

**Dallas County Behavioral Health Leadership Team**  
**Thursday, May 12, 2022**  
**9:30am -11:00am**  
**Virtual Meeting via Microsoft Teams**

- I. Welcome and Call to Order
  - Review/Approval of April 14, 2022, Meeting Minutes
- II. Introductions
- III. **Presentation: UT Southwestern Hospital**
  - Title: "UT Southwestern Psychiatric Hospital Planning"**
  - Presenters: Dr. Hicham Ibrahim**, Associate Vice President and Chief Medical Officer of Ambulatory Services, UT Southwestern Hospital  
**Dr. James Baker**, Vice Chair of Clinical Affairs for the Department of Psychiatry, UT Southwestern Hospital  
**Jennifer Erasime**, LCSW-S, Director of Innovation, Meadows Mental Health Policy Institute
- IV. North Texas Behavioral Health Authority (NTBHA) Update
- V. Meadows Mental Health Policy Institute (MMHPI) Update
- VI. Dallas County Behavioral Health Housing Workgroup Update
- 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 Update – 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, FUSE 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, May 12, 2022**  
**<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 9:30AM, noting that legal notices had been posted and a quorum of the Commissioners Court was present (Commissioners Price, Dr. Daniel, and Koch); therefore, Commissioner John Wiley Price entertained a motion for opening the meeting. A motion was made by Commissioner Dr. Theresa Daniel for the opening of the meeting and was then seconded by Commissioner J.J. Koch. The motion was unanimously passed by the committee members accepting the request to open the Behavioral Health Leadership Team meeting.

Commissioner Price announced that the meeting was being recorded and those who continued in attendance were consenting to being recorded.

**Review/Approval of Minutes**

The minutes of the BHLT meeting held on Thursday, March 10, 2022, were included in the meeting packet. Commissioner Price offered an opportunity for the minutes to be reviewed or approved. A motion was made by Commissioner Dr. Theresa Daniel for the minutes of the meeting and was then seconded by Commissioner J.J. Koch. The minutes were approved as submitted.

**Introductions**

Commissioner Price welcomed everyone to the meeting and asked first-time attendees to introduce themselves. The first-time attendees were Alexis McCowan, Community Outreach Coordinator for the Dallas County Public Defender's office and Kavina McLeod, Engagement Supervisor for the Dallas County Public Defender's office.

**Presentations**

There was one presentation during the April 14, 2022, BHLT meeting, titled *SAMHSA, Grant-Year 3. Expanding Residential Substance Abuse Treatment in Dallas County. October 1, 2020 - September 29, 2021*. The presenters were Sheena Oriabure, Mental Health Specialty Court Coordinator with the Criminal Justice Department of Dallas County and Annie Powell, President and CEO of Recovery Community of Culture. Mrs. Oriabure mentioned that the purpose for the funding was to expand residential treatment and substance use disorder treatment in Dallas County for individuals in specialty courts, with priority given to minority males between the ages of 17

and 30. She further stated that the goals of the program were to increase the number of individuals receiving substance use treatment, to decrease time spent in jail, and to reduce substance use, recidivism, and to improve the life outcomes of the individuals participating in the program.

Annie Powell stated that the services were provided by peers/individuals with sustained, lived experiences in substance use, core current mental health challenges, and criminal justice involvement; stating that all are certified by the state of Texas as a Peer Specialist. She further stated that the program works best with peers who volunteered to provide support, meeting the participants where they were mentally, emotionally, and physically, and making themselves available to the participants.

### **North Texas Behavioral Health Authority (NTBHA) Update**

Carol Lucky, CEO of NTBHA, provided the NTBHA update. Ms. Lucky reported that NTBHA received one new contract from the state HHSC in an amount slightly less than \$600,000.00 to increase crisis services and mobile crisis interventions over a 3-year period. She further stated that the Board agreed to create a suicide task force to focus on the variety of needs within the community with representation from all counties and different cultural and socioeconomic groups. Ms. Lucky reported that they exceeded their targeted service goals for February 2022, having served 23,878 adults and 8,803 children for a total of 32,681 served in mental health services, not including substance use services.

Ms. Lucky added that a Survey Monkey link will be disseminated asking for basic demographic information, information about mental diagnosis, and history of substance use, and IDD, which will help to determine which funding to use. She further stated the funding can be used for past tenant obligations.

### **Tenant Based Rental Assistance Program**

Dr. Walter Taylor, Chief Strategy Officer of NTBHA provided the update stating that the TBRA program has secured \$1,000,000.00 and they have housed 18 new families under TEBRA, expecting new TANF housing funds that totals about \$4,000,000.00 which can assist families with rental and utility assistance, security deposit, diapers, milk, COVID burial expenses, etc., noting that the funding was HHSC.

### **Meadows Mental Health Policy Institute (MMHPI)**

Mr. Ron Stretcher provided the update stating that The Dallas County Deflection Center was very near a soft opening in early May, with certificates of occupancies being put in place. He anticipated a grand opening later in the month. Mr. Stretcher requested information on what the ARPA funding could be used for.

- Commissioner Price directed Mr. Stretcher to Charles Reed.

### **Dallas County Behavioral Health Housing Workgroup**

Commissioner Dr. Daniel provided the update reporting that housing occupancy in Dallas County was more than 97% which makes finding housing units more difficult. She reported that Dallas County and the City of Dallas are using ARPA funds to keep tenants in housing with rental and utility assistance, utilizing eight Navigators to assist. She further reported that the UT School of Social Work was adding 40 to 50 interns to help with the eviction prevention program.

- Commissioner Price questioned the sustainability of the funding going forward, with such large amounts of money being spent on arrearages.
- Carol Lucky clarified that NTBHA had a process in place to help tenants with a plan to get on track with employment and sustainability.

### **1115 Waiver Crisis Services Project Update**

Yordanos Melake, Crisis Services Project Program Manager with the Dallas County Department of Criminal Justice provided the update, reporting that with CSP, one of the category C measures were selected as a part of the category C - Round 5 review conducted by Myers and Stauffer. The objective of the review was to determine if the measures were reported according to specifications and HSC approval, with conclusion of the review in early July.

Mrs. Melake also reported that April was the DSRIP Y-11 reporting month with all applicable Category C reporting templates completed and were due by the 30<sup>th</sup>. There were no updates on the DSRIP extension. She further reported that April 30<sup>th</sup> also marked the end of the Crisis Service Projects contract with Transicare after many years of services, expressing their immense gratefulness for Scott Black, Lindsey Cherry, and staff with the Forensic Assertive Community Treatment team, in connecting individuals discharged from inpatient treatment at the state hospital to community outpatient mental health treatment and providing them the necessary resources and assistance to reintegrate into the community. Mrs. Melake noted that connection services will continue with the North Texas Behavioral Health Authority working to fulfill the processes needed.

Mrs. Melake lastly reported that the 16.22 advisory committee continued to meet to find workable processes with the IT department and will continue to meet with core stakeholder groups as final decisions were made.

### **Legislative Update**

Janie Metzinger, Legislative Coordinator at NTBHA, provided the update, reporting that there were about 10 House committees that had interim charges. For recovery options there was a joint charge. County Affairs and Corrections that would study behavioral health services and recovery options in county jails. Criminal Justice would review victim services, including the availability of community-based trauma informed care, particularly in communities that have high crime rates. She also stated that the Defense and Veterans Affairs would review PTSD and TBI, Health and Human Services would review the 1115 Waiver and the implementation of a longer extended period for maternal mental health postpartum; mentioning the importance of the maternal mental health postpartum study conducted statewide about 5 years ago, showed that part of the maternal mortality in Texas was due to substance use and relapse after delivery.

Ms. Metzinger further stated that the Senate will review issues related to Fentanyl, telehealth, workforce, reentry, and the mental health delivery system in Texas. She further mentioned that a committee will review public health data, including suicide data, with hopes of updating suicide data.

## **Funding Opportunities**

### **●The Cottages Update**

Yordanos Melake, Crisis Services Program Manager, with the Dallas County Criminal Justice Department provided the update, stating that the report was on page 36 in the packet. For the month of March, the Cottages began and ended the month with 44 residents at 83% occupancy. There were zero evictions and zero terminations.

### **●SAMHSA Residential Treatment Grant Update**

Teresa Salisbury, SAMHSA Program Coordinator with the Dallas County Criminal Justice Department, provided the update stating that the SAMHSA Grant report was on page 37 in the packet. There were two admissions for the month of March with a total of twelve for this fiscal year, with six pending.

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

Lynn Richardson, Chief Public Defender, Dallas County Public Defender's Office, provided the update reporting that there were plans to create a community engagement council made up of key stakeholders and representatives from underrepresented and underserved communities so that their concerns, challenges, needs, and desires can be communicated first-hand, from the perspective of those being served. Mrs. Richardson further stated the importance of hearing from the perspective of the people who are working and communicating with those being served in the community to find out what can be done to improve the services they receive.

Vickie Rice, Supervisor, Misdemeanor Division, Dallas County Public Defender's Office, also provided an update, stating that there are plans to give a brief presentation on the community courts and their involvement as well as new initiatives of the public defender's office. She further mentioned that their biggest goal is to infuse the community with information, allowing the community to feel the presence of the public defender's office.

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

Julie Turnbull, Chief of the Restorative Justice Division, Dallas County Criminal District Attorney's Office provided the update, stating that the reports were in the packet. She reported that pretrial diversion referrals were increasing, with 40 active pretrial intervention agreements.

Raymond Pierson Chief of the Mental Health Division, Dallas County Criminal District Attorney's Office provided the update for the Mental Health Division, stating that on March 3rd and 4th, he along with partners from the clerk 's office, the Sheriff's Department, the PD 's office, the DA 's office, and some judges, went to Denton as part of the Judicial Commission on Mental Health to work with them through their sequential intercept model. After two days of training, Denton was considering an outpatient program for misdemeanors and felonies, with a long-term goal of creating a deflection center.

## **Upcoming Events and Notifications**

- Dr. Walter Taylor reported that next Friday, the second installment of Courageous Conversations with Dr. Gloria Morrow, titled, "Working with BIPOC and LGBTQIA+ People in Clinical Settings, will take place virtually.

- Jolie Robinson, CEO of Metro Dallas Homeless Alliance announced that the Dallas Real Time Rapid Rehousing had been ramping up and acquiring units with a landlord engagement team of three people whose daily job is to go out and seek units, noting that the Metro Dallas vacancy rate is one of the lowest it's been in a very long time.
- Rev. Stacey Brown of Elevate Movement announced that the Barbershop Initiative would have a virtual peer meeting on April 28th at 7:00 PM. She also announced that Elevate Movement would host a Black Mental Health meet and greet on May 20th that will be in person. Details were forthcoming. Lastly, she announced that on April 27th, there would be a family peer group for those who have family members who are living with mental illness. Details of that virtual event were forthcoming.

### **Public Comments**

There were no public comments.

### **Adjournment**

Commissioner John Wiley Price thanked and commended the committee for their energy, time, and sacrifice for the community, noting that each person who is assisted, matters, and that is measurable. Commissioner Price then entertained a motion for adjournment. Commissioner Theresa Daniel so moved and was seconded by Commissioner J. J. Koch.

# UT Southwestern Psychiatric Hospital

# Background

- A 2014 study commissioned by DSHS identified North Texas as an underserved area in need of an additional 248 State behavioral health beds to be increased to 261 beds by 2024
- Access to State psychiatric beds has been limited in North Texas leading to long wait times and has been aggravated in past years by multiple facilities closure in DFW
- State has desired to partner with academic centers to provide innovative care and improve outcomes
- New facilities have been recently developed in Houston, Austin and San Antonio in collaboration between HHSC and UT System
- In 2021, 87<sup>th</sup> TX Legislature and Special legislative session appropriated State and ARPA funds to design and build a new psychiatric facility in collaboration between UT Southwestern and HHSC



# Vision

- *Guiding Principle: The design, programming and operating of the psychiatric hospital will be guided by what is best for patients and families*
- New hospital will be a 200-bed adult psychiatric facility operated by UT Southwestern and funded by the State
  - No pediatric services planned at this time but hospital will be designed with ability to expand if needed
- Hospital will be an acute stay facility (< 30 days for non-forensic admissions, < 60 days for forensic admissions)
- Facility will serve a large catchment area (currently being delineated)
- Hospital environment will be state-of-the-art, patient-centered, and safe
- Design will be aesthetically pleasing, with abundant access to open spaces, gardens and sunlight
- Project schedule:
  - Programming & Design projected completion – Sept 2022
  - Construction – Dec 2022- Summer 2025

# Programming

- Hospital will provide treatment to all major adult psychiatric disorders (8 units):
  - Psychotic disorders
  - Mood disorders
  - Addictive disorders (Dual Diagnosis)
  - Medical Psychiatry (one unit)
  - Low acuity forensic (one unit)
- Facility will include many therapeutic spaces designed to facilitate patient recovery and promote independent living:
  - Gym, café, chapel, salon, garden/greenhouse, patient store, ADL kitchen, library
  - Music therapy, yoga, exercise, quiet/sensory rooms, group therapy, individual therapy
- Care will be state-of-the art, high-quality, innovative, and delivered using a multidisciplinary model
- Facility will train behavioral health professionals from all disciplines and will integrate research

# Programming

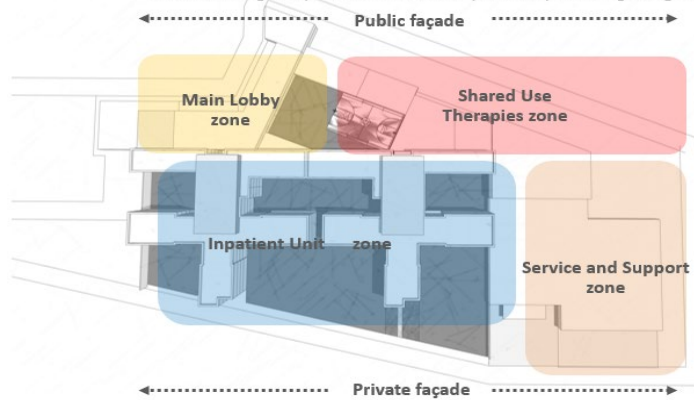
- Hospital will not include an emergency department but will have an admission suite
  - Programming will also include:
    - Partial hospitalization programs
    - Neuromodulation modalities (e.g. ECT, rTMS, MST, Ketamine/esketamine, new modalities)
  - Other programming/space features:
    - Mental health court (physical and virtual)
    - Patient navigation space
    - Telecommunication/telehealth capacity
  - New hospital will collaborate with community partners in all counties served to develop a comprehensive behavioral healthcare model to meet patients' needs
- *Any other programming you suggest?*

# Initial facility fundamentals – Potential Site



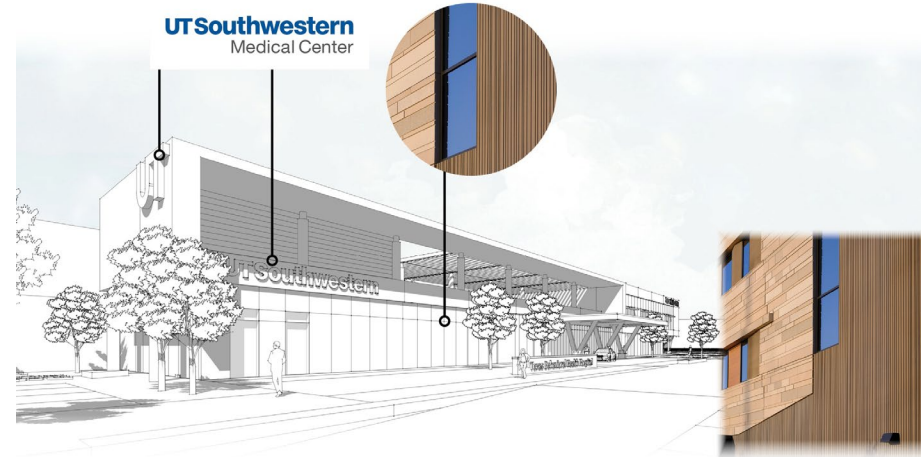
## Conceptual building organization

Note: building footprint shown is conceptual only, building design to continue



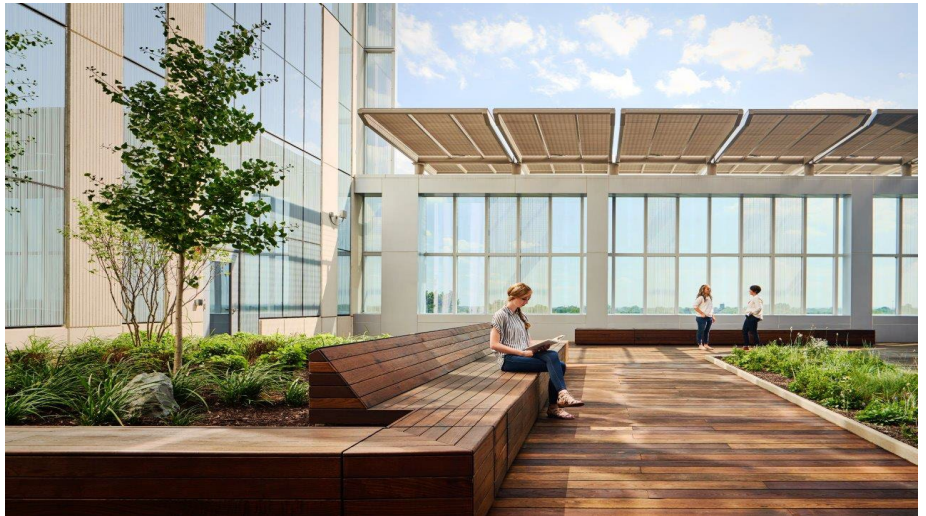


# Facility External Design Options



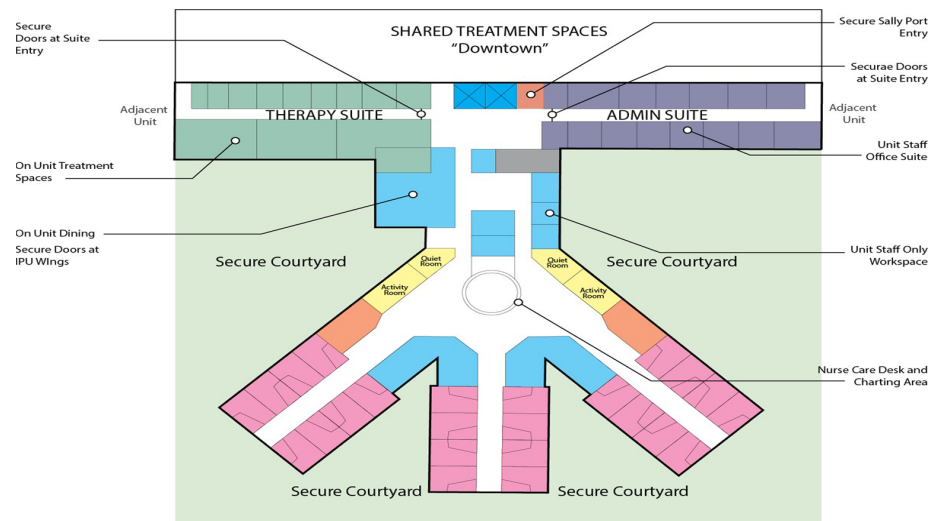
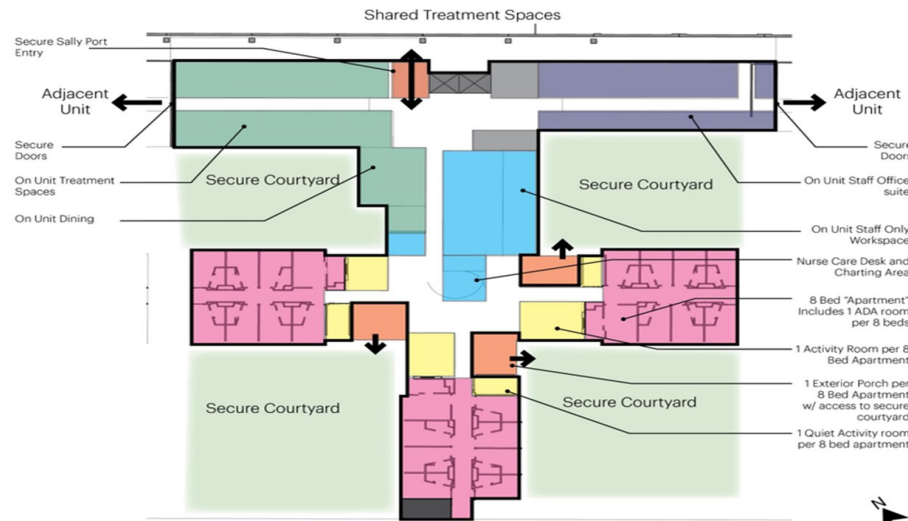
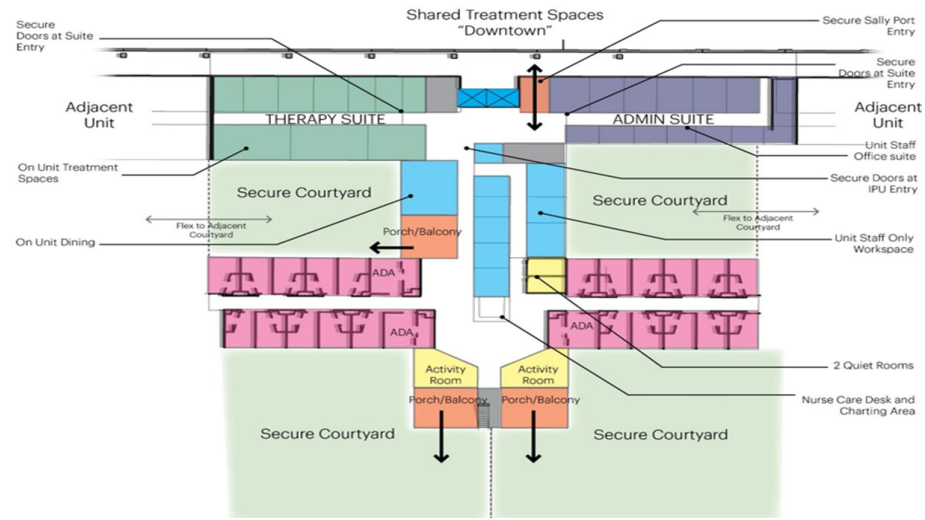
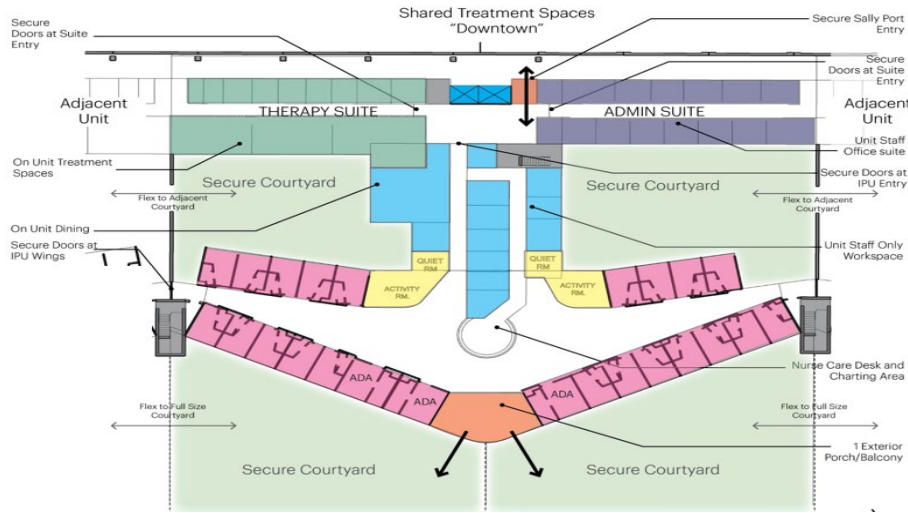


# Open Courtyard Options





# Patient Unit Design Options



Any recommendations on the facility design or any other aspects of the project?



**Dallas County Administration, 411 Elm Street, 1<sup>st</sup> Floor, Dallas Texas 75202**

**April 27, 2022 Minutes**

**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:** Thomas Lewis, Dallas County HHS; Jim Mattingly, Luma; Janie Metzinger, NTBHA; Ikenna Mogbo, Metrocare Services; Eric McCarty, NTBHA; Doug Denton, Homeward Bound; Joli Robinson, MDHA; Kimberly Onofre, Sharing Life; Charlene Randolph, DCCJ; Laura Edmonds, DCCJ; Sarah Masih, Salvation Army; Lisa Marshall, City Citizen Homeless Commission; Tom Edwards, Mesquite ISD; Blake Fetterman, Salvation Army; Steve Abbott, American Red Cross; Sandy Rollins, Texas Tenants Union; Madeline Reedy, CitySquare; Leah Williams, MDHA; Yordanos Melake, DCCJ; Luis Moreno, Prism Health; Gilbert Cifuentes, Prism Health of North Texas; Dr. Theresa Daniel, Commissioner; Erin Moore, Dallas County; Erica McDaniel, Dallas County; Martha Rodriguez, Dallas County; Blanca Gonzalez, Dallas County; Tzeggabhran Kidane, Dallas County

***Dr. Daniel opened the meeting and introduced all first-time attendees.***

**CALL TO ORDER:** The minutes were approved without changes.

## **GOVERNANCE**

### Dallas Area Partnership to End and Prevent Homelessness:

Dallas Area Partnership meeting was held April 7, 2022. Healthy discussions continue for the conditions and status of creating more housing. Efforts keep going to build new housing, remodel existing housing and for people to stay in current housing. Projects are in various stages of development, and we will continue to report on their progress.

### Dallas County Homeless Advisory Committee: Erin Moore, Commissioner Daniel's Office

The Dallas County Homeless Advisory Committee was held. General discussion was held about COVID numbers and hepatitis in the homeless population. There was also discussion about resolving mitigating factors of having to spread out shelter residents due to COVID and having less shelter space. The efforts continue for the alternative model of a community first village establishment here in Dallas County.

### Federal and State Legislative Update: Janie Metzinger, NTBHA

Janie Metzinger reported both Senate and House interim charges have been released. The House interim charges have one related to workforce housing and one related to victim of crimes needing housing. There will be more information reported as new developments become available.

## **RESOURCES**

### Shelter Discussions:

Sarah Masih, Salvation Army, reported general shelter updates. Salvation Army specifically is in the process of reevaluating some of their COVID policies to create greater access to those seeking shelter. They have an upcoming meeting to discuss bi-weekly COVID testing and masking. There are some program updates with on-site medical and recuperative care in partnership with Parkland Hospital in which they're planning to start sometime in May 2022.

NTBHA: Eric McCarty

Eric McCarty reported no new updates on project TBRA at this time. They have a new contract with HHSC to provide COVID rental assistance. This grant funding can help pay up to four months of rent and utilities with qualifying conditions. Further information can be found on their website: NTBHA.org and click services tab to access the link.

Housing Navigator: Kimberly Rawls, Dallas County

Report was provided to the group in the meeting packet.

Homeless Jail Dashboard: Kimberly Rawls, Dallas County

Report was provided to the group in the meeting packet.

Housing Authority Report: Thomas Lewis / Brooke Etie

Thomas Lewis, Dallas County HHS, reported emergency housing vouchers are moving along and have met their goal of 124 vouchers. There are 41 presently leased up, 39 currently searching and 44 vouchers that remain open. This work has been made possible with case management services by MDHA which have been a great help.

**PROJECTS AND INDUSTRY UPDATES**

Meadows Mental Health Policy Institute: Ron Stretcher

Report available at next meeting.

CARES Act/ARPA Funds: Hector Faulk, Dallas County

Commissioner Daniel reported plans are being finalized for how funds will be distributed and there will be a complete report available within the next few weeks.

Coordinated Access System: Joli Robinson, MDHA

Joli Robinson reported there are no major updates at this time. They are working heavily on encampments and have a project management plan in place. Analysis for pit count data is in the process of being finalized and the State of Homelessness Address is scheduled for May 13, 2022, where this information will be shared. Conversations continue with the City of Dallas and Dallas County about potential permanent supportive housing projects and initiatives that are in the pipeline while getting to a great place of understanding on a timeline for when, where, and services.

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

Laura Edmonds reported that the mental health pretrial process continues to go well. They have been working closely with the FUSE project to get individuals released and connected with community care and services. They continue to work with United Way on continued funding. All bed vacancies that were available at St. Jude are now full. The search for more grant opportunities remains for homeless individuals involved with criminal justice system.

CitySquare: Madeline Reedy, CitySquare

Madeline Reedy reported their quarterly report was submitted. They used key performance indicators in support of housing program and data collected. The report consists of information on the cottages, community life, a way home housing, destination homes; youth housing program including transitional housing, rapid rehousing, and permanent supportive housing. Various funding for housing navigation and street outreach along with homeless outreach team initiatives are also included in the report. There is a project overview about each program and why they were selected as supportive housing covering the stability and number of individuals housed this first quarter.

Dallas Connector: Daniel Roby, Austin Street

Report available at next meeting.

Homeward Bound: Doug Denton, Homeward Bound

Doug Denton reported crisis residential is running at about ninety percent full with three beds available at this time. The Dallas County Deflection Center is moving along. Although they encountered a small plumbing problem, it will not delay opening. They are unpacking and arranging furniture, staff onboarding, and orientation began getting everyone trained. Ribbon cutting is still set for May 20, 2022, at 11am with invitations being sent out this week.

Metro Dallas Youth Committee: Leah Williams reporting; Metro Dallas Youth Committee

Leah Williams, MDHA reported first meeting being held last week with her as the lead facilitator. The meeting went well, and discussions included moving forward with collecting data and beginning the work recreating the youth action board. Monthly meetings will be held as they continue working with other organizations while restarting voices of the youth to help influence decision making moving forward. There will be more information reported as updates become available.

Family Housing: Ellen Magnis, Family Gateway

Report was provided to the group in the meeting packet.

Mattingly Report: Jim Mattingly

Jim Mattingly provided a report to the group in the meeting packet but wanted to point out the number of units absorbed this quarter is down dramatically from last year by 50%. The number of units absorbed nationally is 14,000 which is the lowest in the past five years. Rental rates have increased significantly at 3.2% for the quarter and up 17.7% for the year. Increases are likely to continue increasing for the rest of the year, however, people moving in will see much higher rates than people as well as those who are renewing their rental agreements. Delinquent rent has begun trending upward partially due to there not being as much rental assistance and individuals not pursuing rental assistance due to the wait times for court. This year there is an expectant delivery of about 25,000 apartment units that will hopefully satisfy the demand.

Updates

Laura Edmonds commented regarding the Connector that Edd Eason has been helping fill-in this week with driving the Connector van used for jail releases and thanks to him for his continued service despite his recent retirement.

Commissioner Daniel noted as transitioning of in-person meetings begin taking place, workgroup members will be notified with location before the next meeting.

***The meeting was adjourned at 10:55am with words of maintaining the efforts by Dr. Daniel.***

***Next Meeting: May 25, 2022***



# Crisis Services Project

CSP Total

DY11 CSP Monthly Report\_No Graphs(with LCN)

Last Refresh: 5/5/22 at 10:06:56 AM GMT-05:00

	Past Year Avg	2022-01	2022-02	2022-03	Average:	Sum:
<b>Total Service Episodes:</b>	516	474	470	493	<b>479</b>	<b>1,437</b>
<b>Total Unique CID:</b>	415	470	451	460	<b>460.33</b>	<b>1,381</b>
<b>Total Unique PID:</b>		470	451	459	<b>460</b>	<b>1,380</b>
<b>% Change to DY 9 by CID</b>		79.80%	76.57%	78.10%		

<u>Total Encounters by Type:</u>		2022-01	2022-02	2022-03	Average:	Sum:
<b>Triage</b>		474	470	493	<b>479</b>	<b>1,437</b>
<b>Care Coordination</b>		435	423	605	<b>487.67</b>	<b>1,463</b>
<b>F2F Encounter</b>		265	269	305	<b>279.67</b>	<b>839</b>
<b>Sum:</b>		<b>1,174</b>	<b>1,162</b>	<b>1,403</b>	<b>1,246.33</b>	<b>3,739</b>

<u>F2F Encounter</u>		2022-01	2022-02	2022-03	Average:	Sum:
<b>MHPR Bond</b>		136	125	171	<b>144</b>	<b>432</b>
<b>Non-MHPR</b>		129	144	134	<b>135.67</b>	<b>407</b>
<b>Sum:</b>		<b>265</b>	<b>269</b>	<b>305</b>	<b>279.67</b>	<b>839</b>

<u>Administrative Note</u>		2022-01	2022-02	2022-03	Average:	Sum:
<b>Desk Reviews</b>		3	11	11	<b>8.33</b>	<b>25</b>



# Crisis Services Project

Frank Crowley

DY11 CSP Monthly Report\_No Graphs(with LCN)

Last Refresh: 5/5/22 at 10:06:56 AM GMT-05:00

	2022-01	2022-02	2022-03	Average:	Sum:
<b>Service Episodes:</b>	474	470	493	<b>479</b>	<b>1,437</b>

<u>Unique Consumers:</u>	2022-01	2022-02	2022-03	Average:	Sum:
By N* ID	33	50	52	<b>45</b>	<b>135</b>
By LCN	270	191	213	<b>224.67</b>	<b>674</b>
By Client ID	167	210	195	<b>190.67</b>	<b>572</b>
<b>TOTAL Unique Consumers:</b>	<b>470</b>	<b>451</b>	<b>460</b>	<b>460.33</b>	<b>1,381</b>
<b>TOTAL Unique Consumers as %:</b>	<b>99.16%</b>	<b>95.96%</b>	<b>93.31%</b>		

<u>Unique F2F:</u>	2022-01	2022-02	2022-03	Average:	Sum:
By N* ID	15	32	31	<b>26</b>	<b>78</b>
By LCN	148	127	133	<b>136</b>	<b>408</b>
By Client ID	98	108	138	<b>114.67</b>	<b>344</b>
<b>TOTAL Unique F2F:</b>	<b>261</b>	<b>267</b>	<b>302</b>	<b>207.5</b>	<b>830</b>
<b>TOTAL Unique F2F as %:</b>	<b>98.49%</b>	<b>99.26%</b>	<b>99.02%</b>		



Triage 12 w/F2F	726
Recidivism 12-12 w/F2F	50
Recidivism 12-12 w/F2F Percentage	6.89%

Bookins 12 w/PAP	948
Recidivism 12-12 w/PAP	48
Recidivism 12-12 w/PAP Percentage	5.06%

Total F2F and PAP	1,674
Recidivistic Individuals	98
Recidivism Percentage	5.85%

	January	February	March
Year MO	2022/01	2022/02	2022/03

**Triage w/F2F:**

Triage 12 w/F2F	239	486	726
Recidivism 12-12	6	24	50
Recidivism 12-12%	2.51%	4.94%	6.89%

**PAP:**

Count of PAP	282	589	948
PAP Recidivism	6	10	48
PAP Recidivism%	2.13%	1.70%	5.06%

**Total:**

Count of F2F & PAP	521	1,075	1,674
Recidivism F2F& PAP	12	34	98
Recidivism%	2.30%	3.16%	5.85%



Baseline	Goal	Year MO	January	February	March	April	May	June	July	August	September	October	November	December
			01/2022	02/2022	03/2022	04/2022	05/2022	06/2022	07/2022	08/2022	09/2022	10/2022	11/2022	12/2022

**M1-262 Depression with Suicide and Homicide Risk**

731		<b>SRAT And/Or VRAT Rating Count</b>	79	158	268									
752		<b>Total of Unique Individuals</b>	80	160	270									
97.21%	97.54%	<b>Percentage</b>	98.75%	98.75%	99.26%									

**M1-263 Psychosocial/developmental Assessment**

679		<b>Number of CSP Encounters</b>	11	34	80									
743		<b>NTBHA Psychological Evaluations</b>	11	37	88									
91.39%	92.40%	<b>Percentage</b>	100.00%	91.89%	90.91%									

**M1-265 Housing Assessment for Individuals with Schizophrenia**

375		<b>Identified individuals with housing outcome/ housing assessment</b>	29	55	91									
437		<b>Identified individuals with verified schizophrenia visits within 12 month period.</b>	31	62	96									
85.81%	87.48%	<b>Percentage</b>	93.55%	88.71%	94.79%									

\*\*With CSP as the denominator



**117<sup>th</sup> US Congress**  
**Currently Active Legislation on Behavioral Health**  
January 28, 2022

*The bills listed in this report are active bills only, in order to make most efficient use of the NTBHA Board's time. Hundreds of bills related to behavioral health have been filed but no further action has been taken on them. Most will lay dormant and die at the end of the session. Behavioral health bills that begin to move through the committee process will be added to the tracking list and chart. A Glossary of Abbreviations may be found on page 13.*

### **HOUSE COMPANION BILLS**

**[HR 433](#)**-Trone (D-MD). Family Support Services for Addiction Act of 2021.

Establishes a grant program for family community organizations that support individuals and families affected by substance use disorder. Passed House on April 15, 2021 and sent to Senate, where it was referred to the Health, Education, Labor and Pensions (HELP) Committee. Companion: **[S 485](#)**-Gillibrand (D-NY) Referred to Senate HELP Committee May 13, 2021.

**[HR 586](#)**-Peters (D-CA). Suicide Training and Awareness Nationally Delivered for Universal Prevention (STAND UP) Act of 2021. Amends Public Health Service Act to direct the Substance Abuse and Mental Health Services Administration (SAMHSA) to add student suicide awareness and prevention training policies that are evidence-based, culturally and linguistically appropriate for grades 6 through 12. Training to be provided annually and must include warning signs of self-harm or suicidal ideation, methods and resources for seeking help. May be delivered via in-person, digital, or train-the-trainer models. Annual report from recipient states or agencies required. HR 586 passed House on May 12, 2021 and sent to Senate HELP Committee. Companions: **[S 1391](#)**-Kennedy (R-LA), **[S 1543](#)**-Hassan (D-NH). A Committee Substitute for S 1543 passed the Senate with amendment and was returned to the House on December 16, 2021.

**[HR 654](#)**-Joyce (R-OH). Drug-Free Communities Pandemic Relief Act. Allows Drug-Free Communities grants to be renewed even if the grantee organization is unable to raise matching funds or in-kind contributions due to conditions related to the COVID-19 public health emergency. HR 654 passed the House, sent to Senate Judiciary Committee October 21, 2021. Companion: **[S 26](#)**-Portman (R-OH). Referred to Senate Judiciary Committee.

**[HR 721](#)**-Napalitano (D-CA). Mental Health for Students Act-2021. Companion: **[S 1841](#)**-Smith (D-MN). Appropriates \$130 million per year for fiscal years 2022 through 2025 for SAMHSA grants to provide comprehensive school-based mental health services to assist children dealing with trauma, grief, bereavement, risk of suicide and violence. HR 721 passed House and was sent to Senate HELP May 13, 2021.

*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](mailto:sconner@ntbha.org) or Janie Metzinger at [jmetzinger@ntbha.org](mailto:jmetzinger@ntbha.org)*



House Companions—continued

[HR 925](#)-Davids (D-KS). Data to Save Moms Act. Authorizes \$10 million for each fiscal year 2022 through 2026 for maternal mortality and morbidity review committees, outreach and community engagement efforts including reviewing deaths and severe maternal morbidity during pregnancy or up to one year after the end of a pregnancy, including deaths or morbidity due to suicide, mental health conditions, overdose or substance use disorder. Reported favorably from House Energy and Commerce Subcommittee on Health to the full E&C Committee on July 15, 2021. Companion: [S 347](#) (Smith (D-MN) sent to Senate HELP.

[HR 1205](#)-Ruiz (D-CA) Improving Mental Health Access in the Emergency Department Act 2021. Authorizes SAMHSA to award grants for innovative approaches for prompt access to appropriate follow-up care for individuals presenting in an emergency department with acute mental health symptoms. Appropriates \$15 million for each fiscal year 2022-2026. Passed House on May 12, 2021 and sent to Senate HELP Committee. Companion: [S. 2157](#) (Capito D-WV) also at Senate HELP as of June 22, 2021.

[HR 1324](#)-Bilirakis (R-FL) Effective Suicide Screening and Assessment in the Emergency Department Act. Establishes a grant program to improve identification, assessment, and treatment of patients in emergency departments who are at risk of suicide. Appropriates \$20 million for fiscal years 2022 through 2026. Up to 40 grants would be awarded to hospitals in geographic areas with suicide rates higher than the national average. HR 1324 passed House May 12, 2021 and was referred to Senate HELP Committee. Companion: [S. 467](#)-Murkowski (R-AK) to Senate HELP.

[HR 1475](#) Watson-Coleman (D-NJ). Pursuing Equity in Mental Health Act. Establishes an Integrated Health Care Demonstration Program.

- Authorizes National Institutes of Health (NIH) and National Institute on Minority Health and Health Disparities (NIMHD) to award grants to Federally Qualified Health Centers (FQHCs) rural health clinics or behavioral health programs serving a high proportion of individuals from racial and ethnic minority groups.
- Directs NIH to contract a study on mental health disparities and submit results to Congress.
- Awards grants to develop health professional educational programs to improve competencies related to mental health disparities. Directs HHS to develop and implement outreach and education strategies to promote behavioral health and reduce stigma among racial and ethnic minority groups.
- Appropriates \$100 million for each fiscal year 2022 through 2026 to NIH and \$650 million for the same period to NIMHD.

HR 1475 passed House and sent to Senate HELP May 13, 2021. Companion: [S 1795](#) Menendez (D-NJ) sent to HELP May 24, 2021.

[HR 2051](#)-Peters (D-CA) and Curtis (R-UT). Methamphetamine Response Act 2021.

Declares methamphetamine as an emerging drug threat for purposes of the National Drug Control Policy Reauthorization Act. Current Status: Favorably reported from House Energy and Commerce July 21, 2021. Companion: [S 854](#)-Feinstein (D-CA) passed Senate Dec. 13, 2021.

## House Companions—continued

[HR 2877](#)-Ferguson (R-GA). Behavioral Intervention Guidelines Act 2021.

Directs HHS to develop best practices for behavioral health crisis intervention in elementary and secondary schools, and institutions of higher education. Passed House May 13, 2021. Sent to Senate HELP May 17, 2021. Companion: [S 1383](#)-Cornyn (R-TX), also at Senate HELP.

[HR 2981](#)-Katko (R-NY). Suicide Prevention Lifeline Improvement Act 2021. Directs HHS to develop and implement a plan to provide high quality service of hotline call centers, crisis centers. HR 2981 passed House on May 12, 2021, and sent to Senate. Companion: [S 2425](#) Reed (D-RI) was favorably referred by Senate HELP and sent to the General Calendar on September 21, 2021.

[HR 3743](#)-Hudson (R-NC). Supporting the Foundation for the National Institutes of Health and the Reagan-Udall Foundation for the Food and Drug Administration Act. Increases funding from “\$500,000 and not more than \$1,250,000” to “\$1,250,000 and not more than \$5,000,000”. Companion: [S 1662](#)-Lujan (D-NM) passed the Senate on June 24, 2021, was sent to the House. HR 3743 passed the House on December 8, 2021 and was sent to the Senate calendar.

[HR 4387](#)-Kelly (D-IL) and Burgess (R-TX). Maternal Health Quality Improvement Act.

- Appropriates \$9 million per year for fiscal years 2022 through 2026 for grants to identify, develop and disseminate best practices to improve maternal health care quality and outcomes and to eliminate preventable maternal mortality and severe maternal morbidity.
- Appropriates \$5 million per year for fiscal years 2022 through 2026 for grants to accredited schools of medicine for training of health care providers on best practices.
- Directs HHS to conduct a study best-practices relating to prenatal, delivery and postpartum care including minority populations and perceptions and biases that may affect care.
- Directs CDC to establish a competitive grant program to establish and support perinatal quality collaboratives that include mental health care. Requires a report to Congress.
- Appropriates \$10 million per fiscal year for 2022 through 2026 to State, Tribal and local agencies, health care providers, and community-based health organizations for integrated services for pregnant and postpartum women including mental health and SUD services.
- Adds preventable maternal mortality and severe maternal morbidity to maternal and obstetric care data collected by the Public Health Service (PHS).
- Appropriates \$3 million per year for each fiscal year 2022 through 2026 for Rural Obstetric Network Grants.
- Appropriates \$5 million per year for fiscal years 2022 through 2026 for Rural Maternal and Obstetric Care Demonstration Grants to include training on maternal mental health, perinatal depression and anxiety, SUD, social determinants of health in rural areas, improving maternal care for racial and ethnic minorities. Requires data collection and a report to Congress.

HR 4387 was favorably reported from the House Energy and Commerce Committee July 21, 2021. Companion: [S 1675](#) (D-GA) was favorably reported from Senate HELP on June 8, 2021.

## SENATE COMPANION BILLS

*The following section entitled “Senate Companion Bills” contains the same information as the section above entitled “House Companion Bills”. Though it is duplicative, it is included to assist the reader in finding Senate bills by number should the need arise. A review of active House bills with no Senate companion begins on page 7. A review of active Senate bills with no House companion begins on page 12.*

[S 26](#)-Portman (R-OH). Drug-Free Communities Pandemic Relief Act. Allows Drug-Free Communities grants to be renewed even if the grantee organization is unable to raise matching funds or in-kind contributions due to conditions related to the COVID-19 public health emergency. Referred to Senate Judiciary Committee. Companion: [HR 654](#)-Joyce (R-OH) passed the House on 10-20-21, sent to Senate Judiciary Committee January 22, 2021.

[S 347](#)-Smith (D-MN). Data to Save Moms Act. Authorizes \$10 million for each fiscal year 2022 through 2026 for maternal mortality and morbidity review committees, outreach and community engagement efforts including reviewing deaths and severe maternal morbidity during pregnancy or up to one year after the end of a pregnancy, including deaths or morbidity due to suicide, mental health conditions, overdose or substance use disorder. S 347 referred to Senate HELP Committee February 22, 2021. Companion: [HR 925](#)-Davids (D-KS). Reported favorably from House Energy and Commerce Subcommittee on Health to the full Committee on July 15, 2021.

[S. 467](#)-Murkowski (R-AK). Effective Suicide Screening and Assessment in the Emergency Department Act 2021. Establishes a grant program to improve identification, assessment, and treatment of patients in emergency departments who are at risk of suicide. Appropriates \$20 million for fiscal years 2022 through 2026. Up to 40 grants would be awarded to hospitals in geographic areas with suicide rates higher than the national average. Referred to Senate HELP February 25, 2021. Companion: [HR 1324](#)-Bilirakis (R-FL) passed House May 12, 2021 and was referred to Senate HELP.

[S 485](#)-Gillibrand (D-NY). Family Support Services for Addiction Act of 2021. Establishes a grant program for family community organizations that support individuals and families affected by substance use disorder. Referred to Senate HELP Committee February 25, 2021. Companion: [HR 433](#)-Trone (D-MD). Passed House on May 12, 2021 and sent to Senate, where it was referred to HELP.

[S 854](#)-Feinstein (D-CA). Methamphetamine Response Act 2021. Declares methamphetamine as an emerging drug threat for purposes of the National Drug Control Policy Reauthorization Act. S 854 passed the Senate December 13, 2021. Companion: [HR 2051](#)-Peters (D-CA) and Curtis (R-UT) was favorably reported from House Energy and Commerce July 21, 2021.

## Senate Companion Bills—continued

[S 1383](#)-Cornyn (R-TX) Behavioral Intervention Guidelines Act 2021. Directs HHS to develop best practices for behavioral health crisis intervention in elementary and secondary schools, and institutions higher of education. Referred to Senate April 27, 2021. Companion: [HR 2877](#)-Ferguson (R-GA). Passed House May 13, 2021 referred to Senate HELP May 17, 2021.

[S 1662](#)-Lujan (D-NM). Supporting the Foundation for the National Institutes of Health and the Reagan-Udall Foundation for the Food and Drug Administration Act. Increases funding from “\$500,000 and not more than \$1,250,000 to “\$1,250,000 and not more than \$5,000,000”. S 1662-Lujan (D-NM) passed the Senate on June 24, 2021, was sent to the House on June 28, where it has been ‘held at the desk’, which will allow earlier action on the floor, bypassing referral to committee for S 1662 when the companion bill HR 3743 is reported to the whole House. Companion: [HR 3743](#)-Hudson (R-NC) passed the House on December 8, 2021 and was sent to the Senate.

[S 1675](#)-Warnock (D-GA). Maternal Health Quality Improvement Act.

- Appropriates \$9 million per year for fiscal years 2022 through 2026 for grants to identify, develop and disseminate best practices to improve maternal health care quality and outcomes and to eliminate preventable maternal mortality and severe maternal morbidity.
- Appropriates \$5 million per year for fiscal years 2022 through 2026 for grants to accredited schools of medicine for training of health care providers in best practices.
- Directs HHS to conduct a study of best practices relating to prenatal, delivery and postpartum care including minority populations and perceptions and biases that may affect care.
- Directs CDC to establish a competitive grant program to establish and support perinatal quality collaboratives that include mental health care. Requires a report to Congress
- Appropriates \$10 million per year for each fiscal year 2022 through 2026 to State, Tribal and local agencies, health care providers, and community-based health organizations for integrated services for pregnant and postpartum women including mental health and SUD services.
- Adds preventable maternal mortality and severe maternal morbidity to maternal and obstetric care data collected by the Public Health Service.
- Appropriates \$3 million per year for each fiscal years 2022-2026 for Rural Obstetric Network Grants.
- Appropriates \$5 million per year for fiscal years 2022 through 2026 for Rural Maternal and Obstetric Care Demonstration Grants to include training on maternal mental health, perinatal depression and anxiety, SUD, social determinants of health in rural areas, improving maternal care for racial and ethnic minorities. Requires data collection and a report to Congress.

S 1675 was favorably reported from Senate HELP Committee on June 8, 2021.

Companion [HR 4387](#) favorably reported from House Energy and Commerce on July 21, 2021.

[S 1795](#) Menendez (D-NJ) Pursuing Equity in Mental Health Act. Establishes an Integrated Health Care Demonstration Program. Authorizes National Institutes of Health (NIH) and National Institute on Minority Health and Health Disparities (NIMHHD) to award grants to Federally Qualified Health Centers (FQHCs) rural health clinics or behavioral health programs serving a high proportion of individuals from racial and ethnic minority groups. Directs NIH to contract a study on mental health disparities and submit results to Congress. Awards grants to develop health professional educational programs to improve competencies related to mental health disparities. Directs HHS to develop and implement outreach and education strategies to promote behavioral health and reduce stigma among racial and ethnic minority groups. Appropriates \$100 million for each fiscal year 2022 through 2026 to NIH and \$650 million for the same period to NIMHHD. S 1795 was referred to HELP May 24, 2021. Companion: [HR 1475](#) Watson-Coleman (D-NJ) passed the House and has been sent to Senate HELP 5-13-21.

[S 1841](#)-Smith (D-MN). Mental Health for Students Act-2021. Appropriates \$130 million per year for fiscal years 2022 through 2025 for SAMHSA grants to provide comprehensive school-based mental health services to assist children dealing with trauma, grief, bereavement, risk of suicide and violence. Grants will be up to \$2 million for each fiscal year for five years. Companion: [HR 721](#)-Napalitano (D-CA) passed House, sent to Senate, referred to Senate HELP.

[S. 2157](#)-(Capito D-WV). Improving Mental Health Access in the Emergency Department Act. Authorizes SAMHSA to award grants for innovative approaches for prompt access to appropriate follow-up care for individuals presenting in an emergency department with acute mental health symptoms. Appropriates \$15 million for each fiscal year 2022-2026. S 2157 referred to Senate HELP. Companion [HR 1205](#)-Ruiz (D-CA) passed House on May 12, 2021, sent to Senate HELP.

[S 2425](#) -Reed (D-RI). Suicide Prevention Lifeline Improvement Act 2021. Directs HHS to develop and implement a plan to provide high quality service of hotline call centers and crisis centers. SR 2425 was favorably referred by Senate HELP and sent to the General Calendar on September 21, 2021. Companion: [HR 2981](#)-Katko (R-NY) passed the House with amendments on May 12, 2021 and was sent to the Senate HELP Committee May 13, 2021.

## HOUSE BILLS WITH NO SENATE COMPANION

[HR 768](#)-McKinley (R-WV) Block, Report, and Suspend Suspicious Shipments Act 2021. Amends Controlled Substances Act recording and maintenance of records requirements regarding due diligence regarding suspicious orders or series of orders. Passed the House, was sent to the Senate Judiciary May 13, 2021.

[HR 1480](#)-Bera (D-CA). Helping Emergency Responders Over Come (HERO) Act. Amends the Public Health Service Act.

- Directs HHS and CDC to develop and maintain a Public Safety Officer Suicide Reporting System to collect data and facilitate the study of successful interventions to reduce suicide among public safety officers and to integrate the system into the National Violent Death Reporting System. Data cannot be used to deny benefits. Report to Congress required two years after date of enactment.
- Authorizes grants for peer-supported behavioral health and wellness programs for fire departments and emergency medical service (EMS) agencies.
- Authorizes grants for behavioral health and wellness programs for health care providers.
- Directs US Fire Administration and HHS to develop resources to educate mental health professionals about fire department and EMS culture, stressors, and challenges encountered by current and retired firefighters and EMS personnel.
- Directs HHS to develop and assemble evidence-based best practices and resources to identify, prevent, and treat posttraumatic stress disorder and co-occurring disorders in public safety officers.

HR 1480 passed the House and was sent to the Senate HELP Committee on May 13, 2021.

[HR 2355](#)-Davis (R-IL). Opioid Prescription Verification Act 2021.

- Amends the SUPPORT for Patients and Communities Act. Authorizes update of training materials for verification of identity of patient and of the person picking up prescriptions.
- Amends grant criteria incentivizing states to facilitate responsible, informed dispensing of controlled substances, giving preference to states that maintain a prescription drug monitoring program, require identification of person picking up prescription, the national drug code, the quantity dispensed, name of patient, and the date filled.

HR 2355 passed the House, sent to Senate HELP December 9, 2021.

[HR 2364](#)-Kim (D-NJ). Synthetic Opioid Danger Awareness Act.

- Directs HHS and CDC to implement a public awareness education campaign regarding synthetic opioids including fentanyl. Requires measures, benchmarks, qualitative assessment and a report to Congress.
- Directs National Institute for Occupational Safety and Health (NIOSH) to develop training for first responders and others at high risk for exposure to synthetic opioids to be distributed to police and fire departments, sheriffs and deputies in city and county jails ambulance personnel, hospital emergency room staff, clinicians and other high-risk occupations.

HR 2364 passed the House and was sent to Senate HELP on December 9, 2021.



## House Bills without Senate Companions—continued

[H.R. 2376](#)-Trone (D-MD). Excellence in the Recovery Housing Act would clarify the role of SAMHSA in promoting high-quality recovery housing, develops guidelines for states, improve coordination of federal activities related to recovery housing, authorizes a study. Would appropriate a total of \$51.5 million over five fiscal years.

Energy and Commerce Committee-Subcommittee on Health hearing April 5, 2022.

[HR 2379](#)-Trone (D-MD). State Opioid Response Grant Authorization Act 2021.

Amends 21<sup>st</sup> Century Cures Act to reauthorize and expand grants.

- Appropriates a \$1.75 billion for each fiscal year 2022 through 2027, with a minimum of \$4 million to each state and the District of Columbia.
- Requires formula adjustments to ensure that no State receives a significantly lower amount than the previous fiscal year.
- Requires a report to Congress to include an analysis mortality rates, outreach, direct support services, underserved communities and statewide treatment and recovery outcomes.

HR 2379 Passed House, sent to Senate HELP October 21, 2021.

[HR 2862](#)-Beyer (D-VA). Campaign to Prevent Suicide Act.

- Appropriates \$10 million for each fiscal year 2022 through 2026.
- Requires HHS to conduct a national suicide prevention media campaign for the purpose of preventing suicide, educating families, friends, and communities, encouraging individuals at risk to seek help, and increasing awareness of suicide prevention resources.
- Requires a report to Congress regarding campaign effectiveness, State and regional variations of capacity to respond to hotline calls, number of unique encounters and whether media campaign contributed to increased engagement individuals at risk for suicide.

HR 2862 passed the House with amendments, sent to Senate HELP May 13, 2022.

[HR 2929](#)- Lee (D-NV). Virtual Peer Support Act. Establishes SAMHSA grants of at least \$1 million each, authorizes \$50 million total to support virtual peer behavioral health support services. Energy and Commerce Committee-Subcommittee on Health hearing April 5, 2022.

[HR 2955](#)-Stewart (R-UT). Suicide Prevention Act.

- Appropriates \$20 million for each fiscal year 2022 through 2026 for a pilot program to expand surveillance of self-harm, in partnership with State and local public health departments.
  - Establishes a grant program to expand surveillance of self-harm. Requires real-time sharing of disaggregated data on suicides, self-harm, and suicidal ideation.
  - Priority is given to States or Indian Tribes with:
    - » Higher than national average rates of age-adjusted non-fatal suicidal behaviors.
    - » Higher than national average rates of emergency department visits.
    - » Communities with high rates of mental illness.
    - » Communities with a shortage of prevention and treatment services.
    - » Social determinants of health deficits.

## House Bills without Senate Companions—continued

### HR 2955—continued

- HHS shall provide technical assistance.
- Appropriates \$30 million for each fiscal year 2022 through 2026 to hospital emergency departments to provide self-harm and suicide prevention services including:
  - Screening for self-harm.
  - Short-term suicide prevention services.
  - Referrals to long-term self-harm and suicide prevention services.
  - Providing follow-up services.
  - Hiring and training of clinical social workers, mental and behavioral health care professionals, and other support staff.
  - Reports to HHS and to Congress required.

HR 2955 passed the House, was sent to the Senate HELP on May 13, 2021.

[HR 3894](#)-Blunt Rochester (D-DE). Collecting and Analyzing Resources Integral and Necessary for Guidance (CARING) for Social Determinants Act 2021. Directs HHS:

- To clarify guidance to states to address social determinants of health in Medicaid and CHIP.
- To provide guidance and technical assistance to states to encourage and incentivize managed care organizations (MCOs) to address social determinants of health.

HR 3894 passed the House, was sent to Senate HELP on December 9, 2021.

[HR 4026](#)-Burgess (R-TX). Social Determinants of Health Data Analysis Act 2021. Requires a report to Congress on actions taken by HHS to address social determinants of health, including data collection, coordination with federal, state, and local agencies, potential for duplication, barriers, and recommendations for fostering public-private partnerships and private sector efforts. HR 4026 passed the House and was referred to Senate HELP on December 1, 2021.

[HR 4233](#)-Murphy (R-NC) Student Veterans Counseling Centers Eligibility Act. Requires report assessing the mental health needs of veterans using veterans' educational benefits. Passed House and was sent to Senate Veterans Affairs Committee November 17, 2021.

[HR 4251](#)-Pallone (D-NJ). Native Behavioral Health Access Improvement Act of 2021. Amends the Indian Health Care Improvement Act and the Patient Protection and Affordable Care Act to establish grants for special behavioral health programs. Energy and Commerce Committee-Subcommittee on Health hearing April 5, 2022.

[HR 5029](#)-Rouzer (R-NC) Expanding the Families of Veterans Access to Mental Health Services Act. Provides counseling and services to families of members of the armed forces or veterans who died of suicide. House Veterans Affairs Committee Reported favorably on November 4, 2021.

[HR 5376](#)-Smith (D-WA)-Build Back Better Act-Broad-ranging appropriations bill. Includes housing assistance programs, health benefits for individuals in non-Medicaid expansion states, and negotiation of drug prices in Medicare. Passed House 220-213 on November 19, 2021.



## House Bills without Senate Companions—continued

[HR 4944](#)-Blunt-Rochester (D-DE). Helping Kids Cope Act. Amends Public Health Service grants to support pediatric behavioral health care integration and coordination. Eligible entities include pediatricians, children’s hospitals, pediatric behavioral health providers. Grants may be used for recruitment and retention, training, expanding evidence-based integrated models of care, addressing surge capacity, service delivery, school-based partnerships, and service coordination. Appropriates \$500 million each fiscal year 2022-2026.

Energy and Commerce Committee-Subcommittee on Health hearing April 5, 2022.

[HR 5218](#)-Fletcher (D-TX) Collaborate in an Orderly and Cohesive Manner-Amends Public Health Service Act to encourage implementation of collaborative care and other innovative care models through grants to primary care physicians or practices, giving priority to areas underserved in terms of medical or behavioral health.

Energy and Commerce Committee-Subcommittee on Health hearing April 5, 2022.

[HR 7073](#)-Clark (D-MA). Into the Light for Maternal Mental Health Act. Reauthorizes and expands Public Health Service Act grants for screening, assessment and treatment services for maternal mental health and substance use disorders. Establishes a Maternal Behavioral Health Hotline. Appropriates a total of \$34 million per fiscal year for 2023 through 2028.

Energy and Commerce Committee-Subcommittee on Health hearing April 5, 2022.

[HR 7076](#)-Schrier (D-WA). Supporting Children’s Mental Health Care Access of 2022. Reauthorizes pediatric mental health care access grant programs to support statewide or regional networks of pediatric mental health teams, and may be used in schools or emergency departments. Appropriates \$14 million per fiscal years 2023 through 2025, and \$30 million for fiscal years 2026 through 2027 for pediatric mental health care and \$50 million per fiscal years 2023 through 2027 for infant and early childhood mental health promotion, intervention and treatment.

Energy and Commerce Committee-Subcommittee on Health hearing April 5, 2022.

[HR 7232](#)-Cárdenas (D-CA) 9-8-8 and Parity Assistance Act of 2022.

- Amends the Public Health Service Act to direct SAMHSA to establish an office to coordinate behavioral health crisis care across federal departments of Health and Human Services, Centers for Medicare and Medicaid Services and the Health Resources and Services Administration to include services provided by the National Suicide Prevention and Mental Health Crisis Hotline and Response System, community mental health centers, certified community behavioral health clinics and other community mental health and substance use disorder providers.
- Authorizes \$10 million per fiscal year 2023 through 2027 for the above purposes, \$1 billion for capital grants for health centers, and \$15 million for crisis management workforce.
- Defines minimum components of a crisis response continuum as including crisis call centers, mobile crisis response teams, and crisis receiving and stabilization facilities (including 24-hour stabilization services and short-term residential services), mental health and substance use urgent care facilities, and other facilities or providers that the Secretary of HHS shall specify.

House Bills without Senate Companions—continued

HR 7232—continued

- Amends the Public Health Service Act and the Patient Protection Affordable Care Act to authorize grants to states to implement mental health and substance use disorder parity and authorizes \$25 million for that purpose.

Energy and Commerce Committee-Subcommittee on Health hearing April 5, 2022.

[HR 7233](#)-Hudson (R-NC) Keeping Incarceration Discharges Streamlined for Children and Accommodating Resources in Education Act (KIDS CARES Act). Amends the Social Security Act related to Medicaid screenings and referrals for juveniles being released from public institutions. Directs the Secretary of HHS to issue guidance on reducing administrative barriers to school-based services.

Energy and Commerce Committee-Subcommittee on Health hearing April 5, 2022.

[HR 7234](#)-Spanberger (D-VA) Summer Barrow Prevention, Treatment, and Recovery Act.

- Reauthorizes Public Health Services grants benefiting people who are homeless needing behavioral health services. Appropriates \$218.2 million per fiscal year s 2023 through 2027.
- Prioritizes programs addressing underage drinking, substance use treatment needs of regional and national significance, evidence-based treatments and interventions, prevention, jail diversion, transitions from homelessness, reducing overdose deaths, access to overdose reversal medication, comprehensive opioid abuse response, and changes the emergency department alternatives to opioids demonstration projects to a grant program.

Energy and Commerce Committee-Subcommittee on Health hearing April 5, 2022.

[HR 7235](#)-Tonko (D-NY) Substance Use Prevention, Treatment, and Recovery Services Block Grant Act of 2022. Amends Public Health Service Act to change language from “substance abuse” to “substance use”. Appropriates \$1.9 billion for each fiscal year 2023 through 2027.

Energy and Commerce Committee-Subcommittee on Health hearing April 5, 2022.

[HR 7236](#)-Eshoo (D-CA) Strengthen Kids’ Mental Health Now Act of 2022.

- Amends Social Security Act to expand Children’s Medicaid mental, emotional, and behavioral health services including payment parity for pediatric behavioral health services, and providing timely access to care.
- Directs HHS to issue guidance to sustain and enhance availability of telehealth services.
- Establishes grant programs pediatric behavioral health workforce training programs.
- Establishes grant programs to modernize infrastructure for pediatric behavioral health services.

Energy and Commerce Committee-Subcommittee on Health hearing April 5, 2022.

[HR 7237](#)-Griffith (R-VA) Reauthorizing Evidence-based and Crisis Help Initiatives Needed to Generate Improved Mental Health Outcomes for Patients Act of 2022 or the REACHING Improved Mental Health Outcomes for Patients Act of 2022. Reauthorizes:

- National Mental Health and Substance Use Policy Laboratory.
- Community Crisis Response System.

House Bills without Senate Companions—continued  
HR 7237—continued

- Mental Health Awareness Training.
  - Adult Suicide Prevention.
  - Assertive Community Treatment Grant Program.
  - Assisted Outpatient Treatment Grant Program for Individuals with Serious Mental Illness.
- Energy and Commerce Committee-Subcommittee on Health hearing April 5, 2022.

[HR 7238](#)-Bucshon (R-IN) Timely Treatment for Opioid Use Disorders Act of 2022. Revises opioid treatment program admission criteria to eliminate the requirement that patients have been addicted for at least one year prior to being admitted to treatment.  
Energy and Commerce Committee-Subcommittee on Health hearing April 5, 2022.

[HR 7241](#)-Crenshaw (R-TX) Community Mental Health Services Block Grant Reauthorization Act. Appropriates \$857.5 billion for each fiscal year 2023 through 2027 for evidence-based crisis care. Allows states flexibility in spending five percent in one year or ten percent over two years.

[HR 7248](#)-Joyce (R-PA) Continuing Systems of Care for Children Act. Reauthorizes Continuing Systems of Care for Children grants. Increases funding to \$125 million for each fiscal year 2023 through 2027. Energy and Commerce Committee-Subcommittee on Health hearing April 5, 2022.

[HR 7255](#)-(Rodgers) Garrett Lee Smith Memorial Reauthorization Act.

- Reauthorizes funding for Suicide Prevention Resource Center. Increases funding to \$9 million for each fiscal year 2023 through 2027.
  - Reauthorizes Garret Lee Smith Campus Suicide Prevention Program.
  - Reauthorizes Mental and Behavioral Health Outreach and Education.
- Energy and Commerce Committee-Subcommittee on Health hearing April 5, 2022.

### SENATE BILLS WITH NO HOUSE COMPANION

[S 1296 Brown](#) (D-OH). Daniel J. Harvey and Adam Lambert Improving Servicemember Transitions to Reduce Veteran Suicide. Would establish a pilot program aimed at reducing suicide among veterans, to include a three-hour training module in the Transition Assistance Program on risks after discharge for the Armed Forces, resources and treatment options, follow-up contact within 90 days of discharge, Pilot should be in not fewer than 10 locations and serve not fewer than 300 members of the Armed Forces. Report required after one year. Senate Veterans Affairs Committee hearing on November 17, 2021.

## GLOSSARY OF ABBREVIATIONS

CDC—Centers for Disease Control

CMS—Centers for Medicare and Medicaid Services

E&C—House Energy and Commerce Committee

FMAP—Federal Medical Assistance Percentage

FQHC—Federally Qualified Health Center

HELP—Senate Health, Education, Labor and Pensions Committee

HHS—Health and Human Services

HRSA—Health Resources and Services Administration

MAT—Medication Assisted Treatment

MCO—Managed Care Organization

NIH—National Institutes of Health

NIMH—National Institute of Mental Health

NIMHD—National Institute on Minority Health and Health Disparities

NIOSH—National Institute for Occupational Safety and Health

ONDCP—Office of National Drug Policy

ODU—Opioid Use Disorder

PHS—Public Health Service

RHC—Rural Health Center

SAMHSA—Substance Abuse and Mental Health Services Administration

SUD—Substance Use Disorder

USDA—U.S. Department of Agriculture



## Department of Criminal Justice FY2022 SAMHSA Grant Project

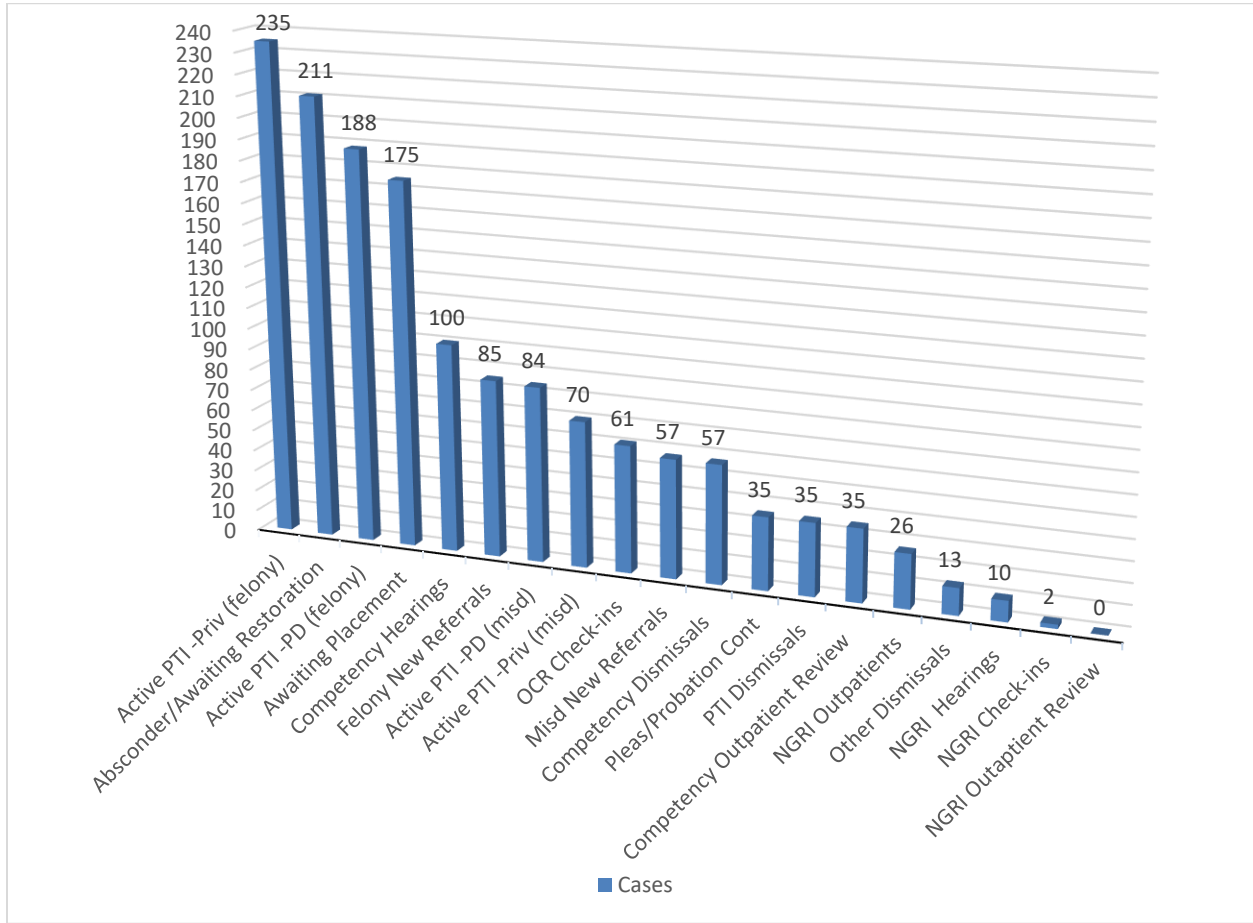
	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June	July	Aug	Sept	FY2022 Total	FY2021 Total	FY2020 Total	FY2019 Total
<b>Nexus</b> New Admissions	1	3	1	1	0	1	0						7	23	26	25
<b>Nexus</b> Average Days in Jail from Referral to Admission	17	24	24	20	20	8	8						18	12	12	8
<b>Homeward Bound</b> New Admissions	1	1	1	0	1	1	1						6	14	24	11
<b>Homeward Bound</b> Average Days in Jail from Referral to Admission	119	92	90	90	93	102	113						99	92	79	7
<b>RESIDENTIAL TREATMENT DISCHARGES</b>																
<b>Successful</b>	0	1	1	2	4	1	2						11	22	43	27
<b>Unsuccessful</b>	1	0	1	0	1	1	0						4	7	11	3
<b>REFERRING SPECIALTY COURTS FY2022</b>																
<b>Number of Referrals by Specialty Courts</b>		AIM		5			DWI		0			STAR		3		
		ATLAS		3			IIP		0			Veterans		0		
		Competency		7			Legacy Family		0			4-C		0		
		DDC		0			MHJD/SET		4							
		DIVERT		0			STAC		17							

\*Homeward Bound Pending Admission: 8

\*Nexus Pending Admission: 0

# DISTRICT ATTORNEY'S OFFICE - RESTORATIVE JUSTICE DIVISION UPDATE

## DA Criminal Mental Health Division April 2022 Stats:



## DA Civil Division, Mental Illness Court April 2022 Stats:

1. **Civil Commitments** (Court Order for Inpatient Temporary Mental Health Services)
  - a. April 2022: 33
  - b. Year to date: 128
2. **Medication Hearings** (Court Order to Administer Psychoactive Medications, while receiving inpatient mental health services)
  - a. April 2022: 29
  - b. Year to date: 123
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. April 2022: 5
  - b. Year to date: 11

## Monthly Stats Registered Pre-Trial Specialty Courts - April

COURT	# Referrals	# Accepted	# Graduates	# Fail	Total Caseload #
DIVERT	13	10	2	0	78

COURT	# Referrals	# Accepted	# Graduates	# Fail	Total Caseload #
AIM	5	7	2	2	43

COURT	# Referrals	# Accepted	# Graduates	# Fail	Total Caseload #
SET	4	7	0	1	18

COURT	# Referrals	# Accepted	# Graduates	# Fail	Total Caseload #
MHJD	6	0	2	1	13

COURT	# Referrals	# Accepted	# Graduates	# Fail	Total Caseload #
VETERANS	TBD	TBD	TBD	TBD	TBD

### DA Pre-Trial Intervention (PTI's):

Program	# Pending Referrals	# Accepted	# Graduates	# Fail	Total Caseload #
General PTIs	8	6	2	1	45
Prost PTIs (Misd)	7	6	2	0	7
STAR PTIs (Fel)	0	0	0	0	0

### Volunteer Hours Specialty Court ADAs – April

Specialty Court	Prosecutor	Month	Staffing Hrs	Court Hrs	Outside Hrs	Total Hrs
ATLAS	Aja Reed	Apr	1.5	1.5	3	6
DDC	Jamie Young	Apr	3	2	3	8
FEL DWI	Hilary Wright	Apr	2	2	5.25	9.25
MISD DWI	Herschel Woods	Apr	2	2	1	5
STAR Post	Jennifer Kachel	Apr	.75	2.5	1	4.25
Prost PTIs	Felicia Kerney	Apr	6	3	5	14
DV	Searcey/Corwin	Apr	/1	/2	/0	/3
VETERANS	Geoff Keller	Apr	TBD	TBD	TBD	TBD
STAC (Mays)	Novak	Apr	2.5	1.5	1	5
Total		Apr	18.25	16.5	19.5	54.5



**FUSE DATA FY 2021-2022  
12 MONTH**

<b>Category Item</b>	<b>Jul</b>	<b>Aug</b>	<b>Sep</b>	<b>Oct</b>	<b>Nov</b>	<b>Dec</b>	<b>Jan</b>	<b>Feb</b>	<b>Mar</b>	<b>Apr</b>	<b>May</b>	<b>Jun</b>
<b>Total Clients Triaged for FUSE</b>	375	340	356	289	278	292	302	295	381	372		
<b>Referral Source</b>												
Jail FUSE Navigator Triage	326	309	321	254	243	267	269	275	341	336		
NTBHA Living Room Referral	8	4	6	0	0	0	3	2	5	2		
Defense Attorney Referral	11	12	15	7	7	10	6	5	3	3		
Shelter/Street FUSE Navigator Referral	15	3	1	15	9	5	12	8	20	18		
Other Referral Source	11	7	9	9	14	7	6	0	7	8		
Pretrial Referral	4	5	4	4	5	3	6	5	5	5		
<b>Client Triage/Referral Outcomes</b>												
Released to Another Program or Agency	9	16	11	8	8	6	5	9	6	11		
Referral Banned from Shelter	0	0	0	0	0	1	0	0	0	0		
Client Refused to be interviewed or Participate or Interview attempt	14	10	7	3	3	10	6	3	2	7		
Client didn't qualify for FUSE	108	89	127	105	128	104	116	28	134	115		
Immigration Hold	0	1	0	2	1	2	4	2	0	3		
Client report not being Homeless	10	11	4	3	2	4	10	5	3	1		
Released (i.e. Posted Bond)	88	72	58	35	32	36	31	136	90	75		
Referred by Shelters/Street Outreach	14	5	0	7	2	2	3	6	20	18		
FUSE bond denied	2	2	1	2	0	0	5	0	0	4		
<b>Pending Client Referrals</b>												
Waiting on info, Waiting on Bond to Post, and pending attorney response	106	115	123	95	87	99	108	95	110	124		
In Quarantine/Medical/Interview Pending	6	2	7	4	3	7	0	0	0	0		
<b>Shelter Assignment</b>												
<b>Total Released from Jail to FUSE</b>	18	17	18	23	12	21	14	11	16	14		
Austin Street Center	3	7	5	4	3	8	8	6	5	5		
The Bridge	11	6	3	12	4	7	3	4	5	4		
Salvation Army	4	4	7	7	5	6	0	1	6	5		
Qualified Referred by Shelters/Street Outreach	8	0	0	2	0	3	3	1	6	10		
Other	0	1	3	0	0	0	0	0	0	0		
No Response	0	0	0	0	0	0	0	0	0	0		
<b>Shelter Connection Rate</b>												
Austin Street Center	1	2	2	3	0	4	8	2	1	2		
The Bridge	4	5	1	2	1	4	3	2	3	1		
Salvation Army	4	3	2	6	4	5	0	1	3	1		
Other	0	0	1	1	0	3	0	1	0	4		
No Response	0	0	0	0	0	0	0	0	0	0		
Client Abscond/Did Not Connect	9	7	12	12	7	8	2	6	9	6		
<b>Housed</b>	2	0	1	1	5	0	0	0	0	0		
<b>Housing Priority List or Info sent to MDHA</b>	1	6	3	5	0	8	5	3	3	2		

**Dallas County Behavioral Health Leadership Team (BHLT)  
Adult Clinical Operations Team (ACOT) Committee Meeting  
April 7, 2022**

Charlene Randolph (Dallas County), Yordanos Melake (Dallas County), Amy Cunningham (NTBHA), Janie Metzinger (NTBHA), Robert Johnson (NTBHA), Anthony Garcia (NTBHA), Allison Mintus (Metrocare Services), Michelle Garcia (Metrocare), Jacob Twombly, Jessica Simmons (IPS), Andy Wolfskill, Jarrod Gilstrap (Dallas Fire & Rescue), Jennifer Torres (Metrocare), Sabrina Conner (NTBHA), Alyssa Aldrich (Adapt), David Kemp, Eric McCarty (NTBHA), Tzegabrhan Kidane (Dallas County)

**Welcome and Introductions: Charlene Randolph**

- Meeting notes from the March 3, 2022 meeting were reviewed and approved

**Presentation: TANF Housing and Emergency Assistance Funds**

**Eric McCarty , Housing Resource Director (NTBHA)**

- Background: The TANF Pandemic Emergency Assistance Funding opportunity is made available by the Texas Health and Human Services Commission. The total amount of this contract is not to exceed \$1,461,894. Funds will be available until September 30, 2022. Financial assistance and services must be used for short term stabilization efforts not to exceed 4 months.
- Purpose of this funding is to address housing and ancillary needs of needy families in which dependent children have or reside with a family member who has:
  - A diagnoses of a mental health condition
  - Intellectual or Developmental disability (IDD), and/or
  - Substance use disorder and
  - Have been impacted by the COVID 19 Pandemic
- Target and Eligible Populations include:
  - Residents of Texas
  - US Citizens, Legal Aliens, or qualified aliens who are unemployed, underemployed, or otherwise determined by the Grantee to be needy
- Have one or more dependent children under 18 years of age and either:
  - The individual or dependent child have a clinical diagnoses of a mental health condition, intellectual or developmental disability or
  - Substance use disorder and
  - Have been affected by the pandemic in meeting their basic needs
- Allowable expenses:
  - Rental Housing support services: rent, utility assistance, security deposit assistance
  - Housing modifications- to make home more accessible and safe
  - Emergency housing and hotel vouchers: provide direct financial assistance for short term emergency housing (4 months)

- Ancillary Expenses: Provide financial assistance for short term basic needs such as purchasing; diapers, clothing, burial assistance, emergency assistance for other personal care items
- Funds limited per household:
  - No more than \$7,000 per family of 2-3 individuals
  - No more than \$10, 000 for families of 4 or more individuals
  - No longer than 4 months of assistance
- Services/Expenses NOT allowed
  - Tax Credits, childcare, transportation, short term education, training services.
- For further questions please email Eric McCarty -- Housing@ntbha.org

### **NTBHA Diversity Equity & Inclusion (DEI) & Multicultural Competency Training Update:**

- Sabrina Conner (NTBHA): Aprils DEI virtual training topic is the BIPOC LGBTQI in clinical settings to start 4/8/2022 at 9:00, next opportunity for training with Dr Gloria Marrow will be 4/22/2022.
- NTBHA DEI is also starting recruitment for DEI Advisory Council.
- Amy Cunningham (NTBHA): States she is optimistic about being able to resume the 3 day in person training. Dates will be sent out in the next few months.

### **Trauma Informed Care (TIC):**

- Robert Johnson (NTBHA): Robert reports that the 13 month Trauma Informed Resilience Oriented Approaches Learning Community that started last March and has ended in April. NTBHA has just received the results on the post survey and they are currently reviewing results. Over the past year, NTBHA has taken an in depth look at where they stand as it relates to trauma informed care, the plan is to create a guide as a resource to the community, tentatively called the NTBHA Trauma Informed Guide.
- A new check list will also be created and provided to the community that will help organizations take a look at where they are in the Trauma Informed Care process in an effort to improve.

### **Legislative Coordinator, North Texas Behavioral Health Authority**

- Janie Metzinger (NTBHA): Next biennium will look at building additional state hospital beds in the Panhandle and replacing the Wichita Falls facility. There is also a plan to replace bed for bed in Terrell State Hospital that would expand capacity. In corrections they are looking at provision of services in county jails, and this would be a joint charge with the County Affairs Committee. Criminal Jurisprudence is looking at Victim Services, in particularly the availability of trauma informed care and community-based services in areas that are high crime areas.

### **NTBHA & Community Updates:**

- Anthony Garcia (NTBHA) - Compliance and QM: Continuing with provider audits to specialty programs. NTBHA is also continuing with mystery calls and death review meetings, to ensure that incidents and complaints are taken care of.

- Michelle Garcia- the NTBHA satisfaction survey project is currently underway. They were recently deployed to their first provider location at APAA. The survey's overall goal is to measure the quality of services provided to consumers and consumer satisfaction
- The project will expand over 3 months, looking at about 45 providers.
- Any questions please email Anthony Garcia or Michelle Garcia.

Meeting was adjourned at 12:44pm

**May 12, 2022**

**BHLT COMMITTEE  
MEETING**

**SUPPLEMENTAL PACKET**

HARRY INGRAM		FY2022 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
April	44	1	45	0	0	0	0	4	0	0	0	4	41	19	0	0	19

HARRY INGRAM		FY2022 MISDEMEANOR DIVERT MENTAL HEALTH COURT STATS											CCCAP1/WAEE				
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***			
April	18	0	1	19	0	0	2	1	2	5	14	14	1	14			

HARRY INGRAM		FY2022 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
April	38	9	47	0	0	0	0	0	0	0	7	7	40	19	0	0	19

April		FY2022 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	281	34	315	0	9	7	0	3	6	2	0	11	38		
L. Strather			0										0		

April		FY2022 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	187	10	0	0	0	6	1	4	0	5	2	0	0	0	7	17
R. Scott	25	5	0	0	0	0	0	0	0	5	0	0	0	0	0	0

RANDALL SCOTT		FY2022 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
April	171	43	0	0	0	0	0	53	0	22	0	2	0	0	0	15

April		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 HICKORY TRAILS	NEW CLIENTS AT METHUEN DIST RICHARDSON	NEW CLIENTS AT DALLAS PRESBYTERIAN	NEW CLIENTS AT VA	NEW CLIENTS AT WELLBRI DGE	NEW CLIENTS AT GLEN OAKS	NEW CLIENTS AT TEXOMA	NEW CLIENTS AT PERIMETER BEHAVIORAL HEALTHCARE	NEW CLIENTS AT THR ARLINGTON	MR/MILLWOOD/HAVEN	PROBABLE CAUSE HEARINGS HELD	NO CONTEST COMMIT	CONTESTED COMMIT	FORCED MEDS HEARING IN COURT	MODIFICATION HEARINGS	OUTPATIENT COMMIT	INPATIENT COMMIT
L. Roberts	81	12	0	26	0	0	0	0	0	0	0	0	0	34	1	8	0	0	5	0	14	16	0	0	0
C. Cox	119	0	0	0	99	0	0	7	0	0	13	0	0	0	0	0	0	0	3	0	13	8	1	0	0
K. Nelson	140	0	0	0	0	44	0	0	79	0	0	17	0	0	0	0	0	0	1	0	9	8	0	0	0
R. Black	80	0	46	0	0	0	0	0	0	19	0	0	15	0	0	0	0	0	4	0	7	7	0	0	0

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
April	1922	206	48	35	83	78	53	35	18	25	20	5