FY 2007 DFPS Residential Contract

EXECUTIVE OVERVIEW

The Fiscal Year 2007 (FY07) Contract for Residential Services (Contract) with the Department of Family and Protective Services (Department or DFPS) reflects the Department's efforts to conform to the directives of the Health and Human Services Commission (HHSC) and the Texas Legislature.

As the system is impacted by outsourcing, renewal activities, and the increasing requirements for contracted services, DFPS must ensure that contracts for residential services include provisions that reflect the direction of the State of Texas. Several requirements in this Contract, such as the implementation of outcome and output measures, reflect the move toward the implementation of performance-based contracts.

The format of the Contract has not changed significantly although some sections were moved or combined for the purposes of clarity or to ensure that similar requirements were grouped together. The most prominent example of this is the division of the contracted components of care (previously in Section 7) into Sections 7 through 18.

In an effort to better communicate with residential providers, DFPS has created a new web site dedicated to Residential Contracts. This web site includes information and helpful links related to the Contract and includes postings for Frequently Asked Questions (FAQs). Please visit this web site at http://www.dfps.state.tx.us/pcs/residential.asp.

To assist with clarifying significant changes to the FY07 Contract, an executive summary has been provided in the list below. Please note that the list does not contain all of the Contract changes for FY07, so ensure that the Contract is reviewed thoroughly prior to signature.

• Personal Items Section 7. (B)

The Contractor is required to maintain a personal inventory of the child's clothing and personal items. The personal inventory is sent to the Department's caseworker at the time of discharge.

• Therapy Notes Section 8. (B) vi.

The Contractor is required to maintain legible therapy notes that are completed within timelines set by the Contractor. The therapy notes demonstrate consistency with the service plan, psychological evaluation and/or psychiatric evaluation. The therapy notes document individualized short and long-term treatment goals, DFPS permanency planning goals and progress toward those goals and the frequency in the provision of therapy.

• Educational Portfolio

Section 9. (A) v.

The Contractor is required to maintain and update an Education Portfolio, including but not limited to, report cards, transcripts, the Admissions, Review, and Dismissal (ARD) team meeting notes, the Individual Education Plan (IEP), the Full Individual Evaluation (FIE)/Diagnostic testing, and the school withdrawal or discharge paperwork for each child in the Contractor's care. The Contractor will make the Education Portfolio readily available to the Department's caseworker on any visit with the child or otherwise, if requested.

Medical and Dental Care

Section 11. (B)

The Contractor shall provide access to the preventive medical services recommended by the most current version of the Texas Health Steps periodicity schedule found in Section 42.2.2 of the Texas Medicaid Providers Manual at http://www.tmhp.com/default.aspx. In the event an annual medical exam is not required by the Texas Health Steps periodicity schedule, a well child exam must, at a minimum, be provided for that year.

Maintaining Connections

Section 16.

The Contractor is required to make and document good faith efforts to ensure that children are able to preserve desired and appropriate connections to religious, family, school, community, and appropriate organizations through onsite or off-site means. This is a new requirement that is consistent with the Child and Family Services Review (CFSR) of the US Heath and Human Services Administration for Children and Families Outcome P2 for permanency, which states, "The continuity of family relationships and connections is preserved for families".

According to the CFSR, "preserving connections", examines the way in which children's primary connections and characteristics are preserved in the foster care placement. These include connections such as relationships with extended family members, previous foster families, schools, communities, tribes/tribal customs, and religion/religious observances. More information about the federal requirement can be located at the following website which describes the guidelines for reviewers when verifying the CFSR outcomes: http://www.acf.hhs.gov/programs/cb/cwmonitoring/tools_guide/onsitefinal.htm

Distribution of Materials

Section 19. (E)

Child Placing Agencies must distribute the following Texas Health Steps and the Medical Transportation Brochure materials THSteps Checkup Brochure EPSDT-05, THSteps Wallet Cards EPSDT-08A, Appointment Education Brochure EPSDT-16, Case Management for Children and Pregnant Women Brochure CM1-182A and Medical Transportation Brochure MTP-166 to agency verified foster homes at least annually. These materials are available to the public at no cost by accessing https://secure.thstepsproducts.com.

Medical Consent

Section 21. (F) i.-iv.

The Contractor is required to follow the requirements of Medical Consent for Children in DFPS Conservatorship and Youth Consenting to Medical Care policy, pertaining to residential child care providers. In addition to the requirement to follow the policy, Contractors are required to ensure that all foster parents and employees who are eligible to serve as Medical Consenters under "How DFPS Establishes the Medical Consenter", have access to and complete computer-based training on Informed Consent after it is made available by DFPS. http://www.dfps.state.tx.us/pcs/residential.asp

Discharge of Children

Section 23. (H)

Upon the effective date of the discharge of any child, whether initiated by the Department or by the Contractor, the Contractor shall make available to the Department a discharge summary, an education portfolio and records such as:

- i. Service Plan, therapy and/or behavioral health notes
- ii. Gift/personal possession inventory including books, toys and money
- iii. Clothing inventory
- iv. Immunization record
- v. Medications
- vi. Most recent clinical records such as psychological evaluations and psychological testing, upon request.

Disaster and Emergency Response Plan

Section 25.

The Contractor is required to maintain at all times a written disaster and emergency response plan, policies and procedures to address internal and external emergencies and disasters that include, but are not limited to acts of nature (such as flood, hurricane, fires, and tornadoes), chemical or hazardous material spills, critical equipment failure, weapons of mass destruction events, and acts of terrorism.

Performance Measurement

Section 27.

The FY 2006 Contract required Contractor's to achieve the goals of the Department through output and outcome measures. This requirement has been expanded to contain the Safety outcome measure. The purpose of this measure is to evaluate the Contractor's success at protecting children in its care. This outcome is directly related to the mission of DFPS to protect children from abuse/neglect as well as one of the outcomes measured by the CFSR Outcome S1, "Children are first and foremost protected from abuse and neglect." (www.acf.hhs.gov/programs/cb/).

Written Approvals

Section 41.

This section now indicates from whom the Contractor shall seek approvals at DFPS.

Notification of Email Address

Section 43. (A) i.

Contractor shall maintain at all times at least one active electronic mail (email) address for the receipt of contract-related communications from the Department.

It is the Contractor's responsibility to monitor this email address for Contract-related information and if this email address should change notify within five (5) calendar days, the Residential Contract Manager and the Residential Contract Mailbox (Residential_Contracts@dfps.state.tx.us) with the correct or updated email address.

Notification of Changes to Services

Section 43. (A) viii.

This section states, in part that within ten (10) calendar days, the Contractor shall notify the Residential Contract Manager of any significant change to the Contractor's admissions policy, and significant changes to the scope and coverage of the services to be provided by the Contractor and/or Subcontractor under this contract, including the program description and other necessary components. The intent of this requirement is to ensure that the Residential Contract Manager is apprised of any significant changes in the Contractors programs or services.

Attachment A

The attachment contains the foster care daily rates and the minimum passthrough rates for Child Placing Agencies. The rates will be effective throughout the contract term.

Attachment B

The attachment contains the glossary for terms referenced in the contract. Words referenced in the glossary are capitalized in the various sections of the Contract and provide additional definition to contractor requirements. The glossary has been expanded to include new language referenced in the body of the FY 2007 Contract.

Attachment C

The attachment contains the characteristics and definitions of the Service Levels as well as the Service Level Indicators. There has been no significant change to Attachment C.

Attachment D

The attachment contains the Intermittent Alternative Care guidelines. There has been little significant change to the Intermittent Alternative Care guidelines.

Attachment E

The attachment contains special terms and conditions pertaining to contracts issued for a provisional period. This term contains the specific remedies to Contract performance issues. Not all contractors will have requirements specified in this Attachment.

Attachment F

The attachment contains the Safety Outcome Measure as well as the, Remedies, Outcome Indicator, Target, Purpose, Definitions, Data Source, Methodology and Output Measures.