Public Private Partnership Meeting Notes

January 12, 2018

Attendees

PPP members: Zophelia Mays (Youth Representative), Tina Amberboy (SCCC), Wayne Carson (ACH Child & Family Services), Katie Olse (TX Alliance), Michael Redden (New Horizons/Co-Chair), Robert Ellis (Pegasus), Glenn Scruggs (Giocosa), Tim Brown (Methodist Children's Home), Scott Lundy (Arrow), Trevor Woodruff (DFPS), Kristene Blackstone (CPS Associate Commissioner/Co-Chair), Jenifer Jarriel (DePelchin), Dr. Kurt Senske (Upbring), Kaysie Tacetta (DFPS), Jean Shaw (CCL Associate Commissioner), Andy Homer (Texas CASA), Christine Gendron (TNOYS)

Other Attendees: Ellen Letts (CPS), Claire Hall (CPS), Cyndi Reed (CPS), Wendy Bagwell (CPS), Judy Pavone (CPS), Cheryl Gomez (DFPS), Katherine Barillas (One Voice Texas), Brandon Logan (TPPF), Judy Powell (Parent Guidance Center), James Castro, Donna Fagan (parent), Marni Morgan (A World for Children), Linda Garcia (ACH), Len Krugel (CPS), Pamela McPeters (TexProtects), Daniella Fragoso (LBB), Sarah Crockett (TX CASA), Rona Statman (Every Child)

PPP Members Not in Attendance: Judge Rob Hofman, Luanne Southern (Casey Family Programs), Judge Melissa DeGerolami (CPC of South Central TX)

Discussion

Children’s Rights Lawsuit Update:

Trevor Woodruff, DFPS Deputy Commissioner, gave an update on the Children’s Rights Lawsuit.

“3 in 30” Implementation:

Liz Kromrei, DFPS Director of Services, presented on the initiative.

- “3 in 30” is the DFPS practice approach to implementing medical exam requirements. 3 in 30 refers to:
  - 3 day initial medical exam
Initial CANS assessment in 30 days for children 3 and older. The CANS is a comprehensive, trauma-informed behavioral health evaluation.

- Texas Health Steps medical check-up in 30 days for a complete check-up with lab work.

- The effort is supported by American Academy of Pediatrics findings about medical needs of children coming into care.
- SB 11 codified the 3 (business) day medical exam to ensure children removed by DFPS get medical attention. Most children are in the same placement for the first 5 days in care and many are in emergency shelters which facilitate access to an exam.
- DFPS is executing a rolling implementation across the state with final implementation statewide planned by December 2018. Caseworker protocols were highlighted.

Points of clarification:
- Texas Health Steps exam is an additional exam, and does not change the EPSDT developmental exam.
- Vaccinations are not part of the 3 day medical exam without parental consent, except for tetanus.

Discussion about medical provider capacity:
- Superior medical provider capacity issues are a concern. Pilot areas were able to sustain the effort. Superior is incentivized to find provider options outside of expensive emergency room visits. Capacity has grown since STAR health began. There are opportunities for providers with in-house clinical staff to collaborate.

Region 3B Update:

Wayne Carson, ACH CEO, provided an update on 3b activity.

- OCOK is in the process of meeting with its network providers to go over quarterly performance reports – meeting one on one with each provider to review performance data including data on capacity provided to the network and quality of services (e.g. safety). Reviews seek to proactively address issues and provide a thoughtful approach to building quality – how OCOK and providers can be successful partners to grow needed capacity. Many smaller agencies have never had a snapshot of data on their system as a whole.
- OCOK has opened an RTC with 13 beds - anticipate 20 to 25 more beds with an additional RTC opening in the future.
• OCOK fielded questions about CANS. They have found CANS to be a needed mechanism to get clinical data and to show improvement in addressing trauma.

Community-Based Care (CBC) Update:

Ellen Letts, DFPS Director of Community Based Care provided an update.

• Region 2 and Bexar County Request for Applications (RFAs) released and in process. Will begin reviewing Region 2 proposals at end of January.
• Will procure an independent process evaluation of implementation of each stage of community-based care in each new catchment area. RFA release anticipated this spring.
• Will announce the next two catchments in the next few months – February, March. Discussion:
  o PPP provides input on the criteria for selecting catchments, e.g. building on contiguous catchments, but does not recommend / decide the next catchment.
  o PPP Continuity of Care workgroup is making recommendations for how to manage cross-catchment reliance on capacity in a fair way.
• Working on CBC Implementation plan to publish in February. Discussion:
  o Discussion on additional resources for implementation in new sites:
    ▪ Legislative Appropriation Request assessed DFPS staff needs, e.g. new CBC Administrator in each region, quality assurance staff.
    ▪ SSCC receives resource transfer for stage I and stage II which is used to hire staff.
    ▪ Efficiencies not realized until there are more CBC catchments operating. Currently, DFPS is operating the legacy system which includes contracts with providers in catchment areas.

CBC PPP Sub-Workgroups:

• IT Systems
  o Recommendation to combine IT workgroup which had not yet begun meeting with the Data Access and Governance Council
required by SB11. PPP agreed with addition of stakeholders who were interested in the IT workgroup to the effort. Recommendation for including small as well as large providers to participate. Providers will have to navigate different systems of DFPS and multiple SCCCs.

- Ellen Letts and DFPS IT Director putting together a work plan to establish structure and implement the effort. Role is standardizing the data across SCCCs and interoperability. Required to meet annually, will meet more initially.
- DFPS has not made a decision about new CWIS rules, is working on pros and cons
- Critical IMPACT enhancements have already been submitted as part of FCR stage II. Billing piece is ready and some limited interoperability for service initiation already sketched out.

- **Fiscal Matters**
  - Will begin meeting again about the fiscal model as relates to stage III – incentives and remedies

- **Cultural Change and Communication**
  - Will start in next few months in anticipation of two new sites

- **Performance**
  - Introduction of Carol Self and Katherine Barillas as chairs
  - Chairs reported work to date:
    - Workgroup is balancing desire to focus on outcomes rather than outputs and to make sure outcomes are substantive with data limitations and recognition of what is in the scope of the SCCC
    - Asked to look at well-being and started with discussion of education needs.
      - Workgroup considered data DFPS has with regard to GED and diploma, federal review information gathered on services.
      - Narrowed focus to school stability and promoting educational progress. Workgroup came to agreement that there is a need for a quality indicator specific to education to guide performance measurement: “Children and youth experience education stability and progress”
• Discussion by PPP members about SSCC control, federal requirements passed on to SSCC, barriers presented in collaborating with schools, role of schools to educate, role of SSCC to advocate, competing priorities for children with more significant behavioral needs
• PPP wanted more time to consider. One position is elevating educational needs and progress through a new quality indicator and measurement. Another is an argument for more global measurement of normalcy and preparation for adulthood indicators already in place that lets providers and families figure out where to focus for each child versus trying to hit one specific metric.
  o Follow up: DFPS to provide to PPP members the federal requirement on school stability and previous Supreme Court education committee work on the importance of school stability.

• Case Management/Continuity of Care
  o Sarah Crocket and Tina Amberboy introduced as chairs
  o The workgroup is sketching out the scope and work plan. Once established will prioritize topics and schedule meetings on specific topic areas that may require additional subject matter experts.
  o Initial meetings around two topics:
    ▪ 1. Goal of standard contract language around preservation of capacity and negotiation with the SSCC.
    ▪ 2. Defining conflict of interest issues in order to make recommendations for SSCC as they develop their readiness plans, i.e. what are the areas they would need to address to look at for readiness, not how they would address.

**Next Meeting**
April 13th 2018 at 9:00 am; DFPS Winters Building, Public Hearing Room.