T3C Readiness Workshop

For licensed child-care providers

READY

WELCOME

Agenda

- Welcoming Remarks
- Pre-workshop check-in
- Group discussion
- Leveraging the Blueprint
- Burning Questions

- T3C Readiness
 Assessment Tool
- Aligning your business model to T3C
- T3C Grants
- Supports for providers
- Post-workshop check-out



DFPS T3C Blueprint

Pages 5-31 lay out the framework for how the T3C system will work. Having a good understanding of this part of the Blueprint sets you up for success in reading about the service packages and add-ons.

Pages 8-16 Commonly Used Terms is important so that you understand how specific phrases are being used in the context of T3C.

The credentialing process is still being defined but the Blueprint is your roadmap.



www.dfps.texas.gov/Texas_Child_Centered_Care



Foster Family Home Service Packages

Home-based/Community Services

Base Package (Child assigned one based package after assessment completed):

- 1. Basic Foster Family Care
- 2. Short-term Assessment/Stabilization Services
- 3. Services for Children & Youth with Complex Medical Needs of Who Have Been Deemed Medically Fragile
- 4. Treatment Foster Family Care Services
- 5. Intellectual Developmental Disability (IDD)/Autism Support Services
- 6. Sexual Aggression/Sex Offender Support Services
- 7. Mental & Behavioral Health Support Services
- 8. Human Trafficking Services
- 9. Substance Abuse Services

One or more of the following service add-ons:

- A. Transition Support Services for Youth & Young Adults 14 years and Older
- B. Support Services for Youth and Young Adults who are Pregnant or Parenting
- C. Kinship Add On for CPA Support Services

There will be one daily rate associated with the child's base package, and then if applicable, up to three of the add-ons attached to the daily rate. In order to become credentialed, the Child Placing Agency will need their Permit to reflect the corresponding Permit Services as listed for the particular Add-On Service in the T3C System Blueprint.

General Residential Operations Tier 1

Tier I: Facility-based Treatment Services (with exception of Basic Child Care Operations & Emergency Stabilization/Assessment Care)

- 1. Basic Child Care Operation
- 2. Emergency Stabilization/Assessment Care
- 3. Services to support Children, Youth, and Young Adults with Complex Medical Needs to Support Community Transition
- 4. Services for Children, Youth, and Young Adults with Intellectual Developmental Disabilities (IDD)/Autism to Support Community Transition
- 5. Sexual Aggression and Sex Offender Treatment Services to Support Community Transition
- 6. Mental and Behavioral Health treatment Services to Support Community Transition
- 7. Human Trafficking Services to Support Community Transition
- 8. Services to Support Community Transition for Youth and Young Adults who are Pregnant or Parenting
- 9. Substance Use Services to Support Community Transition

General Residential Operations Tier 2

Tier II: Facility-based Stabilization Services

These services include all of the federally established requirements affiliated with a Qualified Residential Treatment Program (QRTP) model inherent in the Family First Prevention Services Act.

Stabilization Service Programs in Tier II, will treat children, youth, and young adults with one or more of the following sub-acute needs:

- 1. Aggression or defiance;
- 2. Substance use disorders;
- 3. Human trafficking victimization;
- Sexual aggression or who have been adjudicated a sexual offender;
- 5. Complex medical needs; and
- Complex mental health needs to include suicidal and other self-harming behaviors.

Service Package and Add on Requirements

Each service package has unique requirements, but the categories of minimal requirements is consistent through most of the framework.

- Permit Type with specific Permitted Services- Provider must have an active Permit to provide services (aligned with what is required of the Service Package) in Texas.
- Evidence informed or based, trauma-informed Treatment Model—for specific populations must include specific programming designed to meet the needs of that population. Can be "off the shelf" or developed independently or hybrid. Includes an anticipated length of service.
- Logic Model and Continuous Quality Improvement processes-a current Logic Model (specific to the provision of the service package) which is modified over time based on the agency's Continuous Quality Improvement process.
- **Distinct Policy and Procedures, and Training**-policies and procedures will need to be updated/revised and submitted as part of the credentialing process



Service Package and Add-on Requirements

- Human Trafficking Prevention Training-DFPS is developing
- Family Engagement-Outreach, Engage, Collaborate
- CPAs: Dedicated Paid Intermittent Alternative Care Program- the Caregiver taking Intermittent Alternative Care receives the same daily rate as the Caregiver offering Intermittent Alternative Care for the same days of care.
- Staff benefit package GROs- must have a staff benefit package that, at a minimum, includes Paid annual vacation and sick leave for all Direct Delivery Caregivers and/or Cottage Parents to support wellness and retention.
- Aftercare Program-case ratios and frequency of contact, paid in daily rate while child in care (not all packages have this requirement).

Service Package and Add-on Requirements

- IT System sufficient to support CQI, case management, billing/invoicing, etc.
- Use of/billing to STAR Health for STAR Health eligible services
- Participation in STAR Health Service
 Coordination (dependent and based on child, youth, or young adult's individual eligibility)
- Serving Youth 14+-there are requirements
 associated with credentialing in this as
 an add-on for CPAs and for GROs who
 intend to serve youth 14+
- Accreditation for Tier 2 GRO packages



Personnel requirements

- Licensed Administrator, Program Director, Treatment Director,
 Case Managers, Foster Parents, Direct Delivery Caregivers
- Additional infrastructure and positions: Staff Training and Workforce Development, Staff Recruitment and Retention, CQAI, Billing/cost reporting/claims administration, Therapists, Aftercare Case Managers, Behavior Support Specialists/Mentors, Nurse, Crisis Management staff, Physician, et cetera

Some staff may be contracted for, some may play dual roles.

Except for child to staff ratios that are required by HHSC-CCR Minimum

Standards and awake night supervision, ratios in blueprint considered are

"generally appropriate" and should serve as guidance and are not intended to
serve as mandatory operating requirements. (Think about your treatment

model.)

Readiness Assessment

Thank you to our testers!

- ACH
- Amarillo Children's Home
- Arrow
- Boysville
- Caring Hearts
- Depelchin
- Hearts with Hope
- Hidden Cove

- Kids First
- Pathways
- Pegasus
- Roy Mass Youth Alternatives
- SJRC
- Texas Baptist Children's Home
- TACFS staff

What is the Readiness Assessment?

The T3C Readiness Assessment is an **online tool** that walks providers through the T3C service package requirements, as outlined in the Texas T3C System Blueprint, to help assess current readiness for T3C implementation.

Two purposes

- A tool to help your organization determine where to focus your efforts toward getting ready to offer specific T3C packages
 - After completing the assessment, you will receive a customized report summarizing your responses and showing you the areas where you are already meeting, already partially meeting, and not yet meeting package requirements.
- 2. A tool to help implementers get a snapshot of readiness at the state, region, and catchment levels
 - Everyone's responses will be aggregated and summarized so we can get insights about the general state of readiness in the provider community

Your responses are anonymous

We will not ask for you to identify your organization when you take the assessment, so we will not know how any individual provider answered.

Nobody at DFPS, HHSC, the SSCCs, other state agencies, or other provider agencies will know how your specific organization answered the questions.

How does it work? What do I need to do?

- Pick a person (or a team!) with in-depth knowledge about your organization and your programming
 - If you have multiple people collaborating on the assessment, make sure only one person actually submits it
- After you start, you can stop and come back and pick up where you left off – you don't have to finish in one sitting
 - You'll get a unique Login ID code that will let you come back to it
- Answer all questions to reflect where you are <u>now</u>, not where you want to be in the future
- If you are doing any CPA package, you must complete the Basic CPA package in addition to the others
- When you finish and submit your package responses, you'll get your summary back for you to save/print

What information should we have on hand?

- Details about your services, programs, and contracts, including:
 - Therapeutic services and processes
 - Service planning
 - Respite care
 - Normalcy
 - Family outreach
 - Aftercare
 - System coordination
- Treatment model(s)
- Continuous Quality Improvement/Quality Assurance efforts, including logic models
- IT system information
- Staff positions (employment or contract) and trainings
- Staff-to-child ratios

CPA: Basic Foster Family Home Readiness Assessment Status Report

Question	Your Response					
Permit Services						
Which programmatic services do you currently provide? • Respite child care • Extended foster care • None of these	Respite child care					
***Please see the T3C Blueprint for permit services required for the T3C service packages and service add-ons you intend to deliver. Reach out to your licensing representative if you have questions related to permit services.						
Expectations: Therapy						
Do you ensure that children receive therapy when their service planning team determines that therapy is a need (dependent on STAR Health eligibility)? • Always Sometimes Never	Always					
Do you ensure that there is a written justification of the child's therapeutic needs in the child's service plan? • Always Sometimes Never	Always					
Expectations: Service Planning	,					
Do you complete a service plan team meeting and review for each child at least once every 6 months?	Always					

Reasons to complete a Readiness Assessment

- You get a written summary to help you know where to focus your organization's efforts toward readiness
- If you apply for a readiness grant, you will have to describe how you have assessed your organization's readiness and what you found
 - The online Readiness Assessment is a one-stop way to get that done!
- Your organization's data will help us understand overall provider readiness in the state

QUESTIONS?



What You Need to Know to Get Started

- Today, who do you serve and at what capacity?
 - Age, Gender, Specific Child Traits
- Who do you plan to serve in the T3C Model?
 - What T3C Service Package will you pursue?

T3C Alignment Worksheet

Permit/License Type: GRO Multiple Services

Population Served: Gender(s): Males ____Ages: __10-14 __Characteristics: __Basic & Moderate ____

	Current Status	Current Cost	T3C Service Package	T3C Added Cost Yr 1	Total Cost
Staffing & Infrastructure	Director- LCCA	\$70,000	Treatment Director	\$85,000	
imastructure	1Case Manager	\$55,000	+1 Case Manager + 6 Direct Care/Driver	\$55,000 \$187,000	
	18 Direct Care Staff/Drivers	\$561,600	tests and tests and tests are the		
	Staff Recruitment & Retention	\$5,400	+Staff Recruitment & Retention	\$20,000	
			+Finance/Medicaid Billing Clerk	\$40,000	
		\$692,000	+	\$387,000	\$1,079,000
Treatment Model	DFPS TIC Training 2 Hours TACFS Conference Workshops &	\$2,000	Evidence Informed Treatment Model-		
Trauma Informed	Other Training Opportunities	Ψ2,000	TBRI	\$6,000	
(TIC)	Self-Research in TIC principles & practices	\$1,200	Other EBI	\$25,000	
		\$3,200	+/-	\$ 31,000	\$33,000
IT System	Quickbooks for Finances & Payroll	\$2,400	Quickbooks	\$2,400	
	Excel of Other System/Client Data	\$3,000	Apricot/KaleidaCare	\$30,000	
		\$5,400	+/-	\$32,400	\$37,800
	Total Current Cost	\$700,600	+ T3C Added Cost	\$450,400	\$1,151,000

NOTE: This is an example of a worksheet that your organization could develop with your organizations-specific costs. These numbers are fictitious and not based off of any organizations' real operating expenses.

Questions to ask yourself

- What do you/ your organization need to do to prepare for T3C?
 - What are you currently doing to prepare?
- Who do you need to engage in the process?

 What are your immediate next steps?

Something exciting about T3C!

Resources for children and caregivers!

Changing and Improving our outdated business model

Personalized Treatment

A chance to reimagine the services we provide to improve outcomes

More

Clearly defined expectations

Trauma responsive, proactive, reactive.

Role of the CANS 3.0 in identifying the best

placement

youth in less restrictive settings.

INCREASED RATES!

More services for older

More stability for purposeful services

Support for youth

transitioning from care

providers

Excited to see what we are good at and grow!

Aftercare

Child-centered

Appropriate placements for kids and services to meet individual needs.

Being able to track outcomes and quantify the benefit of our program.

Giving our employees a voice through an organized change process

Intentional Services

Family Engagement

Funding aligned with child's needs

Excited to be challenged to be more self-reflective as an org and have a greater child-centered focus.

Build targeted capacity

More resources to meet the complex and specific needs of the child.

More conversations around the RIGHT outcomes

Opportunity to focus- hone our services to better outcomes

Measuring outcomes so that we know we are being successful, or we have the chance to course correct

Redesigning our agency based on our unique strengths

Focus transition from residential to home-based services

T3C Workshops

T3C Readiness Grants

- There will be grants!
- Legislature appropriated funds for implementation grants in FY 24 and FY 25
- Grants can be used for specific categories of activities associated with preparing providers to serve in T3C
- Small and large readiness grants
- More information coming very soon



What's next? Supports for providers

- T3C Office hours start on May 10
- Learning opportunities—T3C
 Training Suite
- CQI Lab is in progress
- Peer/affinity groups
- Keep an eye on our website t3cready.org

