TEXAS CHILD-CENTERED CARE SYSTEM

INTERIM CREDENTIAL APPLICATION FOR CHILD PLACING AGENCIES

Purpose: Child Placing Agencies (CPA) will use this form to apply for the ***Interim Credential***, to provide Residential Childcare Services under the Texas Child-Centered Care (T3C) System. The Interim Credential is designed to assist current residential childcare Providers, that meet certain eligibility requirements, with the transition to the T3C System. ***The Interim Credential Application is time-limited and is anticipated to be available for Providers to apply for from December 2024 through December 2025.***

Providers that obtain an Interim Credential will be required to meet and obtain a Full Credential for each Service Package and Add-On Service within an established timeframe.

Providers that do not qualify for, or who opt not to pursue the Interim Credential, may still apply for the Full Credential when the T3C Full Credential Application is posted and the T3C Credentialing Platform opens for Full Credential Applications, which is anticipated in January 2025.

Step-by-Step Provider Instructions for Completing the Interim Credential Application:

1. **Determine the T3C Foster Family Home Service Package(s) and Add-On Services that the Provider Is Seeking to Provide:** Review the latest edition of the *T3C System Blueprint* to determine which of the nine available Foster Family Home Service Packages and three Add-On Services the Provider is seeking to obtain an Interim Credential to provide. A listing of all nine of the Service Packages and the three Add-On Services can be found under the section titled "*T3C Foster Care Continuum and Full Array of Services*" of the current *T3C System Blueprint*, located here: https://www.dfps.texas.gov/Texas_Child_Centered_Care/T3C_System_Blueprint.asp.

   Providers should read the Service Package and Add-On Service requirements fully to ensure a complete understanding of **all** requirements. The requirements for each Service Package are in the section titled, "*Child Placing Agency/Foster Family Home T3C Service Packages"* and Add-On Service requirements are in the section titled, *"Child Placing Agency/Foster Family Home T3C Add-On Services"* in the latest edition of the *T3C System Blueprint.* Providers may apply to provide one and up to all nine of the Service Packages and three Add-On Services in a single Interim Credential Application. Alternatively, a Provider may submit a subsequent Interim Credential Application(s) in the future to add additional Service Packages and Add-On Services, until the option ends in December 2025.

2. **Verify Provider's Eligibility for the Interim Credential:** Not all Providers are eligible to apply for the Interim Credential. Prior to completing the Application for the Interim Credential, the Provider should thoroughly review the eligibility requirements found in the latest edition of the *T3C System Blueprint*, under the section titled, "*The Interim Credential"*.

3. **Review the Interim Credential Application:** Providers are encouraged to read, review, and become familiar with the entire Interim Credential Application prior to initiating completion of the first section of the Application. Sections of the Application build upon each other, so it is important to read through in full before beginning to complete the Application. As the Provider reviews the Application, special attention should be paid to which of the requirements the Provider must have in place or meet at the time of submission of the Application (commonly referred to in the *T3C System Blueprint* and the Interim Credential Application as **"In Place @Time of Application for Interim Credential")**, requirements the Provider must have a specific plan and timeline for meeting during the time between issuance of the Inactive Interim Credential and before submission of the Application for the Full Credential (commonly referred to in the *T3C System Blueprint* and the Interim Credential Application as **"Plan Only @ Time of Application")**, and requirements the Provider must have a specific plan and timeline for meeting in no more than 120 calendar days from issuance of the Inactive Interim Credential (commonly referred to in the *T3C System Blueprint* and the Interim Credential Application as "**In Place on 1st Day Operating under an Active Interim Credential")**. More information can be found on the three Interim Credential category requirements in the *T3C System Blueprint*, in the section titled "*The Interim Credential"*, as well as *Appendix II.A* and *Appendix II.B*.

4. **Complete the Interim Credential Application:** While the Application is designed to allow for a single submission to obtain an Interim Credential for more than one Service Package and Add-On Service, the

Provider will be required to demonstrate the ability to specialize in/provide each distinct Service Package and Add-On Service independently. This is important, because as DFPS evaluates the Interim Credential Application, staff will be assessing each Service Package and Add-On Service independently to ensure that the requirements are met to support an Interim Credential being issued for each Service Package and Add-On Service that is sought. To properly complete the Interim Credential Application, the Provider should review and refer to the specific requirements for each Service Package and Add-On Service as outlined in the *T3C System Blueprint*. The Interim Credential Application form must be completed in its entirety before it is submitted to DFPS.

Directions for Completing/Submitting the Interim Credential Application:

- If a Provider opts to create a narrative response to address a question, submit clearly labeled separate files containing the documented responses.
- Supporting documentation illustrating contractors' current compliance with the requirements can also be submitted in a clearly labeled separate file.
- If a file will not be relevant to multiple sections, utilizing the section number in the file name is encouraged.
- The completed Interim Credential Application and all associated documentation must be submitted via upload to the online T3C Credentialing Platform which will be linked from the T3C website beginning in December 2024.

Response for Upload Instructions:

Following the description of the requirement(s), the Provider will click on the field with gray text labeled "*Click to indicate uploaded file name*" that highlights in a gray box when the curser hovers over the field in the Section/Sub-section, and:

- Specify the **FILE NAME** where the relevant information can be found; **and**

- Move to the subsequent field with gray text labeled "*Click to indicate pages*" and list the **PAGE NUMBER(s)** that are responsive to the required information in the uploaded document; **and**

- **HIGHLIGHT** the relevant section of the uploaded information, if it is a part of a larger handbook, policy, procedure, etc.

   Unless otherwise specified Provider may submit a document, narrative, policy, procedures, plans, manuals, etc. that demonstrates how Provider will meet the T3C requirements.

If a response to a question **is covered** in a previously uploaded document, add the document name in the field with gray text labeled "*Click to indicate uploaded file name*" for the current section and specify the page numbers in the subsequent field. Be sure that the previously uploaded document has the section relevant to the additional response highlighted. A duplicate upload **is not required.**

Please note: The Provider should give clear details of file name and page numbers to guide the DFPS Credentialing staff to the needed information for review, which will streamline processing of the Provider's Application. **Incomplete or unclear information** will result in the application **being denied**.

Formatting Requirements

File names should be no more than 50 characters total in length. When uploading a document as a part of the Application process. The Provider will be able to upload files up to 2 gigabytes in the following file types: Adobe portable document format (.pdf), Microsoft office documents (such as .doc; .docx; .xls; or .ppt), and images (such as .bmp; .gif; .jpg; .jpeg; .png; and .tif). Files created in other operating systems and not saved as .pdf will not be able to be reviewed. Within the Credentialing Platform the Provider must choose from and use the DFPS developed 'Document Classification' field that corresponds to the required information.

Response for Implementation Plan Instructions

Following the description of the requirements the provider will see instructions to enter their plan in the next box. Click in the gray field and enter your response or identify that you have uploaded a separate document for review. Please note that the text field has a character limit; if your response exceeds this limit, you will need to upload a file. When uploading, specify the file name and page numbers in the gray field.

Important: Upon obtaining an Interim Credential, the operation will have a strict deadline for applying <u>and</u> obtaining the Full Credential before the Interim Credential expires on the last day of the twelfth calendar month after the issuance of the Active Interim Credential. Under the Active Interim Credential, a Provider can begin serving children under T3C, contingent on contract amendments and the Provider's written verification of the Interim Credential requirements. The Interim Credential for any one Service Package or Add-On Service is issued to an eligible Provider one time only and is not renewable.

For general questions about the Interim Credential Application or Credentialing process please address them to DFPSTexasChildCenteredCare@dfps.texas.gov. Provider's specific questions related to an actual Interim Credential Application should be directed to the DFPS Credentialing team, via the DFPSProviderCredentialing@dfps.texas.gov

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SECTION I: CONTRACTOR INFORMATION	
Legal Name of Contractor:	DBA Name (if applicable):
Name of individual(s) listed as Contractor's designated Controlling Person(s):	Name of individual with Contractor's designated Signature Authority for current CPA Contract:
Name and phone number of primary contact for T3C System Credential purposes:	
Contractor Emails for T3C Credential purposes: Email 1 (primary): Email 2 (backup):	
Current CPA Contract Number if Provider contracts directly with DFPS (also include Contract Number for Treatment Family Foster Care if currently contracted with DFPS for this service):	How many SSCCs are you currently contracting with? (Select a Number)
DFPS Region of CPA's Headquarters: (Select a Region)	
Has CPA been contracted with DFPS and/or an SSCC, and **ONLY** provided services under a Child Specific Contract (CSC) at some time over the last year? ☐ Yes ☐ No If yes, please provide the Agency Account ID(s) (found on the CSC(s).	Does the CPA's Permit include all the Permit Services identified in the **T3C System Blueprint** for the specific Service Package(s) and Add-On Service(s) being applied for? ☐ Yes ☐ No If no, please identify the date that the request for addition of any required Permit Services was submitted to HHSC-CCR, and gather documentation to provide in Section II.A.
CPA Permit/License Number:	If any part of the CPA is operating under an Initial Permit (aka Provisional License), please identify the Permit/License Number of Provider's additional operation with current Full Permit:

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Indicate which of the following Service Package(s) the Contractor is applying for as a part of this Interim Credential Application (Select all that apply):

☐ T3C Basic Foster Family Home Support Services

☐ Substance Use Support Services

☐ Short-Term Assessment Support Services (not eligible for Add-On Services)

☐ Mental & Behavioral Health Support Services

☐ Sexual Aggression/Sex Offender Support Services

☐ Complex Medical Needs or Medically Fragile Support Services

☐ Human Trafficking Victim/Survivor Support Services

☐ Intellectual or Developmental Disability (IDD)/Autism Spectrum Disorder Support Services

☐ T3C Treatment Foster Family Care Support Services

Indicate which of the following Add-On Service(s) the Contractor is applying for as a part of this Interim Credential Application (Select all that apply, or the option for None of the above):

☐ Transition Support Services for Youth & Young Adults (ages 14-22) Add-On Service

☐ Kinship Caregiver Support Services Add-On Service

☐ Pregnant & Parenting Youth or Young Adult Support Services Add-On Service

☐ None of the above

Please note that to become Credentialed to provide an Add-On Service, the CPA must be Credentialed to provide one or more Service Package(s).

SECTION II: QUESTIONS REQUIRED FOR ALL SERVICE PACKAGES
Please note that the requirements of Section II apply to ALL Service Packages

A. PERMIT SERVICES

Interim Credential **Minimum** Requirement for this subsection is ***"In Place @ Time of Application for Active Interim Credential"*** (as found in the *T3C System Blueprint*, Appendix II).

1) Provider has a "Full" Permit issued by HHS-CCR (or similar body for out of state Providers) to support the Permit Type and Permit Services required for each Service Package(s) for which Provider is applying to be Credentialed in?

☐ **Yes** Upload the CPA's Permit to demonstrate compliance, identify below, and then move to **Question 3**.

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐ **No** Move to **Question 2**.

2) If Provider does not have a "Full" Permit, do you have a "Provisional" or "Initial" Permit, and currently operate as a Residential Childcare Provider under a "Full" Permit for another similar type of operation?

☐ **Yes** Upload both permits to demonstrate compliance, identify below, and then move to **Question 3.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐ **No (Provider is _not_ eligible for an Interim Credential. Please stop, your application will not be reviewed.)**

3) Does Provider have a permit that includes all applicable Treatment Services required for each Service Package that you are applying for?

☐ **Yes** Move to **Question 4**.
☐ **No** Move to **Question 4**.

4) Does Provider hold a permit that includes all applicable Programmatic and Special Services required for each Service Package that you are applying for?

☐ **Yes**
If you answered "Yes" to both Question 3 and 4, move to **Section II.B**.
If you only answered "Yes" to either Question 3 or 4, move to **Question 5**.

☐   **No** Move to **Question 5**.

Interim Credential **Minimum** Requirement for this subsection is **"In Place on 1ˢᵗ Day Operating Under Interim Credential"** (as found in the *T3C System Blueprint,* Appendix II).

5) Is hiring key staff the only barrier to obtaining the permitted services needed to provide the Service Package?

☐   **Yes**

In the **box below**, enter your Implementation Plan documenting how all staff will be hired and have started in their role by the start of services under the Active Interim Credential, and then move to **Question 6**.

☐   **No**   **(Provider is *not* eligible for an Interim Credential. Please stop completing the form as Provider's application will not be reviewed.)**

An Inactive Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section.

Implementation Plan During the Inactive Interim Credential

The Inactive Interim Credential is valid for up to 120 calendar days, and failure to submit documentation of completion of all required plans and the signed Verification Form to move to the Active Interim Credential status by that deadline, will result in the provider losing their Interim Credential and having to re-apply for a new Interim Credential with an updated eligibility review.

Note- This time frame would include the time required for the provider to amend their Contract to include T3C Service Packages Credentialed for, and clinical reviews to determine the best Service Package to meet the child's needs.

In the box below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during the Inactive Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

Interim Credential **Minimum** Requirement for this subsection is **"Plan Only @ Time of Application for Interim Credential"** (as found in the *T3C System Blueprint,* Appendix II).

6) Is Provider actively working with HHSC-CCR to add Programmatic and/or Special Services to the CPA's Permit(s)?

☐   **Yes**   Provide a response to the following:

In the **boxes below** enter your Implementation Plan documenting how you will monitor the status and promptly respond to all questions and requests from HHSC-CCR to clarify and make enhancements.

Additionally, you must upload narrative information and updates on any modification the CPA is undergoing based on the technical assistance or necessary changes identified to meet the Minimum Standards associated with the necessary Programmatic and/or Special Services. Upload, identify the file below and move to **Section II. B.**

Please note that if HHSC-CCR denies any required Programmatic or Special Permit Service(s), the Provider must *immediately notify DFPS* at DFPSProviderCredentialing@dfps.texas.gov as the Provider's Interim Credential may no longer be valid and may be revoked. The Provider will not be able to obtain the Full Credential without the necessary applicable Programmatic and Special Services being added to the Permit.

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐ **No** (Provider is *not* eligible for an interim credential. Please stop completing the form, as Provider's application will not be reviewed.)

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.
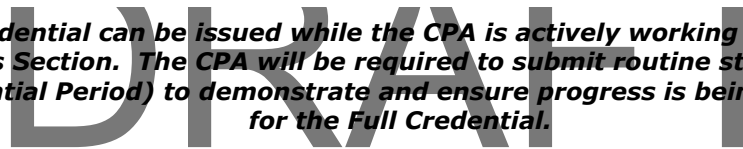
Implementation Plan During the Active Interim Credential

*If Provider answered **"yes"** to question **six** above, Provider is required to submit status reports reflecting progress on your plan presented below, as directed in your Verification Form, until your plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.*

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1st Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential) Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children will not be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

2nd Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

3rd Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

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4th Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- Provider must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

B. INFORMATION TECHNOLOGY (IT) SYSTEM

Interim Credential **Minimum** Requirement for this subsection is: **_"Plan Only @ Time of Application for Interim Credential"_** (as found in *T3C System Blueprint*, Appendix II).

1) Does Provider have an IT System, which meets all the necessary requirements as identified below in Question 2 **(a or b and c-e)**?

☐ **Yes** Upload documentation that shows how the IT system will support data collection, QA, CQI, case management documentation, billing/invoicing, reporting, tracking and identify it below. The response must include policies and procedures for the IT System (See d. below). Upload, identify the file below and move to **Section II. C.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐ **No** Move to **Question 2**.

2) Provider must identify a plan, including timeline, to meet all the requirements of the T3C IT System, as outlined in the *T3C System Blueprint*, **including a or b, and c-e.** (Select the checkboxes below that are incorporated in Provider's IT System plan):

☐ a) Select an IT System/s (hardware, software, and equipment); **_or_**

☐ b) Modify the current IT System to include making upgrades to existing system(s) (if the CPA already has an IT System); **_and_**

☐ c) Purchase an IT System or make necessary modifications to support requirements as outlined in the *T3C System Blueprint*. This part of the implementation plan should address installation and/or customization updates targeted to the specific Service Package(s) and Add-On Service(s) sought as a part of the Interim Credential Application; **_and_**

☐ d) Develop policies and procedures for new or upgraded IT System requirements, as outlined in the T3C System Blueprint; **_and_**

☐ e) Submit a training plan to support Staff and Foster Family Caregivers (if applicable) in the use of the new or upgraded IT System.

In the **boxes below** enter an Implementation Plan.

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.

Implementation Plan During the Active Interim Credential

*If Provider answered **"no"** to question **one** above, Provider is required to submit status reports reflecting progress on your plan presented below, as directed in Provider Verification Form, until Provider plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.*

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1st Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential)
Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children will not be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

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2nd Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

3rd Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

4ᵗʰ Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- Provider must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

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SECTION II: QUESTIONS REQUIRED FOR ALL SERVICE PACKAGES (CONTINUED)

C. EVIDENCE-INFORMED TREATMENT MODEL(S)

Interim Credential **Minimum** Requirement for this subsection is **"In Place @ Time of Application for Interim Credential"** (as found in the *T3C System Blueprint*, Appendix II).

1) Does Provider have documentation **that includes the following**:

   a) A detailed narrative (or policy if available) that describes the program's Treatment Model(s) and explains how it is used, or will be used, as the framework/structure for the program to meet the customized physical, emotional, social, and spiritual well-being needs for children, youth, and young adults requiring the specific Service Package; ***and***

   b) Illustrates the ongoing development and implementation process for the Treatment Model, identifying the individual/s responsible for the process; ***and***

   c) Includes the data, and/or other information the CPA used to select the specific evidence-informed Treatment Model(s), along with an explanation of how the model is designed to meet the custom needs of the population requiring each Service Package; ***and***

   d) Explains how the model is trauma-informed to meet the needs of children, youth and young adults who have been victims of abuse and neglect.

   ☐ **Yes** Upload, identify the file below, and move to **Question 2**.

   Provide File Name of Supporting Documentation:

   Provide relevant page number(s) in File:

   ☐ **No** (Provider is *not* eligible for an Interim Credential. Please stop completing the form as Provider's application will not be reviewed.)

Interim Credential **Minimum** Requirement for this subsection is **"In Place on 1st Day Operating Under Active Interim Credential"** (as found in the *T3C System Blueprint,* Appendix II).

2) Is the Treatment Model(s) integrated throughout the Policies & Procedures, including customized programming tailored to meet the unique needs of children, youth and young adults required for each specific Service Package and Add-On Service for which the Provider is seeking to be Credentialed. Examples of relevant documentation include CPA's policies and procedures, but other materials developed to fulfill the requirement can also be included.

   ☐ **Yes** Upload, identify the file below, and move to **Question 4**.

   Provide File Name of Supporting Documentation:
   Provide relevant page number(s) in File:

   ☐ **No** Move to **Question 3**.

3) If the Treatment Model ***is not yet integrated*** throughout the Policies & Procedures, including customized programming, the Provider must submit a plan, with a timeline outlining:

a) How and when the CPA's policies and procedures will be updated to reflect/ensure that the Treatment Model(s) is integrated throughout, including the customized programming designed to meet the unique needs of children, youth, and young adults required for each specific Service Package and Add-On Service for which the Provider is seeking to become Credentialed.

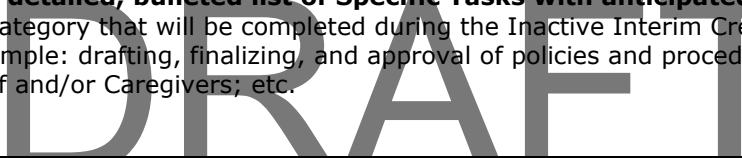In the **box below** enter an Implementation Plan.

An Inactive Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section.

Implementation Plan During the Inactive Interim Credential

The Inactive Interim Credential is valid for up to 120 calendar days and failure to submit documentation of completion of all required plans and the signed Verification Form to move to the Active Interim Credential status by that deadline will result in the provider losing their Interim Credential and having to re-apply for a new Interim Credential with an updated eligibility review.

Note- This time frame would include the time required for the provider to amend their Contract to include T3C Service Packages Credentialed for, and clinical reviews to determine the best Service Package to meet the child's needs.

In the box below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during the Inactive Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

Interim Credential **Minimum** Requirement for this subsection is: ***"Plan Only @ Time of Application for Interim Credential"*** (as found in *T3C System Blueprint*, Appendix II).

4) Has Provider:

a) Developed training requirements and a curriculum, incorporating the specific programming designed to meet the custom needs of children who qualify for each specific Service Package and Add-On Service for which the Provider is seeking to become Credentialed, and completed Staff and Foster Family Caregiver training on the Treatment Model for initial/pre-service training; ***and***

b) Developed training requirements and a curriculum, incorporating the specific programming designed to meet the custom needs of children who qualify for each specific Service Package and Add-On Service for which the Provider is seeking to become Credentialed, for the Staff and Foster Family Caregiver annual training on the Treatment Model(s); ***and***

c) Developed, documented, and trained on methods and practices to ensure child, youth, and young adult education and awareness of the Treatment Model(s)?

☐ **Yes** Upload, identify the file below, and move to **Section II D.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

Texas Department of
Family and Protective Services

☐ **No** Move to **Question 5**.

5) Provider must submit a plan, including timeline, **to meet all of the following**:

   a) Develop training requirements and a curriculum, incorporating the specific programming designed to meet the custom needs of children who qualify for each specific Service Package and Add-On Service for which the Provider is seeking to become Credentialed, and complete Staff and Foster Family Caregiver training on the Treatment Model for initial/pre-service training; ***and***

   b) Develop training requirements and a curriculum, incorporating the specific programming designed to meet the custom needs of children who qualify for each specific Service Package and Add-On Service for which the Provider is seeking to become Credentialed, for the Staff and Foster Family Caregiver annual training curriculum on the Treatment Model(s); ***and***

   c) Develop, document, and train on methods and practices to ensure child, youth, and young adult education and awareness of the Treatment Model(s).

In the **boxes below**, enter an Implementation Plan.

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.

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Implementation Plan During the Active Interim Credential

*If Provider answered "**no**" to question **four** above, Provider is required to submit status reports reflecting progress on Provider plan presented below, as directed in Provider Verification Form, until Provider plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.*

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1ˢᵗ Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential) Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children will not be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

2ⁿᵈ Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Texas Department of
Family and Protective Services

Tasks for this Quarter: ☐ Not Applicable

3ʳᵈ Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

4ᵗʰ Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- You must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

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SECTION II: QUESTIONS REQUIRED FOR ALL SERVICE PACKAGES (CONTINUED)

D. LOGIC MODEL(S)

Interim Credential **Minimum** Requirement for this subsection is ***"In Place @ Time of Application for Interim Credential"*** (as found in the *T3C System Blueprint*, Appendix II).

1) Provide a **graphic illustration** of the program's Logic Model(s) in accordance with requirements defined in the "Commonly Used Terms" section of the *T3C System Blueprint*, specific to each Service Package and Add-On Service the Provider is applying for. The graphic illustration must demonstrate integration of the Treatment Model in the program.

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

Interim Credential **Minimum** Requirement for this subsection is ***"Plan Only @ Time of Application for Interim Credential"*** (as found in *T3C System Blueprint*, Appendix II).

Implementation Plan During the Active Interim Credential

*If you answered "**no**" to question **two** above, Provider is required to submit status reports reflecting progress on your plan presented below, as directed in Provider Verification Form, until Provider plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.*

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1ˢᵗ Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential)
Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children will not be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

DRAFT

2ⁿᵈ Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

3ʳᵈ Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

4ᵗʰ Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)

Note- You must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

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SECTION II: QUESTIONS REQUIRED FOR ALL SERVICE PACKAGES (CONTINUED)

E. HUMAN TRAFFICKING PREVENTION TRAINING

Interim Credential **Minimum** Requirement for this subsection is **"Plan Only @ Time of Application for Interim Credential"** (as found in the *T3C System Blueprint*, Appendix II).

1) Provider has a Human Trafficking Training that meets either **a or b, or both as applicable, as well as c and d** (select the checkboxes below that responses will be provided for):

☐ a) Provider's trainers have attended and completed the DFPS Train-the-Trainer Human Trafficking Prevention Training, *if using the DFPS-developed model;* **and/or**

☐ b) Submit a curriculum and credentials of trainer(s) on Provider's staff for review and approval by DFPS if developing/utilizing a different Human Trafficking Prevention Training but not applying to offer one of the specified Human Trafficking Service Packages; **and**

☐ c) All Staff and verified Foster Family Caregivers have been trained, and ensure documentation of completion; **and**

☐ d) Identify how child, youth, and young adult trafficking prevention education efforts will be achieved and documented, in accordance with the *T3C System Blueprint*.

   ☐ **Yes** Upload documentation that includes a or b or both as applicable, as well as c and d, and ensure each document identifies the corresponding letters. Move to **Section II. F.**

   Provide File Name of Supporting Documentation:

   Provide relevant page number(s) in File:

   ☐ **No** Move to **Question 2**.

2) Submit a plan, including timeline, to **meet either a or b, or both as applicable, as well as c and d** (select the checkboxes below that responses will be provided for):

☐ a) Specify if the Provider's trainers will attend or have attended, and will complete or have completed, the DFPS Train-the-Trainer Human Trafficking Prevention Training, *if using the DFPS-developed model;* **and/or**

☐ b) Submit a curriculum and credentials of trainer(s) on Provider's staff for review and approval by DFPS if developing/utilizing a different Human Trafficking Prevention Training but not applying to offer one of the specified Human Trafficking Service Packages; **and**

☐ c) Specify if Staff and/or verified Foster Family Caregivers have attended training and explain how those that have not attended will be trained, and ensure documentation of completion; **and**

☐ d) Identify how child, youth, and young adult trafficking prevention education efforts will be achieved and documented, in accordance with the *T3C System Blueprint*.

Texas Department of
Family and Protective Services

In the **boxes below** enter an Implementation Plan.

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.

Implementation Plan During the Active Interim Credential

*If you answered **"no"** to question **one** above, Provider is required to submit status reports reflecting progress on Provider plan presented below, as directed in Provider Verification Form, until Provider plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.*

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1ˢᵗ Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential)
Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children <u>will not</u> be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

2ⁿᵈ Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

Texas Department of
Family and Protective Services

3rd Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

4th Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- You must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

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Texas Department of
Family and Protective Services

SECTION II: QUESTIONS REQUIRED FOR ALL SERVICE PACKAGES (CONTINUED)

F. STAFFING REQUIREMENTS
F.1 STAFFING – LCPAA

Interim Credential **Minimum** Requirement for this subsection is **_"In Place @ Time of Application for Interim Credential"_** (as found in the *T3C System Blueprint*, Appendix II).

1) Submit documentation identifying the Licensed Child Placing Agency Administrator that is employed by the Provider and on staff. Supporting documentation should demonstrate how LCPAA meets requirements.

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

Interim Credential **Minimum** Requirement for this subsection is **_"Plan Only @ Time of Application for Interim Credential"_** (as found in the *T3C System Blueprint*, Appendix II).

2) Does Provider have a LCPAA, who is a Full-Time Licensed Child Placing Agency Administrator on staff dedicated only to the single Child Placing Agency?

☐ **Yes** Upload, identify the file below and move to **Section II. F.2**.

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐ **No** Move to **Question 3.**

3) Submit a plan, including a timeline, to ensuring that you will have a Full-Time Licensed Child Placing Agency Administrator on staff dedicated only to the single Child Placing Agency.

In the **boxes below** enter an Implementation Plan.

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.

Implementation Plan During the Active Interim Credential

*If you answered "**no**" to question **two** above, Provider is required to submit status reports reflecting progress on your plan presented below, as directed in Provider Verification Form, until Provider plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth*

calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1ˢᵗ Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential) Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children <u>will not</u> be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

2ⁿᵈ Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

3ʳᵈ Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

4ᵗʰ Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- You must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

F.2 STAFFING - PROGRAM DIRECTOR

Interim Credential **Minimum** Requirements for this subsection is ***"In Place @ Time of Application for Interim Credential"*** (as found in the *T3C System Blueprint*, Appendix II).

1) Select the checkbox for **a and/or b** as it applies to Provider's organization:

   ☐ a) If Provider has identified a Program Director from current staff, provide documentation illustrating lines of reporting and specific job duties (such as an organization chart or job description),then upload the file below and move to **Question b** if also hiring new staff, or move to **Question 2** if no new staff are required;

   Provide File Name of Supporting Documentation:

   Provide relevant page number(s) in File:

   ☐ b) If the Program Director is a new hire or will be a new hire, provide documentation illustrating lines of reporting and specific job duties (such as an organization chart or job description) then upload the file below and move to **Question 2**.

   Provide File Name of Supporting Documentation:

   Provide relevant page number(s) in File:

Interim Credential **Minimum** Requirement for this subsection is ***"In Place on 1ˢᵗ Day Operating Under Active Interim Credential"*** (as found in the *T3C System Blueprint*, Appendix II).

2) Does Provider have an individual on staff, who meets the qualifications for Program Director of the Service Packages(s) that Provider has applied to be Credentialed for, and does not need to hire an additional Program Director? Provide documentation that demonstrates individual's compliance with qualifications, and identify the date that Provider verified and/or added T3C Program Director responsibilities.

   ☐ **Yes** Upload, identify the file below and move to **Question 4.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐   **No** Move to **Question 3**

3) Select the checkbox for **a and/or b** below as it applies to Provider's organization**:**

☐ a) Submit a plan for identifying a current staff member who meets the qualifications for Program Director of the Service Packages(s) that Provider has applied to be Credentialed for. Identify the date by which Provider will verify and/or add T3C Program Director responsibilities, after any negotiations and required HR changes were implemented. Supporting documentation submitted with future implementation plan updates should demonstrate how Program Director meets requirements. Move to **Question b** if you will also hire new staff or move to **Question 4** if no new staff are required;

☐ b) Submit a plan for identifying a newly hired staff member who meets the qualifications for Program Director of the Service Packages(s) that Provider has applied to be Credentialed for. Identify the date when Provider obtained verification that individual was eligible for hire after completing all necessary background checks. Supporting documentation submitted with future implementation plan updates should demonstrate how Program Director meets requirements.

In the **box below** enter an Implementation Plan.

An Inactive Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section.

Implementation Plan During the Inactive Interim Credential

The Inactive Interim Credential is valid for up to 120 calendar days and failure to submit documentation of completion of all required plans and the signed Verification Form to move to the Active Interim Credential status by that deadline will result in the provider losing their Interim Credential and having to re-apply for a new Interim Credential with an updated eligibility review.

Note- This time frame would include the time required for the provider to amend their Contract to include T3C Service Packages Credentialed for, and clinical reviews to determine the best Service Package to meet the child's needs.

In the box below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during the Inactive Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

Interim Credential **Minimum** Requirement for this subsection is **_"Plan Only @ Time of Application for Interim Credential"_** (as found in the *T3C System Blueprint*, Appendix II).

4) Has Provider established Program Director training plan, policies and procedures and the Program Director has completed position specific training?

☐   **Yes**   Provide documentation of your Program Director training plans and any policies and procedures. Upload, identify the file below and move to **Section II. F.3**.
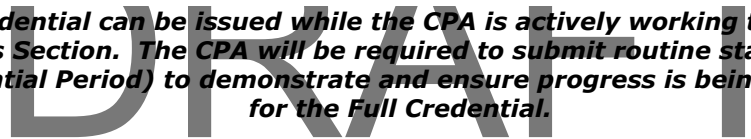
Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐   **No**   Move to **Question 5.**

5) Provide a plan and timeline that outlines Providers training, training plan and the development of new policies/procedures for the Program Director position, in accordance with the specific Service Package(s) that the Provider has applied to be Credentialed for.

In the **boxes below** enter an Implementation Plan.

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.

Implementation Plan During the Active Interim Credential

*If you answered **"no"** to question **four** above, Provider is required to submit status reports reflecting progress on your plan presented below, as directed in your Verification Form, until your plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.*

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1st Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential) Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children will not be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

Texas Department of
Family and Protective Services

2ⁿᵈ Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

3ʳᵈ Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

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4ᵗʰ Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- You must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

F.3. STAFFING – CASE MANAGEMENT STAFF

Interim Credential **Minimum** Requirement for this subsection is *"In Place @ Time of Application for Interim Credential"* (as found in the *T3C System Blueprint*, Appendix II).

1) Select the checkbox for **a and/or b** as it applies to Provider's organization:

☐ a) If Provider has identified Case Management Staff from current staff, provide documentation illustrating lines of reporting and specific job duties (such as an organization chart or job description), then upload and identify the file below and move to **Question b** if also hiring new staff or move to **Question 2** if no new staff are required;

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐ b) If the Case Management Staff is a new hire or will be a new hire provide documentation illustrating lines of reporting and specific job duties (such as an organization chart or job description, then upload, identify the file below and move to **Question 2.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

Interim Credential **Minimum** Requirement for this subsection is **_"In Place on 1ˢᵗ Day Operating Under Active Interim Credential"_** (as found in the *T3C System Blueprint*, Appendix II).

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2) Does Provider have one or more individuals on staff, who meets the qualifications for Case Management Staff for the Service Packages(s) that Provider has applied to be Credentialed for, and does not need to hire additional Case Management Staff? Provide documentation that demonstrates individual's compliance with qualifications, and identify the date that Provider verified and/or added T3C responsibilities.

☐ **Yes** Upload, identify the file below and move to **Question 4**.

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐ **No** Move to **Question 3**.

3) Select the checkbox for **a and/or b** below as it applies to Provider's organization:

☐ a) Submit a plan for identifying one or more current staff members who meets the qualifications for Case Management Staff of the Service Packages(s) that Provider has applied to be Credentialed for. Identify the date by which Provider will verify and/or add T3C responsibilities, after any negotiations and required HR changes were implemented. Supporting documentation submitted with future implementation plan updates should demonstrate how Case Management Staff meets requirements. Move to **Question b** if you will also hire new staff or move to **Question 4** if no new staff are required; **_and/or_**

☐ b) Submit a plan for identifying newly hired staff members who meets the qualifications for Case Management Staff of the Service Packages(s) that Provider has applied to be Credentialed for. Identify the date when Provider obtained verification that individuals were eligible for hire after completing all necessary background checks. Supporting documentation submitted with future implementation plan updates should demonstrate how Case Management Staff meet requirements.

In the **box below** enter an Implementation Plan

An Inactive Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section.

Texas Department of
Family and Protective Services

Implementation Plan During the Inactive Interim Credential

The Inactive Interim Credential is valid for up to 120 calendar days and failure to submit documentation of completion of all required plans and the signed Verification Form to move to the Active Interim Credential status by that deadline will result in the provider losing their Interim Credential and having to re-apply for a new Interim Credential with an updated eligibility review.

Note- This time frame would include the time required for the provider to amend their Contract to include T3C Service Packages Credentialed for, and clinical reviews to determine the best Service Package to meet the child's needs.

In the box below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during the Inactive Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

Interim Credential **Minimum** Requirement for this subsection is ***"Plan Only @ Time of Application for Interim Credential"*** (as found in the *T3C System Blueprint*, Appendix II).

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4) Has Provider established Case Management Staff training plans, developed policies and procedures, and have the Case Manager(s) completed position specific training, including a plan for ongoing assessment of workload, that supports Case Management staff to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity?

☐ **Yes** Provide documentation of your Case Management Staff training plans and any policies and procedures. Upload, identify the file below and move to **Section II. F.4.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐ **No** Move to **Question 5.**

5) Provide a plan and timeline that outlines Providers training, training plan and the development of new policies/procedures for the Case Management Staff position including a plan for ongoing assessment of workload, that supports Case Management staff to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity, in accordance with the specific Service Package(s) that the Provider has applied to be Credentialed for.

In the **box below** enter an Implementation Plan.

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.

Implementation Plan During the Active Interim Credential

*If Provider answered **"no"** to question **four** above, Providers are required to submit status reports reflecting progress on your plan presented below, as directed in your Verification Form, until your plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination*

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1ˢᵗ Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential) Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children will not be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

2ⁿᵈ Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

3ʳᵈ Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

4ᵗʰ Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- You must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

F.4 STAFFING – IDENTIFIED PERSONNEL AND INFRASTRUCTURE FUNCTIONS

FOR THE REQUIRED STAFFING FUNCTIONS OF:

- STAFF TRAINING AND WORKFORCE DEVELOPMENT;
- FOSTER FAMILY HOME CAREGIVER RECRUITMENT AND RETENTION;
- STAFF RECRUITMENT AND RETENTION;
- INTAKE/ PLACEMENT;
- EDUCATION LIAISON;
- CONTINUOUS QUALITY ASSURANCE AND IMPROVEMENT FOR PROGRAM;
- T3C IDENTIFIED BILLING/ COST REPORTING/ CLAIMS ADMINISTRATOR; AND
- CROSS-SYSTEM COORDINATION.

Interim Credential **Minimum** Requirement for this subsection is **_"In Place @ Time of Application for Interim Credential"_** (as found in the *T3C System Blueprint*, Appendix II).

1) As it applies to Provider's organization for the eight functions listed above, in the black box titled **"F.4 Staffing-Identified Personnel and Infrastructure"** leading into this Section of the Application:

   a) Submit documentation illustrating lines of reporting (such as an organization chart), with all staffing functions included, noting whether it is the Provider's intention to fill with a new hire, current staff, or contract out for each required function. If the Provider's intent is to contract with an individual/entity to fulfill one or more of the required functions, Provider must include the reporting structure and a supporting plan for operationalizing this responsibility under a contract. Upload, identify the file below and move to **Question 2.**

      Provide File Name of Supporting Documentation:

      Provide relevant page number(s) in File:

Interim Credential **Minimum** Requirement for this subsection is **_"In Place on 1ˢᵗ Day Operating Under Active Interim Credential"_** (as found in the *T3C System Blueprint*, Appendix II).

2) Does Provider have one or more individuals on staff, who have assumed all eight staff functions listed in the black box header for "**F.4 Staffing – Identified Personnel and Infrastructure Functions**" for the Service Packages(s) that Provider has applied to be Credentialed for, and does not need to hire additional Staff?

☐   **Yes** Provide documentation of how individuals demonstrate compliance with qualifications for all staff functions listed in the black box header for **"F.4 Staffing- Identified Personnel and Infrastructure Functions"**, specific job duties (such as a job description and/or scope of work) and identify the date that Provider verified and/or added T3C responsibilities. Upload, identify the file below and move to **Question 4.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐   **No** Move to **Question 3**.

3) Select the checkbox for **a and/or b** as it applies to Provider's organization for the eight functions listed above, in the black box titled **"F.4 Staffing-Identified Personnel and Infrastructure"** leading into this Section of the Application:

☐ a) If Provider has identified individuals from current staff for these functions, submit a plan for providing documentation of specific job duties (such as a job description). Move to **Question b** if you will also hire new staff or move to **Question 4** if no new staff are required; **_and/or_**

☐ b) If the individuals to fill these functions are newly hired, will be newly hired, or contracted out, submit a plan for providing documentation of specific job duties (such as a job description and/or scope of work), and move to **Question 4.**

    In the **box below** enter an Implementation Plan.

An Inactive Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section.

Implementation Plan During the Inactive Interim Credential

The Inactive Interim Credential is valid for up to 120 calendar days and failure to submit documentation of completion of all required plans and the signed Verification Form to move to the Active Interim Credential status by that deadline will result in the provider losing their Interim Credential and having to re-apply for a new Interim Credential with an updated eligibility review.

Note- This time frame would include the time required for the provider to amend their Contract to include T3C Service Packages Credentialed for, and clinical reviews to determine the best Service Package to meet the child's needs.

In the box below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during the Inactive Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

Interim Credential **Minimum** Requirement for this subsection is **_"Plan Only @ Time of Application for Interim Credential"_** (as found in the *T3C System Blueprint*, Appendix II).

4) Select the checkbox for **a and/or b** below as it applies to Provider's organization for the eight functions listed above, in the black box titled **"F.4 Staffing-Identified Personnel and Infrastructure"**:

☐ a) Has Provider established training plans, have staff completed position specific training, identified start or verification date for T3C responsibilities, and developed policies and procedures for current staff; **_and/or_**

☐ b) Has Provider developed documentation of specific job duties (such as a job description and/or contracting scope of work), established training plans, completed position specific training, and developed policies and procedures, identifying the start date for newly hired or contracted functions?

☐   **Yes** Provide documentation that demonstrates how you meet the requirements and upload, identify the file below and move to **Section II. G.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐   **No** Move to **Question 5.**

5) Select the checkbox for **a and/or b** below as it applies to Provider's organization, and submit a plan for each of the staffing functions listed in the black box titled **"F.4 Staffing-Identified Personnel and Infrastructure"** leading into this Section of the Application:

☐ a) If Provider will be using staff serving multiple functions to fulfill the requirements of one or more of the staffing functions, identify one or more current staff members, and the date by which Provider will verify and/or add T3C responsibilities, after any negotiations and required HR changes will be implemented. The Provider must submit a Plan that includes the timeline for establishing a training plan, conducting training, and development/execution of the policies/procedures related to the roles and responsibilities specific to the Service Package(s) that Provider is applying to be Credentialed for; **_and/or_**

☐ b) If Provider intends to newly hire or contract to fulfill the requirements of one or more of the staffing functions, the Provider must submit a Plan, that includes a timeline (accounting for time needed to negotiate, complete needed background checks, etc.) and addresses each of the following:
　　　i) Development of documentation of specific job duties (such as a job description and/or contracting scope of work) for each function; and
　　　ii) When the Provider will be ready to hire/contract for each function; and
　　　iii) The process that will be used for on-boarding and training to fulfill the requirements for each function; and
　　　iv) Development of training/curriculum and policies/procedures specific to each function.

In the **boxes below** enter an Implementation Plan

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the

Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.

Implementation Plan During the Active Interim Credential

*If Provider answered **"no"** to question **four** above, Provider is required to submit status reports reflecting progress on your plan presented below, as directed in your Verification Form, until your plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.*

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1st Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential)
Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children <u>will not</u> be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

2nd Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

3rd Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

Texas Department of
Family and Protective Services

4th Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- Provider must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

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SECTION II: QUESTIONS REQUIRED FOR ALL SERVICE PACKAGES (CONTINUED)

G. POLICIES, PROCEDURES, & PRACTICES

Interim Credential **Minimum** Requirement for this subsection is ***"In Place on 1st Day Operating Under Active Interim Credential"*** (as found in the *T3C System Blueprint*, Appendix II).

1) Has Provider developed policies and procedures that address all requirements identified below in **a-e**?

   ☐ **Yes** Provide documentation that demonstrates how Provider meets the requirements, upload, identify the file below and move to **Question 3.**

   Provide File Name of Supporting Documentation:

   Provide relevant page number(s) in File:

   ☐ **No** Move to **Question 2**.

2) Provider must submit a plan, including a detailed timeline, that addresses how Provider will develop policies and procedures **for each of the following requirements**:

   a) Develop and document day-to-day operating policies and procedures that support implementation of each specific Service Package and/or Add-On Service that Provider is applying to be Credentialed for (including but not limited to, review of CANS 3.0 assessment and using results to inform services as a part of Service Plan reviews, arranging all required therapies/services, special required care or supervision plans, etc.); ***and***

   b) Develop and document Quality Assurance and Continued Stay Guidelines, as specified in the *T3C System Blueprint* for each Service Package that Provider has applied to be Credentialed for, including all written confirmations; ***and***

   c) Develop and document Anticipated Length of Service specific to each Service Package that Provider has applied to be Credentialed for, in accordance with the *T3C System Blueprint*; ***and***

   d) Develop and document approach for engagement of child and child's family/support network, and process for inclusion of all individuals as required for each specific Service Package in accordance with the T3C System Blueprint. Procedure should address where and how inclusion of all individuals will be documented by the Provider; ***and***

   e) Develop and document policy and procedures for assessing and Credentialing of Foster Family Homes for Service Package(s) and/or Add-On Service(s) that Provider is applying to be Credentialed for.

   In the **box below** enter an Implementation Plan.

An Inactive Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section.

Implementation Plan During the Inactive Interim Credential

The Inactive Interim Credential is valid for up to 120 calendar days and failure to submit documentation of completion of all required plans and the signed Verification Form to move to the Active Interim Credential status by that deadline will result in the provider losing their Interim Credential and having to re-apply for a new Interim Credential with an updated eligibility review.

Note- This time frame would include the time required for the provider to amend their Contract to include T3C Service Packages Credentialed for, and clinical reviews to determine the best Service Package to meet the child's needs.

In the box below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during the Inactive Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

Interim Credential **Minimum** Requirement for this subsection is **_"Plan Only @ Time of Application for Interim Credential"_** (as found in the *T3C System Blueprint*, Appendix II).

3) Has Provider developed policies and procedures that address all requirements identified below in **a-b**?

☐ **Yes** Provide documentation that demonstrates how Provider meets the requirements, upload, identify the file below and move to **Section III. A.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐ **No** Move to **Question 4**.

4) Provider must submit a plan, including a detailed timeline, that addresses how Provider will develop policies and procedures **for each of the following requirements**:

a) Develop and document Training Plan (to include timeline/timeframes) for Staff and Foster Family Caregivers on policy and procedure changes (including initially for current Staff/Foster Family Caregivers and changes to new Staff/Foster Family Caregiver Training); **_and_**

b) Develop and document policies and procedures and a plan for re-assessing and re-Credentialing of Foster Family Homes for Service Package(s) and/or Add-On Service(s) that Provider is applying to be Credentialed for.

In the **boxes below** enter an Implementation Plan.

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.

Implementation Plan During the Active Interim Credential

*If Provider answered **"no"** to question **three** above, Provider is required to submit status reports reflecting progress on your plan presented below, as directed in your Verification Form, until your plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.*

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1ˢᵗ Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential)
Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children will not be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

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2ⁿᵈ Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

3ʳᵈ Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

4th Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- Provider must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

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PROVIDERS WHO ARE APPLYING FOR **ONLY SHORT-TERM ASSESSMENT SUPPORT SERVICES** WILL MOVE TO **SECTION III. B.**

SECTION III: REQUIRED QUESTIONS THAT ARE SERVICE PACKAGE DEPENDENT

A. SERVICE PACKAGE DEPENDENT INFORMATION TECHNOLOGY (IT) SYSTEM

Interim Credential **Minimum** Requirement for this subsection is ***"In Place on 1ˢᵗ Day Operating Under Active Interim Credential"*** (as found in the *T3C System Blueprint*, Appendix II).

1) Does Provider have a customized IT system to accommodate billing/invoicing of paid Intermittent Alternate Care (IAC), including the development of policies and procedures, and training specific to the IT System customization for all Service Package(s) and Add-On Services(s) applied for.

☐ **Yes** Provide documentation that demonstrates how Provider meets the requirements, upload, identify the file below and move to **Question 3.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐ **No** Move to **Question 2.**

2) Provider must submit a plan, including a detailed timeline, that addresses how Provider will complete the following requirement:

a) Identify policy and procedures for how billing/invoicing for paid Intermittent Alternate Care (IAC, also known as respite) will be accommodated under current system upon first T3C child placement, until IT System is customized.

In the **box below** enter an Implementation Plan

An Inactive Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section.

Implementation Plan During the Inactive Interim Credential

The Inactive Interim Credential is valid for up to 120 calendar days and failure to submit documentation of completion of all required plans and the signed Verification Form to move to the Active Interim Credential status by that deadline will result in the provider losing their Interim Credential and having to re-apply for a new Interim Credential with an updated eligibility review.

Note- This time frame would include the time required for the provider to amend their Contract to include T3C Service Packages Credentialed for, and clinical reviews to determine the best Service Package to meet the child's needs.

In the box below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during the Inactive Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

Interim Credential **Minimum** Requirement for this subsection is **_"Plan Only @ Time of Application for Interim Credential"_** (as found in the *T3C System Blueprint*, Appendix II).

3) Provider must submit a plan, including a detailed timeline, that addresses how Provider will complete the following requirement:

a) Customize IT System, to accommodate billing/invoicing of paid Intermittent Alternate Care (IAC). Plan should address the development of policies and procedures, and training specific to the IT System customization for all Service Package(s) and Add-On Services(s) applied for.

In the **boxes below** enter an Implementation Plan

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.

Implementation Plan During the Active Interim Credential

*If Provider answered **"no"** to question **one** above, Provider is required to submit status reports reflecting progress on your plan presented below, as directed in your Verification Form, until your plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.*

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1st Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential) Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children will not be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

2ⁿᵈ Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

3ʳᵈ Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

4ᵗʰ Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- You must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

PROVIDERS WHO ARE APPLYING FOR **ONLY T3C BASIC FOSTER FAMILY HOME SUPPORT SERVICES:**

1) PROVIDERS WHO ARE **NOT** APPLYING FOR ADD-ON SERVICES WILL MOVE TO **SECTION V**
2) PROVIDERS WHO ARE APPLYING FOR ADD-ON SERVICES WILL MOVE TO **SECTION IV**

SECTION III: REQUIRED QUESTIONS THAT ARE SERVICE PACKAGE DEPENDENT (CONTINUED)

B. SERVICE PACKAGE DEPENDENT STAFFING REQUIREMENTS

B.1 SERVICE PACKAGE DEPENDENT STAFFING – TREATMENT DIRECTOR

Interim Credential **Minimum** Requirement for this subsection is **"*In Place @ Time of Application for Interim Credential"*** (as found in the *T3C System Blueprint*, Appendix II).

1) Select the checkbox for **a and/or b** as it applies to Provider's organization:

☐ a) If Provider has identified a Treatment Director from current staff, submit documentation illustrating

Texas Department of
Family and Protective Services

lines of reporting and specific job duties (such as an organization chart or job description), then upload, identify the file below and move to **Question b** if also hiring new staff or move to **Question 2** if no new staff are required.

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐ b) If the Treatment Director is a new hire or will be a new hire, submit documentation illustrating lines of reporting and specific job duties (such as an organization chart or job description) then, upload the file below and move to **Question 2**.

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

Interim Credential **Minimum** Requirement for this subsection is **_"In Place on 1st Day Operating Under Active Interim Credential"_** (as found in the *T3C System Blueprint*, Appendix II).

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2) Does Provider have an individual on staff, who meets the qualifications for Treatment Director of the Service Packages(s) that Provider has applied to be Credentialed for, and does not need to hire an additional Treatment Directors? Provide documentation that demonstrates individual's compliance with qualifications, and identify the date that Provider verified and/or added T3C Treatment Director responsibilities.

　　☐ **Yes** Upload, identify the file below and move to **Question 4.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

　　☐ **No** Move to **Question 3**

3) Select the checkbox for **a and/or b** below as it applies to Provider's organization*:*

☐ a) Submit a plan for identifying a current staff member who meets the qualifications for Treatment Director of the Service Packages(s) that the Provider has applied to be Credentialed for. Identify the date by which Provider will verify and/or add T3C Treatment Director responsibilities, after any negotiations and required HR changes were implemented. Supporting documentation submitted with future implementation plan updates should demonstrate how Treatment Director meets requirements. Move to **Question b** if you will also hire new staff or move to **Question 4** if no new staff are required; ***and/or***

☐ b) Submit a plan for identifying a newly hired staff member who meets the qualifications for Treatment Director of the Service Packages(s) that Provider has applied to be Credentialed for. Identify the date when Provider obtained verification that individual was eligible for hire after completing all necessary background checks. Supporting documentation submitted with future implementation plan updates should demonstrate how Treatment Director meets requirements.

In the **box below** enter an Implementation Plan.

An Inactive Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section.

Implementation Plan During the Inactive Interim Credential

The Inactive Interim Credential is valid for up to 120 calendar days and failure to submit documentation of completion of all required plans and the signed Verification Form to move to the Active Interim Credential status by that deadline will result in the provider losing their Interim Credential and having to re-apply for a new Interim Credential with an updated eligibility review.

Note- This time frame would include the time required for the provider to amend their Contract to include T3C Service Packages Credentialed for, and clinical reviews to determine the best Service Package to meet the child's needs.

In the box below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during the Inactive Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

Interim Credential **Minimum** Requirement for this subsection is **_"Plan Only @ Time of Application for Interim Credential"_** (as found in the *T3C System Blueprint*, Appendix II).

4) Has Provider established Treatment Director training plan, policies and procedures and completed position specific training?

☐ **Yes** Upload, identify the file below and move to **Section III B.2**.

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐ **No** Move to **Question 5.**

5) Provide a plan and timeline that outlines Providers training, training plan and the development of new policies/procedures for the Treatment Director position, in accordance with the specific Service Package(s) that the Provider has applied to be Credentialed for.

In the **boxes below** enter an Implementation Plan.

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the

Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.

Implementation Plan During the Active Interim Credential

*If Provider answered **"no"** to question **four** above, Provider is required to submit status reports reflecting progress on your plan presented below, as directed in Provider Verification Form, until your plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.*

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1st Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential)
Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children will not be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

2nd Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

3rd Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

4th Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- You must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

PROVIDERS WHO ARE APPLYING FOR **ONLY COMPLEX MEDICAL NEEDS OR MEDICALLY FRAGILE SUPPORT SERVICES:**
  1) PROVIDERS WHO ARE **NOT** APPLYING FOR ADD-ON SERVICES WILL MOVE TO **SECTION V**
  2) PROVIDERS WHO ARE APPLYING FOR ADD-ON SERVICES WILL MOVE TO **SECTION IV**

B.2 SERVICE PACKAGE DEPENDENT STAFFING – CRISIS MANAGEMENT STAFF

Interim Credential **Minimum** Requirements for this subsection is **_"In Place @ Time of Application for Interim Credential"_** (as found in the *T3C System Blueprint*, Appendix II).

1) Submit documentation illustrating lines of reporting (such as an organization chart) for Crisis Management Staff, noting whether it is the Provider's intention to fill with a new hire, current staff, or contract out for each required function. If the Provider's intent is to contract with an individual/entity to fulfill Crisis Management Staff, Provider must include the reporting structure and a supporting plan for operationalizing this responsibility under a contract. Upload, identify the file below and move **Question 2**.

   Provide File Name of Supporting Documentation:

   Provide relevant page number(s) in File:

Interim Credential **Minimum** Requirement for this subsection is **_"In Place on 1st Day Operating Under Active Interim Credential"_** (as found in the *T3C System Blueprint*, Appendix II).

2) Does Provider have one or more individuals on staff, who has assumed the Crisis Management Staff Position for the Service Packages(s) that Provider has applied to be Credentialed for, and does not need to hire additional Staff?

   ☐ **Yes** Provide documentation that demonstrates individual's compliance with qualifications, specific job duties (such as a job description) and identify the date that Provider verified and/or added T3C responsibilities. Upload, identify the file below and move to **Question 4.**

   Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐　　**No**　Move to **Question 3**.

3) Select the checkbox for **a and/or b** as it applies to Provider's organization:

☐　a) If Provider has identified individuals from current staff for Crisis Management Staff, submit a plan for providing documentation of specific job duties (such as a job description). Move to **Question b** if you will also hire new staff or move to **Question 4** if no new staff are required; ***and/or***

☐　b) If the individuals to fill Crisis Management Staff positions are newly hired, will be newly hired, or contracted out, submit a plan for providing documentation of specific job duties (such as a job description and/or scope of work), and move to **Question 4.**

In the **box below** enter an Implementation Plan.

An Inactive Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section.

Implementation Plan During the Inactive Interim Credential

The Inactive Interim Credential is valid for up to 120 calendar days and failure to submit documentation of completion of all required plans and the signed Verification Form to move to the Active Interim Credential status by that deadline will result in the provider losing their Interim Credential and having to re-apply for a new Interim Credential with an updated eligibility review.

Note- This time frame would include the time required for the provider to amend their Contract to include T3C Service Packages Credentialed for, and clinical reviews to determine the best Service Package to meet the child's needs.

In the box below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during the Inactive Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

Interim Credential **Minimum** Requirement for this subsection is ***"Plan Only @ Time of Application for Interim Credential"*** (as found in the *T3C System Blueprint*, Appendix II).

4) Select the checkbox for **a and/or b** below as it applies to Provider's organization:

☐　a) Has Provider established Crisis Management Staff training plans, completed position specific training, and developed policies and procedures including a plan for ongoing assessment of workload, that supports Crisis Management staff to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity; ***and/or***

☐   b) Has Provider developed documentation of specific job duties (such as a job description and/or contracting scope of work), established training plans, completed position specific training, and developed policies and procedures, including a plan for ongoing assessment of workload, that supports Crisis Management staff to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity, identifying the start date for newly hired or contracted functions?

☐   **Yes** Upload, identify the file below and move to **Section III. B.3.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐   **No** Move to **Question 5.**

5)   Select the checkbox for **a and/or b** below as it applies to Provider's organization:

☐   a) If Provider will be using current staff members, identify staff and the date by which Provider will verify and/or add T3C responsibilities, after any negotiations and required HR changes will be implemented. The Provider must submit a Plan that includes the timeline for establishing a training plan, conducting training, and the development of new policies/procedures for the Crisis Management Staff position, including a plan for ongoing assessment of workload, that supports Crisis Management staff to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity, in accordance with the specific Service Package(s) that the Provider has applied to be Credentialed for; ***and/or***

☐   b) If Provider intends to newly hire or contract to fulfill the Crisis Management Staff requirements, the Provider must submit a Plan, that includes a timeline (accounting for time needed to negotiate, complete needed background checks, etc.) and addresses each of the following:

  i)   Development of documentation of specific job duties (such as a job description and/or contracting scope of work), including minimum qualifications per the *T3C System Blueprint*; ***and***
  ii) When the Provider will be ready to hire/contract for this function; ***and***
  iii) The process that will be used for on-boarding and training to fulfill the requirements; ***and***
  iv) Development of training/curriculum and policies/procedures specific to this function.

In the **boxes below** enter an Implementation Plan

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.

Implementation Plan During the Active Interim Credential

*If Provider answered **"no"** to question **four** above, Provider is required to submit status reports reflecting progress on your plan presented below, as directed in your Verification Form, until your plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the*

Texas Department of
Family and Protective Services

Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1st Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential)
Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children <u>will not</u> be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

2nd Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

3rd Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

4th Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- Provider must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

Texas Department of
Family and Protective Services

B.3 SERVICE PACKAGE DEPENDENT STAFFING – THERAPIST(S)

Interim Credential **Minimum** Requirements for this subsection is ***"In Place @ Time of Application for Interim Credential"*** (as found in the *T3C System Blueprint*, Appendix II).

1) Submit documentation illustrating lines of reporting (such as an organization chart) for Therapist(s) specific to the Service Package(s) that Provider is applying for, noting whether it is the Provider's intention to fill with a new hire, current staff, or contract out for each required function. If the Provider's intent is to contract with an individual/entity to fulfill Therapist position(s), Provider must include the reporting structure and a supporting plan for operationalizing this responsibility under a contract. Upload, identify the file below and move **Question 2**.

   Provide File Name of Supporting Documentation:

   Provide relevant page number(s) in File:

Interim Credential **Minimum** Requirements for this subsection is ***"In Place on 1st Day Operating under an Active Interim Credential"*** (as found in *T3C System Blueprint*, Appendix II).

2) Does Provider employ one or more Therapist(s) who meet all the necessary requirements for the Service Packages(s) that Provider has applied to be Credentialed for, and does not need to hire additional Staff?

   ☐ **Yes** Provide documentation that demonstrates individual's compliance with qualifications, specific job duties (such as a job description), including required on-call consultation availability as applicable, and identify the date that Provider verified and/or added T3C responsibilities. Upload, identify the file below and move to **Question 4.**

      Provide File Name of Supporting Documentation:

      Provide relevant page number(s) in File:

   ☐ **No** Move to **Question 3**.

3) Select the checkbox for **a and/or b** as it applies to Provider's organization:

   ☐ a) If Provider has identified individuals from current staff for Therapist(s) who meet all the necessary requirements for the Service Packages(s) that Provider has applied to be Credentialed for, submit a plan for providing documentation of specific job duties (such as a job description), including required on-call consultation availability as applicable. Move to **Question b** if you will also hire new staff or move to **Question 4** if no new staff are required; ***and/or***

   ☐ b) If the individuals to fill Therapist positions are newly hired, will be newly hired, or contracted out, submit a plan for providing documentation of specific job duties (such as a job description and/or

scope of work), including required on-call consultation availability as applicable, and move to **Question 4.**

In the **boxes below** enter an Implementation Plan

An Inactive Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section.

Implementation Plan During the Inactive Interim Credential

The Inactive Interim Credential is valid for up to 120 calendar days and failure to submit documentation of completion of all required plans and the signed Verification Form to move to the Active Interim Credential status by that deadline will result in the provider losing their Interim Credential and having to re-apply for a new Interim Credential with an updated eligibility review.

Note- This time frame would include the time required for the provider to amend their Contract to include T3C Service Packages Credentialed for, and clinical reviews to determine the best Service Package to meet the child's needs.

In the box below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during the Inactive Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

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Interim Credential **Minimum** Requirement for this subsection is ***"Plan Only @ Time of Application for Interim Credential"*** (as found in the *T3C System Blueprint*, Appendix II).

4) Select the checkbox for **a and/or b** below as it applies to Provider's organization:

☐ a) Has Provider established Therapist training plans, completed position specific training, and developed policies and procedures including a plan for ongoing assessment of workload, that supports Therapist to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity; ***and/or***

☐ b) Has Provider developed documentation of specific job duties (such as a job description and/or contracting scope of work), established training plans, completed position specific training, and developed policies and procedures, including a plan for ongoing assessment of workload, that supports Therapist to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity, identifying the start date for newly hired or contracted functions? Upload, identify the file below and move to **Question 4.**

☐ **Yes** Upload, identify the file below and move to **Section III. B.4.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

Texas Department of
Family and Protective Services

☐ **No** Move to **Question 5.**

5) Select the checkbox for **a and/or b** below as it applies to Provider's organization:

☐ a) If Provider will be using current staff members, identify Therapist(s) who meet all the necessary requirements for the Service Packages(s) that Provider has applied to be Credentialed for and the date by which Provider will verify and/or add T3C responsibilities, after any negotiations and required HR changes will be implemented. The Provider must submit a Plan that includes the timeline for establishing a training plan, conducting training, and the development of new policies/procedures for the Therapist position(s), including a plan for ongoing assessment of workload, that supports Therapist to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity, in accordance with the specific Service Package(s) that the Provider has applied to be Credentialed for; ***and/or***

☐ b) If Provider intends to newly hire or contract to fulfill the Therapist position(s) who meet all the necessary requirements for the Service Packages(s) that Provider has applied to be Credentialed for, the Provider must submit a Plan, that includes a timeline (accounting for time needed to negotiate, complete needed background checks, etc.) and addresses each of the following:

    i) Development of documentation of specific job duties (such as a job description and/or contracting scope of work), including minimum qualifications per the *T3C System Blueprint*; ***and***

    ii) When the Provider will be ready to hire/contract for this function; ***and***

    iii) The process that will be used for on-boarding and training to fulfill the requirements; ***and***

    iv) Development of training/curriculum and policies/procedures specific to this function.

       In the **boxes below** enter an Implementation Plan.

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.

Implementation Plan During the Active Interim Credential

*If Provider answered **"no"** to question **four** above, Provider is required to submit status reports reflecting progress on your plan presented below, as directed in your Verification Form, until your plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.*

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1st Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential) Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children will not be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Texas Department of
Family and Protective Services

Tasks for this Quarter: ☐ Not Applicable

2ⁿᵈ Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

3ʳᵈ Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

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4ᵗʰ Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- Provider must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

PROVIDERS WHO ARE APPLYING FOR **ONLY SHORT-TERM ASSESSMENT SUPPORT SERVICES** WILL MOVE TO **SECTION V.**

B.4 SERVICE PACKAGE DEPENDENT STAFFING – AFTERCARE CASE MANAGEMENT

Interim Credential **Minimum** Requirements for this subsection is ***"In Place @ Time of Application for Interim Credential"*** (as found in the *T3C System Blueprint*, Appendix II).

1) Submit documentation illustrating lines of reporting (such as an organization chart) for Aftercare Case Management Staff, noting whether it is the Provider's intention to fill with a new hire, current staff, or contract out for each required function. If the Provider's intent is to contract with an individual/entity to fulfill Aftercare Case Management Staff, Provider must include the reporting structure and a supporting plan

Texas Department of
Family and Protective Services

for operationalizing this responsibility under a contract, in a way that fulfills the intent of this requirement under the *T3C System Blueprint*. Upload, identify the file below and move **Question 2**.

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

Interim Credential **Minimum** Requirements for this subsection is ***"In Place on 1ˢᵗ Day Operating under an Active Interim Credential"*** (as found in *T3C System Blueprint*, Appendix II).

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2) Does Provider have one or more individuals on staff, who has assumed the Aftercare Case Management Position for the Service Packages(s) that Provider has applied to be Credentialed for, and does not need to hire additional Staff?

☐ **Yes** Provide documentation that demonstrates individual's compliance with qualifications, specific job duties (such as a job description) and identify the date that Provider verified and/or added T3C responsibilities. Upload, identify the file below and move to **Question 4.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐ **No** Move to **Question 3**.

3) Select the checkbox for **a and/or b** as it applies to Provider's organization:

☐ a) If Provider has identified individuals from current staff for Aftercare Case Management Staff, submit a plan for providing documentation of specific job duties (such as a job description). Move to **Question b** if you will also hire new staff or move to **Question 4** if no new staff are required; ***and/or***

☐ b) If the individuals to fill Aftercare Case Management Staff positions are newly hired, will be newly hired, or contracted out, submit a plan for providing documentation of specific job duties (such as a job description and/or scope of work), in a way that fulfills the intent of this requirement under the *T3C System Blueprint*, and move to **Question 4.**

In the **box below** enter an Implementation Plan.

An Inactive Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section.

Implementation Plan During the Inactive Interim Credential

The Inactive Interim Credential is valid for up to 120 calendar days and failure to submit documentation of completion of all required plans and the signed Verification Form to move to the Active Interim Credential status by

that deadline will result in the provider losing their Interim Credential and having to re-apply for a new Interim Credential with an updated eligibility review.

Note- This time frame would include the time required for the provider to amend their Contract to include T3C Service Packages Credentialed for, and clinical reviews to determine the best Service Package to meet the child's needs.

In the box below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during the Inactive Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

Interim Credential **Minimum** Requirement for this subsection is ***"Plan Only @ Time of Application for Interim Credential"*** (as found in the *T3C System Blueprint*, Appendix II).

4) Select the checkbox for **a and/or b** below as it applies to Provider's organization:

☐ a) Has Provider established Aftercare Case Management Staff training plans, completed position specific training, and developed policies and procedures, including a plan for ongoing assessment of workload, that supports Aftercare Case Management Staff to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity; ***and/or***

☐ b) Has Provider developed documentation of specific job duties (such as a job description and/or contracting scope of work), in a way that fulfills the intent of this requirement under the *T3C System Blueprint*, established training plans, completed position specific training, and developed policies and procedures, including a plan for ongoing assessment of workload, that supports Aftercare Case Management Staff to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity, identifying the start date for newly hired or contracted functions?

☐ **Yes** Upload, identify the file below and move to **Section III.C.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐ **No** Move to **Question 5.**

5) Select the checkbox for **a and/or b** below as it applies to Provider's organization:

☐ a) If Provider will be using current staff members, identify staff and the date by which Provider will verify and/or add T3C responsibilities, after any negotiations and required HR changes will be implemented. The Provider must submit a Plan that includes the timeline for establishing a training plan, conducting training, and the development of new policies/procedures for the Aftercare Case Management Staff position, including a plan for ongoing assessment of workload, that supports Aftercare Case Management Staff to child ratio based on Provider's Treatment Model, specific Service

Package(s) and considering case complexity, in accordance with the specific Service Package(s) that the Provider has applied to be Credentialed for; ***and/or***

☐ b) If Provider intends to newly hire or contract to fulfill the Aftercare Case Management Staff requirements, the Provider must submit a Plan, that includes a timeline (accounting for time needed to negotiate, complete needed background checks, etc.) and addresses each of the following:

   i) Development of documentation of specific job duties (such as a job description and/or contracting scope of work) in a way that fulfills the intent of this requirement under the *T3C System Blueprint*, including minimum qualifications per the *T3C System Blueprint*; ***and***
   ii) When the Provider will be ready to hire/contract for this function; ***and***
   iii) The process that will be used for on-boarding and training to fulfill the requirements; ***and***
   iv) Development of training/curriculum and policies/procedures specific to this function.

In the **boxes below** enter an Implementation Plan.

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.

Implementation Plan During the Active Interim Credential

*If Provider answered **"no"** to question **four** above, Provider is required to submit status reports reflecting progress on your plan presented below, as directed in your Verification Form, until your plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.*

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1st Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential)
Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children will not be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

2ⁿᵈ Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

3ʳᵈ Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

4ᵗʰ Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- Provider must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

SECTION III: REQUIRED QUESTIONS THAT ARE SERVICE PACKAGE DEPENDENT (CONTINUED)

C.   SERVICE PACKAGE DEPENDENT POLICIES, PROCEDURES & PRACTICES

Interim Credential **Minimum** Requirement for this subsection is "***In Place on 1ˢᵗ Day Operating under an Active Interim Credential"*** (as found in *T3C System Blueprint,* Appendix II*)*

1) Has Provider developed policies and/or procedures specific to the Service Package(s) that Provider has applied to be Credentialed for, to support program's Aftercare Services, as outlined in the *T3C System Blueprint*?

☐   **Yes** Upload, identify the file below and move to **Section III. D.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐   **No**   Move to **Question 2**.

2) Provide a plan and timeline that outlines the following:

   a) Develop and submit policy and/or procedures specific to the Service Package(s) that Provider has applied to be Credential for, to support program's Aftercare Services, as outlined in the *T3C System Blueprint*.

In the **box below** enter an Implementation Plan

An Inactive Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section.

Implementation Plan During the Inactive Interim Credential

The Inactive Interim Credential is valid for up to 120 calendar days and failure to submit documentation of completion of all required plans and the signed Verification Form to move to the Active Interim Credential status by that deadline will result in the provider losing their Interim Credential and having to re-apply for a new Interim Credential with an updated eligibility review.

Note- This time frame would include the time required for the provider to amend their Contract to include T3C Service Packages Credentialed for, and clinical reviews to determine the best Service Package to meet the child's needs.

In the box below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during the Inactive Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

PROVIDERS WHO ARE APPLYING FOR **ONLY** *SEXUAL AGGRESSION/SEX OFFENDER SUPPORT SERVICES* **OR** *SUBSTANCE USE SUPPORT SERVICES*:

1) PROVIDERS WHO ARE **NOT** APPLYING FOR ADD-ON SERVICES WILL MOVE TO **SECTION V**
2) PROVIDERS WHO ARE APPLYING FOR ADD-ON SERVICES WILL MOVE TO **SECTION IV**

ONLY PROVIDERS WHO ARE APPLYING FOR *COMPLEX MEDICAL NEEDS OR MEDICALLY FRAGILE SUPPORT SERVICES*, **AND/OR** *IDD/AUTISM SPECTRUM DISORDER SUPPORT SERVICES* PACKAGES NEED TO COMPLETE **SECTION D.1**.

ALL OTHER PROVIDERS MOVE TO **SECTION III. D.2**.

SECTION III: REQUIRED QUESTIONS THAT ARE SERVICE PACKAGE DEPENDENT (CONTINUED)

D. SERVICE PACKAGE DEPENDENT STAFFING REQUIREMENTS

D.1 SERVICE PACKAGE DEPENDENT STAFFING – REGISTERED NURSE(S) ON STAFF

Interim Credential **Minimum** Requirements for this subsection is **_"In Place @ Time of Application for Interim Credential"_** (as found in the *T3C System Blueprint*, Appendix II).

1) Select the checkbox for **a and/or b** below as it applies to Provider's organization:

☐ a) If Provider has identified Registered Nurse(s) from current staff, submit documentation illustrating lines of reporting (such as an organization chart). Upload, identify the file below and move to **Question b** if you will also hire new staff or move to **Question 2** if no new staff are required; **_and/or_**

   Provide File Name of Supporting Documentation:

   Provide relevant page number(s) in File:

☐ b) If the Registered Nurse is a new hire or will be a new hire, submit documentation illustrating lines of reporting (such as an organization chart). Upload, identify the file below and move to **Question 2**.

   Provide File Name of Supporting Documentation:
   Provide relevant page number(s) in File:

Interim Credential **Minimum** Requirement for this subsection is "**_In Place on 1st Day Operating under an Active Interim Credential"_** (as found in *T3C System Blueprint,* Appendix II*).

2) Does Provider have an individual on staff, who meets the qualifications for Registered Nurse(s) of the Service Packages(s) that Provider has applied to be Credentialed for, and does not need to hire an additional Registered Nurse(s)? Provide documentation that demonstrates individual's compliance with qualifications, specific job duties (such as a job description), including required on-call consultation availability as applicable, and identify the date that Provider verified and/or added T3C Registered Nurse(s) responsibilities.

☐ **Yes** Upload, identify the file below and move to **Question 4.**

   Provide File Name of Supporting Documentation:

   Provide relevant page number(s) in File:

☐ **No** Move to **Question 3.**

3) Select the checkbox for **a and/or b** below as it applies to Provider's organization**:**

☐ a) Submit a plan for identifying a current staff member who meets the qualifications for Registered Nurse(s) of the Service Packages(s) that the Provider has applied to be Credentialed for. Identify the date by which Provider will verify and/or add T3C Registered Nurse(s) responsibilities, after any

negotiations and required HR changes were implemented. Supporting documentation submitted with future implementation plan updates should demonstrate how Registered Nurse(s) meets requirements, and identify specific job duties (such as a job description), including required on-call consultation availability as applicable. Move to **b** if you will also hire new staff or move to **Question 4** if no new staff are required; ***and/or***

☐ b) Submit a plan for identifying a newly hired staff member who meets the qualifications for Registered Nurse(s) of the Service Packages(s) that Provider has applied to be Credentialed for. Identify the date when Provider obtained verification that individual was eligible for hire after completing all necessary background checks. Supporting documentation submitted with future implementation plan updates should demonstrate how Registered Nurse(s) meets requirements, and identify specific job duties (such as a job description) including required on-call consultation availability as applicable.

In the **box below** enter an Implementation Plan.

An Inactive Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section.

Implementation Plan During the Inactive Interim Credential

The Inactive Interim Credential is valid for up to 120 calendar days and failure to submit documentation of completion of all required plans and the signed Verification Form to move to the Active Interim Credential status by that deadline will result in the provider losing their Interim Credential and having to re-apply for a new Interim Credential with an updated eligibility review.

Note- This time frame would include the time required for the provider to amend their Contract to include T3C Service Packages Credentialed for, and clinical reviews to determine the best Service Package to meet the child's needs.

In the box below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during the Inactive Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

Interim Credential **Minimum** Requirement for this subsection is ***"Plan Only @ Time of Application for Interim Credential"*** (as found in the *T3C System Blueprint*, Appendix II).

4) Has Provider established Registered Nurse training plans, completed position specific training, and developed policies and procedures including a plan for ongoing assessment of workload, that supports Registered Nurse to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity?

☐ **Yes** Upload, identify the file below and move to **Section III. D.2.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐   **No** Move to **Question 5**.

5) Provide a plan and timeline for establishing a training plan, conducting training, and the development of new policies/procedures for the Registered Nurse position, including a plan for ongoing assessment of workload, that supports Registered Nurse to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity, in accordance with the specific Service Package(s) that the Provider has applied to be Credentialed for. Supporting documentation submitted with future implementation plan updates should identify staff and the date by which Provider will verify and/or add T3C responsibilities, including required on-call consultation availability as applicable, after any negotiations and required HR changes will be implemented.

In the **boxes below** enter an Implementation Plan.

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.

Implementation Plan During the Active Interim Credential

*If Provider answered **"no"** to question **four** above, Provider is required to submit status reports reflecting progress on your plan presented below, as directed in your Verification Form, until your plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.*

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1st Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential) Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children will not be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

2nd Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

3rd Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

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4th Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- You must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

PROVIDERS WHO ARE APPLYING FOR **ONLY** *COMPLEX MEDICAL NEEDS OR MEDICALLY FRAGILE SUPPORT SERVICES*:
1) PROVIDERS WHO ARE **NOT** APPLYING FOR ADD-ON SERVICES WILL MOVE TO **SECTION V**
2) PROVIDERS WHO ARE APPLYING FOR ADD-ON SERVICES WILL MOVE TO **SECTION IV**

D.2 SERVICE PACKAGE DEPENDENT STAFFING – BEHAVIOR SUPPORT SPECIALIST/MENTOR

Interim Credential **Minimum** Requirements for this subsection is *"In Place @ Time of Application for Interim Credential"* (as found in the *T3C System Blueprint*, Appendix II).

1) Submit documentation illustrating lines of reporting (such as an organization chart) for Behavior Support Specialist/Mentor Function, noting whether it is the Provider's intention to fill with a new hire, current staff, or contract out for each required function. If the Provider's intent is to contract with an individual/entity to fulfill Behavior Support Specialist/Mentor Function, Provider must include the reporting structure and a supporting plan for operationalizing this responsibility under a contract. Upload, identify the file below and move **Question 2**.

Provide File Name of Supporting Documentation:
Provide relevant page number(s) in File:

Interim Credential **Minimum** Requirement for this subsection is "***In Place on 1st Day Operating under an Active Interim Credential"*** (as found in *T3C System Blueprint,* Appendix II*).*

2) Does Provider have one or more individuals on staff, who has assumed the Behavior Support Specialist/Mentor Position for the Service Packages(s) that Provider has applied to be Credentialed for, and does not need to hire additional Staff?

☐ **Yes** Provide documentation that demonstrates individual's compliance with qualifications, specific job duties (such as a job description) and identify the date that Provider verified and/or added T3C responsibilities. Upload, identify the file below and move to **Question 4.**

Provide File Name of Supporting Documentation:
Provide relevant page number(s) in File:

☐ **No** Move to **Question 3**.

3) Select the checkbox for **a and/or b** below as it applies to Provider's organization:

☐ a) If Provider has identified individuals from current staff for Behavior Support Specialist/Mentor, submit a plan for providing documentation of specific job duties (such as a job description). Move to **Question b** if you will also hire new staff or move to **Question 4** if no new staff are required; ***and/or***

☐ b) If the individuals to fill Behavior Support Specialist/Mentor positions are newly hired, will be newly hired, or contracted out, submit a plan for providing documentation of specific job duties (such as a job description and/or scope of work), and move to **Question 4.**

In the **box below** enter an Implementation Plan.

An Inactive Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section.

Implementation Plan During the Inactive Interim Credential

The Inactive Interim Credential is valid for up to 120 calendar days and failure to submit documentation of completion of all required plans and the signed Verification Form to move to the Active Interim Credential status by that deadline will result in the provider losing their Interim Credential and having to re-apply for a new Interim Credential with an updated eligibility review.

Note- This time frame would include the time required for the provider to amend their Contract to include T3C Service Packages Credentialed for, and clinical reviews to determine the best Service Package to meet the child's needs.

In the box below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during the Inactive Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

Interim Credential **Minimum** Requirement for this subsection is **_"Plan Only @ Time of Application for Interim Credential"_** (as found in the *T3C System Blueprint*, Appendix II).

4) Select the checkbox for **a and/or b** below as it applies to Provider's organization:

☐ a) Has Provider established Behavior Support Specialist/Mentor training plans, completed position specific training, and developed policies and procedures including a plan for ongoing assessment of workload, that supports Behavior Support Specialist/Mentor to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity; **_and/or_**

☐ b) Has Provider developed documentation of specific job duties (such as a job description and/or contracting scope of work), established training plans, completed position specific training, and developed policies and procedures, including a plan for ongoing assessment of workload, that supports Behavior Support Specialist/Mentor to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity, identifying the start date for newly hired or contracted functions?

☐ **Yes** Upload, identify the file below and move to **Section III. E.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐ **No** Move to **Question 5.**

5) Select the checkbox for **a and/or b** below as it applies to Provider's organization:

☐ a) If Provider will be using current staff members, identify staff and the date by which Provider will verify and/or add T3C responsibilities, after any negotiations and required HR changes will be implemented. The Provider must submit a Plan that includes the timeline for establishing a training plan, conducting training, and the development of new policies/procedures for the Behavior Support Specialist/Mentor position, including a plan for ongoing assessment of workload, that supports Behavior Support Specialist/Mentor to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity, in accordance with the specific Service Package(s) that the Provider has applied to be Credentialed for; **_and/or_**

☐ b) If Provider intends to newly hire or contract to fulfill the Behavior Support Specialist/Mentor requirements, the Provider must submit a Plan, that includes a timeline (accounting for time needed to negotiate, complete needed background checks, etc.) and addresses each of the following:

i) Development of documentation of specific job duties (such as a job description and/or contracting scope of work), including minimum qualifications per the *T3C System Blueprint*; ***and***

ii) When the Provider will be ready to hire/contract for this function; ***and***

iii) The process that will be used for on-boarding and training to fulfill the requirements; ***and***

iv) Development of training/curriculum and policies/procedures specific to this function.

In the **boxes below** enter an Implementation Plan

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.

Implementation Plan During the Active Interim Credential

*If Provider answered **"no"** to question **four** above, Provider is required to submit status reports reflecting progress on your plan presented below, as directed in your Verification Form, until your plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.*

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1st Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential) Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children will not be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

2nd Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

3ʳᵈ Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

4ᵗʰ Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- You must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

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PROVIDERS WHO ARE APPLYING FOR **ONLY** *MENTAL & BEHAVIORAL HEALTH SUPPORT SERVICES* **OR** *IDD/AUTISM SPECTRUM DISORDER SUPPORT SERVICES* **OR** *T3C TREATMENT FOSTER FAMILY CARE SUPPORT SERVICES*:
  1) PROVIDERS WHO ARE **NOT** APPLYING FOR ADD-ON SERVICES WILL MOVE TO **SECTION V**
  2) PROVIDERS WHO ARE APPLYING FOR ADD-ON SERVICES WILL MOVE TO **SECTION IV**

ONLY PROVIDERS WHO ARE APPLYING FOR *HUMAN TRAFFICKING VICTIM/SURVIVOR SUPPORT SERVICES PACKAGE* NEED TO COMPLETE **SECTION III. E.**

ALL OTHER PROVIDERS MOVE TO **SECTION IV**.

SECTION III: REQUIRED QUESTIONS THAT ARE SERVICE PACKAGE DEPENDENT (CONTINUED)
E. SERVICE PACKAGE DEPENDENT HUMAN TRAFFICKING PREVENTION TRAINING

Interim Credential **Minimum** Requirement for this subsection is ***"Plan Only @ Time of Application for Interim Credential"*** (as found in the *T3C System Blueprint*, Appendix II).

  1) Does Provider have documentation to support that **a-c** in Question 2 below have been completed?

   ☐ **Yes** Upload, identify the file below and move to **Section IV.**

   Provide File Name of Supporting Documentation:

   Provide relevant page number(s) in File:

☐ **No** Move to **Question 2**.

2) Submit a plan, including timeline, to address the following:

a) Submit a curriculum and credentials of trainer(s) on Provider's staff for review and approval by DFPS of Human Trafficking Prevention Training specifically designed for victims/survivors of Human Trafficking, in accordance with the *T3C System Blueprint*; ***and***

b) Train all Staff and verified Foster Family Caregivers who will work with children, requiring the Human Trafficking Victim/Survivor Support Services Package, and ensure documentation of completion; ***and***

c) Identify how child, youth, and young adult trafficking prevention education efforts will be achieved and documented, in accordance with the *T3C System Blueprint*.

In the **box below** enter an Implementation Plan

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.

Implementation Plan During the Active Interim Credential

*If Provider answered **"no"** to question **two** above, Providers are required to submit status reports reflecting progress on your plan presented below, as directed in your Verification Form, until your plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.*

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and /or Caregivers; etc.

1st Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential) Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children will not be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

2ⁿᵈ Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

3ʳᵈ Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

4ᵗʰ Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- You must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

PROVIDERS WHO ARE APPLYING FOR **ONLY** *HUMAN TRAFFICKING VICTIM/SURVIVOR SUPPORT SERVICES***:**

1) PROVIDERS WHO ARE **NOT** APPLYING FOR ADD-ON SERVICES WILL MOVE TO **SECTION V**
2) PROVIDERS WHO ARE APPLYING FOR ADD-ON SERVICES WILL MOVE TO **SECTION IV**

ONLY PROVIDERS WHO ARE APPLYING FOR ***ADD-ON SERVICES*** NEED TO COMPLETE **SECTION IV. A.**

ALL OTHER PROVIDERS MOVE TO **SECTION IV. B.**

SECTION IV: REQUIRED QUESTIONS THAT ARE ADD-ON SERVICE DEPENDENT (CONTINUED)

A. ADD-ON SERVICE DEPENDENT INFORMATION TECHNOLOGY (IT) SYSTEM

Interim Credential **Minimum** Requirement for this subsection is ***"In Place on 1ˢᵗ Day Operating Under Active Interim Credential"*** (as found in the *T3C System Blueprint*, Appendix II).

1) Does Provider have an IT System that is already customized to accommodate T3C Add-On Services billing/invoicing?

Texas Department of
Family and Protective Services

☐　**Yes**　Upload, identify the file below and move to **Section IV. B.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐　**No**　Move to **Question 2**.

2) Provider must submit a plan, including a detailed timeline, **that addresses how Provider will complete the following requirement:**

a) Identify procedures for how billing/invoicing the Add-On Service(s) that Provider has applied to be Credentialed for will be accommodated under current system upon first T3C child placement, until IT System is customized, ensuring payments issued timely to the child's Foster Family Caregivers per any Contractual timelines (such as, no later than ten days after the date of payment received by the Provider for DFPS Contractors).

In the **box below** enter an Implementation Plan.

An Inactive Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section.

Implementation Plan During the Inactive Interim Credential

The Inactive Interim Credential is valid for up to 120 calendar days and failure to submit documentation of completion of all required plans and the signed Verification Form to move to the Active Interim Credential status by that deadline will result in the provider losing their Interim Credential and having to re-apply for a new Interim Credential with an updated eligibility review.

Note- This time frame would include the time required for the provider to amend their Contract to include T3C Service Packages Credentialed for, and clinical reviews to determine the best Service Package to meet the child's needs.

In the box below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during the Inactive Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

Interim Credential **Minimum** Requirement for this subsection is **"Plan Only @ Time of Application for Interim Credential"** (as found in the *T3C System Blueprint*, Appendix II).

3) Provider must submit a plan, including a detailed timeline, **that addresses how Provider will complete the following requirement:**

a) Customize IT System to accommodate billing/invoicing for all Add-On Service(s) that Provider has applied to be Credentialed for, in addition to specific Service Package(s).

In the **boxes below** enter an Implementation Plan

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.

Implementation Plan During the Active Interim Credential

*If Provider answered **"no"** to question **one** above, Provider is required to submit status reports reflecting progress on your plan presented below, as directed in your Verification Form, until your plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.*

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1ˢᵗ Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential)
Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children will not be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

2ⁿᵈ Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

3ʳᵈ Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

4th Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- You must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

SECTION IV: REQUIRED QUESTIONS THAT ARE ADD-ON SERVICE DEPENDENT (CONTINUED)

B. ADD-ON SERVICE DEPENDENT POLICIES, PROCEDURES & PRACTICES

Interim Credential **Minimum** Requirement for this subsection is "***In Place on 1st Day Operating under an Active Interim Credential"*** (as found in *T3C System Blueprint,* Appendix II*).*

1) Does Provider have Policies, Procedures and Practices that are specific to the Add-On Services to support program's Aftercare Services?

   ☐   **Yes** Upload, identify the file below and move to **Section IV. C.**

   Provide File Name of Supporting Documentation:

   Provide relevant page number(s) in File:

   ☐   **No** Move to **Question 2**.

2) Provider must submit a plan, including a detailed timeline, that includes the following:

   a) Develop and submit policy and/or procedures specific to the Add-On Service(s) to support program's Aftercare Services, as outlined in the *T3C System Blueprint*.

   In the **box below** enter an Implementation Plan

   An Inactive Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section.

Implementation Plan During the Inactive Interim Credential

The Inactive Interim Credential is valid for up to 120 calendar days and failure to submit documentation of completion of all required plans and the signed Verification Form to move to the Active Interim Credential status by

that deadline will result in the provider losing their Interim Credential and having to re-apply for a new Interim Credential with an updated eligibility review.

Note- This time frame would include the time required for the provider to amend their Contract to include T3C Service Packages Credentialed for, and clinical reviews to determine the best Service Package to meet the child's needs.

In the box below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during the Inactive Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

SECTION IV: REQUIRED QUESTIONS THAT ARE ADD-ON SERVICE DEPENDENT (CONTINUED)

C. ADD-ON SERVICE DEPENDENT STAFFING

C.1. SERVICE PACKAGE DEPENDENT STAFFING – TRANSITIONAL SUPPORT STAFF/MENTOR

ONLY PROVIDERS WHO ARE APPLYING FOR *TRANSITION SUPPORT SERVICES FOR YOUTH & YOUNG ADULTS ADD-ON SERVICE* NEED TO COMPLETE **SECTION IV. C.1.**

ALL OTHER PROVIDERS MOVE TO **SECTION IV C.2.**

Interim Credential **Minimum** Requirements for this subsection is **"In Place @ Time of Application for Interim Credential"** (as found in the *T3C System Blueprint*, Appendix II).

1) Submit documentation illustrating lines of reporting (such as an organization chart) for Transitional Support Staff/Mentor, noting whether it is the Provider's intention to fill with a new hire, current staff, or contract out for each required function. If the Provider's intent is to contract with an individual/entity to fulfill Transitional Support Staff/Mentor, Provider must include the reporting structure and a supporting plan for operationalizing this responsibility under a contract. Upload, identify the file below and move **Question 2**.

   Provide File Name of Supporting Documentation:

   Provide relevant page number(s) in File:

Interim Credential **Minimum** Requirement for this subsection is "**In Place on 1st Day Operating under an Active Interim Credential**" (as found in *T3C System Blueprint,* Appendix II*).*

2) Does Provider have one or more individuals on staff, who has assumed the Transitional Support Staff/Mentor Position for the Service Packages(s) that Provider has applied to be Credentialed for, and does not need to hire additional Staff?

   ☐ **Yes** Provide documentation that demonstrates individual's compliance with qualifications, specific job duties (such as a job description) and identify the date that Provider verified and/or added T3C responsibilities. Upload, identify the file below and move to **Question 4.**

Texas Department of
Family and Protective Services

Provide File Name of Supporting Documentation:
Provide relevant page number(s) in File:

☐   **No** Move to **Question 3**.

3) Select the checkbox for **a and/or b** as it applies to Provider's organization:

☐ a) If Provider has identified individuals from current staff for Transitional Support Staff/Mentor, submit a plan for providing documentation of specific job duties (such as a job description). Move to **Question b** if you will also hire new staff or move to **Question 4** if no new staff are required; *and/or*

☐ b) If the individuals to fill Transitional Support Staff/Mentor positions are newly hired, will be newly hired, or contracted out, submit a plan for providing documentation of specific job duties (such as a job description and/or scope of work), and move to **Question 4.**

In the **box below** enter an Implementation Plan.

An Inactive Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section.

Implementation Plan During the Inactive Interim Credential

The Inactive Interim Credential is valid for up to 120 calendar days and failure to submit documentation of completion of all required plans and the signed Verification Form to move to the Active Interim Credential status by that deadline will result in the provider losing their Interim Credential and having to re-apply for a new Interim Credential with an updated eligibility review.

Note- This time frame would include the time required for the provider to amend their Contract to include T3C Service Packages Credentialed for, and clinical reviews to determine the best Service Package to meet the child's needs.

In the box below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during the Inactive Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

Interim Credential **Minimum** Requirement for this subsection is **_"Plan Only @ Time of Application for Interim Credential"_** (as found in the *T3C System Blueprint*, Appendix II).

4) Select the checkbox for **a and/or b** below as it applies to Provider's organization:

☐ a) Has Provider established Transitional Support Staff/Mentor training plans, completed position specific training, and developed policies and procedures including a plan for ongoing assessment of workload, that supports Transitional Support Staff/Mentor to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity; *and/or*

☐ b) Has Provider developed documentation of specific job duties (such as a job description and/or contracting scope of work), established training plans, completed position specific training, and developed policies and procedures, including a plan for ongoing assessment of workload, that supports Transitional Support Staff/Mentor to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity, identifying the start date for newly hired or contracted functions?

☐ **Yes** Upload, identify the file below and move to **Section IV. C.2.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐ **No** Move to **Question 5.**

5) Select the checkbox for **a and/or b** below as it applies to Provider's organization:

☐ a) If Provider will be using current staff members, identify staff and the date by which Provider will verify and/or add T3C responsibilities, after any negotiations and required HR changes will be implemented. The Provider must submit a Plan that includes the timeline for establishing a training plan, conducting training, and the development of new policies/procedures for the Transitional Support Staff/Mentor position, including a plan for ongoing assessment of workload, that supports Transitional Support Staff/Mentor to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity, in accordance with the specific Service Package(s) that the Provider has applied to be Credentialed for; ***and/or***

☐ b) If Provider intends to newly hire or contract to fulfill the Transitional Support Staff/Mentor requirements, the Provider must submit a Plan, that includes a timeline (accounting for time needed to negotiate, complete needed background checks, etc.) and addresses each of the following:

    i) Development of documentation of specific job duties (such as a job description and/or contracting scope of work), including minimum qualifications per the *T3C System Blueprint*; ***and***
    ii) When the Provider will be ready to hire/contract for this function; ***and***
    iii) The process that will be used for on-boarding and training to fulfill the requirements; ***and***
    iv) Development of training/curriculum and policies/procedures specific to this function.

In the **boxes below** enter an Implementation Plan

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.

Implementation Plan During the Active Interim Credential

*If Provider answered **"no"** to question **four** above, Provider is required to submit status reports reflecting progress on your plan presented below, as directed in your Verification Form, until your plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the*

Texas Department of
Family and Protective Services

Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1st Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential)
Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children will not be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

2nd Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

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3rd Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

4th Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- Provider must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

C.2 ADD-ON SERVICE DEPENDENT STAFFING – KINSHIP CAREGIVER HOME SUPPORT STAFF

ONLY PROVIDERS WHO ARE APPLYING FOR *KINSHIP CAREGIVER HOME SUPPORT ADD-ON SERVICE* NEED TO COMPLETE **SECTION IV. C.2.**

ALL OTHER PROVIDERS MOVE TO **SECTION IV. C.3**.

Interim Credential **Minimum** Requirements for this subsection is ***"In Place @ Time of Application for Interim Credential"*** (as found in the *T3C System Blueprint*, Appendix II).

1) Submit documentation illustrating lines of reporting (such as an organization chart) for Kinship Caregiver Home Support Staff, noting whether it is the Provider's intention to fill with a new hire, current staff, or contract out for each required function. If the Provider's intent is to contract with an individual/entity to fulfill Kinship Caregiver Home Support Staff, Provider must include the reporting structure and a supporting plan for operationalizing this responsibility under a contract. Upload, identify the file below and move **Question 2**.

   Provide File Name of Supporting Documentation:

   Provide relevant page number(s) in File:

Interim Credential **Minimum** Requirement for this subsection is "***In Place on 1st Day Operating under an Active Interim Credential"*** (as found in *T3C System Blueprint,* Appendix II*).*

2) Does Provider have one or more individuals on staff, who has assumed the Kinship Caregiver Home Support Staff Position for the Service Packages(s) that Provider has applied to be Credentialed for, and does not need to hire additional Staff?

   ☐ **Yes** Provide documentation that demonstrates individual's compliance with qualifications, specific job duties (such as a job description), including required on-call response as applicable and identify the date that Provider verified and/or added T3C responsibilities. Upload, identify the file below and move to **Question 4.**

      Provide File Name of Supporting Documentation:

      Provide relevant page number(s) in File:

   ☐ **No** Move to **Question 3**.

3) Select the checkbox for **a and/or b** as it applies to Provider's organization:

☐ a) If Provider has identified individuals from current staff for Kinship Caregiver Home Support Staff, submit a plan for providing documentation of specific job duties (such as a job description), including required on-call response as applicable. Move to **Question b** if you will also hire new staff or move to **Question 4** if no new staff are required; ***and/or***

☐ b) If the individuals to fill Kinship Caregiver Home Support Staff positions are newly hired, will be newly hired, or contracted out, submit a plan for providing documentation of specific job duties (such as a job description and/or scope of work), including required on-call response as applicable and move to **Question 4.**

In the **box below** enter an Implementation Plan.

An Inactive Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section.

Implementation Plan During the Inactive Interim Credential

The Inactive Interim Credential is valid for up to 120 calendar days and failure to submit documentation of completion of all required plans and the signed Verification Form to move to the Active Interim Credential status by that deadline will result in the provider losing their Interim Credential and having to re-apply for a new Interim Credential with an updated eligibility review.

Note- This time frame would include the time required for the provider to amend their Contract to include T3C Service Packages Credentialed for, and clinical reviews to determine the best Service Package to meet the child's needs.

In the box below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during the Inactive Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

Interim Credential **Minimum** Requirement for this subsection is ***"Plan Only @ Time of Application for Interim Credential"*** (as found in the *T3C System Blueprint*, Appendix II).

4) Select the checkbox for **a and/or b** below as it applies to Provider's organization:

☐ a) Has Provider established Kinship Caregiver Home Support Staff training plans, completed position specific training, and developed policies and procedures including a plan for ongoing assessment of workload, that supports Kinship Caregiver Home Support Staff to family ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity; ***and/or***

☐ b) Has Provider developed documentation of specific job duties (such as a job description and/or contracting scope of work), established training plans, completed position specific training, and developed policies and procedures, including a plan for ongoing assessment of workload, that supports Kinship Caregiver Home Support Staff to family ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity, identifying the start date for newly hired or contracted functions?

☐ **Yes** Upload, identify the file below and move to **Section IV. C.3.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐ **No** Move to **Question 5.**

5) Select the checkbox for **a and/or b** below as it applies to Provider's organization:

☐ a) If Provider will be using current staff members, identify staff and the date by which Provider will verify and/or add T3C responsibilities, after any negotiations and required HR changes will be implemented. The Provider must submit a Plan that includes the timeline for establishing a training plan, conducting training, and the development of new policies/procedures for the Kinship Caregiver Home Support Staff position, including a plan for ongoing assessment of workload, that supports Kinship Caregiver Home Support Staff to family ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity, in accordance with the specific Service Package(s) that the Provider has applied to be Credentialed for; ***and/or***

☐ b) If Provider intends to newly hire or contract to fulfill the Kinship Caregiver Home Support Staff requirements, the Provider must submit a Plan, that includes a timeline (accounting for time needed to negotiate, complete needed background checks, etc.) and addresses each of the following:

   i) Development of documentation of specific job duties (such as a job description and/or contracting scope of work), including minimum qualifications per the *T3C System Blueprint*; ***and***
   ii) When the Provider will be ready to hire/contract for this function; ***and***
   iii) The process that will be used for on-boarding and training to fulfill the requirements; ***and***
   iv) Development of training/curriculum and policies/procedures specific to this function.

In the **boxes below** enter an Implementation Plan

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.

Implementation Plan During the Active Interim Credential

*If Provider answered **"no"** to question **four** above, Provider is required to submit status reports reflecting progress on your plan presented below, as directed in your Verification Form, until your plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.*

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim

Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1ˢᵗ Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential)
Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children <u>will not</u> be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

2ⁿᵈ Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

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3ʳᵈ Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

4ᵗʰ Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- Provider must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

Texas Department of
Family and Protective Services

C.3 ADD-ON SERVICE DEPENDENT STAFFING – PARENTING SUPPORT STAFF/MENTOR

ONLY PROVIDERS WHO ARE APPLYING FOR *PREGNANT & PARENTING YOUTH OR YOUNG ADULT SUPPORT ADD-ON SERVICE* NEED TO COMPLETE **SECTION IV. C.3.**

ALL OTHER PROVIDERS MOVE TO **SECTION V**.

Interim Credential **Minimum** Requirements for this subsection is ***"In Place @ Time of Application for Interim Credential"*** (as found in the *T3C System Blueprint*, Appendix II).

1) Submit documentation illustrating lines of reporting (such as an organization chart) for Parenting Support Staff/Mentor, noting whether it is the Provider's intention to fill with a new hire, current staff, or contract out for each required function. If the Provider's intent is to contract with an individual/entity to fulfill Parenting Support Staff/Mentor, Provider must include the reporting structure and a supporting plan for operationalizing this responsibility under a contract. Upload, identify the file below and move **Question 2**.

   Provide File Name of Supporting Documentation:

   Provide relevant page number(s) in File:

Interim Credential **Minimum** Requirement for this subsection is "***In Place on 1st Day Operating under an Active Interim Credential"*** (as found in *T3C System Blueprint,* Appendix II*).*

2) Does Provider have one or more individuals on staff, who has assumed the Parenting Support Staff/Mentor Position for the Service Packages(s) that Provider has applied to be Credentialed for, and does not need to hire additional Staff?

   ☐   **Yes** Provide documentation that demonstrates individual's compliance with qualifications, specific job duties (such as a job description) and identify the date that Provider verified and/or added T3C responsibilities. Upload, identify the file below and move to **Question 4.**

      Provide File Name of Supporting Documentation:

      Provide relevant page number(s) in File:

   ☐   **No** Move to **Question 3**.

3) Select the checkbox for **a and/or b** as it applies to Provider's organization:

   ☐ a) If Provider has identified individuals from current staff for Parenting Support Staff/Mentor, submit a plan for providing documentation of specific job duties (such as a job description). Move to **Question b** if you will also hire new staff or move to **Question 4** if no new staff are required; ***and/or***

☐   b) If the individuals to fill Parenting Support Staff/Mentor Position positions are newly hired, will be newly hired, or contracted out, submit a plan for providing documentation of specific job duties (such as a job description and/or scope of work), and move to **Question 4.**

In the **box below** enter an Implementation Plan.

An Inactive Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section.

Implementation Plan During the Inactive Interim Credential

The Inactive Interim Credential is valid for up to 120 calendar days and failure to submit documentation of completion of all required plans and the signed Verification Form to move to the Active Interim Credential status by that deadline will result in the provider losing their Interim Credential and having to re-apply for a new Interim Credential with an updated eligibility review.

Note- This time frame would include the time required for the provider to amend their Contract to include T3C Service Packages Credentialed for, and clinical reviews to determine the best Service Package to meet the child's needs.

In the box below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during the Inactive Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

Interim Credential **Minimum** Requirement for this subsection is *"Plan Only @ Time of Application for Interim Credential"* (as found in the *T3C System Blueprint*, Appendix II).

4)   Select the checkbox for **a and/or b** below as it applies to Provider's organization:

☐   a) Has Provider established Parenting Support Staff/Mentor training plans, completed position specific training, and developed policies and procedures including a plan for ongoing assessment of workload, that supports Parenting Support Staff/Mentor to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity; ***and/or***

☐   b) Has Provider developed documentation of specific job duties (such as a job description and/or contracting scope of work) established training plans, completed position specific training, and developed policies and procedures, including a plan for ongoing assessment of workload, that supports Parenting Support Staff/Mentor to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity, identifying the start date for newly hired or contracted functions?

☐   **Yes** Upload, identify the file below and move to **Section V.**

Provide File Name of Supporting Documentation:

Provide relevant page number(s) in File:

☐   **No** Move to **Question 5.**

5) Select the checkbox for **a and/or b** below as it applies to Provider's organization:

☐ a) If Provider will be using current staff members, identify staff and the date by which Provider will verify and/or add T3C responsibilities, after any negotiations and required HR changes will be implemented. The Provider must submit a Plan that includes the timeline for establishing a training plan, conducting training, and the development of new policies/procedures for the Parenting Support Staff/Mentor position, including a plan for ongoing assessment of workload, that supports Parenting Support Staff/Mentor to child ratio based on Provider's Treatment Model, specific Service Package(s) and considering case complexity, in accordance with the specific Service Package(s) that the Provider has applied to be Credentialed for; ***and/or***

☐ b) If Provider intends to newly hire or contract to fulfill the Parenting Support Staff/Mentor requirements, the Provider must submit a Plan, that includes a timeline (accounting for time needed to negotiate, complete needed background checks, etc.) and addresses each of the following:

   i) Development of documentation of specific job duties (such as a job description and/or contracting scope of work), including minimum qualifications per the *T3C System Blueprint*; ***and***
   ii) When the Provider will be ready to hire/contract for this function; ***and***
   iii) The process that will be used for on-boarding and training to fulfill the requirements; ***and***
   iv) Development of training/curriculum and policies/procedures specific to this function.

In the **boxes below** enter an Implementation Plan

An Active Interim Credential can be issued while the CPA is actively working towards fully meeting the requirements of this Section. The CPA will be required to submit routine status reports (during the Active Interim Credential Period) to demonstrate and ensure progress is being made toward readiness for the Full Credential.

Implementation Plan During the Active Interim Credential

*If Provider answered **"no"** to question **four** above, Provider is required to submit status reports reflecting progress on your plan presented below, as directed in your Verification Form, until your plan is completed. The Active Interim Credential status period must end by the expiration of the Interim Credential on the last day of the twelfth calendar month after the Active Interim Credential is issued. Insufficient progress or failure to meet the requirements timely, leading to not obtaining the Full Credential by the deadline, will result in the loss of the Interim Credential and it's resulting ability to offer T3C services, as well as one or more Contract Actions, up to and including Contract Termination.*

In the boxes below, enter a **detailed, bulleted list of Specific Tasks with anticipated start and end time frames** relevant to this category that will be completed during each 3-month quarter of the Active Interim Credential. Be sure to include all relevant tasks, for example: drafting, finalizing, and approval of policies and procedures; communicating changes and training staff and/or Caregivers; etc.

1ˢᵗ Quarter Active Interim Credential Tasks (for completion within the first three months of Active Interim Credential) Note- If not completed during the Inactive Interim Credential period, provider will need to have Contract amended to include T3C Service Packages Credentialed for. Be aware that currently placed children will not be automatically moved to T3C Service Packages electronically on the first date of Active Interim Credential. Providers should account for potential delays in receipt of T3C rate reimbursements when identifying time frames for obtaining funds necessary to purchase and pay for specific items.

Tasks for this Quarter: ☐ Not Applicable

2nd Quarter Active Interim Credential Tasks (for completion within the second three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

3rd Quarter Active Interim Credential Tasks (for completion within the third three months of Active Interim Credential)

Tasks for this Quarter: ☐ Not Applicable

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4th Quarter Active Interim Credential Tasks (for completion within the final three months of Active Interim Credential)
Note- Provider must account for submission of Application for Full Credential with adequate time for DFPS review prior to Active Interim Credential expiration on the last day of the twelfth calendar month following date of Active Interim Credential issuance.

Tasks for this Quarter: ☐ Not Applicable

PRIVACY STATEMENT

DFPS values your privacy. For more information, read our [Privacy and Security Policy](#).

SECTION V - CERTIFICATION	
I certify that the information provided in this Application is to the best of my knowledge, complete and accurate, that the named legal entity has authorized me, as its representative, to submit this Application, and that the legal entity complies with all eligibility requirements. I have informed DFPS of any changes to information or documents previously submitted regarding the named legal entity.	
Signature of Contractor Designated Signature Authority: **X**	Date:
Name of Designated Signature Authority (Printed):	

Note: Signature can be handwritten and scanned, an electronic signature, or a digital signature, but a scripted font is not a legal or electronic signature and will not be accepted.

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