

Justice-Involved Children and Mental Health System Coordination

Kisha Ledlow, Project Director, Texas System of Care



Why System of Care?





1 in 6 youth ages 6-17 experience a mental health disorder each year



50% of youth ages 6-17 received treatment



50% OF ALL LIFETIME CASES OF MENTAL ILLNESS BEGIN BY AGE 14 AND 75% BY AGE 24

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THE AVERAGE DELAY BETWEEN ONSET OF SYMPTOMS AND INTERVENTION IS 11 YEARS



2nd

SUICIDE IS THE 2ND LEADING CAUSE OF DEATH IN PEOPLE AGED 10-34



90% OF THOSE WHO DIED BY SUICIDE HAD SHOWN SYMPTOMS OF A MENTAL HEALTH CONDITION



Historic/Current Systems Problems

Lack of home and community-based services and supports

Deficitbased/medical models; limited types of interventions Patterns of utilization; racial/ethnic disproportionality and disparities

Poor outcomes

Cost

Rigid financing structures

Administrative inefficiencies; fragmentation

Knowledge, skills, and attitudes of stakeholders

System of Care Approach



- Provides effective, coordinated, communitybased services and supports
- Infuses values into services and supports
 - Family-driven
 - Youth-guided/driven
 - Culturally and linguistically responsive
 - Community-based
- Decreases duplication, increases efficiency, leverages resources, removes barriers, fills gaps, and improves outcomes

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Characteristics of Systems Reform Initiatives



- Blended resources
- Comprehensive service array
- Focus on prevention/early intervention
- Least restrictive settings
- Children/youth within families
- Community-based ownership
- Build



Frontline Practice Shifts

- Partnerships with families/youth
- Partnership between natural and professional supports/services
- One care coordinator
- Single, individualized plan
- Family/youth partnerships
- Strengths focused
- Cultural/linguistic competence



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Impact and Outcomes



Improvements in:

- Lives of children and youth
- Lives of families
- Service delivery systems
- Cost and quality of care



Texas System of Care

SERVICES AND SUPPORTS

Texas communities have a wide array of high-quality, effective, culturally and linguistically competent services and supports.

State and local leaders are knowledgeable and supportive of the SOC framework and promote policies and practices that support the expansion of SOC statewide.

LEADERSHIP

ACCOUNTABLE SYSTEMS

Stakeholders have accessible, reliable, and valid data to make informed decisions, at family, community and state system levels, to improve child and family outcomes. Texas SOC uses data to inform state and local decision-makers.

FINANCING

Texas has maximized public and private funding at the federal, state, and local levels to expand and sustain an effective statewide SOC.

VISION

All Texas children and youth have access to high quality mental health care that is family-driven, youthguided, community-based, culturally-grounded and sustainable.

COMMUNITY CAPACITY

Texas communities increase readiness, enhance the level of implementation, and sustain the SOC framework. thereby increasing the number of children, youth and their families served through SOC practices.

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Memorandum of Understanding



- Purpose: To implement a comprehensive plan to deliver mental health services and supports to children, youth, young adults, and their families using a system of care framework.
- Agencies:
 - Health and Human Services Commission
 - Department of State Health Services
 - Department of Family and Protective Services
 - Texas Education Agency
 - Texas Department of Juvenile Justice
 - ▶ Texas Department of Criminal Justice Texas Correctional Office on Offenders with Medical or Mental Impairment

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Children and Youth Behavioral Health Subcommittee to the Behavioral Health Advisory Committee



- Purpose:
 - Provide interagency oversight for children's mental health initiatives
 - Provide recommendations to BHAC on topics related to best practices
- Membership:
 - ► Health and Human Services Commission- Children's Mental Health, Substance Intervention and Treatment, and Medicaid
 - Department of State Health Services
 - Department of Family and Protective Services
 - Texas Education Agency
 - Texas Department of Juvenile Justice
 - Texas Department of Criminal Justice Texas Correctional Office on Offenders with Medical or Mental Impairment
 - Advocacy organizations
 - Families and youth/young adults
 - Local communities



SYSTEM OF CARE ROAD MAP

All levels of a system of care inform and guide each other.

Systems and Policy

Identifying and strengthening policies and practices to support a strong system of care infrastructure that meets the needs of children, youth and families.

Community

CRCGs infuse system of care values through their processes and inform systems of care about community needs at local and state levels.



Services and Supports

Strengthening coordinated service delivery systems for children and families to ensure they have access to effective and appropriate community-based services and supports.

Children, Youth and Family

Voices of lived experience inform and drive all processes, services and systems.

The system of care values are incorporated into each level.

Community Resource Coordination Groups



Community Resource Coordination Groups (CRCG)

- County-based interagency groups supported by a memorandum of understanding
- Located in 247 counties
- Connect people to services and supports
- Bring together community partners and stakeholders to share resources, connect programs, and identify community needs
- Inform local and state level systems about gaps and barriers

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Common CRCG Membership

- Local mental/behavioral health authority
- Local intellectual and developmental disability authority
- Local government service providers
- Housing authority
- Aging and disability resource center
- Area agency on aging
- Peer and family representatives
- Judges and judicial support offices
- Probation and parole officers

- Counseling and other behavioral health providers
- Healthcare providers
- Faith-based organizations
- Community-serving organizations
- Private sector stakeholders, such as managed care organizations
- Child and adult protection representatives
- School districts and education service centers

CRCG Eligibility





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CRCG Referrals



Individuals or families can be referred to a CRCG by:

- A CRCG member
- Local agency or community organization
- A family or peer representative
- Self

Find your local CRCG:

https://crcg.hhs.texas.gov/

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Thank you

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CRCG: crcq@hhsc.state.tx.us

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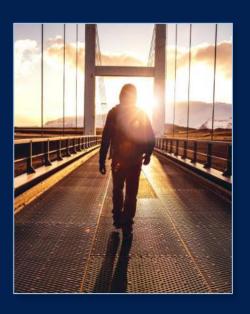
Justice-Involved Children and Mental Health System Coordination

Children's Mental Health Unit Behavioral Health Services Health and Human Services Commission

Objectives

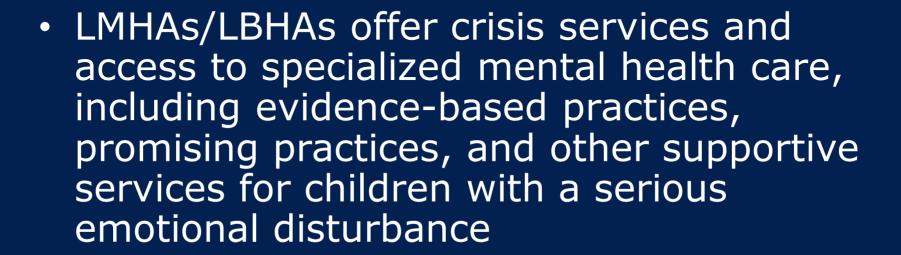


- Learn about local mental and behavioral health authorities (LMHAs/LBHAs)
- Discuss best practices to support justiceinvolved children
- Share resources



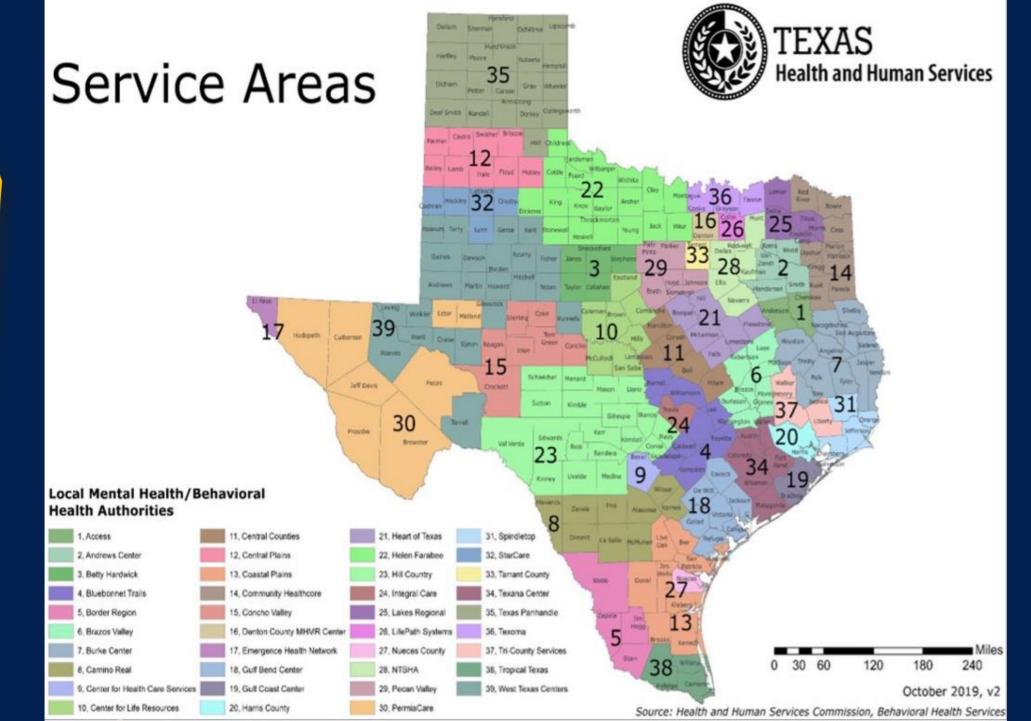
Bridging the Gap with Justice Involved Children





• 37 LMHAs and 2 LBHAs in Texas





TEXAS
Health and Human
Services

Texas Resiliency and Recovery Model

- In Texas, the service delivery system for community-based mental health services is the Texas Resiliency and Recovery (TRR) model.
- The TRR model establishes eligibility for receiving mental health services, determines a recommended level of care (LOC), and provides guidance about level of care authorization.



Levels of Care: Children





LOC-5: Transitional Services

Note: People can transition from LOC-5 into any other LOC.

* Other Specialized Levels of Care: LOC-Young Child, LOC -Early Onset, LOC - Residential Treatment Center, LOC-Transition Age Youth, LOC - Youth Empowerment Services

Residential Treatment Center Project

- The Residential Treatment Center (RTC) Project provides children with intensive mental health care in an RTC setting while the guardian keeps legal responsibility for their child.
 - ▶ In fiscal year 2020, the program received 143 unique referrals.

31% received services in a Residential Treatment Center

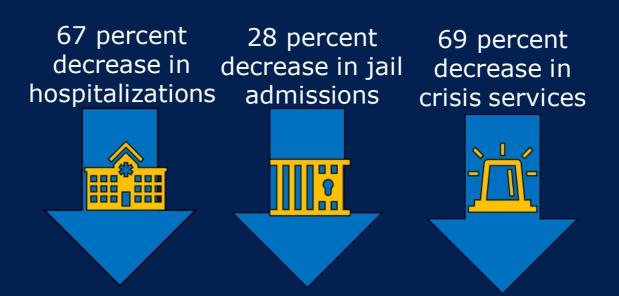
32% successfully diverted to community mental health services



Coordinated Specialty Care

- A specialized treatment approach for persons, aged 15-30, experiencing their first episode of psychosis
- Available at 24 of 39 LMHAs/LBHAs
- 978 persons served in fiscal year 2020, exceeding the goal of 720





Inpatient Care Waitlist

- Used when a LMHA/LBHA determines a child requires inpatient services, but no other inpatient treatment is available in the local service area.
- Intended to secure admission for a child experiencing severe behavioral health crises and for whom an inpatient setting is clinically necessary.



Best Practices to Support Justice-Involved Children



- Facilitate monthly meetings with Texas Juvenile Justice Department and Texas Department of Criminal Justice
- Connect with LMHA/LBHA and local intellectual and developmental disability authority (LIDDA) resources
- Prioritize immediate technical assistance to LMHAs/LBHAs to be responsive and in pace of the juvenile court system
- Coordinate and convene case consultations as requested by state and local agencies

HHSC's Partners

- LMHAs/LBHAs and LIDDAs
- Texas Department of Criminal Justice
 - ► Texas Correctional Office on Offenders with Medical or Mental Impairments
- Texas Juvenile Justice Department
 - County probation
 - Crisis Stabilization Unit
 - ▶ Texas Juvenile Justice Department Parole
- Department of Family and Protective Services
 - Child Protective Services
 - Adult Protective Services



Cross Agency Consultations

Collaboration and accountability is essential when ensuring proper continuity of care and access to services for children who are justice-involved.

- Person-centered philosophy
- Strengths-based
- Trauma-informed
- Least restrictive





Looking Forward

How can we improve coordination for justice-involved children moving forward?

- Data collection
 - Behavioral Health Services Online Jail Match Report enhancement project
 - Successful diversion
 - Successful links to community resources and services
- Regional Collaboration
 - Increase agency collaboration at the local level
- System Navigator
 - Pilot program: LMHA/LBHA staff position to enhance coordination across the local child-serving system





Thank you

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Additional Resources



- Mental Health Texas https://mentalhealthtx.org/
- TRR Utilization Management Guidelines- 2016 Version: Children and Adolescents https://www.hhs.texas.gov/doing-business-hhs/provider-portals/behavioral-health-provider-portals/behavioral-health-provider-resources/utilization-management-quidelines-manual
- Family Guide (HHSC website): <u>https://www.hhs.texas.gov/services/mental-health-substance-use/childrens-mental-health</u>
- YES Waiver Services: <u>https://www.hhs.texas.gov/services/mental-health-substance-use/childrens-mental-health/yes-waiver</u>
- Coordinated Specialty Care First Episode Psychosis <u>https://www.hhs.texas.gov/doing-business-hhs/provider-portals/behavioral-health-services-providers/coordinated-specialty-care-first-episode-psychosis</u>
- Residential Treatment Project https://www.hhs.texas.gov/services/mental-health-substance-use/childrensmental-health/childrens-mental-health-residential-treatment-centerrelinquishment-avoidance-project



State Hospitals and Youth Services

Rachel Samsel, MSSW

Deputy Association Commissioner – Strategic Initiatives & Policy for State Hospitals

State Hospital System Overview



- The Health and Human Services Commission operates 10 facilities that make up the state hospital system.
- 9 psychiatric hospitals
- 1 youth residential treatment facility
- 1 outpatient primary care clinic



State Hospitals

Inpatient Psychiatric Services for children (4-12) and adolescents (13-17)

4 locations providing inpatient psychiatric services for children/adolescents

- Austin State Hospital
- North Texas State Hospital- Vernon South (only 13-17)
- North Texas State Hospital- Wichita Falls
- Terrell State Hospital
- 1 Residential Treatment Center
 - Waco Center for Youth (only 13-17)



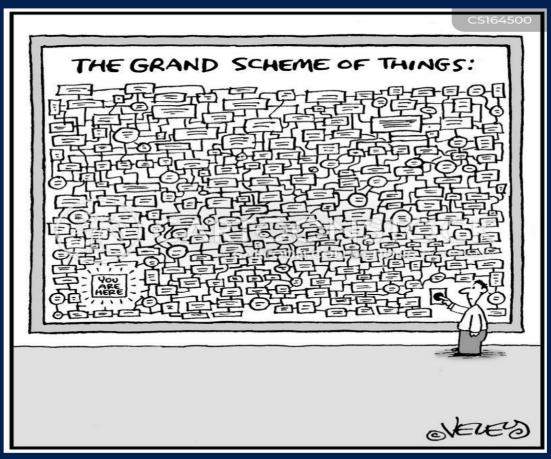


In a perfect world, the process for accessing mental health services would be this easy...





But we know that this is a common perception of that process



General Admission Criteria – Children and Adolescents

Voluntary or Involuntary (Civil) Mental Health Commitment

- Texas Health & Safety Code Ch. 572, 573, and 574
- Diagnosed with a mental illness; and
- Determined a danger to self and/or others, or at risk of deterioration

Types of Involuntary Civil Mental Health Admissions

- Emergency Detention (ED)
- Order of Protective Custody (OPC)
- Temporary commitment
- Extended commitment (not common for child/adolescent)



General Admission Criteria – Children and Adolescents

Forensic Commitment

- Texas Family Code §§ 55.31 55.52
 - Found unfit to proceed as a result of mental illness or intellectual disability
 - Found to have a lack of responsibility for conduct as a result of mental illness or intellectual disability
- HB 2107, 87th Legislature, Regular Session
 - expanded outpatient fitness to proceed restoration opportunities to children with IDD;
 - Currently no outpatient competency restoration opportunities for children with mental illness or IDD.



Adolescent Forensic Program (AFP) Admission Criteria

NTSH-Vernon Campus/AFP Unit

- Serves ages 13 up to 18
- Committed under Texas Family Code (Ch. 55); or
- Determined manifestly dangerous (25 TAC 415G); or
- Condition of probation or parole and:
 - determined in need of specialized MH treatment in a secure setting to address violent or delinquent behavior;
 - has co-occurring psychiatric and substance use disorder, and
 - has exhausted available community resources and is recommended by local Community Resource Coordinating Group (CRCG);
- Excludes adolescents diagnosed with intellectual or developmental disorders (IDD)



Waco Center for Youth Admission Criteria

Psychiatric Residential Treatment Center

- Serves ages 13-17
- Diagnosed as emotionally or behaviorally disturbed;
- History of behavior adjustment problems;
- Requires a structured treatment program; and
 - Currently receives LA or inpatient services in a state hospital, and has been referred by:
 - LA, after CRCG endorsement (if possible); or
 - State hospital
- Excludes adolescents diagnosed with IDD and those who are acutely psychotic, suicidal, homicidal, or seriously violent



State Hospital Admission from TJJD

Youth sentenced to TJJD may need inpatient hospitalization

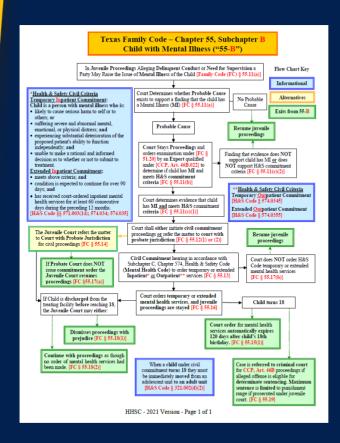
- Admission process is dependent on type of sentence
 - Indeterminant Sentence
 - LMHA conducts crisis assessment, determines need for state hospitalization
 - Resulting commitment is an ED/OPC
 - Determinant Sentence
 - Human Resources Code 244.0125
 - Mental health commitment proceedings are initiated under Texas Family Code Ch. 55 by the juvenile court.
 - Initiates a temporary MH commitment (HSC §574) which requires 2 certificates of medical examination

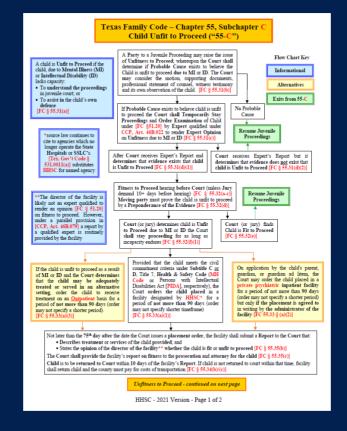


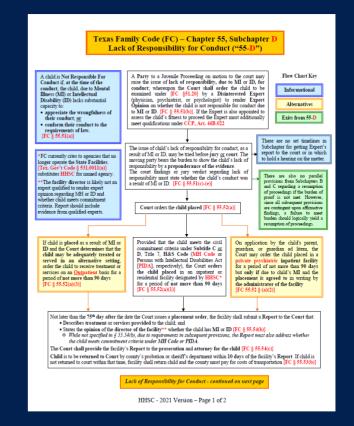
Chapter 55 Mapping Project



Flowcharts have been completed for Ch. 55, Texas Family Code, Subchapters B, C and D







Admission Collaboration and Coordination

Complex child and adolescent admissions involve a number of key players

- State Hospital Continuity of Services & Capacity Management Team
- HHSC Children's Mental Health Team
- Department of Family and Protective Services
- Texas Juvenile Justice Department
- Local Authorities (LMHA/LBHA/LIDDA)
- State Hospital Representatives
- Local courts, probation, education agencies, law enforcement
- Relatives, guardians and other supports







I can do things you cannot; You can do things I cannot; Together we can do great things.

~ Mother Teresa



Thank You

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