

Required Staff Position <sup>1</sup>	Can be Contracted? <sup>2</sup>	Can be Part Time at single permitted operation?	If qualified, can simultaneously serve in 1 other position at the same permitted operation? <sup>3</sup>	If qualified, can simultaneously serve in <u>more than</u> 1 other position at the same permitted operation?	Can simultaneously serve in the same position at 1 other permitted operation under the same Provider? <sup>4</sup>	Can simultaneously serve in the same position at <u>more than</u> 1 other permitted operation under the same Provider?	If qualified, can simultaneously serve in 1 other position at 1 other permitted operation under the same Provider?	Can simultaneously serve in <u>more than</u> 1 other position at 1 other permitted operation under the same Provider?	Can be entirely remote except for child visits (for CPA, never in office)?
Licensed Administrator <sup>5</sup>	No	No, Full Time (30+ hours/wk)	Yes	No	Yes, if approved by RCCR (§748.531/§749.631 & §748.533/§749.633)	No	Yes	No	No
Program Director	No	No, Full Time (30+ hours/wk)	Yes (but not Treatment Director)	Yes (but not Treatment Director, and have to provide staffing plan for FT positions=90 hours/week)	Yes	No	Yes	Yes (but not Treatment Director, and have to provide staffing plan for FT positions=90 hours/week)	No
Treatment Director	No	No, Full Time (30+ hours/wk)	Yes (but not Program Director)	Yes (but not Program Director, and have to provide staffing plan for FT positions=90 hours/week)	Yes	No	Yes	Yes (but not Program Director, and have to provide staffing plan for FT positions=90 hours/week)	No
Registered Nurse (Staff only)	No	Yes for CPA; No for GRO (§748.569)	Yes	Yes (but have to provide staffing plan for FT positions=90 hours/week)	Yes	Yes for CPA; No for GRO	Yes	Yes (but have to provide staffing plan for FT positions=90 hours/week)	Yes for CPA; No for GRO
Registered Nurse (Staff or Contract)	Yes	Yes	Yes	No	Yes	Yes for CPA; No for GRO	Yes	No	Yes for CPA; No for GRO
Case Management Staff	No	Yes	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes
Direct Delivery Caregivers	No	Yes	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes	Yes if Part Time	No
Staff Training & Workforce Development	Yes	Yes	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes
Foster Family Home Caregiver Recruitment and Retention	Yes	Yes	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes
Staff Recruitment and Retention	Yes	Yes	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes

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Placement Staff	No	Yes	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes
Continuous Quality Improvement	Yes	Yes	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes
Billing/ Cost Reporting/ Claims Administration	Yes	Yes	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes
Cross-System Coordination	Yes	Yes	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes
Education Liaison	Yes	Yes	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes
Crisis Management	Yes	Yes	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes
Driver	Yes	Yes	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes
Aftercare Case Management	Yes but only if approved as meeting the full T3C intent	Yes	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes
Therapist (for service planning & milieu)	Yes	Yes	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes for CPA; No for GRO
Physician	Yes	Yes	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes	Yes if Part Time	No
Behavior Support Specialist/ Mentor	Yes	Yes	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes for CPA; No for GRO
Enhanced Safety & Monitoring Staff	Yes	Yes	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes	Yes if Part Time	No

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Transitional Support Staff/ Mentor (with Aftercare)	Yes	Yes	Yes (but not child's Case Manager)	Yes if Part Time	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes
Kinship Caregiver Home Support Staff/ Mentor (with Aftercare)	Yes	Yes	Yes (but not child's Case Manager)	Yes if Part Time	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes
Parenting Support Staff/ Mentor (with Aftercare)	Yes	Yes	Yes (but not child's Case Manager)	Yes if Part Time	Yes	Yes if Part Time	Yes	Yes if Part Time	Yes

**Footnotes:**

**1.** The T3C Rate Methodology is designed with each required staff position identified in the "Staffing Requirements" section of a Service Package in the *T3C System Blueprint* to support one Full Time Equivalent position. If there is also a "Generally Appropriate Staff to Child Ratio Based on Service Package" specified for a required staff position, that was used to support the rate methodology such that the number of children specified in the ratio is the number of children that will support 1 FTE of that position. While that ratio can vary based on an operation's specific Evidence-informed Treatment Model, and dependent on the complexity of the caseload, the agency/operation should be able to identify the approximate ratio they are using for Cost Reporting purposes. These positions should be paid out of the Foster Care Reimbursement Daily Rate (this list does not include Medicaid-billable service providers).

Note: Minimum Standards defines Full Time as at least 30 hours per week, but in most instances, the rate methodology FTEs assume 40 hours per week.

**2.** In general, if a position states that it can be contracted, qualified individuals can be contracted, or work under another written agreement, to serve in that role or an additional different role that can also be contracted for, at different permitted operations under unrelated providers, depending on apportionment of time.

**3.** If a Provider's Treatment Model and scale support combining two or more required staff positions, the Provider must have a system to track the time allocated to each function within each Credentialed Service Package for Cost Reporting purposes. Additionally, the Provider must be intentional with establishing and following their policy and procedures to periodically assess the workload of these combined positions, regardless of if the position has a "Generally Appropriate Staff to Child Ratio Based on Service Package" identified, to ensure that it remains manageable for one individual and contributes the desired quality outcomes.

**4.** If a Provider's Treatment Model and scale support an individual serving in the same role across multiple permitted operations, controlled by the single Provider, that is generally acceptable. However, the Provider must have a means to track the individual's time spent at each operation/agency and for each Service Package for Cost Reporting purposes. Additionally, the provider must be intentional with establishing and following their policy and procedures to periodically assess the combined workload (census, service package, etc.) to ensure that it remains manageable for one individual and contributes the desired quality outcomes, regardless of if the position has a "Generally Appropriate Staff to Child Ratio Based on Service Package" identified.

**5.** Since the T3C System Blueprint utilizes Minimum Standards as part of the foundation, some required staff positions have oversight under HHSC's Residential Child Care Regulation Division, such as the Licensed Administrator, Treatment Director, and Registered Nurse. While this chart has been reviewed by HHSC and is aligned with position minimum expectations, it also reflects that T3C requires the Licensed Administrator to meet requirements that exceed Minimum Standards, and its limitations will take precedence over the ability of any other position that allows for greater flexibility.