

Dallas County Behavioral Health Leadership Team
Thursday, October 13, 2022
9:30am -11:00am
In-Person & Virtual Meetings via Microsoft Teams

- I. Welcome and Call to Order
 - Review/Approval of September 8, 2022, Meeting Minutes
- II. Introductions
- III. North Texas Behavioral Health Authority (NTBHA) Update
- IV. Meadows Mental Health Policy Institute (MMHPI) Update
- V. Dallas County Behavioral Health Housing Workgroup Update
- VI. 1115 Waiver Crisis Services Project Update
- VII. Legislative Update
- VIII. 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)
- IX. Upcoming Events and Notifications
- X. Public Comments
- XI. 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, August 11, 2022
<https://www.dallascounty.org/departments/criminal-justice/bhlt/>

Welcome and Call to Order

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

Introductions

Commissioner Price welcomed everyone to the meeting and asked first-time attendees to introduce themselves.

- Mr. Haynes with Community Courts was a new attendee.

North Texas Behavioral Health Authority (NTBHA) Update

Carol Lucky, CEO at North Texas Behavioral Health Authority, provided the NTBHA update. Ms. Lucky reported that the Board would meet September 14th, stating that all contracts had not been approved at that time. She reported that their budget started on September 1, 2022, and they were still receiving state contracts with some specialty contracts still in their renewal period, while moving into the second year with level funding. She stated that the total budget was about \$110 million, with about \$90 million going to mental health and about \$20 million for substance use disorder.

Ms. Lucky reported that they were considering renewing their contracts at level funding for the coming year and offering opportunities for individuals to renegotiate on request, mentioning that COVID-19 has distorted their outcomes.

- Commissioner Price asked with regards to the population growth and level funding at \$110 million, would NTBHA be able to continue to service the growing population, given that is there no consideration at the state level with the growth occurring in the region.

Ms. Lucky stated that issue would be addressed during the legislative session, but being in the second year of biennium, she did not anticipate any funding coming at that time and had not heard of any opportunities. Ms. lucky mentioned that the state funding dollars is about \$1400 per person per year based on numbers from a couple of years ago

in comparison to Harris County which is about \$6000 per person. She further reported that during that time, there was a focus on children. There was a Multi-Systemic Therapy grant awarded by the state for \$675,000. Multi-Systemic Therapy is evidence based, very intensive out-patient therapy for youth, particularly those involved in the justice system.

- Dr. Walter Taylor introduced Kayla Rabb, as a new member of the NTBHA team. She has master's degree in Development Trauma and will assist with strategic targeted outreach and direct care of youth.

Meadows Mental Health Policy Institute (MMHPI)

Mr. Ron Stretcher, Senior Director of Systems Management with MMHPI, was not present to provide a report.

Dallas County Behavioral Health Housing Workgroup

Commissioner Dr. Theresa Daniel was not present to provide a report.

1115 Waiver Crisis Services Project Update

Laura Edmonds, Assistant Director, Criminal Justice Department provided the update stating that the next 16.22 CCP Monthly Advisory Committee meeting was scheduled for September 15, 2022, at 2:00pm. Mrs. Edmonds stated that the Harris Logic and Adapt contracts were approved in Commissioners Court on Tuesday. She noted that Adapt had started the hiring process in anticipation of the program start date and that the final approved form for the Magistrate order for 16.22 was received. Lastly, she reported that IT was working with Harris Logic on the final workflow process of automating the process.

Legislative Update

Janie Metzinger, Legislative Coordinator at NTBHA, provided the update stating, with provider shortages increasing, Telehealth had become an important tool in mental health for West Texas and rural areas. These shortages were causing increased healthcare costs with possible increased rates for providers.

- Carol Lucky stated that Telehealth helps in locating a provider for those in rural areas and areas without a hotspot.

Funding Opportunities

•The Cottages Update

Charlene Randolph, Director of Dallas County Criminal Justice Department, provided the update stating that the August census began with 44, with 1 eviction and 1 death, which ended the census at 42. The Cottages reported that nine residents attended Life Skills training, with 41 receiving case management.

●SAMHSA Residential Treatment Grant Update

Deborah Hill, Assistant Director with Dallas County Criminal Justice Department, provided the update, stating that the current grant year would conclude on September 29, 2022, with the fifth and final grant beginning September 30, 2022. All contracts except for one had been executed, with the final one being executed the later part of September. Ms. Hill stated that a SAMHSA grant official reached out concerning the recent flooding in Dallas, as well as the project director who reached out and provided resource materials for the partners. Referrals were still being accepted. Treatment admissions were still being impacted by COVID-19 with no admissions for treatment during the month of August. She noted that with a total of 19 served, the targeted number of 40 served will not be met for the grant year. The quarterly partners meeting was scheduled for later in September and there were plans to re-apply for funding when the application dates open.

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

Vickie Rice, Supervisor with the Dallas County Public Defender's Office provided the update reporting that Community Courts were moving along at a great pace as they continued to serve. Ms. Rice stated that she had asked Judge Collins, currently presiding judge over Veterans Court to appear to answer questions regarding the courts role with the veterans served in Dallas County as well as how their behavioral health needs were being met.

- Commissioner Price, concerned with collaboration efforts and numbers served, asked what the reach of the Community Courts within the Veterans Court and the Veterans Program was.

Ms. Rice responded that the Veterans Court covers misdemeanors and felonies, while partnering and collaborating with the city courts on issues outside of the misdemeanor felony range that can't be agreed upon through PTI.

- Commissioner Price asked Ms. Rice to coordinate with the necessary partner groups to gather data on the numbers concerning the veterans being served, to coordinate and leverage these programs in a way that benefits the constituents.

***** Quorum Observed**

Upon the arrival of Commissioner Dr. Theresa Daniel, Commissioner Price paused to observe the presence of the quorum of the Commissioner's court, 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 opening 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.

Review/Approval of Minutes

The minutes of the BHLT meeting held on Thursday, August 11, 2022, were included in the meeting packet. Commissioner Price offered an opportunity for the minutes to be reviewed or approved. The minutes were approved as submitted.

● **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, reporting that the stats were on the last two pages of the packet. She reported that there was a new QR code created and on the website that would be pushed out to all the defense attorneys on their defense portal, which explains the whole pretrial diversion referral process with access to all the forms. Ms. Turnbull provided a brief update on the Deflection Center, noting that officers from the South-Central Division, Dart, and the Hospital District had been trained and they have launched training with the other six other divisions of DPD that was either completed or in the process of being completed. She deferred to Doug Denton for further updates.

- Doug Denton, Executive Director of Homeward Bound, Inc. reported that they were moving around the various TPD divisions providing training. They were scheduled to train the cooperative law enforcement agencies mental health response groups based in the Cedar Hill, Duncanville corridor. Mr. Denton stated that the beta form was in the supplemental packet. Mr. Denton reported that there were two admissions in August that were successfully placed, with one being from the South-Central Division and one from Central Division. One was placed with the NTBHA Living Room, and one was moved into a boarding home. There were recovery support services funding that assisted in those processes.

Mr. Denton further reported that there were already two referrals for the month of September. He reported that he had several meetings with the City of Dallas Marshals Office, and they were developing a homeless action response team to determine how they can interact with the Reflection Center and with the Community Courts in getting tickets dismissed. The Southeast sector is on the calendar for upcoming training.

Upcoming Events and Notifications

- Commissioner Price reminded of “*The Big Texas Rally for Recovery*” occurring on September 17th from 11:00AM until 3:00PM at The Sound at Cypress Waters, 3111 Olympus Blvd, Dallas, TX.
- Sima Ladjevardian, Regional Director of HHS/IEA, expressed that as we enter National Recovery Month and Suicide Prevention Awareness Month, the data was in and as all anticipated, the COVID-19 pandemic had been experienced with hardships among those with substance use disorders, further exacerbating mental health challenges; adding that the overdose crisis is national, but the impact is personal.

Mrs. Ladjevardian further stated that they had established an overdose prevention strategy centered around four principles: (1) equity data and evidence, (2) coordination, (3) collaboration and integration, and (4) reducing the stigma. Their strategic priorities were: (a) Primary Prevention, which focuses on root causes and key predictors of substance use. (b) Substance Use Disorder, and how to manage pain safely and effectively. (c) Harm Reduction, which focuses on reducing risk associated with substance use, including overdose and infectious disease transmission. (d) Evidence Based Treatment, which focuses on providing the most effective evidence-based treatment without delay, stigma,

or other barriers, and (e) Recovery Support, which focuses on funding, reimbursing training of workforces, and developing protocols around peer employment and housing supports.

Mrs. Ladjevardian stated that during International Overdose Awareness dates, \$79.1 million in overdose prevention grants as well as \$40.22 million in youth mental health grants were awarded, congratulating the many recipients in the Dallas County area who received grants.

Through the American Rescue Plan, the Biden-Harris administration has invested over \$5 billion in funding through the HHS to expand access to mental health and substance use services. Understanding that more is always needed, the President's fiscal year 2023 budget proposes for HHS to include historic mandatory investment totaling to about \$51.7 billion over a 10-year period to improve behavioral health. This also will include a historic investment of \$697 million in the 988 Suicide and Crisis Lifeline service and behavioral health services, which will expand access to crisis care services for people with suicidal ideations or experiencing any kind of behavioral health crisis. Additionally, the rollout of the 988-suicide prevention line is another step in the right direction to offer support and help during those dark periods where the person on the other end of the phone can save a life. She thanked the commissioners and everyone who works to support this effort.

- Commissioner Price requested specific information on the amounts of funding awarded to Dallas County.

Mrs. Ladjevardian stated that Veronica Moore, the Regional Outreach Specialist, will follow up with the requested information.

- Janie Metzinger announced that Rep. Rose is hosting the Sixth Annual African American Leadership Institute Fall Summit on Saturday.
- Commissioner Price announced and welcomed the University of Texas Southwestern Medical School which will open 150,000 square foot footprint in Reimagine Red Bird, mentioning that he has met with DART to reestablish routes and stops in front of the hospitals/clinics.
- Judge Harlan thanked everyone who attended the graduation of 45 individuals that came into recovery.

Public Comments

There were no public comments.

Adjournment

Commissioner John Wiley Price thanked everyone, then entertained a motion to adjourn. The motion was made and seconded. Commissioner Price then adjourned the meeting.

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, Dallas County Commissioner; Janie Metzinger, NTBHA; Charlene Randolph, DCCJ; Laura Edmonds, DCCJ; Deborah Hill, DCCJ; Lisa Marshall, City Citizen Homeless Commission; Doug Denton, Homeward Bound; Dave Hogan, Homeward Bound; Jim Mattingly, LumaCorp; Thomas Lewis, Dallas County HHS; Keri Stitt, Youth180; Ikenna Mogbo, Metrocare; Tradswell Livingston III, AIDS Services of Dallas; Aaron White, I.T.; Trey Wisley, I.T.; Sarah Craig, MDHA; Erin Moore, Dallas County; Erica McDaniel, Dallas County; Tzegabrhan 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:

The Dallas Area Partnership meeting was held September 1, 2022, which was a review of what is in process. There is a large piece of property off I-20 near JJ Lemon that was purchased to build a combination of tiny homes, townhomes, and single-family lease to own. This area consists of both cities of Dallas and Lancaster with schools nearby and a bus route. All other projects are in various stages of development and continue to move forward. We will continue to report on the efforts of their progress to build more affordable housing in Dallas County.

Dallas County Homeless Advisory Committee:

There was discussion in the last meeting on setting up a project for an evaluation to determine what it cost to support homelessness in Dallas County. The evaluation for this project will include but is not limited to jail, housing, service providers, medical care, etc. Reports of this project will be updated as new developments become available.

Federal and State Legislative Update: Janie Metzinger, NTBHA

The report was provided to the group in the meeting packet. Janie Metzinger noted a hearing held with the public health committee on the effects of fentanyl. Some of the testimony in terms of recommendations put forward were for voluntary certification of recovery housing also known as a sober home. This has been mentioned before in previous legislation, so efforts continue to move this proposal forward. There was also another proposal to allow Medicaid reimbursement for peer services, ages 18-21 with a focus on those transitioning out of foster care.

Housing Initiatives: Ikenna Mogbo, Metrocare

Ikenna Mogbo, Metrocare reported no new updates at this time.

RESOURCES

Shelter Discussions: Sarah Masih, Salvation Army

The report will be available at the next meeting. However, there was mention of Austin Street Shelter which has opened a new 300 bed facility that houses 100 women and 200 men. The facility is located across from the old building and is currently full with no beds available at this time.

NTBHA: Eric McCarty

Eric McCarty provided a report that was given by Janie Metzinger, NTBHA. Funding for TANF is available until September 30, 2022; \$1,230,500 has been provided to assist qualified individuals with rental and utility assistance through this contract. COVID funds have been distributed with \$1,305,400 provided and funds will be available through the end of March 2023. TBRA funds for Dallas County have provided \$400,337 with an open contract with \$3,374.66 available. TBRA general has an open contract with \$6.9 million available for Ellis, Hunt, Kaufman, Navarro and Rockwall Counties. Housing funds are available to assist in helping qualified individuals totaling approximately \$2,536,475. Further information can be found on their website: NTBHA.org; click services tab.

Housing Navigator: Kimberly Rawls, Dallas County

The report was provided to the group in the meeting packet. However, Laura Edmonds, Dallas County, highlighted that they are working to fill 3 vacancies at the St. Jude's project on Forest Lane.

Homeless Jail Dashboard: Kimberly Rawls, Dallas County

The report was provided to the group in the meeting packet.

Housing Authority Report: Thomas Lewis, Dallas County HHS

The report was provided to the group in the meeting packet. Mr. Lewis mentioned that of vouchers allocated, there were 83 homeless participants in receipt of lease funds, 8 vouchers open, and 33 searching. Mr. Lewis acknowledged MDHA for case management in assisting with help for client's success in obtaining suitable housing.

CARES Act/ARPA Funds: Hector Faulk, Dallas County

The report was provided to the group in the meeting packet.

PROJECTS AND INDUSTRY UPDATES

Meadows Mental Health Policy Institute: Ron Stretcher

The report will be available at the next meeting.

Coordinated Access System: Sarah Craig, MDHA

Sarah Craig, MDHA, reported the rapid rehousing program, which is focused on chronically unhoused individuals, has been managing with help to provide basic needs for housing. These essentials include moving kits, furniture, wrap around services, and any other support needed to help an individual become more successful with housing. MDHA continues their efforts to bring additional funding into their system that will assist in their plan to reduce homelessness. They are also advocating funding for youth specifically as housing needs aimed at these individuals increase. Additionally, MDHA has started planning with partners for inclement weather in preparation for those unhoused as well as preparing for the PIT count next February.

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

Laura Edmonds, Dallas County reported one of their objectives for the next fiscal year is refining data, gathering and reporting. There are no new updates and processes continue to go well.

CitySquare: Madeline Reedy, CitySquare Staff

The report will be available at the next meeting.

Dallas Connector: Daniel Roby, Austin Street

The report will be available at the next meeting.

Homeward Bound: Doug Denton, Homeward Bound

Doug Denton reported the crisis residential unit currently has 18 beds available. The Dallas County Deflection Center has developed a new report of referrals which was provided to the group in the meeting packet. DART Police has started making referrals and training continues with area partners for awareness of direct referrals to the Deflection Center.

Dave Hogan made note of an upcoming training with Balch Springs and Sunnyvale. Mr. Hogan mentioned he received an inquiry from Highland Park highlighting their issues that was confirmed by their Chief of Police. He also received a call from Dallas Assistant Police Chief who wanted to further discuss how they can help with referrals of criminal trespassing.

Metro Dallas Youth Committee: Leah Williams reporting; Metro Dallas Youth Committee
The report will be available at the next meeting.

Family Housing: Ellen Magnis, Family Gateway
The report was provided to the group in the meeting packet.

Mattingly Report: Jim Mattingly
Jim Mattingly reported no new updates, however, mentioned new construction is in the pipeline and will report as updates become available.

The meeting was adjourned with words of maintaining the efforts by Dr. Daniel.

Next Meeting: October 26, 2022



Crisis Services Project

CSP Total

DY11 CSP Monthly Report_No Graphs(with LCN)

Last Refresh: 10/7/22 at 9:04:33 AM GMT-05:00

	Past Year Avg	2022-01	2022-02	2022-03	2022-04	2022-05	2022-06	2022-07	2022-08	Average:	Sum:
Total Service Episodes:	516	474	470	493	511	571	503	460	572	506.75	4,054
Total Unique CID:	415	470	450	460	475	516	430	407	510	413.11	3,718
Total Unique PID:		470	450	459	475	516	430	407	508	412.78	3,715
% Change to DY 9 by CID		79.80%	76.40%	78.10%	80.65%	87.61%	73.01%	69.10%	86.59%	0.00%	

<u>Total Encounters by Type:</u>		2022-01	2022-02	2022-03	2022-04	2022-05	2022-06	2022-07	2022-08	Average:	Sum:
Triage		474	470	493	511	571	503	460	572	506.75	4,054
Care Coordination		435	423	605	406	342	435	251	375	409	3,272
F2F Encounter		265	269	305	270	321	304	248	343	290.63	2,325
Sum:		1,174	1,162	1,403	1,187	1,234	1,242	959	1,290	1,206.38	9,651

<u>F2F Encounter</u>		2022-01	2022-02	2022-03	2022-04	2022-05	2022-06	2022-07	2022-08	Average:	Sum:
MHPR Bond		136	124	171	134	179	162	141	203	156.25	1,250
Non-MHPR		129	145	134	136	142	142	107	140	134.38	1,075
Sum:		265	269	305	270	321	304	248	343	290.63	2,325

<u>Administrative Note</u>		2022-01	2022-02	2022-03	2022-04	2022-05	2022-06	2022-07	2022-08	Average:	Sum:
Desk Reviews		3	11	11	13	8	11	13	9	9.88	79



Crisis Services Project

Frank Crowley

DY11 CSP Monthly Report_No Graphs(with LCN)

Last Refresh: 10/7/22 at 9:04:33 AM GMT-05:00

	2022-01	2022-02	2022-03	2022-04	2022-05	2022-06	2022-07	2022-08	Average:	Sum:
Service Episodes:	474	470	493	511	571	503	460	572	506.75	4,054

<u>Unique Consumers:</u>	2022-01	2022-02	2022-03	2022-04	2022-05	2022-06	2022-07	2022-08	Average:	Sum:
By N* ID	33	48	52	54	56	54	73	62	54	432
By LCN	270	197	215	187	223	164	155	194	200.63	1,605
By Client ID	167	205	193	234	237	212	179	254	210.13	1,681
TOTAL Unique Consumers:	470	450	460	475	516	430	407	510	413.11	3,718
TOTAL Unique Consumers as %:	99.16%	95.74%	93.31%	92.95%	90.37%	85.49%	88.48%	89.16%		

<u>Unique F2F:</u>	2022-01	2022-02	2022-03	2022-04	2022-05	2022-06	2022-07	2022-08	Average:	Sum:
By N* ID	15	30	31	24	34	42	28	49	31.63	253
By LCN	148	131	134	95	135	103	99	125	121.25	970
By Client ID	98	105	137	142	144	143	113	166	131	1,048
TOTAL Unique F2F:	261	266	302	261	313	288	240	340	252.33	2,271
TOTAL Unique F2F as %:	98.49%	98.88%	99.02%	96.67%	97.51%	94.74%	96.77%	99.13%		



			January	February	March	April	May	June	July	August	September	October	November	December
Baseline	Goal	Year MO	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		SRAT And/Or VRAT Rating Count	79	158	268	357	465	562	653	790				
752		Total of Unique Individuals	80	160	270	360	469	566	657	794				
97.21%	97.54%	Percentage	98.75%	98.75%	99.26%	99.17%	99.15%	99.29%	99.39%	99.50%				
M1-263 Psychosocial/developmental Assessment														
679		Number of CSP Encounters	11	34	80	112	168	225	249	337				
743		NTBHA Psychological Evaluations	11	37	88	124	184	243	269	364				
91.39%	92.40%	Percentage	100.00%	91.89%	90.91%	90.32%	91.30%	92.59%	92.57%	92.58%				
M1-265 Housing Assessment for Individuals with Schizophrenia														
375		Identified individuals with housing outcome/ housing assessment	29	55	91	116	156	190	222	274				
437		Identified individuals with verified schizophrenia visits within 12 month period.	31	62	96	124	165	200	235	290				
85.81%	87.48%	Percentage	93.55%	88.71%	94.79%	93.55%	94.55%	95.00%	94.47%	94.48%				

**With CSP as the denominator



House Public Health Committee Summary of Hearing—September 13, 2022

Committee Members

Chair: Representative Stephanie Klick, Vice-Chair Representative Bobby Guerra.

Members: Representatives Steve Allison, Liz Campos, Nicole Collier, Jacey Jetton, Jolanda Jones, Tom Oliverson, Four Price, Reggie Smith, Erin Zwiener.

Interim Charges Related to Behavioral Health

Interim Charge 3: Study the impact of fentanyl-related overdoses and deaths in Texas. Evaluate existing data collection, dissemination, and mitigation strategies regarding opioid abuse in Texas. Make recommendations to improve coordinated prevention, education, treatment, and data-sharing.

Link to hearing video https://tlchouse.granicus.com/MediaPlayer.php?view_id=46&clip_id=23534

Opening Statement: Chair Klick noted that every county in Texas has experienced the effects of the opioid epidemic. Texas has received approximately \$1.3 billion from the Opioid Settlement.

- The Legislature will allocate approximately half of the settlement funds (\$700 million).
- Purpose will be for proven educational, prevention, and treatment strategies.

Invited Testimony

Debbie Garza—Texas Pharmacy Association

<https://capitol.texas.gov/tlodocs/87R/handouts/C4102022091311001/62f92c8e-f680-4fb1-b4d3-8a7b5b5d5687.PDF>

- All Texas pharmacies are required to report all dispensed controlled substances to the Texas Prescription Drug Monitoring Program (PMP) within one business day.
- PMP allows rapid identification of patients who are attempting to access large amounts of prescription drugs by going to multiple doctors and pharmacies.
- Pharmacists are required to check PMP history before prescribing opioids, Benzodiazepines, barbiturates, or carisoprodol.
- 86th Legislature's reforms have been successful.
 - HB 2174 mandated electronic prescribing for most controlled substances and limited prescriptions for acute pain. This has greatly reduced fraudulent paper prescriptions.
 - HB 2088 increased awareness and availability of safe disposal of controlled substances.
- FDH has extended the shelf-life of Narcan from two years to three years.
- Pharmacists have a duty to use their education, experience and judgement to prevent prescription drug diversion or misuse.

Recommendations:

- Restore enhanced funding for PMP to allow immediate access statewide to integrated electronic health record/pharmacy management system (NarxCare).
- Establish a statewide standing order to be issued by the Texas Department of State Health Services (DSHS) for Narcan to make naloxone available to anyone.
- Allow Pharmacists to bill and be reimbursed for evidence-based Screening, Brief Intervention and Referral to Treatment (SBIRT) services.

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

Brady Mills, Chief, Crime Laboratory Division—Texas Department of Public Safety (DPS)

<https://capitol.texas.gov/tlodocs/87R/handouts/C4102022091311001/82511a9f-de41-4257-9342-94ebafed5a1a.PDF>

- Fentanyl is being imported from China to Mexico, then moved across the US-Mexico border.
- Fentanyl is being distributed often through adulterated counterfeit tablets that resemble prescription pharmaceuticals, heroin and cocaine.
- 2 mg. of fentanyl is a lethal dose.
- Illegal manufacturers have no quality control, varying binding agents and other ingredients.
- Counterfeit pills contain varying amounts of fentanyl.

Increases in trafficking

- In 2019, less than 50% of fentanyl cases were counterfeit tablets.
- In 2022, over 65% of fentanyl cases were counterfeit tablets.
- Currently approximately 50% of counterfeits are made to resemble Oxycodone

Fentanyl confiscated by DPS:

Cases:	2019	2020	2021	2022
Total reported cases	94	164	530	769
Total weight	31.5 kg.* = 69.3 lb.*	9.70 kg. = 21.33 lb.	8.36 kg. = 18.39 lb.	18.92 kg. = 41.63 lb.
• Cases involving Tablets (varying imprints)	45	103	367	503
• Cases involving Powders	21	19	79	132
• Cases that appeared to be pharmaceuticals	12	11	5	7
*Particularly large drug bust in 2019				

Fentanyl content of illicit drugs confiscated by DPS:

Pill Identifier Code:	Watson 853	M 30	RP 10 325
Counterfeit of:	Hydrocodone-Acetaminophen	Oxycodone	Oxycodone-Acetaminophen
Average Fentanyl concentration confiscated:	0.717 mg	1.706 mg.	1.0 mg
Highest Fentanyl concentration confiscated:	0.952 mg.	5.127 mg.	
Lowest Fentanyl concentration confiscated:	0.610 mg.	0.125 mg.	
<i>Note: Lethal Dose of Fentanyl is 2 mg.</i>			

Lisa Wyman, Director-Center for Health Statistics—Texas Department of State Health Services (DSHS)

<https://www.dshs.texas.gov/legislative/2022-Reports/Fentanyl-Deaths-9.pdf>

Fentanyl-Related Deaths

- Local Justices of Peace and Medical Examiners (if applicable) determine cause of death and submit them electronically to DSHS.
 - Many local officials do not properly document role of fentanyl in the death.
 - DSHS’ process doesn’t catch a death as fentanyl-related if the word “fentanyl” is misspelled on the death records submitted by local governments.
- CDC assigns International Cause of Death Classifications (ICD-10) and transmits information back to the state. DSHS performs analysis based on CDC codes.

Fentanyl-Related Deaths—continued

- Some drug-poisoning death codes denote a determination of intent including unintentional death, suicide, homicide or undetermined.
- Other drug-poisoning death codes indicate contributing causes such as the substance ingested including opium, heroin, semi-synthetic opioids, methadone, other synthetic narcotics, and unspecified narcotics.
- There is no specific death code for fentanyl. Fentanyl-related deaths are classified under “Other Synthetic Narcotics” as cause of death.
- Other synthetic narcotics include Fentanyl, Fentanyl analogues, Tramadol and Demerol.
- 2021 and 2022 data are still provisional as all data is not yet collected or analyzed.
- Residence data indicates residence of the person at time of death, regardless of actual place of death.

Unintentional Synthetic Opioid Deaths Related to Fentanyl 2018-2022

	2018	2019	2020	2021	2022
Fentanyl-Related	210 69%	317 83%	886 90%	1612 95%	842 97%
Fentanyl Not related	94 31%	64 17%	95 10%	80 5%	28 3%
Total Deaths	304	381	981	1692	870

- 72 % of unintentional opioid deaths are males, 28% are female.
- Unintentional Opioid Deaths by age group.
 - 74% of unintentional opioid deaths are within the age group of persons 18 to 44.
 - 22% are between the ages or 45 to 64.
 - 2% are age 65 or older.
 - 2% are under age 18.

Unintentional Fentanyl-Related Deaths Involving Other Drugs

	2018	2019	2020	2021	2022
Psychostimulants with abuse potential	27 8.5%	66 14.1%	227 17.4%	557 23.4%	312 25.9%
Benzodiazepine	70 21.9%	92 19.6%	289 22.2%	491 20.6%	216 17.9%
Cocaine	52 16.3%	90 19.2%	218 16.7%	392 16.4%	203 16.8%
Other drugs	124 38.9%	141 30%	277 21.2%	507 21.3%	248 20.6
No other drugs	46 14.4%	80 17.1%	293 22.5%	437 18.3%	266 18.8%

Brad Fitzwater, MD, Substance Use Medical Director—HHSC

<https://capitol.texas.gov/tlodocs/87R/handouts/C4102022091311001/a4c60a32-41ed-4ca4-87ac-a542610018d0.PDF>

- The number of overdose deaths was fairly constant in 2017 and 2018 at approximately 2,500 per year.
- Of those, approximately 1,250 were opioid-related overdose deaths.
- Overdose deaths began increasing in 2019, with much sharper increases in overdose deaths and opioid-related overdose deaths after the start of the COVID-19 pandemic. (Slide 2)
- HHSC data for 2021 and 2022 remain provisional, as they are based on DSHS death certificate data.
- Accidental deaths in Texas related to opioids have risen in Texas since 1999. (Slide 3)
- Accidental deaths in Texas related to synthetic opioid sharply increased beginning in 2019.
- Accidental deaths in Texas related to heroin and prescribed opioids decreased somewhat since 2020.
- Medication Assisted Treatment (MAT) decreases craving, withdrawal symptoms, relapse, infectious disease transmission, overdose, and death. Also reduces criminal justice involvement.
- MAT for Opioid Use Disorder (OUD) reduces risk of death from any SUD by 75%.

Kasey Strey, Director, Texas Targeted Opioid Response (TTOR)—HHSC

<https://www.hhs.texas.gov/sites/default/files/documents/opioid-misuse-prevention-education-treatment.pdf>

- TTOR is largely funded by SAMHSA grants to Texas.
- HHSC deploys funds through LBHAs/LMHAs statewide.
- TTOR Continuum of Care:
 - Prevention: data surveillance, workforce training and development, opioid misuse prevention, Naloxone distribution.
 - Integration: interventions in traditional healthcare, community care coordination, OUD care in criminal justice system
 - Treatment: medications for OUD, contingency management.
 - Recovery: recovery support services, recovery housing
- 76.4% of Texans live within a 30-minute drive of medication-assisted OUD services.
- Most services are primarily concentrated in larger metropolitan areas including Amarillo, Abilene, Austin, Brownsville, Corpus Christi, Dallas, El Paso, Fort Worth, Houston, Laredo, Lubbock, Lufkin, Odessa, San Angelo, San Antonio, Tyler, Waco Wichita Falls.
- <https://txopioidresponse.org/> is an education and awareness campaign in English and Spanish has been viewed at least 25,728,764 times
- TTOR Outcomes 2017-2021
 - 5,105 lives saved. (1,796 saved in 2021, a 41% increase over 2020).
 - 1,046 admissions to MAT (encouraged by recovery coach).
 - 1,359 admissions to MAT (referred by TTOR integrated programs).
 - Percent of OUD admissions to evidence-based treatment increased from 36% in 2017 to 70.7% in 2021.
 - 72,084 Naloxone kits distributed in 2021.
 - 2,247 people received direct recovery support.
 - Naloxone/Narcan may be ordered through TTOR at <https://www.morenarcanplease.com/>

Jennifer Sharp Potter, PhD, MPH—Executive Director, Be @ell Texas, Professor—Long School of Medicine, Vice President for Research—UT Health San Antonio.

- 20% of Texans over age 12 have used an illicit drug in the past year.
- 10% of Texans meet the criteria for SUD. Only 10% of those will receive treatment. (of 100 Texans with an SUD, only one will access evidence-based treatment).
- Texas saw a 78% increase in opioid-related overdose mortality when comparing the year between March 2020-2021 to the year March 2021-2022. This corresponds to the first year of the COVID pandemic.
- Fentanyl overdoses are now the leading cause of unintentional deaths for adults ages 18-45.
- Enough fentanyl was seized in Texas last year for nine lethal doses for every man, woman and child in the state.
- 42% of the drugs seized by the US Drug Enforcement Agency (DEA) contain a lethal dose.
- Fentanyl test strips cost 96 cents.
- Potency of fentanyl and its saturation in the illicit drug supply makes it alarmingly easy to overdose.
- At it's Be Well Clinic, UT Health San Antonio was awarded \$100 million in TTOR funds.
- Be Well has statewide assessment, evidence-based treatment, medication management, peer recovery support services, case management, pharmacy, lab, telehealth and provider network has served over 4000 people.

Recommendation: Decriminalize possession of fentanyl test strips to reduce overdose deaths.

C.M. Schade, MD, PhD, Pain Management Specialist—Texas Medical Association

- According to the CDC, fentanyl is 50 to 100 times more potent than morphine.
- A lethal dose of fentanyl weighs less than a mosquito.
- Valid opioid prescriptions are down in U.S. and in Texas, which is lower than the national average.

Potential issues in current enforcement structure

- Patients are finding it more difficult to find a physician to prescribe appropriate medications for chronic pain management.
- Decreased access to medication for pain relief can increase use of illicit means or suicide.

Recommendations

- Establish a workgroup to review Texas Occupations Code Section 168 to revise codes regarding certification and inspection of pain management clinics in light of recent reforms in Prescription Monitoring Programs. “Realistic guardrails are needed to prevent overprescribing, which can lead to abuse. But the guardrails must be tailored carefully to leave enough room on the road to allow for proper prescribing practices to avoid driving patients to seek illicit drugs to manage their pain.”
- Consider pilot projects to implement syringe services programs to allow anonymous exchange of used hypodermic needles and syringes.
- Strengthen the Prescription Monitoring Program to use integration software linking PMP to physicians’ electronic health records and pharmacy-prescribing software.
- Authorize and fund the use of data mining software that compares pharmacy purchases to pharmacy’s Prescription Monitoring Program sales to help the state identify pharmacies that are not reporting dispensing data, purchasing more opioids than they reported dispensing, or have disproportionately large sales in a given geographic area.
- Educate the public on overdoses caused by counterfeit pills.

C.M. Schade, MD, PhD, Pain Management Specialist—Texas Medical Association—continued

- Allow over-the-counter retail sales of naloxone without a prescription.
- Consider legalization of Fentanyl test strips to prevent accidental ingestion, overdose, and death.
- Develop and implement data collection systems to identify at-risk populations, learn more about polysubstance drug use.
- Implement public health interventions that remove structural and racial inequities including neuroscience and clinical therapeutics to better understand addiction and develop targets for therapeutic interventions.
- Consider collaborations between federal, state, local agencies and schools to implement a comprehensive behavioral health strategy.
- Use American Rescue Plan Act (ARPA) and other federal funds to expand access to mental health and SUD services.

Brittany Jones—Opioid Treatment Provider Coalition

History of Opioid Epidemic

- CDC estimates that from March 2021 to March 2022, there were 2,822 opioid overdose deaths in Texas.
- Between 2013 and 2017, opioids represented 45% of controlled medications dispensed in Texas, or approximately 17.7 million prescriptions dispensed per year. This is equivalent to 63.7 opioid prescriptions per 100 persons. As high as this number seems, it was slightly below the reported national average.

Opioid Treatment Programs

- Patients typically have history of using opioids 4 to 5 times daily.
- Provide highly-regulated and highly-structured outpatient treatment services to people with Opioid Use Disorder (OUD).
- Are the only place where FDA-approved medications for OUD can be used. Regulations ensure safe administration of medications and prevent drug diversion.
- Medication-assisted treatment (MAT) combines medication and psychosocial support, group and/or individual therapy, case management.
- Referrals are made for medical, dental or mental health screenings and care, housing, and vocational services.
- Once a patient demonstrates progress, they may be allowed to take medications home. During the COVID-19 pandemic, SAMHSA allowed more flexibility on this regulation.
- Regular testing, progress tracking, and medication adherence required.

Outcomes

- 60-70% of patients remain in treatment at least 90 days.
- 90% of patients who stay in treatment 90 days or more will remain in treatment for at least one year.
- 85% of patients are illicit opioid-free after one year.
- Individuals in treatment between 90 days and two or more years in treatment show an 18% increase in employment.

Access to Service Limitations

- Texas Medicaid rates for opioid treatment programs do not adequately cover costs for either supervised or unsupervised.
- Texas limits the use of buprenorphine as an alternative to methadone. SAMHSA has revised regulations under 42 CFR Part 8, which would allow more widespread use of buprenorphine. Many states have revised their regulations accordingly, but Texas has not.
- Texas restricts certain prescribing functions to physicians and does not allow advanced practice registered nurses (APRNs), nurse practitioners (NPs) or physicians assistants (PAs) to prescribe OUD treatment medications.
- Texas is experiencing staffing shortages in many professions, including OUD treatment.
- Texas' residency requirements for OUD staff limits recruitment.
- Low-income uninsured people have difficulty finding services

Recommendations

- Reimburse take-home medications at the same rate as in-facility administered medications.
- Adopt Medicare's bundled payment model for OUD services.
- Align Texas time and treatment requirements for take-home buprenorphine to federal regulations and subject to physician discretion.
- Allow advanced practice clinicians in opioid treatment programs, and under the supervision of a physician Medical Director, to prescribe Schedule II and Schedule III medications as permitted by federal regulations.
- Remove state residency requirement for opioid treatment program staff to work in Texas or through telemedicine.

Kevin Roy—Chief Policy Officer—Shatterproof

- According to the CDC, there were over 107,000 fatal overdoses in the us in 2021.
- Nearly two-thirds of the overdose deaths involved synthetic opioids.
- Nearly 1,700 Texans died of synthetic opioid overdose in 2021.
- Opioid overdose increased 82% from 2020 to 2021.
- A fatal dose of fentanyl is equivalent to a few grains of sand.
- Operation Lone Star has seized over 300 million lethal doses of fentanyl.
- Illicit tablets appearing to be Xanax, Adderall and Oxycodone are killing unwitting buyers, especially young people with mental health conditions.

Recommendations:

- Real-time overdose data would help direct prevention resources to areas of highest need.
- Make naloxone as widely accessible, remove barriers to widespread use.
- Continue progress made in programs like More Narcan Please
- Provide Narcan to small nonprofits and police departments.
- Develop and invest in evidence-based prevention strategies.
- Increase community education regarding the dangers of fentanyl

Public Testimony Recommendations

Katharine Harris—Rice University

- Allow use of fentanyl test strips.
- Improve data collection on cause of death.
- Expand access to MAT and naloxone.

Elizabeth Henry and Chelsea Biggerstaff—Recovery People

- Update the Overdose Bystander Law to protect reporting of an overdose.
- Expand access to Naloxone and training.
- Expand peer support

Shelby Tracy—Texas Association of Community Health Centers

- Invest in FQHCs to promote community-based prevention and treatment.
- Offer medical school residencies at FQHCs.

Shannon Hoffman—Hogg Foundation for Mental Health

- Dedicate resources to counties to increase timely and accurate data collection.
- Authorize fentanyl test strips.
- Expand Good Samaritan law.
- Expand Narcan/naloxone availability.
- Increase recovery support services.
- Adopt a common definition of ‘recovery housing’ and establish a voluntary recovery housing certification.
- Include people with lived experience on the Opioid Abatement Fund Council.
- Add Recovery Community Organizations as Medicaid providers for peer services.
- Medicaid reimbursement for peer recovery services for young people ages 18-21.

Cynthia Humphrey, Executive Director—Association of Substance Abuse Programs (ASAP)

- Reforms enacted to address opioid crisis--Prescription Monitoring Program (PMP), prescriber education, and Medication Assisted Treatment (MAT) will not stem the fentanyl crisis.
- Fentanyl is extremely deadly.
- Texas must have a sufficient naloxone supply and reserve.
- Increase access to evidence-based prevention, treatment and recovery support programs.
- Only 10% of Texas schools have evidence-based prevention programs.



Summary of Hearing—September 28, 2022
House Appropriations Committee
Health and Human Services Commission
Legislative Appropriations Request

Committee Members:

Representative Greg Bonnen, MD—Chair, Representative Mary E González—Vice-Chair, Committee Members: Representatives Trent Ashby, Cecil Bell, Giovanni Capriglione, Jay Dean, Alex Dominguez, Gary Gates, Justin Holland, Donna Howard, Ann Johnson, Jarvis D. Johnson, Julie Johnson, Ina Minjarez, Geanie W. Morrison, John Raney, Toni Rose, Matt Schaefer, Carl O. Sherman, Sr., Lynn Stucky, Ed Thompson, Steve Toth, Gary VanDeaver, Armando Walle, Terry Wilson, Gene Wu, Erin Zwiener.

Health and Human Services Commission (HHSC) Handout:

<https://www.hhs.texas.gov/sites/default/files/documents/joint-budget-committee-hhsc-september-29-2022.pdf>

Invited Testimony

Cecile Young, Executive Commissioner—HHSC

Trey Wood, Chief Financial Officer—HHSC

Effects of the COVID-19 Public Health Emergency

- During the Public Health Emergency, states, including Texas, were awarded a higher Federal Medical Assistance Percentage (FMAP) during the pandemic for allowing people to remain on Medicaid for the duration of the Public Health Emergency without requiring re-qualification for the public health emergency time period. This resulted in the growth in the Medicaid rolls.
- In May/June 2022, Texas reached the ‘tipping point’ at which the higher monthly costs for services required to receive the higher FMAP began to exceed the higher monthly revenues received from it.
- HHSC anticipates that the Public Health Emergency will officially end in mid-October 2022, and enhanced FMAP continuing through the end of December 2022.
- Without a supplemental appropriation for FY 2023, HHSC’s cash flow projections estimate that HHSC will not be able to pay providers beginning in May 2023.
- HHSC projects that with the resumption of Medicaid eligibility reviews, there will be:
 - .8% decrease in Medicaid caseloads by FY 2024.
 - 1% decrease in Medicaid caseloads by FY 2025.
 - 64% increase in CHIP caseloads by FY 2024.
 - 6% increase in CHIP caseloads by FY 2025.
- Although Medicaid cost growth in Texas has been lower than the national average, it nevertheless has been highly volatile due to increased utilization trends, case mix distribution, required benefit changes, population acuity, aging and births, and advances in medicine.

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

HHSC's Criteria for Developing the Legislative Appropriations Request:

- Maintain essential services.
- Prevent agency operations from breaking.

HHSC Priorities and Categories of Exceptional Items:

- Maintain access for essential client services.
- Prevent disruption of critical operations and achieve efficiencies.
- Improve access and delivery of behavioral health services.
- Comply with state and federal regulations.
- Address information technology infrastructure needs.

Critical HHSC Budget Issues for FY 2023 a Supplemental Appropriation Bill:

Supplemental Need Items	2022-23 Biennium Supplemental Request
Medicaid Acute Care for Full-Benefit Clients	(\$1,214,000,000)
Medicaid Long-Term Care (Entitlement)	\$238,400,000
Medicaid Long-Term Care (Non-Entitlement)	\$17,200,000
Medicaid Other Medical Services	(\$123,800,000)
Other Impacts to Medicaid	(\$2,647,900,000)
Children's Health Insurance Program (CHIP)	\$ 254,200,000
Disaster Transfer to DSHS	(\$200,000,000)
HHSC's Projected Shortfall as of September 2022	(\$3,675,900,000)

All Funds Requested by HHSC for the 2024-2025 Biennium:

Base Request:	\$86,672,275,962
Exceptional Items Request:	\$7,013,110,430
Total Request:	\$93,685,386,392

Exceptional Items Requests:

Exceptional Item Category	Biennial Total
Prevent disruption of critical operations and achieve efficiencies	\$624,224,883
Improve access and delivery of behavioral health services	\$152,124,432
Comply with state and federal regulations	\$56,303,018
Maintain access and improve outcomes for essential client services	\$5,992,117,191
Address IT infrastructure needs	\$155,829,715
Total Exceptional Items Requests	\$6,980,599,239

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
Nexus New Admissions	1	3	2	1	1	2	0	1	0	1	0	1	13	23	26	25
Nexus Average Days in Jail from Referral to Admission	17	24	24	20	20	8	8	8	0	18	0	22	14	12	12	8
Homeward Bound New Admissions	1	1	2	0	2	1	2	1	2	0	0	2	14	14	24	11
Homeward Bound Average Days in Jail from Referral to Admission	119	92	90	90	93	102	113	73	78	0	0	20	73	92	79	7
RESIDENTIAL TREATMENT DISCHARGES																
Successful	0	1	2	2	4	1	2	2	2	1	2	1	20	22	43	27
Unsuccessful	1	0	1	0	1	1	1	0	0	0	0	0	5	7	11	3
REFERRING SPECIALTY COURTS FY2022																
Number of Referrals by Specialty Courts		AIM	7				DWI	0				STAR	7			
		ATLAS	4				IIP	0				Veterans	0			
		Competency	12				Legacy Family	0				4-C	0			
		DDC	0				MHJD/SET	4								
		DIVERT	0				STAC	21								

*Homeward Bound Pending Admission: 0

*Nexus Pending Admission: 2

FY2022 ATLAS STATISTICS												203rd					
HARRY INGRAM	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	FORMER ATLAS PARTICIPANTS	BOND	
September	39	9	48	0	0	0	0	0	0	0	2	2	46	22	1	0	21

FY2022 MISDEMEANOR DIVERT MENTAL HEALTH COURT STATS CCCAP1/WAIVE

HARRY INGRAM	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	FORMER ATLAS PARTICIPANTS	BOND
September	16	0	0	16	0	0	0	1	0	0	1	15	15	1	0	15

FY2022 S.E.T. STATISTICS												291st				
HARRY INGRAM	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	FORMER ATLAS PARTICIPANTS	BOND
September	40	14	54	0	0	0	0	0	0	0	3	3	51	22	0	22

FY2022 MHPD STATS

September	BEGINNING # OF PENDING CASES	*NEW CASES RECEIVED THIS MONTH	=TOTAL CASES	TBJ	TBC	PLEAS	COND. DISM.	REVOK	REVC	DISMISSALS	INCOMP EVENT	REFERRALS	OTHER COUNSEL APPT.	TOTAL CLOSED
R. Lenox	0	0	0	0	0	0	0	0	0	0	0	0	0	0
L. Strather	409	14	423	0	3	1	0	1	0	3	2	6	2	18

FY2022 FELONY COMPETENCY STATISTICS

September	BEGINNING # OF CASES	NEW CASES THIS MONTH	TBJ	TBC	Alt. Trial Dispos.	Alt. Trial Dispos.	REVO-CATION	REVO-CATION	DISMISSALS	PROBATION	COMP. HRG.	EXTENSIONS	CIVIL T.	MHMR COMM REFERRAL	CONSULTS	OTHER	ENDING # OF PEOPLE IN OCR
M. Harden	133	14	0	0	0	0	8	3	7	0	17	3	1	0	0	2	8
R. Scott	30	3	0	0	0	0	0	0	0	0	5	0	0	0	0	0	2

FY2022 MISDEMEANOR COMPETENCY STATISTICS

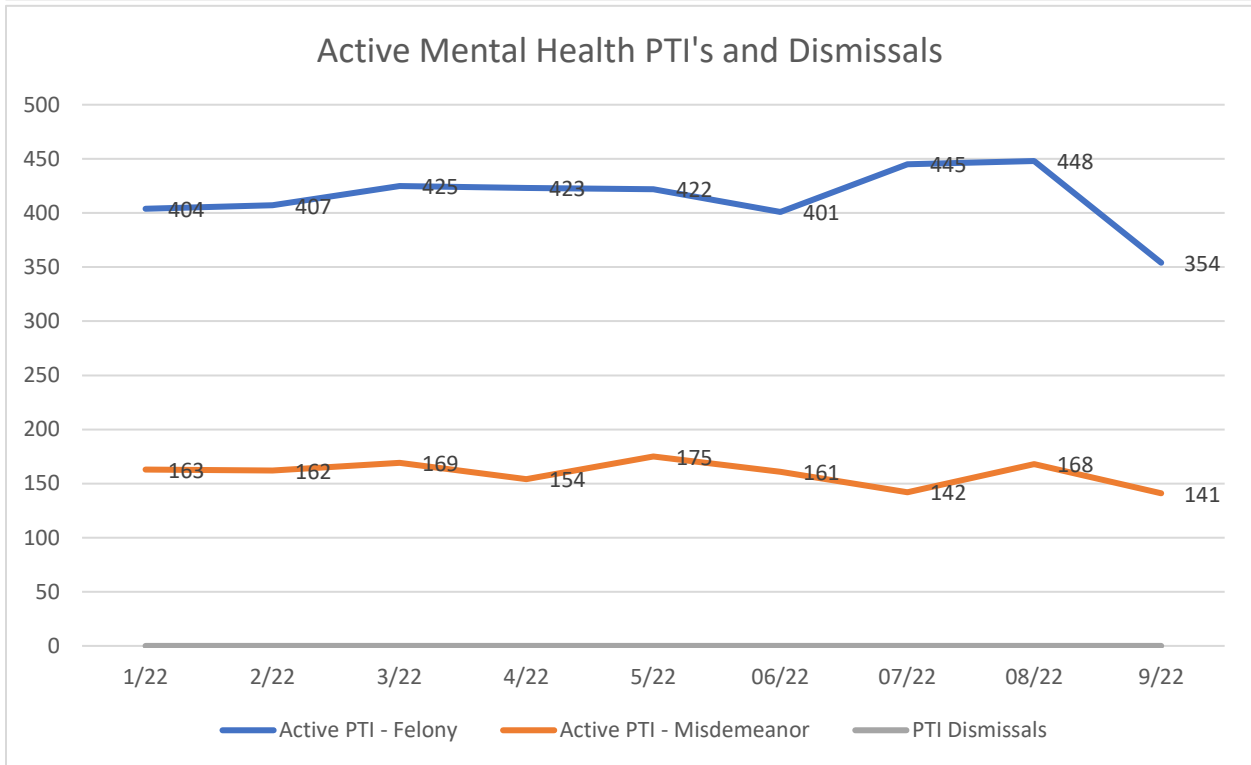
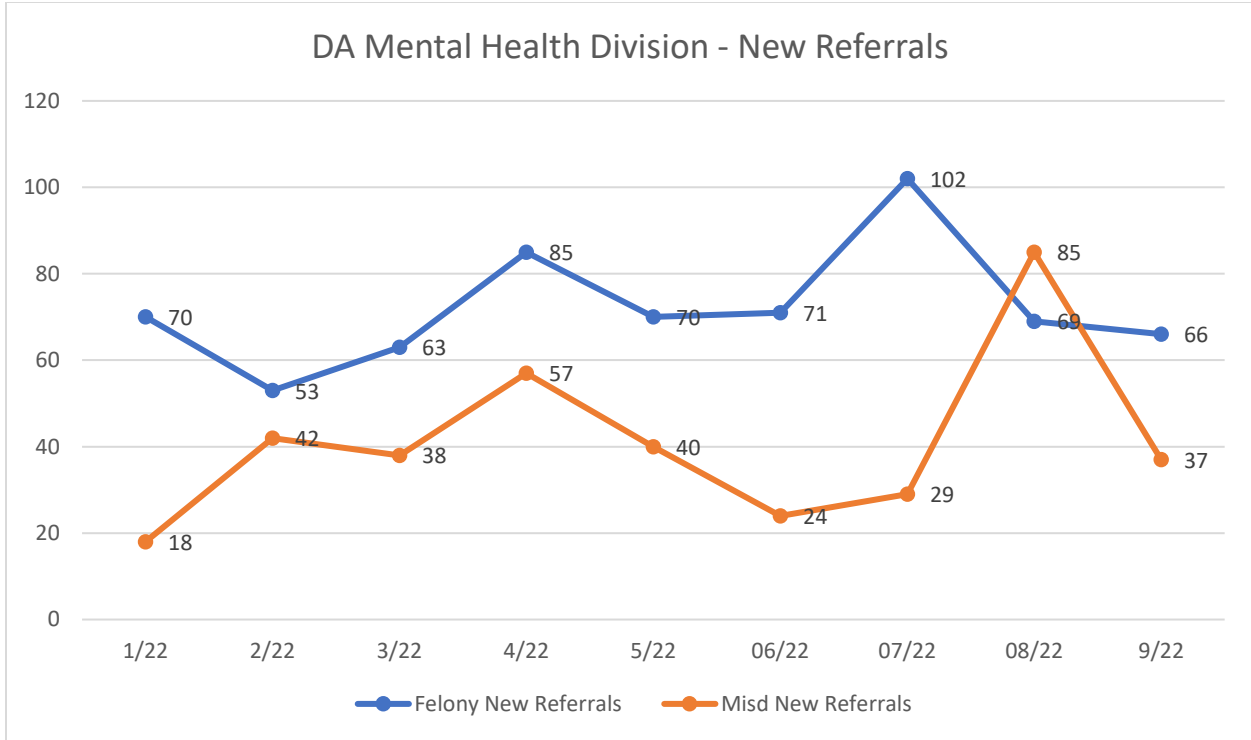
RANDALL SCOTT	BEGINNING # OF CASES	NEW CASES THIS MONTH	TBJ	TBC	Alt. Trial Dispos.	Alt. Trial Dispos.	REVO-CATION	REVO-CATION	DISMISSALS	PROBATION	COMP. HRG.	EXTENSIONS	CIVIL T.	MHMR COMM REFERRAL	CONSULTS	OTHER	ENDING # OF PEOPLE IN OCR
September	118	56	0	0	0	0	0	0	36	0	19	0	11	0	0	0	13

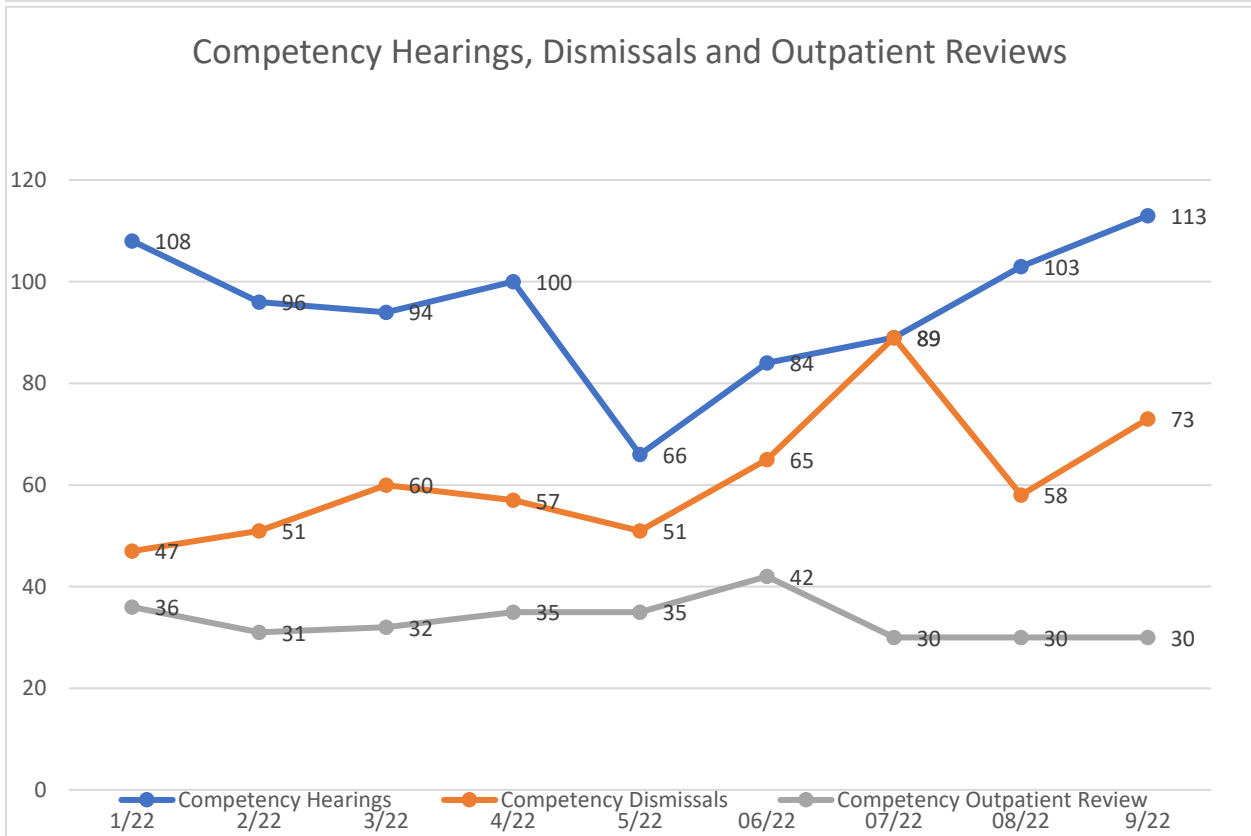
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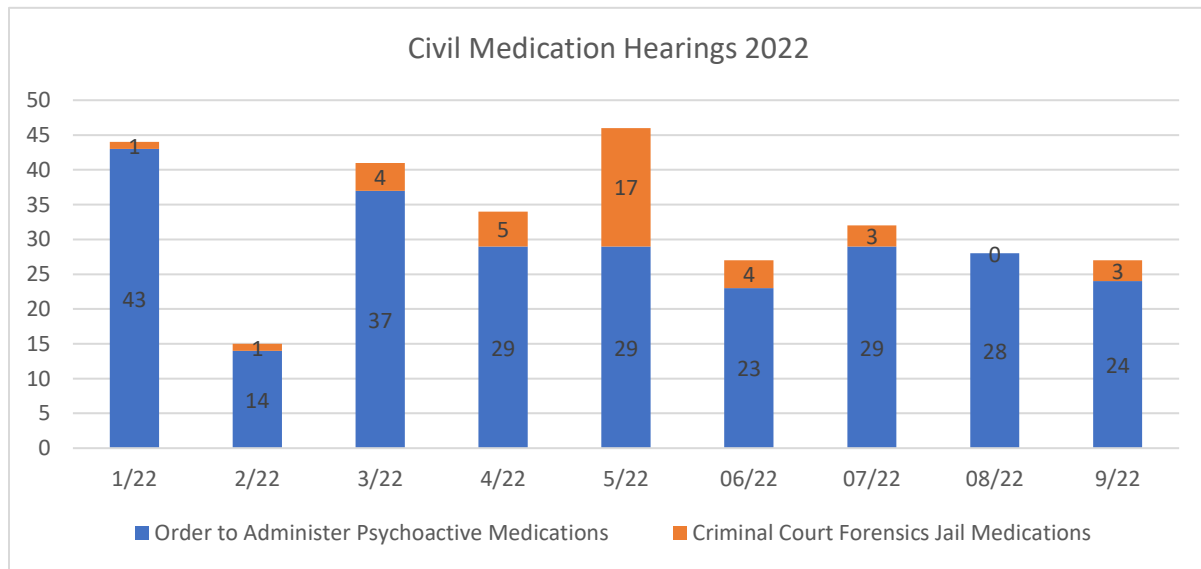
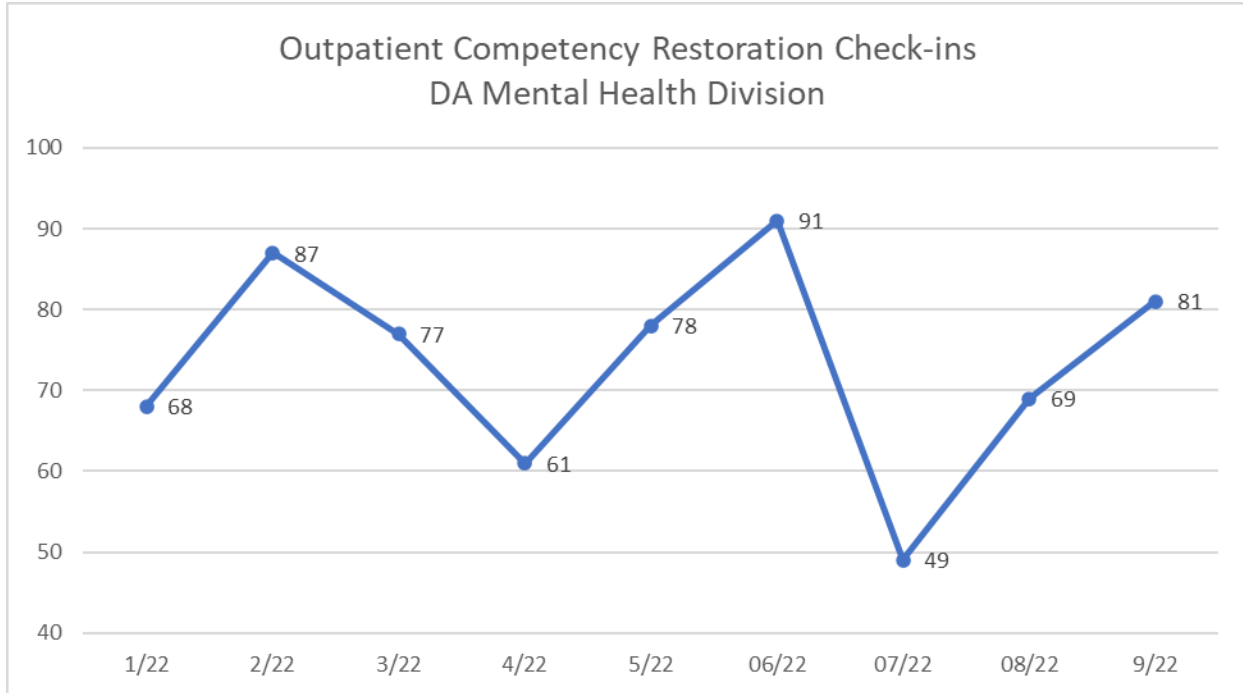
September	TOTAL NEW CASES RECEIVED	NEW CLIENTS AT TERRELL	NEW CLIENTS AT GREEN OAKS	NEW CLIENTS AT MEDICAL CENTER MCKINNEY	NEW CLIENTS AT PARKLA	NEW CLIENTS AT DALLAS GARLAND (formerly HICKORY TRAILS)	NEW CLIENTS AT GARLAND (formerly BEHAVIORAL HEALTH)	NEW CLIENTS AT DALLAS METHUEN DIST	NEW CLIENTS AT HICKORY TRAILS	NEW CLIENTS AT MATHIAS	NEW CLIENTS AT PRESBYTERIAN	NEW CLIENTS AT WELBRI DGE	NEW CLIENTS AT OAKS	NEW CLIENTS AT TEXOMA	NEW CLIENTS AT PERMETER BEHAVIORAL HEALTH	NEW CLIENTS AT ARLIN GTON	NEW CLIENTS AT THURGOOD ARLIN GTON	PROBATION HELD	NO CONTEST COMM	CONTESTED COMM	FORCED HEARING IN COURT	MODIFICATION HEARINGS	OUTPATIENT HEARING	INPATIENT HEARING	
L. Roberts	42	5	0	12	0	0	0	0	0	0	0	0	20	2	3	0	0	1	0	5	4	0	0	0	0
C. Cox	124	0	0	102	0	0	3	0	0	19	0	0	0	0	0	0	0	3	2	19	12	0	0	0	0
K. Nelson	138	0	0	0	0	47	0	81	0	10	0	0	0	0	0	0	0	2	0	19	19	0	0	0	0
R. Black	116	0	60	0	0	0	0	31	0	25	0	0	0	0	0	0	0	11	0	3	3	0	0	0	0

DAN ECKSTEIN

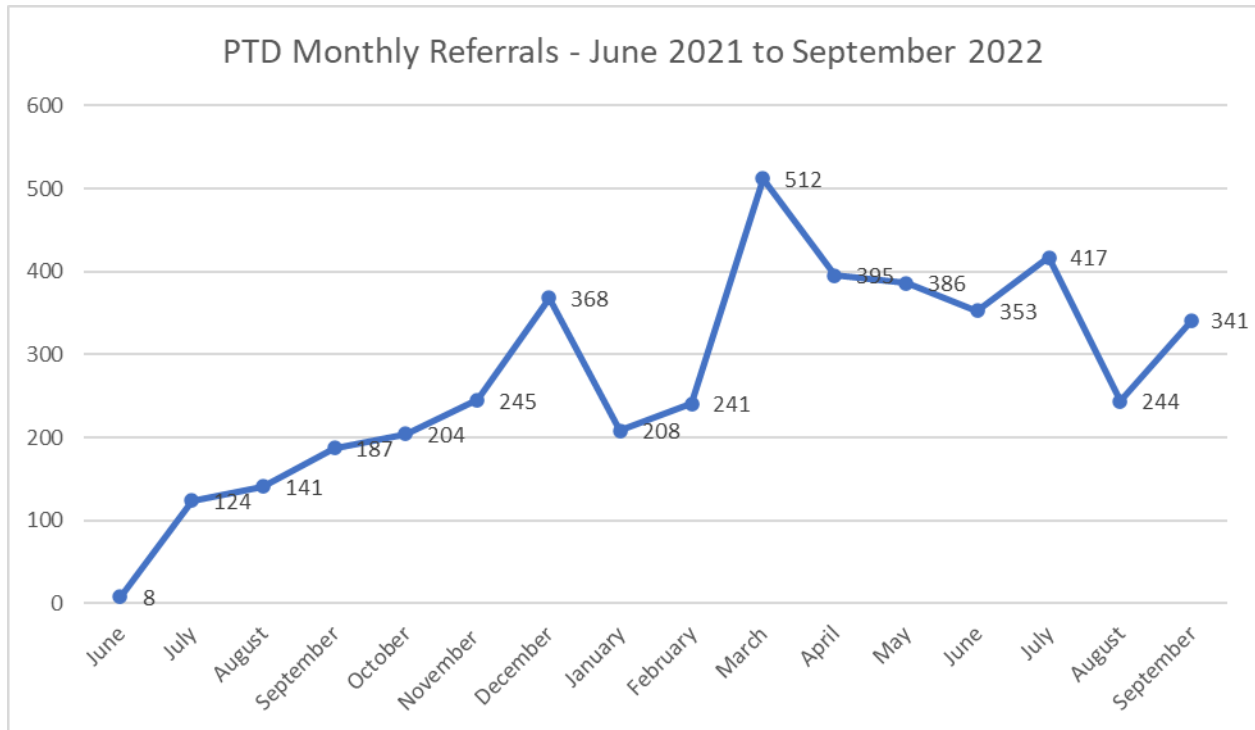
September	INITIAL ELIGIBILITY DAILY LIST (MH FLAGS)	MHPR BOND APPOINTMENTS FROM DAILY LIST (MH FLAGS MINUS THOSE SCREENED-OUT)	MHPR BOND HEARING-BOND GRANTED (# of clients)	MHPR BOND HEARING-BOND DENIED (# of clients)	TOTAL HEARING LIST (# of clients)	Total # of Felony Cases Approved	# of Felonies Approved	Total # of Misd. Cases Approved	# of Misd. Denied			
September	1917	243	37	15	52	72	47	29	18	25	18	7







Civil Hearings	1/22	2/22	3/22	4/22	5/22	06/22	07/22	08/22
Civil Commitments	44	13	38	33	32	25	36	31
Order to Administer Psychoactive Medications	43	14	37	29	29	23	29	28
Criminal Court Forensics Jail Medications	1	1	4	5	17	4	3	0
Total Medication Hearings	44	15	41	34	46	27	32	28
Total Hearings	88	28	79	67	78	52	68	59



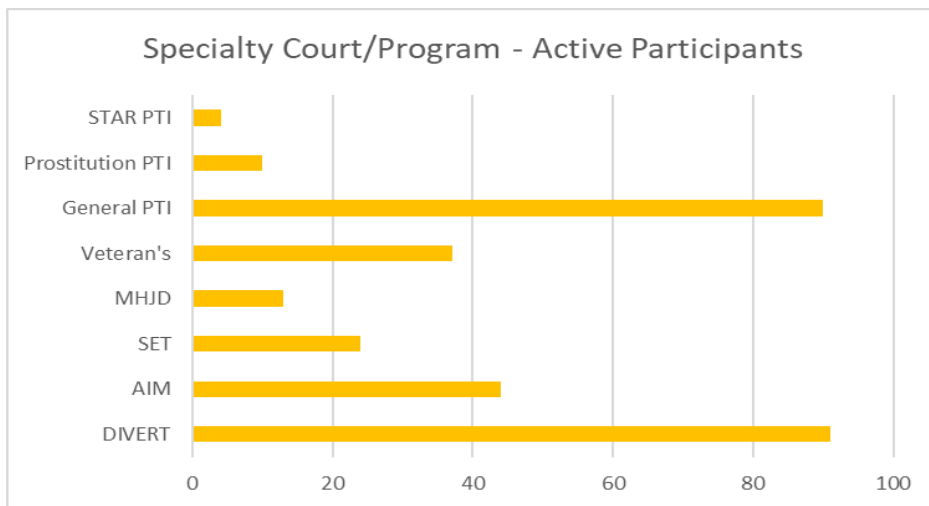
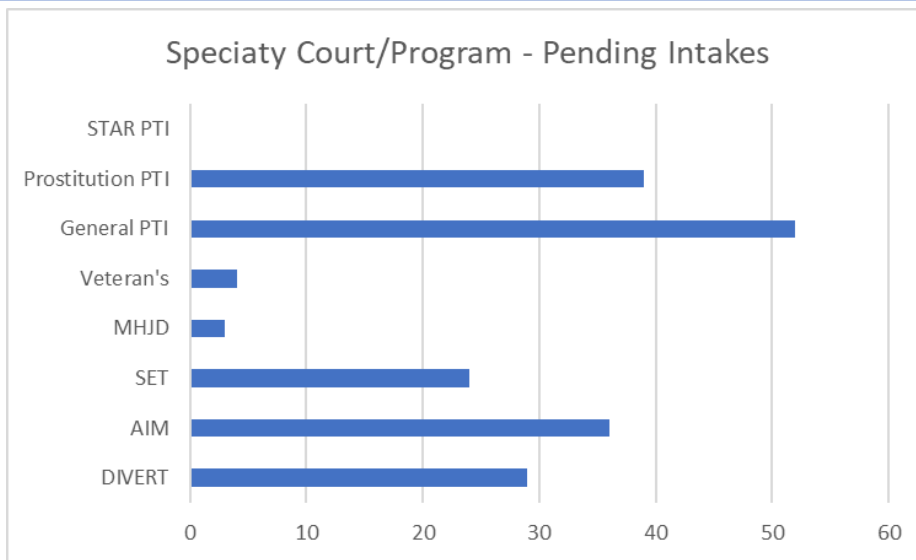
Month	Total Referrals
June	8
July	124
August	141
September	187
October	204
November	245
December	368
January	208
February	241
March	512
April	395
May	386
June	353
July	417
August	244
September	341



Specialty Court & Programs Monthly Statistics - September 2022



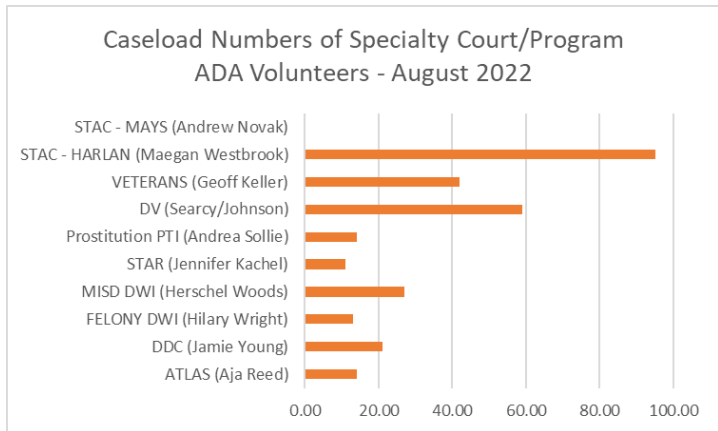
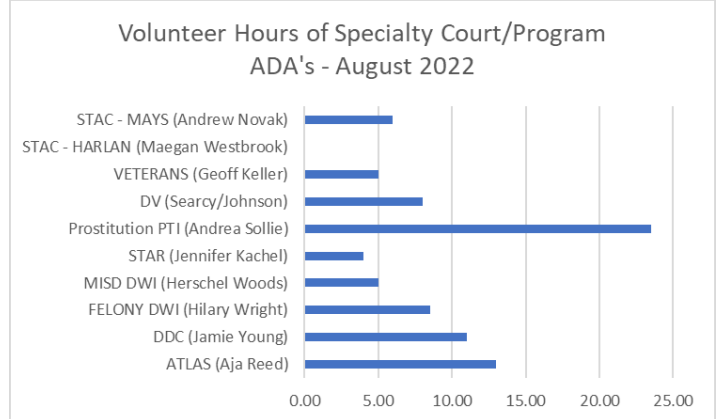
Specialty Court/Program	Pending Intake	Graduate	Failed	Active
DIVERT	29	5	0	91
AIM	36	0	2	44
SET	24	0	1	24
MHJD	3	1	0	13
Veteran's	4	4	1	37
General PTI	52	12	1	90
Prostitution PTI	39	2	1	10
STAR PTI	0	0	1	4





**RJD SPECIALTY COURT/PROGRAMS
ADA VOLUNTEER HOURS- September
2022**

Specialty Court/Program	Hours	Caseload
ATLAS (Aja Reed)	13.00	14.00
DDC (Jamie Young)	11.00	21.00
FELONY DWI (Hilary Wright)	8.50	13.00
MISD DWI (Herschel Woods)	5.00	27.00
STAR (Jennifer Kachel)	4.00	11.00
Prostitution PTI (Andrea Sollie)	23.50	14.00
DV (Searcy/Johnson)	8.00	59.00
VETERANS (Geoff Keller)	5.00	42.00
STAC - HARLAN (Maegan Westbrook)	0.00	95.00
STAC - MAYS (Andrew Novak)	6.00	



Dallas County Deflection Center Organizing Committee
September 26, 2022
Meeting Notes

Attendees: Marlin Suell (Parkland Hospital), Julie Turnbull (Dallas County District Attorney's Office), Kim Nesbitt (Dallas County District Attorney's Office), Ron Stretcher (MMHPI), Michaela Himes (Dallas County Public Defender's Office), Marsha Edwards (Dallas County District Attorney's Office), Dave Hogan (Homeward Bound), Chad Anderson (NTBHA), Kyla Rankin (Parkland Hospital), LaShonda Jefferson (Dallas County Criminal Justice Department), Doug Denton (Homeward Bound), Lt. Donovan Collins (DART Police), Dr. Jennifer Gonzalez (MMHPI), Erica McDaniel (Commissioner Daniel's Office), and Mr. Michael Noyes (UNT Dallas)

Reports:

Deflection Center Operational Update

- Dave Hogan reported that on that day they had 3 clients brought into the Deflection Center, all by different officers, which is growth.
- The Deflection Center has had a total of 16 drop-offs from August 8th to date. It has been a slow opening, but they anticipate continued growth and traffic as the LEAs are getting trained and becoming more familiar.
- Dave shared that a staffing is now taking place to address issues that arise to help with quick problem solving, and to address difficult cases. This will aid with making revisions and inclusions to the operations manual.
- Dave is planning on meeting with the Southwest Law Enforcement Coalition. This includes the cities of DeSoto, Duncanville, Glenn Heights, and Lancaster. He will also be meeting with the eastern side of the county to meet with the coalition comprised of Balch Springs, Sunnyvale, and Mesquite. He will then target northern LEAs.
- Dave shared that while the downtown Dallas DPD stations have been trained, he will be doing a follow-up with them.
- Dave presented on the Deflection Center with the Dallas County Criminal Justice Advisory Board (CJAB) on September 19th.
- Ron Stretcher shared that the first case staffing meeting was productive and helped highlight and address some unanticipated areas. Ron highlighted that of the 16 individuals dropped off, 62% connected to services, which is a positive success rate so far.

LEA Training/Outreach

- Lt. Igo inquired about how many individuals have been dropped off from the DPD southern divisions, and she shared that training will continue.
- Lt. Collins with DART shared that the DART PD northern and southern divisions have been trained on the Deflection Center.
- Julie Turnbull inquired if the Dallas County Hospital District Police have been trained and Dave shared that he did train them. They have not completed any drop-offs yet.

Parkland Status

- Kyla Rankin stated that Parkland staff at the Deflection Center they are still working out some aspects to their operations that have come up since opening, but all has been going well. She reported that Parkland is ready for an increased volume to the Deflection Center clinic.

NTBHA Status

- Chad Anderson reported that Ashley Rader has been the point person with staffing various Deflection Center cases. He shared that NTBHA has aided in referring to housing and other services.
- He stated NTBHA staff is doing well and they will have additional staff onboarding to help as well.

Dallas Collection Status

- Ron Stretcher that Dr. Gonzalez with MMHPI are needing data from NTBHA to continue to do their research. Chad Anderson shared that Jessica Martinez is working on it.

- Marsha Edwards shared about the data they are capturing and a meeting with Dr. Gonzalez, NTBHA, and Homeward Bound would be beneficial to ensure all the data that is needed is being captured.

The next Dallas County Deflects planning meeting will be held on Monday, October 10th from 2:00-3:00pm via Teams.

BHLT MEETING

SUPPLEMENTAL PACKET

OCTOBER 13, 2022

Report(s):

Dallas County Deflection Center

