BILL ANALYSIS

C.S.H.B. 6 By: Frank Human Services Committee Report (Substituted)

BACKGROUND AND PURPOSE

Concerns have been raised regarding the lack of capacity and local decision-making for children in the state's foster care system. Interested parties assert that expansion of community-based foster care will increase foster placements and the overall quality of care for foster children. C.S.H.B. 6 seeks to provide for such an expansion.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that rulemaking authority is expressly granted to the Department of Family and Protective Services in SECTIONS 13 and 20 of this bill and to the executive commissioner of the Health and Human Services Commission in SECTION 13 of this bill.

ANALYSIS

C.S.H.B. 6 amends the Family Code require the Department of Family and Protective Services (DFPS) to ensure that each licensed child-placing agency, single source continuum contractor, or other person placing a child for adoption receives a copy of any portion of the report on the available health, social, educational, and genetic history of the child prepared by DFPS and requires the child's health history to include, to the extent known by DFPS, information about whether the child's birth mother consumed alcohol during pregnancy and whether the child has been diagnosed with fetal alcohol spectrum disorder. The bill entitles a prospective adoptive parent with whom a child is placed prior to adoption to examine any record or other information relating to the child's health history and sets out requirements for the entity or person placing the child for adoption regarding this entitlement.

C.S.H.B. 6 repeals a provision defining abuse, exploitation, and neglect with regard to agency investigations of abuse, neglect, or exploitation in certain facilities and provides for a definition of exploitation generally applicable to investigations of a report of child abuse or neglect. The bill includes forcing or coercing a child to enter into a marriage among the acts or omissions by a person that constitute abuse for purposes of investigations of a report of child abuse or neglect and among the acts by a member of a family or household toward a child of the family or household that constitute family violence. The bill, for purposes of investigations of a report of child abuse or neglect, includes a negligent act or omission by an employee, volunteer, or other individual working under the auspices of a facility or program that causes or may cause substantial emotional harm or physical injury to, or the death of, a child served by the facility or program as further described by rule or policy among the acts or omissions that constitute neglect and expands the list of persons considered responsible for a child's care, custody, or welfare to include an employee, volunteer, or other person working under the supervision of a

licensed or unlicensed child-care facility.

C.S.H.B. 6 requires DFPS to collect and monitor data regarding repeated reports of abuse or neglect involving the same child or by the same alleged perpetrator and, in monitoring such reports, to group together separate reports involving differing children residing in the same household. The bill requires DFPS to consider any report so collected involving any child or adult who is a part of a child's household when making case priority determinations or when conducting service or safety planning for the child or the child's family.

C.S.H.B. 6 provides for the termination of a court's jurisdiction over a suit affecting the parent-child relationship that requests termination of that relationship or requests that DFPS be named conservator of the child and the automatic dismissal without a court order of such a suit on the first Monday after the first anniversary of the date the court rendered a temporary order appointing DFPS as temporary managing conservator of the child unless the court has commenced the trial on the merits or granted an extension. The bill also provides for jurisdiction termination and automatic dismissal without a court order if the court grants an extension but does not commence the trial on the merits before the dismissal date.

C.S.H.B. 6 requires DFPS to ensure that each child who has been taken into the conservatorship of DFPS and remains in the conservatorship of DFPS for more than three business days is examined and receives a mental health screening conducted by a physician or other health care provider authorized under state law to conduct medical examinations not later than the end of the third business day after the date the child enters the conservatorship of DFPS or, for a child located in a rural area, not later than the end of the fifth business day after the date the child enters the conservatorship of DFPS. The bill requires DFPS, whenever possible, to schedule the medical examination and mental health screening for a child before the last business day of the appropriate time frame and provides for the development of guidelines for that examination and mental health screening. The bill requires DFPS, not later than December 31, 2019, to submit a report to the standing committees of the house of representatives and the senate with primary jurisdiction over child protective services and foster care evaluating the statewide implementation of the required medical examination and mental health screening of such children and sets out the required contents of the report. The bill requires DFPS to implement these bill provisions relating to medical examinations and mental health screenings not later than December 31, 2018.

C.S.H.B. 6 requires DFPS to provide monetary assistance to a foster parent for full-time or part-time day-care services for a foster child on receipt of the verification that the foster parent has attempted to find appropriate day-care services for the foster child through community services or without such verification if DFPS determines the verification would prevent an emergency placement that is in the child's best interest. The bill prohibits DFPS from denying monetary assistance to the foster parent as long as the foster parent is employed on a full-time or part-time basis.

C.S.H.B. 6 requires DFPS to develop a formal review process to assess the ability of a single source continuum contractor to satisfy the responsibilities and administrative requirements of delivering foster care services, including the contractor's ability to provide placement and case management services for children and families; evidence-based, promising practice, or evidence-informed supports for children and families; and sufficient available capacity for inpatient and outpatient services and supports for children at all service levels who have previously been placed in the catchment area. The bill defines, among other terms, "catchment area" as a geographic service area for providing child protective services that is identified as part of the community-based foster care redesign, replaces references to the foster care redesign with references to community-based foster care in statutory provisions requiring DFPS to develop and maintain an implementation plan for foster care redesign, and revises implementation plan requirements to reflect the bill's provisions. The bill requires the single source continuum contractor, as part of the readiness review process, to prepare a plan detailing the methods by

which the contractor will avoid or eliminate conflicts of interest and prohibits DFPS from transferring services to the contractor until DFPS has determined the plan is adequate. The bill requires DFPS to develop the review process before DFPS may expand community-based foster care outside of the initial catchment areas where community-based foster care has been implemented. The bill requires DFPS to conduct a readiness review for a single source continuum contractor before the transfer of placement services and case management services to the contractor unless the readiness review demonstrates that the contractor is able to adequately deliver the services.

C.S.H.B. 6 requires DFPS, not later than December 31, 2019, to identify not more than eight catchment areas in Texas that are best suited to implement community-based foster care of which not more than two catchment areas may be identified as best suited to implement the transfer of case management services to a single source continuum contractor; to create an implementation plan for those catchment areas that includes a timeline for implementation; following the readiness review process and subject to the availability of funds, to implement community-based foster care in those catchment areas; and, following the implementation, to evaluate the implementation process and single source continuum contractor performance in each catchment area. The bill requires DFPS, following the selection of such catchment areas and based on the availability of funding, to annually provide a report to the legislature that details the readiness of any remaining catchment areas in which community-based foster care services have not been implemented and, subject to the availability of funds, the readiness of the catchment areas, and the feasibility of implementing community-based foster care in those areas, begin implementing community-based foster care in those areas in accordance with the timeline developed for those areas and the developed readiness review process. The bill authorizes DFPS, in expanding community-based foster care, to change the geographic boundaries of catchment areas as necessary to align with specific communities and requires DFPS to ensure the continuity of services for children and families during the transition period to community-based foster care in a catchment area. The bill prohibits DFPS from transferring case management services to a single source continuum contractor in a catchment area in which community-based foster care is implemented until DFPS has successfully completed the transfer of placement services to the contractor.

C.S.H.B. 6 requires DFPS to create a community engagement group in each catchment area to assist with the implementation of community-based foster care and authorizes DFPS to create more than one such group in a catchment area, as appropriate. The bill provides for the persons who may be included in a community engagement group, requires DFPS to adopt rules governing such groups and the maximum number of members in a group, authorizes established stakeholder organizations in a catchment area to request to be designated by DFPS as the community engagement group for that catchment area, and prescribes the required duties of such a group. The bill applies state open meetings law to a community engagement group.

C.S.H.B. 6 conditions an entity's eligibility to enter into a contract with DFPS to serve as a single source continuum contractor to provide foster care service delivery on the entity being a nonprofit or governmental entity that is licensed as a service provider by DFPS, has an organizational mission and has demonstrated experience in the delivery of services to children and families, and has the ability to provide all of the case management and placement services and perform all of the required duties of a single source continuum contractor or has the ability to provide a plan to gain that ability during the implementation of community-based foster care in a catchment area. The bill sets out provisions required to be included in a contract with a single source continuum contractor to provide foster care services in a catchment area.

C.S.H.B. 6 requires DFPS to create a data access and standards governance council to develop protocols for access by single source continuum contractors to DFPS data to allow the contractors to perform case management functions. The bill requires DFPS to develop rules and processes for the operation of the council, requires each single source continuum contractor that has entered into a contract with DFPS to provide community-based foster care services to

participate in the council, and provides for the authorized inclusion of other specified persons in the council. The bill sets out the duties of the council and authorizes DFPS to assign council duties to any existing office or division of DFPS with functions similar to the council duties. The bill requires each single source continuum contractor and any additional council member to participate in the development of protocols and any other assigned duties.

C.S.H.B. 6 requires DFPS, in each initial catchment area where community-based foster care has been implemented or a contract with a single source continuum contractor has been executed before June 1, 2017, to transfer to the single source continuum contractor providing services in that area the case management of children and families receiving services from that contractor and family reunification support services to be provided after a child receiving services from the contractor is returned to the child's family for the period of time ordered by the court. The bill requires DFPS to collaborate with a single source continuum contractor to establish an initial case transfer planning team to address any necessary data transfer, establish file transfer procedures, and notify relevant persons regarding the transfer of services to the contractor.

C.S.H.B. 6 requires a single source continuum contractor and any subcontractor of that contractor providing community-based foster care services to maintain minimum insurance coverage, as required in the contract with DFPS, to minimize the risk of insolvency and protect against damages and authorizes the executive commissioner of the Health and Human Services Commission (HHSC) to adopt rules to implement this requirement. The bill requires DFPS to develop a formal review process to evaluate a single source continuum contractor's implementation of placement services and case management services in a catchment area and to conduct such a review after the contractor completes the implementation of placement services in a catchment area and after the contractor completes the implementation of case management services in the catchment area. The bill sets out the procedures by which a single source continuum contractor or DFPS may terminate a contract for the provision of community-based foster care, requires DFPS to create a contingency plan in each catchment area in which community-based foster care is implemented to ensure the continuity of services for children and families in the catchment area in the event of an early contract termination, and, if a single source continuum contractor gives notice to DFPS of an early contract termination, authorizes DFPS to enter into a contract with a different contractor for the sole purpose of assuming the contract that is being terminated.

C.S.H.B. 6 requires DFPS to review a single source continuum contractor's decision with respect to a child's permanency goal and to approve or disapprove a contractor's recommended permanency goal for a child not later than 72 hours after DFPS receives the recommendation from the contractor. The bill prohibits those requirements from being construed to limit or restrict the authority of DFPS to include necessary oversight measures and review processes to maintain compliance with federal and state requirements in a contract with a single source continuum contractor or to attend court proceedings related to a child in DFPS conservatorship. The bill requires DFPS to develop an internal dispute resolution process to decide disagreements between a single source continuum contractor and DFPS.

C.S.H.B. 6 establishes the statutory duties of DFPS assumed by single source continuum contactors in connection with the delivery of foster care services in a catchment area and the continuing duties of DFPS in that catchment area regarding certain legal representation. The bill subjects the records of a single source continuum contractor relating to the provision of community-based foster care services in a catchment area to state public information law in the same manner as DFPS records are subject to that law and applies statutory provisions relating to the confidentiality of certain child abuse or neglect case information to those records. The bill provides for the attorney-client privilege applicable to an employee, agent, or representative of a single source continuum contractor in child protection proceedings.

C.S.H.B. 6 creates the Child Protective Services Legislative Oversight Committee to facilitate the transfer of functions from DFPS to single source continuum contractors with minimal

negative effect on the delivery of services to which those functions relate. The bill sets out the composition of the committee, establishes that the commissioner of DFPS serves as an ex officio, nonvoting member of the committee, specifies that a committee member serves at the pleasure of the appointing official, provides for the designation of presiding co-chairs, and specifies certain committee meeting requirements. The bill prohibits a committee member from receiving compensation for serving on the committee but entitles a member to reimbursement for travel expenses incurred by the member while conducting the business of the committee as provided by the General Appropriations Act. The bill requires the committee to facilitate the transfer of functions from DFPS to single source continuum contractors with minimal negative effect on the delivery of services to which those functions relate and, with assistance from DFPS, to advise the commissioner of DFPS concerning the functions to be transferred and the funds and obligations that are related to those functions; the transfer of the functions and related records, funds, and required obligations by DFPS that are required by the bill; and the reorganization of DFPS administrative structure as required by the implementation of community-based foster care and other provisions enacted by the 85th Legislature that become law. The bill applies state open meetings law to the committee, requires the committee to submit a report to the governor, lieutenant governor, speaker of the house of representatives, and legislature not later than December 1 of each even-numbered year, and sets out the required contents of that report.

C.S.H.B. 6 requires DFPS to develop and implement in two child protective services regions of Texas a pilot program under which HHSC contracts with a single nonprofit entity that has an organizational mission focused on child welfare or a governmental entity in each region to provide family-based safety services and case management for children and families receiving family-based safety services. The bill requires the contract to include a transition plan for the provision of services that ensures the continuity of services for children and families in the selected regions and to include performance-based provisions that require the entity to achieve certain outcomes for families receiving the entity's services. The bill restricts HHSC to contract for implementation of the pilot program only with entities that DFPS considers to have the capacity to provide, either directly or through subcontractors, an array of evidence-based, promising practice, or evidence-informed services and support programs to children and families in the selected child protective services regions. The bill requires the contracted entity to perform all statutory duties of DFPS in connection with the delivery of the applicable services and requires the contracted entity to give preference for employment to DFPS employees whose position at DFPS is impacted by the implementation of community-based foster care and who are considered by DFPS to be employees in good standing. The bill requires DFPS, not later than December 31, 2018, to report to the appropriate standing committees of the legislature having jurisdiction over child protective services and foster care matters on the progress of the pilot program and sets out the required content to be included in the report.

C.S.H.B. 6 requires DFPS or, in a catchment area in which community-based foster care has been implemented, the single source continuum contractor that has contracted with HHSC to provide foster care services in the catchment area to give notice of a change in placement of a child in the conservatorship of DFPS to the applicable managed care organization contracted to provide health care services to the child under the STAR health program. The bill requires the organization to give notice of the placement change to the primary care physician listed in the child's health passport and sets deadlines for such notifications by DFPS, the contractor, or the organization, as applicable.

C.S.H.B. 6 requires appropriate DFPS management personnel from a child protective services region in which community-based foster care has not been implemented, in collaboration with foster care providers, faith-based entities, and child advocates in that region, to use data collected by DFPS on foster care capacity needs and availability of each type of foster care and kinship placement in the region to create a plan to address the substitute care capacity needs in the region. The bill requires the plan to identify both short-term and long-term goals and strategies for addressing those capacity needs, to be submitted to and approved by the commissioner of DFPS, and to be updated annually. The bill requires DFPS to publish each initial foster care

capacity needs plan and each annual update to a plan on the DFPS website. The bill requires DFPS, in regions of Texas where community-based foster care has not been implemented, to collaborate with child-placing agencies to implement the single child plan of service model developed under the single child plan of service initiative and to ensure that a single child plan of service is developed for each child in foster care in those regions. The bill requires DFPS, not later than September 1, 2017, to develop and implement a single child plan of service for each child in foster care in a region of Texas where community-based foster care has not been implemented.

C.S.H.B. 6 requires HHSC, on behalf of DFPS and subject to the availability of funds, to enter into agreements with institutions of higher education to conduct efficacy reviews of any prevention and early intervention programs that have not previously been evaluated for effectiveness through a scientific research evaluation process and requires DFPS, subject to the availability of funds, to collaborate with an institution of higher education to create and track indicators of child well-being to determine the effectiveness of prevention and early intervention services.

C.S.H.B. 6 requires a single source continuum contractor providing therapeutic foster care services to a child in the provision of community-based foster care to ensure that the child receives a developmentally appropriate comprehensive assessment at least once every 90 days.

C.S.H.B. 6 amends the Government Code to include investigations of alleged abuse, neglect, or exploitation occurring at a child-care facility among the functions of DFPS that are expressly exempt from statutory provisions relating to the transfer of specified duties to HHSC during the phased consolidation of the health and human services system. The bill prohibits transfer to HHSC of the responsibility for conducting investigations of reports of abuse, neglect, or exploitation occurring at such facilities and establishes that those investigations remain the responsibility of DFPS. The bill requires the commissioner of DFPS to transfer the responsibility for conducting investigations of reports of abuse, neglect, or exploitation occurring at such facilities and establishes that those investigation occurring at such facilities to the child protective services division of DFPS and to transfer appropriate investigators and staff as necessary to implement this transfer of responsibility. The bill's provisions relating to the responsibility of DFPS to conduct these investigations take effect on passage, or, if the bill does not receive the necessary vote, on the 91st day after the last day of the legislative session.

C.S.H.B. 6 requires a managed care organization that contracts with HHSC to provide health care services to recipients under the STAR health program to ensure that enrollees receive a complete early and periodic screening, diagnosis, and treatment checkup in accordance with the requirements specified in the contract between the organization and HHSC. The bill requires HHSC to include a provision in a contract with a managed care organization to provide health care services to recipients under the STAR health program specifying progressive monetary penalties for the organization's failure to comply with those screening requirements. The bill prohibits HHSC from imposing a monetary penalty for noncompliance with the screening requirements until September 1, 2018. The bill requires a contract between a managed care organization and HHSC for the organization to provide health care services to recipients under the strange acontract between a managed care organization and HHSC for the organization to provide health care services to recipients under the strange organization to provide health care services to recipients under the organization to provide health care services to recipients under the strange organization to provide health care services to recipients under the strange organization to provide health care services to recipients under the strange organization to provide health care services to recipients under the strange by notifying each specialist treating the child of the placement change and coordinating the transition of care from the child's previous treating primary care physician and treating specialists to the child's new treating primary care physician and treating specialists, if any.

C.S.H.B. 6 amends the Human Resources Code to require DFPS to collaborate with single source continuum contractors to ensure that DFPS employees who perform case management functions are given preference for employment by service providers under the community-based foster care service system. The bill requires DFPS to periodically review DFPS's records retention policy with respect to case and intake records relating to DFPS functions and to make

changes to the policy consistent with the records retention schedule submitted to the state records administrator that are necessary to improve case prioritization and the routing of cases to the appropriate DFPS division. The bill authorizes DFPS to adopt rules necessary to implement that record retention provision. The bill requires DFPS to create within DFPS the foster care services contract compliance, oversight, and quality assurance division to oversee contract compliance and achievement of performance-based outcomes by any vendor that provides foster care services for DFPS under community-based foster care, to conduct assessments on the fiscal and qualitative performance of any vendor that provides foster care services for DFPS under community-based foster care, and to create and administer a dispute resolution process to resolve conflicts between vendors that contract with DFPS to provide foster care services under community-based foster care and any subcontractor of a vendor.

C.S.H.B. 6 requires DFPS to create an office of data analytics, requires the office to report to the deputy commissioner of DFPS, and sets out the functions the office is authorized to perform, as determined by DFPS. The bill requires the commissioner of DFPS and the executive commissioner of HHSC to transfer appropriate staff as necessary to conduct the duties of the office. The bill requires DFPS to adopt specified Family Code definitions of abuse, neglect, and exploitation for all investigations of child abuse, neglect, or exploitation conducted by the child protective services division of DFPS; to establish standardized policies to be used during investigations; and to implement the standardized definitions and policies not later than December 1, 2017. The bill requires the commissioner of DFPS to establish units within the child protective services division of DFPS to specialize in investigating allegations of child abuse and neglect occurring at a child-care facility and authorizes DFPS to require that investigators who specialize in such allegations receive ongoing training on the minimum licensing standards for any facilities that are applicable to the investigator's specialization. The bill requires DFPS, after an investigation of abuse, neglect, or exploitation occurring at a child care facility, to provide the state agency responsible for regulating the facility with access to any information relating to the investigation by DFPS and specifies that such provision of access to confidential information does not constitute a waiver of confidentiality. The bill authorizes DFPS to adopt rules to implement these bill provisions relating to investigations of child abuse, neglect, and exploitation.

C.S.H.B. 6 includes the goals of ending the abuse and neglect of children in the conservatorship of DFPS and of increasing the capacity and availability of foster, relative, and kinship placements in Texas among the goals and priorities on which the DFPS strategic plan is based. The bill extends to HHSC the same authority and duties as DFPS with respect to a contract for residential child-care services provided by a general residential operation or by a child-placing agency and requires such contracts to include provisions that specify financial penalties for failing to meet any specified performance outcomes and financial incentives for exceeding any specified performance outcomes. The bill authorizes DFPS or HHSC to terminate a contract or impose sanctions for underperformance in meeting any specified performance outcomes and specifies that the sanctions imposed for a violation of a contract provision that specifies performance criteria or for underperformance in meeting performance outcomes are monetary sanctions. The bill requires HHSC to seek to amend a contract for residential child-care services entered into with a general residential operation or child-placing agency before the bill's effective date to comply with the bill's provisions. The bill prohibits DFPS and HHSC from imposing a financial penalty against a general residential operation or child-placing agency for failing to meet any specified performance outcomes, for a violation of a contract provision that specifies performance criteria, or for underperformance in meeting any specified performance outcomes until September 1, 2018.

C.S.H.B. 6 requires HHSC, in collaboration with DFPS, to contract with a vendor or enter into an agreement with an institution of higher education to develop, in coordination with DFPS, performance quality metrics for family-based safety services and post-adoption support services providers and requires the quality metrics to be included in each contract with those providers. The bill requires a provider whose contract with HHSC to provide DFPS services includes the quality metrics to prepare and submit to DFPS a quarterly report regarding the provider's performance based on the quality metrics. The bill requires the commissioner of DFPS to compile a summary of all reports prepared and submitted to DFPS by family-based safety services providers and to distribute the summary to appropriate family-based safety services caseworkers and child protective services region management once each calendar quarter. The bill requires the commissioner to compile a summary of all reports prepared and submitted to DFPS by post-adoption support services providers and to distribute the summary to appropriate conservatorship and adoption caseworkers and child protective services region management. The bill requires DFPS to make the summaries available to families that are receiving family-based safety services and to adoptive families. The bill requires the quality metrics to be developed not later than September 1, 2018, and included in any contract, including a renewal contract, entered into by HHSC with a family-based safety services provider or a post-adoption support services provider on or after January 1, 2019. The bill exempts a provider that has entered into a contract with HHSC to provide family-based safety services under the family-based safety services and case management pilot program established by the bill from these provisions relating to performance quality metrics.

C.S.H.B. 6 requires DFPS to create and implement processes to simplify and streamline the licensing and verification rules for agency foster homes and child-placing agencies and authorizes DFPS to waive certain minimum standards or to permit a child-placing agency to waive certain verification requirements for a foster home under provisions providing certain rules and standards regarding the regulation of certain facilities, homes, and agencies that provide child-care services. The bill requires a child-placing agency or general residential operation that contracts with DFPS to provide services, not later than August 31, 2018, to ensure that the children who are in the managing conservatorship of DFPS and are placed with the child-placing agency or general residential operation receive a complete early and periodic screening, diagnosis, and treatment checkup in accordance with the requirements specified in the contract between the child-placing agency or general residential operation and DFPS. The bill requires HHSC to include a provision in a contract with a child-placing agency or general residential operation specifying progressive monetary penalties for the child-placing agency's or general residential operation's failure to comply with those screening requirements. The bill prohibits such a penalty from being imposed by DFPS and HHSC until September 1, 2018. The bill makes specified definitions of abuse and neglect applicable to statutory provisions relating to an investigation of a listed family home providing child-care services.

C.S.H.B. 6 repeals Section 261.401(a), Family Code.

EFFECTIVE DATE

Except as otherwise provided, September 1, 2017.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.H.B. 6 may differ from the original in minor or nonsubstantive ways, the following comparison is organized and formatted in a manner that indicates the substantial differences between the introduced and committee substitute versions of the bill.

INTRODUCED

No equivalent provision.

HOUSE COMMITTEE SUBSTITUTE

SECTION 1. Section 71.004, Family Code, is amended to read as follows: Sec. 71.004. FAMILY VIOLENCE. "Family violence" means:

(1) an act by a member of a family or household against another member of the

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family or household that is intended to result in physical harm, bodily injury, assault, or sexual assault or that is a threat that reasonably places the member in fear of imminent physical harm, bodily injury, assault, or sexual assault, but does not include defensive measures to protect oneself;

(2) abuse, as that term is defined by Sections 261.001(1)(C), (E), (G), (H), (I), (J), [and] (K), and (M), by a member of a family or household toward a child of the family or household; or

(3) dating violence, as that term is defined by Section 71.0021.

SECTION 2. Section 162.005, Family Code, is amended by adding Subsection (c) to read as follows:

(c) The department shall ensure that each licensed child-placing agency, single source continuum contractor, or other person placing a child for adoption receives a copy of any portion of the report prepared by the department.

SECTION 3. Section 162.0062, Family Code, is amended by adding Subsection (a-1) to read as follows:

(a-1) If a child is placed with a prospective adoptive parent prior to adoption, the prospective adoptive parent is entitled to examine any record or other information relating to the child's health history, including the portion of the report prepared under Section 162.005 for the child that relates to the child's health. The department, licensed child-placing agency, single source continuum contractor, or other person placing a child for adoption shall inform the prospective adoptive parent of the prospective adoptive parent's right to examine the records and other information relating to the child's health history. The department, licensed child-placing agency, single source continuum contractor, or other person placing the child for adoption shall edit the records and information to protect the identity of the biological parents and any other person whose identity is confidential.

SECTION 4. Section 162.007, Family Code, is amended by amending Subsection (a) and adding Subsection (g) to read as follows:

No equivalent provision.

No equivalent provision.

No equivalent provision.

(a) The health history of the child must include information about:

(1) the child's health status at the time of placement;

(2) the child's birth, neonatal, and other medical, psychological, psychiatric, and dental history information, including to the extent known by the department:

(A) whether the child's birth mother consumed alcohol during pregnancy; and

(B) whether the child has been diagnosed with fetal alcohol spectrum disorder;

(3) a record of immunizations for the child; and

(4) the available results of medical, psychological, psychiatric, and dental examinations of the child.

(g) In this section, "fetal alcohol spectrum disorder" means any of a group of conditions that can occur in a person whose mother consumed alcohol during pregnancy.

SECTION 5. Section 261.001, Family Code, is amended by amending Subdivisions (1), (4), and (5) and adding Subdivision (3) to read as follows:

(1) "Abuse" includes the following acts or omissions by a person:

(A) mental or emotional injury to a child that results in an observable and material impairment in the child's growth, development, or psychological functioning;

(B) causing or permitting the child to be in a situation in which the child sustains a mental or emotional injury that results in an observable and material impairment in the child's growth, development, or psychological functioning;

(C) physical injury that results in substantial harm to the child, or the genuine threat of substantial harm from physical injury to the child, including an injury that is at variance with the history or explanation given and excluding an accident or reasonable discipline by a parent, guardian, or managing or possessory conservator that does not expose the child to a substantial risk of harm;

(D) failure to make a reasonable effort to prevent an action by another person that results in physical injury that results in substantial harm to the child;

(E) sexual conduct harmful to a child's mental, emotional, or physical welfare, including conduct that constitutes the

No equivalent provision.

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offense of continuous sexual abuse of young child or children under Section 21.02, Penal Code, indecency with a child under Section 21.11, Penal Code, sexual assault under Section 22.011, Penal Code, or aggravated sexual assault under Section 22.021, Penal Code;

(F) failure to make a reasonable effort to prevent sexual conduct harmful to a child;

(G) compelling or encouraging the child to engage in sexual conduct as defined by Section 43.01, Penal Code, including compelling or encouraging the child in a manner that constitutes an offense of trafficking of persons under Section 20A.02(a)(7) or (8), Penal Code, prostitution under Section 43.02(b), Penal Code, or compelling prostitution under Section 43.05(a)(2), Penal Code;

(H) causing, permitting, encouraging, engaging in, or allowing the photographing, filming, or depicting of the child if the person knew or should have known that the resulting photograph, film, or depiction of the child is obscene as defined by Section 43.21, Penal Code, or pornographic;

(I) the current use by a person of a controlled substance as defined by Chapter 481, Health and Safety Code, in a manner or to the extent that the use results in physical, mental, or emotional injury to a child;

(J) causing, expressly permitting, or encouraging a child to use a controlled substance as defined by Chapter 481, Health and Safety Code;

(K) causing, permitting, encouraging, engaging in, or allowing a sexual performance by a child as defined by Section 43.25, Penal Code; [or]

(L) knowingly causing, permitting, encouraging, engaging in, or allowing a child to be trafficked in a manner punishable as an offense under Section 20A.02(a)(5), (6), (7), or (8), Penal Code, or the failure to make a reasonable effort to prevent a child from being trafficked in a manner punishable as an offense under any of those sections; or

(M) forcing or coercing a child to enter into a marriage.

(3) "Exploitation" means the illegal or improper use of a child or of the resources of a child for monetary or personal benefit, profit, or gain by an employee, volunteer, or other individual working under the auspices

of a facility or program as further described by rule or policy.

(4) "Neglect":

(A) includes:

(i) the leaving of a child in a situation where the child would be exposed to a substantial risk of physical or mental harm, without arranging for necessary care for the child, and the demonstration of an intent not to return by a parent, guardian, or managing or possessory conservator of the child;

(ii) the following acts or omissions by a person:

(a) placing a child in or failing to remove a child from a situation that a reasonable person would realize requires judgment or actions beyond the child's level of maturity, physical condition, or mental abilities and that results in bodily injury or a substantial risk of immediate harm to the child;

(b) failing to seek, obtain, or follow through with medical care for a child, with the failure resulting in or presenting a substantial risk of death, disfigurement, or bodily injury or with the failure resulting in an observable and material impairment to the growth, development, or functioning of the child;

(c) the failure to provide a child with food, clothing, or shelter necessary to sustain the life or health of the child, excluding failure caused primarily by financial inability unless relief services had been offered and refused;

(d) placing a child in or failing to remove the child from a situation in which the child would be exposed to a substantial risk of sexual conduct harmful to the child; or

(e) placing a child in or failing to remove the child from a situation in which the child would be exposed to acts or omissions that constitute abuse under Subdivision (1)(E), (F), (G), (H), or (K) committed against another child; [or]

(iii) the failure by the person responsible for a child's care, custody, or welfare to permit the child to return to the child's home without arranging for the necessary care for the child after the child has been absent from the home for any reason, including having been in residential placement or having run away; or

(iv) a negligent act or omission by an employee, volunteer, or other individual working under the auspices of a facility or

program, including failure to comply with an individual treatment plan, plan of care, or individualized service plan, that causes or may cause substantial emotional harm or physical injury to, or the death of, a child served by the facility or program as further described by rule or policy; and

(B) does not include the refusal by a person responsible for a child's care, custody, or welfare to permit the child to remain in or return to the child's home resulting in the placement of the child in the conservatorship of the department if:

(i) the child has a severe emotional disturbance;

(ii) the person's refusal is based solely on the person's inability to obtain mental health services necessary to protect the safety and well-being of the child; and

(iii) the person has exhausted all reasonable means available to the person to obtain the mental health services described by Subparagraph (ii).

(5) "Person responsible for a child's care, custody, or welfare" means a person who traditionally is responsible for a child's care, custody, or welfare, including:

(A) a parent, guardian, managing or possessory conservator, or foster parent of the child;

(B) a member of the child's family or household as defined by Chapter 71;

(C) a person with whom the child's parent cohabits;

(D) school personnel or a volunteer at the child's school; [or]

(E) personnel or a volunteer at a public or private child-care facility that provides services for the child or at a public or private residential institution or facility where the child resides; or

(F) an employee, volunteer, or other person working under the supervision of a licensed or unlicensed child-care facility, including a family home, residential child-care facility, employer-based day-care facility, or shelter day-care facility, as those terms are defined in Chapter 42, Human Resources Code.

SECTION 6. Subchapter A, Chapter 261, Family Code, is amended by adding Section 261.004 to read as follows:

Sec. 261.004. TRACKING OF RECURRENCE OF CHILD ABUSE OR NEGLECT REPORTS. (a) The department

No equivalent provision.

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No equivalent provision.

shall collect and monitor data regarding repeated reports of abuse or neglect:

 involving the same child, including reports of abuse or neglect of the child made while the child resided in other households and reports of abuse or neglect of the child by different alleged perpetrators made while the child resided in the same household; or
 by the same alleged perpetrator.

(a-1) In monitoring reports of abuse or neglect under Subsection (a), the department shall group together separate reports involving differing children residing in the same household.

(b) The department shall consider any report collected under Subsection (a) involving any child or adult who is a part of a child's household when making case priority determinations or when conducting service or safety planning for the child or the child's family.

SECTION 7. Section 261.101(b), Family Code, is amended to read as follows:

(b) If a professional has cause to believe that a child has been abused or neglected or may be abused or neglected, or that a child is a victim of an offense under Section 21.11, Penal Code, and the professional has cause to believe that the child has been abused as defined by Section 261.001 [or 261.401], the professional shall make a report not later than the 48th hour after the hour the professional first suspects that the child has been or may be abused or neglected or is a victim of an offense under Section 21.11, Penal Code. A professional may not delegate to or rely on another person to make the report. In this subsection, "professional" means an individual who is licensed or certified by the state or who is an employee of a facility licensed, certified, or operated by the state and who, in the normal course of official duties or duties for which a license or certification is required, has direct contact with children. The term includes teachers, nurses, doctors, day-care employees, employees of a clinic or health care facility that provides reproductive services, juvenile probation officers, and juvenile detention or correctional officers.

SECTION 8. Section 263.401, Family Code, is amended to read as follows:

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Sec. 263.401. DISMISSAL AFTER ONE YEAR; NEW TRIALS; EXTENSION. (a) Unless the court has commenced the trial on the merits or granted an extension under Subsection (b) or (b-1), on the first Monday after the first anniversary of the date the court rendered a temporary order appointing the department as temporary managing conservator, the court's jurisdiction over [court shall dismiss] the suit affecting the parent-child relationship filed by the department that requests termination of the parent-child relationship or requests that the department be named conservator of the child is terminated and the suit is automatically dismissed without a court order.

(b) Unless the court has commenced the trial on the merits, the court may not retain the suit on the court's docket after the time described by Subsection (a) unless the court finds that extraordinary circumstances necessitate the child remaining in the temporary managing conservatorship of the department and that continuing the appointment of the department as temporary managing conservator is in the best interest of the child. If the court makes those findings, the court may retain the suit on the court's docket for a period not to exceed 180 days after the time described by Subsection If the court retains the suit on the (a). court's docket, the court shall render an order in which the court:

(1) schedules the new date on which the suit will be <u>automatically</u> dismissed if the trial on the merits has not commenced, which date must be not later than the 180th day after the time described by Subsection (a);

(2) makes further temporary orders for the safety and welfare of the child as necessary to avoid further delay in resolving the suit; and

(3) sets the trial on the merits on a date not later than the date specified under Subdivision (1).

(b-1) If, after commencement of the initial trial on the merits within the time required by Subsection (a) or (b), the court grants a motion for a new trial or mistrial, or the case is remanded to the court by an appellate court following an appeal of the court's final order, the court shall retain the suit on the court's docket and render an order in which

the court:

(1) schedules a new date on which the suit will be <u>automatically</u> dismissed if the new trial has not commenced, which must be a date not later than the 180th day after the date on which:

(A) the motion for a new trial or mistrial is granted; or

(B) the appellate court remanded the case;

(2) makes further temporary orders for the safety and welfare of the child as necessary to avoid further delay in resolving the suit; and

(3) sets the new trial on the merits for a date not later than the date specified under Subdivision (1).

(c) If the court grants an extension under Subsection (b) or (b-1) but does not commence the trial on the merits before the dismissal date, the <u>court's jurisdiction over</u> [court shall dismiss] the suit is terminated and the suit is automatically dismissed without a court order. The court may not grant an additional extension that extends the suit beyond the required date for dismissal under Subsection (b) or (b-1), as applicable.

SECTION 9. Section 264.018, Family Code, is amended by adding Subsections (d-1) and (d-2) to read as follows:

(d-1) Except as provided by Subsection (d-2), as soon as possible but not later than 24 hours after a change in placement of a child in the conservatorship of the department, the department shall give notice of the placement change to the managed care organization that contracts with the commission to provide health care services to the child under the STAR Health program. The managed care organization shall give notice of the placement change to the primary care physician listed in the child's health passport before the end of the second business day after the day the organization receives the notification from the department.

(d-2) In this subsection, "catchment area" has the meaning assigned by Section 264.152. In a catchment area in which community-based foster care has been implemented, the single source continuum contractor that has contracted with the commission to provide foster care services in that catchment area shall, as soon as

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possible but not later than 24 hours after a change in placement of a child in the conservatorship of the department, give notice of the placement change to the managed care organization that contracts with the commission to provide health care services to the child under the STAR Health program. The managed care organization shall give notice of the placement change to the child's primary care physician in accordance with Subsection (d-1).

SECTION 10. (a) Subchapter B, Chapter 264, Family Code, is amended by adding Section 264.1076 to read as follows:

Sec. 264.1076. MEDICAL EXAMINATION REQUIRED. (a) This section applies only to a child who has been taken into the conservatorship of the department and remains in the conservatorship of the department for more than three business days.

(b) The department shall ensure that each child described by Subsection (a) is examined and receives a mental health screening conducted by a physician or other health care provider authorized under state law to conduct medical examinations not later than the end of:

(1) the third business day after the date the child enters the conservatorship of the department; or

(2) the fifth business day after the date the child enters the conservatorship of the department, if the child is located in a rural area, as that term is defined by Section 845.002, Insurance Code.

(c) Whenever possible, the department shall schedule the medical examination and mental health screening for a child before the last business day of the appropriate time frame provided under Subsection (b).

(d) The department shall collaborate with the commission and relevant medical practitioners to develop guidelines for the medical examination and mental health screening conducted under this section, including guidelines on the components to be included in the examination and the screening.

(e) Not later than December 31, 2019, the department shall submit a report to the standing committees of the house of representatives and the senate with primary jurisdiction over child protective services SECTION 1. Section 264.124, Family Code, is amended.

No equivalent provision.

and foster care evaluating the statewide implementation of the medical examination and mental health screening required by this section. The report must include the level of compliance with the requirements of this section in each region of the state.

(b) Section 264.1076, Family Code, as added by this section, applies only to a child who enters the conservatorship of the Department of Family and Protective Services on or after the effective date of this Act. A child who enters the conservatorship of the Department of Family and Protective Services before the effective date of this Act is governed by the law in effect on the date the child entered the conservatorship of the department, and the former law is continued in effect for that purpose.

(c) The Department of Family and Protective Services shall implement Section 264.1076, Family Code, as added by this section, not later than December 31, 2018.

SECTION 11. Substantially the same as introduced version.

SECTION 12. (a) Subchapter B, Chapter 264, Family Code, is amended by adding Sections 264.1261 and 264.128 to read as follows:

Sec. 264.1261. FOSTER CARE CAPACITY NEEDS PLAN. (a) In this section, "community-based foster care" has the meaning assigned by Section 264.152.

(b) Appropriate department management personnel from a child protective services region in which community-based foster care has not been implemented, in collaboration with foster care providers, faith-based entities, and child advocates in that region, shall use data collected by the department on foster care capacity needs and availability of each type of foster care and kinship placement in the region to create a plan to address the substitute care capacity needs in the region. The plan must identify both short-term and long-term goals and strategies for addressing those capacity needs.

(c) A foster care capacity needs plan developed under Subsection (b) must be:

(1) submitted to and approved by the commissioner; and

(2) updated annually.

(d) The department shall publish each

Code, is amended by adding Subchapter B-1 to read as follows: <u>SUBCHAPTER B-1.</u> <u>COMMUNITY-</u> BASED FOSTER CARE

SECTION 2. (a) Chapter 264, Family

Sec. 264.151. LEGISLATIVE FINDINGS AND INTENT. (a) The legislature finds that:

(1) for more than 30 years, the child welfare system in Texas has been centralized and managed by statutes and rules that impose a uniform system on communities statewide and ignore the fundamental differences between regions;

(2) in order for the department to effectively provide child welfare services, as required by state and federal law, fundamental structural changes to the provision of child protective and welfare services are necessary;

(3) child welfare services that are community-based and family-centered, are monitored by community stakeholders, and have effective accountability standards regarding performance outcomes and practices have been found to lead to better outcomes for children who are victims of initial foster care capacity needs plan and each annual update to a plan on the department's Internet website.

Sec. 264.128. SINGLE CHILD PLAN OF SERVICE INITIATIVE. (a) In this section, "community-based foster care" has the meaning assigned by Section 264.152.

(b) In regions of the state where community-based foster care has not been implemented, the department shall:

(1) collaborate with child-placing agencies to implement the single child plan of service model developed under the single child plan of service initiative; and

(2) ensure that a single child plan of service is developed for each child in foster care in those regions.

(b) Notwithstanding Section 264.128(b), Family Code, as added by this section, the Department of Family and Protective Services shall develop and implement a single child plan of service for each child in foster care in a region of the state described by that section not later than September 1, 2017.

SECTION 13. (a) Chapter 264, Family Code, is amended by adding Subchapter B-1 to read as follows:

SUBCHAPTER B-1. COMMUNITY-BASED FOSTER CARE

Sec. 264.151. LEGISLATIVE FINDINGS AND INTENT. (a) The legislature finds that:

(1) for more than 30 years, the child welfare system in Texas has been centralized and managed by statutes and rules that impose a uniform system on communities statewide and ignore the fundamental differences between regions;

(2) in order for the department to effectively provide child welfare services, as required by state and federal law, the department shall consider and implement fundamental structural changes to the provision of child protective and welfare services;

(3) child welfare services that are community-based and family-centered, are monitored by community stakeholders, and have effective accountability standards regarding performance outcomes and practices have been found to lead to better outcomes for children who are victims of

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abuse and neglect;

(4) community-based care would align outcomes to assist the state in achieving the state's goal of substantial gains in comparison to other states under federal metrics regarding outcomes in child safety, permanency, and well-being; and

(5) it should be a goal for the state to achieve a top 10 ranking in the key measures employed by the Administration for Children and Families in the United States Department of Health and Human Services after full implementation of community-based care.

(b) It is the intent of the legislature that the department contract with community-based, nonprofit entities to provide child welfare services, including providing direct case management to ensure child safety, permanency, and well-being, in accordance with state and federal child welfare goals.

(c) It is the intent of the legislature that the provision of community-based foster care for children be implemented with measurable goals relating to:

(1) the safety of children in placements;

(2) the placement of children in each child's home community;

(3) the provision of services to children in the least restrictive environment possible

and with minimal placement changes;

(4) the maintenance of contact between children and their families and other important persons;

(5) the placement of children with siblings;

(6) the provision of services that respect each child's culture;

(7) the preparation of children and youth in foster care for adulthood;

(8) the 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; and

(9) the participation by children and youth in making decisions relating to their own lives. abuse and neglect; and

(4) community-based foster care would align outcomes to assist the state in achieving the state's goal of substantial gains regarding performance outcomes in child safety, permanency, and well-being.

(b) It is the intent of the legislature that the department contract with community-based, nonprofit entities that have the ability to provide child welfare services. The services provided by the entities must include direct case management to ensure child safety, permanency, and well-being, in accordance with state and federal child welfare goals.

(c) It is the intent of the legislature that the provision of community-based foster care for children be implemented with measurable goals relating to:

(1) the safety of children in placements;

(2) the placement of children in each child's home community;

(3) the provision of services to children in the least restrictive environment possible and, if possible, in a family home environment;

(4) minimal placement changes for children;

(5) the maintenance of contact between children and their families and other important persons;

(6) the placement of children with siblings;

(7) the provision of services that respect each child's culture;

(8) the preparation of children and youth in foster care for adulthood;

(9) the 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) the participation by children and youth in making decisions relating to their own lives;

(11) the reunification of children with the biological parents of the children when possible; and

(12) the promotion of the placement of

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Sec. 264.152. DEFINITIONS. In this subchapter:

(1) "Babysitter" means a person who is not the foster parent of the child and who provides temporary care for the child for not more than 12 hours.

(2) "Catchment area" means a geographic service area for providing child protective services that is identified as part of the community-based foster care redesign.

(3) "Community-based foster care" means the redesigned foster care services system required by Chapter 598 (S.B. 218), Acts of the 82nd Legislature, Regular Session, 2011.
(4) "Overnight care provider" means a children with relative or kinship caregivers if reunification is not possible.

Sec. 264.152. DEFINITIONS. In this subchapter:

(1) "Alternative caregiver" means a person who is not the foster parent of the child and who provides temporary care for the child for more than 12 hours but less than 60 days.

(2) "Case management" means the provision of case management services to a child for whom the department has been appointed temporary or permanent managing conservator or the child's family, relative or kinship caregivers, a young adult in extended foster care, or a child who has been placed in the catchment area through the Interstate Compact on the Placement of Children, and includes:

(A) caseworker visits with the child;

(B) family and caregiver visits;

(C) convening and conducting permanency planning meetings;

(D) the development and revision of the child and family plans of service, including a permanency plan and goals for a child or young adult in care;

(E) the coordination and monitoring of services required by the child and the child's family;

(F) the assumption of court-related duties regarding the child, including:

(i) providing any required notifications or consultations;

(ii) preparing court reports;

(iii) attending judicial and permanency hearings, trials, and mediations;

(iv) complying with applicable court orders; and

(v) ensuring the child is progressing toward the goal of permanency within state and federally mandated guidelines; and

(G) any other function or service that the department determines necessary to allow a single source continuum contractor to assume responsibility for case management.

(3) "Catchment area" means a geographic service area for providing child protective services that is identified as part of the community-based foster care redesign.

(4) "Community-based foster care" means the redesigned foster care services system required by Chapter 598 (S.B. 218), Acts of the 82nd Legislature, Regular Session, 2011.

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person who is not the foster parent of the child and who provides temporary care for the child for more than 12 hours but not more than 72 hours.

(5) "Respite care provider" means a person who is not the foster parent of the child and who provides the temporary care for the child for more than 72 hours but less than 40 days unless the care is provided during a department investigation of a service provider for child abuse or neglect.

No equivalent provision.

Sec. 264.154. READINESS REVIEW PROCESS FOR COMMUNITY-BASED FOSTER CARE CONTRACTOR. (a) The department shall develop a formal review process to assess the ability of a single source continuum contractor to satisfy the responsibilities and administrative requirements of delivering foster care services, including the contractor's ability to provide:

(1) placement services for children and families;

(2) case management services for children and families;

(3) evidence-based, promising practice, or evidence-informed supports for children and families; and

(4) sufficient available capacity for inpatient and outpatient services and supports for children at all service levels who have previously been placed in the catchment area.

(b) As part of the readiness review process, the single source continuum contractor must prepare a plan detailing the methods by which the contractor will avoid or eliminate conflicts of interest. The department may not transfer services to the contractor until the department has determined the plan is adequate.

(c) The department must develop the review process under Subsection (a) before the department may expand communitybased foster care outside of the initial catchment areas where community-based foster care has been implemented.

(d) The department must conduct a readiness review for a single source continuum contractor before the transfer of placement services to the contractor and before the transfer of case management services to the contractor. The department may not transfer those services to a

Sec. 264.154. STATEWIDE EXPANSION OF COMMUNITY-BASED FOSTER CARE. (a) The department shall, as provided by this section, expand community-based foster care until it has been implemented throughout this state.

(b) Not later than December 31, 2019, the department shall:

(1) identify two catchment areas in the state that are best suited to implement community-based foster care;

(2) create an implementation plan for those catchment areas that includes a timeline for implementation and for the transfer of case management services; and

(3) implement community-based foster care in those catchment areas.

(c) Following the selection of the catchment areas under Subsection (b), the department shall, not later than December 31 of each year, and based on the availability of funding:

 identify at least one additional catchment area that is prepared to implement community-based foster care;
 provide a report to the legislature that details the selected catchment area; and

(3) begin implementing community-based foster care in that area.

contractor unless the readiness review demonstrates that the contractor is able to adequately deliver the services.

Sec. 264.155. EXPANSION OF COMMUNITY-BASED FOSTER CARE.

(a) Not later than December 31, 2019, the department shall:

(1) identify not more than eight catchment areas in the state that are best suited to implement community-based foster care of which not more than two catchment areas may be identified as best suited to implement the transfer of case management services to a single source continuum contractor;

(2) create an implementation plan for those catchment areas that includes a timeline for implementation;

(3) following the readiness review process under Section 264.154 and subject to the availability of funds, implement community-based foster care in those catchment areas; and

(4) following the implementation of community-based foster care services in those catchment areas, evaluate the implementation process and single source continuum contractor performance in each catchment area.

(b) Following the selection of the catchment areas under Subsection (a), the department shall annually, based on the availability of funding:

(1) provide a report to the legislature that details the readiness of any remaining catchment areas in which community-based foster care services have not been implemented; and

(2) subject to the availability of funds, the readiness of the catchment areas, and the feasibility of implementing communitybased foster care in those areas, begin implementing community-based foster care in those areas in accordance with the timeline developed for those areas under

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(d) In expanding community-based foster care, the department may change the geographic boundaries of catchment areas as necessary to align with specific communities.

(e) The department shall ensure the continuity of services for children and families during the transition period to community-based foster care in a catchment area.

Sec. 264.155. COMMUNITY ENGAGEMENT OVERSIGHT GROUP. (a) The department shall establish a community engagement oversight group in each catchment area to assist with implementing community-based foster care. Subsection (a)(2) and the readiness review process developed under Section 264.154. (c) In expanding community-based foster care, the department may change the geographic boundaries of catchment areas as necessary to align with specific communities. (d) The department shall ensure the continuity of services for children and families during the transition period to community-based foster care in a catchment area. In implementing community-based (e) foster care in a catchment area, the department may not transfer case management services to a single source continuum contractor in that catchment area until the department has successfully completed the transfer of placement services to the contractor. Sec. 264.156. COMMUNITY ENGAGEMENT GROUP. (a) The department shall create a community engagement group in each catchment area to assist with the implementation of community-based foster care. The department may create more than one community engagement group in a catchment area, as appropriate. Membership in a community engagement group may include: (1) representatives from: (A) the department; (B) the judiciary; (C) school districts in the catchment area; (D) law enforcement; (E) the local mental health authority; (F) the children's advocacy center, if applicable; (G) a child-placing agency; and (H) child and family service providers, including prevention service providers; (2) a court-appointed volunteer advocate, if available; (3) a parent or a person who specializes in parental rights, including a family law attorney; and (4) community leaders from the catchment area, including leaders from local political subdivisions. (b) The department shall adopt rules governing community engagement groups and the maximum number of members in a group.

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services.

Sec. 264.157. REQUIRED CONTRACT PROVISIONS. A contract with a single source continuum contractor to provide foster care services in a catchment area must include provisions that:

(1) specify performance outcomes and financial incentives for exceeding any specified performance outcomes; and

entity must be a nonprofit entity that:

(1) is licensed as a service provider by the department;

CONTRACTOR. To be eligible to enter into a contract with the commission to serve as a single source continuum contractor to provide foster care service delivery, an

Sec. 264.156. QUALIFICATIONS OF

SINGLE SOURCE CONTINUUM

(2) has an organizational mission focused on child welfare; and

(3) has the ability to offer case management

a catchment area, including child welfare boards, may request to be designated by the department as the community engagement group for that catchment area.

(d) The community engagement group shall:

(1) provide feedback to the department on the implementation of community-based foster care in the catchment area and the ongoing operation of community-based foster care in the catchment area;

(2) identify and report problems arising from the implementation process to the department;

(3) identify, develop, promote, or facilitate the use of local resources, including prevention and early intervention resources, to supplement community-based foster care services; and

(4) serve as a facilitator for integrating the voluntary participation of local organizations that provide family and child welfare services into community-based foster care.

(e) Chapter 551, Government Code, applies to a community engagement group.

Sec. 264.157. QUALIFICATIONS OF SINGLE SOURCE CONTINUUM CONTRACTOR. To be eligible to enter into a contract with the department to serve as a single source continuum contractor to provide foster care service delivery, an entity must be a nonprofit or governmental entity that:

(1) is licensed as a service provider by the department;

(2) has an organizational mission and has demonstrated experience in the delivery of services to children and families; and

(3) has the ability to provide all of the case management and placement services and perform all of the duties of a single source continuum contractor required under this subchapter or that can provide a plan to gain that ability during the implementation of community-based foster care in a catchment area.

Sec. 264.158. REQUIRED CONTRACT PROVISIONS. A contract with a single source continuum contractor to provide foster care services in a catchment area must include provisions that:

(1) specify performance outcomes and financial incentives for exceeding any specified performance outcomes;

(2) ensure that the single source continuum contractor accurately determines the service level for each child receiving services from the contractor and authorize the department to adjust the daily residential payment rate, as necessary based on the child's level of service.

Sec. 264.158. DUTIES OF SINGLE SOURCE CONTINUUM CONTRACTOR. (a) A single source continuum contractor shall create a single process for the training and use of respite care providers for all child-placing agencies in a catchment area.

The single process must:

(1) use a single form for approving respite care providers; and

(2) ensure that respite care providers meet the minimum standards for providers specified by the department.

(b) A single source continuum contractor shall ensure that babysitters and overnight care providers are able to provide services to all child-placing agencies operating in the catchment area. A babysitter or overnight care provider may not provide services if, during the preceding three years, the babysitter or overnight care provider has been the subject of any complaint or has violated any licensing rules or standards.

(c) A single source continuum contractor that provides foster care services in a catchment area may enter into memorandums of understanding with single source continuum contractors providing foster care services in other catchment areas to allow respite care providers, babysitters, and overnight care providers to provide services in multiple catchment areas. (2) establish conditions for the single source continuum contractor's access to relevant department data and require the participation of the contractor in the data access and standards governance council created under Section 264.159;

(3) require the single source continuum contractor to create a single process for the training and use of alternative caregivers for all child-placing agencies in the catchment area to facilitate reciprocity of licenses for alternative caregivers between agencies, including respite and overnight care providers, as those terms are defined by department rule; and

(4) require the single source continuum contractor to maintain a diverse network of service providers that offer a range of foster capacity options and that can accommodate children from diverse cultural backgrounds.

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Sec.264.159.DATAACCESSANDSTANDARDSGOVERNANCE

COUNCIL. (a) The department shall create a data access and standards governance council to develop protocols for access by single source continuum contractors to the department's data to allow the contractors to perform case management functions.

(b) The department shall develop rules and processes for the operation of the council. Each single source continuum contractor that has entered into a contract with the department to provide services under this subchapter shall participate in the council. The council may also include:

(1) representatives of entities that manage court proceedings:

(2) the courts;

(3) the department;

(4) health care providers; and

(5) any other entities the department considers necessary.

(c) The council shall:

(1) develop protocols for the access, management, security, and retention of case data that is shared between the department and a single source continuum contractor;

(2) approve any changes to protocols at the request of a service provider or the department; and

(3) conduct any other additional duties related to data sharing protocols as considered necessary by the department.

(d) The department may assign the duties of the council to any existing office or division of the department with functions similar to the duties of the council. Each single source continuum contractor and any additional entities as described by Subsection (b) shall participate in the development of protocols and any other duties assigned under this subsection.

Sec. 264.160. TRANSFER OF CASE MANAGEMENT SERVICES TO SINGLE SOURCE CONTINUUM CONTRACTOR. (a) In each initial catchment area where community-based foster care has been implemented or a contract with a single source continuum contractor has been executed before June 1, 2017, the department shall transfer to the single source continuum contractor providing services in that area:

(1) the case management of children and families receiving services from that

contractor; and

(2) family reunification support services to be provided after a child receiving services from the contractor is returned to the child's family for the period of time ordered by the court.

(b) The department shall collaborate with a single source continuum contractor to establish an initial case transfer planning team to:

(1) address any necessary data transfer;

(2) establish file transfer procedures; and
 (3) notify relevant persons regarding the transfer of services to the contractor.

Sec. 264.161. LIABILITY INSURANCE REQUIREMENTS. A single source continuum contractor and any subcontractor of the single source continuum contractor providing community-based foster care services shall maintain minimum insurance coverage, as required in the contract with the department, to minimize the risk of insolvency and protect against damages. The executive commissioner may adopt rules to implement this section.

Sec. 264.162. REVIEW OF CONTRACTOR PERFORMANCE. (a) The department shall develop a formal review process to evaluate a single source continuum contractor's implementation of placement services and case management services in a catchment area.

(b) The department shall conduct the review for a single source continuum contractor after the contractor completes the implementation of placement services in a catchment area, and after the contractor completes the implementation of case management services in the catchment area.

Sec. 264.163. NOTICE REQUIRED FOR EARLY TERMINATION OF CONTRACT. (a) A single source continuum contractor may terminate a contract entered into under this subchapter by providing notice to the department of the contractor's intent to terminate the contract not later than the 90th day before the date of the termination.

(b) The department may terminate a contract entered into with a single source continuum contractor under this subchapter by providing notice to the contractor of the department's intent to terminate the contract not later than the 30th day before the date of termination.

Sec. 264.159. CONTINGENCY PLAN IN EVENT OF EARLY CONTRACT TERMINATION. In each catchment area in which community-based foster care is implemented, the department shall create a contingency plan to ensure the continuity of services for children and families in the catchment area in the event of an early termination of the contract with the single source continuum contractor providing foster care services in that catchment area.

Sec. 264.160. ANNUAL REPORTING. Not later than January 31 of each year, the department shall provide to the speaker of the house, the lieutenant governor, the standing committees of the legislature with jurisdiction over foster care, and the Legislative Budget Board a report containing the data indicators submitted during the previous calendar year to the United States Department of Health and Human Services through the federal adoption and foster care analysis and reporting system and the national child abuse and neglect data system. The department shall also make the data indicators available on the department's Internet website.

Sec. 264.164. CONTINGENCY PLAN IN OF EVENT EARLY CONTRACT TERMINATION. (a) In each catchment area in which community-based foster care is implemented, the department shall create a contingency plan to ensure the continuity of services for children and families in the catchment area in the event of an early termination of the contract with the single source continuum contractor providing foster care services in that catchment area. (b) If a single source continuum contractor gives notice to the department of an early contract termination, the department may enter into a contract with a different contractor for the sole purpose of assuming the contract that is being terminated.

Sec. 264.165. REVIEW OF CONTRACTOR DECISIONS BY DEPARTMENT. (a) Notwithstanding any other provision of this subchapter governing the transfer of case management authority to a single source continuum contractor, the department shall review a contractor's decision with respect to a child's permanency goal. The department must approve or disapprove a contractor's recommended permanency goal for a child not later than 72 hours after the department receives the recommendation from the contractor.

(b) Subsection (a) may not be construed to limit or restrict the authority of the department to:

(1) include necessary oversight measures and review processes to maintain compliance with federal and state requirements in a contract with a single

source continuum contractor; or

(2) attend court proceedings related to a child in the conservatorship of the department, including any hearings, trials, or mediations.

(c) The department shall develop an internal dispute resolution process to decide disagreements between a single source continuum contractor and the department.

Sec. 264.166. STATUTORY DUTIES ASSUMED BY CONTRACTOR. Except as provided by Section 264.167, a single source continuum contractor providing foster care services in a catchment area must, either directly or through subcontractors, assume the statutory duties of the department in connection with the delivery of foster care services in that catchment area.

Sec. 264.167. CONTINUING DUTIES OF DEPARTMENT. In a catchment area in which a single source continuum contractor is providing family-based safety services, community-based foster care services, or integrated care coordination, legal representation of the department in an action under this code shall be provided in accordance with Section 264.009.

Sec. 264.168. CONFIDENTIALITY. (a) The records of a single source continuum contractor relating to the provision of community-based foster care services in a catchment area are subject to Chapter 552, Government Code, in the same manner as the records of the department are subject to that chapter.

(b) Subchapter C, Chapter 261, regarding the confidentiality of certain case information, applies to the records of a single source continuum contractor in relation to the provision of services by the contractor.

Sec. 264.169. ATTORNEY-CLIENT PRIVILEGE. An employee, agent, or representative of a single source continuum contractor is considered to be a client's representative of the department for purposes of the privilege under Rule 503, Texas Rules of Evidence, as that privilege applies to communications with a prosecuting attorney or other attorney representing the department, or the attorney's representatives, in a proceeding under this subtitle.

Sec. 264.170. CHILD PROTECTIVE

SERVICES LEGISLATIVE OVERSIGHT COMMITTEE. (a) In this section, "committee" means the Child Protective Services Legislative Oversight Committee established under this section.

(b) The Child Protective Services Legislative Oversight Committee is created to facilitate the transfer of functions from the department to single source continuum contractors under this subchapter with minimal negative effect on the delivery of services to which those functions relate.

(c) The committee is composed of 11 voting members, as follows:

(1) four members of the senate, appointed by the lieutenant governor;

(2) four members of the house of representatives, appointed by the speaker of the house of representatives; and

(3) three members of the public, appointed by the governor.

(d) The commissioner of the department serves as an ex officio, nonvoting member of the committee.

(e) A member of the committee serves at the pleasure of the appointing official.

(f) The lieutenant governor and the speaker of the house of representatives shall each designate a presiding co-chair from among their respective appointments.

(g) A member of the committee may not receive compensation for serving on the committee but is entitled to reimbursement for travel expenses incurred by the member while conducting the business of the committee as provided by the General Appropriations Act.

(h) The committee shall:

(1) facilitate the transfer of functions from the department to single source continuum contractors with minimal negative effect on the delivery of services to which those functions relate;

(2) with assistance from the department, advise the commissioner of the department concerning:

(A) the functions to be transferred under this subchapter and the funds and obligations that are related to the functions;

(B) the transfer of the functions and related records, funds, and obligations by the department that are required by this subchapter; and

(C) the reorganization of the department's administrative structure as required by the

implementation of community-based foster care under this subchapter and other provisions enacted by the 85th Legislature that become law; and

(3) meet at least semiannually at the call of either chair, in addition to meeting at other times as determined appropriate by either chair.

(i) Chapter 551, Government Code, applies to the committee.

(j) The committee shall submit a report to the governor, lieutenant governor, speaker of the house of representatives, and legislature not later than December 1 of each even-numbered year. The report must include an update on the progress of and issues related to:

(1) the implementation of community-based foster care, including the need for any additional statutory changes required to ensure the achievement of the stated purposes of this subchapter; and

(2) the reorganization of the department's administrative structure as necessary during the implementation of community-based foster care under this subchapter and other provisions enacted by the 85th Legislature that become law.

Sec. 264.171. PILOT PROGRAM FOR FAMILY-BASED SAFETY SERVICES. (a) In this section, "case management services" means the direct delivery and coordination of a network of formal and informal activities and services in a catchment area where the department has entered into, or is in the process of entering into, a contract with a single source continuum contractor to provide familybased safety services and case management and includes:

(1) caseworker visits with the child and all caregivers;

(2) family visits;

(3) family group conferencing or family group decision-making;

(4) development of the family plan of service:

(5) monitoring, developing, securing, and coordinating services;

(6) evaluating the progress of children, caregivers, and families receiving services;

(7) assuring that the rights of children, caregivers, and families receiving services are protected;

(8) duties relating to family-based safety

services ordered by a court, including:

(A) providing any required notifications or consultations;

(B) preparing court reports;

(C) attending judicial hearings, trials, and mediations;

(D) complying with applicable court orders; and

(E) ensuring the child is progressing toward the goal of permanency within state and federally mandated guidelines; and

(9) any other function or service that the department determines is necessary to allow a single source continuum contractor to assume responsibility for case management.

(b) The department shall develop and implement in two child protective services regions of the state a pilot program under which the commission contracts with a single nonprofit entity that has an organizational mission focused on child welfare or a governmental entity in each region to provide family-based safety services and case management for children and families receiving family-based safety services. The contract must include a transition plan for the provision of services that ensures the continuity of services for children and families in the selected regions. (c) The contract with an entity must include performance-based provisions that require the entity to achieve the following outcomes for families receiving services from the entity:

(1) a decrease in recidivism;

(2) an increase in protective factors; and

(3) any other performance-based outcome specified by the department.

(d) The commission may only contract for implementation of the pilot program with entities that the department considers to have the capacity to provide, either directly or through subcontractors, an array of evidence-based, promising practice, or evidence-informed services and support programs to children and families in the selected child protective services regions.

(e) The contracted entity must perform all statutory duties of the department in connection with the delivery of the services specified in Subsection (b).

(f) The contracted entity must give preference for employment to employees of the department:

(1) whose position at the department is

impacted by the implementation of community-based foster care; and

(2) who are considered by the department to be employees in good standing.

(g) Not later than December 31, 2018, the department shall report to the appropriate standing committees of the legislature having jurisdiction over child protective services and foster care matters on the progress of the pilot program. The report must include:

(1) an evaluation of each contracted entity's success in achieving the outcomes described by Subsection (c); and

(2) a recommendation as to whether the pilot program should be continued, expanded, or terminated.

(b) Section 264.126, Family Code, is transferred to Subchapter B-1, Chapter 264, Family Code, as added by this section, redesignated as Section 264.153, Family Code, and amended to read as follows:

Sec. <u>264.153</u> [264.126]. <u>COMMUNITY-</u> <u>BASED FOSTER CARE</u> [REDESIGN] IMPLEMENTATION PLAN. (a) The department shall develop and maintain a plan for implementing <u>community-based</u> [the] foster care [redesign required by <u>Chapter 598 (S.B. 218), Acts of the 82nd</u> <u>Legislature, Regular Session, 2011</u>]. The plan must:

(1) describe the department's expectations, goals, and approach to implementing <u>community-based</u> foster care [redesign];

(2) include a timeline for implementing <u>community-based</u> [the] foster care [redesign] throughout this state, a timeline for the transfer of case management <u>services</u>, and any limitations related to the implementation;

(3) include [, and] a progressive intervention plan and a contingency plan to provide continuity of foster care service delivery if a contract with a single source continuum contractor ends prematurely;

(4) include a provision establishing the required time for a contractor to provide notice of contract termination;

(5) [(3)] delineate and define the case management roles and responsibilities of the department and the department's contractors and the duties, employees, and related funding that will be transferred to the contractor by the department;

(6) [(4)] identify any training needs and

(b) Section 264.126, Family Code, is transferred to Subchapter B-1, Chapter 264, Family Code, as added by this section, redesignated as Section 264.153, Family Code, and amended to read as follows:

Sec. <u>264.153</u> [264.126]. <u>COMMUNITY-BASED FOSTER CARE</u> [REDESIGN] IMPLEMENTATION PLAN. (a) The department shall develop and maintain a plan for implementing <u>community-based</u> [the] foster care [redesign required by Chapter 598 (S.B. 218), Acts of the 82nd Legislature, Regular Session, 2011]. The plan must:

(1) describe the department's expectations, goals, and approach to implementing <u>community-based</u> foster care [redesign];

(2) include a timeline for implementing <u>community-based</u> [the] foster care [redesign] throughout this state, any limitations related to the implementation, and a progressive intervention plan and a contingency plan to provide continuity of foster care service delivery if a contract with a single source continuum contractor ends prematurely;

(3) delineate and define the case management roles and responsibilities of the department and the department's contractors and the duties, employees, and related funding that will be transferred to the contractor by the department;

(4) identify any training needs and include

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long-range and continuous plans for training and cross-training staff;

(5) include a plan for evaluating the costs and tasks associated with each contract procurement, including the initial and ongoing contract costs for the department and contractor;

(6) include the department's contract monitoring approach and a plan for evaluating the performance of each contractor and the <u>community-based</u> foster care [redesign] system as a whole that includes an independent evaluation of processes and outcomes; and

(7) include a report on transition issues resulting from implementation of <u>community-based</u> [the] foster care [redesign].

(b) The department shall annually:

(1) update the implementation plan developed under this section and post the updated plan on the department's Internet website; and

(2) post on the department's Internet website the progress the department has made toward its goals for implementing <u>community-based</u> [the] foster care [redesign].

No equivalent provision.

No equivalent provision.

include long-range and continuous plans for training and cross-training staff;

(7) [(5)] include a plan for evaluating the costs and tasks associated with each contract procurement, including the initial and ongoing contract costs for the department and contractor;

(8) [(6)] include the department's contract monitoring approach and a plan for evaluating the performance of each contractor and the <u>community-based</u> foster care [redesign] system as a whole that includes an independent evaluation of <u>each</u> <u>contractor's</u> processes and <u>fiscal and</u> <u>qualitative</u> outcomes; and

(9) [(7)] include a report on transition issues resulting from implementation of <u>community-based</u> [the] foster care [redesign].

(b) The department shall annually:

(1) update the implementation plan developed under this section and post the updated plan on the department's Internet website; and

(2) post on the department's Internet website the progress the department has made toward its goals for implementing <u>community-based</u> [the] foster care [redesign].

SECTION 14. Subchapter A, Chapter 265, Family Code, is amended by adding Section 265.0042 to read as follows:

Sec. 265.0042. COLLABORATION WITH INSTITUTIONS OF HIGHER Subject to the EDUCATION. (a) availability of funds, the Health and Human Services Commission, on behalf of the department, shall enter into agreements with institutions of higher education to conduct efficacy reviews of any prevention and early intervention programs that have not previously been evaluated for effectiveness through a scientific research evaluation process.

(b) Subject to the availability of funds, the department shall collaborate with an institution of higher education to create and track indicators of child well-being to determine the effectiveness of prevention and early intervention services.

SECTION 15. Section 266.012, Family Code, is amended by adding Subsection (c) to read as follows:

(c) A single source continuum contractor under Subchapter B-1, Chapter 264, providing therapeutic foster care services to a child shall ensure that the child receives a comprehensive assessment under this section at least once every 90 days.

No equivalent provision.

SECTION 16. (a) Section 531.02013, Government Code, is amended to read as follows:

Sec. 531.02013. FUNCTIONS REMAINING WITH CERTAIN AGENCIES. The following functions are not subject to transfer under Sections 531.0201 and 531.02011:

(1) the functions of the Department of Family and Protective Services, including the statewide intake of reports and other information, related to the following:

(A) child protective services, including services that are required by federal law to be provided by this state's child welfare agency;

(B) adult protective services, other than investigations of the alleged abuse, neglect, or exploitation of an elderly person or person with a disability:

(i) in a facility operated, or in a facility or by a person licensed, certified, or registered, by a state agency; or

(ii) by a provider that has contracted to provide home and community-based services; [and]

(C) prevention and early intervention services; and

(D) investigations of alleged abuse, neglect, or exploitation occurring at a child-care facility, as that term is defined in Section 40.042, Human Resources Code; and

(2) the public health functions of the Department of State Health Services, including health care data collection and maintenance of the Texas Health Care Information Collection program.

Notwithstanding any provision of (b) Subchapter A-1, Chapter 531, Government Code, or any other law, the responsibility for conducting investigations of reports of abuse, neglect, or exploitation occurring at a child-care facility, as that term is defined in Section 40.042, Human Resources Code, as added by this Act, may not be transferred to the Health and Human Services Commission and remains the responsibility of the Department of Family and Protective

Services.

No equivalent provision.

(c) As soon as possible after the effective date of this section, the commissioner of the Department of Family and Protective Services shall transfer the responsibility for conducting investigations of reports of abuse, neglect, or exploitation occurring at a child-care facility, as that term is defined in Section 40.042, Human Resources Code, as added by this Act, to the child protective services division of the department. The commissioner shall transfer appropriate investigators and staff as necessary to implement this section.

(d) This section takes effect immediately if this Act receives a vote of two-thirds of all the members of each house, as provided by Section 39, Article III, Texas Constitution. If this Act does not receive the vote necessary for this section to take immediate effect, this section takes effect on the 91st day after the last day of the legislative session.

SECTION 17. (a) Subchapter A, Chapter 533, Government Code, is amended by adding Section 533.0054 to read as follows: Sec. 533.0054. HEALTH SCREENING ENROLLEE REQUIREMENTS FOR UNDER STAR HEALTH PROGRAM. (a) A managed care organization that contracts with the commission to provide health care services to recipients under the STAR Health program must ensure that enrollees receive a complete early and periodic screening, diagnosis, and treatment checkup accordance with the requirements in specified in the contract between the managed care organization and the commission.

(b) The commission shall include a provision in a contract with a managed care organization to provide health care services to recipients under the STAR Health program specifying progressive monetary penalties for the organization's failure to comply with Subsection (a).

The Health and Human Services (b) Commission shall, in a contract for the provision of health care services under the STAR Health program between the commission and a managed care organization Chapter under 533. Government Code, that is entered into, renewed, or extended on or after the

effective date of this section, require that the managed care organization comply with Section 533.0054, Government Code, as added by this section.

(c) The Health and Human Services Commission may not impose a monetary penalty for noncompliance with a contract provision described by Section 533.0054(b), Government Code, as added by this section, until September 1, 2018.

(d) If before implementing Section 533.0054, Government Code, as added by this section, the Health and Human Services Commission determines that a waiver or authorization from a federal agency is necessary for implementation of that provision, the agency affected by the provision shall request the waiver or authorization and may delay implementing that provision until the waiver or authorization is granted.

SECTION 18. (a) Subchapter A, Chapter 533, Government Code, is amended by adding Section 533.0056 to read as follows: Sec. 533.0056. STAR HEALTH NOTIFICATION PROGRAM: OF PLACEMENT CHANGE. A contract between a managed care organization and the commission for the organization to provide health care services to recipients under the STAR Health program must require the organization to ensure continuity of care for a child whose placement has changed by:

(1) notifying each specialist treating the child of the placement change; and

(2) coordinating the transition of care from the child's previous treating primary care physician and treating specialists to the child's new treating primary care physician and treating specialists, if any.

(b) The changes in law made by this section apply only to a contract for the provision of health care services under the STAR Health program between the Health and Human Services Commission and a managed care organization under Chapter 533, Government Code, that is entered into, renewed, or extended on or after the effective date of this section.

(c) If before implementing Section 533.0056, Government Code, as added by this section, the Health and Human Services Commission determines that a waiver or

SECTION 3. Section 40.032, Human Resources Code, is amended.

SECTION 4. Subchapter B, Chapter 40, Human Resources Code, is amended by adding Section 40.039 to read as follows:

Sec. 40.039. FOSTER CARE SERVICES <u>CONTRACT</u> <u>COMPLIANCE</u> <u>AND</u> <u>OVERSIGHT</u> <u>DIVISION.</u> (a) In this section "community-based foster care" has the meaning assigned by Section 264.152. Family Code.

(b) The department shall create within the department the foster care services contract compliance and oversight division. The division shall oversee contract compliance and achievement of performance-based outcomes by any vendor that provides foster care services for the department under community-based foster care.

authorization from a federal agency is necessary for implementation of that provision, the health and human services agency affected by the provision shall request the waiver or authorization and may delay implementing that provision until the waiver or authorization is granted.

SECTION 19. Substantially the same as introduced version.

SECTION 20. (a) Subchapter B, Chapter 40, Human Resources Code, is amended by adding Sections 40.039, 40.040, 40.041, and 40.042 to read as follows:

Sec. 40.039. **REVIEW OF RECORDS** RETENTION POLICY. The department shall periodically review the department's records retention policy with respect to case and intake records relating to department functions. The department shall make changes to the policy consistent with the records retention schedule submitted under Section 441.185, Government Code, that are necessary to improve case prioritization and the routing of cases to the appropriate division of the department. The department may adopt rules necessary to implement this section.

Sec. 40.040.FOSTER CARE SERVICESCONTRACTCOMPLIANCE,OVERSIGHT,ANDQUALITYASSURANCEDIVISION.(a)In thissection, "community-based foster care" hasthe meaning assigned by Section 264.152,Family Code.

(b) The department shall create within the department the foster care services contract compliance, oversight, and quality assurance division. The division shall:

(1) oversee contract compliance and achievement of performance-based outcomes by any vendor that provides foster care services for the department under community-based foster care;

(2) conduct assessments on the fiscal and qualitative performance of any vendor that provides foster care services for the department under community-based foster care; and

(3) create and administer a dispute resolution process to resolve conflicts between vendors that contract with the department to provide foster care services under community-based foster care and any

subcontractor of a vendor.

Sec. 40.041. OFFICE OF DATA ANALYTICS. The department shall create an office of data analytics. The office shall report to the deputy commissioner and may perform any of the following functions, as determined by the department:

(1) monitor management trends;

(2) analyze employee exit surveys and interviews;

(3) evaluate the effectiveness of employee retention efforts, including merit pay;

(4) create and manage a system for handling employee complaints submitted by the employee outside of an employee's direct chain of command, including anonymous complaints;

(5) monitor and provide reports to department management personnel on:

(A) employee complaint data and trends in employee complaints;

(B) compliance with annual department performance evaluation requirements; and

(C) the department's use of positive performance levels for employees;

(6) track employee tenure and internal employee transfers within both the child protective services division and the department;

(7) use data analytics to predict workforce shortages and identify areas of the department with high rates of employee turnover, and develop a process to inform the deputy commissioner and other appropriate staff regarding the office's findings;

(8) create and monitor reports on key metrics of agency performance;

(9) analyze available data, including data on employee training, for historical and predictive department trends; and

(10) conduct any other data analysis the department determines to be appropriate for improving performance, meeting the department's current business needs, or fulfilling the powers and duties of the department.

Sec. 40.042. INVESTIGATIONS OF CHILD ABUSE, NEGLECT, AND EXPLOITATION. (a) In this section, "child-care facility" includes a facility, licensed or unlicensed child-care facility, family home, residential child-care facility, employer-based day-care facility, or shelter day-care facility, as those terms are defined

in Chapter 42.

(b) For all investigations of child abuse, neglect, or exploitation conducted by the child protective services division of the department, the department shall adopt the definitions of abuse, neglect, and exploitation provided in Section 261.001, Family Code.

(c) The department shall establish standardized policies to be used during investigations.

(d) The commissioner shall establish units within the child protective services division of the department to specialize in investigating allegations of child abuse and neglect occurring at a child-care facility.

(e) The department may require that investigators who specialize in allegations of child abuse and neglect occurring at child-care facilities receive ongoing training on the minimum licensing standards for any facilities that are applicable to the investigator's specialization.

(f) After an investigation of abuse, neglect, or exploitation occurring at a child-care facility, the department shall provide the state agency responsible for regulating the facility with access to any information relating to the department's investigation. Providing access to confidential information under this subsection does not constitute a waiver of confidentiality.

(g) The department may adopt rules to implement this section.

(b) As soon as possible after the effective date of this Act, the commissioner of the Department of Family and Protective Services shall establish the office of data analytics required by Section 40.041, Human Resources Code, as added by this section. The commissioner and the executive commissioner of the Health and Human Services Commission shall transfer appropriate staff as necessary to conduct the duties of the office.

(c) The Department of Family and Protective Services must implement the standardized definitions and policies required under Sections 40.042(b) and (c), Human Resources Code, as added by this Act, not later than December 1, 2017.

No equivalent provision.

SECTION 21. Section 40.051, Human Resources Code, is amended to read as follows:

Sec. 40.051. STRATEGIC PLAN FOR DEPARTMENT. The department shall develop a departmental strategic plan based on the goals and priorities stated in the commission's coordinated strategic plan for health and human services. The department shall also develop its plan based on:

(1) furthering the policy of family preservation;

(2) the goal of ending the abuse and neglect of children in the conservatorship of the department; and

(3) the goal of increasing the capacity and availability of foster, relative, and kinship placements in this state.

SECTION 22. (a) Section 40.058(f), Human Resources Code, is amended to read as follows:

(f) A contract for residential child-care services provided by a general residential operation or by a child-placing agency must include provisions that:

(1) enable the department <u>and commission</u> to monitor the effectiveness of the services;

(2) specify performance outcomes, financial penalties for failing to meet any specified performance outcomes, and financial incentives for exceeding any specified performance outcomes;

(3) authorize the department <u>or commission</u> to terminate the contract or impose <u>monetary</u> sanctions for a violation of a provision of the contract that specifies performance criteria <u>or for</u> <u>underperformance in meeting any specified</u> <u>performance outcomes;</u>

(4) authorize the department <u>or</u> <u>commission</u>, an agent of the department <u>or</u> <u>commission</u>, and the state auditor to inspect all books, records, and files maintained by a contractor relating to the contract; and

(5) are necessary, as determined by the department <u>or commission</u>, to ensure accountability for the delivery of services and for the expenditure of public funds.

(b) The Health and Human Services Commission shall, in a contract for residential child-care services between the commission and a general residential operation or child-placing agency that is entered into on or after the effective date of this section, including a renewal contract, include the provisions required by Section 40.058(f), Human Resources Code, as

amended by this section.

The Health and Human Services (c) Commission shall seek to amend contracts for residential child-care services entered into with general residential operations or child-placing agencies before the effective date of this section to include the provisions required by Section 40.058(f), Human Resources Code, as amended by this section. The Department of Family and (d) Protective Services and the Health and Human Services Commission may not impose a financial penalty against a general residential operation or child-placing agency under a contract provision described by 40.058(f)(2)Section or (3), Human Resources Code, as amended by this section, until September 1, 2018.

SECTION 23. (a) Subchapter C, Chapter 40, Human Resources Code, is amended by adding Section 40.0581 to read as follows: 40.0581. Sec. PERFORMANCE MEASURES FOR CERTAIN SERVICE PROVIDER CONTRACTS. (a) The commission, in collaboration with the department, shall contract with a vendor or enter into an agreement with an institution higher education to develop, in of coordination with the department, performance quality metrics for familybased safety services and post-adoption support services providers. The quality metrics must be included in each contract with those providers.

(b) Each provider whose contract with the commission to provide department services includes the quality metrics developed under Subsection (a) must prepare and submit to the department a report each calendar quarter regarding the provider's performance based on the quality metrics.

(c) The commissioner shall compile a summary of all reports prepared and submitted to the department by family-based safety services providers as required by Subsection (b) and distribute the summary to appropriate family-based safety services caseworkers and child protective services region management once each calendar quarter.

(d) The commissioner shall compile a summary of all reports prepared and submitted to the department by post-adoption support services providers as

SECTION 5. Section 42.042, Human Resources Code, is amended by adding Subsection (s) to read as follows: (s) The department shall create and

implement a process to simplify and streamline the licensing and verification rules for agency foster homes and childplacing agencies. required by Subsection (b) and distribute the summary to appropriate conservatorship and adoption caseworkers and child protective services region management.

(e) The department shall make the summaries prepared under Subsections (c) and (d) available to families that are receiving family-based safety services and to adoptive families.

(f) This section does not apply to a provider that has entered into a contract with the commission to provide family-based safety services under Section 264.171, Family Code.

(b) The quality metrics required by Section 40.0581, Human Resources Code, as added by this section, must be developed not later than September 1, 2018, and included in any contract, including a renewal contract, entered into by the Health and Human Services Commission with a family-based safety services provider or a post-adoption support services provider on or after January 1, 2019, except as provided by Section 40.0581(f), Human Resources Code, as added by this section.

SECTION 24. Section 42.002(23), Human Resources Code, is amended to read as follows:

(23) "Other maltreatment" means:

(A) abuse, as defined by Section 261.001 [or 261.401], Family Code; or

(B) neglect, as defined by Section 261.001 [or 261.401], Family Code.

SECTION 25. Section 42.042, Human Resources Code, is amended by adding Subsections (s) and (t) to read as follows: (s) The department shall create and

implement processes to simplify and streamline the licensing and verification rules for agency foster homes and childplacing agencies, including:

(1) a process to allow provisional verification of a foster home, based on the foster parent's partial completion of the licensing requirements, as determined by the department; and

(2) a process to streamline background checks for potential foster care providers.

(t) The department may waive certain minimum standards or may permit a childplacing agency to waive certain verification requirements for a foster home under this

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section.

SECTION 26. (a) Subchapter C, Chapter 42, Human Resources Code, is amended by adding Section 42.0432 to read as follows:

Sec. 42.0432. HEALTH SCREENING REQUIREMENTS FOR CHILD PLACED WITH CHILD-PLACING AGENCY. (a) child-placing agency or general А residential operation that contracts with the department to provide services must ensure that the children who are in the managing conservatorship of the department and are placed with the child-placing agency or general residential operation receive a complete early and periodic screening, diagnosis, and treatment checkup in accordance with the requirements specified in the contract between the child-placing agency or general residential operation and the department.

(b) The commission shall include a provision in a contract with a child-placing agency or general residential operation specifying progressive monetary penalties for the child-placing agency's or general residential operation's failure to comply with Subsection (a).

(b) A child-placing agency or general residential operation that contracts to provide services for the Department of Family and Protective Services must comply with the requirements of Section 42.0432, Human Resources Code, as added by this section, not later than August 31, 2018. The department and the Health and Human Services Commission may not impose a monetary penalty for noncompliance with a contract provision described by that section until September 1, 2018.

SECTION 27. Section 42.044(c-1), Human Resources Code, is amended to read as follows:

(c-1) The department:

(1) shall investigate a listed family home if the department receives a complaint that:

(A) a child in the home has been abused or neglected, as defined by Section <u>261.001</u> [261.401], Family Code; or

(B) otherwise alleges an immediate risk of danger to the health or safety of a child being cared for in the home; and

(2) may investigate a listed family home to ensure that the home is providing care for

85R 26034

No equivalent provision.

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Substitute Document Number: 85R 25382

No equivalent provision.

SECTION 6. The changes in law made by this Act apply only to a contract for foster care services entered into or renewed on or after the effective date of this Act.

SECTION 7. This Act takes effect September 1, 2017.

compensation to not more than three children, excluding children who are related to the caretaker.

SECTION 28. Section 261.401(a), Family Code, is repealed.

SECTION 29. The changes in law made by this Act to Section 263.401, Family Code, apply only to a suit affecting the parentchild relationship filed on or after the effective date of this Act. A suit affecting the parent-child relationship filed before the effective date of this Act is governed by the law in effect on the date the suit was filed, and the former law is continued in effect for that purpose.

SECTION 30. Except as otherwise provided by this Act, the changes in law made by this Act apply only to a contract for foster care services entered into or renewed on or after the effective date of this Act.

SECTION 31. Except as otherwise provided by this Act, this Act takes effect September 1, 2017.