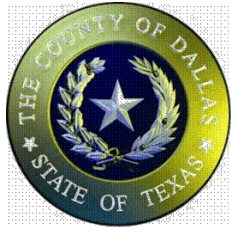


Dallas County Behavioral Health Leadership Team
Thursday, February 11, 2021
9:30am -11:00am
Virtual Meeting via Microsoft Teams

- I. Welcome and Call to Order
 - Review/ Approval of January 14, 2021 Meeting Minutes
- II. Introductions
- III. Presentations
 - North Texas Behavioral Health Authority- Diversity, Equity, and Inclusion (DEI) Advisory Council and Courageous Conversations
 - Dr. Gloria Morrow, Licensed Clinical Psychologist
 - Dallas County Criminal Justice Department- “SAMHSA Grant 2nd Year Review - Successes, Obstacles, and Opportunities Against Backdrop of Global Pandemic”
 - Shenna Oriabure, LMSW, Mental Health Specialty Court Coordinator
- IV. North Texas Behavioral Health Authority (NTBHA) Update
- V. Meadows Mental Health Policy Institute (MMHPI)
- VI. Dallas County Behavioral Health Housing Workgroup
- VII. 1115 Waiver Crisis Services Project Update
- VIII. Legislative Update
- IX. Funding Opportunities
 - The Cottages Update
 - SAMHSA Residential Treatment Grant Update
 - Community Courts Grant Update-Public Defender’s Office (PD)
 - Restorative Justice Division-District Attorney’s Office (RJD)
- X. Upcoming Events and Notifications
- XI. Public Comments
- XII. Adjournment

* Indicates items requiring approval from Dallas County Behavioral Health Leadership Team

The following reports from BHLT Committees are included for your records: *ACOT, BHSC, PD Mental Health Stats, North Texas Behavioral Health Authority, and RJD Stats*. Unless action is required, there will be no verbal updates from those committees.



DALLAS COUNTY, TEXAS

Minutes of the Behavioral Health Leadership Team Meeting

Thursday, January 14, 2021

<https://www.dallascounty.org/departments/criminal-justice/bhlt/>

Welcome and Call to Order

Commissioner John Wiley Price called the Behavioral Health Leadership Team (BHLT) meeting to order at 9:30 AM.

Commissioner John Wiley Price requested a motion regarding a quorum of the Court of Commissioners being present to officially open the meeting. A motion was made by Commissioner Dr. Theresa Daniel for approval and was then seconded by Commissioner J.J. Koch. Commissioner John Wiley Price asked if there is any unreadiness. There was no unreadiness made to the motion. The motion was unanimously passed accepting the request without objection.

Commissioner John Wiley Price announced that the meeting is being recorded and those in attendance are consenting to being recorded.

Review/Approval of Minutes

The minutes of the BHLT meeting held on Thursday, November 12, 2020, were included in the meeting packet.

Commissioner John Wiley Price requested a motion for approval of the minutes. A motion was made by Commissioner Dr. Theresa Daniel for approval of the minutes and was then seconded by Commissioner J.J. Koch. Commissioner John Wiley Price asked if there was any unreadiness. There was no unreadiness made to the motion. The motion was unanimously passed by the committee members accepting the minutes as read without objection or modifications.

Introductions

Commissioner John Wiley Price asked first-time attendees to introduce themselves. The following individuals identified themselves as first-time attendees to the BHLT: NaDoris King, APAA; Jordan Melake, Dallas County Criminal Justice Department; Hope Watson, NAMI Southern Sector; Lt. Melissa Franks, Desoto PD. Commissioner John Wiley Price thanked the attendees for their participation and acknowledged the BHLT's importance to the community.

North Texas Behavioral Health Authority (NTBHA) Update

Carol Lucky, CEO of NTBHA, provided the updated. Ms. Lucky reported on the impact COVID-19 has had on transitioning individuals from the hospitals to inpatient care in the Residential Center at Homeward Bound as well as the three substance abuse facilities. Ms. Lucky stated that the outpatient providers have experienced varying levels of impact, but have managed to remain open. Ms. Lucky stated that the EOU has been well utilized and she acknowledged how the community has worked

together to ensure that individuals are transported as quickly as possible. Ms. Lucky reported that Parkland Hospital has been backed up due to COVID-19 but Dallas Behavioral Health has offered space when needed. Ms. Lucky thanked Dallas Behavioral Health for their assistance. Ms. Lucky stated that Homeward Bound and Turtle Creek Manor have had to limit intakes, and she mentioned the challenges Dr. Jill Johansson-Love has experienced transitioning individuals from the jail. Ms. Lucky acknowledged the impact COVID-19 has had on providing physical and mental healthcare needs. Ms. Lucky stated that she would contact the commissioners if the impact reaches the level of a crisis.

Carol Lucky reported that the funds for private psychiatric beds (PPB) is being consumed quicker than anticipated, but other funds have been set aside and the situation is being monitored closely. Ms. Lucky reported that NTBHA has served 24,814 adults, which is 105% of the target number, and 1773 children, which is 107% of the target number. Ms. Lucky reported that prescriptions being filled were down 200 prescriptions from December 19 to December 20 and overall 25,000 prescriptions filled. Ms. Lucky stated that NTBHA has renegotiated their pharmacy contract with Integrated Prescription Management (IPM) resulting in a \$120,000 to \$150,000 per month decrease in prescription costs. Commissioner John Wiley Price asked for an update on the dissemination of the COVID-19 vaccination to providers and pharmacies. Carol Lucky responded stating that Parkland Hospital has assisted in providing vaccines to the frontline providers. Parkland Hospital has prioritized the inpatient facilities, the residential facilities, and the crisis service providers. Ms. Lucky stated she believes that Dallas Metrocare has received the vaccines. Ms. Lucky stated they are working down the list to provide the vaccination to outpatient providers as well. Ms. Lucky thanked Parkland Hospital stating that they have been accommodating and generous. Ms. Lucky mentioned that no one has received their second vaccination. In regards to the pharmacies, Ms. Lucky stated that the pharmacy must enroll in the vaccine program and then individuals can receive the service from that pharmacy. Ms. Lucky stated that a majority of the small privately owned pharmacies, as well as Walgreens, Walmart, CVS are a part of NTBHA's network. Ms. Lucky stated that a notice will be sent through IPM to ensure that the providers are prepared.

Carol Lucky reported on the RFP's NTBHA posted for the expansion of services and unique and innovative approaches to the service areas. They followed the HHS commission's identified gaps of: access to appropriate behavioral health services, continuity of care for individuals exiting county or local jails, access to timely treatment services, implementation of evidence-based practices, use of peer services and services for special populations. Ms. Lucky reported contracts were offered to the following organizations: Jewish Family Services to expand their peer services and case management services using the clubhouse program model; Child and Family Guidance Center to expand and open a clinic in Rockwall County; Centro de Mi Salud to increase peer services for the Spanish speaking and immigrant population; and Southern Area Behavioral Health to extend peer services to the southern sector. Ms. Lucky mentioned the benefit Southern Area Behavioral Health's on crisis services. A contract was also offered to Lakes Regional Community Center, in Hunt County, to expand their coffeehouse peer services program model. Ms. Lucky reported that \$500,000 in funding was issued through these contracts. Ms. Lucky reported that a second round of grants maybe issued with funding from the COVID-19 grants. Commissioner John Wiley Price asked for an updated on the Mental Health Support Line.

Dr. Walter Taylor, CSO of NTBHA, provided an update on the Diversity Equity and Inclusion Council. NTBHA has contracted with Dr. Gloria Morrow, a noted psychologist and expert in multicultural competency and diversity issues. The council will not be a decision-making body but advisory in nature, advising Carol Lucky and her senior staff on issues concerning diversity, equity, and inclusion. The council will make recommendations to NTBHA regarding equity, diversity and inclusion as a workforce. The council will also make recommendations to NTBHA regarding the provider network and behavior health services, as well as recommendations on trainings for the provider network and partnering agencies. NTBHA has proposed seven training sessions to be facilitated by Dr. Morrow. The proposed

training sessions are: Building the beloved community through cultural humility; Understanding skin color privilege; Discussing racism with those you serve; Strategies for supporting your team when they encounter racism and micro aggression; Understanding acute racism reactions; Healing from racial trauma; How to be a true ally. Dr. Morrow has recommended that the council have 9 to 11 members who will serve a one-year term. The council will appoint three key influencers and 6 members from the community. These individuals should have a passion for diversity, equity, inclusion, and have experience in those areas. All applicants will be vetted by Dr. Morrow. Dr. Walter Taylor stated that NTBHA plans to disseminate applications to the community by Friday, January 15, 2021, along with a draft of the Charter. The selection of applicants will be made by mid-February 2021 and the first meeting will be scheduled for the end of February or the beginning of March 2021. Meaghan Read, Mental Health America (MHA), stated that MHA will conduct a complimentary program staged initially as a town hall meeting and their program focus will be created from the feedback of that meeting.

Dr. Walter Taylor reported that the Tenant-Based Rental Assistance Program (TBRA) currently has 43 households being served and the COVID-19 TBRA has 65 households being served. The total funding secured for both TBRA programs is \$1.9 million. Dr. Taylor stated that home inspections for the COVID-19 TBRA households were initially delayed in order to quickly serve families; however, they are now focused on conducting the home inspections. Commissioner John Wiley Price asked Dr. Taylor to provide an overview of the TBRA Program. Dr. Taylor stated that the TBRA Program functions through the Texas Department of Housing and Community Affairs as an affordable housing self-sufficiency program. TBRA provides 2 years of assistance and COVID-19 provides 6 months of assistance to qualifying households.

Meadows Mental Health Policy Institution (MMHPI)

Ron Stretcher, Director of MMHPI, stated the regulation waivers to provide telehealth services have been extended monthly, and the latest extension is through January 21, 2021. He expects many of the waivers to eventually transition to a permanent status. Mr. Stretcher stated that an update regarding the state legislature and funding will be provided at the next meeting. Mr. Stretcher stated that state funding should not be reduced; however, obtaining additional funding will be challenging.

Ron Stretcher provided an update on the Dallas Deflection Center stating that they are experiencing delays with the Office of Budget and Evaluation in establishing the account and briefing to present to Commissioners Court. Mr. Stretcher asked for assistance from the commissioners. Mr. Stretcher stated that Gordon Hikel assured them that the briefing would be on the agenda for the Commissioners Court meeting in February. Commissioners Price and Daniel mentioned thinking this issue was further along. Mr. Stretcher mentioned that grant funds will need to be spent and Homeward Bound need to have the spaced filled soon as possible; therefore, any assistance from Commissioners Court is welcomed. Commissioner Price stated that he reached out to Doug Denton for follow-up.

Dallas County Behavioral Health Housing Workgroup (BHHWG)

Commissioner Dr. Theresa Daniel stated that the housing and the homelessness partnerships continue to progress (i.e. Living Room, Deflection Center, St. Jude, FUSE, etc.) and is it is encouraging to witness. Commissioner Daniel mentioned that the Legislative session opened on Tuesday and; although not encouraged, we will should continue progressing in our local initiatives.

1115 Waiver Crisis Services Project (CSP) Update

Charlene Randolph, Dallas County Criminal Justice Director, introduced Yordanos (Jordan) Melake as the new 1115 CSP Program Manager. Ms. Randolph mentioned that Dr. Joyce White is still with the Criminal Justice Department but was now focused on managing criminal justice grants that are providing assistance to the criminal justice system during the time of COVID. Ms. Melake stated that

the CSP October report payment would be processed on January 29, 2021. Ms. Melake reminded the committee that CSP would stop earning 1115 Waiver funds at end of this year; however, there are currently enough funds in reserve to cover expenses through the end of the program in 2022. Texas HHSC has submitted to CMS a 1 year and 5-year extension of the 1115 Waiver program. Ms. Melake stated that the CSP Governance Committee has been meeting and working toward operationalizing the transition plan that was previously presented to the BHLT last year. In particular, CSP has been meeting with NTBHA to discuss service undertaking and will continue to meet with various stakeholders to best plan for service delivery after the Waiver expires.

Legislative Update

Janie Metzinger, Legislative Coordinator for NTBHA, provided the update. Ms. Metzinger mentioned that in addition to the Legislature opening, the Comptroller also provided an update on Monday. Rep. Phelan was elected as speaker of the House and has been impressed by the use of telehealth in his county (Orange). Ms. Metzinger anticipates that Rep. Phelan would welcome making telehealth permanent as bills continue to be filed and some have been filed on telehealth already. NTBHA will be speaking with them on these bills and think that telephonic visits are instrumental to service delivery. Commissioner Price asked Ms. Metzinger to track these bills and he also expressed concern with the digital divide with infrastructure in some communities. Ms. Metzinger stated that this was also a concern in rural areas and thinks there will be support among many sectors. In addition, Rep. Rose has been leading the way on mental health issues (i.e. capital crimes, Waivers, etc.). In addition, Rep. Murr has introduced SB 292 legislation on recovery housing. Ms. Metzinger stated that there are testing and meeting rules that have been implemented for meeting with legislators, hearings, and public testimonies during the time COVID (i.e. some legislators are having no public meetings, some have mask wearing rules, etc.). Commissioner Price has asked Charles Reed to provide an update on security measures as the legislature is making these adjustments.

• Cottages Update

Charlene Randolph, Director of Dallas County Criminal Justice Department, provided the update. She referenced the data report provided in the meeting packet, stating that the Cottages ended the month with 39 residents (1 abandoned their unit and 1 went to a nursing home for care). In addition, 1 client is going through the DHA approval process and there are 5 clients in the cue for placement. Commissioner Daniel asked how many units were available for occupancy, and Ms. Randolph reported that at last count 45 units were available.

• SAMHSA Residential Treatment Grant Update

Shenna Oriabure, Specialty Court/Special Populations Coordinator for Dallas County Criminal Justice Department, provided the updated and referenced the reports provided in the packet. She reported that we are currently in year 3 of the grant. During this current award year, there have been 14 admissions and 14 referrals are pending in the first quarter. Mrs. Oriabure confirmed Carol Lucky's report on COVID impact on slowing admissions to treatment and mentioned Homeward Bound and Nexus in particular. Mrs. Oriabure stated that this issue would be reported to SAMHSA and a brief presentation would be provided to BHLT next month. Mrs. Oriabure stated that there were areas in which we did not meet our goal during the last reporting to SAMHSA and one example is social connectedness of clients. However, due to COVID, clients are encouraged to physically distance at this time.

Community Courts Grant Update-Public Defender's Office (PD)

Chief Public Defender Lynn Richardson provided the update. Mrs. Richardson reported that the Public Defender's Office renewed its continued agreement with the South Dallas Drug Court in which they have been involved over the last 5 years. Mrs. Richardson also stated that they have signed their agreement with LSJA to study the SKIP program. Although the stats were not included in this meeting packet, they will be made available next meeting.

- **Restorative Justice Division-District Attorney's Office (RJD)**

Julie Turnbull, Assistant DA, provided the update. Mrs. Turnbull referenced the report provided in the packet. Mrs. Turnbull made mention of an article in the Dallas Morning News which highlighted the collaborative work between the Dallas County DA Office, NTBHA, and Metrocare. Mrs. Turnbull stated that this collaboration has allowed the DA Mental Health division to work more quickly and to make better connections for criminal justice involved clients who have mental health needs.

Upcoming Events and Notifications

- Commissioner Theresa Daniel announced that as of today, 3000 additional COVID vaccinations have now been made available at the Fair Park location for persons aged 75+.
- Veronica Moore, HHS Dallas Regional office, announced the appointment of Secretary of Health and Human Services, Anthony Becerra. Ms. Moore stated that leadership at Dallas Regional Office remains the same; however, changes may be forthcoming. Ms. Moore also provided a positive update on a client case that resulted from the collaboration between many BHLT committee partners.
- Ken Medlock, Southern Area Behavioral Health (SABH), invited all BHLT committee members to schedule a time to visit the newly renovated SABH office (on Gannon). An open house will be forthcoming.
- Meaghan Reed, Mental Health of Greater Dallas, asked for protocols for the vaccination of persons out of the NTBHA network. Dr. Walter stated that clients should contact Parkland if they are out of network. In addition, Ms. Reed announced the MH Greater Dallas Adolescent Symposium is scheduled for February 11th.
- Commissioner Price thanked NTBHA for responding to client needs who were struggling after the holidays.
- Pastor Brown asked for a contact directory of BHLT members. Charlene Randolph stated that there is a currently a roster of all BHLT members, but a contact list can be created if that was a need.
- Commissioner Price and Commissioner Daniel thanked all BHLT committee members for their service.

Adjournment

The meeting was adjourned at 10:30 am with a motion made by Commissioner Dr. Theresa Daniel and seconded by Commissioner J.J. Koch.

Biographical Sketch of Dr. Gloria Morrow



Dr. Gloria Morrow is one of the nation's leading clinical psychologists, who devoted her early career to teaching students in undergraduate and graduate psychology programs. As an academician, clinician and author, her teaching, counseling and books have helped thousands of people find true inner healing. Dr. Gloria is the Director of Behavioral Health for Golden Shore Medical Group (formerly Molina Medical Group).

As an academician and researcher, Dr. Gloria has presented the results of her research at professional conferences all over the world, including the University of Cape Town, in Cape Town, South Africa.

As a top-rated professional with profound insight in her trade, Dr. Gloria's work has been published in scholarly journals and books. She has also been cited in critically acclaimed national publications such as *"Psychology Today," "Jet," "Heart and Soul," "Essence," "Woman's Day,"* and *"Black Enterprise."*

Dr. Gloria has shared her expertise on many topics, including depression, anxiety, marriage and relationship issues, and a variety of issues relative to people of color from all ethnic backgrounds. She has become well known throughout the faith community because of her willingness to address the issue of mental illness in the church and the role of pastors and church leaders in granting permission for parishioners to seek mental health services outside the

church when appropriate.

Dr. Gloria is a Master Trainer for the CBMCS (California Brief Multicultural Competency Scale) Training Program, and she helped to develop the training curriculum. This program focuses on the four major ethnic groups: African American, Asian/Pacific Islanders, Hispanic/Latino/Mexican American, and American Indian/Native American. In addition, she has facilitated several workshops and seminars focusing on cultural competency issues. Her work surrounding the role of Spirituality in recovery has gained notoriety with the development of a three-day training and handbook entitled S.A.F.E. (Spirituality and Faith Empowers) to equip the faith community and mental health professionals to help hurting people. Dr. Gloria also speaks on topics focusing on trauma and domestic violence. Dr. Gloria has a unique way of facilitating courageous conversations in a safe and nurturing manner, where participants feel safe and understood.

Dr. Gloria has been interviewed on a variety of radio talk shows, including KPFK 90.7 FM's talk show, The Bev Smith Show, and The Warren Ballentine Show. She served as a relationship expert on Radio One's 102.5 in Atlanta for Marriage Monday with radio host Darlene McCoy. She has been a frequent guest on the Michael Baisden Show, a nationally syndicated XM radio show and has appeared as an expert guest on his television show, *Baisden After Dark* on TV One. Dr. Gloria has appeared as a frequent guest on CNN. Dr. Gloria has also been a guest on TBN to discuss depression and grief.

Dr. Gloria has authored several books entitled: *"Too Broken to be Fixed? A Spiritual Guide to Inner Healing;" "Strengthening the Ties that Bind: A Guide to a Healthy Marriage;" "Keeping it Real! 7 Steps Toward a Healthier You;" "The Things that Make Men Cry," "Create Your Blueprint for Good Success"* and its companion *"A Life Plan Portfolio."* She has also developed a DVD entitled: *"Suffer in Silence No More"* and an audio CD entitled *"Maintaining Positive Emotions During Tough Times."* Her latest book entitled, *"Don't Date! Investigate"* is scheduled for release in 2016. Dr. Gloria is a new playwright and wrote and produced *"The Things That Make Men Cry"* based on her book of the same name, *"Three Times A Lady"* and *"Detours."* She just completed writing the stage play *"Don't Date! Investigate,"* which will be produced in 2019. Dr. Gloria just completed the first draft of her first feature film.

Dr. Gloria holds a PhD in Clinical Psychology from Fielding Graduate University, Santa Barbara, CA; a Master of Science degree in Marriage and Family Therapy from Azusa Pacific University, Azusa, CA; and a Bachelor of Science degree in Psychology from the University of La Verne, La Verne, CA. Please visit www.gloriamorrow.com for her complete Curriculum Vitae.

Introduction to the NTBHA Diversity,
Equity, and Inclusion Project
Presented by
Dr. Gloria Morrow
Clinical Psychologist/DEI Consultant



Dr. Gloria
Transforming lives all over the world!



Introduction

- Introductions
- The Problem
- The Rationale
- The Benefits

The NTBHA DEI Work Group

- Carol Lucky, Chief Executive Officer
- Dr. Walter Taylor, Chief Strategy Officer
- Jessica Martinez, Chief Clinical Officer
- Sabrina Conner, Director of External Affairs
- Matt Roberts, Director of Provider Relations
- Anthony Garcia, Director of Compliance
- David Kemp, Director of Administrative Services
- Meliah Martinez, Office Manager/Board Liaison

What is Diversity, Equity & Inclusion(DEI)

- **Diversity:** Includes but is not limited to race, color, ethnicity, nationality, religion, socioeconomic status, veteran status, education, marital status, language, age, gender, gender expression, gender identity, sexual orientation, mental or physical ability, genetic information, and learning styles.
- **Equity:** The guarantee of fair treatment, access, opportunity, and advancement for all while striving to identify and eliminate barriers that have prevented the full participation of some groups. The principle of equity acknowledges that there are historically under-served and under-represented populations and that fairness regarding these unbalanced conditions is needed to assist equality in the provision of effective opportunities to all groups.

What is Diversity, Equity & Inclusion (DEI) (Cont'd)

- **Inclusion:** Authentically bringing traditionally excluded individuals and/or groups into processes, activities, and decision/policy making in a way that shares power and ensures equal access to opportunities and resources.

3 Pillars of DEI

- The creation of a diverse and inclusive workplace that embodies the concept of The Beloved Community.
- Eliminating bias in all areas of the organization, including hiring practices and service delivery.
- Promoting an inclusive leadership team and board that is reflective of the diversity of the clientele that is served.

North Texas Behavioral Health Authority Diversity, Equity, Inclusion Advisory Council (NTBHA DEI Council) Charter

At the North Texas Behavioral Health Authority (NTBHA) we recognize and appreciate the importance of creating an environment in which all employees feel valued, included, and empowered to do their best work and bring great ideas to the table. We believe that each employee's unique experiences and perspectives have value and allow us to deliver the best possible care to our clients. Each of us has different influences and experiences based on our social, economic, and cultural identity. NTBHA will do its best to make sure our workforce is reflective of this diversity. It is the expectation that NTBHA's diversity and inclusion efforts extend to positively impacting the experiences of individuals in behavioral health services within our provider network

NTBHA DEI Advisory Council

Purpose

- The purpose of the NTBHA Diversity, Equity, & Inclusion Advisory Council (NTBHA DEI Council) will be to foster ideas that create and sustain an environment of diversity, equity, and inclusion (DEI).
- Using available research and data on effective DEI practices, the NTBHA DEI Council's efforts will focus on the following objectives:
 - Building capacity and competency to lead and manage a diverse workforce
 - Creating a work environment that ensures equal access to opportunities for professional growth and advancement
 - Developing cultural competence and responsiveness as an agency and network, respecting the unique viewpoints, experiences, and needs of all to perpetuate and foster NTBHA becoming a genuinely beloved workplace community for all. Cultural competence relates, but is not limited, to the following cultural groups: Age, Disability, Ethnicity, Gender, LGBTQIA+, Privilege, Socioeconomic Status (SES), Race, and Religion.

NTBHA DEI Advisory Council Responsibilities

- Identify and highlight opportunities for diversity, equity, and inclusion to improve outcomes for individuals receiving services
- Review well-researched best practices for DEI.
- Create opportunities for employees to have meaningful engagement with NTBHA leadership to promote cultural inclusivity and discuss issues relating to equity in the workplace.
- Provide feedback and insight to the Executive Team on issues of culture, climate, equity, inclusion, and diversity in the workplace, including suggestions and support to meet the agency's current and future workforce needs (e.g., unbiased recruitment, hiring and retention practices, etc.).
- Provide feedback on proposed policies and practices designed to promote DEI efforts.
- Identify learning opportunities within the agency for employees to voluntarily participate and continue developing their personal understanding of inclusion and equity.

NTBHA DEI Advisory Council Responsibilities

- Identify opportunities for the agency to be involved with the outside community to promote equity, social justice, and inclusion (e.g., community volunteer activities, corporate social responsibility initiatives, etc.).
- Serve as a DEI communications vehicle to the Executive Team as well as across the agency by helping to develop the tone of internal messaging.
- Assess and report on the NTBHA DEI Council's completed goals, successes, remaining goals, and challenges during the year. Provide recommendations for the coming year.

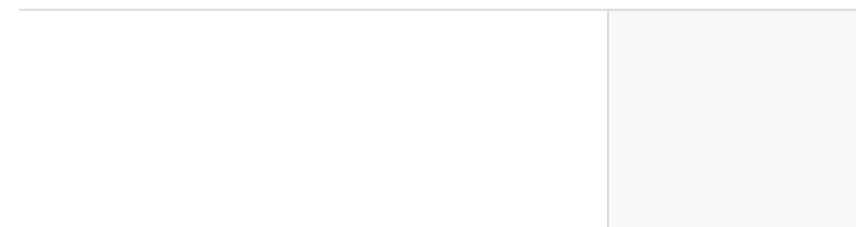
THE NTBHA DEI Advisory Council

- NTBHA is seeking a small group of 9 to 11 individuals to serve as the first official NTBHA DEI Advisory Council.
- These individuals must not be a political officeholder nor be staff of a NTBHA contracted provider.
- The NTBHA DEI Council will work together to develop the strategic direction of NTBHA's DEI Initiative and all activities involved.
- The term for this position will be one (1) year—with the opportunity to re-apply.

Courageous Conversations with Dr. Gloria

1. Building the Beloved Community (March)
2. Understanding Skin Color Privilege (April)
3. Discussing Racism with Those You Serve (May)
4. Strategies for Supporting Your Team When They Encounter Racism and Microaggression (June)
5. Understanding Acute Racism Reactions (August)
6. Healing from Racial Trauma (October)
7. How to be a True Ally (*requires prerequisite of other trainings*) (November)

All conversations on 1st and 3rd Fridays from 9-10:30 am CST. CEU's available.







About Dr. Gloria

Dr. Gloria Morrow is one of the nation's leading clinical psychologists, who devoted her early career to teaching students in undergraduate and graduate psychology programs. As an academician, clinician and author, her teaching, counseling and books have helped thousands of people find true inner healing. Dr. Gloria is the Director of Behavioral Health for Unicare Community Health Center. As an academician and researcher, Dr. Gloria has presented the results of her research at professional conferences all over the world, including the University of Cape Town, in Cape Town, South Africa. As a top-rated professional with profound insight in her trade, Dr. Gloria's work has been published in scholarly journals and books. She has also been cited in critically acclaimed national publications such as *"Psychology Today," "Jet," "Heart and Soul," "Essence," "Woman's Day,"* and *"Black Enterprise."* She also serves as a Diversity, Equity, and Inclusion Consultant and she has worked with organizations to achieve the three pillars of diversity, equity and inclusion (1) to create a diverse and inclusive workplace, (2) to reduce bias in hiring and service delivery practices, and (3) to promote inclusive leadership. Dr. Gloria is a Lead Trainer for the CBMCS (California Brief Multicultural Competency Scale) Training Program, and she helped to develop the training curriculum. This program focuses on the four major ethnic groups: African American, Asian/Pacific Islanders, Hispanic/Latino/Mexican American, and American Indian/Native American, the LGBTQI community and other diverse populations. She also facilitates a wide range of trainings relevant to cultural humility and cultural competency. Her work surrounding the role of Spirituality in recovery has gained notoriety with the development of a three-day training and handbook entitled S.A.F.E. (Spirituality and Faith Empowers) to equip the faith community and mental health professionals to help hurting people. Dr. Gloria also speaks on topics focusing on trauma and domestic violence. Dr. Gloria serves as a leadership coach who helps leaders to become more effective transformational leaders, and organizations to become better organized and equipped for success. Dr. Gloria has been interviewed on a variety of radio talk shows and has appeared as a frequent guest on CNN and has also appeared on MSNBC, NBC4, and Fox11 news. Dr. Gloria has authored several books, such as: *"Too Broken to be Fixed? A Spiritual Guide to Inner Healing"* and *"The Things that Make Men Cry."* She recently wrote and published two eBooks, *"Unleash the Secret Weapons to Your Success,"* and *"COVID-19 Maintaining Positive Emotions During Tough Times."* Dr. Gloria holds a PhD in Clinical Psychology from Fielding Graduate University, Santa Barbara, CA; a Master of Science degree in Marriage and Family Therapy from Azusa Pacific University, Azusa, CA; and a Bachelor of Science degree in Psychology from the University of La Verne, La Verne, CA.



Thank-You

Contact Information:

dr_gloria_morrow@msn.com

(909) 261-5232



SAMHSA Grant-Year 2

EXPANDING RESIDENTIAL SUBSTANCE ABUSE TREATMENT IN DALLAS COUNTY

OCTOBER 1, 2019 - SEPTEMBER 29, 2020

Purpose

- ▶ To expand residential substance use treatment in Dallas County for females and males with a diagnosed substance use disorder
- ▶ For male clients, priority is given to young adult (17-30) minority males with diagnosed substance use disorder
- ▶ Must be active in an OOG certified specialty court

Goals

- ▶ Increase the number of individuals receiving substance use treatment
- ▶ Decrease the time spent in jail awaiting intake at a treatment facility
- ▶ Reduce substance use and recidivism
- ▶ **Ultimately improve life outcomes for program participants**

Overview

- ▶ 5 year grant awarded in August 2018
- ▶ Project Period: 9/30/2018-9/29/2023
- ▶ Total Award: \$1,949,379; no match required
 - ▶ 70% of award is for direct services to participants
 - ▶ 10% of award is for evaluation cost
 - ▶ 20% of award is for personnel, supplies, training, incentives, bus passes
- ▶ Total target number to be served is 200 (across entire project period)
- ▶ Year 3 began September 30, 2020
- ▶ Submitted continuation grant application for Year 4
- ▶ Grant administrative activity completed by Dallas County Criminal Justice Department personnel

Grant Partners

- ▶ Homeward Bound, Inc.
- ▶ Nexus Recovery Center, Inc.
- ▶ Recovery Communities of Culture, LLC
- ▶ Meadows Mental Health Policy Institute

Evidence-Based Practices

- ▶ The primary evidence-based practices used in the project include Motivational Interviewing, Seeking Safety, Peer Recovery Coaching, Cognitive Behavioral Therapy (CBT) and curricula, including Thinking For a Change and Relapse Prevention Therapy

Year 2

- ▶ 44 clients received services
- ▶ 19 clients (15 men, 4 women) were served by Homeward Bound
- ▶ 25 clients were served by Nexus Recovery Center
- ▶ One-third of clients served were male
- ▶ Half of all clients were between the ages of 25-34
- ▶ Predominantly Black (34%) or Hispanic (36%)

Client Outcomes

- ▶ Significant changes between baseline and 6-month follow up across all program participants include:
 - ▶ Reduced median time spend in jail in the past 30 days from 7 to 0 days
 - ▶ Reduced self-reported crime participation (including drug use) in past 30 days
 - ▶ Reduced the number of people who did not know their HIV status from 32% to 5%
 - ▶ Increased the employment rate from 21% to 33%

The baseline survey refers to the interview that was conducted within seven days of the client entering a substance use treatment facility. p-values smaller than .05 reflect statistically significant changes over time.

Objectives

- ▶ Objective: At least 40 clients annually will receive intensive residential treatment services; **EXCEEDED**
- ▶ Objective: At least 75% of those in residential treatment will successfully complete treatment; **EXCEEDED**- 92% successful completion rate
- ▶ Objective: At least 90% of clients coming from jail will have fewer nights spent in jail waiting for residential treatment; **NOT MET**
- ▶ Objective: At least 30% of those unemployed at admission and able to work will be employed at 6-month follow-up or adequately supported by other means; **NOT MET**
- ▶ Objective: At least 50% of those in unstable and/or unsafe housing at admission will be in stable, safe, housing a 6-month follow-up: **APPROACHING**
 - ▶ 48% had safe and stable housing at follow-up

Objectives

- ▶ Objective: At least 60% of clients will be abstinent from all substances at 6-month follow-up; **APPROACHING**
 - ▶ 52% reported being abstinent from all substances at follow-up
- ▶ Objective: At least 70% of clients will have increased social connectedness at 6-month follow-up; **NOT MET**
- ▶ Objective: At least 80% of clients will have no new arrests at 6-month follow-up; **EXCEEDED**

Obstacles

- ▶ Implementation- positive COVID cases in the jail slowed admissions into treatment facilities; UAs
- ▶ Evaluation- communication due to the global pandemic
- ▶ The project's 6-month follow up rate (64%) was negatively affected by the stay-at-home orders and high rate of unemployment due to COVID-19
 - ▶ Many anecdotes of participants who have become homeless
 - ▶ Observed many participants no longer had active cell phones

Recovery Coaches

- ▶ The program provides each client with a recovery coach to assist with progress toward addiction recovery and achieving stability
 - ▶ At 6-month follow-up 100% reported working with a recovery coach
 - ▶ At 12-month follow-up 70% reported working with a recovery coach
 - ▶ Overall, clients found recovery coaches to generally be beneficial (88% and 86% at six and twelve month follow-up, respectively)
 - ▶ Providing support
 - ▶ Checking In
 - ▶ Attending court
 - ▶ Connection to Resources

Dallas Deflects Organizing Committee
February 8, 2021
Meeting Notes

Attendees: Robert Costello (Commissioner Daniel's Office), Deacon Charles Stump (Catholic Diocese), Rick Roebuck (Parkland Hospital), Major Michael Dominguez (Dallas Police Department), Chad Anderson (NTBHA), Laura Edmonds (Dallas County Criminal Justice Department), Kyla Rankin (Parkland Hospital), Chief Jesse Reyes (Dallas Police Department), Carl Falconer (MDHA), John Wilson (Parkland Hospital), Marsha Edwards (Dallas County District Attorney's Office), Lee Pierson (Dallas County District Attorney's Office), Julie Turnbull (Dallas County District Attorney's Office), Kurtis Young (Parkland Hospital), Michaela Himes (Dallas County Public Defender's Office), Chief Matt Walling (DART Police), Doug Denton (Homeward Bound), Jessica Martinez (NTBHA), Dr. Jennifer Gonzalez (MMHPI), Kim Nesbitt (Dallas County District Attorney's Office), Christina Mintner (Parkland Hospital), Dave Hogan (Homeward Bound), Yordanos Melake (Dallas County Criminal Justice Department), Dr. Ronica Watkins (Dallas Office of Budget and Evaluation), Albert Sanchez (Downtown Dallas, Inc.), and Gordon Hikel (Dallas County Administration)

Committee Reports:

Executive Committee

- Laura Edmonds reported the Executive Committee is scheduled to meet February 23, 2021. At that time, the Committee will review the final version of the MOU and it will be distributed for signing.

Financial (Budget)

- Marsha Edwards reported that grant funding from the BJA grant has been utilized to cover the salary for the new Dallas Deflects Clinical Director, Dave Hogan.

Police Procedure and Training

- Chief Reyes reported the committee met last week. Major Dominquez from DPD has prepared a rough draft of a Standard Operating Procedure (SOP). This draft will be shared with other LEAs such as DART and Dallas County Hospital District Police in order for each to finalize for their specific agency. They will develop a training order from the SOP.
- Julie Turnbull inquired if there are services for 17 year olds arrested for criminal trespass since they cannot be housed at Homeward Bound. Doug Denton elaborated that due to restriction from the State and his facility's licensure Homeward Bound cannot accept 17 year olds.
- Jessica Martinez will provide information to the group regarding options for adolescents. Kim Nesbit will work to gather data on the amount of 17 year olds arrested on a criminal trespass cases to see how frequently it occurred.

Data/Goals and Objectives

- Marsha Edwards shared Dallas Deflects Workflow document that was previously developed. When the subcommittee met it identified that if an individual brought to Dallas Deflects has medical needs and goes to hospital, attempts should be made to reengage at the hospital. This aspect was added this onto workflow.
- Dave Hogan said he is identifying a way to establish re-engagement, especially since if medical needs arise, most individuals will be sent to Charleston Methodist as it the closest hospital. He also shared that the recovery coaches may be able to be utilized to aid in the re-engagement work.
- Marsha also reviewed the program evaluation design. Dr. Jennifer Gonzalez from Meadows Mental Health Policy Institute (MMHPI) will be conducting the program evaluation. The evaluation will utilize a control group of individuals who were arrested for criminal trespass before the Deflection Center opened to create a comparison for the evaluation. They are also trying to identify if they can gather information on individuals who were offered to go to Dallas Deflects and declined, and were thus arrested and sent to jail, in order to gather further data on this population.
- The committee is working on how to define success and engagement in order to finalize evaluation work.

- Ernest and Young continues to aid in evaluating cost benefit and return on investment. They are working on establishing the cost of the court process and law enforcement process.
- The committee is also doing a review of data elements that will be needed, and identifying which organization is the keeper of these elements and what data-sharing agreements will be required.

Policies and Procedures:

- Lee Pierson reported he met with Dave Hogan and they reviewed the overall Dallas Deflects workflow. Once the workflow is finalized, the committee will identify how to finalize policies and procedures, and address any potential issues with blending policies and procedures from the various providers, such as NTBHA and Parkland Hospital.
- Dave also discussed the need to establish protocol for identifying eligibility of an individual before being transported to Dallas Deflects. This entails how to identify if anyone is under the age of 18 years old, or is a registered sex offender, as these are restricted populations at Homeward Bound.
- Dave also identified that a policy is needed to address individuals who would be candidates for Dallas Deflects but are flagged with a warrant for class C tickets only. Dave is working closely with the City of Dallas Marshal’s Office to discuss this and how to also link engagement at the City Detention Center.

Security

- Dave Hogan shared about the three potential security vendors. One vendor is CSI which consists of retired officers, and they would also be able to provide security outside of the premises. Allied Universal Security is another potential vendor that is being considered. This vendor currently provides security at the Salvation Army.
- Dave is working to set up meetings with each vendor to discuss their process and policy specifics in order to identify which one will be the best fit.

Connection with Community Partners:

- Dave Hogan discussed work he is doing to address back end needs of individuals who will be exiting from Dallas Deflects, and the high need for housing assistance. Dave is looking at how to utilize boarding homes and sober living homes. He is meeting with the Boarding Homes Inspection Team Manager to discuss possibilities.
- Dave is also working with local shelters and partners that address homelessness. He is hoping to develop a housing committee to address these issues further by bringing together partners such as Metro Dallas Homeless Alliance (MDHA), City Square, Our Calling, and local shelters.
- Dave met with Chief Reyes and Chief Pughes who are working to place social workers at the various Dallas Police Department patrol stations. He reported the City of Dallas Marshal’s office is also establishing a new program utilizing social workers for assistance with service connection.
- Dave has scheduled a meeting the new president with NAMI who recently developed a new Law Enforcement Mental Health Association. Dave reported he will see how this association can partner with Dallas Deflects.

Medical

- Kyla Rankin reported that most of the Medical updates will be covered during the facilities update as they have to wait till renovation is complete to hire staff for Dallas Deflects.
- She also reported that there is work being done by the process, data, and evaluation team to gather information on the current work of the Right Care team.

Facilities

- Doug Denton reported that architects procured by Dallas County have visited Homeward Bound.
- Doug did report that the asbestos abatement is anticipated to start soon. He did identify that this abatement could delay the timeline as once it starts the area will need to be sealed for 6-8 weeks. Doug reported that the facilities team will try to merge the asbestos abatement and demolition work to take place simultaneously in order to reduce any time delays.

Other Updates:

- Julie Turnbull reported that there is now a link on the District Attorney's website promoting and informing about Dallas Deflects: <https://www.dallascounty.org/government/district-attorney/dallas-deflects.php>
- She encouraged other partners on the call to utilize their website and/or social media to promote Dallas Deflects.

The next Dallas Deflects planning meeting will be held on Monday, March 8th from 2:00pm-3:00pm via Teams.

Mission Statement: The Dallas County BH Housing Work Group, with diverse representation, will formulate recommendations on the creation of housing and housing related support services designed to safely divert members of special populations in crisis away from frequent utilization of expensive and sometimes unnecessary inpatient stays, emergency department visits and incarceration.

Success will be measured in placement of consumers in housing and the decreased utilization of higher levels of care (hospitals and emergency care visits) and reduced incarceration in the Dallas County Jail. The Dallas County BH Housing Work Group is committed to a data driven decision-making process with a focus on data supported outcomes.

ATTENDEES: Dr. Theresa Daniel, Commissioner; Ashley Brundage, United Way; Doug Denton, Homeward Bound; Edd Eason, CitySquare; Brooke Etie, City of Dallas; Blake Fetterman, Salvation Army; Sara Key, Outlast Youth; Tzegabrhan Kidane, Dallas County; Traswell Livingston, AIDS Services of Dallas; Jim Mattingly, LumaCorp; Yordanos Melake, DCCJ; Jari Mema, Catholic Charities of Dallas; Janie Metzinger, NTBHA; Ikenna Mogbo, Metrocare; Erin Moore, Dallas County; Shavon Moore, MDHA; Charlene Randolph, DCCJ; Kimberly Rawls, Dallas County; Wyndll Robertson, Dallas County; Matt Stevens, The Red Cross; Keri Stitt, Youth 180; Justin Vander, Prism Health; Claudia Vargas, Dallas County, Joyce White, Dallas County; Libby Wolverton, Metro Dallas Youth Committee

CALL TO ORDER: Minutes approved with no changes.

GOVERNANCE

Dallas Area Partnership to End and Prevent Homelessness: Commissioner Theresa Daniel
Commissioner Daniel reported that Dallas Area Partnership met on Tuesday, January 26th. The Committee of Development and Resources has been actively coordinating efforts with organizations like St. Jude, The Deflection Center, Homeward Bound, and Dallas County Criminal Justice. Commissioner Daniel also provided an update on a collaboration with Mark Cuban's foundation for a combined community garden/housing opportunity.

Additionally, the Dallas County Citizens Homeless Committee met January 15th to discuss further research and alternative funding methods for affordable houses.

Federal and State Legislative Update: Janie Metzinger, NTBHA

Ms. Janie Metzinger reported on the Representative Andrew Murr (a mental health advocate) sponsored House Bill 292 for a voluntary certification for recovery housing. Ms. Metzinger also mentioned bills governing studies of homelessness, and additional tax breaks for charitable organizations engaging in recovery housing and assistance for homeless individuals. Ms. Metzinger pointed out that there are particular criteria which need to be met to apply as recovery housing. As a note, while the State Senate has appointed their committee, the State House has not. Any bills will remain in the pipeline and no hearings will take place until members of the House committee have been appointed.

PRESENTATION

The Homeless Collaborative: Carl Falconer, MDHA

Mr. Falconer provided an overview of how HUD funding comes into the Continuum of Care, the Notice of Funding Availability (NOFA) process, what the Independent Review Committee is and how it is put together.

DEVELOPMENT ACTIVITIES

Crisis Residential & Respite Services: Doug Denton, Homeward Bound

Mr. Denton stated that they are still working to contain a COVID outbreak in the facility and should move very quickly once that issue has been dealt with.

RESOURCES

Shelter Discussions: Blake Fetterman, Salvation Army

Ms. Fetterman provided information on the United Way's Shelter Space Workgroup. The group is responsible for the development of clear goals to address the lack of temporary and permanent shelter options. For example, one goal is the need to provide more rapid shelter solutions. While the current process works, it could be made more expedient. Since the COVID-19 test is a gateway to sheltering, the group focused its efforts there first. They were able to receive 6,000 rapid COVID-19 tests (with an efficacy rating above 95%) and a commitment from the State for an additional 3,000 each time the number of on-hand tests falls below 3,000. The soft launch took place the week of January 18th with 87 people placed in shelters within the past week.

The next goal is to create a database which will track all of the tests so that providers can see if and when someone has been tested. This same database can also be used to track vaccines as those become available. This has the added benefit of reducing the reliance on hotels to house individuals during inclement weather. Organizations like Salvation Army and Union Gospel Mission will be able to open up overflow space as negative results for COVID are returned more quickly.

NTBHA: Eric McCarty, NTBHA

Mr. McCarty reported that the Emergency Rental Assistance Program has been extended to September 30, 2021. This enables NTBHA to do a six-month contract with its clients as opposed to a three-month contract (full rent and allocated utility funds). To date, rental reserves are nearly \$300,000. So far, 65 (60 Dallas County, 4 Kaufman County, 1 Hunt County) total households are being assisted through the COVID-19 management. There are currently 60 applications on the waitlist with a near-term focus on reducing that number and reopening the waitlist.

Housing Navigator: Kimberly Rawls, Dallas County

Concerning the Housing Services for Homeless Criminal Justice Involved clients, Ms Rawls reported that two boarding homes that applied for the Hillcrest Grant were denied. Alternative funding options for the two boarding homes are being explored.

FUSE Grant: Kimberly Rawls, Dallas County

Ms. Rawls announced that three individuals were housed and 12 placed on the Housing Priority List in the month of December through FUSE. Ms. Rawls reported 22 FUSE Projects clients obtained rides on the Dallas Connector in December. Furthermore, a FUSE Project client has been connected with permanent housing while four others have been connected with transitional housing.

Dallas Housing Authority: Brooke Etie, City of Dallas

Ms. Etie highlighted that DHA was awarded 40 additional VASH vouchers from HUD with 744 already allocated, for a total of 784 vouchers. VASH voucher utilization is up to 98% due to the combined efforts of DHA, MDHA, and VA. COVID-19 waivers have been extended by the Federal government. This allows an extension of vouchers for families searching for housing as well as recertification. Furthermore, HUD is allowing housing authorities to retain their 2019 CMAP scores through 2021. DHA has been scored as a high performer for five consecutive years (2015-2020).

Additionally, inspections, relocations, and recertifications are all being done virtually at this time which has allowed these services to continue throughout the COVID-19 pandemic. DHA will continue to follow the guidance of HUD and the CDC in regard to eviction moratoriums. DHA has formally submitted their Moving to Work application to HUD, a program which allows housing authorities to help residents find employment and become self-sufficient through locally designed strategies using Federal dollars. Ms. Etie stated she will have more updates during her presentation at the next Housing Workgroup meeting. Ms. Etie also reminded everyone that the DHA waiting list is open.

CARES Act: Commissioner Daniel

Commissioner Daniel noted that CARES Act funding for 2021 has been extended for three months.

PROJECTS AND INDUSTRY UPDATES

Coordinated Access System: Shavon Moore

Ms. Moore announced that several organizations within the Continuum of Care have received funding from the CARES Act totaling \$7.3 million. More programs for rapid housing and prevention will be initiated in the upcoming weeks. The process of signing contracts with TDHCA should be concluded within the week. MDHA also received a grant for housing navigators and locators.

There are 490 persons on the Housing Priority List. Over half have been referred to various housing projects and await move-in. In December, 35 people were housed via the HPL. Additionally, MDHA will be moving to a new structure for their Housing Placement List. Going forward, priority will be based on criteria such as length of time on the list, and veteran status.

Homeless Jail Dashboard: Kimberly Rawls, Dallas County

Ms. Rawls stated in her report that there was a decrease with total jail book-ins of 130 individuals. Total suspected mental health book-ins decreased by 25 individuals. There was a decrease in total homeless book-ins of 25 individuals. Total homeless book-ins with suspected mental health flags decreased by 42 individuals. Average length of stay for total jail book-ins remained consistent. There were slight increases in burglary, criminal trespassing and unlicensed use of a motor vehicle offenses with decreases in assaults, drug and alcohol offense categories.

CitySquare: Edd Eason, CitySquare

Mr. Eason gave an overview of what his monthly packets will entail (how many people are housed, how many have exited, etc.). Additionally, Mr. Eason pointed out The Cottages have met with challenges in keeping all units occupied and that they are working to resolve that situation. Currently, 39 of 46 units are filled and they are moving to house 1 to 2 persons each month going forward. The overall occupancy rate for Citysquare's 465 units is 98.2%. Citysquare, in conjunction with other organizations, has applied for a Property Management and Supportive Services Grant of \$3.3 million to redevelop a hotel in West Dallas. This would allow the conversion of 75 hotel rooms into 40 – 45 supportive housing units along with accompanying services. Mr. Eason talked about the Medical Respite program, in partnership with Texas Health, which launched in October and has begun placing individuals into housing.

Pretrial Diversion and Mental Health Screening: Laura Edmonds, Dallas County

Ms. Edmonds reported ongoing efforts to get individuals released from jail and connected with appropriate services. She noted that NTBHA has been a great partner in assisting with jail releases, the Dallas Connector, COVID testing, and placement of those who test positive.

Homeward Bound: Doug Denton, Homeward Bound

Mr. Denton noted the women's unit closed back in December due to an extensive COVID outbreak and remains closed due to four recent positive tests. They will reevaluate, and change as necessary, their screening procedures to increase mitigation and containment moving forward. With the assistance of NTBHA, Homeward Bound has been able to use the quarantine hotel in their containment efforts.

Additional funding has been provided for the Deflection Center in order to complete environmental infrastructure and other contractual construction.

Metro Dallas Youth Committee: Libby Woolverton; Metro Dallas Youth Committee

Ms. Woolverton provided an update on MDYC's work with Clutch Consulting and MDHA to revamp their system map. This will provide a more accurate picture of who they can serve, how many beds are available, etc. She also spoke about a pressing need for a coordinated access system for youth.

Ms. Woolverton announced that MDYC will not be leading the Youth Count for 2021 due to COVID-19. They are asking that a new question be included on the Point In Time count survey, "When was the first time you experienced homelessness?" This is to get a better idea of how many adults became homeless during their youth so that further measures can be created to prevent adult homelessness. The organization will also approach the current State legislators about the decriminalization of youth homelessness, specifically a change in the runaway and curfew laws that

would classify youth who leave home for safety reasons as missing persons instead of runaways and not penalize homeless youth for being out after curfew.

Family Housing: Commissioner Daniel

Ms. Magnis via Commissioner Daniel reported that the City of Dallas has temporarily provided Family Gateway with a city owned hotel to be used as an overflow shelter space which will save about \$350 per week, per family. Throughout 2020, Family Gateway was able to serve 81% of all families who needed shelter within their shelter or hotel overflow.

Additionally, the partnership with Salvation Army has been expanded to increase available shelter space for families in the future.

The Mattingly Report: Jim Mattingly, LumaCorp

Mr. Mattingly spoke about the large number of new apartments which continue to be delivered throughout the Metroplex. Not all the apartments delivered within the last quarter have seen occupancy. Rent continues to increase significantly in some of the older, more established neighborhoods. In areas with new construction, rent continues to decline or remain stagnant. Mr. Mattingly mentioned a report by real estate journalist Diana Olick which stated 18% of renters in the U.S. were behind on rent as of February. The report also stated that the typical renter owed \$5,600 and that some ten billion renters owe \$57.3 billion in rent. This is twice the amount of the current \$25 billion allocated for rental assistance by the CARES Act. The amount will increase, however, once the current funding has been expended.

Next Meeting: February 24, 2020

Dallas County Administration Building, 411 Elm Street, 1st Floor, Allen Clemson Courtroom



Crisis Services Project

CSP Total

DY9 CSP Monthly Report_No Graphs(with LCN)

Last Refresh: 1/26/21 at 11:15:21 AM GMT-06:00

	Past Year Avg	2020-01	2020-02	2020-03	2020-04	2020-05	2020-06	2020-07	2020-08	2020-09	2020-10	2020-11	2020-12	Average:	Sum:
Total Service Episodes:	362	386	370	335	256	301	322	354	439	356	490	351	351	359.25	4,311
Total Unique CID:	356	373	352	308	237	279	289	316	380	298	421	291	264	317.33	3,808
Total Unique PID:		373	352	308	237	279	289	316	380	298	421	291	264	317.33	3,808
% Change to DY 4 by CID		63.33%	59.76%	52.29%	40.24%	47.37%	49.07%	53.65%	64.52%	50.59%	71.48%	49.41%	44.82%		

<u>Total Encounters by Type:</u>		2020-01	2020-02	2020-03	2020-04	2020-05	2020-06	2020-07	2020-08	2020-09	2020-10	2020-11	2020-12	Average:	Sum:
Triage		386	370	335	256	301	322	354	439	356	490	351	351	359.25	4,311
Care Coordination		1,593	1,397	1,360	860	912	1,179	1,201	1,413	1,389	1,492	1,232	1,187	1,267.92	15,215
F2F Encounter		309	275	242	167	172	196	242	292	259	292	230	231	242.25	2,907
Sum:		2,288	2,042	1,937	1,283	1,385	1,697	1,797	2,144	2,004	2,274	1,813	1,769	1,869.42	22,433

<u>F2F Encounter</u>		2020-01	2020-02	2020-03	2020-04	2020-05	2020-06	2020-07	2020-08	2020-09	2020-10	2020-11	2020-12	Average:	Sum:
MHPR Bond		149	152	129	99	86	31	70	180	153	189	126	135	124.92	1,499
Non-MHPR		160	123	113	68	86	165	172	112	106	103	104	96	117.33	1,408
Sum:		309	275	242	167	172	196	242	292	259	292	230	231	242.25	2,907



**Crisis
Services
Project**

Frank Crowley

DY9 CSP Monthly Report_No Graphs(with LCN)

Last Refresh: 1/26/21 at 11:15:21 AM GMT-06:00

	2020-01	2020-02	2020-03	2020-04	2020-05	2020-06	2020-07	2020-08	2020-09	2020-10	2020-11	2020-12	Average:	Sum:
Service Episodes:	386	370	335	256	301	322	354	439	356	490	351	351	359.25	4,311

	2020-01	2020-02	2020-03	2020-04	2020-05	2020-06	2020-07	2020-08	2020-09	2020-10	2020-11	2020-12	Average:	Sum:
Unique Consumers:														
By N* ID	61	59	46	45	43	46	45	52	55	61	37	33	48.58	583
By LCN	206	188	160	84	128	114	126	172	133	188	145	112	146.33	1,756
By Client ID	106	105	102	108	108	129	145	156	110	172	109	119	122.42	1,469
TOTAL Unique Consumers:	373	352	308	237	279	289	316	380	298	421	291	264	317.33	3,808
TOTAL Unique Consumers as %:	96.63%	95.14%	91.94%	92.58%	92.69%	89.75%	89.27%	86.56%	83.71%	85.92%	82.91%	75.21%		

	2020-01	2020-02	2020-03	2020-04	2020-05	2020-06	2020-07	2020-08	2020-09	2020-10	2020-11	2020-12	Average:	Sum:
Unique F2F:														
By N* ID	37	34	24	24	28	27	29	34	36	37	27	27	30.33	364
By LCN	136	112	108	49	51	76	83	109	102	105	99	84	92.83	1,114
By Client ID	84	80	79	88	86	88	111	127	98	131	91	90	96.08	1,153
TOTAL Unique F2F:	257	226	211	161	165	191	223	270	236	273	217	201	202.38	2,631
TOTAL Unique F2F as %:	83.17%	82.18%	87.19%	96.41%	95.93%	97.45%	92.15%	92.47%	91.12%	93.49%	94.35%	87.01%		



Baseline	Goal	Year MO	January	February	March	April	May	June	July	August	September	October	November	December
			2020/01	2020/02	2020/03	2020/04	2020/05	2020/06	2020/07	2020/08	2020/09	2020/10	2020/11	2020/12

M1-262 Depression with Suicide and Homicide Risk

731		SRAT And/Or VRAT Rating Count	59	120	187	228	287	334	409	492	581	658	727	777
752		Total of Unique Individuals	62	124	192	233	293	341	416	499	590	672	738	787
97.21%	97.54%	Percentage	95.16%	96.77%	97.40%	97.85%	97.95%	97.95%	98.32%	98.60%	98.47%	97.92%	98.51%	98.73%

M1-263 Psychosocial/developmental Assessment

679		Number of CSP Encounters	15	43	70	91	114	150	194	252	337	407	486	519
743		NTBHA Psychological Evaluations	18	48	75	98	124	166	210	272	365	440	525	558
91.39%	92.40%	Percentage	83.33%	89.58%	93.33%	92.86%	91.94%	90.36%	92.38%	92.65%	92.33%	92.50%	92.57%	93.01%

M1-265 Housing Assessment for Individuals with Schizophrenia

375		Identified individuals with housing outcome/ housing assessment	19	45	69	80	103	124	157	196	234	269	308	341
437		Identified individuals with verified schizophrenia visits within 12 month period.	29	57	82	93	117	141	177	217	258	295	334	364
85.81%	87.48%	Percentage	65.52%	78.95%	84.15%	86.02%	88.03%	87.94%	88.70%	90.32%	90.70%	91.19%	92.22%	93.68%

**With CSP as the denominator



F2F Recidivism Summary for 01/01/2020 to 12/31/2020

QPI_DY9 Multi-version Recidivism - New

Last Refresh: 1/26/21 at 11:52:39 AM GMT-06:00

Triage 12 w/F2F	2,369
Recidivism 12-12 w/F2F	466
Recidivism 12-12 w/F2F Percentage	19.67%

Bookins 12 w/PAP	2,482
Recidivism 12-12 w/PAP	402
Recidivism 12-12 w/PAP Percentage	16.20%

Total F2F and PAP	4,851
Recidivistic Individuals	868
Recidivism Percentage	17.89%

	January	February	March	April	May	June	July	August	September	October	November	December
Year MO	2020/01	2020/02	2020/03	2020/04	2020/05	2020/06	2020/07	2020/08	2020/09	2020/10	2020/11	2020/12

Triage w/F2F:

Triage 12 w/F2F	213	426	619	758	922	1,095	1,302	1,554	1,761	2,018	2,203	2,369
Recidivism 12-12	8	27	45	69	93	113	139	201	264	321	382	466
Recidivism 12-12%	3.76%	6.34%	7.27%	9.10%	10.09%	10.32%	10.68%	12.93%	14.99%	15.91%	17.34%	19.67%

PAP:

Count of PAP	327	603	846	1,013	1,154	1,238	1,359	1,584	1,795	2,019	2,251	2,482
PAP Recidivism	11	22	58	82	110	130	150	191	242	304	348	402
PAP Recidivism%	3.36%	3.65%	6.86%	8.09%	9.53%	10.50%	11.04%	12.06%	13.48%	15.06%	15.46%	16.20%

Total:

Count of F2F & PAP	540	1,029	1,465	1,771	2,076	2,333	2,661	3,138	3,556	4,037	4,454	4,851
Recidivism F2F& PAP	19	49	103	151	203	243	289	392	506	625	730	868
Recidivism%	3.52%	4.76%	7.03%	8.53%	9.78%	10.42%	10.86%	12.49%	14.23%	15.48%	16.39%	17.89%

Transicare Reporting

Crisis Services Project

	2020-10	2020-11	2020-12	TOTAL
Beginning Census	55	51	52	
Referrals	13	3	14	30
Admissions				
Referred Admitted	0	1	0	1
No Admit Client Refusal	0	0	0	0
No Admit Criteria	1	0	0	1
No Admit Structural	0	0	1	1
Pending	12	2	13	27
<i>Prior Pending</i>				
Pending Admitted	1	3	3	7
No Admit Client Refusal	0	0	0	0
No Admit Criteria	0	0	0	0
No Admit Structural	6	3	4	13
Total Admissions	1	4	3	8
Discharges				
Success Transfer	2	1	3	6
DC Midterm Disengage	2	2	1	5
DC Rapid Disengage	0	0	0	0
DC Structural	1	0	2	3
Total Discharged	5	3	6	14
Active End Of Month	51	52	49	
	2019-10	2019-11	2019-12	TOTAL
Outcome Data				
<i>Terrell State Hospital Linkages</i>				
≤7 Connect To Prescriber	0	2	1	3
Missed ≤7 Day Connect	0	1	0	1
≤30 Connect To Prescriber	0	2	1	3
Missed ≤30 Day Connect	0	1	0	1
Total Missed Metric	0	1	0	1
Total Released	0	3	1	4
	2019-10	2019-11	2019-12	TOTAL
Cummulative ≤7 Connect %	100.0%	66.7%	100.0%	75.0%
Cummulative ≤30 Connect %	100.0%	66.7%	100.0%	75.0%
Missed Metric	100.0%	33.3%	0.0%	25.0%
<i>Unduplicated Served</i>				
Monthly Unduplicated	32	31	28	
DSRIP YTD Unduplicated Served	32	36	44	
<i>Encounter Data</i>				
F2F Encounter	244	188	180	612
Care Coord	9	3	8	20
Total	253	191	188	632



87th Texas Legislature
Bills Filed Related to Publicly-Funded Behavioral Health
as of January 29, 2021

HOUSE BILLS

[HB 1](#)—Capriglione-House version of state budget.

[HB 78](#)-Reynolds-Establishes a mental health diversion pilot project for Ft. Bend County.

[HB 128](#)-Langraf-Amends the Local Government Code development corporation projects for the provision of health care and behavioral health care to the public. Adds offices of physicians, mental health practitioners, outpatient care centers (excluding family planning centers), medical and diagnostic laboratories, general medical and surgical hospitals, psychiatric and substance abuse hospitals, specialty hospitals to the list of primary job sectors. Adds facilities for the provision of health care or mental health care to the public to the list of projects related to creation or retention of primary jobs.

[HB 140](#)-Rose-Amends Code of Criminal Procedure to eliminate the death penalty for persons with severe mental illness. If a jury finds a person with a severe mental illness guilty of a capital crime, the judge shall sentence the person to life in prison without parole.

[HB 164](#)-Meza-Amends Texas Code of Criminal Procedure, Chapter 7B, establishes extreme risk protective orders. Requires respondent to submit to an examination by the Local Mental Health Authority or a disinterested expert. Requires respondent to receive outpatient mental health services recommended by the LMHA/LBHA. Companions: HB 395-Moody, SB 84-Miles, SB 110-West

[HB 232](#)-S. Thompson-Amends Texas Code of Criminal Procedure in cases where a defendant is eligible for community supervision and is the primary caretaker of a child. Requires the court to make a written finding of the defendant’s caretaker status as soon as practicable and to place the defendant on deferred adjudication community supervision. Conditions imposed by the court may include alcohol or substance abuse counseling or treatment, family or individual counseling, family case management.

[HB 240](#)-S. Thompson-Authorizes a study of group health insurance coverage for serious emotional disturbance in children. Companion: SB 51-Zaffirini

[HB 260](#)-S. Thompson-Amends Health and Safety Code to add mental health professionals to medical and law enforcement personnel as those exempted from civil liability for disclosure of certain mental health information if the professional determines in good faith that there is a probability of imminent physical injury by a patient to self or others, or a probability of immediate emotional or mental injury to the patient.

[HB 280](#)-Cortez-Amends Government Code to direct HHSC to develop an action plan for telehealth expansion.

[HB 292](#)-Murr-Amends the Health and Safety Code to create a voluntary certification for recovery housing.

[HB 297](#)-Murr-Amends Health and Safety Code to require staff training on prevention of abuse, neglect, and illegal, unprofessional and unethical conduct at inpatient mental health facilities, treatment or hospitals.

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[HB 308](#)-Murr-Regarding maintenance and utility services at Kerrville State Hospital.

[HB 313](#)-Collier-Amends Occupations Code to establish a training program for sheriffs, sheriff's deputies constable, county jailer, justice of the peace or other peace officer as a special officer for offenders with mental impairments to include instruction on acquired and traumatic brain injuries, veterans, combat-related trauma, post-traumatic stress, and post-traumatic stress disorder. Updates language related to intellectual and developmental disabilities.

[HB 358](#)-Sherman-Amends Texas Code of Criminal Procedure regarding technical violations of conditions of community supervision in felony cases. Prohibits revocation of community supervision if three or fewer conditions have been violated, but may continue, extend, or modify conditions. Allows a judge to revoke community supervision or impose a term of confinement if the defendant violates four or more conditions of community supervision if the judge has exhausted all alternatives to incarceration, follows the continuum of care for inpatient substance abuse treatment if applicable, and determines that the defendant is an imminent threat to the public.

[HB 375](#)-Smith-Amends Penal code to add "Disabled Individual" to the statute on continuous sexual abuse.

[HB 377](#)-Smith-Amends the Government Code to add missing persons experiencing a mental health crisis to statewide Amber Alert system.

[HB 385](#)-Pacheco-Amends Code of Criminal Procedure regarding community supervision. Allows judges to prioritize conditions for community supervision based on a risk and needs assessment, progress under supervision. May require tests for controlled substances as a condition of community supervision. Requires the court to inquire as to whether the defendant has sufficient resources of income to pay, and whether the payment should be delayed, waived completely or partially, discharged by community service, or some combination of the above. Community supervision may be terminated if defendant fails to comply with court-ordered restitution, counseling, or treatment.

[HB 395](#)-Moody-Amends Code of Criminal Procedure 7B to establish an extreme risk protective order. Requires respondent to submit to an examination by the Local Mental Health Authority or a disinterested expert. Requires respondent to receive outpatient mental health services recommended by the LMHA/LBHA. Companions: HB 154-Meza, SB 84-Miles, SB 110-West

[HB 420](#)-Sherman-Amends Health and Safety Code. Establishes a Task Force on Maternal Mortality in African American Women. Task force includes one licensed mental health professional.

[HB 454](#)-Metcalf-Amends the Government Code to establish a specialty treatment court for individuals residing with a child who is the subject of a juvenile court case.

[HB 455](#)-White-Amends Texas Code of Criminal Procedure to allow defendants convicted of certain drug offenses resulting in suspension of driver's license to pay a fee equivalent to the costs associated with suspension and reinstatement as calculated by the Texas Department of Public Safety. Allows completion of court-ordered education on the dangers of drug abuse to be completed in-person or online. Educational programs must be selected from a list approved by the Texas Department of State Health Services and the Texas Health and Human Services Commission.

[HB 484](#)-Shaheen-Amends the Texas Government Code to create a direct primary care pilot.

[HB 486](#)-Wu-Amends the Family Code relating to the age of criminal responsibility in substantive and procedural juvenile court matters related to age. Changes definition of child to a person who is between the ages of 10 and 18 or between the ages of 18 and 20 for a person alleged to, or found to have engaged in delinquent conduct or conduct indicating a need for supervision, resulting from acts committed before becoming age 18, and under the jurisdiction of a juvenile court.

[HB 515](#)-Oliverson-Amends Insurance Code to require reimbursement parity for telemedicine and telehealth services. Companions: HB 522-Julie Johnson, HB 887-Shaheen, HB 980-Fierro, SB 228-Blanco

[HB 521](#)-Fierro-Amends the Government code to establish a voluntary registry of individuals experiencing mental illness who waive the right to purchase or receive transfer of a firearm.

[HB 522](#)-Julie Johnson-Amends Insurance Code to require reimbursement parity for telemedicine medical services and telehealth services. Companions: HB 515-Oliverson, HB 980-Fierro, SB 228-Blanco

[HB 544](#)-Minjarez-Amends Texas Health and Safety Code to credential Voluntary Recovery Housing. Directs HHSC to adopt minimum standards based on the National Alliance for Recovery Residences, administer certifications, assess application, inspection and recertification fees, monitor and inspect recovery houses, provide training, develop a code of ethics, and provide an annual report. Recovery houses must be managed by a trained recovery house administrator. Licensed chemical dependency treatment facilities, boarding homes, nursing facilities, continuing care facilities, assisted living facilities, home and community support services agencies, intermediate care facilities for individuals with IDD, community homes, family violence shelters, child care facilities, and hotels are not eligible for certification as a recovery house. Municipalities or counties may not prevent a recovery house from operating in a residential community, whether by ordinance, order, or other regulation.

[HB 549](#)-S. Thompson-Amends the Health and Safety Code to exempts medical, mental health or law enforcement professionals from liability for the disclosure of confidential information if the professional determines there is a probability of immediate mental or emotional injury to the patient.

[HB 551](#)-S. Thompson-Directs Texas Department of State Health Services and Texas Health and Human Services Commission to prepare a report on the prevalence of eating disorders and eating disorder deaths in Texas. SB 184 by Senator Nathan Johnson is identical.

[HB 654](#)-Lopez-Amends Texas Family Code to require foster parents, adoptive parents, kinship caregivers, DFPS regional directors, supervisors and staff to receive training on trauma-informed care. Establishes a Trauma-Informed Care Task Force within DFPS.

[HB 565](#)-Lopez-Amends Texas Family Code to require training for judges and attorneys in cases involving termination of a parent-child relationship. Training must include symptoms of trauma affecting the child, attachment, role of trauma-informed screening, care and services, non-pharmacological interventions, potential for re-traumatization, availability of trauma informed care including trauma-informed mental and behavioral health care. Directs the Texas Supreme Court and the Texas Court to include childhood trauma and adverse childhood experiences (ACEs) in judicial training. Directs Texas Court of Criminal Appeals to assure that district judges, statutory county court judges, associate judges, master, referee, and magistrates to complete at least of 12 hours of training, at least four of which must include childhood trauma and ACEs.

[HB 602](#)-Hinojosa-Amends Texas Insurance Code to create the Healthy Texas Program to provide health care to uninsured residents of Texas.

[HB 679](#)-Gervin-Hawkins-Amends Texas Code of Criminal Procedure to require that attorneys appointed as lead counsel in death penalty cases have trial experience in the use of challenges to mental health or forensic expert witnesses and in investigating and presenting mitigating evidence in trial's penalty phase.

[HB 686](#)-Moody-Amends Texas Government Code to add parole considerations for youthful offenders. Requires a mechanism for the parole panel to consider the outcome of an expert mental health evaluation. Requires that a psychiatrist, psychologist, or psychiatric advanced practice registered nurse qualified in adolescent mental health to conduct a comprehensive mental health evaluation and assist the parole board.

[HB 689](#)-Collier-Amends Code of Criminal Procedure to allow appearances of arrested persons before a magistrate to be conducted via videoconference.

[HB 697](#)-Rosenthal-Amends Texas Government Code to require that agencies receiving state grants for the provision of mental health services to veterans demonstrate military cultural competency training for all agency personnel providing mental health services.

[HB 705](#)-Moody-Amends Texas Government to direct HHSC to adopt rules to provide Medicaid reimbursement for Peer-to-peer services provided by recovery community organizations.

[HB 706](#)-Moody-Amends Texas Human Resources Code to direct HHSC to add services of a clinical social workers, licensed marriage and family therapist associates, licensed master social workers, licensed professional counselor interns as providers. Adds counseling to services appropriate to the provider's licensure. For fully licensed providers, services would be reimbursable under Medicaid at rates equal to the reimbursement rates established for a licensed psychiatrist or licensed psychologist for providing similar services. Services provided by associates and interns would be reimbursable at a rate of 70% of the rate for licensed psychiatrist or psychologists for similar services, and directs that "this section shall be liberally construed."

[HB 707](#)-Moody-Authorizes HHSC to conduct a study of expanding recovery housing in Texas.

[HB 718](#)-Gervin-Hawkins-Amends Texas Code of Criminal Procedure to allow a peace officer to dispose of a Class B misdemeanor without taking the alleged offender before a magistrate under certain conditions. Allows officers to refer an alleged offender to one or more services providers on a judge-approved list that may include community-based drug or mental health treatment programs, faith-based organizations, neighborhood restorative justice panels or homeless shelters. Requires an annual report from the law enforcement agency to the judges or community justice council.

[HB 788](#)-Geren-Amends Government Code, allows emergency service dispatchers to participate in treatment court programs.

[HB 839](#)-Moody-Amends Texas Code of Criminal Procedure to allow video conference appearance before a magistrate within 48 hours. If magistrate believes the person has a mental illness or IDD, shall follow Code of Criminal Procedure 16.22, requires a record of the communication to be made.

[HB 887](#)-Shaheen-Amends Texas Insurance Code to authorize telehealth parity.
Companion: SB 228-Blanco

[HB 898](#) by White-Establishes a community recovery organization grant program.

[HB 930](#)-Sherman-Amends Texas Government Code to require Legislative Budget Board to prepare a biennial report on recidivism, rearrest, reconviction and reincarceration rates in Texas statewide and by county, to be sent to the Governor, Lieutenant Governor and each member of the Legislature.

[HB 931](#)-Sherman-Amends Code of Criminal Procedure to prohibit a judge from revoking community supervision solely for violation of drug/alcohol testing while defendant is in treatment. Judge may require a defendant who has completed drug/alcohol treatment to resume treatment.

[HB 967](#)-Dutton-Amends Texas Family Code. Regarding a child who is currently on parole under Texas Juvenile Justice Department, and who is receiving continuity of care services from an LBHA/LMHA, this legislation proposes to change the maximum eligibility for services from 17 years of age to 18 years of age.

[HB 974](#)-Price-Amends Texas Government Code to direct HHSC to include federally qualified health centers (FQHCs) and rural health clinics as entities that may be reimbursed for telemedicine and telehealth services in state programs, services and benefits, including Children with Special Health Care needs, Early Childhood Interventions, School and Health-Related Services, physical, occupational and speech therapies, targeted case management, nutritional counseling, Texas Health Steps checkups, Medicaid 1915(c) waiver programs, Community Living and Support Services, and any other programs under HHSC jurisdiction that the Commissioner determines to be cost- and clinically-effective. Directs HHSC to implement audio-only behavioral health services in any program under its jurisdiction in accordance with state and federal law.

[HB 976](#)-Price-Amends Texas Government Code to allow a district court judge or magistrate to be appointed to a regional specialty court with approval of the local administrative district and statutory county court judges of each participating county in the region.

[HB 980](#)-Fierro-Amends Texas Insurance Code to add mental health professionals to the definition of health professionals. Requires health benefit plan insurers to reimburse telemedicine or telehealth services at the same rate as in-person services. Companions: HB 515-Oliverson, HB 522-Julie Johnson, SB 228-Blanco

[HB 1050](#)-Romero-Authorizes HHSC to study on employing mental health professionals or mental health response teams to assist when responding to a behavioral-health emergency call.

[HB 1051](#)-Geren-Amends the Government Code to allow emergency service dispatchers to participate in treatment court programs designed for public safety employees.

[HB 1144](#)-Ramos-Amends Texas Education Code to require suicide prevention and other mental health training for educators at least once every two years.

[HB 1161](#)-Murr-Amends Texas Health and Safety Code to require an annual report on actions brought by the State of Texas against chemical dependency facilities for prohibited solicitation practices.

[HB 1205](#)-Guillen-Amends the Education Code, titled as ‘Thanking Our Frontline Heroes Student Loan Relief Act’ to establish a Frontline Workers Loan Repayment Assistance Program for any person providing health, education, public safety, or other necessary support services related to the coronavirus pandemic. Qualifying occupations shall include employees of public, charter and private schools; employees of public and private institutions of higher education; peace officers; fire fighters; emergency medical technicians,

medical professionals, including doctors, physician assistants, nurses, nurse practitioners, mental health professionals, hospital support personnel; employees of nursing homes, state supported living centers or similar long-term care facilities; social workers and members of Texas military forces, US armed forces and reserves who participated in coronavirus-related service. Companion: [SB 32-Zaffirini](#)

[HB 1213](#)-Darby-Amends Texas Health and Safety Code regarding costs of court reporter services in cases of involuntary detention of a person with mental illness.

[HB 1254](#)-Shaheen-Amends Texas Health and Safety Code adds cognitive disability to statutes regarding emergency detention of a person with mental illness.

[HB 1262](#)-Bowers-Amends Texas Occupations Code to require trauma training for police officers re: interactions with people who are homeless.

[HB 1277](#)-Campos-Amends Texas Transportation Code to create a transitional housing pilots in four counties or municipalities Texas through the Texas Department of Housing and Community Affairs' Grant to End Homelessness fund.

[HB 1376](#)-Rose-Amends Education and Government Codes to change language from 'hazardous duty pay' to 'high injury risk pay' and adds employees of state supported living centers and state hospitals to receive high injury risk pay.

[HB 1384](#)-Thierry-Amends Texas Government and Occupations Codes to require one hour of suicide prevention training per year for health care professionals including physicians, nurses, physicians' assistants, psychologists, chemical dependency counselors, LMFTs, LPCs, and social workers.

[HB 1398](#)-White-Amends Government Code to require county jails to verify the veteran status of each prisoner at intake and submit a daily report to the Texas Veterans Commission and the County Veterans Service Officer and each court to which the veteran's case is assigned.

[HB 1409](#)-Guillen-Amends Health and Safety Code to require proportional distribution of vaccines in each county based on population, percentage of current infection, death rate. Proposes similar distribution formulas if limited vaccines are prioritized for particular professions or groups, and for distribution of personal protective equipment.

[HB 1413](#)-Romero-Amends Government and Human Resources Codes to add rules to authorize peer services under Medicaid by a peer specialist to persons who are 14 years of age or older.

[HB 1431](#)-Campos-Amends Government Code to require statewide participation in a homeless management information system.

[HB 1446](#)-Ashby-Amends Government Code to expand broadband services in Texas.
Companion: SB 506-Nichols

[HB 1462](#)-Goodwin-Amends Occupations Code to allow prescription authority for psychologists.

[HB 1524](#)-Lucio III-Amends Texas Occupations Code to allow physicians the authority to delegate prescribing or ordering authority to advanced practice registered nurses and physician assistants for the purpose of prescribing Schedule II drugs.

[HB 1553](#)-White-Amends Government Code to authorize ongoing evaluation of effectiveness of veterans treatment court programs.

[HB 1580](#)-Rosenthal-Amends Health and Safety Code to establish an Office of Community Violence Intervention and Prevention within the Department of State Health Services. Requires violence intervention and prevention education to be integrated in state-funded programs including substance use programs.

[HB 1581](#)-Davis-Amends Penal Code Chapter 22 to add elderly and disabled individual to statute regarding endangering and abandonment.

[HB 1608](#)-Rosenthal-Amends Government Code to require HHSC to collect more extensive demographic data.

[HB 1778](#)-Compos-Amends Texas Government Code. Directs the Texas Interagency Council for the Homeless to conduct public hearings on homelessness. At least one hearing must be held in a rural county and at least one hearing must be held in an urban county.

SENATE BILLS

[SB 1](#)-Nelson-Senate version of state budget.

[SB 32](#)-Zaffirini-Amends the Education Code, titled as ‘Thanking Our Frontline Heroes Student Loan Relief Act’ to establish a Frontline Workers Loan Repayment Assistance Program for any person providing health, education, public safety, or other necessary support services related to the coronavirus pandemic. Qualifying occupations shall include employees of public, charter and private schools; employees of public and private institutions of higher education; peace officers; fire fighters; emergency medical technicians, medical professionals, including doctors, physician assistants, nurses, nurse practitioners, mental health professionals, hospital support personnel; employees of nursing homes, state supported living centers or similar long-term care facilities; social workers and members of Texas military forces, US armed forces and reserves who participated in coronavirus-related service. Companion: HB 1205-Guillen

[SB 40](#)-Zaffirini-Amends Occupations Code related to use of telehealth in professional programs.

[SB 41](#)-Zaffirini-Amends Government Code to require a \$40 probate court fee for each probate, guardianship, mental health, or civil case filed in the court to be used for court-related purposes for the support of the judiciary.

[SB 49](#)-Zaffirini-Amends Code of Criminal Procedure 16.22 to require the Magistrate to provide a written report regarding a defendant suspected of having a mental illness or intellectual disabilities to defense counsel, prosecutor, the trial court, the sheriff, or person responsible for the defendant’s medical records while confined, and, if applicable, the personal bond office, the director of the office supervising the defendant while the defendant is released on bail and receiving mental health or IDD services as a condition of bail. Report must include procedures used to interview the person and collect information, expert’s observations and findings regarding mental illness and IDD, clinical evidence regarding competence to stand trial, and appropriate or recommended mental health or IDD services.

[SB 51](#)-Zaffirini-Requires a study of group health insurance coverage for serious emotional disturbance in children. Companion: HB 240-S. Thompson

[SB 64](#)-Nelson-Amends Health and Safety Code to establish a mental health intervention program for law enforcement officers including peer-to-peer counseling, access to mental health professionals for peer service coordinators and peers, identification, retention and screening of community-based licensed mental health professionals, training, technical assistance, suicide prevention training, mental health first aid training for law enforcement and immediate family members of law enforcement officers, must include a mental health initiative for officers in rural areas. Requires annual report regarding the number of officers served, the number of peers and peer service coordinators trained, an evaluation of services provided and recommendations for program improvements.

[SB 73](#)-Miles-Amends Human Resources code to provide access to local health departments and health services regional offices under Medicaid. Directs HHSC to establish a provider type for local health departments, and health services regional offices for the purpose of enrolling as a provider for and reimbursement under the medical assistance program.

[SB 80](#)-Miles-Amends Code of Criminal Procedure to eliminate the death penalty for capitol offenses committed by a person with an intellectual disability.

[SB 91](#)-Menendez-Amends Insurance Code to cover serious mental illness.

[SB 110](#)-West-Amends Code of Criminal Procedure 7B to establish an extreme risk protective order. Requires respondent to submit to an examination by the Local Mental Health Authority or a disinterested expert. Requires respondent to receive outpatient mental health services recommended by the LMHA/LBHA. Companions: HB 164-Meza, HB 395-Moody

[SB 140](#)-Gutierrez-Amends the Health and Safety Code to regulate the cultivation, manufacture, distribution, sale, testing, possession and uses of cannabis and cannabis products. Imposes taxes and fees, Requires license for medical cannabis products. Establishes a Cannabis Regulation Fund administered by HHSC for the purpose of researching and addressing any other mental health substance use disorder or addiction issue related to the use of cannabis.

[SB 147](#)-Powell-Amends Health and Safety Code to establish a maternal mental health peer support pilot program for perinatal mood and anxiety disorders.

[SB 184](#)-Johnson -Directs Texas Department of State Health Services and Texas Health and Human Services Commission to prepare a report on the prevalence of eating disorders and eating disorder deaths in Texas. HB 551-S. Thompson is identical.

[SB 213](#)-Zaffirini-Amends Texas Health and Safety Code to require the person who files a reproduced, photocopied, or electronically submitted paper to maintain possession of the original signed copies and shall make the copies of the original available to the parties or the court. Eliminates the requirement of filing paper copies within 72 hours.

[SB 218](#)-Johnson-Amends Texas Health and Safety Code to add coverage for postpartum depression to the Children's Health Insurance Program (CHIP).

[SB 219](#)-Johnson-Establishes a health insurance risk pool.

[SB 228](#)-Blanco-Amends Insurance Code to require reimbursement parity for telemedicine medical services and telehealth services. Identical to HB 515-Oliverson and HB 522-Julie Johnson, HB 887-Shaheen, HB 980-Fierro.

[SB 299](#)-Hinojosa-Amends Texas Human Services Code to require HHSC to exclude discount prices offered for prescription drugs when calculating the usual and customary price for the purposes of reimbursement.

[SB 330](#)-Lucio-Amends Texas Tax Code to allow an exemption from ad valorem property taxes for charitable organizations that provide meeting space and support services for persons with substance use disorders and their families.

[SB 412](#)-Buckingham-Amends Texas Government Code to direct HHSC to include federally qualified health centers (FQHCs) and rural health clinics as entities that may be reimbursed for telemedicine and telehealth services in state programs, services and benefits, including Children with Special Health Care needs, Early Childhood Interventions, School and Health-Related Services, physical, occupational and speech therapies, targeted case management, nutritional counseling, Texas Health Steps checkups, Medicaid 1915 (c) waiver programs, Community Living and Support Services, and any other programs under HHSC jurisdiction that the Commissioner determines to be cost- and clinically-effect. Directs HHSC to implement audio-only behavioral health services in any program under its jurisdiction in accordance with state and federal law. Companion: [HB 974](#)-Price

[SB 427](#)-Miles-Amends Health and Safety Code to extend the length of time a person accepted for a preliminary examination may be detained in custody from 48 hours to 72 hours.

[SB 432](#)-Hinojosa-Amends Government Code to require HHSC to consolidate each electronic or internet portal it operates to establish a single internet portal for Medicaid managed care organizations to use for providers to submit and receive information.

[SB 434](#)-Blanco-Amends Government, Insurance and Occupations Codes regarding telecommunications in the areas of health care, mental health and education.

[SB 435](#)-Blanco-Amends Government Code to direct Texas Division of Emergency Preparedness to prepare and keep current a pandemic response plan.

[SB 436](#)-Blanco-Amends Insurance Code to require coverage of pre-existing conditions including a diagnosis of COVID-19 or related conditions.

[SB 437](#)-Blanco-Amends Health and Safety Code to require state to reserve personal protective equipment for essential personnel, defined as government employees or personnel at primary or secondary schools, child care facilities, corrections facilities; health care workers defined as individuals providing health care services to patients or support services including physicians, pharmacists, dentists, clinicians, nurses, aides, technicians, janitorial and housekeeping staff, food service workers and nonmanagerial administrative staff.

[SB 438](#)-Blanco-Amends Texas Tax Code to add masks, disposable gloves, disinfectant cleaning supplies including bleach and sanitizing wipes to the list of emergency preparedness items that can be exempted from sales taxes for limited periods of time.

[SB 439](#)-Blanco-Amends Texas Labor Code to provide workers' compensation benefits to nurses who suffered disability or death as a result of COVID-19 infection.

[SB 453](#)-Blanco-Directs the Texas Comptroller of Public Accounts to conduct a study of local and state supply chain disruptions caused by the COVID-19 pandemic.

[SB 454](#)-Kolkhorst-Amends Texas Government Code to continue the work of regional local behavioral/mental health authority groups established by SB 633 in the 86th Texas Legislature. Groups shall meet quarterly to collaborate on planning and implementing regional strategies to reduce costs to local governments for providing local crisis services, transportation, incarceration and hospitalization for individuals in mental health crisis.

[SB 459](#)-N. Johnson-Amends Insurance Code to guarantee issue, renewability, coverage of pre-existing conditions, coverage of essential health care services. Prohibits waiting periods for coverage, higher charges for pre-existing conditions, discriminatory benefits design or discriminatory marketing, lifetime limits for essential benefits and certain cost-sharing requirements.

[SB 506](#)-Nichols-Amends Government Code to expand broadband services in Texas.

Companion: HB 1446-Ashby

[SB 512](#)-Perry-Amends Codes of Criminal Procedure, Education, and Government to establish a youth diversion program for children accused of fine-only offenses to re-direct a child under age 15 from formal criminal prosecution while still holding the child accountable conduct (other than traffic offenses) that constitutes a Class C misdemeanor. Cases may still be referred to Juvenile Court or Family Court. Children under age 15 who have had two unsuccessful diversions are not eligible for this program. Eligible youth may be required to participate in teen court, a school-related program, educational programs including alcohol, tobacco or drug awareness, rehabilitation programs, self-improvement programs. Participants may be referred to services for at-risk youth, juvenile case management, work and job skills training, academic tutoring or monitoring, community-based services, mental health screening, assessment and counseling, mentoring services. Court may also mandate dispute resolution procedures, restitution, alcohol/drug testing, compliance with medical or mental health treatment, community services or other reasonable actions as determined by the court. Establishes a youth diversion Advisory Council. Allows a peace officer to refer the child and parents to a service provider. Allows County Commissioners Courts to establish First Offense Diversion Programs. Allows a \$30 fee.

[SB 539](#)-Blanco-Authorizes HHSC to conduct a study on employing mental health professionals or mental health response teams to assist when responding to a behavioral health emergency call.

[SB 570](#)-Zaffirini-Amends Business and Commerce Code regarding identity theft protections, includes mental illness and intellectual disabilities.



87th Texas Legislature—Budget Proposals Comparison Chart

LINE ITEMS	Current FY 2020	Current FY 2021	LAR FY 2022	LAR FY 2023	HB 1 FY 2022	HB 1 FY 2023	SB 1 FY 2022	SB 1 FY 2023
Article II-Goal D <i>Additional Health-Related Services</i>								
D.2.1 <i>Community MH Services-Adults</i>	\$382,072,316	\$382,027,886	\$393,464,529	\$393,464,530	\$397,852,500	\$397,852,500	\$393,690,627	\$393,690,627
D.2.2 <i>Community MH Services-Children</i>	\$92,317,798	\$92,317,798	\$92,509,484	\$92,509,483	\$93,939,756	\$93,939,756	\$92,509,485	\$92,509,485
D.2.3 <i>Community MH Crisis Services</i>	\$171,631,873	\$171,631,873	\$128,199,150	\$128,199,150	\$110,699,150	\$110,699,150	\$110,699,150	\$110,699,150
D.2.4 <i>Substance Abuse Services</i>	\$242,176,073	\$222,187,221	\$258,073,053	\$258,073,054	\$271,814,886	\$248,180,042	\$248,078,628	\$248,078,628
D.2.5 <i>Beh.Health Waiver & Amendment</i>	\$52,299,694	\$52,299,694	\$53,120,468	\$53,120,467	\$29,437,450	\$29,437,450	\$29,437,450	\$29,437,450
D.2.6 <i>Community Mental Health Grant Programs</i>	<i>This line item was not listed in the 86th Legislature's Budget</i>	<i>This line item was not listed in the 86th Legislature's Budget</i>	\$55,000,000	\$55,000,000	\$72,500,000	\$72,500,000	\$75,500,000	\$75,500,000
Article II-Goal G <i>Facilities</i>								
G.2.1 <i>MH State Hospitals</i>	442,728,813	\$456,009,662	BB \$443,351,847 EI+ \$3,478,111 \$446,829,958	BB \$442,071,627 EI+ \$2,482,477 \$444,554,104	\$447,300,887	\$447,300,887	\$447,300,887	\$447,300,887
G.2.2 <i>MH Community Hospitals</i>	\$135,190,351	\$135,430,101	\$138,397,727	\$138,397,725	\$138,505,101	\$138,505,101	\$138,505,101	\$138,505,101
G.4.1 <i>Facility Program Support</i>	\$20,780,578	\$10,957,078	BB \$14,000,652 EI+ \$10,300,084 \$24,300,736	BB \$14,000,652 EI+ \$446,041 \$14,446,693	\$10,957,078	\$10,957,078	\$10,957,078	\$10,957,078
G.4.2 <i>Facility Capital Repairs & Renovation</i>	\$214,217,036	\$16,688,740	BB \$222,514,860 EI+ \$93,834,019 \$316,348,879	BB \$12,305,184 EI+ \$0 \$12,305,184	\$11,401,095	\$16,140,777	\$11,401,095	\$16,140,777

Glossary: **Article II**—The section of the state budget dealing with health and human services expenditures. **BB**=Base Budget. **EI**=Exceptional Item: New spending requested by the state agency. **FY**=Fiscal Year. **HB 1**=Texas House budget bill **LAR**=Legislative Appropriation Request=Budget document of amounts requested by agency for each line item in the budget. **SB 1**= Texas Senate Budget Bill

This document is intended for informational purposes only and is not intended to indicate a position for or against any legislation.

If you have questions, please contact Sabrina Conner at sconner@ntbha.org or Janie Metzinger at jmetzinger@ntbha.org



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January 2021 BHLT data property management

Start: 39

End: 39

Evictions: 0

Terminations: 0

Lease violations: 3

Residents w/Lease violations:2

DHA inspections: 0

Cleanings for move-ins: 1

Exit to Permanent housing: 0

Residents tested for COVID-19: 0

Positive/Negative COVID-19 tests: 0

**Department of Criminal Justice
FY2021 SAMHSA Grant Project**

	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June	July	Aug	Sept	FY2021 Total	FY2020 Total	FY2019T Total
Nexus New Admissions	9	1	0	0									10	26	25
Nexus Average Days in Jail from Referral to Admission	17	18	28	37									25	12	8
Homeward Bound New Admissions	1	2	1	1									5	24	11
Homeward Bound Average Days in Jail from Referral to Admission	76	75	75	101									82	79	7
RESIDENTIAL TREATMENT DISCHARGES															
Successful Completions	1	4	1	3									9	43	27
Unsuccessful Completions	0	1	0	1									2	11	3
REFERRING SPECIALTY COURTS FY2021															
Number of Referrals by Specialty Courts		AIM		1		DWI Misd/Felony				STAR			2		
		ATLAS				IIP				Veterans					
		Competency		1		Legacy Family		4		4-C					
		DDC				MHJD/SET		6							
		DIVERT				STAC		22							

*Homeward Bound Pending Admission: 11

*Nexus Pending Admission: 0

HARRY INGRAM													FY2021 ATLAS STATISTICS				203rd	
MONTH	BEGINNING # OF PENDING CASES	+NEW CASES RECEIVED THIS MONTH	=TOTAL CASES	TBJ	TBC	PLEAS	REV	GRADUATES	PROBATION MODIFICATIONS	DISMISSALS	OTHERS	TOTAL DISPOSITIONS	ENDING # PENDING CASES **	CURRENT ATLAS PARTICIPANTS	CURRENT PARTICIPANTS IN CUSTODY	FORMER ATLAS PARTICIPANTS	BOND	
December	9	0	9	0	0	0	1	0	0	0	0	1	8	4	0	0	4	

HARRY INGRAM													FY2021 MISDEMEANOR DIVERT MENTAL HEALTH COURT STATS				CCCAP1/WADE	
MONTH	BEGINNING # OF PENDING CASES	Rediverts	+NEW CASES RECEIVED THIS MONTH	=TOTAL CASES	TBJ	TBC	PLEAS	DISMISSAL	OTHER	TOTAL DISPOSITIONS	ENDING # PENDING CASES **	CURRENT PARTICIPANTS	NUMBER OF GRADUATES	BOND***				
December	24	0	1	25	0	0	0	1	1	2	23	11	1	11				

HARRY INGRAM													FY2021 S.E.T. STATISTICS				291st	
MONTH	BEGINNING # OF PENDING CASES	+NEW CASES RECEIVED THIS MONTH	=TOTAL CASES	TBJ	TBC	PLEAS	REV	GRADUATES	PROBATION MODIFICATIONS	DISMISSALS	OTHERS	TOTAL DISPOSITIONS	ENDING # PENDING CASES **	CURRENT PARTICIPANTS	CURRENT PARTICIPANTS IN CUSTODY	FORMER PARTICIPANTS	BOND	
December	95	2	97	0	0	0	0	0	0	0	11	11	86	29	0	0	29	

December													FY2021 MHPD STATS			
	BEGINNING # OF PENDING CASES	+NEW CASES RECEIVED THIS MONTH	=TOTAL CASES	TRIALS	PLEAS	COND. DISM.	REVK	REVC	DISMISSALS	INCOMPETENT	REFERRALS	OTHER COUNSEL APPT.	TOTAL CLOSED			
R. Lenox	220	13	233	0	3	5	0	0	0	0	0	3	11			
L. Strather	230	19	249	0	5	0	0	0	3	0	0	4	12			

December																FY2021 FELONY COMPETENCY STATISTICS			
MONTH	BEGINNING # OF CASES	NEW CASES THIS MONTH	TBJ	TBC	Alt. Trial Dispos.	PLEAS	REVO-CATIONS	DISMISSALS	PROBATION	COMP. HRG.	EXTENSIONS	CIVIL COMMIT.	MHMR REFERRAL	CONSULTS	OTHER	ENDING # OF PEOPLE IN OCR			
M. Harden	176	12	0	0	0	6	0	4	1	8	7	0	0	0	2	15			
R. Scott	20	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0			

RANDALL SCOTT																FY2021 MISDEMEANOR COMPETENCY STATISTICS			
MONTH	BEGINNING # OF CASES	NEW CASES THIS MONTH	TBJ	TBC	Alt. Trial Dispos.	PLEAS	REVO-CATIONS	DISMISSALS	PROBATION	COMP. HRG.	EXTENSIONS	CIVIL COMMIT.	MHMR REFERRAL	CONSULTS	OTHER	ENDING # OF PEOPLE IN OCR			
December	126	48	0	0	0	0	0	25	0	19	0	0	0	0	0	10			

December																					MI Court			
MONTH	TOTAL NEW CASES RECEIVED	NEW CLIENTS AT TERRELL	NEW CLIENTS AT GREEN OAKS	NEW CLIENTS AT MEDICAL CENTER MCKINNEY	NEW CLIENTS AT PARKLAND	NEW CLIENTS AT DALLAS BEHAVIORAL HEALTH	NEW CLIENTS AT GARLAND BEHAVIORAL	NEW CLIENTS AT ZALE LIPSHY	NEW CLIENTS AT SUNDANCE BEHAVIORAL HEALTHCARE	NEW CLIENTS AT HICKORY TRAILS	NEW CLIENTS AT METHOIST RICHARDSON	NEW CLIENTS AT DALLAS PRESBYTERIAN	NEW CLIENTS AT VA	NEW CLIENTS AT WELLRIDGE	NEW CLIENTS AT TIMBERLAWN	NEW CLIENTS AT GLEN OAKS	NEW CLIENTS AT TEXOMA	NEW CLIENTS AT HAVEN	NEW CLIENTS AT PERIMETER BEHAVIORAL HEALTHCARE	PROBABLE CAUSE HEARINGS HELD	NO CONTEST COMMIT	CONTESTED COMMIT		
L. Roberts	125	2	0	38	0	0	71	0	0	0	0	0	0	0	0	12	0	0	2	1	0	10		
C. Cox	150	0	0	0	119	0	0	4	0	0	0	27	0	0	0	0	0	0	0	0	0	18		
K. Nelson	117	0	0	0	0	80	0	0	0	21	0	0	16	0	0	0	0	0	0	1	0	12		
R. Black	102	0	71	0	0	0	0	0	0	0	24	0	0	7	0	0	0	0	0	3	0	5		

DAN ECKSTEIN											MHPR BOND STATS				
MONTH	INITIAL ELIGIBILITY DAILY LIST (MH FLAGS)	MHPR BOND APPOINTMENTS FROM DAILY LIST (MH FLAGS MINUS THOSE SCREENED-OUT)	MHPR BOND HEARING-BOND GRANTED (# of clients)	MHPR BOND HEARING-BOND DENIED (# of clients)	TOTAL HEARINGS (# of clients)	Total # of Cases	Total # of Felony Cases	# of Felonies Approved	# of Felonies Denied	Total # of Misd. Cases	# of Misd's Approved	# of Misd's Denied			
December	1461	183	25	2	27	43	24	23	1	19	19	0			

HARRY INGRAM													FY2021 ATLAS STATISTICS				203rd	
MONTH	BEGINNING # OF PENDING CASES	+NEW CASES RECEIVED THIS MONTH	=TOTAL CASES	TBJ	TBC	PLEAS	REV	GRADUATES	PROBATION MODIFICATIONS	DISMISSALS	OTHERS	TOTAL DISPOSITIONS	ENDING # PENDING CASES **	CURRENT ATLAS PARTICIPANTS	CURRENT PARTICIPANTS IN CUSTODY	FORMER ATLAS PARTICIPANTS	BOND	
January	8	0	8	0	0	0	0	0	0	0	0	0	8	4	0	0	4	

HARRY INGRAM													FY2021 MISDEMEANOR DIVERT MENTAL HEALTH COURT STATS				CCCAP1/WADE	
MONTH	BEGINNING # OF PENDING CASES	Rediverts	+NEW CASES RECEIVED THIS MONTH	=TOTAL CASES	TBJ	TBC	PLEAS	DISMISSAL	OTHER	TOTAL DISPOSITIONS	ENDING # PENDING CASES **	CURRENT PARTICIPANTS	NUMBER OF GRADUATES	BOND***				
January	23	0	3	26	0	0	0	4	0	4	22	10	2	10				

HARRY INGRAM													FY2021 S.E.T. STATISTICS				291st	
MONTH	BEGINNING # OF PENDING CASES	+NEW CASES RECEIVED THIS MONTH	=TOTAL CASES	TBJ	TBC	PLEAS	REV	GRADUATES	PROBATION MODIFICATIONS	DISMISSALS	OTHERS	TOTAL DISPOSITIONS	ENDING # PENDING CASES **	CURRENT PARTICIPANTS	CURRENT PARTICIPANTS IN CUSTODY	FORMER PARTICIPANTS	BOND	
January	86	13	99	0	0	0	0	12	0	0	23	35	64	23	1	0	22	

January													FY2021 MHPD STATS			
	BEGINNING # OF PENDING CASES	+NEW CASES RECEIVED THIS MONTH	=TOTAL CASES	TRIALS	PLEAS	COND. DISM.	REVK	REVC	DISMISSALS	INCOMPETENT	REFERRALS	OTHER COUNSEL APPT.	TOTAL CLOSED			
R. Lenox	222	21	243	0	0	4	0	0	2	0	0	4	10			
L. Strather	237	17	254	0	0	6	0	0	0	2	3	2	13			

January																	FY2021 FELONY COMPETENCY STATISTICS			
MONTH	BEGINNING # OF CASES	NEW CASES THIS MONTH	TBJ	TBC	Alt. Trial Dispos.	PLEAS	REVO-CATIONS	DISMISSALS	PROBATION	COMP. HRG.	EXTENSIONS	CIVIL COMMIT.	MHMR REFERRAL	CONSULTS	OTHER	ENDING # OF PEOPLE IN OCR				
M. Harden	175	10	0	0	0	4	2	5	0	12	7	0	0	0	2	15				
R. Scott	19	2	0	0	0	0	0	2	0	0	0	0	0	0	0	0				

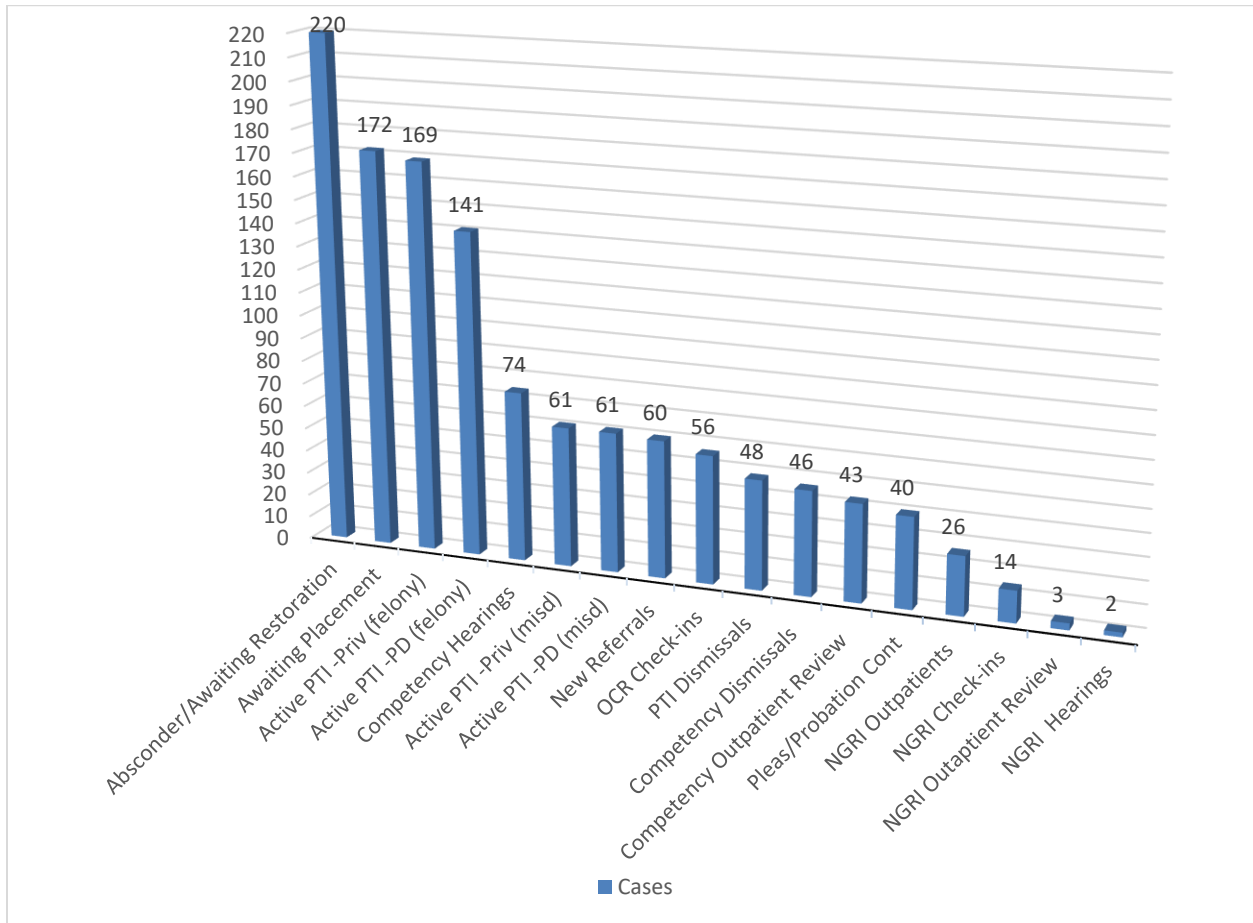
RANDALL SCOTT																	FY2021 MISDEMEANOR COMPETENCY STATISTICS			
MONTH	BEGINNING # OF CASES	NEW CASES THIS MONTH	TBJ	TBC	Alt. Trial Dispos.	PLEAS	REVO-CATIONS	DISMISSALS	PROBATION	COMP. HRG.	EXTENSIONS	CIVIL COMMIT.	MHMR REFERRAL	CONSULTS	OTHER	ENDING # OF PEOPLE IN OCR				
January	149	31	0	0	1	1	0	35	0	25	1	1	0	0	0	13				

January																							MI Court			
MONTH	TOTAL NEW CASES RECEIVED	NEW CLIENTS AT TERRELL	NEW CLIENTS AT GREEN OAKS	NEW CLIENTS AT MEDICAL CENTER MCKINNEY	NEW CLIENTS AT PARKLAND	NEW CLIENTS AT DALLAS BEHAVIORAL HEALTH	NEW CLIENTS AT GARLAND BEHAVIORAL	NEW CLIENTS AT CLEMENTS (formerly ZALE LIPSHY)	NEW CLIENTS AT SUNDANCE BEHAVIORAL HEALTHCARE	NEW CLIENTS AT HICKORY TRAILS	NEW CLIENTS AT METHOYST RICHARDSON	NEW CLIENTS AT DALLAS PRESBYTERIAN	NEW CLIENTS AT VA	NEW CLIENTS AT WELLS RIDGE	NEW CLIENTS AT GLEN OAKS	NEW CLIENTS AT TEXOMA	NEW CLIENTS AT HAVEN	NEW CLIENTS AT PERIMETER BEHAVIORAL HEALTHCARE	PROBABLE CAUSE HEARINGS HELD	NO CONTEST COMMIT	CONTESTED COMMIT	FORCED MEDS HEARING IN COURT				
L. Roberts	135	6	0	41	0	0	65	0	0	0	0	0	0	0	21	0	0	0	2	2	0	16	17			
C. Cox	176	0	0	0	151	0	0	4	0	0	0	21	0	0	0	0	0	0	1	0	0	15	15			
K. Nelson	112	0	0	0	0	52	0	0	0	52	0	0	8	0	0	0	0	0	3	0	0	24	19			
R. Black	100	0	76	0	0	0	0	0	0	20	0	0	0	4	0	0	0	0	4	0	2	2	2			

DAN ECKSTEIN												MHPR BOND STATS				
MONTH	INITIAL ELIGIBILITY DAILY LIST (MH FLAGS)	MHPR BOND APPOINTMENTS FROM DAILY LIST (MH FLAGS MINUS THOSE SCREENED-OUT)	MHPR BOND HEARING-BOND GRANTED (# of clients)	MHPR BOND HEARING-BOND DENIED (# of clients)	TOTAL HEARINGS (# of clients)	Total # of Cases	Total # of Felony Cases	# of Felonies Approved	# of Felonies Denied	Total # of Misd. Cases	# of Misd's Approved	# of Misd's Denied				
January	1564	204	32	4	36	52	34	31	3	18	16	2				

DISTRICT ATTORNEY'S OFFICE - RESTORATIVE JUSTICE DIVISION UPDATE

DA Criminal Mental Health Division January 2021 Stats:



DA Civil Division, Mental Illness Court January 2021 Stats:

1. **Civil Commitments** (Court Order for Inpatient Temporary Mental Health Services)
 - a. January 2021: 32
 - b. Year to date: 32
2. **Medication Hearings** (Court Order to Administer Psychoactive Medications, while receiving inpatient mental health services)
 - a. January 2021: 28
 - b. Year to date: 28
3. **Dallas County Jail Medication Hearings** (Court Order to Administer Psychoactive Medications for 46B criminal defendants who have been found incompetent to stand trial and are refusing prescribed psychoactive medications)
 - a. January 2021: 3
 - b. Year to date: 3
4. **Jury Trials**
 - a. January 2021: **0 Jury Trials**
 - b. Year to date: **0 Jury Trials**

DA Registered Pre-Trial Specialty Courts January 2021 Stats:

<u>COURT</u>	<u># Referrals</u>	<u># Accepted</u>	<u># Graduates</u>	<u># Fail</u>	<u>Total Caseload #</u>
<u>DIVERT</u>	<u>11</u>	<u>2</u>	<u>7</u>	<u>1</u>	<u>102</u>

<u>COURT</u>	<u># Referrals</u>	<u># Accepted</u>	<u># Graduates</u>	<u># Fail</u>	<u>Total Caseload #</u>
<u>AIM</u>	<u>1</u>	<u>6</u>	<u>0</u>	<u>2</u>	<u>42</u>

<u>COURT</u>	<u># Referrals</u>	<u># Accepted</u>	<u># Graduates</u>	<u># Fail</u>	<u>Total Caseload #</u>
<u>SET</u>	<u>5</u>	<u>3</u>	<u>5</u>	<u>5</u>	<u>27</u>

<u>COURT</u>	<u># Referrals</u>	<u># Accepted</u>	<u># Graduates</u>	<u># Fail</u>	<u>Total Caseload #</u>
<u>MHJD</u>	<u>1</u>	<u>1</u>	<u>2</u>	<u>0</u>	<u>13</u>

<u>COURT</u>	<u># Referrals</u>	<u># Accepted</u>	<u># Graduates</u>	<u># Fail</u>	<u>Total Caseload #</u>
<u>STAR PTT</u>	<u>6</u>				

<u>COURT</u>	<u># Referrals</u>	<u># Accepted</u>	<u># Graduates</u>	<u># Fail</u>	<u>Total Caseload #</u>
<u>VETERANS</u>	<u>7</u>	<u>2</u>	<u>7</u>	<u>1</u>	<u>30</u>

ADA Volunteer Hours in Specialty Courts: January 2021:

Specialty Court	Prosecutor	Month	Staffing Hrs	Court Hrs	Outside Hrs	Total Hrs
ATLAS	Aja Reed	Jan	2.5	1	0	3.5
DDC	Jamie Young	Jan	4	4	6	14
FEL DWI	Hilary Wright	Jan	2	2	2.8	6.8
MISD DWI	Herschel Woods	Jan	1	2	2	5
STAR Post	Jennifer Kachel	Jan	1.25	2.5	1	4.75
Prost PTIs	Felicia Kerney	Jan	1.5	1.5	5	8
DV	Searcey/Bargman	Jan	4	4	2	10
VETERANS	Geoff Keller	Jan	4	0	4	8
STAC (Mays)	Andrew Novak	Jan	4	0	0	4