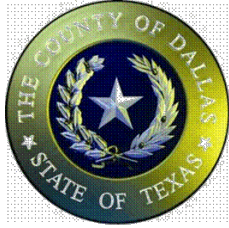


Dallas County Behavioral Health Leadership Team
Thursday, February 8, 2024
9:30am -11:00am
In-Person & Virtual Meetings via Microsoft Teams

- I. Welcome and Call to Order
 - Review/Approval of January 11, 2024, 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. Dallas County Mental Health Advisory Committee Update
- VII. Legislative Update
- VIII. Funding Opportunities
 - 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: *The Cottages, 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, January 11th, 2023
<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 9:40 AM. Commissioner Price welcomed everyone and announced that the meeting was being recorded and those who continued in attendance were consenting to being recorded as a part of the open records.

The Commissioner present was Commissioner John Wiley Price. Commissioner Price entertained a motion for opening the meeting. A motion was made and seconded by another participant. The motion was unanimously passed by the committee members.

Review/Approval of Minutes

The minutes of the BHLT meeting held on Thursday November 9, 2023, were included in the meeting packet. Commissioner Price offered an opportunity for the minutes to be reviewed and approved. The minutes were approved as submitted.

Introductions

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

- Jacob Barath- Client Outreach Manager, Cenikor
- Sheree Tarver Sylva Senette, Psy. D- Dallas County Juvenile Department
- Koya Douglas- The Haven
- Gerald Patterson- Hickory Trail Hospital
- Marie Brown- Meridell Achievement Center

North Texas Behavioral Health Authority (NTBHA) Update

Carol Lucky, Chief Executive Officer, NTBHA provided the update. Ms. Lucky discussed the recent increase in medication costs. Ms. Lucky states that NTBHA has been working with their Pharmacy Management Group to assist in covering the cost of some medications that the Patient Assistance Program (PAP) does not cover due to ineligibility.

Meadows Mental Health Policy Institution (MMHPI)

Kurtis Young, MMHPI, reported the MMHPI is working with NTBHA to combine housing resources. Mr. Young reports they are looking to house 500 chronically homeless individuals in the Dallas region. Mr. Young also announced that Housing Forward has appointed Sarah Khan as

new Interim CEO.

Dallas County Behavioral Health Housing Workgroup (BHHWG)

No update provided during this meeting.

Dallas County Mental Health Advisory Committee Update

Yordanos Melake, Program Manager, Criminal Justice Department provided the update. Ms. Melake reports for the month of December, there were 2,270 magistrate orders for 16.22 screenings with 1,345 completed, 147 defendants refused screenings, 561 defendants unable to be located. The Mental Health Advisory Committee continues to meet monthly, every 2nd Tuesday of the month.

Legislative Update

Janie Metzinger, directed the committee to the Mental Health First Aid report for review and the report on Waiting Lists for Mental Health Services for Children and Adults. Ms. Metzinger discussed factors affecting the community mental health wait list and current efforts to minimize waiting lists. Ms. Metzinger reports she does not yet have interim charges from either chamber of the Texas Legislature.

Funding Opportunities Updates

• Cottages Update

Charlene Randolph, Director, Criminal Justice Department, provided the update. Ms. Randolph directed the committee to the Cottages report in the packet and states that moving forward there will be no verbal report for the Cottages however the report will remain in the monthly BHLT packet.

• SAMHSA Residential Treatment Grant Update

Shenna Oriabure, Program Manager, Criminal Justice Department, provided the update. Mrs. Oriabure reports the target number for the SAMHSA grant program has slightly reduced to 35 for the year. Mrs. Oriabure states her team is focusing on quality care and completing internal quality assurance services at each facility.

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

Lynn Richardson, Chief, Public Defender's Office provided the update. Chief Richardson reports the PD's Office received an expansion grant from the Texas Indigent Defense Commission (TIDC). Chief Richardson announced that Mrs. Vickie Rice, Mental Health, and Specialty Court Supervisor, is now Commissioner for the Judicial Commission on Mental Health. Lastly, Chief Richardson announced the PD's Office will hold a presentation at the United Methodist Church in Hamilton Park and to tune into the Deep Dive Podcast for this months new episode.

Michaela Himes, Public Defenders Office, states the Veterans Court staff are doing site visits, most recent visit being to Men of Nehemiah, an addiction recovery center. Ms. Himes discussed the recent code enforcement violations that the Veterans in the court program are having to deal with and their current struggle with finding resources to make their home habitable and safe. Lastly, Ms. Himes announced the Texas Association of

Specialty Courts (TASC) Conference in March.

Vickie Rice, Public Defenders Office, also announced the TIDC award for the mental health expansion grant to help alleviate the burden of the cost to the county. The PD's office has secured four positions with two attorneys dedicated to strategic planning. Mrs. Rice also requests information from individuals on shelter resources, transportation, and warming centers in the event of inclement weather.

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

Julie Turnbull, Chief, Restorative Justice Division, referred to the report in the BHLT packet. Mrs. Turnbull also announced that Lee Pierson, Chief of the Mental Health Division was recently interviewed on a podcast by the Texas Judicial Commission on Mental Health. The link to the podcast will be sent to the committee via email.

Upcoming Events and Notifications

- **Landy Blackmore, Hickory Trail Hospital**, announced the free screening of the new documentary, Tipping the Pain Scale. The screening will be held at the Texas Theater at 231 Jefferson Blvd on Thursday February 22.
- **Athena Trentin, Ed.D, Executive Director, NAMI North Texas** announced NAMIWalks North Texas, on Saturday May 18, 2024 at the Frisco RoughRiders Field. A link for registration and sponsorship opportunities will be sent to the committee via email.
- **Curtis Young, MMHPI**, announced the 2024 Point- In- Time (PIT) count for the night of January 25th and encouraged the committee to sign up as volunteers to help take census and engage with unhoused neighbors throughout Dallas and Collin Counties.
- **Judge La'Donna Harlan** announced the Bridging the Gap Foundation 2024 Mardi Gras Masquerade Gala on Friday, February 9th. A link for tickets and sponsorship opportunities will be sent to the committee via email.

Adjournment

Commissioner Price thanked everyone for their service. The meeting was adjourned at 10:35 a.m.

DALLAS COUNTY DEFLECTION CENTER

2023-24	23-Sep	23-Oct	23-Nov	23-Dec	24-Jan	24-Feb	24-Mar	24-Apr	24-May	24-Jun	24-Jul	24-Aug	TOTAL
TOTAL TRIAGED	24	41	25	32	56	3	0	0	0	0	0	0	181
Referral Source													
Dallas PD													0
SC Div	1	2	2	3	3								11
SW Div	2	3			1	2							8
SE Div	2	1	1	1	2								7
NC Div	1	2	1										4
NE Div	1	1	1		1								4
NW Div		1		1									2
CEN Div	1	4		2	5								12
Right Care	1												1
Dallas Marshal - CDC													0
College Campus PD	1												1
Great SW Coalition				2	1								3
SE Coalition	2	3		1	3								9
NTBHA MCOT/CTI	5	11	9	10	19								54
Garland PD				2	1								3
Irving PD	2	3											5
DART PD	3	8	11	9	20	1							52
Parkland-Baylor PD	2	2		1									5
TRIAGE OUTCOME	24	41	25	32	56	3	0	0	0	0	0	0	
Psych Crisis Residential	1			1									2
Detox-Withdrawal Mgmt													0
Living Room-NTBHA*		9			2	1							12
CMHP Services					1								1
ACT Team	3	0		2	1								6
OTHER SUD Services	2	3			1								6
Shelter													0
Austin Street			2		2								4
Bridge	1	1		1	1								4
Salvation Army		1	1		1								3
Union Gospel Mission		1											1
Other		1			1								2
Home-Family-Friends	3	4	6	8	15	1							37
Boarding Home/PSH	2	2	3	2	3								12
Higher Level of Care													0
Behavioral Health	1	2	1	2	4								10
Physical Health	1	4	2	5	6								18
Veterans Administration	2												2
APOWW or Arrest					1								1
LEA Maintained Custody	3			1	2								6
Still in Service		3	5	4	10								22
Refused Services	5	10	5	6	5	1							32

Mission Statement: The Dallas County Behavioral Health Housing Work Group (DCBHWG), 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 DCBHWG is committed to a data driven decision-making process with a focus on data supported outcomes.

ATTENDEES: Dr. Theresa Daniel, Dallas County Commissioner; Erin Moore, Dallas County; Laura Edmonds, DCCJ; Latoya Jenkins, Dallas County; Charlene Randolph, DCCJ; Ikenna Mogbo, Metrocare; Tzegabrhan Kidane, Dallas County; Jim Mattingly, LumaCorp, Inc.; Doug Denton, Homeward Bound; Thomas Lewis, Dallas County HHS; Eric McCarty, NTBHA; Tom Ervin, Dallas County; Charles Reed, Dallas County; Larry Gordon, Downtown Dallas Inc., Karina Solis, Prism Health; Renee Arnold, Dallas County

Dr. Daniel opened the meeting and attendees introduced themselves.

CALL TO ORDER: The minutes were approved with no changes.

GOVERNANCE

Dallas Area Partnership to End and Prevent Homelessness: Commissioner Theresa Daniel, Dallas County
Commissioner Daniel reported that the Partnership met this month, and they are reviewing the bylaws to determine if committees and groups of interests are duplicating services and efforts throughout the area. They are also focused on the cost and impact of homelessness and the effects it has on the community.

Dallas County Homeless Advisory Committee: Erin Moore, Dallas County

The Homeless Advisory committee met this month and discussed the trends of Covid, RSV, and flu and their impacts on the shelter communities. A sustainability plan for the eviction prevention program is being discussed due to the impending end of the ARP funding. They also discussed the recent area inclement weather and how Dallas County could assist in those efforts. There are active conversations about the Community First Village development that Dallas County has purchased land for. The county has two of the three pieces of property and is currently in the process of acquiring the third piece of land. It is being discussed that two pieces of the property are slated to be used for various types of housing and the third is to be utilized for tiny homes

Federal and State Legislative Update: Janie Metzinger, NTBHA

Janie Metzinger was unavailable for the meeting and a report will be provided at the next meeting.

RESOURCES

Shelter Discussions: Daniel Roby, Austin Street Shelter

Daniel Roby was unavailable for the meeting and will provide a report for the next meeting. Larry Gordon was able to provide an inclement weather update. He reported that around 2100 people used the inclement weather shelters between Austin Street, Uptown, and the Fair Park locations. It was estimated that the Fair Park location housed around 1600 people. Ikenna Mogbo stated that some of his clients reported that it was well organized and coordinated.

NTBHA: Eric McCarty, NTBHA

Eric McCarty reported that the TBRA (Tenant Based Rental Assistance) had \$2.1 million available statewide on November 22 and as of January 2024, the fund now has \$14,000 remaining. He stated he was able to secure funding for 16 households of which 8 are in the unit approval phase and are actively looking for housing. The COVID 19 supplemental grant is still available for those families and individuals that have a mental health or substance abuse diagnosis. A sustainability plan is a requirement for those seeking to acquire this grant.

Housing Navigator: Laura Edmonds, Dallas County

Laura Edmonds stated that the report is in the packet. The FUSE partners have resumed meetings and are currently working on the structure of the program. NTBHA is currently funding one of the Housing Navigators at Austin Street. The department is also working to see how they can join the Fuse referrals of those exiting the jail to other shelters with NTBHA's Critical Time Intervention Team. The shelters with these teams offer wrap-around services and the criminal justice department is hopeful this will aid in keeping those individuals at the shelters. Representatives from the District Attorney's and the Public Defender's Office are now on the partner calls, and they are looking forward to more collaboration from the court programs.

Commissioner Daniel observed that the FUSE numbers had decreased. Ms. Edmonds responded that the holidays and the old model that was being utilized impacted the numbers. She stated once they begin functioning under the new program structure, there should be some change of impact.

Charlene Randolph commented that the team is doing a great job of bringing all stakeholders to the table to gain their insight. She also stated that they are always looking for new funding sources that may become available and Kim is currently looking at those to expand the housing initiative.

Catholic Charities St. Jude: Laura Edmonds, Dallas County

An update on the St. Jude openings will be provided at the next meeting, but it is believed that if a vacancy exists, it is only one opening. Charlene Randolph reported that Dallas County has 13 spots at the Webb Chapel and Forest location. Thomas Lewis reported that Dallas County Housing has about 40 slots at the same location. He commended the relationship between Catholic Charities and Dallas County Housing Authority.

Commissioner Daniel noted that St. Jude will be opening a third housing program through the Catholic Charities Housing Initiative, the Vantage Point, this spring. There is also some discussion of Catholic Charities expanding their facility on Coit by potentially building a five-story facility in the parking lot.

Homeless Jail Dashboard: Kimberly Rawls, Dallas County

Kimberly Rawls was not available for the meeting and an update will be provided at the next meeting

Housing Authority Report: Thomas Lewis, Dallas County HHS

Thomas Lewis reported on the partnership Dallas Housing Authority has with Housing Forward. They have allocated 100 housing choice vouchers for permanent supportive housing for homeless individuals. They received their first referral group of five and are looking to establish the contracts within this month. 15 more individuals have been referred and they are hoping to have vouchers in hand for them by the end of the month. He expects that by the end of the year the housing authority will have met their contractual obligation and will have all 100 vouchers used and those individuals housed. Ikenna Mogbo noted that since receiving the unsheltered grant from HUD, it has been slow getting the individuals through the process and housed. He believes that because this grant is new, the execution of getting the partners and all entities involved seems to be the challenge.

In response to agencies worrying that they are duplicating services, Mr. Thomas believes that although many work in the area of homelessness, each agency provides their own unique attributes and brings different expertise to the service area.

CARES Act/ARPA Funds: Charles Reed, Dallas County

Charles Reed reported that the obligation deadline for the ARPA funding is coming up at the end of this year. Dallas County has obligated all of the funding except for the broadband investment project. The county is still working with the contracted non-profits whose contracts go through until the end of 2024. The county is wrapping up its ARPA funding and looking at what will happen in the next couple of years as it relates to the funding. The county will go through the right sizing process of the nonprofit's budget for the next 90 days to determine if any savings are available.

PROJECTS AND INDUSTRY UPDATES

Housing Forward updates: David Gruber, Housing Forward

David Gruber provided a report that is available in the packet.

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

Laura Edmonds reported that the Criminal Justice department assisted with 41 facilitated jail releases in the month of January. The 1622 project is completing about 1,200 assessments a month. The department continues to facilitate assessments for first time felony offenders who are eligible for the pre-trial diversion program with 88 assessments being completed in December.

Dallas Connector: Daniel Roby, Austin Street

Daniel Roby was unavailable for the meeting and a report will be provided at the next meeting. Larry Gordon reported that the Connector worked really well picking up at multiple locations during inclement weather days.

Homeward Bound: Doug Denton, Homeward Bound

Doug Denton reported that the crisis residential center stays at capacity level. The Deflection Center has ended the three-year Department of Justice grant that was the catalyst funding for their security, Clinical Director, and evaluation. The Criminal Justice department had a meeting on Monday and reported that of those individuals that had law enforcement involvement, over 70% received services provided. NTBHA reported that 80% of those engaged in the Deflection Center had a mental health provider follow up within 7-14 days. With the end of the funding from the Department of Justice, they are now able to expand their access. Work is being done with NTBHA's MCOT (Mobile Crisis Outreach Team) in which NTBHA's team works with the DPD dispatch center intercepting calls and deploying the MCOT team to diversion issues. In doing this, it has aided in the Deflection Center receiving clients. The newest partner with the Deflection Center is DART. They have a new care team assessing issues on the trains and at the bus and train stops to identify potential clients that may need the assistance provided by the Deflection Center. They are also in the process of recruiting overnight staff and in doing so, they are contracting off-duty police officers with mental health training to work the overnight hours. The officers are working in conjunction with staff to be at the facility from 11:00 pm-7:00 am. This is in response to the beta testing of the 24/7 presence at the facility. Currently, they are in conversations with a DPD lieutenant to come up with a work around to divert more people from the jail.

Youth Housing: Josh Cogan, Youth 180

Josh Cogan provided a report that is available in the meeting packet.

Family Housing: Ellen Magnis, Family Gateway

Ellen Magnis provided a report that is available in the meeting packet. Commissioner Daniel observed that the family impacted by homelessness numbers have plateaued from 2023 to 2024. Ikenna Mogbo reported that he believes the reason for the plateau may be that more people have been diverted from long term supportive housing.

Mattingly Report: Jim Mattingly, Lumacorp

Jim Mattingly stated that his report is in the packet. In 2023 the market saw a lot of new multi-family apartments delivered. 32,000 apartments were delivered and of those only 8,000 were occupied. According to the ALN Apartment database, 39,000 apartments will be delivered in 2024 with an average of 13,000 apartments per quarter. It is also projected that next year will be more of the same, more units being delivered than those being occupied. As a result of this, rental rates are expected to decrease. Newly built apartments are vacant due to this stress in the market. The average rental rates for new properties range from \$980 to \$1600.

There are 330 properties in the DFW area that are designated as affordable housing properties, and their occupancy is at 91%. In a year or more, there will be a drop off of new construction properties due to factors such as increased interest rates, declining rental rates, and increased costs. There was discussion of whether private and public funding could collaborate to buy some of the available properties and work together to make more affordable housing. Commissioner Daniel stated that Dallas County is engaged in those conversations with 20 projects already in the works.

The meeting was adjourned with words of motivation by staying engaged and informed by Dr. Daniel.

Next Meeting: February 28, 2024



Texas Health and Human Services Commission Report All Texas Access Report FY 2023 Update

Link to Texas Health and Human Services Commission (HHSC) 2023 All Texas Access Program Report:
<https://www.hhs.texas.gov/sites/default/files/documents/all-texas-access-report-dec-2023.pdf>

Legislative History

All Texas Access is an ongoing initiative created by the Texas Legislature to improve rural access to behavioral health services through data collection and regional collaborations.

- 86th Legislature-[SB 633](#)
 - Please see page 16, below, for summary of SB 633 from NTBHA 2019 Legislative Report.
- 87th Legislature-[SB 454](#)
 - Please see page 17, below, for summary of SB 454 from the NTBHA 2021 Legislative Report.
- Link to 2022 All Texas Access Program Report:
<https://www.hhs.texas.gov/sites/default/files/documents/all-texas-access-report-dec-2022.pdf>

Legislative Directives

The Legislature directed HHSC to focus on costs to local governments in rural areas for:

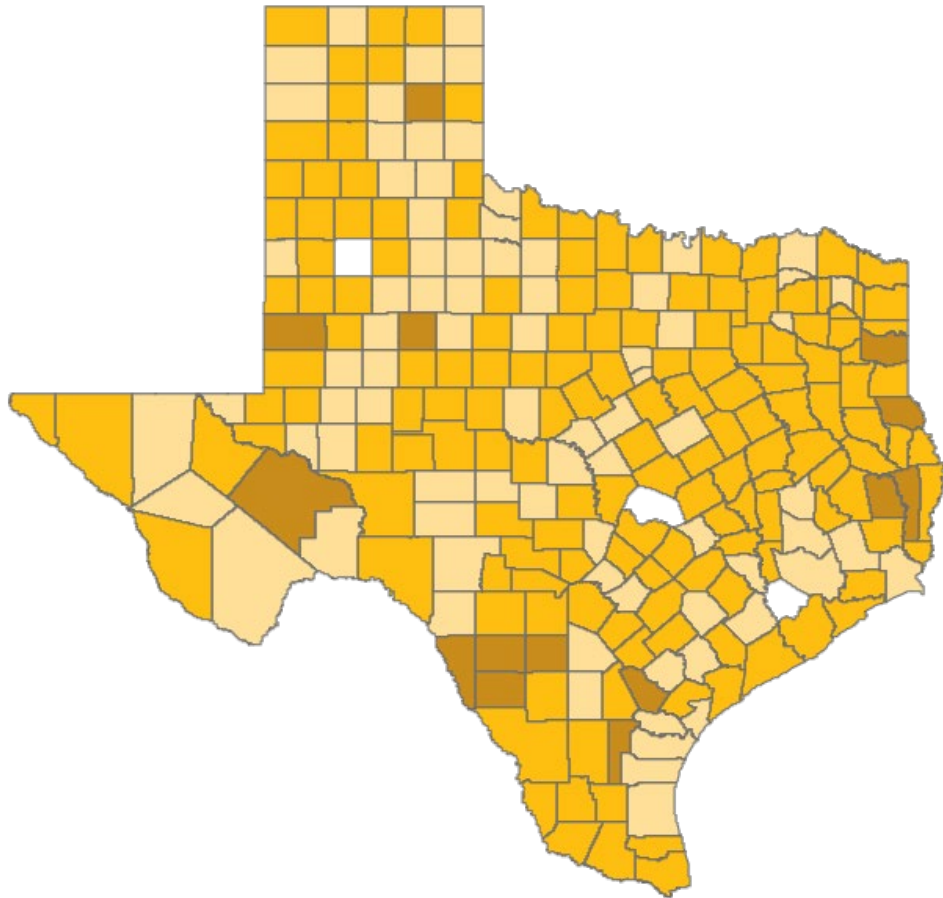
- **Behavioral health services** to people with mental illness residing in rural counties.
- **Transportation** for people served by LBHA/LMHAs to mental health facilities.
- **Incarceration** of people with mental illness in county jails.
- **Hospital emergency room visits** by people with mental illness.

Rural Mental Health p. 3-5

- HHSC created the Rural Mental Health Unit to implement the All Texas Access initiative and to:
 - Connect rural Texans with regional and statewide behavioral health providers.
 - Link rural behavioral health providers with local and national expertise.
 - Develop relationships among various behavioral health providers.
 - Elevate perspective of rural behavioral health providers to state policymakers.
 - Continue the work of All Texas Access.
- HHSC's Rural Mental Health Unit works closely with DSHS Office of Public Health Policy and the Texas Department of Agriculture's State Office of Rural Health as well as University of Texas, Stephen F. Austin University, Texas Tech University, and Texas A & M University.
- Of the 254 counties in Texas, only three of them are not designated as mental health professional shortage areas. These three are Fort Bend County, part of Lubbock County, and Williamson County. Please see map on page 2 of this report.
Link: <https://experience.arcgis.com/experience/323d93aa45fd43e88515cdf65365bf78/page/Page-1/?views=Mental-HPSA>
- Workforce shortages continue in state- and private psychiatric hospitals, limiting their capacity to run at full capacity.

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

Mental Health Professional Shortage Counties in Texas



Link to DSHS Mental Health Professional Shortage Areas:

<https://experience.arcgis.com/experience/323d93aa45fd43e88515cdf65365bf78/page/Page-1/?views=Mental-HPSA>

This map depicts the Mental Health Professional Shortage Areas as defined by the National Health Service Corps to determine its priority areas. Counties are scored on several factors:

- Population-to-Provider ratio (7 points maximum).
- Percentage of population below 100% Federal Poverty Level (FPL) (5 points maximum).
- Elderly Ratio-percentage of people over age 65 (3 points maximum).
- Youth Ratio-percentage of people under age 18 (3 points maximum).
- Alcohol abuse prevalence (1 point maximum).
- Substance abuse prevalence (1 point maximum).
- Travel time to nearest source of care outside the Health Professional Shortage Area. (5 points max).
- Maximum score is 25.

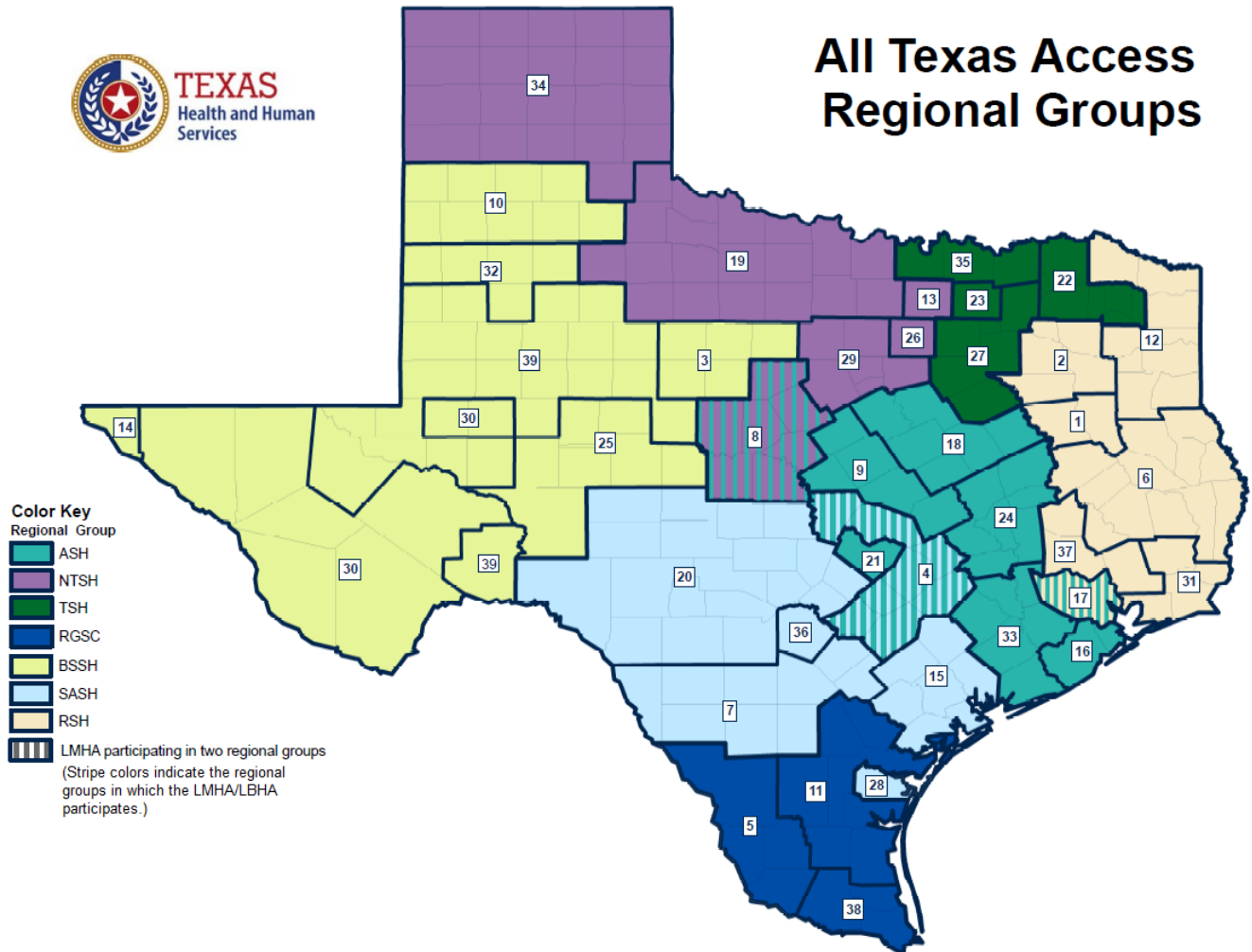
No shortage	Score of 0-13	Score of 14-17	Score of 18-25
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All Texas Access Regions, LBHA/LMHAs and Counties

For the purposes of the All Texas Access project, HHSC divided Texas into seven regions centered on the rural catchment areas of legacy Texas State Hospitals. NTBHA is included in the region served by Terrell State Hospital, which also includes Lakes Regional LBHA and Texoma Community Centers LBHA. The Terrell State Hospital is shaded in dark green on the map below. All LBHAs and LMHAs included in All Texas Access serve at least one county with a population of 250,000 or less. All NTBHA counties with the exception of Dallas County meet this requirement.

LBHA/LMHAs that serve only urban counties, such as Bexar, Collin, Denton, Harris, Tarrant and Travis Counties are included as *ex officio* members in the regional group of their catchment regions.

All Texas Access Regions Map



All Texas Access Regions, LBHA/LMHAs and Counties-continued

Austin State Hospital (ASH) Region: LMHAs and Counties

Bluebonnet Trails (part): *Bastrop, Burnet, Caldwell, Fayette, Gonzales, Guadalupe, Lee and Williamson.*

Brazos Valley: *Brazos, Burleson, Grimes, Leon, Madison, Robertson and Washington Counties.*

Center for Life Resources (part): *Brown, Coleman, Comanche, Eastland, McCulloch, Mills, San Saba.*

Central Counties: *Bell, Coryell, Hamilton, Lampasas and Milam Counties.*

Gulf Coast: *Brazoria and Galveston Counties.*

Harris Center: (part): *Harris County (urban-ex officio).*

Heart of Texas: *Bosque, Falls, Freestone, Hill, Limestone and McLennan Counties.*

Integral Care: *Travis County (urban-ex officio).*

Texana: *Austin, Colorado, Fort Bend, Matagorda, Waller and Wharton Counties.*

Big Springs State Hospital (BSSH) Region LMHAs and Counties

Betty Hardwick: *Callahan, Jones, Shackelford, Stephens and Taylor Counties.*

Central Plains: *Bailey, Briscoe, Castro, Floyd, Hale, Lamb, Motley, Parmer and Swisher Counties.*

Concho Valley: *Coke, Concho, Crockett, Irion, Reagan, Sterling and Tom Green Counties*

Emergence: *El Paso County.*

PermianCare: *Brewster, Culberson, Ector, Hudspeth, Jeff Davis, Midland, Pecos and Presidio Counties.*

StarCare: *Cochran, Crosby, Hockley, Lubbock and Lynn Counties.*

West Texas Centers: *Andrews, Borden, Crane, Dawson, Fisher, Gaines, Garza, Glasscock, Howard, Kent, Loving, Martin, Mitchell, Nolan, Reeves, Runnels, Scurry, Terrell, Terry, Upton, Ward, Winkler and Yoakum Counties.*

North Texas State Hospital (NTSH) Region LMHAs and Counties

Center for Life Resources (part): *Brown, Coleman, Comanche, Eastland, McCulloch, Mills and San Saba.*

Denton County MHMR Center: *Denton County (urban-ex officio).*

Helen Farabee Centers: *Archer, Baylor, Childress, Clay, Cottle, Dickens, Foard, Hardeman, Haskell, Jack, King, Knox, Montague, Stonewall, Throckmorton, Wichita, Wilbarger, Wise and Young Counties.*

Tarrant County My Health My Resources: *Tarrant County (urban-ex officio).*

Pecan Valley: *Erath, Hood, Johnson, Palo Pinto, Parker, and Somervell Counties.*

Texas Panhandle: *Armstrong, Carson, Collingsworth, Dallam, Deaf Smith, Donley, Gray, Hall, Hansford, Hartley, Hemphill, Hutchison, Lipscomb, Moore, Ochiltree, Oldham, Potter, Randall, Roberts, Sherman and Wheeler Counties.*

Rio Grande State Center (RGSC) Region LMHAs and Counties

Border Region Behavioral Health Center: *Jim Hogg, Starr, Webb and Zapata Counties.*

Tropical Texas: *Cameron, Hidalgo and Willacy Counties.*

Rusk State Hospital (RSH) Region LMHAs and Counties

ACCESS: *Anderson and Cherokee Counties.*

Andrews Center: *Henderson, Rains, Smith, Van Zandt and Wood Counties.*

Burke Center: *Angelina, Houston, Nacogdoches, Newton, Polk, Sabine, San Augustine, San Jacinto, Shelby, Trinity and Tyler Counties.*

Community Healthcare: *Bowie, Cass, Gregg, Harrison, Marion, Panola, Red River, Rusk and Upshur.*

Harris Center (part): *Harris County (urban-ex officio).*

Spindletop Center: *Chambers, Hardin, Jasper, Jefferson and Orange Counties.*

Tri-County: *Liberty, Montgomery and Walker.*

San Antonio State Hospital (SASH) Region LMHAs and Counties

Bluebonnet Trails (part): *Bastrop, Burnet, Caldwell, Fayette, Gonzales, Guadalupe, Lee and Williamson.*

Camino Real: *Atascosa, Dimmit, Frio, La Salle, Karnes, Maverick, McMullen, Wilson and Zavala.*

Coastal Plains: *Aransas, Bee, Brooks, Duval, Jim Wells, Kenedy, Kleberg, Live Oak and San Patricio.*

Gulf Bend: *Calhoun, DeWitt, Goliad, Jackson, Lavaca, Refugio and Victoria Counties.*

Hill Country: *Bandera, Blanco, Comal, Edwards, Gillespie, Hays, Kendall, Kerr, Kimble, Kinney, Llano, Mason, Medina, Menard, Real, Schleicher, Sutton, Uvalde and Val Verde Counties.*

Nueces Center: *Nueces County (urban-ex officio).*

Center for Health Care Services: *Bexar County (urban-ex officio).*

Terrell State Hospital (TSH) Region LMHAs and Counties

Lakes Regional: *Camp, Delta, Franklin, Hopkins, Lamar, Morris and Titus Counties*

LifePath: *Collin (urban-ex officio).*

North Texas Behavioral Health Authority (NTBHA)

Dallas, Ellis, Hunt, Kaufman, Navarro and Rockwall.

Texoma Community Centers: *Cooke, Fannin and Grayson Counties.*

2023 All Texas Access Priority Projects:

- Enhance the Workforce-Peer Support Learning Collaboratives.
- Identify Priorities-Community Engagement Pilot Project.
- Tracking Outcomes-LBHA/MHA Jail Diversion Strategies.

Enhancing the Workforce: Peer Support Learning Collaborative p. 5-6

- Six LMHAs participated in the FY 2023 Peer Support Learning Collaborative:
 - (ACCESS) LMHA.
 - Burke Center LMHA.
 - Community Healthcore LMHA.
 - Gulf Bend Center LMHA.
 - Helen Farabee Centers LMHA.
 - Hill Country LMHA.
- Peer Support Learning Collaborative worked with HHSC and a consultant to develop best practices for hiring, retaining and supervising peer support specialists.
- FY 2024 Peer Support Learning Collaborative will include five new LMHAs:
 - Center for Life Resources LMHA.
 - Central Counties LMHA.
 - Lakes Regional LMHA.
 - Pecan Valley Centers LMHA.
 - StarCare Specialty Health System LMHA.
- HHSC's goal is to mitigate some of the challenges posed by mental health workforce shortages.

2023 All Texas Access Priority Projects-continued

Identifying Priorities: Community Engagement Pilot Project p. 7-32.

- Five LMHAs that had some of the counties with the highest per-capita use of HHSC-funded crisis services participated in the 2022 Community Engagement Pilot Project. Not all of the counties served by each LMHA were included in this pilot. The counties that participated are listed after the name of the participating LMHA.
 - ACCESS LMHA-Anderson and Cherokee Counties.
 - Bluebonnet Trails LMHA-Bastrop, Fayette, Gonzales, and Lee Counties only for this pilot project.
 - Burke Center LMHA-Angelina, Houston, Nacogdoches, Newton, Polk, Sabine, San Augustine, San Jacinto, Shelby, Trinity, and Tyler Counties.
 - Spindletop Center LMHA-Chambers, Hardin, Jefferson, Orange Counties.
 - Tropical Texas Center LMHA-Cameron, Hidalgo and Willacy Counties.
- Eight rural-serving philanthropic organizations assisted HHSC in connecting with communities in the above counties and shared the results which the organizations may use to make funding decisions. The philanthropies were:
 - Episcopal Health Foundation.
 - Fayette Community Foundation.
 - Hogg Foundation for Mental Health.
 - Methodist Healthcare Ministries.
 - St. David's Foundation.
 - Stanzel Family Foundation.
 - T.L.L. Temple Foundation.
 - Valley Baptist Legacy Foundation.
- HHSC conducted focus groups and interviews with individuals in community organizations, health clinics, food banks, schools and libraries.
- HHSC conducted a community survey in English and Spanish on stress and mental wellness.
- HHSC states its findings are not scientifically valid or based on a reliable research method.
 - Bluebonnet Trails LMBH regional findings for Bastrop, Fayette, Gonzales and Lee counties are on pages 12 through 16 of the report.
 - ACCESS LMHA regional findings for Anderson are on pages 18 through 21 of the report.
 - Burke Center LMHA regional findings are on pages 21 through 23 of the report.
 - Spindletop Center LMHA regional findings are on pages 24 through 27 of the report.
 - Tropical Texas LMHA region findings are found on pages 28 through 31 of the report.
- Medicaid managed care organizations (MCOs) offer mileage reimbursement, health literacy programs, navigators to assist Medicaid beneficiaries in finding local resources. They aim to work with colleges and universities to address workforce shortages.
- Bastrop County, the counties served by the Burke Center and the counties served by Tropical Texas have opted out of further community engagement efforts with HHSC's Rural Mental Health Unit due to other current initiatives and priorities in those LMHA areas.
- In September, 2023, HHSC initiated community engagement projects in the San Antonio State Hospital Region with Llano and Blanco Counties (served by Hill Country LMHA) and Burnet County, (served by Bluebonnet Trails LMHA).

2023 All Texas Access Priority Projects-continued

Tracking Outcomes-LBHA/MHA Jail Diversion Strategies and Other Grants.-p. 32-34.

The report noted that LBHA/LMHAs are resourceful in seeking non-state funded grants to address community needs, particularly in the areas of housing and homelessness, prevention and education, veterans’ services, and substance use services.

All Texas Access Implementation—Regional Group Reports-p.35-49.

All Texas Access Regional Costs to Local Governments

Mental Health Services—Transportation—Incarceration—Hospital Emergency Rooms

Austin State Hospital Region	Big Springs State Hospital Region	North Texas State Hospital Region	Rio Grande State Hospital Region	Rusk State Hospital Region	San Antonio State Hospital Region	Terrell State Hospital Region
Mental Health Services						
Estimated Cost to Local Governments to Care for Adults with a mental health condition, under 200% of Federal Poverty Level, FY 2023 by regional group. p. 39						
\$12.9 M	\$6.4 M	\$5.6 M	\$8 M	\$12.8 M	\$6.3 M	\$3 M
Estimated Cost to Local Governments to Care for Youth with a mental health condition, under 200% of Federal Poverty Level, FY 2023, by regional group. p. 39						
\$2.4 M	\$1.2 M	\$1 M	\$1.7 M	\$2.2 M	\$1 M	\$0.5 M
Statewide, the cost to care for adults and youth with a mental health condition under 200% FPL rose from \$220 per person in FY 2022 to \$244.20 per person in FY 2023. p. 40.						
Transportation by Law Enforcement to a State-Funded Crisis Facility						
The following figures do not include forensic state hospital admissions.						
Statewide, the number of people in crisis transported by law enforcement officers to a facility for state-funded crisis care increased from approximately 19,159 individuals in FY 2022, to a forecasted 22,996 individuals in FY 2023. p. 41.						
Statewide, estimated costs to local governments for law enforcement to transport individuals in crisis to a state-funded crisis facility was \$13.7 million in FY 2022 and was \$16.2 million in FY 2023. p.42.						
Estimated Cost of Transportation per Incident by regional group. p.43,						
\$973	\$1,075	\$1,151	\$928	\$948	\$1,056	\$866
Incarceration						
Statewide, the number of incarcerated people with a mental health condition grew from 48,911 in the first quarter of FY 2023 to 62,273 in the fourth quarter of FY 2023. p. 44.						
Statewide, the estimated incarceration costs for people with a mental health condition rose steadily each quarter from approximately \$64.9 million in the first quarter of FY 2023 to approximately \$68.1 million in the fourth quarter of FY 2023. p.45.						

Hospital Emergency Room Visits

Statewide, the estimated number of visits to hospital emergency rooms for a mental health condition in FY 2023 varied from quarter to quarter, dipping somewhat in Quarter 2 and Quarter 3 before increasing significantly in Quarter 4. p. 46.

FY 2023-Q1: 76,885

FY 2023-Q2: 73, 017

FY 2023-Q3: 74,501 (forecasted)

FY 2023-Q4: 82,115 (forecasted)

Estimated Emergency Room Charges per Event by Regional Group. p. 47.

Austin State Hospital Region	Big Springs State Hospital Region	North Texas State Hospital Region	Rio Grande State Hospital Region	Rusk State Hospital Region	San Antonio State Hospital Region	Terrell State Hospital Region
\$2,733	\$3,441	\$1,837	\$4,496	\$3,420	\$3,420	\$2,132

Total Estimated Transportation + Emergency Room Charges per Event by Regional Group
Data from p. 43 + Data from p. 47-48.

\$973	\$1,075	\$1,151	\$928	\$948	\$1,056	\$866
<u>\$2,733</u>	<u>\$3,441</u>	<u>\$1,837</u>	<u>\$4,496</u>	<u>\$3,096</u>	<u>\$3,420</u>	<u>\$2,132</u>
= \$3,706	= \$4516	= \$3,388	= \$5,424	= \$4,044	= \$4,476	= \$2,998

Bed Capacity-Data from each All Texas Access Regional Report

Austin State Hospital (ASH)-p 61

Type of Bed	Current Number of Beds	Number of Beds Projected in 2 Years	Number of Beds Needed in 2 Years
Crisis Residential	26	28	42
Crisis Respite	58.4	66.4	90.4
Extended Observation	21	21.6	39.4
Other Respite	6	6	6
Step Down	12.8	16	17.6
Community Mental Health Hospital	0	0	0
Crisis Stabilization	0	0	0
Private Psychiatric Beds	44.4	39	60.2

Big Springs State Hospital (BSSH)-p.71

Type of Bed	Current Number of Beds	Number of Beds Projected in 2 Years	Number of Beds Needed in 2 Years
Crisis Residential	0	0	22
Crisis Respite	40	40	50
Extended Observation	4	0	32
Other Respite	1	1	1
Step Down	0	0	50
Community Mental Health Hospital	32	45.5	46
Crisis Stabilization	1.3	0.8	1.3
Private Psychiatric Beds	31.25	34.25	53.25

Bed Capacity-continued

North Texas State Hospital (NTSH)-p.82

Type of Bed	Current Number of Beds	Number of Beds Projected in 2 Years	Number of Beds Needed in 2 Years
Crisis Residential	0	0	8
Crisis Respite	46	46	62
Extended Observation	0	0	3
Other Respite	0	0	0
Step Down	6	6	6
Community Mental Health Hospital	0	0	0
Crisis Stabilization	0	0	10
Private Psychiatric Beds	15.3	15.6	16

Rio Grande State Center (RGSC)-p.89

Type of Bed	Current Number of Beds	Number of Beds Projected in 2 Years	Number of Beds Needed in 2 Years
Crisis Residential	0	0	0
Crisis Respite	5	5	5
Extended Observation	0	0	0
Other Respite	0	0	0
Step Down	0	0	0
Community Mental Health Hospital	0	0	0
Crisis Stabilization	10	16	16
Private Psychiatric Beds	31.7	31.2	31.2

Rusk State Hospital (RSH)-p. 99

Type of Bed	Current Number of Beds	Number of Beds Projected in 2 Years	Number of Beds Needed in 2 Years
Crisis Residential	42	34	34
Crisis Respite	11	11	19
Extended Observation	14	9	9
Other Respite	0	0	0
Step Down	0	0	8
Community Mental Health Hospital	14	14	24
Crisis Stabilization	0	27	42
Private Psychiatric Beds	36	33	37

Bed Capacity-continued

San Antonio State Hospital (SASH)-p.109

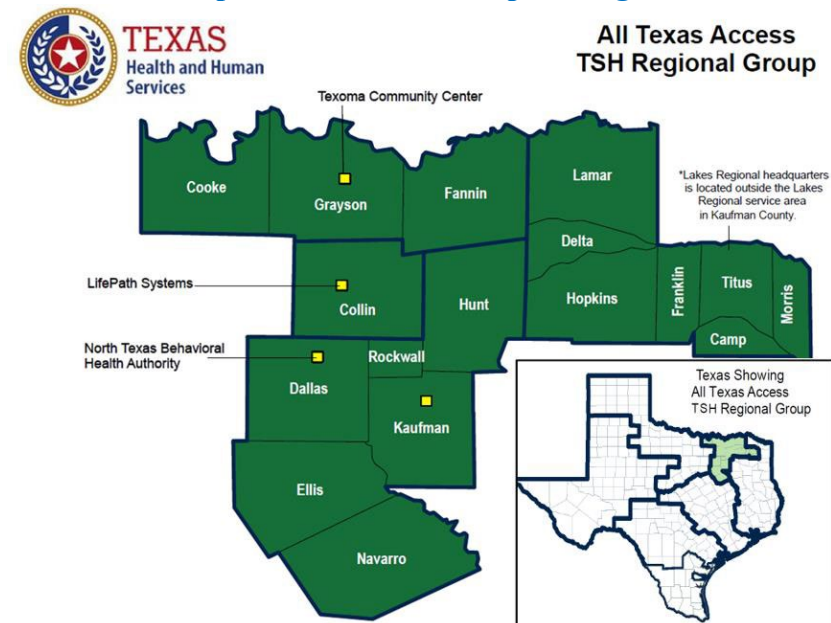
Type of Bed	Current Number of Beds	Number of Beds Projected in 2 Years	Number of Beds Needed in 2 Years
Crisis Residential	32	16	52
Crisis Respite	16.9	18.9	20.9
Extended Observation	2	4.4	17.6
Other Respite	32	16	32
Step Down	3.2	4	4.4
Community Mental Health Hospital	0.2	0.2	0.2
Crisis Stabilization	16	16	16
Private Psychiatric Beds	15.4	18.3	32.9

Terrell State Hospital (TSH) p. 116

Type of Bed	Current Number of Beds	Number of Beds Projected in 2 Years	Number of Beds Needed in 2 Years
Crisis Residential	15	15	15
Crisis Respite	22	26	26
Extended Observation	18	18	18
Other Respite	4	4	4
Step Down	0	0	0
Community Mental Health Hospital	1.3	1.3	1.3
Crisis Stabilization	0	0	0
Private Psychiatric Beds	50.2	50.2	50.2

Report on All Texas Access-Terrell State Hospital Regional Group Plan-p. 110-116

Map of Terrell State Hospital Region



Lakes Regional Community Center-LMHA

Camp County	Delta County	Franklin County
Hopkins County	Lamar County	Morris County

Accomplishments in LMHA Region Related to All Texas Access Priorities:

- Conducted a root-cause analysis of arrests and incarcerations in Franklin County Jail with students from Texas A&M-Commerce and local governments to identify community needs.
- Developed a Competency Restoration program in Hopkins County.
- Developed Drug Court programs in Hopkins and Titus Counties.
- Mobile response and crisis stabilization services in Lamar County.
- Lakes Regional was invited to serve on a panel discussion on rural mental health sponsored by Texas A&M-Commerce.
- Worked with University of Texas Health Science Center in Tyler to provide integrated primary care and behavioral health care.
- Worked with Federally Qualified Health Clinics (FQHCs).

North Texas Behavioral Health Authority-LBHA

Dallas County	Ellis County	Hunt County
Kaufman County	Navarro County	Rockwall County

Accomplishments in the LBHA Region related to All Texas Access Priorities:

- Enhanced services at the Kaufman County Bridge.
- Created Kaufman County Drop-Off Center for law enforcement to bring individuals in behavioral health crisis.
- Held Sequential Intercept Model (SIM) mapping in Hunt, Kaufman and Navarro Counties.
- In planning stages for Outpatient Competency Restoration (OCR) and Jail-Based Competency Restoration (JBKR).
- Youth-focused substance use services offered in Hunt County by Lakes Regional in its role as a NTBHA provider.
- Participated in homelessness and housing workgroups in Hunt and Kaufman Counties.
- The County Coffee House in Greenville (Hunt County) is operated by Lakes Regional in its role as a NTBHA provider. It involves peers to provide services and faith-based groups to provide meals.
- NTBHA involved the faith community in efforts such as community needs assessments and SIM mapping.
- NTBHA Care Coordinators serve in Ellis, Hunt, Kaufman, Navarro and Rockwall Counties as well as Dallas County.
- NTBHA works with Federally Qualified Health Clinics (FQHCs).

Texoma Community Center-LMHA

Cooke County

Fannin County

Grayson County

Accomplishments in LMHA Region Related to All Texas Access Priorities:

- Created a behavioral health crisis co-responder program at Sherman Police Department that partners Texoma Community Center (TCC) staff with law enforcement officers to quickly screen and respond to individuals in crisis.
- TCC is meeting regularly with Sherman PD to refine co-responder operational processes expected to launch in Autumn 2024.
- Successful Drug Court program in Fannin County.
- TCC leadership regularly meets with county law enforcement officials in Cooke County, Fannin County and Grayson County.
- TCC participated in SIM mappings in its region.
- TCC tripled the size of its forensic program.
- Increased Texas Correctional Office on Offenders with Medical or Mental Impairment Services (TCOOMMI) services.
- In the planning process to add jail-based competency restoration (JBCR).
- Texoma Community Center now provides psychiatric services in local jails, which has reduced the waiting time for medications from eight months to thirty days.
- Provides step-down services for individuals after an extended stay in an inpatient facility in Grayson County.
- Provides housing and employment outpatient services.
- Planning sober living assistance.
- Coordinates with Goodwill Industries of Grayson County for employment.
- Works with local churches and faith-based organizations to provide food, housing, transportation and other resources.
- Has a fully integrated medical and behavioral health team co-located in a TCC facility with a shared electronic health records system.

All Texas Access-Terrell State Hospital Regional Group-Bed Capacity-p. 116

Type of Bed	Current Number of Beds	Number of Beds Projected in 2 Years	Number of Beds Needed in 2 Years
Crisis Residential	15	15	15
Crisis Respite	22	26	26
Extended Observation	18	18	18
Other Respite	4	4	4
Step Down	0	0	0
Community Mental Health Hospital	1.3	1.3	1.3
Crisis Stabilization	0	0	0
Private Psychiatric Beds	50.2	50.2	50.2

Note: This chart does not include current beds at Terrell State Hospital, or the projected number of beds currently under construction for the new state hospital under construction in Dallas.

Conclusion

Many state agencies, universities and philanthropic organizations continue to work to close the gaps in rural mental health.

Gaps	Strategies to Address Gaps
Continuum of Care	All Texas Access continues initiatives to broaden the continuum between crisis and prevention, and to extend LBHA/LMHA efforts in communities.
Lack of knowledge/information re: where to access mental health care, medical care, rental assistance, other needs.	“HHSC will continue to support LMHAs and LBHAs in reaching their individual and regional goals to ensure rural Texans have access to care at the right time and place.”
Lack of prescribers of mental health medications.	“HHSC will continue to work with rural medical providers to integrate psychiatry through the new Collaborative Care Medicaid Benefit as well as through innovative practices which support primary care in providing psychiatric care, such as the Child Psychiatric Network” (CPAN).
Lack of affordable psychotherapy.	Increase in telehealth, community connections, support groups, Certified Peer Specialists and Family Partners

APPENDICES

Appendices	Item	Pages
Acronyms	Acronyms	119, 120
Appendix A	Definitions	A-1 to A-5
Appendix B	Local Champions	B-1 to B-4
Appendix C	Community Member Stress Survey of Selected LMHAs	C-1 to C-4
Appendix D	Statewide Bed Capacity Estimates	D-1 to D-5
Appendix E	Data Methodology	E-1 to E-17
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	• Breakout of LMHAs and LBHAs and Counties for ATA Metrics	E-1
	○ Exclusion Criteria	E-1
	• Estimated Cost Offsets for LMHA or LBHA Jail Diversion and Community Integration Strategies	E-2
	○ Cost to Local Governments	E-2
	○ Overview	E-2
	○ Sources	E-3
	○ Methodology	E-3, E-4
	• Limitations	E-5
	○ Statewide Average Cost	E-5
	○ Adult and Youth Populations	E-5
	○ Local Government Accounting	E-5
	○ Multiple Data Sets Used for County Population	E-5
	○ ASH Brain Health System Redesign Report	E-5
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	Travel Time	E-9
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	LMHA/LBHA Inpatient Facilities Not Funded by HHSC	E-9
	Inclusion Criteria for LMHA/LBHAs in Two Regional Groups	E-10
	Travel to ER	E-10
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	○ Overview	E-10
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Appendices-continued

Appendices	Item	Pages
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	○ Limitations	E-17
	• Footnotes	

86th Texas Legislature Summary of SB 633—Kolkhorst

SB 633—Kolkhorst (Companion: HB 1598—Lambert)—Amends Government Code 531, Subchapter B to add Section 531.0221, “Initiative to Increase Mental Health Services Capacity in Rural Areas” intended to increase capacity of **LMHA/LBHAs** in counties with population under 250,000. *(531.0221.(a) and (b) (2)).*

- By January 1, 2020, requires HHSC to identify and organize **LMHA/LBHAs** serving counties with populations under 250,000 into **regional LMHA/LBHA groups**. *531.0221 (b)*
LMHA/LBHA groups shall work together on a mental health services development plan to increase services focused on reducing: *(531.0221 (c) and (d))*
 - Cost of services provided by local governments to people in mental health crisis. *(531.0221 (d) (1))*
 - Transportation of people served by the **LMHA/LBHA** to mental health facilities. *(531.0221 (d) (2))*
 - Incarceration of persons in county jails in the **LMHA/LBHA region**. *(531.0221 (d) (3))*
 - Hospital emergency room visits by people with mental illness in the LMHA/LBHA region. *(531.0221 (d) (4))*
- In developing the plan, HHSC shall evaluate the capacity of the **LMHA/LBHAs** in each group. *(531.0221 (e) (1))*
- HHSC and the **LMHA/LBHA groups** shall evaluate whether and to what degree increasing the capacity of **LMHA/LBHAs** to provide access to needed services would offset the following costs to regional state and local governments: *(531.0221 (e) (2) (A))*
 - Transportation of persons for mental health services to facilities that are not local providers. *(531.0221 (e) (2) (A) (i))*
 - Admissions to state hospitals or other treatment facilities. *(531.0221 (e) (2) (A) (ii))*
 - Hospital emergency room visits by persons with mental illness. *(531.0221 (e) (2) (A) (iii))*
 - Incarcerations of people with mental illness in county jails. *(531.0221 (e) (2) (A) (iv))*
- HHSC and the **LMHA/LBHA** groups shall:
 - Evaluate whether available state funds or grant sources could pay for the plan. *(531.0221 (e) (2) (B))*
 - Measures necessary to align the plan with the statewide behavioral health strategic plan and the comprehensive inpatient mental health plan. *(531.0221 (e) (2) (C))*
 - Shall determine a method of increasing regional **LMHA/LBHA** capacity to provide needed services. *(531.0221 (f))*
- HHSC shall evaluate mental health services development plans to determine cost effectiveness and how each plan would improve the delivery of mental health services in its region. *(531.0221(g) (1) and (2))*
- Report due by December 1, 2020 including HHSC’s evaluation of each plan, a comprehensive statewide analysis of mental health services in counties with populations of 250,000 or less, and recommendations for the 87th Texas Legislature. *(531.0221(h))*
- Regional mental health services development plans evaluated by HHSC may be implemented if HHSC and the **LMHA group** identify a method of funding the implementation. *(531.0221(i))*
- Initiative expires on September 1, 2021. *(531.0221(j))*

Note: Ellis, Hunt, Kaufman, Navarro and Rockwall Counties have populations under 250,000.

SB 633 was signed by the Governor on June 14, 2019, effective immediately.

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 regarding this summary, please contact Sabrina Conner at sconner@ntbha.org or Janie Metzinger at jmetzinger@ntbha.org

SB 454-Kolkhorst. House Sponsor: Lambert. Extends All Texas Access
Amends Government Code 531, Subchapter B. Local Mental Health Authority Group Regional Planning.

- Makes permanent the **LBHA/LMHA regional groups** established by the 86th Legislature in SB 633.
- Requires **LBHA/LMHA regional groups** to meet quarterly to collaborate on planning and implementing regional strategies to reduce costs of:
 - Providing mental health crisis services by local governments.
 - Transportation to mental health facilities.
 - Incarceration of persons with mental illness in county jails.
 - Hospital emergency room visits for mental health.
- Directs HHSC to use federal funds to implement the **LBHA/LMHA regional groups**.
- Directs HHSC to coordinate with each **LBHA/LMHA regional group** to update the mental health services development plan annually to include:
 - Actions taken to implement regional strategies in the plan.
 - New regional strategies identified by the group to reduce targeted costs.
 - Estimated number of outpatient and inpatient beds necessary to meet regional goals.
- Report due by December 1, 2022, then annually thereafter.

SB 454 was signed by the Governor on June 4, 2021, effective immediately.

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Texas Health and Human Service Commission Report

Report on Outcomes of the Behavioral Health Partnership Program

January 2024

Link to Health and Human Services Commission (HHSC) Report:

<https://www.hhs.texas.gov/sites/default/files/documents/outcomes-of-behavioral-health-partnership-program-2024.pdf>

Legislative History

- In 2019, the 86th Texas Legislature passed HB 19 to require Local Behavioral Health Authorities and Local Mental Health Authorities (LBHA/LMHA) to employ a non-physician mental health professional as a mental health and substance use resource for school districts to be located in the Regional Education Service Center in which the LBHA/LMHA provides services.
 - The LBHA/LMHA employs the non-physician mental health professional.
 - The Regional Education Service Center provides the office space.
- In 2023, the 88th Texas Legislature amended the statute to allow LBHA/LMHAs that are unable to employ a professional who qualifies as a non-physician mental health professional, the LBHA/LMHA may request a waiver from HHSC to employ a licensed master social worker (LMSW) or a licensed professional counselor associate (LPC-A) to fill the position.
- HHSC refers to the program as the Behavioral Health Partnership Program, and to the LBHA/LMHA employee as the Behavioral Health Partnership Program liaison.

Behavioral Health Partnership Program Goals

- Support children’s mental health by education and training of Regional Education Service Center staff and school district personnel.
- Provide resources and information on mental health, trauma, grief, substance use, misuse, and prevention.
- Support initiatives to identify and share resources, increase awareness, build skills and develop effective strategies across school communities.
- Leverage the unique expertise of the LBHA/LMHAs and the Education Service Centers to improve services to students.
- Provide regionally- and locally-tailored responses to mental health needs of students particularly those identified in the aftermath of the COVID pandemic.

NTBHA’s Role

- Most NTBHA counties are served by the Region 10 Education Service Center, which is located in Dallas County, therefore, the NTBHA representative has office space there.
- Navarro County is served by Region 12, which is served by Heart of Texas LMHA, therefore NTBHA serves in a consultative capacity only.

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Liaison Activities

Liaisons in 20 Regional Education Service Centers :

- Developed relationships with Regional Education Service Centers and school districts.
- Outreach programs and training.
- Monthly newsletters to school personnel regarding mental health resources.
- Resource information to communities affected by disasters or traumatic events.
- Worked in learning collaboratives with other liaisons.
- Participated in conferences, summits and symposia related to behavioral health.
- Distributed Narcan.
- Assisted in development of TEA's Texas School Mental Health Resources database:
<https://schoolmentalhealthtxdatabase.org/>

Statewide Outcomes

LBHA/LMHAs report the activities of the Behavioral Health Partnership Program liaison to HHSC for the annual report. Statewide, there were:

- 1,124 mental health and substance use prevention resources, best practices and research-based practices were shared by the liaisons.
- 40,694 initiatives facilitated by liaisons to address mental health, substance use, misuse and prevention.
- 389 Mental Health First Aid (MHFA) trainings served 4,776 people.
- 475 trainings on grief and trauma served 20,213 people.
- 121 trainings on substance use prevention and intervention trained 8,043 people.
- 944 schools received resources from a liaison.





Texas Health and Human Services Commission Report Texas Statewide Behavioral Health Strategic Plan FY 2023 Progress Report

Link to Texas Health and Human Services Commission (HHSC) Texas Statewide Behavioral Health Strategic Plan-FY 2023 Progress Report:

<https://www.hhs.texas.gov/sites/default/files/documents/texas-statewide-behavioral-health-strategic-plan-progress-report-dec-2023.pdf>

Legislative History

- In 2015, the 84th Texas Legislature established the Statewide Health Coordinating Council in HB 1 (Zerwas), Article IX, Section 10.04, and required:
 - An informational listing of all behavioral health and substance abuse services appropriations by Article and State agency.
 - The development of a five-year statewide behavioral health strategic plan.
 - Coordination of all behavioral health expenditures with the statewide behavioral health strategic plan.
 - Initial plan was approved for 2017-2021.
- Plan was updated in 2022:
<https://www.hhs.texas.gov/sites/default/files/documents/hb1-statewide-behavioral-health-idd-plan.pdf>
- In 2023, the 88th Texas Legislature, in HB 1 (Bonnen) required an annual report on the implementation of the strategic plan.

Gaps Identified in Texas Statewide Behavioral Health Strategic Plan

- Access to appropriate behavioral health services.
- Behavioral health needs of public-school students.
- Coordination across state agencies.
- Supports for members of the armed services, veterans, and their families.
- Continuity of care for people in the criminal justice system.
- Implementation of evidence-based practices.
- Access to timely treatment services.
- Use of peer services.
- Behavioral health services for people with intellectual and developmental disabilities (IDD).
- Social determinants of health and other barriers to care.
- Prevention and early intervention services.
- Access to supported housing and employment.
- Behavioral health workforce shortage.
- Shared and usable data.

Of the fourteen gaps listed, this report focuses on behavioral health workforce shortages.

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Behavioral Health Workforce

National Landscape

According to US Substance Abuse and Mental Health Service Administration (SAMHSA), in 2021,

- 16.5 % of the US population 12 years of age or older had a substance use disorder (SUD).
- Nearly 20% (one in four) adults 18 years and older had a mental illness in the past year.
- 13.5 % of young adults aged 18 to 25 had both an SUD and a mental illness in the last year.
- The numbers cited in this portion of the report reflect any mental illness (AMI) and not Serious Mental Illness (SMI) or Serious and Persistent Mental Illness (SPMI), however, SAMHSA estimates that about 1 in 25 adults (4.2 % of the population) has an SMI in any given year.

https://www.samhsa.gov/sites/default/files/programs_campaigns/ismicc_2017_report_to_congress.pdf

US Government Accountability Office (GAO) Identified three major barriers to recruiting and retaining health care providers. <https://www.gao.gov/assets/gao-23-105250.pdf>

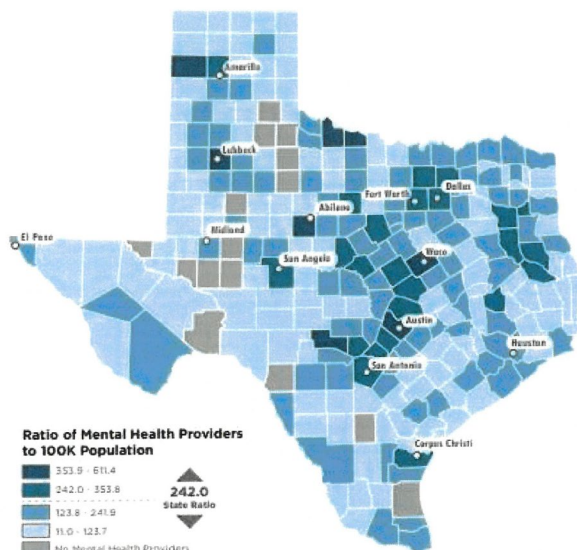
- *Financial*-Low reimbursement and compensation rates, student loan debt, low long-term earnings.
- *Educational*-Lack of pipeline for underserved populations to enter the workforce, lack of training to serve diverse populations, barriers to pursuing graduate education.
- *Workplace*-Shortage of internships and licensed professionals to supervise them. Professional isolation, limited resources, long travel distances, high workloads due to personnel shortages.

Texas Landscape

Of Texas 254 counties, 246 of them are wholly designated as a Mental Health Professional Shortage Area.

- Seven counties are partially designated as shortage areas: Bexar, Dallas, Galveston, Harris, Lubbock, Webb and Wharton Counties.
- Only Williamson County has no designated shortage areas.
- Behavioral health workforce is unevenly distributed throughout the state.
- Texas Department of State Health Services (DSHS) found that the statewide ratio of mental health providers was 242 per 100,000 people.
 - Dallas County has 242 to 353.6 providers per 100,000 people.
 - Ellis, Hunt, Kaufman, Navarro and Rockwall have 121.8 to 241.9 providers per 100,000 people.

Mental Health Provider Ratio of Texas Counties-2019—p. 10



Federal and State Financial and Policy Investments to Increase the Behavioral to Increase Behavioral Health Workforce

Legislation

- US Congress
 - Consolidated Appropriations Act of 2023 (HR 2617) expanded psychiatric programs, removed prescription restrictions for Opioid Use Disorder (OUD), improved Medicaid provider directories and gave grants for mental health peer support.
 - American Rescue Plan Act (ARPA) appropriated \$3 billion in block grants for behavioral health, \$100 million for workforce education and training
- Texas Legislature
 - Appropriated \$113 million in ARPA funds to the Texas Child Mental Health Care Consortium (TCMHCC) including: Child Psychiatry Access Network (CPAN), Texas Child Access Through Telemedicine (TCHAT), Community Psychiatry Workforce Expansion (CPWE), and supervision of residencies.
 - Funds to LBHA/LMHAs for telehealth services in shortage areas.

Loan Repayment

- Loan repayment and scholarships for providers who practice in underserved areas at least two years.
 - 80% of National Health Service Corps graduates remained in the underserved areas in which they started between 2012 and 2021.
 - Rural Community Loan Repayment Program is for rural providers serving in areas most affected by the opioid epidemic.
 - Substance Use Disorder Treatment and Recovery Loan Repayment Program (STAR LRP) offers loan repayment for direct treatment or recovery support providers in counties where the mean overdose death rate per 100,000 has been higher than the national average in the past three years.
 - US Department of Education Public Service Loan Forgiveness Program for people employed by a federal, state, local or tribal government or a qualifying non-profit organization.
 - Texas' loan repayment programs are managed by the Texas Higher Education Coordinating Board.
 - 88th Texas Legislature increased funding from \$2 million to \$14 million.
 - HB 2100 added mental health professionals employed by an LBHA/LMHA or state hospital to eligibility for Mental Health Professional Health Repayment Program.
 - SB 532 (West) reduced the number of consecutive years of practice required for loan repayment program from five years to three years, so new graduates can get their debt repaid in less time.
 - Physician Education Loan Repayment Program has assisted 298 psychiatrists since inception in 2016, an average of over 37 new applicants per year.

Extending and Building Interest in the Behavioral Health Workforce.

- Texas incorporated credentialed paraprofessionals into prevention and treatment services, including peer support specialists.
- Recruitment and retention bonuses at state hospitals.
- Increased reimbursement rate for peer support services under Texas Medicaid from \$7.58 per unit to \$11.25 per unit.
- HHSC Behavioral Health Advisory Committee has recommended that Certified Family Partners should be added as a Medicaid billable service.
- Community Health Workers assist individuals in accessing and navigating services.
- DSHS works with the Texas Conrad 30 J-1 Visa Waiver Program to allow international medical graduates to work three years full time in a Health Professional Shortage Area. Dallas and Kaufman County have benefited from mental health professionals in the area of addiction psychiatry.
- Houston-based behavioral health providers established the Behavioral Health Workforce Recruitment, Education and Development Initiative, which provides externships for high school and college students as well as scholarships to interest students in a career in behavioral health.
- Texas Education Agency working to introduce students to career paths in counseling, mental health and related services. 488 independent school districts participate, some in each NTBHA county.

Academic Efforts

- Through the Community Psychiatric Workforce Expansion, the Texas Child Mental Health Care Consortium (TCMHCC) collaborates with Texas medical schools, and community mental health providers to train residents in community psychiatry.
- Through the Child and Adolescent Psychiatry (CAP) Fellowship, the TCMHCC expands the number of training programs at Texas medical schools in an effort to reduce the number of mental health professional shortage areas. Since 2020, 118 fellows have been trained.
- UT Health Science Center-Tyler’s Mental Health Workforce Training Program has trained: 60 psychology interns, 15 post-doctoral trainees, 12 psychiatry residents.
- Baylor University’s Integrated Behavioral Health Certificate program integrates master social work graduate into primary care. 28 students received tuition and stipends.

Licensing Board Efforts—Texas Behavioral Health Executive Council (BHEC)

- Created by 86th Legislature in 2019.
- Consists of the Texas State Boards of Examiners of:
 - Marriage and Family Therapists
 - Psychologists
 - Professional Counselors
 - Social Workers
- Provides administrative services for license applications, renewals, and coordination of rules.
- Gathers statewide data for behavioral health workforce development. 2023 results are pending.

Workforce Development Strategies

- Retention
 - Reimburse telehealth, telemedicine mental health and SUD services are reimbursed at the same rate as in-person services.
 - Equal reimbursement for same services for all Medicaid behavioral health providers.
- Recruitment
 - Collaboration between TEA and ISDs to promote behavioral health careers in readiness programs.
 - Expand training, credentialing, and access to peer specialists in mental health and SUD services.
- Incentives
 - Resolve gaps identified in loan repayment programs for mental health professionals especially related to racial equity and geographic distribution.
- High School Pipeline
 - Increase collaborations between TEA, ISDs, and local hospitals or clinics to encourage volunteering, job shadowing, and entry-level employment opportunities for high school students.
 - Texas Higher Education Coordinating Board should include mental health professional careers and licenses in the Joint Admission Medical Program.
 - Form programs to allow high school students to earn a behavioral health associate degree.
- Higher Education
 - Occupational financial incentives and loan repayment assistance to provide incentives to graduates to seek employment and continue working in the publicly-funded behavioral health system.
 - Promote and explore alternate funding for loan repayment programs.
 - Offer incentives for undergraduate s to participate in programs allowing combination of undergraduate degrees and automatic admission to medical school with focus on psychiatry or behavioral health related graduate programs.
- Innovative System Improvement
 - MCOs should promote incentives to providers to integrate physical and behavioral health
 - MCOs should promote value-based contracting.
 - Promote learning communities for providers to transition from traditional care to integrated care.
- Licensure and Regulation
 - Examine scope of practice, licensing requirements, hours required for practice, supervision, continuing education, and reciprocity rules for behavioral health professions and advanced practice registered nurses.
- Medicaid Administration
 - Provide incentives to encourage behavioral health professionals to be Medicaid providers.
 - Re-examine Medicaid rates for behavioral health to reflect cost of service delivery.
 - Allow Medicaid reimbursement for services rendered by:
 - Licensed Professional Counselor-Associates (LPC-A).
 - Licensed Marriage and Family Therapist-Associates (LMFT-A).
 - Licensed Master Social Workers (LMSW) working toward advanced clinical licensure.
 - Consider incremental increases in reimbursement rates over multiple years.
 - Incentives for behavioral health providers of Medicaid services in rural/underserved areas.

Conclusion

Recent Texas actions to address workforce shortage:

- \$12 increase in the Loan Repayment Program for Mental Health Professionals.
- Expanded use of behavioral health peers and community health workers.
- Incentives for behavioral health professionals to join/remain in publicly-funded behavioral health.
- Telehealth to provide services in rural/underserved communities.
- Behavioral health career outreach to high school students
- Continued collaboration of Texas Statewide Behavioral Health Coordinating Council:

Texas Statewide Behavioral Health Coordinating Council

- Office of the Governor
- Supreme Court of Texas-Judicial Commission on Mental Health
- Texas Child Mental Health Care Consortium
- Texas Civil Commitment Office
- Texas Commission on Jail Standards
- Texas Commission on Law Enforcement
- Texas Correctional Office on Offenders with Medical or Mental Impairments (TCOOMMI)
- Texas Court of Criminal Appeals
- Texas Department of Agriculture-Office of Rural Health
- Texas Department of Criminal Justice
- Texas Department of Family and Protective Services
- Texas Department of Housing and Community Affairs
- Texas Department of State Health Services
- Texas Education Agency
- Texas Health Professions Council
- Texas Health and Human Services Commission
- Texas Higher Education Coordinating Board
- Texas Juvenile Justice Department
- Texas Military Department
- Texas Office of Court Administration-Indigent Defense
- Texas School for the Deaf
- Texas Tech University-Mental Health Initiative
- Texas Veterans Commission
- Texas Workforce Commission
- University of Texas Health Science Center-Houston
- University of Texas Health Science Center-San Antonio
- University of Texas Health Science Center-Tyler

**Department of Criminal Justice
FY2019 SAMHSA Grant Project**

	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Pending	FY2019 Total
Nexus New Female Admissions	2	0	1	2	0	2	1	6	6	5	3	25
Nexus Average Days in Jail from Referral to Admission	8	5	2	13	0	5	6.5	10	13	17		8
Homeward Bound New Male Admissions	0	2	1	3	1	0	1	1	1	1	2	11
Homeward Bound Average Days in Jail from Referral to Admission	0	4	20	5	7	0	8	10	1	20		7
Successful Completions	0	0	2	2	2	5	2	1	2	2		18
Unsuccessful Completions	0	0	0	0	0	0	0	1	3	0		4
MONTHLY SNAPSHOT OF PROGRAM REFRRALS (after treatment per grant year)												
Graduated Court Program												2
Active In Court Program												10
Active In Inpatient Treatment												15
Active in Peer Recovery Services												11
In Jail (New Charge)												2
In Jail (Bond Violation)												2
In Jail (Parole Violation)												0
TDCJ or State Jail												0
Active Warrant (Absconded)												3
REFERRING SPECIALTY COURTS												
Number of Referrals by Specialty Courts	AIM	8	DWI Misd/Felony	0	STAR	4						
	ATLAS	1	IIP	0	Veterans	0						
	Competency	0	Legacy Family	6	4-C	0						
	DDC	1	MHJD/SET	4								
	DIVERT	10	STAC	4								

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

	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June	July	Aug	Sept	FY2021 Total	FY2020 Total	FY2019T Total
Nexus New Admissions	9	2	0	0	2	2	2	1	2	0	3	0	23	26	25
Nexus Average Days in Jail from Referral to Admission	17	18	28	37	71	17	13	13	13	27	29	18	25	12	8
Homeward Bound New Admissions	2	2	1	1	1	0	0	0	0	2	1	4	14	24	11
Homeward Bound Average Days in Jail from Referral to Admission	76	75	75	101	117	119	119	119	130	51	58	69	92	79	7
RESIDENTIAL TREATMENT DISCHARGES															
Successful Completions	1	5	3	4	0	1	3	2	2	1	1	0	22	43	27
Unsuccessful Completions	0	2	0	0	0	0	1	0	0	1	1	1	7	11	3
REFERRING SPECIALTY COURTS FY2021															
Number of Referrals by Specialty Courts		AIM		5		DWI Misd/Felony		0		STAR		4			
		ATLAS		1		IIP		0		Veterans		0			
		Competency		5		Legacy Family		6		4-C		0			
		DDC		0		MHJD/SET		11							
		DIVERT		0		STAC		30							

*Homeward Bound Pending Admission: 4

*Nexus Pending Admission: 0

Department of Criminal Justice FY2024 SAMHSA Grant Project

Department of Criminal Justice FY2024 SAMHSA Grant Project																		
	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June	July	Aug	Sept	FY2028 Total	FY2027 Total	FY2026 Total	FY2025 Total	FY2024 Total	
Nexus New Admissions	0	2	2	1													5	
Nexus Average Days in Jail from Referral to Admission		7.5	10	6													7.8333	
Homeward Bound New Admissions	0	3	2	2													7	
Homeward Bound Average Days in Jail from Referral to Admission		18	36	36													30	
RESIDENTIAL TREATMENT DISCHARGES																		
Successful	0	0	1	3													4	
Unsuccessful	0	0	1	0													1	
REFERRING SPECIALTY COURTS FY2024																		
Number of Referrals by Specialty Courts			AIM	1			DWI						STAR					
			ATLAS				IIP						Veterans					
			Competency	7			Legacy Family	2					4-C					
			DDC				MHJD/SET	1										
			DIVERT	3			STAC	6										

*Homeward Bound Pending Admission: 1

*Nexus Pending Admission: 1

HARRY INGRAM														FY2024 ATLAS STATISTICS										203rd	
MONTH	BEGINNING # OF PENDING CASES	+NEW CASES RECEIVED THIS MONTH	=TOTAL CASES	TBJ	TBC	PLEAS	REV	GRADUATES	PROBATION MODIFICATIONS	DISMISSALS	OTHERS	TOTAL DISPOSITIONS	ENDING # PENDING CASES **	CURRENT ATLAS PARTICIPANTS	CURRENT PARTICIPANTS IN CUSTODY	FORMER ATLAS PARTICIPANTS	BOND								
January			0									0	0												

* PD is out of the office and is unable to submit stats.

HARRY INGRAM														FY2024 MISDEMEANOR DIVERT MENTAL HEALTH COURT STATS										CCCAP1/WADE	
MONTH	BEGINNING # OF PENDING CASES	Rediverts	+NEW CASES RECEIVED THIS MONTH	=TOTAL CASES	TBJ	TBC	PLEAS	DISMISSAL	OTHER	TOTAL DISPOSITIONS	ENDING # PENDING CASES **	CURRENT PARTICIPANTS	NUMBER OF GRADUATES	BOND***											
January				0						0	0														

* PD is out of the office and is unable to submit stats.

HARRY INGRAM														FY2024 S.E.T. STATISTICS										291st	
MONTH	BEGINNING # OF PENDING CASES	+NEW CASES RECEIVED THIS MONTH	=TOTAL CASES	TBJ	TBC	PLEAS	REV	GRADUATES	PROBATION MODIFICATIONS	DISMISSALS	OTHERS	TOTAL DISPOSITIONS	ENDING # PENDING CASES **	CURRENT PARTICIPANTS	CURRENT PARTICIPANTS IN CUSTODY	FORMER PARTICIPANTS	BOND								
January			0									0	0												

* PD is out of the office and is unable to submit stats.

January														FY2024 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	291	28	319	0	3	0	0	0	14	0	0	19	36										
L. Strather	375	26	401	0	0	9	0	1	9	0	0	6	25										

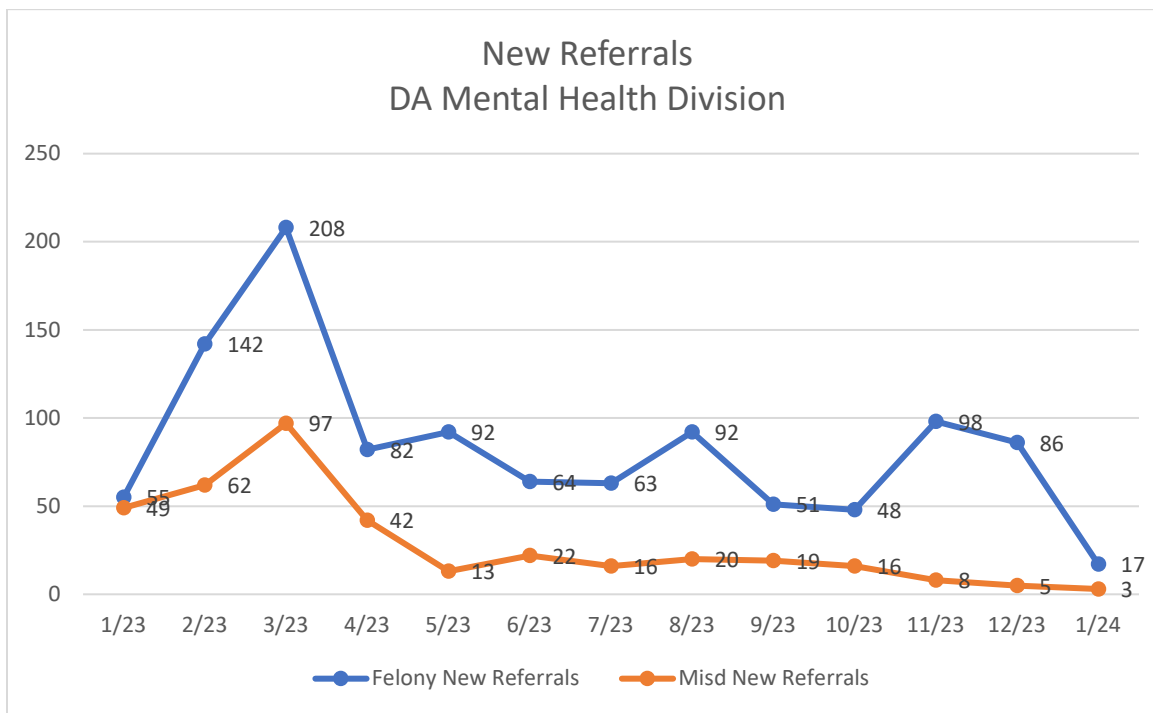
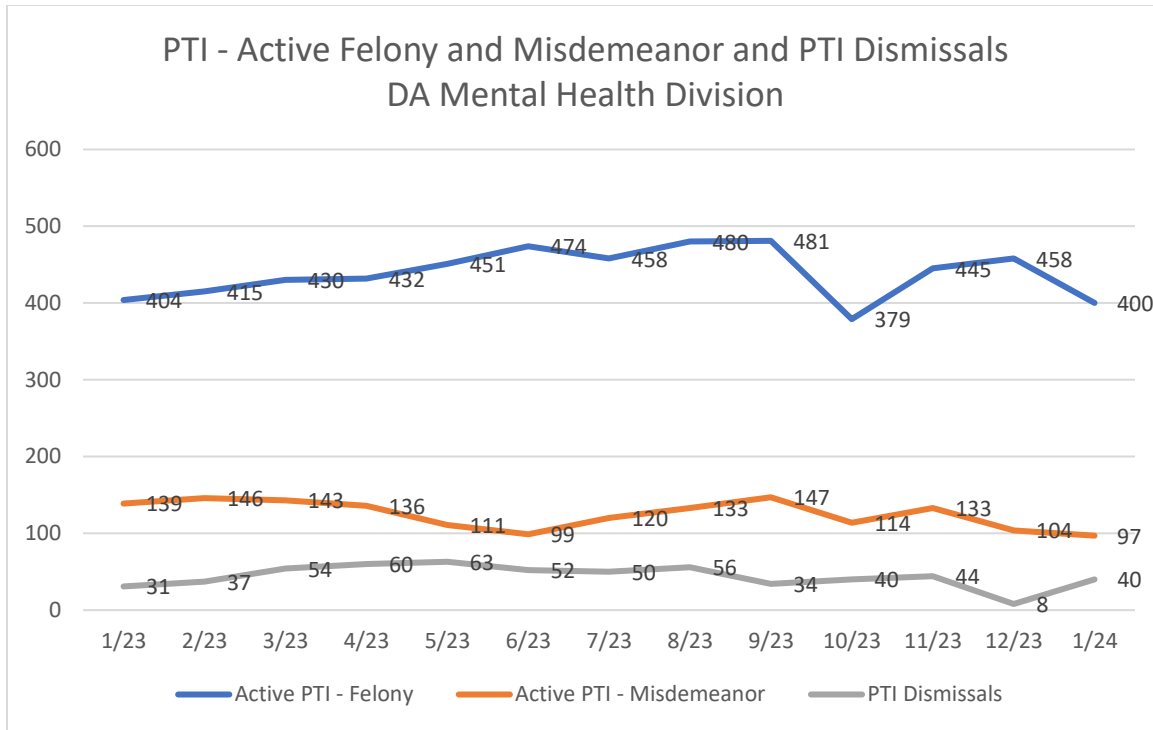
January														FY2024 FELONY COMPETENCY STATISTICS									
MONTH	BEGINNING # OF CASES	NEW CASES THIS MONTH	TBJ	TBC	Alt. Trial Dispos.	PLEAS	REVO-CATIONS	DISMISSALS	PROBATION	COMP. HRG.	EXTENSIONS	CIVIL COMMIT.	MHMR REFERRAL	CONSULTS	OTHER	ENDING # OF PEOPLE IN OCR							
M. Harden	214	18	0	0	0	2	0	1	0	7	2	0	0	0	0	17							
R. Scott	38	0	0	0	0	2	0	6	0	1	1	0	0	0	0	2							

RANDALL SCOTT														FY2024 MISDEMEANOR COMPETENCY STATISTICS									
MONTH	BEGINNING # OF CASES	NEW CASES THIS MONTH	TBJ	TBC	Alt. Trial Dispos.	PLEAS	REVO-CATIONS	DISMISSALS	PROBATION	COMP. HRG.	EXTENSIONS	CIVIL COMMIT.	MHMR REFERRAL	CONSULTS	OTHER	ENDING # OF PEOPLE IN OCR							
January	63	73	0	0	0	0	0	51	0	24	1	1	0	0	0	16							

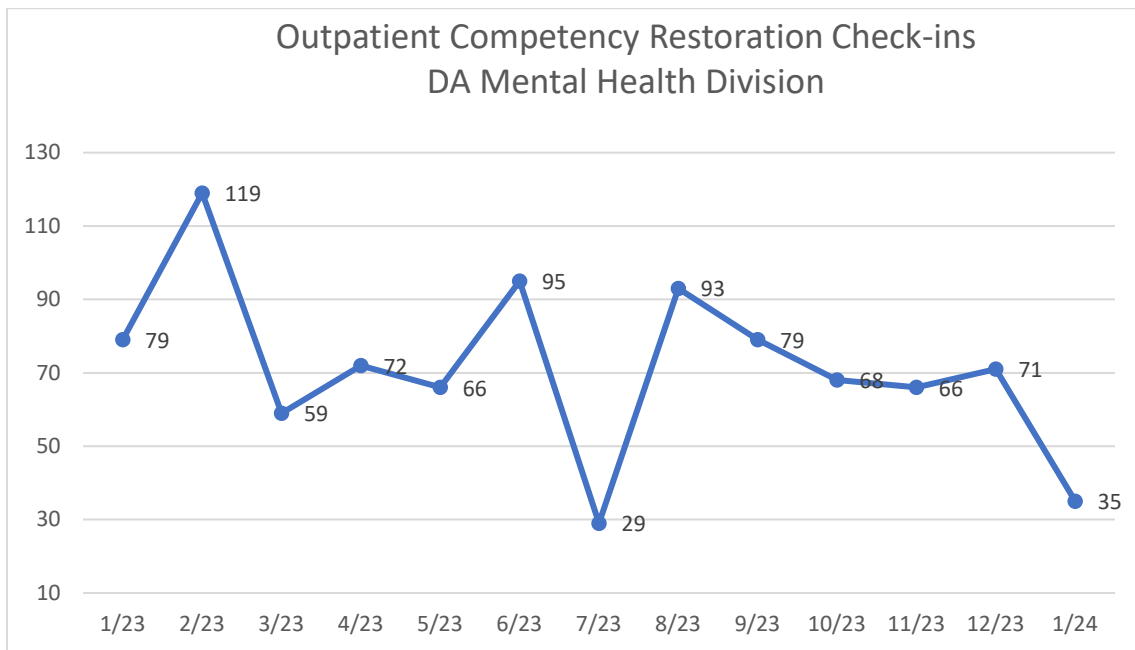
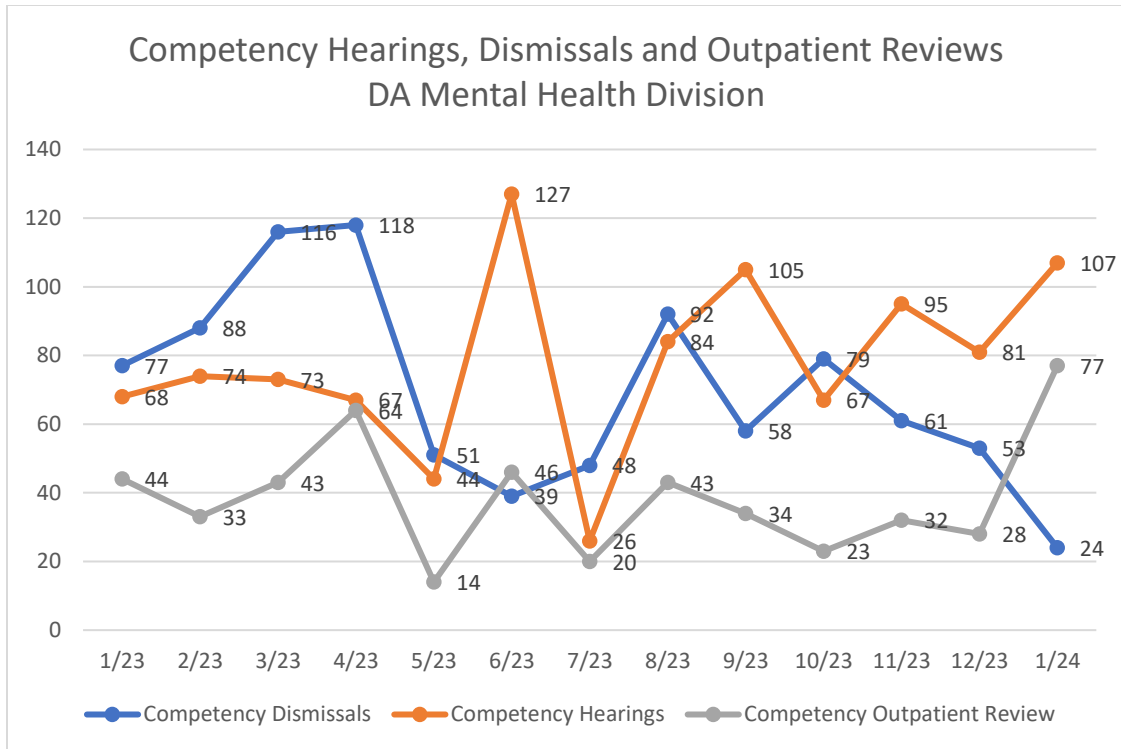
January														MI Court											
MONTH	TOTAL NEW CASES RECEIVED	NEW CLIENTS AT TERRELL	NEW CLIENTS AT MEDICAL CENTER MCKINNEY	NEW CLIENTS AT GLEN OAKS	NEW CLIENTS AT TEXOMA	NEW CLIENTS AT PERIMETER BEHAVIORAL HEALTH CARE	NEW CLIENTS AT PARKLAND	NEW CLIENTS AT CLEMENTS (formerly ZALE LIPSHY)	NEW CLIENTS AT DALLAS PRESBYTERIAN	NEW CLIENTS AT DALLAS BEHAVIORAL HEALTH	NEW CLIENTS AT HICKORY TRAILS	NEW CLIENTS AT VA	NEW CLIENTS AT GREEN OAKS	NEW CLIENTS AT GARLAND BEHAVIORAL RICHARDSON	NEW CLIENTS AT METHODIST	NEW CLIENTS AT WELLBRIDGE	NEW CLIENTS AT THRLINGTON	MRM/ MLLW/ OOD/H AVEN	PROBABLE CAUSE HEARINGS HELD	NO CONTEST COMMIT	CONTESTED COMMIT	FORCED MEDS HEARING IN COURT	MODIFICATION HEARINGS	OUTPATIENT COMMIT	INPATIENT COMMIT
L. Roberts	102	7	8	21	0	0	0	0	0	66	0	0	0	0	0	0	0	0	0	0	7	11	0	0	0
C. Cox	122	0	0	0	0	0	104	4	13	0	0	0	0	0	0	0	0	1	3	1	10	8	0	1	10
K. Nelson	116	0	0	0	0	0	0	0	0	95	21	0	0	0	0	0	0	0	0	0	12	12	0	0	0
R. Black	130	0	0	0	0	0	0	0	0	0	0	0	64	0	33	33	0	0	8	0	7	7	0	0	7

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 HEARING S (# of clients)	Total # of Cases	Total # of Felony Cases	# of Felonies Approved	# of Felonies Denied	Total # of Misd. Cases	# of Misd's Approved	# of Misd's Denied											
January	2243	244	31	15	46	73	45	31	14	28	19	9											

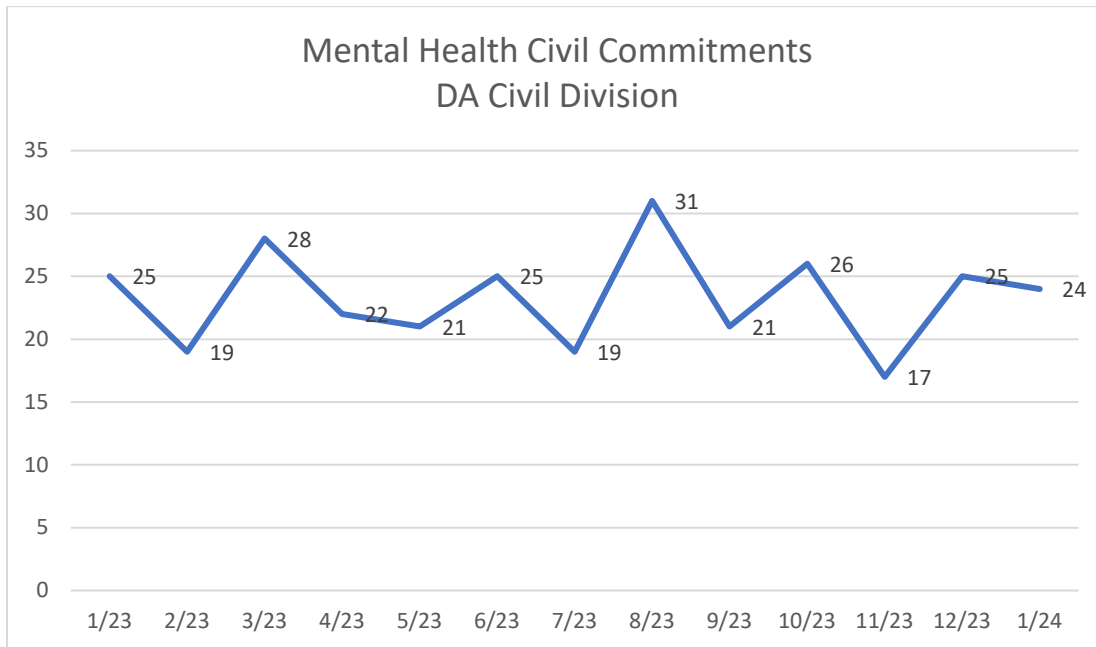
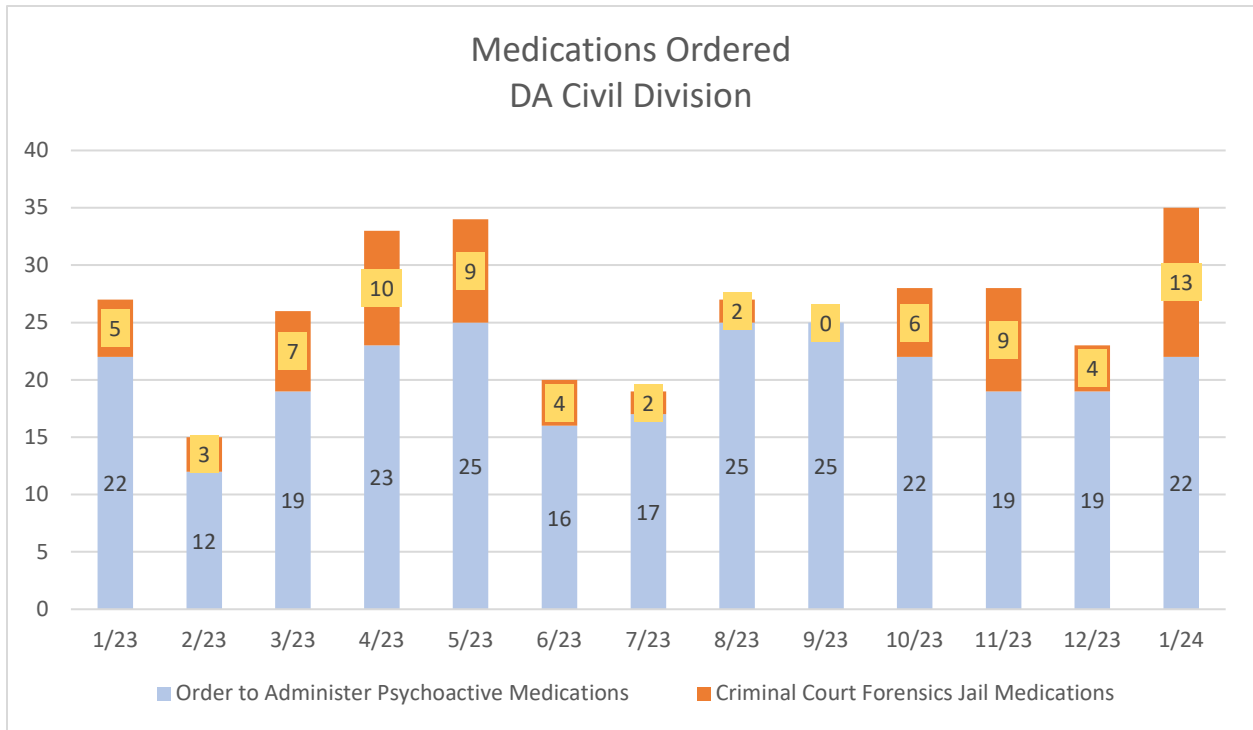
Restorative Justice Division



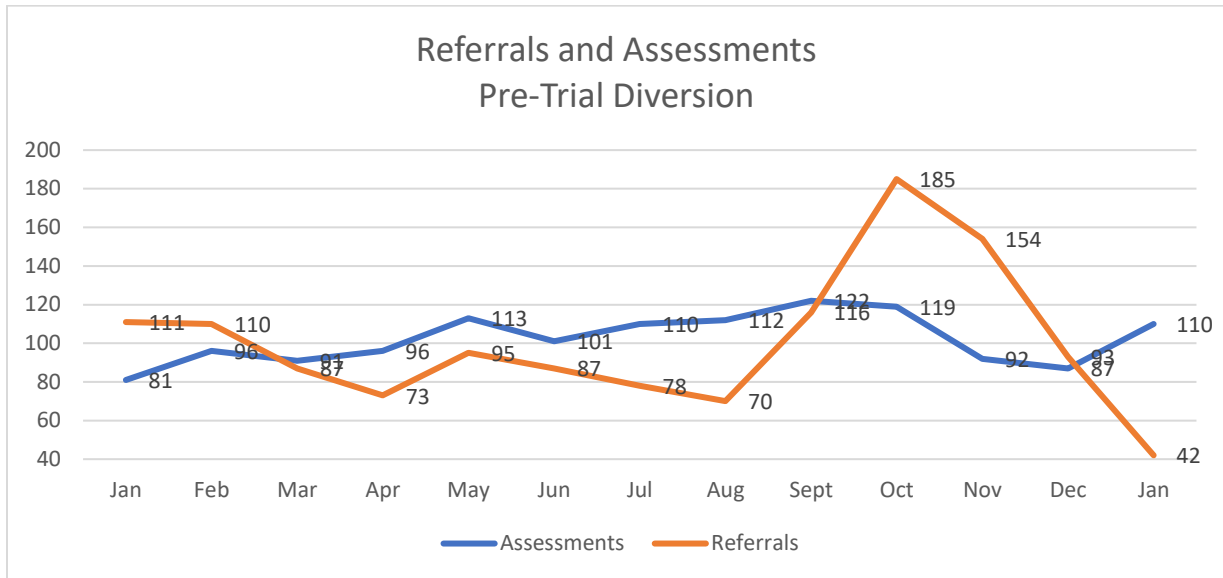
Restorative Justice Division



Restorative Justice Division

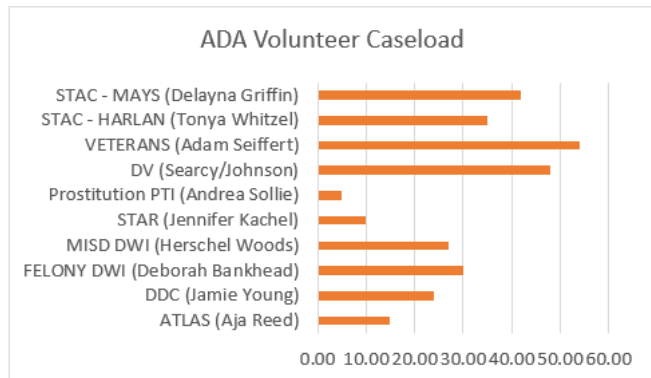
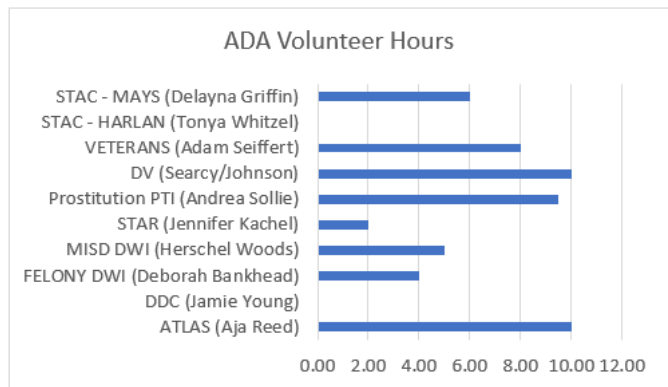


Pre-Trial Diversion



RJD SPECIALTY COURT/PROGRAMS ADA VOLUNTEER HOURS- January 2024

Specialty Court/Program	Hours	Caseload
ATLAS (Aja Reed)	10.00	15.00
DDC (Jamie Young)	0.00	24.00
FELONY DWI (Deborah Bankhead)	4.00	30.00
MISD DWI (Herschel Woods)	5.00	27.00
STAR (Jennifer Kachel)	2.00	10.00
Prostitution PTI (Andrea Sollie)	9.50	5.00
DV (Searcy/Johnson)	10.00	48.00
VETERANS (Adam Seiffert)	8.00	54.00
STAC - HARLAN (Tonya Whitzel)	0.00	35.00
STAC - MAYS (Delayna Griffin)	6.00	42.00



Specialty Court & Programs Monthly Statistics - January 2024



Specialty Court/Program	Pending Intake	Graduate	Failed	Active
DIVERT	39	8	4	116
AIM	58	0	3	65
SET	20	0	0	28
MHJD	6	0	0	10
Veteran's	14	2	0	54
General PTI	194	44	14	281
Prostitution PTI	65	0	0	5
STAR PTI	3	0	0	0

