



TRANSFORMING TOGETHER

A Guide to Community-Based Care in Texas

Edition 1, October 2019



TEXASCASA
Court Appointed Special Advocates
FOR CHILDREN

STRENGTHENING THE VOICES OF CASA STATEWIDE

MISSION

Texas CASA's mission is to support local CASA volunteer advocacy programs and to advocate for effective public policy for children in the child protection system.

VISION

Texas CASA envisions a safe and positive future for all Texas children.

ACKNOWLEDGMENTS

Texas CASA Workgroup

Vicki Spriggs, CEO
Deedra Baker, Program Operations
Cathy Cockerham, Public Policy
Sarah Crockett, Public Policy
Patricia Hart, Intern, Public Policy
Andy Homer, Public Policy
Emma Ledford, Communications, Awareness and Learning
Bryan Mares, Public Policy
Ann Strauser Palmer, Public Policy
Sarah Ritch, Communications, Awareness and Learning
Abe Louise Young, Communications, Awareness and Learning

Graphic Design

Recspec Co.



Special thanks to the Reissa Foundation for support of this publication and Texas CASA's ongoing efforts in public policy for the best interest of children.



STRENGTHENING THE VOICES OF CASA STATEWIDE

TABLE OF CONTENTS

Introduction	4
Key Concepts to Know	6
Considerations for CASA: Coming Together to Build a Better System	8
What Are the Goals of Community-Based Care?	10
What Problems Is Community-Based Care Trying to Solve?	12
How We Got Here: Timeline of the New Foster Care Model	18
How CBC Works: Stages & Catchment Areas	20
Considerations for CASA: How Can Programs Prepare & Share?	28
What Are the Benefits of Community-Based Care?	32
What Are the Risks of Community-Based Care?	33
Collaborative Family Engagement: A Key to Success	34
How Is Community-Based Care Funded?	36
Considerations for CASA: Positive Change Management	42

INTRODUCTION

Texas CASA represents 72 local CASA programs providing a volunteer corps of nearly 11,000 Court Appointed Special Advocates who serve over 30,000 children in foster care across the state. As important partners in the child welfare field, CASA programs in Texas will be affected by the transition to Community-Based Care (CBC). CASA programs also have the opportunity to offer collaboration and leadership as the state transitions to this model, to ensure children flourish in the new system.



In 2017, in an effort to improve the lives and outcomes of children in the conservatorship of the state, the 85th Texas Legislature enacted legislation that significantly expanded the process of Foster Care Redesign, creating the change model known as Community-Based Care. CBC progresses in stages, moving responsibility for foster care placement, case management and services from the state of Texas to private contractors which must be nonprofit agencies or governmental entities. As CBC goes into effect in a region, a child's primary institutional contact will transition from Child Protective Services (CPS) to employees of the contracted agency. These contracted agencies are known as Single Source Continuum Contractors (SSCCs).

This guide lays out how the Texas child welfare system will change as the scope and role of CBC expands.

In addition, the guide offers insight into how local CASA programs could be affected by the implementation of CBC. We examine how CASA can best adapt to this new and evolving model of foster care. We consider how we can help facilitate a smooth transition to the new system. Most importantly, we ask how we can use our unique roles in the child protection system to help ensure the most positive experiences and outcomes for children and families.

The detailed stages of implementation, as well as the 17 service regions (known as catchment areas) designated by the state will be covered in this guide. It also explores the responsibilities of the Single Source Continuum Contractors (SSCCs) that will coordinate foster placement and, later, case management and other services.

By taking an active approach to supporting SSCCs and inspiring collaboration among other agencies, CASA programs have the opportunity to help improve local foster care as an SSCC begins work in their region. And as advocates, CASA volunteers are well positioned to monitor for any problems or successes, and to encourage action if things aren't working as they should.

This guide outlines potential benefits and risks of the shift to CBC, as well as how the new funding and reimbursement structures operate. We look at how contractors will be measured and held accountable for the outcomes experienced by children, such as permanency, number of placement changes, and preparation for adult living, and we also examine the unique ways CASA programs can support and partner with SSCCs, such as Collaborative Family Engagement (CFE).



The changes brought by CBC will require CASA programs to learn a new set of systems and protocols, and to forge new relationships. Fortunately, as CBC is implemented in stages, CASA programs that have already gone through the transition will be able to share their experiences with other CASA programs and guide other professionals, such as educators and therapists, to understand this new model of care.

CBC implementation is dramatically, if incrementally, restructuring the child welfare system in Texas. We conclude this guide with a discussion of change management principles and strategies that CASA programs can utilize to ensure the smoothest transition, internally and externally. As a network, we will continue striving for the well-being of children and families in every conversation, every action and every case.



KEY CONCEPTS TO KNOW

What is Community-Based Care (CBC)?

Community-Based Care (CBC) is a sweeping systems change, and a new way of providing foster care and case management services in Texas. This change shifts key functions of the child welfare system from the state to contractors. Within a geographic service area, a single contractor is responsible for finding foster homes for children in state care and, as the stages of service progress, providing them a full continuum of services.

What is the legacy system?

The term “legacy system” refers to the areas and functions of the Texas child protection and foster care systems that are not under Community-Based Care. In the legacy system, DFPS has full responsibility for placement and case management. Simply put, the term refers to the way things were done in the Texas foster care system prior to CBC, and those areas where CBC has not been introduced.

What is a catchment area?

A catchment area is a geographic region in which a single contractor provides foster care services. Texas is currently divided into 17 catchment areas based on boundaries drawn by DFPS. DFPS selects catchment areas for CBC implementation in a staggered process over time, subject to legislative funding. Inside each catchment area, the SSCC will provide all contractually required foster care services to local children, youth and families.

What is a Single Source Continuum Contractor (SSCC)?

A Single-Source Continuum Contractor (SSCC) is selected in a competitive bidding process as the entity with which the Department of Family and Protective Services (DFPS) will enter into a contract for foster care services in a geographic area. These services range from foster home placement and kinship services to case management and preparation for adult living for adolescent youth. Under state law, an SSCC is required to be a nonprofit entity with an organizational mission focused on child welfare, or a governmental entity.

What are the CBC Stages of Implementation?

CBC is rolled out in three stages over a period of several years in each individual catchment area. In Stage I, the SSCC takes over child placement services from Child Protective Services (CPS). In Stage II, the SSCC takes over all case management services from CPS. In Stage III, the state applies financial incentives or remedies to the contracts based on how well the SSCC achieves desired outcomes for children. Note: The investigations function remains with DFPS in all stages of CBC.



Note: A full glossary of terms and acronyms is available at the end of this guide.

CONSIDERATIONS FOR CASA: COMING TOGETHER TO BUILD A BETTER SYSTEM



The hopeful vision of CBC is a transformed child welfare system.

In this system, children can stay geographically close to their home communities and can be supported by an excellent network of local services overseen by providers that are held accountable for positive outcomes.

The word “community” in the name “Community-Based Care” refers to keeping placement local, but also refers to all of us—the people of Texas. For CASA programs, the transition calls for being flexible and agile, creating new relationships and supporting efforts to improve the quantity and quality of services that our local areas have to offer children and families.

If we are going to go about meeting the needs of all children and all families right here in our own communities, what needs to happen first? What resources can we leverage? What is most urgent to initiate? Who can we pull into the effort? Where are the best ideas being generated? Success in these efforts will require deep collaboration. CASA programs in Texas will rise to meet this historic challenge.

Though the role of CASA in the legal process will not change, the partners that CASA works with will now vary across the state, by catchment area. We will need to learn new names, make new friends and establish trusted relationships. Senate Bill 11 creates the expectation that SSCCs will connect with CASA as part of their mandated community engagement plan. We shouldn’t wait for the phone call, however—we should reach out in advance.

Given that statewide and full implementation of CBC will be staggered over an extended timeframe, CASA programs will be working with both CPS and the SSCC for a period of time, which may add an element of confusion. Providing learning opportunities for staff and volunteers will reduce uncertainty about the roles and responsibilities of each party. Employees of the SSCC will assume

many of the powers, duties and responsibilities of CPS over time as CBC progresses. However, the SSCC is not a legal party to the case: DFPS will still be the child’s legal parent. CPS will not be going away; it will instead become much leaner and focused on investigation and contractual oversight.

As the new system comes into being, we should be open to our strategies changing. CASA staff and volunteers may be called upon to engage and support a wider range of players and processes. The most important people to support during the transition, of course, are the children we are appointed to advocate for in foster and kinship care. With a CASA advocate as a consistent figure that stays with them over time, children and youth have an enhanced chance of healing—regardless of changes happening behind the scenes.



It is not the strongest of the species that survives, nor the most intelligent that survives. It is the one that is the most adaptable to change.”

—CHARLES DARWIN



WHAT ARE THE GOALS OF COMMUNITY-BASED CARE?

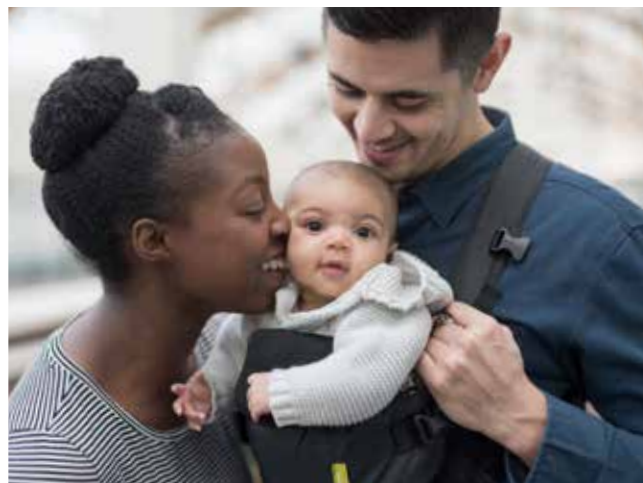
CBC was established as a response to persistent, long-term challenges in the Texas foster care system. The goals for CBC set a standard that all who work in the system should strive for and that children, youth and families deserve. Texas CASA believes that these goals are attainable, and that the quality of our collaboration with SSCCs and our participation in the transition is a vital aspect of its success.



12 Measurable Goals for Community-Based Care

The 85th Legislature established these goals, outlined in Senate Bill 11 (Texas Family Code Section 264.151(b)).

- 01** Safety of children in placements.
- 02** Placement of children in each child's home community.
- 03** Provision of services to children in the least-restrictive environment possible and, if possible, in a family home environment.
- 04** Minimal placement changes for children.
- 05** Maintenance of contact between children and their families and other important persons.
- 06** Placement of children with siblings.
- 07** Provision of services that respect each child's culture.
- 08** Preparation of children and youth in foster care for adulthood.
- 09** Provision of opportunities, experiences and activities for children and youth in foster care that are available to children and youth who are not in foster care.
- 10** Participation by children and youth in making decisions relating to their own lives.
- 11** Reunification of children with the biological parents of the children when possible.
- 12** Promotion of the placement of children with relative or kinship caregivers if reunification is not possible.



WHAT PROBLEMS IS COMMUNITY-BASED CARE TRYING TO SOLVE?





The longstanding foster care system in Texas (known as the legacy system) had persistent challenges and significant issues related to both its structure and outcomes for children. In 2010, DFPS commissioned the Public Private Partnership (PPP) to solicit input and develop recommendations about how to improve foster care services in Texas. The PPP was made up of judges, child-care providers, foster care alumni, advocates and many others, including Texas CASA. Texas CASA continues to serve on the PPP and remains engaged in implementation discussions on behalf of the CASA network.

With the input of about 3,000 stakeholders, the PPP developed recommendations for changing the Texas foster care system to improve outcomes for children, youth and families. It identified problems and created recommendations that led to the CBC model.



The recommendations aimed to address four key issues:

- + too many children placed outside of their home communities;
- + state contracts for foster care placement and services not tied to a geographic area's need;
- + payment structures impeding, rather than promoting, improved outcomes for children; and
- + the legacy system not measuring or contracting for the desired outcomes.

We will examine each of these individually.



ISSUE # 01

Too many children placed outside of their home communities

Placement Proximity

Children in foster care are placed where there is an available foster home or other placement option open. In recent years, over 60 percent of children in foster care have been placed outside their county of origin, and around 22 percent have been placed outside their DFPS region.

Increasing the geographic proximity of children's placement to their homes and communities is an important factor in their well-being. Being placed outside of their home community causes numerous negative effects in a child's life.

It disrupts their world and causes them to leave behind their family members,

school, friends, faith community and other support networks. Best practices suggest that placements that are close to a child's home allow for greater opportunities for maintaining parental attachment and continuing at their school, and increase the likelihood of family reunification.

Geographic proximity also allows caseworkers, CASAs, attorneys and support networks the opportunity to visit children more frequently and at lower cost.

Increasing the geographic proximity of children's placement to their homes and communities is an important factor in their well-being.

How might CBC improve this?

In the new system, contractors are subject to a performance measure that shows how closely children are placed to their homes, using a 50-mile metric. Early results show that children are more likely to be placed within 50 miles of their home under CBC than under the legacy system. Contractors are also given incentives to develop foster home and residential treatment center capacity in their regions, so that there are enough beds for the children who need them, closer to home.

**ISSUE
#02**

State contracts for foster care placement & services not tied to a geographic area's needs

Open Enrollment Contracting

The legacy foster care system in Texas has an “open enrollment” process, which means residential service providers that the state enters into contracts with do not have to be located where services are most needed and do not have to provide the types of services that children in foster care require. In addition to an overall shortage of foster care placement capacity in Texas, there is a significant imbalance in the location and type of foster care capacity that exists, relative to the need. For example, 47 percent of residential treatment center beds are concentrated in one region of the state, region 6, although such beds are needed throughout the state.

The mismatch and lack of needed placement capacity in different parts of the state means that the legacy system has been unable to assure suitable placements for many children—especially children with high needs or problematic behaviors. In the legacy system, providers can deny placement of a particular child based on their history, or children may be placed in more restrictive settings than is necessary.

How might CBC improve this?

Since CBC requires SSCCs to develop and provide needed services for children in their own areas, contracts will be with local service providers, rather than those in far-flung regions of the state. Where services, homes, treatment centers and therapies do not yet exist in an area, they must be created for CBC to succeed.

47 percent of residential treatment center beds are concentrated in one region of the state, region 6, although such beds are needed throughout the state.



ISSUE #03

Payment structures impeding, rather than promoting, improved outcomes for children

Texas' Authorized Level of Care System

A key flaw in the legacy foster care system is the direct link between the provider's financial reimbursement rate and a child's individual level of care, based on their need for basic to intensive services (also known as service level). Residential foster placement contracts in the legacy system are structured by the Texas Level of Care System. The system includes basic, moderate, specialized and intense service levels, each having a different reimbursement rate. As a child's level of care goes up, the reimbursement rate for the provider goes up. As the level of care goes down, the provider receives less.

This model offers no financial incentive to providers to improve outcomes for children. Troublingly, providers who work hard to help children heal from trauma are financially penalized when the child's level of care drops. This loss in compensation for services often leads to abrupt placement changes, and can be counterproductive to a child's well-being. In addition, when children move to a new placement, it often means changing schools, doctors and therapists, as well as losing friendships and trusted peer relationships. These losses are also traumatic and counter to long-term healing. The placement change itself could instigate a return to a higher service level.

How might CBC improve this?

In the new model, SSCCs will be reimbursed the same amount for placement for every child in care, regardless of that child's level of care. This is known as a "blended rate." SSCCs will contract for the appropriate placements and services to meet a child's needs.

In the new model, SSCCs will be reimbursed the same amount for placement for every child in care, regardless of that child's level of care.



ISSUE #04

Legacy system not measuring or contracting for desired outcomes

Contracts Not Performance Based

A performance-based contract means that financial incentives or remedies are tied to meeting specified outcomes for children—such as the least number of placements possible, or placement in the least-restrictive settings. Under the legacy system, contracts for foster care placements and services have not historically been performance based. They have included performance expectations, but with no incentives or remedies tied to expected outcomes for children, there are no teeth, so to speak—there’s no meaningful way to incentivize high-quality providers or penalize low-performing ones.

How might CBC improve this?

The contracting process for CBC is performance based. An SSCC not meeting performance expectations is required to develop a remedial plan and can have its contract terminated for failure to meet expectations. In later stages of CBC there will be financial incentives for contractors that achieve desired outcomes for the children in their care. This will add missing elements of both accountability and extrinsic motivation for providing high-quality services.



In later stages of CBC there will be financial incentives for contractors that achieve desired outcomes for the children in their care.

HOW WE GOT HERE: TIMELINE OF THE NEW FOSTER CARE MODEL

The Public Private Partnership (PPP), with the input of about 3,000 stakeholders, developed recommendations for changing the Texas foster care system to improve outcomes for children, youth and families. These recommendations included:

- ▶ Conducting a competitive procurement for 17 geographic regions of the state known as catchment areas,
- ▶ Using performance-based contracting practices which will measure and hold providers to outcomes, and
- ▶ Contracting for the full continuum of services and paying a “blended rate” that will not change as a child’s service level changes.

In December 2010, the PPP released these recommendations in the form of a letter to DFPS.

In August 2014, after 19 months, Providence gave formal notice to DFPS of its intent to terminate services. At that point, the state worked with Providence to transition placement services for children in foster care in regions 2 and 9 back under the jurisdiction of DFPS.

2010

2011

2012

2013

2014

2015



The Foundation Is Laid

In June 2011, then-Governor Rick Perry signed Senate Bill 218 into law, directing DFPS to develop a new service delivery model for CPS in accordance with the recommendations of the PPP. This new model was called Foster Care Redesign and in 2017 was renamed Community-Based Care.



Implementation Begins

In January 2013, Providence Services Corporation of Texas (Providence) was awarded the first Foster Care Redesign contract to serve 60 counties in CPS regions 2 and 9, a large portion of the north and west parts of the state.

In December 2013, ACH Child and Family Services, through a new entity Our Community Our Kids (OCOK), was awarded the second contract to serve region 3B, comprised of Tarrant County and six neighboring counties to the west.

The 85th Legislature expanded the model with the passage of Senate Bill 11, which broadened the responsibilities of SSCCs to include case management duties. The model was renamed Community-Based Care (CBC).

Under CBC, the contractor in Stage I of the process will provide services for foster care placements. Also under CBC, in Stage II of the process, the contractor has sole responsibility for case management services, including kinship services.

In June 2019, DFPS awarded the contract in region 1 to Saint Francis Ministries. Region 1 is comprised of 41 counties in the Texas Panhandle, including Amarillo and Lubbock.

Through House Bill 1, the 86th Legislature funded the expansion of CBC into region 1 and region 8B; and provided funding for regions 2, 3B and 8A to move into Stage II in late summer or early fall of 2020.

DFPS began reviewing applications for contractors in region 8B in August 2019. Region 8B is a 27-county area surrounding Bexar County.




The Model Expands



More Contracts Are Awarded & Regions Included

In June 2018, DFPS awarded the contract in region 2 to 2INgage, a new partnership between Texas Family Initiative, LLC; New Horizons Ranch and Center Inc. Region 2 covers a 30-county area in North Texas that includes Abilene and Wichita Falls.

In August 2018, DFPS awarded the contract in region 8A to Family Tapestry, a division of the Children's Shelter of San Antonio. Region 8A is comprised solely of Bexar County.

HOW CBC WORKS: STAGES & CATCHMENT AREAS



Understanding the Stages

STAGE I

In this stage, the SSCC will:

- ▶ Develop a network of services, including the full range of paid foster care placement capacity: foster homes, residential treatment centers, emergency shelters and other verified, paid substitute care placements;
- ▶ Provide foster care placement services;
- ▶ Provide Preparation for Adult Living (PAL), foster care daycare, and adoption services; and
- ▶ Share in case coordination with CPS.

The focus of this stage is on:

- ▶ Keeping children closer and more connected to their home, community and family; and
- ▶ Improving the well-being of children in foster care.

Once the contract is in place in a catchment area, the SSCC will take responsibility for all new cases while working with DFPS to transition existing cases in progress to the SSCC, which may take up to two years.

STAGE II

In this stage, the SSCC will:

- ▶ Become solely responsible for case management;
- ▶ Provide kinship services, working with children and families under the state's relative caregiver program; and
- ▶ Provide reunification services such as service plans and other supports to help parents reunify with their children.

The focus of this stage is on:

- ▶ Expanding the continuum of services to include community supports and resources for families, and
- ▶ Improving permanency outcomes for all children in foster care.

The Department of Family and Protective Services will contract with a Single Source Continuum Contractor (SSCC) to implement Community-Based Care in three stages in each of the 17 catchment (service) areas.

STAGE III

In this stage, the SSCC will become subject to financial remedies or incentives, depending on its ability to meet the permanency outcomes defined in its contract with DFPS. Stage III financial incentives will occur after the SSCC has been providing all case management services for a minimum of 18 months.

Understanding Catchment Areas

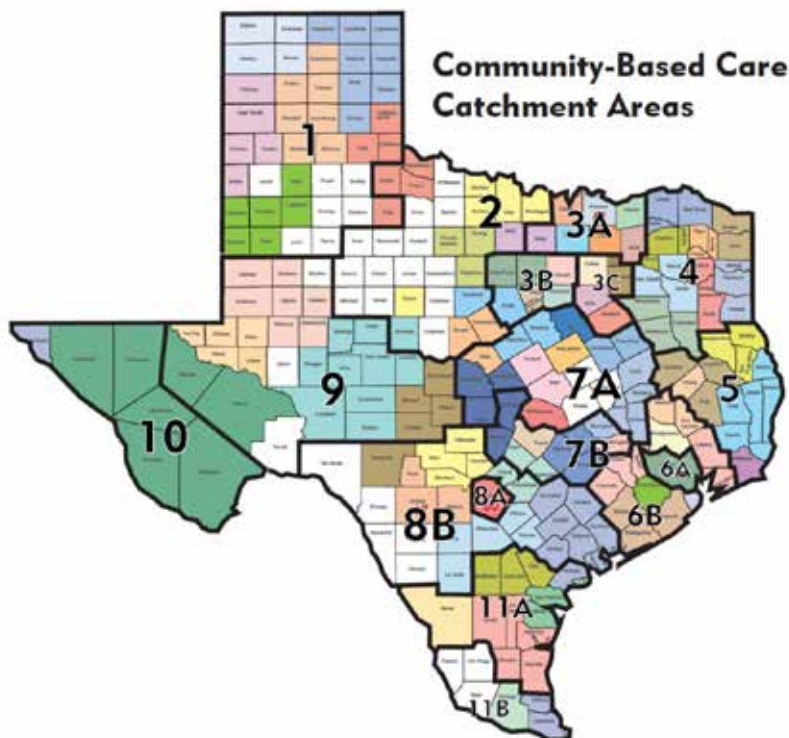
A catchment area is a geographic area designated by DFPS. There are currently 17 catchment areas across the state in which DFPS intends to secure contracts with SSCCs. CBC is rolling out across the state by expanding to one new catchment area at a time.

The boundaries of catchment areas were developed according to county and DFPS regional lines. They were structured to have a minimum of 500 new children entering into foster care annually in order to pool financial risk, which makes the rate structures for reimbursement workable.¹

Once DFPS selects a catchment area for procurement, the Health and Human Services Commission (HHSC) issues a Request for Applications (RFA). Bidding organizations must be either a nonprofit with a child welfare mission or a governmental entity. In addition, DFPS must consider whether bidders have experience providing services to children and families in their respective catchment areas. Once HHSC recommends an applicant, a contract is negotiated laying out the roles and responsibilities of the SSCC as well as a timeline for implementation.

This map shows the catchment areas currently used by DFPS.

Figure 1: Community-Based Care Catchment Areas Map



¹ Proposed Catchment Areas. DFPS. ND. Accessed August 12, 2017. https://www.dfps.state.tx.us/Adoption_and_Foster_Care/About_Foster_Care/Foster_Care_Redesign (Note: link no longer active)

Table 1: Community-Based Care Catchment Areas by Texas County

Catchment Area	County or Counties
1	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, Roberts, Sherman, Swisher, Terry, Wheeler, Yoakum
2	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
3A	Collin, Cooke, Denton, Fannin, Grayson, Hunt, Wise
3B	Erath, Hood, Johnson, Palo Pinto, Parker, Somervell, Tarrant
3C	Dallas, Ellis, Kaufman, Navarro, Rockwall
4	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
5	Angelina, Hardin, Houston, Jasper, Jefferson, Nacogdoches, Newton, Orange, Polk, Sabine, San Augustine, San Jacinto, Shelby, Trinity, Tyler
6A	Harris
6B	Austin, Brazoria, Chambers, Colorado, Fort Bend, Galveston, Liberty, Matagorda, Montgomery, Walker, Waller, Wharton
7A	Bell, Bosque, Brazos, Coryell, Falls, Freestone, Grimes, Hamilton, Hill, Lampasas, Leon, Limestone, Llano, Madison, McLennan, Milam, Mills, Robertson, San Saba, Williamson
7B	Bastrop, Blanco, Burleson, Burnet, Caldwell, Fayette, Hays, Lee, Travis, Washington
8A	Bexar
8B	Atascosa, Bandera, Calhoun, Comal, DeWitt, Dimmit, Edwards, Frio, Gillespie, Goliad, Gonzales, Guadalupe, Jackson, Karnes, Kendall, Kerr, Kinney, La Salle, Lavaca, Maverick, Medina, Real, Uvalde, Val Verde, Victoria, Wilson, Zavala
9	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
10	Brewster, Culberson, El Paso, Hudspeth, Jeff Davis, Presidio
11A	Aransas, Bee, Brooks, Duval, Jim Wells, Kenedy, Kleberg, Live Oak, McMullen, Nueces, Refugio, San Patricio, Webb
11B	Cameron, Hidalgo, Jim Hogg, Starr, Willacy, Zapata

Table 2: CASA Programs within Catchment Area Boundaries

Catchment Area	CASA Programs' Areas of Service (Territory)
1	Amarillo: Amarillo Area CASA, Inc.; Childress: CASA of the Rolling Plains (territory in Catchment Area 2); Dalhart: CASA 69, Inc.; Hereford: Great Plains CASA for Kids; Lubbock: CASA of the South Plains; Pampa: CASA of the High Plains, Inc.
2	Abilene: Big Country CASA; Brownwood: CASA in the Heart of Texas (territory in Catchment Area 7A); Childress: CASA of the Rolling Plains (territory in Catchment Area 1); Decatur: CASA of Wise & Jack Counties (territory in Catchment Area 3A); Graham: North Star CASA; San Angelo: Children's Advocacy Center of Greater West Texas (territory in Catchment Area 9); Stephenville: CASA for the Cross Timbers Area (territory in Catchment Areas 3B & 7A); Wichita Falls: Child Advocates CASA of Red River
3A	Bonham: Fannin County Children's Center; Decatur: CASA of Wise & Jack Counties (territory in Catchment Area 2); Denton: CASA of Denton County; Gainesville: CASA of North Texas; Greenville: CASA of Hunt County; McKinney: CASA of Collin County; Sherman: CASA of Grayson County
3B	Cleburne: CASA of Johnson County; Fort Worth: CASA of Tarrant County; Granbury: CASA of Hood & Somervell Counties; Stephenville: CASA for the Cross Timbers Area (territory in Catchment Areas 2 & 7A); Weatherford: CASA – Hope for Children, Inc.
3C	Corsicana: CASA of Navarro County; Dallas: Dallas CASA; Rockwall: Lone Star CASA; Waxahachie: CASA of Ellis County
4	Athens: CASA of Trinity Valley; Longview: East Texas CASA; Marshall: CASA of Harrison County; Mount Pleasant: CASA of Titus, Camp & Morris Counties; Paris: CASA for KIDS; Sulphur Springs: Lake Country CASA; Texarkana: CASA of Northeast Texas; Tyler: CASA for Kids of East Texas
5	Beaumont: CASA of Southeast Texas; Huntsville: CASA of Walker, San Jacinto & Trinity Counties (territory in Catchment Area 6B); Lufkin: CASA of the Pines; Nacogdoches: CASA of Deep East Texas; Orange: CASA of the Sabine Neches Region
6A	Houston: Child Advocates, Inc.
6B	Bay City: Gulf Coast CASA; Brenham: CASA for Kids of South Central Texas (territory in Catchment Area 7B); Conroe: CASA Child Advocates of Montgomery County; Galveston: CASA of Galveston County; Huntsville: CASA of Walker, San Jacinto & Trinity Counties (territory in Catchment Area 5); Liberty: CASA of Liberty/Chambers Counties; Rosenberg: Child Advocates of Fort Bend
7A	Brownwood: CASA in the Heart of Texas (territory in Catchment Area 2); Bryan: Voices for Children, Inc.– CASA of the Brazos Valley (territory in Catchment Area 7B); Georgetown: CASA of Williamson County; Hillsboro: CASA of Hill County; Kingsland: CASA for the Highland Lakes Area (territory in Catchment Area 7B); Stephenville: CASA for the Cross Timbers Area (territory in Catchment Areas 2 & 3B); Temple: CASA of Bell & Coryell Counties; Waco: CASA of McLennan County
7B	Austin: CASA of Travis County; Bastrop: CASA of Bastrop, Fayette, & Lee Counties; Brenham: CASA for Kids of South Central Texas (territory in Catchment Area 6B); Bryan: Voices for Children, Inc. – CASA of the Brazos Valley (territory in Catchment Area 7A); Kingsland: CASA for the Highland Lakes Area (territory in Catchment Area 7A); New Braunfels: CASA of Central Texas (territory in Catchment Area 8B)
8A	San Antonio: Child Advocates San Antonio, Inc.
8B	Kerrville: Hill Country CASA; Mason: Bluebonnet CASA (territory in Catchment Area 9); New Braunfels: CASA of Central Texas (territory in Catchment Area 7B); Pleasanton: CASA of South Texas; Uvalde: Tri-County CASA; Victoria: Golden Crescent CASA, Inc. (territory in Catchment Area 11A)
9	Alpine: Frontier CASA (territory in Catchment Area 10); Mason: Bluebonnet CASA (territory in Catchment Area 8B); Midland: CASA of West Texas; Odessa: CASA of the Permian Basin Area; San Angelo: Children's Advocacy Center of Greater West Texas (territory in Catchment Area 2)
10	Alpine: Frontier CASA (territory in Catchment Area 9); El Paso: CASA of El Paso
11A	Beeville: CASA of Bee, Live Oak & McMullen Counties; Corpus Christi: CASA of the Coastal Bend; Kingsville: Brush County CASA; Victoria: Golden Crescent CASA, Inc. (territory in Catchment Area 8B); Laredo: Voz de Niños
11B	Brownsville: CASA of Cameron & Willacy Counties; Edinburg: CASA of Hidalgo County

Understanding Stage II: Transfer of Case Management Duties to the SSCC

The transfer of case management duties from DFPS to the SSCC is the most significant change implemented within the new care model.

Case management involves all case duties that were previously the responsibility of CPS and kinship workers in the legacy foster care system. Note: The investigations function remains with DFPS in all stages of CBC.

Case management duties that will be the responsibility of an SSCC include, but are not limited to:



- ▶ Conducting face-to-face visits with the child, family and caregivers;
- ▶ Convening and conducting service planning and permanency planning meetings;
- ▶ Developing and revising child and family service and visitation plans, including permanency plans and goals;
- ▶ Ensuring parent-child visitation;
- ▶ Coordinating and monitoring of services required for the child and the child's family;
- ▶ Assuming court-related duties regarding the child, including preparing court reports, attending judicial and permanency hearings, trials and mediation, and complying with applicable court orders;
- ▶ Conducting family finding and engagement activities;
- ▶ Coordinating and monitoring reunification support services to a child or youth and family after the child is returned to the child's family;
- ▶ Coordinating all transitional living benefits;
- ▶ Providing post-adoption services to children and youth in the catchment area who have been legally adopted, regardless of where the adoption was consummated;
- ▶ Delivering services to kinship caregivers and families, including assessment of placements and provision of resources to ensure placement stability; and
- ▶ Any other function or service that the Department determines necessary to allow a SSCC to assume responsibility for case management.

For more information, see the full text of Senate Bill 11 (link available in the References section on page 48).

Readiness Review Required Before Going to Stage II

Before an SSCC is permitted to move into Stage II, DFPS is required by law to conduct a formal readiness review process to determine if the contractor is equipped to:

- ▶ Provide case management services;
- ▶ Offer evidence-based, evidence-informed or promising practice services to children and families; and
- ▶ Meet the foster care capacity needs of the region.

Depending on the findings of this readiness review, DFPS may adjust the timeline for Stage II implementation.

Timeline of Implementation to Date

Region	Contractor	Contract Awarded	Stage I Live (Anticipated)	Stage II Live (Anticipated)
3B	Our Community Our Kids	12/16/2013	9/1/2014	3/1/2020
2	2INgage	5/4/2018	12/1/2018	6/1/2020
8A	Family Tapestry	8/3/2018	2/1/2019	8/1/2020
1	Saint Francis Ministries	6/13/2019	1/1/2020	Not yet funded
8B	TBD	RFP Closes 8/2/2019	4/1/2020	Not yet funded
All other regions	TBD	TBD	TBD	TBD

About the Providers

In region 3B: Our Community Our Kids (OCOK) is a division of ACH Child and Family Services, which is a Fort Worth-based nonprofit with over 100 years of experience serving children, youth and families.

In region 2: 2INgage is a partnership between Texas Family Initiative (TFI) and New Horizons. New Horizons is a Texas-based nonprofit working with children for nearly 50 years. Texas Family Initiative is an affiliate of TFI Family Services, a nonprofit with over 50 years of experience strengthening families and serving Kansas and Nebraska.

In region 8A: Family Tapestry is a division of the Children's Shelter of San Antonio which has been serving children and families for over 100 years.

In region 1: Saint Francis Ministries is a Kansas-based, nonprofit child and family services ministry serving more than 31,000 people in Kansas, Nebraska, Oklahoma, Texas and other states.



CONSIDERATIONS FOR CASA: HOW CAN PROGRAMS PREPARE & SHARE?

For CASA programs where CBC has not begun, staff and volunteers have time to get ready for expansion into their area. That time can be used to get groundwork in place. The programs in regions that have already begun operating within CBC can offer insight and lessons learned. See the timeline for implementation on page 26.



The most critical way to prepare for the transition is to reach out to potential SSCCs and other participants in the child protection system and begin working collaboratively to identify how capacity can be built; and what issues, needs and opportunities are most pressing. This is an arena in which CASA can offer leadership or serve as a strong partner. To succeed, CBC is going to rely on a network of service providers and deep collaboration between everyone involved—judges, caseworkers, advocates, attorneys, health providers, faith-based organizations and many others. These networks and partnerships are emerging in some regions of the state, but are yet to be created in many areas. Getting them going will take a focused effort in each locality, and CASA can help foster this.

Before Your Area Is Selected for CBC Implementation

CASA programs should identify potential SSCCs in their service areas or nearby. What are the longstanding child placing agencies likely to throw their hat in the ring and bid for the contract? Begin to engage and build collaborative working relationships with the leadership of any likely SSCCs.

Look at the Foster Care Needs Assessment information for your area and begin to identify needs and strengths for your communities. Use CASA's respected position in the community to sponsor community conversations or a working group to identify needed local capacity. Nonprofit groups outside of the child welfare system may not be aware of the coming changes.

What needed services are routinely hard to access, or nonexistent? Does your region need more trauma-informed therapists to serve children? Do you need a Battering Intervention and Prevention Program (BIPP) or quality parenting classes in order to serve families? Now is the perfect time to launch an all-hands-on-deck effort to make your community's safety net stronger.

Once Your Area Is Selected for CBC Implementation

Participate in CBC community meetings as the SSCC is developing their implementation and community engagement plans. Schedule frequent meetings with the SSCC leadership and staff to build trusted relationships. Make friends, tell the CASA story and invite them to events at your offices.

CASA programs will likely need a new agreement to clarify roles between CASA and the SSCC and its employees and agents in the legal process. Work with Texas CASA to prepare for a Memorandum of Understanding (MOU) with your SSCC.

Support development of needed capacity in the region in collaboration with the SSCC. For example, SSCCs initiate campaigns to build new foster family capacity in their regions, and CASA can bolster these awareness efforts.

After the SSCC Has Begun Services in Your Area

CASA will continue in its role to ensure children are placed appropriately. Under state law, CPS and SSCCs are supposed to consult with CASA on placement decisions. CASA programs can help ensure that children are placed appropriately. CASA programs can also support SSCCs in developing and maintaining a quality provider network. CASA often knows the providers in their region, and can provide feedback to the SSCC with regard to particular placements.

CASA may face a logistical challenge in Stage I, when a program is working with two agencies and two sets of contacts: the SSCC for placement and CPS for case management. It will be important that volunteers are supported in managing this additional layer of complexity, and understand who is responsible for what when it comes to decision-making and advocacy for children and families.

CASA must work with the SSCC and other local partners to prepare for Stage II of CBC. SSCCs are required to develop a community engagement plan and an implementation plan for Stage II. Local CASA program leadership or staff should reach out to the SSCC and offer to participate in the development of these plans. SSCCs are also required to develop an operations manual for their service area 60 days in advance of beginning Stage II. CASA programs should get a copy of this manual and make sure staff become familiar with new case manager practices and protocols.

As CBC Transitions to Stage II in Your Area

Note: Stage II had not begun at the time this guide was produced. Texas CASA will provide additional insight into Stage II as it becomes available.

CASA can provide significant support to children and their families, and to the SSCC during the transition from Stage I to Stage II, when case management services are transitioning from CPS to the SSCC. This could be the most vulnerable point in the CBC transition process. Monitoring how it goes, and making sure families and children don't fall through the cracks, is crucial. We want to be right there, and gladly take on the responsibility we have as the child's advocate in contributing to the success of the transition.

CASA programs will benefit from staying flexible, open and positive during the time of transition. Confusion is an element to be expected during any major change, so it will benefit everyone to stay focused on the goal of improved care and outcomes for children and families, which CASA can help articulate clearly.

CASA can support both the SSCC and the DFPS caseworkers during the transition time. In some cases, SSCCs will hire CPS caseworkers or entire CPS units, since current CPS workers have priority in the SSCC hiring process. In these instances, there may be beneficial continuity.

Evergreen Goals for Programs, Regardless of the CBC Timeline

Guardian Ad Litem (GAL) Status

For programs not appointed as GAL, consider the benefits of GAL status and any barriers to being granted GAL status by local judges. CASA's position in the case is stronger when appointed as GAL. While we do not anticipate many changes to our role, it can only benefit programs to be in a stronger position backed by legal statute, rather than solely by agreements with the court.

For programs appointed as GAL, review the powers and duties in the Texas Family Code (Section 107.002) and incorporate these into your volunteer training and coaching.

Strengthen Your Advocacy

Take opportunities to strengthen your advocacy. Set a growth goal for your program, if needed, to serve on more cases over the next three to five years. In addition to quantity, evaluate the quality of your volunteer advocacy for every child to ensure positive outcomes are occurring, can be measured and are supported by training, coaching, policies, procedures and practices consistently throughout the organization.

Evaluate Program Operations

Evaluate every area of your program's operations to ensure you continue to employ best practices. Our credibility is our CASA commodity, so strengthening your organizational practices ahead of CBC coming to your area is crucial.

Utilize Data to Tell Your Story

For those not fully utilizing Optima or another data management system, explore what data measures will be most valuable to you and what data entry procedures will ensure accuracy. Data can help you craft your story, identify trends, and inform your advocacy and program practices.

“Any change, even a change for the better, is always accompanied by drawbacks and discomforts.”

—ARNOLD BENNETT

WHAT ARE SOME BENEFITS OF COMMUNITY-BASED CARE?

No Eject, No Reject

SSCCs are contractually required to place all children in foster care from their catchment area (No Eject) and cannot deny placement for any child due to behaviors, mental health or other needs (No Reject). The legacy system has long struggled to find suitable placements for many children with higher needs or behavioral health problems, and could offer no assurance that any provider would accept placement for a particular child. Providers could easily “eject” or “reject” children under the old protocol. Under CBC, the SSCC is required to find a suitable placement for all the children in their catchment area.

CBC Improves Placement Proximity

One of the major failings of the legacy system has been the inability to keep children in their home communities and schools, or in close proximity to their home and family. While CBC does not solve this problem, state data clearly shows that, on average, children in care under an SSCC are significantly more likely to be placed closer to home than under the legacy system. For example, in Fiscal Year 2018, 74.3 percent of children in region 3B (being served by the contractor Our Community Our Kids) were placed within 50 miles of their home, as compared to 61.7 percent for non-CBC areas statewide, according to the August 2019 Rider 21 Report.

Intentional Development of Placement Capacity

Another benefit of CBC is the ability of an SSCC to identify specific placement capacity needs in a catchment area and recruit, contract for and otherwise build capacity to meet these needs. To date, all the SSCCs have developed recruitment and support efforts to expand the number of foster families in their regions. They are also addressing capacity needs for residential treatment and therapeutic foster care. This intentional development of capacity stands in contrast to the open enrollment nature of capacity development in the legacy system and should meet the needs of a community much more fully. Region 3B has continued to see progress in the percentage of children in family-like settings, which are considered to be the least-restrictive environment for a child in foster care (foster family homes and kinship homes). For the third quarter of Fiscal Year 2019, 81 percent of children being served by Our Communities Our Kids in region 3B were in a family-like setting, according to the August 2019 Rider 21 Report.

Funding Structure Will Better Serve Children & Youth

The new funding structure in CBC is already providing positive outcomes. The blended foster care rate creates much more alignment between the desired outcomes for children and the structure of payment than the historic use of the level of care system as the basis for provider payment. The blended rate creates incentives to keep children in the least-restrictive and most-family-like setting whenever possible, and it has incented Our Community Our Kids to build alternative types of placement capacity, such as therapeutic foster homes, that better meet the needs of higher-needs children.

WHAT ARE SOME RISKS OF COMMUNITY-BASED CARE?

Initial Transition Issues

The transition during Stage I can create challenges for adjoining or nearby areas. When the SSCC assumes responsibility for children in care in their catchment area, it also inherits the current placement capacity in that area. To help the SSCC meet its requirements around keeping children closer to home, DFPS has agreed not to place children from outside the catchment area into placements within the SSCC's catchment area (absent a compelling need). The SSCC, however, may contract with foster homes in nearby areas. In practice, the process of locking capacity in a catchment area has resulted in loss of access to foster homes that had historically been used for children from adjoining or nearby areas. Children from these surrounding areas may be placed further away, at least at the beginning of the transition.

Continued Challenges with Placement Stability

CBC measures, and is intended to improve, placement stability for children in care. SSCCs have utilized algorithm-based placement tools to generate lists of foster homes that are most likely to provide a stable placement for a specific child or sibling group. However, thus far, the evidence has been mixed. For example, the number of placement moves in region 3B is slightly higher than the statewide average, according to the August 2019 Rider 21 Report. However, as implementation of CBC has progressed, those numbers have decreased. There is insufficient data to determine placement stability in the other two regions.

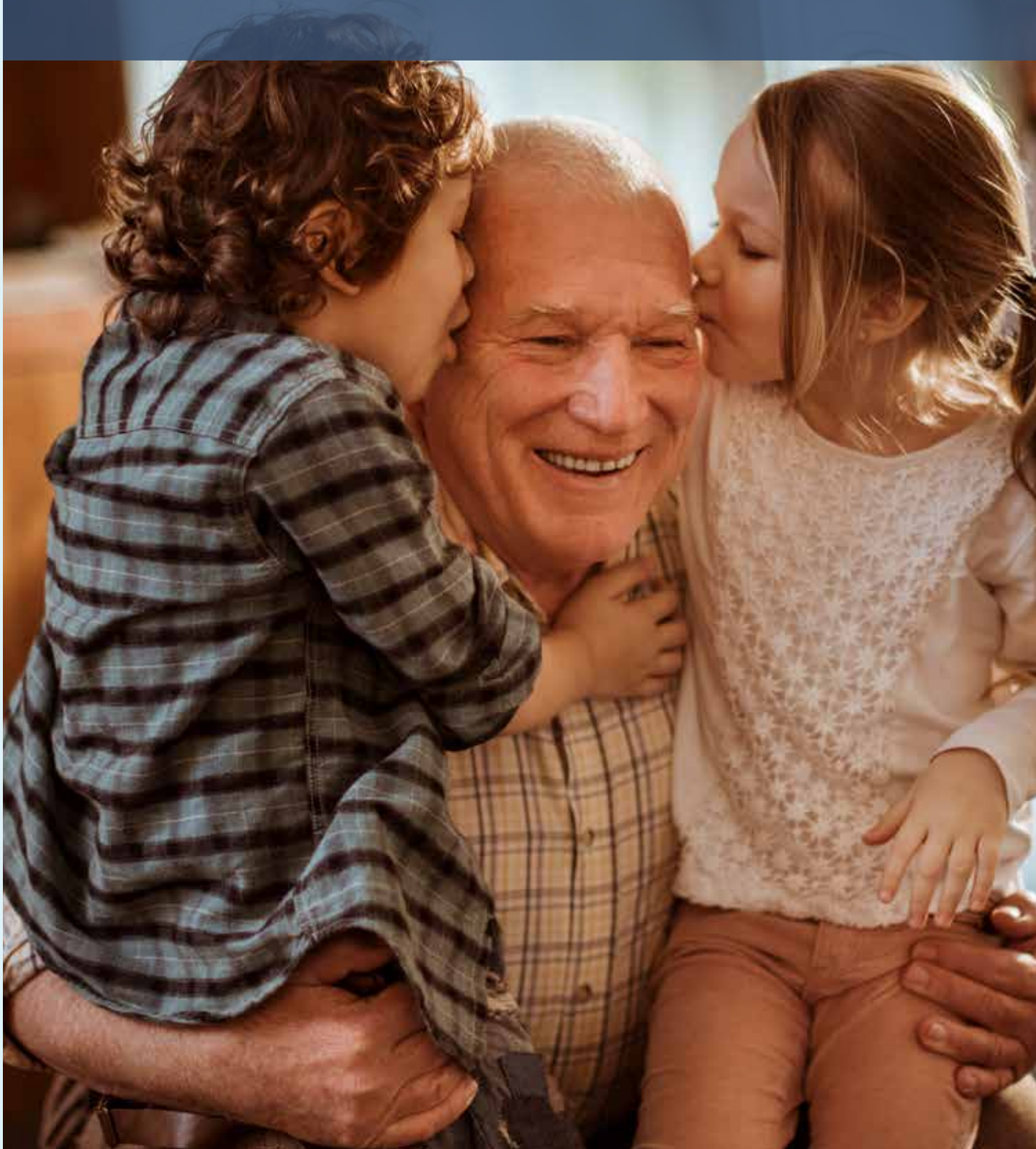
Potential Conflicts of Interest

In drafting Senate Bill 11 in 2017, legislators recognized the potential for, and the possible perception of, conflicts of interest as private contractors assumed significant powers, duties and decision-making responsibilities from DFPS. In recognition of this possibility, the bill required SSCCs to develop a plan to show how they would avoid or eliminate potential conflicts of interest as part of their readiness review for Stage II. During deliberations on Senate Bill 11, one example cited as a potential conflict of interest was whether family reunification could be impartially weighed by an SSCC that had recruited and trained a foster family who was eager to adopt. Texas CASA is unaware of any conflict of interest that has occurred under CBC. While these are sensitive issues, CASA programs should be aware of the potential for conflict of interest and be familiar with their local SSCC's conflict of interest plans.

Potential Unexpected Termination of Services by SSCCs

An unexpected termination of services by an SSCC could create turmoil and impact care for children and families. Providers can end services with a 60-day notice to DFPS. In the case that an SSCC wishes to exit, they would provide a transition plan, then DFPS would execute an emergency contract with another provider to maintain workforce and conservatorship services until a new provider contract could be competitively procured. Children and families could experience difficulties as their cases are transferred back to DFPS. This is yet another example of how vital the consistent role of a CASA will be under CBC, as a stable partner maintaining continuity for the child, through change.

COLLABORATIVE FAMILY ENGAGEMENT: A KEY TO SUCCESS



As a community-based organization and an important participant in the child welfare system, CASA should partner with SSCCs on mutually beneficial projects. Collaborative Family Engagement (CFE) is a prime example. Elevating the voices of families and supporting the involvement of kinship networks in children’s lives can only be a positive contribution.



COLLABORATIVE FAMILY ENGAGEMENT

Texas CASA plans for CFE to be adopted across Texas, and to be integrated into the casework model for both CPS and SSCCs.

CASA programs with CFE initiatives should work collaboratively with SSCCs in the same way they worked with CPS. This partnership could increase children’s well-being, help SSCCs meet their performance goal of helping children maintain relationships with the biological families, connect CASA to the SSCC in a meaningful way and serve CASA’s mission—all at the same time.

CFE in Phase I

The CFE team consists of the CASA volunteer, CASA supervisor, CPS caseworker, CPS supervisor, family meeting facilitator and other professional helpers. This team sets goals and action plans for engaging and/or finding family, fictive kin and naturally occurring connections for the young person in foster care, and invites these people (known as the network) into the planning and decision-making process.

SSCCs in areas that are already implementing CFE should have caseworkers, care coordinators or other staff become a part of the CFE team. Existing SSCCs have taken on the coordination of CFE team meetings by ensuring CASA is invited to the initial coordination meetings (or post-removal staffings) and have enthusiastically assisted with ongoing activities.

CFE in Phase II

In Phase II, as case management moves from CPS to the SSCCs, the new SSCC caseworker will hopefully be a full and active participant on the CFE team. The federally and state-required activities of relative notification within 30 days, as well as the initial and ongoing search for relatives for placement and involvement, can be done through CFE. Family meetings are a best practice tool to involve family and to form a network. Texas CASA CFE Coaches will work with each catchment area to best determine how CFE activities can be integrated into new and existing practice.

HOW IS COMMUNITY-BASED CARE FUNDED?

SSCCs receive funding from the state through four major avenues within their DFPS contract and also raise additional private dollars.



The Texas Legislature originally assumed that Foster Care Redesign/Community-Based Care would be cost-neutral and that increased funding would not be needed. This was inaccurate. An independent study by the Public Consulting Group in 2014 found that instituting the new structure would increase the cost of the foster care system in Texas. State startup funding for the SSCC in region 3B, for example, only paid for about 21 percent of its ultimate startup cost.² Inadequate funding is cited as the primary reason for the failed first contract with Providence in regions 2 and 9 under Foster Care Redesign in 2014.

In 2017, the 85th Legislature took steps to remedy these budgetary issues by increasing DFPS funding by \$508.5 million.³ Legislators also funded a one-time investment of \$95 million for the expansion of CBC and payment increases for foster care providers.⁴ Additionally, the legislature approved pay raises for DFPS caseworkers, which increased the funding incorporated into the rates provided to SSCCs.

Financial incentives and penalties for performance instituted in Stage III are another potential source of

Table 3: State Funding Mechanisms for SSCCs

Major State Funding Sources	Description
<p>Blended foster care rate Stage I and II</p>	<p>Rate paid to the SSCC for each day of service provided to a child or youth in paid foster care, equal to the expected weighted average rate paid across all placement types in that catchment area. Blended rates are specific to each catchment area and set in the Appropriations Act. <i>Note: There are also a limited number of days when a SSCC can be paid an Exceptional Foster Care Rate when serving children whose needs cannot be met with the blended foster care rate. The Exceptional Foster Care Rate was established to minimize the financial risk of serving children with very complex needs.</i></p>
<p>Case management payment structure Stage II</p>	<p>Still being determined. SSCCs will receive Stage II start-up funding and additional resource transfers as determined in DFPS Appropriation Rider 29 for each catchment area.</p>
<p>Network support funding Stage I and II</p>	<p>Allocation to the SSCC, estimated at \$1,900 per year for each child it serves, to cover costs related to transportation, billing, network development, community engagement and other required tasks.</p>
<p>Resource transfer Stage I and II</p>	<p>Lump sum transferred to the SSCC for responsibilities previously carried out by DFPS. The Department's budget for staff salaries related to contract management, child placement and other services are calculated by catchment area and transferred to the SSCC in that region.</p>

² Third Party Analysis of SSCC-Related Costs. Public Consulting Group. September 2017. Pg. 25-26. https://www.dfps.state.tx.us/About_DFPS/Reports_and_Presentations/CPS/2014-10-09_Public_Consulting_Group_Cost_Analysis.asp.

³ Spriggs, Vicki. Progress made, but there's more to do for Texas children. www.mysanantonio.com. July 16, 2017. Accessed August 12, 2017. <https://www.mysanantonio.com/opinion/commentary/article/Progress-made-but-there-s-more-to-do-for-Texas-11289981.php>.

⁴ Ibid.

revenue from the state for SSCCs. It is expected, but not yet finally decided, that incentives and penalties will be based on the “average length of stay” of children and youth in foster care or other substitute care. DFPS calculates this measure according to the catchment area’s baseline and differences across age ranges. The basic idea is that the SSCC would be paid more if children and youth have shorter tenures in care on average, or be penalized if children and youth have longer tenures in care on average. The computation excludes those in Supervised

Independent Living (SIL), Extended Foster Care (EFC) and placements approved for the Exceptional Foster Care Rate. It is expected that future procurements will have similar financial incentives and penalties.

It is important for CASA programs to note that, unlike the state, the SSCCs are nonprofit entities and will likely receive significant philanthropic support in the areas where they are under contract.



How Will Success Be Measured?

The legislature requires DFPS to issue quarterly reports on SSCC performance in comparison with the rest of the state. These are known as Rider 21 Reports. CASA program leadership should stay abreast of the information about their region.

CBC ties contract extensions and renewals to the achievement of measurable performance standards, outcomes and requirements. The contracts utilize the Continuous Quality Improvement (CQI) approach to management that defines performance as an ongoing process, as opposed to an end in itself. Performance targets are adjusted on an agreed-upon schedule to account for progress made toward goals. The state and the SSCCs will reflect on what is working and adjust performance targets based on lessons learned through implementation.

Beginning in Stage III, a portion of the SSCC’s payment will be tied to meeting specified objectives.



The way a team plays as a whole determines its success. You may have the greatest bunch of individual stars in the world, but if they don’t play together, the club won’t be worth a dime.”

—BABE RUTH

To get a sense of what kind of performance measures may be used, we can look at the sample available from the contract negotiated in region 3B:⁵

Table 4: Sample Performance Measures (Adapted from DFPS February 2019 Rider 21 Report)

Goal		Performance Measure
1	Safety	Children/youth are safe from abuse and neglect.
2	Placement Stability	Children/youth have stability in their placements.
3	Least-Restrictive Setting	Children/youth are placed in the least-restrictive environment.
4	Maintaining Connections	Children/youth are placed in their home communities.
5		Children/youth are placed with their siblings.
6		Children/youth are placed with kin.*
7	Preparation for Adulthood	Youth age 16 and older obtain a driver's license or Texas identification card.
8		Youth turning 18 complete Preparation for Adult Living (PAL) training.
9	Participation in Decisions	Children/youth age 5 and older participate in service planning.
10		Children/youth attend court hearings.
11	Texas Health Steps	Children/youth obtain a Texas Health Steps exam within 30 days of removal.
12	Education*	Children/youth remain in their school of origin.
13	Turnover*	Caseworker turnover rate is maintained or improved.

*The Kinship, Education and Turnover performance measures are added in Stage II of CBC.

⁵ Note: Performance measures 1-10 apply to Stage I and the population is children/youth from the catchment area in SSCC contracted placements. Performance measures 11-13 apply only to CBC Stage II, and the population is all children/youth in DFPS conservatorship from the catchment area unless otherwise specified.

Community Engagement Requirements

It's impossible to overstate how important community engagement is to a successful rollout of CBC.

We can look to the state's contract with OCOK in region 3B to understand the priority of this work. According to that contract, immediately after beginning Stage I or Stage II, an SSCC must create a Community Engagement Plan in collaboration with community stakeholders, and include strategies for developing a local community advisory committee.

The Plan must include strategies for engaging each of the following entities:

- ▶ Children and youth in foster care, as well as alumni;
- ▶ Families of children in foster care, including non-custodial parents;
- ▶ Relative or kinship caregivers;
- ▶ Alumni families who have received DFPS services in the past;
- ▶ Members of the judiciary;
- ▶ Attorneys representing parents, children and DFPS;
- ▶ Court Appointed Special Advocates (CASA);
- ▶ Child advocacy centers;
- ▶ Child welfare boards, if applicable;
- ▶ Foster parents;
- ▶ Residential child care providers;
- ▶ Purchased client service providers;
- ▶ Local community service providers;
- ▶ Universities;
- ▶ Faith-based organizations; and
- ▶ Other county and/or community stakeholders.

As this process unfolds, CASA should pursue a seat on the SSCC's local community advisory committee.

Other Ways SSCCs Must Be Accountable & Transparent

The contract between the state and the SSCC is the primary vehicle to assure that the goals of CBC are achieved. However, the legislature also added accountability and transparency provisions in Senate Bill 11 and other legislation. Some of the most significant are:

- ▶ The state must require in the contract that the SSCC obey court orders affecting children in their care.
- ▶ The SSCC assumes the statutory duties of DFPS related to foster care in their catchment area.
- ▶ The contract with the SSCC must require them to give hiring preference to CPS employees displaced by CBC expansion.
- ▶ SSCC records are subject to the Texas Public Information Act to the same extent as DFPS.
- ▶ After the SSCC has assumed case management responsibilities, DFPS retains authority to review and approve or disapprove permanency goals in individual cases.
- ▶ The SSCC is required to develop a Community Engagement Plan for each stage of CBC.
- ▶ Each SSCC is required to develop a Provider Manual for their region that is a guiding document for the SSCC and its network in that catchment area.
- ▶ Each SSCC is required to develop an Operations Manual at least 60 days in advance of Stage II start-up that explains procedures, processes and protocols.



CONSIDERATIONS FOR CASA: POSITIVE CHANGE MANAGEMENT

How can we have a broad, long-term view of the changes that CBC is bringing? We look at where we have been, recognize the uncertainties of the present moment and envision where we want to go. Change is an opportunity to improve conditions. It is exciting that something new is being attempted, but it can also be frightening because the stakes are very high. This is a historic moment, and we can look to the principles of change management to guide—and understand—our diverse responses.

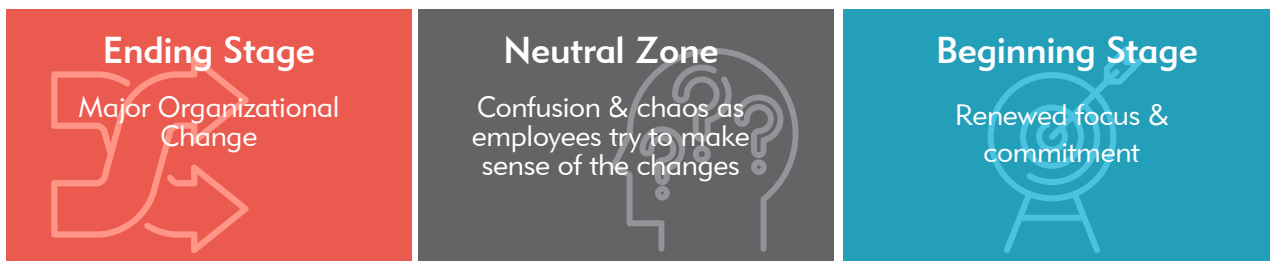


The flaws in the legacy system are serious and sometimes have had tragic consequences. Despite the constant effort of many people, it never worked perfectly. Now, we are moving on, and that fact comes with all the emotions that accompany transitions.

When major change takes place, it challenges everyone. Change tests the outer limits of even the most graceful personalities and stable organizations. People generally respond in one of a few ways: They are upset, angry and anxious. Or, they tune out, coast and disengage. Or, they show up with tool-belts on and say, "Let's make this successful!" Mostly, people do a little of each one.

No matter which response is primary for a person or an organization, it will take time to work through. Change management principles show that we cannot rush the process. William Bridges, in *Managing Transitions*, divides the process into three stages:

Change is an opportunity to improve conditions.



In the **Ending Stage**, people need empathy and validation. It is important to acknowledge the pain points of change, such as the fact that our new partners will communicate differently than CPS did; processes, practices and protocol must be reinvented; CASA will have 17 different partners rather than having one primary partner across the state (CPS); and resources created for one region might not be useful for others. All of these pain points are valid. Leaders should acknowledge the change, be compassionate and encourage communication.

In the **Neutral Zone**, people need support, information and structure. Involve the team in role creation, communicate more than you think necessary and prioritize structure. Reinforce new processes with frequent repetition and increase meetings, if needed. Successful change management is driven by frequent communication: keeping everyone informed at each step of the way is crucial to allay fear and build plans. Programs may need to send out CBC process updates regularly to staff, volunteers, funders, supporters and community partners.

In the new **Beginning Stage**, people need to be involved in planning and will be seeking ways to align with the vision and the larger purpose. As your organization adapts, be sure to make room for a free exchange of thoughts, feelings and ideas. Everyone should feel comfortable to share their responses, positive or negative. In an open environment, people begin to take new responsibility for the success of the whole. In this stage, we will start to see the promise of CBC: that the community comes together to serve children in ways that were not possible under the legacy system.

Texas CASA stands ready to be a resource and provide assistance as CBC rolls out across Texas. Our success as a network will rely on your partnership with Texas CASA as we represent CASA statewide. We are poised to serve as the information hub for the network and are monitoring every new development on the statewide level. We will communicate these quickly to programs. No program is going to go through this transition alone: we will gather information and best practices from those who have gone before and create opportunities for knowledge sharing. We invite and welcome ideas and information from leadership, staff and volunteers: everyone's voice is important.

We have no doubt that as we enter this uncharted territory, the CASA programs and our powerful corps of volunteers will rise to lead.





Glossary of Terms & Acronyms

ACH Child and Family Services

A nonprofit child welfare organization that is the parent organization of OCOK, the Single Source Continuum Contractor (SSCC) in DFPS region 3B.

APS (Adult Protective Services)

The division of DFPS that investigates abuse, neglect and exploitation of adults who are elderly or have disabilities and who live in the community.

CASA (Court Appointed Special Advocates)

When a child enters the foster care system, a judge may appoint a committed volunteer advocate to support the child's best interests both in and outside the courtroom. These individuals are called Court Appointed Special Advocates, or CASA volunteers. Texas CASA is the statewide membership organization of the 72 local CASA programs which recruit and train these volunteers.

Catchment Area

Each SSCC will serve children and families residing in a catchment area, a geographic area designated by DFPS. There are currently 17 catchment areas across Texas. SSCC boundaries were developed according to county and DFPS regional lines. They were structured to have a minimum of 500 new children entering foster care annually to pool risk, which is intended to make the reimbursement rate structures workable.

CBC (Community-Based Care)

A new way of providing foster care and case management services: within a geographic service area, a single contractor (the SSCC) is responsible for finding foster homes or other living arrangements for children in state care and providing them a full continuum of services, as determined by contract.

CCL (Child Care Licensing)

A statewide program within the Texas Health and Human Services Commission that regulates child care operations to protect the health, safety and well-being of children in out-of-home care, according to the standards Texas has set.

CFE (Collaborative Family Engagement)

A Family Finding collaboration between Texas CASA and DFPS. Using tools and techniques focused on connection, engagement and an understanding of trauma, family members and other committed adults are given the opportunity to become involved in a child's case and future when they first enter foster care.

CPA (Child Placing Agency)

A licensed organization that coordinates the placement of a child in a child care facility, agency foster home, agency group home or adoptive home.

CPS (Child Protective Services)

The division of DFPS that protects children from abuse and neglect through services, foster care and adoption.

DFPS (Department of Family and Protective Services)

The Texas state agency that works with communities to promote safe and healthy families and protect children and vulnerable adults from abuse, neglect and exploitation. The Department does this through investigations, services and referrals, and prevention programs. Within DFPS there are five programs: Adult Protective Services, Child Protective Services, Investigations, Prevention and Early Intervention, and Statewide Intake.



Glossary of Terms & Acronyms

EFC (Extended Foster Care)

A voluntary program that offers young adults turning 18 in DFPS care the choice to continue in a foster care placement in order to facilitate the transition to independence with DFPS supervision.

FCR (Foster Care Redesign)

The foster care change model now referred to as Community-Based Care was initially called Foster Care Redesign. FCR was initially developed in 2010. When the model was legislatively modified in 2017, the name was changed to Community-Based Care.

HHSC (Health and Human Services Commission)

HHSC is the state agency that manages programs that help families with food, health care, safety and disaster services. One of the major programs operated by HHSC is the Texas Medicaid program. Child Care Licensing is also operated within HHSC.

Legacy System

Terminology that has developed to refer to areas and functions of the Texas child protection and foster care systems that are not under Community-Based Care.

OCOK (Our Community Our Kids)

A division of ACH dedicated to the deployment and management of the SSCC contract. It is supported by ACH, but operates independently from ACH programs and services, with a specific focus on developing, supporting and managing the network of providers that will be developed to support the SSCC contract.

Open Enrollment Contracting

A procurement process where all applicants who meet the stated eligibility requirements can enter into contracts to provide services.

PAL (Preparation for Adult Living)

A program implemented in 1986 to ensure that youth in substitute care ages 14 and older are prepared life after foster care. The goal of the PAL program is to provide youth with skills and resources they will need to be healthy, productive adults.

PEI (Prevention and Early Intervention)

The DFPS program that contracts with agencies providing services intended to prevent negative outcomes. PEI helps families and communities prevent: child abuse and neglect, juvenile delinquency, runaway youth, and truancy.

PMC (Permanent Managing Conservatorship)

A legal term that means a judge has appointed a person to be legally responsible for a child without adopting the child. The court can give PMC to someone other than a parent, including DFPS, a relative, a close family friend or a foster parent.



Glossary of Terms & Acronyms

PPP (Public Private Partnership)

An advisory committee appointed by the DFPS Commissioner that represents Texas stakeholders on issues related to Community-Based Care. The PPP includes foster care alumni, the judiciary, residential childcare providers, trade associations, advocates, and CPS leadership. The group developed the initial model for Foster Care Redesign and continues to advise DFPS on CBC.

RFI (Request for Information)

A formal method of soliciting information, suggestions and responses from interested individuals or organizations to questions relating to a planned procurement.

RFP (Request for Proposal)

A formal, advertised, competitive method of purchasing defined services used to solicit proposals from interested entities. An RFP includes a statement of the factors that will be considered in determining the best proposal. Contract awards under an RFP are determined following the formal evaluation of proposals received, and after conducting any appropriate negotiations with one or more of the respondents to the RFP.

RTC (Residential Treatment Center)

A residential treatment center is a residential childcare operation that exclusively provides treatment services for children with emotional disorders, many of whom are in foster care.

SIL (Supervised Independent Living)

A type of voluntary Extended Foster Care placement where young adults (ages 18-21) can live on their own, while still getting casework and support services to help them become self-sufficient, including on college campuses.

SSCC (Single Source Continuum Contractor)

The entity with which DFPS enters into a contract for the provision of the full range of foster care services in a catchment area under the Community-Based Care model. By statute an SSCC is required to be a nonprofit entity with an organizational mission focused on child welfare, or a governmental entity.

SWI (Statewide Intake)

A division within DFPS that assess all reports of abuse, neglect or exploitation and routes them to the appropriate program and/or office.

TMC (Temporary Managing Conservatorship)

A legal term that means a judge has appointed a person or entity to be temporarily legally responsible for a child. Temporary means that there has not been a final trial, and one or both of the parents still retain their parental rights to the child.



References

DFPS Community-Based Care Webpage: https://www.dfps.state.tx.us/Child_Protection/Foster_Care/Community-Based_Care/default.asp

DFPS Foster Care Needs Assessment, July 2019: https://www.dfps.state.tx.us/About_DFPS/Reports_and_Presentations/Rider_Reports/documents/2019/2019-08-01_Rider_21_Community_Based_Care.pdf

DFPS Implementation Plan for Community-Based Care: https://www.dfps.state.tx.us/Child_Protection/Foster_Care/Community-Based_Care/documents/2019-08-26_Community-Based_Care_Implementation_Plan.pdf

DFPS Rider 21 Report, February 2019: https://www.dfps.state.tx.us/About_DFPS/Reports_and_Presentations/Rider_Reports/documents/2019/2019-02-01_Rider_21_Community_Based_Care.pdf

DFPS Rider 21 Report, August 2019: https://www.dfps.state.tx.us/About_DFPS/Reports_and_Presentations/Rider_Reports/documents/2019/2019-08-01_Rider_21_Community_Based_Care.pdf

DFPS Statement of Work for Region 3B Single Source Continuum Contractor: https://www.dfps.state.tx.us/Child_Protection/Foster_Care/Community-Based_Care/documents/2018-09-28_Exhibit_A_3b_SOW.pdf

Public Consulting Group Third Party Analysis of SSCC-Related Costs, September 2017: https://www.dfps.state.tx.us/About_DFPS/Reports_and_Presentations/CPS/2014-10-09_Public_Consulting_Group_Cost_Analysis.asp

Senate Bill 11, 85th Texas Legislative Session: <https://capitol.texas.gov/tlodocs/85R/billtext/pdf/SB00011F.pdf>

Vicki Spriggs, Texas CASA CEO, for the San Antonio Express-News: Progress made, but there's still more to do for Texas children: <https://www.mysanantonio.com/opinion/commentary/article/Progress-made-but-there-s-more-to-do-for-Texas-11289981.php>.



STRENGTHENING THE VOICES OF CASA STATEWIDE
