better understand the data and support strategies that can narrow the difference between actual performance value and the anticipated performance target. Chapin Hall will track re-entries into paid foster care following a permanent exit to ensure that any improvements to the permanency outcomes are not offset by an increase in the re-entry rate to foster care.

Chapin Hall is also producing the data for the performance outcome for proximity. Geo-mapping software is used to show the percent of placements that are within 50 miles of the child's address at removal. At a systems level, Chapin Hall will help OCBCT/DFPS test the specific theory of change outlined in the CBC logic model, which proposes that an SSCC operating under a performance-based contract and redesigned payment structure, will have more success maintaining children in stable, least restrictive placement in their home communities, increasing permanency rates and reduce utilization of paid foster care days. This analysis would be performed once contracts reach Stage III.

Closing

This year has brought the largest expansion of CBC in Texas' history. Without the continued partnership between DFPS, OCBCT, the SSCCs, and the support of internal and external stakeholders, this growth would not be possible. OCBCT and DFPS are grateful for the countless hours and resources that staff and stakeholders have dedicated to expanding CBC, and looks forward to the opportunity for continued collaboration as implementation of Community-Based Care becomes a reality in our state. The OCBCT's focus of the upcoming year will be on continuing to partner with internal and external stakeholders, to safely accelerate, and to improve the CBC implementation processes as we move CBC forward. OCBCT and DFPS will finalize and implement Stage III, release an RFA for Harris County/6A, Bay Area/Montgomery/6B, Bexar County/8A, and El Paso/10.



Appendix A – Geographic Community Areas

The following is a list of Designated Community Areas along with a county listing for each area.

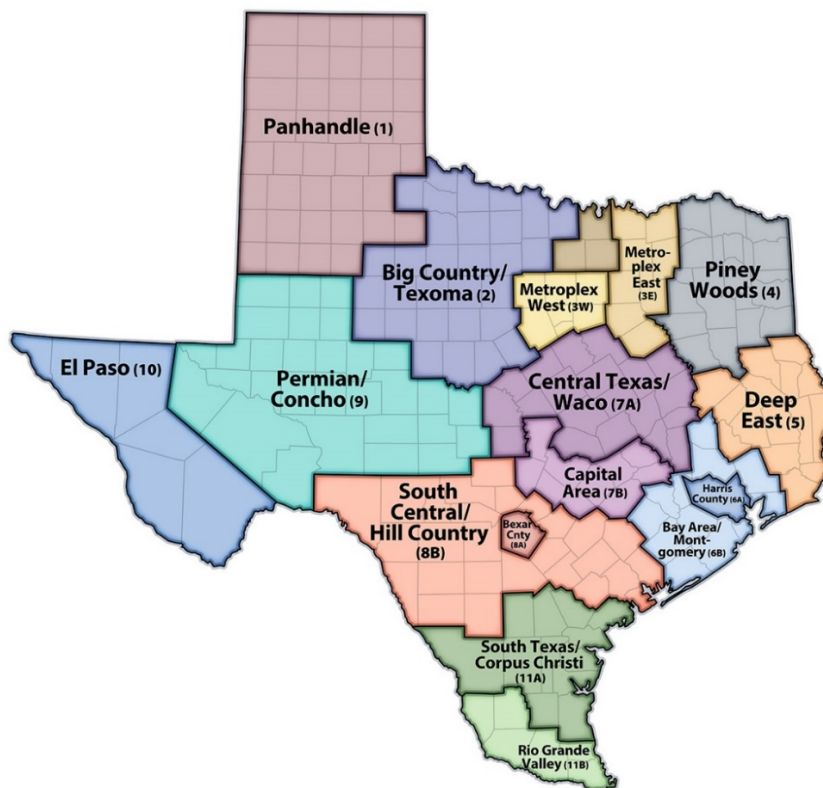
Designated Community Area	County Name
Panhandle	Armstrong, Bailey, Briscoe, Carson, Castro, Childress, Cochran, Collingsworth, Crosby, Dallam, Deaf Smith, Dickens, Donley, Floyd, Garza, Gray, Hale, Hall, Hansford, Hartley, Hemphill, Hockley, Hutchinson, King, Lamb, Lipscomb, Lubbock, Lynn, Moore, Motley, Ochiltree, Oldham, Parmer, Potter, Randall, Robert, Sherman, Swisher, Terry, Wheeler, Yoakum
Big Country/Texoma	Archer, Baylor, Brown, Callahan, Clay, Coleman, Comanche, Cottle, Eastland, Fisher, Foard, Hardeman, Haskell, Jack, Jones, Kent, Knox, Mitchell, Montague, Nolan, Runnels, Scurry, Shackelford, Stephens, Stonewall, Taylor, Throckmorton, Wichita, Wilbarger, Young
Metroplex East	Collin, Dallas, Ellis, Fannin, Grayson, Hunt, Kaufman, Navarro, and Rockwall.
Metroplex West	Cooke, Denton, Erath, Hood, Johnson, Palo Pinto, Parker, Somervell, Tarrant, Wise
Piney Woods	Anderson, Bowie, Camp, Cass, Cherokee, Delta, Franklin, Gregg, Harrison, Henderson, Hopkins, Lamar, Marion, Morris, Panola, Rains, Red, River, Rusk, Smith, Titus, Upshur, Van Zandt, Wood
Deep East	Angelina, Hardin, Houston, Jasper, Jefferson, Nacogdoches, Newton, Orange, Polk, Sabine, San Augustine, San Jacinto, Shelby, Trinity, Tyler
Harris County	Harris
Bay Area/Montgomery	Austin, Brazoria, Chambers, Colorado, Fort Bend, Galveston, Liberty, Matagorda, Montgomery, Walker, Waller, Wharton
Central Texas/Waco	Bell, Bosque, Brazos, Coryell, Falls, Freestone, Grimes, Hamilton, Hill, Lampasas, Leon, Limestone, Llano, Madison, McLennan, Milam, Mills, Robertson, San Saba, Williamson
Capital Area	Bastrop, Blanco, Burleson, Burnet, Caldwell, Fayette, Hays, Lee, Travis, Washington
Bexar County	Bexar
South Central/Hill Country	Atascosa, Bandera, Calhoun, Comal, De Witt, Dimmit, Edwards,



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Designated Community Area	County Name
	Frio, Gillespie, Goliad, Gonzales, Guadalupe, Jackson, Karnes, Kendall, Kerr, Kinney, La Salle, Lavaca, Maverick, Medina, Real, Uvalde, Val Verde, Victoria, Wilson, Zavala
Permian/Concho	Andrews, Borden, Coke, Concho, Crane, Crockett, Dawson, Ector, Gaines, Glasscock, Howard, Irion, Kimble, Loving, Martin, Mason, McCulloch, Menard, Midland, Pecos, Reagan, Reeves, Schleicher, Sterling, Sutton, Terrell, Tom Green, Upton, Ward, Winkler
El Paso	Brewster, Culberson, El Paso, Hudspeth, Jeff Davis, Presidio
South Texas/Corpus Christi	Aransas, Bee, Brooks, Duval, Jim Wells, Kenedy, Kleberg, Live Oak, McMullen, Nueces, Refugio, San Patricio, Webb
Rio Grande Valley	Cameron, Hidalgo, Jim Hogg, Starr, Willacy, Zapata



Appendix B – Progressive Intervention Plan

SSCC Performance Based Contract

As described in the plan, the SSCC contract is a performance-based contract meaning that the SSCC is held contractually and financially accountable for outcomes. Outcomes are tied directly to incentives and remedies which focus on length of stay in paid foster care (permanency). The assessment of remedies or incentives occurs on an annual basis once the SSCC has implemented Stage III. The annual settle up is determined by a third-party evaluation of the baseline, target, and actual data results of the SSCC contractor.

Liquidated Damages for No Eject/No Reject.

The SSCC provider must ensure the full continuum of foster care and purchased services for children and youth in DFPS legal conservatorship from the designated geographic community area and who are referred to the SSCC by DFPS. The SSCC must 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.

The SSCC contract terms and conditions outline Liquidated Damages for No Eject/No Reject as follows; the SSCC acknowledges that its failure to comply with timeframes associated with placement of children as described in the contract will cause DFPS to incur economic damages of types and in amounts which are impossible or difficult to ascertain. If the SSCC cannot place a child or youth in accordance with the timeframes described in the contract, then such failure will be deemed as a violation of the No Eject/No Reject mandate of the CBC contract.

Accordingly, in lieu of actual damages for such noncompliance, the SSCC agrees that DFPS may recover Liquidated Damages if the SSCC cannot comply with the No Eject/No Reject sections of the contract. The SSCC will be liable for payment of liquidated damages in the amount of Ten Thousand Dollars (\$10,000) for each instance of noncompliance with the contract's no eject/no reject requirement. The Liquidated Damages represent the best, reasonable, and most appropriate estimate of the Department's loss for each instance of noncompliance. After DFPS has found placement for children and youth covered by No Eject/No Reject provisions of the contract, the SSCC will be liable to DFPS for actual damages in the amount of what the substitute provider bills DFPS for the child's or youth's care.

Contractor Noncompliance

The SSCC is also held accountable and must adhere to other contractual rules, regulations and the terms and conditions of the SSCC contract. OCBCT/DFPS and the SSCC have implemented a Continuous Quality Improvement (CQI) process that provides continual data and information



collection and analysis used for the early identification of lead agency problems and areas of possible contract non-compliance. Whenever performance concerns or compliance issues are identified, the contract manager will intervene by using the progressive intervention framework and strategies to reverse the trend and or address the area of non-compliance.

If it is suspected that the health, safety, or well-being of DFPS clients is at stake, contract staff should immediately consult with their supervisor to determine whether immediate contract remedy is necessary. Likewise, if contract staff suspects that DFPS funds are at risk based on any deliberate or careless action or inaction on the part of the contractor, staff should consult with their supervisor to determine appropriate next steps. If indicated the progressive intervention may move directly to a contract remedy, up to and including contract termination.

This plan outlines the *contract enforcement process or progressive intervention* OCBCT/DFPS will employ should the SSCC contractor fail to operate in compliance with the terms and conditions set forth in the SSCC contract.

Progressive intervention actions include monetary and other forms of remedies, such as:

- Obtaining or requiring technical assistance or trainings.
- Requesting a variance statement
- Requiring CQI plans of action.
- Requiring corrective action plans.
- Increasing the nature and intensity of contract monitoring and quality assurance activities.
- Payment of financial remedies in certain circumstances outlined in the contract.
- Payment of liquidated damages (see specific situations defined and noted below).
- Suspending and/or placing conditions or limitations of services when applicable.
- Removing from the provision of services any employee of the Contractor or subcontractor.
- Suspending or terminating all or part of the SSCC contract.

Monetary remedies imposed on an SSCC are done in consultation with legal.

SSCC Progressive Intervention Framework

Community-Based Care contracts with the Single Source Continuum Contractors (SSCC) are performance-based contracts which focuses on specific desired performance and allows the contractors the latitude to determine the most efficient ways to achieve the target(s).

Both DFPS and the SSCC are responsible for Continuous Quality Improvement process (CQI). Together, DFPS and the SSCC identify trends, areas for improvement, and technical assistance needs. In instances where data indicates a negative trend, the Department will communicate



with the SSCC to discuss the identified data and offer information and technical assistance in correcting the issue. If the negative data trend continues and becomes a systemic issue, DFPS will use the progressive intervention framework and strategies to address the negative trend.

PROGRESSIVE INTERVENTION FRAMEWORK		
Nature of the problem	Type of action or response	Standard steps taken by DFPS
Negative trend identified or contract requirement not understood. e.g., contract performance target not met during a performance quarter.	<p>Technical Assistance: Communication with contractor to discuss the trend identified and/or clarify a contract requirement to increase contractor awareness of possible risks, and offer information and technical assistance, guidance and or training.</p> <p>Both DFPS and the SSCC will hold meetings or scan calls to identify issues, barriers, potential solutions, and implementation strategies to fix noncompliance and performance issues.</p>	<ul style="list-style-type: none"> • Documented conversation with contractor • Meetings to • Technical Assistance provided via a Technical Guidance Letter • Training provided to clarify and increase awareness • Requesting a “reason” or variance statement to explain the dip in performance • Request additional data to support dip and variance statement
Negative trend continues, or more information is needed to determine if a systemic issue exists	<p>Continuous Quality Improvement Plan The SSCC will be asked to review the data and develop a written plan that outlines the efforts that will be implemented to address the issue.</p>	<ul style="list-style-type: none"> • CQI Plan requested to determine whether or not the problem is a symptom of a larger issue • CQI plan once implementation is monitored and results closely tracked to ensure the strategies implemented address the issue



PROGRESSIVE INTERVENTION FRAMEWORK		
Nature of the problem	Type of action or response	Standard steps taken by DFPS
Negative trend continues, or a systemic issue is identified. e.g., recurring problem which requires specific action steps to correct	<p>Contract Action Plan: Formal correction to address and resolve the problem and prevent any future risk. A corrective action plan must contain specific steps to be taken by a contractor to correct identified deficiencies and to address concerns that DFPS may have regarding the contractor's:</p> <ul style="list-style-type: none"> • Compliance with contract terms or other applicable laws, rules or regulations. • Performance related to service delivery, reporting and/or financial stability. • Other significant deficiencies. 	<ul style="list-style-type: none"> • Conversation with contractor • Requiring a contract action plan (CAP) be implemented • Increase monitoring efforts in targeted area • Impose additional reporting requirements • Scheduled on-site visit to determine whether or not the problem poses a significant risk of harm or loss • Track results of the implementation of the plan to ensure that the contractor's deficiencies or problems are corrected. • If the plan is not implemented or the desired results are not achieved, DFPS will proceed to the consideration of other immediate contract remedies.
Contract action plan not implemented and/or contractor breaches the contract due to continued noncompliance actions or inability to meet the terms, conditions, and/or	<p>Contract Remedy: A contract remedy occurs when DFPS, to any material extent, denies, terminates, or suspends a contract or payment to a contractor. Contract remedies are the most serious and formal correction taken to resolve the problem and/or eliminate</p>	<ul style="list-style-type: none"> • Letter to the contractor warning of possible sanctions if the problem is not corrected. • Depending on associated risk, reduce the services and/or dollars associated with the contract including by:



PROGRESSIVE INTERVENTION FRAMEWORK		
Nature of the problem	Type of action or response	Standard steps taken by DFPS
obligations under the SSCC contract. Significant harm or risk of harm to agency clients e.g., loss or misuse of agency funds related to the contractor's lack of cooperation or carelessness	negative impact up to an including contract termination. DFPS will discuss the impact of the SSCC contract remedy imposed and begin contingency planning efforts. DFPS may begin to remove and find alternate placement for clients. Implementation of the contingency plan will be determined according to the SSCC contract function affected and SSCC stage of implementation. Full and immediate implementation of the contingency plan will begin should contract non-renewal or termination be indicated.	<ul style="list-style-type: none"> ○ Suspension of referrals or Service Authorizations ○ Removal of specific services from the contract provisions ○ Suspension of payments until the problem is resolved ○ Placing the contractor on Vendor Hold ○ Reduction of the contract amount ● Deny contract renewal ● Reduce the contract term or terminate prior to the contract expiration date ● Report the contractor to the appropriate licensing organization and/or law enforcement ● Liquidated damages as specified in the contract ● Report to the VPTS, state and federal debarment systems

Note: If it is suspected that the health, safety, or well-being of DFPS clients is at stake, contract staff should immediately consult with their supervisor to determine whether immediate contract remedy is necessary. Likewise, if contract staff suspects that DFPS funds are at risk based on any deliberate or careless action or inaction on the part of the contractor, staff should consult with their supervisor to determine appropriate next steps.

If indicated the progressive intervention may move directly to a contract remedy, up to and including contract termination. This framework outlines the contract enforcement process or



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progressive intervention DFPS contract staff will employ should the SSCC contractor fail to operate in compliance with the terms and conditions set forth in the SSCC contract.

HHSC Residential Child Care Licensing's (RCCL) role with all licensed providers, including the SSCC and their subcontractors will remain unchanged. Any violation or act of non-compliance to licensing minimum standards is acted on according to the RCCL regulatory process and therefore is not included in this Community-Based Care (CBC) SSCC progressive intervention framework.



Appendix C - Contingency Plan

OCBCT is committed to CBC as the right approach for partnering with providers to improve service delivery and outcomes. However, OCBCT must be prepared with a plan of action in the case that an SSCC contract is terminated. The Contingency Plan is a comprehensive document detailing the proposed schedule, activities, and resource requirements associated with the turnover tasks based on the SSCC's stage of implementation.

The SSCC must also be prepared for contract closure, and in rare situations, early termination of the contract. The SSCC is required to submit a Turnover Plan 12 months after the start of the Contract that outlines the responsibilities and activities the SSCC is required to perform prior to or upon termination of the Contract. The Turnover Plan is a comprehensive document detailing the proposed schedule, activities, and resource requirements associated with the turnover tasks. This plan is required to be updated six months before the end of the Contract Period, including any extensions. OCBCT/DFPS must approve the Turnover Plan.

Should contract termination be necessary, OCBCT/DFPS will use the SSCC's Turnover Plan as well as the Contingency Plan to ensure the least disruption in the delivery of services to children, youth and families who are being served by the SSCC during the transition to a subsequent vendor or take it back in-house. This was utilized when 8A transitioned back to DFPS' jurisdiction in July 2021.

Objectives

- Provider, foster parent/facility and physical location of every child is known and recorded in IMPACT at all times.
- No delay in payment to providers.
- Transition is seamless to children, youth, and families with no disruption in services to any child, youth or family.
- Transition is supported centrally as much as possible, to impose the least impact on direct care staff.
- Early identification of challenges/issues is achieved through centralized tracking, reporting and resolution of issues.
- OCBCT/DFPS carries forward what is learned either through contract amendments or in future Request for Proposals to enhance preparation and execution of contingency planning.

Assumptions

- Minimum of 60-day transition period for ramping down SSCC operations and phase in of new provider and/or DFPS legacy system. More time may be needed if the SSCC has advanced beyond Stage I.



- OCBCT/DFPS and HHSC Resources will be made available to support transition.
- The SSCC will participate and be fully engaged in the planning and execution of the transition plan.
- The Contingency Leadership Team will coordinate and execute the contingency plan. This multi-disciplinary team will be led by the OCBCT Director and the DFPS Associate Commissioner of CPS consisting of a member from the following divisions: CPS Program/Eligibility, CPS Director of Field, Contracts, HHSC Procurement, Budget/Finance, IT AD&M, and IT Management Reporting and Statistics, HHSC Licensing, Center for Learning and Organizational Excellence (CLOE), External Relations, Communications, Legal, and Media. Each area will identify a single point of contact to assist in the coordination and execution of the contingency plan.

Tasks

Area	Task	Resources
Change Management	<ul style="list-style-type: none"> • Deploy the Contingency Leadership Team • Organize single points of contacts for DFPS divisions (Communications, Government Relations, Budget, IT, CLOE, Legal, CCL, etc.) • Establish on-going internal communications (regarding transition): <ul style="list-style-type: none"> ○ Issues tracking structure with points of contacts ○ Daily status updates to Executive and Regional Leadership ○ Weekly face-to-face meetings with division points of contact • Daily calls with regional leadership 	Cross divisions OCBCT Director OCBCT Contract Director DFPS HR DFPS Finance Division points of contact
Communication	<ul style="list-style-type: none"> • Plan and prepare communication messages: <ul style="list-style-type: none"> ○ Commissioner message to Executive Leadership Team ○ Regional staff in the community area (outlining specific timeframes for interim processes, any changes in job functions) ○ Regional staff in other community(s) ○ Statewide staff ○ Legislative Offices ○ DFPS Council ○ Subcontractors of SSCC 	OCBCT, DFPS Associate and Deputy Commissioner Communications, Media Relations Information Technology CPS Program



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	<ul style="list-style-type: none"> ○ Foster Parents and other caregivers serving children in SSCC ○ Courts in the community area ○ CASA programs in the community area ○ Public Private Partnership ○ Key Stakeholders ○ All licensed and contracted providers ○ Webpage and other media outlets as applicable ● Monitor CBC mailbox for questions to be submitted (both from internal and external stakeholders during transition process) ● Post FAQs to CBC webpage 	
Personnel	<p>Develop and implement contingency staffing plan:</p> <ul style="list-style-type: none"> ● Assess transition needs based on SSCC stage of implementation and SSCC caseloads ● Develop staff transition plan to include number of staff, positions, and functions needed ● Track staff who will transfer, DFPS staff who will be temporarily re-assigned, and staff gaps still needed to fill ● Coordinate with DFPS, the subsequent or interim SSCC to transfer staff, if applicable ● Deploy other DFPS or OCBCT staff to assist temporarily during the transition ● Hire temporary staff if staff still needed 	<p>DFPS Operations (HR, Legal, etc.) OCBCT CPS State Office & Regional Leadership</p>
Procurement	<ul style="list-style-type: none"> ● Coordinate with HHSC Procurement on proposed transition plan and timeframes and review options for new procurement, emergency procurement (as applicable) or transfer responsibilities and contract to another SSCC ● Plan and execute, as applicable, RFA, contract amendments, MOUs, negotiations 	<p>HHSC Procurement OCBCT DFPS Legal CPS Program CBC Contracts</p>



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<p>DRITs and Data/Information Needed</p>	<p>Process Data requests for:</p> <ul style="list-style-type: none"> SSCC Children with service level and placements SSCC Foster Homes SSCC General Residential Operations (GROs) Courts and CASA programs Relatives with verification status in process Family members being provided purchased client service (Stage II) 	<p>OCBCT MRS Region CBC Data Team</p>
<p>Contracts and Sub-contracts</p>	<ul style="list-style-type: none"> Establish designated points of contact for contract/subcontract transition Verify and confirm receipt of all subcontracts Determine subcontract terms including payment processing Identify subcontractors without DFPS active contract Coordinate contract management and monitoring responsibilities Plan and coordinate process for transfer of contracts either to DFPS or new SSCC in IMPACT system Ensure sufficient resources to cover entire continuum of care (residential, purchased adoption, PAL-Life Skills, and foster care day care) are in place and coordinate and close any gaps in service Ensure sufficient resources to cover entire continuum of care Stage II: Case Management, purchased client services for families, post adoption, kinship, reunification, and transitional living are in place close any gaps in service Close out SSCC termed contract and, depending on procurement options, enter new SSCC or emergency contract in IMPACT 	<p>Purchased Client Services Region and CBC Contracts Legal Budget OCBCT</p>
<p>Budget</p>	<p>Cost out Contingency Plans (based on the stage of implementation):</p> <ul style="list-style-type: none"> Identify costs and funding to implement contingency plan (such as re-hire DFPS 	<p>Budget OCBCT Program Eligibility</p>



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	<p>positions or resources for contingency provider)</p> <ul style="list-style-type: none"> • Assess resources transferred and resources not yet transferred: staff, contract management, utilization management • Assess allocation amount paid for purchased client services and amount remaining 	
IT	<ul style="list-style-type: none"> • IMPACT data transfer - ensure process and resources sufficient to support the following including what must be manual, what can be automated, and forms required: <ul style="list-style-type: none"> ○ transfer of subcontracts in IMPACT ○ transfer of placement in IMPACT ○ transfer of purchase client services for families in IMPACT • Data validation and reporting processes and timeframes • Data entry training and security 	OCBCT Program, OCBCT Contracts Information Technology Eligibility Manual transfer in IMPACT
Program	<ul style="list-style-type: none"> • Develop plan for temporary transfer of tasks to DFPS or contingency SSCC • Assign resources • Plan transition timeframes • Process communication • Approve placements in IMPACT • Modify operations manual if new SSCC contract • Ensure child contacts • Coordinate placement and FAD resource support 	OCBCT Project Team OCBCT Contracts CBC Regional Staff Resources Contracts Legal Contingency SSCC
Training	<p>Train staff on new processes:</p> <ul style="list-style-type: none"> • Engage CLOE in development of training and schedule • Determine best approach and schedule for training 	Center for Learning and Organizational Excellence (CLOE) OCBCT Program and Region



<p>Operations Transfer</p>	<p>Based on the stage of implementation, ensure processes and timeframes in place to assume responsibility for the following (either by OCBCT or Contingency SSCC):</p> <ul style="list-style-type: none"> • Utilization Management • Placements both emergency and non-emergency • Kinship services • Relative verification • ICPC homes • Placement documentation • Transportation • Faith based efforts • Court requirements • Day Care services • Purchased Adoption services • PAL Life Skills Assessment and Training • PAL Aftercare services • Transitional living services • Purchased Client Services to families • Post-Adoption services • Education Training Voucher services • Full case management services • Family reunification support services 	
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Thirty (30) days following Turnover of operations, the SSCC must provide OCBCT/DFPS with a Turnover Results Report documenting the completion and results of each step of the Turnover Plan. The OCBCT/DFPS will not consider Turnover completed until the plan is approved. If the SSCC does not provide the required data or information necessary for OCBCT/DFPS or the subsequent Contractor to assume the operational activities successfully, the SSCC agrees to reimburse OCBCT/DFPS for all reasonable costs and expenses, including: transportation, lodging, and daily meal per diem to carry out inspection, audit, review, analysis, reproduction, and transfer functions at the location(s) of such records, and attorneys’ fees and costs.

