cactx

Children's Advocacy Centers™ of Texas
Protecting childhood for all Texas children.

Request for Proposals: Strategic Consulting Services – CAC Mental Health Cohort Pilot

Organization Overview

Children's Advocacy Centers of Texas (CACTX) is the non-profit, statewide organization for 71 children's advocacy centers (CACs) across Texas that have served over one million children and families impacted by crimes since 1995, helping them achieve safety, justice, and healing in their greatest time of need.

The CAC network in Texas is the largest and strongest in the country due to the public-private partnership that was established over 30 years ago through enabling legislation within the Texas Family Code. Per Texas Family Code requirements, CACTX provides support, monitoring, training, and passthrough funding to all Texas CACs and their multidisciplinary team (MDT) partners, which includes over 1,500 CAC staff members and official partnerships with over 1,000 law enforcement agencies, 250 prosecutors' offices, every division of the Department of Family and Protective Services (DFPS), all children's hospitals, and countless medical and mental health professionals.

This public-private partnership also extends to funding. CACTX contracts with the Health and Human Services Commission (HHSC) and the Office of the Governor (OOG) to administer over 80 million dollars to CACs. This investment goes towards providing comprehensive services to over 60,000 child victims of crime annually. As the one non-profit to serve as the first stop for child victims of crime, CACs provide a safe and child-friendly environment offering six core services to achieve healing and justice: joint investigation coordination, forensic interviews, comprehensive case management, trauma-focused therapy, medical evaluations, and multidisciplinary case review.

Project-Specific Context

CACTX was founded in 1994 with a charter membership of 13 local CACs. In 1995, CACTX secured enabling legislation, a $3 million biennial appropriation, and an executive director was hired to operate the state association, headquartered in Austin. The chart below provides an overview of the growth in the CAC network and at CACTX over the past three decades.

	FY1995	FY2005	FY2015	FY2026
# of CACs	13	59	68	70
# of Official Counties Served	44	144	183	210
# of Children Served	7,300	32,541	39,852	61,667
Local CAC Staff	66	434	645	1,612
Amount of Public Funding Subcontracted to CACs	$1.5 million	$3 million	$32 million	$80 million

The growth illustrated by this chart reflects a significant increase in more children served across Texas. As the reach and impact of the CAC network has grown, so too have the demands placed on both local CACs and CACTX—particularly in the areas of regulatory compliance and service complexity.

Evolving Complexity of Mental Health Service Provision

As the CAC model has evolved and funding has increased, the nature of services provided to children and families has also grown more complex. A clear example of this growing complexity is found in the provision of mental health services. Over the past 15 years, a mental health system has organically developed across the CAC network. However, this growth has occurred without shared infrastructure to guide service delivery, scale specialized care, or streamline operations.

Per the Texas Standards for CACs, all CACs in Texas must provide consistent access to evidence-based, trauma-informed mental health services. Without effective therapeutic intervention, many traumatized children will suffer ongoing or long-term adverse social, emotional, developmental, and health outcomes that may impact them throughout their lifetimes. Evidence-based treatments and other practices with strong empirical support are available that can reduce the impact of trauma and the risk of experiencing future abuse. However, the capacity to meet the extensive, complex demands of mental health services and the availability of strong clinical leadership expertise varies widely across the CAC network. CACTX has been engaged in a recent mixed methods study and planning process examining capacity, rising complexity, and opportunities to improve access and quality of care across the network. Findings to date have identified a cohort model as the priority direction and CACTX is now preparing to pilot this model for CAC mental health services. The pilot will be designed to address components of clinical practice management that drive the most local burden across CACs. The model will specifically address administrative and back-office support functions, elevate clinical quality and consistency across programs, and increase access to specialized and bilingual services for CAC clients.

Project Scope

CACTX envisions the development of a CAC mental health cohort pilot to take place across three workstreams:

Scope of Work

- **Workstream A: Operating Standards and Pilot Readiness -**
  - **Clinical Practice Management Benchmarking**: Building on findings from CACTX's research and planning process, develop clinical practice management operating standards and measurable benchmarks for CAC mental health programming, drawing on best practices in behavioral health service delivery. Conduct a targeted operational baseline assessment of CAC mental health operations (e.g. EHR systems, scheduling practices, etc.), comparing current practices with operating standards to inform pilot design and site selection. Produce pilot readiness profiles and an operational baseline summary. This work is not to replicate prior assessments or research, it will gather and recommend specific operational practices.
  - **CAC Mental Health Evaluation Plan:** Contemplating mental health data collection best practices and the legal frameworks governing mental health data within a CAC setting, including HIPAA, Texas law, and trauma-informed care considerations, produce a CAC Mental Health Evaluation Plan that defines recommended data points, governance practices, and outlines change management requirements current statewide CAC data collection.

  - **EHR Market Research:** Conduct a landscape assessment of mental health electronic health record (EHR) systems suitable for CAC use. Produce a vendor evaluation matrix, options brief, and implementation cost estimate.
- **Workstream B: Pilot Design -** Building on Workstream A, design a viable cohort model structure for CAC clinical practice management and develop a detailed pilot plan. Work includes: assessment of legal structure options; detailed financial modeling; governance and employment structure design; pilot program design; and engagement of a CAC Mental Health Task Force as an advisory body throughout. Deliverables include a legal structure options brief, financial model, structural recommendations, and draft pilot design.
- **Workstream C: Launch Planning -** Translate Workstream A and B components into pilot launch plans. Work includes: final EHR system selection and implementation approach; finalized CAC Mental Health Evaluation Plan and change management framework; and a step-by-step pilot launch plan with identified and vetted CAC participants, milestones, governance, staffing plan, performance monitoring framework, and FY28 operationalization plan. Materials should be tailored for both internal leadership decision-making and external stakeholder communication.

Eligibility of Applicants

This RFP is open to all strategic consultants and consulting agencies that possess a proven track record and expertise in behavioral health systems; clinical practice management; nonprofit or healthcare organizational design; health information systems (including EHR evaluation and implementation); and implementation planning. Experience working with children's advocacy centers, child welfare organizations, or statewide nonprofit membership organizations is strongly preferred. By submitting a response to this solicitation, the applicant certifies that it and its principals are not suspended or debarred from doing business with the state of Texas or the federal government as listed on the State of Texas Debarred Vendor List maintained by the Texas Comptroller of Public Accounts and the System for Award Management (SAM) maintained by the General Services Administration.

Submission Guidelines

Proposals must be submitted by 5:00pm CT on Monday, November 16th, 2026. Proposals should be submitted in PDF format to Chelsea Woodworth at cwoodworth@cactx.org.

Required Components of Proposal

Competitive proposals will address the following:

- The applicant's relevant areas of expertise (e.g., behavioral health systems; clinical practice management; nonprofit or healthcare organizational design; EHR evaluation and implementation; implementation planning);
- The applicant's prior and current experience working with clients similar to CACTX (i.e., nonprofit organizations; statewide membership organizations; or entities with complex organizational structures, such as networks of affiliates, multi-site operations, or formal coalitions;
- A detailed scope of work including associated deliverables and timelines;
- How the applicant will build off CACTX's existing research findings and planning work;
- Applicant's team structure and capabilities;
- Applicant's process for working with clients;

- Whether any services would be subcontracted (versus provided in-house) and if so, a description of the proposed relationship between the applicant, the subcontractor, and CACTX;
- Fees, payment structure, and a line-item budget broken down into monthly costs;
    - The proposed budget should cover the consultant's proposed travel costs- CACTX will not cover travel on a reimbursement basis. No travel costs outside of the negotiated amount included within the final contract will be reimbursed by CACTX.
- Whether any members of the applicant's existing client base would present a potential conflict of interest related to the work proposed by CACTX;
- Applicant's capabilities to meet all compliance and other requirements in working with an organization that receives public funding (e.g., technical requirements, performance dates/schedules);
- At least three references that can speak to the applicant's experience, expertise, and reputation;
- Whether the applicant is a small business and/or a minority-owned or woman-owned business;
- The applicant's connection to Texas, if applicable.

In addition, proposals must include the following information related to organizational structure and financial stability:

- Legal name and address for the legal entity that will sign the contract;
- Headquarters location and presence of regional offices;
- Link to applicant's website;
- If the primary contact for this RFP is not the person authorized to sign the contract, please provide the name, job title, phone number, and email address of the primary contact;
- The number of years the applicant has been in business;
- The number of years the applicant has been providing the services requested for this project;
- If available, provide applicant's Dun and Bradstreet number; and
- Please include the previous three years of audited financial statements, including Balance Sheet, Income Statement, and Statement of Cash Flows.

Please note that the applicant bears the responsibility to cover any costs pursuant to preparing the proposal. It is the applicant's responsibility to obtain, at their sole expense, all information necessary for the preparation of a proposal. CACTX is not liable for any costs incurred by any vendor in the preparation, presentation, or any other aspect of the proposal received by reason of this RFP.

Contract Period

The initial contract is anticipated to begin in December 2026, with all final deliverables completed by June 1, 2027, unless otherwise agreed upon by CACTX and the applicant. CACTX reserves the right, at its sole discretion, to extend or renew the contract based on performance and organizational needs.

Timeline

Issue Date	October 16, 2026
Applicant Questions Submitted to CACTX	October 27, 2026
CACTX Releases Q&A on Website	October 30, 2026
Proposals Due	5 p.m. CT on November 16, 2026

Review & Follow-Up	November 17-20, 2026
Award Announced	Estimated: November 23, 2026
Contract Finalized	Estimated: December 2026
Initial Draft of Pilot Design Due	Estimated: March 15, 2027
Contract Period Ends and All Deliverables Due	Estimated: June 1, 2027

Please submit any questions regarding this RFP to Chelsea Woodworth, Chief Program Officer, by October 27, 2026. Available answers will be published on the CACTX website by 5 p.m. CT on October 30, 2026.

Application Review Process

CACTX seeks to contract with one individual or agency. During the review process, applicants may be contacted to discuss the project in more detail, provide additional information, discuss potential revisions to the proposal, and/or discuss revisions to the budget for the project.

Requests will be reviewed on a competitive basis. The following equally weighted criteria will be considered by a panel of reviewers on a five-point scale, with "1" being the lowest score and "5" being the highest score for each criterion:

- The applicant's prior and/or current experience working with clients similar to CACTX (i.e., nonprofit organizations; statewide membership associations; or entities with complex organizational structures (e.g., networks of affiliates, multi-site operations, or formal coalitions);
- The applicant's relevant areas of expertise (e.g., behavioral health systems' clinical practice management; nonprofit or healthcare design; EHR evaluation and implementation);
- The applicant's ability to demonstrate through the proposal a solid understanding of CACTX's needs and goals, including how the proposed approach builds on CACTX's existing research and planning;
- The applicant's ability to meet the full scope of CACTX's requirements, deliverables, and timelines for the project; and
- The applicant's costs and value to CACTX.

CACTX Contact

Questions regarding this RFP or the proposal submission guidelines may be directed to:
Chelsea Woodworth, Chief Program Officer: cwoodworth@cactx.org.