

Lived Experience Participation Policy*

October 2026

Background

The federal Administration for Children and Families (ACF) emphasizes youth and family voice as critical elements to a well-functioning child welfare system. Child welfare agencies, courts, and Court Improvement Programs (CIPs) are strongly encouraged to work together to ensure that youth and family voice are central in child welfare program planning and improvement efforts.¹

The Children's Commission aims to improve the child welfare system by increasing awareness, encouraging judicial leadership, promoting best judicial and attorney practices, and informing policy and practice affecting child welfare in Texas. The Children's Commission aspires to expand systems-level engagement of youth and family members with lived experience in child welfare in the Children's Commission's work. Membership on the Children's Commission, as well as many Commission committees and workgroups, includes several individuals with lived experience in the child welfare system.

Eligibility

Individuals with lived experience in the child welfare system who are invited to participate in meetings, events, and trainings hosted by Children's Commission staff are eligible to receive compensation for their time and expertise. An individual with lived experience in the child welfare system may include a person currently in foster care (including extended foster care), a person formerly in foster care, a person who had an open Family-Based Safety Services (FBSS) or Child Protective Services (CPS) case as a caregiver but whose case is now closed, or a person who is currently or has previously served as a kinship caregiver (both biological and fictive kin). The Children's Commission cannot compensate any individual with lived experience who has an open child welfare case or is participating in their professional capacity.

Reimbursement Forms

Please complete the Children's Commission Lived Experience Compensation and Travel Reimbursement Request Form below in full, sign, and date. Forms with the supporting receipts attached may be submitted by email or mail to the following:

E-mail: Willette Sedwick at commission.accounting@txcourts.gov

Mail: Supreme Court of Texas Children's Commission

Attn: Commission Accounting

P.O. Box 12248

Austin, TX 78711

¹ Children's Bureau Information Memorandum ACYF-CB-IM-19-03. August 1, 2019. Available online at <https://www.acf.hhs.gov/sites/default/files/documents/cb/im1903.pdf>.

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Compensation Scale

Please note that pursuant to grant guidelines, all compensation must be made on a reimbursement basis and cannot be provided before the meeting, event, or training. **Additional reimbursement for transportation, lodging, meals, and childcare is also available.** Submitting the reimbursement Lived Experience Compensation and Travel Reimbursement Form starts the process. Commission staff are available to answer questions and provide support with completing the reimbursement request form.

Trainings

Trainings include virtual and in-person panel and individual training opportunities. The rate includes time spent to prepare and present at the training.

Panelist (one member of a group presentation, including moderator)

- **Virtual** - \$150 flat fee
- **In-Person** - \$200 flat fee

Presenter (sole member of a presentation)

- **Virtual** - \$250 flat fee
- **In-Person** - \$300 flat fee

Keynote (sole member of a highlighted presentation)

- Speaker fee will be negotiated pursuant to speaker contract

Meetings

Meetings include participation in meetings scheduled and hosted by the Children's Commission, including Children's Commission, Committee, Task Force, Workgroup, and Roundtable meetings. The rate includes time spent to prepare and participate in the meeting.

- **In-Person or Virtual** - \$30 per hour

Travel

All travel expenses will be paid in accordance with the following policies.

Reimbursements for personal expenses, alcoholic beverages and gratuities are not allowed.

Transportation

Travelers are required to select the most cost-effective mode of transportation. Original receipts are required for transportation expenses such as parking, airfare, rental car, taxis, and shuttles.

Transportation Options

Mileage Calculation – Travelers may be reimbursed .76 cents per mile for travel by personal automobile. In determining route, the traveler must select the most cost-effective, reasonably safe, shortest route; however, the traveler may choose an alternative route according to the road conditions and/or the quickest route. To

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claim mileage reimbursement, requests must include driving directions generated by a mapping service such as MapQuest, Google Maps, etc. The mapping service attachment must include:

1. The traveler's headquarters address (start of trip travel) and the meeting destination;
2. Line by line driving directions;
3. Includes the total one-way mileage.

Rental vs. Personal Vehicle - Travelers are responsible for determining the most cost-effective means of ground transportation. The maximum reimbursable amount for ground transportation is determined by using the Comptroller of Public Accounts mileage calculator found here: <https://fmxcpa.texas.gov/fmx/travel/mileage/>

Rental Car - Reimbursements will be made only for the vehicle type/class with the lowest rate. A copy of the original receipt is required and must include the name of the rental company, the name of the traveler, the start and end date of the rental agreement, itemization of expenses incurred, and proof of payment.

Airfare - Reimbursement may not exceed the cost of the lowest available airfare (Economy seating or similar) between the traveler's headquarters location and duty point. Reimbursement will not be made for upgrades or early check-in/boarding. Receipts must include the name of the traveler, airline, ticket number, class of transportation, travel dates, and proof of payment. Itineraries/confirmations that show cost but not payment will not be reimbursed.

Incidentals

Original receipts are required for incidental expenses (i.e., baggage fees, gasoline, internet access, tolls).

Meals

Meals are reimbursed according to the rates set by the General Services Administration. Refer to www.gsa.gov for the daily maximum meals allowance.

- Non-Overnight Travel: Traveling outside of designated headquarters for six consecutive hours or more may be reimbursed for meals not to exceed \$36.
- Overnight Travel: Meal expenses incurred for overnight travel are reimbursable up to the maximum GSA rate for the destination location. The first and last day of travel is calculated at 75 percent of the daily maximum meal allowance set by the GSA.
- Travelers may only claim meals that are not provided as part of an event. For example: at a conference, where lunch is provided to attendees, the traveler may not claim reimbursement for lunch.

Lodging

Please refer to www.gsa.gov for daily maximum lodging allowances. If you are traveling outside of your designated headquarters, the single occupancy rate plus applicable taxes for your hotel room will be reimbursed for arrival on the day before the conference or meeting through the night after the conference or meeting ends. Additional room nights, guests, and incidental expenses are not reimbursable.

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Payment

The Children's Commission is unable to process any reimbursement requests until after the meeting or event has occurred. It is highly recommended that the reimbursement information above be reviewed before making any travel arrangements. A reimbursement check will be mailed to the address listed on the reimbursement form. Please see the next section for exceptions.

Payment Exceptions

The Children's Commission must process all travel reimbursements and participation compensation through the Texas Comptroller of Public Accounts ("Comptroller").

Please note that the Comptroller is authorized to withhold payments from the Children's Commission in order to apply the payments to a state debt. State debts may include unpaid taxes, delinquent child support payments, student loan defaults, overpayment to a payee, or other debt to the state as defined by law. This action is outside of the control of the Children's Commission. The Children's Commission cannot make exceptions or provide an alternate means of payment in these circumstances.

Please direct any questions about payment and payment exceptions to Willette Sedwick, at willette.sedwick@txcourts.gov or (512) 463-1310.

CHILDREN'S COMMISSION

P.O. Box 12248 ~ Austin, TX 78701

512-463-1310

LIVED EXPERIENCE COMPENSATION AND TRAVEL REIMBURSEMENT REQUEST FORM

Please Allow 30 days for processing.

PAYEE INFORMATION:

Name: _____

Social Security Number: _____

Mailing Address: _____

Email: _____

City/State/Zip: _____

Phone: _____

Training/Meeting Information: *Please provide the name of the training or meeting you seek reimbursement for attending.*

Participation Description: *Please select from the options below that which best describes your participation. To determine the amount of participant compensation please refer to the compensation scale located in the Lived Experience Participation Policy.*

Select	Description	Rate	Meeting Hours	Total
	I participated in a meeting.	\$30/Hr.	x	\$ 0.00
	I was a panelist at a training in person.	\$200		
	I was a panelist at a training virtually.	\$150		
	I was a presenter at a training in-person.	\$300		
	I was a presenter at a training virtually.	\$250		

Note: *Refer to travel guidelines for maximum lodging and meals allowances. Receipts and supporting documentation must be attached, including mileage calculation between headquarters and conference location.*

Date	Mileage			Airfare	Rental Car/ Taxi/Shuttle	Parking/ Tolls	Meals	Lodging	Childcare	Misc.	Total
	Distance	Rate	Cost								
		0.76	\$ 0.00								\$ 0.00
		0.76	\$ 0.00								\$ 0.00
		0.76	\$ 0.00								\$ 0.00
		0.76	\$ 0.00								\$ 0.00
		0.76	\$ 0.00								\$ 0.00
		0.76	\$ 0.00								\$ 0.00

Travel Total										\$ 0.00
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Reimbursement Amount (Participation Compensation + Travel)										\$ 0.00
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I CERTIFY THAT:

1. The amounts listed are actual expenses paid personally by me for the purpose stated.
2. The reported hours or selected compensation accurately reflect my time or participation.
3. I have not been nor will be reimbursed from any other source for any of the expenses listed.
4. This request is correct to the best of my knowledge.

Payee Signature: _____

Date: _____

**This form may be e-signed and sent to commission.accounting@txcourts.gov. All required supporting documentation should be scanned and attached in email with form. Or, send completed form and all required documentation (tape small receipts to standard-size paper), to:
PO Box 12248, Austin, TX 78701**

For Commission Use Only

Commission Approval _____

Date _____

COMBJ _____